2025

National Grants Programme Report

AFRICA REACH

Acknowledgments

A special thank you to everyone who participated in the drafting, design and implementation of the Africa REACH national grants programme.

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Community Health Alliance Uganda (CHAU)
The Aurum Institute
Technology for Inspiration Initiative (InspireIT)

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INTRODUCTION:

Context, Purpose, and Approach of the 2025 National Grants Programme

Africa REACH is an African-focused advocacy initiative committed to accelerating progress toward ending AIDS among children, adolescents and young people across the African continent. Working at the intersection of political leadership, community engagement and policy influence, Africa REACH enriches African-led accountability towards paediatric and maternal HIV goals on the continent; global and continental momentum for renewed efforts to end AIDS in children and young people in Africa; and a centralised support mechanism to ensure that political commitments and public attention are translated into meaningful and sustainable national level action.

Africa REACH's National Grants Programme is an essential mechanism through which the project advances its mission to renew political commitment, strengthen community leadership and catalyse action to end AIDS among children, adolescents, and young people in Africa. The programme is designed to support African-led, evidence-based advocacy initiatives that strengthen access to HIV prevention and treatment options, particularly for populations that continue to experience disproportionate vulnerability and systemic exclusion.

The 2025 grants cycle was implemented during a period of exceptional uncertainty in the global HIV response. In response to this moment, Africa REACH issued two Requests for Proposals (RFPs): one targeting new organisations and a second aimed at returning grantees with a demonstrated track record and compelling proposals for continued advocacy. The RFPs focused on strengthening advocacy for equitable access to injectable HIV prevention and injectable HIV treatment options, with an emphasis on community-led approaches, policy engagement, evidence generation, and sustainability beyond the grant period.

The call for proposals was launched in February 2025, with a submission deadline in March 2025, at a time when a global funding freeze was placing significant pressure on civil society organisations, health programmes, and advocacy efforts worldwide. Across Africa, organisations were grappling with constrained resources, paused funding streams, and uncertainty about institutional sustainability. This broader context shaped both the pace and scale of engagement with the grants process.

Africa REACH **received a total of 22 eligible grant applications from organisations based in Côte d'Ivoire and South Africa, as well as proposals from previous grantees operating in other African countries (Uganda, Nigeria, Zambia and Cameroon).** While this **number was lower than in previous grants cycles that attracted several hundred applications, it reflected the realities of the funding environment at the time, rather than a decline in need or relevance.** Many organisations were navigating institutional instability, staffing constraints, and shifting donor priorities, which likely affected their ability to develop and submit proposals within the timeframe.

Despite these challenges, the shortlisting and selection process moved forward in March 2025 with the **support of the Desmond Tutu Health Foundation.** Proposals were assessed based on the strength of their advocacy approach, engagement with decision-makers and communities, use of evidence, feasibility, and potential for sustained impact. Through this process, four organisations were selected for funding.

Two new grantees were awarded grants: **The Aurum Institute** in South Africa and **ONG Alliance** in Côte d'Ivoire, both of which brought strong institutional capacity and policy engagement experience within their respective national contexts. In addition, two returning grantees were selected based on the quality and relevance of their proposals: **Technology for Inspiration Initiative (InspireIT)** from Nigeria and **Community Health Alliance Uganda (CHAU)** from Uganda. These organisations proposed advocacy initiatives that built on prior work, while responding to emerging gaps in access, awareness, and systems' readiness for injectable HIV prevention and treatment. Across all four grants, Africa REACH prioritised initiatives that linked community-level realities with national and sub-national policy processes. Grantees were supported to generate and use evidence, strengthen community literacy and leadership, engage policymakers and health system actors, and contribute to advocacy efforts to improve financing, service delivery, data use, and accountability. Collectively, the 2025 National Grants Programme sought not only to support individual organisational activities but to strengthen Africa REACH's broader advocacy agenda by grounding it in lived experience, locally generated evidence, and cross-country learning.

PROGRAMME OVERVIEW:
Purpose, advocacy focus, and grants architecture

The Africa REACH 2025 National Grants Programme was conceived as a targeted advocacy intervention within a rapidly shifting HIV response landscape. At a time when global progress in HIV prevention and treatment was not being matched by equitable access on the African continent, Africa REACH recognised the need to renew political attention and advocacy for populations that continue to be left behind. UNAIDS data from 2025 shows that children, adolescents, young people, and pregnant and breastfeeding women at heightened risk of HIV acquisition remain disproportionately affected, highlighting the urgency of advocacy approaches that centre equity, community realities, and sustained political commitment.

Despite the growing availability of injectable HIV options in high-income settings, significant hurdles remain for their prioritised and sustainable scale-up across Africa. Without deliberate, locally grounded advocacy, there was a real risk that these innovations would be deprioritised within national health agendas, delayed in policy adoption or implemented in ways that failed to reach communities most in need.

In response, Africa REACH designed the 2025 grants programme to strengthen **evidence-based, community-connected advocacy** capable of influencing both policy and practice. Rather than funding service delivery alone, the programme focused on supporting organisations that could operate at the intersection of **community experience, data generation, and decision-making spaces**, ensuring that advocacy for injectable HIV prevention and treatment was informed by lived realities and positioned for long-term impact.

