



Manicaland HIV/STD Prevention Project M&E Facilities Status Report 2012

Biomedical Research & Training Institute, 4th Floor, Nicoz Diamond House, Samora Machel Avenue, P.O. Box CY 1753, Harare, Zimbabwe Tel: 04735000/02 & Stand 188, Mutasa D.C., P.O. Box Hauna 3449, Zimbabwe, Tel: 0228 2230.

INTRODUCTION

HIV/AIDS control services covering prevention, treatment and impact mitigation are currently being scaled-up nationally in Zimbabwe. In the Manicaland Study, trends in the uptake and effectiveness of these services are being measured as part of an ongoing prospective population-based cohort study. For these data to be interpreted correctly, information is needed on trends in the local availability and provision of services. It is against this background that we are measuring the trends in the availability of national HIV/AIDS control programme activities at the district level in rural areas in eastern Zimbabwe. The survey was designed to allow us to construct indicators that provide a measure of coverage and uptake of populations in need. The indicators will also allow us to make more valid comparisons across districts and give service providers an idea of the extent to which they are meeting the needs of the population. The survey draws a sample from a baseline census of all HIV/AIDS-related service providers and facilities in the Manicaland Study areas in Mutasa and Makoni districts. The first survey round was conducted from April-July 2010, the second from October-December 2010, and the third from May-August 2011. This sheet compares the main results on local patterns of facility-level services, such as behaviour change, counselling, biomedical, and care and support services.

KEY RESULTS

ART

- The percentage of the eligible adult population receiving ART in Makoni has declined steadily over the three rounds
- The increase in the percent of people receiving ART in Mutasa between Round 1 and 2 is due at least in part to an increased number of clinics beginning to supply ARVs
- Makoni has generally provided a greater percent of its population with ART than Mutasa

