



Re-Ignite

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USAID DREAMS RISE PROJECT

FY22 ANNUAL PROGRESS REPORT

01October 2021 - 30 September 2022



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The authors' views expressed in this report do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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LIST OF ACRONYMS

AB Adolescent Boy

ABYM Adolescent Boys and Young Men

ACCE Accelerated and Comprehensive HIV Care for Epidemic Control in Zimbabwe

AG Adolescent Girl

AGYW Adolescent Girls and Young Women AGYW Adolescent Girls and Young Women

ANC Antenatal Clinic

ASRH Adolescent Sexual Reproductive Health
CBRM Community Based Response Mechanism

CBT Community Based Trainer
CCW Case Care Workers

CeSHHAR Centre for Sexual Health and HIV AIDS Research Zimbabwe

CLA Collaborative Learning and Adaptation

CRS Catholic Relief Services

CSPF Community School Program Facilitator

CTRF Changing the River's Flow

CWBSA Clowns Without Borders South Africa
DDC District Development Coordinator

DREAMS Determined, Resilience, Empowered, AIDS-free Mentored, and Safe

DRF District Referral Facilitator
DSD Department of Social Services
DSI District School Inspector
EGRS Empowered Girls Rock Summit
EMMP Environmental Monitoring Plan

ES Economic Strengthening
FHI 360 Family Health International

FP Family Planning
FST Family Support Trust

FY Financial Year

GBV Gender Based Violence

GESI Gender, Equity and Social Inclusion

GOZ Government of Zimbabwe HTS HIV Testing Services

ILO International Labor Organization

IP Implementing Partner
ISAL Internal Savings and Lending
LMA Labor Market Assessment
M&E Monitoring and Evaluation

MEL Monitoring, Evaluation and Learning
MIS Management Information System
MOHCC Ministry of Health and Child Care

MOPSE Ministry of Primary and Secondary Education

MoWACSMED Ministry of Women Affairs, Community, Small and Medium Enterprise Development

MOYSAR Ministry of Youth, Sports, Arts and Recreation

MSC My Savings Companion NAC National AIDS Council

OVC Orphans and Vulnerable Children
OOSCF Out of School Club Facilitator

PEPFAR President Emergency Plan for AIDS Relief

PMP Performance Monitoring Plan

POC Point of Contact

POT Performance Optimization

PreP Pre-Exposure Prophylaxis
PSE Private Sector Engagement
PTCE Part-Time Continuing Education

QI First Quarter
Q2 Second Quarter
Q3 Third Quarter
Q4 Fourth Quater

RDQA Routine Data Quality Assessment

RH Reproductive Health

RISE Re-Ignite, Sustain and Empower RTWG Referral Technical Working Group

SAB Social Asset Building

SGBV Sexual Gender Based Violence
SIE Strategic Information and Evaluation

SIMS Site Improvement through Monitoring System

SIYB Start and Improve Your Business
SME Small and Medium Enterprise
SOP Standard Operating Procedure
SRH Sexual Reproductive Health

TOT Training of Trainers
TWG Technical Working Group
UAN Umzingwane AIDS Network

USAID United States Agency of International Development

USG United States Government VHW Village Health Worker

VMMC Voluntary Medical Male Circumcision

WFP World Food Program YW Young Women

ZEMOA Zimbabwe Employment Market Opportunities Analysis

ZHI Zimbabwe Health Interventions

EXECUTIVE SUMMARY

The Re-Ignite Innovate Sustain and Empower (RISE) program is a five-year (October 2021 – September 2026) Cooperative Agreement between United States Agency for International Development (USAID) and Zimbabwe Health Interventions ZHI). The total estimated amount of this Cooperative Agreement for the entire performance period is \$53,195,423. It is one of the President's Emergency Plan for AIDS Relief (PEPFAR) funded programs through USAID that aims to disrupt the main drivers of HIV risk for adolescent girls and young women (AGYW) in Zimbabwe using a proven approach called Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe women (DREAMS). The program goal is to contribute to the reduction of new HIV infections amongst AGYW 10-24 by 2026 in Zimbabwe by strengthening HIV and sexual violence prevention. The program is led by a consortium partnership of ZHI, Family Health International (FHI 360), Family Support Trust (FST), and Umzingwane AIDS Network (UAN). The consortium partners provide strategic direction and guide program implementation. This progress report covers the ZHI-led DREAMS RISE program performance in the first year of implementation, herein referred to as Financial Year (FY) 22.

FY22 was the first year of implementation of the ZHI-led DREAMS RISE program. During this period, we: I) identified and mapped implementation sites (i.e., schools, communities, and health facilities); 2) identified and trained community cadres to support program implementation and service delivery; 3) developed joint work plans with key Government of Zimbabwe (GOZ) line ministries and departments, and other DREAMS implementing partners; 4) conducted bi-weekly Referral Technical Working Group (RTWG) to address service layering and closure of referrals; 5) conducted internal Site Improvement through Monitoring Systems (SIMS) and Routine Data Quality Assessments (RDQAs) across all the nine implementation districts to assure quality of program implementation and compliance with implementation guidelines; 6) facilitated routine point of contact (POC) meetings to strengthening coordination of DREAMS activities across the districts; and 7) identified and engaged sub-awardees to support program implementation. In addition, we held weekly performance optimization team (POT) meetings with our district-based teams to review program performance including weekly granular level data reviews, develop mitigation plans to address poorly performing indicators and challenges, and provide targeted and evidence-based dosing of technical assistance to the district teams. Further, the program held regular bi-weekly meetings with the RISE Program USAID Agreement Officer Representative (AOR) to discuss and monitor performance against the triple constraints of project management (i.e., scope, budget, and time). We also facilitated several USAID and PEPFAR technical support visits across the implementation districts. The program also hosted the USAID Charge' De Affairs' (Acting US Ambassador), Thomas Hastings who had the opportunity to witness the DREAMS RISE program activities in Bulawayo, appreciating the layering and linkages of services amongst DREAMS implementing partners and the orphans and vulnerable (OVC) program. He was very impressed with the program and key outcomes during the debrief were discussions on sustainability and future of United States Government (USG) support in Zimbabwe. As a result, the DREAMS RISE program achieved all its FY22 annual targets, both in the monitoring, evaluation, and reporting (MER) and custom indicators as shown in Table I.

Table I: DREAMS RISE FY 22 Program Achievement Against Annual Target (October 2021 to September 2022)

Indicator	Annual Target	Annual Performance	Annual Achievement %			
DREAMS MER INDICATORS						
OVC_SERV DREAMS AG 10-14	48954	51250	105%			
OVC_SERV Preventive AB 10-14	51530	51669	100%			
OVC_SERV DREAMS AGYW 15-17	18965	23105	122 %			
PP_PREV 15-19	35249	39583	112 %			
PP_PREV 20-24	22107	25355	115 %			
DREAMS CUSTOM INDICATORS						
AGYW Pack Completion 10-14 years	48,954	48749	1 00%			
`AGYW Pack Completion 15-19 years	35,249	36860	105%			
AGYW Pack Completion 20-24 years	22,107	24710	112 %			
ES_COMP_AGYW 15-19	11,304	11369	101%			
ES_COMP_AGYW 20-24	7,345	7472	102 %			
CARE-ES	8,730	8586	A 98%			
CARE Parent	8,730	8734	100%			
Education Subsidies AG 10-14 Years	1,642	1653	101%			
Education Subsidies AGYW 15-19 (PTCE)	1,860	2200	118 %			
Education Support YW 20-24 Years (PTCE)	164	307	187%			
NOT_GEND_GBV_DREAMS AGYW 10-24	974	1018	105%			
IMsafer AG 10-14	14,000	14669	105%			

Even though we achieved all our FY22 targets, we also experienced some challenges along the way which we were able to address. This included: I) slow start-up of implementation by some districts (i.e., Gwanda and Beitbridge districts) which called for accelerated implementation in the third quarter (Q3) and fourth quarter (Q4) to meet program targets; 2) delay in referral closure across DREAMS IPs led to suboptimal service layering for AGYW participating in the program; 3) late reporting of most gender-based violence (GBV) cases which made it difficult to provide timely comprehensive GBV services; and 4) delay in session completion for the primary package for 10-14 AG and AGYW 15-24, especially in the first quarter (Q1) and second quarter (Q2) of program implementation.

In FY23, the DREAM RISE program will prioritize the following key activities: 1) from Q1, emphasize session completion for AGYW within 12 weeks of enrollment; 2) roll-out positive parenting, education support, and community GBV prevention in five additional districts; 3) pilot block grants in a few selected schools; 4) roll-out the use of management information system (IMIS) - My Savings Companion to facilitate real-time reporting of internal savings and loan (ISAL) activities; 5) identify and engage three additional sub-awardees to support program implementation; 6) roll-out Pre-Exposure Prophylaxis (PrEP) module for parents of adolescent girls (AG) aged 10-14 years; and 7) strengthen capacity of community cadres to support program implementation.

I. INTRODUCTION

The RISE program is a five-year (October 2021 – September 2026) Cooperative Agreement between USAID and ZHI. The program is led by a consortium partnership of ZHI, FHI 360, FST, and UAN. The consortium partners provide strategic direction and lead project implementation. The RISE program is one of the PEPFAR funded projects through USAID that aims to disrupt the main drivers of HIV risk for adolescent girls and young women using a proven approach called DREAMS. The program goal is to contribute to the reduction of new HIV infections amongst AGYW 10-24 by 2026 in Zimbabwe by strengthening HIV and sexual violence prevention. The project aims to achieve this goal by specifically focusing on the following strategic objectives:

- a. Increasing access of AGYW to high-impact HIV prevention services and activities according to the DREAMS package.
- b. Strengthening capacity of families and communities to provide a safe and supportive environment for AGYW; and
- c. Strengthening systems for planning, coordinating, monitoring, and assuring the quality of programs for AGYW.

The ZHI-led RISE Program is the single largest award (both in scope and funding levels) that is

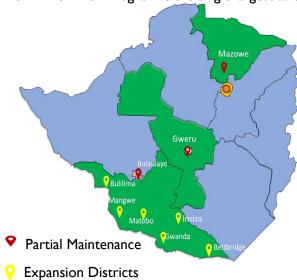


Figure 1: Map Showing RISE Program Implementation Districts

implementing the DREAMS approach in Zimbabwe. The RISE Program is delivering the DREAMS package, differentiated by age, vulnerability, and risk status, in nine out of the 16 districts across Mashonaland Central, Midlands, Bulawayo, and Matabeleland South provinces. Out of these nine districts, six have been categorized as expansion/priority HIV burden districts (i.e., Beitbridge, Bulilima, Gwanda, Insiza, Mangwe and Matobo) and three have been categorized as partial maintenance districts (i.e., Bulawayo, Gweru, and Mazowe) as shown in Figure 1. In FY22, the program implemented a full package of DREAMS core services in the expansion districts, whereas only primary DREAMS package, economic strengthening (ES) for AGYW, and community norms change interventions were implemented in the partial maintenance districts.

DREAMS RISE Project Description and Conceptual Framework

The primary target population for the RISE Program is vulnerable AGYW aged 10 to 24 years most at risk of acquiring HIV such as AG aged 10-14 years, out of school AG aged 15 – 19 years; young women (YW) aged 20-24 years; GBV survivors; and orphans and vulnerable children (OVC). The program seeks to support vulnerable AGYW to stay in school, prevent early pregnancies, prevent sexual violence, reduce child marriages, and increase access to post-violence care through implementation of a DREAMS core package of services. The DREAMS core package of services comprises evidence-based approaches that go beyond the health sector, to address the structural drivers that directly and indirectly increase girls' HIV risk, including poverty, gender inequality, sexual violence, and a lack of education. The DREAMS core package aims at:

- Empowering AGYW and reducing risk through youth-friendly reproductive health care and social asset building.
- Mobilizing communities for change with school and community-based HIV and violence prevention interventions.
- Reducing risk of sex partners through PEPFAR programming, including HIV testing, treatment, and voluntary medical male circumcision (VMMC).

• Strengthening families with social protection (education subsidies, combination socioeconomic approaches) and parent/caregiver interventions.

The program has adopted a combination HIV prevention approach and employed the following strategies to achieve program goals and objectives: I) screening and enrollment of eligible AGYW; 2) delivery of evidence-based HIV and sexual violence prevention curriculum through in-school platforms and social assets building clubs: 3) provision of economic strengthening interventions for AGYW and caregivers through trainings in internal savings and lending (ISAL), financial literacy, start and improve your business (SIYB) etc.; 4) provision of education support to vulnerable AGYW; 5) promoting positive parenting; 6) addressing harmful cultural practices through community visioning and norms change; and 7) facilitating referrals and linkages for layering of services. All these strategies are achieved through strengthening systems for planning, coordination, monitoring and ensuring quality of interventions for AGYW. Figure 2 shows the DREAMS RISE conceptual framework.

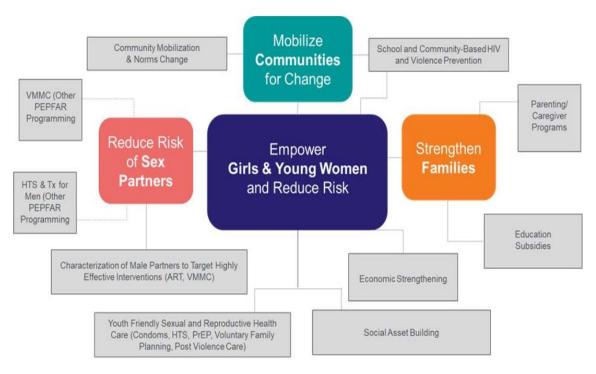


Figure 2: The RISE Program Conceptual Framework

This narrative report provides the ZHI-led DREAMS RISE Program performance for its first year of implementation (I^{st} October $202\,I - 30^{th}$ September 2022), clearly highlighting key activities/strategies, key results/achievements, challenges experienced, and priority activities for FY23.