The grants were structured as '**Fixed Obligation Grants'**, with funding tied to the delivery of clearly defined outputs and milestones over a six-month period. This approach allowed Africa REACH to support focused, time-bound advocacy initiatives while maintaining clarity around expectations, accountability, and deliverables. Each grant was designed to enable organisations to respond strategically to their national and sub-national contexts, while contributing to a broader continental advocacy agenda.

Across all funded initiatives, the programme prioritised five core elements:

01

Clear advocacy strategies focused on expanding access to injectable HIV prevention and/or treatment options, grounded in national policy and health system realities.

02

Engagement with decision-makers, including policymakers, parliamentary structures, health authorities, and other institutional actors responsible for financing, regulation, and implementation.

03

Community-centred approaches, ensuring that advocacy efforts reflected the needs, experiences, and priorities of those most affected by HIV, particularly adolescents, young people, women, and other key populations.

04

Use of evidence, including community-led monitoring, rapid assessments, policy analysis, and stakeholder engagement, to inform advocacy messages and strengthen credibility.

05

A focus on sustainability, with grantees encouraged to embed their advocacy efforts within existing systems, partnerships, and long-term strategies beyond the grant period.

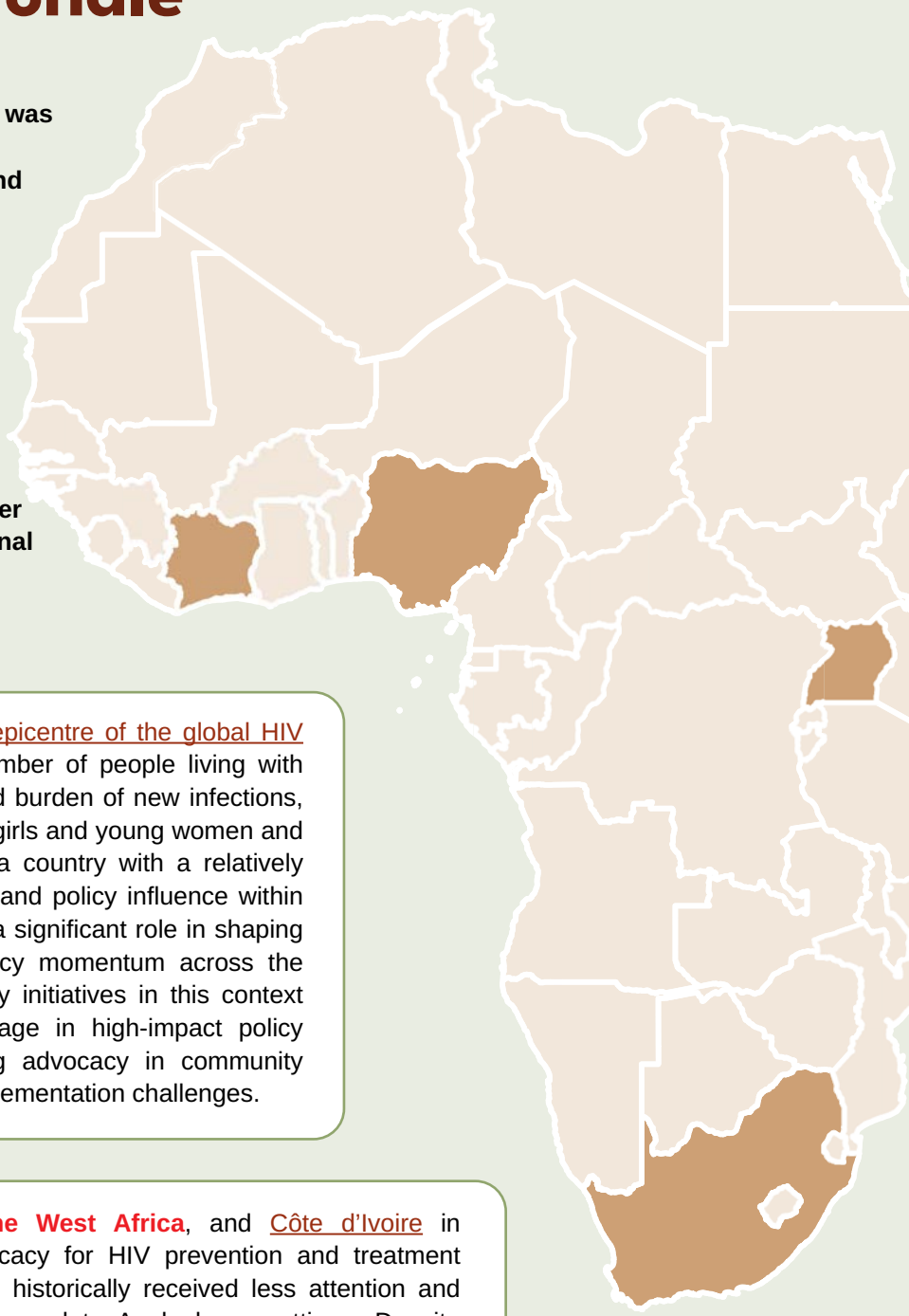
Collaboration was intentionally built into the design and implementation of the 2025 grants programme. Grantees were encouraged to work with existing advocacy organisations, research institutions, and community structures that were already active within their national contexts. This included partnerships with organisations such as the Desmond Tutu Health Foundation during the shortlisting and selection process, as well as collaboration with parliamentary committees, civil society networks, and community-based organisations during implementation.

