

# PITCH

## End Term Evaluation Report



## Acknowledgements

We would like to acknowledge the contribution made by Aidsfonds and Frontline AIDS staff to this evaluation's data contextualisation and interpretation process. By creating space for discussion and reflection throughout the evaluation process, this has allowed the ResultsinHealth evaluation team to further enrich its analysis and interpretation of the data collected as part of this evaluation. We would like to acknowledge the work of external editor Ann Noon, as well as design agency HD Design for their work in preparing for the publication of this report.

World Map by Vemaps.com

Cover photo: "Regard me as a human being, not just a sex worker." Myanmar © Pan Nu/Frontline AIDS/PhotoVoice/2018

Back cover photo: Partners participate in a learning event in Vietnam, 2019

## Message from Aidsfonds and Frontline AIDS

We are grateful to the Netherlands Ministry of Foreign Affairs for the opportunity presented to us to invest in community advocacy at the scale that we have seen since 2016. We believe that this report of the PITCH End Term Evaluation presents a useful and informative assessment of what the PITCH partnership has been able to achieve since its inception in 2016, and we are proud to present this report to the Ministry.

### Christine Stegling

Frontline AIDS Executive Director

### Mark Vermeulen

Aidsfonds Executive Director

# About the PITCH Programme

PITCH is a strategic partnership between Aidsfonds, Frontline AIDS, and the Dutch Ministry of Foreign Affairs (MoFA). It is part of the Dutch MoFA's Dialogue and Dissent: Strategic Partnerships for Lobbying and Advocacy policy framework. This report is the result of an external evaluation of the PITCH programme conducted in 2020 by ResultsinHealth.

# About ResultsinHealth

ResultsinHealth is an international public health advisory agency. We are a trusted advisor to governments and leading healthcare developmental agencies around the world.

We stand for innovation, professionalism and impact.

Our approach is pragmatic with a focus on results. We assess challenges from all angles – best practice, accountability and transparency are at the heart of what we do.



We offer clients and advisory firms the technical insight, analysis and capacity building needed to bring about improvements in health and development.



.....  
**ResultsinHealth |**  
**Zijlbaan 46, 2352 BN Leiderdorp |**  
**The Netherlands**  
**T. +31 (0)71 760 1200**  
**office@resultsinhealth.org**  
**www.resultsinhealth.org**  
.....



# Contents

---

<b>Table of contents</b>	<b>i</b>
<b>The evaluation team</b>	<b>iii</b>
<b>List of tables and figures</b>	<b>iv</b>
<b>List of annexes</b>	<b>v</b>
<b>List of abbreviations</b>	<b>vi</b>
<b>Executive summary</b>	<b>2</b>
<b>1 Introduction</b>	<b>8</b>
1.1 PITCH programme	8
1.2 Purpose and scope of evaluation	9
1.3 Objectives and evaluation questions	9
1.4 Target audience, users and uses	11
<b>2 The evaluation methodology</b>	<b>12</b>
2.1 Evaluation framework	12
2.2 Data collection methodology	14
2.3 Selection of countries	15
2.4 Participants and key informants	16
2.5 Data management and analysis	16
2.6 Story of change	16
2.7 Quality assurance	16
2.8 Ethics, safety and security	18
2.9 Limitations and constraints	18
<b>3 Findings</b>	<b>20</b>
3.1 <b>Objective 1 - To assess the outcomes and impact of PITCH, as well as their sustainability, in the context of the programme's theory of change</b>	<b>20</b>
3.1.1 <b>EQ1.1</b> To which significant advocacy outcomes has PITCH made a measurable contribution? To what extent does evidence exist to support these claims?	21
3.1.2 <b>EQ1.2</b> How has PITCH contributed to any positive or negative unexpected outcomes? What lessons have been learned, and how have these unexpected outcomes influenced partners' advocacy planning?	27
3.1.3 <b>EQ1.4</b> Reflecting on structural and legislative changes, how sustainable are the achievements of PITCH beyond the programme's lifetime, and in the absence of significant external funding?	30

<b>3.1.4 EQ1.3 and EQ1.5</b>	What are the most effective strategies partners have used in order to achieve their advocacy asks, and if/how these strategies are connected to capacity strengthening activities of PITCH?	35
<b>3.1.5 EQ1.6</b>	To what extent has the capacity of PITCH partners to apply a gender-sensitive or transformative approach to their work been strengthened? How has this been achieved? What impact has this had on the outcome of PITCH country level advocacy activities?	44
<b>3.1.6 EQ1.7</b>	What lessons can be learned about how gender informs advocacy carried out by and for key populations and adolescent girls and young women?	49
<b>3.1.7 EQ1.8</b>	From the perspective of different PITCH stakeholders, including implementing partners, which programmatic strategies and approaches have partly or entirely failed? What lessons can we learn from this?	50
<b>3.2</b>	<b>Objective 2 - To understand the extent to which internal and external PITCH stakeholders have benefited from collaborating with each other</b>	<b>57</b>
<b>3.2.1 EQ2.1</b>	To what extent have country partners and global policy partners benefited from/connected with each other's advocacy activities?	57
<b>3.2.2 EQ2.2</b>	To what extent have country partners and regional programme partners benefited from/connected with each other's advocacy activities?	60
<b>3.2.3 EQ2.3</b>	To what extent have regional programme and global policy partners benefited from/connected with each other's advocacy activities?	62
<b>3.2.4 EQ2.4</b>	To what extent have PITCH partners formed or joined coalitions with other civil society organisations that have helped to advance their advocacy, raise the profile of the experiences of key populations and adolescent girls and young women, and set the advocacy agenda?	63
<b>3.2.5 EQ2.5</b>	To what extent can examples of effective collaboration at the country level be demonstrated between PITCH and other Ministry of Foreign Affairs-funded programmes working to address HIV and AIDS?	66
<b>3.2.6 EQ2.6</b>	To what extent have working relationships between PITCH and the Dutch embassies and permanent missions in the PITCH countries contributed to advocacy outcomes through strategic collaboration?	68
<b>4</b>	<b>Conclusion</b>	<b>70</b>
<b>5</b>	<b>Recommendations</b>	<b>78</b>



# The evaluation team

---

## Global consultants

- **Aryanti Radyowijati**  
Team leader and HIV evaluation specialist
- **Conny Hoitink**  
Outcome harvesting specialist
- **Zaïre van Arkel**  
Advocacy on sexual and reproductive health and rights and gender specialist
- **Maurizia Mezza**  
Junior consultant
- **Lingga Tri Utama**  
Data analysis

## National consultants

- **Indonesia:**  
Gita Meidita
- **Kenya:**  
Awuor Ponge
- **Mozambique:**  
Marianne Brittijn and Jacinta Tiago
- **Myanmar:**  
Frederike Engeland
- **Nigeria:**  
Olawutoyin Oyekenu
- **Uganda:**  
Patrick Sando
- **Ukraine and eastern Europe and central Asia:**  
Mariia Samko
- **Vietnam:**  
Nguyen Thi Nhat Hoai
- **Zimbabwe and Southern Africa:**  
Catherine Mashayamombe

# List of tables and figures

---

<b>Table 1</b>	Evaluation objectives and questions	10
<b>Table 2</b>	Bond principles in PITCH end-term evaluation	14
<b>Table 3</b>	Overview of stories of change per country and key population	17
<b>Table 4</b>	Number of harvested outcomes (#) contributing to expected outcomes	22
<b>Figure 1</b>	Realist approach in PITCH evaluation	13
<b>Figure 2</b>	Distribution of 123 harvested outcomes over the PITCH countries, regions and global programme	20
<b>Figure 3</b>	Type of PITCH contributions to all outcomes	24
<b>Figure 4</b>	Distribution of the 117 positive outcomes per change type	30



# List of Annexes

## No Name of document

1	Annex 01 PITCH Theory of Change	
2	Annex 02 List of Reviewed Documents	
3	Annex 02a Template for Desk Review	
4	Annex 03 PITCH Outcome Harvesting Method and Process	
5	Annex 03a Terms of reference for recruitment of PITCH evaluation national consultants	
6	Annex 04 PITCH outcome harvesting-substantiation process	
7	Annex 05a Substantiated Harvested Outcomes PITCH	
8	Annex 05b Non-Substantiated Harvested Outcomes PITCH	
9	Key informant interview and focus group discussion guides for global and regional partners	
10	Key informant interview and focus group discussion guides for country partners, external stakeholders and Dutch embassy	
11	Key informant interview guides for country focal points	Annex 06 KII and FGD Guidelines
12	Key informant interview guides for PITCH programme team	
13	Key informant interview guides for Dutch Ministry of Foreign Affairs	
14	Key informant interview guides for gender lead	
15	Template report-focus group discussion-partners	
16	Template report-key informant interview-country focal points	
17	Template report-key informant interview-Dutch embassies	
18	Template report-key informant interview-external stakeholders	Annex 07 KII and FGD Reporting Templates
19	Template report-key informant interview-gender lead	
20	Template report-key informant interview-global partners	
21	Template report-key informant interview-partners	
22	Template report-key informant interview-Ministry Of Foreign Affairs	
23	Template report-key informant interview-PITCH programme team	
24	Template report-key informant interview-regional partners	
25	Annex 08 Key informant interview and focus group discussion questions per evaluation question	
26	Annex 09 List of Key Informants	
27	PITCH Story of change Indonesia	
28	PITCH Story of change Kenya	
29	PITCH Story of change Mozambique	
30	PITCH Story of change Myanmar	
31	PITCH Story of change Nigeria	Annex 10 Stories of Change
32	PITCH Story of change Uganda	
33	PITCH Story of change Ukraine	
34	PITCH Story of change Vietnam	
35	PITCH Story of change Zimbabwe	
36	Annex 11 Consent Form PITCH	
37	Annex 12 Who changed and who benefited?	
38	Annex 13 Positive unexpected outcomes	
39	Annex 14 Negative unexpected outcomes	



# List of Abbreviations

<b>AIDS</b>	Acquired immune deficiency syndrome
<b>AGYW</b>	Adolescent girls and young women
<b>CSOs</b>	Civil society organisations
<b>EECA</b>	Eastern Europe and central Asia
<b>FGD</b>	Focus group discussion
<b>GUSO</b>	Get Up Speak Out
<b>HIV</b>	Human immunodeficiency Virus
<b>INGO</b>	International non-governmental organisation
<b>KII</b>	Key informant interview
<b>KP</b>	Key population
<b>LGBT</b>	Lesbian, gay, bisexual, transgender
<b>MoFA</b>	Ministry of Foreign Affairs
<b>MoH</b>	Ministry of Health
<b>M&amp;E</b>	Monitoring and evaluation
<b>MSM</b>	Men who have sex with men
<b>OH</b>	Outcome harvesting
<b>PITCH</b>	Partnership to Inspire, Transform and Connect the HIV response
<b>PLHIV</b>	People living with HIV
<b>PMEL</b>	Planning, monitoring, evaluation and learning
<b>PWID</b>	People who inject drugs
<b>ReACT</b>	Rights - Evidence - ACTion
<b>RHRN</b>	Right Here Right Now
<b>SoC</b>	Story of change
<b>SOGIE</b>	Sexual orientation, gender identity and expression
<b>SRHR</b>	Sexual and reproductive health and rights
<b>STIs</b>	Sexually transmitted infections
<b>SW</b>	Sex worker
<b>ToR</b>	Terms of reference
<b>UHC</b>	Universal health coverage
<b>UN</b>	United Nations
<b>UPR</b>	Universal Periodic Review
<b>UNAIDS</b>	United Nations Programme on HIV/AIDS

# Executive summary

A photograph of a person's open palm, facing upwards. The word "DISCRIMINATION" is written in black, capital letters across the palm. The hand is positioned in the lower half of the page, overlapping a red rectangular area and a green background.

DISCRIMINATION

---

The Partnership to Inspire, Transform and Connect the HIV response (PITCH) is a strategic partnership between Aidsfonds, Frontline AIDS, and the Dutch Ministry of Foreign Affairs (MoFA). It aimed to strengthen the advocacy skills and capacities of civil society organisations (CSOs) working with those most affected by HIV and AIDS in nine countries: Indonesia, Kenya, Mozambique, Myanmar, Nigeria, Uganda, Ukraine, Vietnam and Zimbabwe as well as in the southern Africa region, eastern Europe and central Asia, and at the global level. This evaluation, conducted by Results in Health, is a critical analysis of the programme's contribution to evidence-based changes in relation to the PITCH theory of change. It covers the programme period from its inception in January 2016 through to July 2020. The findings presented are the result of a desk review and data collected through outcome harvesting, key informant interviews (KIIs) and focus group discussions (FGDs) in all countries, as well as with the regional programme and global policy partners. Additionally, nine stories of change (SoC) demonstrate the advocacy journeys PITCH partners have been engaged in and the lessons that have been learned.

---

## Main outcomes

Following a series of reflection meetings with partners at national, regional and global level, 123 outcomes were identified as having been contributed to by PITCH partners at these different levels. The analysis showed that, overall, PITCH was **successful in contributing to significant advocacy outcomes** and, that by the end of the programme, it contributed to most of its medium and long-term outcomes. These include furthering HIV advocacy for key populations (KPs) and adolescent girls and young women (AGYW), increased access to HIV services and realisation of sexual and reproductive health and rights (SRHR) for all, and strengthening of CSOs as HIV advocates in all nine PITCH countries. PITCH contributed to all these outcomes with different intensity and mostly together with other actors; country partners focused more on changes at local and national level and less at global or regional level. The findings show that nearly a third of the outcomes were contributed to through lobbying and meeting with stakeholders (32%). However, depending on the country context and partners' capacity levels, a combination of strategies and approaches were applied by partners in order to achieve short-, medium- and long-term outcomes.

The evaluation documented 117 positive harvested outcomes which were all meaningful and significant, including **eight unexpected positive outcomes**. The 117 outcomes were in line with the themes in the PITCH Theory of change, the advocacy asks of partner organisations and contribute to the PITCH goals. The low number of unexpected outcomes indicates that PITCH did well in defining its intended outcomes broadly in the programme's theory of change, which allowed for their adaptation when planning advocacy activities, depending on needs and changing contexts. Rather than seeing specific learnings, these unexpected outcomes show flexibility and adaptive management by PITCH partners. Most of the unexpected outcomes deal with recognition of the rights of key populations and adolescent girls and young women, and not with access to HIV services. The evaluation also documented **six negative outcomes** that have obstructed progress towards the PITCH goals, and which have been directly or indirectly triggered but not controlled by PITCH. Examples include the condemnation of same sex marriage by the Kenyan president and the increase in the length of prison sentences in Ukraine for the possessions of small amounts of drugs. As marginalised communities increasingly spoke out and challenged power relations, negative outcomes are somewhat unavoidable and part of an ongoing struggle.

Partners were highly engaged in advocacy activities and used a combination of all four PITCH advocacy strategies to achieve their advocacy asks. The most effective methods were considered to be working with a strategic approach to advocacy; coordination and collaboration; generating and using robust evidence; mapping advocacy targets and stakeholders; engaging with media; engaging with legal professionals; training and specific technical knowledge; and informal advocacy and engaging the community.

## Sustainability

Each outcome represents a change in behaviour of key stakeholders (mostly national and local governments, see annex 13 for more details) that has been contributed to by PITCH. The evaluation team is confident that having demonstrated a commitment to responding constructively to the advocacy carried out by PITCH partners, through a tangible change in behaviour, these stakeholders will continue to behave in a similar manner into the future, beyond PITCH. Important legislative changes (or the blocking of negative laws) will continue to make a difference beyond PITCH's lifetime in Mozambique, Vietnam and Nigeria, where three outcomes demonstrating the contribution of PITCH to changes in the law were harvested as part of this evaluation. Similarly, 32 policy and strategy decisions were achieved that will guide the behaviour mostly of governmental actors at local and national levels. In half of these cases, both change and the implementation of new policies had already been observed, for example government and Global Fund budgets have shifted in favour of key populations and adolescent girls and young women for at least a few years to come.

The 21 outcomes relating to changes in relationships also address the issue of sustainability. In Indonesia, Kyrgyzstan, Nigeria and Uganda, CSO coalitions were established that will continue to exist after PITCH, and relations between civil society and government

were formalised through several platforms. However, ongoing participation of CSOs including PITCH partners will depend on their financial sustainability, about which we have no information. Additionally, 16 changes in the practice of individuals who act as role models - such as religious and other community leaders, judges, key population-friendly health workers, journalists or policemen - do not constitute a structural change, but can be considered as contributing to sustainability. The outcomes that address public debate around HIV and key populations and adolescent girls and young women cannot be considered sustainable, however it is important to try to influence social norms. These include the acceptance of same sex relationships and a supportive attitude towards sex workers and people who use drugs, which are necessary to achieve long-lasting change.

PITCH invested significant resources in **strengthening CSOs' HIV and AIDS-related advocacy capacity** through training programmes, increased funding and the creation of common spaces for learning. Capacity building in advocacy was perceived by all partners as extremely beneficial. They reported that specific skills were strengthened and a new overall perspective gained on (global) advocacy, which is now planned and implemented in stages and takes into account the local, national and global dynamics. Results of this new vision included being able to generate and use proper evidence in advocacy in countries like Vietnam and Mozambique. The introduction of new technology to enhance data gathering and knowledge management (with tools such as Wanda, Ona and REAct) enabled more systematic tracking of advocacy activities. Thanks to the increased quality and quantity of the evidence produced and the mapping and tracing of stakeholders, engagement with advocacy targets increased. Organisational capacity strengthening was done through training in financial management and organisational security which improved partners' reputation and credibility. In some countries, specific gaps in language- or technical skills on human rights, SRHR, or sexual orientation, gender identity and expression (SOGIE) were

addressed to strengthen individual capacities. Being part of the PITCH programme increased linkages between partners in and across countries and regions, which led to cross-learning, improved collaboration, and stronger coalitions. Partners reported that, even if in some cases the unstable context could be challenging, most of the newly acquired skills and knowledge improved the sustainability of their advocacy.

## Gender-based approaches

Considerable disparities exist among partners in their capacity and focus on **gender-sensitive and transformative approaches**, which were only focused on in the second half of the programme. Partners initially lacked adequate guidance, meaning that the implementation of such approaches depended largely on the individual interest and capacity of partners and country focal points. After the PITCH programme's gender task force changed to a gender working group in 2018, allocation of financial and human resources and subsequent guidance and training to partners resulted in an increase in the application of gender-sensitive, and to a lesser extent gender-transformative, approaches but with considerable differences between partners. An increase in partners' capacity was evident in their critical reflections on how gender norms, attitudes and beliefs shape interactions, workplaces and programme activities, and the subsequent changes made in their organisations and programming. This is an important and promising foundation for the development and implementation of action on these issues in the future. Although these critical reflections took place within organisations, addressing internalised harmful gender norms and discriminatory attitudes within the wider key population communities have not yet received similar attention from partners.

The increased capacity of partners in this area has also been demonstrated by various partner interventions which seek to remove gender barriers to services, and in advocacy initiatives

© James Duong for Aidsfonds



Twinomujuni Annita, M&E Officer, Women's Organisation Network for Human Rights Advocacy

across all countries to change and reform laws, policies and resource allocations to achieve gender equality.

Despite the fact that many partners struggled with the concept of gender-sensitive and transformative approaches, and some still do, their practice often reflects a degree of sensitivity which increased in the second half of the programme. Examples are the empowerment of women who use drugs in various countries, the increase in focus on transgender and male sex workers among some of the sex worker organisations, as well as various efforts seeking to ensure that girls, women and transgender people all benefit equitably from interventions. However, the principles of gender transformation have not always been understood and have generally been less practiced than gender-sensitive approaches, and only by a smaller group of partners. As a lesson for future programmes, a greater focus on capacity strengthening would help facilitate partners to more confidently apply a gender transformative approach in their work .

## Missed opportunities

None of the specific programmatic strategies failed. However, some programme features have been identified as challenging. PITCH experienced delays in fully starting its activities, affecting the level of clarity and guidance provided to partners. Instances of limited collaboration were due mainly to the lack of time made available early in the programme to set up the necessary processes, undermined further by issues of communication within the programme, as well as issues related to governance at the beginning of implementation. The complexity of the programme resulted in confusion for some partners. Different lines of coordination regarding who was responsible for what or ownership of processes were not always communicated adequately. The fact that PITCH intentionally set out to unify the different key populations is clearly a strength of the programme's approach, as it allowed partners to address issues of common concern. However this commitment to bringing together partners working with different key populations also brought challenges, given that partners often had different priorities. Some partners reported that these different priorities posed challenges when seeking to identify a common cause.

The programme timeframe of five years is considered too short in relation to its goals.

The findings indicate that only a limited connection between country and global policy partners was realised, mostly ad hoc and without a well-defined strategy. Two thirds of country partners reported not having had a direct connection with PITCH global policy partners. Global policy partners confirmed the disconnection between their work and the work of country partners. Despite the sense of disconnection, the evaluation found that more linkages between the work of the country partners and global policy partners were made in the second half of the programme. PITCH supported the connection between the country and global level mainly through provision of

funding, and to a smaller extent through technical support through the use of capacity strengthening.

Among the main benefits experienced were the support and creation of space for country partners to speak at global advocacy events by global policy partners, guidance (although fragmentary) provided to country partners during such engagement in global advocacy spaces and processes, and to a lesser extent the evidence provided by country partners to global partners. The engagement in international advocacy not only contributed to an increase in advocacy capacity of country partners and country focal points, but also helped to strengthen their relationship with their national governments. Missed opportunities have been identified mainly in respect of the involvement of country partners in the preparatory stage, and even more in the follow-up of international advocacy at country level. From the perspective of the regional partners, the International Federation of Red Cross and Red Crescent Societies (IFRC) benefited from collaborating with Aidsfonds through the provision of technical support and mentorship. EVA Russia benefited from collaboration with PITCH in strengthening its advocacy activity. Unfortunately, in terms of joint advocacy activities, no common advocacy agenda was developed, except some follow-up meetings.

PITCH partners formed or joined coalitions with other CSOs in all countries. Working more closely with organisations who have similar goals, issues, focus areas and/or targets helped to advance their advocacy, raise the profile of the experience of key populations and adolescent girls and young women and set the advocacy agenda. These partnerships and networks provided a safe space for collaboration and information sharing; the chance to unify multiple voices in pursuit of one goal; mechanisms to support collective advocacy efforts; and a strategy to ensure sustainability beyond the programme's lifetime.



In all countries, one or more PITCH partners collaborated with another MoFA-funded programme, with different levels of collaboration depending on the context. PITCH partners reported that they collaborated with Bridging the Gaps, Get Up Speak Out, Right Here Right Now, and READY. When this happened, it was effective and contributed to the achievement of some important outcomes such as the government of Kenya accepting recommendations regarding HIV, universal health coverage (UHC) and SOGIE made by UN member states during the Universal Periodic Review (UPR) process. However, it was ad hoc and no clear strategy was developed to strategically or systematically build links between programmes. In general, there was a good collaboration between the PITCH partners and the relevant Dutch embassies, although the strength of such collaboration differed from country to country. Dutch embassies generally played a key role in facilitating partner introductions to and meetings with relevant stakeholders such as the government and UN agencies. This kind of support helped partners to expand and strengthen their networks in country. Dutch embassies also engaged in networking or advocacy organised by PITCH country partners.

This evaluation presents recommendations of relevance to the set up, the implementation, the strategies, and the management of similar, future programmes. Given the limited donor funding available internationally for advocacy programming, this evaluation also recommends that the Dutch MoFA and other donors support similar programmes, as well as sustain the results achieved by PITCH.





Advocates and stakeholders participated in the launch of the #UHC4ALL campaign in Uganda

# Introduction

## 1.1 PITCH programme

PITCH is a strategic partnership between Aidsfonds, Frontline AIDS, and the Dutch Ministry of Foreign Affairs (MoFA). It is part of the Dutch MoFA's *Dialogue and Dissent: Strategic Partnerships for Lobby and Advocacy* policy programme for international cooperation. PITCH supports community-based organisations to uphold the rights of populations most affected by HIV and engage in effective advocacy, generate robust evidence, and develop meaningful policy solutions. It focuses on strengthening the capacities of civil society organisations working with the following key populations: lesbian, gay, bisexual, transgender (LGBT) people, sex workers and people who use drugs, as well as with adolescent girls and young women.

PITCH works to enhance and facilitate dialogue between civic and political actors to tackle the structural causes of the HIV epidemic which disproportionately affect key populations, and to increase their access to justice and health services by contributing to sustainable policy change. Reducing inequalities – in economic, social, political, religious and ethnic domains as well as based on gender and sexual orientation – is a key aim of the Dutch policy agenda on foreign trade and development cooperation, and central to fulfilling the Sustainable Development Goals (SDGs).

PITCH was designed as a five-year (2016-2020) advocacy-based programme focused on building the capacity of local CSOs to advocate for equal rights and access to services for key populations



in nine countries that are highly affected by HIV. At the country level, the programme works with local partners in Indonesia, Kenya, Mozambique, Myanmar, Nigeria, Uganda, Ukraine, Vietnam and Zimbabwe. PITCH also aims to engage in HIV advocacy at the regional level in eastern Europe and central Asia (EECA) and in southern Africa. At the global policy level, PITCH advocates at the United Nations in Geneva and New York, at the European Union in Brussels, at the African Union in Addis Ababa, and with the U.S. government in Washington, D.C.

Over the programme's five years, partners have been working collaboratively towards ending the HIV and AIDS epidemic in regions and countries most affected by HIV. This has occurred through planned in-country, in-depth interventions to lobby and advocate around key HIV-related issues. The goals of PITCH are:

- **Goal 1: Equal access to HIV-related services**
- **Goal 2: Sexual and reproductive health and rights for those most affected**
- **Goal 3: Equal and full rights for key populations**
- **Goal 4: Strong civil society organisations are successful HIV advocates.**

A key priority for PITCH is to provide linkages between the global, regional, country and local levels to ensure coherent policy advocacy and knowledge sharing. Part of this includes linking country level work with global level advocacy, and vice versa. The global theory of change can be found in Annex 01.

Implementation was completed at the end of 2020. The programme's funder, MoFA, required an independent, external, end-term evaluation of all programmes funded through the Dialogue and Dissent Strategic Framework.

## 1.2 Purpose and scope of evaluation

The purpose of this evaluation was to provide a critical analysis of the programme's contribution to evidence-based changes in relation to the PITCH programmatic goals and advocacy strategies.

The scope was to review the programme period from its inception in January 2016 through to July 2020 when the evaluation process began.

## 1.3 Objectives and evaluation questions

The PITCH strategic partnership identified two objectives for the evaluation, as well as a series of evaluation questions designed to meet these objectives – see table 1 on the next page.



