

NATIONAL AIDS COUNCIL



Annual Report

2022

www.nac.org.zw

Mandate

To provide for measures to combat the spread of Human Immuno Deficiency Virus (HIV) and management, coordination and implementation of programmes that reduce the impact of HIV and AIDS. (The National AIDS Council Act Chapter 15:14 of 2000)

Vision

A Zimbabwe free from HIV infections, stigma and AIDS related deaths by 2030.

Mission

To lead and coordinate the national strategy in response to HIV and AIDS in Zimbabwe.

Core Values


Integrity/Sincerity
Transparency and Accountability
Professionalism
Innovation
Inclusiveness
Teamwork

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Acronyms

AIDS	Acquired Immuno-Deficiency Syndrome
ANC	Ante-Natal Care
ART	Antiretroviral Therapy
ARV	Anti-Retroviral
ASOs	AIDS Service Organizations
BCC	Behaviour Change Communication
BCF	Behaviour Change Facilitator
BEAM	Basic Education and Assistance Module
CARGS	Community ART Refill Groups
CATS	Community Adolescents Treatment Supporters
CBO	Community Based Organization
CeSHHAR	Centre for Sexual Health HIV and AIDS Research
C& HBC	Community and Home Based Care
CRS	Catholic Relief Services
CSE	Comprehensive Sexuality Education
CSWs	Commercial Sex Workers
CPCPZ	College of Primary Care Physicians of Zimbabwe
DAAC	District AIDS Action Committee
DAAOs	District Accounts and Administration Officers
DACS	District AIDS Coordinators
DBOs	Database Officers
DBS	Dried Blood Spot
DREAMS	Determined, Resilient, Empowered, AIDS-free, Mentored and Safe girls and women
EID	Early Infant Diagnosis
EMTCT	Elimination of Mother To Child Transmission
GBV	Gender Based Violence

GF	Global Fund
G and C	Guidance and Counselling
HIV	Human Immunodeficiency Virus
HTS	HIV Testing Services
IEC	Information, Education and Communication
IPT	Isoniazid Preventive Therapy
MARPs	Most at Risk Populations
MC	Male Circumcision
M&E	Monitoring and Evaluation
MIPA	Meaningful Involvement of People Living with HIV & AIDS
MoHCC	Ministry of Health & Child Care
MoPSE	Ministry of Primary and Secondary Education
MOT	Modes of Transmission
MSM	Men who have Sex with Men
NAC	National AIDS Council
NATF	National AIDS Trust Fund
NCD	Non-Communicable Diseases
NGO	Non- Governmental Organization
OI	Opportunistic Infections
OVC	Orphans Vulnerable Children
PACs	Provincial AIDS Coordinators
PEP	Post-Exposure Prophylaxis
PITC	Provider Initiated Testing & Counselling
PLHIV	People Living with HIV
PMs	Provincial Managers
PMTCT	Prevention of Mother to Child Transmission
PrEP	Pre-Exposure Prophylaxis
PSI	Population Services International
PSS	Psycho-social Support

SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
STIs	Sexually Transmitted Infections
TB	Tuberculosis
TWG	Technical Working Group
UNAIDS	United Nations Joint Program on HIV and AIDS
UNDP	United Nations Development Program
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VMMC	Voluntary Medical Male Circumcision
WAAC	Ward AIDS Action Committee
WAD	World AIDS Day
WHO	World Health Organization
YFCs	Youth Friendly Centres
ZNASP	Zimbabwe National HIV and AIDS Strategic Plan
ZNFPC	Zimbabwe National Family Planning Council
ZNNP+	Zimbabwe National Network of People Living with HIV
ZIPSHAW	Zimbabwe Private Sector HIV/AIDS Wellness

Chief Executive Officer's Summary Statement

Welcome to the National AIDS Council's annual report for 2022, a period marked by economic challenges, which hampered program achievements as inflation levels soared eroding the buying power of the funds set aside for procurement of inputs. Despite these challenges, the year saw a number of accomplishments, including the ZNASP IV Mid-Term Review, securing of the ICASA bid, the introduction of the National HIV and AIDS Strategy for the Informal Economy, World AIDS Day commemoration, which is an important annual activity in the national response, research manuscript publications, achievement of the first two 95s on our 95-95-95 targets, and adoption of DHIS2.

This report provides an overview of national initiatives in the programmatic thematic areas of prevention, treatment and enabling environment as well as administrative areas of finance, audit and human resources. The information presented and discussed herein was compiled using reports from NAC structures and implementing partners.

In an effort to improve access to primary and secondary health care, enabling environment and health services delivery, as enshrined in the National Development Strategy 1 (NDS1), the National AIDS Council has continued to coordinate the national HIV multi-sectoral response, with the active participation of various stakeholders, implementing partners, and private sector companies. NAC has facilitated the integration of HIV multi-sectoral response at community level to enhance and ensure the comprehensive referral system and the promotion of all levels of disease prevention continuum.

NAC has continued to contribute to the NDS1 strategy of reducing morbidity and mortality attributable to communicable and non-communicable diseases, through the implementation of the 95-95-95 HIV and End Tuberculosis initiatives. These strategies are being realized through the ongoing HIV prevention models, campaigns and prevention and control of non-communicable diseases (NCDs) that were implemented in all districts of the country during 2022. The National AIDS Council has led a national wellness initiative for employees and key multi-sectoral stakeholders within the HIV response mechanism, including the integration of the monthly cleanliness campaigns with the youth and sex worker groups, under the healthy lifestyles and sport for health purposes component of the NDS1.

54,074,577 public sector condoms comprising of 51,240,951 male and 2,833,626 female were distributed. The private sector distributed 7,990,745 male condoms to support the public sector efforts.

The youth in-school programme focused mainly on providing education subsidies, SRH lessons, Guidance and counselling, joint support visits to the schools and the National school quiz competitions. Although schools were open all year, alternative learning platforms including radio and television programs that were introduced to reach students at home during the lockdown period in 2021 continued in 2022. In order to increase students' involvement in their communities, the DREAMS model also retained the community school and study clubs.

The NAC national school quiz competition in 2022, which had as its theme "Competence-based Curriculum to EQUALIZE access, empowerment, inclusion, opportunity and safeguard human rights," confirmed that there is an increase in the awareness of HIV and AIDS among students. The ZBC channel will telecast the thirteen quizzes that were taped in 2022 in 2023.

For youth out of school, the number of young people who used Youth Centres' HIV and AIDS services during the reviewed year was 233% of the yearly goal of 2022 (50000). For the program, there were 105% engaged peer educators against an annual goal of 1000 for 2022.

HIV and AIDS prevention programs reached 111, 948 employees, with the second quarter seeing the largest numbers (35,426). There is a need to develop techniques to increase workplace interventions since workplace coverage is still quite low. Because of COVID 19's effects and the challenging economic climate, the majority of companies did not give HIV and AIDS programs first priority.

The National AIDS Council introduced the National HIV and AIDS Strategy for the Informal Economy for 2022–2025 with assistance from the International Labor Organization and other significant partners. The strategy was developed in 2021 to replace the 2017-2020 strategy.

The country launched a ZNASP IV midterm review. The review was intended to evaluate the strategy's relevance, effectiveness, efficiency, and sustainability; document best practices to be implemented; identify gaps that needed to be filled in the plan's remaining time; identify priorities and opportunities that the nation should concentrate on; and develop an addendum to the strategy that will be in use up to 2026.

The Differentiated Service Delivery Models approach keeps enhancing the provision of services to people living with HIV. The Community ART Treatment and Care Facilitators (CATCFs), Community ART Refill Groups (CARGs), and Community Adolescent Treatment Supporters (CATS) are the most prominent models.

A variety of social and safety nets including educational assistance, food and nutrition, assisted medical treatment orders (AMTOs) as well as cash transfers were utilized in an effort to extend mitigation services against the effects of the HIV epidemic to children mostly but not limited to those orphaned due to HIV.

The rise in child abuse cases, which exposes children to harm and increases their risk of contracting HIV, is of concern especially since 43% of all abuse cases reported in the country involve sexual abuse.

NAC reviewed its communications strategy in order to include the new communication platforms that have emerged over the years.

Gender-based violence against women and girls continues to be prevalent. Throughout the year, there was also a steady rise in the number of instances involving men and boys. 27,856 women and 5,341 men experienced gender based violence in the 2022. Zimbabwe observed the International Day for Women along with the rest of the globe, reflecting on the difficulties women face and the advancement of women in the quest for gender equality.

In line with the evidence and result-based programming and monitoring approach, NAC worked with partners to carry out a number of research projects. The projects included the HIV Size Estimates in Prison study, the Call Centre Assessment, the updating of the HIV and AIDS research database, the HIV research symposium, and the publication of a number of studies, such as the Impact of COVID on PLHIV and the HIV incidence among prison inmates.

The year was marked by financial difficulties due to high levels of local currency inflation. ZWL18bn was invested in the national response to HIV and AIDS against a budget of ZWL21.7bn. NATF contributed Z\$15.2bn (84.44%) against a budget of Z\$16.1bn towards the response. An investment of Z\$2.8bn (15.56%) was made by Global Fund towards the response against a pledge of Z\$5.

As we approach the close of the year, I would want to express my gratitude to all parties involved in the ZNASP's objectives and operations, including partners, donors, people living with HIV, and the wider Zimbabwean populace.

I hope you have a relaxing end-of-year break and that we will all return refreshed the following year to continue the fight for an AIDS-free Zimbabwe by 2030.

I thank you,

Dr. Bernard Madzima

CHIEF EXECUTIVE OFFICER

PREVENTION

1.1 Prevention of Mother to Child Transmission

Prevention of mother-to-child transmission (PMTCT) program includes a cascade of services given to prevent mother-to-child transmission (MTCT) of HIV in-utero, during delivery and during breastfeeding. The PMTCT ART coverage for the year 2022 was 87%. Zimbabwe is progressing on the path to elimination of mother to child transmission of both HIV and Syphilis with guidance from the Operational Plan for eMTCT of HIV and Syphilis (2018 – 2022).

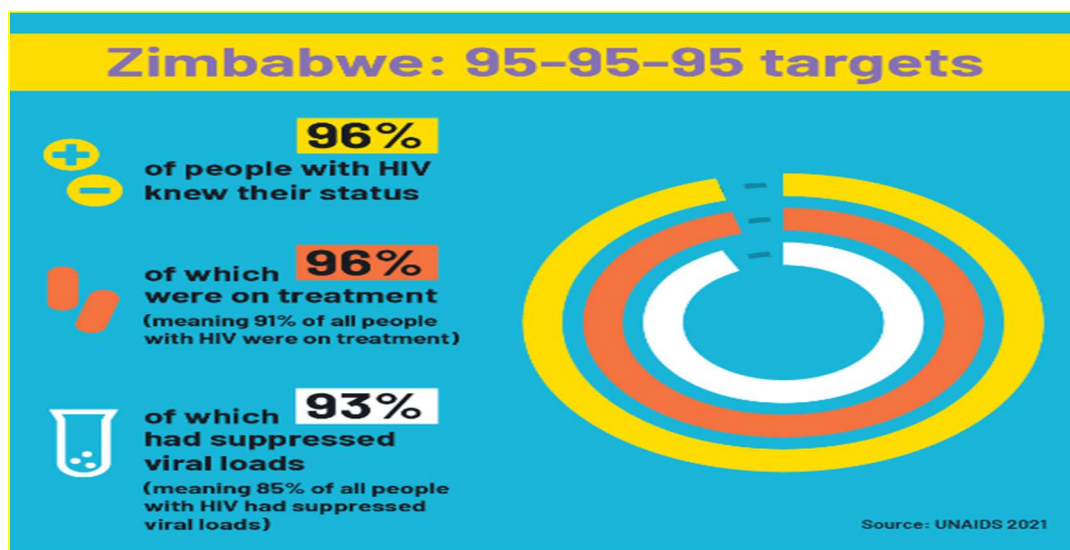
According to the 2021 HIV Estimates report, the bulk of infections were happening in mothers who did not receive ART during pregnancy, who dropped off ART during pregnancy and those mothers infected during pregnancy and breastfeeding period.

With the final transmission including breastfeeding period in 2021 recorded at 8.8, the country is having challenges to get to the global elimination target of less than 5% by 2022.

1.2 HIV Testing Services (HTS)

Zimbabwe adopted the 95-95-95 fast track targets for HIV testing and treatment to end AIDS by 2030. The country has made tremendous progress towards achieving these targets, showing 96% of people living with HIV knowing their HIV status by 2022. The figure below shows the overall achievement towards the fast-track targets.