Through these relationships, grantees aligned advocacy messaging, shared evidence generated through community engagements and monitoring, and participated in joint policy dialogues and stakeholder convenings. In practice, the grants programme functioned as a platform for alignment and learning by connecting community-level evidence with national decision-making spaces and for collective influence by amplifying locally grounded advocacy messages through coordinated engagement rather than isolated efforts.

Importantly, the 2025 National Grants Programme was not intended to produce uniform activities across countries. Instead, it was deliberately flexible, allowing each organisation to tailor its advocacy approach to the political, cultural, and health system context in which it operated. What united the grants was a shared commitment to advancing equitable access to injectable HIV prevention and treatment through advocacy that was locally rooted, evidence-informed, and strategically positioned to influence change.
Together, the grants formed a coherent programme that linked community-level realities with national and regional policy conversations, while reinforcing Africa REACH's role as a convener and catalyst within the HIV advocacy ecosystem.

Geographic Contexts and Strategic Rationale

The 2025 National Grants Programme was implemented across four countries: South Africa, Côte d'Ivoire, Nigeria, and Uganda. Each country was selected for its strategic relevance to Africa REACH's advocacy priorities and the broader continental HIV response. While these contexts differ in language, political systems, and health infrastructure, they share common challenges related to inequitable access, uneven policy prioritisation, and the need for stronger community-led advocacy within national decision-making processes.



South Africa remains at the epicentre of the global HIV epidemic, with the highest number of people living with HIV worldwide and a continued burden of new infections, particularly among adolescent girls and young women and other priority populations. As a country with a relatively strong health system capacity and policy influence within the region, South Africa plays a significant role in shaping norms, evidence, and advocacy momentum across the continent. Supporting advocacy initiatives in this context allows Africa REACH to engage in high-impact policy conversations while grounding advocacy in community realities and health system implementation challenges.

In **Francophone West Africa**, and Côte d'Ivoire in particular, advocacy for HIV prevention and treatment innovations has historically received less attention and investment compared to Anglophone settings. Despite ongoing HIV transmission and structural vulnerabilities affecting young people and key populations, the region remains underrepresented in continental advocacy spaces. In supporting a grantee in Côte d'Ivoire, Africa REACH sought to strengthen advocacy capacity in a Francophone context, expand linguistic and regional representation, and ensure that policy conversations around injectable HIV prevention and treatment are inclusive of diverse African perspectives.

Nigeria represents both a significant HIV burden and a complex advocacy environment shaped by decentralised governance, large population size and wide disparities in access to health services. With adolescents and young people accounting for a substantial proportion of new infections, Nigeria requires advocacy approaches that can operate across community, state and national levels. Supporting a returning grantee in this context enabled Africa REACH to build on existing relationships and learning, while advancing advocacy strategies that reflect the scale and diversity of Nigeria's HIV response.

In **Uganda**, sustained investment and strong civil society engagement have contributed to notable progress in the sexual and reproductive health and HIV response, including a well-established advocacy ecosystem and active engagement between government and non-state actors. However, adolescent girls and young women continue to experience elevated vulnerability to HIV, highlighting the importance of prevention approaches that respond to both biomedical and structural realities.

The introduction of injectable HIV prevention options presents a significant opportunity to build on Uganda's existing gains by expanding choice, improving adherence, and strengthening prevention outcomes for populations at substantial risk. Uganda's policy environment, which is characterised by active parliamentary oversight, decentralised health governance, and routine engagement with development partners, creates clear entry points for informed, evidence-based advocacy. Supporting Community Health Alliance Uganda (CHAU), an Africa REACH Friends and Partners' organisation with experience in co-creation and policy engagement alongside partners such as the Ministry of Health, UNICEF, and UNAIDS, allowed Africa REACH to leverage existing institutional relationships while grounding advocacy efforts in community-level evidence and lived experience.

Across these four countries, Africa REACH deliberately supported organisations operating at different points along the advocacy spectrum. From community mobilisation and evidence generation to national policy engagement. Through this geographic spread, Africa REACH aimed for an enabling environment for cross-context learning while reinforcing a central programme objective: ensuring that advocacy for injectable HIV prevention and treatment is shaped by local realities, responsive to political and health system contexts, and positioned to influence sustainable change.

PROGRAMME METHODOLOGY AND IMPLEMENTATION APPROACH

The 2025 National Grants Programme was implemented using a structured, yet adaptive approach designed to balance accountability with contextual responsiveness. Africa REACH recognised that effective advocacy for injectable HIV prevention and treatment requires flexibility to engage diverse political, community, and health system environments, while maintaining clarity around objectives, deliverables, and learning.

