

# UNDERSTANDING ADOLESCENT GIRLS AND YOUNG WOMEN PROGRAMME TRANSITIONS TO STRENGTHEN FUTURE SUSTAINABILITY AND TRANSITION PLANNING

## Case Study Report of the Sista2Sista Girls' Empowerment Programme in Zimbabwe



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# ACRONYMS AND ABBREVIATIONS

<b>AGYW</b>	Adolescent girls and young women
<b>AI</b>	Artificial Intelligence
<b>AIDS</b>	Acquired Immunodeficiency Syndrome
<b>BHA</b>	Bureau for Humanitarian AID
<b>CI</b>	Confidence interval
<b>DAC</b>	District AIDS Council
<b>HIV</b>	Human Immunodeficiency Virus
<b>GF</b>	Global Fund
<b>IP</b>	Implementing Partner
<b>M&amp;E</b>	Monitoring and Evaluation
<b>MOU</b>	Memorandum of Understanding
<b>MOHCC</b>	Ministry of Health and Child Care
<b>NAC</b>	National AIDS Council

<b>NSP</b>	National Strategic Plan
<b>OR</b>	Odds Ratio
<b>PEPFAR</b>	US President's Plan for AIDS Relief
<b>PrEP</b>	Pre-Exposure Prophylaxis
<b>PSE</b>	Population Size Estimate
<b>SGBV</b>	Sexual and Gender-based Violence
<b>SOP</b>	Standard Operating Procedure
<b>STI</b>	Sexually Transmitted Infection
<b>S2S</b>	Sista2Sista
<b>Sycona</b>	Synthesise, Contextualise and Disseminate
<b>UNFPA</b>	United Nations Population Fund
<b>USD</b>	United States Dollar

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# INTRODUCTION



# AS DONOR FUNDING FOR HIV PROGRAMMING DECLINES, UNDERSTANDING HOW HIV PREVENTION PROGRAMMES CAN SUCCESSFULLY TRANSITION TO BEING DOMESTICALLY FUNDED AND MANAGED IS CRITICAL

The Sycona initiative is implemented in eight Eastern and Southern African countries with the purpose of synthesising, consolidating and disseminating evidence to strengthen evidence-based HIV prevention programmes for adolescent girls and young women (AGYW).



## Why was this case study developed?

- Sycona stakeholders from across the region, including the National AIDS Council (NAC) of Zimbabwe, identified sustainability as a significant gap in the literature, with unanswered questions on how to plan for transitioning to domestically funded and managed HIV prevention programmes.
- In consultation with the Zimbabwean NAC and the United Nations Population Fund (UNFPA), we identified the transition of the Sista2Sista (S2S) community-based AGYW programme as one which could offer insights and lessons on funding transitions and increasing domestic ownership with a view to long term sustainability.

## Who is this case study for?

- This case study can be used by policymakers and programme managers of similar HIV prevention programmes. It outlines some lessons learnt on funding transitions of AGYW HIV prevention programming. These can be used to plan for sustainable AGYW interventions.

# WE ADAPTED THE SOUTH AFRICAN SUSTAINABILITY FRAMEWORK TO DEVELOP THIS CASE STUDY ON SUSTAINABILITY AND TRANSITION PLANNING IN ZIMBABWE

We adapted the South African National Sustainability framework for HIV/AIDS and TB (Figure 1) to conceptualise this case study. Key terms we defined for this purpose included:

**1. Sustainable HIV intervention:** An intervention with sufficient domestic funding, adequate human resource capacity, well-functioning delivery platforms, timely strategic information and strong leadership to routinely deliver the intervention at adequate scale and quality and with precision targeting, with limited, complimentary support from external partners.

**2. Transition Planning:** A change management process whereby the government and civil society partners respond to a decline in external funding and support for an intervention by determining what programmatic, governance and financial responsibilities they will take on over time.



Figure 1: National Sustainability Framework for HIV/AIDS and TB (SANAC, 2021)

# THE SISTA2SISTA PROGRAMME

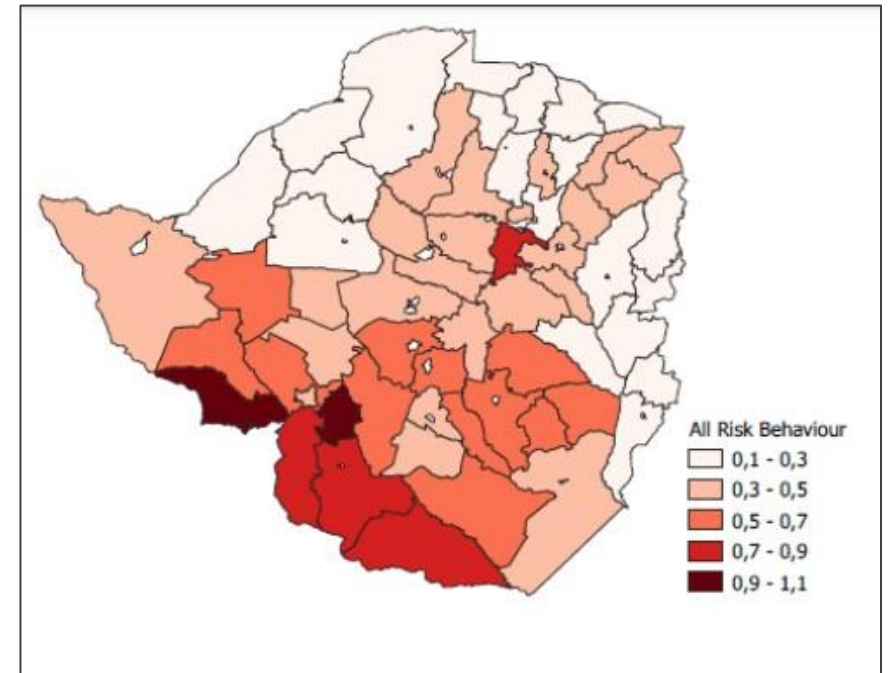


# ADOLESCENT GIRLS AND YOUNG WOMEN IN ZIMBABWE FACE DISPROPORTIONATE RISK FOR HIV

- Adolescent girls and young women bear a disproportionate HIV burden, with a prevalence rate of 15.3% compared to 10.2% among men (*U.S. Embassy in Zimbabwe, 2020*). AGYW are particularly at risk of HIV acquisition.
- AGYW Incidence rates vary across the country, with some districts having very high incidence rates, as shown in Figure 2. The incidence is illustrated to be highest in the Mangwe and Umzingwane districts.

