



# ANNUAL REPORT\_ OCT '20- SEPT'21

## Mat-North Province

Report reviewed by: Shamiso Nyakuwa



*Young Sister using the H4L guide to conduct sessions at a safe space in Lupaka ward (Lupane district)*



## Contents

<b>Acknowledgement Section</b> .....	4
<b>Introduction</b> .....	5
Key Achievements .....	5
<b>Services and Linkages</b> .....	7
<b>PrEP Programming</b> .....	9
Facility Readiness Assessments .....	9
PrEP Champions and Young Sisters Identification and Recruitment .....	9
Training for PrEP Champions and Young Sisters .....	10
PrEP ToT for Health Care Workers .....	10
PrEP and KP Training .....	10
PrEP Drugs Stock Management .....	11
Site Support Visits .....	11
PrEP Support Groups .....	11
PrEP_NEW Trends .....	14
<b>Community-based Program Achievement</b> .....	14
YWSS Dialogues .....	14
Health4Life and YWSS PACK ToT .....	15
Child Safeguarding Training .....	15
DREAMS Eligibility Screening .....	15
DREAMS Enrollment .....	16
Primary Pack .....	17
Combination Socio-Economic Approaches .....	18
<b>Program Cross-cutting Issues</b> .....	19
LIVES Training .....	19
LIVES Training for Facilitators .....	19



Distribution of PPE .....	19
COVID-19 Refresher Training .....	20
Training on Identifying and Documentation Best Practices in DREAMS.....	20
<b>Coordination Activities.....</b>	<b>21</b>
The DREAMS Inter IP District Meeting.....	21
ZIMPAAC Inception Meetings .....	21
<b>Monitoring and Evaluation .....</b>	<b>21</b>
Training .....	21
DHIS2 Training.....	21
Joint Data Management Training.....	21
Technical Support and Supervision.....	22
CDC Virtual Support .....	22
Program monitoring through PrEP Community dialogues .....	22
<b>Data Management .....</b>	<b>23</b>
<b>Operating in the context of COVID-19.....</b>	<b>23</b>
<b>Challenges and Solutions .....</b>	<b>24</b>
<b>Success story: Lupane .....</b>	<b>25</b>



## Acknowledgement Section

PZAT would like to acknowledge PEPFAR, CDC, ZIMPAAC Partners (Bantwana, Zim-TTECH and AFRICAID), key government line ministries and other relevant stakeholders for the collaboration that led to successful implementation of activities in COP 20. We would also like to thank the PZAT Mat North team for their dedication and hard work, without which, the inception and implementation of this programme and initial implementation would not have been a success.



## Introduction

Pangaema Zimbabwe AIDS Trust (PZAT) strives to transform the lives of people living with and affected by HIV through ensuring access to comprehensive HIV and sexual health services and that they are delivered in safe and supportive environments.

PZAT is a partner in the Zimbabwe Partnership to Accelerate AIDS Control (ZimPAAC) consortium and has been working with the MOHCC in collaboration with Zimbabwe Training and Technical Assistance Training and Education Center for Health (Zim-TTECH) to improve access to HIV prevention, care and treatment services for key and priority population groups, including adolescent girls and young women (AGYW) in Zimbabwe. PZAT is implementing the Determined, Resilient, Empowered, AIDS-Free, Mentored and Safe (DREAMS) program in Matabeleland North's four districts namely: Bubi, Lupane, Nkayi and Tsholotsho. The program aims to identify most vulnerable and at risk AGYW aged 10-24 and keep them HIV free through empowering them, strengthening their families, mobilizing communities for change, and reducing risk of sexual partners. The overall objective is to reduce HIV incidence by 40%. Specifically, PZAT is responsible for delivering PrEP to AGYW, identification and enrollment of young women selling sex (YWSS) for the DREAMS primary and secondary packages in the wards that the DREAMS project is operating in, as well as identifying vulnerable AGYW and linking them to various partners for need based services. For COP 20, the target was to initiate 439 AGYW on PrEP and enroll 395 YWSS into the primary package and 350 for the secondary package.

## Key Achievements

Below are highlights of COP 20 achievements:

### i. PrEP

The program surpassed PrEP targets across all districts. Tsholotsho surpassed the target the most, by 203% due to expansion to new wards during the COP. Uptake was highest in March 2021 when lockdown restrictions were relaxed. The program maintained a steady uptake of PrEP throughout the COP despite COVID-19 restrictions. Demand creation activities at district supported facilities, in the community, at safe spaces and hubs as well as outreach catch up campaigns where needed led to improved PrEP uptake.

### ii. YWSS primary package

For primary package, PZAT Nkayi surpassed targets for both age bands. Our reach for the other three districts were all above 90% except for Lupane (15-19) with 65% and



Tsholotsho (20-24) with 89% achievement. Intensive follow up and tracking was conducted to reach to this mobile population to complete the primary package.

#### YWSS economic strengthening

The program managed to conduct economic strengthening training for YWSS towards the end of the COP. COVID-19 restrictions delayed the commencement of this component of the secondary package since it is a group-based intervention which required delivery at a time where gatherings were banned. This delay resulted in YWSS migration to other areas affecting our reach. Despite a delay in training YWSS on Siyakha due to lockdown restrictions, the program managed to train 51% of 15 – 19 AG and 76% of 20 -24 YW on Siyakha in a period of 3 weeks.

- iii. Collaboration with other partners to offer differentiated service delivery at safe spaces ensured layering of services
  - Recruitment of PrEP Champions and Young Sisters to provide peer to peer support and mobilise target population was instrumental to achieving program milestones by targeting the intended beneficiaries

The table below highlights PZAT achievements vs targets in the year under report

**Table 1: Achievement Summary**

Intervention	Target	Achievement	% Achievement
PrEP_New (15-19)	250	519	481%
PrEP_New (20-24)	189	485	389%
DREAMS Enrolment (15-19)	266	362	136%
DREAMS Enrolment (20-24)	132	232	175%
Primary Package completion (15-19)	263	234	89%
Primary Package completion (20-24)	132	146	111%
Economic strengthening (15-19)	218	111	51%
Economic strengthening (20-24)	132	100	76%

PZAT has been reporting on PrEP indicators and YWSS as documented in the Table2.