II. PROGRESS ACHIEVEMENTS BY INTERMEDIATE RESULTS

This section provides a detailed report of the RISE program performance for the period of Ist October 2021 to 30th September 2022 by intermediate results (IR).

IR I: INCREASED ACCESS OF AGYW TO HIGH-IMPACT HIV PREVENTION SERVICES AND ACTIVITIES ACCORDING TO THE DREAMS PACKAGE

The DREAMS-RISE program delivered primary prevention interventions focused on reaching AGYW most at risk of acquiring HIV with appropriate prevention measures. AGYW aged 15-24 years received the comprehensive DREAMS package; whilst adolescent boys and girls aged 10-14 years continued with primary prevention of HIV and sexual violence services. Vulnerable AGYW targeted through DREAMS-RISE program included in-school AG aged 10-14 years, out-of-school AGYW aged 15-24 years, survivors of GBV, OVC and their caregivers. Regardless of their entry point, AGYW are assessed for HIV risk and referred for other DREAMS services according to minimum service packages defined by sub-population, using standard tools to ascertain eligibility, enrolment, and referral procedures. The program followed the DREAMS screening and enrolment protocol to identify the most-vulnerable AGYW, assessed each identified AGYW's eligibility, and ensured that eligible AGYW received the DREAMS package. Social Asset Building (SAB) clubs, both in schools and communities, remained the key platform for delivering integrated HIV and sexual violence prevention sessions. DREAMS-RISE interventions are designed to build social, health and economic assets of the most vulnerable AGYW identified in the program. Differentiated economic strengthening interventions complemented the RISE program work in social asset building and bolstered financial literacy, improving employment market linkages, and cultivating skills for employability to strengthen the economic wellbeing of vulnerable AGYW and disrupt the HIV and/or GBV causal pathways.

IR I.I: School Based Intervention

The DREAM-RISE program delivered the evidence informed comprehensive sexuality education-based HIV and sexual violence prevention package using the Community Schools Program (CSP) model that was complemented through in-school guidance and counselling lessons. The CSP facilitators were drawn from a pool of retired teachers and unemployed graduates coming from the school communities who were trained to deliver the HIV and sexual violence prevention curriculum to AG and AB who were in and out of school whilst the schools reinforced the sessions through guidance and counselling lessons as well as providing safe spaces for AG and adolescent boy (AB). The DREAMS package addressed pertinent age appropriate, and evidence informed issues. The evidence-based HIV and Sexual Violence Prevention curriculum for AG and AB aged 10-14 was deliberately premised and targeted at achieving primary prevention of sexual violence and HIV infection. The program performance was based on completion of a minimum of six out of eight HIV prevention sessions, 10 hours of gender norms sessions and eight hours of 11 financial literacy sessions.

Provision of evidence-based HIV and sexual violence prevention interventions for adolescent girls aged 10-14 years enrolled in DREAMS program (OVC_SERV DREAMS)

During the FY22 reporting period, the program worked with relevant key stakeholders such as the Ministry of Primary and Secondary Education (MOPSE), National AIDS Council (NAC), and District Development Coordinators (DDC) to identify school communities for the delivery of the intervention. The program also trained 612 Community School Program Facilitators (CSPFs) on HIV and Sexual Violence prevention using the approved Health4Life 360 curriculum to support the delivery of primary package to AG aged 10-14 years. These trained CSPFs were provided with relevant tools to support screening, identification, enrollment of vulnerable AG into the program, and session delivery. The program further trained 630 Guidance and Counselling teachers using the approved Health4Life 360 curriculum to reinforce delivery of HIV and Sexual Violence Prevention sessions in schools. Table 2 shows the number of CSPFs, and Guidance and Counselling teachers trained in FY22 across the nine districts.

Table 2: Number of CSPFs and Guidance and Counselling Teachers Trained in FY22 across the Nine Districts

District	Number of Schools	Number of CSPFs	Number of trained G and C Teachers
Bulawayo	25	100	75
Gweru	15	60	45
Mazowe	25	100	75
Beitbridge	18	72	75
Bulilima	14	56	72
Gwanda	14	56	72
Insiza	14	56	72
Mangwe	14	56	72
Matobo	14	56	72
TOTALS	153	612	630

The program recorded an overall performance of 105% (51,250/48,954) of AG aged 10-14 years who were enrolled into the DREAMS program, received the primary package, and remained active in the SAB clubs across all the nine districts (Figure 3). Out of the 51,250 adolescent girls enrolled in the program 48,751(95%) completed the DREAMS primary package which is 100% (48,751/48,954) of the DREAMS RISE program annual target. While all the nine districts surpassed the annual targets for enrolment and participation in SAB clubs, there was a variation in session completion rate with Mazowe district recording the highest completion rate at 107% and Gwanda district recording the lowest at 93%.

OVC_ SERV AG 10-14 years Achievement (October 2021- September 2022)

District	Annual Target	Active AG	AG Completed PP	% active AG	Completion Rate
Mazowe	12659	14104	13499	111%	107%
Insiza	3420	3501	3395	102%	99%
Beitbridge	3050	3059	3002	100%	98%
Mangwe	2657	2704	2606	102%	98%
Bulawayo	12069	12438	11834	103%	98%
Bulilima	2774	2780	2708	100%	98%
Gweru	5651	5814	5424	103%	96%
Matobo	2683	2683	2566	100%	96%
Gwanda	3991	4167	3717	104%	93%
Overall	48954	51250	48751	105%	100%





AG aged 10-14 managed to Actively participate and complete the Primary package.

Figure 3: OVC_SERV AG 10-14 Years Reach and Completion Rate for APR (October 2021 - September 2022)

This impressive performance is attributed to close collaboration with key GOZ line ministries and departments, timely training of community cadres to deliver sessions and services to the AGYW, effective program M&E systems to track performance, and routine program performance review meetings.

OVC_SERV Preventive AB and AGI0-I4 Performance for October 2021 - September 2022

The program also provides evidence-based HIV and sexual violence prevention interventions to adolescent boys aged 10-14 (OVC_SERV PREVENTIVE) through the community schools program model. During the reporting period the program posted 100% achievement for this indicator with eight out of nine districts surpassing the annual target (Figure 4). The program also reached 1,586 AG who do not meet the DREAMS eligibility criteria with the primary package. During screening and

enrolment process, the DREAMS RISE program used a defined eligibility criteria to determine AG who are eligible for enrolment. Adolescent girls who did not meet the DREAMS eligibility criteria and were willing to participate in DREAMS activities were not turned away, instead they were provided with primary package of services and recorded under the OVC_SERV Preventive AG 10-14 indicator. The program is not mandated to actively track this indicator. Ineligible AG encountered in the program were taken through the evidenced based Health4Life 360 curriculum as the basic HIV and sexual violence prevention package as part of the broader HIV prevention strategy.

OVC_SERV PREVENTIVE Adolescent Boys (10-14 years) Achievement (October 2021 – September 2022





OVC_SERV PREVENTIVE Adolescent Boys										
District	Beitbridge	Bulawayo	Bulilima	Gwanda	Gweru	Insiza	Mangwe	Matobo	Mazowe	Cumulative Reach
Annual Target	3211	12704	2920	4201	5948	3600	2797	2824	13325	51530
Adolescent Boys Reach	3380	12734	2921	4221	6061	3597	2573	2813	13369	51669
% Reach	105%	100%	100%	100%	102%	100%	92%	100%	100%	100%

Figure 4: OVC_SERVE PREVENTATIVE AB aged 10-14 Years Achievement for October 2021-2022

IR 1.2: Provide Education Subsidies to Vulnerable AGYW

DREAMS-RISE education subsidy is a DREAMS secondary service intervention which targets vulnerable AGYW who are enrolled and actively participating in the DREAMS program. The program recognizes schools as a safe environment hence this intervention seeks to ensure that the AGYW stays in school while building their Agency. In FY22, the program worked together with AGYW families to overcome barriers to access education including enrolment, attendance, retention, and progression. The education support rendered by the program included direct payment of tuition fee, school/examination fees, and provision of school uniforms and stationery. The program assessed AGYW eligibility to enroll in school, monitored their school attendance, progression, transition and identified those who were either at risk of dropping out of school or dropped out of school. The program targeted OVC and AGYW aged 10- 24 years, who were at risk of dropping out of school and those who may have dropped out of school and supported them to re-enroll into formal and nonformal education (Part Time Continuing Education).

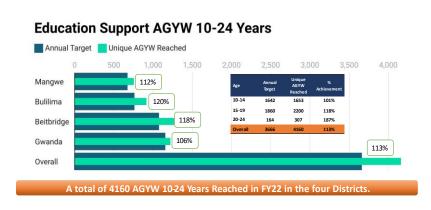


Figure 5: Education Support Performance for AGYW aged 10-24 Years for October 2021- September 2022

During the implementation period, the program provided education support to 1653 (101%), 2200 (118%) and 307 (187%) AGYW aged 10-14 years, 15-19 years, and 20-24 years respectively. To ensure implementation fidelity, the program conducted a routine monitoring of the education intervention focusing on attendance, retention, and progression. Results of this exercise showed an attrition rate of 18% among part-time

continuing education (PTCE) as well as 22% of AGYW not progressing to the next level of education. To establish the root cause of this poor retention and progression rates amongst the PTCE learners, the program conducted a deep-dive analysis together with a verification exercise in the districts. According to the assessment report, the low retention rates were attributed to delayed receipt of learning materials, stigma, long distances to schools, lack of support from parents and caregivers as well as the need for the AGYW to take care of their children. The program will improve its engagement processes with MOPSE, teachers, community leaders, and parents/caregivers of AGYW, and existing community structures to sensitize them on their role to support AGYW to remain in school and improve on their academic performance. In addition, the program will focus on timely provision of stationery and learning materials.

IR 1.3: Community Based Intervention

The program reached AGYW through the community-based social asset building clubs. These are safe spaces for AGYW to meet and build social networks, relationships with peers, receive emotional support, and increase social agency as well as empowerment within their communities. During these clubs, AGYW received sexual violence and HIV prevention messages as well as need-based services, in line with their different profiles and needs. The community-based interventions were delivered by Out of School Club Facilitators (OOSCFs) who underwent a five-day training to equip them with skills to deliver the HIV and sexual violence prevention sessions to their peers within the social asset building club using an approved curriculum. During the reporting period 388 OOSCFs were trained (out of whom 39 were supervisors) to form safe spaces for AGYW and deliver HIV and Sexual Violence Prevention sessions using the PEPFAR approved Health4Life 360° curriculum as shown in Table 3.

Table 3: Number of OOSCFs Trained in FY 22 across the Nine Implementation Districts

District	Number of OOSCFs	Number of Supervisors
Bulawayo	50	6
Beitbridge	42	5
Bulilima	39	4
Gwanda	40	4
Gweru	33	4
Mazowe	38	4
Matobo	38	4
Insiza	36	4
Mangwe	33	4
TOTAL	349	39

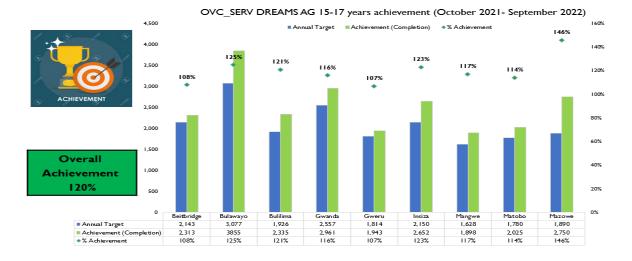


Figure 6: OVC_SERV DREAMS AG 15-17 years Achievements for October 2021 - September 2022

For FY22 implementation period, the program surpassed the annual target recording I22% (23,105/18,965) across all the nine districts towards the OVC_SERV DREAMS I5-I7 AG indicator. This overachievement is attributed to close collaboration between trained community cadres, community stakeholders as well as other implementing partners in the districts. In addition, the integration of HIV and sexual violence prevention sessions, financial literacy and economic strengthening created interest amongst AG who are often living in poverty and are determined to transform their lives through the needs based secondary services that are provided in the program.

Evidence based HIV and sexual violence prevention interventions for AGYW 15-19 years (PP_PREV 15-19 years) Reach against Annual Target (Oct 2021 – September 2022)

Using the same model employed for the 15-17 but with an age-appropriate curriculum, the DREAMS-RISE program surpassed the annual target under the PP_PREV 15-19 AGYW indicator by reaching 39,583 AGYW against an annual target of 35,249, translating to 112% achievement of AGYW who are active in the SAB clubs. Out of this, 104% completed the primary package which is defined as a minimum of six out of eight HIV prevention sessions, 10 hours of gender norms sessions and eight out of 11 financial literacy sessions. This great performance is because of active participation by the girls in the SAB club which has created a safe space for them to interact with peers who have similar vulnerabilities and thus, creating as space to access information, comfort, psychosocial support (PSS) and other clinical services. SAB clubs are non-judgmental platforms for AGYW to interact, receive life skills orientation coupled with economic strengthening opportunities as well as edutainment in the form of dramas, poems, songs, or sport. All these activities allow for retention of AGYW in social asset building clubs while contributing to attainment of set targets.