## Social, behavioural and structural factors driving the HIV risk in AGYW include:

- Early sexual debut;
- Low levels of educational attainment;
- Intergenerational and transactional sex;
- High rates of sexual and gender-based violence, including rape and child marriage; and
- Limited access to sexual & reproductive health services (*Sayi & Sibanda, 2018; Schaefer et al., 2017*).



**Figure 2:** Incidence rates of AGYW (15-24 years) in Zimbabwe, by district (UNAIDS PSE tools, 2023)

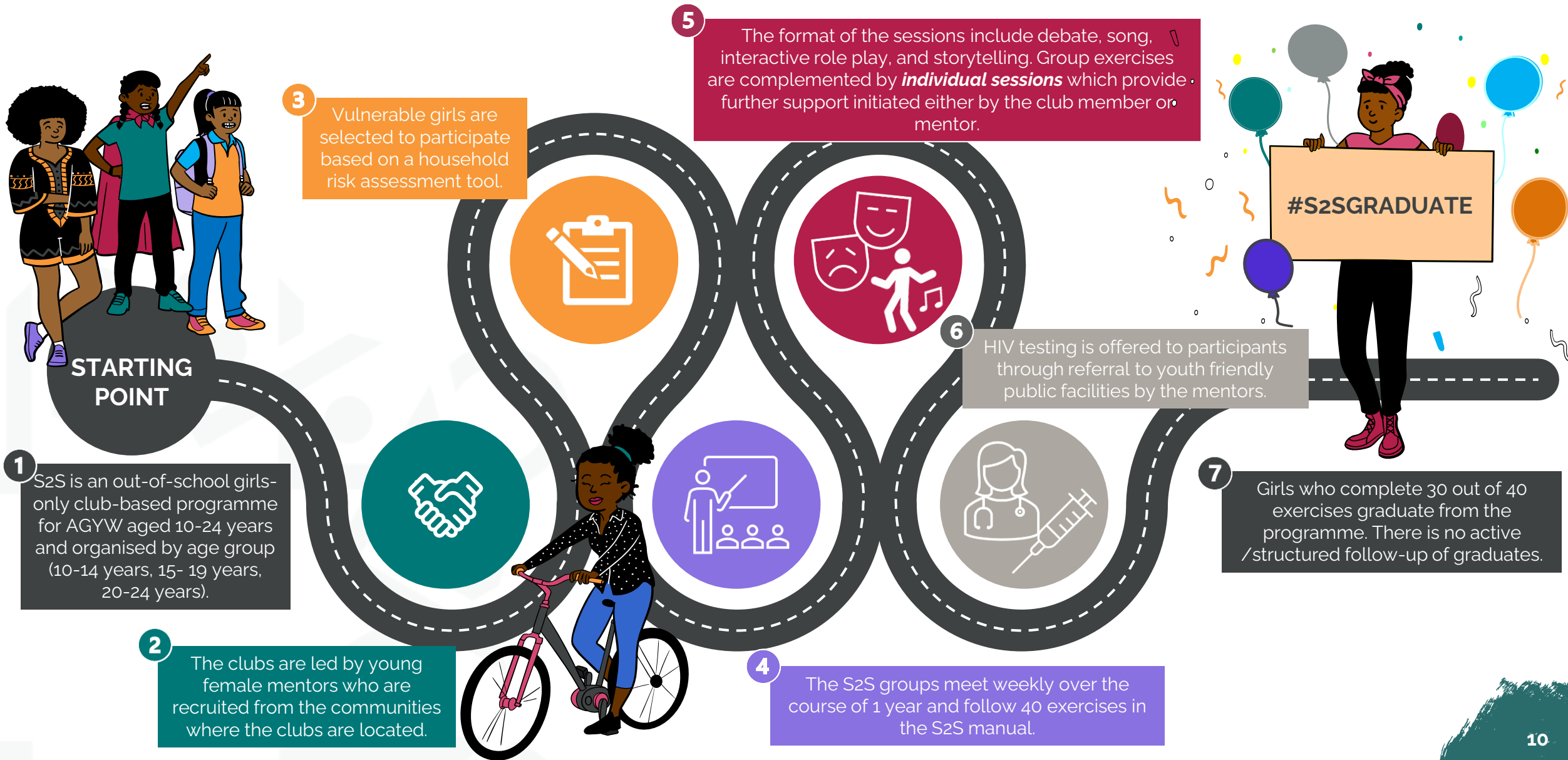


# THE SISTA2SISTA PROGRAMME WAS DESIGNED TO ADDRESS THE RISK OF HIV ACQUISITION IN AGYW IN ZIMBABWE

- The S2S peer-led combination prevention and empowerment intervention was developed by UNFPA in partnership with the Ministry of Health and Child Care (MoHCC) to address key health challenges faced by AGYW, in particular their vulnerability to HIV infection.
- The programme was officially launched in 2013 as an out-of-school programme where girls-only clubs were intended to create safe spaces to support and mentor vulnerable AGYW aged 10-24 years old.
- The programme is guided by a standardised implementation manual endorsed by the MoHCC and NAC. Topics include self-awareness, gender and power, communication, family planning, sexually transmitted infections (STIs), HIV, sexual and gender-based violence (SGBV), traditional and cultural practices and financial awareness (*Oberth et al., 2021*).



