



HIV INTERVENTIONS

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1

NAC PROCURES NEW ARV DRUGS



NAC, PARTNERS SCOOP PRIZE AT ZITF 2011

2



3



ZIMBABWE LAUNCHES HIV RESEARCH PRIORITIES



MANDATE

To provide for measures to combat the spread of the Human Immuno Virus (HIV) and the management, co-ordination and implementation of programmes that reduce the impact of HIV and AIDS.

(The National AIDS Council Act
Chapter 15:14 of 2000)

VISION

No HIV transmission.

Universal access to HIV and AIDS services.

MISSION

To lead, co-ordinate and facilitate, with a motivated team, the national multi-sectoral response to HIV and AIDS in Zimbabwe

CORE VALUES

- Transparency
- Integrity
- Accountability,
- Innovation
- Inclusiveness
- Teamwork



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MEDELINA DUBE - EDITOR

DEAR Readers,

Welcome to the 2011 second issue of your informative bulletin "HIV Interventions".

I hope and trust that you enjoyed the inaugural edition of the rebranded **HIV Interventions** that appeared in April.

A lot has happened in the national response since our last issue. Major outputs recorded during the period include the finalization of the Zimbabwe National HIV and AIDS Strategic Plan 2, the launch of the HIV and AIDS Research Priorities, the review of HIV and AIDS major policies with a view to harmonizing them and the procurement of ART drugs and commodities.

Both the ZNASP and the Research Priorities are now available on the NAC website: www.nac.org.zw. We also handed over US \$270 000 towards the Basic Education Assistance Module which is expected to cater for school fees for 10 000 disadvantaged children.

To enhance our communication outlets, we have revamped the NAC website www.nac.org.zw, which now looks more appealing and easy to navigate. I hope that the new website together with this bulletin will endear themselves to you as reliable sources of information on the national response.

Please read through for details about these and other stories. Feel free to send your feedback and contributions to secretariat@nac.org.zw

Medelina Dube
Editor



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- 2- NAC staff display the bronze medal and certificate won by NAC and its partners at ZITF 2011. (see story on page 29)
- 3- Members of the public throng the NAC stand at ZITF. (see story on page 29)

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Zim adopts new political declaration on AIDS at UN High Level Meeting



Part of the Zimbabwean Delegation to the High Level Meeting on AIDS from left: Dr Owen Mugurungi (partly obscured), Dr Tapuwa Magure, Dr Gibson Mhlanga, Mr Raymond Yekeye, Ms Cathrine Chitiyo and the Zimbabwe Ambassador to the UN Mr Chitsaka Chipaziwa following proceedings in a plenary session.

By **Orirando Manwere**

FROM 8 to 10 June 2011, a multi-sectoral Zimbabwean delegation led by the Minister of Health and Child Welfare, Dr Henry Madzorera, joined over 3 000 delegates in New York City at the United Nations (UN) General Assembly High Level Meeting on AIDS to review progress, share lessons learned and chart the future course of the global AIDS response.

The delegation comprised officials from the National AIDS Council, Ministry of Health and Child Welfare, civil society, youth and people living with HIV.

The gathering of Heads of State and other leaders from government, the scientific community, civil society and the private sector saw delegates adopting a new political declaration on AIDS.

Ten years ago, at a landmark UN General Assembly Special Session on AIDS, world leaders declared that AIDS was a "global emergency" and called for an "urgent, coordinated and sustained response" to the epidemic.

In 2006, world leaders signed the Political Declaration where UN Member States committed to moving towards universal access to HIV prevention, treatment, care

and support by 2015.

On the final day of the 2011 High Level Meeting on AIDS, UN Member States, including Zimbabwe, adopted a new Political Declaration which will guide the global response to HIV over the next five years.

The declaration, entitled Political Declaration on HIV and AIDS: Intensifying our efforts to eliminate HIV and AIDS, sets forth bold new strategies and calls on member states to redouble and synchronize efforts to achieve by 2015, Universal access, with a view to attaining Millennium Development Goal number 6.

The Declaration is also commendable for recognising key populations at higher risk of HIV infection- men having sex with men, people who inject drugs and sex workers.

The following targets were adopted:

- Halve sexual transmission of HIV by 2015
- Reduce transmission of HIV among people who inject drugs by 50% by 2015
- Ensure that no children are born with HIV by 2015 and increase access to anti-retroviral therapy to get 15 million people on life saving

treatment by 2015

- Reduce TB deaths in people living with HIV by 50% by 2015

- The Declaration also calls on Member States to continue to redouble efforts to achieve universal access by 2015

- Member States pledged to close the global resources gap for AIDS and work towards increasing funding to between US \$22 billion and US \$24 billion per year by 2015 and recognised that investment in AIDS response is a shared responsibility

- The World reaffirmed that preventing HIV must be the cornerstone of the AIDS response

- The pledge to eliminate gender inequality, gender-based abuse and violence and to empower women and girls must be fulfilled without delay

NB: the full political declaration can be downloaded on the NAC website www.nac.org.zw



Zim adopts new political declaration on AIDS at UN High Level Meeting



Part of the Zimbabwean Delegation to the High Level Meeting on AIDS from left: Dr Owen Mugurungi (partly obscured), Dr Tapuwa Magure, Dr Gibson Mhlanga, Mr Raymond Yekeye, Ms Cathrine Chitiyo and the Zimbabwe Ambassador to the UN Mr Chitsaka Chipaziwa following proceedings in a plenary session.

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CEO's 2011 second quarter summary report

FOLLOWING the finalization of the Zimbabwe National HIV and AIDS Strategic Plan II for the years 2011 to 2015 in the first quarter, the momentum gathered in the implementation of programmes in the national response during the first quarter was carried over into the second quarter.

Of most significance in the national response impact, was the sustained reduction in the positivity rate which is in line with the continuous decline in the national HIV and AIDS prevalence rate that has been experienced over the years.

The planned strategic withdrawal of key partners such as the Expanded Support Programme, the Clinton Foundation and the Medicines Sans Frontiers from the mainstream HIV and AIDS national response framework is an issue of major concern.

This implies that Government and other stakeholders have to brace themselves for the total takeover of all the clients who have been benefiting from programmes run by these partners.

During the quarter under review, the national response outcomes presented both positive achievements across all the various thematic areas and at the same time new challenges were also experienced.

Under Prevention during the second quarter, the declining trend in the positivity rate observed in the first quarter continued in the second quarter. The positivity rate declined from 12 percent during the second quarter to 11.8 percent. Roll out of the More Efficacious Regimens, continued this quarter though the performance of this indicator is still low.

As observed in the last quarter, there were no notable successes in the STI control programmes with new cases on average remaining the same or even increasing in most provinces except for Mashonaland East where they have significantly declined.

On the other hand, the increase in the number of repeat cases observed in the first quarter remained almost the same and this could be attributed the fact that *Nesseria Gonorrhoea* is now resisting

treatment. This calls for the need for concerted efforts to strengthen STI prevention programmes.

As opposed to the trend observed last quarter where there was a reverse output in performance, youth programmes across the board, from in school youths at primary, secondary and tertiary levels as well as out of school remained constant.

There were notable increases in the

number of teachers trained in life-skills based HIV and AIDS education from eight percent to 27%.

The increase was mostly due to the support from other partners including school development associations and civil society organizations. Most importantly, this is an indication that the Ministry of Education, Arts, Sport and Culture is prioritizing youth programmes.

Significant progress was made in the implementation of the male circumcision programme. The number of males circumcised more than doubled from 3131 to 8319. Despite this increase, the roll out of the male circumcision (MC) programme is still relatively low.

No cases of MC were reported in Midlands province and this calls for the opening up of sites offering the service in the province or the intensification of outreach programmes.

During second quarter, the number of sites offering MC services remained stagnant as was the case in the first quarter. The opening of new sites will probably result in the scaling up of the MC programme at the national level.

In comparison to the last quarter, the number of girls below 15 years who reported sexual abuse this quarter declined, whilst there was an increase among the other age groups. Of the reported cases of sexual abuse, a total of 28 women received Post Exposure Prophylaxis. Cultural norms and practices as well as limited awareness continue to hinder



**DR TAPUWA MAGURE, CHIEF EXECUTIVE OFFICER,
NATIONAL AIDS COUNCIL**

women and girls from reporting sexual violence. The low coverage could also be attributed to non-availability of PEP services for survivors of rape in most districts.

With regards HIV and AIDS workplace programmes, the number of workers reached with services increased from 22,357 to 36,199. This was also accompanied by an increase in the number of workplaces with HIV and AIDS policies to 250 out of the 500 workplaces at national level.

On the treatment front, the number of clients on Anti-retroviral Therapy (ART) increased from 369,934 in the first quarter to 398,180 (362,179 adults & 36,001 Children) in the quarter under review. The National AIDS Council continued to support the OI/ART outreach programmes across the country which have contributed to the rising numbers of clients receiving treatment services.

There was an increase in school related assistance from 5.2% in the first quarter to 18.9% in second quarter against a target of 35%. This can be attributed to the increased number of schools completing the applications for Basic Education Assistance Module (BEAM). BEAM has so far processed payments for 269 887 (Primary-216 240, Secondary-

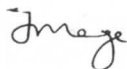
53 647) pupils against a target of 620 000. In addition to BEAM, the National AIDS Trust Fund (NATF) has also supported 7 500 (male-3780, female-3720) OVC. In preparation for the subsequent implementation of the new Zimbabwe National HIV and AIDS Strategic Plan II, the attendant national M&E plan is still being worked on and will be finalized in due course.

The quarter under review witnessed the national launch of the Research Priorities where findings from three of the four commissioned studies were presented. Results from the research studies will go a long way in enhancing NAC and its stakeholders make evidence based programming and planning decisions. Work on the second call for proposals is now in progress with an estimated \$115,000.00 being set aside to fund the researches.

It is hoped that better quality researches will be produced during the second research calls.

On the international scene, a Country level delegation led by Dr Henry Madzorera, the Minister of Health and Child Welfare (pictured) participated at the High Level UN meeting where lessons and experiences on national responses were shared and a new political declaration on AIDS adopted by member states.

I thank You



Dr. Tapuwa Magure
Chief Executive Officer,
National AIDS Council.



The Minister of Health and Child Welfare , Dr Henry Madzorera addressing the United Nations High Level Meeting on AIDS at the UN General Assembly in New York.



Members of the Zimbabwean delegation to the UN High Level Meeting on AIDS - from left: Dr Gibson Mhlanga, Zimbabwe Ambassador to the UN Mr Chitsaka Chipaziwa Mrs Cathrine Chitiyo, Dr Henry Madzorera (Minister of Health & Child Welfare & head of delegation), Dr Tapuwa Magure NAC CEO.



WORLD AIDS
CAMPAIGN 2010/2011

GET TESTED!

IT'S YOUR ENTRY TO HIV PREVENTION AND MANAGEMENT SERVICES

STOP AIDS KEEP THE PROMISE



Major boost for national ART roll out programme

..as NAC procures new ARV drugs, diagnostic equipment



NAC Board Chairperson, Rev Murombedzi Kuchera, hands over tenofovir drugs to the then Acting Minister of Health and Child Welfare, Dr Sydney Sekeramayi while Board member Mr David Mutambara and Labour Social Welfare Minister Hon Paurina Mpariwa look on.

By Orirando Manwere

THE National AIDS Council (NAC) recently procured an inaugural consignment of the new Tenofovir anti-retroviral drugs, 16 state of the art CD4 count machines and various other diagnostic equipment all worth over \$6million

The drugs and other diagnostic equipment were handed over to the Ministry of Health and Child Welfare (WHO) and the Zimbabwe Defence Forces.

Other commodities in the consignment comprised heamatology machines, syphilis test kits, CD4 reagents, chemistry analysers, viral load test kits, haematology test kits, and cotrimoxazole.

The introduction of Tenofovir follows a revision of national ART guidelines in line with the 2010 World Health Organisation guidelines which will see the new drug gradually replacing Stavudine which was causing side effects among people on ART.

Zimbabwe adopted the new WHO guidelines in 2010.

Since the adoption of the multiple currency regime in 2009, the NAC has spent nearly US\$16 million from the National AIDS Trust Fund, commonly known as the AIDS levy, towards the procurement of antiretroviral commodities.

Speaking at the official hand over ceremony of the commodities to the Ministry of Health and Child Welfare recently, NAC Board Chairperson Reverend Murombedzi Kuchera said NAC was committed to ensuring the achievement of universal access to HIV and AIDS services through prudent administration of the AIDS levy.