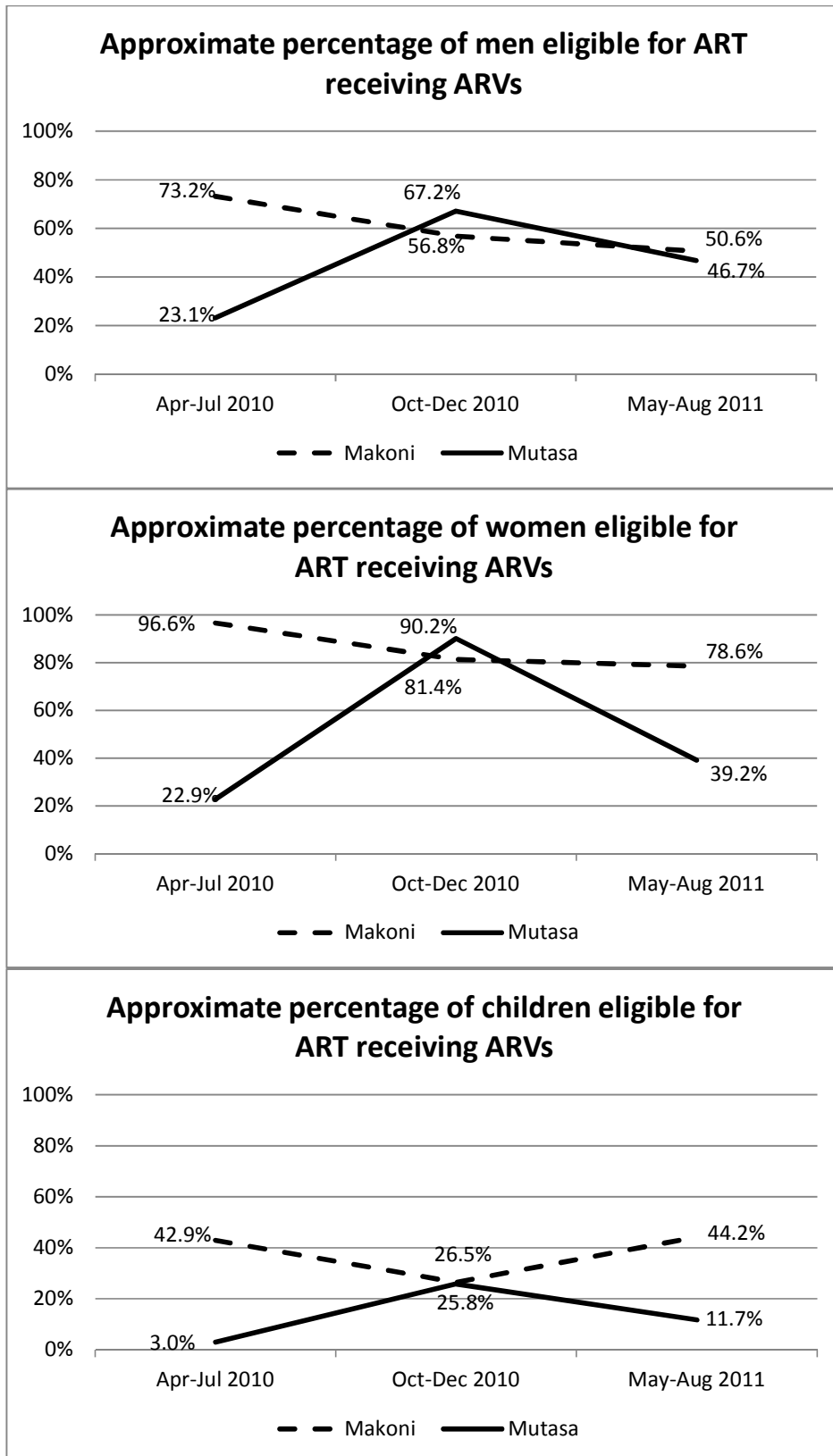
CONDOMS

- More male condoms are distributed per man than female condoms are distributed per woman
- The number of female condoms distributed in Makoni has been steadily decreasing
- The high number of male condoms distributed in the first round in Makoni was due to one facility that distributed over 160,000 condoms in one month

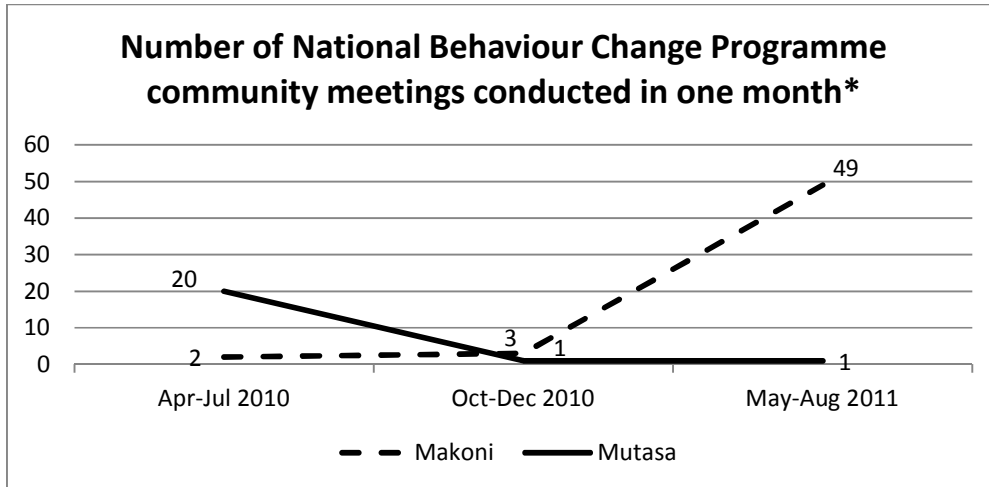
OTHER

- The percent of pregnant women receiving PMTCT is steadily increasing in both districts
- Mutasa, which was a focus area of the National Behaviour Change Programme, trained more community members and leaders than Makoni, despite having a smaller population
- The number of PLWHIV and OVC receiving psychosocial support increased in the most recent round in Mutasa, due to additional funding received by one organisation
- In both districts the percentage of OVC receiving educational support has dropped below the levels seen in the first round
- Less than one percent of the population in both districts were treated for an STI in one month. This only indicates the percentage of the total population (aged 15-64) that have been treated for an STI, not the percentage that have an STI
- The availability of drugs to treat TB has been increasing steadily in Mutasa. In Round 3, 100% of clinics and hospitals surveyed had TB drugs on hand in Makoni
- The number of facilities providing different services can be found in Table 1