# THE USER JOURNEY OF THE SISTA2SISTA PROGRAMME WAS DESIGNED TO EMPOWER AGYW



# AN EVALUATION FOUND THAT THE S2S PROGRAMME HAD A POSITIVE EFFECT ON HIV AND OTHER SEXUAL HEALTH OUTCOMES AMONG VULNERABLE AGYW

An evaluation using programme data from 91 612 AGYW aged 10–24 years old who participated in Sista2Sista from 2013 to 2019 found that:

## Those who completed 30/40 sessions were:

- Nearly three times more likely to get tested for HIV (OR 2.78 OR 95% CI 2.52–3.10)
- Almost 30% less likely to get married (OR 0.63, 95% CI 0.55–0.73)
- 40% less likely to drop out of school (OR 0.60, 95% CI 0.53–0.69)

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## Participants who completed all 40 exercises were:

- 1.4 times more likely to return to school (OR 1.41, 95% CI 1.18–1.69)
- 1.4 times more likely to use contraception (OR 1.38 OR, 95% CI 1.21–1.56)
- 1.8 times more likely to report sexual abuse (OR 1.76, 95% CI 1.17–2.66)
- 60% less likely to become pregnant as adolescents (OR 0.41, 95% CI 0.24–0.72)

(Oberth et al., 2021)



# SINCE IMPLEMENTATION, IN 2013, THE SISTA2SISTA PROGRAMME HAS UNDERGONE SEVERAL FUNDING TRANSITIONS

2013



S2S funded by UNFPA

The S2S programme was launched by MoHCC, UNFPA and Non-governmental Organisation (NGO) partners. UNFPA funded 26 districts implemented by NGOs.

2016-2020



The Global Fund and NAC provides funding support for S2S

Funding mechanisms diversified to include the Global Fund (GF). NAC became a GF sub-recipient. In 2017, GF adopted 23 districts from UNFPA as UNFPA funding declined.

Further funding support from NAC was enabled through the National AIDS Levy.

NAC and GF expanded S2S to 65 districts.

2021



Reductions in Global Fund funding support

GF funding declined. GF exited districts where PEPFAR (DREAMS) had expanded. NAC support continued. GF supported 25 districts.

2022-Present



Cessation of UNFPA funding support. S2S funded by GF and NAC

NAC funding support provided to 24 districts. PEPFAR support continues to fund 16 districts. GF continues to fund 25 districts. UNFPA (with the Bureau for Humanitarian Aid) funded 6 districts until 2023. As of June 2023, the UNFPA no longer funds the S2S programme.

# CURRENTLY, NAC ADMINISTERS FUNDING FROM THE NATIONAL AIDS LEVY TO IMPLEMENT THE SISTA2SISTA PROGRAMME IN PRIORITISED DISTRICTS

**The NAC is a non-profit parastatal established by law, responsible for a multisectoral response at the provincial, district, and village levels, and village**

**The board has diverse membership**

Includes the Permanent Secretary of the MoHCC, CEO of NAC, representatives from Traditional Medical Practitioners' Council, the Law Society of Zimbabwe, health care providers, women, youth, religious groups, representatives of people living with HIV, commerce and trade unions.

- Responsible for approving general operational policies and the AIDS Levy budget consistent with the strategic framework annually. *(Bhat et al, 2016)*

**MoHCC supports NAC-governed health initiatives**

**Involvement in several aspects of the AIDS Levy administration and S2S programme implementation**

Participation occurs at all health system levels, including national, provincial and district levels.

- Approves annual work plan and budget for the AIDS Levy.
- Supports implementation of the S2S programme funded by the AIDS Levy.
- Participates in M&E activities coordinated by the NAC. *(Bhat et al., 2016)*

**The S2S programme is governed and implemented through decentralised structures, including the Provincial and District AIDS Action Committees**

NAC's role includes the administration of the AIDS Levy through stakeholder coordination. Additionally, their role includes the provision of support and monitoring to the decentralised, multi-sectoral response to HIV and AIDS by the National HIV and AIDS Strategic Framework and the annual strategic framework.

- The AIDS action committees administer AIDS Levy funds which support the operationalisation and management of the S2S programme.
- Provinces receive funding from the NAC to support implementation of S2S in the respective districts. *(ZNASP IV (2021 to 2025) Mid Term Review, Community Systems Strengthening (CSS). Final Report, February 2023)*

# THE AIM OF THIS CASE STUDY IS TO INFORM FUTURE SUSTAINABILITY AND TRANSITION PLANNING OF HIV PREVENTION PROGRAMMES FOR AGYW USING LESSONS LEARNT FROM THE SISTA2SISTA PROGRAMME IN ZIMBABWE

## The objectives are:

- To **describe the impact** of the funding transitions
- To **highlight the enablers** of progress toward sustainability in the S2S programme
- To **highlight the barriers** to progress toward sustainability in the S2S programme
- To **summarise key lessons** learnt from the S2S transition

# METHODS



# TO FULFILL THE AIM OF THIS CASE STUDY, WE UNDERTOOK DESKTOP RESEARCH AND CONDUCTED PRIMARY RESEARCH



## DESKTOP REVIEW

We analysed existing research, reports, policy documents and publications related to the S2S programme.



## KEY INFORMANT & GROUP INTERVIEWS

We identified participants using purposive and snowball sampling methods. All interviews were conducted virtually.



## THEMATIC ANALYSIS

We conducted thematic content analysis using an adapted version of the SANAC sustainability framework. We used Microsoft Excel supported by CHAT GPT.



## VALIDATE FINDINGS

Findings were validated with S2S stakeholders.



# WE CONDUCTED SIX KEY INFORMANT INTERVIEWS AND FOUR GROUP INTERVIEWS

**Table 1:** Participants in key informant and group interviews

Key Informant Type	Interviewees (n)	KIIs (n)	Group Interviews (n)
NAC and Provincial AIDS Council Representatives	6	2 (2)	2 (4)
Funders	3	1 (1)	1 (2)
Implementing Partners	2		1 (2)
MoHCC Representative	1	1 (1)	
Youth Network Representative	1	1 (1)	
External Evaluator of S2S	1	1 (1)	
<b>TOTAL</b>	<b>14</b>	<b>6 (6)</b>	<b>4 (8)</b>

Interviews were conducted in English. Fathom AI notetaker was used for initial transcripts. These were then quality assured by listening to the original recordings and reviewing the transcripts.

# WE ANALYSED THE DATA USING FIVE DOMAINS ADAPTED FROM THE SUSTAINABILITY FRAMEWORK



## THERE ARE SEVERAL LIMITATIONS TO THIS CASE STUDY

- Due to competing priorities, some invitees were unable to participate, and hence, key perspectives, particularly from the national level, were not captured.
- Connectivity disruptions were challenging at the district level; therefore, there is no district-level representation in the case study.
- Due to time limitations, it was not possible to interview mentors and/or participants of the programme.
- The study findings relate specifically to the S2S HIV prevention programme in Zimbabwe. This makes the study most representative of and generalisable to the S2S programme and similar AGYW programmes in Zimbabwe. Generalising these study findings to other programmes should be done considering the programmatic and context variations.
- The lack of access to funder budgets by the district over time has limited our ability to document financial investments in the S2S programme since its inception.