Rev Kuchera said it was encouraging that the AIDS levy was slowly becoming more robust and reliable following the erosion of the fund during the 2007-2008 hyperinflationary period.

“As a consequence of that inflationary period, the AIDS Levy - although very high in figurative terms, was virtually of no value and as such the National AIDS Council was unable to procure commodities in support of the health delivery system.

“The introduction of the multi-currency system and improvements in the economy

have enhanced the AIDS levy and this has enabled us to resume the procurement of various treatment commodities,” said Rev Kuchera.

He pointed out that apart from procuring the treatment commodities, NAC was also supporting health personnel involved in the ART outreach programme nationwide following the end of the Global Fund Round Five grant which provided allowances for the outreach teams.

In his acceptance speech, the then Acting Minister of Health and Child Welfare, Dr Sydney Sekeramayi commended NAC for abiding by its Statutory mandate to prudently and transparently administer the AIDS levy.

“I would like to commend the National AIDS Council for continuing to uphold the government policy to allocate 50% of the AIDS Levy inflows for ART support. Last year my Ministry received large quantities of ARV drugs, four high...

St Lukes Hospital embarks on pediatric goat milk project

Major boost *Continued from page 7*

throughput CD4 count machines, haematology analyzers and their reagents as well as HIV test kits and financial support for ART outreach.

"The Tenofovir drugs we are receiving today are a significant testimony that the AIDS Levy is reaching the people of Zimbabwe. This will hopefully engender public confidence in the National AIDS Council and how it administers the AIDS Levy, which has been a focus of some negative publicity in the past," said Dr Sekeramayi.

Dr Sekeramayi however noted that although the situation was improving, the country still had more people who are yet to access ARV drugs as the AIDS levy was not enough to cater for the increasing demand following the adoption of the 2010 World Health guidelines.

The new guidelines recommended that people be started on ART a CD4 threshold of 350, up from 200, while donor funding for HIV and AIDS programmes was declining due to the global economic recession.

An estimated 398 000 people are receiving anti-retroviral treatment, while 593 000 are still in need, up from 350 000 following the adoption of the new WHO guidelines.

Dr Sekeramayi said the Government was committed to achieving universal access and would continue mobilizing more resources for the HIV and AIDS response.

He also expressed hope that as the economy continued to improve, the AIDS levy inflows would be further boosted to support the response to the pandemic.



Part of the milk producing goats at St Lukes Hospital

By **Fortune Moyo**

ST LUKES Hospital in Lupane District in Matabeleland North, is one of the few hospitals in the country that have introduced homegrown and sustainable livelihood projects for the benefit of its patients.

The 250 bed hospital has a large piece of land where crops such as maize, wheat and vegetables are produced for the hospital.

The hospital is also running a goat milk project that produces nutritious milk for the malnourished children that are admitted at the hospital.

Speaking to journalists during a recent media tour organized by the National AIDS Council recently, the institution's administrator, Mr Thadeos Ndlovu said the goat project was introduced in 2006 by a pediatrician now based in Germany to mitigate the challenges that affect malnourished children.

"The goat project was introduced mainly for milk production to assist in the taking care of malnourished children at the hospital.

"We started off with 20 goats in 2006 and at one time they were 120. We had to sell other goats as the herd was dominated with males. "At the moment we have a total of 40 goats which produce between eight to 10 litres of milk daily," said Mr Ndlovu".

He said the hospital assisted an average of 11 beneficiaries every month and the project had been well received in the area.

"Most of our beneficiaries are orphaned and malnourished children and they usually respond very well to the milk within a few weeks. Villagers have also been inspired by the idea which they are replicating at their homes because it is very cheap to manage.

"They now appreciate that goat milk is very nutritious and it is the best for malnourished children," said Mr Ndlovu. He said the hospital had engaged the Department of Veterinary Services to offer technical assistance in order to enhance yields.

Mr Ndlovu said the hospital, with financial assistance from the pediatrician who formed the goat project, had already started a cattle project which had a total of 10 cows.

"We are planning to get a proper breed that adapts to the environment and we hope that the cattle will produce more milk for use at the hospital.

"A poultry project which will also benefit the hospital has since started with the construction of chicken runs", said Mr Ndlovu.



The river between - barrier to access to treatment ...as hospital appeals for bridge



So near and yet so far- drugs are readily available at Mbuma Mission Hospital but the Shangani river is a barrier during rainy seasons

By Pamela Shumba

MBUMA Mission Hospital in Nkayi District, despite being well staffed and stocked with adequate Anti-retroviral and Tuberculosis drugs, experiences seasonal high patient defaulter rates during the rainy season when the Shangani River floods.

This has prompted hospital authorities to make a clarion call to government to urgently construct a bridge on the Shangani River to ensure that hundreds of its patients on the other side of the river, can continuously access treatment which is readily available at the institution.

The hospital, which is located 60 kilometres north of Nkayi, has a catchment area of 9 000 people and 1 100 patients are on ART while 600 are on cotrimoxazole.

Speaking to journalists recently during a Matabeleland North Media tour that was organised by the National AIDS Council, the institution's superintendent, Dr Anneke Snoek said drug adherence was low during the rainy season because patients could not make it to the hospital when the Shangani River floods.

Dr Snoek said it was important for

patients to take their drugs consistently to avoid drug resistance.

She said during the last rainy season, the hospital recorded 49 defaulting patients, mainly due to the flooded river.

"Our ART programme is going on well with patients being diagnosed and getting treatment as soon as possible, but we have a challenge during the rainy season as patients who live across Shangani river default due to flooding.

Dr Snoek said that the hospital was in the process of decentralising the dispensation of ARVs to curb the problem.

"We decentralised our opportunistic infections (OI) clinic in May last year and we are in the process of decentralising the dispensation of ARVs this year.

"We are also training people to look after patients and mobilise the community to be responsible under the home based care programme," she said.

However, the ultimate solution lies in the construction of a bridge across the Shangani River. We are thus appealing to Government to seriously consider constructing a bridge. We hope your Media reports will help get the message to the authorities," said Dr Snoek.

She said the other challenge the hospital was

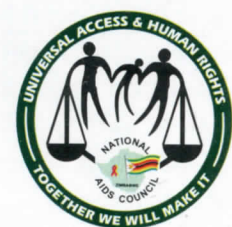
facing was the lack of hydroelectricity.

"The hospital has no hydro- electricity and we are relying on generators which are sometimes down.

"One of our two generators is currently being repaired and the one that is working has to serve half of the hospital in the morning and the other half the afternoon which affects operations at some departments which require electricity throughout," she said.

"The Zimbabwe Electricity Supply Authority (ZESA) has been here to assess the area but nothing has been done so far.

"We are appealing to the authority to connect electricity as soon as possible because we are utilising at least 50 litres of fuel everyday on generators and it is too expensive for the hospital," she said.



Defence forces hail NAC for donating diagnostic equipment



Defence Minister Hon Emmerson Mnangagwa addressing guests at the CD4 count hand over ceremony, while the then Acting Minister of Health and Child Welfare Dr Sydney Sekeramayi listens

By Orirando Manwere

THE Minister of Defence, Honourable Emmerson Mnangagwa, has hailed the National AIDS Council for donating six CD4 count machines and six heamatology analyzers to the Defence Forces at a time when the uniformed forces had since introduced comprehensive HIV and AIDS programmes for its members.

In his acceptance speech at a hand over ceremony of the diagnostic equipment handed over by the then Acting Minister of Health and Child Welfare, Dr Sydney Sekeramayi at the Defence Headquarters in Harare recently, Minister Mnangagwa said it had been noted that the Defence Forces were among the most vulnerable and susceptible groups because of the nature of their job that sometimes required them to work in areas where their risk of contracting communicable diseases was extremely high.

Minister Mnangagwa said he was grateful to the NAC, as a stakeholder to the

existence of the uniformed forces who were the guarantors of the social security and peace in the country, had fulfilled its obligation of contributing towards their healthy living standards.

“ One unique characteristic of the nature of the uniformed forces job is that it involves a lot of movement, where in most cases the members are away from their families for prolonged periods.

“ As a result, members end up engaging in extramarital affairs and the resultant networks increase their chances of contracting HIV as well as its transmission to their families when they subsequently re-unite. It is therefore vital to introduce interventions which help reduce the uniformed forces susceptibility and vulnerability to these communicable diseases and decrease rates of transmission,” said Honourable Mnangagwa.

He pointed out that it was thus imperative that diagnostic equipment be readily available and the invaluable donation of the machines by the NAC would go a long way towards ensuring

that members easily accessed services within their institutions, while neighboring communities would also benefit.

“ Let me promise you that we will utilize the equipment much to the benefit of the all members of the uniformed forces, their dependents and surrounding communities,” he said.

The hand over function was attended by senior officers from the Ministries of Health and Child Welfare and Defence as well as the Army, Air force, Zimbabwe Republic Police, Zimbabwe Prison Services, Parks and Wildlife Management. NAC Board members, management and staff.



A technician displaying one of the donated machines.



NAC Communications Director, Ms Medelina Dube hands over a banner to Flight Lieutenant Power Mukwada, from the Airforce of Zimbabwe



Council spearheads HIV and AIDS workplace programmes

...as it trains ministries' focal persons, engages Business



The then Permanent Secretary in the Ministry of Mines and Mining Development, Mr Thankful Musukutwa officially opening the Mine Entra Business Conference on HIV and AIDS.

By Orirando Manwere

IN an effort to enhance the contribution of the public and private sectors in the multi-sectoral response to HIV and AIDS, the National AIDS Council (NAC) recently trained and sensitized 40 focal persons from Government ministries and 80 business executives respectively on HIV and AIDS workplace policy development and implementation.

The NAC initially held a three-day intensive training workshop for HIV and AIDS focal persons from all government ministries before engaging the business executives drawn mainly from the mining and transport sectors, during a half day special Business Conference on HIV and AIDS on the sidelines of the 2011 Mine Entra Exhibition held at the Zimbabwe International Trade Fair grounds in July in Bulawayo.

The business conference was officially opened by the then Permanent Secretary in the Ministry of Mines and Mining Development Mr Thankful Musukutwa on behalf of his minister Mr Obert Mpfu.

Mine Entra is among the top mining, engineering and transport shows in the Southern African Development Community (SADC) region that began in Zimbabwe in 1996 and it has since then grown from strength to strength.

It attracts hundreds of company executives from the mining, transport and related industries and the NAC has over the years taken advantage of the exhibition to sensitize company executives on the essence of developing and implementing HIV and AIDS workplace policies and their response has been positive.

The NAC Communications Director Ms Medelina Dube said the Mine Entra exhibition and business conference would remain on her department's annual calendar in order to reach out to and bring on board new and emerging companies.

"We seek to enlighten top company executives attending Mine Entra on the essence of developing and implementing HIV and AIDS workplaces programmes to mitigate the impact of the pandemic on company operations and the national economy as a whole.

"Studies have shown that the mining and transport sectors are some of the industries that have been hard hit by HIV and AIDS. The majority of mining operations in Zimbabwe tend to be labour intensive, with whole families living in closed communities which promote sexual networks which then become major drivers of HIV in the sector," she said.

Ms Dube pointed out that conditions in mines also exposed employees to HIV and opportunistic infections like TB, while the transport sector was more vulnerable to the pandemic due to the mobility of the workforce particularly truck drivers and their attendants, hence the NAC's sustained efforts to engage the sectors.

The NAC has trained its 85 District AIDS Co-ordinators nationwide on workplace programme development to assist interested companies for free, while the Southern Africa AIDS Information Dissemination Services (SAFIADS) is also assisting companies to develop workplace programmes under the Global Fund programme.

Officially opening the conference, minister Mpfu said, cognisant of the need to ensure that employees are well protected from HIV and its effects at the workplace, the Government enacted the Statutory Instrument 202/98 under the Labour Relations Act as a means to promote implementation of HIV and AIDS programmes in that sector.

He said although some companies were already implementing HIV and AIDS programmes at the workplace, the figures coming



NAC District AIDS Co-ordinator Mrs Patience Ndllovu manning the NAC stand at the Mine Entra exhibition at the Zimbabwe International Trade Fair.



Journalists pose for a group Photo at the NAC Kadoma workshop with ZBC CEO Mr Happison Muchechetere and NAC CEO Dr Tapuwa Magure (seated in suits second and third from left respectively)

Council Spearheads HIV and AIDS continued from page 11

out of the National AIDS Council indicated that the number of workers reached with HIV and AIDS interventions kept on declining from quarter to quarter and this was a cause for concern.

“ I am informed that from 86,540 employees in the fourth quarter of 2010, the number of workers exposed to HIV and AIDS programmes at the workplace declined to 22,357 in the first quarter of 2011 .

