

# SUPPORT TO THE HIV/AIDS RESPONSE IN ZAMBIA (SHARE II)

## Quarterly Report July to September 2015

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## SHARE II Quarterly Report Structure

During the quarter under review SHARE II did not implement many programmatic activities and as such, there were no new programmatic accomplishments or data report. Project activities were focused on finalizing end of project reporting and documentation and on project close out activities. The main activity that was implemented on July 2015, is the SHARE II close-out conference.

As this is SHARE II's final quarterly report and as very few programmatic activities were implemented, we have used the platform provided by this quarterly report to provide a summary of the SHARE II life of project (LOP) results and achievements.

A key consideration in discussing SHARE II LOP results and accomplishments is that the project faced significant funding constraints in FY 2014 and FY 2015. In FY 2014 and FY 2015 funding delays, including a Stop Work Order (SWO) in November 2014, prevented the full implementation of the planned activities. In FY 2015, funding reductions to SHARE II effected in January 2015, led to sudden and premature closeout of a significant proportion of SHARE II project activities including all workplace HIV/AIDS programs and HIV coordinating structures programs, and most HIV/AIDS leadership and policy and legal programs. These funding constraints translated into a significant reduction in the life of project in terms of program implementation, and had an impact on some of SHARE II's final results and achievements.

Importantly, these funding constraints prevented the implementation of M&E activities to assess project results and achievements in some indicators and program areas. As result SHARE II was unable to fully assess the impact of all its activities and interventions in preventing HIV transmission and acquisition, and in mitigating the impact of the HIV/AIDS epidemic.

Although these challenges were significant, SHARE II for the most part adjusted its programming and was able to absorb the impact and still make ground to enable it to achieve most of its set targets and deliverables. This was largely due to the sustainability measures built into programs with partner beneficiaries; some programs continued functioning effectively even after SHARE II support was scaled back. SHARE II LOP indicator results and selected major programmatic accomplishments are discussed in the following pages.

Figure 1: Munokalya Mukuni Chiefdom Strategic Development Plan Launch — August 2012



## SHARE II LOP PEPFAR (MER and NGI) and Custom Indicator Results

JSI achieved most of the LOP targets and deliverables under the SHARE II project. However, in FY2015, funding cuts to SHARE II led to sudden and premature closeout of a significant proportion of SHARE II project activities and importantly, prevented the implementation of planned M&E activities, including an endline evaluation, to assess project results and achievements in some indicators and program areas.

### SHARE II LOP PEPFAR MER and NGI Results

The SHARE II life of project (LOP) PEPFAR NGI and MER indicator results are presented below in *Table 1* and *Table 2* below:

*Table 1: SHARE II MER indicator results*

Indicator	LOP				
	Target	Actual			
		Male	Female	Total	%
PP_PREV	29,263	29,196	8,845	38,041	130
HTC_TST	102,500	62,504	38,661	101,165	99
GEND_NORM	6,189	6,110	7,133	13,243	214

Table 1 shows that SHARE II achieved or surpassed all MER PEPFAR targets. For indicator *GEND\_NORM* (results: 214%), results far exceeded set targets. We underestimated the capacity of program activities to contribute to gains to this indicator, particularly a pilot program targeting AGYW 10-24 in a partner chiefdom where need for such programming was significant, leading to significant overachievement.

Table 2 shows that SHARE II achieved or surpassed all PEPFAR NGI LOP targets, with results in all indicators being **91% and above**. For indicator *3.1\_Inst: Availability of Workplace HIV/AIDS Policies and Programs* (result: 218%) results far exceeded the set target. This is because SHARE II expanded workplace HIV/AIDS programs to more workplaces than had originally been anticipated, and hence the overachievement. By design all SHARE II workplace HIV/AIDS programs had to have at least three of the four critical components (workplace HIV/AIDS policy, peer education, HTC, and formal HIV prevention). Any program that had less than three did not qualify to be counted as a SHARE II workplace HIV/AIDS program and did not contribute to results.

Similarly, for indicator *3.6: Prevention Efforts with HIV-positive Persons* (result: 230%) results far exceeded set target. SHARE II introduced a modified form of the highly effective Positive Action by Workers (PAW) strategy (a workplace-based PLHIV support group) and provided defined PLHIV services to inmates living with HIV, in partner prisons in 2012. The Zambia Prisons Service fully supported the program by employing an excellent coordinator to oversee this program. With this management support, the inmate PLHIV program's growth and success surpassed projections and expectations. Above and beyond the regular SHARE II PLHIV programs, this prison inmate PLHIV program contributed significantly to overachievement in this indicator.



## SHARe II NGI Indicator Results

Table 2: SHARe II NGI indicator results

Indicator	Definition	LOP Targets and Results		
		Target	Achieved	Percent
3.1_Inst: Availability of Workplace HIV/AIDS Policies and Programs	P10.1.D : Number of enterprises implementing an HIV/AIDS workplace program, providing at least one of	65	142	218%
3.1_InstLarge: Availability of Workplace HIV/AIDS Policies and Programs in Large Enterprises	P10.3.N: Percentage of large enterprises/companies (those with employees >100) that have HIV/AIDS workplace policies and programs	23	23	100%
3.2: Individuals Reached with HIV/AIDS Workplace Services	P10.2.D: Number of individuals (disaggregated by gender) in project-supported workplaces reached with at least one of the 4 critical workplace HIV/AIDS components	400,000	365,782	91%
3.3: HIV/AIDS Individual and Small-group Prevention	P8.1.D: Number of individuals reached through SHARe II-supported programs with individual and or small-group level preventive interventions that are based on evidence and/or meet the minimum standards	290,000	334,604	115%
3.3AB: HIV/AIDS Individual and Small-group Prevention Interventions that focus on Abstinence and/or Being Faithful	P8.2.D: Number of individuals reached through SHARe II-supported programs with individual and or small-group level preventative interventions that are primarily focused abstinence and/or being faithful, and are based on evidence and/or meet the minimum standards	70,000	89,154	127%
3.5: Received HIV Test and Know Results	P11.1.D: Number of individuals who received HTC services and received their test results	102,500	101,165	99%
3.6: Prevention Efforts with HIV-positive Persons	P7.1.D: Number of people living with HIV/AIDS (PLHIV) reached with a minimum package of Prevention with Positives (PwP) interventions	5,000	11,490	230%
3.7: Prevention Interventions for MARPS	P8.3.D: Number of members of most-at-risk populations (MARPS) reached with individual and/or small group level interventions that are based on evidence and/or meet the minimum standards	57,030	70,821	124%