Grants funding is linked to the completion of clearly **defined milestones** rather than reimbursement of incurred costs. This approach supported focused, time-bound advocacy initiatives and enabled grantees to plan activities with clear outputs, timelines, and accountability mechanisms. **Each grantee developed an agreed set of deliverables** aligned to the programme's advocacy objectives, including community engagement activities, policy dialogues, evidence-generation outputs, and advocacy materials. With the help of the Desmond Tutu Health Foundation, Africa REACH provided ongoing assistance throughout the grant period, with a focus on **strategic support rather than directive oversight**. This included regular check-ins, technical guidance when required, and space for grantees to adapt their activities in response to evolving political or operational contexts of their respective countries.

Evidence generation and use were central to the implementation approach. Grantees used several methods: including community dialogues, rapid assessments, community-led monitoring, stakeholder engagements, and policy analysis, to inform advocacy messaging and engagement with decision-makers. This evidence was used to strengthen the credibility of advocacy efforts and to ensure that community experiences and priorities were reflected in national and sub-national policy discussions.

Learning and reflection were integrated across the programme. **Grantees were encouraged to document emerging insights, challenges, and adaptations**, particularly regarding community engagement, policy access, and health system responsiveness. Africa REACH used these insights to identify cross-cutting themes and areas of convergence across countries, reinforcing the programme's role as a learning platform and an advocacy mechanism.

Throughout implementation, Africa REACH remained in regular contact with each organisation, championing ethical engagement, respect for community leadership, and responsible utilisation of grant resources. Deliverables produced through the grants, including advocacy materials, briefs, and evidence products, were made available by Africa REACH for broader advocacy efforts, in line with the agreed grant terms. This ensured that the impact of the grants extended beyond individual organisations, contributing to Africa REACH's collective advocacy momentum.

For example, insights and thematic priorities emerging from the National Grants Programme informed an Op-Ed co-authored by Africa REACH and the African Union Commission's Women, Gender and Youth Directorate. The Op-Ed called for pregnant and breastfeeding women to be centred within HIV prevention strategies, reflecting a key advocacy theme of the 2025 grants programme: strengthening funding, access, and availability of long-acting HIV prevention options, including injectable PrEP.

GRANTEE-LED ADVOCACY AND IMPACT ACROSS CONTEXTS

Through the 2025 National Grants Programme, **Africa REACH supported four organisations South Africa, Côte d'Ivoire, Nigeria, and Uganda, whose advocacy efforts addressed distinct but interconnected gaps in affordable access, awareness, and policy readiness for long-acting HIV prevention and treatment.** While each organisation operated within a unique national and community context, their collective work strengthened HIV literacy, elevated community voices, and advanced evidence-informed advocacy within national decision-making spaces.

INTRODUCTION TO THE GRANTEES

The Aurum Institute (South Africa)

In South Africa, The Aurum Institute implemented an advocacy and communications-focused initiative aimed at strengthening public understanding and policy discourse around long-acting HIV prevention and treatment options. Operating within a country that continues to experience the highest number of new HIV infections globally, Aurum's work focused on translating complex scientific and policy concepts into accessible, community-facing information.

Technology for Inspiration Initiative (InspireIT) (Nigeria)

Technology for Inspiration Initiative (InspireIT), a returning grantee from Nigeria, built on prior advocacy experience to advance HIV prevention literacy and community engagement around long-acting HIV prevention and treatment options. Operating in a complex and decentralised health system, InspireIT focused on strengthening community-level understanding while engaging policy and institutional stakeholders.

ONG Alliance (Côte d'Ivoire)

In Côte d'Ivoire, ONG Alliance implemented an advocacy initiative focused on strengthening awareness and policy engagement around long-acting HIV prevention within a Francophone West African context. The organisation's work responded to a relative gap in advocacy attention and locally generated evidence in the region, particularly around emerging HIV prevention modalities.

Community Health Alliance Uganda (CHAU) (Uganda)

In Uganda, Community Health Alliance Uganda (CHAU), also a returning grant, implemented a multi-level advocacy initiative that linked community-generated evidence with national policy engagement around long-acting HIV prevention. Building on Uganda's strong SRH and HIV advocacy environment, CHAU focused on positioning long-acting prevention as a strategic opportunity to address persistent vulnerabilities among adolescent girls and young women and other populations at substantial risk.

The sections that follow present each grantee in turn, outlining their context, key advocacy activities, and contributions to strengthening HIV prevention, policy engagement, and literacy around long-acting HIV prevention and treatment.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South Africa remains central to the global HIV response, **accounting for the highest number of people living with HIV worldwide and continuing to experience new infections,** particularly among adolescent girls and young women and other key populations. Within this context, The Aurum Institute implemented an advocacy and communications-focused initiative aimed at strengthening HIV prevention and treatment literacy, with a specific focus on long-acting HIV prevention and treatment options.

Aurum's work recognised that while policy discussions and clinical research around HIV prevention continue to advance, gaps in accessible, community-facing information persist. Misconceptions about HIV prevention options, particularly around the differences between prevention and treatment, and between oral and long-acting modalities, remain a barrier to informed choice, uptake, and advocacy. Addressing these gaps was a key objective of the grant.