Olabukunola Williams, Executive Director  
of Education as a Vaccine, Nigeria



Khuất Thị Hải Oanh, Executive Director, Supporting Community Development Initiatives

## ▼ Objective 1

**To assess the outcomes and impact of PITCH, as well as their sustainability, in the context of the programme's theory of change**

- 1.1** To which significant advocacy outcomes has PITCH made a measurable contribution? To what extent does evidence exist to support these claims?
- 1.2** How has PITCH contributed to any positive or negative unexpected outcomes? What lessons have been learned, and how have these unexpected outcomes influenced partners' advocacy planning?
- 1.3** Which PITCH advocacy strategies have been most effective in allowing PITCH partners to achieve their advocacy asks<sup>1</sup>? What lessons can be learned from this?
- 1.4** Reflecting on structural and legislative changes, how sustainable are the achievements of PITCH beyond the programme's lifetime, and in the absence of significant external funding?
- 1.5** To what extent has PITCH measurably and sustainably strengthened the advocacy capacity of PITCH partners, including the capacity to capture evidence to support their advocacy?<sup>2</sup>
- 1.6** To what extent has the capacity of PITCH partners to apply a gender-sensitive or transformative approach to their work been strengthened? How has this been achieved? What impact has this had on the outcome of PITCH country level advocacy activities?
- 1.7** What lessons can be learned about how gender informs advocacy carried out by and for key populations and adolescent girls and young women?
- 1.8** From the perspective of different PITCH stakeholders, including implementing partners, which programmatic strategies and approaches have partly or entirely failed? What lessons can we learn from this?

## ▼ Objective 2

**To understand the extent to which internal and external PITCH stakeholders have benefited from collaborating with each other**

- 2.1** To what extent have country partners and global policy partners benefited from/connected with each other's advocacy activities?
- 2.2** To what extent have country partners and regional programme partners benefited from/connected with each other's advocacy activities?
- 2.3** To what extent have regional programme and global policy partners benefited from/connected with each other's advocacy activities?
- 2.4** To what extent have PITCH partners formed or joined coalitions with other civil society organisations that have helped to advance their advocacy, raise the profile of the experiences of key populations and adolescent girls and young women, and set the advocacy agenda?
- 2.5** To what extent can examples of effective collaboration at the country level be demonstrated between PITCH and other Ministry of Foreign Affairs-funded programmes working to address HIV and AIDS?
- 2.6** To what extent have working relationships between PITCH and the Dutch embassies and permanent missions in the PITCH countries contributed to advocacy outcomes through strategic collaboration?

<sup>1</sup> An advocacy ask is a statement developed by PITCH partners that identifies the specific change they seek to contribute to through their planned advocacy work.

<sup>2</sup> The Evaluation team decided to jointly address EQ 1.3 (advocacy strategy) and EQ 1.5 together. This was done as, during the evaluation, it emerged that the most effective advocacy strategies that allowed partners to achieve their advocacy asks were closely related with the capacity strengthened by the PITCH programme.

**Table 1** Evaluation objectives and questions



## 1.4 Target audience, users and uses

This evaluation was managed by the PITCH monitoring and evaluation (M&E) senior advisor. The primary audience for the final report is the PITCH M&E senior advisor and programme team, the MoFA, and the 80+ partners.

This final report provides clear analysis, conclusions and recommendations for the PITCH

strategic partners - Aidsfonds, Frontline AIDS and the MoFA - as well as for the programme's implementing partners at the country, regional, and global policy levels. It is anticipated that other organisations implementing advocacy programmes in the HIV, SRHR and human rights sector, and those working with marginalised and criminalised populations, will also benefit from the findings, helping to inform the design and implementation of future advocacy programmes nationally and internationally.



© Frontline AIDS/Lucas Hendriksen/2019

Myanmar MSM Transgender Network changed its name and vision to reflect gender inclusivity.



# 2

## The evaluation methodology

**This section looks at the type of framework and principles used for the evaluation as well as the different methods of data collection, including outcome harvesting and key informant interviews. Quality assurance and the issue of safety and security are also covered in brief.**

### 2.1 Evaluation framework

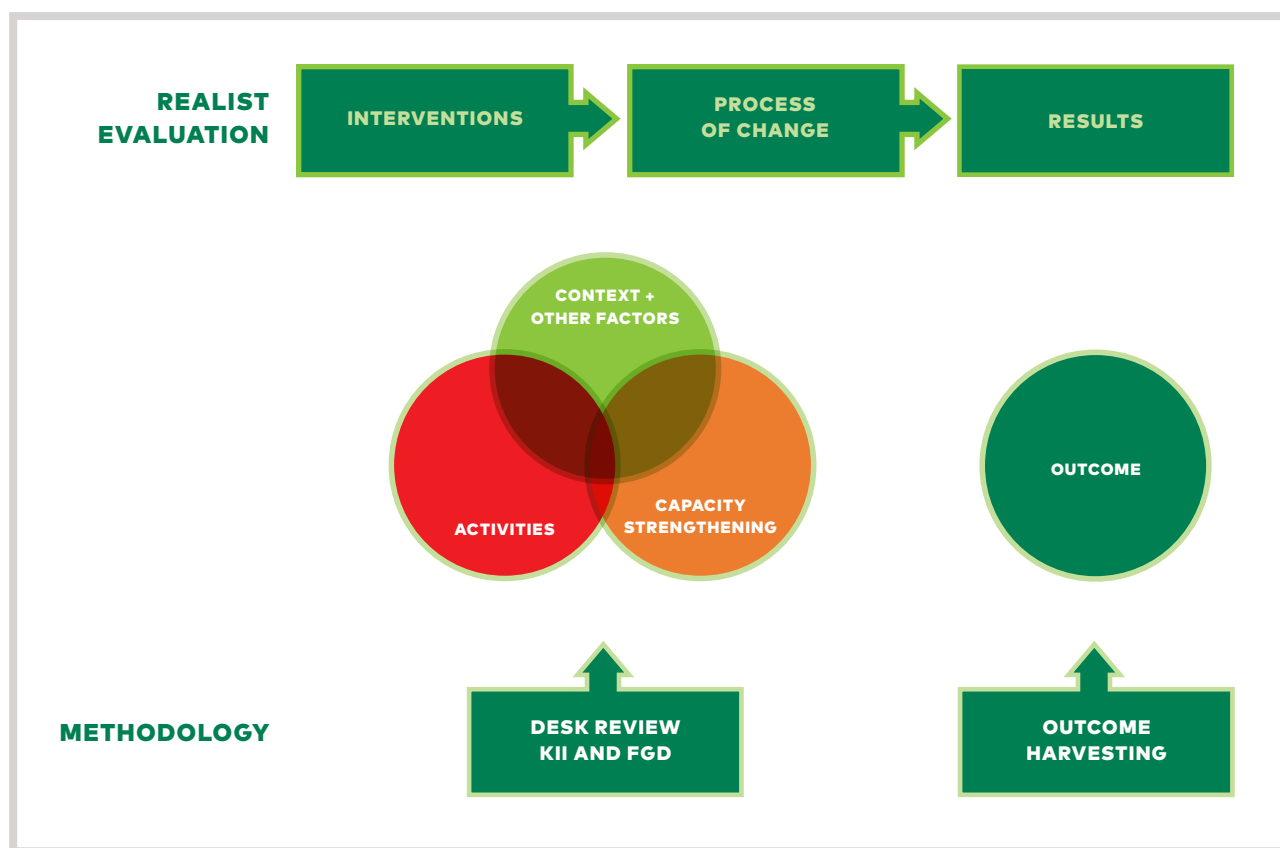
#### 2.1.1 Realist evaluation

PITCH is a programme which was designed to be responsive to the complex and multi-layered nature of the HIV epidemic. As a result, it moves beyond one approach and aims to address the micro- and macro-level factors which exacerbate HIV stigma and discrimination, impacting the ability of key populations and adolescent girls and young women to fulfill their rights.

A realist evaluation framework is an approach which is able to respond to this complexity to not only answer the traditional evaluation question 'does the programme work?' but also to enable

Partners from Indonesia and  
Vietnam share learnings and insights





**Figure 1** Realist approach in PITCH ETE

evaluators to understand and assess ‘what works for whom, in which contexts, and how?’

For this evaluation, we identified the results/ changes (outcomes) to which PITCH advocacy activities and strategies contributed. When reviewing these processes, we compared them to the anticipated outcomes as set out in the PITCH theory of change, included as Annex 01.

The ResultsinHealth evaluation team followed three of the principal steps of a realist evaluation approach (see Figure 1):

- a** Describing the PITCH programme including understanding the pathways of change as outlined in the theory of change
- b** Collecting data on activities, context and results to test the programme’s theory and its assumptions by applying various data collection methods including outcome harvesting, collection of stories of change, key informant interviews, focus group discussions, and desk review
- c** Analysing patterns in the data that lead to and/ or contribute to achieving PITCH goals.



© James Duong for Aidsfonds

Patriciah Jeckonia, Senior  
Technical Advisor, LVCT Kenya

## 2.1.2 The Bond Evidence principles

For this evaluation, the Bond Evidence Principles<sup>3</sup> guided the evaluators' ability to assess the quality of evidence, selection of key informants/sampling, data collection methods and data analysis – see Table 2 below.

**Table 2 Bond principles in PITCH end-term evaluation**

Bond principles	Method of application in PITCH evaluation	Implications
<b>1</b> Voice and inclusion	For selection of key informant interviews and data collection methods.	The outcome harvesting, key informant interviews and the focus group discussions will provide the opportunity to include the perspectives of key populations and adolescent girls and young women; as well as the PITCH programme team and external stakeholders.
<b>2</b> Appropriateness		
<b>3</b> Triangulation	The cross-validity of the evidence to capture the numerous and nuanced dimensions of findings.	The evidence is generated using a mix of methods, data sources, and perspectives.
<b>4</b> Contribution	Identifying the contribution of the intervention to the outcomes and the impact of other factors outside the intervention.	The use of outcome harvesting, focus group discussions and key informant interviews provides more detail on how the outcomes were generated, highlighting the role of PITCH interventions as well as the influence of other variables.
<b>5</b> Transparency	Data transparency, analytic transparency and production transparency.	Disclosure on details of how data sources and methods are selected and used; how the results are achieved; and the limitations of this evaluation.

Additionally, a gender lens was used throughout the evaluation to inform the selection of key informants, development of questions/topics for the interviews and focus group discussions, as well as guiding the data analysis process. The evaluation particularly explored the use of gender-sensitive and gender-transformative approaches in the programme, and how they have informed advocacy by and for key populations and adolescent girls and young women to ultimately understand how this has influenced the advocacy outcomes.

<sup>3</sup> <https://www.bond.org.uk/resources/evidence-principles>

## 2.2 Data collection methodology

### 2.2.1 Desk review

The purpose of the desk review was to gain a high-level understanding of the PITCH programme including identifying approaches and results across implementation levels and contexts to identify the the key issues to be addressed during the outcome harvesting, key informant interviews and focus group discussions. The documents reviewed included PITCH country, regional and

global policy reports; mid-year change reports; annual reports; and advocacy logs. A full list of documents reviewed is presented in Annex 02. For the desk review, the national consultants were asked to review the data for their respective country and complete a template which organised relevant data from the documents by evaluation question (see Annex 02a). Analysis that we have drawn from the desk review is not always referred to explicitly in this evaluation report. This is because our analysis of the relevant data that we identified as part of the desk review has been used and deepened as part of the outcome harvesting approach, and the use of key informant interviews and focus group discussions.

## 2.2.2 Outcome harvesting

Outcome harvesting was used to answer evaluation questions 1.1 on outcomes achieved, 1.2 on unintended outcomes and 1.4 on sustainability. The harvested outcomes were also used to answer questions 1.3 and 1.5 – 1.8 to complement the other data collection methods. Annex 03 provides further detail on the methodology and process.

In total, 123 outcomes were harvested with a subset of 39 harvested outcomes substantiated by people who were knowledgeable about but independent from the programme. None of the outcomes had to be rejected as a result of the substantiation process. This is an indication of the credibility of the full set although we deliberately did not set a benchmark. Details about the substantiation process can be found in Annex 04. The complete set of harvested outcomes can be found in Annex 05a Substantiated outcomes and Annex 05b Non-substantiated outcomes.

Individual outcomes are denoted by the use of # followed by the relevant number.

## 2.2.3 Key informant interviews and focus group discussions

Key informant interviews were mainly conducted remotely using online communication platforms (Zoom, BlueJeans, Skype) and telephone with a few conducted face-to-face or in group settings. They were used to collect information to answer evaluation questions 1.3, 1.4, 1.5 – 1.8 and 2.1 – 2.6; and to enable the development of stories of change.

Focus group discussions were carried out to obtain data on the programme's achievements in reaching its goals, implementation of (gender-informed) advocacy activities, collaboration and coordination, evidence generation and lessons learnt. Two were conducted per country and were facilitated by the national consultants and guided with a series of questions. The guidelines can be found in Annex 06 Key informant interviews and focus group discussion guidelines.

All the data has been documented using standardised reporting templates which can be found in Annex 07 Key informant interviews and focus group discussion reporting templates. The link between the evaluation questions and the data collection tools can be found in the evaluation matrix in Annex 08 Key informant interviews and focus group discussion questions per evaluation question.

## 2.3 Selection of countries

Outcome harvesting was used in all nine countries as well as at the regional and global policy levels according to the evaluation terms of reference. Originally, this evaluation was designed to collect data through key informant interviews and focus group discussions in just three countries. Due to COVID-19, the data collection method was revised and primarily conducted remotely, resulting in a budget underspend for the in-person reflection meeting. In the interest of giving more PITCH country-level stakeholders the opportunity to participate, the

key informant interviews and focus group discussions were expanded to include all nine countries.

## 2.4 Participants and key informants

Participants for the reflection meetings, and key informants for the interviews and focus group discussions, were selected in collaboration with the country focal points. A total of 89 and 120 informants participated in key informant interviews and focus group discussions respectively. At the country level, national consultants conducted interviews with a selection of implementing partners representing key populations and adolescent girls and young women; external stakeholders; and representatives from the Dutch embassies. They also conducted focus group discussions with LGBT people, sex workers, people who use drugs, and adolescent girls and young women. The global consultants carried out key informant interviews with the country focal points, global PITCH partners, programme team members, a representative from the Dutch MoFA, and the programme's gender lead. A total of 186 people participated in the outcome harvesting reflection meetings. A detailed list of consulted key informants for this evaluation can be found in Annex 09.

## 2.5 Data management and analysis

For this evaluation, a total of 123 outcomes were harvested and 84 key informant interview/focus group discussion reports were produced and used (66 from key informant interviews and 18 from focus group discussions). Data from these and the desk review was entered, organised, and analysed using NVivo<sup>4</sup>. For outcome harvesting data, Podio<sup>5</sup> was used.

<sup>4</sup> NVivo is a software programme used for qualitative and mixed methods research. Specifically, it is used for the analysis of unstructured text, audio, video, and image data, including (but not limited to) interviews, focus groups, surveys, social media, and journal articles.

Data generated through the different data collection techniques was analysed and interpreted using the realist evaluation approach and Bond Evidence Principles. Data was validated via triangulation (comparing and contrasting results from answers from the different groups of respondents), and the mixed methods approach (comparing and contrasting results from desk review and primary data).

## 2.6 Story of change

For this evaluation, the story of change methodology was used to demonstrate the journeys and processes that PITCH partners were engaged in as part of their work. Through this methodology, evaluators were also able to capture the key lessons learnt by partners with a total of nine stories of change developed.

The topics were selected by PITCH country partners. Whilst originally the aim was to have a balanced distribution of stories of change in line with the four different key populations and adolescent girls and young women, four out of the nine selected relate to people who use drugs as they were represented in a large number of outcomes. The resulting selection of stories is presented in Table 3 on the next page.<sup>6</sup>

## 2.7 Quality assurance

The following measures were taken to ensure the quality and integrity of the evaluation, as well as minimise errors in the data collection process:










- 1 The data collection tools were the same for all countries to ensure consistency and allow comparison between them. The tools included detailed guidelines for their proper use and uniform interpretation of the questions.

<sup>5</sup> Podio is a project management and collaboration software with an app designed for outcome harvesting. It organises outcomes in a database and allows for classification of outcomes.

<sup>6</sup> The stories of change were drafted by the global consultant team, based on the data from the key informant interviews, focus group discussions, outcome harvesting, desk review and additional sources provided by partners (newspaper articles, weblinks etc.) and were shared with each national consultant and country focal point for validation and input. For validation purposes, all outcomes selected as stories of change have been substantiated as part of the outcome harvesting process.





Country	Title	Key Population involved
 <b>Indonesia</b>	Towards a key population-inclusive penal code: engagement of key populations in the penal code law revision process	Cross-cutting
 <b>Kenya</b>	The best treatment for women living with HIV: access to Dolutegravir for adolescent girls and young women	Adolescent girls and young women
 <b>Mozambique</b>	Recognition of transgender women as a key population in Mozambique	LGBT and sex workers
 <b>Myanmar</b>	Medicine for all: an advocacy strategy for equal access to lifesaving medicines	Cross-cutting
 <b>Nigeria</b>	How PITCH partners secured government approval and support to commence with comprehensive harm reduction	People who use drugs
 <b>Uganda</b>	Access to medically assisted treatment for people who use drugs in Uganda	People who use drugs
 <b>Ukraine</b>	Recognition of women who use drugs in Ukraine as a distinct vulnerable group	People who use drugs
 <b>Vietnam</b>	Modelling a standard voluntary community-based drug treatment approach in Vietnam	People who use drugs
 <b>Zimbabwe</b>	Key population-friendly public health services in Zimbabwe	Cross-cutting

**Table 3** Overview of stories of change per country and key population

- 2** All tools for country-level data collection were tested for consistency, easy administration, and appropriateness by piloting them in one country (Kenya).
- 3** The global consultants provided the national consultants with online training prior to conducting key informant interviews and focus group discussions, as well as with standardised reporting templates for the results.
- 4** Regular communication and discussion between global consultants and national consultants took place.
- 5** Internal feedback, evaluation and reflection was conducted by the global consultants on a continual basis and, when relevant, adjustments to the research design were made.

## 2.8 Ethics, safety and security

For this evaluation, we adhered to the safety and security guidelines as well as the PITCH code of conduct. This included in-country guidelines, do no harm principles, and relevant security assessments. Each country focal point was asked to carry out a COVID-19 risk assessment in advance of their country's planned evaluation reflection meeting to establish whether or not it was safe enough to hold the meeting in person. The PITCH M&E senior advisor and programme team supported this process.

The data collected was only used for the evaluation whose approach and design were intended to protect those involved from any security risks or damage to intervention strategies due to improper information sharing. This was done by maintaining safety and confidentiality throughout the evaluation process. Each respondent interviewed was first asked to provide written informed consent. On some occasions, verbal consent was provided. The PITCH evaluation consent form can be found in Annex 11.

Data collection tools were numerically identified and encrypted, and consent forms were stored separately to ensure that they could not be linked to individuals. In term of data security, ResultsInHealth used its internal OneDrive with access only granted by the evaluation team.

## 2.9 Limitations and constraints

The following limitations and constraints were observed as part of this evaluation:

- The evaluation did not include a systematic review of all implemented activities and outputs; rather it focused on a limited number of significant outcomes and then worked backwards to see how activities and outputs contributed to the outcomes. This is a



© James Duong for Aidsfonds

Ko Moe Kyaw Myanmar, MSM and Transgender Network and U Min San Tun, Myanmar Positives Group

deliberate choice to focus on the contribution of PITCH to both expected and unexpected outcomes, and this evaluation therefore did not assess the quality of the implemented activities themselves.

- b There was a risk of bias because the partner organisations contracted by PITCH, PITCH staff, and even the external stakeholders interviewed, had (in different ways) an interest in showing that things went well during implementation, despite their interest to learn. The global consultants were aware of this risk, and addressed this by:
  - Identifying a minimum of two independent, knowledgeable people, external to PITCH, as substantiators of one or more of the harvested outcomes per country, region, and global level
  - Triangulating the data collected using different data collection techniques
  - Inviting a combination of internal and external key informants to participate in the key informant interviews and focus group discussions (in which change processes were assessed).





Advocates in Ukraine mark the 'Support Don't Punish' global day of action.

- c Most of the country-level data was collected by national consultants, with interpretation and analysis done by the global consultants. This created a risk that the global consultants would misinterpret the data collected by the national consultants. The global team tried to address this by working closely with and asking national consultants for clarifications about reported data where needed and by adding a column for contextual information and explanations in the reporting format.
  - d The key informant interviews and focus group discussions were done by 10 different national consultants in their own country and, in some instances, using their own language. The relatively large number of consultants involved in the data collection implies that data collection and reporting may not always have been fully consistent. The evaluation team was aware of this situation and has tried to address it by developing standard tools and templates for reporting the results of key informant interviews and focus group discussions. Where reported findings (including translations) were unclear, discussions between the global and national consultants took place to resolve any ambiguity.
  - e Contextual and technological constraints existed as a result of the evaluation's response to the restrictions created by the COVID-19 pandemic. We recognise that data collection activities were primarily done remotely, through online platforms or by telephone. Online platforms allowed the evaluation team to conduct interviews using either audio only or a combination of audio and video. However, it is important to recognise two main challenges: 1) in some countries, irregularities in internet access and poor quality of the signal interfered with the interview process and 2) non-verbal communication was limited given these circumstances and the fact that observation of projects in the field was not possible.
- As a consequence of the changes in the number of countries (from three to all nine) to be included in key informant interviews, focus group discussions, desk review and production of stories of change, the coordination of the national data collection processes as well as the data analysis became more complex and time-consuming than anticipated. This posed a limitation, especially considering the given timeline.

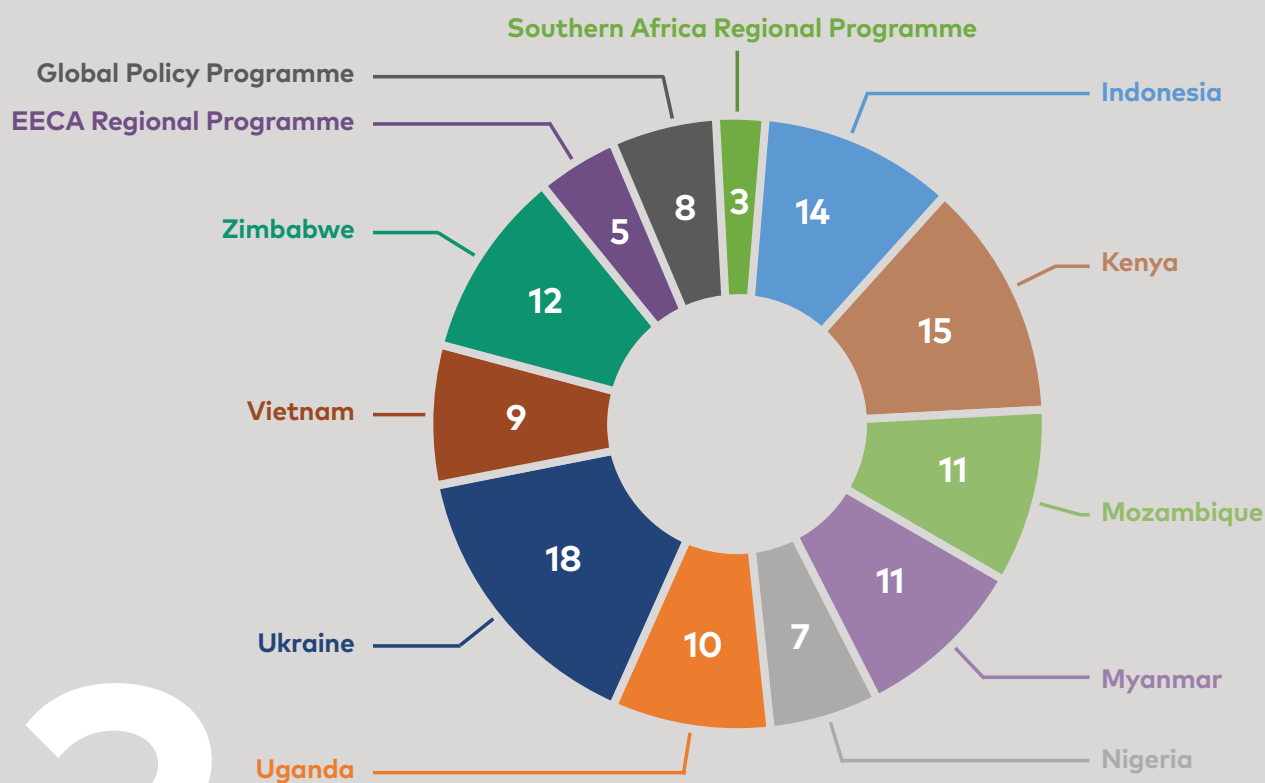


Figure 2

Distribution of 123 harvested outcomes over the PITCH countries, regions and global programme

# Findings

This section is informed by a total of 123<sup>7</sup> outcomes harvested for this evaluation. They are derived from all nine PITCH countries, regional partners in eastern Europe and central Asia (EECA) and global policy partners. Distribution of outcomes is presented in the figure above.

<sup>7</sup> An outcome is defined as a change in behaviour (action, activity, policy, practice, relationship) of an individual, group, community, organisation or institution that has been influenced (intentionally or not) by PITCH activities. An outcome statement consists of the description of who changed what, when and where, its significance and how PITCH has contributed to the outcome.

