

2016/17 ANNUAL REPORT

**NATIONAL EMERGENCY
RESPONSE COUNCIL ON HIV/AIDS**





VISION

An AIDS-Free Swaziland

MISSION

To provide leadership for the national multi-sectoral response to HIV/AIDS, including creating an environment that supports efficient and effective service delivery to the people of Swaziland.



PREFACE

This Report provides an update on the performance of the National Emergency Response Council on HIV/AIDS (NERCHA) during April 2016 to March 2017. It consists of a summary of activities by the dual functions of NERCHA which comprise of national HIV multi-sectoral coordination and Global Fund for AIDS, Tuberculosis and Malaria grant management.

The report is divided into three sections.

Section 1 is coordination and management of the national multi-sectoral response to HIV and AIDS

Section 2 is a summary of HIV coordination and grant performance and recommendations. Also included with this section are the Computed Measurement indicators for the financial year.

Section 3 is a detailed report of financial performance.

This report is produced by the National Emergency Response Council on HIV/AIDS (NERCHA). Access to this publication is available through the Internet at the following address: <http://www.nercha.org.sz>

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The report is published annually in September.



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THE BOARD OF DIRECTORS



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Dr. Jonathan Dlamini
Member



Mr Khanya Mabuza
National Executive Director

STATEMENT BY CHAIRMAN OF THE BOARD



The past year has brought tangible evidence that the country is close to controlling the HIV epidemic.

I am thankful to the visionary leadership of His Majesty King Mswati III who has challenged the nation to end AIDS by 2022. It is that vision that has spurred the nation towards attaining that goal that was seemingly unattainable a few years ago. I would like to thank the Prime Ministers office for the support it has continued to provide to the HIV response, as well the tireless effort of the NERCHA council and directorate.

This year we have recorded an increase in the number of people testing and enrolling for treatment, and those whose viral load is suppressed. The progress made in the past year is a result of collective effort by civil society (local and international NGO's), health workers, private and public sectors, communities, donors and people living with HIV. NERCHA has had the privilege of leading and coordinating the good work that a dedicated team has done. We shall forever remain indebted to our development partners who have remained committed to providing the technical and financial support required to sustain the gains made, and accelerate the HIV response towards eliminating HIV as a public health threat in the country.

This report records some of the groundbreaking initiatives that have stirred the response in the positive direction.

As we move towards 2022, we are mindful that there are areas in the response that still require attention.

We need to intensify concerted efforts towards reducing new HIV infections even as we contain the epidemic by elimination AIDS related deaths. In the quest to achieve this, NERCHA will provide the necessary support partners to strengthen the response by facilitating the review of the current extended National Strategic Framework (eNSF) with the aim of improving strategies and sharpen targeting and guide the implementation of priority intervention stated in the Swaziland HIV Investment Case (SHIC): *Umgubudla*.

The world is watching Swaziland take centre stage in eliminating HIV as a public threat. We cannot afford to loose the momentum

ENDING AIDS BY 2022





STATEMENT BY EXECUTIVE DIRECTOR

A nation at the verge of ending AIDS; *Celebrating milestones - Stepping up the momentum*



As another fleeting year has passed, one reflects with admiration on the increasing positive yields in the HIV response, thanks to the consented effort of all the players, particularly, the Prime Minister's office, government, development partners, civil society organizations, people living with HIV and AIDS, as well as the NERCHA team. The country has progressed to being at the verge of ending AIDS, which is a historic achievement.

For the first time ever, NERCHA and partners hosted a successful National HIV and AIDS conference in the country themed “*From AIDS Crisis to Opportunities: What the world can learn from Swaziland*”. The Conference showcased the journey of the country's HIV and AIDS response from inception with the aim of identifying successes and lessons learnt, with the view of sharing it with the rest of the world. In addition to hosting this ground-breaking conference NERCHA continued to support on-going research for new technologies for preventing new HIV Infections, including; the Comprehensive HIV Epidemiological and Prevention Response Analysis (CHEPRA) study, and the Sitakhela Likusasa Impact Evaluation.

Other critical milestones during this fiscal year include the effort to stimulate and focus HIV response through reviving the HIV prevention Coordination Mechanism, launching and operationalizing the Swaziland HIV Investment Case (SHIC): Umgubudla, developing the *Swaziland Parliament HIV and AIDS Strategic and operational Plan (2017-2020)*, developing the national mainstreaming guidelines, supporting the development of strategic plans for sectors (PSHACC), and promoting service uptake among men a “left behind” population group, yet a critical player in the response, to name a few.

A momentous event for HIV prevention this past year was hosting the National Youth HIV Prevention Indaba to solicit inputs from young people on how to improve HIV prevention interventions that target young people. This activity provided the opportunity not just to appreciate the modern-day youth, but to identify and understand how to best address the gaps in programming and service delivery for this fragile target population.