## SHARe II HIV/AIDS Leadership Custom Indicator LOP Results

Table 3: SHARe II HIV/AIDS leadership results

Indicator	Definition	Cumulative (LOP)		
		Target	Achieved	Percent
1.1: HIV Leadership Talking Points	Standardized leadership talking points developed, translated into five local languages	Talking points developed, printed in English, translated into five local languages, and used for training leaders		
1.2_Inst: HIV Leadership Capacity Building of Institutions	Number of leadership institutions (chiefdoms, CAPAH and religious, musicians) provided with TA for HIV-related institutional capacity building	82	84	102%
1.2_Champions: HIV Leadership Capacity Building of Champions	Number of leadership champions provided with TA for high-level HIV/AIDS leadership capacity building.	25	27	108%
1.2_CD: HIV Leadership Capacity Development	Number of leaders that participated in institutional HIV-related capacity-building	2,495	3,940	158%
1.2_Train: HIV Leadership Training Capacity Development	Number of leaders trained in HIV/AIDS messaging	2,450	2,960	121%
1.2._PerfInst HIV Leadership Institutional Performance	HIV/AIDS Leadership institutions meeting defined HIV/AIDS leadership performance benchmarks based on set criteria	29	N/A	N/A
1.2_PerfInd HIV Leadership Champion Performance	Proportion of trained HIV/AIDS leadership champions that meet defined HIV/AIDS leadership performance benchmarks based on set criteria	27	26	96%
1.3_HIV-related curriculum integration into Theological Schools	Number of theological schools or Bible colleges that have implemented the HIV-integrated curriculum.	12	11	92%
1.4_HIV/AIDS Leadership Platforms	Number of HIV/AIDS Leadership radio, performance, electronic and print media platforms provided by the SHARe II project	23	18	78%
1.5_Gender based violence sensitization amongst target populations	Number of people reached through individual, small group, or community-level interventions or services that explicitly addresses gender-based violence and coercion related to HIV/AIDS	500	3,910	782%

*N/A: In FY 2014 and FY 2015, funding delays, including a Stop Work Order, prevented the full implementation of planned activities and stalled progress. Later in FY2015, funding cuts to SHARe II led to sudden and premature closeout of a significant proportion of SHARe II project activities and importantly, prevented the implementation of M&E activities to assess project results and achievements in these indicators and program areas*

Table 3 shows SHARe II LOP results under the HIV/AIDS leadership component of Objective I, tracked through the SHARe II monitoring and evaluation (M&E) system, using custom indicators.

The implementation of HIV/AIDS Leadership activities and interventions was fairly smooth between



## SHARE II HIV/AIDS Leadership Custom Indicator LOP Results

Later in FY2015, funding cuts to SHARE II led to sudden and premature closeout of a significant proportion of SHARE II project activities and importantly, prevented the implementation of M&E activities to assess project results and achievements in some indicators and areas. Nonetheless, SHARE II HIV/AIDS leadership achievements against targets are at **90% or greater** for all but two indicators.

For indicator *1.2\_PerfInst HIV Leadership Institutional Performance (result: N/A)*, premature closeout prevented implementation of M&E activities to fully assess the performance of partner leadership institutions in HIV/AIDS leadership using pre-set benchmarks. For indicator *1.4\_HIV/AIDS Leadership Platforms (result: 78%)*, funding delays and funding cuts (described above) prevented provision of and/or implementation of planned HIV/AIDS leadership platforms by SHARE II.

For indicator *1.5\_Gender based violence sensitization amongst target populations (result: 782%)*, results far exceeded set targets. We set conservative targets and exercised rigor to ensure that only those individuals that received the minimum package were counted. We however, grossly underestimated the capacity of program activities to contribute to gains in this indicator, particularly an FY 2013 pilot program targeting AGYW 10-24 years old, in a partner chiefdom (Munokalya Mukuni chiefdom), where the need for such programming was great—trained chiefdom leaders ran with the program to far greater effect and impact than had been anticipated, leading to significant over-achievement. This program also contributed to the overachievement under the MER GEND\_NORM indicator above.

## SHARE II Regulatory and Policy Environment Custom Indicator LOP Results

Table 4 shows all the SHARE II LOP results under the HIV/AIDS Policy and Regulatory Environment component of Objective I, tracked through the SHARE II M&E system, using custom indicators.

The implementation of SHARE II HIV/AIDS policy and legal activities and interventions, particularly those under the overall leadership of GRZ, was heavily dependent on the desire and commitment of the responsible government agency to move processes forward. In September 2011 there was a change of government in Zambia. In early September 2011, in the lead-up to the general and presidential elections, most government staff were mostly engaged in election preparations and post – election, for most of 2012 there was massive restructuring in the public sector with most government counterparts preoccupied with internal restructuring. The situation normalized by mid-2012 to allow focus on other programs, including fairly smooth implementation of SHARE II programs.

However, FY 2014 and FY 2015, funding delays, including a SWO, prevented the full implementation of the planned policy and legal activities and stalled progress. Later in FY2015, funding cuts to SHARE II led to sudden and premature closeout of a significant proportion of SHARE II project activities and importantly, prevented the implementation of M&E activities to assess project results and achievements in some indicators and areas. In spite of these constraints, SHARE II policy and legal environment achievements against targets are at **70% or greater** in eight of nine, and **80% or greater** in six of nine indicators.