## 3.1 Objective 1 To assess the outcomes and impact of PITCH, as well as their sustainability, in the context of the programme's theory of change

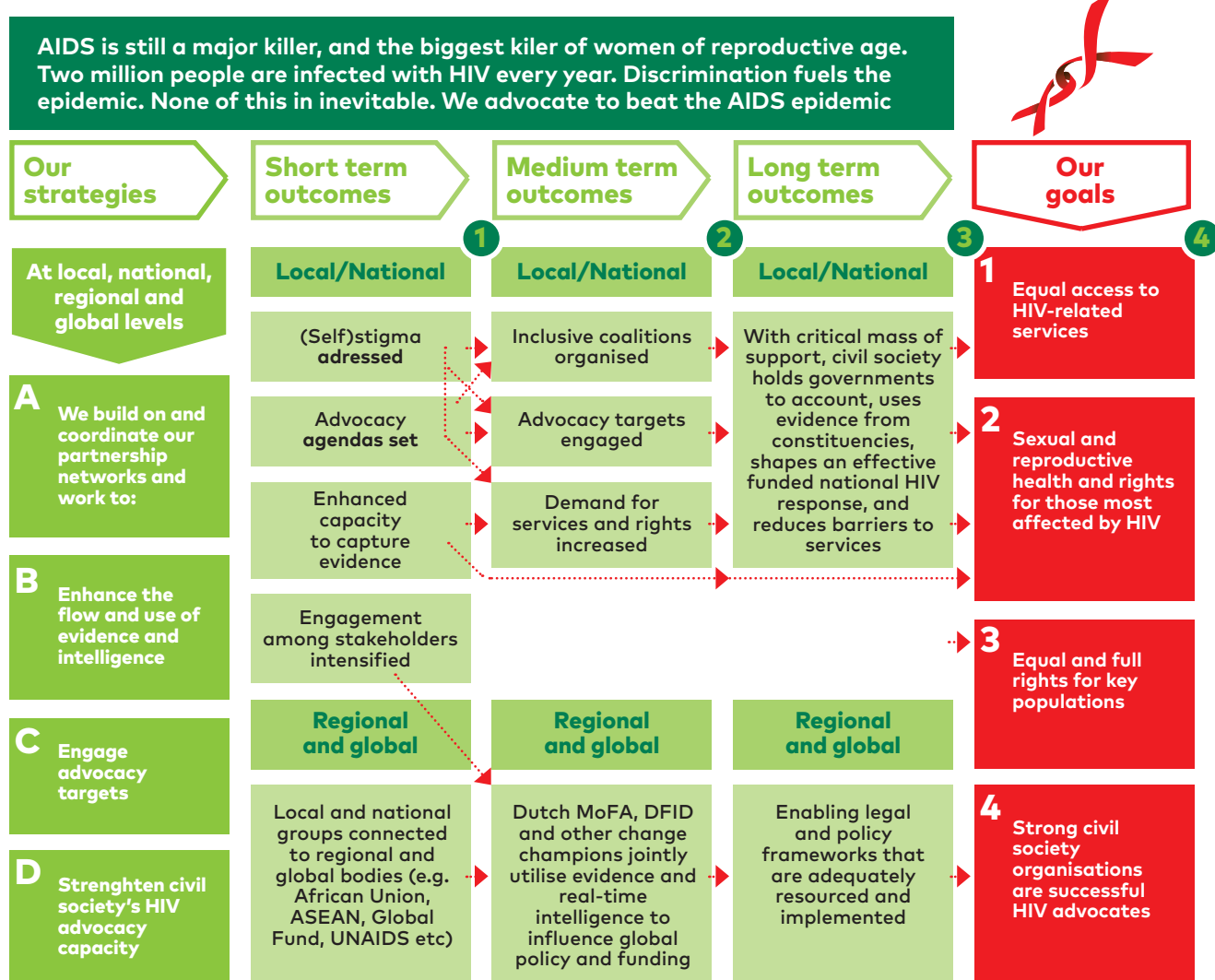
Harvested outcomes are complemented by data from the literature review, key informant interviews, and focus group discussions. An overview of all 123 outcome statements harvested during the evaluation can be found in Annex 5. An analysis of the different types of actors influenced by PITCH, and of the key populations and adolescent girls and young women that benefited from these changes, is presented in Annex 13.

### 3.1.1 EQ1.1 To which significant advocacy outcomes has PITCH made a measurable contribution? To what extent does evidence exist to support these claims?

Here, we examine the kind of advocacy outcomes that PITCH has contributed to, in particular focusing on self-stigma, demand for services and rights and changes in policy or law. The duration of outcomes (e.g., whether short, medium or long-term) and their substantiation is also considered.

Evidence from this evaluation demonstrates that the PITCH programme was successful overall in making a measurable contribution to outcomes that helped the programme achieve its four goals. Nearly<sup>8</sup> all 123 harvested outcomes are meaningful and significant, and in line with the global theory of change. Out of these 123 outcomes, eight were grouped as positively unexpected and six as negative outcomes<sup>9</sup>. The PITCH theory of change, shown below, describes a set of short, medium and long-term expected outcomes that will eventually lead to the four goals benefiting key populations and

Throughout this report, outcomes are discussed both in terms of 'harvested outcomes' as well as 'expected' or 'anticipated' outcomes. A harvested outcome is an outcome that has been documented as part of the end term evaluation process and which PITCH has contributed to. An anticipated or expected outcome refers to an outcome that appears in the original PITCH theory of change.



<sup>8</sup> See the next section (EQ 1.2) on unintended and negative outcomes for the few outcomes that do not contribute to the PITCH goals.

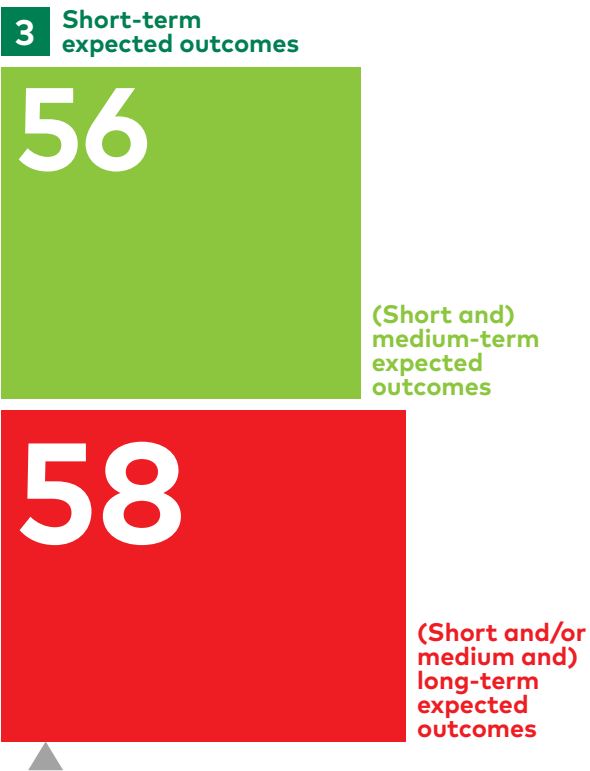
<sup>9</sup> See next sub section on EQ 1.2 on unintended positive and negative outcomes for the few outcomes that do not contribute to the PITCH goals.



adolescent girls and young women. These expected outcomes will provide us with a lens and help with assessment of the significance of PITCH's contributions to the harvested outcomes.

### Significance of outcomes achieved by PITCH

Categorisation of harvested outcomes, according to the expected outcomes of the theory of change to which they contribute, was originally undertaken by PITCH partners who formulated the outcomes. The evaluation team identified some inconsistencies between the nine countries in the way this categorisation was done. The evaluation team tried to follow the original categorisation as much as possible but modified this in some cases for analytical purposes. This approach was used for this significance section.



**Table 4** Number of harvested outcomes (#) contributing to expected outcomes

Three harvested outcomes contributed to the medium-term outcome "Dutch MoFA, Department for International Development and other change champions jointly utilise evidence

<sup>10</sup> this coding relates to how the outcomes from the PITCH theory of change are presented in the PITCH results framework

and real-time intelligence to influence global policy and funding", or M4<sup>10</sup>. PITCH global policy partners contributed to three harvested outcomes (outcomes #136, #137 and #91) in line with M4.

Nearly half of the harvested outcomes were categorised as medium-term (53 outcomes), fairly evenly distributed between the following medium-term expected outcomes: "inclusive coalition organised" (outcome 52/Indonesia; outcome #35/Uganda), "advocacy targets engaged" (outcome #37/Kenya; outcome #57/Myanmar), and "demand for services and rights increased" (outcome #60/Myanmar; outcome #105/Zimbabwe). Three harvested outcomes contributed to the medium-term outcome "Dutch MoFA, Department for International Development and other change champions jointly utilise evidence and real-time intelligence to influence global policy and funding". There are three outcomes classified under M4 produced by PITCH global policy partners (outcomes #136, #137 and #91). No outcomes were harvested at the regional and global level (from country partners) categorised under M4. This suggests that PITCH country partners were predominantly focused on making changes at the medium-term level outcomes, at local and national levels, and less at the global level. The latter seems intentional and in line with the global theory of change.

Under long-term expected outcomes (L1 and/or L2<sup>11</sup>), 58 outcomes were categorised. They were observed among all PITCH countries, regional partners and global policy partners. There are more outcomes placed under L1 than L2, strengthening the observation that PITCH country partners focus more on changes at local and national level and less at global or regional level. Nearly half of the outcomes were categorised as long-term which, according to PITCH country partners, indicated that the programme progressed as planned.

Analysis of the outcomes' significance led to the conclusion that PITCH has advanced the HIV advocacy agenda for key populations and adolescent girls and young women in all nine

countries and made progress in the achievement of the four goals outlined in the theory of change. By the end of the programme, it is clear that PITCH contributed to the achievement of most of its anticipated medium and long-term outcomes.

## PITCH outcomes in Nigeria

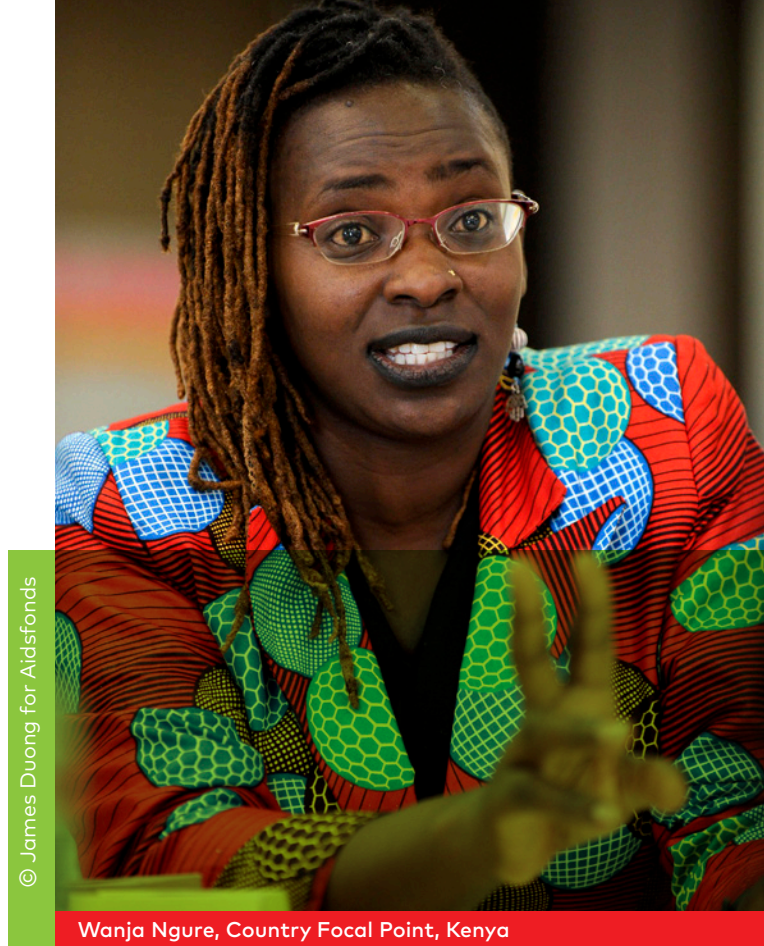
In **Nigeria**, for example, five out of seven harvested outcomes have been categorised as contributing to long-term expected outcomes. Outcomes #64 and #62 have not reached the legal or policy framework and, to date, neither have achieved concrete changes in HIV and SRHR access<sup>12</sup>. However, there have been significant changes in the Nigerian context. In a country where LGBT rights are not recognised, having a positive story about LGBT people on the cover of the Nigerian newspaper Guardian Life is an important achievement for the LGBT community (outcome #64).

Although sex work is not criminalised in Nigeria, sex workers face severe human rights abuses and multiple forms of discrimination. Outcome #62 concerns a pronouncement made by Justice Binta Nyako during a case against some arrested sex workers, who stated that sex work is not a crime in Nigeria. Even if the pronouncement has not led to positive changes at policy or legal level, the outcome is extremely significant for the sex worker community. PITCH partner NSWA indicated that following this, they received less reports from their members being arrested by police.

Other harvested outcomes for Nigeria reveal a pathway of change, in line with the Nigerian theory of change, that has had an effect on the legal and policy framework and/or access to HIV and SRHR services. Outcome #67 provides an insightful example of a significant outcome. An Islamic youth leader formed a coalition of religious and community leaders, securing their

<sup>11</sup> L1: With critical mass of support, civil society holds governments to account, uses evidence from constituencies, shapes an effective funded national HIV response, and reduce barriers to services. L2: Enabling legal and policy frameworks that are adequately resourced and implemented

<sup>12</sup> These are the long-term outcomes in the Theory of change for Nigeria



Wanja Ngure, Country Focal Point, Kenya

commitment to tackling discrimination against LGBT people in Niger state. This was achieved through community education and the promotion of equal access to healthcare services for LGBT people.

Niger state is a Sharia state with high levels of homophobia, and conservative religious and cultural values. Through the work of International Centre for Sexual Reproductive Rights (INCRESE), a PITCH partner, PITCH pioneered a platform for community and religious leaders to participate in a stakeholder's forum on LGBT rights. It was a significant challenge to obtain permission to hold it but resulted in amplifying PITCH LGBT partners' advocacy campaign in the state, thereby contributing to several expected outcomes, including helping to address self-stigma, setting the advocacy agenda and intensifying stakeholder engagement. As a result, these partners' efforts to engage their advocacy targets and to build a critical mass of support became more effective. By using evidence from their constituencies, these partners have been able to make a significant contribution toward a reduction in barriers to services as well as the broader national HIV response in Nigeria.

## Contribution of PITCH towards the outcomes achieved

Advocacy takes place in complex environments in which a variety of actors continuously interact. Multiple organisations are often working on similar issues, and advocates strive to increase the visibility and impact of the voices they represent. In this section, PITCH's contribution to the 123 harvested outcomes is presented and analysed. However, even where this is not explicitly mentioned, in many instances it is important to recognise the role of other actors in also contributing to these outcomes. It was beyond the scope of this evaluation to evaluate either the contribution of other actors to the harvested outcomes, or the extent to which PITCH contributed to these outcomes.

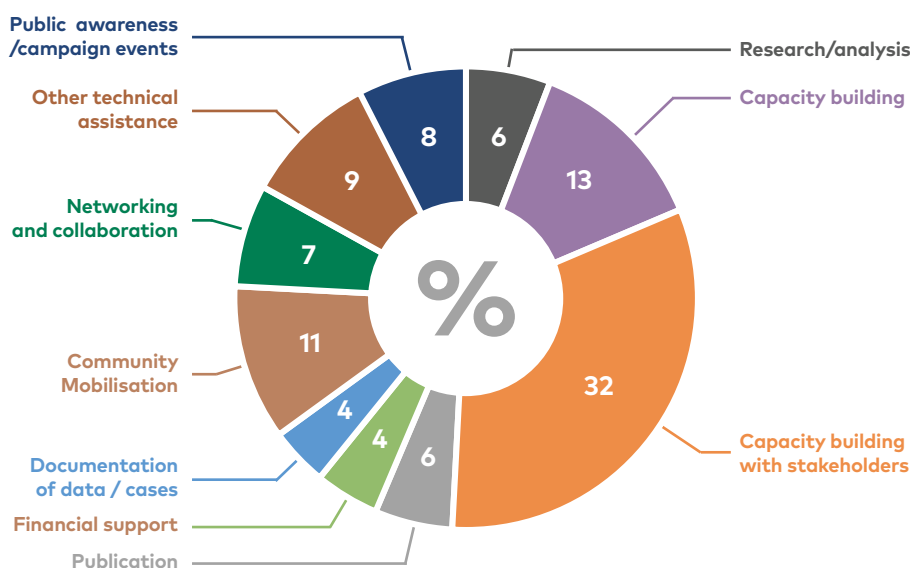
The evaluation team systematically reviewed the contribution section of the harvested outcomes, together with data from desk review, key informant interviews and focus group discussions, analysing how they were achieved in the different countries. Contributions were grouped according to the type of activities mentioned in those statements, seen in Figure 3. The findings show nearly a third of the

contributions were through lobbying and meeting with stakeholders (32%). Other contributions were capacity building (13%), networking and collaboration (11%), provision of technical assistance (9%), and public awareness/campaign events (8%).

To provide a detailed illustration of PITCH's contribution to the harvested outcomes, three themes are presented below: addressing (self) stigma (an expected short-term outcome in the PITCH theory of change); demand for services and rights increased (an expected medium-term outcome); and engagement in revision/change of policy/law (an expected long-term outcome)<sup>13</sup>.

### Addressing self-stigma

Reduced stigma and discrimination regarding HIV and the rights of key populations and adolescent girls and young women among duty bearers, the general community, and within the marginalised communities themselves, is one of the short-term expected outcomes of the PITCH programme. During PITCH's lifetime, partner organisations addressed self-stigma and stigma with the following strategies: influencing religious leaders (three outcomes, for example



**Figure 3**  
Type of PITCH contribution to all outcomes

<sup>13</sup> In the PITCH theory of change, this is written as follows: With critical mass of support, civil society holds governments to account, uses evidence from constituencies, shapes an effective funded national HIV response, and reduces barriers to services.



PITCH partner FACT who facilitated a dialogue with 30 religious leaders drawn from Manicaland in Zimbabwe); working with media (three outcomes); engaging stakeholders (three outcomes) and gaining public support/commitment (two outcomes). The activities range from the formal (organising workshops or conferences) to the informal (corridor advocacy); and from desk work (development of position papers) to field work (conducting repeated visits or organising a tour). In addressing stigma, PITCH partners also focused their advocacy efforts on the media (outcome #47/Indonesia; outcome #57/Myanmar; outcome #64/Nigeria and outcome #130/Ukraine). For example, in 2017, TIERS, a PITCH LGBT partner, organised a media training in Lagos, Nigeria, to educate media representatives about SRHR and sexuality and change the narrative of LGBT stories (outcome #64). The purpose of working with the media was to create a positive narrative about key populations and/or HIV and AIDS.

Stigma was also addressed by engaging stakeholders to create space for advocacy. The type of changes reported were the issuing of a public statement (outcome #19/Kenya), inclusion of sex workers in the national platform for sex workers' rights in Mozambique (outcome #48) and inclusion of sex workers and LGBT people in the National Youth Policy in Myanmar (outcome #69). In the case of Myanmar, in 2018, following PITCH training and capacity building support, PITCH partner Myanmar Youth Stars (MYS) changed their advocacy approach towards the Yangon regional government, by inviting their representatives to their events instead of waiting to be included in Yangon Youth Affairs Committee meetings. In 2019, MYS coordinated and engaged with youth representatives to prepare advocacy information about young key populations. They used this to inform their approach to the Yangon Regional Government to demand that they include young key populations meaningfully in the policy making and implementation process. Finally, the Yangon Youth Affairs Committee invited MYS to discuss the different needs of young key populations with the Yangon Minister of Social Welfare, to inform the implementation

of the youth policy. Also in 2019, MYS collaborated with the Yangon Region Youth Affairs Committee to organise an International Youth Day event which the Chief Minister and President of the Youth Affairs Committee attended.

Finally, efforts to secure commitments to set up by laws and to provide resources to tackle stigma and discrimination were used by PITCH partners to address stigma, as happened in Uganda where two district leaders agreed to set up by-laws to protect adolescent girls and young women against all forms of violence (outcome #32), as well as in Kyrgyzstan (outcome #96) where the Vice Mayor of Bishkek publicly committed to tackle stigma and discrimination against key population groups by signing the Zero TB Declaration. In addition, public awareness campaigns also played an important role in reducing (self) stigma. For example, in 2017, PITCH partners in Kenya created an online campaign and produced information, education and communication (IEC) materials about forced anal testing. These activities contributed to a press statement, issued by the Kenya Medical Association, to condemn forced anal testing, classifying it as a torturous act (outcome #19).

## **Demand for services and rights increased**

PITCH used a variety of activities and strategies when contributing to harvested outcomes that addressed barriers and increased access to HIV and SRHR services for key populations and adolescent girls and young women. In increasing the demand for HIV services, PITCH partners in Nigeria supported a series of consultation meetings involving national stakeholders (NACA, the Federal Ministry of Health, law enforcement agencies, local harm reduction implementing partners, and the Global Fund) resulting in a concept note for the implementation of comprehensive harm reduction which was approved by the Minister of Health in 2019 (outcome #58). In Indonesia, PITCH partner Puzzle, organised several meetings with health service facilities targeted by its advocacy strategy, which resulted in the signing of a

memorandum of understanding to provide counselling relating to HIV and STI prevention and control programmes to support officers working with men who have sex with men (MSM) and transgender communities (outcome #44).

The second set of PITCH activities that brought about significant results was the provision of capacity building. In Zimbabwe, on invitation by the Ministry of Health, PITCH partners started training health care workers on how to deliver key population-friendly services in public health care centres (outcome #144). These contributions were accompanied by financial support (9%), technical assistance (8%), community mobilisation (8%), networking and mobilisation (8%), publications (7%), public awareness (7%), research (5%) and documentation of data/cases (2%). Outcome 77 provides an insightful example of a PITCH contribution in increasing demand for HIV services using multiple activities. In Vietnam, SCDI provided technical assistance and partial financial support to the People's Committee's investigation and evaluation of drug use and drug treatment interventions. They also organised workshops with representatives from People's Committees, the Department of Social Vices Prevention, health centres, volunteer groups, and police officers. These were held to share advanced and science-based drug treatment approaches, and to plan for piloting a model for voluntary drug treatment units. The combination of these activities resulted in the development and implementation of community-based voluntary drug treatment, care and counselling units by People's Committees in five provinces. Thanks to the support from PITCH, two provinces are currently using their provincial budget to partly cover the establishment and operational costs of the model.

## **Engagement in revision/change of policy/law**

Engagement in revision or changes of policy and law is classified as long-term outcomes. Results classified in this group include the involvement of Myanmar's Ministry of Health in the review process to amend the patent law for life-saving medicines (outcome #68); the UN

recommendation to Ukraine to decriminalise drugs (outcome #127); and the reduction in arbitrary arrests among LGBT people in Nigeria (outcome #65) and sex workers in Uganda (outcome #33). PITCH's contribution to the above-mentioned results came about by lobbying and meeting with stakeholders; provision of technical assistance; networking and collaboration; development of publications; and community mobilisation.

Examples of activities under lobbying and meeting were meeting with the Ministry of Law and Human Rights in Indonesia to advocate for the involvement of key populations in the revision of the penal code, and PITCH participation in a meeting on human rights and HIV in Kenya. The technical assistance provided by PITCH partners ranges from issues around legal aid for the MSM community (outcome #71) to the development of manuals for key populations (outcome #105/Zimbabwe). Networking and collaboration were conducted in Indonesia, Kenya, Myanmar and Nigeria. Publications such as media releases, policy briefs, infographics and Photo Voice exhibitions were prepared by PITCH partners in Nigeria and Indonesia. Rallies in Indonesia and Kenya were organised, mobilising key population communities and CSOs.

## **Evidence supporting the claims of contribution – substantiation of harvested outcomes**

In the process of formulating outcomes, PITCH partners used their own records (annual reports and, to a varying extent, their advocacy logs), online searches and contact with external stakeholders to make the outcomes specific. Additional evidence was obtained through the substantiation process, aiming to enhance the credibility of the outcomes. Stakeholders who are independent of PITCH, yet knowledgeable about the programme, were asked for their level of agreement with the outcome description, its significance, and the PITCH contribution to the outcome.

Different kinds of evidence were presented by partners - 67% of the harvested outcomes include supporting evidence such as written commitments, meeting minutes, memorandums of understanding (MoUs), and/or correspondence with actors external to PITCH (the substantiators), who witnessed and participated in the advocacy process. This evidence demonstrates that PITCH partners conducted the advocacy activities that they reported in the contribution statement, and in turn, it is clear that the advocacy activities contributed to the realisation of the outcomes. It must be noted that the supporting evidence did not show whether these advocacy activities influenced the decisions taken by the social actors or stakeholders targeted as part of this advocacy. However, the advocacy carried out by PITCH partners certainly contributed to these stakeholders' decision-making processes.

For the 33% of harvested outcomes where supporting evidence was not made available, the evaluation team triangulated the outcomes through key informant interviews and focus group discussions. The data obtained strengthens the partners' claims about their contribution to the harvested outcomes. For instance, in Mozambique, outcome #123 (story of change) is the result of several activities where work "in the corridors" was carried out by PITCH partners and where the country focal point played a key role. Partners did not have records of the phone calls, email exchanges, or informal meetings they conducted to lobby the Ministry of Health (partly due to the critical need for privacy). However, despite the lack of traditional evidence available, all these activities contributed to the achievement of outcome #123.

It is clear that traditional evidence is difficult to produce, particularly when it relates to more informal conversations or 'corridor advocacy', which despite their informality still represent important activities that lead to significant results. Recognising the challenges involved in documenting evidence in these more informal settings, the evaluation team would recommend that in the future partner organisations explore opportunities to make more use of photography, audio recordings, or drawings etc as alternative

media for documenting evidence. This would reduce their reliance on more conventional forms of written evidence. It is also recommended that PITCH partners in the future consider using outcome harvesting, including the methodology's external substantiation component, to replace reliance on traditional evidence that is otherwise difficult to obtain for advocacy programmes.

### **3.1.2 EQ1.2 How has PITCH contributed to any positive or negative unexpected outcomes? What lessons have been learned, and how have these unexpected outcomes influenced partners' advocacy planning?**

**The end-term evaluation captured both positive and negative unexpected outcomes, which were mainly related to the recognition of the rights of key populations. The low number of unexpected outcomes is an indication that the outcomes as set out in the PITCH theory of change were well defined.**

PITCH is a complex programme operating in a context where many different actors play a role in the issues at stake, have their own internal power dynamics, and have high levels of socio-political uncertainty. As a result, it is to be expected that programme adaption is required during a five-year implementation period. Unexpected outcomes are not uncommon in the evaluation of lobbying and advocacy programmes, since the behaviour of advocacy targets cannot be predicted due to the complexity of the environment in which the programme operates. This section outlines the unexpected outcomes which emerged during implementation and were identified during the evaluation.

All harvested outcomes have been classified as "expected" or "unexpected" by the implementing partners<sup>14</sup>. The evaluation team defines an

<sup>14</sup> Partners were asked to answer "was this outcome expected in the context of the PITCH theory of change and plans or has this been an unexpected outcome?" during the reflection meeting.

unexpected outcome as outcomes which were not expected in the context of the programme and country level PITCH theories of change and categorised them as positive or negative (see below).

## 1 Unexpected outcome definitions

### **Unexpected positive outcome:**

an unexpected change in a societal actor's behaviour that potentially, or actually, represents progress towards the PITCH goals. The change has been influenced but not controlled by PITCH in a small or significant way, directly or indirectly.

### **Unexpected negative outcome:**

an unexpected change in a societal actor's behaviour that potentially, or actually, undermines progress towards the PITCH goals. The change has – unintentionally – been influenced but not controlled by PITCH in a small or significant way, directly or indirectly (e.g., a backlash or the setback of a campaign)

## Positive unexpected outcomes

Eight out of the 123 harvested outcomes were classified as positive and unexpected (see Annex 14). All outcomes have been categorised by the contributing PITCH partner as showing progress towards one of the PITCH goals. In all instances these outcomes contributed to at least one of the PITCH goals. The fact that this number is relatively low indicates that PITCH did well in defining its intended outcomes in the programme's theory of change which gave sufficient space to adapt advocacy planning according to needs. Rather than seeing specific learnings, these unexpected outcomes show flexibility and adaptive management by the implementing partners. This does not only apply to the unexpected outcomes but seems to be an appropriate characteristic of the programme overall.