Table 2: Indicators

INDICATOR	TYPE	INDICATOR DEFINITION
DREAMS_SCREEN	Custom	Number of AGYWS screened for DREAMS eligibility
DREAMS_ELIGIBLE	Custom	Proportion of eligible AGYW for DREAMS enrolment
DREAMS_ENROL	Custom	Number of YWSS eligible and willing to be enrolled in DREAMS program
PP_PREV	MER	Number of the priority populations (PP) reached with the standardized, evidence-based intervention(s) required that are designed to promote the adoption of HIV prevention behaviours and service uptake
GEN_NORMS	Custom	Number of individuals completing an intervention pertaining to gender norms within the context of HIV and AIDS that meets minimum criteria
YWSS_PACK	Custom	# of YWSS who receive the YWSS DREAMS package
ES_COMP_AGYW	Custom	# of YWSS who receive comprehensive/intensive ES package
OVC_SERV	MER	Number of AGYW served by PEPFAR OVC programs for children and families affected by HIV
ES_COMP_AGYW1	Custom	Proportion of YWSS trained on Start, Improve Your Business
ES_COMP_AGYW2	Custom	Proportion of YWSS with established income generating projects after training and percent of YWSS still enrolled after 3,6 and 12 months
OVC_HIVSTAT	MER	Percentage of orphans and vulnerable children (<18 years old) with HIV status reported to implementing partner (including status not reported).
REF_NEW	Custom	Number of individuals referred for services during the reporting period.
REF_COMP	Custom	Proportion (%) of individuals referred for services that completed the referral during the reporting period.
PREP_SCREEN	CUSTOM	Number screened for PrEP
PREP_ELIGIBLE	CUSTOM	Number of clients screening high risk and offered PrEP
PREP_NEW_VERIFY	CUSTOM	Number of clients linked to PrEP at another facility (public sector, Sisters Clinics NOT that are not already included in partners' PREP_NEW)
PREP_NEW	MER	Number of clients initiating PrEP for the first time
PREP_CURR	MER	Number of clients who received PrEP during the reporting period
PREP_1MONTH	CUSTOM	Number of clients returning for 1 month (initial) follow up visit
PREP_RETURN_OTHER	CUSTOM	Number of clients returning for any subsequent follow up visits
PREP_RESTART	CUSTOM	Number of clients restarting PrEP
PREP_SERO	CUSTOM	Number of seroconversions

## Services and Linkages

PZAT actively collaborated with other ZIMPAAC partners in developing districts specific DREAMS services directories. The directories summarize various services providers, services they offer and contact details in each district. In addition to that, PZAT actively participated in



the development of a consortium Client Flow, aimed at outlining client movement in accessing various services across various partners. Both Client Flow and GBV directory are critical in ensuring smooth flow of layering of services and reducing possible loss to follow up.

Linking AGYW to various service providers to access need-based services is critical for reducing vulnerability to GBV and HIV infection. PZAT understands that the layering concept underpins the DREAMS program and as shown by the table below, AGYW were referred for various services across the four districts. As an organization we adopted active referral system and our confirmation rate for various services was high.

**Table 3: October 2020- September 2021 Referrals Out**

Service Provider	Service referred for	15-19 years			20-24 years		
		AGYW referred	Number of AGYW accessing service	% Confirmation	AGYUW referred	Number of AGYUW accessing service	% confirmation
Zim-TTECH	STI screening	158	155	98%	115	111	97%
	HTS	194	165	85%	151	149	99%
	FP	52	52	100%	48	48	100%
	GBV response	10	10	100%	0	0	
	PrEP initiation	103	103	100%	81	81	100%
Bantwana	Primary package	148	97	66%	67	49	73%
Zvandiri	Mental Health screening	5	5	100%	2	2	100%
	Psychosocial support	5	5	100%	4	4	100%
	Support group	2	1	50%	4	4	100%

A high referral confirmation on clinical services has been noted and this has been as result of the provision of the services at the safe spaces over the facility. DREAMS enrollment referrals have a lower confirmation rate as some of the AGYW were no longer available (lost to follow).





## PrEP Programming

### Facility Readiness Assessments

At program inception, facility readiness assessments were conducted at 32 of the 50 supported facilities in the four districts.

**Table 4: Facilities Assessed**

District	Number of facilities	Number of facilities completed
Bubi	11	10
Nkayi	14	8
Tsholotsho	16	8
Lupane	9	6

The objective of the assessments was to evaluate facility readiness and capacity to integrate AGYW focused combination HIV prevention and treatment services (including oral Pre-Exposure Prophylaxis (PrEP) into the already existing HIV prevention and treatment services in the district facilities. Data was collected using the Zimbabwe Oral PrEP Facility Assessment Tool.

Data collected from all supported facilities informed planning for the rollout of the PrEP program.

- (i) It was noted that there was generally a low understanding of oral PrEP among health care workers who indicated they had not been trained on PrEP and did not have the guidelines on PrEP provision- PZAT in collaboration with Ministry of Health facilitated a TOT for District Health Executives on PrEP service provision and guidelines and this training was rolled over to HCWs from supported facilities across the four districts.
- (ii) It emerged that most of the facilities visited did not have PrEP registers in place – all implementing facilities were provided with PrEP registers and trained on documentation.

### PrEP Champions and Young Sisters Identification and Recruitment

All four districts managed to identify and recruit PrEP champions and Young Sisters for the purposes of mobilising target populations for PZAT interventions in DREAMS. A total of 50 PrEP



Champions and 20 Young Sisters were recruited and trained to create demand for PrEP and mobilise YWSS respectively. The following is a breakdown of the community cadres recruited in each district:

**Table 5: Young Sisters and PrEP Champions Recruited and Trained by District**

District	Bubi	Lupane	Nkayi	Tsholotsho
Number of PrEP Champions	11	9	14	16
Number of Young Sisters	5	5	5	5

PZAT also managed to maintain the community cadres. Throughout the year, 5 of the 20 YS recruited dropped out and were replaced and of the 50 PrEP champions, 9 dropped out and were replaced.

