

# Enhancing Community Engagement in Differentiated Service Delivery Programs: Insights from Rwanda

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## INTRODUCTION

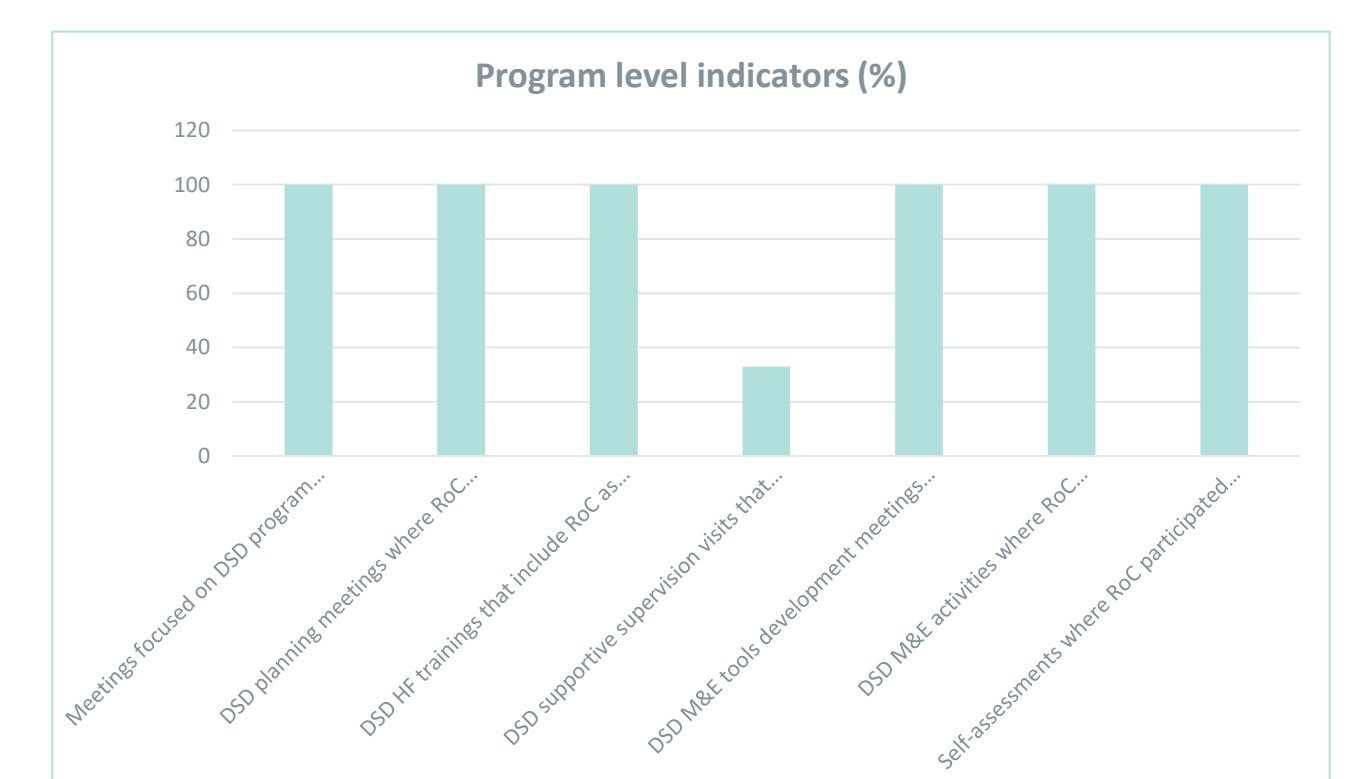
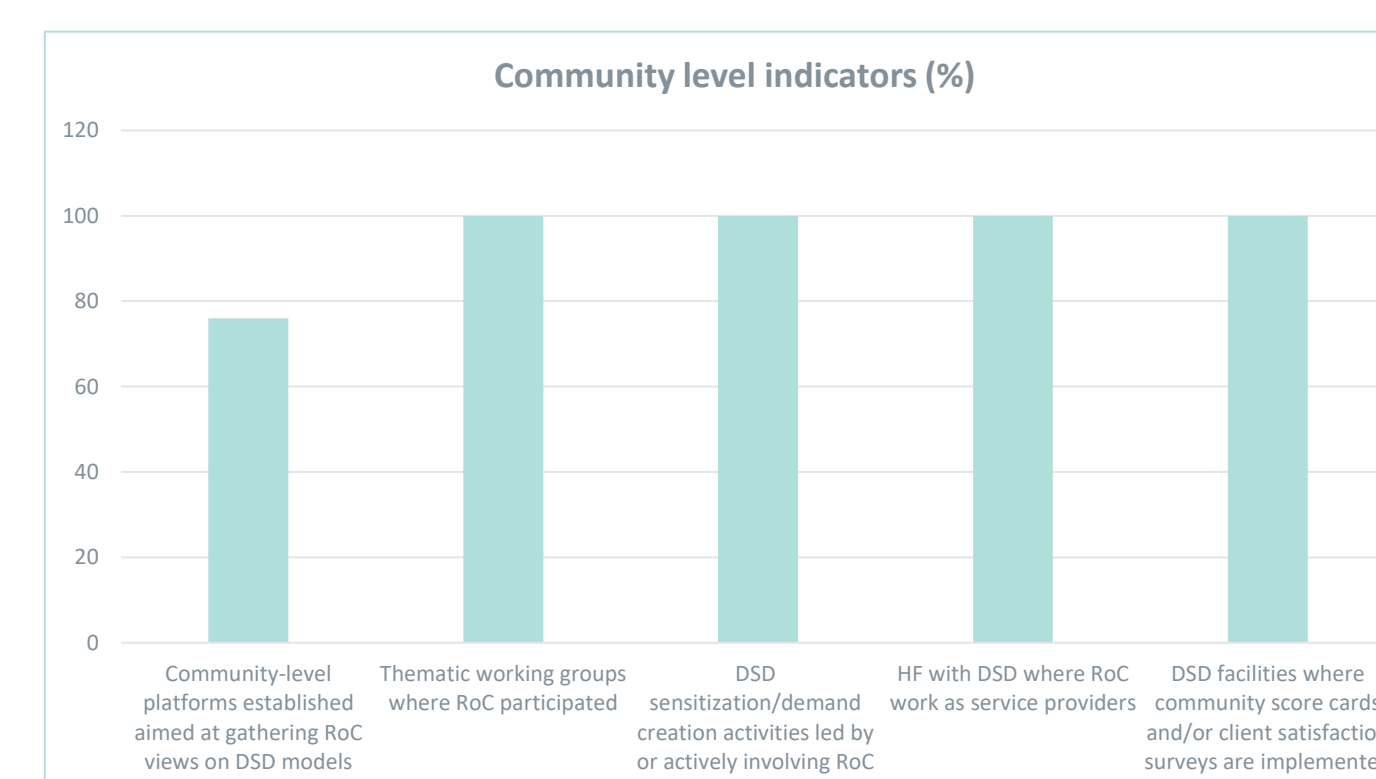
This abstract addresses the importance of community engagement (CE) in the success of Differentiated Service Delivery (DSD) programs for HIV control. We present the findings from the field rollout of the CE Tool between July 2021-2022, highlighting lessons learned and providing recommendations for improving CE in DSD programs in Rwanda.

