



# Regional Minimum Standards and Brand for HIV and other Health Services along the Road Transport Corridors in the SADC Region

## Executive Summary



A truck stopped in Musina, South Africa, on the border with Zimbabwe

*Photo credit: Mark Tuschman*

A recent HIV Sero-Prevalence Survey by the World Health Organisation in three border sites in southern Africa identified HIV prevalence rates of 53% among sex workers (SW) and 26% among long distance truck drivers (LDTD). This disproportionate vulnerability among SW and LDTD along transport routes in the region is fuelled by high levels of mobility; poor access to HIV, sexually-transmitted infections (STIs), tuberculosis (TB) and other essential health services; and limited coordination of service providers along the transport corridors. This situation leaves behind priority key populations and continues to be a source of HIV transmission in the region. Furthermore, it poses challenges to case detection, retention in care, and management of communicable and non-communicable diseases.

Member States in the Southern African Development Community (SADC) are committed to the identification, adoption and implementation of evidence-based best practices, harmonization of standards, and revitalization of prevention strategies to achieve the UNAIDS 90-90-90 targets by 2020. In order to reach the ambitious goals of an AIDS free-generation, the region must apply an inclusive approach targeting marginalized populations including SW and LDTD.

In response, the SADC Secretariat developed the **Regional Minimum Standards and Brand for HIV and other Health Services along the Road Transport Corridors in the SADC Region (RMSB)** in 2014. Approved by the SADC Council of Ministers of Health in November 2015, the standards harmonize prevention, treatment and care provided throughout the region's transport corridors, starting from the existing Cross Border Initiative roadside wellness centers.

These standards seek to complement existing services, guiding SADC Member States and implementers to more effectively target high-risk geographic areas and improve the quality and reach of current HIV prevention and health services to meet the needs of LDTD and SW. The RMSB will serve as a platform to strengthen regional and national partnerships among relevant ministries, the private sector, donors, and civil society in the delivery of health services to these populations. They emphasise the specific needs of LDTD and SW, and align to existing global and regional standards, guidelines and frameworks for disease prevention, diagnosis, and management. The RMSB outline a minimum package of services and appropriate service delivery models. They define roles and responsibilities for key stakeholders, including the

SADC Secretariat, Member States, the private sector, employer and workers' organisations, academia/research institutions, donors/international cooperating partners and the media. They also address management mechanisms, including financing, quality assurance, and monitoring and evaluation to facilitate sound and sustainable implementation. The RMSB advocate for improved access to prevention, diagnostic and treatment services for the following conditions:

**Communicable diseases**

- HIV
- TB
- STIs
- Malaria

**Non-communicable diseases**

- Hypertension
- Diabetes

**Other**

- Sexual and reproductive health services, including family planning and cervical cancer screening and referral
- Occupational health-related conditions

SADC and its partners expect that the implementation of the RMSB will significantly enhance the quality and reach of prevention and treatment services to vulnerable populations in the region. Access the RMSB at: [www.sadc.int](http://www.sadc.int).

RMSB branding



**CROSSBORDER WELLNESS**  
*Drive for life.*

Transport routes in the Southern African Development Community



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