



Meeting Men on Their Terms: Engaging Effectively in Their Spaces

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Ministry of Health and Child Care of Zimbabwe

Thursday, December 12, 2024



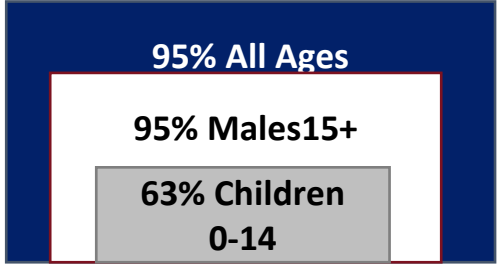
CQUIN 8th Annual Meeting | December 9-13, 2024 – Johannesburg, South Africa

Presentation Outline

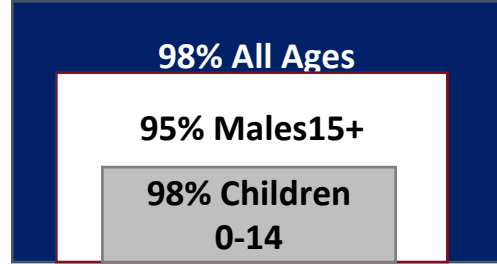
- **Snapshot: Zimbabwe HIV Epidemic**
- **Insights from HIV Spotlights**
 - **HTS Programme**
 - **Community Post**
 - **VMMC**
 - **Engaging men for better PMTCT outcomes**
- **Key Strategies**
- **Challenges and Acknowledgments**

Zimbabwe has made a great effort towards lowering New HIV infections and identified populations such as Men as key towards ending AIDS by 2030

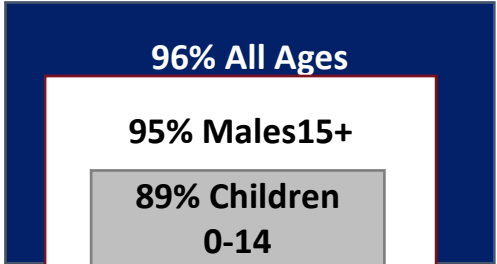
Progress on the 95-95-95 Targets:



Know Their Status

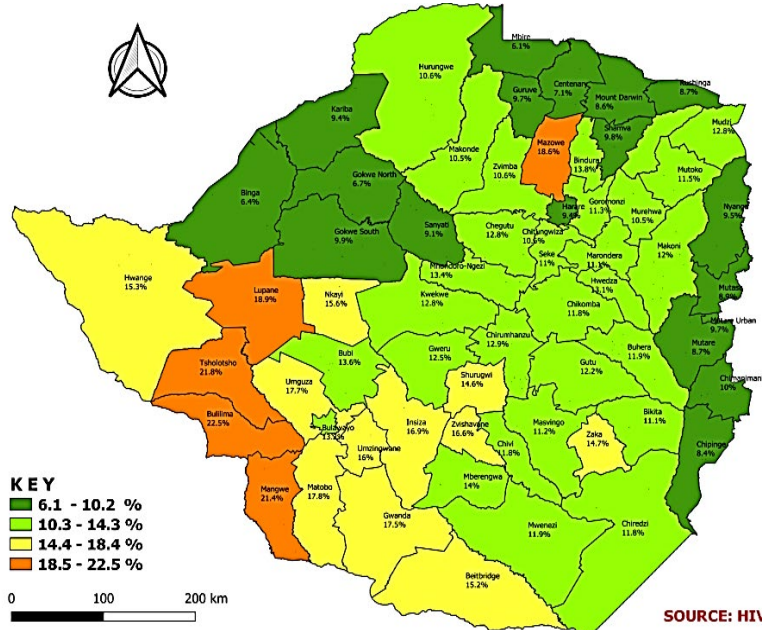


On ART

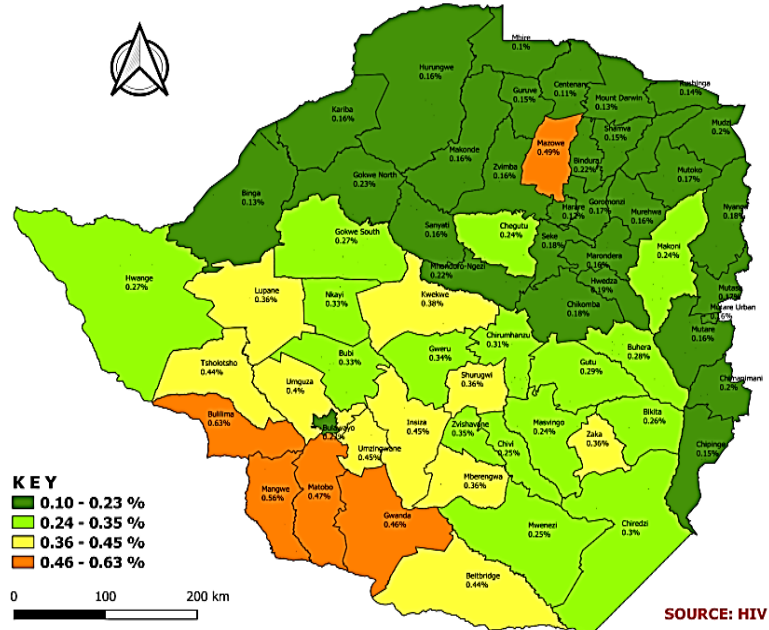


Virally Suppressed

HIV Prevalence by District



HIV Incidence by District



- Decline in HIV prevalence: 10.47%
- Reduction in AIDS-related deaths: 19,358
- Lower HIV incidence rate: 0.96
- 60.3% of PLHIV are women

- New HIV Infections:
- Total reduced by 5.1% to 18,380
 - 60.9% of new infections are among women

Whilst Men have been identified as a priority, barriers remain for them in accessing HIV prevention, care and treatment services

Socio-Cultural Factors

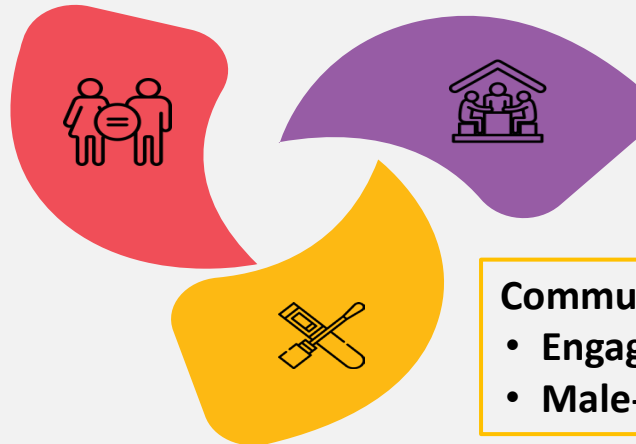
- Lower health-seeking behaviors among men
- Health facilities viewed as geared towards MNCH and SRH programming

Health System Factors

- Health Facility hours occur during work times, resulting in lost wages
- Predominantly female staff at both facility and community levels

To address these challenges, the MOHCC and stakeholders have designed strategies to engage men in HIV services

