Reducing Vulnerabilities to HIV Infection Among Adolescent Girls and Young Women through Social Asset Building Clubs in Zimbabwe, 2023.

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Poster Number: THPEC024	**Summary track: Epidemiology and Prevention Science**
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Summary subcategory: Integrated HIV prevention for adolescent girls and young people	

Introduction

- Adolescent girls and young women (AGYW) are disproportionately affected by HIV, and often unaware of their risk.
- Zimbabwe Health Interventions (ZHI) is implementing the Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) program to reduce risk of HIV among AGYW.
- The DREAMS partnership supports vulnerable AGYW to form social asset building clubs (SABC) which strengthen capacity on HIV prevention, economic independence, and addressing harmful community norms that increase HIV infection risk.

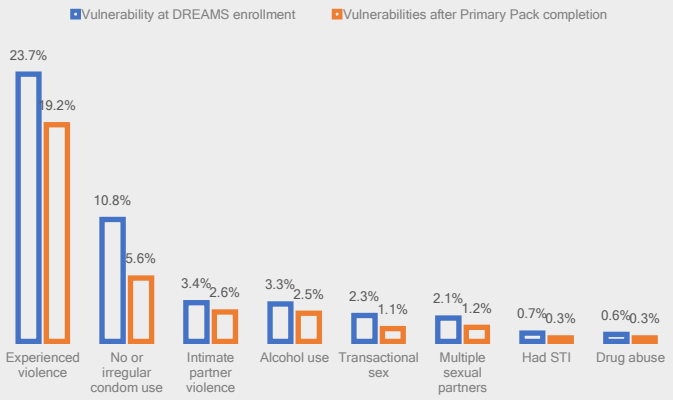
Methods

- We conducted a cohort study among AGYW enrolled in the DREAMS program between October and December 2021.
  - ✓ AGYW were tracked for 12 months
- AGYW completed the primary package for HIV prevention, gender norms and financial literacy through SABC.
- Vulnerabilities for contracting HIV at enrolment and endline were collected using in-depth interviews.
- Data were analysed using Statistical Package for Social Scientists (SPSS) generating descriptive statistics; Chi-square test was used to assess differences in vulnerabilities.
- Study was covered by Medical Research Council of Zimbabwe approved protocol (MRCZ/E/254).

Main Objective

To assess effectiveness of SABC in reducing risk of acquiring HIV among AGYW under the ZHI-supported DREAMS program in Zimbabwe.

Results



- A total of 964 AGYW were assessed, and all had completed the DREAMS primary package.
- Overall, there was a decline in vulnerabilities of AGYW who participated in SABC and completed primary package.
- Significant declines were noted in:
  - ✓ AGYW who experienced violence from 23.7% to 19.2% (p=0.00),
  - ✓ no or irregular condom use from 10.8% to 5.6% (p=0.01).
  - ✓ Transactional sex from 2.3% to 1.1.% (p=0.04)
  - ✓ Alcohol use from 3.3% to 2.5% (p=0.04).
  - ✓ Multiple sexual partners from 2.1% to 1.2% (p=0.0).

Discussion

- SABC were effective in empowering AGYW, thereby reducing the risk of acquiring HIV.
  - ✓ To strengthen Social Asset Building Clubs as they are critical in information sharing and building resilience for the AGYW.
  - ✓ Promote completion of primary package sessions as they are the basis for empowering AGYW.

Conclusion

- The DREAMS program through SABC significantly reduced vulnerability to HIV among AGYW.
- We recommend strengthening and scaling up of SABC, and completion of primary package across all DREAMS districts to reduce vulnerability to HIV among AGYW.

Key Words

AGYW, HIV, DREAMS, Outcomes.

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Retention of Adolescent Girls and Young Women in HIV Prevention Interventions in Selected Districts of Zimbabwe, 2022.

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Poster Number: THPEC025	**Summary track: Epidemiology and Prevention Science**
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Summary subcategory: Integrated HIV prevention for adolescent girls and young people	

Introduction

- Zimbabwe Health Interventions (ZHI) is implementing the DREAMS-RISE program to reduce HIV infection risk among adolescent girls and young women (AGYW) in 9 Districts of Zimbabwe.
- AGYW are enrolled and offered the DREAMS Primary Package using H4L 360^0 curriculum and requisite secondary services per individual need as determined by their vulnerability.
- We assessed Primary Package service completion for AGYW in Social Asset Building Clubs (SABCs) and service layering over time for the period October 2021 to September 2022 across all 9 DREAMS districts.