Supporting Advocacy and Engagement Beyond Communities

In addition to their use at the community level, the IEC materials produced through the grant were intended to support broader advocacy efforts for literacy and regulatory influence. Civil society organisations, health workers, and advocates used these materials to facilitate conversations with community members, policymakers, and programme implementers about long-acting HIV prevention and treatment.

By **strengthening the availability of credible, locally developed content,** Aurum's work contributed to improving the quality of advocacy engagements and public discourse. The materials provided a shared reference point that could be used across different settings such as trainings, in health facilities, and meetings and workshops, helping align messaging and reinforce evidence-informed advocacy.

Engagement within a Broader Policy Advocacy Ecosystem

Beyond its focus on HIV prevention literacy, **The Aurum Institute operated within a broader ecosystem of civil society organisations and advocacy groups engaged in national policy dialogue around long-acting HIV prevention in South Africa.** This collective advocacy environment brought together research institutions, community organisations, and policy-focused NGOs to elevate evidence, amplify community-informed perspectives, and sustain attention on the need for expanded prevention options.

Through its communications and advocacy outputs, Aurum contributed to this ecosystem by strengthening the availability of credible, accessible information that could be used across policy and stakeholder engagements. These efforts supported ongoing dialogue with national health stakeholders and helped reinforce civil society calls for regulatory progress and timely access to long-acting HIV prevention options.
In October 2025, South Africa reached **a significant milestone when the South African Health Products Regulatory Authority (SAHPRA) announced the registration of a twice-yearly injectable HIV prevention option, making South Africa the first country on the African continent to approve a long-acting HIV prevention intervention.** While this decision reflected the culmination of multiple processes and actors, it followed sustained engagement by civil society and advocacy groups working to ensure that long-acting HIV prevention remained visible within national policy and regulatory discussions.

Aurum's participation in this broader advocacy ecosystem illustrates how community-facing work, evidence translation and policy engagement can reinforce one another. Contributing to a shared advocacy environment, the organisation's work aligned with Africa REACH's approach of supporting locally grounded efforts that, collectively, help shift national conversations and create enabling conditions for equitable access.


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ONG ALLIANCE
- CÔTE D'IVOIRE

In Côte d'Ivoire, ONG Alliance implemented an advocacy initiative to strengthen awareness, understanding, and policy engagement around long-acting HIV prevention within a Francophone West African context. While Côte d'Ivoire has made important progress in its national HIV response, advocacy and public discourse around **newer HIV prevention options have received comparatively limited attention, particularly outside of Anglophone policy and research spaces.**

Africa REACH's support to ONG Alliance **was grounded in a strategic intent to expand advocacy reach into Francophone West and Central Africa and to ensure that conversations around long-acting HIV prevention reflected linguistic, cultural, and regional diversity.** ONG Alliance's work **responded to this** gap by **situating advocacy within existing national HIV structures while centering community awareness and civil society engagement.**

Building Community Awareness and Understanding

A core focus of ONG Alliance's activities was community sensitisation around HIV prevention options, with particular attention to long-acting modalities. Through targeted community engagements, the organisation worked to increase understanding of HIV prevention choices, address misconceptions, and create safe spaces for discussion among community members, youth and local civil society actors.

These engagements were designed to be participatory and context-specific, recognising that limited familiarity with long-acting HIV prevention options can be a barrier to both uptake and advocacy. Through grounding discussions in community realities and everyday concerns, ONG Alliance supported more informed dialogue and helped demystify long-acting prevention approaches for audiences who had previously limited exposure to them.

Strengthening Civil Society Advocacy and Policy Engagement

Beyond community-level activities, **ONG Alliance focused on strengthening the capacity of civil society actors to engage in policy and stakeholder discussions around HIV prevention.** The organisation convened and engaged with civil society networks and institutional stakeholders to situate long-acting HIV prevention within broader national prevention strategies and policy conversations.

Advocacy materials developed through the grant **were tailored to the Francophone context** and used to support engagement with decision-makers and partners. These materials provided a foundation for consistent messaging and framed long-acting **HIV prevention as a complementary option within existing HIV prevention efforts**, rather than as a standalone or externally driven intervention.

Through this approach, ONG Alliance focused on expanding the policy space for discussing long-acting HIV prevention **to help reinforce the role of civil society as a bridge between community priorities and national decision-making processes.**

Expanding Francophone Representation in Continental Advocacy

ONG Alliance's work addressed a broader structural gap within continental HIV advocacy: the relative underrepresentation of Francophone West and Central African perspectives in pan-African policy discourse. Historically, continental conversations on HIV prevention innovation have been disproportionately shaped by Anglophone countries with earlier access to new technologies and stronger civil society visibility. Through generating context-specific materials in French, engaging national stakeholders, and elevating local perspectives, ONG Alliance aimed to make long-acting HIV prevention advocacy reflect the realities of West and Central Africa and contribute to a more representative regional narrative that recognises linguistic diversity,

varied epidemic contexts, and differentiated policy readiness across the continent.