Figure 1: Fast Track Targets

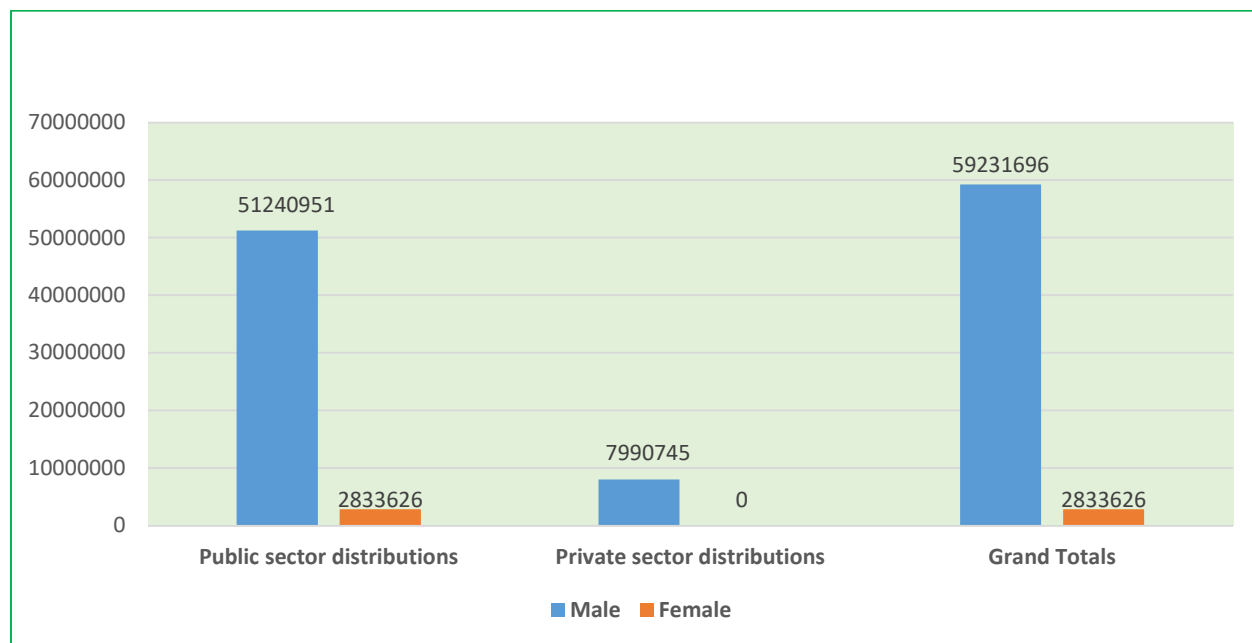


Various differentiated service delivery strategies including Index Case Testing, Self-testing (community and facility based) as well as Provider Initiated Testing and Counseling were implemented in 2022, resulting in

1.3 Condom Program

As illustrated below, the public sector distributed more condoms compared to the private sector, where-in more male condoms were also distributed than female ones.

Figure 2: Annual Condoms Distribution 2022



During the period under review, 59 231 696 male and 2 833 626 female condoms were distributed.

1.4 Youth Program

1.4.1 Youth In-school

Major youth-in-school activities implemented in the year included provision of education subsidies, the teaching of the Guidance and Counseling subject, AIDS clubs, menstrual health management, joint support visits to the schools and the national school quiz competitions among others.

Alternative learning platforms like radio and television programmes, which were introduced to reach learners at home during the lockdown period in 2021, continued while the DREAMS model maintained the community school and study clubs to enhance engagement of learners in the communities.

With support from the United Nations Fund for Population Affairs (UNFPA) and NAC, the Ministry of Primary and Secondary Education (MoPSE) developed a training package for Guidance and Counseling and other Learner Support Services, in an effort to standardize the capacity building of teachers on CSE. NAC also supported three meetings for MOPSE and partners where partners shared programme activities, experiences, challenges and budgets.

In-school joint monitoring and support visits were also conducted to assess and determine whether Guidance and Counseling (G&C), was being administered as a learning area to the students, as well as having it implemented as a programme and service in the schools.

2022 National AIDS Council School Quiz Competition

The 2022 edition of the National AIDS Council National School Quiz Competition was held under the theme, *'Competence-based Curriculum to EQUALIZE access, empowerment, inclusion, opportunities and*

uphold human rights’. These quiz competitions are part of the implementation of a robust all-inclusive life skills, sexuality, HIV and AIDS program in the Guidance and Counseling learning area. Participants were drawn from primary schools and high schools including those for students with hearing impairments. Thirteen episodes, which were produced from the recording of the competition by ZBC will be aired on national television in 2023.



Wadzana Dzimwasha, the Quiz mistress at the 2022 edition of the competition

The low performance of two indicators could have been attributed to the poor reporting by the schools as implementation of the activities is mandatory in all the schools.

Table 1: Youth in school

Indicator	Annual Target	Achievement
No. of pupil’s taught on life skills sexuality HIV/AIDS education this month	4,000 000	1,740 451
No. of learners in G & C related school clubs	1,000 000	548 320
No of learners referred for SRH services	400 000	365 341

1.4.2 Youths out of school

The Youth-out-of-school programme, whose aim is to empower young people aged 10-24 years with sexual reproductive health, HIV and AIDS education to make informed choices on services and life choices achieved its annual targets. These achievements shown below, could have been attributed to the variety

of peer led community activities introduced due to the COVID-19 pandemic and models like the Sista2sista, Brother2brother and DREAMS.

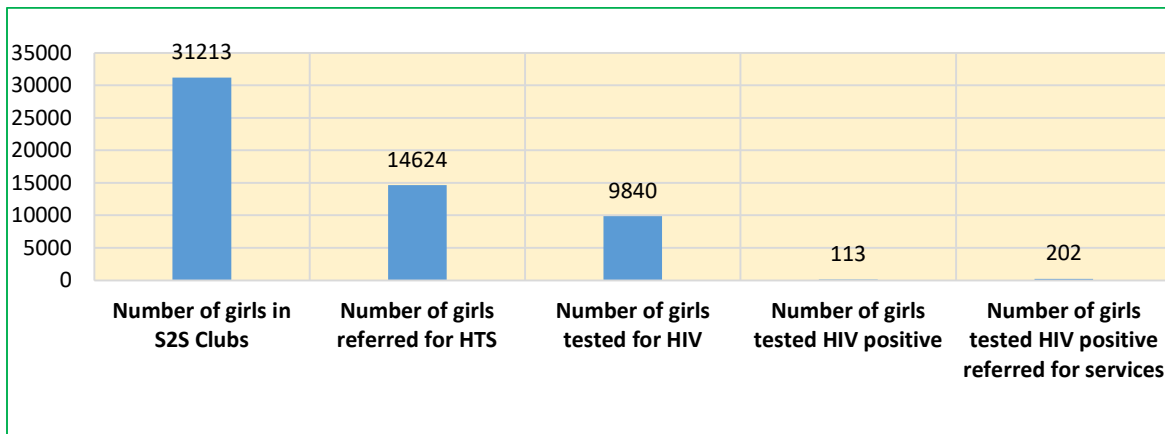
Table 2: Youth out of school

Indicator	Annual target	Annual 2022
The number of Youth- Out- Of - School who accessed HIV and AIDS services from Youth Centres	50 000	116415
Number of Out-of-school youth Peer Educators who were active	1000	1046

1.4.3 Sista2Sista (S2S)

The S2S model uses the peer-to-peer approach to educate adolescent girls and young women on sexual reproductive health (SRH) and empower them to access SRH, HIV and AIDS service. The graph illustrates the programme achievements. The number of girls in the Sista2sista clubs increased by 14% from the first quarter to the fourth quarter of 2022 while the positivity rate of those who tested for HIV was 1%.

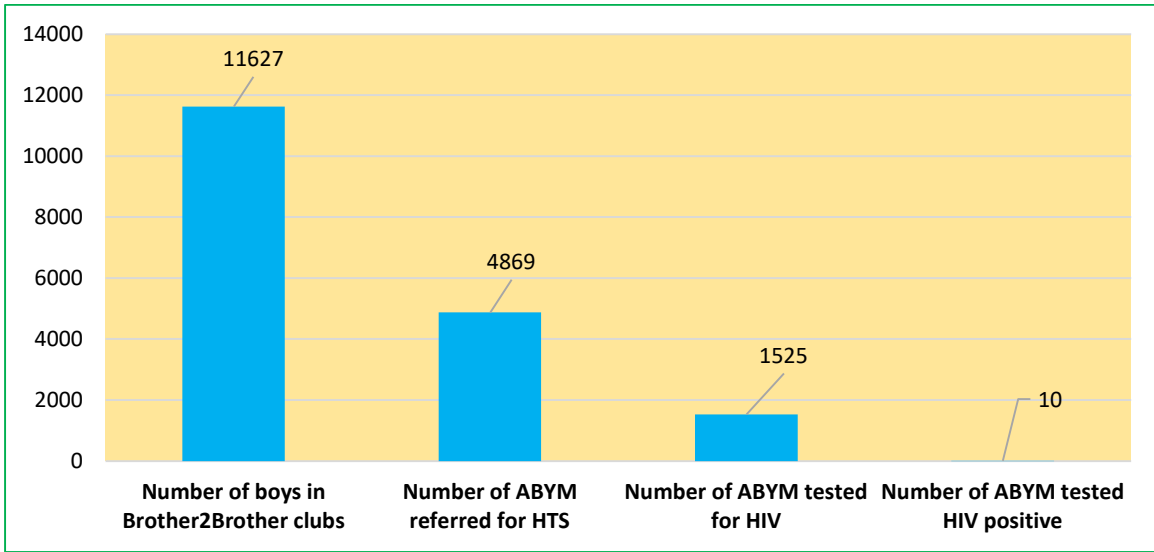
Figure 3: Sista2sista programme



1.4.4 Brotha2Brotha

The number of boys in the B2B clubs increased by 25% from the first quarter to the fourth quarter while the number of vulnerable boys referred by the B2B mentors for prevention services increased from 169 65 in the first quarter to 58 650 in the fourth quarter. As shown below, 0.65% of boys who tested for HIV tested positive.

Figure 4: Brotha2Brotha

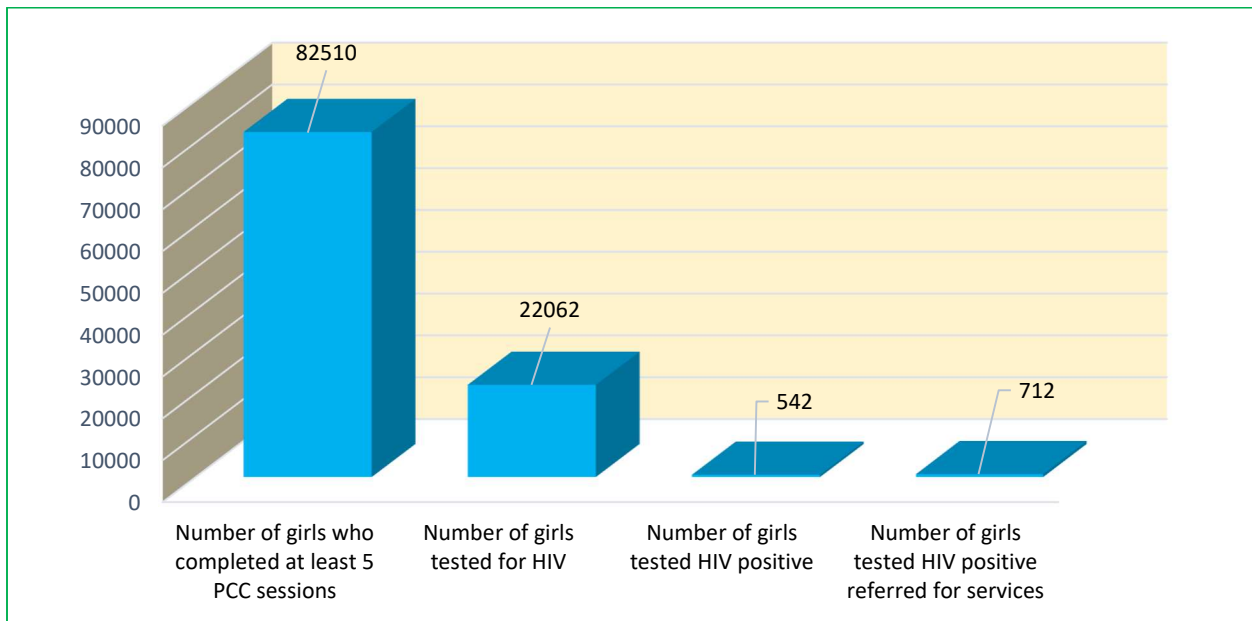


1.4.5 DREAMS Program

As part of efforts to enhance the coordination of the programme and keep abreast of developments in the programme, a series of joint national monitoring and support visits were conducted to all DREAMS implementing partners. Discussions were held with partners to identify implementation progress, challenges, successes, innovations, and stories of significant change.

The total number of girls who completed at least five accessions was 82 510. Of the 22 063 girls who tested for HIV tested positive. The table below illustrates the performance of various DREAMS programme indicators.

Figure 5: DREAMS programme indicators



1.4.6 Youth in Tertiary institutions

With support from the United Nations Education, Scientific and Cultural Organization (UNESCO), the National AIDS Council led the development of a curriculum on Comprehensive Sexuality Education (CSE). This was in response to an assessment that revealed the challenges faced by youth in tertiary education, which included increased risk of contracting HIV due increased uptake of intoxicating substances, abuse of power by lecturers who demand sexual favors in exchange for passing grades, students who resort to multiple relationships, and inaccessible health services such as PEP and PrEP. Young who are subjected to sexual abuse were also noted to be unwilling to report such cases to the authorities.



An exhibition of HIV and AIDS services at an outreach event at a local tertiary institutions

Annual trends in the performance of various indicators for youth in tertiary institutions is shown the table below:

Table 3: Youth in tertiary institutions

Indicator	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Annual
Number of students reached with HIV and AIDS education	19750	22461	20939	20101	22886
Number of students accessing HIV and AIDS services	9662	5655	8917	5902	30136
Number of active peer educators	500	1103	2798	1218	2798

Young Peoples Network on Sexual Reproductive Health HIV and AIDS (YPNSRHHA)

The YPNSRHHA, championed several innovative and youth-led initiatives to reach young people through social media, reaching out to 301 124 young people and allowing for discussion of various issues, which included involvement of law enforcement agencies and drug and narcotics institutions to locate and arrest suppliers in various constituencies and sexual harassment at tertiary institutions.

Call Centre Validation Meeting

The Call Centre assessment and validation study, whose main aim was generating evidence to inform standard guidelines to improve quality of care using the call centers and hotlines was conducted and findings thereof shared.

Prevention Self-Assessment Tool (PSAT) on Adolescent Girls and Young Women (AGYW)

NAC coordinated and facilitated the SSLN regional and subnational validation meetings in which 15 countries participated. Issues shared at the meetings included the need for resources and space for young people to effectively respond to SRH, HIV and AIDS; services to be youth friendly and referrals with successful linkages to services, and for accelerating HIV prevention among AGYW HIV and AIDS programmes.

Safeguard Young People (SYP) meeting

NAC was represented at the SYP meeting in Namibia at which the project was evaluated and plans for 2023 developed.