While a lot of ground has been covered, a lot is still to be done. As we fast-track the treatment cascade, there is a need to sustain a comprehensive and vibrant HIV prevention cascade as well. This is a mammoth task that will require commitment at political and programs' level, towards addressing bottlenecks in issues affecting the most at risk population.

All sectors' efforts in the implementation of efficient and innovative approaches to improve service delivery models as well as ensuring that the financial burden of the HIV response is shared need to be galvanized. Most importantly, the country must eliminate all forms of stigma and discrimination, the greatest barrier to maintaining the gains in the national response.

We have come so far, we cannot afford to lose the momentum now. As we celebrate the accomplishments we need to keep the drive towards fast tracking ending AIDS as a public health threat by 2022.

The governing body of the NERCHA Directorate is the National Emergency Response Council on HIV and AIDS. The Council is made up of 15 non- Executive Members and one Executive Member, being the National Executive Director. There were three (3) Council meetings held during this financial year. The Council's powers and functions are articulated in the NERCHA Act No. 8 of 2003 and it is accountable to the Prime Minister for its performance.

CORPORATE GOVERNANCE

To strengthen its governance role, the Council has established three sub-committees. These are (a) the Executive Committee (b) Finance and Audit Committee and (c) the Response Management and Coordination Committee.

a) The Executive Committee, which is mainly responsible for advising Council on matters relating to the staff appointments, remuneration and performance of senior management met seven (7) times during this financial year. The Committee is made up of five members and these are:

- Chief Ndzabankhulu Simelane – Chairperson
- Hon. Thulisile Dladla (MP) – Member
- His Lordship, Mr Mshumayeli Knox Nxumalo - Member
- Mr. Musa Mdluli – Member
- Dr. Jonathan Dlamini - Member

b) The Finance and Audit Committee whose function is to oversee the financial control environment, the internal audit function, the review of reports by external auditors as well as the review of financial and management accounts prepared by Management met four (4) times during this financial year.

The Finance and Audit Committee is comprised of five members, and these are:

- Mr. Musa Mdluli – Chairperson
- Mr. Nick Jackson- Member
- Mr. Mbuso Dlamini- Member
- Ms Fikephi Gule – Member
- Hon. Thuli Dladla (MP) - Member

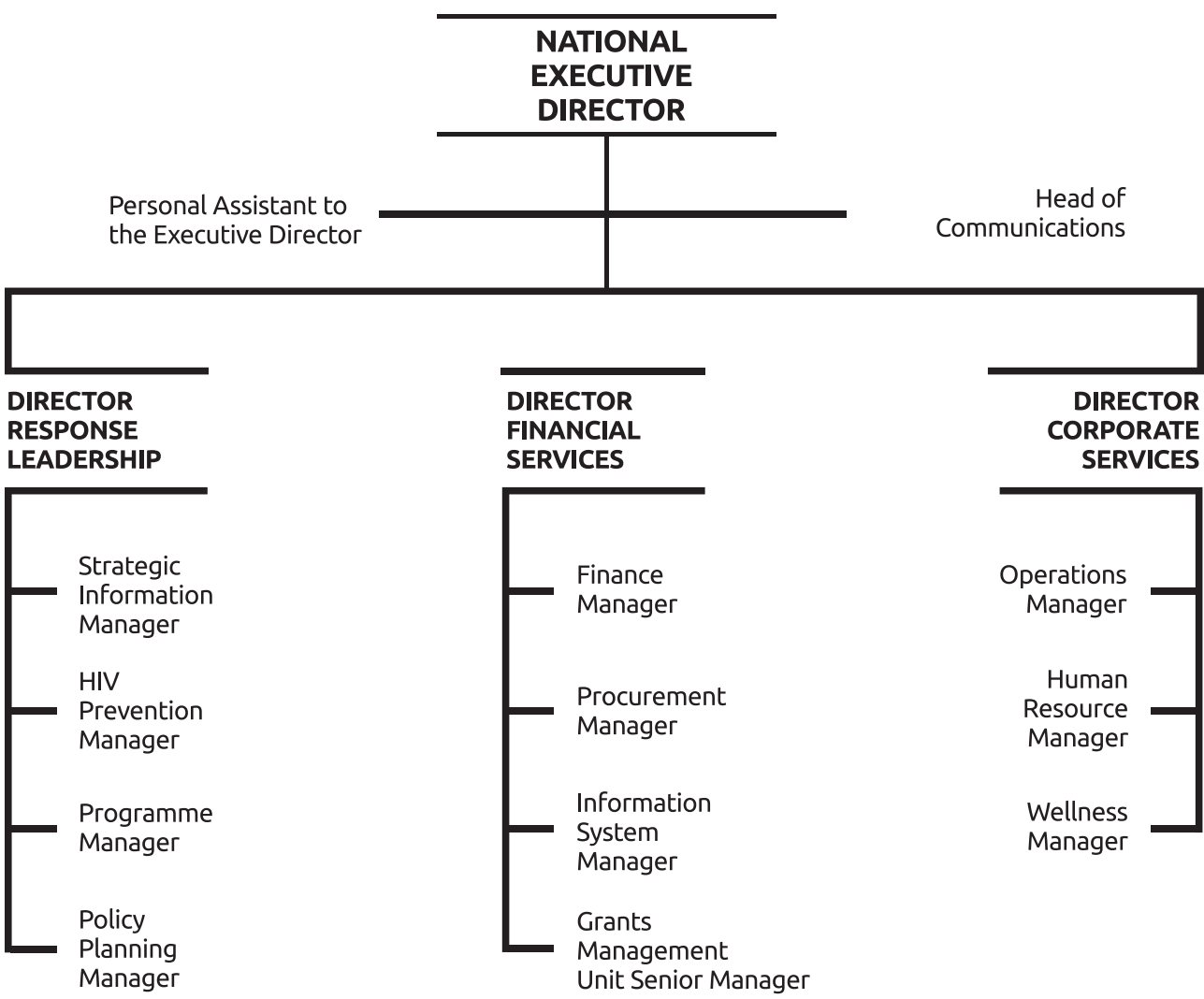
c) The Response Management and Coordination Committee oversees the coordination and monitoring of multi-sectoral HIV programmes and grant performance met three (3) times this financial year. This committee reviews all programmatic plans and reports of the directorate.