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### **Further longitudinal information on budget, by funder and district, is required for a comprehensive review of programme sustainability, namely:**

- Budget allocation by funder over time;
- Budget spend by funder, over time;
- Districts supported by the funder, over time;
- Programme outcomes by funder, over time; and
- Reasons for funding reductions.

# KEY FINDINGS





# IMPACT OF THE FUNDING TRANSITIONS





# GOVERNANCE



## NAC'S CONSISTENT AND DECENTRALISED APPROACH TO GOVERNANCE SINCE THE LAUNCH OF S2S HAS ENSURED PROGRAMME CONTINUITY DESPITE FUNDING TRANSITIONS

NAC's **continuous** oversight, effective stakeholder **coordination** and **institutionalisation** of partner participation since the programme launch, has ensured programme coherence and continuity during the funding transitions.



*"This collaborative approach... has created a dynamic environment where various entities can work together to address the multifaceted challenges of HIV/AIDS. It has also fostered innovation." (Key Informant: NAC)*

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The **decentralisation** of governance and management to provincial and district structures has supported the sustained implementation of the programme during the funding transitions. The District AIDS Coordinator (DAC) is the key interface with local stakeholders including community leadership.



*"District AIDS Coordinators collaborate with local leadership, including political, church, school authorities, and, where available, National AIDS Council decentralised structures like Ward AIDS Action Committee chairpersons and district AIDS action chairpersons." (Key Informant: NAC)*

## THE S2S PROGRAMME WAS INCLUDED IN THE ZIMBABWE NATIONAL STRATEGIC PLAN (NSP) 2021-2025.

The inclusion of the S2S programme in the **NSP** and the **collaborative process** for strategy planning highlights the programme's status as a priority initiative supporting sustainability efforts. The S2S programme is documented extensively in the NSP and is one of two major AGYW programmes in the country, with DREAMS being the other. The NAC led a collaborative and representative strategic planning process among all stakeholder groups. This process facilitated stakeholder buy-in and goal alignment, thereby supporting sustainability."

 *"S2S programme is written throughout the National Strategic Plan. So, I think that's also really critical for the government to sort of see it as a national programme and for it to be captured in these national strategy documents" (Key Informant: External Evaluator)*



## NAC ADOPTED AN AGILE APPROACH TO POLICY DESIGN AND IMPLEMENTATION, ENSURING THAT FRAMEWORKS WERE DEVELOPED CONSIDERING THE CONTEXT IN WHICH THEY WERE BEING APPLIED.

NAC frameworks were described as flexible, **accommodating both domestic and donor policy constraints**. Implementation guidelines in NAC-funded districts offered more flexibility when compared to external funders' guidelines. Guidelines, Memoranda of Understanding (MOU) and Standardised Operating Procedures (SOPs) were used to direct implementation and related support efforts at the district and provincial levels.



*"NAC guidelines allow for flexibility in implementation in comparison to the GF guidelines." (Key Informant: Provincial Manager)*

# NAC CREATED AN ENABLING POLICY ENVIRONMENT WHICH FACILITATED THE TRANSITION TO DOMESTIC OWNERSHIP AND GOVERNANCE OF THE S2S PROGRAMME

**NAC endorsed the S2S manual as the guideline for all implementing agents which standardised implementation of the S2S programme.**

During the transition, NAC ensured that the training manual served as a standard operating procedure (SOP). The Sista2Sista manual guided implementation, which ensured all implementers implemented a standardised curriculum. Adopting the manual as an SOP enabled programme stability and coherence during the transition process, promoting equitable access to the HIV prevention services offered by S2S for AGYW across all districts.



*“This manual is meant to be utilised by all implementers of the S2S model. It includes specific sessions or lessons, a designated number of girls to enrol, a targeted age group, and prescribed services for referral. The aim is to ensure that those referred to these services not only access them but also receive support” (Key Informant: Provincial Manager)*

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## **Transition Planning Processes supported programme sustainability.**

Although no clear transition plans were identified or shared, a **transition process** led by NAC and UNFPA was described. It involved several meetings with UNFPA, GF and NAC to discuss transition plans, training and programme handover. Community leaders were also engaged during the programme closeout phase as funding ceased in specific districts.

# PARTNERING WITH COMMUNITIES IS A CRITICAL COMPONENT OF PROGRAMME GOVERNANCE

## Engagements with communities are structured

The MoHCC & NAC engaged communities through a structured, four-tiered approach, with different community members at each level: Tier 1: Village heads; Tier 2: Auxiliary health workers; Tier 3: Parents and Tier 4: Girls' forum meetings.



*"NAC provides technical assistance to the community leaders for the sustainability of the programme... Sensitization meetings were also conducted to inform the community about the transition and changes in programme partners." (Key Informant: Funder)*

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Community partnership has been enabled through effective stakeholder involvement, such as community updates on the S2S programme and mentor recruitment processes conducted in collaboration with community leaders.



*"Community leaders' acceptance and involvement in programme implementation contribute to community ownership. Mentors are drawn from the local community, ensuring relatability and ownership." (Key Informant: Provincial Manager)*



# FINANCIAL SUSTAINABILITY



# FUNDING TRANSITIONS RESULTED IN GREATER USE OF DOMESTIC RESOURCES THROUGH THE NATIONAL AIDS LEVY

## The UNFPA model was unaffordable for continuation and scale-up

After the district funding support changes from UNFPA to the GF occurred (2017-2018), implementing partners were deemed unaffordable. NAC structures were used to support implementation thereafter.

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## The National AIDS levy funding mechanism for S2S aimed to support funding and implementation gaps

Since 2018, the National AIDS levy has been leveraged to support programme implementation in NAC-funded districts. During the transitions from UNFPA to the GF (2017-2018), the S2S programme funding gaps were supported by the NAC through the administration of the National AIDS Levy. Funding gaps included training of mentors and staff. Despite the NAC-administered funding support, the cessation of partner funding impacted participant completion in some districts.