This contribution **aligns closely with Africa REACH's commitment to Africa-led advocacy that reflects the full diversity of the continent.** Supporting ONG Alliance enables Africa REACH to deepen engagement in a region that remains less visible in regional and global HIV prevention discourse, while reinforcing the importance of locally driven advocacy strategies.

Policy Engagement within a Shifting Political Context

Policy engagement formed an important component of ONG Alliance's advocacy strategy. The organisation **planned to engage Parliamentarians and national decision-makers to advance dialogue around long-acting HIV prevention** within Côte d'Ivoire's legislative and policy frameworks. However, the national election period created delays and limited access to elected officials, requiring a temporary shift in advocacy sequencing.

In response, ONG Alliance focused on strengthening civil society alignment, refining advocacy messaging, and engaging institutional stakeholders to maintain momentum during the election period. Towards the end of the grant period, the organisation resumed policy-oriented engagements through stakeholder forums and advocacy platforms to position long-acting HIV prevention within broader national HIV prevention discussions and lay the groundwork for continued parliamentary engagement beyond the grant timeframe.


TECHNOLOGY FOR
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TECHNOLOGY FOR NSPIRATION INITIATIVE (InspireIT) - NIGERIA

In Nigeria, Technology for Inspiration Initiative (InspireIT), a **returning grantee,** implemented a youth-centred advocacy initiative that combined community engagement, public-facing awareness, and policy-oriented dialogue to strengthen HIV prevention literacy around long-acting HIV prevention and treatment options. Operating within **one of the most complex HIV response environments on the continent**, InspireIT's work **responded to persistent HIV susceptibility among adolescents and young people, alongside cultural sensitivities and stigma that continue to shape public discourse on HIV prevention.**

Africa REACH's continued support to InspireIT reflected both the scale of Nigeria's HIV epidemic which impacts **2.45 million people**, and approximately **60% of youth** still lacking prevention knowledge through contextually appropriate and impactful programming. In the previous grants cycle InspireIT demonstrated its ability to engage young people and institutions in ways that are contextually appropriate, visible, and impactful.

Expanding Public Awareness through High-Visibility Advocacy

A notable feature of InspireIT's work under the 2025 National Grants Programme was **its use of high-visibility public awareness strategies to normalise conversations around HIV prevention.** The organisation installed **two advocacy billboards** in Nigeria's major urban cities, **Lagos and Abuja**, bringing messages on HIV prevention into highly visible public spaces.

In a region where **discussions around HIV, sexuality and prevention options can remain taboo, particularly for young people**, the **placement of billboards in prominent locations represented a significant advocacy achievement.** These public-facing materials were **created to help elevate HIV prevention into mainstream discourse and reinforce the legitimacy of conversations around long-acting prevention options** and signalling the growing civic space for prevention advocacy.

Youth Engagement and University-Based Convenings

InspireIT complemented public awareness efforts with targeted youth engagement activities, including the convening of **health workers, policy experts, and advocates within a university setting**. InspireIT was **part of a panel at the FOHSSA Health Conference 2025 at Imo State University.** Hosting dialogues at a university, **the organisation deliberately engaged a demographic at heightened risk of HIV acquisition while also shaping future health professionals, policymakers, and opinion leaders.**

These convenings created **structured spaces for discussion on HIV prevention options, service delivery realities, and policy considerations related to long-acting HIV prevention and treatment.** Bringing together experts and young people in the same forum supported informed dialogue, reduced the potential for misinformation and strengthened the link between technical expertise and lived experience.

Engagement with National Institutions and Policy Actors

Beyond community and public-facing activities, InspireIT engaged national-level institutions as part of its advocacy strategy. This included engagement with the **National AIDS Council**, contributing to policy-relevant discussions on HIV prevention priorities and the evolving prevention landscape in Nigeria.

The organisation also participated in policy-oriented and legislative engagement spaces, positioning long-acting HIV prevention within broader national conversations on HIV response and youth health. While Nigeria's policy environment presents ongoing challenges due to its decentralised governance structure, these engagements represented important entry points for sustained advocacy and institutional awareness


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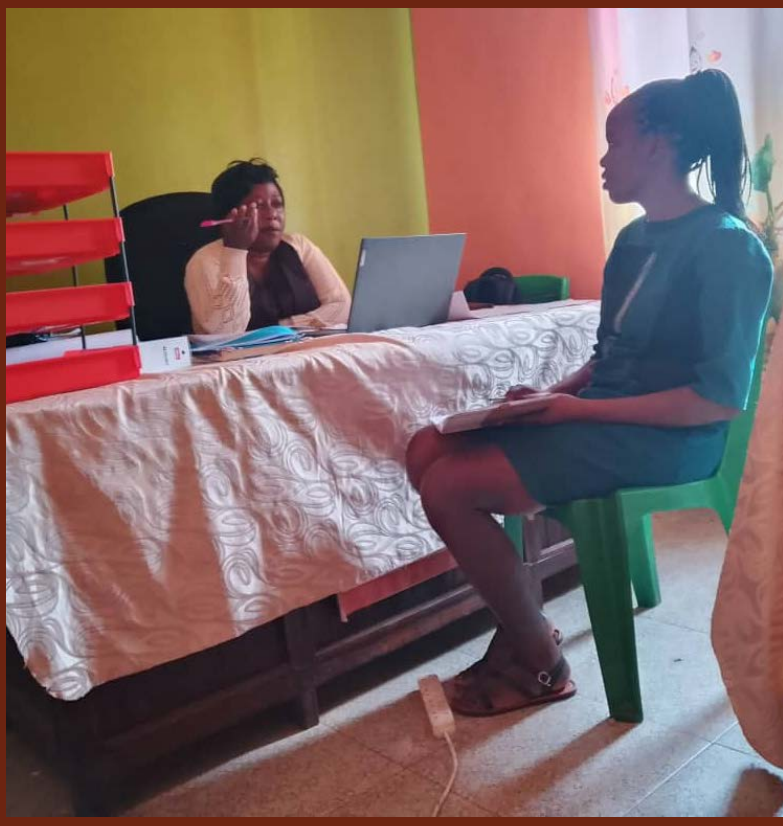