“ A baseline survey conducted by the National AIDS Council in 2010 also revealed that 212 out of 500 companies had HIV and AIDS workplace policies and of these only 136 were actually implementing their policies holistically or in part.

“These were mainly large enterprises, including a few mining concerns. In keeping with the national multi-sectoral response that Zimbabwe adopted, I therefore challenge all companies to play their part in contributing to national efforts to tame the pandemic,” he said.



By Orirando Manwere

LOCAL journalists covering the health beat, have hailed the National AIDS Council ,the Southern Africa AIDS Information and Dissemination Services (SAFAIDS) and the Elizabeth Glazer Pediatric Foundation (EGPAF) for holding regular training workshops aimed at keeping them abreast of latest trends and developments in the response to HIV and AIDS, Tuberculosis and related diseases.

The journalists acknowledged that the trainings had greatly enhanced their knowledge and appreciation of health issues and in turn pledged increased and quality coverage of the issues.

Desk editors from various media houses, also commended the organizations for organizing particular workshops aimed at bridging the gap between them and the reporters, a development they said would go a long way towards improving their quality control roles on health stories in newsrooms as they used to rely on reporters who at times submitted copy with gaps.

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updated on various topics on the national response to HIV and AIDS.

These included funding the HIV and AIDS response and the utilization of the AIDS levy and donor funds, the Global Fund application processes, the Expanded Support Programme, male circumcision, among others.

SAFAIDS and EGPAF also held a series of training workshops on HIV and TB collaboration, Prevention of Mother to Child Transmission(PMTCT) and Gender and sexual reproductive health issues during the last quarter covering identifying of story angles, practical story writing sessions and panel discussions.

Funding for the training activities came from the AIDS Levy, Round Eight of the Global Fund and the Children's Investment Fund Foundation.

Lawason Mabhena, the news editor for the Bulawayo based Sunday News said he had benefited a lot from the Kadoma workshop as he used to rely more on his health reporters for statistics and other information.

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Journalists hail NAC, partners' training workshops.

---pledge improved coverage on health issues



Journalists pose for a group Photo at the NAC Kadoma workshop with ZBC CEO Mr Hapison Muchechetere and NAC CEO Dr Tapuwa Magure (seated in suits second and third from left respectively)

Council Spearheads HIV and AIDS continued from page 11

out of the National AIDS Council indicated that the number of workers reached with HIV and AIDS interventions kept on declining from quarter to quarter and this was a cause for concern.

"I am informed that from 86,540 employees in the fourth quarter of 2010, the number of workers exposed to HIV and AIDS programmes at the workplace declined to 22,357 in the first quarter of 2011.

"A baseline survey conducted by the National AIDS Council in 2010 also revealed that 212 out of 500 companies had HIV and AIDS workplace policies and of these only 136 were actually implementing their policies holistically or in part.

"These were mainly large enterprises, including a few mining concerns. In keeping with the national multi-sectoral response that Zimbabwe adopted, I therefore challenge all companies to play their part in contributing to national efforts to tame the pandemic," he said.



By Orirando Manwere

LOCAL journalists covering the health beat, have hailed the National AIDS Council, the Southern Africa AIDS Information and Dissemination Services (SAFAIDS) and the Elizabeth Glazer Pediatric Foundation (EGPAF) for holding regular training workshops aimed at keeping them abreast of latest trends and developments in the response to HIV and AIDS, Tuberculosis and related diseases.

The journalists acknowledged that the trainings had greatly enhanced their knowledge and appreciation of health issues and in turn pledged increased and quality coverage of the issues.

Desk editors from various media houses, also commended the organizations for organizing particular workshops aimed at bridging the gap between them and the reporters, a development they said would go a long way towards improving their quality control roles on health stories in newsrooms as they used to rely on reporters who at times submitted copy with gaps.

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Mbumba Mission care givers soldier on despite challenges



By Nobuhle Nyoni

COMMUNITY and Home Based Care (C&HBC) started in the 1980's in Zimbabwe as a way of providing health care services out of hospital for people with chronic ailments such as cancer, diabetes and tuberculosis.

However with the emergence of HIV and AIDS the demand for home based care givers increased as more people needed to be taken care of at home as hospitals could not cope with the ballooning numbers.

Government has over the years continued with its support to home based care work by providing supportive policies and guidelines.

Although these policies were drafted years ago, some of them have not been fully put into practice as home based care givers still continue to face a number of challenges.

Male care givers attending to a patient - file picture courtesy of the the Southern African AIDS Trust

Journalists hail NAC, partners

continued from page 12

" I must admit that I was not very conversant with development in the HIV and AIDS response as I have to clear copy from all beats. So I naturally rely on my health reporters, despite the fact that they may sometimes miss the point. So this has been a very useful workshop and I urge press officers from various AIDS service organizations to always send us updates, policy documents and latest statistics so that we are able to verify what we get from our reporters," said Mabheha.

ZBC Assignments Executive Albert Chekayi echoed the same sentiments, adding that desk editors were not "jacks of all trades" and needed constant updating on latest trends.

"While we have seasoned reporters who cover the health beat, sometimes we assign interns who would be available at any given time and they miss out on important issues. It is thus imperative that we must be kept informed as desk editors and I want to thank you for organizing this workshop," said Chekayi.

Standard Health reporter Indiana Chirara, said she had learnt a lot from the training workshops and had since established



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herself as a reliable health reporter on the Standard.

Freelance journalist Garikai Chaunza said the media trainings had been enriching.

" I am now writing from an informed position. I always cherish these workshops because I always get several diary items which keep me going. The response to enquiries, clarifications from NAC and SAFAIDS, has always been prompt and professional," said Chaunza.

SAFAIDS's Programme officer-Media, Beatrice Tonhodzayi said she was happy with the outcomes of the trainings as most papers had since introduced health pages.

"The response had been encouraging. However, we must continue with the trainings

as there are a lot of journalism students with a lot of gaps who are manning health desks in newsrooms who need a lot of help. I think there is need to engage journalism training institutions so that we catch them young, while they are still in college.

" There is also a lot of staff attrition with seasoned reporters seeking greener pastures, hence the need for continued training," she said.



Male involvement critical in the success of PMTCT



By Abel Mamhunze

PREVENTION of Mother to Child Transmission (PMTCT) is a key research area identified in the Zimbabwe HIV and AIDS Research Priorities for 2010-2012 as it seeks to ensure an AIDS free generation.

PMTCT is vital in preventing transmission of HIV from pregnant women and breast feeding mothers to their new born babies. The World Health Organisation (WHO 2004) set the core interventions for PMTCT to include testing

and counselling, Anti-Retroviral drugs for treatment, prophylaxis, safe delivery practices as well as support for safer infant feeding practices.

With more than 90% of infections in children being a result of Parent to Child Transmission, strengthening the PMTCT program and prioritising it reduces the HIV incidence and prevalence among infants and children.

Mbumba Mission care givers continued from page 13

Home based care-givers interviewed said they were experiencing a number of challenges such as lack of transport and incentives.

They said they also needed to be given groceries and incentives to cater for their families as they spent most of their time helping chronically ill patients and had no time to do other work which could give them income.

"Mrs Cathrine Moyo, one of the care-givers said although the work they were doing was tough, they had managed to sold. -on".

"The work we are doing is tough but it is easier on the other side if you understand what it entails. We encounter a lot of challenges in this kind of work and it needs someone with a good heart," she added.

What is unique about this group of care-givers is that it comprises a considerable number of men. One male caregiver Mr Wilson Moyo said at first he did not understand what home based care was all about.

"At first I could not understand what it



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was all about but as time went on I began to see the light and am happy doing this kind of work," he said.

He encouraged other men to take up home based care as there was a lot that needed to be done.

Mr. Moyo also echoed Mrs. Mhlanga's sentiments when questioned on the challenges they faced.

"We cater for a lot of patients and we urgently need transport that will ferry us to different areas because at times we travel for long distances as far as 20 kilometres," he said.

Government is in the process of coming up with a volunteer policy for community home based care givers to guarantee uniformity in standards of upkeep.

A number of organisations in the country

have shown their continued support to home based care programmes which encompass basic nursing care including palliative care, provision of nutritional support to patients, training of care givers and support for treatment.

Patients are offered counseling, support group activities, support for anti retroviral therapy and opportunistic infections treatment, food assistance and nutritional gardens.

***-Nobuhle Nyoni is a Sunday News health correspondent**



Number eight of the International Guidelines on HIV and AIDS and Human Rights stipulates that "States, in collaboration with and through the community, should promote a supportive and enabling environment for women, children and other vulnerable groups by addressing underlying prejudices and inequalities through community dialogue, specially designed social and health services and support to community groups."

The success of PMTCT as a prevention strategy, lies in part in the provision of a supportive and enabling environment by men. Research has acknowledged that males play a significant role in decision making processes that determine uptake of PMTCT services.

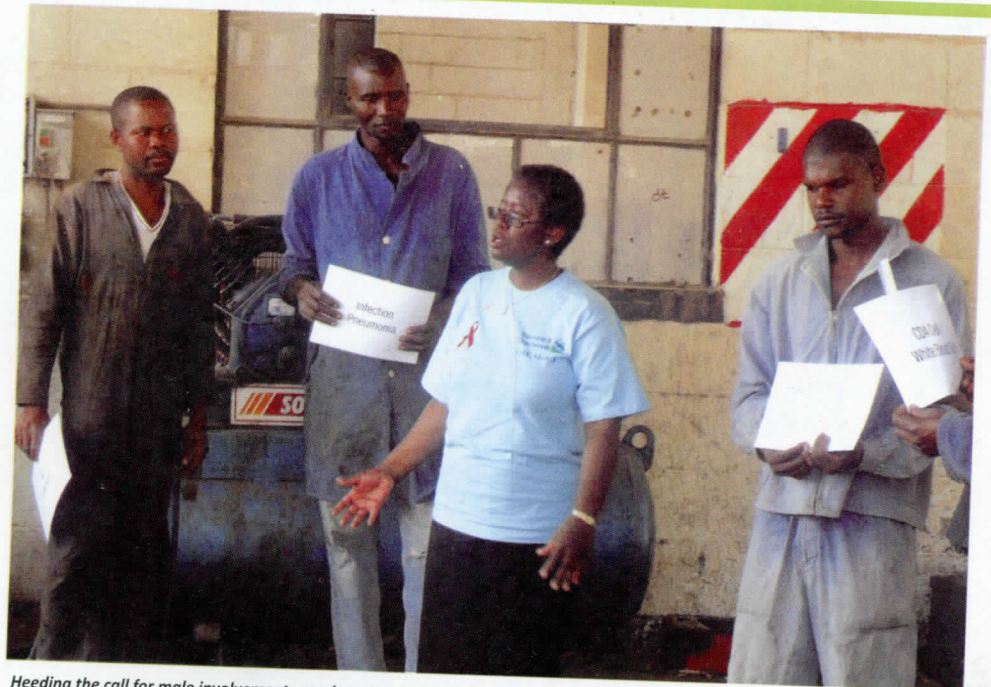
Male involvement is vital even before pregnancy and after birth as it is necessary to make it part of the health of the couple or woman.

When a couple is consistently tested and is aware of their HIV status, this comes as the first step in Prevention of Mother to Child Transmission of HIV and AIDS.

When the woman is pregnant, the male should also be part of the routine visits to the health facilities where testing and counselling is offered and highly recommended but not mandatory for all pregnant mothers.

PMTCT education should therefore ideally cover young men and women, even before they are married because whether married or not, any pregnant woman or any woman who has given birth has a need to protect their baby from HIV through PMTCT.

They should both be available to learn of the needs of a pregnant mother as well make considerations on HIV testing. This



Heeding the call for male involvement - workers at a Harare Company listen attentively to a Behavior Change Facilitator during a workplace outreach session.

automatically safeguards women who have been subject to violence from the men because the men have been excluded from the onset. There is therefore need to influence the decision making process with regards to PMTCT uptake and identify ways of improving acceptance of PMTCT services among men so as to increase its uptake by both partners.

The patriarchal nature of the Zimbabwean society and the diverse traditional beliefs, do not make it easy for men to influence decision making on PMTCT.

It should therefore take a conscious effort for a male Zimbabwean to behave positively and accept full participation and involvement in the whole process of a pregnancy.

The males need to be involved in making decisions together with the wife if she is positive and carrying a child as this includes all the vital information there is to prevent transmission of the virus to the unborn baby.

Interestingly, the need to be faithful to one faithful partner cannot be over emphasized even for those who have a negative status during a pregnancy. If any one of them decides to be unfaithful and indulge in unprotected sex the unborn baby is automatically at risk.