*“So, we had challenges in relation to funding. We had instances where donors would withdraw funding before the group has successfully graduated” (Key Informant: Youth Network representative)*

## HYPERINFLATION HAS NEGATIVELY AFFECTED ASPECTS OF SERVICE DELIVERY

Hyperinflation in Zimbabwe has directly impacted the financial sustainability of the S2S programme as the cost of implementing and sustaining the programme can escalate rapidly.



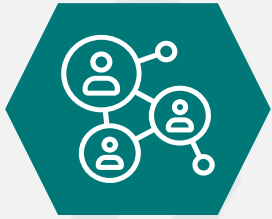
*“The districts that get funding in USD, tend to be faring better. So, essentially with the NAC-funded districts, the problems are somewhat different to those that are sponsored by GF, or in US dollars. Incentives subsequently change due to the limitations in funding (Key Informant: Youth Network representative)”*

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The impact of hyperinflation has negatively affected participant incentives.



*“So, from a certain district currently as we speak, people are just going in for the training- the usual incentives such as refreshments, and sanitary pads are no longer being provided. (Key informant: Youth network representative)”*



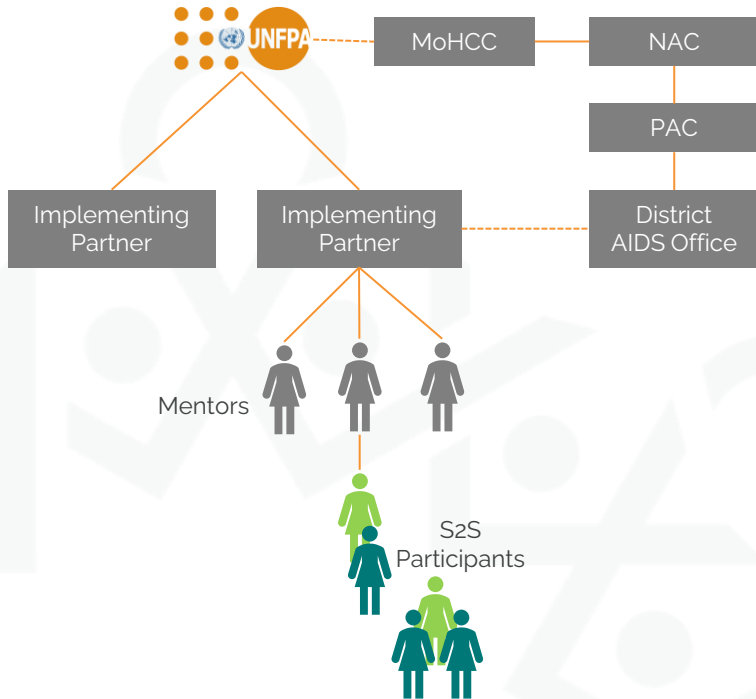
# SERVICE DELIVERY MODELS



# SERVICE DELIVERY MODELS DIFFERED ACCORDING TO FUNDER. THE UNFPA MODEL RELIED ON IMPLEMENTING PARTNERS, WHILE GF AND NAC MODELS RELY ON, AND ARE INTEGRATED INTO, THE DISTRICT AIDS COMMITTEE STRUCTURES



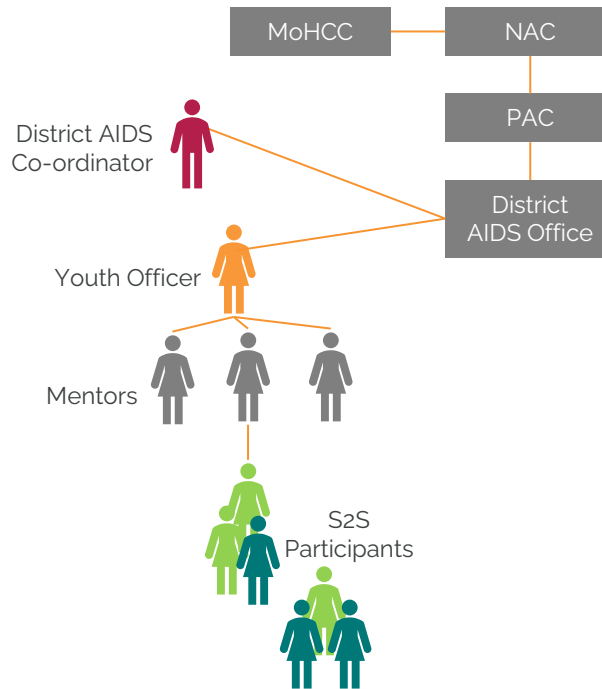
**Service Delivery Model 1**  
UNFPA funder implemented by NGOs via IPs



The programme was scaled up to **26** districts after the pilot was conducted in 2013. From 2017-2018 UNFPA funding decreased. In 2022/2023, UNFPA funded 6 districts (with BHA). Funding support ceased in June 2023.



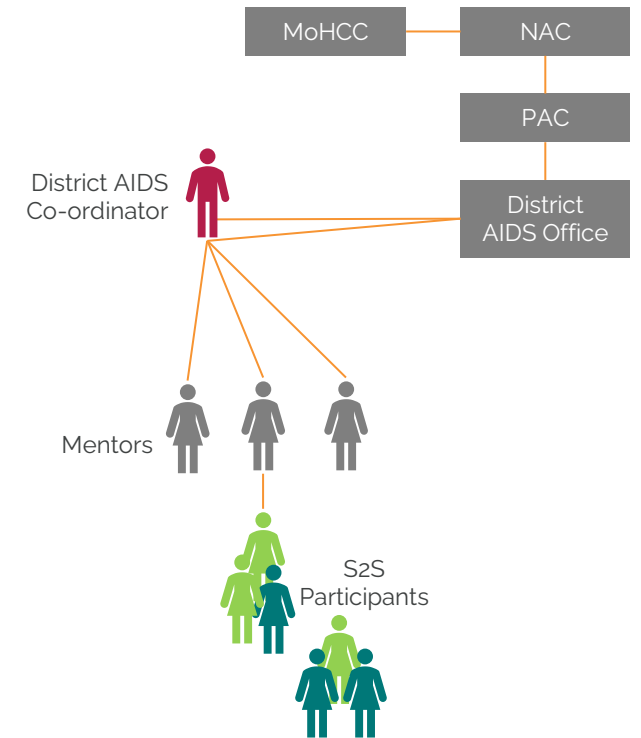
**Service Delivery Model 2**  
Global Fund funder and implementer



The Global Fund support to **23** districts began in 2017-2018. Funding support increased over the next two years. In 2021, the funding support declined to support implementation in 25 districts. This has been maintained to date. The GF plans to fund 6 new districts in support of the S2S programme expansion (2023-2024).