The NAC team presented a number of recommendations, which included the need for development and implementation of the demographic dividend plan with full and meaningful involvement of all sectors of young people. Investment in youth friendly services was also emphasised.

Global Fund Adaptive leadership training and orientation

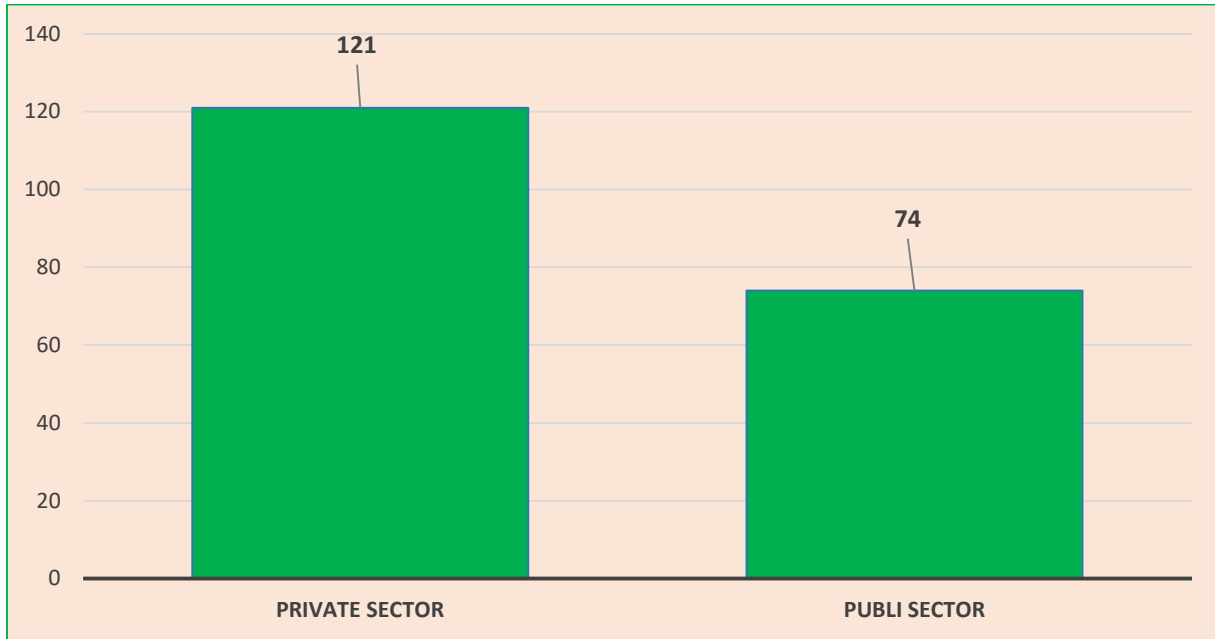
NAC was also represented at the Global Fund Adaptive Leadership training and orientation meeting in Lusaka, Zambia. The Adaptive Leadership model is participatory, it brings out the root causes of problem, and enhances ownership and sustainability of the project.

1.5 Workplace programme

The operating environment for the workplace programme was worsened by the hyper-inflationary environment, which affected implementation of some activities at the workplace.

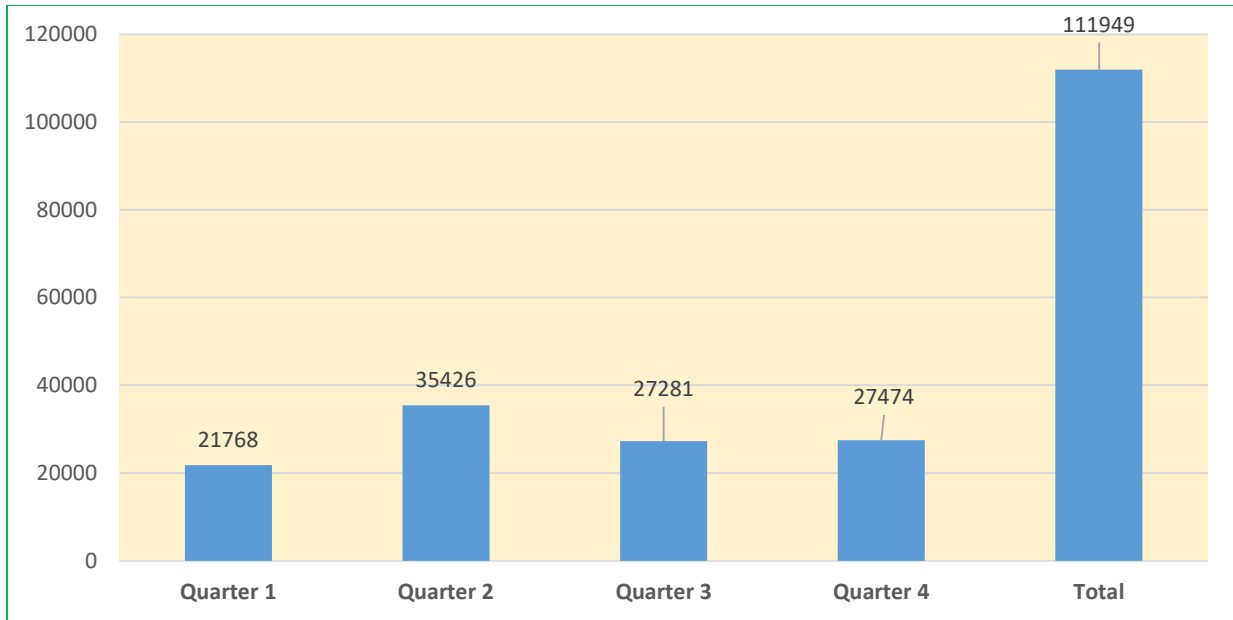
1.5.1 Workplace Outputs

Figure 6: Workplace who had HIV Prevention programmes



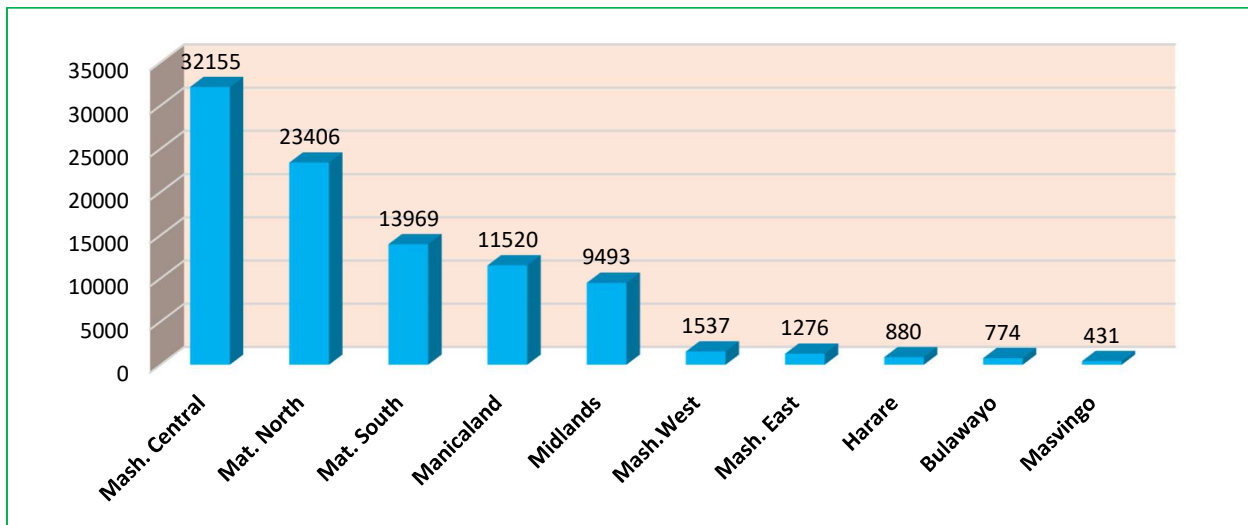
As illustrated above, 121 private sector companies including SMEs and 74 public sector institutions implemented HIV prevention and treatment programmes at their workplaces. Most companies and institutions in these sectors however did not prioritise HIV interventions, which they related to the impact of COVID-19 and the volatile economic environment.

Figure 7: Employees reached with HIV prevention programmes by Quarter



Over 111,900 employees were reached with HIV and AIDS prevention programmes. Coverage of workplace programmes continues to be very low highlighting a growing need to come up with strategies to scale up interventions. The low numbers could also be reflective of low reporting or non-reporting by a majority of companies and institutions.

Figure 8: Employees reached with HIV prevention programmes by Province



Mashonaland Central province had the highest number of people reached through workplace programmes while Masvingo province recorded the least.

Launch of the Informal Economy HIV and AIDS Strategy (2022-2025)

The National AIDS Council with support from the International Labor Organization and other key partners launched the National HIV and AIDS Strategy for the Informal Economy (2022-2025), which outlines

opportunities and guidance for scaling up efforts to reduce the number of new infections within the sector and general populations.

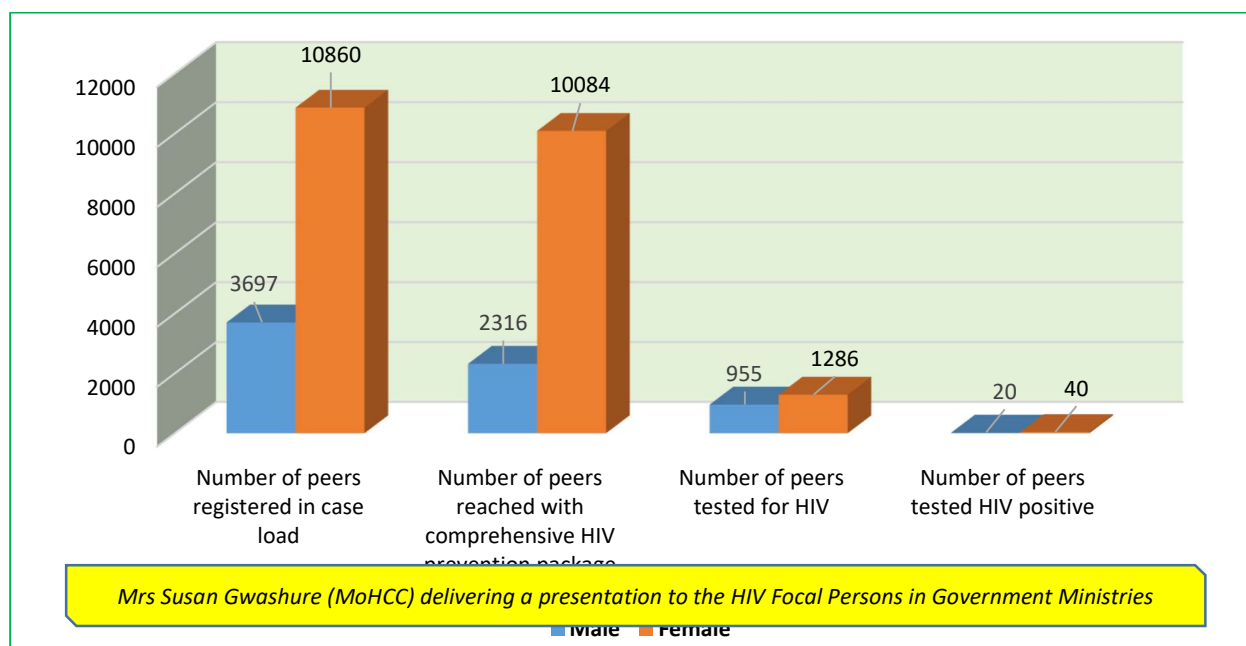
Dr. Honourable Sithembiso Nyoni, the Minister of Women Affairs, Community, Small and Medium Enterprises Development officially launched the strategy and encouraged stakeholders and partners to work together to support in building the capacity of the informal economy to effectively and efficiently respond to HIV and AIDS.

Capacity Development of the HIV Focal Persons in Government Ministries.

NAC in partnership with the Ministry of Health and Child Care and other key implementing partners conducted trainings for HIV Focal Persons in Government Ministries to equip them with new skills on emerging health issues. Topics covered included HIV Self-Testing, PrEP, Sexual Reproductive Health and Rights, Counselling Techniques, DSD Models, HIV/NCD Integration, Mental Health, Drug and Substance abuse. A total of 23 Government Ministries and Departments were represented.

1.5.2 Peer Led Programme

Figure 9: Peer-led Cascades



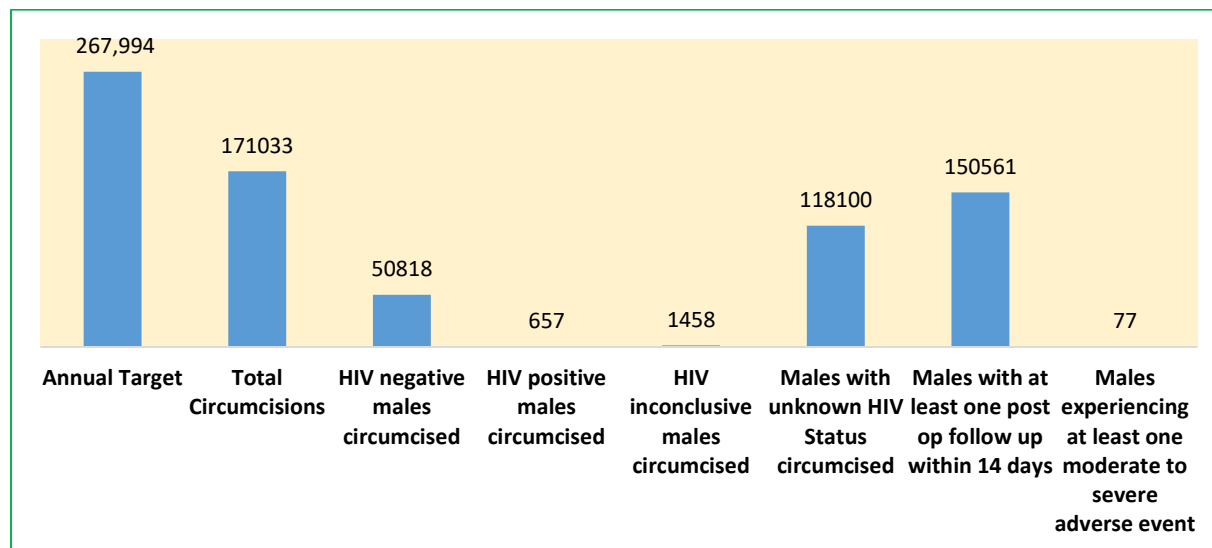
A total 10,860 females and 3697 males were registered into caseloads by peer educators, and of those tested for HIV, positivity rate was 2.1% for the males and 3.1% for females. Peer educators referred people for services like cervical cancer screening, PrEP, family planning, STI diagnosis and treatment, GBV and HIV Testing.