Addressing Gender Norms
Gender-Transformative Workshops/Dialogues



Innovative Testing Methods

- HIVST: At facility and community levels
- Index Testing

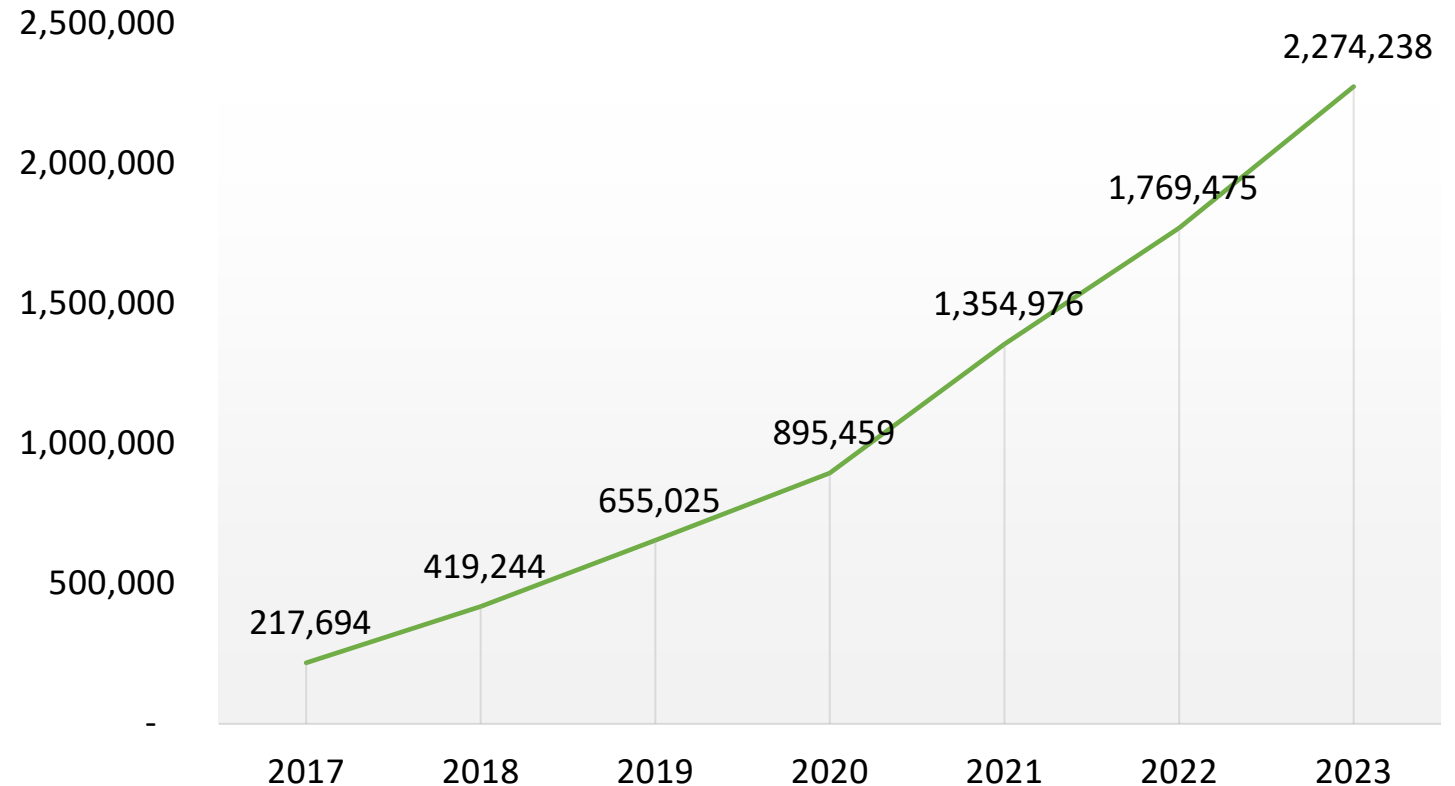
Community-based Approaches

- Engaging Male Role Models
- Male-Only Outreach Campaigns

SPOTLIGHT: HIV SELF-TESTING IN ZIMBABWE

Zimbabwe has shown sustained commitment to expanding HIVST distribution, with annual strong upward trend reflecting improved awareness, broader provider training, and enhanced support for distribution efforts.