The prevention of transmission from the mother to the child ceases to be solely the concern of the mothers alone, but with support from their male counterparts who play direct or indirect roles of ensuring success, a lot more infections can be averted.

Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) which is the Ministry of Health and Child Welfare's largest partner in the provision of technical and financial support for PMTCT services in Zimbabwe, is working tirelessly towards supporting the scaling up of PMTCT services.

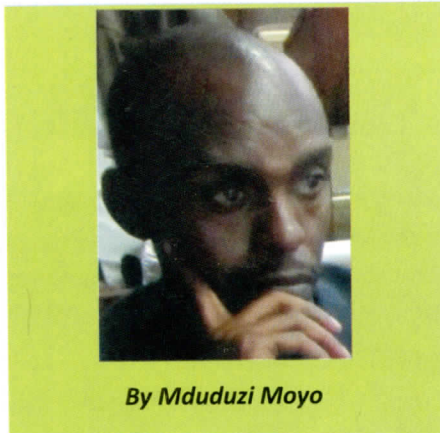


Minister Shamhu challenges Media to report ethically

...calls for blitz on HIV and AIDS messages



The Minister of Media, Information and Publicity Hon Webster Shamhu addressing news editors at the Kadoma workshop



By Mduzuzi Moyo

The Minister of Media, Information and Publicity, Honourable Webster Shamhu has challenged the media to be ethical in their coverage of news in order to gain the trust and confidence of society .

Officially opening a workshop aimed at updating desk editors from various media houses on latest trends on the national HIV and AIDS response which was organized by the National AIDS Council in Kadoma recently, Minister Shamhu said the media, as the Fourth

Estate, could not afford to frequently retract stories.

“As opinion leaders, you cannot afford a situation whereby you are retracting stories everyday.

“You can not write that Shamu was busy assaulting people in Wedza when I was not even there and then go on to retract that the next day.

“The country relies on you for vital information on serious issues like the HIV and AIDS pandemic. How is the country expected to trust your information if you yourselves cannot trust your own information,” said Minister Shamhu.

He said retractions hurt the integrity of the journalism profession and erode the public's confidence in the Media.

“When we are unable to convince the public about the accuracy of our facts, we are then undermining the diligent work in the fight against this disease,” he added.

Minister Shamhu said that in the current

response to HIV and AIDS, information and education were the only available cures for AIDS.

“All HIV and AIDS programmes can only begin and succeed with the provision of information. As news editors, you administer news diaries in your organizations by prioritizing events and assigning reporters to cover those events.

“I would like to call upon you to prioritise HIV and AIDS programmes, policies and services on your news agendas and mobilize other stakeholders to join the fight against HIV and AIDS. This is because when the media highlights certain issues, there is almost always a higher degree of public awareness, which is critical in the country's HIV and AIDS programmes,” he said.

Minister Shamhu though commended the role that the media had played so far in its coverage of the pandemic.



Minister Shamhu poses for a group photo with news editors and NAC staff at the Kadoma workshop

He said the efforts of the media were reflected in the decline of the HIV prevalence which went down from 15.6 to 14.26 in the 15-49 years age group in the period 2009-2010.

The Minister also called for an information blitz on HIV and AIDS. He said that there should be a deliberate effort by all stakeholders to carry messages on HIV and AIDS to every corner of society.

He said the corporate world should endeavor to incorporate HIV and AIDS messages in the advertisements of their products.

The Minister said a lot needed to be done to plug the information gaps in stories as there were a lot of grey areas in the coverage of HIV and AIDS issues.

He challenged community newspapers to come up with a comprehensive glossary of terminology about HIV and AIDS that is culturally friendly for even the

lay person to understand.

“We expect you as the people in the communities to speak the language of the people and to enrich our language so that it sufficiently carries the message across,” said Minister Shamhu.

Mduduzi Moyo is a sub editor on the B-Metro tabloid in Bulawayo



News editors following proceedings during Kadoma workshop from left front row: Jonathan Hunzvi (ZBC), Kholwani Nyathi (Standard) and Mduduzi Moyo (B-Metro). Second row Jonhson Slayamachira, Kamangeni Phiri, Tapfuma Machakaire and Pamenus Tuso.

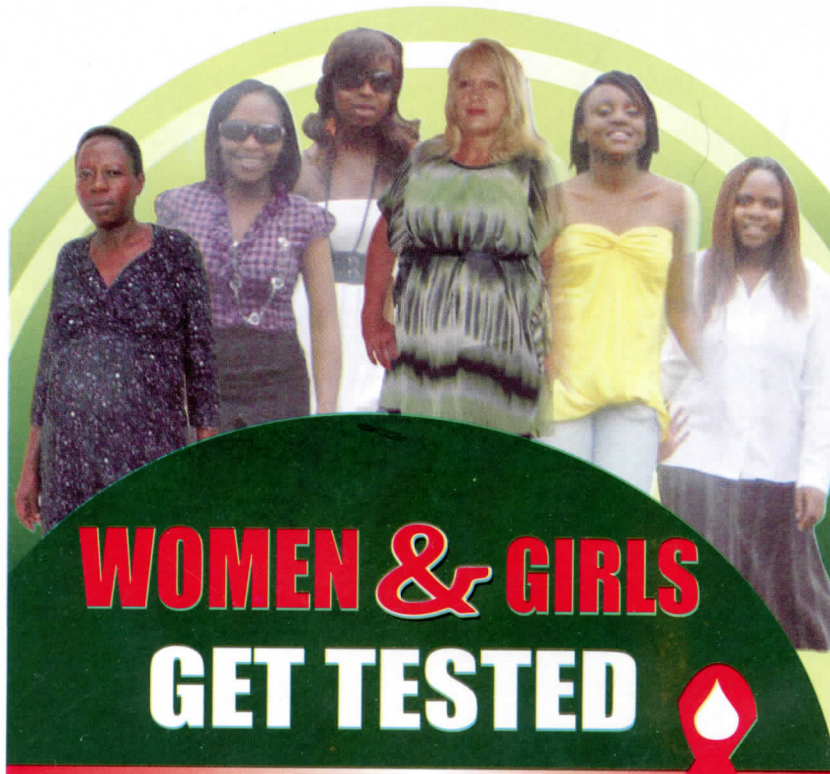
WORLD AIDS CAMPAIGN 2010/2011

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STOP AIDS KEEP THE PROMISE

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**IT IS YOUR ENTRY TO
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NAC - COORDINATING THE NATIONAL
MULTI-SECTORAL RESPONSE
TO HIV AND AIDS

Vic Falls sex workers in condom promotion campaign

...Set-up own STI clinic



By Pamela Shumba

SARAH (not her real name) is 15 years old. She fled her rural home after dropping out of school where she was doing form two in Binga and is now settled in the resort town of Victoria Falls.

She decided to leave home after a misunderstanding with her stepmother. The stepmother in question has never bothered about her whereabouts ever since.

After two weeks of loitering in the busy streets of Victoria Falls, Sarah found a circle of new friends who dragged her into prostitution after convincing her that it was the easiest way out of her financial problems and a means of survival.

The situation that Sarah immediately found herself in never gave her time to think about the perils that come along with the profession. She never had time to consider a possibility of unwanted pregnancies and sexually transmitted diseases (STDs), since the profession was her door to financial security.

Within three months into the profession, Sarah got an STI from one of her clients, which forced her to stay indoors, and fail to carry out her duties normally.

She eventually visited a hospital to seek treatment where she received a rude reception from nurses who were on duty, confirming her earlier fears and concern that it would take some time for people in her profession to be accepted in society.

Sarah said she was later given tablets and a review date but the nurses could not let her go without reminding her that it was people like her who were spreading the HIV virus like veld fire.

To defy such social conventions of being excluded and labeled as prostitutes, commercial sex workers have established a clinic in Chinotimba Township, Victoria Falls to reduce the transmission

of HIV among themselves and their clients. They have also embarked on a condom promotion campaign amongst themselves

The commercial sex workers, most of them between the ages 12 and 25 are flocking into the resort town on a daily basis.

The young girls are so desperate for money such that crusades and funerals have become popular trading grounds.

Sisters with One Voice Clinic, which exclusively caters for commercial sex workers was established with the support of the Zimbabwe Aids Prevention Project (ZAPP) in September 2010 and to date, more than 100 clients are benefiting from the services offered at the clinic.

In the past, commercial sex workers have been facing challenges such as stigma and discrimination from health workers when they visited hospitals and clinics for medical attention.

The clinic, which offers free treatment, also caters for commercial sex workers' children in the treatment of all sexually transmitted infections (STIs), opportunistic infections and other diseases.

It also offers voluntary counseling and testing, provision of condoms and family planning.

During a Matabeleland North media tour organised by the National AIDS Council recently, journalists caught up with the clinic's peer educator and co-ordinator Ms Doreen Tshugulu (47) and two members, Ms Christine Moyo (38) and Ms Sibonginkosi Tshabalala.

The three are also commercial sex workers who claimed that they were now mature and responsible but were trying by all means to protect the young girls who are flocking into the resort town from surrounding areas on a daily basis.

They argued that they were entitled to health care like everyone else, regardless of their profession.

"Most sex workers, especially the young ones aged between 12 and 25

tend to risk their lives when offered more money by their clients.

Continued on page 20

Journalists interviewing leaders of Victoria Falls Sex Workers Condom Promotion Campaign team Doreen Tshugulu (in yellow top & cap) and Christina Moyo (in pink top & hat) in a sports bar in Chinotimba township during the Matabeleland Media Tour.



"The establishment of the clinic came after realising that, health workers viewed us as outcasts in the community which makes it difficult for many vulnerable young girls to access health care.

"People should be treated the same at health institutions and we must feel free to seek help when we fall sick" she said. Ms Tshugulu said the clinic opens on Mondays every fortnight and there is strict confidentiality for all those who receive treatment and advise from friendly and qualified staff.

"We open our clinic twice every month and we also move around all the night spots distributing condoms and encouraging young girls to use them correctly and consistently and remind them that their lives come first," she said. She said most of the young commercial sex workers had traveled to Hwange to look for clients at the time of the visit.

However, despite the efforts made by Sisters with One Voice to curb the spread of the pandemic in the resort town, Ms Tshugulu said they were facing many challenges in their profession with the rate of unwanted pregnancies and HIV infections continuing to rise.

She attributed the increases to poverty among the sex workers, which leaves them with no authority or ability to negotiate for safe sex. "Most sex workers, especially the young ones aged between 12 and 25 tend to risk their lives when offered more money by their clients.

"The prices differ with the different places that we hang around and they range from US\$5 to US\$500 per night. Tourists usually offer huge amounts of money, which leave most of these girls with no option but to accept the offer," said Ms Tshugulu.

She said the challenge was on educating the young girls how important it was to use protection consistently.

"Some of us are more mature and we do not go to the bars for clients. We now communicate over the cell phones and we tell our clients that we do not offer the services without condoms.

"But with young girls it is different. They argue that they would rather be sick than lose a good offer from a rich tourist," she said.

Ms Moyo alleged that police officers were also contributing to the spread of HIV as they solicited for sex as bribes from the sex workers.

"When police officers arrest sex workers, they ask for unprotected sex as bribes before they release them and some girls tend to agree as they feel it is a waste of time to spend days in the cells while others make money.

"Our regular clients are locally married men mainly because their wives do not want to use the different styles that we use during sex but we usually experience brisk business during the public holidays when tourists are around and very soon the girls will not be traveling to Hwange to look for clients," said Ms Moyo.

Ms Tshabalala said it was difficult for them to save their earnings and start businesses because of their responsibilities.

"Most of us have bills to pay and children who need to be fed, taken to school and clothed. It becomes very difficult to save our earnings to start new businesses.

"Financial assistance from well wishers is welcome for us to start projects, especially poultry rearing and selling fresh kapenta fish," said Ms Tshabalala.

She however said it was possible for commercial sex workers to be married and live happily with their husbands.

"This clinic is the second establishment that we are taking part in after the Hwange AIDS

Project where we worked under the theme 'Be an example'.

"In 2009 our group comprised 20 members but 18 of us eventually got married and most of them are living happily with their families. Young girls however sometimes rush to get married and then dump their husbands when they are not satisfied with their spouses' income," said Ms Tshabalala.

"My children and I use different bedrooms and I always make sure that they do not see my clients. I am taking them to school through my earnings as a sex worker and I am certain that they would never do the same," said Ms Tshugulu whose husband died years ago and left five children for her to raise.

Ms Tshugulu however said the uptake of the female condom was very low as most of the sex workers said it was not user-friendly.