ART

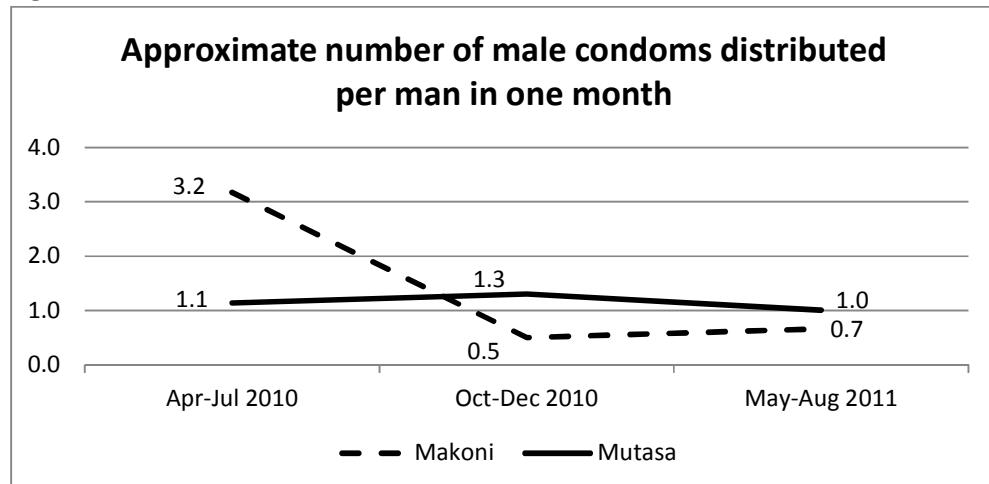


NATIONAL BEHAVIOUR CHANGE PROGRAMME



*Data not scaled to district level

CONDOMS



PMTCT

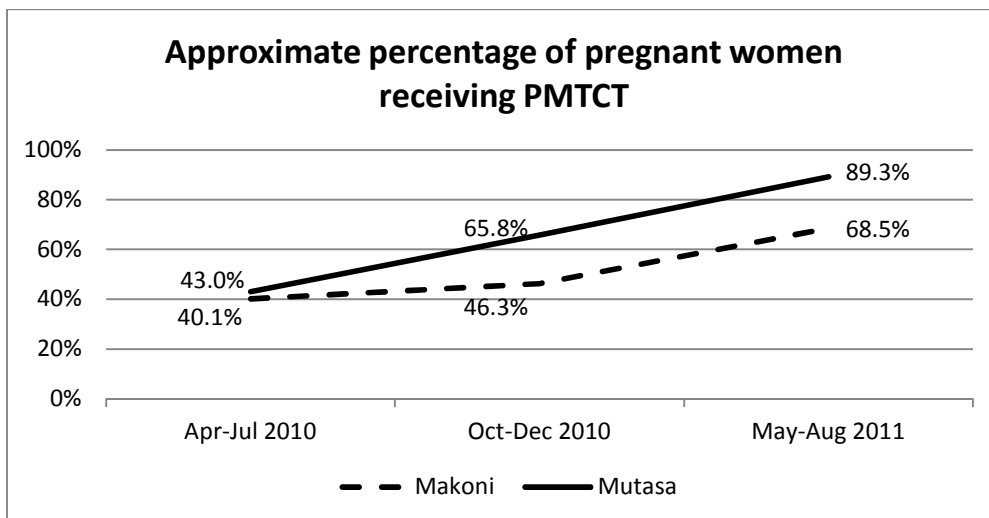


Table 1. Number of facilities offering different services

	Makoni			Mutasa		
	Round 1	Round 2	Round 3	Round 1	Round 2	Round 3
HTC	18	20	18	15	17	19
PMTCT	18	18	17	13	14	16
Family planning for HIV+ women	15	2	18	7	3	16
Condom distribution	29	28	27	30	32	29
Male circumcision	1	1	0	1	0	0
OVC support	33	29	20	22	16	17
OVC carer support	24	16	3	19	12	11
PLWHA carer support	22	10	4	20	10	14
Support for PLWHIV	33	20	11	24	16	19
Homebased care	24	15	8	21	15	16
End of life care	12	5	3	6	2	2
TB treatment	17	17	17	19	19	16
STI treatment	17	17	18	19	20	18
Provide ART	4	4	8	3	4	6
Total number of facilities	69	76	71	53	52	49

Table 2. Additional trends in service provision

	Makoni			Mutasa		
	Round 1	Round 2	Round 3	Round 1	Round 2	Round 3
National Behaviour Change Programme						
Number community members trained*	0	0	192	695	105	133
Number community leaders trained*	0	49	132	90	214	168
Educational support for OVC						
% OVC receiving help with school costs	12.2%	19.9%	6.9%	39.5%	8.3%	19.2%
% OVC receiving early education and care	7.6%	4.2%	3.6%	10.0%	0.06%	1.0%
Psychosocial support						
% OVC receiving psychosocial support	9.1%	11.9%	5.9%	13.7%	5.2%	80.9%
% PLWHIV receiving psychosocial support	16.8%	3.8%	7.0%	28.8%	8.5%	58.0%
HTC						
% people receiving HTC in one month	0.70%	0.93%	0.67%	1.47%	1.65%	1.65%
Condoms						
# female condoms distributed per woman	0.14	0.11	0.15	0.15	0.12	0.09
STI treatment and drug availability						
% adults treated for an STI in one month	0.18%	0.23%	0.23%	0.30%	0.41%	0.26%
% hospitals & clinics with TB drugs available*	88.2%	78.9%	100%	70.0%	85.7%	93.8%
% hospitals & clinics with adult CTX available*	76.5%	63.2%	100%	90.0%	95.2%	93.8%
% hospitals & clinics with child CTX available*	58.8%	52.6%	94.1%	65.0%	71.4%	50.0%

*Not scaled to district level

Calculations, assumptions and additional data sources

- As only a sample of facilities were surveyed, the collected data were scaled up to obtain a district-level estimate based on the percent of that type of facility surveyed in the district
- Percentage values were calculated by dividing the estimated number of people receiving/using a service in a district by the people eligible for that service in the district
- Data on district-level HIV prevalence and population estimates was obtained from the UNFPA