The committee is comprised of five members and these are:

- Mr Emmanuel Ndlangamandla – Chairperson
- Dr Simon Zwane - Member
- Mr Vusie Matsebula – Member
- HRH Princess Gcebile Dlamini – Member
- HRH Prince Matatazela Dlamini – Member



NERCHA MANAGEMENT STRUCTURE



SECTION 1.

COORDINATION AND MANAGEMENT OF THE NATIONAL MULTI-SECTORAL RESPONSE TO HIV AND AIDS

1. Introduction

The National Emergency Response Council on HIV and AIDS (NERCHA) is a multi-sectoral body established to provide leadership in the coordination and facilitation of the multi-sectoral emergency response to HIV and AIDS in Swaziland and is a Principal Recipient of the funds from the Global Fund to fight AIDS, Tuberculosis and Malaria and other donors.

NERCHA Coordinates the National Multi-sectoral HIV/AIDS response by creating an environment that supports effective service delivery of HIV services to the people of Swaziland. NERCHA works in partnership with multi-sectoral stakeholders including Government ministries, Non-governmental Organisations, Development Partners, HIV sectors, and Regional structures. The coordination occurs at two levels: a) National coordination that is conducted at different levels by different partners; and b) Decentralized coordination that occurs at two levels; regional coordination and sector coordination.

NERCHA implements this role through facilitating and coordinating the implementation of National Multi-Sectoral Strategic Framework's and their monitoring Frameworks under the auspices of the internationally endorsed 'Three Ones Principles' for HIV and AIDS coordination.

Formerly NERCHA was organized into 2 Departments, Response Coordination and Technical Departments but since 2014 after an organizational review three (3) directorates facilitate the implementation function of the organization, namely; the Response Leadership, Financial Services, Corporate Services and Grants Management divisions (shown graphically in page 9). These divisions work collaboratively to achieve Six Strategic Priorities, which are;

- 1) To provide leadership for the efficient and effective delivery of the national response
- 2) To mobilise resources and sustainable financing of the national response
- 3) To facilitate HIV mainstreaming, decentralization and divestment
- 4) To facilitate partnership development and partner capacity
- 5) To enhance the performance, efficiency
- 6) To support and develop NERCHA staff

1.2 National Coordination of HIV and AIDS Response

At the national level, NERCHA is a parastatal under the Prime Minister's Office and performs its coordination role through all government ministries, chief among those being the Ministry of Health, Ministry of Tinkhundla Administration, Ministry of Education, and Deputy Prime Ministers Office. Sectorally, 11 constituency based HIV coordinating structures are in place to facilitate programme implementation. These include the Swaziland National Network of People Living with HIV and AIDS (SWANNEPHA) which is the umbrella body of organizations (including support groups) of People Living with HIV and AIDS (PLHIV) in the country; Alliance of Mayors Initiative for Community Action on AIDS at Local Level (AMICAALL) which coordinates the HIV and AIDS response in urban areas; Church Forum which facilitates the participation and involvement of the church; Swaziland Business Coalition on HIV and AIDS (SWABCHA) which coordinates the private sector



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response to HIV and has over 1400 companies who are affiliated to it; Public Sector HIV and AIDS Coordinating Committee (PSHACC) which coordinates the public sector response to HIV and AIDS; Coordinating Assembly for Non-governmental Organisations (CANGO) who forms an HIV and AIDS Consortium for all non-government partners who are participating in the response; Khulisa Umnftwana which coordinates the traditional sector response to HIV; the Media Institute in Southern Africa (MISA) to coordinate the media sector response to HIV; The Swaziland Uniformed Services against HIV and AIDS (SUSAH) which coordinates the HIV response amongst uniformed services; Traditional Healers Organization (THO) for the involvement of traditional healers and the Parliament Sessional Committee for HIV and AIDS.