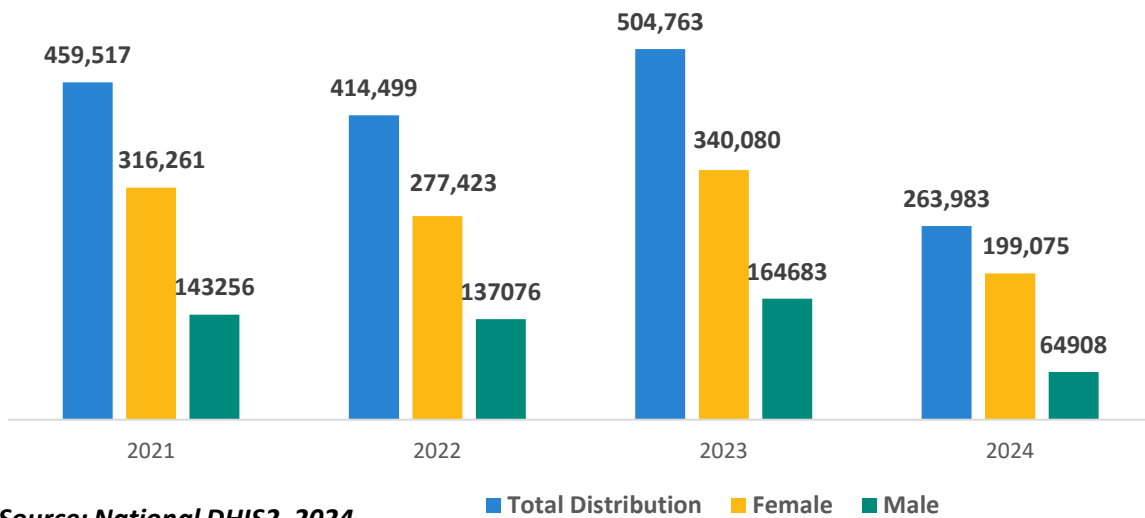
HIVST Distribution 2017-2023



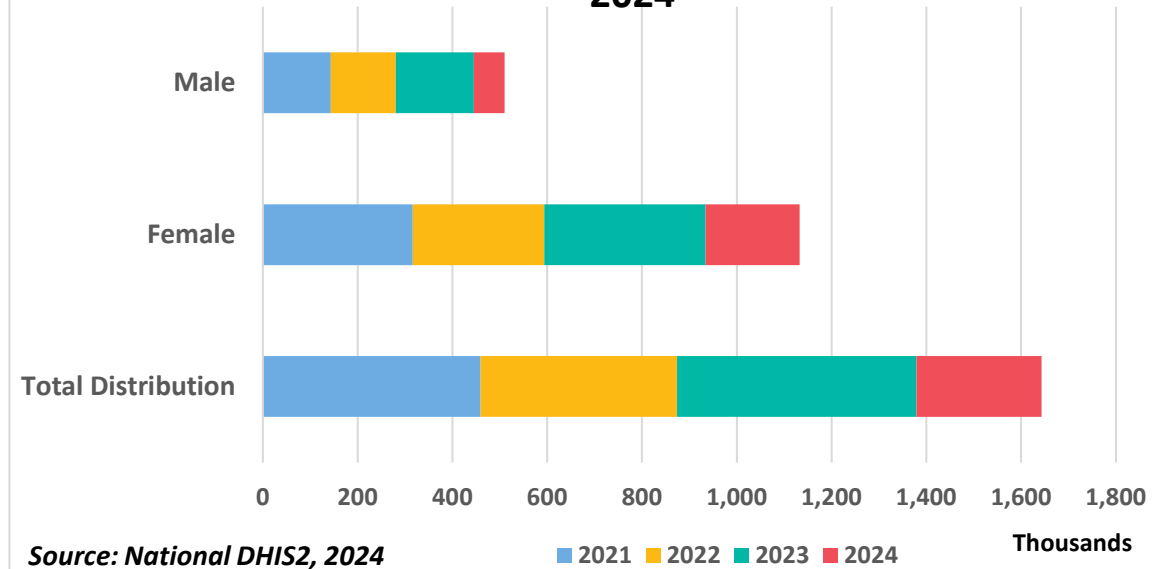
Source: National DHIS2, 2024

HIVST is being used as a strategic approach to reach under-tested populations, including men

Total HIVST Distribution: 2021-2024 (Jan-Jun)



Cumulative Total HIVST distribution by Sex: 2021-2024



- Females consistently surpassed males in the uptake of HIVST kits.
- Female uptake peaked in 2023, with 340,080 kits distributed, compared to 164,683 kits for males. However, there is a visible difference in 2023 for men as compared to 2021 and 2022.
- In 2024 (Jan-June), highlights 64,908 HIVST kits that were distributed to Males, while female uptake is higher at 199,075 kits.
- There is an opportunity to increase the uptake of HIVST among men, particularly by addressing barriers such as stigma, lack of awareness, and limited access to testing options.