The positive unexpected outcomes ranged from key population representatives being invited to national events (outcomes #7, #35, #118), as well

as international high-level meetings/conferences (outcomes #74, #92, #127); and launching a petition/press release to ban harmful practices and laws (outcomes #18, #19). Unexpected outcomes most frequently related to changes in relationships. The contribution that PITCH made to these outcomes was varied and included:

- meetings with stakeholders
- technical assistance and financial support
- networking and collaboration
- campaigns
- capacity building
- research and publication of results
- mobilisation of communities.

Outcome #19 on Kenya Medical Association's condemnation of forced anal testing, together with outcome #18 (facilitation of the legal fees for the counsel/attorneys/lawyers that argued the first ever decriminalisation Petition 150 in 2016) and outcome #35 (inclusion of LGBT-specific medical courses in Mukomo), represent PITCH's ability to flex and adapt. These outcomes were a result of PITCH contributions which were deliberate, creative, timely and responsive to emerging opportunities. The activities directly involved included brainstorming sessions, identifying advocacy champions, implementing the #stopforcedexaminations online campaign, producing relevant IEC materials, and building a large network of allies. Some of the outcomes were seen as unexpected because they happened as a surprise and/or were beyond expectation (outcomes #118, #92, #127, #74, #7). A common element in most of the unexpected outcomes is that they are more closely related to the recognition of the rights of key populations (people who use drugs, LGBT, adolescent girls and young women, and sex workers) instead of access to HIV services. A lesson learned from these outcomes is how advocacy requires full flexibility of the CSOs involved, using emerging windows of opportunity, speeding up or slowing down activities and building alliances. Outcome #19 illustrates this process. On 23 September

2017, the Kenya Medical Association issued a press statement to condemn forced anal testing and classified it as a torturous act. Following the press statement there was a decrease in reported number of cases of forced anal testing from 15 cases to three. The ruling affirmed the dignity of the two Kenyan men who were subjected to these horrific examinations, and it reinforced the understanding that the constitution applies to all Kenyans, regardless of their sexual orientation or gender identity. PITCH partners contributed to this outcome with a series of events, over a number of years, starting even before PITCH:

- In 2015, two gay men were charged under section 162 of the Penal Code for their perceived sexual orientation. PITCH partner NGLHRC represented them from the Resident Magistrate's Court, to the High Court to the Court of Appeal from 2015 to 2018.
- On 3rd May 2017, the office of the Director of Public Prosecution was petitioned to do away with the case. The petition gathered over 500 signatures.
- PITCH facilitated sessions which resulted in identification of a champion, Dr. Brian Bichanga, who advocated to the Kenya Medical Association to issue a statement that condemned forced anal testing.
- In 2017, ISHTAR, HOYMAS, NGLHRC, KMA, MAAYGO and KESWA implemented the #stopforcedexaminations online campaign and produced IEC materials on forced anal testing. The campaign also recruited a large network of allies including the Kenya Human Rights Commission and Human Rights Watch.

## Negative (unexpected) outcomes

In general, measuring negative change is definitely a challenge. There are different ways changes could be seen as negative, for example a backlash against a campaign. As PITCH challenges existing power dynamics, institutional discrimination, and increases the visibility of marginalised communities, resistance to these changes can be expected. PITCH partners are

aware of this and use appropriate risk management tools and approaches, however negative outcomes cannot always be avoided. At times, negative outcomes can also be a sign of positive change happening, given that a negative outcome may represent a setback as well as a catalyst for more positive change at a later, future point. The evaluators documented six negative outcomes which represented a backlash against efforts to change social norms and systemic discrimination. This demonstrates that PITCH and the issues it addresses are increasingly being heard. Partners struggle to balance potentially negative outcomes in the short-term to create long-lasting systemic change. In the case of one of the negative unexpected outcomes, PITCH partners deliberately chose not to speak out in public about an issue, for fear of "waking up" people who may dissent or advocate against them<sup>15</sup>. This is the only case where we know that deliberate effort was made to avoid a negative outcome.

## Lessons learned and how the unexpected outcomes influenced partners' advocacy planning

The harvested outcomes indicate that PITCH triggered positive and negative unexpected outcomes. Unexpected outcomes are important to measure and reflect upon, as they can hold valuable lessons as to why negative outcomes happened and how to mitigate them in future programming.

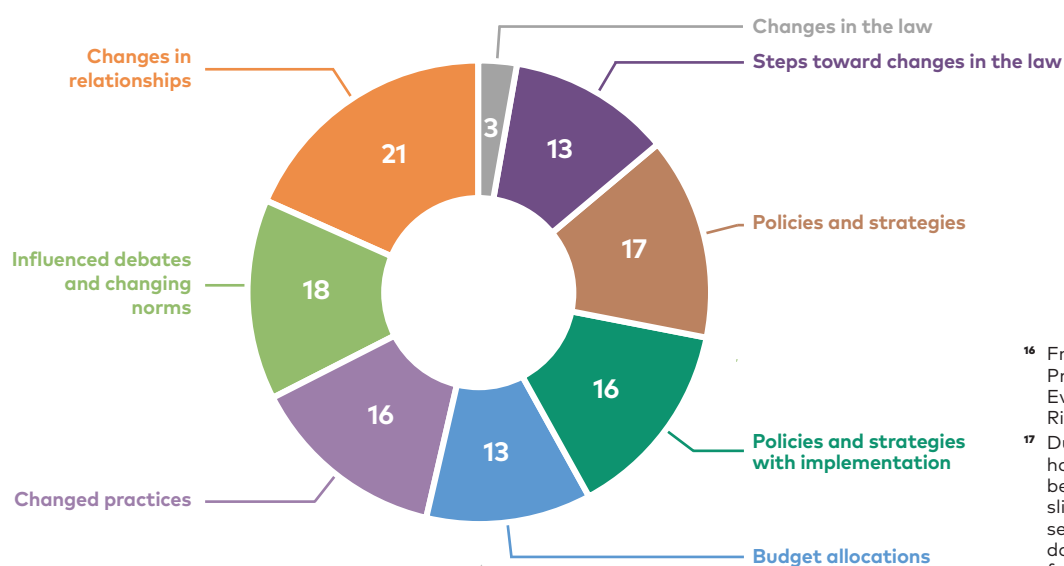
The evaluation did not observe major adaptation in terms of planning and strategies, or evidence that PITCH country partners did anything differently. This indicates that there is sufficient room within the theory of change for flexibility and adaptation when necessary.

<sup>15</sup> Outcome number not disclosed at the request of the partner organisation

### 3.1.3 EQ1.4 Reflecting on structural and legislative changes, how sustainable are the achievements of PITCH beyond the programme's lifetime, and in the absence of significant external funding?

Law reform, policy decisions, and changes in practice, behaviour and relationships are all areas where PITCH has made a sustainable contribution, and it is anticipated that the benefits will continue to be felt beyond the programme's lifetime.

Outcome harvesting defines sustainability as "the continuation of benefits from a development intervention once it has been completed".<sup>16</sup> The fact that each and every outcome represents a change in another social actor that has been influenced but not controlled by PITCH, increases the likelihood for sustainability as external actors themselves took the initiative and decided to change their behaviour. They were inspired, convinced, or learned about new ways of doing things. To help identify the sustainability of the outcomes, we organised the outcomes into seven categories<sup>17</sup> as shown in the diagram, with the number of outcomes per category indicated.



**Figure 4**  
Distribution of the 117 positive outcomes per change type

### Summary of findings

- PITCH worked on law reform in all nine countries. In two cases a new law was passed, and PITCH also successfully blocked a negative law from being passed (three outcomes in total). While sustainable, these laws do not necessarily, nor immediately, translate into positive effects for key populations and adolescent girls and young women. This low number is unsurprising as changing the law is a long-term process and difficult to achieve within the five-year life span of PITCH.
- Thirteen outcomes demonstrate important steps in the process towards (hopefully) future changes in the law. However, no confirmed legislative change was achieved in these cases by the beginning of the evaluation.
- Thirty-two policy and strategy decisions were made that will guide the behaviour of (mostly) governmental actors at the national and local level independently of PITCH and will sustain beyond PITCH's lifetime. Here, PITCH successfully improved the understanding of institutional actors on the rights of people living with HIV as well as the need for HIV services for key populations and adolescent girls and young women. Whilst these policies and strategies may only

<sup>16</sup> From Outcome Harvesting, Principles, Steps and Evaluation Applications. Ricardo Wilson-Grau, 2019.

<sup>17</sup> During the design stage, we had defined five types of behaviour change but we slightly refined these into seven categories, as per the data and inspired by the following publication: No royal road. Finding and following the natural pathways in advocacy evaluation. Jim Coe and Rhonda Schlangen, 2019.



be valid for a limited period of time - during a pilot, or dependent on people in current positions of power - they definitely set in motion a process and direction of change which will help in creating an enabling environment for the rights of people living with HIV and key populations.

- In half of the cases (16), partners indicated that these policies and strategies are being implemented.
- The 13 budget allocations will also continue to benefit key populations and adolescent girls and young women (directly and indirectly) beyond 2020<sup>18</sup>.
- Perhaps not a structural change, but definitely sustainable, are the 16 changes in the practices of individuals who act as role models, such as religious and other community leaders, judges, key population-friendly health workers, journalists or policemen. They changed their public opinions regarding issues related to HIV, key populations and adolescent girls and young women which will have a lasting effect. While not measured in this evaluation, it indicates a start in changing social norms at the community level.
- In 16 cases, PITCH influenced the public debate around HIV, key populations and adolescent girls and women by convincing influential people and the media to publicly support their cause. This is not a sustainable change in itself but important to eventually influence social norms.
- A final important element of sustainability are the 21 changes in relationships that PITCH fostered. CSO coalitions in Indonesia, Kyrgyzstan and Nigeria will continue to exist after PITCH, with or without PITCH partners directing these coalitions. Relationships between civil society and government were formalised through several platforms that will also continue beyond the lifespan of the programme. It is worth noting that participation of some CSOs, including PITCH partners, may depend on their own financial sustainability, however this was not a subject of the study.

Changes in deeply rooted societal norms, such as the acceptance of same sex relationships or a supportive attitude towards sex workers and people who use drugs, are necessary to achieve long-lasting change. The aforementioned findings demonstrate that PITCH has achieved this to an extent, however these changes are far less impactful than the formal, institutional changes and the intermediate outcomes that are ultimately required. Without support from diverse stakeholders in society, real sustainability for institutional changes achieved by PITCH is at risk or might be reversed.

## Changes in law (three outcomes)

In three cases we saw important legislative changes that will continue to make a difference beyond PITCH's lifetime, though one of them has not yet been put into practice. However, a change in law does not necessarily mean that the newly gained rights will be enjoyed by key populations and adolescent women and young girls. For the three law changes that PITCH contributed to, the situation is varied. The new law criminalising child marriage that was passed in July 2019 in Mozambique will not end the practice immediately but, since this law is the result of several years of work with a big consortium (Girls not Brides), it is quite likely that the consortium will use this key instrument in continued advocacy efforts for actual changes on the ground. A formal piece of legislation regarding access to health services for people without an ID card in Vietnam has, two years later, not yet had any effect in practice because of the complicated legal system and health insurance agencies who are not aware of the legislation. Interestingly, the opposite is true for the new privacy regulations in Kenya that are already used by key populations to demand confidentiality from health officials, whilst not yet formally approved by parliament (outcome #38, counted below as a step towards changes in law, date of expected approval not known). In Nigeria, a bill seeking to remove judges' discretion in sentencing for drug use offences

<sup>18</sup> Note that some policy and strategy changes also involve budget allocations, but given that the amounts are unknown these have not been included here.

(15 to 25-year prison sentence) was stopped as PITCH effectively mobilised support from the West African Commission on Drugs (WACD). This effectively is preventing things from getting worse (outcome #61).

This mixed picture demonstrates the complexity of “how change happens” in that a formal piece of legislation is no guarantee or prerequisite for change in practice. Of course, with these new laws, civil society now has very important tools at hand for continued advocacy.

## Steps towards changes in the law (13 outcomes)

In 13 additional cases, governments are in a clear process of crucial law reform that will not be stopped. However, a continued push from civil society is still needed so it is a pity that, with the end of PITCH, the actual achievement of these law reforms in the desired direction is not guaranteed. In most cases, PITCH worked with other organisations, sometimes including international NGOs and donors. On the one hand, this gives some confidence about the continuation by these actors to push for changes that are supportive to key populations and adolescent girls and young women. Nonetheless, PITCH often brought in the specific focus on them which might be lost now that it has ended. PITCH therefore came to an end in the middle of change processes where it undoubtedly left behind motivated individuals as well as useful draft law texts whose ultimate acceptance into law remains uncertain.

Examples of steps toward changes in law include:

- A massive step was taken in Nigeria in 2018 with the National Agency for the Control of AIDS (NACA) directing that the recommendation to lower the age of consent to 14 for HIV testing services be presented to the National Council on Health (NCH). Approval was scheduled for March 2020 but was rescheduled due to COVID-19 (outcome #66).
- In Indonesia, the President declared that public participation in the revised criminal code bill, with many relevant articles for key populations, would take place. A few of civil society's issues have already been included in the new draft (outcome #39).
- The recommendation by the UN Committee on Economic, Social and Cultural Rights to the Ukraine government to consider decriminalisation of drug possession for own use (outcome #103), opens up a lot of possibilities for civil society to continue to advocate for law reform.
- The adoption by the Kenyan government of the UPR recommendations on HIV, universal health coverage and sexual orientation and gender identity and expression rights in January 2020 (outcome #23) is an important case in point. Although this was a key milestone and a very strong tool for civil society, continued pushing of government for change will be necessary.

### Insight

*“Mid 2018, there was absolutely no organisation working on HIV/AIDS in the Universal Periodic Review. This was a big gap [PITCH] came to fill. [...] Having now the UPR recommendations is a very big thing. UPR targets duty bearers; once recommendations are accepted by government it becomes easier to hold them accountable. There is more demand for a human rights approach now..... PITCH adapted its strategies to what is possible. When you know you are going to hit a brick wall, you might as well seek for small gains that will still eventually get you to your destination..... Strategy is key and this is what PITCH brought. The recommendations are very subtle, it is a very progressive push for change in law and change in attitudes.... It opens room to have the discussion on the table.”*  
(Substantiator, Kenya)



## **Institutional policies (17 outcomes) and their implementation (16 outcomes)**

A large number of outcomes represent changes in institutional policies and practices, equally divided among national (ministries) and local governments, with a few related to international bodies such as the UN, EU or AU. These range from new strategies and policies that are yet to be implemented, to concrete decisions that have already had an impact on the ground. It is not always clear whether agreed policies have already been implemented<sup>19</sup>. For 16 outcomes, we estimate that the policy change had been put into practice. Examples are the roll out of government harm reduction programmes in Uganda (outcome #26) and Maputo, Mozambique (outcome #139); as well as the provision of free access to HIV prevention commodities for sex workers and pre-exposure prophylaxis (PrEP) as a pilot in three provinces for high-risk groups in Mozambique; and the implementation of voluntary drug treatment and care in Vietnam (outcome #77).

These outcomes have direct and concrete benefits that will be sustainable beyond the lifetime of PITCH as the changes are owned by actors outside of the programme. Another example of a sustainable decision is that in Kenya and Zimbabwe (outcomes #3, #141), the Ministries of Health lifted the restriction on providing Dolutegravir to adolescent girls and young women, while in Mozambique the same drug - that has far fewer side effects than other antiretroviral treatments - was accepted except for women of childbearing age. This shows that Mozambique is not yet as far forward as Kenya and Zimbabwe.

<sup>19</sup> In the context of this section, an outcome represents a specific change in policy or practice. In some policy outcomes, the significance sheds light on the actual implementation of the new policy, either anecdotally or more consistently.

## **Changes in practice (16 outcomes)**

Besides influencing the institutional policies and practices of government institutions, PITCH was also able to directly influence the behaviour and attitudes of health workers, police officials, and religious and community leaders. This micro-level change signifies an important step in shifting social attitudes toward people living with HIV and key populations, as well as ensuring that holders of power and key decision makers are championing the relevant issues in their community or context. While this micro-level change has less of a multiplier effect in terms of the scale of impact compared to shifts in institutional policies or practices (macro-level), it serves as an important factor when influencing community members in the contexts that they live. Having role models from communities who advocate for the rights of people living with HIV is critical to creating an enabling environment for the implementation of formal policies or legislation. Notable examples that PITCH partners highlighted during the evaluation process included:

- 66 health clinics in Uganda committing to specific, dedicated days allocated for young people, with health workers being friendly and non-judgmental (outcome #30)
- a reduction in arbitrary arrests of sex workers in Uganda, Nigeria and Myanmar (outcomes #33, #65, #59)
- PITCH partner GayA Nusantara in Indonesia becoming bail guarantor for sex workers (outcome #42)
- Bishop Khanye of Zimbabwe urging other religious leaders at a conference to be inclusive towards sex workers (outcome #107).

## **Budget allocations (13 outcomes)**

One of the most significant contributions the PITCH programme made to ensuring sustainability beyond its programme cycle was its ability to increase the available funding for HIV-related interventions or programming

through advocacy efforts. With 13 outcomes which demonstrate new national, regional and international commitments to HIV-related service provision, the PITCH programme has created new opportunities to finance critical services. These include:

- The Global Fund significantly increasing its investments to key populations in Kenya, Uganda, Zimbabwe and Mozambique (outcomes #22, #36, #109, #138)
- PITCH having influenced the EU decision in August 2019 to make an early pledge of EUR 550M to the Global Fund, representing a 16% increase (outcome #136)
- In Vietnam, Myanmar and Ukraine, governments invested in several harm reduction measures for people who use drugs. While investments may end, these outcomes are clear indications of the willingness to address health issues and the rights of key populations and adolescent girls and young women.

## **Influencing the debate (18 outcomes)**

Speaking out in public about a controversial issue can increase the likelihood of institutional change. In themselves, these outcomes are not sustainable, but are no less important a step in the process of change. Pronouncements by public figures such as judges, ministers or parliamentarians that challenge prevailing social norms are necessary to amplify the voice of PITCH partners and support eventually institutionalised changes – both in policy as well as practice. It comes across clearly in the harvested outcomes that it means a lot to the PITCH partners when they hear their voice being amplified and supported by well-known and respected people. Examples are a senior advocate in Nigeria publicly stating that sex work is not a crime (outcome #62); the chair of the parliamentary commission on health in Kenya stating that problematic drug use is a health issue (outcome #7), and a deputy minister in Ukraine emphasising the rights of women who use drugs (outcome #126).

The media has also been instrumental in influencing the public debate. In Ukraine, under PITCH, the media started to cover drug dependence, sex work, and the rights of people who use drugs and their families, as well as reducing discrimination against them. Content encouraging tolerance and evidence-based treatment is now dominating the media in Ukraine (outcome #130). Similarly, Indonesia experienced its first positive coverage of issues regarding key populations in several media outlets in 2019 (outcome #47). In Nigeria, a positive front cover story about LGTB people in 2018 represented an important inflection point in the country's history (outcome #64).

## **Changing relationships (21 outcomes)**

PITCH contributed to changed relationships between CSOs and government. As discussed under goal four (CSOs being successful HIV advocates), PITCH partners managed to improve their ability to "get a seat at the table" in formal positions in various ministerial (6) or lower governmental (4) technical working groups or advisory bodies. The impact of having advocates in key decision-making rooms will have an impact beyond the lifetime of PITCH. In addition, several civil society networks or coalitions were formed. In those cases where PITCH has been a leading partner, sustainability is uncertain. A few outcomes describe incidental meetings or invitations, useful in themselves, but it is not clear whether they will be able to continue without ongoing financial support from the programme.

### 3.1.4 EQ1.3 and EQ1.5

## What are the most effective strategies partners have used in order to achieve their advocacy asks, and if/how these strategies are connected to capacity strengthening activities of PITCH?

**The advocacy capacity of all programme partners has become stronger under PITCH and has had a demonstrable impact in terms of key populations and adolescent girls and young women being able to access HIV and SRHR services. Collaboration, evidence generation, mapping of advocacy targets, engaging with the media and legal professionals, training and increasing organisational capacity have all played a part in this.**

Strengthening the capacity of CSOs as HIV advocates is one of the goals and advocacy strategies of PITCH. Capacity strengthening took place for all stakeholders – PITCH partners and beyond – and played a major role in allowing partners to achieve their advocacy asks. As all strategies and interventions require specific capacities from partners, PITCH invested in strengthening CSOs' general and HIV and AIDS-related advocacy capacity, releasing available funding, providing training and common spaces, and supporting building of the movement within and across communities. This priority was further strengthened by the launch of a "capacity strengthening task force"<sup>20</sup> in January 2019.

In general, all partners reported that their advocacy capacity has become stronger during the programme. They mentioned that they feel empowered, and their confidence, skills, and knowledge have increased. It is clear that a new approach to advocacy has played a key role in achieving results towards key populations and adolescent girls and young women accessing HIV and SRHR services. Most of the advocacy strategies reported as being effective built on the capacity strengthening provided by the PITCH programme.

### a Working with a strategic approach to advocacy

All partners reported that under PITCH they started planning their advocacy activities more strategically, which significantly increased the effectiveness of their advocacy. The introduction of advocacy asks<sup>21</sup> has been reported as a particularly beneficial tool as it enabled partners to think more deeply and strategically about the change they wanted to achieve. The increased programmatic capacity is considered sustainable beyond the lifetime of PITCH, representing institutionalised knowledge.

In **Myanmar** for example, before PITCH, partner organisations didn't have well formulated advocacy asks or clear strategies that identified what it was they wanted to change, or how they would go about advocating for this change.

#### Insight

*"They did advocacy also before there were other projects funded by MoFA. But they just told to the decision makers to do something. Instead under PITCH they had to think what change they wanted to do, and set the advocacy asks."*  
(PITCH partner, Myanmar)

In **Zimbabwe**, partners believed that using advocacy asks in the design, formulation, and communication of advocacy agendas significantly improved the effectiveness of their advocacy, allowing them to achieve their goals. Members of the Sexual Rights Centre (SRC) specified that the introduction of advocacy asks helped them to develop a focused and structured advocacy process.

#### Insight

*"The advocacy strategy formed the basis of all the advocacy for the organisation across the different projects, even those outside PITCH"*  
(PITCH partner, Zimbabwe)

<sup>20</sup> PITCH annual report 2019

<sup>21</sup> An advocacy ask is a statement developed by a PITCH partner that identifies the specific change they seek to contribute to through their planned advocacy work.

*"There was initially a lot of confusion with regard to the advocacy asks, because they were developed for us by a consultant and our work was to implement the same." We realised this was very difficult. PITCH brought in their M&E experts to build our capacities on actually developing the advocacy asks. After that, we are now developing our own advocacy asks, and are also able to develop our own activities and work plans based on those advocacy asks. (PITCH partner, Kenya)*

The increased programmatic capacity is considered to be sustainable and was presented by participants in the key informant interviews and focus group discussions as institutional knowledge.

## **b Coordination and collaboration**

"We fight as a family, helping each other wherever and whenever." (PITCH partner, Nigeria)

Advocating collectively, thereby unifying voices, was reported as one of the most effective advocacy strategies that enabled PITCH partners to achieve important results. They reported that they have started to work more "holistically" and are now collaborating with other CSOs and MoFA-funded programmes (this is addressed in section 3.2.5). Under the "PITCH umbrella" partners started identifying similar goals and strategies, strengthening their relationships and collective advocacy work. Of all the harvested outcomes, collaboration and coordination is a key factor, boosting the success of the advocacy process. This is not surprising, as advocacy is inherently a collective process. However, working together effectively needs capacities and collective strategies, as mentioned by a PITCH partner in Zimbabwe where the coordination and collaboration among all partners was a determining factor in achieving key population-friendly healthcare services (outcome #144). *"It was not an issue of all of us being at the forefront. We [at SRC] were fully supporting of the organisations leading the process. If we had then all been there at the forefront, there would also be issues around*

*stepping on each other's toes. So, it's better to acknowledge one lead organisation and everyone else can offer the technical or whatever support that they can give to fully equip them with evidence."* (PITCH partner Zimbabwe)

Being a part of PITCH strengthened the capacity of partners to identify internal linkages with local partners in their countries and external linkages across regions, which ultimately led to cross-learning and stronger coalitions.

The coordination activities and regular meetings conducted by the country focal points helped overcome tensions and friction between partners. *"Aidsfonds and Frontline AIDS had a great interest in seeing the organisations plan together but since organisations did not use to plan together before they did not have the same advocacy objectives, the activities were different, and there was forced intersection which was not so beautiful initially."* (PITCH partner, Mozambique)

The regular coordination meetings meant that all partners were able to better understand what other organisations were doing. Gaining a clear vision of the challenges faced by each community enabled them to acknowledge that the challenges they face are not exclusive to their work, but cross-cutting. As a result, they were able to identify opportunities to streamline efforts to maximise their resources and increase their collective impact.

*"This change in coordination is important because when you advocate only for one group you are weaker. But when you have more people from different communities raising the same problem and bringing evidence, your movement becomes stronger."* (country focal point, Mozambique)

A variety of PITCH partners reported during key informant interviews and focus group discussions that developing strategies together resulted in several gains including stronger advocacy efforts, individual and organisational empowerment, as well as increased knowledge sharing. In Kenya and Indonesia, interactions between bigger and smaller organisations allowed the latter to

expand their network, build new capacities and connect with relevant stakeholders. *"Bringing in both the strong and the younger organisations was one of the beautiful strategies of PITCH. This is capacity strengthening in a very indirect way."* (country focal point, Kenya)

At the same time as improved internal collaboration within the PITCH programme, partners were able to build and strengthen networks with external CSOs. It is part of the overall PITCH programme strategy to ask partner organisations to collaborate with other CSOs outside of PITCH in order to expand their influence. In Mozambique, Uganda and Ukraine, several new platforms and coalitions were created under PITCH (see EQ 2.4 for more detail).

In **Indonesia**, PITCH partner Yakeba worked with a limited network before its involvement in the programme. However, one of the most influential parts of its work now is how it routinely brings together key population networks at the national level to build joint strategic campaigns related to health issues and HIV and AIDS.

## Insight

*"PITCH makes us strong by putting us - the different key populations - together in one advocacy programme.... PITCH strengthened our capacity by facilitating the PITCH annual policy summit. We learned different techniques (world café, being a panellist), different technical content, met many people (members of parliaments, MoFA).... they involve us in everything, and this creates a high sense of ownership."*  
(country focal point, Indonesia)

In all countries, the improved collaboration among partners was mentioned as one of the most sustainable changes that occurred under PITCH. In Myanmar, for instance, Community Service for Friends used to work alone on harm reduction-focused advocacy work. However, now they have a strong coalition with other CSOs also pushing this agenda forward. Even without further PITCH funding, they are confident in their newly acquired skills to continue to engage parliament and mobilise stakeholders.

## c Generation and use of good evidence

All partners reported that generating good quality evidence, and using it appropriately, has contributed appreciably to the success of their advocacy. PITCH partners have highlighted how the capacity to generate and use evidence for their advocacy work has been strengthened, in some cases even created, by the PITCH programme. Many PITCH country partners also reported on activities using evidence – either generated by themselves or others – to support their advocacy.

