

DAY 1 HIGHLIGHTS

"We are different patients, different clients, with different needs. Everybody at their level should be accessing treatment the way they want it to be!"

Tanzanian activist Joan Chamungu (center left) driving home the importance of **differentiated service delivery** at the launch of *What Works for Me: Activist Toolkit on Differentiated Service Delivery*, hosted by ITPC, ARASA and IAS. The toolkit is now available in English and French: bit.ly/2nvlMAW



"We stand in front of the region's ministries of health, in front of the President of Côte d'Ivoire."

Activists stand up for West and Central Africa where communities of people living with HIV are being left behind by funding cuts and donor fatigue. The silent protest took place during the opening ceremony of the conference, where President Ouattara of Côte d'Ivoire and the First Lady were in attendance.

"The \$75 pricing agreement announced late September omits 29 countries who could benefit from this deal. Today, we have a clear message to CHAI and UNITAID: FIX THE DEAL!"

ITPC MENA and allies call on CHAI, UNITAID Gates Foundation, and others to increase access to dolutegravir (DTG) during satellite session hosted by WHO. The group also shamed ViiV Healthcare for continuously excluding Algeria from its DTG voluntary license despite more than two years of push from communities. Find out more at bit.ly/2AMry6F



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DAY 2 HIGHLIGHTS



"Algeria is Africa, Africa is Algeria. There is no reason to differentiate us! We want access to DTG for all!"

Led by ITPC MENA and the Regional Community Treatment Observatory in West Africa, activists speak out against ViiV Healthcare, whose voluntary license for dolutegravir (DTG) includes all countries in Africa except Algeria. ITPC MENA has been discussing this issue with the pharmaceutical company for more than two years without success. ViiV was conveniently absent from the exhibition center this year. The group also invited the government of Algeria to issue a compulsory license that would accelerate access to the drug.

Activists also put out a joint statement to the ICASA conference organizers in response to the forceful suppression of the protest by hotel and conference security (seen above). Communities will always be the voice at the center of the response, and they must be heard.

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DAY 3 HIGHLIGHTS



"People can't ask for what they don't know exists. That's why the first step is to make sure people know what DSD is, what the options are, & how it can make their treatment work for them."

ITPC Director of Programs & Advocacy Wame Mosime (left) discussing differentiated service delivery at a satellite session hosted by WHO where she highlighted *What Works for Me: Activist Toolkit on Differentiated Service Delivery* now available in English and French: bit.ly/2nvlMAW

"It's important to have these talks across the region. We rarely get to connect and exchange experiences like this."

Participants gather at the Treatment Networking Zone (right) hosted by the Regional Community Treatment Observatory in West Africa (RCTO-WA) for a community dialogue. The zone hosts two sessions each day, covering a range of treatment access issues - including intellectual property and access to medicines, and community monitoring. To learn more, visit www.WatchWhatMatters.org



"At a conference dedicated to highlighting the region's epidemic and the unique responses to it, community voices MUST BE HEARD!"

On 5 Dec, activists at ICASA were prevented from peacefully protesting (left). In response, more than 20 civil society organizations and activist groups issued a joint statement calling on the conference organizers to guarantee community voices are heard - now and in all future conferences. Read the full statement at bit.ly/2k2pnS3



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DAY 4 HIGHLIGHTS



"The Regional Community Treatment Observatory in West Africa (RCTO-WA) is an asset for communities. It routinely collects data on treatment access gaps and provides the evidence we need to advocate for change."

Participants gather at the Treatment Networking Zone to discuss community monitoring and how it empowers evidence-based advocacy. ITPC West Africa Regional Coordinator Raoul Boka Marius (top) facilitated the morning session. **Alain Manouan and Omar Ben Khatab Gueye from the RCTO-WA team joined UNICEF public radio to introduce the RCTO-WA to listeners (middle right)** who were interested to hear that youth are one of the five specific populations that the project is collecting HIV prevention, care and treatment data on. **Participants at the Treatment Networking Zone also enjoyed a lively afternoon session on health financing.** The discussion's facilitators (bottom right) highlighted the need for community advocacy in national budget and health coverage related issues.



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DAY 5 HIGHLIGHTS

"Community treatment observatories are a dynamic dialogue. They help identify what is working well and what isn't."

Director of the Regional Community Treatment Observatory in West Africa (RCTO-WA) Alain Manouan (right) discussing the role community monitoring plays in increasing access to treatment during a special plenary session. The RCTO-WA is working in 11 West African countries to systematically collect data and identify barriers to HIV services. Learn more at www.WatchWhatMatters.org



"Without the political will this is not going to happen. The 2001 Abuja Declaration needs to be actioned."

Linda Mafu of the Global Fund calling governments to action during ITPC and the Global Fund's joint satellite session on domestic financing (left). The session's panelist also included representatives from AFRICASO and the Africa Constituency Bureau for the Global Fund.

"The Regional Community Treatment Observatory in West Africa puts people living with HIV at the center of its model. That's why it works."

Mr. Manouan shares his thoughts about the importance of community monitoring initiatives during an interview with local TV channel RTI (right). Monitoring of health systems by communities increases government accountability and informs targeted advocacy actions that can improve HIV treatment, particularly for key populations.



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