For indicator *1.13a: HIV Law and Policy-related Pre-service Trainings (result: 71%)*, several factors led to under-performance: an employment freeze by GRZ, later removed in 2013, delayed enrolment of police recruits and delayed the start-up of police pre-service training; ; longer than anticipated internal

## SHARe II Regulatory and Policy Environment Custom Indicator LOP Results II

Table 4: SHARe II Regulatory and Policy Environment results

Indicator	Definition	Cumulative (LOP)		
		Target	Achieved	Percent
1.11: HIV-related Curriculum Integration into Pre-Service Schools	Institutions offering law training which have integrated HIV-related case management into pre-service training curriculum	10	8	80%
1.12a: Bills and Legislation Advancing through Legislative Process	Number of pieces of legislation (Target: Anti-Gender-based Violence Act, Prisons Act- Employment Act, Industrial and Labor Relations Act, Deceased Brother's Widow's Marriage Act, NAC Act) advanced at least two levels from baseline in the legislation process	6	6	100%
1.12b: Policies Advancing through Development Process	Number of the identified HIV-related policies (Target: National HIV/AIDS Policy, National Workplace HIV Policy, and National Alcohol Policy having advanced at least two levels from baseline	3	3	100%
1.13a: HIV Law and Policy-related Pre-service Trainings	Number of individuals, judiciary, law enforcement officers, and students, disaggregated by gender, trained in HIV-related case management	4,350	3,094	71%
1.13b: HIV Law and Policy-related In-service Trainings	Number of individuals, judiciary, law enforcement officers, and MPs, disaggregated by gender, trained in HIV-related case management	1,850	1,575	85%
1.14: By-laws and Decrees on Gender Inequities and Cultural Practices	Number of targeted organizations (local authorities and chiefdoms) which have developed HIV/AIDS by-laws and/or policies and decrees	15	12	87%
1.15: Policy and Legal Analysis for Improving the Regulatory Environment around HIV/AIDS	Selected legislation and policies (national policies on development, education, gender, investment and health, and laws) identified in conjunction with NAC, analysed and reviewed to identify bottlenecks in HIV management and service delivery	5	4	80%
1.16: Sectoral Policies Developed and Operationalized	Number of public sector ministries, departments and CSOs with SHARe II-supported workplace HIV/AIDS policies that mainstream gender	20	14	70%
1.17: Chiefdom Gender Score Card (GSC) Performance	Number and percent of selected chiefdoms where GSC has been administered.	30	10	33%

## SHARE II Regulatory and Policy Environment Custom Indicator LOP Results

institutional consultation, preparation and rollout processes within individual legal institutions of higher learning delayed start-up in some of them; a GRZ employment freeze prevented the enrolment of Zambia Prisons Service recruits at ZPS training schools (by the time the freeze was lifted in FY 2014 SHARE II was unable to rollout the program due to funding constraints). These factors combined to delay start-up and/or reduce the legal and law enforcement pool available for training during SHARE II's LOP.

For indicator *1.16: Sectoral Policies Developed and Operationalized (result: 70%)*, SHARE II insisted that targeted Ministries and organizations develop their HIV/AIDS and wellness policies themselves, rather than SHARE II developing the policies for them, to ensure ownership and follow-through in implementation. As a result of this approach, which we feel was the right approach, partners that were not committed (due to lack of management buy-in, frequent leadership changes, and/or other factors) dropped off. We are very confident that the 14 Ministries and organizations that have completed their sectoral policies will implement them because they developed them themselves (with SHARE II only providing 'how-to' technical guidance), and are fully invested.

Finally, for indicator *1.17: Chiefdom Gender Score Card (GSC) Performance (result: 33%)*, funding delays in FY 2014 and funding cuts in FY 2015 prevented implementation of planned activities to administer the GSC in 20 partner chiefdoms. The modified chiefdom GSC was handed over to the Ministry of Gender; we hope they will continue to implement the score card in chiefdoms to inform gender activities and policies.

## SHARE II HIV/AIDS Coordinating Structures Custom Indicator LOP Results

Table 5 shows that SHARE II HIV/AIDS coordinating structures achievements against targets are at **80% or greater** for all but two indicators.

The implementation of SHARE II HIV/AIDS coordinating structures activities and interventions, particularly activities at the level of the NAC Secretariat, which experienced significant institutional instability and top leadership changes between 2012 and 2014, were affected by the internal NAC reorganization which made it difficult for NAC to move technical programs and processes forward. In FY 2014 and FY 2015, funding delays, including a SWO, prevented the full implementation of the planned activities and stalled progress. Later in FY2015, funding cuts to SHARE II led to sudden and premature closeout of a significant proportion of project activities including all coordinating structures activities, and importantly, prevented the implementation of M&E activities to assess achievements in some interventions and indicators.

For indicators *2.1a\_InstCert: Coordinating Structures Meeting Performance Benchmarks (result: N/A)* and *2.1\_PerfInst Coordinating Structures Performance (result: N/A)* funding cuts in FY 2015 curtailed site-based M&E activities intended to measure results and achievements related to these two indicators.

For indicator *2.1\_CD: Coordinating Structures Capacity Development (result: 292%)*, SHARE II far exceeded set targets. This was as a result of higher than normal staff attrition at DATF level, which was in part related to instability at NAC Secretariat level and irregular disbursements of HIV/AIDS coordination resources to districts. As staff who had competencies in specific areas left, there was need to invest in more capacity building in order to maintain at least minimum functional capacities and performance levels.