Outcome #84 in **Vietnam** provides an insightful example of how the use of evidence allowed SCDI to achieve its advocacy goal of ensuring health service access among key populations and adolescent girls and young women. SCDI produced numerous stories about vulnerable people, who did not have access to health insurance due to lack of identity papers, being able to lobby the Department of Health Insurance (DHI) for three consecutive years. They also produced a short video<sup>22</sup> about administrative barriers faced by sex workers, transgender people and people living with HIV in accessing health insurance. This was then shared with the DHI as policy evidence. In 2018, after a long process, the government issued a decree allowing people without an identity paper to buy health insurance.

In **Kenya**, using good evidence was key to achieving important results such as the government lifting the restriction to Dolutegravir for women of reproductive age (outcome #3, story of change); the acceptance of recommendations made by UN member states about HIV, UHC and SOGIE (outcome #23), and the development of county plans to address HIV and AIDS. *"When you bring evidence to the table, you are presenting facts that people cannot deny they exist. We felt this was an integral part in policy advocacy, bringing in the evidence, and even when we wanted the Counties to include*

<sup>22</sup> Video produced by SCDI <https://www.youtube.com/watch?v=Udlepm3orPY>



*recommendations on young key populations, we brought in evidence of studies that had been done on these young key populations."* (PITCH partner, Kenya)

Understanding the value of gathering and using evidence, as well as ensuring the use of knowledge management systems to track advocacy, was an important step in measurably strengthening the advocacy capacity of PITCH partners. Through the introduction of new technology to enhance data gathering and knowledge management, PITCH partners were more able to systematically track and monitor

their advocacy activity. In all countries, PITCH facilitated training to use the reporting systems Wanda, Ona and REAct. Wanda<sup>23</sup> was introduced to all partners in July 2018, and training was provided across all countries except Vietnam.<sup>24</sup> While all partners that received training mentioned how Wanda has helped their advocacy activities, REAct was mentioned as supportive only in Kenya, Uganda, Zimbabwe, and Mozambique. Sex worker communities in Indonesia, Myanmar and Mozambique reported a significant increase in their capacity to collect and use evidence through Ona.



Hannington Mutabarura,  
Monitoring and Evaluation  
specialist, International  
Community of Women living  
with HIV/AIDS Eastern Africa

## 2 Wanda and REAct

**In Mozambique,** members of the sex worker community collected evidence about violence and discrimination which is used in monthly meetings with law enforcement officials to discuss how gender-based violence is escalating in each region. Some of these cases, when the perpetrators are identified, are even brought to court.

*"The Wanda system helped us a lot because we did not have any monitoring and evaluation tool that helped us collect qualitative data."* (PITCH partner, Mozambique)

The community of people who used drugs highlighted the role of the REAct system which, according to their focal persons, is used to document cases of abuse and aggression. The system has reportedly helped them in conflict managing complicated situations between people who use drugs and people outside the community.



The documentation of the experiences of key populations through Photovoice was another important skill gained by PITCH partners. Partners from Nigeria, Uganda, Myanmar received internal staff training by the charity PhotoVoice which provided workshops for young advocates<sup>25</sup> over a two-year period. All partners indicated positive responses to this training and the new skillset they acquired as a result.

In general, all partners reiterated during the key informant interviews and focus group discussions that their newly acquired skills around evidence-based advocacy will be used and implemented beyond the PITCH programme. The introduction of technology and digital tools to strengthen knowledge management and advocacy are harder to measure in terms of their sustained use as they require financial resources to maintain. In Nigeria, Uganda and Myanmar, partners indicated that they will keep using the advocacy tool Photovoice. However, the use of the reporting systems (Wanda, REAct and Ona) is more complex as these are paid services that require administration, which until now PITCH has done for partners. Partners indicated that they are interested in continuing to use these systems, but at data collection level they were not sure under what conditions they would be able to do so. A three-month transition period (Q1 2021) has been established by the PITCH M&E working group during which PITCH Wanda users can publish any final PITCH-related advocacy logs, download their logs, and seek technical guidance and advice from Frontline AIDS. After 31 March 2021, Wanda will cease to be used to publish advocacy logs by PITCH partners. However, options for documenting advocacy logs that do not need access to Wanda have been presented and will be discussed further in Q1 2021<sup>26</sup>. It is important to note that maintaining some systems, critical to the strengthened capacity of organisations, requires financial resources that are often not available after the conclusion of the programme.

<sup>23</sup> Wanda is a web-based system (DHIS2) that allows partners to track and document their significant moment of change (positive/negative) whenever they happen (like a diary), (PITCH Wanda user manual, version 4.1).



## 3 Photovoice

In Nigeria, PITCH partners TIERS, WHER, ICARH and IAH reported that by using Photovoice for the healthcare petition, they learned how to use evidence to develop policy briefs. YouthRise mentioned that the community of people who use drugs used visual material produced through Photovoice to engage key members of the Federal MoH, showing them the links between comprehensive harm reduction and the national plan (outcome #58).

*"The use of photos and captions to communicate has helped us a lot especially whenever we have a conference and we need to communicate our achievements."*  
(PITCH partner, Nigeria).

## d Mapping advocacy targets and stakeholders

Understanding when to engage with stakeholders and with whom has been extremely beneficial for increasing advocacy results. For instance, in Vietnam, SCDI members reported that before their involvement with PITCH they used to set ambitious advocacy targets. In the case of the Sex Reassignment Law (outcome #82), the LGBT group initially identified the National Assembly (Committee of Social Affairs) as their advocacy target. They then realised other actors were involved and decided to split the target into smaller groups, addressing each of them through different activities. The National Assembly reached out to SCDI requesting their review of the Residence Law, the Law on HIV/AIDS Prevention and Control, and the Labour Code. In September 2019, the National Assembly invited the MSM community to participate in revisions of the Health Insurance Law and HIV Law. Multiple partners noted that being able to effectively map stakeholders was a skill that supported their ability to conduct HIV advocacy.

<sup>24</sup> In Vietnam, SCDI had been granted exemption from using Wanda on the grounds that they use another reporting system.

<sup>25</sup> PhotoVoice and PITCH summary report, December 2019

<sup>26</sup> Wanda sustainability plan 2020

Partners in Zimbabwe and Uganda specifically flagged their increased capacity to identify and map the right external stakeholders to target with advocacy strategies, as well as their improved ability to engage them in the process. In Zimbabwe, ZYP+ recognised that “they now know how to approach and who to approach with their issues”.

## **e Engaging with media**

In **Kenya**, the media was engaged with either for the purpose of reaching a wider public (in the case of the Dolutegravir campaign), or when shaping public opinion<sup>27</sup> and contributing to addressing social norms and values on HIV prevention and control, including for people who use drugs. In Kenya, during the Dolutegravir campaign (outcome #3), the media helped advocacy efforts by publishing information about one woman's experience of the treatment<sup>27</sup>. And in Indonesia, PITCH partners used the media when engaging in the process to revise the country's penal code. Engagement with the media varied and included press releases,<sup>28</sup> interviews and talk shows<sup>29</sup> (outcome #39).

Similarly, GayA Nusantara and IPPI became involved with print and online media in shaping the narrative about HIV prevention and control for the LGBT community in Bali (outcome #47). In April 2019, PITCH partner ACO “Convictus Ukraine” held a training session for local and regional journalists (15 representatives from 10 cities in Ukraine). And in July 2019, the organisation announced a national competition for journalists on the theme of “Drug Dependence. To Know in Order to Help” (outcome #130). In **Nigeria**, NSWA organised a street march<sup>30</sup> and a press conference<sup>31</sup> to protest illegal arrests of women accused of being sex workers. The media was used to shape public opinion on the decriminalisation of sex workers ahead of a court hearing on their arrest (outcome #62).

<sup>27</sup> <https://www.the-star.co.ke/health/2019-04-10-we-want-dtg-drug-young-women-with-hiv-tell-ministry/>

<sup>28</sup> <https://bit.ly/3cwkll4> and <https://bit.ly/3i4gcw2>

<sup>29</sup> <https://bit.ly/2GacELs>; <https://bit.ly/2EwL22M>; <https://bit.ly/3i2ceUV>

<sup>30</sup> <https://bit.ly/3i2QND9>

<sup>31</sup> <https://bit.ly/3i28m6l>

## **f Engaging with legal professionals**

Key populations' engagement with numerous legal issues and professionals has been used as strategy by some PITCH partners. In Myanmar, SWiM worked with the Anti Human trafficking branch of the police to advocate for the respect of human rights for sex workers (outcome #60). The discussion emphasised the need to collaborate with government institutions, including the courts, to change the way cases are currently handled. Following this, SWiM started receiving timely information about human trafficking or when a court needs to find a pro bono defence lawyer for a case involving sex workers. PITCH partner OPSI in Indonesia has been providing paralegal assistance for the sex worker community at provincial level, in collaboration with the office of legal aid. This has supported sex workers who have experienced many forms of violence (physical, sexual and psychological) and drawn attention to their cases among legal representatives and lawyers in Indonesia (outcome #46). In Uganda, WONETHA collaborated with paralegal officers to address the rights of sex workers and violations occurring against them. Involvement of legal practitioners supported the reclaiming of their rights so that they can resume their work in an appropriate way (outcome #33). For PITCH partners in many countries, engagement with legal professionals enabled them to learn the legal aspects and processes relevant for key populations, and this was perceived to be useful in their advocacy activity.

## **g Training and specific technical knowledge**

Technical knowledge in different thematic areas, from SRHR to patent laws, has helped partners achieve their advocacy asks. On the one hand, it has helped partners to advocate and identify appropriate advocacy strategies (outcome #86, Myanmar), and on the other it has allowed partners to provide training for advocacy targets and stakeholders. For instance, in Uganda partners reported that steps toward a more inclusive and key population-friendly health system were initiated thanks to a training

session for health workers organised by TEU on SOGIE (outcome #35). The focus was on the barriers faced by transgender people and helped change health workers' attitudes towards the LGBT community. Afterwards, one doctor who had attended became the key population focal person at the health facility, supporting a more inclusive health service. A community member reported that "we are now able to dialogue with health workers as transgender persons".

PITCH has strengthened partners' technical knowledge of relevant HIV topics. In Uganda, staff capacity and knowledge about SRHR and SOGIE have been improved because of specific training (see EQ1.6) provided. In Mozambique and Zimbabwe, there has been increased capacity in the area of human rights, HIV and AIDS, and SRHR with the SOGIE training described as particularly impactful. These strategies and capacity resulted in further sustainable achievements. However, while in Uganda the strengthened capacities have been reported as sustainable, in some other cases, such as Nigeria and Myanmar, it was reported that the improved capacity was increased more at an individual level than organisational, which makes it less sustainable for organisations.

## **h Informal advocacy**

Private meetings, lobbying in "the corridors" and informal gatherings have been reported as very effective advocacy strategies. Informal advocacy strategies emerged in various formats: dialogues, participation in meetings/events, and engagement with particular influential groups (including the media). Such activity may occur within the context of international events (World AIDS Day or International Hepatitis C Prevention Day) or as part of capacity building activities, and regular or occasional meetings. Various stakeholders are involved such as government officials, health workers, academia, representatives from Dutch embassies, funders/donors, international organisations/NGOs, colleagues from other CSOs, community leaders, religious leaders, and community members. For instance, the country focal point in Mozambique reported that to

achieve outcome #123 (story of change Mozambique), informal activities played a central role. Private meetings with advocacy targets, email exchanges and constant lobbying ensured that representatives from UNDP-Mozambique, the Ministry of Health, the National AIDS Council, and the Maputo National Health HQs attended the UHC workshop organised by PITCH partners. During this time, the Ministry of Health's National STI/HIV Programme focal person publicly committed to include transgender women as a key population in the next National Strategic Plan for HIV/AIDS (2020-2024).

The benefit of informal advocacy is that it does not require specific training or other forms of capacity building, although it is more difficult to measure the outcome of these activities. Interestingly, PITCH partners in Mozambique and Myanmar reported that under the PITCH programme they started to implement it more systematically.

## **i Engaging the community**

Partners from Zimbabwe, Vietnam and Uganda reported that engaging key populations and adolescent girls and women in advocacy has strengthened the whole advocacy process. In Uganda, PITCH partners started to focus on community champions and bridging the gap between key populations in the community and organisations working on advocacy.

*"The gap that was bridged between organisation with the community through ambassadors and advocacy champions was a very key benefit."*  
(FGD Participant - Community Member)

In **Zimbabwe**, partners reported their advocacy strategy benefited from involving "communities that are the recipients of the services from the start. It was important to have the beneficiaries articulate the challenges and issues that they are facing and also to bring them before decision makers in platforms and then also create training around understanding the needs for different key population groups." (Zimbabwe PITCH partner).

In **Vietnam**, the community is now strategically involved in the identification of issues and consultations around policy alternatives (*outcome #144*). Furthermore, as a result of the awareness-raising activities conducted by SCDI, those representing key populations and adolescent girls and young women report feeling more confident, positive, and experiencing less self-stigmatisation. Whilst this is a positive result in itself, it also contributes to achieving advocacy asks through the improved capacity and ability to more effectively engage in the policy making process. They can directly bring their voice, needs, and priorities to the policy table.

## Capacity to engage with global advocacy

During the first half of the programme, there was limited collaboration and engagement between PITCH partners at the country and global policy levels. Despite this, by the end of the programme, all country partners reported that they learned about the mechanisms and processes of global advocacy through their involvement in the PITCH programme. In particular, learning about the Universal Periodic Review and how it can enable national efforts, was particularly relevant for partners in Kenya, Nigeria, Myanmar and Mozambique.

In Indonesia, partners specified that their capacity to understand global advocacy increased through training with an improved understanding of issues related to fulfilling universal health coverage rights. Partners from Ukraine also reported that engaging in global level meetings played a significant role in strengthening their capacity to advocate with global partners and stakeholders. In Mozambique, partners described that due to their participation in international conferences, their capacity in advocating for young people with HIV increased drastically. For PITCH involvement in the UPR process in Kenya, Nigeria and Myanmar, please see section 3.2.1.

Training on international processes and mechanisms was provided to country partners

with the support of global policy partners. This included the UPR workshop in Kenya for partners from Kenya, Nigeria and Myanmar; the UHC meeting in Vietnam, which was attended by partners from different PITCH countries and sparked a national discussion on UHC in Kenya; a training session on the Voluntary National Review for PITCH partners in Indonesia; and a train-the-trainers workshop run by the International Drug Policy Consortium for partners in Nigeria.

### Insight

*"So, there is the capacity support and also creating the spaces for the key populations. These include taking part in the Universal Periodic Review conversations; Universal Health Coverage conversation, and also the platforms of international advocacy, by attending the international Conferences, to get to know about the latest advocacy agenda. With this kind of support, we are able to improve our advocacy levels, and this is capacity strengthening. The continuous mentorship, at least this went well." (PITCH partner, Kenya)*

## Better engagement with advocacy targets

All PITCH partners reported that under PITCH they could engage more effectively with influencers in decision-making processes, particularly the government, community and religious leaders, and the police. The examples given below demonstrate some of the different ways in which capacity was strengthened, leading to demonstrable improvements in advocacy processes.

In Uganda and Zimbabwe, PITCH improved partners' networking abilities through training which enabled them to more effectively engage key advocacy targets such as ministers and the police. In Uganda, members of the community of people who use drugs reported being able to access parliamentary spaces and present their issues directly to MPs. A better relationship was also reported by the LGBT community: *"I see there is collaboration now strengthened. e.g., police now take quick action towards our issues.*

*Now we have networks and friends through PITCH.” (FGD Participant - Community Member, Uganda)*

PITCH was said to have enabled networking between advocacy targets like the Ministry of Health and the police through meetings and trainings where key populations and advocacy targets were also present. Initially, it was difficult for key populations to meet with them given the unfavourable context in Uganda.

In **Zimbabwe**, GALZ described better engagement around LGBT issues with the ruling political party ZANU-PF, which has traditionally been unsympathetic to the LGBT movement.

In **Myanmar**, all organisations reported their capacity to engage with advocacy targets increased thanks to PITCH training and the learning of new strategies to improve their advocacy processes. One partner reported that their newly acquired skills supported them to build trust and establish good working relationships with the Myanmar National Aids Programme, Ministry of Home Affairs, and Ministry of Health and Sport. These relationships will be integral to their ability to sustain and strengthen local advocacy efforts.

In **Vietnam**, thanks to the financial resources and technical support from PITCH, partners reported that SCDI's position among key policy actors was significantly reinforced, and the partnership between SCDI and other stakeholders has improved remarkably. Key populations are now able to actively participate in policy formulation processes for policies relating directly to them.

## Increased internal organisational capacity

Organisational capacity<sup>32</sup> for PITCH partners was strengthened through specific training and workshops, but also through cross-organisational learning through the new partnerships and collaborations encouraged by the programme, and the international learning visits.

Increased internal organisational capacity both impacted the ability of organisations to do their work, but also improved their reputation and credibility. The Dutch embassy acknowledged the significant and observable increased capability of PITCH partners to conduct advocacy. It was reported that members of the organisations became more “visible” and “sound” in their advocacy initiatives at local and national level.

The evaluation found that financial management and organisational security were two areas that were generally weaker and addressed in training sessions in Kenya, Indonesia, Mozambique, Uganda and Zimbabwe. Partners indicated improvements in both these areas.

In **Mozambique**, partners reported that under PITCH organisations learned a variety of skills which enabled them to work more closely with their communities. For instance, Coalizao now uses a new tool for social intervention called “interactive theatre” which supports them to engage more meaningfully with adolescent girls and young women.

Improved language and technical capabilities were also developed over the course of the programme. As was highlighted in the Capacity Strengthening Task Force Action Plan 2019, English was a significant capacity gap for partners in Myanmar and Mozambique. It represented a barrier to connecting with global advocacy movements and an obstacle for organisational growth. Interviewees from both countries reported that English courses were among the most important capacity strengthening activity. As a result of their improved language skills, staff members are now able to participate in meetings with international organisations, attend conferences in English, and assist in the translation of important documents relating to PITCH and other programmes.

<sup>32</sup> Organisational capacity is defined as the set of processes, management practices, or attributes that assist an organisation in fulfilling its mission.



### **3.1.5 EQ1.6 To what extent has the capacity of PITCH partners to apply a gender-sensitive or transformative approach to their work been strengthened? How has this been achieved? What impact has this had on the outcome of PITCH country level advocacy activities?**

**Gender-sensitive, and in particular gender-transformative, approaches were a relatively new concept for many PITCH partners, and this is an area where they are now able to critically reflect on how gender norms and attitudes shape interactions, workplaces and programme activities. Their increased capacity has resulted in initiatives to remove gender barriers to services and advocacy on gender equality.**

The following section assessed the extent to which PITCH partners applied a gender-sensitive or gender-transformative approach by exploring the five dimensions of a gender-transformative HIV response<sup>33</sup>.

The findings in this section, as well as the following for EQ 1.7, are the result of an analysis of key informant interviews (with country focal points and implementing partners in each PITCH country, and the PITCH gender lead), focus group discussions (with key population representatives in all countries), harvested outcomes, and a desk review of country annual reports. Both questions are informed by key PITCH publications<sup>34</sup>.

The ability of this evaluation to fully assess the capacity of partners to apply gender-sensitive and gender-transformative approaches, and PITCH's contribution, has to some extent been hampered by the lack of baseline data on this issue. Instead, the analysis below is informed by the qualitative assessment made by partners and country focal points themselves (in the key informant interviews, focus group discussions and annual reports). Therefore, it is important to note the limitations and bias in self-reporting.

The findings regarding partners' capacity as presented below are illustrated with various examples, but the list is not exhaustive. Although in most cases reference is made to the name of the implementing partner, data derived from focus group discussions did not always give this.

### **To what extent has the capacity of PITCH partners to apply a gender-sensitive or transformative approach to their work been strengthened?**

Whilst gender-sensitive and transformative approaches were not built into the PITCH programme from the onset, increased capacity building and the establishment of the gender taskforce dramatically improved the ability of partners to apply these approaches in their work. Of particular note is the increased attention and efforts of PITCH partners to identify and address the gendered needs of key populations through their interventions. This included working with female sub-populations within key populations (people who use drugs, male sex workers and transgender women), addressing gender-based violence concerns (especially for sex workers and transgender populations), and working to meet the needs of LGBT groups. A gender-sensitive or transformative approach was shown not only the inclusion of more women in the programme but also specific considerations being paid to different genders' needs or the gendered experiences of specific groups such as male sex workers.

Here, we outline some of the key successes of PITCH partners in applying a gender-sensitive or transformative approach.

- In **Ukraine**, partners had a particular focus on increasing the visibility of women who use drugs and strengthening the voice of this

<sup>33</sup> The five dimensions are adapted from the Gender at Work framework and set out in PITCH publication "What does it take to achieve a gender-transformative HIV response?" They consist of 1) Critical reflection on how gender norms, attitudes and beliefs are shaping interactions, work places and programme activities; 2) Addressing internalised harmful norms and discriminatory attitudes held by individuals and communities most affected by HIV; 3) Removing gender barriers to services; 4) Transforming social and gender norms in communities and society; 5) Advocating to change and reform laws, policies and resource allocations to achieve gender equality.4) Transforming social and gender norms in communities and society; 5) Advocating to change and reform laws, policies and resource allocations to achieve gender equality.

particular group in advocacy efforts. Similar approaches were seen in Indonesia, Kenya, and Uganda.

- In **Indonesia**, a gender-sensitive or transformative approach was found across a variety of partners' work including with key populations and adolescent girls and young women with specific attention paid to the respective needs of male, female and transgender sex workers.
- In **Kenya**, increased capacity building around gender led to specific interventions focusing on boys and young men in order to promote the SRHR of adolescent girls and young women. Male engagement on SRHR is a critical tool to that ensure women and girls are able to participate in informed decision-making.

Overall, increased capacity was most commonly demonstrated through the critical reflection of partners on how gender norms, attitudes and beliefs shape interactions, workplaces and programme activities. This led to subsequent changes made in their organisational practices and in programme approaches which should lead sustainable change. Various partners have taken measures to diversify their work force or enhance gender balance in the organisations. In Nigeria, IP TIERS increased the number of women and non- binary staff. They also restructured their paralegal programme to expand the recruitment of paralegals from MSM to other groups in order to increase reporting by lesbian, bisexual and queer (LBQ) women. In Myanmar, CSF recruited women who use drugs, and MTSTM changed their name from Myanmar MSM Network to Myanmar MSM and Transgender Network. They also changed their vision and elected a transgender person to the executive committee.

Various partners developed an internal gender policy under PITCH, to ensure greater inclusion in programming such as IP GALZ in Zimbabwe,

or SCDI in Vietnam. In Ukraine, partner Hope and Trust supported a group of women who use drugs to start their own organisation and build a movement of community activists (see story of change, annex 10). Partners' increased focus on gender was also visible in evidence generation and research related to specific gender groups within a key population such as women who use drugs, and studies on the SRHR of key population sub-groups.

Whilst the above section demonstrates that a large number of partners engaged in critical reflection on harmful gender norms and discriminatory attitudes, addressing internalised harmful gender norms and discriminatory attitudes within the wider key population community was less effectively implemented. Exceptions include partners in Ukraine that implemented activities to reduce self-stigma among women who use drugs, sex workers and adolescent girls and young women. In Nigeria, WHER led workshops looking at internal attitudes and bias for LBQ women to build awareness of gender norms, stereotypes and harmful practices, in order to support LBQ women to recognise and resist societal expectations and pressures. In Mozambique, MOZ-PUD hired a female secretary general as a role model for other women who use drugs, and examples of promoting role models were also found in other countries. A few partners also provided human rights training to adolescent girls and young women and key populations, such as the human rights literacy programme run by GALZ in Zimbabwe with 180 members of the LGBT community and which included a strong focus on intimate partner violence.

The increased capacity of partners in this area was demonstrated through various partner interventions that seek to remove gender barriers to services. In all countries, at least a few such initiatives were implemented and focused on using improved data collection, for training on engaging advocacy targets to improve access to services for specific gender groups (see section EQ 1.5 and the use of Wanda and Ona). Notable examples include:

<sup>34</sup> Publications used include "What does it take to achieve a gender-transformative HIV response?" (<https://frontlineaids.org/resources/what-does-it-take-to-achieve-a-gender-transformative-hiv-response/>); PITCH Gender Strategy; PITCH Gender Presentation for Country Coordinators; PITCH Gender Working Group Acceleration Plan; and PITCH Gender Working Group workplan 2020.

- Workshops with local police, using the results of the documentation of SOGIESC<sup>35</sup>-based violence, stigma and discrimination cases by Indonesian partner GAYa Nusantara.
- Sensitisation of Kenyan country health management teams on gender norms and how to use gender-sensitive language to be all-inclusive to transgender people.
- SRC setting up a 'rapid response' programme in Zimbabwe to ensure sex workers have quick access to legal representation, to documenting rights violations. SRC used this evidence to produce a report on the high incidence of violence against sex workers to advocate with policy makers.
- In various PITCH countries, partners actively engaged in advocacy for women and adolescent girls' access to Dolutegravir (see story of change from Kenya, annex 10).

Partners' capacity in respect of gender-sensitive and transformative approaches also expressed itself in advocacy initiatives, across all PITCH countries, to change and reform laws, policies and resource allocations to achieve gender equality. As an example, in Mozambique Muleide & Coalizão advocated for the rights of girls by co-organising the National Girls' Conference where young people presented position papers demanding the revocation of Ministerial Order 39/GM/2003 which obliges pregnant girls to attend high school classes at night. In Vietnam, SCDI undertook advocacy work to build public support for the Sex Reassignment Law.

Partners also engaged in various initiatives to improve the participation of specific gender groups within the key populations community in policy formulation or law drafting processes. One Kenyan partner advocated for women who use drugs to be a population of interest for the National AIDS and STI Control Programme, and for them to have a voice in developing the national guidelines on how to work with them. In Ukraine, partners advocated for a quota for women who use drugs in the local and national coordination mechanisms for HIV. In Uganda,

TEU conducted evidence-based advocacy on transgender women and transgender sex worker priorities to be addressed in the national HIV and AIDS priority action plan. This contributed to the inclusion of a trans representative as a new member of the technical working group at Uganda's AIDS Commission. In Mozambique, LAMBDA and Pathfinder pushed for the inclusion of trans women in the National Strategic Plan for HIV and AIDS.

Finally, partners' capacity to apply gender-transformative approaches expressed itself in various actions to transform social and gender norms in communities and society. Again, such initiatives were found to have taken place in all PITCH countries. Under PITCH, various partners started or continued generating evidence about gender-based violence, including by using Wanda and Ona software and Photovoice methodology, such as the case of sex workers in Mozambique where an increase in evidence-based advocacy to address gender-based violence was witnessed. Several partners also conducted, or were involved in, campaigns addressing gender inequalities and gender-based violence, for instance on the occasion of the 16 Days of Activism, World AIDS Day and Human Rights Day. One example of this is the Photovoice exhibition held by MYS Myanmar during World AIDS Day which exposed gender inequality among young key populations.