### Training for PrEP Champions and Young Sisters

A training for PrEP Champions and Young Sisters to provide HIV combination prevention complementary support to health facilities and communities was conducted. The training aimed to capacitate PrEP Champions and Young Sisters with skills to offer complimentary PrEP service provision support at the facility and community level. All 20 Young Sisters and 50 PrEP Champions were trained.

### PrEP ToT for Health Care Workers

PrEP Training of Trainers for 50 Health Care Workers was conducted in Bulawayo in Q1. The training aimed to equip health care workers with knowledge on PrEP service provision. The HCW who attended the training included HIV Focal Persons, District Pharmacists, Health Promotions Officers, District Primary Care Counsellors, Outpatient Nurses and Matrons. The HCWs cascaded the training to other staff in the respective health facilities in all the districts. In the same quarter, 20 DREAMS clinical nurses and DREAMS Team Leads were also trained on PrEP service provision.

### PrEP and KP Training

MOHCC facilitated the PrEP and Key Populations training in Q3 and 18 Health Care Workers (HCW) and 4 Field Officers were trained. The main objective of the training was to build capacity of the trainees to enable them to: conduct PrEP screening and eligibility, initiate and follow up PrEP clients for subsequent visits, monitor and manage PrEP side effects, sero-conversion, and stigma, conduct clinical and laboratory assessments during follow-up PrEP visits, acquire a knowledge base and enable nurses to become competent in skills to work with



LBGTQI as well as imparting knowledge to other clinicians on how to create a safe, affirming, and inclusive environment for key populations.

## PrEP Drugs Stock Management

Table 6 showing PrEP stock levels by district (Oct' 2020 to Sept '2021)

District	Oct'20	Nov'20	Dec'20	Jan'21	Feb'21	Mar'21	Apr'21	May'21	Jun'21	July'21	Aug'21	Sept'21
Bubi	0	0	138	11	896	678	641	490	281	170	500	506
Lupane	0	0	37	25	320	130	17	291	120	0	210	51
Nkayi	400	350	200	800	625	274	506	654	381	40	5	200
Tsholotsho	0	0	0	30	951	73	480	170	600	145	432	10

During the first 2 months of the year 3 out of 4 districts had no PrEP stock. The districts later received PrEP stock from mid December 2020. Limited or no PrEP stock was experienced at different intervals during the year under review, for example, Lupane had limited PrEP stock in April and July whilst Nkayi had limited PrEP stock between July and August 2021.

## Site Support Visits

Site supports visits at facilities were conducted to monitor PrEP uptake, PrEP stock monitoring and to mentor health care workers on monitoring and evaluation tools.

## Key Findings

- PrEP client's documentation challenges - At some facilities, clients came back for reviews, but forms were not updated
- PrEP stock out at some facilities in Nkayi and Lupane
- COVID-19 led to a decline in new PrEP initiations as clients feared being tested at the facility gates – an example is Nkayi district
- For some facilities, in cases where there were staff movements, there was no proper hand over - take over from clinicians as far as documenting is concerned

## PrEP Support Groups

PrEP support groups were established across the 4 districts. The purpose of the support groups is to improve PrEP uptake and continuation. The participants select the group name, group rules and the support group committee. In each of the districts, 4 PrEP support groups were established in Q4. Below is a list of the sites where the groups were formed.

Bubi: Inyathi, Mahlabathini, Lukala and Thuthukani



Lupane: Gomoza, Lake Alice, Lupane and Jotsholo clinic

Nkayi: Fanisoni, Nesigwe, Gwelutshena and Zenka.

Tsholotsho: Jimila, Nkunzi, Madlangombe and Sikente

Discussions in the PrEP support groups ranged from condom education and distribution to recap of what PrEP is and why it is needed and possible side effects. One of the common experiences was that participants never faced any side effects when they started PrEP.

Across the groups, the main challenges that AGYW faced are disclosure, community misconceptions and distance to clinic.

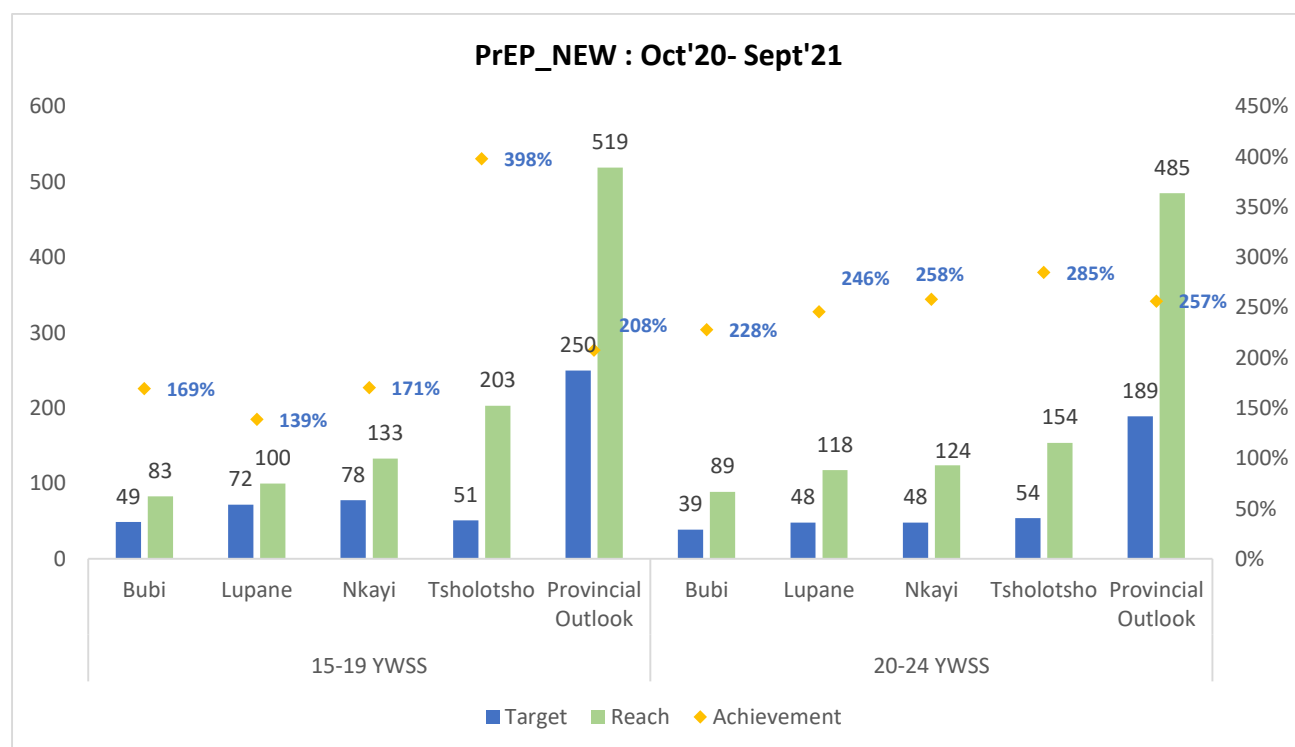
Disclosure: Married women face challenges on disclosing to their partners. This sometimes makes it difficult for clients to come for scheduled visits especially if it's not at the safe space. AGYW staying with parents also highlighted challenges in disclosing to them hence difficulties in meeting review dates at the clinic.

