

FINDINGS from the Community-Led Monitoring (CLM) of Quality and Coverage of HIV and Health Services in Port Moresby, PNG OVERALL SUMMARY (v.1-2023.08.24)

"When community works together, change happens"

Key Population Advocacy Consortium

KPAU PNG							PAPUA NEW GUINEA				
	Seven (7) Categories of Quality										
	AWARENESS	ACCESSIBILITY	AVAILABILITY	AFFORDABILITY	APPROPRIATENESS	ACCEPTABILITY	ACCOUNTABILITY				
	of services	of services	of services	of services	of services	of services	of Service Providers				
Indicators	Information about the facility services are disseminated outside the facility (catchment area); Providers are providing additional information about the service and the facility.	Clients did not wait for more than one hour before the service was provided; Clients did not hesitate to go to the facility (because of accessibility issues).	The intended service was available and provided; For services that were not, clients were provided information where to avail it (or referred).	Client did not pay for or use its own money for the service provided (for services that are free).	Services specific to KP was provided; Services specific to young person (24 and younger) was provided.	Client did not feel stigmatized or discriminated when the service was provided; Client did not feel afraid to access the service (did not worry about people knowing its KP or HIV status)	Client is aware of mechanisms to report complaints about the service; Client feels confident that the provided made him/her fully aware of the service provided.				
General Findings from Exit Interviews; Community Forums; Facility Observations.	There were clients who did know about the services of the facility before going to avail of the service despite living with the community around the facility.	There were clients who waited for more than 1 hour or up to 4 hours before the service were provided.	Some staff of the facility were unaware of the services available in the facility. KPAC profile of the facilities are outdated. Some services are no longer available.	Some clients were required to pay for the service – despite of the expectation (general knowledge) that HIV tests, STI consultations, diagnosis, treatment and other services are supposed to be free.	There are no services specific to KP and Young People . HIV, STI, TB services are provided to all who go to the facilities. No KP youth peer counsellor; No TG-specific service (TG issues).	There were clients who reported any experience of stigma or discrimination Being shouted at; because called publicly as KP; Client book left open at the counter; Feels shame/afraid because of multiple people in the clinic (including friends or family) – may know as MSM, or as PLHIV	Multiple clients are not aware where to raise issue or report complaints. Limited feedback mechanism.				
Recommended Actions	Improve awareness	Improve accessibility	Improve availability	Improve affordability	Develop targeted services	Improve acceptability	Improve accountability				
IN THE FACILITY											

IN THE COMMUNITY				
IN THE COMMONT				
BY KPAC and SR				
DI NPAC alla SK				
OTUEDO				
OTHERS				