

Community Guide on Data for Action for Key, Vulnerable and Underserved Populations



Regional Platform
for Communication and Coordination
on HIV/AIDS, Tuberculosis and Malaria
For Anglophone Africa

WHY DATA FOR ACTION?

Quality data is fundamental to health systems and their programmes across board for HIV, TB, malaria, reproductive health and all areas of care that ensure public health. The use of data helps health programmes target services to areas and populations with the highest need, thus making the most of scarce resources¹. Accurate data is therefore a key element that governments, development partners and civil society service providers require to guide their decisions in planning for and programming for diverse populations.

¹ Measure Evaluation ; Data Demand and Use <https://www.measureevaluation.org/our-work/data-demand-and-use>



WHO ARE THE KEY,

VULNERABLE AND

UNDERSERVED

POPULATIONS?

Within populations, there may be sub groups that are hidden for one reason or the other, and may not be reached by government health services. Compared to many others, these sub groups may be more prone to certain diseases and also have limited access to health services due to legal, human rights, gender, social stigma and economic barriers to mention a few.

These sub groups are often referred to as Key, Vulnerable and Underserved populations.

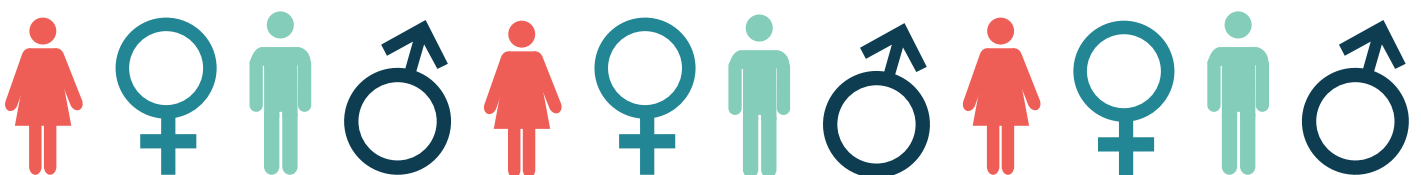
Key populations are commonly defined as groups that are:

- Significantly and negatively impacted by certain diseases
- Have less access to services compared to others
- Belong to populations that are criminalised or marginalised

Within the context of each of the 3 diseases (HIV, Tuberculosis and Malaria) which the Global Fund focuses on primarily; the key populations differ. For instance, based on the Global Fund's Key Population's Action Plan (2014 -2017)² ; key populations identified for each of the 3 diseases are classified below:

² A Community Guide to the Global Fund's Key Populations Action Plan 2014-2017

	HIV	TUBERCULOSIS	MALARIA
KEY POPULATIONS	<ul style="list-style-type: none"> • Gay, bisexual and other men who have sex with men • Anyone who injects drugs • Sex workers • Transgender people 	<ul style="list-style-type: none"> • Prisoners • People living with HIV Migrants • Refugees • Indigenous populations 	<ul style="list-style-type: none"> • Migrants • Refugees • Internally displaced people • Indigenous populations in malaria-endemic areas



WHY DATA FOR ACTION FOR KEY, VULNERABLE AND UNDERSERVED POPULATIONS?

In order to meet the SDG goal of eliminating HIV, TB and Malaria by 2030, and ensure that services are accessible to all (inclusive of key populations), new approaches are required. This means that the involvement of key populations must be central to the HIV, tuberculosis and malaria response. In addition, because the current data about these key populations are limited, efforts must be made to fill these data gaps, so that responses targeting key populations for the 3 diseases are driven by data and informed by evidence.

An example of a tool that seeks to address the key population data gaps is the Key Populations Atlas which is an online Visualisation tool that allows users to navigate country specific subnational data on populations particularly vulnerable to HIV. It also provides a range of information about members of key populations worldwide –sex workers, men who have sex with men, people who inject drugs, transgender people and prisoners and includes new data on people living with HIV³

3 Improving data on Key Populations https://www.unaids.org/en/resources/presscentre/featurestories/2018/march/20180314_atlas

WHAT CAN COMMUNITY GROUPS AND RELEVANT STAKEHOLDERS DO TO SUPPORT DATA FOR ACTION, IMPROVE PROGRAMME IMPLEMENTATION FOR THE 3 DISEASES AND ENSURE ACCESS TO SERVICES FOR KEY POPULATIONS?⁴

⁴ Data for Action for Tuberculosis, Key Vulnerable and Underserved Populations – Working Document, September 2017

1. Forge strong coalitions and working relationships with communities from key populations for the 3 diseases such as community based organisations (CBOs) and non-governmental organizations (NGOs)
2. Commit to supporting participatory research and implementing evidence driven programmes as well as put in place systems to collect data during implementation for continuous programme improvement. In participatory research, the population(s) who are the focus of a study both guide and take part in the research process. This approach acknowledges the expertise and experiences of communities of interest and builds their capacity to conduct and translate research that supports their advocacy and programming efforts.
3. Design programmes that are sensitive to the fact that key populations are often socially disadvantaged and their human rights frequently violated. Thus the design and delivery of services must respect and address the rights of these key populations and ensure the same level and quality of services as that for the general population
4. Recognise that Key populations for the 3 diseases vary by country, thus programmes or services targeting key populations must engage multiple stakeholders while being human-rights-based, gender-responsive, and inclusive. The engagement of multiple stakeholders is critical to removing barriers that key populations often face in accessing services.

CONCLUSION

The involvement of key populations must be central to HIV, tuberculosis and malaria response. Gathering data on the people who are the most affected by the 3 diseases is vital to getting the right services available at the right locations to key, vulnerable and underserved populations. Equally important is the documentation of the human rights, gender, and economic barriers often encountered by key populations, as this information is essential to inform advocacy and the desired changes at the policy levels.



USEFUL RESOURCE DOCUMENTS AND LINKS

1. Data for Action for Tuberculosis, Key, Vulnerable and Underserved Populations <http://www.stoptb.org/assets/documents/communities/Data%20for%20Action%20for%20Tuberculosis%20Key,%20Vulnerable%20and%20Underserved%20Populations%20Sept%202017.pdf>
2. Research for Action – Understanding Gender Based Violence Experiences and Response to Improve Programming <https://www.clac.cab/portfolio-item/research-action-understanding-gender-based-violence-experiences-and-response-improve>
3. Monitoring Guide and Toolkit for Key Population HIV Prevention, Treatment and Care Programmes <https://www.fhi360.org/sites/default/files/media/documents/resource-linkages-monitoring-tools.pdf>
4. Prevention and treatment of HIV and other sexually transmitted infections for sex workers in low and middle income countries https://www.who.int/hiv/pub/guidelines/sex_worker/en/
5. Key Population Targeted approaches towards an AIDS Free Generation <https://www.usaid.gov/what-we-do/global-health/hiv-and-aids/technical-areas/key-populations>

CONTACT THE REGIONAL PLATFORM

Regional Platform for Communication and Coordination for Anglophone Africa

Hosted by EANNASO

Arusha, Tanzania

Tel: Tel: +255 739 210598

Email: eannaso@eannaso.org | Website: www.eannaso.org

Facebook: www.facebook.com/eannaso.org | Twitter: [@eannaso](https://twitter.com/eannaso)