Primary_Package Adolescent Girls 15-19 Years

District	Annual Target	Active AGYW	AGYW Completed PP	% Active AGYW	Completion rate	
Mazowe	3513	4478	4273	127%	122%	
Bulawayo	5719	7986	6814	140%	119%	
Gweru	3372	3883	3521	115%	104%	Adolescent Girls
Insiza	3996	4134	4071	103%	102%	that participated and completed the
Beitbridge	3983	4105	4006	103%	100%	HIV Prevention,
Matobo	3309	3419	3277	103%	99%	Gender Norms and
Mangwe	3026	3038	2933	100%	97%	Basic Financial Literacy primary
Bulilima	3579	3631	3433	101%	96%	package sessions
Gwanda	4752	4909	4533	103%	95%	
Overall	35249	39583	36861	112%	104%	

Figure 7: PP-PREV 15-17 years Performance for October 2021 - September 2022

Evidence based HIV and sexual violence prevention interventions for Adolescent girls and young women 20-24 years (PP_PREV 20-24 years) Reach against Annual Target (Oct 2021 – September 2022)

During the reporting period, the program surpassed its annual targets for priority population

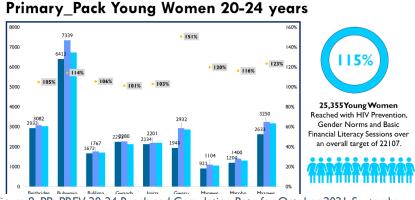


Figure 8: PP_PREV 20-24 Reach and Completion Rate for October 2021-September 2022

prevention interventions targeting young women aged 20-24 years reaching 25,355 (115%) AGYW who were active in SAB clubs by end of September 2022 (Figure 8). All the nine districts surpassed the annual target. The program worked closely with other community volunteers such as case care workers (CCWs), village health

workers (VHWs) and local leadership to mobilize AGYW for enrolment into the social asset building clubs. DREAMS –RISE program also utilized various entry points for enrolment into DREAMS which include but not limited to antenatal care (ANC), and immunization clinics for children under five years of age where most of this subpopulation frequent. Integration with economic strengthening activities in the social asset building clubs, also generated interest amongst AGYW as well as opportunities for further pathways which economically empower them to reduce HIV risk.

IR 1.4: Provision of Post Gender-Based Violence

The NOT_GEND_GBV is a custom indicator that tracks violence disclosure and comprehensive post GBV care including non-clinical services. This is conducted by recording the number of AGYW who receive a clinical or non-clinical GBV response services from a DREAMS partner that does not meet the monitoring, evaluation, and reporting (MER) minimum package requirements. Four districts from Matabeleland South province (i.e., Beitbridge, Bulilima, Gwanda, and Mangwe districts) were tracking the NOT_GEND_GBV indicator. During the reporting period, the program recorded an overall performance of 105% (1,018) of AG aged 10-24 years who received clinical and non-clinical GBV response services, with nearly all the four districts performing exceptionally well, except Gwanda district that recorded slightly below 100% for AG aged10-14 years and 15-19 years. The slightly below 100% performance for Gwanda district is attributed to the deeply rooted culture of not disclosing cases of GBV. Overall performance for the NOT_GEND_GBV indicator is attributed to enhanced facility and community SRN model which improved awareness and access to adolescent sexual and reproductive health (ASRH) services, coupled with continuous case scouting through use of CCWs, OOSCFs and CSPFs.

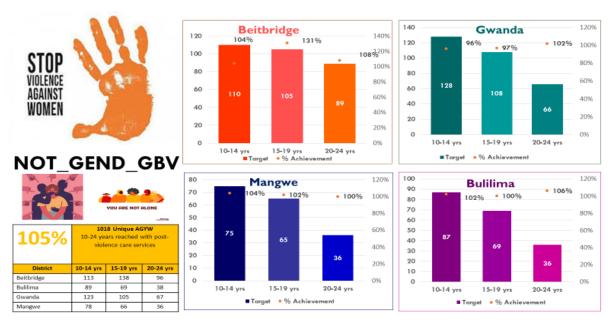


Figure 9: NOT_GEND_GBV Indicator Performance for October 2021-September 2022

IR 1.5: Economic Strengthening Services for Eligible AGYW

The DREAMS RISE program is making significant strides towards the socio-economic empowerment of AGYW through implementation of the combination socio-economic intervention. During the reporting period 183 Community Based Trainers (CBT) from nine districts were trained on the ISAL methodology and reporting to form and train ISAL groups. The program collaborated with the Ministry of Women Affairs, Community and Small Medium Enterprises (MOWACSMED) at district, ward, and village levels to deliver the training. In addition, the program procured motorbikes for and trained district ES Officers and to facilitate their movement to effectively deliver the ES intervention to the target population. As a result, 6734 (99%) AGYW aged 15-17 years were reached with ISAL intervention against an annual target of 6,788 (Figure 10). Eight out of the nine implementation districts

recorded over 98% achievement, with one district (Gweru district) recording 91%. Good stakeholder engagement characterized by joint implementation and collaboration with key line ministries were critical in achieving ISAL targets across all the districts.

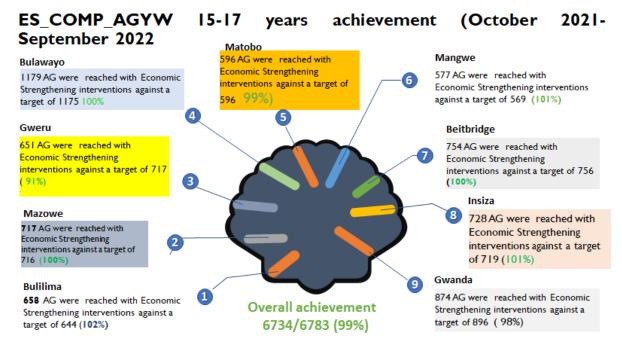


Figure 10: ES COMP AGYW for AGYW aged 15-17 years Performance for October 2021 - September 2022

Further, analysis showed that the program reached 11369 (101%) and 7472 (102%) of AGYW aged 15 – 19 years, and 20-24 years respectively with financial literacy and ISAL interventions (Figure 11). This impressive performance is attributed to 1) continuous capacity strengthening of community cadres (CBTs) on the ISAL methodology that has promoted village-based ISAL trainings which in turn increased attendance and retention, 2) correct mobilization and targeting of vulnerable AGYW using SIE generated line-list; and 3) increased coordination among community cadres and local leadership, key stakeholders and implementing partners



Figure 11: ES_COMP_AGYW for AGYW aged 15-24 years Performance for October 2021 - September 2022

724

711

98%

Combined AGYW and Caregiver ISAL Group Performance

102%

502

105%

% Reach

Annual

Target

Reach

% Reach

944

949

2202

2260

103%

The ISAL training is the foundation towards self-sustenance and reliance through establishment of micro-enterprises using productive loans from the ISAL group. After the ISAL training, AGYW self-selected and established/formed ISAL groups, a platform that allowed AGYW and caregivers to collectively pool and loan out funds to start and/or grow their respective businesses. In addition, the

96%

812

780

96%

100%

584

595

102%

101%

303

328

108%

101%

361

374

914

950

100%

7346

7472

102%

program rolled-out the use of ISAL My Savings Companion (MSC) Management Information System; and trained 51 program staff on the use of the system to facilitate effective tracking of ISAL group performance. In FY 22, a total of 556 ISAL groups were formed with a cumulative savings of US\$ 19462 and loan utilization of US\$36921; and the average saving per group member at US\$4.84 (Figure 12). Applying the evidence informed approach, group members were encouraged to share out and consider investing in group projects to continue safeguarding and growing their fund.

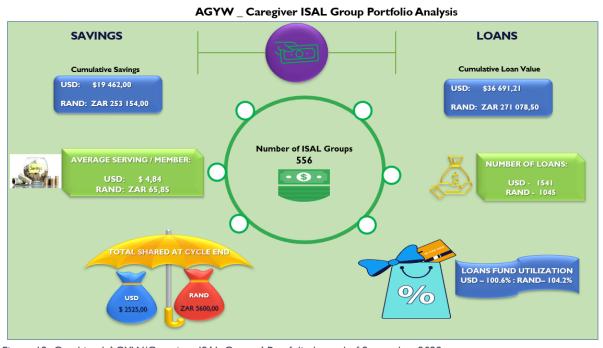


Figure 12: Combined AGYW/Caregiver ISAL Groups' Portfolio by end of September 2022

Using productive loan funds borrowed from the ISAL groups, a total of 898 different income generating activities (IGAs) were established (694 for AGYW and 204 for caregivers) in various trades or sectors. Retailing, agro-based horticulture production, small livestock production, fish farming, catering, baking, garment construction, basketry, and hairdressing etc.) characterized the IGAs that AGYW and caregivers were engaging in. Self-drive and motivation to grow business and venture in male dominated fields increased with five young women growing from goat production to cattle production through procuring of heifers which traditionally was a preserve of males.

ES Further Pathways

The goal of the RISING to Economic Empowerment is to promote market informed entrepreneurial and employability pathways for AGYW and the program supported AGYW with various activities towards attainment of the goal. In FY22, the program reached 347 AGYW with entrepreneurship training using the International Labour Organization Start and Improve Your Business Model (SIYB), an intervention that has inspired and motivated AGYW to be deliberate in starting, growing, and expanding their businesses (Figure 13). This is evidenced by business formalization of 13 companies, 10 AGYW opening bank accounts, procurement of materials and equipment required to establish and grow meaningful business, and the ability to identify market gaps and come up with business ideas to close the gap whilst making profit as highlighted below:

- One AGYW from Gweru district procured a printing and photocopying machine and is providing service to local communities with local schools being her target and niche market.
- Two AGYW (co-owners of PamTha company) specialising in production of cleaning detergents got a tender to supply a local primary school in Filabusi.
- Five AGYW approached rural councils and local leadership to acquire land, have built and stocked retail shops.

The entrepreneurship training enabled AGYW to produce business plans which will assist them in further growing and diversifying their businesses through access to external loan facilities and materials from financial institutions.

Economic Strengthening Pathways ENTREPRENEURSHIP WORKPLACE Jorkplace READINESS eadiness **SKILLS** 48 Beitbridge 17 Bulawayo 38 33 Bulawayo Bulilima 25 Bulilima 30 Gwanda 9 Gwanda 13 Gweru 69 Gweru 30 Insiza 34 Insiza 14 25 Mangwe 25 Mangwe 43 Matobo 23 Matobo 56 Mazowe 35 Mazowe **Grand Total** 347 **Grand Total** 220

Figure 13: Economic Strengthening Further Pathways Performance for October 2021 - September 2022

The pictures below show AGYW entrepreneurs in retail businesses.



Figure 14: An AGYW running her retail business

Graduating out of program support through absorption into wage employability is critical and the RISE program is deliberate in targeting AGYW with work readiness skills training. The program applied findings from the Labour Market Assessment (LMA) to design and train AGYW on soft and practical skills required in the modern workplace taking into consideration the sector in which one will be operating (formal or informal). To date, the program has trained 220 AGYW in work readiness and engaged with the private sector leading to placement of 35 AGYW in various companies mainly in hotel and catering (including fast foods), agriculture- citrus production, tele-communications/mobile money services and retail shops. Out of the 33 AGYW placed in internship, 17 were absorbed into employment on a renewable temporary basis by a citrus production firm and a tele-communication and media company as brand ambassadors earning ZAR2 000/month/Brand ambassador.



Figure 15: A group of AGYW employed in Private Company producing citrus fruits in Mazowe district

The LMA findings and private sector engagement were critical in informing on-demand vocational skills training for uptake by AGYW as they pursue either the entrepreneurial or employability pathway. The program adopted structured skills training using accredited institutions which is followed by internship in private companies or with accredited crafts people. In the reporting period, the program reached 401 AGYW with various skills training in different male dominated fields with 58 having completed training in gold mineral processing (two dropouts due to relocation to South Africa and enrolment in tertiary institutions) and 100 AGYW received nurse aid training. The AGYW were and/or are (for on-going courses) placed in various companies (public and private) for internship as summarised in Table 4.

Table 4: Number of AGYW Receiving Skills-Based Trainings in Various Accredited Institutions in Zimbabwe

Institution	Skills	No of AGYW	Status
Zimbabwe Red Cross	Nurse Aide Training	100	Completed AGYW on Internship
Zimbabwe School of Mines	Gold Mineral Processing	60	Completed
Joshua Mqabuko Nkomo	House wiring, Auto electrics and electronics, Painting, carpentry, Metal fabrication	70	Participating
Bulawayo Project Centre	Motor Mechanics, beauty therapy, hotel and catering, solar installation, welding	100	Participating
Afritech	Building. Motor mechanics, cutting and designing	21	Participating
Next Generation	Garment Construction	20	Participating
Phangani	Fence making, Building	30	Participating
TOTAL		401	

Figure 16 showing AGYW undergoing gold mineral processing training at Zimbabwe School of Mines.



