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## In incentive funding request, Zimbabwe prioritizes young people

New funding model early applicant Zimbabwe submitted a \$40.2 million request for incentive funding on 18 May, seeking additional financial support for interventions that specifically target people under age 24: the fastest growing demographic group in sub-Saharan Africa for new HIV infections.

Zimbabwe will receive some \$437.2 million from the Global Fund through 2016 for its HIV response; this incentive funding request — which is not guaranteed — will supplement that sum. A concept note submitted in April 2013 for the total \$311.2 million also included a request for additional support with \$274.4 million that was not fulfilled. Grant implementation began in January 2014, and continued throughout the year with interventions focusing on treatment monitoring, prevention of vertical transmission and recruitment and retention of health workers. An additional \$126.1 million was awarded to Zimbabwe in 2015, after the Global Fund's country allocation methodology was updated. This top-up went towards expanding existing Global Fund-supported interventions, especially HIV testing and counseling and storage capacity for medicines at facility level.

The additional incentive funding request is arranged along four strategic areas. Table 1 shows the financial breakdown of the additional request.

Table 1: Overview of Zimbabwe's HIV Incentive Funding Request

Strategic Area	Amount Requested
Laboratory and Pharmaceuticals	\$19.5 million
Youth and Adolescents	\$10.0 million
Community and Key Populations	\$2.9 million

Monitoring and Evaluation	\$4.2 million
Grant Management	\$3.6 million
TOTAL	\$40.2 million

The additional money for laboratory and pharmaceuticals would specifically work to improve pediatric HIV diagnosis and care. In Zimbabwe, treatment coverage is much lower among children (46.1%) than it is among adults (76.9%), according to the country's [2014 Global AIDS Response Progress Report](#).

The second strategic area is youth and adolescents, which includes activities such as girls' mentoring clubs, based on the UNFPA's Sista2Sista program, and peer counselors, based on the success of the [Zvandiri Model](#). Recent evidence from Zimbabwe ([Mavhu et al.](#); [Dunbar et al.](#)) suggests that interventions that incorporate gender-focused HIV education, guidance counselling and integrated psychosocial support can reduce risky transactional sex, increase condom use, and improve treatment adherence among young people.

"The youth programs that ended up being part of the incentive funding proposal are programs that have already been rolled out, and have been documented to be impactful," said Definate Nhamo, an advocacy and evaluation specialist for adolescent sexual and reproductive health at Pangaia Global AIDS.

The third strategic area is community and key populations, with core activities such as community ART refill groups. These groups develop a rotating schedule for members to travel to facilities to collect prescriptions, a way to ensure adherence to the drug regimen and address some of the reasons people with HIV may default on treatment.

Activities envisioned in this area also include skills training for healthcare workers on how to respond to the particular needs of people with disabilities. A [national disability survey](#) revealed that people with disabilities are twice as likely to self-report having HIV compared to those without disabilities, and have lower levels of HIV knowledge.

The concept note also provides for an overarching emphasis on monitoring and evaluation. This area includes interventions to develop and launch a new HIV data warehouse, link community information systems with the HMIS, and conduct an in-depth assessment on adolescents.

With Zimbabwe's current Global Fund grant cycle ending in 2016, the development of the country's next HIV concept note is on the horizon for early next year. In light of this timeline, the CCM regards the incentive funding request as a forward-looking process. If priorities in the incentive funding concept note are not funded, they will likely be carried over into the next application.

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