Table 5: SHARe II HIV/AIDS Coordinating Structures results

Indicator	Definition	Cumulative (LOP)		
		Target	Achieved	Percent
2.1_Inst: Coordinating Structures Capacity Building of Institutions	Number of organizations (including DATFs and NZP+ chapters) provided with TA in SHARe II's core package of HIV-related institutional capacity building	110	88	80%
2.1_CD: Coordinating Structures Capacity Development	Number of individuals that participate in capacity development through Capacity Assessment, Strategic Planning and Op-	1,300	3,802	292%
2.1_Train: Individuals Trained in HIV/AIDS-related Institutional Capacity Development	Number of individuals trained in HIV-related institutional capacity building areas, including HIV coordination training, HIV technical training and resource mobilization training	1,270	1,044	82%
2.1a_InstCert: Coordinating Structures Meeting Performance Benchmarks	Number of DATF and CSOs undergoing capacity assessments on an annual basis that meet performance benchmarks as established in the Certification process	119	N/A <sup>1</sup>	N/A <sup>1</sup>
2.1_PerfInst: Coordinating Structures Performance	Institutions not participating in the certification process that are meeting pre-defined levels of acceptable coordina-	35	N/A <sup>1</sup>	N/A <sup>1</sup>
2.1_NACSus: NAC Staff Mentoring to Build Institutional Sustainability of NAC	NAC staff (out of 10 PACAs and 10 NAC staff) mentored to provide HIV/AIDS coordination and management supervision and support to DATFs	20	16	80%

## SHARe II Workplace HIV/AIDS Programs Custom Indicator LOP Results

Table 6 shows SHARe II Workplace HIV/AIDS Programs component LOP results, tracked through the SHARe II M&E system, using both PEPFAR and custom indicators. The implementation of SHARe II HIV/AIDS workplace HIV/AIDS activities and interventions in the private and informal sectors was very smooth during the period that SHARe II was funded. The implementation of SHARe II public sector workplace HIV/AIDS programs on the other hand, was heavily dependent on the commitment of each partner Ministry or department for success. In 2012 there was massive restructuring in the public sector with most government counterparts preoccupied with internal restructuring, after the general elections. The situation normalized by mid-2012, allowing fairly smooth implementation of SHARe II programs. However, in FY 2014 and FY 2015, funding delays, including a SWO, prevented the full implementation of the planned activities and stalled progress. Later in FY2015, funding cuts to SHARe II led to sudden and premature closeout of a significant proportion of SHARe II project activities and importantly, prevented the implementation of M&E activities to assess project results and achievements in some indicators and program areas. In spite of these constraints, SHARe II workplace HIV/AIDS programs contributed most of the results under the NGI and MER indicators (Page 1); SHARe II achieved all MER and NGI targets.



Table 6: SHARe II Workplace HIV/AIDS Programs results

Indicator	Definition	Cumulative (LOP)		
		Target	Achieved	Percent
3.1_Train: Trainings in HIV/AIDS Workplace Programs	Individuals trained in: GESHA (Gender and Sexuality and HIV/AIDS); peer education; and PAW (Positive Action by Workers), a PLHIV program	730	2,786	270%
3.1_PerfInst: Workplace HIV/AIDS Program Performance	Percent of sampled service providers meeting acceptable implementation standards in their HIV/AIDS workplace	25	N/A <sup>1</sup>	N/A <sup>1</sup>
3.4: Employee Sexual Risk Behaviors	Percent of employees exposed to workplace HIV prevention programs who demonstrate a reduction in sexual risk behaviors (reduction in MCPs and/or increased condom use)	10% reduction	N/A <sup>1</sup>	N/A <sup>1</sup>
3.8: HIV/AIDS Stigma	Percent of employees in participating workplaces expressing accepting attitudes toward people living with HIV	From 75% to 90%	N/A <sup>1</sup>	N/A <sup>1</sup>

For the SHARe II workplace HIV/AIDS programs custom indicators *3.1 Perf\_Inst – Workplace HIV/AIDS Program Performance (result: N/A)*, *3.4 Employee Sexual Risk Behaviors (result: N/A)* and *3.8 HIV/AIDS Stigma (result: N/A)*, funding cuts in FY 2015 curtailed site-based endline evaluation activities intended to measure program-specific achievements and impact. For indicator *3.1\_Train: Trainings in HIV/AIDS Workplace Programs (result: 270%)*, results far exceeded the set target. This was due to underestimation of program expansion and training requirements for rolling out quality and effective peer education, GESHA, PAW, and HTC programs.

Table 7 shows SHARe II LOP results under the HIV Coordination and Collaboration component, tracked through the SHARe II M&E system using custom indicators.

The implementation of some SHARe II HIV coordination and collaboration activities was heavily dependent on the availability and commitment of NAC leaders and counterparts. Due to internal restructuring and heavy senior staff loss, NAC was not in a position to provide the leadership required for some of these activities.

Indicator *4.1: Access to Comprehensive Health Services (result: 64%)* was poorly phrased. SHARe II engaged 11 USG-funded partners to implement health services programs, and all 11 partners engaged had access to or reported access to comprehensive health services through referral or direct service delivery, and thus the result would have been 100%, even with minimal SHARe II support. Our M&E tracking system, based on the detailed indicator definition, was instead measuring the performance of the workplace HIV/AIDS and wellness program of each of the 11 partners, and only seven (7) partners (64%) met the pre-defined criteria for an effective workplace HIV/AIDS and wellness program.

For indicators *4.4: NAC State of the HIV/AIDS Response Meetings (result: 33%)*, only one stakeholder forum of the planned three was implemented, due to constraints at NAC, already discussed above.

