Early initiation on Antiretroviral therapy (ART) control HIV, protects the immune system, and transforms morbidity and mortality among people living with HIV. Among infants, children and adolescents growing up with HIV, it also promotes normal growth and development. Over the past two decades, there has been a dramatic shift in the prognosis for children, adolescents and young people living with HIV (CAYPLHIV) due to the increased availability and scale up of paediatric and adolescent ART. However, ART initiation, retention, adherence and viral suppression among CAYPLHIV continues to lag behind that of adults, particularly in adolescents\(^1\). In sub-Saharan Africa, which is home to 85% of adolescents with HIV globally, adolescents are the only population with increasing mortality rates\(^5\).

Zvandiri supports government to identify CAYPLHIV who have not been initiated on ART, link them to treatment services, support preparation for ART and continued adherence through the provision of child and adolescent information, counselling and support for the young person and their family.

**Strengthening the Evidence**

- **The Zvandiri Trial**, a cluster randomized controlled trial of the Zvandiri model, found a strongly significant effect on viral suppression among adolescents (10-19 years) receiving Zvandiri services, compared with those receiving standard of care\(^6\).
- **The Zvandiri-Friendship Bench Trial** found significant improvements in viral suppression among adolescents living with HIV and common mental disorders when receiving counselling from CATS (72.2% to 10.3%). This was improved further when CATS provided enhanced counselling (68.4% to 2.4%)\(^7\).
- **Operations research** has found that CATS are effective at promoting ART initiation among CAYPLHIV. Of 1,193 CAYPLHIV newly diagnosed with HIV, 1,153 (96.6%) were initiated on ART with 99% starting on the same day of diagnosis\(^8\).
- **The Gokwe Study** found that adolescents engaged in Zvandiri were more likely to adhere to ART and be retained in care than those receiving standard care alone\(^9\).
- In a study to explore **long term outcomes among graduated CATS**, 92% of CATS remained with undetectable viral loads 9 years later\(^10\).
- In a qualitative sub-study of **The Peer Support (PESU) trial**, adolescents with virological failure attributed their virological failure to poor mental health and improvements in their health to engagement with Zvandiri\(^11\).
SUPPORTING CHILDREN, ADOLESCENTS AND YOUNG PEOPLE TO BE INITIATED ON TREATMENT, TO ADHERE AND BE VIROLOGICALLY SUPPRESSED

Advocacy

- Participation of Zvandiri young advocates in the development of global and national treatment guidelines for CAYPLHIV
- Development of mixed media advocacy campaigns to increase awareness of the rights, needs and experiences of CAYPLHIV around ART, monitoring and viral load, disseminated through radio, social media, webinars, exhibitions, newspapers and international conferences
- Advocacy for the inclusion of peer-led, community, psychosocial support services as a model of differentiated service delivery for CAYPLHIV

Guidelines, Curricula and Tool Development

- Support to the development of global and national guidelines on:
  - Service delivery for the treatment and care of children and adolescents living with HIV
  - Differentiated Service Delivery for adolescents and young people
- Technical assistance to:
  - The MoHCC in the development of the national HIV integrated training curriculum
  - The Ministry of Social Welfare in the development of the national HIV sensitive case management system
- Development of:
  - Training curricula to guide virtual and face to face capacity strengthening of health care workers, CATS and Young Mentor Mothers providing treatment and care services for CAYPLHIV
  - Zvandiri Mentor Standard Operating Procedures to guide the provision of services to support ART initiation, monitoring and viral load for CAYPLHIV
  - Treatment and Care SOPs to guide Zvandiri and other implementing partners in the collaborative provision of treatment and care services for CAYPLHIV across clinic and community
  - CATS Service Delivery Manual to guide CATS in the provision of differentiated service delivery for their clients
  - A wide range of mixed media tools to support treatment literacy, counselling and support for CAYPLHIV and their caregivers (games, books, comics, animations, fact sheets)
- Adaptation of WHO’s global standards for quality health care services for adolescents
- Development of the CATS Hub, a digital app to equip CATS with digital job aides and tools

What do ALHIV think?

In October 2020, Zvandiri led a global consultation on behalf of WHO as part of the WHO guidelines development process. 388 ALHIV were consulted across 45 countries. ALHIV unanimously agreed that mental health and psychosocial support services are critical in improving their HIV outcomes and engagement in health services.
Strengthening the Workforce

- On site and virtual training and mentorship of:
  - Health care workers to provide quality, client-focused paediatric and adolescent treatment and care
  - CATS and Young Mentor Mothers to support ART initiation, adherence, viral load monitoring and management of high viral load
  - Social workers and community case care workers to provide HIV sensitive case management
  - Clinic-based quality improvement initiatives

Strengthening Families

- Information and counselling for caregivers of children and adolescents to promote their understanding and capacity to support ART initiation and adherence through
  - Home Visits, Clinic Visits, Mhealth and Support Groups
  - Caregiver training workshops
  - Development of IEC materials for caregivers (books, fact sheets, animations, games)
  - Engagement of caregivers in training, advocacy, research, conferences, webinars and material development

Service Delivery

- **Identification and referral** of children and adolescents in need of ART initiation
- **Information, counselling and support** for children, adolescents and their caregivers to support ART and VL literacy, adherence and retention through;
  - Home Visits, Clinic Visits, Support Groups and MHealth
  - Co-facilitation of **clinic adolescent days** combining ART refill, VL monitoring, psychosocial support, and screening for TB and common mental conditions
- **Defaulter tracing**
- **Enhanced adherence counselling**
- **Community ART refill and Viral Load Bleeding**
- **Joint case management** with clinic and community health and social protection cadres
Results
In 2020,

- **95%** of children, adolescents and young people confirmed HIV positive were linked to ART
- **55,833** children, adolescents and young people supported in Zvandiri through home visits, clinic visits, support groups and m-health support
  - **88%** viral suppression
  - **2,779** CAYPLHIV supported through enhanced adherence counselling
  - **96%** tracing of ART defaulters
  - **79%** completion of Viral load bleeding referrals
- **97%** CATS are virologically suppressed
- **98%** Young Mothers are virologically suppressed
- **23,400** caregivers supported with counselling and training

References