



# COVID-19 and HIV: Adapting community-based HIV services during a pandemic



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# Adapting community-based HIV services during a pandemic

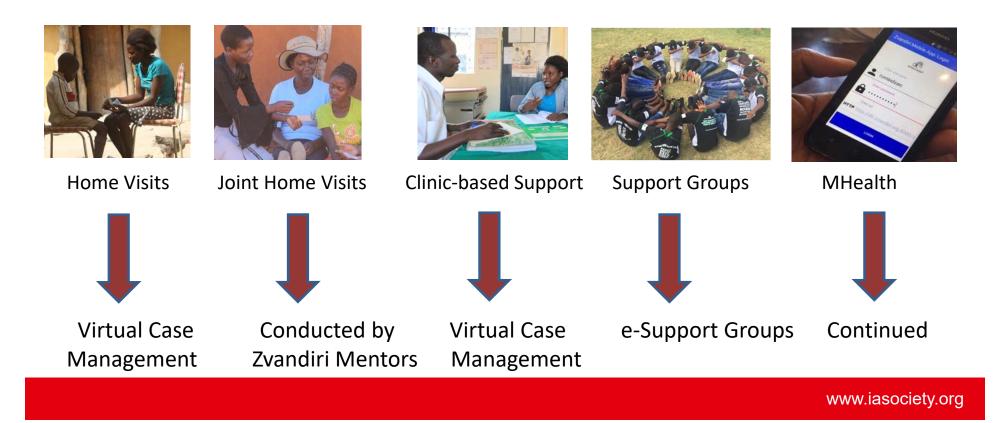
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**THE PROBLEM:** COVID-19 threatens to reverse the gains made in HIV testing, treatment, care and support for children, adolescents and young people living with HIV

### OUR RESPONSE: ADAPTATION OF THE Community Adolescent Treatment Supporter (CATS) MODEL





# **INFORMATION SHARING**



GOAL: CAYPLHIV have access to peer-led, evidence-based, developmentally appropriate information which:

- Supports them to make informed, safe decisions about their health and well-being
- o Supports positive mental health



- Also targeting caregivers, health care workers and faith leaders
- Developed in variety of formats and languages (film, comic strip, fact sheets) and disability-sensitive
- Disseminated by WhatsApp / SMS, radio and TV
- Issues covered include COVID-19, HIV and ART, mental health

   Coming up: Testing, SRHR, TB, SGBV, Child Protection and PMTCT.







# VIRTUAL CASE MANAGEMENT

#### GOAL:

- CAYPLHIV continue to be engaged, monitored and supported with adherence, retention and positive mental health.
- Red flags are identified early and managed appropriately

# CATS are assisted by Zvandiri Mentors to manage their individual caseloads through WhatsApp/SMS:



- Updates on when and how to collect ART from clinics
- ART and adherence monitoring and support, including enhanced adherence counselling
- Active screening for signs and symptoms of possible COVID-19
- Psychosocial support and mental health 'check ins'
- Screening, identification of red flags and referral (.e.g. lack of ART or other medication, ill health, psychological distress, SGBV, abuse, PMTCT)



# COMMUNITY OUTREACH



### **GOAL:**

- CAYPLHIV have continued access to ART and other essential services
- Cessation of home visits by CATS
- Remote, joint planning and response with health facilities and other community cadres for:
  - Tracking and tracing of CAYPLHIV not attending ART refill
  - o EAC for CAYPLHIV with high viral load
  - o Community ART delivery for those unable to access clinic
  - High risk cases ill health, protection, mental health cases
  - o Targeted community HIV self testing kit distribution
  - o Support for caregivers
- Led by Zvandiri Mentors, with remote support from CATS





# E-SUPPORT GROUPS



#### **GOAL**:

- Continued opportunities for CAYPLHIV to engage with peers, and to continue learning, sharing and supporting each other
- Reduce social isolation and promote positive mental health
- Physical support groups have been adapted to run as virtual support groups
  - o Facilitated by the Zvandiri Mentor
  - Topics informed by group members and include COVID-19, HIV, ART and adherence, mental health to date
    - Coming up: SGBV, SRHR, Disclosure and PMTCT.
  - Support group sessions are held twice a month
  - Also adapted for caregivers







# KEY LESSONS LEARNED



- Zvandiri a multi-component, differentiated service delivery model is adaptable and relevant during an emergency
- Flexibility of donors for realignment of funds and re-programming enabled rapid response
- Continued engagement with MoHCC for leadership and coordination is critical
- Collaboration with health facilities and other partners is essential for a coordinated response
- Different community cadre engagement is key to reaching CAYPLHIV.
- Virtual services cannot reach all CAYPLHIV those without phones, power, connectivity
- An electronic case management tool enables virtual case management, tracking, monitoring and evaluation
- We continue to learn!