1.6 Voluntary Medical Male Circumcision (VMMC)

Against a target of 267,994 circumcisions, 171,033 were carried out. Programme data shows that 88% of the circumcised men had at least a post-operative follow up visit conducted while only 0,04% of the circumcisions experienced an adverse event.

The graph below indicated the Below is the total circumcisions done and the cascade analysis.

Figure 10: VMCM

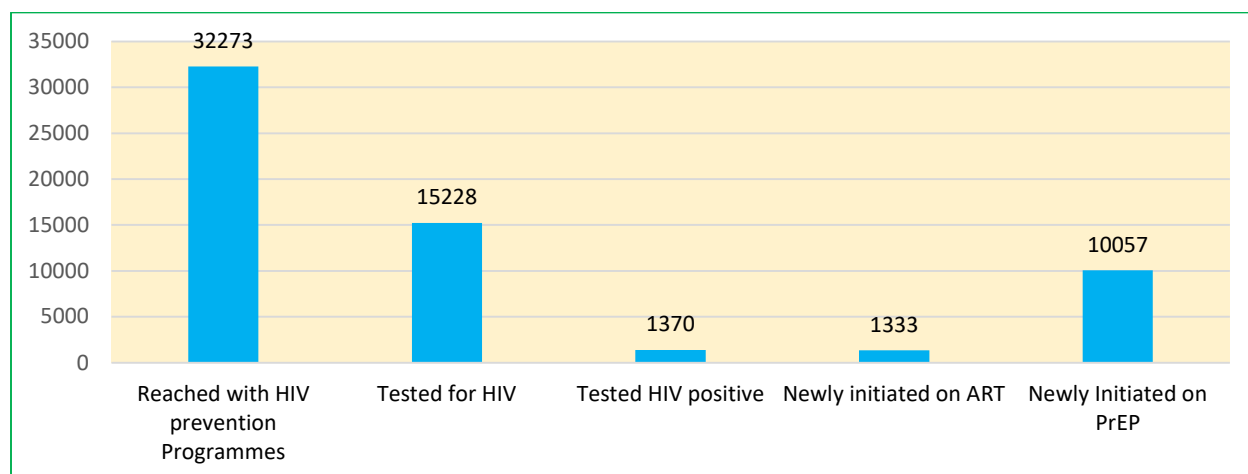


1.7 Key Populations

1.7.1 Men who have sex with men (MSM)

The Key Populations programme delivered safe and sustained HIV services through connecting with clients virtually and offering convenient long-term dispensing, pick-up, and delivery options for HIV commodities, services, and medications. Drop-in centers supported by UNFPA served as safe spaces where MSM and the greater LGBTI community members interact and seek health services including mental health. In addition, PSH, ZimTECH and MoHCC through public sector facilities provided HIV prevention treatment and care services through peer-led targeted interventions.

Figure 11: HIV Continuum of Prevention, Care, and Treatment Cascade performance for MSM

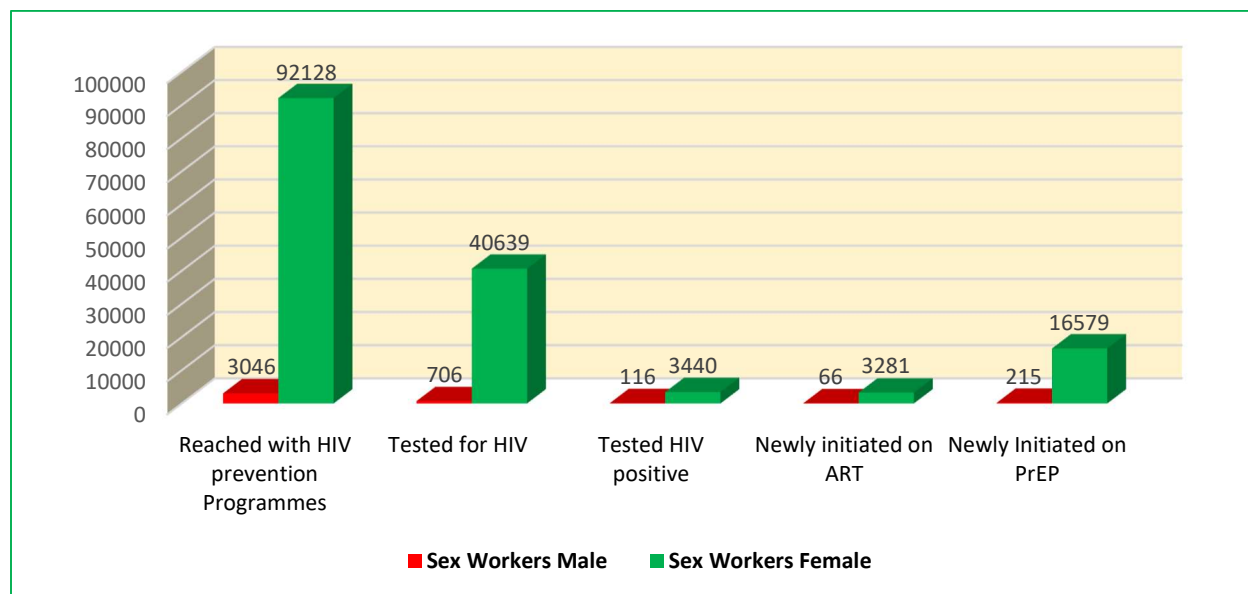


Through the programme, 32 273 MSM clients were reached with individual and/or small group-level HIV prevention interventions and messages while 15 228 men were provided with HTS services with 1370 individuals testing positive for HIV. Of these 97% were linked to HIV care and treatment. The programme also initiated 10 057 individuals on PrEP.

1.7.2 Sex Workers

The sex work programme reached 92,128 female sex workers (FSWs) and 3,046 male sex workers (MSWs) with individual and/or small group-level HIV prevention interventions and messages. A total of 40,639 FSWs and 706 MSWs received HIV testing services out of which 3,281 FSWs and 116 MSWs tested positive for HIV. All the 3,281 FSWs and 66 MSWs were linked to ART.

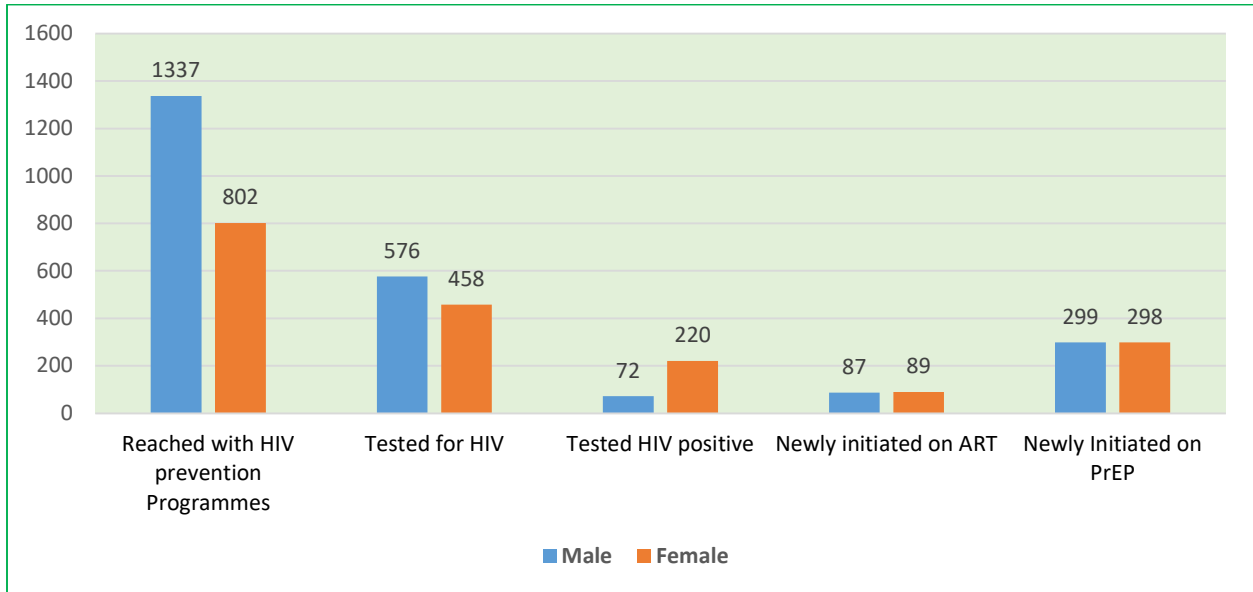
Figure 12: HIV Continuum of Prevention, Care, and Treatment Cascade performance for sex workers



1.7.3 Transgender persons

The program reached 1,337 transgender men and 802 transgender women with HIV prevention programs. A total of 576 transgender men and 458 transgender women accessed HIV testing services of which 72 and 220 tested positive for HIV respectively. Of these, 87 transgender men and 89 transgender women were initiated on ART respectively. A total of 299 transgender women and 298 transgender men were initiated on PrEP.

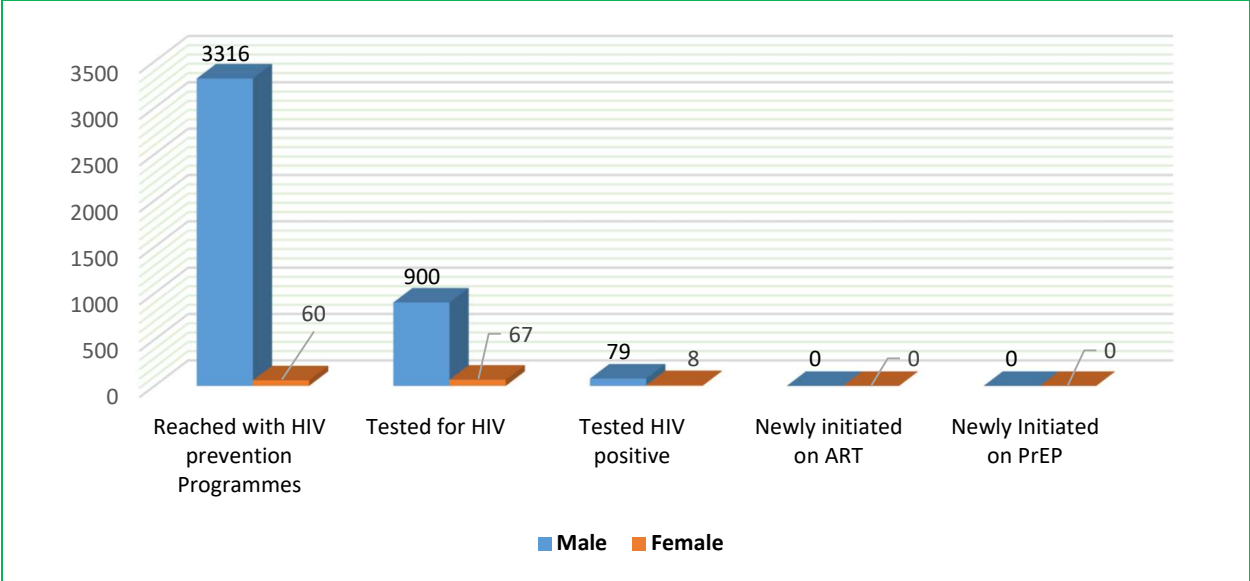
Figure 13: HIV Continuum of Prevention, Care, and Treatment Cascade performance for Transgender people



1.7.4 Prisoners and other people in closed settings

HIV prevention messages targeting prison inmates reached 3,316 males and 60 females, with 900 men and 67 women getting tested for HIV. Of the tested, 79 men and 8 women were positive, representing 8.8 % positivity for males and 11.9% positivity for females.

Figure 14: HIV Continuum of Prevention, Care, and Treatment Cascade performance for prisoners



2.0 Treatment Care and Support

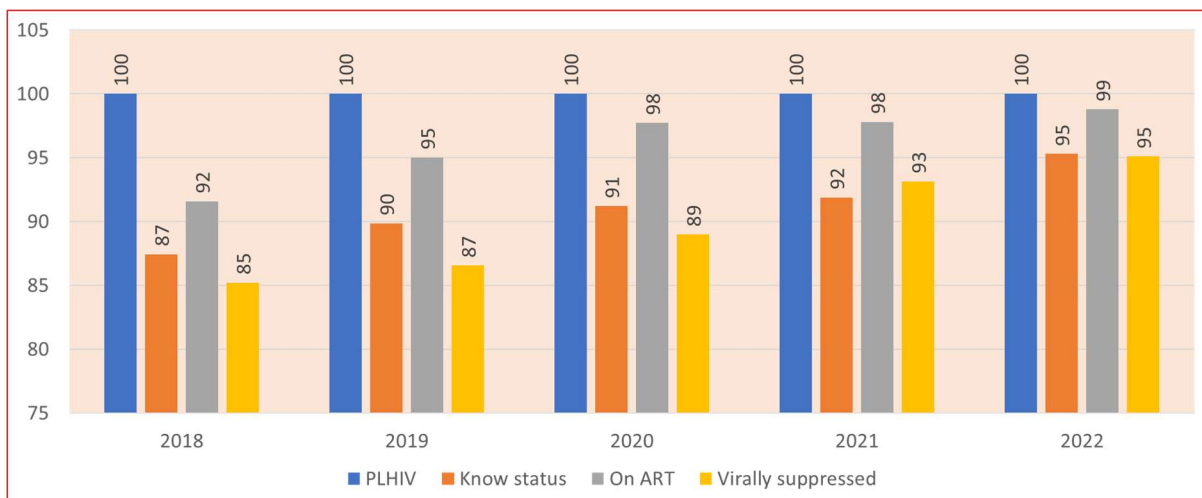
2.1 ART Program

According to the 2022 HIV and AIDS Estimates, a total of 1 233 619 people living HIV were on ART at the end of the year. This represented a 3% increase from the 1 192 019 people who were accessing ARVs at the end of 2021.

