

Raramo ineTariro nePEPFAR

Ukuphila Ethembeni ngePEPFAR (Ndebele translation)

Living Hopefully with PEPFAR (English translation)



PEPFAR

U.S. President's Emergency Plan for AIDS Relief

September 2020

Greetings Everyone,

Welcome to the third edition of **Raramo ineTariro nePEPFAR**, the PEPFAR Zimbabwe e-newsletter. The last six months have been trying and exhausting for everyone working in the health sector – almost no one has been spared the effects of the fast-spreading COVID-19 disease. Predictably, many of our PEPFAR-supported programs in Zimbabwe have taken a hit. Still, PEPFAR's quarter three results (April-June) show remarkable increases in HIV treatment linkage and retention, as well as record-high viral load coverage and suppression. We would like to dedicate this issue of the newsletter to our implementing partners who have found the tenacity to protect gains made in the response to HIV. Their efforts are nothing short of heroic.

Quarter three was also the first time the PEPFAR program has collected and reported the national treatment current (TX_CURR) figure for Zimbabwe. A total of 1,149,354 adults and children are currently receiving ART, representing 85% coverage of the total population living with HIV. This remarkable reporting achievement allows for more robust monitoring of the progress made towards epidemic control.

In this issue, we also hear from civil society in a special recurring feature called "Community Corner." We learn that the Zimbabwe National Network of People Living with HIV (ZNNP+) has launched a call center for PLHIV called Kutabila covering Zimbabwe's ten provinces plus a dedicated line for Youth and Key Populations. The call center is proving to be effective in relaying timely health advice, ensuring prompt response to emergencies, and facilitating timely referrals.

Finally, we are happy to welcome two new members of the USG team in Harare: Dr. Michael Melchior is the new Country Director for the Centers for Disease Control and Prevention (CDC Zimbabwe), and Mr. Art Brown is the new USAID Mission Director.

As always, thank you for your contributions and continued support of this newsletter. If you have contributions for future editions please submit them to our Communications Specialist, Gay Nyakwende (NyakwendeG@state.gov).

Remember to wear masks, practice social distancing, and stay safe.

Best Wishes,

Kristine F. Clark
PEPFAR Country Coordinator

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PEPFAR Health Partners Demonstrate Heroic Resilience in the Face of a National Health Emergency

Zimbabwe has been hit hard this year by the COVID-19 pandemic coupled with a nurses and doctors strike that has left many health facilities closed or operating with skeletal staff. Through it all, PEPFAR implementing partners have shown remarkable resilience and resolve, ensuring that people living with HIV continue to receive their lifesaving treatment.

Implementing partners met virtually on August 19th to discuss how the current health emergency has impacted their work. Partners have not been immune from the effects of COVID-19 on staff, especially those who work in health facilities. Certain HIV services like community testing, voluntary medical male circumcision (VMMC), and cervical cancer screening have inevitably slowed over the last five months due to safety concerns.

Despite the many challenges, PEPFAR implementing partners have adapted programs and altered services to protect the gains in the response to HIV, and preliminary PEPFAR results from quarter three (April-June) reflect this good work. PEPFAR's data shows increases over previous quarters in the proportion of people linked to HIV treatment, retained in treatment, receiving more than three months of ART, viral load coverage, and viral load suppression. Impressively, viral load coverage in PEPFAR-supported districts rose 20 percentage points above the FY19 Q3 results and are the best in program history. Linkage to treatment, at 96%, was also the highest in program history.

Clinical partners have addressed the issue of closed facilities by launching outreach programs and mobilizing clients to pick up their ART via phone calls, SMS, and WhatsApp. One of the prevention strategies in the context of COVID-19 is to reduce unnecessary visits to clinics and hospitals by giving multi-month ART to clients. Results from Q3 show 80 percent of clients received a three-to-six-months supply of ART and an additional 11 percent of patients received a six-months supply or greater.

Partners are also reallocating resources and adjusting the deployment of human resources for health (HRH) to help fill workforce gaps. For instance,

with VMMC services slowed, ZAZIC is reallocating resources to support mobile health teams that deliver critical HIV services at sites with HRH shortages.

Even while suffering their own losses, illnesses, and absenteeism due to COVID-19, PEPFAR partners achieved incredible results in Q3 while protecting gains made in the HIV response and saving Zimbabwean lives. PEPFAR will continue to support implementing partners with guidance, sharing of best practices, and ensuring that the safety of health workers remains the highest priority.