**Service Delivery Model 3**  
NAC funder and implementer



NAC support through the AIDS Levy was expanded over time (~2017-2018). Currently supports **24** districts.



# SERVICE DELIVERY MODELS DIFFERED WITH RESPECT TO IMPLEMENTATION SUPPORT, TRAINING OF MENTORS AND MODEL INTEGRATION INTO DOMESTIC STRUCTURES AT THE DISTRICT LEVEL

## Key differences between the service delivery models:

### Implementation Support:

- The UNFPA programme model was implemented via IPs.
- The GF model employed dedicated Youth officers to support the DAC in overseeing programme delivery by the mentors.
- The NAC supports programme implementation where mentors are supervised directly by the DAC (in some instances, with the support of a graduate intern).

### Responsibility of training mentors:

- UNFPA model = IPs
- GF model = Youth officers
- NAC model = District AIDS Coordinators

### Integration into District AIDS Action Committee Structures:

- UNFPA model = Limited integration
- GF and NAC = Integrated models

# SERVICE DELIVERY MODELS HAVE DIFFERENT STRENGTHS AND WEAKNESSES, THOUGH IT IS NOT CLEAR IF EFFECTIVENESS AND RETENTION VARY BY MODEL

UNFPA	Global Fund	NAC
<p>Well resourced with Implementing Partners having supported programme delivery.</p> <ul style="list-style-type: none"> <li>• Co-developed with MoHCC.</li> <li>• Resource intensive implementation model.</li> <li>• Low potential for sustainability in the context of Zimbabwe.</li> </ul>	<p>Youth officers supported programme implementation and are embedded in government district structures reporting to the District AIDS Coordinator.</p> <ul style="list-style-type: none"> <li>• Less resource intensive since implemented via Youth officer compared to Implementing partners.</li> <li>• Consider an adapted model for long-term sustainability where government cadres take on the role of Youth officers.</li> </ul>	<p>The model is fully integrated into domestic structures and funded through domestic resources.</p> <ul style="list-style-type: none"> <li>• The model has been the least resource-intensive since it was implemented via the District AIDS Coordinator (No Youth officer support).</li> <li>• High potential for long-term sustainability, contingent on funds for mentor training, incentives, consumables, etc.</li> </ul>

While some key informants felt that the NAC and GF model aligned well with greater community systems strengthening, their impact on programme outcomes has not been rigorously assessed

*“Overall, the impact on our human resources hasn't been considerable. In fact, there has been an increase in human resources. This growth aligns with our National Strategic Plan, where the focus has shifted towards community-level engagement. We're now focusing on strengthening our district-level offices to enhance their ability to make a meaningful impact within their respective HIV response domains.” (Key informant, Provincial Manager)*

## IN SOME CASES, THE NAC MODEL WAS VIEWED AS MORE FLEXIBLE AND RESPONSIVE THAN THE GF MODEL

**NAC utilised a data-driven approach in the deployment of mentors, leveraging insights from hotspot mapping to allocate additional mentors where they were needed.**

Unlike the GF, which maintained a fixed number of mentors as per the implementation plans, the NAC model demonstrated greater flexibility by increasing mentorship resources when necessary. For instance, when new hotspots of vulnerable AGYW were identified, NAC timeously deployed additional mentors to address these specific areas.



*“Another difference in this province is that the GF plans are quite rigid in terms of addressing the needs within the communities. They are using ten mentors only to address challenges in the hot spots. The NAC is a lot more flexible in adding an additional mentor in an emerging hotspot if there is need.” (Key informant: Provincial Manager)*



# HUMAN RESOURCES



## FUNDING TRANSITIONS HAVE LED TO STAFF LOSSES, AS A RESULT OF A DECREASE IN MENTOR MOTIVATION IN SOME DISTRICTS


During the transition from UNFPA to GF, the decline in funding created uncertainty about the programme's future in the communities. This resulted in the loss of experienced mentors who previously ran the programme.



*"One of the biggest impacts that I may say was the loss in confidence by the communities in terms of the certainty of continuation of the programme. So, when the programme was handed over to the GF from UNFPA, we did have a significant loss of community cadres who discontinued because they were not certain if the programme was going to be part of the new funding for 2018 to 2021... which was the major concern because these were experienced people who had been with the programme for quite some time. And in terms of capacity building, they had been capacitated to really run the programme. But due to this uncertainty of whether the programme was going to continue, some of them had to join other programmes, and some of them moved to doing other things." (Key informant: NAC representative)*

## MENTOR MOTIVATION WAS AFFECTED BY PERCEIVED DIFFERENCES IN STIPENDS

Mentors financed through GF programme support received a standard stipend in USD denomination (\$15/month), whereas the NAC-funded mentors received a stipend of the same value in local currency. The comparative value of the local currency to the USD denomination affected mentor motivation as the stipend in local currency was perceived to be worth less.

 *"In terms of the value, it might work out less in terms of the currency. There is poor motivation in terms of the fact that the GF colleagues are earning more." (Key informant: Provincial manager)*



# SUPPORT SYSTEMS FOR HEALTH



# PROCUREMENT PROCESSES WERE LESS RELIABLE SINCE THE TRANSITION AND DIFFERED BY FUNDER

**Consumables, including sanitary pads and refreshments, are not offered consistently to S2S programme participants.**

Consumables were identified as an important incentive for programme participants. Supply of consumables became less reliable with decreases in funding and funding transitions. Although NAC has funding allocated for consumables, this has yet to cover the costs entirely. This has resulted in an unreliable supply of consumables, negatively impacting participant retention in the programme.