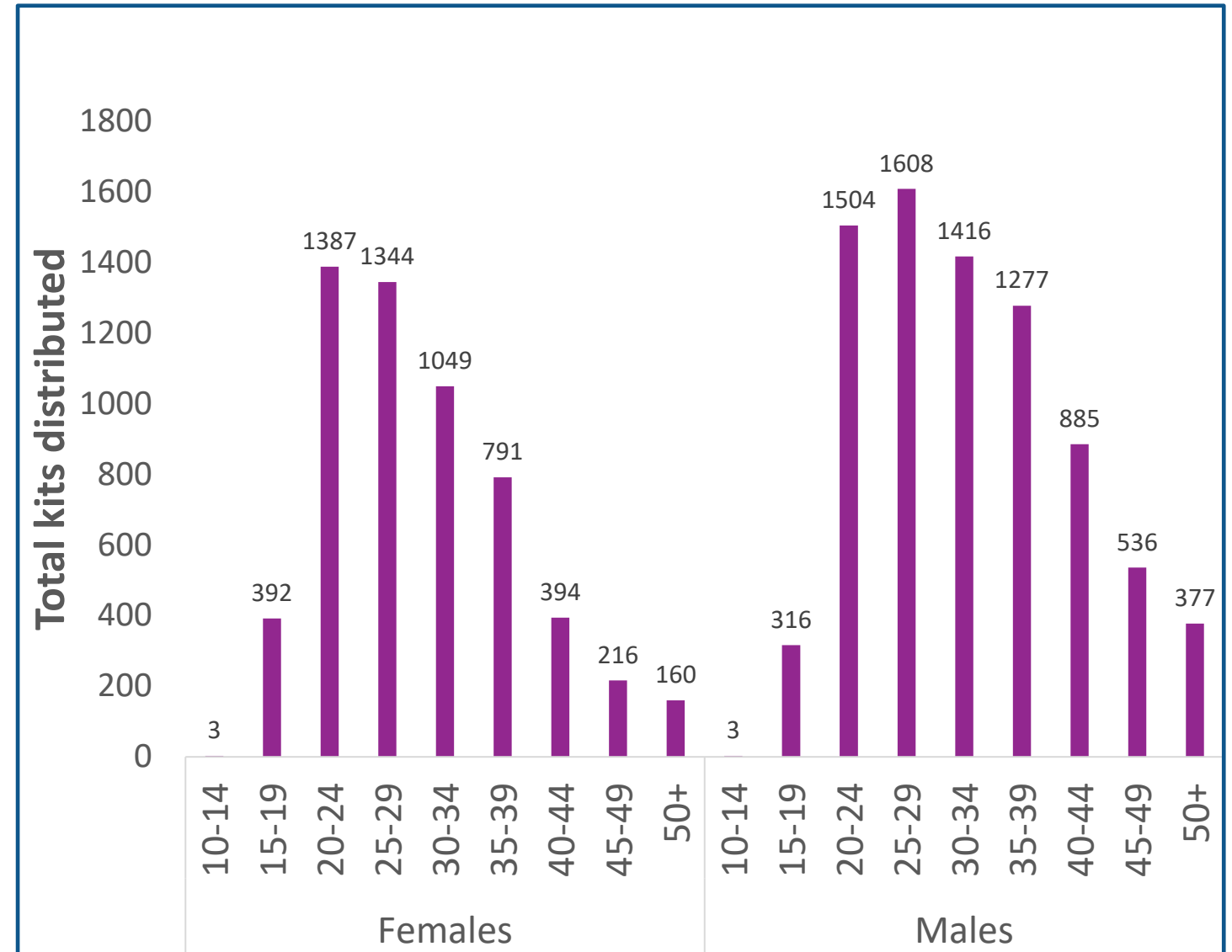
Reaching Men Through Community Posts

Community posts are non-formal health points set up where most people are in the informal workplace to provide basic health care.

7 Health Posts have been set up in high-traffic informal Harare workplaces to limit loss of wages to clients who would not routinely access services due to the amount of time it would require.

Clients access primary healthcare services, including HIV. A key success is an HIVST distribution, where 58% of clients were males, with men (20-39) representing the highest numbers of test kits distributed.

2024 Q1 to Q3: HIVST Distribution by Age and sex



Less Intensive DSD Models for ART

Zimbabwe has 4 categories of less intensive DART models

- Carer and child clubs, Teen clubs, Postpartum clubs
- Group models managed by clients - Adapt for Family CARG (criteria for attendance of children), Key populations CARG
- Individual models based at the facility - Fast track, Mobile populations, “oMalayitsha”
- Individual models not based at the facility - Outreach by facility HCW, Health posts, ART delivery by CHW, ART delivery by peer (CAT, KP), Community/private pharmacy, Drop-in Centre

Men fall in the adult subpopulation group in which most of these SOPs apply without adaptations

- Men most commonly enrol in Fast Track, CARGs and the OFCAD
- Some documented success stories have shown that some CARGs have been adapted to be men only and have incorporated income generation, however, this is not tracked at the national level

Zimbabwe achieved 95% for the Third 95 UNAIDS target, which indicates the success of DSD and other ART strategies for PLHIV on ART

Spotlight: VMMC ‘Makorokoza’ Campaign: Artisanal Miners Outreach



Artisanal mining, often informal and small-scale, is prevalent in Zimbabwe. However, it is closely linked to various social, economic, and health challenges, including an increased risk of HIV transmission.

Key Factors Linking Artisanal Mining and HIV:

High Mobility of Miners, Transactional Sex, Gender Dynamics and Vulnerability, Substance Abuse, Limited Access to Healthcare, Overcrowded and Unsanitary Living Conditions.