"We distribute both male and female condoms to all sex workers, courtesy of ZAPP and other non-governmental organisations, but they have criticised the female condom, saying it makes noise during the process and takes more time to put on," she said.

But with all these efforts being made to completely eradicate the pandemic, the question still remains if the country is ever going to be an AIDS free generation.



Spearheading condom use among sex workers - from left Christine Moyo and Doreen Tshungulu, leaders of Sisters With One Voice.

-Story courtesy of
The Chronicle
-The author, Pamela
Shumba is a Health
reporter on The
Chronicle newspaper
in Bulawayo



NAC donates US \$270 000 towards BEAM



The then Acting Minister of Health and Child Welfare Dr Sydney Sekeramayi hands over the BEAM cheque to Labour and Social Services Minister Mrs Paurina Mpariwa at the NAC headquarters.



Labour and Social Services Minister Mrs Paurina Mpariwa addressing guests after receiving the cheque at the NAC headquarters next to her are the NAC Board Vice Chair Dr Pheanuis Makurire and the Director of social services Mr Sydney Mhishi on the extreme right.

By **Orirando Manwere**

THE National AIDS Council (NAC) recently handed over a US \$ 270 000 cheque to the Minister of Labour and Social Services Mrs Paurina Mpariwa as its contribution towards the Basic Education Assistance Module (BEAM) for 2011 which is expected to benefit 10 000 disadvantaged children.

Following improvements in the AIDS Levy receipts after the introduction of the multi-currency regime in February 2009, the NAC has resumed its BEAM contributions, among other commitments which include procurement of anti-retroviral drugs and diagnostic equipment.

In his remarks at a hand over function held at the NAC Headquarters in Harare recently, NAC Board Chairperson Rev Murombedzi Kuchera said the BEAM contribution was not an isolated intervention towards orphaned and vulnerable children, but part of a broad informed strategy that included efforts to provide a holistic fulfilment of OVC needs.

“ Apart from the BEAM disbursement, NAC also assisted orphaned and vulnerable children with school uniforms and stationery as part of the educational assistance

“ We have programmes in all provinces, working at village and ward levels to provide for the needs of these affected children. Other assistance has been in the form of psychosocial support and re-integration of abandoned children into mainstream society. We are in this regard working closely with the Department of Social Welfare to strengthen Child Protection Committees as guided by the National Action Plan on Orphans and Vulnerable Children (OVC)

“We are mindful of the fact that our contribution alone will not cater for all the children who require support and are therefore grateful to other partners who have been making significant contributions in the framework of the National Action Plan for OVC,” said Rev Kuchera.

In her acceptance speech at the hand over function, minister Mpariwa commended the NAC for the donation...



Journalists, NAC staff and invited guests following proceedings during the hand over ceremony



NAC Board Chair Rev Murombedzi Kuchera (third from left) addressing guests at the hand over ceremony.

Local funding vital for HIV and AIDS programmes



By Walter
Mswazie

FADZAI Ngoro (32- not his real name) is HIV positive and on anti-retroviral therapy (ART) under Medicines Sans Frontiers (MSF-Holland) HIV and AIDS support programme.

She is one of the more than 6 000 people living with HIV in Gweru getting drugs from MSF.

MSF-Holland however recently started transferring over HIV and AIDS programmes, which it has been running in the Midlands Province for the past six years, to the Government this year. The organization intervened in 2004 at a time when the economic decline posed major challenges to the country's health delivery system. The non-governmental organization has already completed the handover of the Prevention of Mother to Child Transmission activities, adult voluntary counseling and testing, and the supplementary feeding scheme to the Ministry of Health and Child Welfare.

The centres providing HIV drugs in the province are Mkoba Clinic, which has 2

891 clients on the first line and second line drugs, including children, and Lower Gweru which has 2768 patients. An estimated 1,2 million adults and children are living with HIV in Zimbabwe. About 400 000 of the 600 000 people are on treatment leaving almost half in urgent need of the life saving drugs

The withdrawal of Medicines Sans Frontiers operations from Midlands is likely to see a similar fate occurring in Bulawayo City, Beitbridge, Epworth, Tsholotsho and Buhera.

Each site provides comprehensive HIV and AIDS care, offering counseling, testing, treatment and PMTCT. In 2010, more than 34 000 patients were receiving antiretroviral treatment from the organization and there are increasing fears that patients would go without treatment and get inconvenienced during the handover period. This has brought to the fore the need to increase domestic funding of the country health delivery system to guard against withdrawal of external support.

With the bulk of the national health programme getting support from external partners, there are always fears that a substantial number of people would be disadvantaged in the event of sudden withdrawal of support by donors. In an interview at the sidelines of the Mine Entra in Bulawayo recently, National AIDS Council Financial Director Mr Albert Manenji said although Zimbabwe had made significant progress in reducing the national HIV and AIDS prevalence, there was potential danger for

people already on treatment if donors decided to pull out.

"A lot can be done to improve the country's HIV funding programmes. Local funding is more flexible to use than donated money that sometimes cannot be used the way we want," he said.

Most donor funds are tied to certain programmes and thus cannot be diverted to urgent need even if its in the same line of programmes.

For instance, funds secured for acquiring drugs can not be re-channelled to buy diagnostic machines, even when there is greater need in that area.

MSF-Holland medical programme manager Audrey Van der Schoot allayed fears that patients would be disadvantaged by the handover.

She said efforts were being made to ensure that the transition did not affect patients.

Van der Schoot said that the Ministry of Health and Child Welfare had the capacity to provide treatment to patients who were under MSF-Holland programme.

Mr Manenji said there was need to broaden the tax base to include those in

Continued on page 23



A NAC truck laden with a consignment of ARV drugs recently procured by the National AIDS Council through the AIDS levy

the informal sector as everyone is liable to fund such national programme. "The input of all sectors is critical in improving revenue and increasing the AIDS levy tax base. Already, families are contributing something although we cannot quantify their support to the funding.

"Families assist their relatives living with the virus through user fees at hospitals and transport when they go for CD4 count and collecting ARVs. "However, demand for resources continues to outstrip the resources available and that needs to be addressed," said Mr Manenji.

The AIDS Levy is currently paid by workers in formal employment and formal employers in the country, but owing to ever decreasing workforce, the resources are not adequate for HIV programmes.

Local funding is easy to manage and has no strings attached like donor funds. External funding sometimes is not flexible and might be tied to specific programmes that are not in tandem with our needs.

External funding partners contribute at least 76 percent to the total funding of TB and HIV and AIDS programme in the country while the National AIDS Trust Fund caters for the remainder.

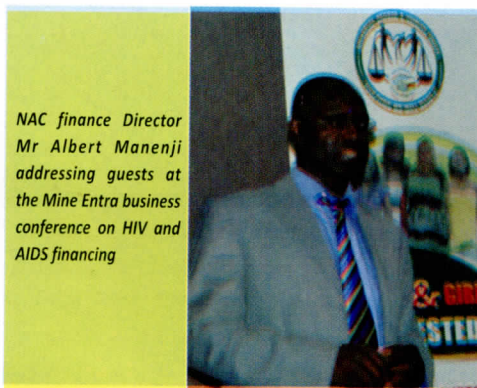
Analysts said there was need to ensure that mechanisms were put to ensure everyone contributes something to the levy. This is because everyone is either affected or infected by the disease and can not push the burden to others.

They said there should be no overdependence on donated funds. The AIDS Levy should be augmented by permanent mechanisms that will ensure the continuation in the provision of treatment in case the Global Fund and other organisations withdraw funding to Zimbabwe..

Efforts to resuscitate the industry's capacity utilization must be the Government's priority. Currently, local industry is operating at an estimated



Defence forces officers and NAC staff pose for a group photo after NAC donated diagnostic equipment procured through the AIDS levy



capacity of between 40 and 45 percent and the country has failed to achieve the projected target of 60 percent by the end of first quarter. When production levels improve, the tax collections would definitely improve, so would be the levy.

"We expect all small-scale miners to formalise their operations through registering with the relevant authorities so that they can start to contribute. All registered companies contribute to the NATF through corporate tax which is collected by Zimra.

All employees and companies contribute three percentage to the NATF towards the Aids Levy, which is deducted from Pay As You Earn (PAYE) and corporate tax respectively," said Mr Manenji.

However, the money collected falls far too short to cover all the needs for HIV and AIDS programme in the country.

It is also disheartening to note that some firms have not been remitting taxes to Zimra.

Media reports recently revealed that 15 State enterprises had not been remitting taxes to the revenue authority.

These companies owe Zimra US\$150,9 million in unremitted tax. This is disturbing because State enterprises are least expected to shortchange the Government by evading tax.

Mr Manenji said according to Statutory provisions, half of the AIDS Levy goes towards the procurement of drugs and machinery.

Between 2009 to 2011 Government has received a total of US\$106,3 million from the Global Fund and US\$48,3 million from the Expanded Support Programme. As a country committed to the response to HIV and AIDS, Zimbabwe should find ways of enhancing domestic funding for HIV and AIDS programmes.

Continued reliance on external sources, as is the current scenario might prove fatal in the event that they unexpectedly withdraw their support.



Health and Child Welfare Minister launches new-look NAC website

...as stakeholders hail NAC on latest development



Minister of Health and Child Welfare , Dr Henry Madzorera addressing guests at the official launch of the new look NAC website

By Orirando Manwere

The Minister of Health and Child Welfare Dr Henry Madzorera , recently officially launched the new-look National AIDS Council website amidst calls for the council to ensure that it was regularly updated with latest and quality information on the national multi-sectoral response to the HIV and AIDS for the benefit of the public.

Implementing partners, Government departments, United Nation agencies and members of the Media who who attended the launch in Harare ,also hailed the NAC on the latest development which they said would go a long way towards ensuring that they had easy access to information on various aspects on the response to HIV and AIDS.

The NAC website- www.nac.org.zw which has been running over the past five years, was totally revamped between January and July this year with the assistance of a United States based website expert and international volunteer, Tzviatko Chiderov, whose

secondment to the NAC was facilitated by Voluntary Services Overseas (VSO).

With support from the NAC Communications department, Tzviatko, revamped the website to what it is today over the past seven months following wide consultations within and outside the NAC.

He also trained NAC staff on the website content management to ensure its continued maintenance .

Officially launching the website ,Dr Madzorera commended the NAC for revamping the website which he said would provide information for individuals, organizations, the Media and Government to keep abreast of trends in the HIV response and make informed decisions .

“ There is power in information and it is those that take efforts to harness the power of information that will survive in the new order. With the current revolution in the information, communication and technology sector, websites have become a new frontier in the dissemination of information locally and internationally.

“ I am happy that the NAC had enhanced this channel. While the new website looks user friendly, I would like to call on the NAC to ensure that it is widely marketed to promote its use by the targeted audience. At the same time, there is need to also utilize other innovative communication outlets such as drama, poetry and other social means that the majority of people are more familiar with,” said Dr Madzorera.

The NAC Board Public Relations and Advocacy sub-committee chairperson Mr David Mutambara, said the NAC Communications Department was also producing a quarterly newsletter called HIV Interventions, establishing resource centres at national and provincial levels and producing various information, education and communication materials comprising pamphlets, posters and dvd's , among others to further disseminate information on the HIV and AIDS response .



ZBC pledges increased quality coverage on HIV response

which she said would go a long way towards augmenting the BEAM budgetary allocation and donor support which fell far short of the requirements. "While my ministry has mobilized resources for this programme, the demand for assistance far outstrips the funds available.

"For 2011, the Government has made available US\$13 million for secondary schools against a projected requirement of \$15 million. For this same year, the donor community has pledged US\$10million for assistance at primary school level against a projected requirement of \$15million," she said.