FHI360 works with Community ART Refill Groups (CARGs) which provide alternatives for clients living with HIV who cannot make it to facilities for their treatment. (Photo credit: FHI360)



ZNNP+ Launches the First-Ever PLHIV Virtual Platform

Story submitted by ZNNP+

HAVE A QUESTION?, NEED HELP?

Call free **08080441** and get linked

- 1. HIV prevention including HTS, condoms, PreP and PMTCT
- 2. Treatment services including ART and STI treatment
- 3. Human rights, stigma, discrimination and SGBV support services
- 4. Key Population and Youth friendly services
- 5. Impact mitigation of COVID-19 and HIV
- 6. SRHR services

COVID-19
MENTAL HEALTH
ARVs
VIRAL LOAD
TOLL FREE

@znnpinfo @ZimbabweNationalNetworkOfPLHIV
Web: www.znnp.org Email: info.znnp@gmail.com

The Zimbabwe National Network of People Living with HIV (ZNNP+) on 1st July 2020 launched the People Living with HIV (PLHIV) virtual platform call centre called Kutabila, covering Zimbabwe's ten provinces plus a dedicated line for Youth and Key Populations. The call centre was made possible with financial and technical support from the UNAIDS and National AIDS Council of

Zimbabwe. A virtual platform provides a trusted connection between the umbrella network and recipients of care. It is a PLHIV-led response to the emergency brought about by COVID-19 and lessons learnt from previous disasters and emergencies such as the Chingwizi and Idai floods that severely affected PLHIV's access to health services.

The virtual platform is a communication, surveillance, and data collection system aimed at improving PLHIV engagement, informing service providers and fostering positive change in the HIV response. The platform can send alerts to PLHIV, collect real-time responses and subsequently publish gathered data. The platform will gather important health analytics to gain insight into client satisfaction, visibility of implementing partners, trends and patterns of HIV-related support and issues such as multi-month dispensing of antiretroviral medicines, access to viral load testing, opportunities and access to HIV prevention and management. Organizations in the HIV response can ride-on this platform and track their specific program indicators.

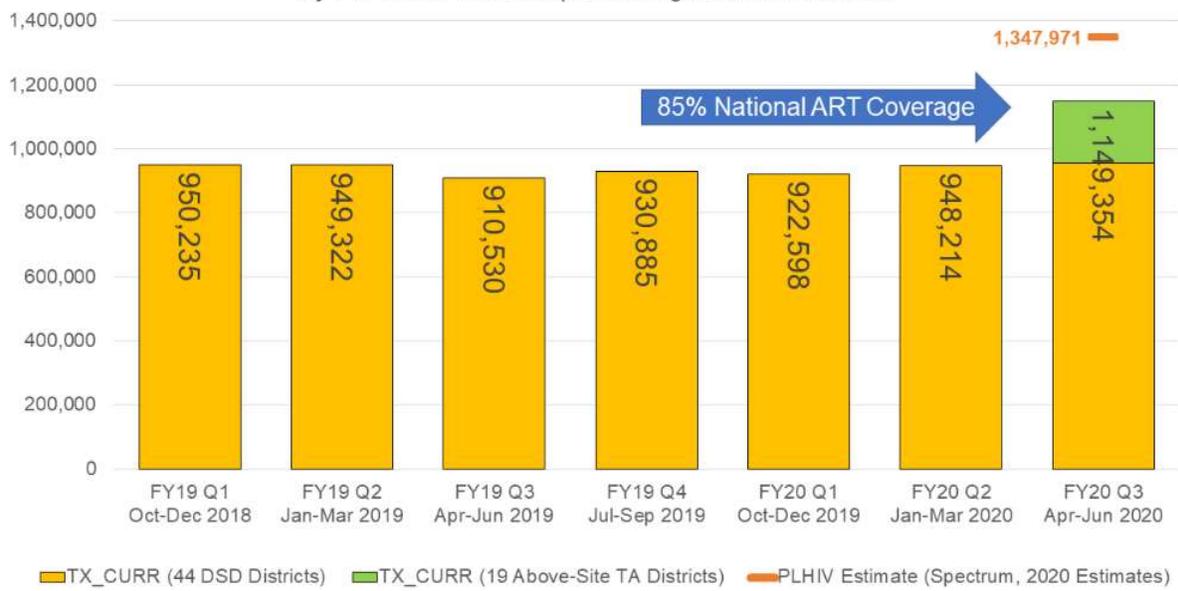
In its first month, the busy platform has been influential in addressing the first and second delays in seeking care as it connected vulnerable groups of PLHIV to health facilities at no cost. It has shown immense potential towards improving health worker and community relations, relaying timely health advice, ensuring prompt response to emergencies and facilitation of timely referrals.