COMMUNITY HEALTH ALLIANCE UGANDA (CHAU) - UGANDA

In Uganda, Community Health Alliance Uganda (CHAU), another returning grantee, **implemented a multi-level advocacy initiative that connected community-generated evidence with national policy engagement around long-acting HIV prevention.** Building on Uganda's strong sexual and reproductive health and HIV advocacy environment, CHAU's work focused on **advancing informed, community-led advocacy to strengthen financing and delivery accountability for HIV prevention options,** particularly for adolescent girls, young women (including their partners), and other key populations.

Africa REACH's support to CHAU recognised the organisation's experience working across community, civil society, and policy spaces, as well as its established relationships with national and global partners. The grant enabled CHAU to deepen its advocacy efforts while contributing to Africa REACH's broader agenda of grounding policy advocacy in lived experience and locally generated evidence.

Generating Community-Led Evidence

A **significant component of CHAU's work was generating community-led evidence to inform advocacy around long-acting HIV prevention**. Through rapid assessments, community dialogues, and community-led monitoring activities, CHAU gathered insights on awareness, acceptability, and perceived barriers related to long-acting prevention options.

These activities engaged community members, health workers, and local leaders, creating structured spaces for reflection on service availability, youth-friendliness, supply chain challenges, and data gaps. **The evidence generated provided a grounded understanding of both opportunities and constraints within Uganda's health system and highlighted the importance of community-based delivery models in expanding access.**

Engaging Policymakers and Strategic Partners

CHAU's advocacy efforts included engagement with policymakers, parliamentary structures, and strategic partners involved in Uganda's HIV response. **Leveraging its experience in co-creation** and collaboration with institutions such as the Ministry of Health, UNICEF, and UNAIDS, CHAU aims to position community evidence within existing policy and coordination platforms.

This **engagement helped reinforce the role of civil society as a credible source of data and insight, while ensuring that community perspectives informed national conversations on HIV prevention** priorities. The organisation's ability to navigate both community and policy spaces strengthened the link between lived experience and decision-making.

CONCLUSION: ADVANCING COLLECTIVE ADVOCACY FOR EQUITABLE ACCESS

Despite important advances, the grants also highlighted how early many countries remain in the journey toward equitable access to long-acting HIV prevention**. In Nigeria and Côte d'Ivoire, baseline assessments and stakeholder engagements revealed persistent knowledge gaps, with some community members unfamiliar with PrEP altogether and unaware that prevention options extend beyond condoms.** These findings **reinforced the need for advocacy to begin with foundational literacy, community trust, and health system preparedness before affordability debates can fully materialise.**

In South Africa, regulatory progress in late 2025 marked a significant milestone. However, in the other grants programme countries, long-acting prevention options remain in the early stages of policy consideration and introduction of readiness. This reality **highlights the necessity of sustained advocacy, not only to support regulatory approval and availability, but to ensure that once introduced, these options are accessible, affordable, and equitably distributed. The Africa REACH 2025 National Grants Programme therefore represents both progress and proof of concept. It demonstrates that coordinated, community-centred advocacy can generate momentum around innovation, while also making clear that the work ahead requires deeper investment, expanded partnerships, and continued focus on equitable access.**

The Programme demonstrates that **targeted, time-bound advocacy investments can generate meaningful momentum within complex and shifting HIV response environments.** While each grantee operated within its own distinct political and health system contexts, their collective efforts contributed to measurable progress in awareness, engagement and policy positioning around long-acting HIV prevention and treatment.

Across four countries, the grants supported community engagements, stakeholder dialogues, policy-oriented convenings, public awareness campaigns and the development of advocacy materials that reached diverse audiences, including adolescent girls and young women, health workers, civil society actors, academic institutions, media platforms and national decision-makers. Through billboards in major urban centres, university-based expert convenings, policy briefs, parliamentary engagement attempts, community dialogues, and information materials distributed at scale, the programme helped expand literacy and visibility around long-acting HIV prevention options at a critical moment in their global rollout.