Figure 16: AGYW undergoing a gold mineral processing training at Zimbabwe School of Mines

Labor Market Assessment

DREAMS RISE program conducted ward-based Labor Market Assessment (LMA) which built on the CRS Zimbabwe Employment Market Opportunities Analysis (ZEMOA) validation districts reports. Each district selected enumerators to collect data, and 65 enumerators were trained on LMA across districts to facilitate data collection. Preliminary findings of the LMA showed that:

- I) Labor Demand & Supply
- Job openings were fewer than AGYW looking for jobs and value chains analysis provided nodes for employment opportunities and the few opportunities available require technical skills that AGYW did not have.
- Companies offering employment were mainly Small and Mediums Enterprises (SMEs) which
 preferred graduates from polytechnics and vocational training colleges as these were deemed
 to have practical skills and were therefore ready for immediate production, unlike university
 graduates.
- II) AGYW barriers to self-employment
 - While AGYW may know what they want to venture into, they were generally limited in specific knowledge and trade skills.
 - Failure to produce in bulk severely compromised AGYW's access to better and bigger markets
 - Ever-changing economy.
 - Limited access to capital to grow and expand their businesses.
- III) AGYW barrier to employment
 - Companies were not willing to employ unskilled employees and AGYW because of lack of relevant skills required (technical, soft skills and ICT).
 - Social media remains the preeminent means of advertising for jobs which some girls do not have access to.
 - AGYW were not committed and not taken seriously by employers.
 - Safeguarding challenges at workplace.
- IV) Availability of training institutions and the perceived quality of the skills provided
 - Lack of engagement between private sector and training institutions resulting in misalignment of skills provided by training institutions and those required by employers
 - Rural districts had limited number of training institutions and the ones available lacked resources and had outdated machinery resulting in skills misalignment with industry expectations.

Youth Led LMA

DREAMS RISE conducted Youth Led LMA Training of Trainers (TOT) in FY22 where 46 participants including ambassadors, OOSCFs, and District Economic Strengthening Officers were trained. The objective of the Youth LMA TOT was to capacitate them to be able to conduct a component of LMA to identify employment and self-employment opportunities in their wards using the FHI360 Youth Led LMA toolkit. The trained participants will cascade YLMA skills to DREAMS AGYW in FY23.



Figure 17: AGYW during the Youth Led LMA Training in Bulawayo

Private Sector Engagement (PSE)

The DREAMS RISE program made deliberate efforts in FY22 to engage private sectors to address AGYW economic vulnerabilities and as a way of making steps towards the realization of journey to self-reliance (I2SR) initiative. The program also developed a private sector strategy (PSE) strategy to ensures consistency and continuity in the approach of PSE. The strategy was informed by USAID CRS supported curriculum review and completion benchmarks, ZEMOA validation report, and DREAMS RISE ward level LMA findings. PSE was conducted for internship, access to inputs and markets, creating exposure for provision of skills-based vocational trainings for AGYW and sharing information on relevant skills needed for AGYW to enter various job markets. The program further developed a private sector value proposition for the Empowered Girls Rock Summit which was held in Harare where 45 AGYW were placed in different sectors for job shadowing, mentorship, and business networking opportunities. The value proposition was premised on the fact that the DREAMS AGYW never got a chance to showcase their capabilities, but if given a chance they can excel. The emphasis of this value proposition was found to work well during this event and appealing to the private sector business leaders who were in attendance. Promoting such a value proposition as a hook for developing partnerships linkages for RISE participants will continue to be part of the private sector engagement strategy. In addition, the private sector database was developed to include information on all firms and the institutions that participated in LMA.

At district level, the program made deliberate efforts to link AGYW to viable markets. For example, in Matobo and Insiza districts, the program partnered with Hamara Zimbabwe and linked 17 AGYW for broiler contract farming and Sasso chicken production where Hamara provides inputs to the AGYW and a market (product off-takers) for the chicken.



Figure 18: An AGYW involved in Chicken Contract Farming through Hamara

IR 1.6: Service Referral and Linkages (Layering of Services amongst AGYW)

The program enrolled AGYW after risk assessment to determine their vulnerabilities that make one eligible for the program. An analysis of the vulnerabilities of adolescent girls aged 10-14 years enrolled into the program showed that 88% were at risk of dropping out of school, 22% had experienced some form of violence, and 22% were orphans. The vulnerability assessment for AGYW aged 15-24 years showed that 69% had irregular or no condom use, 18% were engaged in transactional sex, and 20% had multiple sexual partners exposing them to HIV infection. Figure 19 shows a detailed analysis of AGYW vulnerabilities.

AGYW Vulnerabilities

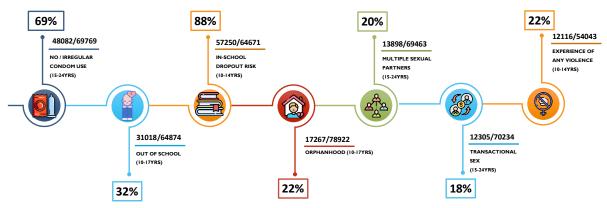


Figure 19: AGYW Enrolment and Vulnerabilities for October 2021 - September 2022

To effectively respond to the vulnerability assessment output, the program worked closely with other DREAMS and non-DREAMS implementing partners in FY22 to provide need-based services to AGYW enrolled into the program. Technical referral working group meetings (TRWG) were conducted regularly across the nine districts to help identify referral gaps, conduct de-duplication, and enhance timely service provision to program beneficiaries. To ensure that all AGYW enrolled received the need-based services and address low linkage rates to services, the program made deliberate efforts to follow up AGYW that did not receive services and continued layering of services in the subsequent periods through the SRN model. In FY22, 5244 AGYW aged 10-24 years were referred for psychosocial support out of whom 85% received the service, 4250 were referred for HIV testing services (HTS) out of who 51% accessed the service, 8037 were referred for family planning (FP) out of whom 49% accessed the service, and 1612 were referred for PrEP out of whom

35% received the service. There was low uptake of clinical services, and this is attributed to myths and misconceptions around PrEP and family planning methods and lack of support from parents, caregivers, and partners on uptake of these services. In addition, the inadequate placement of DREAMS District Referral Facilitators (DRFs) at all health facilities within the districts resulted in service provision gaps. Hence, the need to increase the number of DRFs and improve linkages between community and health facilities. Through the community norms change component, the program will continue to engage parents and caregivers on the need to support AGYW to seek and access clinical services. In addition, the program will continue to facilitate access to service through the SRN model.

SERVICES & LINKAGES

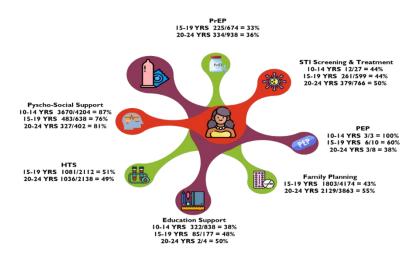


Figure 20: Service and Linkages Performance for October 2021 - September 2022

IR 2: STRENGTHENED CAPACITY OF FAMILIES AND COMMUNITIES TO PROVIDE A SAFE AND SUPPORTIVE ENVIRONMENT FOR AGYW

Positive relationships with parents and caregivers are critical in providing a consistent protection factor for AGYW against various negative health and social outcomes. The intermediate result strengthens the caregivers' ability to provide a nurturing and protective environment for teenagers through positive parenting techniques and relationship building. In addition, the DREAMS RISE program implements curricula with a participatory learning approach focused on building skills and a community level awareness and ownership of HIV risk reduction. The curricula being implemented includes Parenting for Lifelong Health, Community Visioning, and the Changing the River's Flow (CTRF) methodology. Furthermore, the program actively engaged and worked closely with community leaders and existing community structures and community cadres to mobilize parents, caregivers, AGYW and the general community members to participate in program activities, that include, Sinovuyo sessions, community dialogues and ES for caregivers. The program collaborated with key line ministries to implement, track, and monitor community GBV response activities for AGYW.

IR 2.1: Conduct quarterly Community Reviews as a progress monitoring platform and mechanism for adaptation of DREAMS implementation in response to emerging contextual issues.

The program conducted monthly and quarterly review meetings with community cadres (CBTs, OOSCFs, CSPFs, Sinovuyo facilitators, DRFs and IMsafer Instructors) to gather information for monitoring purposes and in turn using the results to inform program management and decision making. The regular review meetings provided opportunities for programs and Strategic Information and Evaluation (SIE) teams to I) review progress towards targets achievement; 2) strengthen the capacity of community cadres on data collection tools to improve data quality, session completion, and timely

tracking of referrals for need based service delivery; and 3) discuss program expectations, guidelines, challenges, and strategies to improve performance.

IR 2.2: Conduct community visioning sessions for norms change

Under the community norms change component, the program used community sensitization meetings to engage communities and their leaders to get program buy in. In addition, a hybrid of models was used to implement norms change, i.e., community visioning and CTRF methodology. Community visioning is a participatory process that engages local communities in developing a consensus on what they want their community to be, where the communities seem to be heading, and what must be done to correct that norm/trend to achieve the desired vision. CTRF is a community-based model that seeks to address harmful norms fueling HIV and gender-based violence among girls and young women. Through a series of dialogues, the model seeks to promote healthy/safe practices that have a protective effect on girls and women. Ultimately, the model contributes towards creation of a conducive environment for preventing GBV and HIV among girls and women.

The program identified and trained 33 male mobilizers, key in conducting dialogues with men on pertinent issues prioritizing men's health and well-being, leadership, positive masculinities, fatherhood/parenting amongst others. This resulted in 610 men accessing clinical services that include HTS and STI Screening and treatment. Through the male mobilizers, it was noted that males prefer to access services during outreaches conducted at their places of work, e.g., at mines, far away from their immediate family and community. The community dialogues held using the CTRF methodology helped communities to develop with strategies to address harmful cultural, religious, and traditional practices thereby contribute towards a conducive environment for preventing GBV and HIV among AGYW. The program identified and trained 95 traditional and religious leaders who played a key role in facilitating the dialogues, encouraging the community members to attend and participate in dialogue sessions. The men's wellness day platforms were conducted to raise awareness on HIV and GBV among AGYW 10-24 years and to promote early identification and reporting of GBV to enhance access to services and address barriers to AGYW accessing non-stigmatized HIV and GBV services. This provided opportunities for intergenerational dialogues between leaders, caregivers, boys, and men to promote open communication and joint problem-solving. Awareness campaigns for specifically men and boys were conducted to address issues of protecting the girl-child from HIV and GBV. These platforms also brought out issues that adolescent boys and young men face and the services they require.



Figure 21: Community Norms Change Intervention for October 2021 - September 2022

The community change component showed that there is need to strengthen targeted community engagement and involvement to address pertinent issues that limit AGYW from thriving, exposing them to HIV, sexual and gender-based violence. The community has a key role to play in addressing harmful cultural, religious, and social practices.

Community Visioning and Norms Change

r Anna Ball de la		Bula	awayo	Gv	veru
COMMUNITY	Annual Target	Reach	% Achievement	Reach	% Achievement
Number of religious and traditional leaders trained on CTRF dialogue	30	24	80%	30	100%
Number of community transformative dialogues conducted by leaders	500	495	99%	500	100%
Number of male mobilisers identified and trained	10	10	100%	10	100%
Number of community sensitization/visioning meetings with community leaders	10	10	100%	10	100%
Number of men wellness campaigns	4	4	100%	4	100%
Number of men & boys reached with male wellness campaigns	400	408	102%	340	85%
Number of men & boys reached with any of the following services (HTS, STI Screening,VMMC)	300	307	102%	303	101%

Figure 22: Community Visioning and Norms Change Intervention for October 2021 - September 2022

IR 2.3: Implement the proven PHL-Sinovuyo Teen parenting curriculum to strengthen parenting and teen communication skills, particularly to support extremely high-risk AGYW

Through the Parenting for Lifelong Health curriculum, also known as Sinovuyo, the program targeted caregivers of adolescent girls aged 10-14 years in the four focused districts of implementation (Mangwe, Bulilima, Beitbridge and Gwanda) to help cultivate open, caring and trusting relationships between caregivers/parents and their teenagers. Positive and healthy relations help caregivers to protect their adolescents against several negative health and social outcomes. To strengthen the capacity of families and communities to provide a safe and supportive environment for AGYW and achieve 100% towards the annual target, the program worked collaboratively with Clowns Without Borders South Africa (CWBSA) to provide technical support on the delivery of the HIV-PEPFAR approved Parenting for Lifelong Health curriculum for positive parenting and adolescents. CWBSA assessed 19 Sinovuyo facilitators and certified 17 to deliver Sinovuyo curriculum in the four implementation districts. Tied to this, the CWBSA also assessed 10 coaches to observe and provide support to the coaches during delivery of sessions to facilitators. The program through CWBSA also conducted a training of trainers' workshop for 10 certified coaches to provide them with the prerequisite requisite skills and strategies required to train Sinovuyo facilitators. In addition, the program utilized existing community structures to mobilize participants and made use of line lists to target caregivers/parents of adolescent girls aged 10-14 years who received the primary package.

During the period under review, the program reached 8734 (100%) parent-teen pairs with positive parenting intervention, against an annual target of 8731. All the four districts achieved their annual targets, except Gwanda district that had 95% achievement (Figure 23). Gwanda district's performance is attributed to a slow start up of parenting interventions in the district. The Sinovuyo teen parenting curriculum helped to increase caregivers' knowledge, skills, and comfort in communicating with their adolescent children about sexual health, HIV, GBV prevention and

response; as well as guiding them on how best to monitor their children's activities and improve positive parenting practices.