95-95-95 Targets

In line with the national strategic plan, Zimbabwe continued to pursue the 95-95-95 targets, whose progress is outlined below.

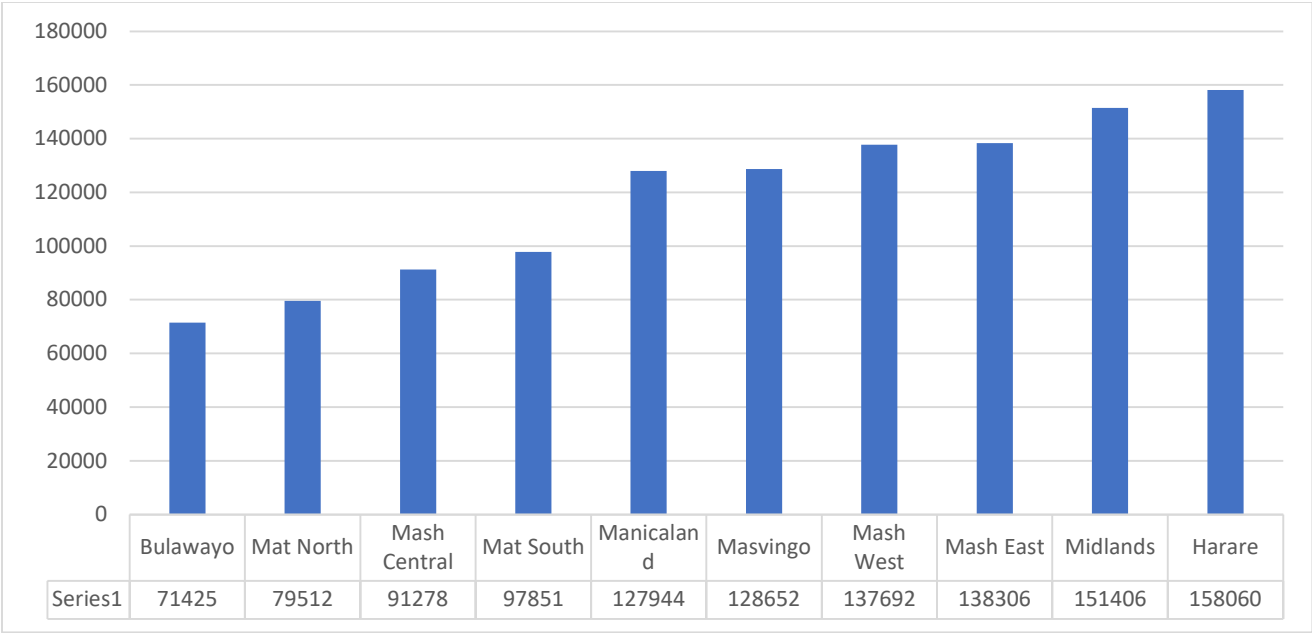
Figure: Progress towards 95-95-95



The country has achieved the 95-95-95 targets although there are variations or inequalities by age, sex and geography.

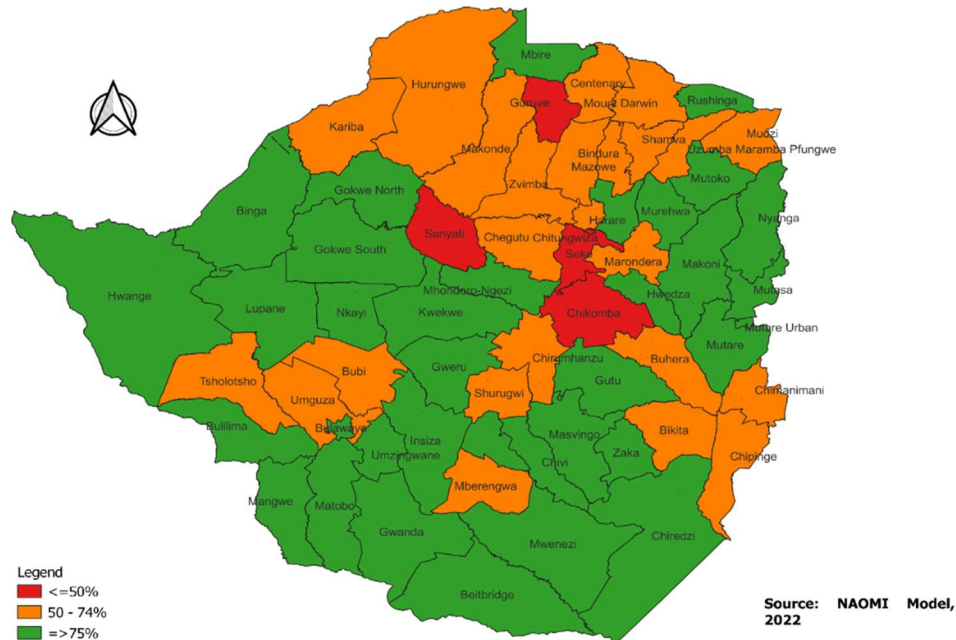
Number of people on ART: Provincial Picture

Number of adults on ART by province



Harare province had the highest number of adults living with HIV on ART during the period under review with the least number reported in Bulawayo Province.

Paediatric ART coverage by district

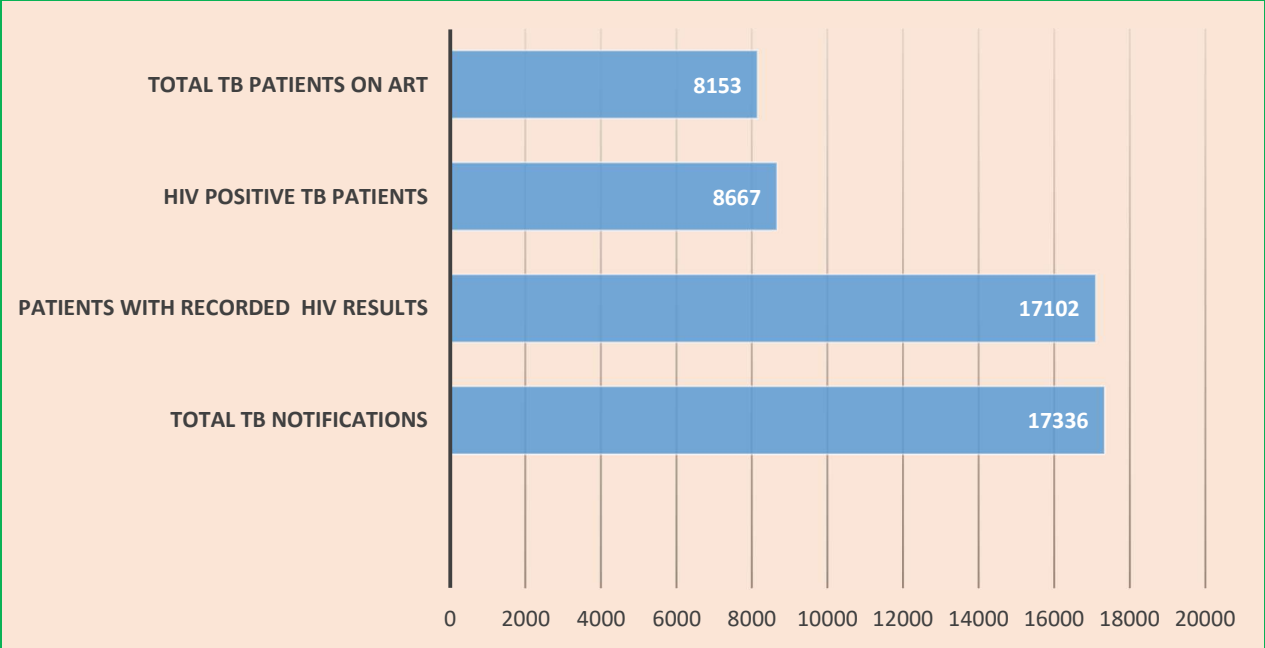


Most districts had a pediatric ART coverage above the target of 75% while four districts had a coverage below 50%.

1.8 HIV and TB Collaboration

The total notified cases were 17,336 and of these, 17,102(98.6%) had recorded HIV results. Notified TB cases who were HIV positive were 8,667 of which 94 % (8,153) were commenced on ART.

Figure 15: Annual TB Indicator Cascade 2022



Source: MOHCC DHIS2 2022

1.8.1 Community Care TB Grant

TB activities conducted included a meeting with the Parliament Portfolio Committee on Health to sensitize them on TB/HIV issues and another meeting with the civic society organizations to capacity build them to mainstream TB case finding in their health programme. TB IEC material, which included updated TPT guidelines was also designed and distributed to all provinces.

1.9 Meaningful Involvement of People Living with HIV (MIPA)

1.10 Differentiated Service Delivery Models

Various differentiated care interventions were implemented under the umbrella of support groups, CATS and CARGS models. Compared to 47,196 people in 2021, support groups reached 58,551 people in 2022, while CARGS only moved from 41,587 to 41,603. Membership in CATS however declined from 2,496 in quarter one to 1,315 in quarter four. The decline has been anecdotally related to the fact that Zvandiri stopped implementing the model in some provinces.

1.11 SOCIAL CONTRACTING

Ten implementing community-based organizations in 10 provinces were engaged to implement HIV prevention interventions under the social contracting concept, which is a key strategic shift to accelerate progress towards ending AIDS as a public health threat by 2030. The table below shows the engaged organizations and the funds disbursed:

Table 4: Funds disbursed to Implementing Partners under Social Contracting to date;

ORGANISATION	PROVINCE	AMOUNT (ZWL)
JOINTED HANDS	MIDLANDS	16,887,500.23
KATSWE SISTERHOOD	MASH CENTRAL	16,665,620.66
ZICHIRE	HARARE & MASH EAST	38,245,627.45
TSUNGIRIRAI ORGANISATION	MASH WEST	11,000,000.00
DOT YOUTH	BULAWAYO	10,990,000.00
RUJEKO HOMEBASED CARE	MANICALAND	8,955,284.28
CHILDCARE MINISTRIES	MAT NORTH	10,990,000.00
LUTHERAN DEVELOPMENT SERVICES	MAT SOUTH	11,120,898.25
TOTAL		124,854,930.87

Tariro Development Trust from Masvingo was contracted later in the year and would start implementing activities in 2023.

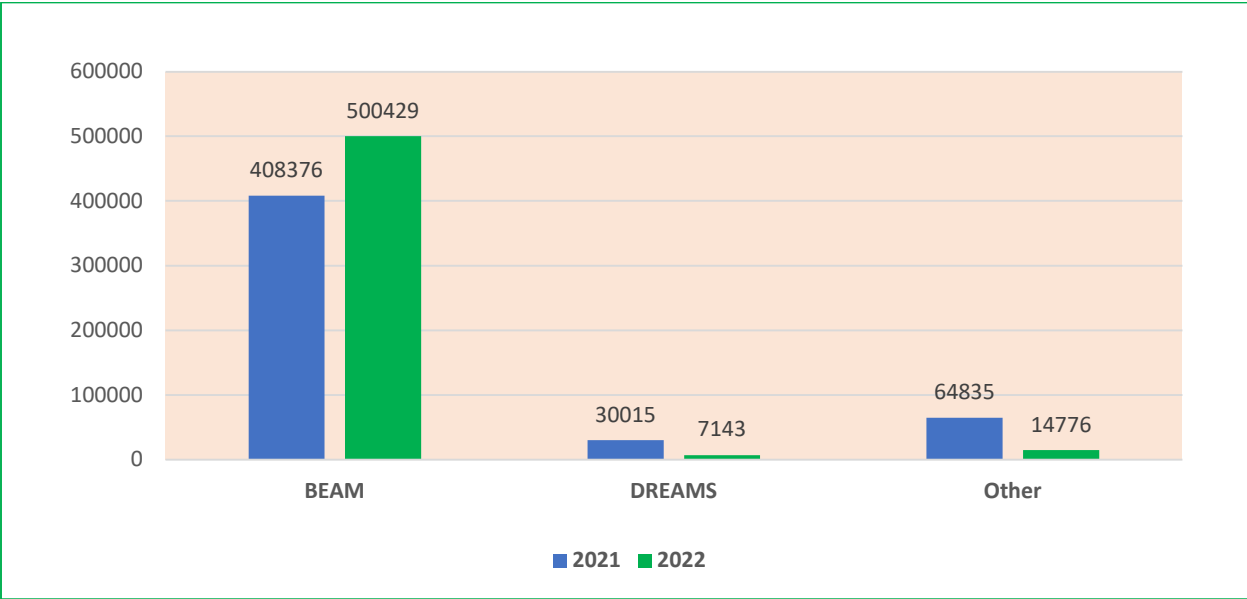
1.12 Orphans and Vulnerable Children (OVC)

OVC targeted programmes that were implemented included including educational assistance, food and nutrition assisted medical treatment orders (AMTOs) as well as cash transfers.

1.12.1 Educational Support

As indicated below, the BEAM has continued to reach more vulnerable children compared to other safety net programmes. NAC contributed \$## to the BEAM in the year compared to \$ ## in 2021. Compared to 2021, BEAM supported more children while other programmes declined.