A group of partners also addressed harmful gender norms and practices through community dialogues and partnerships with stakeholders, such as community and religious leaders. An example of this is TIERS' work in Nigeria which addressed the root causes of gender equality in their training sessions for health care workers, media houses, and religious and traditional leaders (e.g., values clarification exercises). The sessions tackled religious texts and cultural values supporting gender inequality. A number of partners actively trained and supported young people to champion community activities, such as in Kenya where LVCT Health encouraged discussion about harmful gender norms and practices through youth advisory

<sup>35</sup> Sexual Orientation, Identity and Expression, and Sex Characteristics

champions for health, composed of young people in all their diversity. Several partners engaged with the media, such as WONETHA in Uganda who tackled the portrayal of female sex workers. Finally, various partners implemented (social) media campaigns to raise awareness about issues of gender inequality and gender-based violence. In Nigeria for instance, EVA ran a concerted social media campaign to raise awareness on sexual and gender-based violence affecting adolescent girls and young women. Using survivor stories, the campaign raised public awareness of the prevalence and impact of gender-based violence and promoted a new Sexual Harassment Bill, while calling on decision makers to strengthen laws and policies on sexual and gender-based violence.

## How has this been achieved?

Although a number of gender-sensitive and transformative activities were implemented in the first half of the programme, the increase in capacity among partners has been most notable in the second half after the gender working group was established. Increased allocation of human and financial resources for gender at programme level allowed the working group to develop a budgeted workplan to strengthen gender-sensitive and transformative approaches in the final two years, and to give more visibility to partners' gender-related work. In addition, the technical assistance to country partners increased during this time which supported their ability to implement changes in their programming. Using webinars, the gender working group provided partners with gender training sessions on advocacy and on demand they also provided in-country gender training, while partners in some countries arranged similar training themselves. Data from the key informant interviews and focus group discussions with partners reveal that the training activities provided them with clarity and helped to demystify concepts. The presence of the working group made partners more aware of gender issues, while the introduction of a section on gender in the reporting template made it compulsory for partners to report and reflect explicitly thereon.

From 2019 onwards, a variety of effective tools or shifts in processes helped capacitate partners to ensure their ability to fulfil gender-focused advocacy efforts. These included:

- Sessions on gender which were built into the annual country validation meetings which also build partners' capacity to implement a gender lens.
- A variety of tools were also developed to support partners in their work. One such example are the formats for gender analyses and memos on gender which were developed by the working group and shared with partners.
- Feedback provided by the gender working group to country reports was considered instrumental to the increase in capacity. The same applies to the feedback that was provided to partners during the development of the 2020 work plans.
- Gender experts in the programme team, country focal points and partners increasingly engaged in dialogues on gender.
- Capacity strengthening provided by PITCH with regards to the Wanda and Ona software helped a group of partners to apply a gender-sensitive or transformative approach, for instance by capturing evidence of gender-based violence and stigma and discrimination.

In a few countries (i.e. Kenya, Uganda, Mozambique, Zimbabwe), partners were also trained in the use of REAct which allows for the documentation of human rights abuses including gender-based violence. A new module of REAct (Gender REAct) was developed with a more intentional focus on gender discrimination and violence. This was in part due to increases in gender-based violence seen under COVID-19 lockdowns.

Besides the technical assistance provided by Frontline AIDS and Aidsfonds, partners reportedly also learned from each other about gender diversity and inequalities. Through networking with each other, partners gained more insight on different key population

constituency issues including gender groups. Partners also indicated an increased understanding of how to work from an intersectional lens and address the needs of those at the cross-section between different populations such as transgender sex workers or transgender people who use drugs. A few partners also gained knowledge and tools relating to gender-sensitive and transformative approaches through other Dutch MoFA funded programmes including Get Up, Speak Out (GUSO). The gender working group observed an increasing number of partners reach out to them with specific requests for technical assistance which can also be considered as an indication of increased focus on gender. However, the key informant interviews with partners reveal that some feel that they would need continued capacity strengthening in this area to be able to consistently and effectively apply gender-based approaches in their work.

### **What impact has this had on the outcome of PITCH country level advocacy activities?**

Partners' critical reflections on how gender norms, attitudes and beliefs shape interactions, workplaces and programme activities have resulted in a number of concrete changes to the organisations themselves, as well as the types of programming they engage in (see examples presented in the previous section). The strengthened capacity of partners to apply gender-sensitive and sometimes transformative approaches has noticeably contributed to increased visibility, a louder voice and greater recognition of women who use drugs, and also transgender people – and in particular transgender women – and the diverse gender groups within the sex worker community. It has also contributed to key populations accessing activities and services provided by implementing partners.

*"The issue of visibility and inclusion of the transgender people is more truthful. Before, when talking about gender it was only male and female, but now it's not just them."*  
(PITCH partner, Mozambique)

Although many of the efforts are part of longer-term processes, especially when it comes to legal reforms and changes in norms in society, various outcomes have been harvested which show a contribution to the gender-sensitive or transformative work carried out under PITCH.

### **Initiatives to remove gender barriers to services.**

Among partners' interventions to remove gender barriers to HIV, SRHR, legal and other services, some have already contributed to concrete outcomes. One example from Zimbabwe includes the removal of VAT and import duty on sanitary hygiene products (outcome #143), as contributed to by the advocacy of PITCH partners working with sex workers and adolescent girls and young women (including ZNNP+, ZY+ and Safaids). A second example from Zimbabwe concerns the public commitments made by five village leaders in support of the SRHR needs of adolescent girls and young women and the removal of oppressive gender norms which discriminate against women and girls making decisions around their sexual lives (outcome #142). Dialogues with village heads, religious leaders, community and village health workers, young people and community members, established by PITCH partner Bekezela in Bubi district, helped to contribute to this outcome.

In Uganda, LGBT-inclusive health service delivery lessons were added to medical education sessions for health workers at Mukono general hospital (outcome #35) after SOGIE training by PITCH partner TEU.

### **Advocacy to change and reform laws, policies and resource allocations to achieve gender equality.**

The work done under PITCH has contributed to a number of important SRHR outcomes, as presented in section 3.1, which have gender-sensitive and transformative characteristics. Although resulting from a much larger initiative, the removal of paragraph 2 of Article 30 of the



Family Law in Mozambique which allowed girls to marry from the age of 16 years, and approval of the Law to Prevent and Combat Premature Unions which criminalises child marriage in Mozambique, are very significant gender-transformative outcomes (outcome #119). Another clear example is the advocacy work carried out by CYSRA in Uganda, which contributed to the formal commitment of district leaders in Busia and Bugiri to fight all forms of violence against adolescent girls and young women in the community and to set up by-laws to protect them against common forms of abuse and violence. Adolescent girls and young women also participated in quarterly district health performance review meetings in these districts (outcome #32). Another noteworthy outcome includes the revoking of the ministerial order that obliged pregnant girls to attend high school classes at night in Mozambique (outcome #120).

Gender-sensitive and transformative actions by partners contributed to an increase in gender sensitivity and changes in certain policies relevant for achieving gender equality, as well as participation of marginalised key population groups in policy development. Examples include the inclusion of provisions to provide equal access and quality non-discriminatory services for LGBT people in the Fourth National Strategic Plan on HIV in Myanmar (outcome #70), increased attention for the transgender community and women who use drugs by the National AIDS and STI Control Programme in Kenya and the participation of these groups in the development of guidelines (outcome 10). In Mozambique, a transgender representative of the National Platform for the Rights of Sex Workers was included in the Ministry of Health Global Fund working group for key populations (outcome #115).

### **3.1.6 EQ1.7 What lessons can be learned about how gender informs advocacy carried out by and for key populations and adolescent girls and young women?**

**The degree of gender sensitivity demonstrated by PITCH partners increased significantly during the second half of the programme when more emphasis was applied to gender-based approaches. Their work in this area has been strengthened but there are still big differences between partners' capacities to implement them.**

Despite the fact that many partners struggled with the concepts of gender-sensitive and transformative approaches, and some still do, their work practice often reflects a degree of gender sensitivity which has further increased in the second half of the programme. This applies to all countries. In these cases, gender does inform the advocacy work in the sense that gender-related differences in situations and needs within the key population groups are being considered (either fragmentary or more structurally) in the organisations during the development of interventions, in evidence generation, or in advocacy demands.

The increase in gender sensitivity has expressed itself for instance in the strengthening of the community of women who use drugs in various countries, and in the increase in focus on transgender and male sex workers among some of the sex worker organisations and their advocacy asks, as well as in various efforts seeking to ensure that girls, women and transgender people benefit equitably from interventions. In a more general sense, the increase in gender sensitivity has contributed to more focused advocacy demands and strategies (i.e. on needs/access to services/policies for a specific key population group such as women who use drugs, transgender sex workers). However, not all partners are sensitive to gender to the same extent. While for some this is rather episodic, others have made efforts in the last two years of the programme to mainstream the issue more structurally within the organisation and work practice.

Although various partners have increased their focus on their respective key population gender groups, they do not always consider the relation between gender and gender inequity and the situation of key populations in a broader sense. Gender-transformative approaches were not new for all partners. Although the concept was not always known, where partners are generally working on women's rights, SRHR and GBV, their work often has gender-transformative characteristics. PITCH enabled them to continue and strengthen this work. For another group of partners though, PITCH introduced the concept not only in terms of terminology but also as a way of thinking and working.

In some countries such as Ukraine and Zimbabwe, various gender-transformative actions could be observed, while in other countries this is still more elementary. Partners that do apply gender-transformative approaches not only pay attention to differences in situations and needs of key populations based on their gender, but their advocacy work also seeks to redefine and transform gender norms and relationships to redress existing inequalities. Gender-transformative approaches were visible in strategies applied by some partners such as including boys and men in addressing harmful gender norms; encouraging dialogue and partnership with local leaders to promote the SRHR of adolescent girls and young women and key populations. They were also visible in advocacy to address discriminatory provisions in existing policy or laws; and partners' work to remove structural barriers to services based on gender, such as the work around the Family Code for women who use drugs in Ukraine and the implications for access to services.

However, such strategic consideration and ways of addressing gender inequalities and harmful gender norms in relation to HIV and key populations still tend to be the exception to the rule. Although certain partners feel they have been upskilled to develop and implement such strategies, not all of them are putting this into practice (yet), which might be due to the fact that most of the capacity strengthening only happened

during the last two years of the programme. The relatively large number of identified interventions demonstrating partners' critical reflection on how gender norms, attitudes and beliefs shape interactions, work places and programme activities (see previous chapter) could be seen as a positive indication and starting point for increased gender-sensitive and transformative action in the future. However, much more will be needed to ensure implementation of gender-transformative approaches by the partners after PITCH, including prioritising them in work approach, allocation of relevant budget and continued investment.

### **3.1.7 EQ1.8 From the perspective of different PITCH stakeholders, including implementing partners, which programmatic strategies and approaches have partly or entirely failed? What lessons can we learn from this?**

**None of the specific programme strategies failed but implementation led to lessons being learned around better sharing of information and knowledge; a more joined up advocacy strategy at national, regional and global level; resource allocation; and the challenges of a relatively short programme lifespan and high staff turnover.**

The evaluation showed no specific programmatic strategies that failed. However, some programme features have been identified as problematic, which can inform lessons learned from the overall implementation of PITCH. Some of the mechanisms and issues mentioned by PITCH stakeholders are presented and discussed in detail below. It is important to note that some issues may not be specifically a result of PITCH strategies or approaches, but rather reflect the challenges and complexity of the programme. Similarly, the weaknesses reported may be closely connected to individual capacity of PITCH partners and the country context. Many issues were only experienced in certain countries.

## Missed opportunities: PITCH governance and unclear flow of information

As an advocacy-based programme working at the national and global level, PITCH is unique. It is also a complex programme with a layered structure, and many lines of coordination. Three dynamics related to the programme's coordination have emerged:

- 1 Selected PITCH country focal points and a PITCH global policy partner mentioned the delays of PITCH at the start of the programme due to challenges with its governance structure.

*"We worked with PITCH only for the last three years but we had a bit of a rocky relationship. It took until the last year to establish a real communication."* (PITCH global policy partner)

While it was acknowledged that this issue was addressed accordingly<sup>36</sup>, some partners still felt that this represented a missed opportunity in terms of potential results that this unique programme could have achieved. These delays also affected the provision of clear guidance for PITCH country partners, with partners lacking adequate understanding in the early days regarding the structure of the programme as it was ill-defined.

*"Throughout PITCH, in the early stage, we had some difficulties, and this has resulted in less attention in strategising the programme, you can only spend your time once. As there was disagreement and struggle to get agreement, the programming strategy and design and governance have suffered a bit."* (PITCH programme team)

- 2 The different lines of coordination regarding who was responsible for a certain part, or ownership of certain processes, was not always communicated adequately to all partners.

*"It is very complicated to be in all these layers. PITCH international, PITCH global policy team, FSP, PITCH M&E, PITCH gender team etc... it is very complex. It is good to have all these specialties, but it became complex to access them."* (PITCH partner, Nigeria)

This resulted in partners having to search for extra support from colleagues, country focal points or other PITCH staff to find specific information or knowledge, and at times left PITCH partners with the wrong information or using time inefficiently for these types of tasks.

- 3 The frequent changing of reporting formats, changing guidelines, as well as no uniformity of reporting content used by PITCH organisations (those under the management of Aidsfonds and those under Frontline AIDS), created significant confusion among the country partners. Partners in Indonesia, Myanmar, Vietnam and Uganda expressed difficulty in dealing with financial and narrative reporting. Two respondents in Vietnam mentioned the difficulty with responding to the frequent changes in the monitoring format. This may also have stemmed from the turnover of staff which impacted their own approaches in how to report the results.

*"The M&E system only become stable after 2.5 years of implementation. The person in charge of the M&E system, as well as M&E formats, has been changed quite often."* (PITCH partner, Vietnam).

## Delays in mainstreaming gender-based approaches

Gender-sensitive and transformative approaches were not built into the programme from the very start and only got strong attention in the second half of programme implementation. After the first year of the programme, a gender taskforce was set up, yet without allocation of resources (human or financial). Because of the limited attention to gender in the starting phase of the programme, gender-sensitive and transformative

<sup>36</sup> See PITCH Midterm Evaluation Report, November 2018

approaches were not incorporated comprehensively in the national theories of change and advocacy strategies of partners. They were also not properly integrated in the programme's M&E framework from the very start. Partners initially lacked adequate guidance on implementing such approaches, therefore implementation depended strongly on the individual interest and organisational capacity of partners and country focal points. Some partners, in particular those working with adolescent girls and young women, already had existing expertise and capacity related to gender-based violence, SRHR and gender equality in their work prior to PITCH, and continued this work under the programme.

For a considerable large group of partners with less prior gender focus and expertise, the initial gaps in the programme design had further consequences including the lack of, or limited explicit consideration of, and attention for gender in the planning and implementation of the work in the first half of the programme. The transformation of the gender task force into a gender working group, as well as allocation of human and financial resources in 2018, served to prioritise and increase focus on gender-sensitive and transformative approaches in the programme. The subsequent guidance and training provided to country partners led to an increase in the application of gender-sensitive approaches. To a lesser extent, gender-transformative approaches were also observed, however with considerable differences in the quality and efficacy among partners.

## **Limited information sharing between PITCH partners**

PITCH generated a wealth of information on the situation of key populations and adolescent girls and young women in their respective countries, through field surveys and community participatory research, over the course of implementation (see section 3.1.4.c. Generation and Use of Good Evidence). However, this information was not always disseminated in

the most useful or regular format. While some of this information may be country specific, it also provides insights and lessons learned which could have been applicable for other PITCH partners. Efforts to disseminate and share this information included the exchange of country reports as well as meetings such as the PITCH annual policy summit, which brought together PITCH staff from Aidsfonds, Frontline AIDS, partner organisations, and country focal points. Partners indicated that some informal information sharing occurred through email, WhatsApp or Facebook. However, partners in Vietnam and Kenya, external stakeholders in Vietnam and Myanmar, and country focal points in Mozambique and Zimbabwe reflected that there were limited opportunities to share and transfer knowledge among the country partners.

*"PITCH is a large programme working in many countries, but there is not a close connection between different country teams. For UHC, PITCH organised learning events, exchange workshops among different countries to share UHC information and strategy. It was beneficial for country teams to update information and adopt lessons learned from each other. However, for other partners, there is not much information shared between countries. SCDI does not know about the policy advocacy strategies and interventions applied in other countries for different key populations. It will be useful for country teams if there is an information-sharing platform or mechanism among PITCH partners."* (PITCH partner, Vietnam)

*"Increasing international collaboration could have been done better and see how the other countries are doing it even at regional level."* (PITCH partner, Zimbabwe)

Similar concerns were also expressed in relation to the level of information sharing between regional and country partners: *"Limited communication flow/information sharing thus limited opportunity to work together the different strategy between regional and country partners."* (PITCH regional partners EECA)

The global policy partners particularly felt the disconnection between the global policy work and the advocacy carried out by country partners. *"I have never really seen a link between the global work and the national work. In the case of Nigeria, Mozambique and Myanmar we have worked closely with them but because we know them from before. PITCH didn't do anything to link us together. We worked a lot with country partners that we knew anyway."* (PITCH global policy partner)

The evaluation data suggests that limited information sharing was in part a result of the sheer magnitude and complex structure of PITCH. In terms of enhancing the link between the national and global policy partners, improving communication and transparency around partners' workplans, as well as ensuring the correct governance structure is established from inception, were suggestions for future programme improvements.

## **Collaboration between PITCH country partners**

Despite increased collaboration between many PITCH partners, some reported ongoing challenges. Partners in Indonesia, Kenya and Zimbabwe mentioned the need for a joint advocacy agenda and to improve coordination. Some implementing partners reported that key population organisations often had different priorities for advocacy which created tensions and challenges for common advocacy work. For instance, the interviewee from the Dutch Embassy in Kenya reported that partnership keeps being problematic.

*"In the future, they need to have a clear framework of partnership among the organisations... Some partners feel that their issues are more pre-eminent than others, their issues should be considered first. That in-fighting is really not good. When you are in a programme, you need to work together."* (Dutch Embassy, Kenya)

For example, organisations working with adolescent girls and young women concentrated on specific issues such as the age of consent which is less relevant for people who use drugs. Similar concerns were mentioned concerning the different agendas between LGBT and sex worker movements in Zimbabwe. The evaluation team did not find any further information about whether this issue was also experienced by PITCH implementing partners in other countries, or if this issue was specific to PITCH partners in Zimbabwe.

## **Absence of joint advocacy strategy at the national, regional and global level**

Working on issues with intersecting key population groups requires a strategy or a plan that is developed collectively, preferably from programme inception. However, the evaluation found that there was either a lack of or fragmented advocacy strategies across countries and levels.

On the joint advocacy across PITCH country partners, the intention was that at beginning of the programme all PITCH country partners would map out their capacity, including their expertise and resources as well as advocacy plans. In this way, everyone would have an understanding of the big picture, the advocacy activities, advocacy strategy and identify opportunities for coordination and collaboration. However, in Indonesia and Kenya partners only developed their own plans in the last couple of years of implementation. It is important that such workplans are developed early on to reduce the duplication of efforts. For example, one organisation may document activity at a local level, and the documentation can be used as advocacy material at national or international levels. This type of alignment is important to ensure a high level of synergy between PITCH partners and the effective use of resources.

The absence of a joint advocacy strategy across the multiple levels (national, regional and global) was influenced by the limited information sharing between stakeholders (see above) and also by the



diverse advocacy capacity of PITCH implementing partners. Some key population organisations were seen as lacking adequate expertise whilst others faced technological constraints such as limited computer and internet access. Their diverse capacity posed challenges in meeting the needs of all organisations. Some partners felt that ideally PITCH could have invested explicitly in evidence generation to build some kind of document library to be used in their future advocacy activities, while at the same time other partners needed to have basic skills on how to generate quality evidence.

## **Low visibility of PITCH and its results**

PITCH regional partners in EECA and PITCH country partners in Kenya, Ukraine and Vietnam mentioned a feeling that there was a lack of promotion of PITCH and its activities, which resulted in low levels of awareness among different stakeholders such as local governments, policy makers and the general public.

PITCH partners in Ukraine explicitly noted the impact of changing governments, and ability to organise sensitisation meetings (particularly in 2020 as a result of the COVID-19 pandemic) as factors that influenced the visibility of PITCH in their context. Partners in Ukraine, Vietnam and Uganda echoed similar viewpoints that, due to the absence of programme sensitisation among community members, ensuring support from community leaders on advocating for issues relating to people who use drugs was difficult.

The implementing partner in Kenya and external stakeholders in Ukraine raised the importance of improving programme visibility with local government to reduce their suspicions regarding partners' advocacy work.

*"I think at the introduction of PITCH, there was a very negative representation. Whenever we went anywhere and mentioned that we were from PITCH, the general feeling was that it was like PITCH was actually formed to fight government, to lift all the policies against key populations. We were treated with a lot of suspicion initially,*

*and we really had to come back and work really hard in order to see how we could re-brand PITCH to make sure that we were really understood, that PITCH was actually here to strengthen policy and to create a supportive policy environment.... It took quite a bit of time trying to explain to the different stakeholders."* (PITCH partner, Kenya)

Although PITCH was well positioned in some countries, due to the low visibility in others, partners believed that it reduced the opportunities for collaboration. This was supported by external stakeholders in Uganda:

*"I know they (PITCH partners) compile annual reports, quarterly reports. We have not had a structured system of saying 'ok, make sure that as you submit also come to us'. We have to go and look for them. I think that is an area. Probably if the reports were coming or flowing in regularly we would be able to even pick.... we would be forced to pick comprehensively in these reports rather than getting summaries occasionally, and we are able to do the follow up and even be better advocates for the programmes."* (External stakeholder, Uganda).

Although not clearly conveyed by PITCH implementing partners, the evaluation team assumed that promotion of PITCH and its activities at national level is partly the responsibility of the PITCH country partners. The low visibility at national level may also depend on the activities of the PITCH country partners, and so may not apply to all PITCH countries.

## **High turnover of staff**

During PITCH implementation, there was a high staff turnover among PITCH country partners as well as within the PITCH teams at Aidsfonds and Frontline AIDS. PITCH country partners in Vietnam, Indonesia and Myanmar reflected that this was not always accompanied by a sound knowledge management process within the relevant organisation.

The high staff turnover rate implies that institutional knowledge and potential networks were lost when staff left their positions. The evaluation found that programme implementation was very much dependent on the ability of individual PITCH staff members to mobilise partners or external stakeholders through their networks. In addition, as expressed by an external stakeholder in Myanmar, it takes some time for other programme staff to transfer knowledge to incoming hires. High staff turnover is not conducive to advocacy-based programming which requires relationship building and trust built between individuals and institutions. The importance of relationship building was also echoed by PITCH staff: *"High turnover of staff is unacceptable (seven different country coordinators for Mozambique) and becomes a joke to partners. It is fundamental to connect with the people that you work with."* (PITCH partner, Mozambique)

## Unclear sustainability plan

Implementing partners in Kenya, Mozambique, Myanmar and Vietnam raised the importance of having a sustainability plan and phase-out strategy at the beginning of the programme. The existence of such a plan at the design level phase, rather than at the end of the programme, would have encouraged greater local ownership and preparations for sustaining interventions once the programme ended.

The implementing partner in Vietnam further elaborated that many policy advocacy efforts have not turned into a measurable outcome yet, but are still underway (e.g. outcomes on Sex Reassignment Law or community support for people who use drugs). Due to the lack of concrete plans on how to continue or maintain the advocacy results after the programme ends, most of the key populations are now struggling to find a substitute source of funding for continuing their advocacy activities when SCDI stops the intervention.

It is understood that PITCH was designed to increase capacity towards more sustainable

advocacy. So in many ways, sustainability was somewhat integrated in the design of the programme, as demonstrated by an Indonesian PITCH partner that took the initiative to develop its own theory of change to continue the PITCH 'family' beyond the programme. The evaluation did not have any data as to whether similar initiatives took place in another country. It was reported that PITCH invested sufficient resources to ensure the development of a sustainability plan in 2020 to help sustain results.

## Short programme duration for its goals

PITCH is an advocacy programme that was implemented for five years including its project inception, implementation and evaluation. There was general agreement among PITCH partners that the timeframe was too short to demonstrate visible impact based on its goals. This was also echoed by the PITCH programme team. During the five-year implementation period, PITCH was able to strengthen the capacity of PITCH partners as well as provide tools in conducting their advocacy activities. However, in the broader context of a shrinking landscape for CSOs, and a reduction in available sources of funding, the programme goals were possibly unrealistic in the timeframe. Respondents of this evaluation indicated that building a financially, sustainable organisation able to achieve meaningful change requires significant time.

As PITCH focused on advocating for sensitive issues such as addressing stigma, discrimination, and decriminalisation, some evaluation participants - including external stakeholders in Kenya and Vietnam and the Mozambique country focal point - felt that the short timeframe limited their ability to influence local governments to make significant policy changes.

While the majority of PITCH partners joined PITCH when it started in 2016, a few joined the PITCH programme later, with some joining as late as 2020. This was particularly the case for the PITCH regional partners. The different

timescales provided flexibility and opportunity for more organisations to join PITCH but also caused huge discrepancies in terms of overall project understanding and readiness for joint activity, and collaborations with newer members requiring more engagement time and relationship building. This situation created a gap in achieving the overall programme targets as well as ensuring programme sustainability.

## **Limited resources for its intended goals**

PITCH was designed to create change at multiple levels through the implementation of its advocacy strategies. For such changes to take place, engagement of relevant stakeholders is an absolute necessity. In practice, those stakeholders need to be approached carefully, often with different (advocacy) strategies which requires sufficient amounts of funding and other non-financial resources. Limited resources were not reported in the context that resources should have been allocated differently, but rather that some of the ambitions/goals needed more resources than what was allocated or made available.

The limited resources also influenced the intensity of advocacy activity. PITCH partners indicated that there was a high demand for peer educators, paralegals and advocacy champions, however resources to support this were perceived as limited. In Uganda, a local partner reported that insufficient resources were allocated to sensitise and train the police (the local defence unit for drugs), so the activity was not conducted as well as it could have been if adequate funding was available. It should be noted however that this perception of there being limited resources for activities could not have been anticipated in the programme's planning phase.

Limited resources were also reported in regard to the provision of capacity building for PITCH country partners on global advocacy processes. Although opportunities were available for some country partners, others (e.g., in Vietnam and

Nigeria) indicated that they felt limited or inadequate to meet their needs. Limited resources also reduced opportunities for strengthening local organisations who were not formally part of the PITCH programme, but who were involved in activity delivery. Similarly, those located outside of capital cities were also reported to have missed out on capacity building opportunities (e.g., in Uganda and Myanmar). Concerns around adequate or correct resourcing were noted by stakeholders as possible limitations which impacted the ability of partners to ensure the sustainability of the results of their work.