## SHARe II HIV/AIDS Collaboration and Coordination Custom Indicator LOP Results

Table 7: SHARe II HIV/AIDS Collaboration and Coordination results

Indicator	Definition	Cumulative (LOP)		
		Target	Achieved	Percent
4.1: Access to Comprehensive Health Services	Proportion of SHARe II-supported USG-funded projects reporting access to comprehensive health services, including HIV/AIDS, family planning, alcohol and substance use and other health services, either through referral or direct service provision	11	7	64%
4.2: Common NAC M&E Framework for National HIV/AIDS Activities	Implement a common NAC M&E framework for tracking and reporting on national HIV activities, such as VCT Day, World AIDS Day and traditional ceremonies	Data collection form developed and approved by NAC, and currently being used. Database changes were held up restructuring at NAC.		
4.3: HIV Activity Monitoring System	Development of a simple system (indicators, tools, reporting protocol) to be piloted by one of the relevant entities (e.g., ministries, Parliament, chiefdoms, CSOs) to track and report on HIV-related activities	Data collection, tracking and monitoring system developed and implemented and handed over to NAC for maintenance and updating		
4.4: NAC State of the HIV/AIDS Response Meetings	Number of planned NAC State of the Response meetings held	3	1	33%



Figure 2: Cost-sharing in the chiefdoms—A Cooma chiefdom headman brings a chicken for lunch during development strategic planning



## SHARE II 's selected Major Project Accomplishments



Figure 3: Chikanta Chiefdom Strategic Development Plan Launch – July 2012

### Text Box 1: Chikanta Chiefdom Operationalizes HIV Strategies by Operationalizing Agriculture Strategies in its Development Plan

The SHARE II project engaged chiefs and other leaders, and harnessed their influence to address key drivers of the HIV epidemic in Zambia, including poverty. SHARE II was cognizant of the bi-directional link between poverty and HIV risk and vulnerability in Zambia, and also of the potential of HIV/AIDS to slow national development. SHARE II thus built understanding among leaders that HIV/AIDS is a developmental issue, and that action taken by leaders in HIV today, will save resources to build more schools, more hospitals, better roads, and other infrastructure tomorrow. SHARE II makes it clear to leaders that HIV/AIDS leadership is part of their responsibilities and duties, as citizens in positions of influence and authority. Chiefs, who live in the most underdeveloped and rural parts of Zambia and have watched countless of their people sicken and die from HIV, were very quick to understand the link between HIV/AIDS and development. They worked with SHARE II to plan for development to alleviate poverty, which in itself is a structural response to HIV, but also to embed HIV response strategies into chiefdom development strategic plans, their first-ever development strategic plans, to ensure implementation and sustainability. Further SHARE II trained chiefs and other traditional leaders to undertake HIV messaging to increase HIV service uptake and HIV prevention. Chief Chikanta was among the 33 chiefs who partnered with SHARE II.

In 2012, Chikanta chiefdom, a very remote and rural partner chiefdom whose economy is based almost entirely on agriculture, drawing on partners and strategies identified in its development strategic plan, brought banking facilities, agricultural inputs such as seed and fertilizer to the chiefdom, closer to the farmers, during its first-ever agricultural fair. The fair was hugely successful and several more were held in order to reach all corners of this massive chiefdom. Chiefdom women, including vulnerable women like widows, are actively encouraged to attend the fairs, so that they too could learn how to increase their agriculture yields, and thus reduce poverty levels and their vulnerability to HIV. Since HIV and health are embedded into agriculture strategies, the chiefdom reached out to health stakeholders who brought HIV and health services (HTC, VMMC, BP measurements, etc.) to the fairs for easy access for the people. Today in 2015, Chikanta farmers, male and female, need not travel hundreds of kilometers on bad roads to the nearest town to access agricultural inputs, or spend days away from home trying to sell produce. The agriculture private sector has set up permanent shop in the chiefdom, drastically reducing the cost of doing business for the farmers, increasing household resources available for other uses and reducing HIV risk by removing the need to spend days in the nearest town trying to buy inputs or sell produce .

## Selected HIV/AIDS Leadership Accomplishments

**1. Increased HIV/AIDS Leadership:** SHARe II trained **2,960** leaders across the country and across leadership categories in HIV/AIDS leadership and messaging. In partner chiefdoms, workplaces, churches/mosques, and institutions, as a result of messaging and example from leaders:

- HIV service uptake has increased, including high impact services such as ART, PMTCT, VMMC and condoms; and
- Behaviors that increase HIV vulnerability and transmission such as stigma and discrimination, early marriages, and GBV have reportedly reduced.

**2. Increased Local HIV Response Implementation and Sustainability in Partner Chiefdoms:** In perhaps the most impactful and innovative of SHARe II's HIV/AIDS leadership approaches, SHARe II:

- Helped to build understanding among traditional leaders that in Zambia HIV/AIDS is a developmental issue;
- Supported partner chiefdoms to plan for development and embed HIV response strategies into broader development strategies ensuring local ownership and sustainability of chiefdom HIV/AIDS responses;
- Built HIV leadership capacities in chiefdoms' traditional leaders creating a very strong, stable and sustainable community health system;

As chiefdoms and their partners operationalize broader development strategies, they also inevitably operationalize their HIV response strategies; chiefdoms now respond more systematically and effectively to HIV/AIDS, to greater impact. The HIV leadership capacities built by SHARe II will continue to benefit these chiefdoms for the foreseeable future.



Figure 4: Leading by Example: Headman Jonsen Simakwama was First to be Circumcised in his Village in Traditionally Non-circumcising Cooma Chiefdom—Hundreds Followed

## Selected HIV/AIDS Leadership Accomplishments cont...

**3. Successfully Implemented a Highly Visible HIV Leadership Initiative:** Utilizing various mediums and platforms, SHARE II assisted partners to host over **15** high profile events, which provided platforms for trained leaders and HIV/AIDS Champions to address HIV issues on both local and national fora. Many of these events received national coverage and were broadcast on national TV and printed in national Media, expanding the impact of the HIV leadership and messaging aspects from merely local to national. For example SHARE II and traditional leaders utilized chiefdom development strategic plan launches as very effective and highly visible HIV leadership platforms, with participation from various leaders trained and mentored by SHARE II including politicians, traditional leaders, and musicians and performance artists. Similarly, SHARE II partnered with the Tourism HIV/AIDS PPP to implement highly visible social mobilization campaigns that utilized private sector, political, and influential opinion-leaders to provide HIV leadership and messaging.