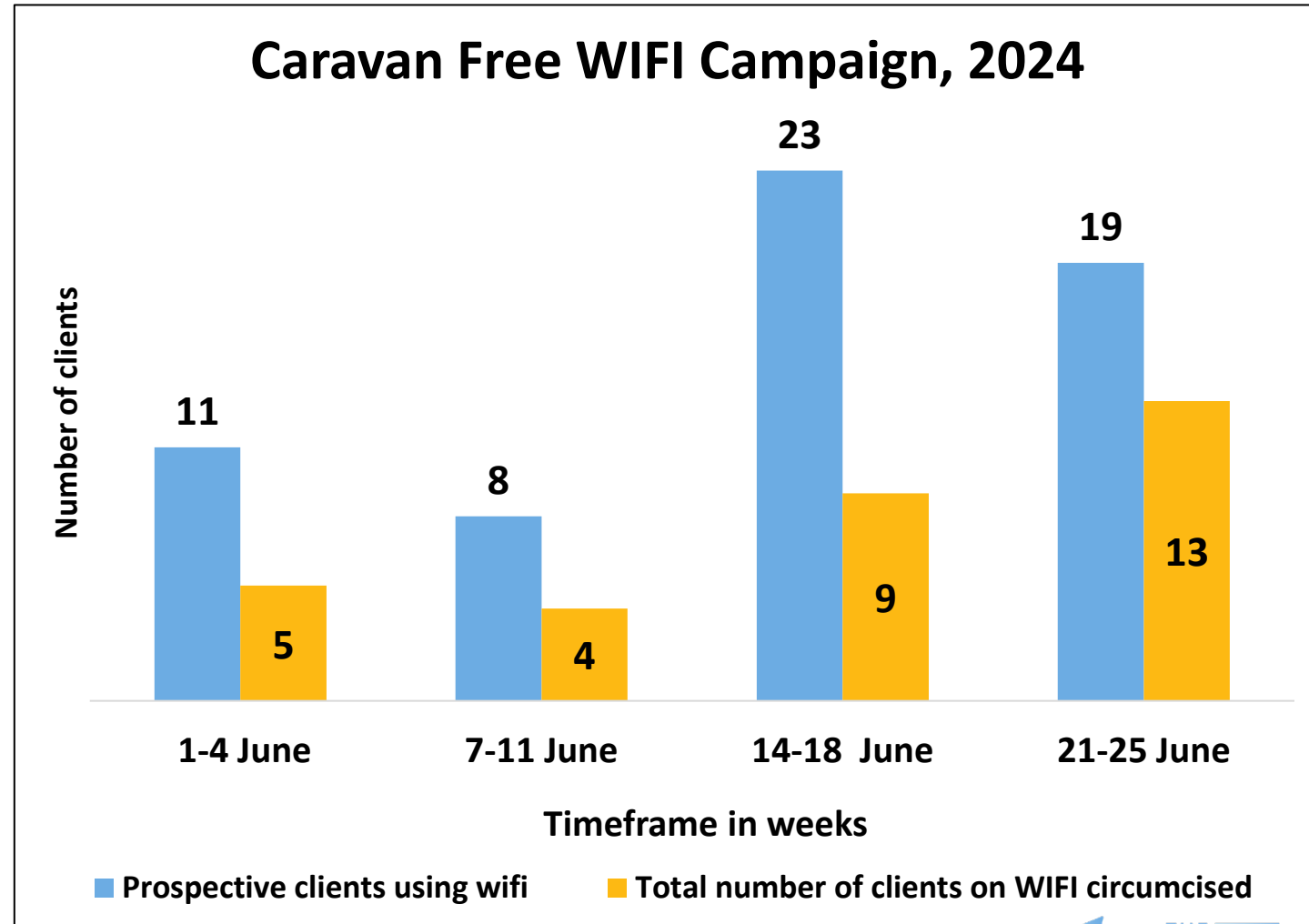
The “Makorokoza” campaign to reach artisanal miners, insights gained from the approach were:

- It is imperative to engage the Leaders (*Mbimbo*) first!
- Appropriate timing is required on when to conduct this approach, but they can be addressed as they work.
- Ensure the usage of precise and concise messages whilst integrating with condoms, and STI prevention/treatment promotion.
- There is potential for them to falsify contact details due to the illegal nature of their work
- Out of the VMMC services on offer, Shang Ring was most preferred.
- Offering caravan-based services that are coupled with scheduling/booking is preferred by them.