PEPFAR Successfully Reports on National HIV Treatment Figures

*The PEPFAR approach to achieving epidemic control has taken a greater focus on data collection and the use of data to drive better programs. This semi-regular column called "Data-Driven" takes a closer look at Zimbabwe's data, performance indicators, monitoring tools, and other strategic information issues to try to make sense of it all. **PEPFAR appreciates that the data collected represents the millions of men, women, and children that we serve.***

Trends in the Number of Patients Current on HIV Treatment (TX_CURR) as Reported by PEPFAR-Funded Implementing Partners in DATIM

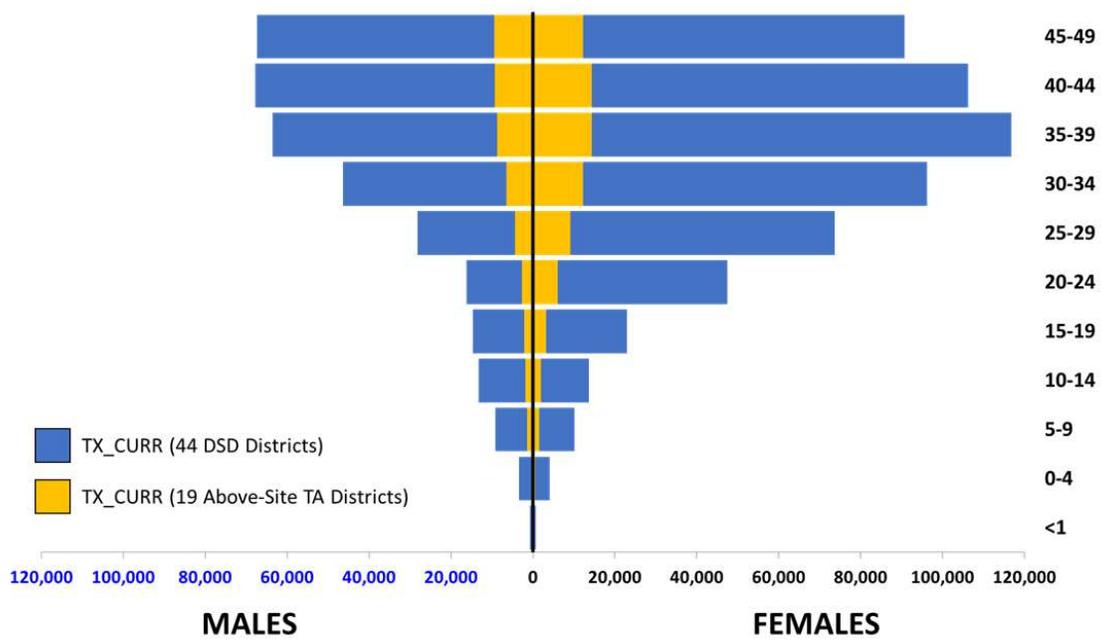


For the first time, PEPFAR partners have successfully reported on the national HIV treatment figures. This new reporting approach allows for more robust monitoring of the progress made towards HIV epidemic control across all districts in Zimbabwe. It is a remarkable achievement by our implementing partners, especially given the challenges of the COVID-19 pandemic.

With this new reporting requirement, PEPFAR strives to strengthen the national HIV program outside of the 44 districts where PEPFAR provides direct service delivery and gain insights into the additional 19 districts where roughly 20% of people living with HIV in Zimbabwe receive HIV treatment services. These data will help the PEPFAR program plan more cohesively in collaboration with the Ministry of Health and Child Care (MOHCC). The data will also help PEPFAR better understand patient retention and movement across the entire national treatment program. PEPFAR will continue to strengthen this reporting model by collecting national viral load coverage and suppression results in future quarters.