## DESCRIPTION

Recognizing the significance of CE in the success of DSD initiatives, the Rwanda Network of People Living with HIV/AIDS (RRP+) partnered with the HIV Coverage, Quality, and Impact Network (CQUIN) and the International Treatment Preparedness Coalition (ITPC) to develop a CE framework and monitoring tool. The study employed a comprehensive methodology to collect and analyze data at the policy, program, and community levels in the Design, Implementation, and Monitoring and Evaluation processes. Data was collected from various stakeholders involved in the HIV response, including RRP+, its constituencies, the Ministry of Health, and the Rwanda Biomedical Center.

## LESSONS LEARNED

The data collection process revealed that while CE was strong at the policy and program levels (100%), there was inadequate financial support, impeding the active participation of representatives of People Living with HIV (PLHIV) in district and sector-level activities (33%). Additionally, coordination meetings with stakeholders were minimum impeding feedback provision and discussions for enhancing DSD interventions (33%). Furthermore, the survey identified gaps in the production of communication materials, related to the establishment of community-level platforms for gathering recipients of care (RoC) views, and the organization of pieces of training for peer educators. Challenges were identified in accessing meeting reports and the importance of improving the filing system for better follow-up.



## RECOMMENDATIONS

To enhance the effectiveness of the CE and subsequent DSD programs, the following recommendations are put forth: 1) Update the tool with qualitative information to provide a more comprehensive understanding of CE dynamics; 2) Strengthen coordination and financial support to ensure increased participation of PLHIV representatives at district and sector levels; 3) Facilitate the establishment of community-level platforms to gather RoC views on DSD models, ensuring inclusivity and representativeness; and 4) Expand the training for peer educators. Moving forward, RRP+ is conducting consultative meetings with MoH, RBC, and other partners to address the revealed gaps.