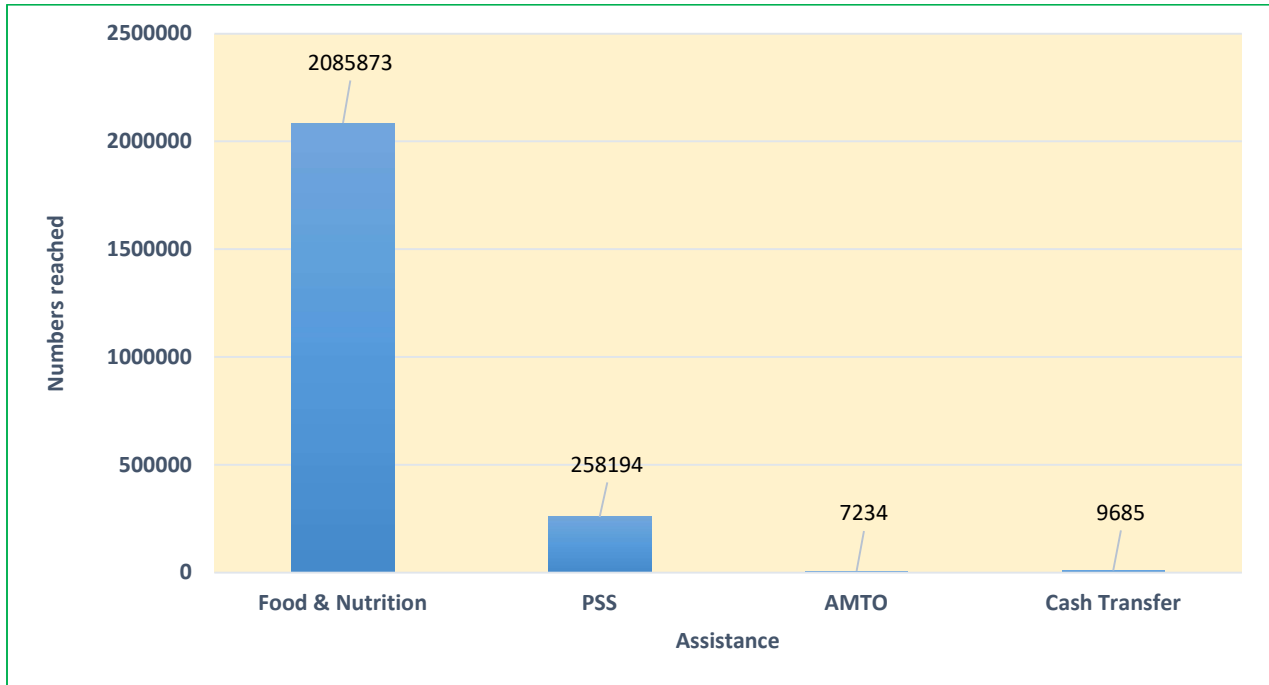
Figure 1620: Educational Support



Other OVC support

Apart from educational support, food and nutritional assistance reached out to more OVC (20,858,73) than all other forms of assistance combined. This was mostly through the Drought Relief program and targeted in-school feeding programs. Psychosocial support was second mostly through counselling services both in and out of school. The graph below compares assistance to OVC between 2021 and 2022.

Figure 1722: OVC Support

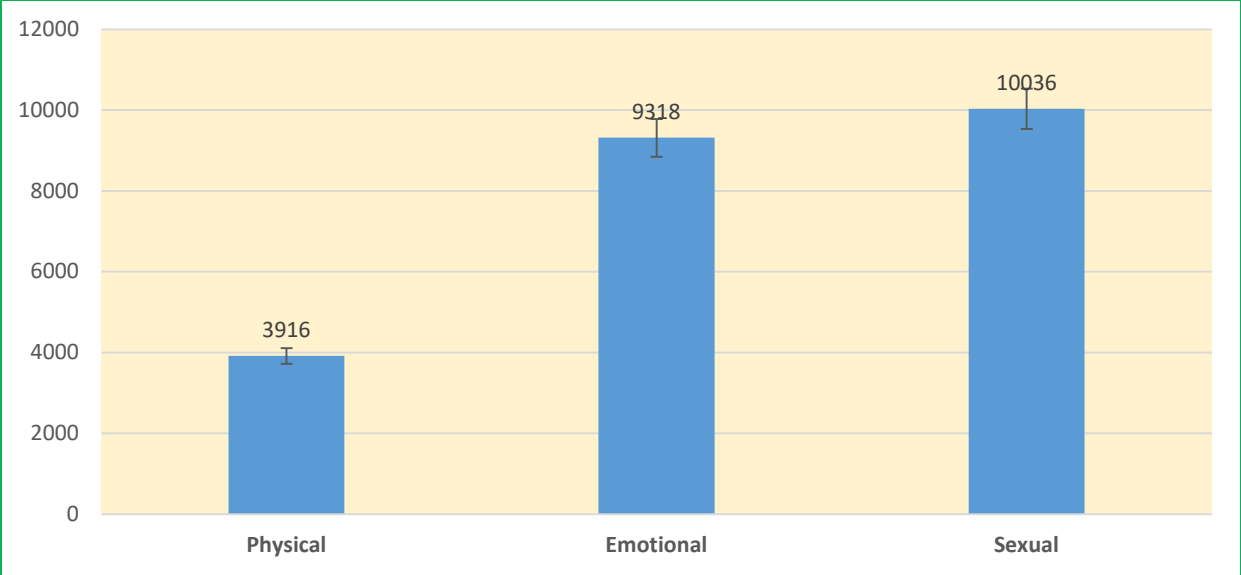


Cases of OVC Abuse

Cases of child abuse cases remained high, further exposing children to harm and to HIV infection.

The graph below shows child abuse cases by type in 2022:

Figure 1824: Cases of OVC Abuse



4.0 Programme Management and Coordination

Programme management and coordination presented below were implemented within the broad areas of advocacy, communications, gender, coordination, monitoring and evaluation.

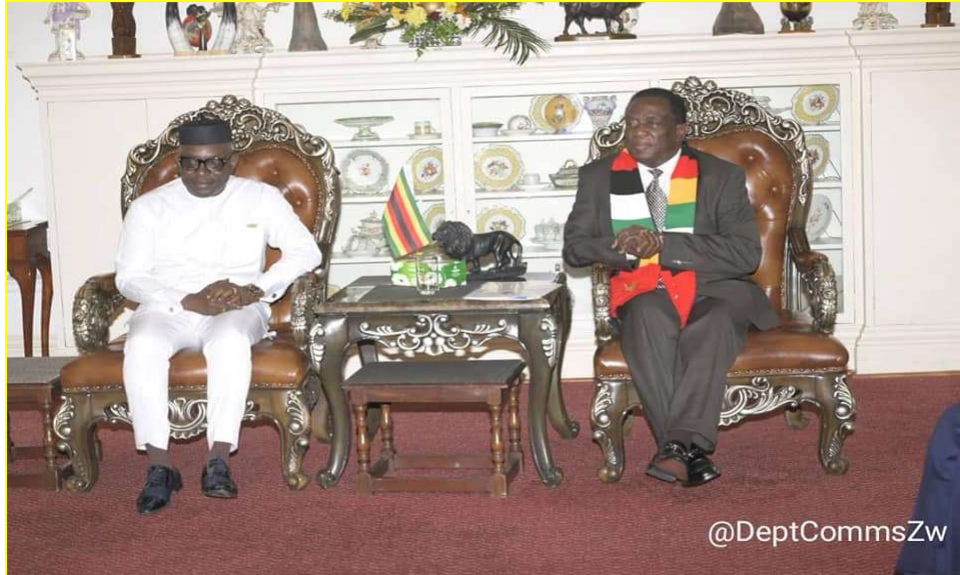
1.13 Advocacy

Zimbabwe ICASA 2023 Hosting Preparations

Zimbabwe's bid submission to host ICASA 2023, which was coordinated by the National AIDS Council, was successful. The country received SAA and ICASA delegations to assess capacity to host the conference. During the visit, the delegation held meetings with various stakeholders including the President.



Zimbabwe ICASA 2023 Hosting Signing Ceremony, which was witnessed by His Excellency the President of Zimbabwe, Dr. ED Mnangagwa



ICASA Official Mr Luc Biodea meeting H.E President of Zimbabwe, E.D. Mnangagwa

Free to Shine Campaign Awareness Launch

The First Lady of Zimbabwe Amai Auxillia Mnangagwa, with support from OWAFIAD, UNAIDS and NAC conducted a Free To Shine Campaign awareness meeting at Hozheri Clinic in Midlands Province, at which HIV prevention and treatment services were offered to the public. The campaign mainly focused on retention of lactating mothers on treatment. More than 150 HIV positives lactating mothers were provided with nutritional packs.



Some of the beneficiaries at the Free To Shine Campaign Awareness Launch

National World AIDS Commemoration

Mashonaland East province hosted the commemoration of the national World AIDS Day on the 1st of December at Rudhaka Stadium in Marondera. The event was officiated by the Minister of State for Devolution and Provincial Affairs, Hon. Apollonia Munzverengwi on behalf of the Vice President of Zimbabwe who is also the Minister of Health and Child Care Dr C Chiwenga.

The commemoration was held under the theme is “EQUALIZE” which calls everyone to act on addressing inequalities that hold back progress in ending HIV/AIDS. The theme was localized to EQUALIZE- AEIOU, with A-E-I-O-U standing for:

A-Access

E-Empowerment

I-Inclusion

O-Opportunities

U-Uphold Human Right



Part of the people attending the WAD commemoration



Members of the white garment apostolic church attending WAD commemoration



Leaving no one behind - Members of Apostolic church accessing HIV services at WAD

Zimbabwe International Trade Fair

NAC participated and exhibited at the Zimbabwe International Trade Fair. In partnership with AHF, PSH, KIDSCAN and SAYWHAT various services were provided on-site such as HIV testing, non-communicable diseases screening, COVID vaccination, cancer awareness and information.

International AIDS Conference Exhibition

NAC exhibited at the International AIDS Conference held in Montreal, Canada Canada where Zimbabwe's achievements in responding to HIV were showcased.

Provincial Agricultural Shows Exhibition

The organization exhibited at seven provincial Agricultural Shows displaying the progress in the response to HIV and providing prevention and treatment services to the public. NAC scooped first prize awards at Midlands and Manicaland agricultural shows.

Advocacy Policy Meetings

NAC coordinated and conducted three meetings with parliamentarians from the Portfolio Committee on Health and Child Care and Senate Thematic Committee on HIV and AIDS. The meetings were conducted to review and support policies in the following areas

1. Removal of duty and taxes for condom importation
2. Access to health services by key populations
3. Demand generation in TB programme

Webinars

Various webinars were facilitated to bring public attention to several topical issues including condom use among youths, role of the church in enabling access to HIV, AIDS and COVID-19 services, drug abuse, gender-based violence among others. Each webinar attracted at least 15,000 viewers.

1.14 Communications

Media Awards

A NAC 2021 media awards ceremony to honor journalists who reported consistently and accurately on HIV and AIDS issues was held within the World AIDS Day 2022 Commemoration programme. Winning journalists from the print, electronic and online media walked away with cash prizes.



From left: Dr Appolonia Munzverengwi, 1st Prize Electronic Media winner Garikai Fadzi and Dr Munyaradzi Dhobbie during the awards ceremony held within the World AIDS Day Commemorations

Other Media Activities

Three tours were conducted to Manicaland, Harare, Mashonaland East and Mashonaland Central provinces to give journalists an appreciation of HIV interventions on the ground and to increase reportage. Main programmes targeted during the tours included adolescent girls and young women, key populations, treatment adherence, GBV and others. From the tours, 112 news stories were published.

Three meetings with news editors, sports and health reporters were held during which the media personnel were updated on latest development in the response. Over 85 people attended these meetings.

Radio and TV Programmes

Over 109 radio and 18 television programmes were aired focusing on HIV and Cancer, TB, COVID-19, HIV and mental Health, key populations, GBV and HIV, and treatment, among others.

Resource persons were drawn from NAC, experts in various health issues, people living with HIV and implementing partners.

Thirty-eight NAC sponsored articles were placed in various local newspapers.



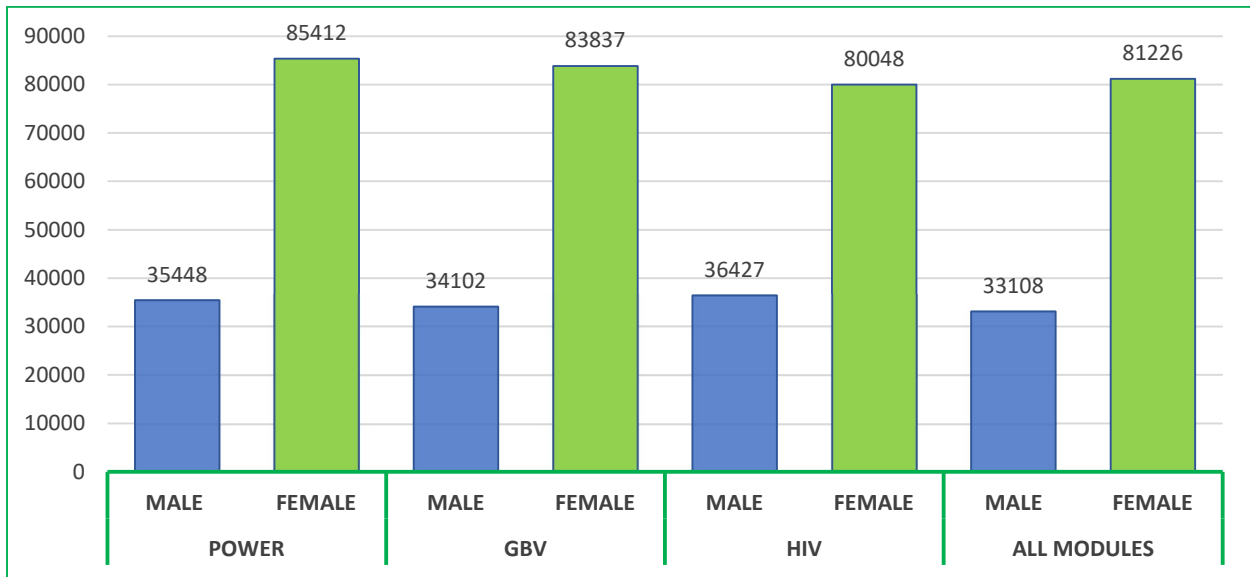
Left: NAC CEO Dr Bernard Madzima being interviewed for a radio programme in Bulawayo

1.15 Gender

Through the SASA model, more women than males as shown below, went through the different modules. All four modules reached a total of 81,226 women and 33,108 men. The number of women who completed all the modules declined by 4.9% while that of men declined by 7%.