1.3 Geographic Coordination of HIV Response

In partnership with the Ministry of Tinkhundla, Administration and Development (MTAD), NERCHA has institutionalized regional coordination of HIV and AIDS. Each region has a coordinating body, the Regional Multi-sectoral HIV and AIDS coordinating committee (REMCHACC) which meets quarterly to facilitate regional coordination of HIV and AIDS interventions. Tinkhundla Multi-sectoral HIV and AIDS coordinating committee (TIMCHACC) and community Multi-sectoral HIV and AIDS coordinating committee (CHIMCHACC) have been set up to assume the same function at the tinkhundla and chiefdom levels respectively.



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2.1 Planning and programme development

D) National Launch of the Swaziland HIV and AIDS Investment Case (SHIC): The Umgubudla

In ensuring that the HIV and AIDS response delivers the targets necessary for the country to achieve the AIDS free status by 2022, NERCHA facilitated the launch of the Swaziland HIV and AIDS Investment Case (SHIC): Umgubudla, by His Excellency the Prime Minister Dr. Sibusiso Dlamini at the opening of the National HIV and AIDS Conference.

The Prime Minister presented Umgubudla as the Government's superfast track commitment to End AIDS as a public health threat in our society by 2022, in line with the set Global AIDS free target for 2030. The focus will be on those already infected and affected and reducing new infections to zero. The HIV/AIDS multi-sectoral approach will continue to implement the eNSF and scale up the five (5) Umgubudla programmes, which are:

- a) Accelerate the Scale-up of antiretroviral therapy (ART) for People Living with HIV by testing and treating those infected without using the CDC4 as bench mark.
- b) Scale up Voluntary Medical Circumcision (VMMC)
- c) Scale up innovative HIV Prevention approaches for girls and young women
- d) Elimination of Mother to Child Transmission of HIV (EMTCT)
- e) Intensifying TB/HIV co-infection diagnosis and treatment

In implementing Umgubudla the country will avert 78% of new infections and 29% of AIDS related deaths. The total cost of successfully implementing the SHIC is 9% below the baseline scenario in 2030 which offers fewer infections and less averted AIDS related deaths.



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2.2 HIV Prevention

I) National Youth HIV Prevention Indaba

NERCHA hosted a National HIV Prevention Youth Indaba, a forum for young people to voice their needs towards ending AIDS by 2022. The aim of the Youth HIV prevention Indaba was to solicit young people's inputs on HIV prevention programming and use them to guide the development and implementation of tailored HIV Prevention interventions that target them. The forum also provided an opportunity for policy makers to interact with young people, and understand how their unique needs can be met through appropriate legislature. The inputs also informed a Political Communiqué that was drafted and shared at the Global UN High Level Meeting in June 2016.

The HIV Prevention Youth Indaba began with regional events as a build-up where in and out of school youth were given an opportunity to share their experiences around issues of the HIV and HIV service provision. The youth were requested to prepare a summary of the statements, and present it during the National Event held at the Royal Convention Centre, Ezulwini.

To listen to the presentation by the young people was Her Royal Highness, Princess Sikhanyiso who is also the patron for the Imbali Foundation. Also present was UNAIDS Executive Director, Mr. Michel Sidibe, representatives from the UN Family, the Deputy Prime Minister who was accompanied by other Cabinet Ministers, Senior Government Officials, and delegates from organizations that provide services to young people.



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The youth indaba presented an opportunity to discuss a wide range of issues, including:

- the need to prioritise social & behaviour change communication interventions in the HIV response,
- the need to accelerate condom promotion and distribution as well as ensure that basic condom education supports all distribution
- the need to address the limitations in male circumcision programming, ensuring adequate messaging on the benefits of male circumcision as well as improve perception of risk of HIV infection after circumcision;
- the need to provide accessible quality treatment services to young people and,
- the need for a comprehensive HIV Prevention response for young people.

Information gathered from this event has been packaged and is being used to improve the delivery of HIV and Sexual Reproductive Services for young people. The implementation of these improvements will be part of the demand creation efforts in the HIV/AIDS response which will result in increased uptake of services required to reduce new HIV infections.

ii) Sitakhela Likusasa Impact Evaluation Study

The Sitakhela Likusasa Impact Evaluation Study which seeks to assess the impact of cash transfers and other incentives in keeping girls in schools and the HIV incidence, conducted baseline and midline studies this year.

