

# The CQUIN Learning Network

*The Science & Practice of Scale Up*

## Demand Generation for Differentiated Service Delivery

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# Zimbabwe National Network of People Living with HIV (ZNNP+): Background

- A national network of people living with HIV in Zimbabwe, founded in 1992 and officially registered as a non governmental organization in 1999
- ZNNP+ exists to facilitate the meaningful involvement of PLHIV in the planning, implementation, monitoring and evaluation of all HIV/AIDS-related programmes in Zimbabwe, through skills development and capacity building at all levels of the society.
- **Vision:** to create an environment where people can live positively free from stigma and discrimination
- **Mission:** ZNNP+ is committed to advocating and lobbying for the rights of PLHIV through information dissemination and networking. ZNNP+ also seeks to improve the quality of life of PLHIV through resource mobilization and capacity building of the infected and the affected.
- Involved in the national response to HIV in prevention, treatment, care and support

# Role of ZNNP+ in Differentiated Service Delivery

- With the support of the Global Fund, piloted Differentiated Care for People Living with HIV in rural Zimbabwe, focussing on the Community ART Refill Groups (CARGs)

No. of Provinces	Districts	Groups	No. Of People reached
8 Rural provinces	20 hard to reach districts, 1 facility	202, average 10 people	3876, 1251 males and 2625 females

- The groups are self formed, *i.e.*, the members select or choose among themselves how they want to constitute a group
- They choose a group leader whose role is the coordinate to group
- Leaders are trained on how the CARG model functions using a CARG Manual that was developed with Global Fund Support
- Members take turns to go and collect their refill
- They go together as a group when they are due for viral load testing

# Patients and Communities Engagement on DSD Models and Options

- The DSD models are contained in the Ministry of Health and Child Care Operations Service Delivery Manual which is a point of reference for ZNNP+ in its work
- ZNNP+ is a member of the different technical working groups which are chaired by the MoHCC like DSD and viral load
- When new information that is beneficial to PLHIV is shared in the technical working groups, members are sensitised through the structures of the organizations
- For the DSD models (the CARGs in particular) the support groups that are under the organization were used to reach out the members
- Other PLHIV who are not in support groups are reached out during their OI days where MoHCC staff share information on DSD models available for the clients
- Other platforms used are MIPA forums at different subnational levels, formation of support / wellness groups

# Patient and Community Engagement, Continued

- What is important is to manage the demand and supply side of the DSD models
- Patients need to demand a service that the service providers are able to meet and provide
- Working closely with the MoHCC becomes very important across the health facilities
- OI Nurses engage and disseminate information on DSD and other models which are in the Operations Service Deliver Manual during refill days
- The organization at community level emphasises the same message to the PLHIV through support/wellness group leaders

# How to Motivate Patients

- In telling patients about the models they are made to know about the advantages and possible disadvantages of different models
- Clients are told that they liaise with the health care providers so that they discuss the option that they are comfortable with
- Some of the discussions are one on one where as in some cases it is in groups during the OI clinics
- Patients are told that services have to be tailor made to suit their needs and hence they should feel free to discuss with the health care providers
- Patients are also informed that these options are not permanent and they free to choose any model at any time
- Justification of shift from one model to the other needed



# Advocate for Patient-Centred Models of Care

- Engagement with the MoHCC at national, provincial, district and health facility levels
- The purpose of these engagements is mainly to explore what is working and what is not working for the good of PLHIV
- Areas of improvement or adjustment are identified and agreed upon with the input from the clients
- This is made easy, as during these engagements patients are represented and their issues are taken into consideration

# Sustaining the Community Group Models

- Group-based models are an opportunity for income generating activities (IGAs) and initiatives like community health insurance i.e pull savings together and support one another when they need transport money for some diagnostics *e.g.*, Mashonaland West
- These can also work as a way to attract other members for replication and scale-up *i.e.* a recent visit to Mashonaland Central from 10 now 22
- IGAs need to be initiated by the clients themselves for sustainability
- In some communities, they engage local business people who then assist them to get access to markets
- Through the National AIDS Council Care and Support Technical Working Group field visits evaluate the functionality of CARGs formed, as well as other DSD models as well as the National Community Monitoring Team



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