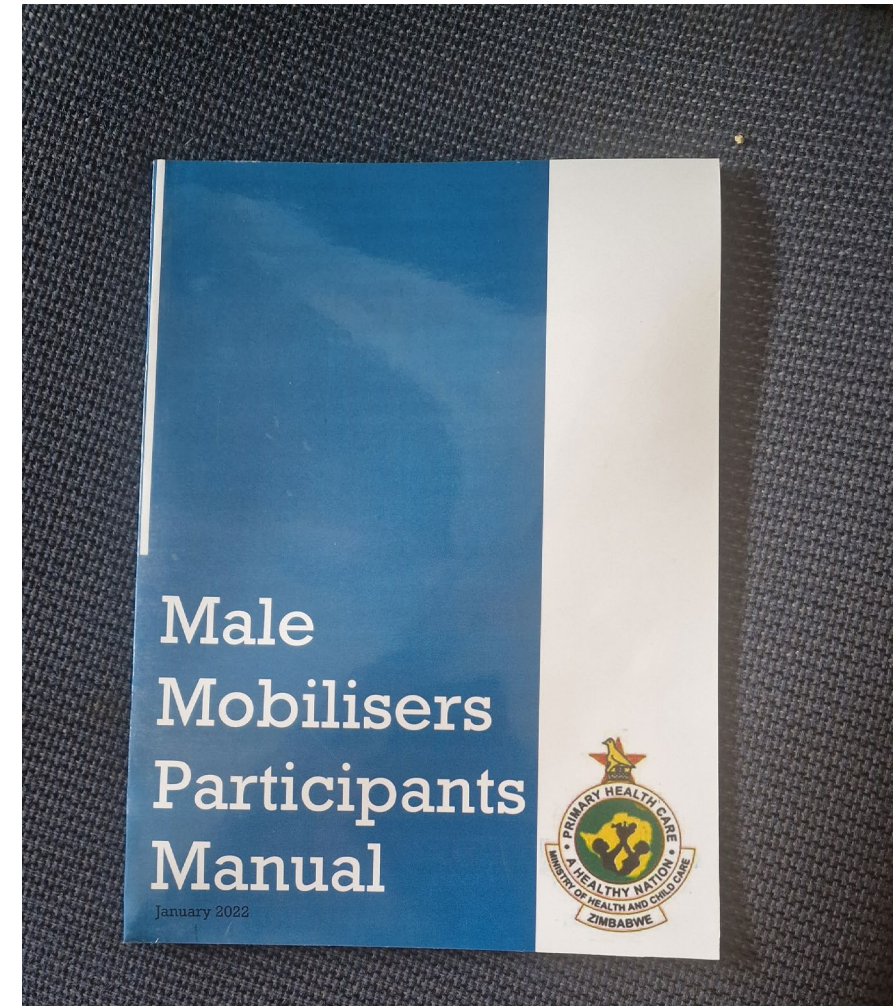
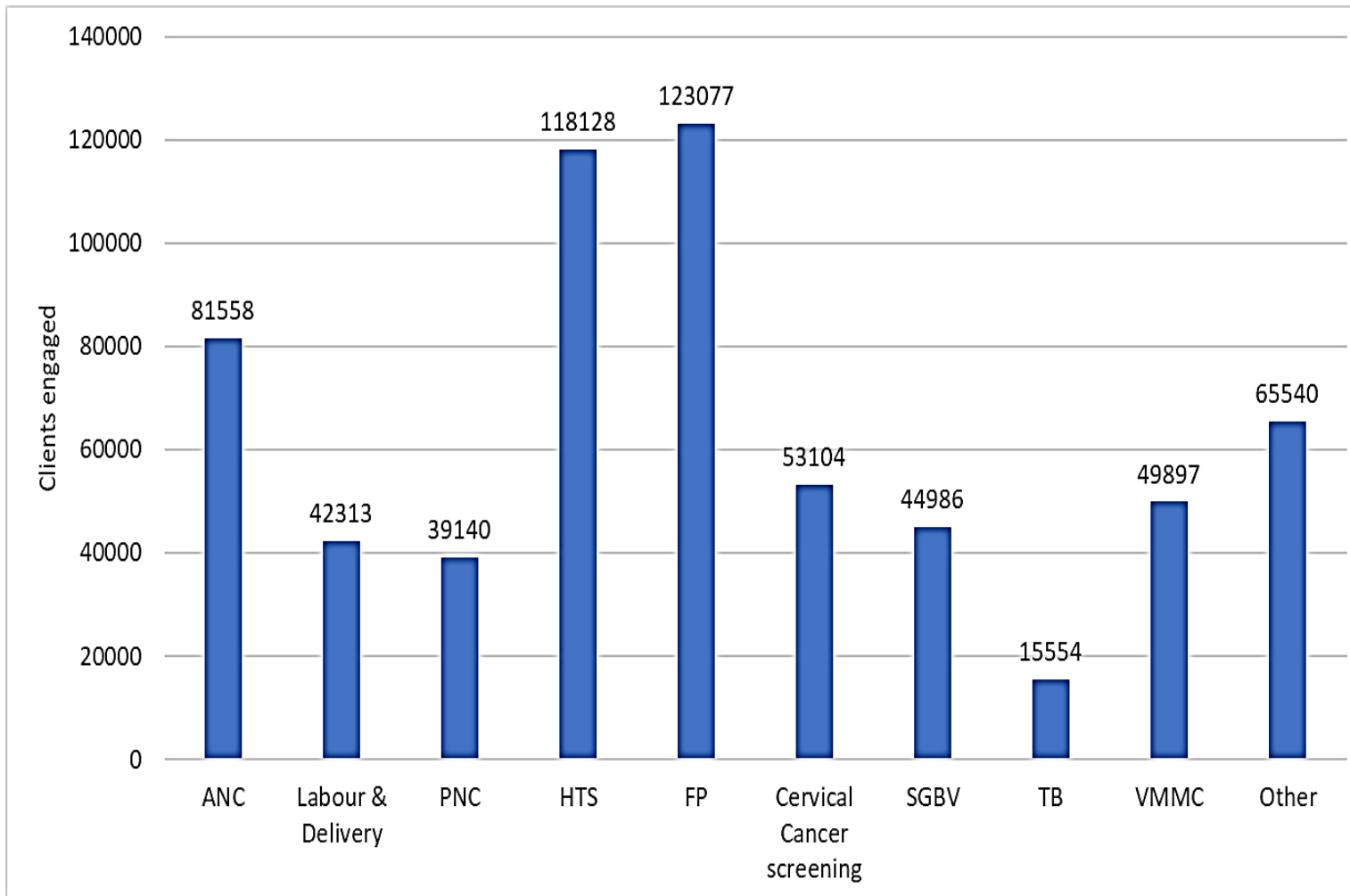
Spotlight: VMMC 'Caravan with Free WiFi' Initiative: Outreach Campaign