The baseline study was completed and it proved true the hypothesis that school is indeed protective to young girls as there is evidence that out- of -school girls are three times likely to have an HIV positive status than in-school girls. A midline study was also conducted and the results will be available later in the year.

Through the Ministry of Education, NERCHA also held two rounds of regional headteacher sensitizations. The objective of the sensitisation was to orient head teachers on the role of the ministry of education in submission of school registers in the study. This is the primary source of data to confirm enrolment and 80% attendance for study participants who are in school. NERCHA also conducted sensitization meetings for chiefs in the Manzini and Hhohho regions in order to solicit support for reaching out-of-school youth in participating communities.

The results of the research will provide local evidence for investing in structural programmes to reduce vulnerability to HIV risk among young girls and women.

iii) Reviving HIV Prevention Coordination Mechanism

NERCHA has compiled a paper on the prevention coordination mechanism to improve HIV prevention coordination Swaziland. The paper proposes to re-organise prevention coordination linking key ministries to lead this response. It also revitalises the functions of the technical working groups ensuring that these are based on interventions rather than target populations. The paper is currently being reviewed, and will be operationalized next year.

iv) Comprehensive HIV Epidemiology Program Review Analysis

NERCHA developed a draft of the Comprehensive HIV Epidemiology Prevention Review Analysis (CHEPRA) to inform the country on the new sources of infections. This was building onto the last modes of transmission



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done in 2008 which have been guiding the “*know your epidemic*” and “*know your response*” initiatives in Swaziland. Using new available data, the epidemiological review report was completed, and will be disseminated next year. CHEPRA is a 3-report process where the epidemiological analysis is going to inform a geo- spatial analysis and a prevention review. The geo- spatial analysis is in the process of development, while the prevention review has been initiated.

v) Pre- Exposure prophylaxis demonstration project implementation framework

NERCHA provided support to the Ministry of Health to develop the Pre-Exposure prophylaxis (PrEP) implementation framework. The framework provides implementation modalities for the demonstration project highlighting the timeframe and implementation partners. Priority populations for PrEP include sex workers, adolescents seen at family planning sites and sero-discordant couples. This is in preparation for piloting an investigation of the use of pre-exposure prophylaxis (PrEP) to prevent new infections among populations at higher risk, which will be undertaken by the country. The pilot will assess the feasibility of introducing PrEP as one of the many interventions for reducing new HIV infections in Swaziland. The framework was approved and the demonstration project is projected to begin in July 2017.



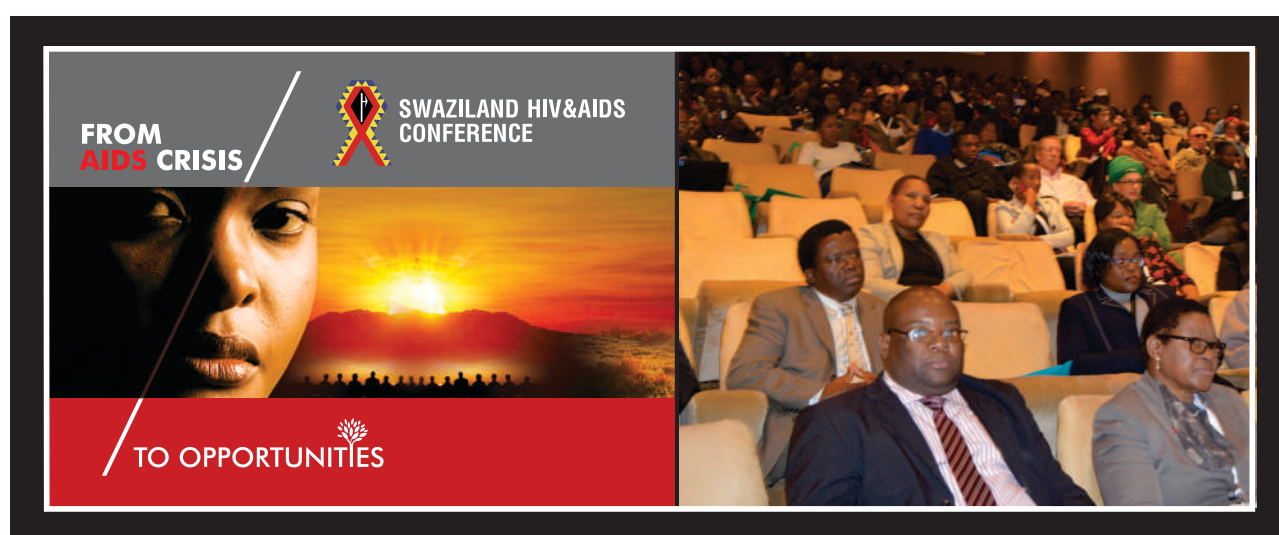
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2.3 Strategic Information

I) The National HIV and AIDS Conference

NERCHA in partnership with the Ministry of Health hosted the National HIV and AIDS conference which was themed *“From AIDS Crisis to Opportunities: What the world can learn from Swaziland”*. The aim of the conference was to showcase the journey of the Swaziland HIV and AIDS response since HIV discovery in 1986, through the journey that averted projected crisis; and talk to the present-day issues, where the country now has an opportunity to end AIDS. It also served as a pre-conference meeting for the international AIDS Conference that



was held in Durban, South Africa later in the same month.