Figure 23: Positive Parenting Interventions for Parents/Caregivers of AGYW aged 10-14 Years, October 2021 – September 2022

IR 2.4: Economic Strengthening Services targeting parents/caregivers of DREAMS participants aged 10–14 years

Economic strengthening for caregivers is a sustainability measure or intervention to ensure continued support and provision of basic needs (including education support) to adolescent girls post program support/funding. Trained CBT facilitators and district or ward based MOWACSMED officers provided village-based ISAL trainings to 8,586 (98%) caregivers against an annual target of 8731. The joint implementation and coordination with MOWACSMED and Ministry of Youth, Sports, Arts and Recreation (MYSAR) coupled with active involvement and collaboration with local leadership and school authorities led to correct targeting, line listing and training of caregivers in ISAL and post training support including IGA monitoring. The ES intervention for caregivers has paved way for vulnerable families to access group based productive loans to establish 204 income generating activities. Most caregivers are into agriculture (small livestock production, horticulture, apiculture, fish farming), retailing (groceries and clothes). Group based IGAs are a common feature amongst caregiver groups as they work towards gradual support of AG educational needs which allows and promotes transitional graduation out of program support.



Figure 24: CARE_ES Performance for October 2021 - September 2022

IR 2.5: Support community GBV response platforms in selected districts

The community care workers (CCWs) are an important community structure established under the Department of Social Development (DSD) with presence in communities to manage and handle cases of abuse. During the reporting period, the program identified 10 community care workers per district (Beitbridge, Bulilima, Gwanda, and Mangwe) who received training as DREAMS-RISE volunteers to enhance their capacity in handling cases of abuse in communities. The program through the CCWs utilized community sensitization and community visioning platforms to engage community leaders and village health workers to build their understanding of the effects of sexual gender-based violence (SGBV) in the lives of the AGYWs. In addition, the program used community visioning platforms to conduct dialogue sessions for GBV survivors to access appropriate services. To enhance CCWs capacities during the reporting period the Department of Social Development (DSD) utilized the community platforms to conduct refresher training for CCWs and VHWs to strengthen their capacity on the management of GBV cases in the community. Table 5 shows AGYW reached by the program through the community GBV response mechanisms established in the community

Table 5: AGYW Reached through Community GBV Mechanism

Activity	Target	Reach	Outcome
Home visits	150	130	130 survivors of abuse were visited, and 23 survivors of sexual abuse were referred to the department of Social Development for placement into safety.
Support Group	240	190	190 AGYW were reached through support groups in all districts where they shared experiences and lessons learnt in their healing processes.
Assertiveness Training	240	260	Planned assertiveness trainings were completed, and 260 AGYW were reached across the districts.
Post Violence Care	974	1040	Psychosocial support and counselling sessions were provided to 1063 survivors. Some of these survivors were identified through the trained volunteers and line lists derived from Form 2.
Support to survivors	180	178	178 survivors were supported with bus fare, medical care and food packs

IMsafer Performance for AG aged 10-14 years

The DREAMS-RISE program implemented a modified, evidence-informed violence prevention curriculum, known as IMsafer using youth educators called "IMsafer Instructors" to deliver the curriculum to young people in various settings including schools, youth groups, and through community-based channels. The program achieved the annual IMsafer targets, reaching 14,669 (105%) AG with violence prevention skills, against an annual target of 14,000 across all the districts (Figure 25). This exceptional performance is attributed to collaboration amongst IMsafer Instructors and CSP facilitators in delivering HIV and sexual violence prevention sessions as well as the afterschool IMsafer sessions. This approach generated interest amongst AG aged 10-14 years who look forward to gain mental, verbal, and physical self-defense skills that are instrumental to preventing sexual assault.



Figure 25: AG aged 10-14 Years Reached with IMsafer Intervention from October 2021 - September 2022

IR 3: STRENGTHENED SYSTEMS FOR PLANNING, COORDINATING, MONITORING, AND ASSURING THE QUALITY OF PROGRAMS FOR AGYW

DREAMS is a collaborative partnership program that provides a multi-sectoral package of core interventions to curb the spread of HIV to AGYW. This is conducted through strengthened systems for planning, coordinating, monitoring, and assuring quality interventions for AGYW. The program managed to keep track of service provision to AGYW through bi-weekly RTWG, Point of Contact (POC), and performance review meetings with all the DREAMS partners in the district. The RTWG meetings were aimed at tracking referrals, closing of referrals, de-duplication of data, and enhancing smooth collaboration of partners at district level. In addition, the program collaborated with other DREAMS IP during the stop-the bus outreaches to provide integrated services to the AGYW.

IR 3.1: Strengthen the capacity of DACs and DMOs to conduct structured monthly and quarterly DREAMS meetings and improve their coordination of the district-level HIV response.

The program promoted a multistakeholder, whole system approach to achieve desired results through complementarity of effort. During the period under review, the DREAMS program, in conjunction with DACs and Ministry of Health and Child Care (MOHCC) conducted two feedback meetings per district with stakeholders and other implementing partners which were aimed at providing feedback on implementation processes and strengthening collaboration amongst partners. All districts conducted monthly coordination meeting and quarterly review meetings with DREAMS implementing partners.



Figure 26: Quarterly Review Meeting with Stakeholders in Bulilima District

Through the coordination of DACs and MOHCC, referral confirmation rates improved with other implementing partners. Moreover, DAC and MOHCC constantly followed up on partners to attend the routine POC meetings which resulted in improved attendance of the meetings. The districts conducted RTWG meetings on a bi-weekly basis to promote and improve service layering. It was during these meetings that the DREAMS program implementers identified and addressed service provision gaps and data quality concerns. The meetings also facilitated confirmation of referrals as well as promoting timely service provision to AGYW.

IR 3.2: Strengthen the capacity of DREAMS Ambassadors to play a central role in coordinating DREAMS activities in the districts

DREAMS-RISE Ambassadors continue to take a lead role in implementing the program in all districts. During the reporting period, the program mentored 90 DREAMS Ambassadors who presided over the monthly SRN planning meetings. The program strengthened the capacity of ambassadors through mentorship, and on-job trainings on strategies and innovations for creating demand for services. Ambassadors are key champions in facilitating service layering in the program through working closely with other implementing partners in communities they create demand and mobilize AGYW for services uptake. The Ambassadors work with community cadres like DRFs, CATS, and Young People's network from NAC to ensure a multisectoral response to service delivery through continuum of bidirectional referrals from community and health facilities. These ambassadors due to their peer influence have managed to positively influence the lives of AGYW in the communities by not only being role models but also by raising public awareness on vulnerabilities that predispose AGYW to HIV infection such as dropping out of school, early child marriages, teen pregnancies, orphanhood and SGBV, etc. whilst advocating for AGYW rights. During the period under review the ambassadors managed to participate in regional meetings, took a lead role in leading USAID visits in the districts, mobilized AGYW for ASRH services in their communities, distributed sanitary wear to AGYW based on need, promoted condom use, delivered ASRH messages to AGYW through WhatsApp platforms, mobilized AGYW for uptake of PrEP, supported referral and linkages, and acted as a channel for AGYW to access services. Whilst speaking about the successes of DREAMS ambassadors one, Tanyaradzwa Makotore was part of the delegates in the Emerging Young Women Leaders meeting on championing the priorities of women and girls in the HIV response as an emerging young woman leader in Dar es Salaam, Tanzania. Another ambassador, Michelle Madamombe and Tanya also participated in virtual sessions for International AIDS Society (IAS). In addition, the DREAMS ambassadors had an opportunity to make presentations on their impact in the DREAMS programming during the two-days launch event for the ZHI –led DREAMS-RISE and ACCE programs in Harare.



Figure 27: Ms. Tanyaradzwa Makotore attending Emerging Young Women Leaders Meeting on Championing Priorities of Women and Girls in the HIV Response, in Dar es Salam , Tanzania

IR 3.3: In collaboration with other PEPFAR IPs, strengthen and scale the delivery of ASRH friendly services.

Through coordinated efforts of DAC and MOHCC, RTWG meetings increased collaboration between all DREAMS implementing partners. The IPs developed monthly consolidated joint workplan to guide the screening, enrolment, and service provision to AGYW in the districts which include ASRH services. The collaboration strengthened coordination, communication, planning, and delivery of non-stigmatizing ASRH services. ASRH services were offered together with PEPFAR IPs which include PSH, JHWO, MUSASA, CeSHHAR among others. In Gweru district, the program supported 12 stop the bus outreach activities where 1227 AGYW were reached with FP services, HTS, PSS and condom promotion and provision.

IR 3.4: Adapt and implement the CLA model to foster coordinated, client-centered, evidence-based, and effective implementation of interventions that reduce HIV acquisition risks among AGYW.

Several collaborative learning activities were conducted during the reporting period, and these include scientific writing training for RISE technical staff, Brownbag meeting, DREAMS-RISE program launch, conducting deep dives, and development of abstracts for conferences. In addition, program staff (i.e., regional team leaders and district team leaders, including district SIE officers) were trained on sentinel survey to enable them to support the sentinel survey activity which will be implemented in the subsequent reporting period. The sentinel site survey will generate evidence on the program's achievement, or lack thereof, of short- to intermediate outcomes among AGYW. This evidence will facilitate design and implementation of evidence-based interventions aimed at reducing HIV infections among AGYW. Operation research was conducted on determining reasons for school dropouts, completion of primary package before and during the COVID-19 period, quality improvement during surge activities, labor market assessment, and gender equity and social inclusion (GESI) analysis. Research findings were disseminated at the DREAMS-RISE program launch and these results will be used to improve program performance.

III. PERFORMANCE MONITORING

The program implemented the following monitoring and evaluation (M&E) activities to ensure the program is on track in terms of performance.

Data Collection, use and performance reviews

Good program management is centered on good and quality data collection, analysis, and use. During this review period, the program facilitated bi-weekly Referral Technical Working Group and data quality improvement meetings with key stakeholders to ensure accurate and consistent data are collected. In addition, these platforms were used to track and ensure all referrals are closed in a timely manner. Regular mentorship and field data verification visits were enhanced to assure program quality both at programing as well as monitoring and evaluation level. The program held weekly performance optimization team (POT) meetings with district-based teams to review program performance including weekly granular level data reviews, and develop mitigation plans to address poorly performing indicators and challenges whilst providing targeted and evidence-based dosing of technical assistance to the district teams. In addition, the program teams held quarterly performance review meetings at district, regional and national levels to assess performance and develop strategies to improve poorly performing indicators. Through different routine data quality checks, the program managed to submit data for entry and cleaning within the stipulated deadlines. Effective data monitoring through different systems and standards helped the program to be proactive and maintain best practices as well as implementing with fidelity. In addition to the efforts by ZHI team we also received support from the USAID SIE point of conduct, this visit was very useful in improving our data collection and filing processes.

Monitoring and Evaluation (M&E) Tools

To ensure that throughout FY22 implementation fidelity were maintained with no disruptions, the RISE program made significant strides in ensuring that all the district teams had adequate data

collection tools. The project continued to use the standard MOHCC Community and Facility Referral Book, and all referrals were captured in the DREAMS consortium database for ease of tracking as well as monitoring of completion. We also revised data collection tools for parenting intervention by consolidating the register into one to improve caregiver intervention service delivery. While internet connectivity challenges affected data entry progress, the SIE teams adopted a flexible working schedule which allowed teams to work during times they are more productive. All data entry clerks were provided with mobile data to complement office-based internet services.

Data Quality Assurance

The aim of the DREAMS-RISE program data quality assurance process is to ensure the system generates reliable, accurate, precise, and complete data without any bias as and when it is required. This enables the program to use data to make key decisions to improve the program to its full potential and ultimately improve health outcomes of all AGYW. To ensure data quality for the program, the SIE team conducted 52 routine data quality assessments (RDQAs) across all the nine districts, 22 internal Site Improvement for Monitoring Systems (SIMS).

RDQAS SIMS SIMS SIMS 22 SIMS EXERCISES DISTRICTS OVER THE PAST 12 MONTHS. PAST 12 MONTHS. SIMS 22 SIMS EXERCISES DONE IN THE 9 DISTRICTS OVER THE PAST 12 MONTHS. Trainings 44 SIE STAFF REFERSHER TRAINED ON DHIS 2 DATA Quality issues from the source to the Database from the patabase of the Database of the Dat

DATA QUALITY ASSURENCE

Figure 28: RISE Program Data Quality Assurance Activities in FY22

Data quality assurance activities were implemented from the community level where data is generated. This was conducted through strengthening capacity of responsible cadres at all levels. District staff provided site support to community cadres to ensure they had the requisite tools and skills to produce data that is reliable and usable. Regional and national teams also provided support to ensure that there is data management capacity at all levels.

- The following were gaps that were noted during quality assurance activities in FY22, and appropriate action plans were developed, implemented, and monitored to address them. Missing data entry deadlines compromised the timelines factor in the quality assurance process.
- Receiving incomplete tools or registers with missing data
- Having verification factors beyond the acceptable +5% or -5% which are the ZHI benchmarks for quality data
- Non localisation of data utilisation plans at subnational level
- Compromised functionality of technical working groups which focus on data management.

AREAS NEEDING IMPROVEMENT

SYTEMS STRENGTHENING TO IMPROVE DATA MANAGEMENT PROCESSES ACROSS DREAMS SITE

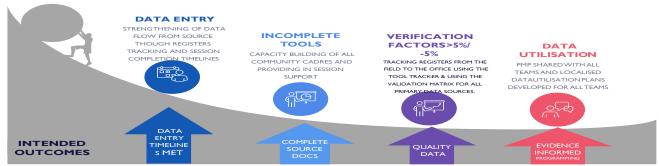


Figure 29: Areas that Required Improvement in FY22

System and processes improvement initiatives were implemented across all the nine districts to ensure that data quality assurance processes are not compromised. Capacity strengthening initiatives were routinely conducted during site support visits, weekly SIE meetings and deliberate arrangements to focus on specific lagging areas. This was done to ensure continuous improvement of the system.