Preliminary data from quarter three (April-June 2020) shows that at least 85% of Zimbabweans living with HIV are currently receiving life-saving antiretroviral therapy (ART). The indicator used to monitor this is called TX_CURR (treatment current). The estimated number of people living with HIV was more than 1.3 million, according to the most recent UNAIDS modeling data. As seen in the data graph above, a total of 1,149,354 adults and children are currently receiving ART across all 63 districts. The disaggregated age and sex graph below shows that 62% of ART recipients are female and 38% are male. ART coverage among adult women is 90%, among adult men is 80%, and among children is 72% – revealing the program struggle to enroll men and children. The total number on treatment represents a 94% achievement of the PEPFAR COP19 (FY20) treatment target of 1,221,083.

FY20 Q3 TX_CURR by Age, Sex, and Support Type



Mavambo Orphan Care Saves Lives

Story submitted by USAID Implementing Partner, Mavambo Orphan Care



Children from Mabvuku doing a role play with the theme of raising awareness to combat child abuse in communities (Photo credit: Mavambo Orphan Care)

Mavambo Orphan Care is a community-based organization implementing an orphans and vulnerable children (OVC) program with support from PEPFAR through USAID in three districts (Goromonzi, Chitungwiza, and Harare). Mavambo uses a holistic approach to contain the spread of HIV by empowering OVC and their caregivers with services such as community-based adherence support for children and adolescents living with HIV (CALHIV) and income-generation initiatives for primary caregivers.

Through one of its flagship projects, Mavambo Children Vana (MCV), Mavambo promotes a household-focused approach to empower impoverished households infected or affected by HIV to care for their children. MCV strengthens community structures, including clinics and schools, and capacitates health providers, such as Village Health Workers, Community Childcare Workers, and Child Protection Committees, to sustain service provision for CALHIV and OVC. Adherence support, HIV risk avoidance, and sexual violence prevention efforts for OVC, particularly girls aged 9-17, has

been intensified in the past year.

In the context of the COVID-19 lockdown and general socioeconomic challenges, the MCV project continues to provide services by engaging, tracking, monitoring and supporting children, adolescents, and adults living with HIV. This is done through virtual platforms (phone, WhatsApp, text), tracking and tracing children, adolescents, and adults not attending ART refill, and enhanced virtual adherence counseling sessions for CALHIV with high viral load. COVID-19 awareness-raising messages to beneficiaries are shared through pamphlets, phone calls, WhatsApp, and text messaging.

Mavambo Orphan Care congratulates PEPFAR for saving lives for the past 17 years and has created [this video](#) on Facebook to commemorate PEPFAR's 17th anniversary.

“COVID-19 is Closer Than You Think. Take Care!” Campaign Kicks Off

Story submitted by USAID Implementing Partner, Population Services International (PSI)

Background: Cultural and social norms and limited knowledge of masking - how masks work, when and how they should be worn - present profound barriers for taking up COVID-19 preventive behaviors including wearing masks correctly, washing hands, and practicing physical distancing. Insights like these were gathered in April through a rapid assessment conducted among key population groups by PSI Zimbabwe in collaboration with the Ministry of Health and Child Care with support from PEPFAR and USAID. The rapid assessment sought to understand the barriers and motivators for the adoption of the recommended COVID-19 preventative measures and revealed that Zimbabweans have a low-risk perception because COVID-19 feels far away.



“The people I spend my day with and those who stay close to me will not give me Corona because I know them and I know how they spend their days”
– **AGYW Chipinge**

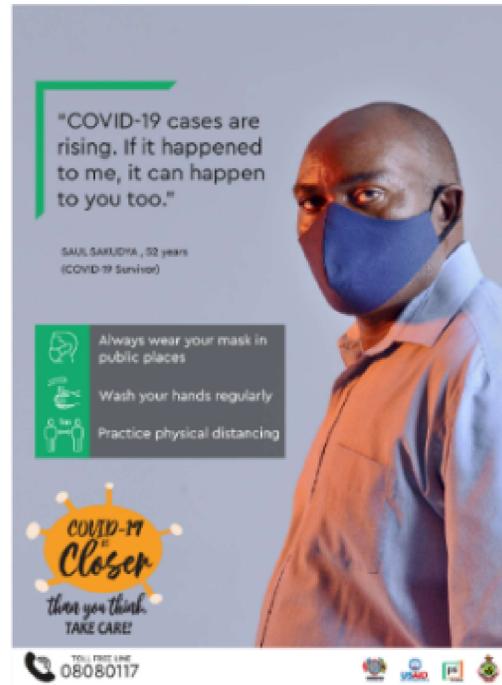
The assessment also showed that participants were not aware of anyone who had died from COVID-19. As a result, the perceived severity of the pandemic remains low. Further, those practicing the recommended behaviors face high stigma:

“I feel out of place wearing a mask, especially in high-density areas. People laughed at me after I disembarked a bus while wearing a mask.”