The specific objectives of the national conference are to:

- provide Government and community entities an opportunity to share successes and lessons learned from stabilizing the world's worst HIV/AIDS epidemic with the international community,
- create networking opportunities and encourage future collaborations within and between international and local researchers and
- provide an opportunity for global and national HIV researchers who have conducted research about Swaziland, to share their findings and experiences with Swazi stakeholders, including government and community.

The conference was attended by over five hundred participants, and it included plenary presentations, abstracts and posters of research conducted by both local and international researchers on HIV and AIDS in Swaziland. Over sixty papers on various aspects of the epidemic in the country were presented. Presentations included successes and lessons learnt in five thematic areas, which were: funding and economics, social sciences, treatment, care and support, systems and synergies and leadership and policy.



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His Excellency the Prime Minister of Swaziland Dr. Sibusiso Barnabas Dlamini, gave the key note address on the opening event. International speakers included UNAIDS Deputy Director Regional Support Team Dr Pierre Somse, Regional Programme Advisor for UNAIDS Regional Office, Dr Sophia Mukasa; CIGI Chair in GlobalHealth Policy at the Balsillie School of International Affairs, Prof Alan Whiteside; and ICAP Senior Technical Director, Dr. Jessica Justman. Other guests included Cabinet Ministers, senior government officials, local researchers, development partners, civil society, people living with HIV and the media.

Following the national conference ten papers were presented at the International AIDS conference in Durban, and will also be published in the African Journal Special issue that will focus on HIV and AIDS.

ii) The Country Status Report

NERCHA led the process of consolidating a country progress report for Global AIDS monitoring (GAM), formerly, Global AIDS Response Program Reporting (GARPR). The data that was submitted pertains to indicators used globally to monitor national progress in responding to the HIV epidemic.

The country status report took into consideration all the inputs from the stakeholders including government departments (MoH, DPM etc), Civil society, developmental partners, NERCHA etc. Below is a list of indicators that were submitted as part of the country status report.



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Table 1: HIV Core Indicators 2016

Indicators	Source	2016
Number of people on antiretroviral therapy at the end of the reporting	HMIS	171,577
Number of people 15+ on antiretroviral therapy at the end of the reporting period	HMIS	161,862
Number of people <15 on antiretroviral therapy at the end of the reporting period	HMIS	9,715
Number of people newly initiating antiretroviral therapy during the current reporting year	HMIS	25,920
Number of adults and children who are still alive and receiving antiretroviral therapy 12 months after initiating treatment in 2016	HMIS	22,745
Number of people living with HIV in the reporting period with suppressed viral loads (=1000 copies/mL)	HMIS	1,951
Number of infants who received an HIV test within two months of birth during the reporting period. Infants tested should only be counted once.	HMIS	8,557
Number of pregnant women living with HIV who delivered and received antiretroviral medicines during the past 12 months to reduce the risk of the mother-to-child transmission of HIV during pregnancy and delivery.	HMIS	10,405
Number of males circumcised during the past 12 months according to national standards	SHAPMoS	17,374
Total number of people who have active TB disease during the reporting period of those newly enrolled in HIV care	SHAPMoS	2,342
Number of male condoms distributed	SHAPMoS	14,142,223
Number of female condoms distributed	SHAPMoS	286,766

The report shows that Swaziland is making progress in meeting the targets of the treatment cascade. Areas for attention are HIV prevention programme, activities and coordination.



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2.4 Strengthening HIV Coordination at Sector Level

i) HIV prevention information and services at traditional events

NERCHA supported the implementation of an HIV prevention program in the rites of passage traditional activities, umhlanga for girls and lusekwane for boys. These activities provide a captive audience for the target population where they are given basic information on HIV transmission and have free access to services during the ceremonies. One key accomplishment achieved during the implementation of these activities was that, young people were informed and referred to community activities they have access to in their respective communities for continuity. There is an opportunity to improve the engagement of young people in these events to strengthen the link with what is happening beyond the events as well as position HIV prevention as part of the traditional ceremonies.

ii) HIV Strategic Framework for PSCHACC

NERCHA supported Ministry of Public Service's Public HIV and AIDS Sector Coordinating (PSCHACC) to develop the Public-Sector HIV Strategic Framework (2016-2021). The strategic plan seeks to increase the productivity of the public sector labour force and achieve; a) Reduction in the rates of absenteeism, b) Reduced mortality and morbidity rates, c) Motivated workforce, d) Reduced burden on the health sector and e) Strengthened response to communicable and non-communicable diseases including HIV, in all government ministries and departments.



