

Social Protection

Strengthening social protection for children, adolescents and young people living with HIV



HIV outcomes in children, adolescents and young people living with HIV (CAYPLHIV) continue to lag behind the gains seen in adult populations across the HIV cascade. HIV sensitive social protection recognizes that outcomes for CAYPLHIV are commonly determined by their social and economic circumstances. As CAYPLHIV are usually dependent on others for access to information, services and support, the uptake of HIV testing services, treatment and care as well as adherence and retention can be improved through strengthening the environment in which they live. Yet historically, the HIV response has been implemented in parallel with social protection services.

Zvandiri works with both health and social protection services to strengthen the identification and management of CAYPLHIV who are facing challenges in accessing the HIV and protection services they need, with the aim of improving both their physical and psychosocial well-being and quality of life.

Strengthening the Evidence

Zvandiri has conducted a number of studies which have confirmed that children, adolescents and young people engaged in Zvandiri have:

- Improved access to HIV testing, treatment and care services¹
- Improved engagement in services and retention in care^{1,2,3}
- Improved adherence to ART and viral suppression^{1,2,3,4}
- Improved psychosocial well-being and mental health^{2,3,4}
- Improved supportive environments at home and reduced stigma^{2,3,4,5}
- Improved identification and response for CAYPLHIV with poor mental health and at risk of violence and neglect^{3,4,5}
- Improved capacity of service providers to provide child and adolescent friendly, HIV sensitive case management services^{3,4}
- Improved identification, referral and management of CAYPLHIV with disability⁶

These same studies confirm:

- trained, mentored young people living with HIV (CATS) are effective at improving social protection for CAYPLHIV^{1,2,3,4,5,6}
- a sustained, comprehensive package of differentiated child and adolescent-focused services which integrate HIV and social protection services is needed to improve HIV outcomes^{1,2,3,4,5}



▶ The Zvandiri Trial policy Brief

Advocacy

- Development of a policy brief on differentiated service delivery for adolescents living with HIV in Zimbabwe - The Zvandiri Cluster Randomized Trial
- Engagement of Zvandiri young advocates in global consultations on the role of OVC programming in strengthening clinical outcomes among CAYPLHIV
- National, provincial and district level dialogues regarding the social protection needs of CAYPLHIV and the role of HIV sensitive case management and CATS in strengthening the identification and response to child protection violations among CAYPLHIV
- Engagement of CAYPLHIV in the development of their own digital stories documenting the impact of HIV sensitive social protection for global and national advocacy
- Documentation of the work of Zvandiri in improving access to treatment amongst ALHIV in ten digital stories, disseminated through a global webinar

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Effect of a differentiated service delivery model on virological failure in adolescents with HIV in Zimbabwe (Zvandiri): a cluster-randomised controlled trial

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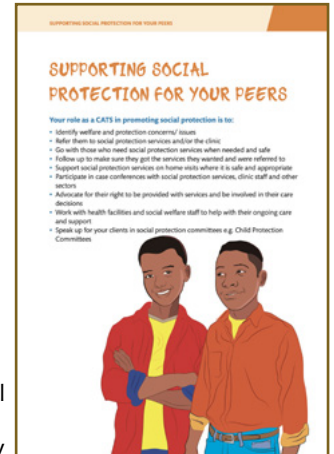
▶ The Zvandiri Trial



▶ Young people living with HIV were awarded an opportunity to document the impact of Zvandiri's approach to social protection in their own digital stories.

Guidelines, Curricula and Tool Development

- Technical assistance to the Ministry of Public Services, Labour and Social Welfare in the design, implementation and scale up of the **national HIV sensitive case management system**
- Development of a **training curriculum** for social workers, case management officers and community case care workers in HIV sensitive case management
- Development of a **training curriculum for HCWs and social workers** to strengthen the identification and management of CAYPLHIV with disability
- Development **standard operating procedures** to guide Zvandiri Mentors in the provision of social protection services
- Development of the CATS Service Delivery Manual to guide CATS in supporting social protection for their peers: **Supporting Social Protection for your peers**
- Development of a **screening tool** for social protection risks
- Development of **child and adolescent focused IEC materials** to share information on child rights and social protection, including tools which are disability-sensitive
- Development of **IEC materials for caregivers** to promote knowledge and supportive environments for CAYPLHIV



Strengthening the workforce

- Training and mentorship of health care workers to provide
 - child and adolescent focused differentiated services for CAYPLHIV
 - integrated psychosocial support and mental health services within HIV testing, treatment and care
 - integrated disability services within HIV testing, treatment and care
- Training and mentorship of social workers and case management officers to identify and respond to the protection and welfare needs of CAYPLHIV through an HIV sensitive case management system
- Training and mentorship of CATS to:
 - provide an integrated package of HIV, mental health and protections services for CAYPLHIV
 - identify, refer and support CAYPLHIV in need of social protection and welfare services
- Facilitation of multidisciplinary case conferences with HIV, protection and mental health cadres to jointly plan and deliver appropriate care for CAYPLHIV, particularly complex clinical and psychosocial cases