Community misconceptions: Single women who are on PrEP are uncomfortable with being seen collecting their supplies from the clinic as most communities shun use of PrEP and associate it with promiscuity. They therefore prefer accessing clinical services from the safe space.

Distance to clinic: AGYW highlighted that during this COVID-19 era where sometimes meetings in the safe spaces are banned, they face distance challenges as they stay far from the clinics and are required to walk long distances for resupply.



Figure1: PrEP\_NEW Achievement Vs Targets for 15-24 AGYW (Oct'20-Sept'21)



Source: DHIS2. Date 23/10/21

From a provincial outlook, all four districts surpassed their annual target for both age bands. Disaggregating by age band, 519 (208%) AG aged 15-19 and 485 (257%) YW aged 20-24 were initiated on PrEP from October 2020 to September 2021. Over achievement was mainly attributed to:

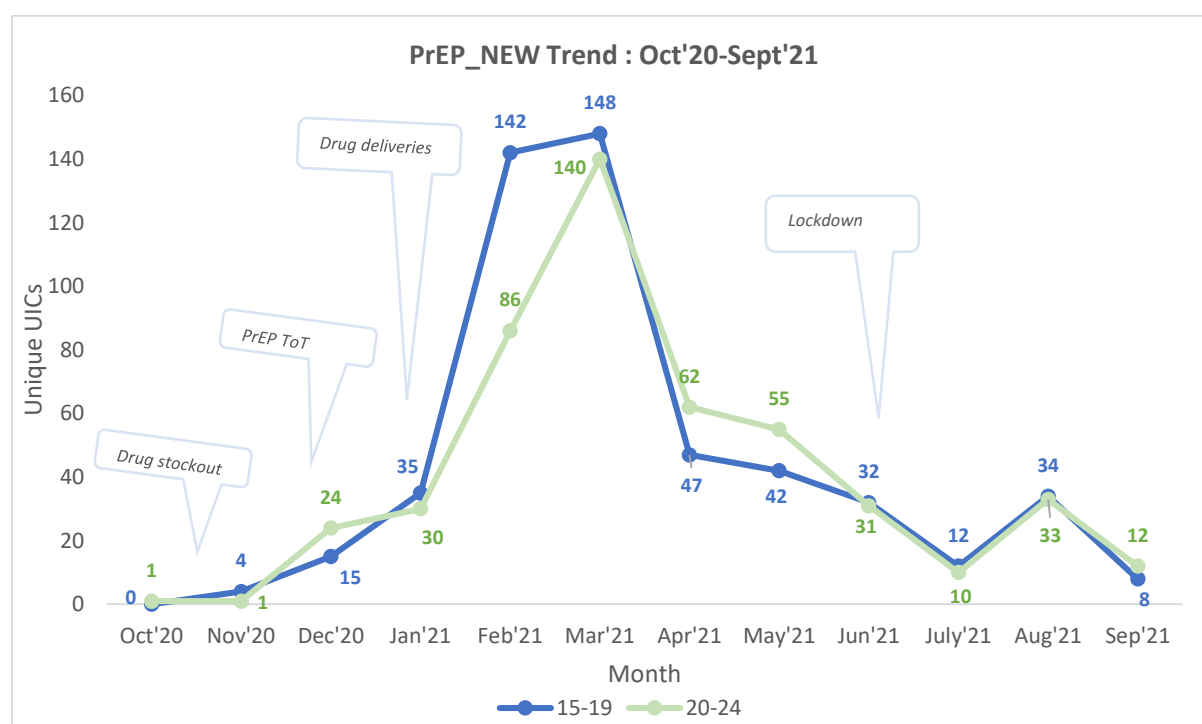
- PrEP catch up outreach campaigns
- Intense PrEP campaigns by PrEP champions and Young Sisters
- Use of safe spaces compared to health facilities for PrEP supply
- Use of mobile outreaches and integration of services

In addition to the factors mentioned above, expansion to new wards led to the surge in numbers in Tsholotsho.



## PrEP\_NEW Trends

Figure 2; PrEP\_NEW Trends for 15-24 AGYW (Oct'20-Sept'21)



Source: DHIS2. Date 23/10/21

Following a spike in the number of AGYW initiated on PrEP in Q2 due to improved supply of PrEP stock, there was a decrease in the number of AGYW initiated on PrEP from April-June 2021. The decrease is due to limited PrEP stock in Lupane during the month of June- the available stock was reserved for those continuing to take PrEP.