Another innovation is a roving caravan for VMMC mobilisers, which serves as a congregation point and enables relevant health talks for young men. The data presented shows data from Chitungwiza in June 2024.



Male Mobilisers (MM) engagement of men by topic 2023 - Oct 2024 (650 Male Mobilisers supporting 14 districts)



Several key strategies are employed by the country in engaging Men effectively

- **Moonlighting:** outreach services for men in their usual hangout spots
- **Opening for services beyond the routine working hours**
- **Use of Men's Forum (Enkundleni/Padare):** Enkundleni was a traditional meeting place largely for men to sit as a court to solve community problems – An organisation using this concept was established to help reach out largely to men for improved health and other social outcomes
- **Brother to Brother initiatives:** Using men to mentor younger men
- **Community Dialogues:** Targeting men only
- **Rock leadership approach:** Using the power and influence of Traditional Leader
- **Village to Village Campaign (V2V)**
- **Male mobiliser to reach out to other men**
- **Male mentorship clubs**

Key Challenges

- Access to HIV services by men remains suboptimal for various reasons
- High mobility of especially men in search of better opportunities
- Suboptimal PPP for health services that can easily reach men where they are
- Declining HIV funding thereby limiting the reach for services



Acknowledgement

PEPFAR

CDC

USAID

ZimTTECH

Zichire

NAC

CHAI

SAFAIDS

Global Fund

PSH

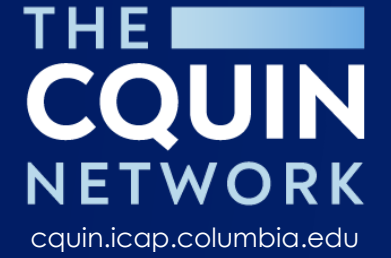
ZACH

PANGEA

ZHI

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Recipients of Care



Thank You!