Figure 5: October 2013: Zambia's Vice President, His Honor Dr Guy Scott, and Area Member of Parliament Hon. Cornelius Mweetwa Launch the Cooma Chiefdom Development Strategic Plan, which Integrates HIV/AIDS



Figure 6: A SHARE II trained HIV/AIDS Champion, Mpande, Entertains and Provides HIV Messaging at a Chiefdom Strategic Plan Launch

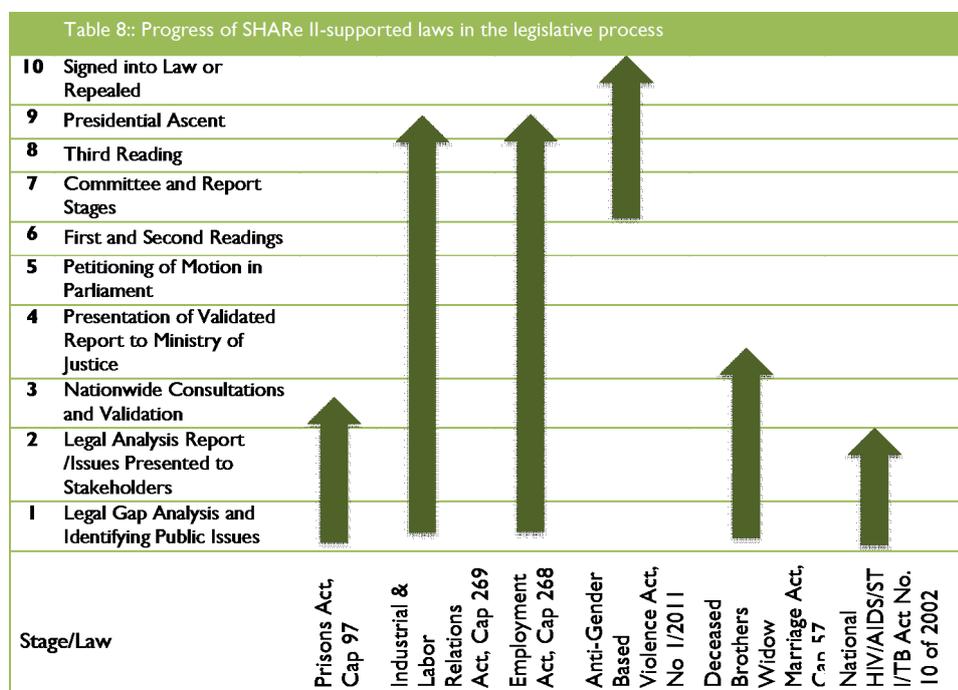
# Selected HIV/AIDS Policy and Regulatory Environment Accomplishments

**4. Improved the National HIV-related Legal Environment:** SHARe II has contributed significantly to improving the HIV-related legal environment at national level. Specifically, SHARe II has:

- Increased awareness of the harmful effects of the **DBWMA** moving it several steps towards **repeal**;
- Ensured Zambian workers' HIV-related rights are protected by including HIV/AIDS provisions in the **Industrial and Labor Relations Act** and the **Employment Act**. Both **amendments** are at presidential ascent stage;
- Ensured that HIV-related aspects are integral to the **amendment** of the **Prisons Act** to safeguard the health and humane treatment of prison inmates in Zambia's prisons, including aspects related to nutrition, living conditions, access to HIV and health services, and early release on medical grounds;
- Improved the prevention, management and mitigation of GBV in Zambia, by contributing to the **enactment** and implementation of the **AGBVA**; and
- Supported NAC to advance the process to **amend** the **NAC Act** several steps, to further strengthen HIV/AIDS response coordination.

**5. Improved HIV-related Policy Environment—National and Sectoral Levels:** SHARe II has contributed significantly to improving the HIV-related policy environment at the national and sectoral levels. SHARe II has:

- Finalized the formulation of the National Alcohol Policy and the overarching National Workplace HIV/AIDS Policy, and supported NAC to advance the review process for the National HIV/AIDS Policy several steps.
- Improved the general HIV-related policy environment through technical support to review the National Gender Policy; the National Education Policy; the National Planning and Budgeting Policy; and the National Zambia Policy Framework for Investment, to ensure they mainstream HIV/AIDS.



- Improved the policy protections for Zambian workers by supporting partners Ministries and organizations to develop, launch and implement specific sectoral workplace HIV/AIDS and wellness policies.

## Selected HIV/AIDS Policy and Regulatory Environment Accomplishments cont...

**6. Improved HIV-related Policy Environment—Chieftdom Level:** Assisted 12 partner chieftdoms to, for the first time-ever in Zambia, set ground-rules for responding to HIV/AIDS in the chieftdom, through written HIV/AIDS policy decrees that speak directly to the local drivers of HIV in each specific chieftdom. For example: **all 12** partner chieftdoms have outlawed sexual cleansing of widows/widowers, made VMMC a cultural norm for HIV prevention, banned early marriages for girls, and mandated school for all school age children including school re-entry for teenage mothers who dropped due to pregnancy; **eight** have made antenatal care compulsory to increase PMTCT uptake; and **seven** have increased punishment for GBV. The impact of the HIV/AIDS policy decrees is signif-



Figure 7: Chiefs Sign to Approve the Repeal of the DBWMA



icant and was sometimes immediate, as subjects changed behavior to conform. There has been an overall reduction in behaviors that increase HIV risk, including sexual cleansing of widows/widowers, early marriage of girls, GBV, widow inheritance, and MCPs. Uptake of PMTCT and VMMC, now backed by chieftdom cultural standard-bearers, has significantly increased.