Knowledge Management

Several activities were implemented within DREAMS-RISE program, with Knowledge Management (KM), Collaboration Learning and Adapting (CLA), Strategic Information and Evaluation (SIE) and Communications staff effectively collaborating in activity design and implementation. Some knowledge management highlights for COP 21 include development of a five-year KM strategy, development of data protection policy, institutionalization of quarterly KM bulletins, media training for technical and operations staff, Brownbag meeting, and deep dive analyses focusing on program gaps. Other activities include development of conference abstracts, participation in conferences, development of manuscripts, successful launch of ACCE and RISE projects, development of success and human-interest stories, as well as design and implementation of digital data management and visualization platforms.

a) **DREAMS-RISE** program launch

The DREAMS-RISE program was launched on the Ist and the 2nd of September 2022 under the theme "Celebrating Saving Lives, Treasuring the Present and Shaping the Future". A total of 167 participants attended the program launch and these were drawn from government of GOZ key line ministries, UN agencies, academic institutions, PEPFAR, USAID, NAC, CDC, representatives of people living with HIV, program beneficiaries, print and electronic media, and other PEPFAR and non-PEPFAR implementing partners.

Keynote speeches were given by the USAID Acting Deputy Mission Director, Priscilla Sampil, the Ministry of Health and Child Care (MOHCC) represented by the Director of AIDS and TB Unit, Dr Owen Mugurungi, and Priscilla Sampil commended the great strides that Zimbabwe has made to change the story of HIV/AIDS in Zimbabwe, since 2006, when PEPFAR began supporting the HIV response. Dr Mugurungi said the Government of Zimbabwe remains committed to improving access to and quality of HIV prevention, care and treatment services for people living with HIV through implementation of client-centered approaches. During the launch, ZHI successfully engaged beneficiaries and got their experiences and aspirations, with learners and other program beneficiaries given the opportunity to showcase how they benefited from the DREAMS program. Results of deep-dives, program assessments, operations research, success stories, and best practices were shared, where an abstracts book was developed and shared with all participants. The abstract book was uploaded on the ZHI website (www.zhi.co.zw). A total of nine abstracts (5 oral and 4 poster) presentations were made under the DREAMS-RISE program. A gallery walk was showcased at the launch.



Figure 30: Learners from Mhakwe Primary School Presenting a skit on DREAMS services during the RISE Program Launch

b) Scientific writing workshop

ZHI conducted a 2-day abridged virtual scientific writing training workshop for the DREAMS-RISE technical staff in FY22. The overall objective of the training was to strengthen staff capacity in writing abstracts, manuscripts, success stories, program briefs as well as developing professional slide decks for conferences and meetings. Sessions were delivered through a combination of Power Point presentations and discussions. Topics covered during the training included: overview of scientific writing, overview, and types of abstracts, developing professional power-point presentations, tips of writing good manuscripts, reasons for manuscript rejection, manuscript submission, authorship, and writing good success and human-interest stories (HIS).

c) Brownbag

The DREAMS-RISE program conducted an innovative and first of its kind virtual Brown Bag meeting in May 2022 under the theme "Innovativeness as we rise by uplifting others". DREAMS-RISE program generates valuable routine and non-routine data and information. There are program innovations which are critical for cost efficiency and sustainability of interventions being implemented at national and subnational levels. If these innovations are not documented, it's as good as they don't exist, and it is likely that competing organizations will utilize them. The Brown Bag meeting is one of the organization's knowledge sharing platforms, and its objective was to promote data and information sharing among program staff and strengthen teamwork and peer learning among staff members. A total of 13 abstracts were submitted and the best six were selected for oral presentation from the following themes:

- a. Implementing DREAMS during COVID-19 era,
- b. Reducing HIV infections among AGYW,
- c. DREAMS service referral system,
- d. In-school and community school programs,
- e. Stigma and discrimination under the DREAMS program,
- f. Impact of the DREAMS program in communities.

d) Conference abstracts and manuscripts

Several abstracts were developed and submitted for consideration for presentation at local, regional, and international conferences including HIV and Adolescence 2022 conference and the 4th USAID

Local Partners Meeting. Table 6 summarizes abstracts developed, conferences submitted to and outcomes.

Table 6: List of Abstracts Developed in FY22

Abstract	Conference	Outcome
Assessment of completion of primary package sessions by adolescent girls and young women under the DREAMS program before and during the COVID-19 period in selected districts of Zimbabwe, 2019 to 2021	HIV & Adolescence 2022	Accepted for poster presentation
Reducing HIV causal pathways among adolescent girls and young women during the COVID-19 period through the Community Schools' Program	HIV & Adolescence 2022	Accepted for poster presentation
Economic empowerment to reduce risk of acquiring HIV among adolescent girls and young women enrolled in the DREAMS program: lessons from Matobo district of Zimbabwe	HIV & Adolescence 2022	Accepted for poster presentation
Developing DREAMS Social Asset Building Clubs tracking system: Lessons from Insiza district.	USAID Local Partner Meeting	Accepted as poster presentation
Assessment of completion of primary package sessions by adolescent girls and young women under the DREAMS program before and during the COVID-19 period in selected districts of Zimbabwe, 2019 to 2021 Developing DREAMS Social Asset Building	NAC/BRTI/U Z 3rd HIV and AIDS Research Symposium NAC/BRTI/U	Yet to get feedback Yet to get feedback
Clubs tracking system: Lessons from Insiza district.	Z 3rd HIV and AIDS Research Symposium	Tet to get reedback
Reducing HIV causal pathways among adolescent girls and young women during the COVID-19 period through the community schools' program	NAC/BRTI/U Z 3rd HIV and AIDS Research Symposium	Yet to get feedback
Using a Continuous Quality Improvement approach to optimize DREAMS service uptake in Gwanda District, January - June 2022	NAC/BRTI/U Z 3rd HIV and AIDS Research Symposium	Yet to get feedback
Importance of private sector linkages in promoting growth and sustaining viable businesses for vulnerable adolescent girls and young women through mentorship and coaching: Lessons from Empowered Girls Rock Summit.	NAC/BRTI/U Z 3rd HIV and AIDS Research Symposium	Yet to get feedback
Economic empowerment to reduce risk of acquiring HIV among adolescent girls and young women enrolled in the DREAMS	NAC/BRTI/U Z 3rd HIV and AIDS	Yet to get feedback

program: Lessons from Matobo district in	Research	
Zimbabwe	Symposium	

A manuscript on assessment of completion of primary package sessions by adolescent girls and young women under the DREAMS program before and during the COVID-19 period in selected districts of Zimbabwe, 2019 to 2021 was developed and submitted to British Medical Journal (BMJ) and is under review.

IV. CROSS – CUTTING ISSUES

Environmental Monitoring and Mitigation

During the period under review, the program sought to actively promote environmental management and protection by infusing environmental management and protection information and nuggets in its activities. The program monitored the DREAMS beneficiaries' interaction with the environment such as whether they considered use of re-renewable or non-renewable materials during ES activities and disposal of face masks, diapers, condoms, and wastepaper among other issues. Following the monitoring and through social asset building clubs and ES activities, the program actively promoted the sustainable use of natural resources and protection of key ecosystems. In addition, the program beneficiaries, community cadres and staff members participated in national events such as the clean-up campaign which is held every first Friday of the month. The program considers the subject of environmental management and mitigation and its integration in DREAMS a major factor that needs to be strengthened to promote sustainable interventions.

Gender and Social Inclusion

Gender equality and social inclusion (GESI) is strategic for the RISE program and has been embraced to address the gender dynamics at all levels of the socioecological model in DREAMS communities to reduce HIV risk of AGYW. During the reporting period, key deliverables included training of program staff on GESI to enhance their capacities in integrating GESI across all interventions. A total of 80 staff were trained on GESI in FY22. The program also conducted GESI analysis in FY22. This involved development of data collection tools and protocols, training GESI package, training of enumerators, data collection, data analysis, validation of findings, and report writing. The GESI assessment was conducted across four districts (i.e., Mazowe, Gweru, Mangwe and Insiza). The outcome of GESI findings showed a lot of inequalities embedded in patriarchal, cultural, and religious values, beliefs and practices manifesting across all spheres of life. For example, household decision-making, access to and control over assets, gender roles and responsibilities, participation in public decision-making, access and utilization of services are still male dominated.

The findings will inform the GESI strategy and work plan that will guide operationalization of the strategy to ensure the program employs gender-transformative approaches across the program elements, strengthening gender sensitive indicators and monitoring the context to respond to emerging gender issues. Key priorities for FY23 will be centered on strengthening project staff and implementing partners' capacities on gender-transformative and disability-inclusive programming, engaging community traditional leaders as agents of change and gender champions for norm changes and positive behavior practice, and facilitating platforms for meaningful participation of AGYW.

Project Innovation

The DREAMS RISE program developed and implemented the following innovations in FY22 to improve efficiency and optimize service delivery to beneficiaries:

• Empowered Girls Rock Summit: In scaling up and closing the business mentorship and coaching gap for AGYW, the RISE program partnered with Old Mutual Eight to Five Hub and co-created an innovative Empowered Girls Rock Summit - the first of its kind. The EGRS exposed 45 AGYW to real learning and practical experiences through entrepreneurship coaching and job shadowing.

- Use of Business Intelligence Solutions, the SIE unit transitioned quality assurance tools and routine support checklist from paper to cloud-based systems with real time monitoring functionality (field verification checklist, instructor development visit checklist, data entry and cleaning trackers, and session completion tracker which informs community cadres as to when beneficiaries will be due for session completion). The program also adopted and rolled out My Savings Companion (MSC) Management Information System that is contributing towards effective tracking of ISAL group performance.
- Collaboration with non-DREAMS partners: In Bulilima district, the program collaborated with non-DREAMS/USAID partners such as Oxfam who are involved in food distribution and used the food distribution platforms to reach out to AGYW for screening, enrolment, and service provision. The district recorded an improvement on the NOT_GEND_GBV indicator from 19% in December 2021 to 47% in March 2022 and surpassed the annual target by 3%.
- Communication and information dissemination: The project various departments and districts came up with newsletters and bulletins that were used to disseminate information. These newsletters and bulletins were aimed at increasing program visibility, strengthening staff and stakeholder capacity building, and sharing general program guidance. Outstanding examples are the Mazowe District Newsletter, Human Resources Newsletter, Information Technology Bulletin and Knowledge Management Bulletin. Other Social media platforms were effectively utilized such as the ZHI website and Facebook page as well as the organizational Linked-In account.
- **DREAMS-RISE Brown Bag,** a platform to share information, innovations and best practices was created with an inception meeting which strengthened teamwork, learning and motivation to document amongst program staff. This yielded results in the form of abstracts that were accepted at various fora as well as the bulk of presentations done during the ZHI RISE program Launch.

Child Safeguarding and Protection

The DREAMS RISE program strategy on safeguarding strategy in FY22 focused on four key areas namely 1) policy review, capacity building, accountability, and coordination. The safeguarding policies and clauses were reviewed to ensure continued relevance and effective guidance in ensuring the safety of program activities. Standard operating procedures (SOPs) were developed for the Keeping Children Safe (KCS) approved child and young people safeguarding policy, which is the main policy for protecting beneficiaries in the program. The program also trained staff (both at the national and district levels), board members, community cadres, AGYW, and some private sector companies who were taking AGYW on board for internship and job placement on safeguarding (Figure 31). New banners and posters on safeguarding were also developed as part of information education and communication (IEC) materials to facilitate conversations around protection issues with the community and AGYW.



Figure 31: Safeguarding Trainings Conducted in FY 22

Consultations with district staff were facilitated to find out the contextually relevant Community Based Response Mechanisms (CBRM) to increase accountability. As a result, an internal reporting line offering a calling, WhatsApp and SMS platform was introduced in addition to the suggestion boxes and the tip-off anonymous reporting system. Additionally, the program identified safeguarding champions at the district levels and introduced an email platform speakup@zhi.co.zw as a way of increasing awareness of all the reporting mechanisms. The program's safeguarding technical lead actively and regularly participated in the child protection working group and the Protection, Sexual Exploitation and Abuse (PSEA) network which have proven to be critical platforms in knowledge sharing for improving program implementation.

V. PROGRAM MANAGEMENT

TWG Meetings

The program participated in various TWGs during the implementation period and below are some of the plat-forms DREAMS-RISE was involved in:

- Routine SIE TWGs hosted by PSH on behalf of USAID to discuss data related issues.
- Routine meetings at district level as POC
- National HIV Prevention Partnership Forum hosted by MOHCC which brings together all
 partners implementing HIV programs in Zimbabwe to update and receive national strategic
 direction.
- National Technical working group for young people, HIV and AIDS hosted by National AIDS Council and MOPSE as a platform for partners implementing young people programs.
- ZHI is one of the Zimbabwe Champions on HIV Prevention Self-Assessment team responsible
 for assessing and monitoring HIV prevention programs for young people in Zimbabwe with
 support from the South-to-South Learning Network.
- Economic Strengthening Technical Working group (ES TWG) which was led by CRS to support DREAMS IPs in the design and standardization of the DREAMS ES curriculum and completion benchmarks as well as validating the ZEMOA findings.