Objectives

- To assess rate of completion of the DREAMS primary package over time among AGYW enrolled in the program
- To assess layering of services for AGYW who completed the DREAMS primary package over time.

Methods

- **Study Design:** We conducted a descriptive cross-sectional assessment where routine program data for the period October 2021 to September 2022 were extracted from the DREAMS database and analyzed.
- **Study setting:** Program data for AGYW aged 10-24 years enrolled in the DREAMS program were analyzed for all 9 RISE districts i.e., Bulawayo, Beitbridge, Bulilima, Gwanda, Gweru, Insiza, Mangwe, Matobo, and Mazowe.
- **Study participants:** AGYW enrolled in DREAMS program across the 9 ZHI-supported districts
- **Data Analysis:** Cascade analysis was conducted using STATA and Ms. Excel generating proportions for service completion and correlation between time spent in DREAMS and secondary services received.
- **Ethical Considerations:** Assessment was covered by Medical Research Council of Zimbabwe approved non-research determination protocol (MRCZ/E/254).

Results

- Data for 111,740 AGYW enrolled in the DREAMS program were analyzed.
- 99.7% of these started the DREAMS Primary Package.
- 94.1% of those who started completed the Primary Package within 6 Months.
- 97% of all AGYW cumulatively completed the primary package in7-12 Months (Figure 1).
- 55.7% received need-based secondary services.

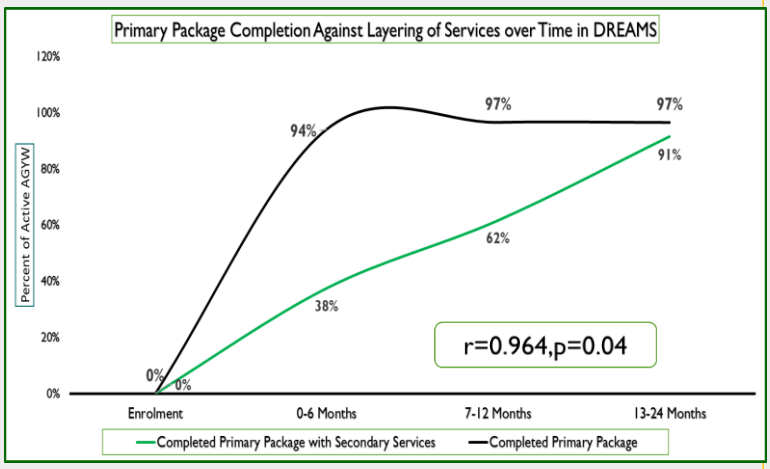

Figure 1: Primary Package completion and secondary service layering

Discussion

- High primary pack completion within 6 months of DREAMS enrollment was a result of: 1) robust service provision, tracking and on-site support system.(Data Use), and 2) community stakeholder engagement through community visioning, creation of functional community based Social Asset Building Clubs for AGYW.
- The longer AGYW stayed within DREAMS the more likely they were to complete primary package and receive secondary services; aligns to program guidance and demonstrates implementation fidelity.

Conclusion

- Retention of AGYW in the DREAMS program for a longer period of up to 12+ months increased chances of them receiving and completing both the primary package and need-based secondary services.
- AGYW who were in the program longer were more likely to seek secondary services than those in the early stages up to six months

Key Words

Primary, Package, Completion, AGYW, DREAMS, Zimbabwe.

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Monitoring Achievement of Short- to Medium-term Outcomes among Adolescent Girls and Young Women Enrolled in the DREAMS Program Through Sentinel Site Survey in Zimbabwe, 2022.

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Poster Number: THPEC023	**Summary track: Epidemiology and Prevention Science**
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Summary subcategory: Integrated HIV prevention for adolescents and young people	

Introduction

- Adolescent girls and young women (AGYW) are disproportionately affected by HIV, accounting for 18% of new HIV infections globally in 2020, and 25% of new infections in Sub-Sahara Africa (UNAIDS, 2023).
- Zimbabwe Health Interventions (ZHI) is implementing the Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) program to reduce new HIV infections among AGYW.

Main objective

To measure effectiveness of DREAMS interventions in achieving short to medium-term outcomes within priority populations.