 *"There are some consumables that needed to be given to the AGYW but because of financial constraints, the club members would not get everything. Sometimes, there would be delays in the delivery of these consumables." (Key Informant, national level)*

*"We would be provided with refreshments which motivated us to keep coming. After the session; we would be given drinks, sanitary products and biscuits as well..." (Youth Network representative)*

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**Issuing participants with incentives, such as sanitary pads, was highlighted as essential to maintain caregiver/parental buy-in.**

 *"So, parents usually say that their kids are going there to be abused because they are not bringing anything to show the benefit of their participation. Parents in our village often do not acknowledge the benefit of knowledge sharing." (Youth Network representative)*



# DATA INTEGRATION AND REFERRALS TO LOCAL HEALTH SERVICES HAVE BEEN STRENGTHENED BY NAC OWNERSHIP

**NAC invested in information systems that supported data integration to optimise the monitoring and evaluation of the S2S programme.**

S2S community data was integrated with MoHCC health services data. Data integration processes have been strengthened since NAC started funding the implementation of the programme. As a result of the integration of reporting systems, it has been possible to monitor the number of S2S referrals and testing of participants. This has proven useful in the assessment of programme performance and outcomes.

The provision of tablets and data to the S2S mentors has facilitated efficiencies in data integration.



*"So, that's quite a benefit of the government taking over parts of the programme. They can actually track the girls through the service journey better than UNFPA could and have data on the HIV outcomes that way, so that's quite positive." (Key informant: External Evaluator)*

*"DHIS2 is being used to keep track of the number of girls referred for HIV testing. The number of those who test negative and referred to pre-exposure prophylaxis (PrEP) is captured. Those who test positive are linked to care." (Key informant, NAC representative)*

## REFERRAL BETWEEN THE S2S PROGRAMME AND DISTRICT HEALTH SERVICES HAVE BEEN A VITAL STEP TO PROGRAMME SUCCESS.

Referrals between the community-based S2S programme and the district health services have improved over time, which is vital for the programme to achieve its objectives.



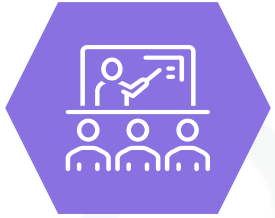
*"They have deliberately established a health facility that they collaborate with. These facilities are well-informed about the required services within that community centre. Consequently, they deliver the majority of services. While there are other partners who conduct outreach and provide services within the communities, the principal service provider for your query, whatever the case may be, is the Minister of Health and Childcare." (Key informant: Provincial manager)*



# **ENABLERS OF PROGRESS TOWARD SUSTAINABILITY IN THE S2S PROGRAMME**



# CRITICAL ENABLERS THAT SUPPORTED TRANSITION PLANNING & PROGRAMME SUSTAINABILITY RELATED TO GOVERNANCE AND FINANCIAL SUSTAINABILITY



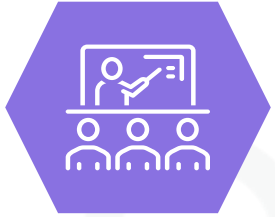
## Governance: Co-ordinated Structures

- The NAC-led governance structures provided oversight, coordination, and accountability for programme implementation. These structures facilitated collaborative planning, implementation and monitoring of the S2S programme.
  - NAC's role encompassed funding administration, governance and programme implementation. This has enabled transition successes in programme effectiveness and sustainability.
  - The standardised S2S training manual, endorsed by funders and implementers, has enabled coherence and standardisation of the programme.
- 

## Transition Planning

- Transition planning processes involved sensitization of the programme and its goals to community leaders and stakeholders. Early and ongoing structured engagements and collaboration between key partners, such as NAC, UNFPA, and civil society, were emphasised as key to enabling transition success and programme sustainability.

# CRITICAL ENABLERS THAT SUPPORTED TRANSITION PLANNING & PROGRAMME SUSTAINABILITY RELATED TO GOVERNANCE



## Governance: Community Ownership

- The involvement of community leaders from programme inception throughout programme implementation facilitated acceptance and ownership of the programme within communities. The structured community engagement platforms enabled this. These platforms provided the opportunity to attain community buy-in, provided the community with an understanding of the programme outcomes, promoted the programme value and communicated programme changes.



*"[During the transition] process] you would want buy in from the political leaders who have voices in adjusting society and correcting local policies that are corrective of otherwise retrogressive cultural practices. So, we need the village heads to be pivotal in the community dialogues. You need your chiefs, your councillors. You need the community leadership to have a common local policy that enables the implementation of the programme." (Key informant: MOHCC representative).*

- 
- Training mentors from local communities helped foster greater community ownership and engagement with programme participants. Community leaders formed part of the recruitment process. This further enabled community ownership and commitment to the programme throughout funding transitions.



*"Community leaders' acceptance and involvement in programme implementation contribute to community owners. Mentors are drawn from the local community, ensuring relatability and ownership. "Mentors are recruited based on criteria, including educational qualifications, character, and community acceptance." (Key informant Provincial Manager)*

# CRITICAL ENABLERS THAT SUPPORTED TRANSITION PLANNING & PROGRAMME SUSTAINABILITY RELATED TO FINANCIAL SUSTAINABILITY AND SUPPORT SYSTEMS FOR HEALTH



- The diverse funding mechanisms, facilitated by an effective governance and co-ordination framework, supported programme sustainability. Funding afforded through domestic mechanisms has strengthened domestic ownership. In addition, NAC plans to further leverage domestic funding sources, to reduce the reliance on external funding.

## Financial Sustainability: Diverse Funding Sources



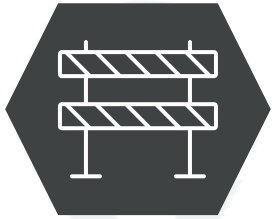
## Support Systems for Health: Monitoring & Evaluation

- Programme domestication led to the integration of data from various data sources, resulting in the ability to track S2S participants' clinical outcomes.



*Ongoing monitoring and evaluation (M&E) efforts have been vital for documenting programme scale and assessing programme effectiveness. This strategic information enabled programme leadership to motivate for the continuation of the programme through domestic and partner funding mechanisms. "DHIS2 is being used to keep track of the number of girls referred for HIV testing. The number of those who test negative and referred to PrEP are captured. Those who test positive are linked to care." (Key informant: External Evaluator)*

- Joint knowledge production about S2S, e.g., collaborative publication by UNFPA and MoHCC, supported by a robust M&E system facilitated by domestic ownership.