## **The implications of COVID-19 on PITCH programme implementation**

The declaration of the COVID-19 pandemic by the World Health Organization (WHO) in March 2020 posed considerable challenges for PITCH implementing partners in completing their activities. According to implementing partners in Ukraine, Uganda and Mozambique, COVID-19 shifted the focus of their work from HIV-related issues to the COVID-19 response. A focus group participant in Ukraine further elaborated that because of COVID-19, the focus of their work had shifted from key issues such as decriminalisation to pandemic-focused responses, which ultimately caused a delay in advocacy activities around the decriminalisation of sex work. Another participant from Mozambique indicated that due to COVID they had to switch their HIV-related activities in schools to COVID-19 related activities. As a result, they did not manage to complete most of their activities in their final year of the PITCH programme.

PITCH partners acknowledged that the COVID-19 situation was beyond their and the programme's control. To the best of their ability, they tried to find ways to implement their activities where possible by shifting to virtual activity, for example altering the face-to face meetings to online or virtual for sex workers in Mozambique. Despite the limitations of virtual meeting such as limited engagement and

discussion space, the meetings still took place. Another example from Mozambique is that the partner organisations who were supposed to collect data on adolescent girls and young women with HIV changed the mode of data collection from in-person to remote. They admitted that it was hard to collect the proper data remotely without having adequate equipment such as smartphones.

However, it should also be noted that COVID-19 came almost at the end of programme implementation and that the disruptions were not therefore substantial, provided that the implementation was carried out in a timely manner.

## **3.2 Objective 2 To understand the extent to which internal and external PITCH stakeholders have benefited from collaborating with each other**

### **3.2.1 EQ2.1 To what extent have country partners and global policy partners benefited from/connected with each other's advocacy activities?**

**Connections between the country and global level were mainly supported through the provision of funding, and to a certain extent technical support. A well-defined joint advocacy agenda would have helped partners to hold national governments accountable through international advocacy efforts.**

The findings of the evaluation indicated that only limited connections between country partners and global policy partners took place under PITCH at the beginning of the programme. A larger share of country partners reported that they had not had a direct connection with PITCH global policy partners compared to those who indicated they did. Many partners were not

aware of the global partners and the advocacy work they engaged in. Global policy partners also confirmed that there was a level of disconnection between their work and the work of country partners. The connections that were established between the two have remained rather fragmentary with key informants generally agreeing that a much stronger connection between the national and global advocacy levels could have been made.

One of the main factors that hindered the connection between country and global policy partners is the weak or limited coordination of the global advocacy work. The Free Space Process (FSP) was initially assigned an important role in the coordination of its members' engagement in the PITCH global policy component of the programme. However, due to internal challenges in the FSP network, they were not able to perform this role as anticipated. Similarly, internal issues in Aidsfonds and Frontline AIDS during the inception phase of the programme reportedly hampered coordination between global policy and country partners. It is also important to note that in the first three years of PITCH, FSP partners were not actively encouraged to collaborate with PITCH partners at the country level. Consequently, FSP partners operated independently from PITCH country partners until 2019. Global and country partners were subsequently not well aware of each other's plans and agendas, and opportunities for linking national and global advocacy activities were missed.

Both language and cultural differences were named as a barrier that impacted the linking of national and global partner's policy agendas (e.g., in Mozambique, Myanmar, and Indonesia). Whereas global policy partners often use jargon and have a strong focus on the technicalities of the global policy space, country partners have a different focus, language and skillset. As a result, this sometimes led to a disconnect which PITCH insufficiently managed to bridge.

*"The global partners are so familiar/used to the (advocacy/technical) language of the global level, and we assume that everybody understands. So there needs to be a special attention to it. So translation and simplification. For instance, the issues around the UHC agenda is a relatively new issue and the language is quite technical and we assume that everybody understands this language which is not the case."* (PITCH global policy partner)

Connected to this is that a large group of country partners did not have the relevant knowledge or experience to be able to identify the linkages between country and global efforts which limited their ability to engage with global programme partners' work. Unfortunately, building this capacity was not identified as a priority in the PITCH programme. Consequently, the linkages that were made between the two levels were generally driven by global policy partners.

The evaluation findings indicated that in the last phase of the programme significant improvements were made in communication and coordination between global and country partners, with global partners indicating they felt better informed about what country partners were doing. The contributing measures which helped with this included a regular newsletter and monthly country meetings between country focal points and Frontline AIDS/Aidsfonds country coordinators. Additionally, the PITCH global policy summits brought together national, regional, and global policy partners which further supported connection between national and global partners. During these summits, country and global partners were able to exchange information and experiences, and global policy partners provided valuable training opportunities to country partners. Some of this included:

- Training on international processes and mechanisms provided to country partners with support from the global policy partners, such as the Universal Periodic Review workshop in Kenya for implementing partners from Kenya, Nigeria and Myanmar

- The universal health coverage meeting in Vietnam was attended by partners from different PITCH countries and sparked a national UHC discussion in Kenya
- Training on the Voluntary National Review for PITCH partners in Indonesia
- A train-the-trainers-workshop by the International Drug Policy Consortium (IDPC) for partners in Nigeria.

Although no structural ways to establish connections between country partners and global policy partners and the two advocacy levels were put in place, relevant linkages were made on a number of occasions. The different types of connections and their benefits are presented below.

Firstly, connections between global and country partners were made over the course of engagement with relevant human rights mechanisms. In Kenya, Myanmar and Nigeria, partners engaged in the UPR were supported by Aidsfonds in this process. In Myanmar, cases of human rights violations captured by country partners through the REAct software (see section 3.1.5.a.1.) were used for a UPR shadow report which was developed with the support of Aidsfonds and submitted to the Human Rights Council in March 2020<sup>37</sup>. Both financial and technical support was provided to the country focal point and partners in Kenya. The PITCH engagement in the UPR in Kenya contributed to a number of relevant recommendations made by member states on HIV, universal health coverage and SOGIE rights and their acceptance by the Kenyan government (outcome #23). PITCH Kenya actively engaged in the whole cycle from the development of the shadow report to the follow-up on the recommendations that the government accepted. The involvement in the UPR process has been an important learning experience for partners in Kenya who became confident and enthusiastic to continue using the mechanism in the future: *"Partners will continue to be engaged in UPR after PITCH, they have fallen in love with this space."* (country focal point, Kenya)

<sup>37</sup> Myanmar country report 2019



Secondly, global partners have contributed to the creation of spaces for a selection of country focal points and country partners to participate and speak at international advocacy events. With PITCH support, country partners and country focal points engaged in the International AIDS Conference 2018, the Harm Reduction International Conference 2019, the United Nations General Assembly High-Level Meeting on Universal Health Coverage in 2019, the meeting of the UN Commission on Narcotic Drugs in 2019, the 2019 Women Deliver conference, and the 2019 International Conference on AIDS and STIs in Africa - to name but a few. However, it is important to note that there was not always direct engagement between country partners and global policy partners at these events. Collaborations which did occur had differing levels of intensity.

Existing ties (prior to PITCH) between national and global partners emerged as an important factor in effective collaborations between national and global partners at these events. For instance, country partners from Nigeria, Mozambique and Myanmar with an existing relationship with global policy partner IDPC participated in the civil society training that IDPC organised prior to the meetings of the UN Commission on Narcotic Drugs (CND). IDPC also facilitated partners to attend and speak at the CND meetings and side events, such as the Myanmar country focal point who participated in the 62<sup>nd</sup> session and shared the experience of dialogue using the IDPC report and the state of play with drug response in Myanmar. The engagement with Myanmar government officials such as UNODC and the Myanmar Central Committee for Drug Abuse Control (CCDAC) at the CND and other international events helped Myanmar partners to strengthen their relationship with these key players in the national drug control policy implementation.

Other examples of collaboration between country partners and global policy partners in international advocacy processes included concerted advocacy efforts in relation to PEPFAR. Under PITCH, global partners

supported country partners in influencing PEPFAR processes in their respective countries, while global policy partner Aidsfonds simultaneously tried to influence these processes through advocacy at the high-level meetings in New York and Washington DC. Aidsfonds engaged with country partners to collect input for key messages and a few country partners were also supported to attend the high-level meetings themselves. PITCH Kenya was supported in finding a space in the United Nations General Assembly High-Level Meeting on Universal Health Coverage in New York in 2019. This opportunity reportedly changed the scope of engagement of country partners with the Kenyan government and strengthened their ability to hold it accountable for its commitments at the global level.

### Insight

*"We also engaged in the High-Level Meeting that took place in New York in 2019. (...) Finding our space in the global meeting was something great for us because we have all along been engaged at the national level advocacy. We were able to engage with other CSOs in speaking in one voice at the global space. There is usually a lot of advocacy that goes on in Kenya before a global meeting, and a few people are usually selected by government to attend. It is therefore very easy for CSOs to be left out because this is very political. For this particular case, we had the opportunity to be there and hear first-hand what commitments the government of Kenya was making".*  
(PITCH partner, Kenya)

On several occasions, PITCH global policy partners contributed to the organisation of side events at international conferences, e.g., at HR1, the High-Level Meeting on UHC in 2019, meetings of the Commission on Narcotic Drugs as well as at the 2018 International AIDS conference where PITCH organised an advocacy dialogue. The latter was reported as particularly beneficial to national advocacy efforts as national decision-makers from PITCH countries participated. The reported benefits of the engagement in international advocacy events included improved networks and strengthened

relationships with national decision-makers. Furthermore, accessing government officials proved easier at the international fora than in the domestic environment where partners have to deal with many bureaucratic procedures which restrict their access.

Lastly, a number of country partners also connected with international advocacy efforts through their own international networks (non-PITCH partners), while global partners were able to connect to non-PITCH country partners as well. The flexibility within the programme to do so was generally appreciated by partners.

In conclusion, PITCH has mainly supported connections between the country and global level through the provision of funding, and to a smaller extent through the provision of technical support. Overall, the evaluation revealed that the connection between country and global policy partners has been limited and more of an ad hoc nature, rather than through a structured, coordinated, and well-defined strategy. Weaknesses in coordination, including the absence of a joint advocacy agenda, hampered the ability of national and global partners to connect. Consequently, the benefits experienced by country partners have remained limited particularly the ability of national governments to be held accountable through international advocacy efforts.

Nonetheless, a small group of partners and country focal points had the opportunity to engage in global advocacy processes, gained relevant experience and built their capacity. They also strengthened their networks with the identification and inclusion of new advocacy targets and allies which directly or indirectly contributed to a few advocacy outcomes (direct contributions were found for outcomes #23 and #92).

### **3.2.2 EQ2.2 To what extent have country partners and regional programme partners benefited from/connected with each other's advocacy activities?**

**Limited emphasis was placed on formally linking the agendas of regional and country partners in the PITCH programme strategies or activities but, nevertheless, ad hoc linkages were made that led to tangible advocacy results in some countries and regions.**

Within PITCH, there are two regional programmes: a regional programme for southern Africa, implemented by the AIDS and Rights Alliance for Southern Africa (ARASA) and the SRHR Africa Trust (SAT), both based in South Africa; and a programme for Eastern Europe and Central Asia (EECA) implemented by AIDS Foundation East West (AFEW) International, the EVA Association (a Russian network of women living with HIV and other sexually transmitted diseases), AFEW Kyrgyzstan and the International Federation of Red Cross and Red Crescent Societies (IFRC).

The evaluation found that country and regional partners have not actively connected with each other under PITCH and the opportunity to link advocacy levels through country and regional partners has not been effectively accomplished. A number of factors have impacted these effective working relationships. Firstly, the primary motivation behind PITCH's regional programme was to support key populations in South Africa and Russia as these countries face a high burden of HIV cases but were not eligible for country-level support being upper-middle and high-income countries. Hence, initially, linking the advocacy agendas of national and regional partners was not central to the rationale behind the regional programme. As a result of these divergent foci, limited emphasis was placed on linking the agendas of regional and country partners in the programme strategies or activities. Additionally, these relationships or synergies did not form organically over the course of implementation.

It was reported that the regional and national bodies targeted by the regional partners were not always relevant to processes at the national level. For instance, the main work of EECA regional partner IFRC focused on the development, promotion and advocacy of a "Model Law" "On Equal Access to HIV Prevention and Treatment Services in the CIS Countries", that involved the civil society sector of all ten countries in the region: Armenia, Azerbaijan, Belarus, Kazakhstan, Kyrgyzstan, Moldova, Russia, Tajikistan, Uzbekistan and Ukraine. Despite the fact that Ukraine is formally a member of the CIS, its parliament does not take an active part in the discussions on the CIS platform.

Also, the work of EECA regional partners in Kyrgyzstan and Russia had no direct linkage to the advocacy agendas of country partners in Ukraine or vice versa. Central to PITCH's EECA regional strategy was the fast-track cities initiative<sup>38</sup>, which focuses on city-level advocacy (i.e., Saint Petersburg for Russia and Bishkek for Kyrgyzstan), while the Ukraine theory of change and advocacy strategies of country partners focus on national and local - *oblast*<sup>39</sup> - levels. For the EECA, the political conflict between Ukraine and Russia was mentioned as a hindering factor for establishing linkages between the countries. Finally, the late start of the regional programme, at the end of 2018, as a consequence of internal issues within Frontline AIDS and Aidsfonds, hampered linkages being created between regional and country partners under PITCH. By the time the regional programme started, country partners had long developed their theories of change and advocacy strategies.

Despite the absence of a joint strategy or other forms of consistent connection between the regional and country partners, examples of more ad hoc forms of linkages were found. This happened for instance with regards to the work on universal health coverage. A clear example was the workshop "Building universal health coverage we want - enhancing inclusion of

African key and vulnerable populations in the UHC agenda" which was hosted by ARASA in November 2019. Among the 50 representatives of civil society from 10 countries across sub-Saharan Africa, PITCH country partners participated in the workshop. This resulted in a call to action calling on governments, development partners and communities working towards the attainment of universal health coverage in sub-Saharan Africa to prioritise 23 key actions in order to ensure the UHC that Africa needs<sup>40</sup>.

Under PITCH, ARASA also managed flexible funds on universal health coverage. Country focal point and country partners in all five PITCH countries in Africa benefited from these funds to build capacity and conduct advocacy on UHC at country level. Examples of technical support provided by ARASA to country partners were also reported. In Zimbabwe, for instance, country partners collaborated and received technical support from ARASA in their national advocacy efforts for an increase in domestic financing for SRHR. Besides providing financial and technical support, ARASA also played a coordinating role in respect of the country-level work on universal health coverage in Mozambique, Zimbabwe, Nigeria and Uganda - although this was not part of an overarching regional strategy for UHC advocacy.

Linkages prior to PITCH (e.g., through membership of regional networks) emerged as a factor that contributed to linking between national and regional partners under PITCH. PHAU in Uganda had a prior connection to ARASA and received capacity strengthening on universal health coverage from them. During PITCH, they built on this knowledge and their connection with ARASA in their evidence-based advocacy work to increase health sector financing to achieve UHC in Uganda.

For the EECA, only a few ad hoc linkages between country and regional partners were

<sup>38</sup> <https://www.fast-trackcities.org/>

<sup>39</sup> Type of administrative division which is often translated as area, zone, province or region.

<sup>40</sup> <https://www.arasa.info/blog-news-details/call-to-action-universal-health-coverage-day-2019>

found. They were mainly made during PITCH events, such as the PITCH policy summits and workshops where national and regional partners worked together in the same Russian-speaking group. Although the evaluation did not find any examples of resulting collaboration, the exchange of information and knowledge was considered valuable by both parties. Similar exchanges also took place through personal contacts between the Ukraine country focal point and focal persons of EECA regional partners.

Countries that were not located in the working area of regional programme partners (Indonesia, Myanmar and Vietnam) did not link with or experience benefits from the advocacy activities of regional programme partners. Finally, the evaluation also found a set of examples of collaboration between PITCH country partners and regional organisations that were not part of the programme. PITCH's flexibility in supporting these connections was appreciated by partners.

### 3.2.3 EQ2.3 To what extent have regional programme and global policy partners benefited from/connected with each other's advocacy activities?

**Connections between regional programme and global policy partners came about mainly informally through PITCH meetings and training sessions. The late start of the regional programme may have served as an impediment.**

The evaluation found that collaboration between PITCH regional and global partners was limited. Consequently, the benefits that global and regional partners reported in this respect are few as well.

Linkages between global and regional partners were mainly made at PITCH events such as meetings and training activities. The main benefits of these interactions concerned the exchange of knowledge and experience, and to a limited extent learning about each other's agendas and working contexts.

#### Insight

*"Meetings like this (2020 PITCH Global Policy Summit in Uganda) change the vision of the project and the scope of the approaches which can be used during the project implementation. After the meeting in Uganda I saw the project from another angle and started working with communities and involving them to influence this policy making process to make sure that their needs are addressed. Earlier it was not possible since I was thinking in a narrow way – that policy making is tailored with only authorities but not communities and civil society. This meeting changed my opinion crucially."*  
(Regional PITCH partner)

Although regional partners reported they appreciated learning about the broader work of PITCH and the other partners, and some of them even experienced increased motivation and commitment towards the programme after exchanges at joint events, no concrete examples of follow-up were found.

In a more general sense, few connections between regional and global in the advocacy work were found, except for coordination and mutual support between global policy partner Aidsfonds and SADC regional partner ARASA in respect of their advocacy around universal health coverage and the UHC flexible funds that were managed by ARASA (see section 3.2.2 on EQ 2.2). Also, some prior connections between regional and global partners, such as between ARASA and IDPC, were sustained under PITCH.

Among the factors that hampered the establishment of more structural and strategic connections within PITCH was the late start of the regional programmes (end of 2018). By then, little time was left to set up collaborations and national theories of change and agendas had long been set. Moreover, within the available time and other budgetary limitations, linking between regional and global partners did not have the highest priority with the latter. This was because the connection between regional and international level advocacy was felt to be strategically less relevant than the link between national and global. Similarly, regional partners prioritised a focus on their respective regions for strategic reasons.

### 3.2.4 EQ2.4 To what extent have PITCH partners formed or joined coalitions with other civil society organisations that have helped to advance their advocacy, raise the profile of the experiences of key populations and adolescent girls and young women, and set the advocacy agenda?

**This is an area where PITCH was particularly successful at helping to broker alliances and connections. Coalitions among CSOs helped partners raise the profile of all key population groups, strengthening their advocacy activities and helping them to set the advocacy agenda.**

The evaluation found that PITCH partners in all countries supported the formation of coalitions with other CSOs in order to work more closely with organisations who have similar goals, issues, focus and/or targets. This included bilateral and multilateral arrangements among CSOs at the local, national and international level. They joined and formed local coalitions (e.g. MMTN in Myanmar), and national (e.g. National Coalition of Key Populations in Ukraine). Some coalitions were fully set up during the PITCH programme lifecycle (e.g. the Sex Workers Platform in Mozambique). Overall, PITCH country partners reported that the formation of a coalition was very much encouraged within the PITCH programme more broadly.

*"One of the most important aspects of PITCH is that the project goals are aimed to be achieved through building partnerships – with both PITCH partners and other projects (co-financing, common activities, etc.) to achieve common and valuable outcomes."* (PITCH partner, Ukraine)

The purpose of forming coalitions varied across PITCH partners. These partnerships and networks provided a safe space for collaboration and information sharing; the possibility to unify multiple voices towards one goal; mechanisms to support collective advocacy efforts; and a

strategy to ensure sustainability beyond the programme lifetime. Coalitions are "a mechanism through which young people living with HIV can advocate against stigma and discrimination and for better service provision and support."<sup>41</sup>

Coalitions among CSOs have helped PITCH partners raise the profile of key populations and adolescent girls and young women, strengthening their advocacy activities and helping partners set the advocacy agenda. Below are several examples.

#### **a Advancing key population advocacy**

In **Zimbabwe**, FACT, SAfAIDS, ZCLDN, ZY+, ZNNP+, GALZ, BHASO and SRC are active members of Advocacy Core Team (ACT) and Zimbabwe AIDS Network, two coalitions through which SRHR for key populations and adolescent girls and young women are advanced. Through these coalitions, SAfAIDS and ZY+ joined forces also with other like-minded organisations such as SAT, ARASA, Right Here Right Now (RHRN), Justice for Children Trust and Zimbabwe National Family Planning Council. They formed a technical taskforce to drive the policy advocacy agenda to review the age of consent to access SRHR services, which is currently set at 16. In addition to more powerful advocacy activity, being part of these coalitions helped PITCH partners to strengthen their reputation as well as build their capacity in programming and implementing activities.

In **Uganda**, PITCH partners WONETHA (a sex worker organisation) and UHRN, that works with people who use drugs, are members of the Uganda Key Population consortium (UKPC) which advocates for the human rights of all key populations. It was reported that the UKPC has helped strengthen both organisations' advocacy efforts as a result of developing a common advocacy agenda.

<sup>41</sup> Annual Report 2019



## **b Advancing advocacy for LGBT communities**

In **Nigeria**, the LGBT community joined several coalitions with joint advocacy agendas. HER, ICARH, IAH and TIERS are members of the Solidarity Alliance, a coalition that collectively produces a quarterly report on human rights violations. INCREASE is a member of the Coalition for the Defence of Sexual Rights in Nigeria (CDSR). WHER, ICARH, TIERS, IAH, INCREASE are founding members of the Sexual Rights Network in partnership with the Initiative for Strategic Litigation for Africa, which aims to deliver strategic litigation for sexual minorities<sup>42</sup>. Considered a powerful advocacy strategy for LGBT rights, strategic litigation has already brought major results in South Africa and Botswana<sup>43</sup>. In Nigeria, the achievement of results slowed down due to a challenging environment. However, at the time of data collection, two cases were in court. TIERS reported significant benefits from their collaboration with the Initiative for Strategic Litigation for Africa through the Strategic Litigation Network for LGBT Activists in Nigeria coalition. TIERS' engagement with lawyers has been strengthened and they can now access pro bono legal services. TIERS also provide training to network members about how to identify cases for litigation.

In **Zimbabwe**, the PITCH partner GALZ established linkages with African Men for Sexual Health and Rights (AMShEr) and the Coalition of African Lesbians (CAL), which are major coalitions for LGBT organisations in Africa. This resulted in the participation of GALZ in the Young Key Populations Project, which seeks to improve the legal and policy environment for the SRHR of young key populations. GALZ reported that due to its participation in the project, they have strengthened their connections with key policy makers.

## **c Raising the profile of sex workers**

The Vietnam Sex Worker Network was established under the Bridging the Gaps (BtG) programme in 2012 which included various capacity building interventions. This has been further built upon under PITCH with the sex worker community trained on sex work policy advocacy connected to the regional network (Asia Pacific Network of Sex Workers). They received organisational development support from the regional network which helped them to achieve important advocacy asks including playing an important role in the consultation on Decision 1875/QD-BLDTBXH, a guiding technical and budgetary framework for piloting community-based sex worker support models in 15 pilot provinces (among 63 provinces and cities of Vietnam) (*outcome 79*).

In **Indonesia**, PITCH partner OPSI belongs to several coalitions that advocate for the rights of sex workers. They include the National Alliance for Criminal Code Reform (RKUHP); the Civil Society Alliance to Reject the RKUHP (which was coordinated by the Indonesian Legal Aid Foundation YLBHI); the Anti-Stigma and Discrimination Coalition (initiated by UNAIDS); and a coalition of public services driven by YAPIKKA. Through these coalitions, OPSI is strengthening its profile on sex work-related advocacy: *"We have to build networks with different expertise so that it will be easier to change policies under the strong pressure from various civil society associations"*.

## **d Raising the profile of adolescent girls and young women and advancing the advocacy agenda**

In **Mozambique**, PITCH partners MULEIDE and COALIZAO collaborated with other CSOs and NGOs in the early marriage elimination coalition (CECAP). CECAP is a platform that brings together 53 civil society organisations and was able to submit a petition to the Council

<sup>42</sup> Nigeria country report 2018.

<sup>43</sup> Jjuuko, A. (2020) "Strategic Litigation and the struggle for Lesbian, Gay and Bisexual Equality in Africa", Daaraja Press

of Ministers for the establishment of a legal instrument penalising those involved in coercing or forcing girls and young women into child marriages<sup>44</sup>. As part of CECAP, Muleide and COALIZAO participated in the design and review process of the Draft Law for Preventing and Combating Premature Unions. In 2019, the Mozambican parliament approved the Law to Prevent and Combat Premature Unions, thus criminalising child marriage in Mozambique. This important achievement (outcome #119) would have not been possible without the collaboration between CSOs. This is one of the few examples of a law being passed in Mozambique as a result of a partnership between civil society and parliament.

In **Nigeria**, PITCH partners EVA, APYIN and ASWHAN worked together as a coalition and jointly developed an advocacy campaign for lowering the age of consent. The campaign benefited from this coalition because it now has a bigger strategy, pulling resources from different organisations within and beyond PITCH. After the important result achieved in 2018 (outcome #66), when the general director of NACA committed to present to the National Council on Health the recommendation on lowering the age of consent for HIV testing services to 14, different partners have taken up different aspects of the strategy. For instance, together with IPAS Nigeria, EVA is conducting research to identify the impact of a lower age of consent on the quality of life and wellbeing of adolescents and young people. The New HIV Vaccine and Microbicide Society also committed to generate evidence for action. Other organisations such as the Society for Family Health, the principal recipient for the Adolescent 360 project in Nigeria, committed to share the coalition advocacy agenda with its networks.<sup>45</sup> These partnerships and commitments are seen as an important step toward ensuring sustainability.

## e Advancing advocacy for people who use drugs

In **Myanmar** in 2019, Community Service for Friends (CSF) created the joint advocacy group (JAG) for drug user issues after a learning visit to MTSTM where they learned how to form an advocacy group. One of the main goals of the joint advocacy group is to support people who use drugs to quit drugs. CSF reported that by working together in coalition they have strengthened their advocacy activities, as well as improved their credibility and expanded their networks. Thanks to the coordinated advocacy activities of the group with the Tamu district/ township office, police and Department of Health representatives in Sagaing region, the Regional Health Department approved a methadone clinic in the Tamu district (outcome #73).

In **Ukraine**, the PITCH partner Hope and Trust played a significant role establishing the newly created networks "VOLNA" (for people who use drugs) and "VONA" (for women who use drugs). Another PITCH partner, Convictus Ukraine, is part of both coalitions. These networks work in partnership and carry out advocacy work together to promote the rights of people who use drugs. Convictus Ukraine together with VOLNA created a key population consortium and developed an extended package of services (complementary to the basic package which is funded by the government). In light of the development of extended HIV-related service packages for key populations, a national coalition was established and includes Alliance Global, Legalife Ukraine, VOLNA and women living with HIV.

<sup>44</sup> PITCH Mozambique country report 2018

<sup>45</sup> PITCH Nigeria country report 2019

### 3.2.5 EQ2.5 To what extent can examples of effective collaboration at the country level be demonstrated between PITCH and other Ministry of Foreign Affairs-funded programmes working to address HIV and AIDS?