Methods

- A longitudinal, prospective mixed methods study was conducted where data were collected from randomly selected AGYW aged 9-19 years across 9 ZHI-supported DREAMS districts.
- Key informants included program implementers and government of Zimbabwe (GoZ) line ministries.
- Quantitative and qualitative data were collected from AGYW using structured questionnaires within KOBO toolbox and focus group discussion guide respectively.
- Quantitative data were analyzed using SPSS version 23 generating proportions, measures of central tendency and association; qualitative data were analyzed using ATLAS.ti.
- Study received ethical approval from Medical Research Council of Zimbabwe (MRCZ/A/2933).

Results

- A total of 2,143 AGYW were interviewed and 67.7% (1,451/2,143) were aged 9-14, 74.0% were in-school, 20.1% were orphans, and 1.8% were living with disability.
- 65.9% of AGYW could comfortably talk about HIV and sexual and reproductive health (SRH) issues, and 61.7% could comfortably report sexual and gender-based violence (SGBV).
- 17% of AGYW experienced GBV in the past 12 months and 50.2% disclosed to someone.
- Of the AGYW who had sex in the past 6 months, 52.6% reported using a condom.
- 92.1% could decide who they wanted to marry, and 3.6% reported that women should tolerate intimate partner violence.
- 9.9% perceived themselves at risk of contracting HIV and 22.9% were aware of HIV pre-exposure prophylaxis (PrEP).

Discussion

- AGYW were empowered to challenge harmful social norms, practice safer sex, and report SGBV which demonstrates effectiveness of DREAMS interventions in enabling achievement of intended outcomes including reduction of HIV infection risk.
- AGYW had suboptimal knowledge about PrEP and low HIV infection risk perception. Therefore, there is need for targeted education through social asset building clubs and community campaigns.

Conclusion

- A significant proportion of AGYW were empowered to challenge harmful social norms, practice safer sex, and report SGBV.
- AGYW's HIV risk perception and knowledge about PrEP were however suboptimal.
- We recommend continued provision of differentiated and context-specific services to meet the unique needs of AGYW.

Key Words

AGYW, HIV, DREAMS, Outcomes.

References

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Fostering Sustainability of HIV Prevention among Adolescent Girls and Young Women through Integration of DREAMS Program within School Activities: Lessons from Insiza District of Zimbabwe, 2022.

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Poster Number: THPEB014	**Summary track: Clinical Science, Treatment, and Care**
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Summary subcategory: Innovation in Service Delivery Approaches	

Introduction

- Zimbabwe Health Interventions (ZHI) is implementing the Determined, Resilient, Empowered, AIDS free, Mentored and Safe (DREAMS) program to reduce HIV incidence among adolescent girls and young women (AGYW) in high HIV burden districts.
- The school-based DREAMS component requires functional integration with guidance and counselling (G&C) sessions to ensure delivery of HIV and violence prevention, gender norms and financial literacy sessions.

Main objective

To assess effectiveness of 72-hour gender-based violence (GBV) response rooms to facilitate life skills development, HIV and GBV knowledge generation and sharing, timely identification, reporting of GBV cases.

Methods

- A descriptive cross sectional study was conducted where data were collected from randomly selected AGYW aged 9-14 years from Dekezi Primary school.
- Other participants included school development committee members and school teachers.
- Quantitative and qualitative data were collected from AGYW and other participants using structured interviews.
- Records from the 72-hr GBV response room were reviewed and used in this study.
- Study was covered by Medical Research Council of Zimbabwe approved protocol (MRCZ/E/254).

Results

***Figure 1**: Inside a school 72-hr GBV response room*

- There was an increase in the number of physical and sexual violence (SV) cases reported by learners from Dekezi primary school, from an average of 2 per term before establishment of 72-hour GBV room to 6 per term.
- There was increased knowledge on HIV prevention among learners which enabled them to win National AIDS Council (NAC) district schools' competition for the first time and win provincial practical competition.
- Child protection committees were critical in resolving family issues affecting learner's participation in school.
- The local community participated in the establishment of 72hr GBV response room.

Discussion

- Increased identification and reporting of cases through the 72-hr GBV response was due to learners' confidence to open up and use the 72-hr GBV response platform.
  - ✓ To strengthen school based Social Asset Building Clubs as they are critical in information sharing and building resilience for the AGYW.
  - ✓ Involvement of community leaders and caregivers in identifying and reporting of abuse cases that are being perpetrated by community or family members.

Conclusion

- The establishment of a functional 72-hr GBV response room resulted in increased identification and reporting of SGBV cases.
- This also resulted in increased knowledge on HIV and violence prevention as evidenced by the school's performance on HIV competitions.