With this model NAC and partners seek to respond to prevailing gender inequalities, through addressing interlinkages between cultural values, norms, GBV and HIV. Thirty-seven (37) District AIDS Coordinators and focal persons from organisations that implement SASA! were trained on implementing the model through financial support from NAC and UN Women.

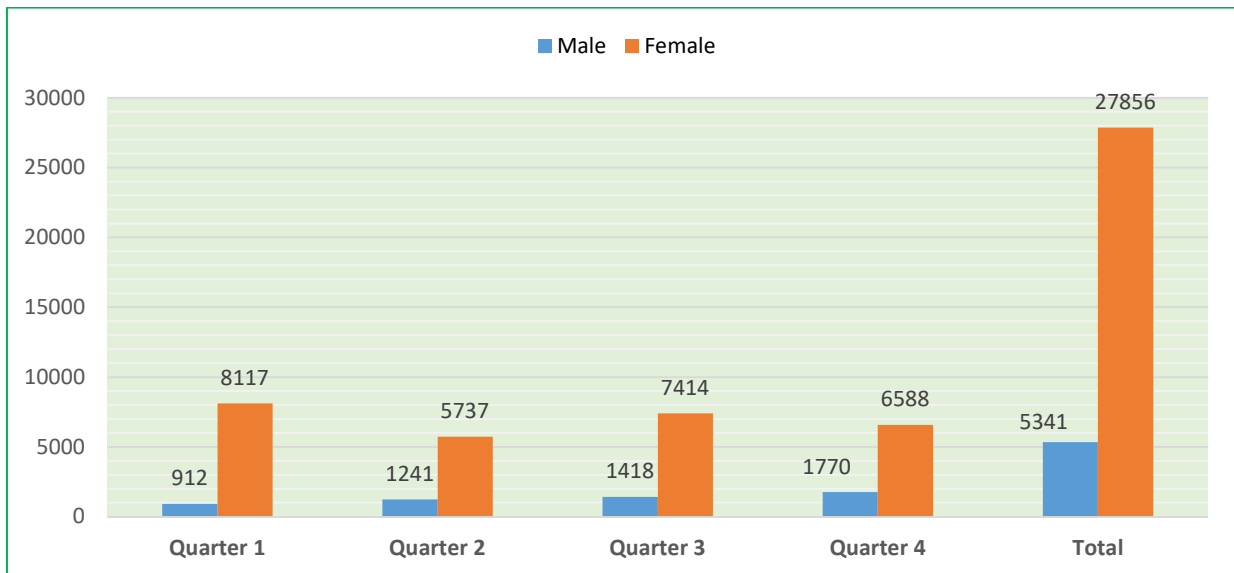
Figure 1925: Number of people who completed all the SASA Modules



Gender Based Violence

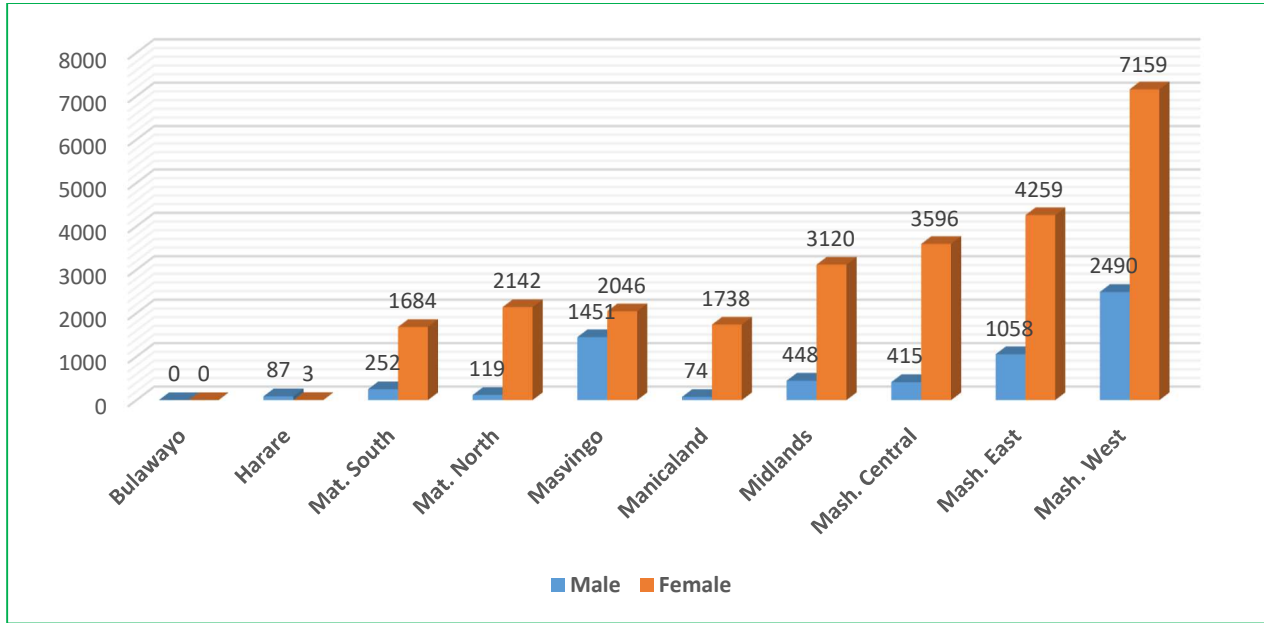
As illustrated below, cases of gender based violence against women and girls remained high across all the quarters. However, there was also a gradual increase in the number of cases against men and boys throughout the year, which is an indication that men and boys are increasingly becoming victims of gender based violence. A total of 27,856 women and 5,341 men experienced gender based violence in the year.

Figure 2026: Gender Based Violence cases by quarter



Mashonaland West, Mashonaland Central and Mashonaland East Provinces in a descending order had the highest number of gender-based violence cases reported while zero cases were recorded in Bulawayo province.

Figure 2127: Gender Based Violence cases by Province

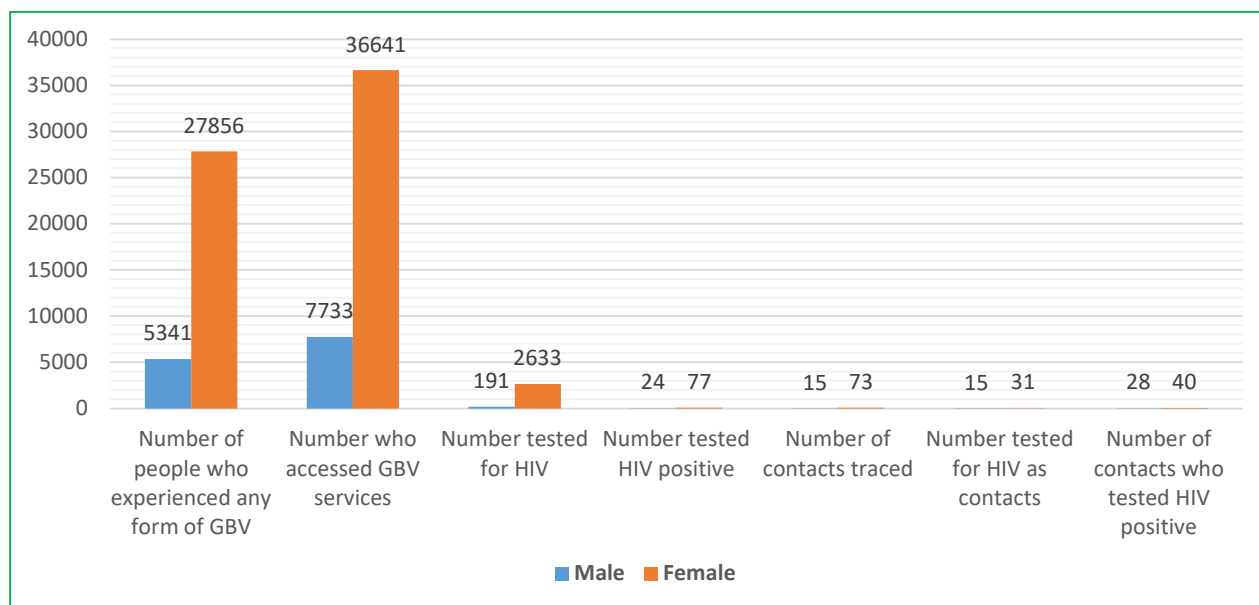


In an effort to curb gender-based violence, various provinces embarked on community dialogues to identify and address drivers of gender conflict.



Gender Based Violence dialogue session in Mashonaland Central Province

Figure 2229: Gender Based Violence cascades



A total of 27,856 women and 5,341 men experienced gender-based violence. Of the 2,633 women who were tested for HIV the positivity was 3% while 191 men were tested and had a positivity of 12.6%.

1.15.1 Gender Assessment of the National HIV Response

The report on the gender assessment of the national HIV response was finalized. The Gender Assessment underscores the need for integration of HIV, SRHR, GBV, cervical cancer, mental health services within Universal Health Coverage national plans and sectoral policies. Evidence has shown that integration has the potential to bring about significant benefits for improved access to services and protection from impoverishment arising from ill health for both individuals (women and girls, men and boys, key populations) and households

1.15.2 International Women’s Day

Zimbabwe joined the rest of the world on the 8th of March 2022 in commemorating the International Day for Women, reflecting on challenges being faced by women and the progress being made in the advancement of women in pursuit of gender equality. The international theme for the day was, “Gender Equality Today for a Sustainable Tomorrow”, which was localised to “Gender mainstreaming and women empowerment in climate change and disaster risk management”. NAC exhibited at the commemorative event, provided information on HIV and SRH issues, and supported with t-shirts.



Members of the public visiting the NAC Stand at the International Women's Day

1.16 Male Engagement

NAC supported the Male Engagement conferences spearheaded by the First Lady of Zimbabwe Dr. Auxillia Mnangagwa across various provinces. The Conferences sought to highlight issues affecting men, identify causes of Gender Based Violence, issues causing gender imbalances and proffer solutions and inspire and equip men with knowledge and skills to face household and health challenges. The First Lady promoted the One Stop Centres concept that deals with gender-based violence, free men's health centres and mental health centres.

Through support from UNAIDS NAC spearheaded the development of a Male Engagement Strategy on HIV, SRHR and Gender (GBV). The Strategy outlines key interventions for partners in the HIV response, SRHR and GBV to consider and mainstream male engagement and involvement within their programming and to ensure that men do not remain the blind spot of the HIV SRHR and GBV responses



UNAIDS Country Director Ms. Sophia Mukasa-Monico giving Remarks at the validation meeting



Members of the public visiting the NAC Stand at a Male Engagement Conference

1.16.1 2gether4SRHR Regional Symposium

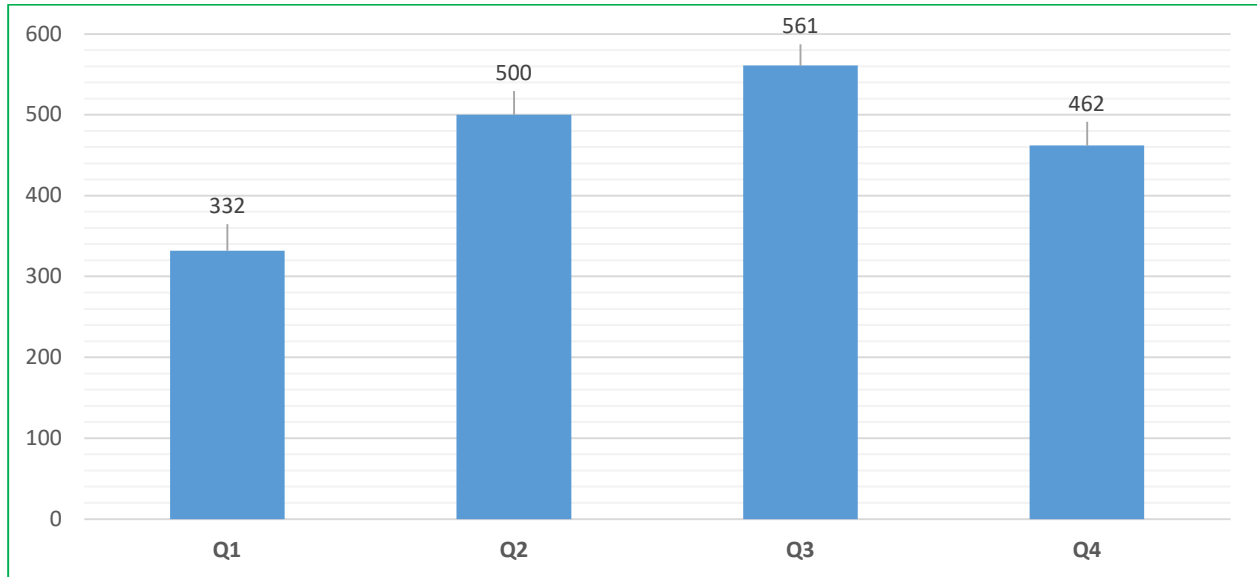
NAC participated at the regional symposium for the 2gether4SRHR which was held at the Victoria Falls and showcased the Male Engagement Strategy for HIV, SRHR and GBV. The meeting was organised through a consortium of UNAIDS, UNICEF, UNFPA and WHO Regional offices and brought together technical representatives from the 23 countries of East and Southern Africa to take stock of models and approaches to strengthen SRHR outcomes, to exchange knowledge gained and to document lessons learnt for future efforts to build upon to improve the SRHR of all people.