USAID Coordination Meetings

In FY22, the program participated in USAID organized meetings and activities as follows:

- Routine bi-weekly AOR organized meetings to provide update to USAID against the triple constraints.
- USAID visits Matabeleland South and Bulawayo to provide a platform for USAID representatives including PEPFAR and National AIDS Council to interact with the program.
- Hosted the CDA in partnership with OVC partners and other DREAMS implementing partners.
- DREAMS Mentorship stakeholder meeting to discuss the proposed mentorship curriculum currently under development.
- DREAMS all partner monthly meeting to discuss progress performance and receive guidance from USAID and key line ministries.
- Support visits from the DREAMS Coordinators from NAC and MOHCC to provide them with programmatic related updates and any challenges that require their intervention.
- USAID organized webinars to strengthen the capacity and knowledge base of staff on pertinent developmental issues that can improve the DREAMS-RISE project implementation
- ASAP-PEPFAR Expenditure Reporting Meetings

Financial Management

USAID obligated US\$ 10,727,188 towards implementation of the of the DREAMS RISE program in FY22. The DREAMS RISE program leadership conducted monthly budget versus actual (BVA) review meetings to review monthly expenditures against planned activities as a way of ensuring effective management of the obligated funds. In addition, the program team worked closely with the finance team to ensure that activity funds requests were in line with approved budgets. Further, the

program I) prepared monthly bank reconciliation reports that were submitted to USAID; and 2) developed and submitted monthly funds liquidation reports to USAID. As a result, there were no cases of over-expenditure witnessed in FY22. The financial year closed with a 99.6% burn rate, with the actual expenditure recorded at US\$10,710,753 against an obligated amount of \$10,685,654 (Figure 32).

RISE FY22 Obligation Analysis Projected Number of Months Remaining Pipeline as at end of September 2022 \$0.01 \$10,727,188 \$10,685,654 \$41,534 \$1,183,662 Total Obligation for FY22 Actual Expenditures to September 2022

Figure 32: DREAMS RISE FY22 Actual Expenditures Versus Obligated Funds

The program witnessed a steady increase in expenditure over the quarters with Q1 witnessing the lowest expenditure (Figure 33) which was largely due to slow program implementation coupled with program start-up activities (i.e., start recruitment and onboarding). As activities picked up in the subsequent periods, there was a corresponding steady increase in expenditure from Q2 through to Q4. The fourth quarter has witnessed a further expenditure increase which was mainly attributed to 1) vehicles which were procured in Q2 and were delivered and paid for in Q4; and 2) activities increased significantly in Q4 following ethical approval for GESI assessment and youth led LMA activities paving way for implementation of these activities.

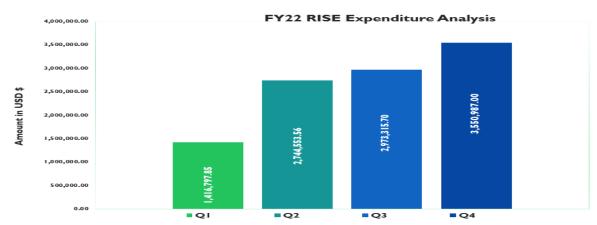


Figure 33: DREAMS RISE FY22 Expenditure Analysis per Quarter

USAID conducted a financial review in July 2022 to assess the progress on pre-award conditions and general financial controls. The USAID team was pleased with the ZHI internal control systems and financial management capacity. ZHI is currently finalizing the institutional audit. There were no major audit findings at the time of submitting this report.

Sub-Award Management

As the prime recipient of the DREAMS RISE award, ZHI worked with and through partner organizations in FY22 to effectively implement and achieve the deliverables under the DREAMS program as outlined in the cooperative agreement. The partners were at two levels, namely consortium partners and resource partners. There were five resource partners that were largely local implementing organizations who were directly implementing specific components of the program for a specified period, and three consortium partners who provided both technical assistance (TA) and direct service delivery. ZHI used sub-award agreements to provide resources to these organizations and held them accountable for the achievement of deliverables. Prior to issuing the sub-award agreements, ZHI conducted pre-award assessments to assess the financial, management, and technical capacities of the partners to manage USG funds and implement various interventions. This was followed by a prior approval request that was sought and received from USAID before these partners were issued with sub-awards. Thereafter, partners were issued with fully executed sub-agreements, and resources/funds to implement the program. As part of its continuous TA support to the local partners, ZHI conducted routine finance, program and compliance visits to these organizations which were aimed at: I) monitoring implementation of special award conditions; 2) strengthening the financial, technical and management systems of the partners to deliver program results; and 3) monitoring compliance to USAID and partner internal systems rule and regulations. ZHI adopted a three-pronged approach in its sub-award process under the RISE program: I) provide funds for activity implementation; 2) provide TA to local partner organizations to offer quality services; and 3) monitor implementation of special award conditions to address weaknesses and areas of risk identified during the pre-award assessment. Table 7 lists the sub-agreements that ZHI issued to her partners in FY22.

Table 7: List of DREAMS RISE Program Sub-Awardees in FY 22

Name of sub- awardee	Performance Period	Funding Mechanism	Total Award Amount	Geographical Coverage
FHI 360	Ist November 2021 to 30 th September 2023	Standard Grant	US\$ 900,000	Beitbridge, Bulawayo, Bulilima, Gwanda, Gweru, Insiza, Mangwe, Matobo, and Mazowe districts
Family Support Trust (FST)	12 th October2021 to 30 th September 2022	Standard Grant	US\$ 100,000	Bulilima, Mangwe, Beitbridge, Gwanda districts
Umzingwane AIDS Network (UAN)	12 th October 2021 to 30 th September 2022	Standard Grant	US\$ 122,587	Bulilima, Mangwe, Beitbridge, Gwanda districts
Bekezela Home Based Care Group	23 rd March 2022 to 30 th September 2022	Fixed Amount Award	US\$ 25,000	Bulawayo district
Midlands AIDS Service Organization	23 rd March 2022 to 30 th September 2022	Fixed Amount Award	US\$ 25,000	Gweru district
Clowns Without Boarders South Africa (CWBSA)	Ist April 2022 to 30th September 2022	Fixed Amount Award	US\$ 25,000	Beitbridge, Bulilima, Gwanda, Mangwe districts

Zimbabwe	23 rd March 2022	Fixed Amount	US\$ 25,000	Bulawayo district
Network for	to 30 th	Award		
Disability HIV	September 2022			
and AIDS				
Organization				
(ZIMNEDHAO				
Forum for	23 rd March 2022	Fixed Amount	US\$ 25,000	Beitbridge and
African Women	to 30 th	Award		Matobo districts
Educators	September 2022			
Zimbabwe	-			
(FAWEZI)				

Personnel Management

The DREAMS RISE program recruited all the Key Personnel (Chief of Party, Deputy Chief of Party, Technical Director, Finance and Operations Director and M&E Advisor) within the first year of implementation, with zero percent attrition rate experienced at the end of FY22. This assured stability in the program leadership and provision of both technical and management support to the whole program. In addition, the program also managed to recruit all the technical leads and program staff at the district and the regional levels within the first year, that facilitated timely implementation of program activities and achievement of results thereof. Unlike the Key Personnel positions, the program experienced some minimal staff attrition (less than 5%) at the district level which were quickly replaced to avoid interruptions in service delivery. All program staff were fully oriented on the new DREAMS RISE program with a special focus on the program scope, technical approaches, award management, and award terms and conditions.

Progress on ZHI Organizational Development

In FY22, ZHI made tremendous progress in relation to its organization development (OD) interventions. Some of the notable progress made in FY22 relate to implementation of the RISE program special award conditions such as: I) working with FHI 360 to support its OD activities; 2) establishment of various board of management sub-committees to facilitate implementation of OD activities to strengthen the organization's internal systems and structures; 3) timely development and review of monthly bank reconciliations; and 4) establishment of a Resource Mobilization and Stakeholder Engagement department headed by a director to support ZHI's resource mobilization efforts, facilitate organization's funding diversification, and strengthen stakeholder engagements.

VI. PROGRESS ON LINKAGE WITH OTHER USG AGENCIES/PROGRAMS

During the first year of implementation (FY22), DREAMS RISE program made deliberate efforts to strengthen linkages with the following USG funded projects to facilitate service layering for beneficiaries.

- Accelerated and Comprehensive HIV Care for Epidemic Control in Zimbabwe
 (ACCE) Project: The DREAMS RISE program worked closely with the ACCE project,
 especially in Gweru district where ACCE is the prime USAID project responsible for
 provision clinical-based HIV care and treatment services. The AGYW were appropriately
 referred for facility-based HIV care and treatment services, including cervical cancer
 screening services and PrEP.
- Catholic Relief Services (CRS): The program worked with USAID/CRS funded Pathways
 project to facilitate service layering and referrals for economic strengthening and positive
 parenting interventions for AGYW caregivers/parents in Insiza, Matobo, Mazowe, Gweru,
 and Bulawayo districts. In addition, the program worked closely with CRS in the Economic
 Strengthening pilot study in Insiza district which was aimed at addressing gaps identified
 during the ZEMOA.
- Centre for Sexual Health and HIV AIDS Research Zimbabwe (CeSHHAR):

 DREAMS RISE program worked closely with CeSHHAR to facilitate transitioning of young

- women selling sex (YWSS) who were hitherto under ZHI at the start of the RISE program as well as refer AGYW with multiple sex partners for appropriate services delivery in CeSHHAR.
- **FACT**: The program transitioned the hitherto DREAMS program activities in Manicaland province to FACT to facilitate no or less disruption in service delivery.
- MUSASA Project: The DREAMS RISE program collaborated with MUSASA project to
 provide psychosocial support services to GBV survivors, including shelter protection and
 appropriate legal support services.
- Organization for Public Health Interventions and Development (OPHID): The DREAMS RISE program strengthened linkages and collaboration efforts with OPHID in non-ACCE project districts to facilitate access and provision of facility-based services to the AGYW in most districts within Matabeleland South region.
- **Population Health Solutions (PSH)** continued to provide reproductive health (RH)/ family planning (FP) commodities and services to the AGYW.

VII. PROGRESS ON LINKAGE WITH GOZ AGENCIES

In FY22, the DREAMS RISE program worked closely with the following GOZ line ministries, departments, and agencies to improve service delivery to the program beneficiaries.

- The Ministry of Primary and Secondary Education (MOPSE) The MOPSE officials at the district level supported the process of identification, mobilization, and re-enrollment of AGYW who hitherto dropped out of school by providing the requisite information on learners who dropped out of school, thus enabling the club facilitators to line-list AGYW who are interested in going back to school and linked them up with their local schools for registration. The MOPSE through the Guidance and Counselling teachers supported the reinforcement of HIV and Sexual Violence Prevention sessions in schools including setting up of the 24-hour GBV rooms in schools.
- The Ministry of Women Affairs, Community Small and Medium Enterprises Development (MOWACSMED) this ministry provided facilitators who trained the ISAL community-based trainers (CBT) for the RISE program across the implementation districts in FY22.
- Ministry of Youth, Sports, Arts and Recreation (MOYSAR) The MOYSAR played a significant role in providing facilitators who were instrumental during the ISAL CBT training sessions that were carried out across the implementation districts.
- Ministry of Health and Child Care (MOHCC): the MOHCC staff at the district level were instrumental in facilitating SRH training for community cadres such as OOCSFs, as well as sensitizing the community cadres and AGYW on COVID-19 protocols.
- The **National AIDS Council (NAC):** NAC played a significant role in coordinating key stakeholders to participate in joint work planning process, and quarterly POC meetings across all the nine implementation districts. They were also very central in coordinating all the DREAMS IPs during the USAID/PEPFAR support visits in the districts.
- The **Department of Social Development (DSD):** The DREAMS RISE program collaborated with the department of social development (DSD) to create awareness of sexual and gender-based violence during the 16 Days of Activism Against Gender-Based Violence, as well as identify survivors of GBV and refer them for appropriate services.
- Ministry of Home Affairs and Ministry of Local Government: The program worked closely with these two ministries in Mazowe district to facilitate issuance of birth certificates to 16 vulnerable AGYW who hitherto lacked this vital document.

VIII. LESSONS LEARNT

The following are some of the lessons learnt during the FY22 program implementation period.

• Synergies between community cadres in yielding results: Community school program, Sinovuyo facilitators and community-based trainers worked together in mobilizations,

- screening, and enrolment as well as session delivery which has yielded positive results during the reporting period.
- Use of visual learning aids during sessions: It was realized that caregivers and teens understand concepts better using visual learning aids during Sinovuyo sessions. Therefore, there is need to provide visual learning aides such as the house of support and illustrations as per the PEPFAR manual. Also utilizing the collaborative learning approach assists in engaging both caregivers and teens when delivering the Sinovuyo Curriculum.
- Village-based model yielded results: Village-based approaches for selection and appointment of community volunteers proved to bring better results on SRHR services than the ward-based approach. Community volunteers in a village know the beneficiaries and cover less distance as compared to ward-based approach.
- Use of locally available resources improved ISAL savings and contributions: AGYW who were using locally available resources like *amacimb*i (mopane worms), grass for thatching and *amarula* fruits managed to contribute monthly on their ISAL savings. These products were then sold, and group savings improved.

IX. CHALLENGES AND SUGGESTED SOLUTION

Table 8 summarizes challenges experienced during the FY22 implementation period and suggested solutions.