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Key Words

AGYW, HIV, DREAMS, School, GBV, Zimbabwe

Use of Electronic Platforms to Track Social Asset Building Clubs: Lessons from the DREAMS Program in Insiza district of Zimbabwe, 2023.

I. Mushayi[1], D. Dhakwa[1], F. Mudokwani[1], F.H. Mudzengerere[1], T Makuni[1], T. Bhatasara[2] B. Nyamwanza[3], R. Yekeye[3], B. Madzima[3], M. Mutseta[4], H.W. Mafaune[1], E.Tachiwenyika[1].

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Poster Number: THPEC039	**Summary track: Epidemiology and Prevention Sciences**
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Summary subcategory: Epidemiology of HIV in Youth, Adolescents, and Children	

Introduction

- Zimbabwe Health Interventions (ZHI) is implementing the Determined, Resilient, Empowered, AIDS free, Mentored and Safe (DREAMS) program to reduce HIV incidence among adolescent girls and young women (AGYW) through Social Asset Building Clubs (SABC).
- ZHI designed an electronic SABC tracking tool to facilitate real-time collection of SABC activity data focusing on AGYW attendance, retention, and service uptake.

Main Objective

To improve systematic tracking and improved functionality of SABC, as well as improve service delivery to AGYW

Methods

- A Kobo Toolbox-based electronic tool was developed and used to collect SABC activity data.
- Quantitative and qualitative data were collected from all 119 community-based Social Asset Building Clubs for AGYW aged 15-24 years across all the wards of the district.
  - ✓ Other participants included service providers from other implementing partners.
- Quantitative data were analyzed using Statistical Package for Social Scientists (SPSS) generating frequencies, proportions and measures of central tendency.
- Assessment was covered by the Medical Research Council of Zimbabwe approved non-research determination protocol (MRCZ/E/254).

Results

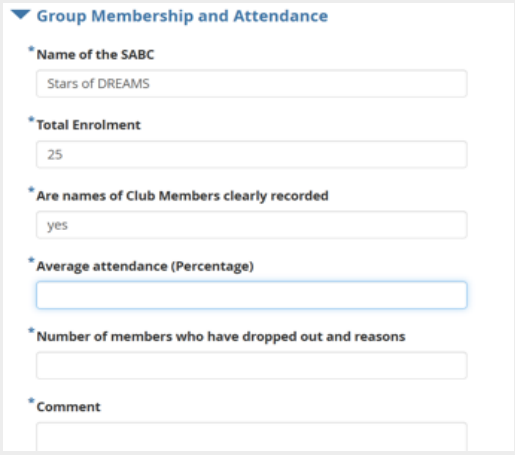

Figure 1: A screenshot of the SABC tracking tool from KOBO collect

- About 91% of SABC had attendance of at least 60% after deployment of the tracking tool, compared to 76% before the initiative.
- The overall dropout rate from SABC was 11%, an improvement from 28% before deployment of the electronic tracking system.
  - ✓ Loses were largely a result of relocation, marriages, loss of interest and long walking distances.
- Frequency of SABC meetings were monthly (48%), fortnightly (18%) and weekly (53%).
  - ✓ Most (48%) of the dropouts were from groups that met monthly.
- Of all the AGYW enrolled in SABC, 56% received Internal Saving and Lending Scheme (ISALS) training and 72% of these were active.
- About 58% of enrolled AGYW received sexual reproductive health (SRH) clinical services.

Discussion

- SABC session attendance improved significantly after deployment of the electronic tool, Therefore, there is need to scale-up use of the electronic tool in other DREAMS districts.
- Similarly, there was overall improvement in retention of AGYW within SABC after deployment of the electronic tracking system; the tool enhanced tracking of AGYW.

Conclusion

- Systematic tracking using the electronic tool improved functionality of SABC, improved service delivery and monitoring of ISAL groups.
- We recommend scaling up this initiative to improve SABC activity monitoring and functionality.

Key Words

Adolescent, Girls, Young, Women, Electronic, Tool, DREAMS, Zimbabwe.

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Pre-Exposure Prophylaxis Initiation and Adherence in Female Sex Workers at New Africa House Clinic in Harare, 2020-2021.

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Poster Number: THPEC002	**Summary track C: Epidemiology and Prevention Science**
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Summary subcategory: Integrated prevention for and with PLHIV, and Key populations	

Introduction

- Prevention is key in keeping female sex workers (FSW) protected from HIV infection.
- Pre-Exposure Prophylaxis (PrEP) offers additional safety for populations who are at substantial risk of acquiring HIV.
- FSW are among the key and vulnerable populations at elevated risk of HIV infection

Main objective

To determine factors associated with the female sex workers decision to initiate and adhere to PrEP medication up to the end of the cycle.