1.17 Management and Coordination

1.17.1 Coordination

As a key part of coordinating the multi-sectoral response, NAC facilitated coordination meetings at ward, district, provincial and national levels. The following graph summarises coordination meetings held .

Figure 2339: Coordination meetings



All provinces conducted stakeholder and coordination meetings . However, less meetings were held during the first quarter due to late budget approval. The situation improved in the second and third quarters. The fourth quarter was characterised by a short implementation period as most organisations closed for the annual shutdown,

Management Meeting

Four NAC management meetings were held to review quarterly progress in the implementation of programmes. The third and fourth quarters meetings were also used as a platform to discuss the 2023 work plans.

Monitoring and Evaluation

Global AIDS Monitoring Report (GAM)

NAC led the compilation of the Global AIDS Monitoring Report for 2021 with support from UNAIDS and MOHCC. The report gives picture of the progress made towards achieving the fast-track targets. Key indicators pointed that the country is on track to reach the 95-95-95 targets.

Generation of national and sub-national HIV estimates

NAC and MOHCC with support from UNAIDS generated HIV Estimates for 2021 which were approved and published. The estimates are the measure of impact and were the main source for the denominators for GAM indicators. The district estimates were generated using the NAOMI model. The HIV estimates incorporated the estimates for progress towards 95-95-95 targets.

DHIS2 trainings

University of Oslo trained NAC staff on DHIS2 customization in preparation for the roll-out of the programme targeting HIV prevention models. Community cadres were also trained on DHIS2 by the district teams.

ZNASP IV Mid Term Review

The ZNASP IV Mid Term Review (MTR) was conducted to take stock of progress in the implementation of the national strategic plan (what is working and not working) including the country's alignment to changes in the global response among other issues.

Research

The following studies were completed:

- a) HIV Size Estimates in Prisons
- b) Qualitative Evaluation of the CATCFs project in Makoni district

HIV Research Symposium

NAC in collaboration with UZ, BRTI, MoHCC and CeSHHAR convened the annual HIV Research Symposium where over 35 papers were presented including posters. The process included a call for abstracts, their selection, programme development and eventual main event. Dr. John Mangwiro, Deputy Minister of Health and Child Care was the Guest of Honor. The Symposium for the first time included a community evidence day, to promote generation and use of evidence by communities.

Publications

The following studies were published:

- Impact of COVID on PLHIV study was published in the African Journal of HIV and AIDS, in the African Journal of Medicine.
- A Best practices collection of the NAC-UNICEF partnership on integrating emergencies within the HIV response was published.

4.0 Human resources

4.1.1 Performance Management

The Council adopted the new performance management template on which all workplans and reviews were based. Subsequently, the Council managed to comply with the performance appraisal requirements under the new framework as well as the requirements for the evaluation of the Chief Executive Officer.

1.17.2 Training and Capacity Development

All staff were trained on the new performance appraisal framework while induction trainings were conducted for new employees. Other capacity development initiatives included ISALS training for economic empowerment in Global Fund districts and DHIS II training for NAC, partners and community volunteers.

1.17.3 Employee Health, Safety and Wellness

Health & Safety

NAC continued to implement COVID-19 protocols as guided by Government policy.

Wellness

The implementation of the wellness programmes continued at all levels, covering various aspects including physical, emotional, financial and others. In addition to participating in various sport and physical exercises, employees at various levels were equipped with knowledge and skills in income generating, financial management and entrepreneurship

Industrial Relations

Platforms for engagement between management and employees continued to be functional during the year. Workers Committee, Works Council and Management and Trade Union meetings were held focusing on productivity and conditions of service issues.

1.17.4 Corporate Governance

Board Committees

Corporate governance platforms were functional during the year. The structure of the Board Committees was adjusted by moving the risk management aspect from the Audit and Risk Management Committee (now the Audit Committee) to the Operations, Advocacy and Strategic Information Committee (Now the Operations, Advocacy, Strategic Information and Risk Management Committee) in line with good Corporate Governance principles.

5.0 Finance and Administration

1.18 Year to date (January to December 2022)

A total amount of Z\$18bn was invested in the national response to HIV and AIDS against a budget Of Z\$21.7bn, in the same period in 2021 the Council used Z\$2.4bn.

NATF Funded Investments

In 2022 NATF contributed Z\$15.2bn against a budget of Z\$16.1bn towards the response. In 2021 NATF support amounted to Z\$2.1bn. The diagram below shows programs that were supported by NATF during the period under review (January to December 2022).

Figure 2433: NATF Investment per Delivery Area

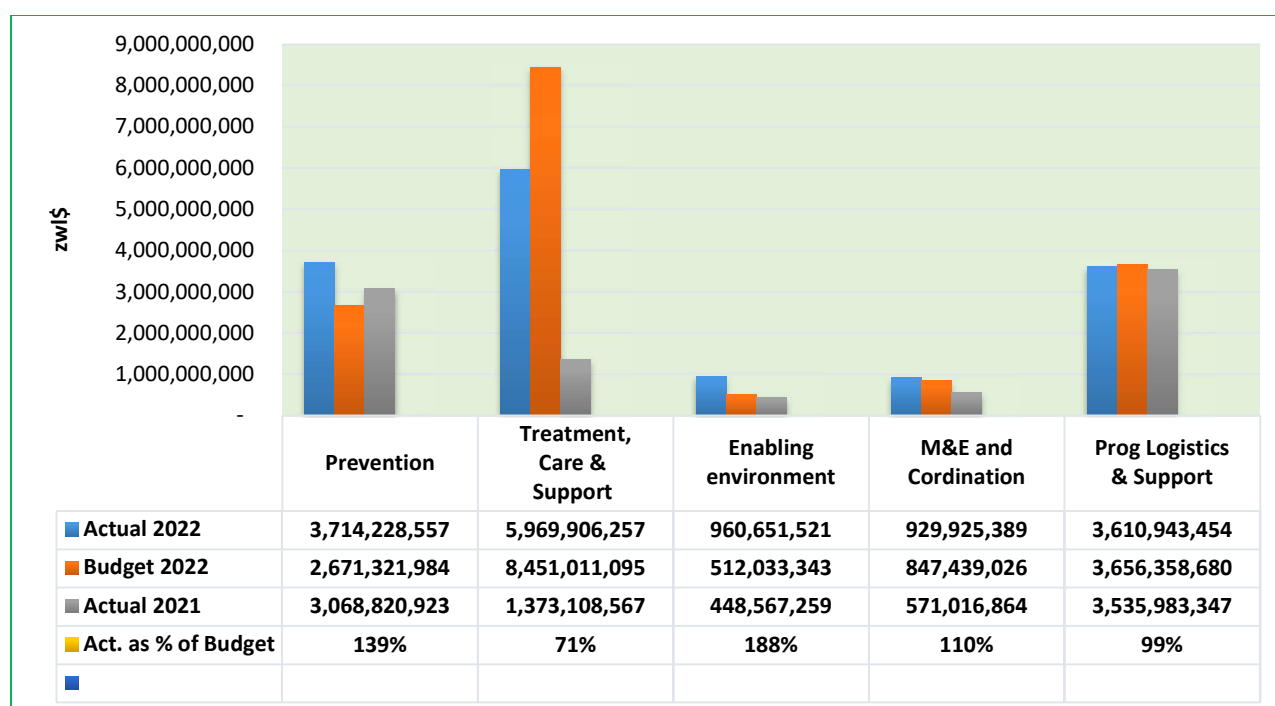


Fig 33: Expenditure according to service delivery area: January to December 2022

1.19 Global Fund Grant

An investment of Z\$2.8bn was made by Global Fund towards the response against a pledge of Z\$5.5bn for the year 2022. These funds were channeled towards implementation of AGYW, KAP/Transgender and TB programs. In 2021 Global Fund support amounted to Z\$284m

1.20 Administration

Non-Movable Assets

Properties and Capital Projects

The renovation of Harare, Mashonaland Central and Manicaland offices was still awaiting approvals of the amended works and will start in 2023. Bidders' meetings in Mashonaland East, Mashonaland West and Masvingo provinces reached deadlocks over the currency of payment.

1.20.1 ICT Equipment

NAC received 4,073 Galaxy Tablets meant for the DHIS2 community initiative and they were distributed to all provinces.



Samsung Galaxy Tab Active 3 Tablets

Transport

A total 26 out of the 55 old vehicles stationed at different NAC offices in 10 provinces were off the road during the period under review.

Procurement

Table 510: ARVs and Commodities Receipts

Description of item	Quantity	Amount used	Remarks
Chemistry Reagents	various	US\$101,587.79	Order completed
Determine HIV 1/2 70/2890NC Rapid Test Kits	1525 units	US\$217,304.88	Completed order
Tenolam D 300/300/50	684 860 units	US\$3,622,909.40	
Cyflow CD4 Machines	40	US\$897,793.60	Order completed
Cotrimoxazole 480mg tablets	183 887 units	US\$915,756.36	
Lamiv\Zidov 150/300mg Tabs	150 000 units	US\$862,500.00	Order completed
Haematology Reagents	various	US\$177,806.67	
Single use sensor for Truescreen cervical cancer screening devices	10 800 units	US\$235,224.00	Order completed
Tenofovir/Lamivudine 300/300mg tablets	3 000 units	US\$102,000.00	Order completed
Laboratory kits	100 Tests	69,129.58	Order completed
zidovudine	7 000 units	34,650.00	Order completed
Laboratory accessories kits		264,572.51	Order completed
ECheck	45	499,17.42	Order completed
Oraquick	160000	320,000	Order completed
Lab kits		130,391.73	Order completed
Lab kits		12, 824.80	Order completed
Lab kits		18 ,555.44	Order completed
Dolut/Emitric/Teno 50/200/50mg Ala	45140	238,790.60	
Ritonavir 25mg	6698	48,560.50	Order completed

Table 611: ART Medicines, Reagents, Test kits and Equipment.

Item Description	Amount \$USD	Status
Zidovudine 10mg/ml solution	34,650.00	Delivered in full
Oxygen concentrators	153,600.00	Delivered in full
Efavirenzi/Lamivudine/Tenofovir	110,000.00	Delivered in full
Bleomycin 15mg	21,850.00	Delivered in full
Supply and Delivery of 13 x additional Brand new Partec CD4 Machines – Sysmex	291,782.92	Delivery expected 1 st quarter 2023
Supply and delivery of	598,500.00	As at 31 December, the Council had submitted its recommendations to

4 200 x Determine HIV Test Kits - Medsure		PRAZ for SPOC review and was waiting for SPOC outcome.
Supply and delivery of Mindray chemistry analyser reagents – Medrite Healthcare.	228,846.20	Fully delivered.
Supply and delivery of Humastar chemistry analyser reagents – Diagnostic Laboratory	268,649.95	Fully delivered
Supply and delivery of Partec consumables (sheath fluid)	9,129.38	Fully delivered
Supply and delivery of alinity and architect testing reagents to National Blood Services Zimbabwe (NBSZ) - Abbott	161,771.93	Fully delivered
Supply and delivery of immunohistochemistry antibodies – Medsure	162,516.72	Delivery expected 1 st quarter 2023
Annual Service of 49 x Partec CD4 machines – Southern Skies	412,822.96	As at 31 December 2022, 14 machines had been serviced and there is an outstanding 26 machines to be serviced.
Annual Service of Humastar Chemistry Analyser machines (40) – Diagnostic Laboratory	TBA	As at 30 December, it was pending evaluation.
Annual Service of Mindray Chemistry Analyser machines (5 machines) – Medrite Healthcare	TBA	As at 31 December 2022, the procurement requirement was pending evaluation.
Annual Service Contract for Haematology machines - FIMA	95,145.64	As at 31 December 2022, the contractor had completed the 1 st cycle and second cycle expected in the 1 st quarter 2023.

6.0 Internal Audit

1.21 Audit Engagement

Eighty-five (85) audit assignments were carried out as shown in **Table: 1** below.

Table 712: Audit Assignments

Audit Area	Planned	Actual	Variance
Head Office	6	6	-
Provincial Offices	10	10	-
District Offices -DAACs	15	15	-
Global Fund – S2S districts	12	13	1
Global Fund- SSRs	9	9	-
Audit follow-ups: Head Office, Provinces and Districts	15	19	4
ART Programme (Value for Money)	8	10	2
Social Contracting – Capacity Assessments	0	3	3
Special Assignments/ Audit Investigations	4	0	(4)
Totals	79	85	6

Table 813: Geographical spreading of the audit assignments and capacity assessments conducted.

Audit Area	Head Office Depts.	Provincial offices (PAACs)	DAAC	GF-S2S districts	Audit follow-ups	Global Fund	ART program	Capacity Assessments	Totals
Departments	6				4				
Bulawayo		1			1				
Harare		1			4			1	
Matabeleland North		1	3	1	2				
Matabeleland South		1	4	1	1			2	
Mashonaland Central		1	1	1			5		
Mashonaland East		1	2	3	2				
Mashonaland West		1		1	3		5		
Manicaland		1	1	1					
Masvingo		1	2		1				
Midlands		1	2	5	1				
Nation wide						9			
Totals	6	10	15	13	19	9	10	3	85

1.22 Value for Money Audit

Each year two provinces are planned for the VFM (ART program) audit to track the ART medicines, reagents and other related commodities procured by NAC and distributed through the public health institutions from the 50% of NART resources received. In 2022, the VFM audit was conducted in Mashonaland Central and Mashonaland West provinces.

1.22.1 Mashonaland Central Province

The hospitals covered were Bindura Provincial, Chimhanda District, Mvurwi Rural and Howard Mission hospitals, and Tsungubvi Clinic.

1.22.2 Mashonaland West Province

Chinhoyi provincial, Makonde Christian, Karoi and Kariba District hospitals, and Nyamhunga and Chinhoyi Council Clinics were audited in Mashonaland West province.

Operational Challenges and Recommendations

Inflation was the major challenge face in 2022 as it eroded the real value of funds leaving them insufficient for successful implementation of the response.