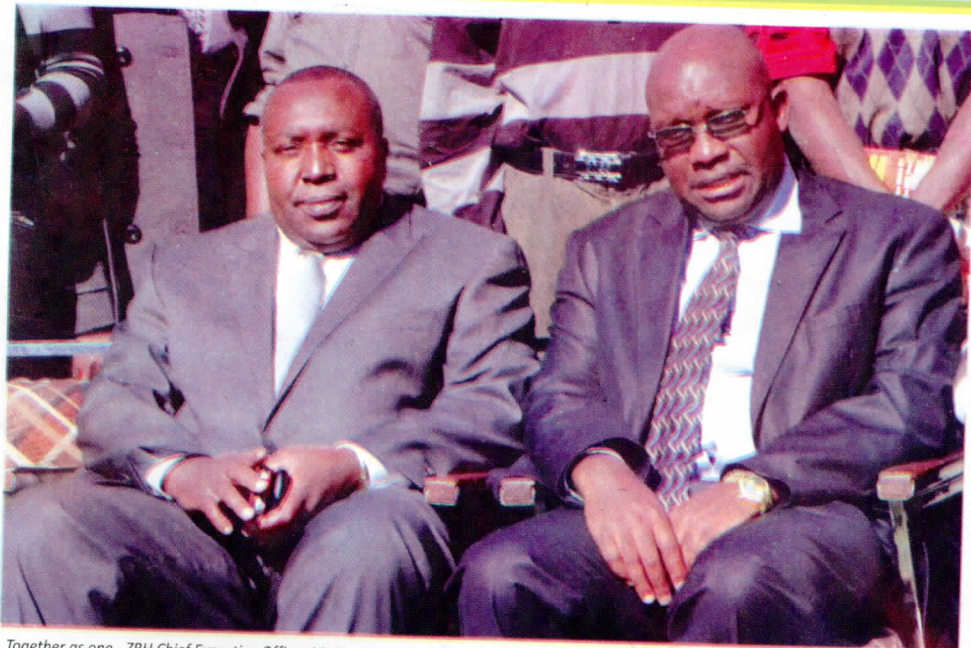
In 2010 BEAM supported 530 000 children at primary level, 50% of whom were girls, to the total tune of \$13 million. At secondary level, BEAM supported 197,000 children with fees and levies to a tune of \$12 million.

Additionally, more than 19,000 students were assisted with examination fees at "O" and "A" level. During the same year, more than 10,000 children with special needs in 32 special schools were supported with fees and levies at a total cost of \$700,000.

In 2011, BEAM targets to support at least 620,000 children at primary school level and 160,000 at secondary level. At least 10 000 needy children are expected to be assisted with examination fees at secondary level.

Minster Mpariwa said 10% of the total BEAM budget, which translates to about \$1,5 million was reserved for children living with disabilities and thus called upon families, communities and other stakeholders to ensure that such children were identified to receive the educational assistance they deserved.

Zimbabwe has over 990 000 children orphaned by HIV and AIDS, who apart from educational assistance, need food, shelter psycho-social support, among other needs.



Together as one - ZBH Chief Executive Officer Mr Hapison Muचेचेते and NAC CEO Dr Tapuwa Magure at the Kadoma Media workshop.

By Oirando Manwere

THE Zimbabwe Broadcasting Holdings (ZBH) Chief Executive Officer Mr Hapison Muचेचेते , recently pledged to ensure increased quality coverage of HIV and AIDS issues on all radio and television channels as part and parcel of his organization's corporate social responsibility and contribution towards the national multi-sectoral response to the pandemic.

Officially closing a workshop for health reporters organized by the National AIDS Council in Kadoma recently, Mr Muचेचेते HIV and AIDS were critical developmental issues that required adequate space for coverage in the electronic, print and other forms of mainstream media.

He said in as much as the National AIDS Council and its various partners continued to carry out awareness campaigns, the role of the Media in the response to HIV and AIDS could not be overemphasized as the Media had the advantage of reaching mass audiences.

"On our part as ZBH, we pledge to ensure that all our TV and radio channels should continue run regular programmes on HIV and AIDS.

"Already we are running Utano Hwedu and Uyathini ngalokhu on Radio Zimbabwe which are supported by the National AIDS Council, Positive Talk on TV supported by the Southern Africa AIDS Informations Services, Health Matters on SFM and Voice of Zimbabwe, among other programmes.

"Following this workshop during which I am informed you were updated on current developments in the response to HIV and AIDS, I look forward to more well researched ,objective and ethically written stories from reporters," said Mr Muचेचेते.

He said the role of reporters was very critical as they stood between information sources and the consumers, hence the need for them to report factually ,objectively and ethically.

"Your role goes beyond just collecting and disseminating HIV and AIDS information as it includes proper packaging, giving relevant tone and slant to the messages which must in turn influence positive responses from the public, policy makers and service providers," he said.

Mr Muचेचेते hailed the National AIDS Council for convening the workshop which he said would go a long way towards ensuring that the Media covered HIV and AIDS issues more objectively, and ethically and from an informed position.



Zim launches HIV and AIDS Research Priorities

By *Orirando Manwere*

The Minister of Health and Child Welfare, Dr Henry Madzorera, recently launched the Zimbabwe HIV and AIDS Research Priorities policy document for the period 2010-2012.

The research priorities are aimed at ensuring that HIV and AIDS research is well coordinated to provide evidence for policy and programme development.

Following year-long wide consultations by the Research Advisory Committee (RAC) among stakeholders, the Research Priorities document was eventually launched and well received by all the participants at the launch.

NAC Research and Documentation Co-ordinator Mr Freeman Dube facilitated the development of the document through the (RAC).

The document outlines key areas for research on Prevention, Treatment, Mitigation, Policy and cross cutting issues.

Officially launching the priorities, Minister Madzorera said the completion of the priorities marked a significant step towards the institutionalization of the use of evidence in policy formulation and programming.

“As the Minister of Health and Child Welfare, I now expect to see full application of the priorities as well provision of other support services which include, inter – alia; funding for research, development of an HIV and AIDS research database, and establishment of platforms for dissemination of findings”, he said.

Dr Madzorera added that by developing and launching the priorities, Zimbabwe had also taken a huge step towards fulfilling regional and international partners' expectations on provision of evidence for interventions which they could fund

“The call for evidence informed policies and programmes in response to HIV and AIDS has been getting louder and louder not only in our country and region where the burden of the pandemic is most felt,



Health and Child Welfare Minister Dr Henry Madzorera addressing guests at the launch of the HIV and AIDS Research Priorities

but also across the world where we get some assistance in tackling HIV and AIDS.

“In this regard, SADC has already set aside US\$7 million to support implementation of selected HIV and AIDS research topics and interventions in the region and this is a welcome development,” said Dr Madzorera.

Turning to local funding for research, Dr Madzorera applauded the National AIDS Council for initially setting up a small grants research funding scheme worth \$70, 000.00 from the AIDS levy in 2010 through which four studies had since been funded and findings shared.

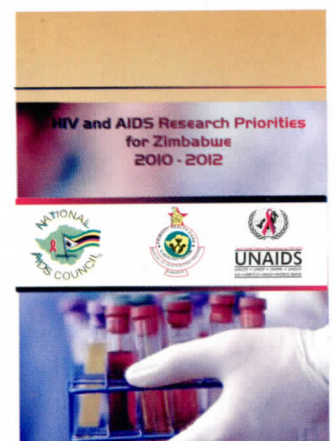
Guided by the research priorities, NAC supported four studies in 2010. Findings from these studies were disseminated during the launch of the priorities. The following are the four studies funded in 2010: Household coping mechanisms with economic costs of HIV and AIDS; Condom availability, accessibility and usage in opportunistic infections and anti-retroviral therapy clinics; Effectiveness of vaccines on children living with HIV; and Barriers to Prevention of Mother to Child Transmission of HIV.

To ensure the carrying out of further studies recommended in the newly launched Research Priorities, the NAC Board Vice

Chairperson Dr Phineas Makurira announced at the launch that NAC had set aside \$180, 000.00 in the 2011 budget.

The full HIV and AIDS Research Priorities document below can be downloaded from the following link:

<http://www.nac.org.zw/sites/default/files/Zimbabwe-HIV-and-AIDS-Research-Priorities-2010-2012.pdf>



NAC Research and Documentation Co-ordinator Mr Freeman Dube.

Zimbabwe , Botswana exchange notes on HIV and AIDS response

..as Bots achieves 94 % ART coverage with 75 % domestic funding



By Orirando Manwere, Deputy Editor
omanwere@nac.org.zw

AN eight-member Zimbabwean delegation comprising officials from the National AIDS Council and the Ministry of Health and Child Welfare and the Zimbabwe AIDS Network, recently visited Botswana on a week-long "Look and Learn" mission aimed at appreciating how the neighboring country has achieved 93% national coverage on Anit-retroviral Therapy (ART) with 75% domestic funding over the years.

The delegation, led by NAC Board Vice Chairperson Dr Phineas Makurira, followed an earlier resolution by the NAC board's Operations Research and Documentation sub-committee to visit Botswana to share and exchange notes on the response to the pandemic.

The delegates held meetings with the management of National AIDS Coordinating Agency of Botswana, Ministry of Health officials and various partners in the Botswana response, and also visited government and ART sites.

According to the delegation report, Botswana has an estimated population of 1,8 million and a national HIV prevalence of 17 percent in 2010.

A total 164 000 are receiving ART from public health institutions based on the old CD4 count threshold of 250, with 90 % of them on first line drugs.

The country has also recorded positive results in its Prevention of Mother to Child Transmission programme with over 96% of children born to HIV positive coming out negative.

Regular CD4 count and viral load testing is done as part of patient monitoring. No drug stock outs have been recorded at site level for ARVs which are all imported as there are no local manufacturers of ART commodities.

The Botswana National AIDS Co-ordinating Agency (NACA), which is the equivalent of the National AIDS Council of Zimbabwe, is housed under the Office of the President and coordinates the multi-sectoral responses and administers all resources for the national response from partners and government.

Due to the location of NACA (in the President's Office) all Ministries participate in quarterly meetings and representation is at the highest level.

Botswana's stable economy and small population, have seen its treasury being able to channel adequate resources towards its national response, with donors contributing only 25 %.

As is the case with Zimbabwe, the Botswana Government in 1999, through the Presidential Directive CAB 32/99, decided that the implementation of the HIV and AIDS Programme should be declared an emergency and that leadership and coordination structures needed to be strengthened.

This resulted in the establishment of NACA then situated in the Ministry of Health before it later moved to a Ministry of State in the Presidents' Office. All government ministries are represented by their respective permanent secretaries on the NACA. The Council meets quarterly and is chaired by the former President of Botswana. At these meetings, all ministries present their HIV and AIDS programmes highlighting successes and challenge in the quarter.

Botswana has a Public Private Partnership (PPP) programme with Debswana (Diamond mining company) wherein the company provides treatment infrastructure and human resources for communities around the mines.

Under this arrangement, patients who are stable on ART are attended to by private medical practitioners, with the doctors being paid a negotiated rate per patient seen on a quarterly basis. Private pharmacies are also paid a dispensing fee as they get supplies from government. Laboratories are also paid negotiated rate for tests done through a scheme which is administered through a Medical AID company selected through tender.

NAC Chief Executive Officer, Dr Tapuwa Magure said the delegation had learnt quite a lot for the Botswana experience, particularly on the PPPs contribution and the provision of payments to doctors and laboratory technicians.

"We are obviously going to analyse their approaches and emulate those that suit our situation and can make a significant contribution to our national goals and priorities in the response to the pandemic. In particular, we are already exploring the concept of the public private partnerships as well as the possibility of including senior government officials like permanent secretaries and company directors on our National Partnership Forum to ensure appreciation of the work we do and the opportunities for further support," he said.



From right NAC communications Director MS Medelina Dube, ZAN Executive Director Lindiwe Chaza-Jangira, Botswana NACA National Co-ordinator Mr Richard K Mathlare and his team in a consultant meeting in Gaborone

Independent View Point

"I am impressed and inspired by NAC's work to provide the media with necessary tools to reach all parts of the country with consistent, truthful and powerful messages"

I recently attended a media workshop for journalists and editors in Zimbabwe.

It was organized by the National AIDS Council (NAC) and the objective was to educate and inform the media to accurately report on HIV and AIDS related issues. The attendees were encouraged to play an active role in the country's response to the pandemic by seeking out opportunities to raise awareness and educate Zimbabweans on issues related to prevention, treatment and care.

It was a busy few days with a packed schedule. The NAC leadership provided an overview of the organization and presented on financing the national response to HIV and AIDS. There were also speeches by media leaders, members of parliament and people living with HIV.

The financing discussions began with the AIDS levy, which is a tax that all employed Zimbabweans pay. It goes directly to the NAC and it helps fund antiretroviral medication and distribution, as well as other related programs. Another major source of financing is the Global Fund, which is an international financing institution that invests in the fight against AIDS, malaria and tuberculosis. The application process was discussed in great

fueled by Zimbabwe's recent unsuccessful application for Round 10 funding.

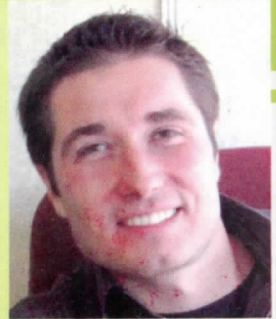
There was a lively presentation by a person living with HIV. His speech was inspiring and surprisingly cheerful and entertaining. He spoke about experiencing a difficult period of depression and illness in response to his diagnosis. But he discussed his resilience and ability to take control of the virus and make positive contributions to society. His words and his story are living proof that being infected does not necessarily end your life. It is possible to live positively and happily.