# **BARRIERS TO PROGRESS TOWARD SUSTAINABILITY IN THE S2S PROGRAMME**



# CRITICAL BARRIERS THAT CHALLENGE TRANSITION PLANNING AND PROGRAMME SUSTAINABILITY RELATE TO FINANCIAL SUSTAINABILITY AND HUMAN RESOURCES



## Financial Sustainability: Resource Planning

- Sub-optimal financial sustainability planning resulted in a decrease in resources to support the programmes geographic coverage in some districts.



*"So, we had challenges in relation to funding. We had instances where donors would withdraw funding before the group has successfully graduated." (Key Informant: Youth Network)*

## Domestic Economic Challenges

- Hyperinflation was not effectively accounted for in the budget planning process for the S2S and has had a direct impact on the sustainability of the S2S programme. The cost of implementing and sustaining the programme has been described as rapidly escalating due to hyperinflation. Programme continuity is challenged if funding allocations are not aligned with the programme implementation plans.

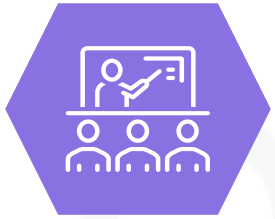


## Human Resources: Discrepancies in Stipends

- Perceived discrepancies in stipend value between GF and NAC-funded mentors created demotivation of NAC mentors implementing the S2S programme. This impacted the overall morale of mentors who earn in local currency (NAC mentors) compared to mentors who earn in US dollar denominations.



# CRITICAL BARRIERS THAT CHALLENGE TRANSITION PLANNING AND PROGRAMME SUSTAINABILITY RELATE TO GOVERNANCE AND SUPPORT SYSTEMS FOR HEALTH



## **Governance:** Transition Process Management

- The transition support process from UNFPA to GF and NAC was conducted virtually, which posed challenges to participant engagement in training. This impacted the process as communication and understanding required for further management of the district-level transition process was sub-optimal.



## **Support Systems for Health:** Incentives for participation

- The unreliable supply of refreshments and sanitary pads due to funding and procurement challenges negatively affected participant retention and parental support of the programme. Incentives are important to consider in maintaining participant interest and community buy-in.

# LESSONS LEARNT



# THE SISTA2SISTA CASE STUDY HAS PROVIDED VALUABLE LESSONS INTO HOW GOVERNANCE, FINANCING, AND SUPPORT SYSTEMS THAT FACILITATED EFFECTIVE TRANSITIONS

## Governance

- Standardised manuals for curricula and training that were co-developed by key stakeholders and used by all implementers helped ensure the fidelity of the intervention.
- Community engagement and buy-in were critical for effective programme transitions. Early and ongoing consultation with community gatekeepers and youth-led local organisations was crucial to ensuring effective funding transitions.

## Financial Sustainability

- Diverse funding sources which supplemented domestic funding were key to enabling effective programme transitions.

## Support Systems for Health

- An effective M&E system integrating data from community-based and health service-based activities was key to monitoring programme reach and related outcomes.

# ENHANCING THE FIVE SUSTAINABILITY DOMAINS WOULD FURTHER ENABLE PROGRAMME SUSTAINABILITY

**Governance:** Transition planning needs to be carefully managed, documented and resourced to prevent staff losses and negative impacts on programme delivery.

**Financial Sustainability:** An economic strengthening component, with active management of hyperinflation, is important to promote desired health and development outcomes.

**Service Delivery Models:** Greater use of technology and social media in programme delivery could strengthen its reach and impact. However, implementers need to remain mindful of the digital divide that could increase inequities of participant access. Community systems should be strengthened through community-led programme implementation to progress S2S successes.

**Human Resources:** Financial mechanisms supporting parity in stipends for peer programme mentors/supervisors, regardless of funder or implementer, will promote mentor motivation and retention.

**Support Systems for Health:** A standardised and reliable procurement process for consumables is essential to ensure reliability in programme participant supply. Evaluation of the effectiveness of different service delivery models to inform decision-making regarding future resource allocation would benefit programme planning.

# CONSIDERATIONS FOR FUTURE SUSTAINABILITY OF SIMILAR HIV PREVENTION PROGRAMMES FOR AGYW



# THE ZIMBABWEAN S2S CASE STUDY HAS DEMONSTRATED THAT SUCCESSFUL TRANSITIONS FROM EXTERNAL FUNDERS TO DOMESTIC OWNERSHIP IS POSSIBLE WHEN TRANSITIONS ARE MANAGED WITH EFFECTIVE GOVERNANCE OVERSIGHT

- Programme domestication, through increased domestic funding and effectively coordinating implementation and governance structures, has proved successful for programme effectiveness.
- Governments should effectively partner with funders, implementing partners, and civil society to design, implement, track and evaluate AGYW HIV prevention programmes to enable programme outcome success.
- Meaningful community engagement is key to community ownership and programme success.
- Effective governance mechanisms should ensure transition planning processes, including transition readiness assessments and sustainability roadmaps, including documented plans, implementation guidelines, and monitoring guidelines.

# EFFECTIVE MONITORING AND EVALUATION AND ROBUST PLANNING TOWARD FINANCIAL SUSTAINABILITY IS CRUCIAL TO ATTAIN AND SUSTAIN AGYW HIV PREVENTION PROGRAMME GOALS

- M&E success relates to sharing relevant information timeously with stakeholder groups. Transition and sustainability programme metrics should also be monitored to inform programme planning and implementation.
- A range of financing strategies addressing funding sources and improved efficiencies must be pursued to ensure financial sustainability and mitigate programme disruptions. Plans to increase and sustain domestic funding resources allocated to the programme should continuously be pursued to ensure sustainable and self-reliant systems.
- An evaluation of the programme's effectiveness in achieving the key outcomes, compared to the service model, would benefit programme management and planning toward sustainability. This would inform future service delivery models for S2S and similar HIV prevention programmes. A cost-effectiveness evaluation is therefore recommended.



**THANK YOU**



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