## Community-based Program Achievement

### YWSS Dialogues

To ensure tailor-made service provision and retaining YWSS in the programme, PZAT conducted dialogues with YWSS in all four districts in Q1. The objective of the dialogues was to understand YWSS preferences in accessing sexual reproductive health (SRH) services, including at the safe space (HUBs). The key outcomes from the dialogues were:





Safe Spaces (HUBs): The YWSS welcomed the idea of a safe space for them to receive clinical and non-clinical services. Safe hubs were formed at the district centres in response to the community dialogues, in addition to other input from stakeholders from different line ministries. YWSS suggested that PZAT should show videos on HIV at the HUBs and this suggestion was incorporated.

Income Generating Activities: Most of the YWSS admitted that poverty is the main driver of transactional sex, some dropped out of school because they did not have anyone paying their fees. They indicated they would prefer to start income-generating projects such as broiler rearing. YWSS indicated that and they do have role models, other young women who used to sell sex with them but are no longer doing the same. In response, PZAT offered economic strengthening training to YWSS enrolled as part of the secondary package. The Siyakha training imparted skills that will sustain YWSS as they venture into businesses.

#### Health4Life and YWSS PACK ToT

Twenty Young Sisters and four Field Officers were trained on Health 4Life and YWSS\_PACK package. The purpose of the training was to equip Young Sisters and Field Officers with requisite knowledge and skills to deliver SRH, HIV prevention, Gender norms, Violence prevention, ensuring access to youth friendly SRH, HIV and Post GBV services among YWSS (15-24 years).

#### Child Safeguarding Training

All district staff and cadres were virtually trained on the Child Safeguarding policy. The purpose of the training was to outline the various safeguarding laws and child rights, enable participants to identify signs and indicators of abuse, neglect, exploitation, and other forms of maltreatment amongst children. In addition, by end of the training participants were expected to display knowledge and skills of handling situations in the correct manner within their communities and know who to contact in the event of a safeguarding emergency

#### DREAMS Eligibility Screening

Screening for DREAMS eligibility was done at safe spaces and in the communities using standardized forms that allow for capturing of the UIC. The table below shows cumulative number of AGYW screened using the Form 1 for DREAMS eligibility from October 2020 to September 2021 across the 4 DREAMS districts.



Table 7: Cumulative number of 10-24 AGYW screened for DREAMS eligibility – Oct'20-Sept'21

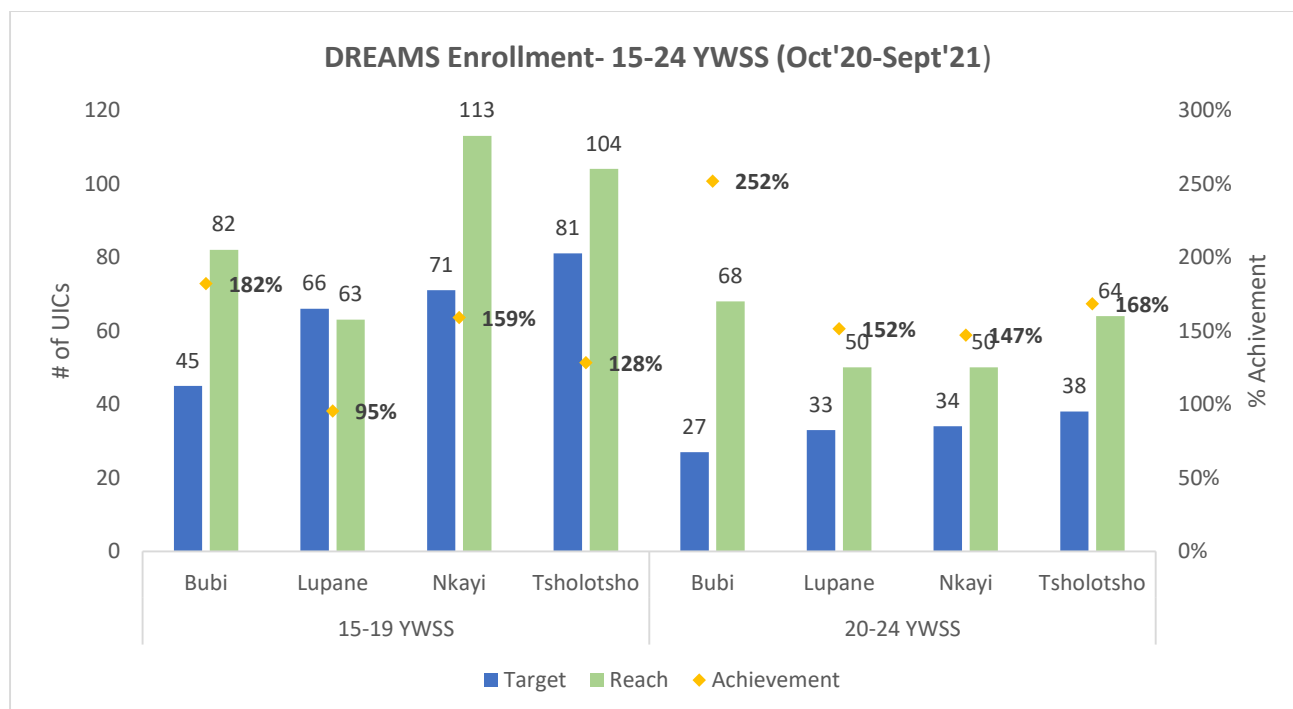
District	Cumulative Reach (Oct'20-Sept'21)					
	10-14 yrs.		15-19 yrs.		20-24 yrs.	
	Total Screened	Eligible	Total Screened	Eligible	Total Screened	Eligible
Bubi	22	16	167	162	128	120
Nkayi	5	5	170	170	104	99
Lupane	33	25	199	190	105	102
Tsholotsho	9	9	185	185	106	106
<b>Provincial Outlook</b>	<b>69</b>	<b>55</b>	<b>721</b>	<b>707</b>	<b>443</b>	<b>427</b>

Source: DHIS2. Date 23/10/21

## YWSS REACH

### DREAMS Enrollment

Figure 3: Enrollment against target for 15-24 yrs. YWSS (Oct'20-Sept'21)



Source: DHIS2. Date 23/10/21



The program surpassed the annual target except for the 15-19 age band in Lupane which is at 97% towards its annual target. As a province 594 YWSS aged 15-24 were enrolled. The program intentionally enrolled more YWSS to cater for proportion of YWSS that would potentially be lost to follow up due to migration in search of business. In general, the 20-24 YWSS were more open in self identifying as YWSS compared to the 15-19 yrs. age band.