Figure 8: Dorothy Simasiku pregnant at 15 and re-entered into school at 17 breastfeeds her daughter at school as her mother looks on —the Munokalya Mukuni Chieftdom HIV Policy Decree mandates education for all school-age children and facilitated her return to school

## Selected HIV/AIDS Leadership, Policy and Legal Environment Accomplishments

**7. Improved HIV-related Case Management by the Judiciary and Law Enforcement:** Representing one of the finest achievements of the SHARe II project, SHARe II has:

- Built the capacity of **81% of Zambia’s Magistrates** in HIV-related case management (cases such as rape, labor-related HIV cases, property-grabbing from orphans/widows, willful HIV infection, counterfeit HIV products such as ARVs and condoms, etc.); a major and unprecedented achievement. At the level of and subordinate courts, Zambia’s Judiciary is now fully HIV-competent, with 97% of the magistrates trained;
- Built the capacity of **948 in-service law enforcement officers** (general police officers, investigators, prosecutors, etc.), equipping them with knowledge and skills to appropriately manage and refer HIV-related cases, as the point of first contact for victims who are seeking legal redress; and
- Built a more HIV-competent justice system, leading to improved justice outcomes for the victims and appropriate punishment for the perpetrators as trained Magistrates, investigators, prosecutors and others all contribute to improved justice outcomes in their handling of these HIV-related cases.

**8. Sustainable HIV Programming: Integrating HIV/AIDS into Pre-service Training:** While in-service training is very necessary in the short term to bridge HIV knowledge and skills gaps, it often very costly—SHARe II:

Partnered with **11 theological colleges and universities** and developed the first-ever inter-denominational training manual for the Zambian Christian church, “*HIV/AIDS and the Christian Faith*”:



Figure 9: SHARe II’s Policy and Legal Manager Justine Chitengi trains Magistrates in HIV-related Case Management



## Selected HIV/AIDS Leadership, Policy and Legal Environment Accomplishments cont...

- *A Manual for Leaders*”, which integrates Christian faith teaching and HIV/AIDS, for use in training Christian leaders.;
- Provided technical support to integrate HIV/AIDS into the training curricula of legal studies at **five partner institutions** of higher learning: NIPA, Zambia Open University, University of Lusaka, Cavendish University Zambia and Mulungushi University;
- Provided technical support to integrate HIV/AIDS into the training curricula of the **three Zambia Police Service training academies**: Kamfinsa, Lilayi, and Sondela; and
- Provided technical support to partner institutions to roll out training

### As of October 2015:

- **1,667 Christian leaders** had been trained using the SHARe II-supported curriculum and manual that integrates HIV/AIDS and are providing HIV-competent and HIV-compassionate care to congregants;
- **Over 540 students** are registered in and taking classes in integrated HIV/AIDS and law courses in legal institutions of higher learning; and
- **1,850 police recruits** had been trained using the combined law enforcement and HIV/AIDS curriculum, and graduated and entered service HIV-competent.



Figure 10: SHARe II's Policy and Legal Manager Justin Chitengi trains class of 2014 Sondela police recruits in HIV-related Case Management

# Selected HIV/AIDS Response Coordination Accomplishments

**1. Strengthened District HIV/AIDS Response Coordination:** SHARe II has contributed significantly to strengthening district HIV/AIDS response coordination and management in Zambia. SHARe II:

- Standardized DATF HIV/AIDS coordination guidelines through the District Coordination Toolkit, a one-stop shop of the required and approved operational guidelines and tools for the DATFs, developed by SHARe II with input from other DATF technical support partners;
- Oriented local authority gatekeepers and leaders—councilors, mayors, municipal heads – on their roles and responsibilities in supporting local HIV/AIDS responses, including financially, assisting DATFs to secure a 5% of district CDFs for HIV/AIDS and gender-related activities (through the Nakonde Declaration of 2013) – a big step forward for local HIV/AIDS responses, which had faltered due to increasingly erratic central NAC funding disbursements to DATFs

*Table 9: Local Resource Mobilization for District HIV Response Coordination by DATFs*

	2012	2013	2014
<b>DATFs receiving CDF funding</b>	4	20	31
<b>Amount of CDF funding received by DATFs</b>	K125,000 (\$20,000)	K481,000 (\$70,000)	K523,000 (\$92,000)

- Improved DATF performance from 11% at baseline to 91% at last assessment in 2014 for 15 pilot DATFs and from 13% at baseline to 38% at last assessment in 2014 for 57 non-pilot DATFs. This was achieved through a package of support that included performance measurement using a set of pre-defined performance benchmarks or standards.

**2. Revived and Strengthened the PLHIV Response to HIV/AIDS:** SHARe II strengthened the PLHIV response to HIV/AIDS primarily through institutional and technical capacity building support to NZP+:

- NZP+ has become a stronger and more credible organization, with essential systems in place to manage the PLHIV response, and is now attracting recognition from key stakeholders and partners;
- NZP+ has in place: Administration and finance systems handbooks and manuals; a documented resource mobilization strategy; a documented advocacy and communications strategy to guide its national advocacy efforts on behalf of PLHIV; a strategic plan; and operational plans;
- NZP+ improved its technical capacities; SHARe II awarded the organization a sub-grant to implement HIV prevention interventions among members.;
- NZP+ is now a GFATM sub-recipient through the Church Health Association of Zambia, enabling it to coordinate the PLHIV response more effectively.