Methods

- A secondary data analysis study was conducted focusing on PrEP initiation and adherence among FSW at New Africa House (NAH).
- Between June 2020 and December 2021, NAH clinic recruited 1,285 FSW and their data were captured in electronic medical records system-BAHMNI.
- Data were extracted from BAHMNI and analyzed using STATA 12.0 generating proportions, measures of central tendency and association.
- Study received ethics approval from Africa University Research Ethics Committee (AUREC) permission (Approval Number: Ref: AU 2336/22).

Results

Variable	n (%)
Reasons for starting PrEP:	
Participant is sexually active	1279 (99.5)
Sexually active in high KP category	1116 (86.9)
Participant has more than one sexual partner	970 (75.5)
Participant has partner with unknown HIV status	434 (33.8)
Participant doesn't use condoms consistently	1162 (90.4)
Participant has a KP sexual partner	880 (68.5)
Participant is in a sero-discordant relationship	16 (1.3)
Participant injects drugs	29 (2.3)

***Table 1**: Reasons for initiating PrEP*

- Independent factor associated with PrEP initiation was perceived risk associated with FSW sexual activity and type of partners engaged with.
- Predictor variables; age, marital status, employment status, referral source, sexually active key population groups, condom burst, KP partner, sero-discordant relationship, history of sexual abuse or GBV, multiple medications use were statistically and significantly associated with PrEP adherence.

Variable		Crude		Adjusted	
**Reference group*		OR	95% CI	OR	95% CI
Age	18-19 *	1.0		1.0	
	40-44	0.5	0.2 - 0.8	0.3	**0.7 - 4.2**
Marital status	Single *	1.0		1.0	
	Cohabiting	1.4	0.9 - 2.1	2.3	**1.1 – 4.8**
	Separated	1.2	0.8 - 1.6	1.8	**1.1 – 3.0**
Employment status	Unemployed *	1.0		1.0	
	Transport business	1.4	1.0 - 2.0	1.9	**1.0 - 3.4**
	Self employed	0.6	0.5 - 0.8	0.6	**0.4 - 0.9**
Referral source	IPC agent *	1.0		1.0	
	Index patient	0.304	0.156 - 0.593	0.130	**0.059 - 0.289**
	Other organisation	0.407	0.097 - 1.714	0.146	**0.025 - 0.866**
Sexually active in high prevalence KP category	Yes *	1.0		1.0	
	No	1.7	1.2 - 2.4	2.9	**1.6 - 5.2**
Condom burst in the last 3 months	Yes *	1.0		1.0	
	No	0.1	0.1 - 0.2	0.0	**0.0 - 0.1**
Has KP sex partner	Yes *	1.0		1.0	
	No	0.8	0.6 - 1.0	0.6	**0.4 - 0.9**
In a sero-discordant relationship	Yes *	1.0		1.0	
	No	8.7	2.0 - 38.3	9.6	**1.6 -56.1**
Has history of sexual abuse or GBV	Yes *	1.0		1.0	
	No	2.4	1.0 - 5.4	4.5	**1.1 -19.1**
Taking other medication	Yes *	1.0		1.0	
	No	1.7	1.3 - 2.3	2.0	**1.2 - 3.3**
Knows non-regular partner HIV status	Yes *	1.0		1.0	
	No	0.4	0.2 - 1.1	0.3	**0.1 - 1.0**

Discussion

- FSW understood the importance of PrEP as a mitigation measure to further spread and emergence of new HIV infections
- Non-adherence rate of 45.2% which is slightly lower than the June 2020 program data 50.7% registered. Attributed to an improvement in regular visits and follow up at NAH.
- FSW who initially expressed interest to start taking PrEP, however in the long-term adherence can remain poor.

Conclusion

- Factors influencing PrEP uptake among FSW included knowledge of risk - being sexually active, inconsistent condom use and having multiple sexual partners.
- Older female sex workers and those in sero-discordant relationships were less likely to adhere to PrEP medication.
- We recommend close monitoring of individuals on PrEP to encourage PrEP adherence and reduce possibilities of discontinuing.

Key Words

Sex, Worker, HIV, Prevention, Key, Populations, PREP, Zimbabwe

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