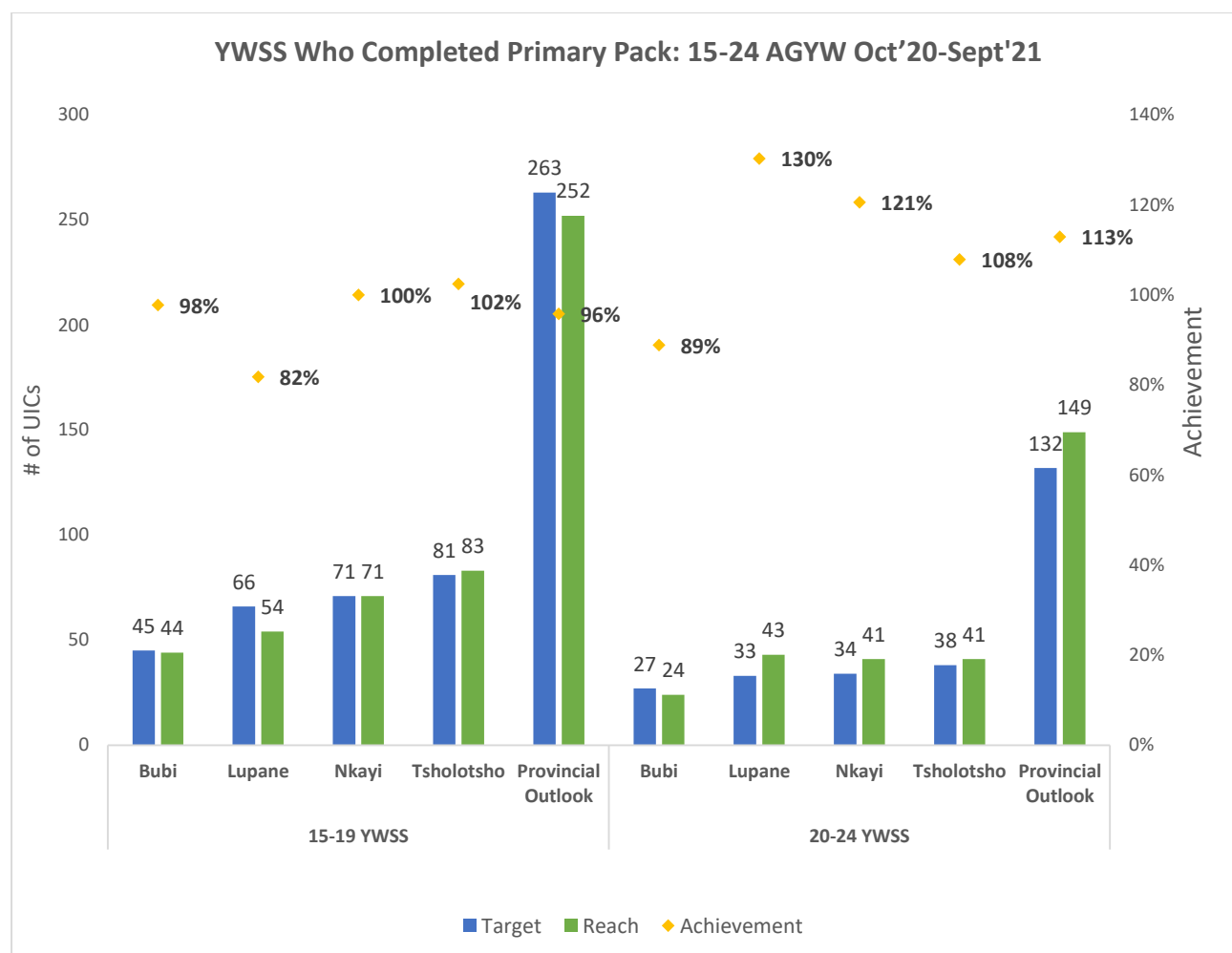
### Primary Pack

Health for Life sessions were built on existing HIV and GBV programs in Zimbabwe and consist of modules designed to equip AGYW with the knowledge on how to reduce the risk of HIV and GBV for in and out of school settings. The Health for Life intervention focuses on training AGYW on HIV prevention and gender norms curriculum. In addition to the Health for Life intervention, YWSS were required to go through the YWSS pack - an additional training tailor made to suit their needs as YWSS while enhancing their financial literacy. For a YWSS to have received a complete package, they are required to complete all Health for Life and YWSS activity Pack sessions. Uptake and continuation of sessions is measured through sessions registers where YWSS are monitored for their participation. The registers are a useful tool in ensuring that all those who have missed sessions are easily identified and followed-up.

All the identified and eligible YWSS across the four districts were enrolled into clubs and they started Health4Life sessions and subsequently YWSS Pack sessions. The figure below shows YWSS age between 15-24 years that were enrolled and completed Health4Life and YWSS Pack sessions.



Figure 4: Primary Pack Completion Achievement Against target for 15-24 yrs. YWSS (Oct'20-Sept'21)



Source: DHIS2. Date 03/11/21

While completion rate for specifically the Health4Life package was over 100% across the 20-24 age band for all the districts, the program achieved 96% completion rate for the 15-19 age band. Specifically, the DREAMS primary pack achievement for YWSS was below 100 % for 3 of the districts. This is because of the delay in YWSS pack training that led to loss to follow up for some of the YWSS that had migrated to other places after completing the Health4Life package.

#### Combination Socio-Economic Approaches

Key processes/activities conducted:



**Labor Market Assessment Validation Workshop-** The workshop was aimed at communicating results from a Bantwana commissioned assessment that sought to determine what trade is best suited in each district for the AGYW economic strengthening skills. Considerations on interest of a target market were done, changes were proposed on what can be viable for the beneficiaries.