## Selected HIV/AIDS Workplace Program Accomplishments

### I. Prevented HIV and Reduced HIV-related Morbidity and Mortality and in Partner Workplaces: SHARe II

- Partnered with **80** private sector, informal sector and public sector **workplaces** and expanded access to quality HIV prevention and support services for employees, dependents, and defined outreach communities in partner workplaces and contributed significantly to HIV prevention and to reducing rates of HIV-related illnesses and deaths;
- Mitigated the beneficiary fatigue arising from purely HIV/AIDS-focused workplace programs, by integrating wellness aspects (addressing family planning/reproductive health, non-communicable diseases, other communicable diseases, and occupational safety), to greater program effectiveness, including higher of HIV services;
- Increased program impact by effectively addressing gender dimensions through the SHARe II Gender Sexuality and HIV/AIDS (GESHA) intervention, addressing context-specific gender norms and inequalities that might constrain the behavior of women and men, in accessing and utilizing appropriate HIV services and/or adopting appropriate HIV prevention actions, assisting partner workplaces to design practical, locally relevant ways to prevent HIV and address gender inequalities; and
- Expanded the Tourism HIV/AIDS PPP from Livingstone, to include Mfuwe and the Lower Zambezi, reaching over 1,300 tourism private sector workers and defined outreach communities with a combined population of around 250,000, leveraging \$243,000 private resources for HIV.



Figure 11: Tourism HIV/AIDS PPP—HIV/AIDS Social Mobilization and Messaging through Sport

## Selected HIV/AIDS Workplace Program Accomplishments cont...

### 2. Prevented HIV and Reduced HIV-related Morbidity and Mortality among Prison Inmate: SHARe II:

- Implemented effective HIV/AIDS programs among prison inmates to: prevent HIV, improve access HIV-related services; and provide support to inmates living with HIV through PLHIV support group;



Figure 12: SHARe II's Benny Njovu Trains Prison Inmate Peer Educators at Mukobeko Maximum Security Prison

- Assisted the Zambia Prisons Service (ZPS) to implement structural level interventions to improve inmate health;
- Provided technical support to: the ZPS legal analysis; the MHA HIV/AIDS Wellness Policy; and the ZPS Health Strategic Plan enabling ZPS and its stakeholders to implement programs to strengthen the ZPS health system including increasing the size of the health directorate, to improve inmate health;
- Provided support to address health and HIV-related aspects through Parole Board hearings (financially supported by SHARe II in 2014) and through ZPS Medical Directorate recommendations/Ministerial pardons

## SHARe II 's Project Closeout Meeting

The SHARe II project close-out conference was held at the Anada Conference Center in Lusaka on July 1, 2015. The conference, whose theme was “Leaders in HIV/AIDS Taking up the Baton” focused on highlighting the achievements of the SHARe II project in: increasing HIV/AIDS leadership participation in the national HIV/AIDS response by different categories of Zambian leaders; outlining gains made to improve the HIV-related policy and legal environment and to improve HIV response coordination; and showcasing the impact of implementing quality and comprehensive HIV/AIDS workplace programs in the public, private and informal sectors. Over 200 invited guests attended the event including the Republican Vice President, Her Honor, the Minister of Community Development Mother and Child Health Honorable Emerine Kabanshi Mrs Inonge Wina (Guest of Honor) and the Minister of Gender, Honorable Prof Nkandu Luo, MP and the (former) USAID Mission Director Dr. Susan Brems. SHARe II partners who attended included 18 Chiefs and Chieftainesses, representatives of the religious mother bodies and theological schools, GRZ ministries, NGOS, Public and private organizations, workplaces, musicians, all of whom provided commitment and support and contributed to the successes of the project. Apart from a video presentation of SHARe II programmatic achievements and results, SHARe II beneficiaries were provided with a platform and opportunity to speak about SHARe II and its impact in partner communities. The beneficiaries represented the breadth of SHARe II and included Mr Maiko Zulu, Musician; Hon. Emerine Kubanshi, CAPAH-Zambia MP, Hon. Professor Nkando Luo, Gender Interventions; Hon Malabo Kunda, Subordinate Court Magistrate, Chipata; Mr Percy Chato, Commissioner, Zambia Prisons Service; and Her Royal Highness Inankwazi, Mukuni Chiefdom. SHARe II -trained HIV/AIDS Champions Angela Nyirenda, Mpande and Kings Malembe provided HIV/AIDS messaging and music entertainment.



Figure 13: Outgoing USAID Mission Director, Dr. Susan Brems, receiving a farewell gift and the vote of Thanks from HRH Munokalya Mukuni .

## SHARe II 's Project Closeout Meeting cont...

SHARe II would not have been successful without the participation of the project's partners and beneficiaries who welcomed SHARe II into their government offices and institutions, workplaces, communities, schools and chiefdoms. The project has a very broad reach and works with over 150 partner institutions, organizations, chiefdoms, and communities, and reaches over one million beneficiaries.

SHARe II and its partners and beneficiaries have implemented many successful interventions during the lifetime of the project. These interventions create an enabling HIV response environment, promote HIV care and treatment, and prevent new HIV infections, including creating demand for prevention of mother to child transmission (PMTCT), antiretroviral therapy (ART), and voluntary medical male circumcision (VMMC) services, HIV testing and counseling (HTC), and condoms.

SHARe II partners thanked USAID and SHARe



**Figure 14:** The Republican Vice President, Her Honor, Mrs Inonge Wina, USAID Mission Director, Dr. Susan Brems and Reverend Ezron Musonda, Baptist Theological Seminary of Zambia launching the Religious Leaders Training manual.

## Finance & Administration

### *Task Order Funding*

There has been no change in the total obligated funding under the SHARe II task order during this period which remains at \$25,405,486 (approximately 85% of and \$4,585,204 less than the award budget).

As of September 30, 2015, JSI had expended and accrued approximately \$25,024,995 under the SHARe II task order. The balance of \$380,491 in unspent obligation is expected to be all or almost all fully utilized on final SHARe II close out and documentation activities over the last month of

the project.

### *Local Sub-partners*

All SHARe II Sub-Partners were closed out prior to March 2015, although Administrative close out matters continued during the period including the follow up on the USG audits being conducted by a number of partners. There are no outstanding matters to report.

### *Personnel and Procurement*

All key personnel remain at post. Reductions in SHARe II JSI staff took place throughout the period and only a few critical staff members are

# Thank You for Giving Us the Opportunity to Implement SHARe II!



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