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2.5 Community Mobilization, Communication and Advocacy

I) Invigorating HIV Prevention in World AIDS Campaign

NERCHA in partnership with the Ministry of Health and UNAIDS implemented the World AIDS Campaign (WAC) and World AIDS Day (WAD) where HIV prevention was invigorated to ensure that gains thus far around the reduction of new infections were accelerated, under the theme *'Hands Up for #HIV Prevention'*. The campaign sought to invite the Swazi population to contribute views on how on-going interventions can be improved to eliminate HIV new infections. NERCHA lead the process of organizing the 2016 World AIDS Campaign (WAC) which culminated in the National World AIDS Day commemoration event (WAD) on the 1st December 2016.

The WAC/WAD was officially launched by the Honorable Minister of Health, Ms. Sibongile Ndlela-Simelane on the 31st October 2016. The launch was followed by regional commemoration events took place at Nkaba Inkundla in the Hhohho region, Sithobela Inkhundla in the Lubombo region, and Gege Inkhundla in the Shiselweni region. To provide key note address at these events were cabinet ministers; Honourable. Minister of Natural Resources and Energy, Jabu Mashwama Honourable Minister of Sport Youth and Culture, David Ngcamphalala Honourable Minister of Tinkhundla Administration and Development, Mduduzi Small Joe Dlamini respectively.





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As a build-up to the regional commemoration events were targeted community conversation within each hosting Inkhundla to solicit from the various population groups how should be done to prevent the spread of HIV. The summary of the discussions held at the various communities were presented during the regional event.

The National World AIDS Day commemoration event was held at Mankayane Town Sports ground on the 1st December 2016 where Cabinet Ministers, development partners, key community stakeholders and community leadership participated. HIV implementers as well as People Living with HIV and AIDS also played a major role. His Excellency the Prime Minister Dr. Barnabas S. Dlamini provided the key note address for the day.

For the first time, institutions of Higher learning also held a successful World AIDS Commemoration event in October 2016 at UNISWA Sports Emporium, where students from nine campuses of the seven (7) Tertiary Institutions along the Manzini - Mbabane corridor had discussions on HIV prevention sparked by education, and service uptake was promoted.

In addition to the key activities, government departments, businesses and organizations, held different activities including dialogues, walks, candle lighting event, food and dignity packs distribution as part of social responsibility, within their constituencies, advocating and mobilizing the Swazi nation to make HIV prevention a priority.

The campaign and commemorations committed government to focus on HIV prevention particularly adolescent girls and young women. Throughout the campaign, the country learnt that making men and boys central to HIV prevention was a pivotal manner to protect adolescent girls and young women from contracting HIV.

ii) Taking HIV and AIDS Information to Institutions of Higher Learning Programme



NERCHA (through the Info Centre) and her strategic partners (AHF, FLAS, HC3, PSI, SNAP, UNFPA's Condomize Project, Matsapha Town Council, and SWANNEPHA) in August and September rolled out the "Taking HIV and AIDS Information to Institutions of Higher Learning" programme in various institutions of higher learning, countrywide. The programme is aimed at giving new students information on HIV and AIDS and related health issues through a programme of activities developed for and targeting freshmen and rolled out during the orientation week of each of the institutions. NERCHA and partners meet with first year students in all

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three campuses of the University of Swaziland and for the first time to the UNISWA Institute of Distance Education, as well as Ngwane Teacher Training College in Nhlangano VOCTIM Good Shepherd Nursing College, Limkokwing University of Creative Technology Swaziland College of Technology.

A total, the programme affected one thousand and forty (1840) students of which 1380 were between 15-24 years in age. HIV Testing and Counseling (HTC) was offered by Matsapha Town Council at UNISWA only, and AHF at the other institutions.



iii) Swaziland International Trade Fair

Under this year's theme which was "Development Unusual" NERCHA took part in the Swaziland International Trade Fair (SITF), which brings together over 20 000 local, regional and international people. The aim was to present an organized presence of the HIV response, as well as coerce business public to scale up their participation in the agenda to end AIDS by investing in the HIV response, and promote access and uptake of HIV and AIDS services.