Table 8: Challenges Experienced in FY 22 and Suggested Solutions

Constraints	Suggested solution
Lack of coordination with clinical partners during screening and enrolling process resulting to non-closure or delays in closing some referrals for enrolment.	To strengthen coordination and engage the clinical partner to offer SRH service provision. The program will continue working with NAC to ensure smooth coordination across all partners in the program. Strengthen the STOP THE BUS initiative where all partners will provide one stop shop clinical and non-clinical services.
AGYWS travelling long distances within the ward to receive services- enrolment and sessions	Conducting village-based mobilizations and establishing SABCs within all operational villages as opposed to the ward-based approach.
Low retention in SABC due to high mobility- some AGYW do not complete sessions.	Review the time frame for provision of the primary pack so that the primary package is completed at the shortest period and continuous engagement of AGYW through virtual platforms (WhatsApp) to reinforce massages and linking AGYWS to secondary services. The program should continue providing additional edutainment activities in social asset building clubs to keep AGYWs engaged and attract them to stay in clubs.
Low risk perception and understanding of GBV among community members which leads to late or non-reporting of GBV cases.	Community sensitizations and awareness campaigns on GBV issues should continue to utilize 72hr GBV desks, promote use of mukuru boxes and GBV rooms within schools.
Session completion delayed by livelihoods activities in the community	To frontload targets between seasonal livelihoods activities for example to move session progression before the rain season and before winter where communities start cutting thatching grass for selling. Plan well with communities and agree on feasible timeframes for program activities to promote meaningful participation from AGYW.
Lack of local infrastructure as safe spaces for survivors of GBV	Engage relevant stakeholders to plan on setting up a shelter within the district.

X. PRIORITY FOR THE SUBSEQUENT QUARTER

Table 9 summarizes planned activities for the first quarter of FY 23

Table 9: Planned Activities for October - December 2022

Planned Activities for the reporting Period (July – September 2022)	Action Status for Reporting Quarter	Explanation for Deviation	Planned Activities for subsequent Quarter (October – December 2022)
Submit protocol for GESI ethics review, data collection, data analysis and report writing	Done	None	Procurement of five additional project vehicles
GESI Data collection, analysis, report writing and dissemination of findings	Done	Report review and finalization	Community cadre trainings: CSP Facilitators, OOSCFs, Sinovuyo Facilitators, IMSafer instructors CBT Facilitators for ISAL
LMA analysis, validation, and dissemination of findings	Done	None	Roll out of the IMSafer Boys curriculum
Vocational Training for AGYW	Done	None	Expand Education support, parenting and GBV intervention into 5 DREAMS Districts
DREAMS-RISE Annual Planning Meeting	Done	None	Roll out PrEP for parents in all nine districts
Sentinel site survey	Protocol approved by MRCZ; training of trainers conducted	Delays in approval by MRCZ	Data collection, analysis, report writing and dissemination of findings
Development of COP22 Workplan and Budget	Done	None	Development of sub- award agreements for three new sub- awardees for FY23
Procurement of two additional vehicles	In progress	Delays in delivery of procurement from the vendor. Delivery expected in November 2022	Modification of existing sub-agreements to provide funds for partners to implement FY23 activities.

ANNEX I: SUCCESS STORY

Teen Mother Enrolled Back to School



"I thought my dream to attain basic education had been shuttered until ZHI DREAMS program came to my rescue!" Rutendo (not her real name: I 5 years old) from Jaji village in Chiweshe fell pregnant in Grade 7 whilst completing her primary education at Chinehasha Primary School in 2020. She, however, managed to sit for her final examinations and was later referred to Musasa by a Village Health Worker and Catholic Relief Services (CRS) cadre where she received psychosocial support until she safely delivered her beautiful bouncing baby girl.

Rutendo lives with her single mother, who found it difficult to raise funding for her educational support. She was enrolled into the DREAMS program in 2021 and was referred to CRS for educational support. Currently, Rutendo is a form 2 teen mother at Chinehasha Secondary School. She is also attending the DREAMS out

of school social asset building club sessions on HIV and GBV prevention, and basic financial literacy from Winfildah Chigogo (Out of School Club Facilitator) in Mazowe. The DREAMS club provided a safe space for her to share her life changing story at the same time acquiring peer counseling from her DREAMS facilitator. The education she gets from the club is helping her to set life goals. She is determined to continue pursuing her education and become a teacher one day.

"I would like to thank ZHI DREAMS program for giving me a second chance and I am also looking forward to a better and brighter future with my child. Looking at my situation and background, going back to school was the last thing I would think of, but this program made it possible, and I am grateful," says Rutendo.

ACCE and RISE coordination PrEP the key to HIV prevention



Ireen Makamure aged 18 is one of the AGYW who resides at Gamepark which is 40km away from Gweru town. She joined the DREAMS club in October 2021. Gamepark area is well known for artisanal mining. Like most communal residents in villages, life is spent under the capture of poverty and other misfortunes, and Ireen who was married at 16 was not an exception. Ireen had her first baby in 2019 and her husband was well known for cheating on her with other women when he was at the mines. The husband got tested for HIV and found out that he was HIV positive. He was initiated on ART without the knowledge of his wife, Ireen. After a year and half the wife came across a bottle of ARVs in her husband's bag and asked him what it was. The husband tried

to lie but Ireen kept interrogating him until he disclosed his HIV status which was quite devastating and hard to accept. She then learned that he had not been adhering to his medication due to the fear of being caught and getting divorced.

After the discovery of her husband's HIV status, Ireen was bold enough to go for HIV testing, which came out with a negative result, both for the initial test and the retest. As advised by the community nurses, Ireen started using condoms, but this development was unacceptable to her husband, who sometimes rejected the use of condoms. During her engagement with the DREAMS program in 2021, Ireen was immediately equipped with HIV prevention information, and her interest was on HIV prevention methods, where PrEP was emphasized, and she embraced it in January 2022. The closest facility had no PrEP initiations and through her club facilitator, Eustina she was linked to ZHI- ACCE program and was initiated on PrEP. Ireen began to encourage her husband to adhere to his ART medication to ensure viral load suppression. PrEP became the solution to her anxieties about her future and that of her children. The collaboration between DREAMS-RISE and ACCE has impacted the day-to-day integrated HIV services among AGYW.

ANNEX 2: KNOWLEDGE MANAGEMENT PRODUCTS

Research and abstracts

I. Using a continuous quality improvement approach to optimize DREAMS service uptake in Gwanda district, January - June 2022.

Background: Continuous Quality Improvement (CQI) initiatives have become a staple for resolving gaps in HIV epidemic control initiatives across the globe. Gwanda district failed to meet expected performance benchmarks for several key performance indicators in quarter I of FY22. National and regional technical teams set out to capacitate the district to design and implement innovations to optimize and sustain performance and surpass the 50% & 75% benchmarks for Q2 and Q3 respectively. **Methods:** Gwanda district developed a consolidated performance optimization plan aimed at enforcing implementation fidelity. The district had two accelerated program implementation phases i.e., February to April 2022 and May-July 2022. Phase I focused on (a) building team cohesion and agency through redefining goals and on-job mentorship, (b) development and implementation of performance optimization plan, (c) re-engagement of all stakeholders to maximize buy-in and ownership. Phase 2 focused on (a) review of implementation fidelity through performance optimization sessions, (b) accelerated session completion of DREAMS primary and secondary packages.

Results: Baseline (November 2021-January 2022) performance for the primary services competition was 21% (837/3991) and 19% (1210/7003) for 10-14- and 15–24-year-old AGYW respectively against 25% benchmark for this period. For phase I, the district recorded 26% (1026/3991) and 37% (2463/7003) while phase 2 recorded 76% (3051/3991) and 67% (4575/7003) for 10-14- and 15–24-year-old AGYW respectively. For secondary services, economic strengthening (ES) for AGYW aged 15-24 years recorded 22%, 44% and 81% during baseline, phase I and phase 2 respectively. Education subsidies for 10–24-year-old AGYW recorded 19%, 92%, and 107%, and parenting interventions (Sinovuyo 10-14-year-olds) recorded 8%, 35%, 70% respectively. Overall, there was significant improvement in service uptake during the 2 CQI phases.

Conclusion: CQI initiatives significantly improved DREAMS program performance in Gwanda district across all service areas. We recommend scale-up of this approach to all RISE districts

2. Importance of private sector linkages in promoting growth and sustaining viable businesses for vulnerable adolescent girls and young women through mentorship and coaching: Lessons from the Empowered Girls Rock Summit

Background: ZHI is implementing economic strengthening interventions under the DREAMS-RISE program which promote socio-economic empowerment, healthy behavior choices and informed decisions that are critical for reduction of new HIV infections among AGYW. The prevailing harsh economic conditions characterized by unemployment, minimal operations in industries, and increasing informal sector impacts negatively on programs that promote socio-economic empowerment. There are limited opportunities for AGYW enrolled in DREAMS to get coaching and mentorship from captains of industry and established business personnel.

Description: ZHI organized an innovative four-day Empowered Girls Rock Summit (EGRS) with Eight2Five Hub to link AGYW under the DREAMS program with the private sector thereby closing the gap on limited business and career coaching and mentorship. Linkage of AGYW with private sector promotes growth of viable and sustainable businesses among AGYW. A total of 45 AGYW were selected from the nine DREAMS districts to participate in the EGRS Summit where established entrepreneurs and corporates mentored AGYW in their career and entrepreneurial path they wish to pursue.

Lessons Learnt: AGYW were exposed to real learning/practical experiences and were inspired to scale up and/or diversify their businesses. There were increased opportunities, knowledge and skills transfer during job shadowing. The summit promoted business formalization through company registration, branding of products and securing of new contracts. There was enhancement of financial inclusion through opening of bank accounts.

Conclusion: Linkage of AGYW micro-enterprises to established entrepreneurs and corporates within the private sector is critical in promoting and sustaining growth of businesses. We recommend that the EGRS be an annual event adopting the private sector value proposition which confirms the capacity of AGYW to excel when given exposure.

3. Unpacking gender equality and social inclusion across dreams districts; evidence for informed implementation strategy development, 2022.

Background: ZHI and partners are implementing the Determined, Resilient, Empowered, AIDS-Free, Mentored and Safe (DREAMS) program to reduce HIV infections among adolescent girls and young women (AGYW). The project conducted a Gender Equality and Social Inclusion (GESI) analysis to understand the gender dynamics, social norms, and power relations related to HIV and gender-based violence (GBV) risk and access to services. The analysis will inform the design of implementation strategies.

Methods: This was a qualitative cross-sectional study conducted in July and August 2022 in Mazowe, Gweru, Insiza and Mangwe districts. Study participants included AGYW, adolescent boys and young men (ABYM), community and religious leaders, parents, and caregivers, and key informants from implementing partners and government ministries. Qualitative data were collected using in-depth interview guide, key informant interview guide and focus group discussion (FGD) guide. FGDs were audio recorded, and transcription and translation were conducted. Thematic content analysis was used to analyze data using NVIVO software. The assessment received ethical approval from Medical Research Council of Zimbabwe (MRCZ/A/2931).

Results: Inequalities exist across roles, responsibilities and power relations affecting women and girls disproportionately. This influences mobility, decision-making in households and public spaces, and participation in productive activities. Increased rates of child marriages, artisanal mining, migration and drug and alcohol use were HIV risk factors and challenges affecting AGYW. Parental communication and support were suboptimal, and there was low uptake and appreciation of HIV pre-exposure prophylaxis (PrEP) by AGYW. Harmful social norms exist on gender roles and power relations, access to and control over productive assets, decision-making, and participation in positions of influence. These perpetuate inequalities and discriminatory practices and hence, community engagement involving diverse groups is key for social norms change critical for disruption of HIV causal pathways for AGYW.

Conclusion: Gender inequalities and harmful social norms exist on gender roles and power relations, access to and control over productive assets, decision-making, and participation in positions of influence. We recommend use of the GESI analysis findings in the development and implementation of strategies that disrupt HIV causal pathways for AGYW.

4. Labor Market Assessment (LMA): Unpacking opportunities for DREAMS beneficiaries in ever-changing contexts.

Background: Major factors which contribute to increased susceptibility of adolescent girls and young women (AGYW) to HIV infections include lack of education, economic dependence, high rates of unemployment and underemployment, as these can lead to high-risk behaviors and early marriages. Economic strengthening and linkages to wage employment and income-generating activities for AGYW is key in disrupting HIV causal pathways. We conducted a labor market assessment (LMA) to identify sectors and entry points occupation that will grow and create opportunities for AGYW across DREAMS districts.

Methods: LMA was conducted in nine DREAMS districts to understand sectors and entry points occupation with potential to grow and create opportunities for AGWY. Study participants were purposively selected and consisted of district economists, government stakeholders, NGOs, training institutions and employers. Data were collected using key informant interview guide in English, Shona, or Ndebele, audio recorded and transcribed in English. Line-by-line coding was conducted, and content analysis and constant comparison were used to identify key themes for each respondent type.

Results: Retailing was a common sector selected as the growth sector for both rural and urban opportunity for AGYW. The sector was reportedly adaptable to prevailing operating conditions. Common sectors for urban areas were on the service side including catering, tailoring, construction, welding, and carpentry and for rural areas were agro-based including poultry, crop production and agro-processing. Opportunities and entry points for AGYW per value chain differed within districts depending on whether they are formal or informal businesses. There was limited engagement between the private sector and training institutions resulting in mismatch of expectations of the private sector and graduates released into the market.

Conclusions: There is strong indication that as domestic and global economic trends change, there will be change in the potential of different economic sectors in Zimbabwe, with sectors previously seen as challenging, or problematic becoming viable for employment or self-employment. We recommend economic strengthening pathways which create employment instead of training job seekers.