About the “COVID-19 is Closer Than You Think - TAKE CARE” Campaign
 PSI developed a multimedia campaign with a core set of messages to convey the message that “COVID-19 is closer than you think”. This campaign is grounded in the rich insights from the rapid assessment on COVID-19 behaviors. The campaign aims to shift the national conversation from awareness to the adoption of the recommended masking, hand washing, and physical distancing behaviors using testimonials from local

COVID-19 survivors. The campaign also seeks to increase risk perception and support for those infected and affected. The use of testimonials provides a powerful tool for influencing behavior change through this campaign because people believe the reality of the COVID-19 message when they hear it from a local - someone they know and trust as a credible messenger. National and community radio stations, out of home media, digital media, and take-home materials will spread the campaign message through three million media impressions. Community-based



interpersonal communications through one-on-one and small group discussions with messaging integrated with mobilization for VMMC, condoms, and SRHR services will reach approximately 500,000 individuals.



Next Steps: As the campaign unfolds, PSI and the MoHCC hope to create a broader movement of survivors promoting the adoption of recommended behaviors and addressing stigma and risk perception, with messaging evolving in line with the

pandemic - including increased motivation of proper masking, quarantining, isolation and testing behaviors; adjusting to “new normal” ways of living and working; and preparing for the inevitable challenges which may arise as the result of a staggered and possibly delayed rollout of vaccinations once they start to emerge.

CDC Zimbabwe Releases 2019 Annual Report

CDC Zimbabwe is pleased to share its newly released [2019 Annual Report](#).

Staff at CDC Zimbabwe work tirelessly to support the Ministry of Health and

Child Care (MoHCC) and implementing partners in all their work. For nearly 20 years, CDC and MOHCC have had a fruitful collaboration in addressing threats to global health. CDC Zimbabwe works to strengthen health systems and to prevent and control diseases such as HIV, tuberculosis, and malaria.

The CDC Zimbabwe team remains committed to the agency's vision of a world where people live safer and healthier lives!



U.S. Embassy Welcomes New Staff



Dr. Michael Melchior is the new Country Director for the Centers for Disease Control and Prevention (CDC) in Zimbabwe. Dr. Melchior has served as the Country Director for CDC Ghana and as the Division of Global HIV and Tuberculosis' (DGHT) West Africa regional director since January 2018. In these roles, Dr. Melchior worked with host country governments and U.S. government (USG) agencies to establish the President's Emergency Plan for AIDS Relief (PEPFAR) West Africa Region, made up of seven countries. He also served as

the acting PEPFAR Coordinator of the West Africa Region during this period, supporting interagency strategic planning and implementation of PEPFAR-funded activities. The West Africa Region has made significant strides towards HIV epidemic control, with CDC focusing its support on laboratory and strategic information. Dr. Melchior received his PhD in Public Health in 2012, and MPH in health promotion, in 2008, from Florida International University, and Bachelor of Science degrees in Microbiology and Human Nutrition from the University of Florida in 2006. In his free time, he enjoys photography, traveling, and home renovation. Dr. Melchior replaces Dr. Shirish Balachandra, who led the CDC team for two years before his departure in December 2019. Dr. Kelsey Mirkovic has served as acting country director in Zimbabwe since that time.



Mr. Art Brown is the new USAID Mission Director for Zimbabwe. Mr. Brown is a Senior Foreign Service Officer (SFS) who has served as USAID Director to the Dominican Republic for nearly four years, twenty months of which he was on detail to the Department of State as DCM (Deputy Chief of Mission) to the U.S. Embassy in Santo Domingo. Mr. Brown was USAID Director in Managua, Nicaragua from 2012-2015. Additionally, Mr. Brown has served as the SFS Deputy Director in Kabul, Afghanistan and Deputy Director in Kinshasa,

Democratic Republic of the Congo. He is in his 28th year of federal service for the USG. He graduated from Johns Hopkins University (MBA), University of

Virginia (BA), and the National War College (MS-National Security Strategy). He is a National Defense University CAPSTONE Fellow. He holds various USAID honor awards, and the USAID Administrator's Management Improvement Award. Mr. Brown also is a distinguished recipient of the Franklin H. Williams award for Outstanding Community Leaders. Mr. Brown was also a Peace Corps volunteer in Benin for over three years.



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