**Foundation Training (Siyakha)-** A total of 20 Young Sisters and 4 Field Officers attended the Siyakha Basic Foundation ToT. Due to COVID-19 level 4 lockdown restriction, rollout of the training to YWSS was delayed. The table below shows reach against target for YWSS who completed the foundation training.

Table 8: Cumulative number of 15-24 YWSS graduated on foundation training (Siyakha) -Oct'20-Sept'21

Age Band	Annual Target	Cumulative Reach	% Achievement
15-19	218	111	51%
20-24	132	100	76%

## Program Cross-cutting Issues

### LIVES Training

Through technical assistance from ICAP, all Field Officers and an HIV Focal Person from each district were trained on LIVES. The purpose of the staff LIVES training was to capacitate PZAT staff with skills to train and mentor field cadres with providing first line support for survivors of Gender-based violence in HIV settings.

### LIVES Training for Facilitators

In Q4, three Field Officers were part of a group of facilitators trained on LIVES by CDC. The objectives of the training were to provide an overview of violence that trauma and how it impacts HIV, outline the role of a mentor/community supporter and implementing partner with responding to disclosures of violence, provide an overview of self-care and support participants in identifying personal strategies for self-care and increase understanding and facilitate practice of first-line support using LOVES framework

### Distribution of PPE

In-light of the COVID 19 pandemic, PZAT managed to secure and distribute PPE to community volunteers (Young Sisters and PrEP Champions) across the four districts. The PPE included hand wash, buckets with built-in taps, face masks and sanitizers.



### COVID-19 Refresher Training

PZAT team including PrEP Champions and Young sisters had a refresher training on COVID-19. The training was aimed at reminding and updating members on COVID-19 prevention measures and new information around COVID-19.

### STI Drugs Procurement

PZAT procured STIs drugs for key populations through liaison with the provincial pharmacist. Prior to this, PZAT Field Officers consulted with District Health Executives and worked closely with District Pharmacists to draw up priority drug lists and these were submitted to PZAT. Drugs were handed over to all the four district hospitals at the beginning of Q4.

### Training on Identifying and Documentation Best Practices in DREAMS

The provincial and district team attended the National AIDS Council coordinated virtual training on identifying and documentation of best practices

Below is a table for all trainings conducted in COP 20 in Mat North

**Table 9: Trainings done in FY20 (Oct'20-Sept'21)**

Quarter	Training Activity	Trainees
1	Q1	H4L
		Field Officers, Young Sisters, Primary Counsellors (n=28)
		Staff Induction
		FOs, SIO, PL, (n=7)
		DREAMS Orientation
		Primary Counsellor FOs, SIO, PC, PL, DEC, (n=15)
2	Q2	Ambassador Toolkit
		PrEP Champions, FOs (n=54)
		PrEP ToT
		Mat North DHE, DCNs, (n=65)
		DHIS2
3	Q3	DECs (n=4)
		LIVES ToT
		FOs, DACs, (n=8)
		YWSS Activity pack
4	Q4	PL, PC, FOs, SIO (n=7)
		Siyakha Basic Model
		PL, PC, FOs, SIO, Young Sisters (n=31)
3	Q3	PrEP service provision for HCWs
		HCWs, FOs, SIO (n=56)
3	Q3	COVID-19 refresher
		FO, PC, PL, YS, Primary Counselors (n=91)
4	Q4	LOVES/LIVES
		Primary Counsellor, FO (n=3)
4	Q4	Identifying & Documentation of Best Practices in DREAMS
		National staff, FOs, (n=7)





## Coordination Activities

### The DREAMS Inter IP District Meeting

In Q1, a DREAMS inter IP district meeting was held in Bulawayo. The objective of the meeting was to discuss and finalize partner activities, mapping up the layering table and client flow. Follow-on meetings were conducted in the four districts where all partners were present and presented their scope of work to implementing partners' staff members.

### ZIMPAAC Inception Meetings

PZAT collaborated with the other ZIMPAAC partners in planning and conducting inception meetings in each of the four districts. The meetings were attended by local stakeholders including the DAC, MOH, representatives from the chiefs and other line ministries and local organizations. The objective of the meeting was to summarize each partner's role in the ZIMPACC consortium as well as the Client Flow.

## Monitoring and Evaluation

### Training

#### DHIS2 Training

PZAT joined other enrolling club partners on DHIS2 training hosted by PSI. In addition, an in-house intensive training with all the Data Entry Clerks was conducted. Both the trainings aimed at equipping the data team with skills and knowledge on using DHIS2.

#### Joint Data Management Training

PZAT team (Data Entry Clerks and Field Officers) joined other ZimPAAC partners for the Data Management training held in Lupane in Q3. The training aimed to build capacity of ZimPAAC consortium program teams on effective program and data management, explore operational and implementation challenges in the DREAMS program and management process, and revisit M and E tools used in DREAMS.

### District Team

The Field Officers took the lead in conducting support and mentorship exercise, targeting Young Sisters and PrEP Champions. They utilised monthly update meetings to ensure that the community cadres had enough resources and capacitated them on monitoring and evaluation tools.

### National Team



Routine site support and mentoring visits were conducted across the four districts by the national office staff. The main objective of the visits was to ensure quality delivery of the programme and implementation with fidelity. Feedback from the technical support visits was documented and information generated cascaded to field teams for program management.

## Technical Support and Supervision

### CDC Virtual Support

Along with other implementing partners, Tsholotsho team participated in the inaugural CDC virtual support visit in Q4. A PrEP champion, 1 Young Sister and 1 YWSS presented during the virtual support visit, and they successfully showcased their role as well as how the program has had an impact on them.

### Program monitoring through PrEP Community dialogues

The overarching aim of the oral PrEP community dialogues was to explore and understand community-level perceptions about oral PrEP and identify potential facilitators and barriers to uptake and use of oral PrEP as a new HIV prevention intervention in Mat North. Dialogues were conducted with groups of PrEP users, non-users and those who had opted out of PrEP. Results from the dialogues are used for programme improvement. Below are the summary results from the dialogues:

#### Knowledge questions

- AGYWs highlighted that some people in their community do not know about PrEP and they get information on PrEP from the DREAMS program. Participants were aware that PrEP was a pill that was taken by a person to prevent HIV infection.