Next, a member of parliament spoke about the government's role in responding to HIV and AIDS. There is a committee in the Zimbabwean parliament which ensures that HIV and AIDS related issues remain a priority for policymakers.

There was also a condom demonstration session to show proper use. The female condom demonstration was especially interesting because most people, including myself, were not well-educated on the use of female condoms.

I really enjoy attending these types of events as they garner support and participation in the response to HIV and AIDS. At this event I was reminded that given the necessary

By Tzviatko Chiderov



information, everyone can and should participate in efforts to address HIV and AIDS.

I am impressed and inspired by NAC's work to provide the media with the tools necessary to reach all parts of the country with consistent, truthful and powerful messages.

****Tzviatko Chiderov is a volunteer from Chicago, USA, and was on assignment in Zimbabwe developing the NAC website from March to July under the Voluntary Services Overseas. This article was posted on his blog while he was still at NAC. He has since returned to Chicago***

Picture below - Tzviatko Chiderov displays the beautiful Zimbabwe map gift given to him by NAC staff at his farewell function at the NAC headquarters in Harare. Flanking him on the left are Trust Govere (Advocacy Co-ordinator) and Madelina Dube (Communications Director) On the right are Ms Sidudzile Mhlanga (Human Resources Director) and Mr Raymond Yekeye, the Operations Director.



NAC, partners scoop bronze medal at ZITF 2011 exhibition

. Public hails supermarket approach . Over 300 undergo HIV testing at stand

By Orirando Manwere

THE National AIDS Council (NAC) and several of its partners effectively exhibited under one roof at the 2011 Zimbabwe International Trade Fair in Bulawayo where the "HIV and AIDS supermarket" stand scooped an historic bronze medal in the non commercial category.

In line with the global "Three Ones" principle which is the cornerstone of the national multi-sectoral response to HIV and AIDS, the NAC secured a spacious stand and partnered 20 implementing organizations in mounting an integrated "HIV and AIDS supermarket" exhibition.

The exhibition was guided by the current World AIDS Campaign theme "Universal Access and Human Rights- Together we will make it," supported by the slogan "Get tested, its your entry to universal access to HIV and AIDS services."

The "Three Ones" principle entails - One National Co-coordinating Authority (NAC), One National Strategic Framework- the Zimbabwe National HIV and AIDS Strategic Plan 2 and One National Monitoring and Evaluation System administered by the NAC.

HIV Testing

A total of 298 individuals aged between 15 to 55 and 22 couples underwent voluntary HIV testing and counseling on the Matabeleland AIDS Council stall during the week-long exhibition. Of the 298 individuals tested, 269 were HIV negative while 29 were positive and were immediately referred to local opportunistic infections clinics for CD4 count tests. Only three out of the 22 couples tested positive and were also referred while the remaining 10 were negative.

In total, 2192 people passed through the stand, while 1 940 condoms and 2 500 various pieces of information, education and communication materials on HIV and AIDS were issued during the show.

Commenting on this year's exhibition, Bulawayo Provincial AIDS Co-ordinator Sinatra Nyathi, said the 2011 ZITF exhibition had improved from last year's,



NAC staff show off the certificate and bronze medal won at ZITF : from left Mrs Sinatra Nyathi, Mrs Patience Ndlovu, Mrs Caroline Sirewu, Mr Mhlauri Mpofo and Mr Emmanuel Rubaya

thus justifying the bronze medal (third prize) in the non commercial category, while unity of purpose among partners and the public response was "just incredible."

"Although we have always exhibited with our partners over the years, this years were more organized as we were in one hall which made referrals easy to our visitors.

The exhibition clearly demonstrated how NAC and its various partners have effectively responded to the pandemic through the multi-sectoral approach in the main thematic areas of the Prevention, Treatment, Care and Support, Mitigation, Meaningful Involvement of People Living with HIV and AIDS (MIPA), Co-ordination, Workplace and Management, Monitoring and Evaluation, strategic policy development and implementation, among other aspects

Specialised areas

"Partners exhibited under the areas they specialize in and people were able to appreciate our coordinating role and the roles played by partners in the response. "The number of people tested was also very encouraging and this shows that we are slowly but surely beginning to address stigma and discrimination."

The Zimbabwe AIDS Network Bulawayo Provincial Coordinator, Mr David Mkandhla, who is also the chairperson for the city's Provincial AIDS Action Committee, concurred, adding that the presence of people living

positively with HIV from the Zimbabwe National Network for People Living with HIV (ZNNP+) went a long way towards influencing people to get tested on the stand.

"The network members gave their testimonials and demonstrated that one can live positively with HIV and this inspired visitors to our stand to get tested," he said.

Mr Mkandhla added that visitors had expressed appreciation on the bringing of various partners together.

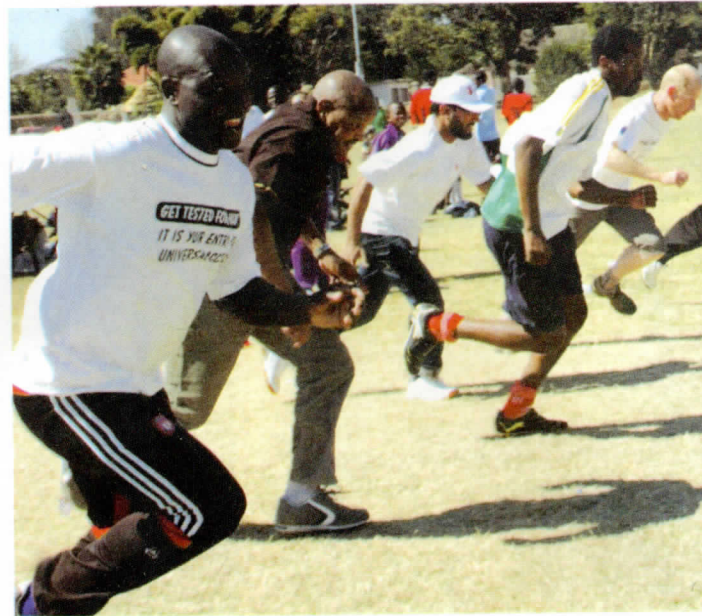
Some of the partners which exhibited at the stand comprised the following the Zimbabwe AIDS Network, ZNNP+, Padare, Population Services International who were marketing Male Circumcision, Matabeleland AIDS Council (testing and counseling and behavior change, National Employment Council for the Transport Industry (Workplace), the National Young People's Network on HIV and AIDS, Medicines Control Authority of Zimbabwe (condom testing) Mpilo and Ingutsheni Hospitals (ART), among others.



Father and son scoop prizes for NAC at Inter-NGO games



Timely take off- Kudzayi Manenji in black jersey strides off the starting point to a triumphant finish in the Boy's 100m race at the Inter NGO sports gala



NAC Finance Director Albert Manenji romps home first in the Director's 100m race

Sports Reporter

NAC Finance Director Albert Manenji and son Kudakwashe Manenji hogged the lime light at the 2011 Inter-NGO games when they romped home first in the Directors and boys open 100 metre races, while the NAC soccer team (pictured on next page), volleyball and tug of war teams reached the quarter and semi-finals respectively.

The older Manenji shrugged off stiff completion from five other directors present at the games, while his son easily dominated the heats and the final race in which he totally outpaced fellow competitors to clinch the silverware on offer.

The NAC soccer team, assembled on the day of the tournament, respectfully lost 2-0 in the quarter finals to eventual finalists Care International after receiving a bye in the first round.

Were it not for two school boy blunders by NAC goal-keeper Gary Chitonho, NAC could have easily sailed through to the semi-finals as they played a much more mature game than their opponents with veterans Alfonce Nengoma and Orirando Manwere solid and confident in defence, while young Manenji was a thorn in the Care International defence.

Substitute goalkeeper Freeman Dube made two breath-taking saves in the match and everyone was convinced he should have been the first choice stopper.

The volleyball team lost 2-nill to the same opponents in the semi-finals after putting up a scintillating display against Zimbabwe Women Lawyers Association whom they thumped 2-nill in a best of three set which was watched by the NAC Chief Executive Officer , Dr Tapuwa Magure.

Setter Oscar Mundida and rover Orirando Manwere, were outstanding in both matches and won accolades from the opposition. NAC lost the first set 15-13 and 15- 12 in the second after leading 9-2 at one stage.

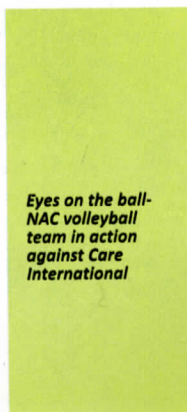
The tug of war team beat Care in the quarter final before losing to Population Services in the semi finals.

The 2011 NGO games were organized by Population Services International under the

theme "Health Lives: Measurable Results"

A total of 16 organizations participated in different disciplines comprising soccer, volleyball, athletics, tennis, netball, egg and spoon race, walking race and darts, among others. The games were aimed at fostering interaction among humanitarian organizations, having fun and giving back to the communities they served. The following teams won in the given disciplines:

- ☆ Soccer- MSF Belgium
- ☆ Volleyball- Care International
- ☆ Netball- MSF Holland
- ☆ Tennis- World Vision
- ☆ Tug of war- PSI
- ☆ Boys and directors 100 m- NAC



Eyes on the ball- NAC volleyball team in action against Care International



National AIDS Council soccer team-2011



The NAC soccer team players and officials line up before the quarter final match

Premier League stars lead HIV response

PREMIER League stars and coaches are set to attend workshops around the country as part of a United States government-funded programme to raise HIV awareness.

The United States Embassy, through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), recently announced it would give a \$60,000 grant to support a new partnership between the Footballers Union of Zimbabwe (FUZ) and Population Services International-Zimbabwe (PSI-Zim) to prevent the spread of HIV targeted at the union's membership, football fans and young people.

"We are pleased to support this partnership whose focus is the young people of Zimbabwe. They are the future – both the future of our societies and the future of the disease," said Charles Ray, U.S. Ambassador at the programme launch ceremony held at Motor Action Sports Club in Harare.

The PEPFAR grant will enable FUZ, with technical support from PSI-Zim, to conduct HIV education programmes for

its 600 members, who include professional players and coaches from 16 soccer teams in Zimbabwe's top football leagues.

Through the programme, the footballers will learn how to take care of themselves and their families as well as share this knowledge with their fans, many of whom are boys and young men.

"You heroes of the pitch can become lifestyle heroes as well. We are all able to make some contribution, big or small, to improve lives and to prevent the spread of HIV. Your contributions have the potential to be critical in saving lives," said Ambassador Ray.

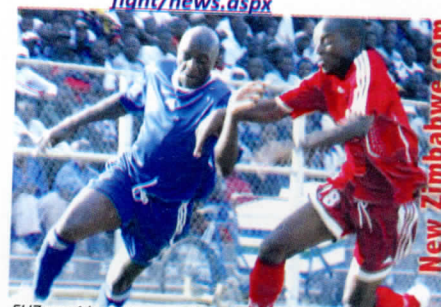
FUZ is composed of more than 1,000 retired and current professional Zimbabwean football players, youth players and coaches. Dynamos midfielder Desmond Maringwa is the current president of the Footballers Union of Zimbabwe.

Maringwa, together with several celebrities including Zimbabwe goalkeeper Washington Arubi, Big Brother star Munyaradzi Chidzonga and singer Alex Kawara joined the U.S. Ambassador on World AIDS Day last year at a PSI testing centre to encourage Zimbabwean youth to get tested for HIV.

This new initiative is a result of that successful collaboration and seeks to spread HIV prevention messages to 65% of Zimbabwe's population under the age of 30.

PEPFAR was launched in 2003 as a five-year global pledge to the HIV response. In 2008, PEPFAR was renewed for another five years. This year, the U.S. government, through PEPFAR, is providing more than \$57 million to Zimbabwe for HIV and AIDS programmes.

Story and picture courtesy of www.newzimbabwe.com/news-5-1-6-3-
Premier+League+stars+lead+HIV+fight/news.aspx



FUZ president, Desmond Maringwa in action in a recent soccer match (left)

HIV Interventions through the Lens

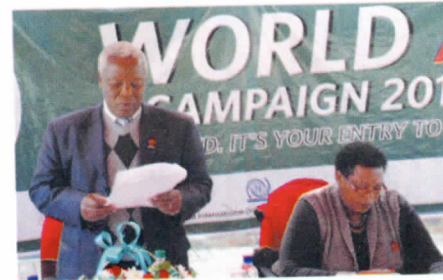
Drugs Handover



Ministers Hon Mpariwa and Dr Sekeramayi (seated second and fourth from left), NAC Board members and directors pose for a group photo in front of a truck laden with the new drugs at NAC HQ.