Over nine hundred people visited the stall, and on the last day NERCHA was recognized for exhibition excellence in the NGO category, and presented an award by the Prime Minister Dr. Barnabas Sibusiso Dlamini on the last day, during awards and Closing Ceremony.

iv) Demand creation for the uptake of HIV and AIDS Services

a) Regional sensitization meetings to support 90:90:90

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With the recently adopted 90:90:90 targets (ensuring that 90% of PLHIV are tested, and that 90% of those who test positive are put on treatment and that 90% of those on treatment have their immune system improved) set to be rolled out to people living with HIV (PLHIV) in Swaziland, NERCHA through the regional coordinating offices supported the Ministry of Health to organizing sensitization meetings on the initiative in all four regions of the country. The focus of the meetings was on how to improve referrals and linkages to care from HIV testing to treatment.

As a result of this meetings the following were achieved;

- The Hhohho Region held sensitization meetings for Chiefs and their spouses in 7 Tinkhundla centres where over 30 HIV programme implementers from national and international organizations participated.
- In the Lubombo Region held two sensitization meetings at Lubulini and Lugongolweni constituencies with the Tinkhundla councils. A task team was formed to draft a plan to improve the referrals of Gender Based Violence (GBV) and HIV and AIDS clients that are seen by partners.
- In the Manzini Region sensitization meetings were thirteen organization were represented and thirteen organization were represented to look at way to improve the weak referrals and linkage system.
- In the Shiselweni region the Public Service HIV and AIDS Coordination Committee (PSHACC) and MSF promoted the male involvement project which mobilizes and encourages men to test for HIV and access early treatment in a bid to reduce the viral load for those found to be HIV positive. The project is currently focused on male public-sector employees and is being implemented within the three security forces (namely; The Royal Swaziland Police (RSP), His Majesty's Correctional Services (HMCS) and Umbutfo Defence Force (USDF) in the region.

b) Using Drama to promote service uptake

To promote service uptake among men, a population group that has been identified as a “left behind” populations, yet critical player in the HIV response, NERCHA partnered with Siphila Nje Drama Society (SNDS) to conceptualize, develop and deliver a pilot programme specific to men. The objective for the “**Enjobeni Majaha**” programme as it is called, was to create demand and mobilize men for HIV services uptake. This programme which targeted men of 30 years used theatre drama to provoke discussion and actively engage



men on all HIV prevention themes. The programme was rolled out in all the communities under the Ngwemphisi Inkhundla, during the period presiding the National World AIDS Day commemoration event. Over 350 men were reached and galvanized for action, resulting in 65% attendants testing on the spot. This exercise revealed that men, engaged in a comfortable environment (to them), are willing to change their attitudes and practices towards their health, especially in relation to their sexual activity and sexual relationships.

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2.6 HIV Mainstreaming, Decentralisation and Divestment

i) Developing Mainstreaming Guidelines

To sustain gains already made and achieve efficiencies and avoid duplication of resources and efforts, it was important to ensure that sectors mainstream the HIV/AIDS response in their developmental plans. NERCHA therefore, working with representatives from different Government ministries, developed mainstreaming guidelines. Mainstreaming calls for the sectors to use their comparative competencies (in terms of mandate, resources and otherwise) to advance the response. The guidelines are being reviewed by relevant stakeholders.

ii) Implementing the SADC HIV Fund

NERCHA is the Principal Implementer for the SADC Mainstreaming project and is managing a of \$500, 000 grant which is supporting mainstreaming activities in 5 countries (Botswana, Lesotho, Zimbabwe, Namibia and Malawi) excluding Swaziland. To accelerate the performance of this grant, NERCHA undertook supervisory visits to Lesotho, Malawi and Namibia to resolve some of the implementation bottlenecks that these countries were experiencing. Further, representations have been made to the SADC Secretariat by the Chief Executive Officers of the implementing AIDS Councils for a no-cost extension for this grant from June to December 2016.

2.7 Partnership Development and Capacity Building

Launch Parliament HIV Strategy and Operational Plan development

To sustain the political commitment of the country towards eradicating the effects of AIDS, NERCHA supported the development and launching of *The Swaziland Parliament HIV and AIDS Strategic Plan (2017-2020)* by His Excellency the Prime Minister. The plan provides a strategic direction for parliament to contribute by providing a legislative and policy environment that is responsive to the HIV response and is aligned to *Umgubudla* goal of an AIDS free Swaziland by 2022. It is premised on the three core mandates of parliament namely, 1) law-making, 2) oversight over the executive, 3) representation of citizens. It also includes a fourth pillar for wellness of Members of Parliament and staff to access HIV and health services.

Following the launch, a two-day workshop for Members of Parliament was held, to develop an operational plan for the strategy with realistic timelines and activities. Members of parliament were also capacitated on the various opportunities to mobilise domestic resources in support of the HIV response in view of diminishing resources from external partners.

This activity was supported through the Southern Africa Development Community Parliamentary Forum (SADC-PF) grant which aims to enhance the technical capacity of relevant Parliamentary Portfolio Committees



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