Importantly, **the grants contributed to strengthening the enabling environment for introduction and scale-up.** In South Africa, civil society advocacy to which one of the grantees contributed, coincided with regulatory progress, including the approval of a

twice-yearly long-acting HIV prevention injection in October 2025. In Côte d'Ivoire, Uganda, and Nigeria, advocacy activities helped elevate long-acting prevention within national discussions, strengthened coordination among stakeholders, and laid groundwork for sustained policy engagement. Even in situations where elections or regulatory processes slowed formal engagement, advocacy momentum was maintained through adaptive strategies and stakeholder alignment.

Beyond immediate outputs, the grants reinforced a broader shift: positioning communities not merely as beneficiaries of innovation, but as informed advocates shaping access pathways. Through building literacy, convening cross-sector actors, and generating locally grounded evidence, grantees strengthened the social and policy foundations necessary for equitable, affordable, and sustainable access once long-acting options become widely available.

For Africa REACH, the programme demonstrated the strategic value of investing in organisations capable of bridging community experience, and policy influence. Insights generated through these grants informed Africa REACH's own advocacy messaging, contributed to high-level engagement, including continental positioning efforts with African Union Commission partners, and reinforced the organisation's role as a convener and amplifier of Africa-led solutions.
Collectively, **the 2025 National Grants Programme moved beyond activity implementation to contribute to narrative change, stakeholder alignment, and policy readiness.** In a period marked by funding uncertainty and global instability, the programme affirmed that coordinated, community-centred advocacy remains essential to accelerating progress toward an AIDS-free generation in Africa.

COLLECTIVE CONTRIBUTION TO AFRICA REACH'S HIV RESPONSE

Taken together, the four grantee initiatives advanced Africa REACH's broader HIV response by strengthening advocacy capacity and sustainability across multiple levels of the health system. From community literacy and youth engagement to policy dialogue and parliamentary advocacy, the grants contributed to a more informed, inclusive, and evidence-driven conversation on affordable access to long-acting HIV prevention and treatment

Supporting organisations operating in diverse geographic and political contexts enabled Africa REACH to amplify locally grounded advocacy messages while reinforcing shared priorities around equity, access, and sustainability. The 2025 National Grants Programme thus functioned not only as a set of discrete grants, but as a coordinated effort to strengthen Africa REACH's advocacy agenda and its commitment to an AIDS-free generation in Africa.

INDIVIDUAL ORGANISATION CONTRIBUTION TO AFRICA REACH'S HIV RESPONSE

The Aurum Institute

Through its focus on HIV literacy and communications, The **Aurum Institute's grant contributed to Africa REACH's broader objective of ensuring that advocacy for long-acting HIV prevention and treatment is grounded in accessible, community-relevant information.** The outputs generated under the grant extended beyond a single organisation, supporting Africa REACH's efforts to amplify clear, accurate messaging across its networks and advocacy platforms.

Aurum's work **demonstrated the importance of communications and literacy as foundational components of effective HIV advocacy,** and by addressing information gaps and supporting informed dialogue, the initiative strengthened the conditions necessary for equitable access and sustained engagement around long-acting HIV prevention and treatment in South Africa.

Technology for Inspiration Initiative (InspireIT)

Through its combined use of public advocacy, youth engagement, and institutional dialogue, InspireIT's work contributed to Africa REACH's broader HIV response by demonstrating how **advocacy can operate simultaneously across visibility, community, and policy spaces.** The initiative illustrated the value of **normalising HIV prevention conversations in public domains while grounding advocacy in youth leadership and expert engagement.**

InspireIT's activities **strengthened Africa REACH's understanding of how youth-led organisations can navigate stigma, scale, and decentralisation to advance advocacy** for long-acting HIV prevention and treatment. The grant reinforced the importance of bold, context-sensitive approaches that elevate prevention into public consciousness while engaging national institutions in sustained dialogue.

ONG Alliance Côte d'Ivoire

Through its **combined focus on community sensitisation, civil society engagement, and policy-oriented advocacy,** ONG Alliance's work contributed to Africa REACH's broader HIV response **by strengthening awareness and advocacy capacity in Côte d'Ivoire and the wider Francophone region.** The initiative demonstrated how **targeted, context-sensitive advocacy can create entry points for sustained engagement around long-acting HIV prevention**, even in settings where such conversations are still emerging.

Anchoring advocacy efforts in community understanding and civil society collaboration, ONG Alliance helped lay the groundwork for more inclusive and regionally representative policy dialogue, which is **an essential component of Africa REACH's vision for a coordinated, continent-wide response to ending AIDS.**

Community Health Alliance Uganda (CHAU)

Through its integrated approach, CHAU's work made a significant contribution to Africa REACH's HIV response by demonstrating how community-led evidence can inform policy advocacy and systems-level change. The grant will help strengthen Africa REACH's ability to engage in informed advocacy around long-acting HIV prevention, particularly in relation to financing, accountability and service delivery models.

CHAU's experience highlighted **the value of sustained civil society engagement in mature advocacy environments and reinforced Africa REACH's commitment to supporting organisations that can bridge community realities and national policy processes.** The initiative provided practical examples of how advocacy for long-acting HIV prevention can be grounded in evidence, shaped by community leadership, and positioned for long-term impact.