NAC CEO Dr Tapuwa Magure welcoming guests to drugs hand over function.



Dr Sydney Sekeramayi addressing guests at the hand over function. Next to him is Labour and Social Welfare Minister Hon Paurina Mpariwa.

ZITF Exhibition 2011



NAC Bulawayo District AIDS Coordinator Patience Ndllovu (left) attending to Red Cross students at the NAC ZITF stand.



Catching them young- Pupils through the NAC stand at ZITF 2011



Youths through the National Young People's Network on HIV and AIDS stand at ZITF

Research Priorities Launch



Making a point-NAC Monitoring and Evaluation Director Mr Amon Mpofo (right) contributing during the Research Priorities launch, next to him is Mr Adonija Muzondiona, Harare Provincial AIDS Co-ordinator



Leadership support - from left front row - NAC Board Vice Chair Dr Phineas Makurira, NAC Board chair Rev Muromberdzi Kuchera Board members Mr Benard Nyathi and Mr David Ngweya at the launch of the HIV and AIDS Research Priorities.

HIV Interventions through the Lens

Desk Editors' Workshop



Interviewing time- Daily News senior writer Nkululeko Sibanda (right) interviewing Minister Shamhu while fellow scribe and H-Metro News Editor Robert Mkondiwa in dreads and NAC CEO Dr Magure listen

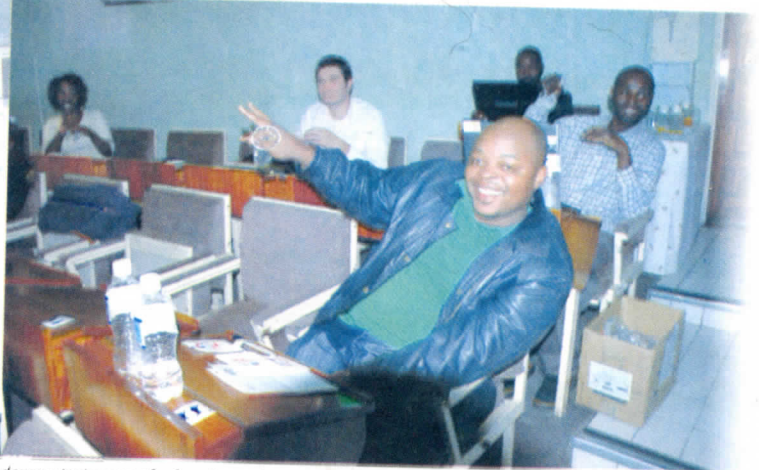


From left- ZBC desk editors Albert Chekayi, Justin Mahlaha and Simbarashe Namusi following a presentation during the News Editors workshop

Reporters Workshop



This is how you do it- NAC Youth Co-ordinator Beauty Nyamwanza demonstrates use of a female condom while journalists and NAC staff emulate



Sunday News Editor Paul Mambo (right) and Herald sub-editor Cathrine Murombedzi take questions from journalists during the workshop.



Journalists listen and take notes during the workshop.



SafAIDS media officer and NAC Board Member Mrs Beatrice Tonhadzayi - Ngondo making a presentation to journalists at the workshop.

Inter-NGO Games



NAC volleyball team line up before the quarter final match



NAC CEO Dr Tapuwa Magure (third from left) poses for a group photo with the NAC volleyball team.



The triumphant NAC Finance Director Albert Manenji (right) being led to the winners registration desk by a track judge.

HIV Interventions through the Lens

Drugs Handover



Ministers Hon Mpariwa and Dr Sekeramayi (seated second and fourth from left), NAC Board members and directors pose for a group photo in front of a truck laden with the new drugs at NAC HQ.



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Research Priorities Launch

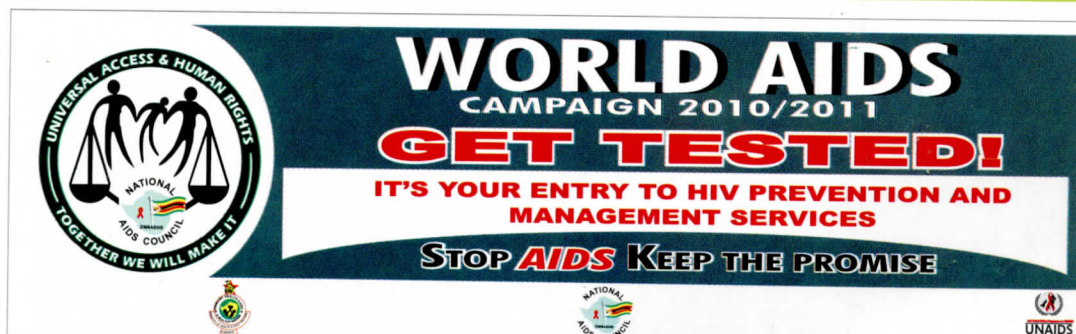


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Mutare to host 2011 World AIDS Day commemoration



Flash back Part of the huge crowd at the 2010 World AIDS commemoration at Rimuka Stadium in Kato



THEME AND CAMPAIGN LOGO FACT SHEET

1-Background to the World AIDS Day

The World AIDS Day is commemorated on 1 December each year. It is a day specifically set aside to raise awareness on HIV and AIDS, remember those who have passed, call for global action in the response to the epidemic and celebrate successes which have been achieved in the provision of HIV and AIDS prevention, treatment, care and support services.

The day was first commemorated as World AIDS Day in 1988 when the World Health Organisation designated it so. The commemoration has since moved from being a one day event to a campaign that runs throughout the year.

World AIDS Day commemorations and campaigns in Zimbabwe are held under the leadership and facilitation of the National AIDS Council in a multi-sectoral framework that brings together Government, United Nations agencies, civic society, business, the religious sector and organisations involved in the response to HIV.

2- THEME-

The theme for 2010/ 2011 is "*Universal Access and Human Rights- Together we will make it*" is a continuation of the 2009/2010 theme. It seeks to raise awareness, call for action to support measures to prevent and manage the spread of HIV through advocating for HIV and AIDS services to be universally accessed.

3- WHAT IS UNIVERSAL ACCESS?

-It is universal access to :

- Comprehensive HIV and AIDS information
- Affordable anti-retroviral therapy services
- Affordable treatment services for HIV and AIDS related health conditions
- Nutritional support for people infected and affected by HIV and AIDS
- Psycho-social support for people infected and affected by HIV and AIDS
- Primary health care

4- WHAT ARE HIV AND AIDS HUMAN RIGHTS?

- The right to correct and accurate HIV and AIDS information
- The right to treatment, care and support
- The right to confidentiality
- The right to be treated equally and with respect

5- HOW WILL UNIVERSAL ACCESS AND HUMAN RIGHTS BE ACHIEVED?

- Political commitment and participation
- Community commitment and participation
- Multi-sectoral participation
- Strengthening support systems to sustain HIV and AIDS services

6- BENEFITS OF UNIVERSAL ACCESS AND HUMAN RIGHTS

- HIV infections will be reduced
- Reduced HIV and AIDS mortality
- Improved quality of HIV and AIDS services
- Prolonged and healthy life for people infected and affected by HIV and AIDS
- Sustainable HIV and AIDS prevention, treatment and care services
- Improved production in sectors of the economy

7-WHY DO WE NEED TO BE TOGETHER?

-To better co-ordinate our efforts in the national response to HIV and AIDS

-The global "Three Ones Principle" brings all sectors together through:

- One Coordinating authority which is the National AIDS Council
- One national strategic framework- the Zimbabwe HIV and AIDS Strategic Plan
- One national monitoring and evaluation system- The National HIV and AIDS M and E System administered by the NAC

9- THEME LOGO ELEMENTS

-THE PEOPLE JOINING HANDS- This depicts the multi-sectoral nature of the national response to the epidemic

-THE NAC LOGO- represents the NAC's co-ordination role in the national response to HIV and AIDS through the multi-sectoral approach

THE GREEN CIRCLE- Represent universal access

THE RED RIBBON- is a symbol representing solidarity with people living with HIV and AIDS

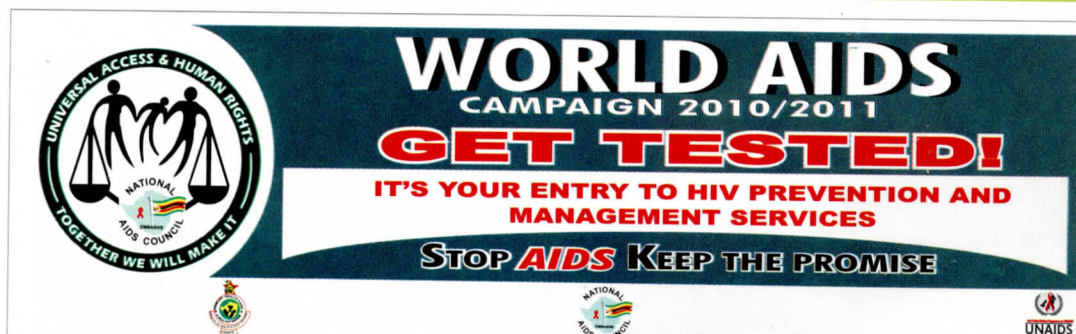
-THE TWO SCALES- represent justice and equality symbolising human rights

THE 2011 World AIDS Day commemorations will be held at Sakubva Stadium in Mutare under the ongoing theme- Universal Access and Human Rights and Human Rights- Together we will make it.

It will be supported by the slogan- Get tested, its your entry to universal access- Stop AIDS, Keep the promise. Preparations for the annual event have since started with various committees carrying out specific tasks at both the national and provincial level. The National AIDS Council Communications Director Ms Medelina Dube said in a recent interview that the current theme would run till 2015 in line with the Millennium Development Goal number six aimed at ensuring the attainment of universal access to HIV and AIDS services. "We continue to scale up efforts to ensure the we achieve universal access to HIV and AIDS in all thematic areas of our response to the pandemic. As stated in our theme- Together we will make it through our multi-sectoral approach which has seen our country recording a marked and continued decline in HIV prevalence of the years," said Ms Dube.

Ms Dube said all implementing partners, the corporate sector, government departments, communities and individuals were welcome to contribute in cash and kind towards the event. She said they should contact the NAC Communications department at head office or the Manicaland office on contacts at the back page of this bulletin. Updates on the ongoing World AIDS Day and Campaign preparations can be accessed from the NAC website www.nac.org.zw :

Mutare to host 2011 World AIDS Day commemoration



Flash back Part of the huge crowd at the 2010 World AIDS commemoration at Rimuka Stadium in Kato



THEME AND CAMPAIGN LOGO FACT SHEET

1-Background to the World AIDS Day

The World AIDS Day is commemorated on 1 December each year. It is a day specifically set aside to raise awareness on HIV and AIDS, remember those who have passed, call for global action in the response to the epidemic and celebrate successes which have been achieved in the provision of HIV and AIDS prevention, treatment, care and support services.

The day was first commemorated as World AIDS Day in 1988 when the World Health Organisation designated it so. The commemoration has since moved from being a one day event to a campaign that runs throughout the year.

World AIDS Day commemorations and campaigns in Zimbabwe are held under the leadership and facilitation of the National AIDS Council in a multi-sectoral framework that brings together Government, United Nations agencies, civic society, business, the religious sector and organisations involved in the response to HIV.

2- THEME-

The theme for 2010/ 2011 is "*Universal Access and Human Rights- Together we will make it*" is a continuation of the 2009/2010 theme. It seeks to raise awareness, call for action to support measures to prevent and manage the spread of HIV through advocating for HIV and AIDS services to be universally accessed.

3- WHAT IS UNIVERSAL ACCESS?

-It is universal access to :

- Comprehensive HIV and AIDS information
- Affordable anti-retroviral therapy services
- Affordable treatment services for HIV and AIDS related health conditions
- Nutritional support for people infected and affected by HIV and AIDS
- Psycho-social support for people infected and affected by HIV and AIDS
- Primary health care

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ZERO New HIV infections for women and girls.

ZERO HIV Discrimination against women and girls.

ZERO Mother to Child transmission.

ZERO AIDS related deaths among women and children.

ZERO Tolerance to Gender Based Violence.



Ministry of Women Affairs, Gender
and Community Development



UNAIDS

JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

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UNICEF ILO
WFP UNESCO
UNDP WHO
UNFPA WORLD BANK



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