Service Delivery

- Information sharing with CAYPLHIV, their caregivers and communities on the rights and responsibilities of CAYPLHIV
- Facilitation of support groups for strengthening knowledge, social networks and life skills
- Linkage of CAYPLHIV to services as needed, including social welfare, disability, education, mental health and the national case management system
- Pro-active identification of welfare and social protection concerns for CAYPLHIV during home visits
- CATS-led identification and referral of CAYPLHIV at risk of neglect, abuse and exploitation
- Enhanced support for CAYPLHIV in need of child welfare or protection services
 - CATS participation in multi-sectoral case conferencing for CAYPLHIV in need of child welfare or protection services
 - Joint home visits with the Department of Social Development for children and adolescents and their caregivers, where safe and appropriate
 - Work with clinic and social welfare staff to plan and help with their ongoing care and support
 - Monitoring, follow up and support through SMS / WhatsApp messaging



Results


- **75,000** CAYPLHIV engaged in Zvandiri services since 2004
 - Improved uptake of HIV testing, linkage to treatment and care, adherence and retention, viral suppression and mental health
- **1,479** trained, mentored CATS providing integrated HIV, protection and mental health services for their peers
- **130** Young Mentor Mothers providing integrated HIV, protection and mental health services for their peers
- Integration of Zvandiri within **568** health facilities in Zimbabwe
- **88%** viral suppression among **55,833** CAYPLHIV engaged in Zvandiri
- **496** support groups integrated within **537** health facilities in Zimbabwe
- Improved access to health services for 39,995 CAYPLHIV referred for ART, Viral Load testing, TB services
- **15,425** adolescents and young people screened for mental health and **26%** who were confirmed to be at risk were supported
- **157** CATS have been trained on technical skills and have established income generating activities
- **8** young key populations supported with adherence and SRHR services in Chitungwiza
- Adaptation of Zvandiri during emergencies such as Cyclone Idai and COVID-19 to sustain HIV, mental health and protection service for CAYPLHIV.
 - Supported **3,414** CAYPLHIV during the Cyclone Idai through economic strengthening and mental health support
 - Ensured that **15,896** clients had adequate supply of ART through the first month of COVID-19 lockdown.

Lessons Learned

- Integration of social protection services within HIV testing, treatment, care and support is an effective strategy for improving clinical and protection outcomes through:
 - Supporting the identification of CAYPLHIV facing barriers to HIV testing, treatment and care services
 - Strengthening the linkage and response for CAYPLHIV in need of welfare and protection services
 - Improving the uptake of HIV testing, treatment and care services
- Multi-sectoral leadership and coordination is essential in the development and scale up of an integrated, effective HIV sensitive case management system
- The engagement of CATS with their caseloads of CAYPLHIV promotes the identification of CAYPLHIV in need of social protection services
- Sustained training, mentorship and collaboration with community cadres from health and protection services together with CATS strengthens the identification and response for CAYPLHIV
- Engagement with families, communities and religious and faith leaders is vital for the success of HIV sensitive case management

Rutendo's Story

Rutendo is a 12 year old girl who had to stop school as she was always unwell. In her story, she describes how she was tested for HIV and commenced on ARVs. However, although her nurse ensured she understood the medicines and importance of adherence, her father threatened to harm Rutendo if she took the ARVs, opting for faith healing instead. Rutendo describes her confusion – she knew how important the medicines were but also needed to listen to her father. In this story we learn how the CATS, Department of Social Welfare and nurses worked together with Rutendo and her family. Rutendo went to live with her aunt and uncle and is now doing well on ARVs. Meanwhile the Case Care Worker continues to work with her father and mother. Rutendo narrates how her life would have been different if her father had allowed her to take her medicines.

 Africaid Zvandiri
Rutendo's Story

"leave your pills at this tree. In the evening, we will go and burn them including your cards from the clinic"

Tapiwa's Story

Tapiwa tells his story of growing up with extended family members after the death of his parents when he was six years old. At first, his relatives took him to prophets for healing whenever he was sick but he was eventually tested for HIV and commenced on ART. Tapiwa narrates how he had very little understanding of the medicines and why he should take them, and describes his fear that his friends would find out his HIV status if they saw his medicines. He explains that when he was introduced to Zvandiri and the CATS, he was helped to understand adherence, learned adherence strategies and no longer felt alone. Tapiwa goes on to describe the shame he experienced when he was sent home from school as his family could not pay school fees for him; and the way in which food was prioritized for others in the house, leaving him without food. This also affected his adherence. Tapiwa narrates the way Zvandiri referred him to the Department of Social Welfare who assisted Tapiwa to return to school as well as working with the caregivers and providing food assistance. Tapiwa now eats together with everyone else.

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Tapiwa's Story

TAPIWA

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