**PITCH partners in all countries collaborated with at least one MoFA-funded programme with similar advocacy aims, such as Bridging the Gaps, GUSO and READY. This solidarity and show of strength paid off in terms of advocating for the rights of marginalised populations.**

As an MoFA-funded programme, there is an expectation from the Ministry that PITCH country partners will collaborate with stakeholders of other MoFA-funded programmes in their individual context. The following box provides details on several of the programmes that PITCH partners collaborated with.

In all countries, one or more PITCH partners collaborated with another MoFA-funded programme, with different levels of collaboration depending on the context. In Nigeria, where none of the abovementioned programmes were

implemented, PITCH partners engaged with Kenyan counterparts through capacity building efforts. NSWA, a PITCH partner working with sex workers in Nigeria, benefited specifically from training on the reporting system Ona, which was jointly delivered by BtG, GUSO and PITCH in Kenya<sup>46</sup>. This exchange encouraged information sharing between NSWA and their Kenyan counterpart KESWA, with NSWA later adapting KESWA training methodologies for a Nigerian context.

While the examples below provide evidence of some of the effective collaborations between MoFA-funded programmes and PITCH, it appears that such activity was ad hoc and no clear strategy was developed under PITCH to strategically or systematically build links between programming.

**PITCH, RHRN, BtG and GUSO in Kenya** - PITCH partners in Kenya worked closely with various Dutch MoFA-funded programmes to achieve different outcomes. As several PITCH partners are in two or more programmes this helped build trust and strong links between advocacy efforts. *"With the level of synergy, it has worked quite well. RHRN and GUSO has worked well in working with PITCH."* (Dutch embassy)

## 4 MoFA-funded programme similar to PITCH

### Bridging the Gaps (BtG)

**BtG** is an alliance of nine international organisations, networks and more than 80 local and regional organisations in 15 countries working towards a world where sex workers, people who use drugs and LGBT people can enjoy their human rights and access quality HIV prevention, treatment and care.

### GUSO

**Get Up Speak Out for Youth Rights (GUSO)** 2016-2020 focuses on improving knowledge on the sexual and reproductive health and rights of young people. GUSO is implemented in seven countries in Asia and Africa.

### RHRN

**Right Here Right Now (RHRN)** is a five-year programme (2016-2020) and global strategic partnership that is active in ten countries (Kenya, Senegal, Uganda, Zimbabwe, Bangladesh, Indonesia, Nepal, Pakistan, Bolivia and Honduras) and the Caribbean sub-region. The focus is to enable all young people to access quality and youth-friendly health services, so that they are not afraid to openly express who they are and who they love.

### READY

**READY** is a portfolio of programmes managed by Frontline AIDS and designed to build Resilient and Empowered Adolescents and Young people. From the desk review, a number of joint activities emerged between PITCH partners and READY, such as the #READY4UHC campaign. In 2018 PITCH, BtG and READY organised a joint satellite symposium at AIDS 2018 called "What is the future of funding for key populations?"<sup>47</sup>

The strength of this collaboration was in its ability to gather a large number of diverse CSOs together which increased the breadth of expertise and resources available for SRHR and HIV-related advocacy efforts across the country. By bringing together organisations from PITCH, GUSO and RHRN, a large number of civil society organisations in Kenya is represented, with considerable ability to influence different policy makers. *"The strength in numbers helps."* (External stakeholder)

Together, these organisations were able to increase their collective advocacy on key populations and adolescent girls and young women. For instance, under the Universal Periodic Review engagement, PITCH partners worked with members of RHRN, BtG and GUSO to develop reports on HIV, key populations, adolescent girls and young women, and SOGIE issues in order to lobby different missions at both country and international level. As outcome #23 shows, this long process that started in 2018 contributed to the commitment by the Kenyan government to review all legal, policy and structural barriers that impede the provision of SRHR services, and to implement comprehensive human rights-based programmes in this area.

**PITCH and BtG in Vietnam** - the PITCH partner SCDI worked closely with BtG to promote the rights of sex workers. SCDI partnered with both PITCH and BtG, reporting that the kind of support they received from the two programmes was complementary. While the BtG interventions mainly focused directly on providing support to the sex worker community to strengthen the sex worker movement, PITCH focused on policy advocacy. As a result, PITCH was able to use the evidence gathered by BtG to advocate for the rights of sex workers.

PITCH was also able to take lessons learned from BtG and build advocacy efforts around this programming. Under PITCH, the sex worker community was trained on policy advocacy, connected to the regional network (Asia Pacific

Network of Sex Workers), and supported in their organisational development. As a result, VNSW (which was established under BtG in 2012) was able to increase their advocacy efforts and participate in a variety of meetings and workshops with regional partners.

Similar opportunities presented themselves in Myanmar with productive collaborations between PITCH and BtG partner organisations and the sex worker community. The organisation AMA partnered with PITCH and BtG, and its members reported that the staff recruited by both programmes worked closely together to achieve their goals. For instance, the paralegal staff engaged by AMA to decrease the arbitrary arrest of sex workers was mostly supported by the BtG team. The PITCH team then translated the data collected by the paralegal staff into advocacy messages for their campaigns. With support from PITCH and BtG, AMA also provided training to the sex worker community regarding their rights and the law. This training, combined with advocacy activity, reportedly led to a decrease in the arrest of sex workers during the implementation period (outcome #59). *"Now we have better opportunities and advantages when we deal with police and courts."* (Community Member)

**PITCH and READY in Zimbabwe** - READY works together with PITCH partners ZY+ and BHASO. This collaboration has helped to amplify the voice of adolescent girls and young women in advocacy efforts in the country. In fact, they worked together on the young people living with HIV forum, which was held in August 2019. The space provided an opportunity for networking with policy makers, activists and peers, accelerating efforts to ensure that adolescent girls and young women can access Dolutegravir. As outcome #114 shows, this goal was reached in December of the same year. The Ministry of Health and Child Care revised guidelines for HIV treatment and prevention, ending the discriminatory exclusion of women and adolescent girls not using contraceptives from accessing Dolutegravir.

<sup>46</sup> PITCH Nigeria country report 2018

<sup>47</sup> PITCH Annual report 2018

### 3.2.6 EQ2.6 To what extent have working relationships between PITCH and the Dutch embassies and permanent missions in the PITCH countries contributed to advocacy outcomes through strategic collaboration?

**Dutch embassies have demonstrated active engagement and support towards PITCH advocacy goals and activities and there has been a significant degree of cross-collaboration in several countries.**

As an MoFA-funded programme, there is an expectation that PITCH partners have a good working relationship with the Dutch embassy in their respective countries. According to the Dutch MoFA, the working relationship between PITCH partners and the Dutch embassy is expected to be open and supportive:

*"... So, from the very beginning of Dialogue and Dissent, we were very open about these options. As nothing is less frustrating than a civil society that wants something from an embassy and the embassy cannot give it. We said from the beginning, try to find a common ground and where can you find a common interest..."*  
(Dutch MoFA)

This has been echoed by respondents from the Dutch embassy in Uganda:

*"The role of the Dutch embassy is to support MoFA-funded programmes. We (the Dutch embassy) also have the coordination role. When I am invited in an activity by one partnership I am able to cross check with another partnership, so that they are aware of commonalities. At the beginning of the year, we usually bring all partners together to share their plan for the year."* (Dutch embassy, Uganda)

In practice, Dutch embassies have proven supportive toward PITCH advocacy programming, working with PITCH partners to support their goals. In general, the collaboration

has been experienced as positive and helpful, and only sporadic comments about weaknesses have been reported. For instance, in Mozambique it was mentioned that the contact between the embassy and PITCH is on an ad hoc basis rather than systematic. Despite the fact that PITCH is one of the programmes that "dares" to approach the embassy differently from other programmes, it was reported that the collaboration has never been very strong. *"The collaboration could have been better and or more intensive, for instance I have expected to conduct a brainstorm on advocacy message or planning. But it (the collaboration) is very much depending on the country focal point."* (Dutch embassy, Mozambique)

#### Insight

The evaluation found that PITCH partners appreciated the efforts of Dutch embassies to collaborate with them and facilitate introductions to relevant stakeholders such as the government and UN agencies. *"The Dutch embassy was always open and showed intention to support PITCH, there has been a period where we work quite closely. The Dutch embassy supports us by advocating our issues to the government."*  
(PITCH partner, Zimbabwe)

Dutch embassies played a key role in facilitating CSO meetings involved in MoFA-funded programmes which led to a variety of collaborations outlined in the section above. These types of meetings often included international NGOs and UN organisations which helped to expand and strengthen networks in country.

Dutch embassies also engaged in activities organised by PITCH country partners. The engagement ranged from attending human rights film events (Myanmar), to participation in a PITCH policy summit, supporting a global LGBT campaign and facilitating partnerships (National Key Populations Platform – NKPP) in Ukraine; and taking part in official events including giving opening speeches when requested (Myanmar). In Indonesia, the Dutch embassy was instrumental



in connecting PITCH partners with government representatives, and facilitating access to key decision-makers to support advocacy activities related to the needs of key populations. Similar activity was reported from Ukraine with the formation of the tripartite collaboration (the NKPP). In Myanmar, the Dutch embassy also provided capacity building for PITCH partners with training of trainers on gender and conflict sensitivity.

In **Zimbabwe**, PITCH partners including GALZ, SRC and FACT collaborated with the Dutch embassy to engage policy makers during a policy luncheon dialogue on the occasion of IDAHOT . The Dutch embassy also financially supported SRC to host the 2019 IDAHOT<sup>48</sup> commemorations held in Bulawayo which brought together LGBT networks across the country and which were also attended by religious leaders<sup>49</sup>.



© James Duong for Aidsfonds

Colleague from Supporting Community Development Initiatives at a learning event in Vietnam, 2019

<sup>48</sup> International Day against Homophobia, Transphobia and Biphobia (IDAHOT) is commemorated annually on May 17

<sup>49</sup> Zimbabwe Country report 2019

# 4

## Section 4 Conclusion

Yulia Paskevka (Ministry of Justice of Ukraine), Halyna Korniienko (Hope and Trust) and Yevheniia Kuvshynova, Executive Director, Convictus, participate in CND 2020

**The conclusion is structured according to the two evaluation objectives as well as the evaluation questions.**

Under Objective 1, the evaluation aimed to assess the outcomes and impact of PITCH, as well as their sustainability, in the context of the programme's theory of change, covering seven evaluation questions.

**We identified the following conclusions:**

**EQ 1.1 Which significant advocacy outcomes has PITCH made a measurable contribution to? And to what extent does evidence exist to support these claims of contribution?**

***On advocacy outcomes***

- Regarding the advocacy outcomes, based on the evidence from this evaluation, we conclude that the PITCH programme was overall successful in making a plausible and measurable contribution to 123 outcomes that



helped advance the HIV advocacy agenda of the programme and achieve its four goals. All 123 harvested outcomes are meaningful and significant, in line with the global Theory of change. In most cases, PITCH collaborated on outcomes together with other partners.

- The findings also showed that PITCH contributed to most of its medium and long-term expected outcomes. About half of the outcomes were categorised as long-term outcomes, which indicates that according to PITCH country partners, the programme progressed as intended. PITCH country partners were focused on making changes at the local and national level and less at the global level. The latter seems to be intended as per the global theory of change.
- PITCH achieved results that address HIV and AIDS among key populations and adolescent girls and women through contributing to the programme's four goals. The results are relevant for all key populations and adolescent girls and young women, with slightly higher relevance for people who use drugs. The actors influenced by PITCH were mainly at government level, from local to national, and a few at international level. PITCH also influenced some religious and community leaders, legal institutions and the media.

### ***On PITCH contribution***

- The analysis showed that, overall, PITCH was successful in contributing to significant advocacy outcomes and, that by the end of the programme, it contributed to most of its medium- and long-term outcomes. These include furthering HIV advocacy for key populations (KPs) and adolescent girls and young women (AGYW), increased access to HIV services and realisation of sexual and reproductive health and rights (SRHR) for all, and strengthening of CSOs as HIV advocates in all nine PITCH countries. PITCH contributed to all these outcomes with different intensity and mostly together with other actors; country partners focused more on changes at

local and national level and less at global or regional level. The findings show that nearly a third of the outcomes were contributed to through lobbying and meeting with stakeholders (32%). However, depending on the country context and partners' capacity levels, a combination of strategies and approaches were applied by partners in order to achieve short-, medium- and long-term outcomes.

### ***On supporting evidence***

- One-third of the outcomes (39) selected by the evaluators were substantiated by one or more independent external and knowledgeable actor. This process confirmed all 39 outcomes. Two-thirds of all outcomes contain additional documentation. The evaluation team triangulated the outcomes through KIs and FGDs. This leads to confidence about the claims of contribution made.

### **EQ 1.2 How has PITCH contributed to any positive or negative unexpected outcomes? What lessons have been learned, and how have these unexpected outcomes influenced partners' advocacy planning?**

- The evaluation found that only eight outcomes were classified as positively "unexpected". Despite this, PITCH partners contributed to these outcomes through their advocacy which indicates that partners did well in defining their expected outcomes in the programme-level theory of change broadly. This gave space to adapt advocacy planning, allowing for creative and timely responses to emerging opportunities. The unexpected outcomes most frequently dealt with surprising changes in relationships. They contributed to the recognition of the rights of key populations and adolescent girls and young women and not access to HIV services.

- **The negative outcomes** did not influence partners' advocacy planning but demonstrated that PITCH and the issues it worked on are increasingly being heard and have become a factor to be taken seriously – in good or bad ways. In none of the cases is there an indication that PITCH could have avoided these negative outcomes or should have done things differently.

### **EQ 1.3 Which PITCH advocacy strategies have been most effective in allowing PITCH partners to achieve their advocacy asks? What lessons can be learned from this?**

- PITCH implementing partners engaged strongly in advocacy activities and used all four PITCH advocacy strategies to achieve their advocacy asks. They used combined strategies to achieve the majority of the outcomes. There were several strategies that were considered effective, namely working with a strategic approach to advocacy; coordination and collaboration; generation and use of good evidence; mapping advocacy targets and stakeholders; engaging with media; engaging with legal professionals; training and specific technical knowledge; informal advocacy; and engaging the community.

### **EQ 1.4 Reflecting on structural and legislative changes, how sustainable are the achievements of PITCH beyond the programme's lifetime, and in the absence of significant external funding?**

- Three outcomes from Mozambique, Vietnam and Nigeria demonstrated changes entrenched in law. Thirty-two policy and strategy decisions were achieved and intended to guide the behaviour of, mostly,

governmental actors at national and local level, independent from PITCH and beyond its lifetime. Government and Global Fund budgets of governments have shifted in favour of key populations and adolescent girls and young women for at least a few years to come. Key populations, adolescent girls and young women and their organisations gained a seat at the table in various formal governmental technical or advisory bodies. This demonstrates sustainable changes in relationships, although actual participation in these bodies will depend on CSOs' financial sustainability.

- Definitely sustainable though not structural are the 16 changes in the practice of individuals who act as role models, such as religious- and other community leaders, judges, key population-friendly health workers, journalists and police officials. These role models have changed deeply rooted societal norms through their daily behaviour and relationships, necessary to achieve long-lasting change. These changes were found to be less in number than the outcomes towards formal, institutional changes. Yet they are crucial to sustain the institutional changes that cannot exist, and risk being reversed, without support from a wide audience in society.

### **EQ 1.5 To what extent has PITCH measurably and sustainably strengthened the advocacy capacity of PITCH partners, including the capacity to capture evidence to support their advocacy?**

- The findings showed that PITCH strengthened the capacity of many CSOs – PITCH implementing partners and external actors – in all nine countries. The areas of capacity strengthened vary from personal and organisational capacity, knowledge related to HIV and AIDS, SRHR and human rights, and in conducting advocacy. Through this capacity strengthening, PITCH implementing partners

are now able to conduct their advocacy activities in a more focused and systematic way. PITCH's strategy to allocate resources for capacity strengthening contributed to the success of PITCH as a programme and was considered to be one of the added values for implementing partners to be part of PITCH.

### **EQ 1.6 To what extent has the capacity of PITCH partners to apply a gender-sensitive or transformative approach to their work been strengthened? How has this been achieved? What impact has this had on the outcome of PITCH country level advocacy activities?**

- PITCH has contributed to a variety of gender-sensitive and transformative initiatives, and through this to a number of important outcomes that contribute to gender equality in different ways. These outcomes include a few important changes in law; the development of various policies and guidelines contributing to gender equality; increased participation of marginalised gender groups in formal spaces and policy development; as well as a number of important measures removing gender barriers in access to HIV, other SRHR and legal services. PITCH contributed to this by supporting partners' core work, including on women's rights, the rights of people with diverse SOGIE needs, young people's SRHR etc. In the second half of the programme, PITCH also contributed by strengthening the capacity of other partners to work in more gender-sensitive ways and making them familiar with the concept of such approaches.
- The findings demonstrated that adequate allocation of resources (human and financial) were crucial to encourage and enable partners with limited prior experience and expertise to be sensitive to gender in the work, or to work in a gender-transformative

way. This was only the case in the second half of the programme and, as a consequence, gender was not incorporated comprehensively in the national theories of change and advocacy strategies of many partners. The findings reveal that once resources were allocated and guidance and technical assistance to country partners increased, various partners also experienced an increase in their capacity.

- The most obvious results of the increase in capacity of partners in respect of gender are related to the critical reflection of partners on how gender norms, attitudes and beliefs shape interactions, workplaces and programme activities and the subsequent changes they made in their organisations and programmes. Gender-related differences in key populations' situations and needs are increasingly being considered and more attention is paid to ensure that no one is left behind. The latter is considered an important and promising foundation for gender-sensitive and possible gender-transformative action in the future.

### **EQ 1.7 What lessons can be learned about how gender informs advocacy carried out by and for key populations and adolescent girls and young women?**

- The findings showed that despite the increased gender sensitivity and a number of gender-transformative initiatives by partners - including those addressing harmful gender norms and practices in society - a comprehensive focus on gender to address gender inequality as an important determinant of the health of key populations is (still) the exception rather than the rule. In addition, initiatives that focus on deeper, less obvious determinants of gender and health inequalities - including education, economic opportunities, migration and conflict - were virtually absent.



### **EQ 1.8 From the perspective of different PITCH stakeholders, including implementing partners, which programmatic strategies and approaches have partly or entirely failed? What lessons can we learn from this?**

- The evaluation identified programme dynamics and features that weakened the advocacy activities and results. The early-stage difficulties in PITCH governance resulted in less attention to strategy. A high staff turnover on the part of PITCH country partners, Aidsfonds, and Frontline AIDS gave rise to a loss of knowledge and networks. The different structures and line of coordination within the programme were not always communicated adequately (for instance, the frequent changing of reporting formats created confusion among the country partners). Partners highlighted that the limited information sharing, lack of sustainability plan and phase-out strategy from the beginning of the programme undermined the follow up of some activities and consolidation of results.

**Under Objective 2, the evaluation aimed to understand the extent to which internal and external PITCH stakeholders benefited from collaborating with each other, covering six key evaluation questions.**

**We identified the following conclusions:**

### **EQ 2.1 To what extent have country partners and global policy partners benefited from/connected with each other's advocacy activities?**

- The evaluation findings indicated that only limited connections between country partners, regional partners, global policy partners and their respective advocacy levels were realised under PITCH. The connections that were found were more of an ad hoc nature than a structural activity within a well-defined overarching programme strategy. This is considered a missed opportunity.
- Limitations in communication and coordination, including (early) identification of linkages between agendas and joint strategising, were among the factors that hampered effective collaboration between national, regional and global policy partners.
- The evaluation found that compared to the connection between regional and global policy partners, national and global partners benefited a bit more from each other's participation in PITCH and especially in the second half of the programme when more linkages were made. Among the main benefits experienced were the support and creation of space for country partners to speak at global advocacy events by global policy partners, guidance (although fragmentary) provided to country partners during engagement in global advocacy spaces and processes, and to a lesser extent the provision of evidence provided by country partners to global partners. The engagement in international advocacy not only contributed to increasing the advocacy capacity of country partners and country focal points, but also helped them to strengthen their relationship with their national governments. Missed opportunities have been identified mainly in respect of the involvement of country partners in the preparation and particularly the follow up of international advocacy at country level.

## **EQ 2.2 To what extent have country partners and regional programme partners benefited from/connected with each other's advocacy activities?**

- The evaluation found that country and regional partners did not actively connect with each other under PITCH and the opportunity to link advocacy levels through country and regional partners was not effectively accomplished. A number of factors impacted these effective working relationships. However, despite the absence of a joint strategy or other forms of consistent connection between the regional partners and country partners, examples of more ad hoc forms of linkages were found. This happened for instance with regards to the work on universal health coverage. Linkages prior to PITCH (e.g., through membership of regional networks) emerged as a factor that contributed to linking between national and regional partners under PITCH. Countries that were not located in the working area of regional programme partners did not link with, nor experience benefits from the advocacy activities of regional programme partners – which was indeed not intended.

## **EQ 2.3 To what extent have regional programme and global policy partners benefited from/connected with each other's advocacy activities?**

- The evaluation found that collaboration between PITCH regional and global partners was limited. Consequently, the benefits that global and regional partners reported in respect of their connection through PITCH were few as well.
- The level of ownership of the overall programme experienced by global and regional partners was limited. Partners at the different levels (national, regional, global) had

limited knowledge of each other's work plans and were mainly concerned with their own respective programmes within PITCH. Lack of joint planning/agenda setting or adequate exchanges about the different agendas from the start of the programme showed up as an important underlying factor.

## **EQ 2.4 To what extent have PITCH partners formed or joined coalitions with other civil society organisations that have helped to advance their advocacy, raise the profile of the experiences of key populations and adolescent girls and young women, and set the advocacy agenda?**

- The evaluation found that PITCH partners in all countries supported the formation of coalitions with other CSOs in order to work more closely with organisations that have similar goals, issues, focus and/or targets. This included bilateral and multilateral arrangements among CSOs at the local, national and international level. They joined and formed local coalitions (e.g., MMTN in Myanmar), and national (e.g., National Coalition of Key Populations in Ukraine). Some coalitions were fully set up during the PITCH programme lifecycle (e.g., the Mozambique National Sex Work Platform). Overall, PITCH country partners reported that the formation of a coalition was very much encouraged within the PITCH programme more broadly.

**EQ 2.5 To what extent can examples of effective collaboration at the country level be demonstrated between PITCH and other MoFA-funded programmes working to address HIV and AIDS?**

- The findings indicated that in all countries, one or more PITCH partners collaborated with another MoFA-funded programme, with different levels of collaboration depending on the context. While evidence of some of the effective collaborations between MoFA-funded programmes and PITCH exists, it appears that such activity was ad hoc and no clear strategy was developed under PITCH to strategically or systematically build links between programming.

**EQ 2.6 To what extent have working relationships between PITCH, and the Dutch embassies and permanent missions in the PITCH countries contributed to advocacy outcomes through strategic collaboration?**

- The evaluation found that PITCH partners appreciated the efforts of Dutch embassies to collaborate with them and facilitate introductions to relevant stakeholders such as the government and UN agencies. Dutch embassies played a key role in facilitating meetings of CSOs involved in MoFA-funded programmes which led to a variety of collaborations outlined in the section above.
- The evaluation team considers PITCH to be a successful and unique programme. The role of PITCH country focal points and programme team is highly valued and appreciated by PITCH partners.







Adolescent Girls and Young Women in Kenya used the county leadership mechanism to demand improvements to HIV and SRHR services

# 5

## Recommendations

I am a proud transgender woman and sex worker - see me smile.

I want to live in a world where sex work is recognized as work and rights and services are made available to those whose profession it is.

People who sell sex live in fear and at risk of contracting HIV. Rape by clients, harassment from the police and violence through ignorance are an everyday occurrence for sex workers. We remain stigmatized, discriminated and marginalized from health services. The red represents the blood shed by sex workers facing this reality.

Decriminalization of sex work is the most effective way to increase sex workers' uptake in SRHR [sexual and reproductive health and rights] services - Isn't that what we all want?

### For PITCH implementing partners

- To increase collaboration and coordination with similar programmes at country, regional and global level through the formation of coalitions or the establishment of formal agreements such as MoUs.
- To increase collaboration between PITCH country partners, regional partners and global policy partners by developing a joint advocacy agenda and/or activities.
- To increase the visibility of programme results and successes in country, through testimonials or audio-visual materials which can be based on more than just impact given the limited timespan.
- In advocacy, traditional evidence is difficult to produce. A good system to provide evidence should take the challenges posed by informal advocacy into account. The evaluation team suggests that implementing partners should be able to provide different forms of evidence in the monitoring phase. A monitoring system that includes substantiators could be considered when outcome harvesting is used, to replace traditional evidence that is difficult to obtain otherwise for advocacy programmes.
- To continue the collaboration and engagement between key populations, adolescent girls and young women, the government and other stakeholders.



## For the Dutch MoFA and other donors

- To ensure that the lessons emerging from this evaluation inform the work carried out by the new Strategic Partnerships under the new Dutch MoFA-funded Power of Voices and SRHR Partnership Fund initiatives. This is with a view to supporting the sustainability of the PITCH programme's achievements and sharing lessons learned, which is of relevance both for the Love Alliance programme as well as other new and emerging programmes with a focus on HIV and the human rights of key populations.
- To ensure that the lessons emerging from this evaluation inform the development of comparable strategic funding arrangements by other major institutional donors in the coming years.
- To use the experiences and lessons emerging from PITCH to inform, shape and demonstrate the government of the Netherlands's commitment to the global HIV response and to nurturing the development of Dutch expertise and knowledge in advocacy. This commitment should be demonstrated both in financial and political terms and is of relevance both at Ministry level and the government's overseas diplomatic and trade presence.

## For Aidsfonds and Frontline AIDS on the management of future, comparable programmes

- Establish a clear process for reviewing and adapting programme theories of change, to ensure that they are up-to-date and provide space for contextualisation.
- Periodically revisit programme M&E and reporting systems to make them simpler and more aligned.
- Ensure allocation of resources (including financial) for gender from the very start to allow early gender analysis and integration by partners in their theories of change and work strategies, and to provide timely technical assistance to partners, including by involving local gender experts.
- Encourage and facilitate partners to consider the impact of gender inequalities on the health of key populations and adolescent girls and young women, as well as the structural factors underlying these gender inequalities, and address this through the development of national theories of change and advocacy strategies.
- Ensure early and adequate communication and coordination between national, regional and global policy partners to optimise and effectively link the work they do at the respective advocacy levels. Training and other forms of capacity strengthening is an absolute prerequisite for country partners to identify potential linkages and to meaningfully engage in regional and global processes.
- To allocate resources for information sharing and knowledge sharing for partners at national, regional and international level to facilitate collaboration between them.
- To allocate resources to support innovation in advocacy and sustain results through a mechanism such as co-creation with PITCH implementing partners.