#### Reasons for opting out of PrEP

- Some participants highlighted that they had difficulty disclosing to their parents, caregivers and partners hence taking PrEP in secret made them sometimes forgetful, resulting in them stopping PrEP
- Others felt they were no longer at risk

#### Preferred service delivery platforms and why

- Participants noted that they get information on reproductive health services from the clinic and from safe spaces and those are their preferred platforms. YWSS highlighted that they are free and feel comfortable at the safe hubs.



Other issues discussed during the dialogues

The following issues were further discussed during dialogue:

- Participants had no clear understanding on the proper ways of opting out of PrEP. It was explained that PrEP should be taken for a further 28 days after the last exposure when one is opting out.
- Also discussed during dialogue was the difference between PEP and PrEP as AGYWs were confusing between the two preventive therapies. PrEP was defined as Pre-Exposure Prophylaxis the drug which is taken by a person before they are exposed to HIV infection whereas PEP was defined as the Post Exposure Prophylaxis which the drugs are taken after one has been exposed to the HIV virus.
- It was also highlighted that PrEP does not prevent against pregnancy and STIs, as result the AGYWs would need to use other prevention measures for these. Information about Family planning was further discussed during the dialogues.

## Data Management

PZAT continues to strengthen data management systems from the national to the district level. The four Data Entry clerks supported data management. All district data was captured at the site level, and as expected PZAT adopted the DHIS2 to capture program data. The head office team routinely supported the Data Entry Clerks to ensure compliance to monitoring and evaluation guidelines.

## Operating in the context of COVID-19

Lockdown restrictions instituted during the year affected routine program implementation. To overcome this, measures were put in place to adhere to PEPFAR and MOHCC guidelines and at the same time ensuring program operations continued. In keeping in contact with and ensuring that YWSS access clinical services the following strategies were adopted:

- Use of virtual platforms (SMS and WhatsApp) for PrEP mobilization (PrEP Champions) and sessions sensitization (Young Sisters)
- Providing Young Sisters, PrEP champions with PPE and continuous sensitization on COVID-19
- PrEP resupply outreaches and home visits to ensure PrEP continuation among AGYW



- Virtual safe hubs - YWSS discuss SRH issues and YWSS pack sessions through WhatsApp Groups

## Lessons Learnt

From programming throughout the first year of DREAMS in Mat North, the following lessons were learnt:

### PrEP Programming

Stakeholder engagement is key to success in program implementation across communities

- Creation of a waiting list during times of PrEP stock out assisted in reaching PrEP targets
- Prioritising returning clients over initiations during low PrEP stock to ensure PrEP continuation
- To boost PrEP continuation among users, HCWs offer should offer comprehensive adherence counseling at initiation visits.
- The use of facilities appointment diaries to document date of next visits assists in defaulter tracking

### DREAMS programming

- The stop the bus strategy fosters layering and completion of services in real time
- Use of virtual means on demand creation and mobilization of interventions assisted in reaching beneficiaries in times of COVID-19 and during rainy seasons
- Concurrent delivery of primary package curricula (Health4Life & YWSS PACK) minimizes lost to follow among YWSS and a strategy we are adopting for COP 21.

## Challenges and Solutions

Table 10: Challenges and Solutions

Challenges	Action taken
No constant supply of PrEP in three districts: (Lupane, Tsholotsho, Bubi) PrEP implementation is new in districts	Liaison with district pharmacists to strengthen the supply chain management
Competing work plans for available Zim-TTECH vehicles	Ideally each district needs a vehicle and plans are being explored to have these in place



Add - on activities to Scope of Work; previously unbudgeted for	Used savings from other budget lines to cover the activities and combine activities where possible
Lower rates of Primary package completion for YWSS due to delays in starting YWSS Activity Pack	Combined the H4L and YWSS sessions so that they are delivered concurrently and avoiding a break in sessions which fosters loss to follow up
PrEP 1_Month retention for PrEP users was a challenge in DREAMS wards,	Home visits and PrEP resupply outreaches were conducted.

## Success story: Lupane



### Michelle Ncube's Success Story

My name is Michelle Ncube, a young woman aged 26 years old. When the DREAMS program was implemented in our district I was recruited as a Young Sister under PZAT covering Matshiya ward. Before DREAMS program I was a sex worker, and I was also doing cross border trading, buying goods from Musina in South Africa for re-sale at Lupane Flea market.

As a Young Sister I learnt a lot about the DREAMS program as I was recruited to screen and enroll my peers into the program. Even though I was the facilitator, I learnt how HIV is



transmitted and how one can prevent it and maintain an HIV negative status. Through the DREAMS program I am now able to negotiate with my clients on using condoms regardless of how much I have been offered. I also learnt that I have rights to choose what I want to do and a right to refuse what I do not want to do. On Gender Based Violence, I learnt that being beaten by a client or an intimate partner is not a sign of love but a sign of abuse and control. Through gender norms sessions I managed to get counselling from the Primary Care Counsellor and became empowered as I can now control my temper.

One of the most interesting sessions to was financial literacy. I enjoyed facilitating this session as I also learnt about the importance of savings and prioritizing on the needs against wants. This session completely transformed my life on issues to do with finances as I now know how to save and use my money. As a Young Sister I get a constant stipend which complements my cross-border trade. I also used the money to enroll for O level lessons that I do during my spare time. During the fourth quarter of COP20 when work pressure became less, I went on to enroll for a Nurse Aid Training course with MG Nursing Services and I have completed and passed my theory and I am currently doing attachment as Nurse Aid at Lupane clinic. Through DREAMS program I think my life is less risky now as I am no longer dependent on sex work. If I pass my O levels together with Nurse Aid Certificate my life will never be the same again even if the program does not continue. I am happy to share my story with other young women selling sex how DREAMS is transforming my life.