

Daily E-Bulletin

Issue 2: (6 December 2023)

ICASA honours Dr Matsidiso Moeti

By Michael Gwarisa

The Society for AIDS in Africa (SAA) secretariat has awarded the World Health Organisation African Region (WHO-Afro) Director, Dr Matsidiso Moeti the prestigious SAA Excellency award.

The prize was handed to her during a plenary session at the ongoing International Conference for AIDS and Sexually Transmitted (STIs) in Africa (ICASA) conference running from December 4 to December 9 at the Harare International Conference Centre (HICC).

Presenting the award, SAA president, Dr David Parirenyatwa said it was in appreciation for her dedicated years of leadership and a symbol of her personal and professional achievements.

“This is an honour to a friend who has dedicated her time and efforts to improve health outcomes for the African region. From the days of Ebola, Zika Virus, the Cholera outbreaks and even the HIV and AIDS epidemic, she has stood with us,” said Dr Parirenyatwa.

Dr. Moeti is a distinguished clinician who has served in leadership positions for more than 35 years within WHO, UNAIDS, UNICEF and the Botswana Ministry of Health. She was appointed WHO-Afro Director on January 27, 2015, making her the first woman to hold that WHO Africa region directorship post.

In her acceptance speech following her award, Dr Moeti said the award was a reminder of how she is not only the Director for WHO in the region but also a symbol of her connection to the African continent.

“I would like to express my profound thanks to my Society for AIDS, brothers, leaders, and different generations of you. I recall being a program manager from Botswana attending a conference that had been organised by SAA and how that has evolved. I am very humbled, thank you for this recognition of a girl who grew up in one of the most unequal societies in the world, South Africa where I originated from and migrated



Dr Matsidiso Moeti receives her award from SAA president Dr David Parirenyatwa

to Botswana in 2006,” said Dr Moeti.

She said she has strong connections to countries in the region and she was glad to be conferred with the Excellency award in Harare, a city where she has lived and also where her kids spent some of their childhood.

“What I would like to say is that the HIV movement in Africa has been an example and we and you have a lit to teach other areas of health and development response on the continent so I have to commend you for that as well.

To date, Dr Moeti has been greatly recognised for her excellent service to humanity and has received accolades including membership of the United States National Academy of Medicine, an Honorary Fellowship of the Colleges of Medicine of South Africa (CMSA), an Honorary

Fellowship from London School of Hygiene & Tropical Medicine, an Honorary Doctorate of Science from the University of Health and Allied Sciences in Ghana and Honorary Causa Doctorate by Instituto de Higiene e Medicina Tropical, Universidade NOVA de Lisboa, Portugal.

Dr Moeti was named COVID-19 Heroine by Ellen Johnson Sirleaf Presidential Center for Women Development as well as featured among the Women of 2020 in the Financial Times. She also received Special Recognition for African Health Leadership on COVID-19 from Amref Health Africa as well as a Global Health Equity Award from the Africa-American Institute.

According to her bio on the WHO website, under her leadership, tremendous progress has been made. Wild poliovirus was kicked out of Africa in 2020 – this is the second disease to be eradicated from the

Region after smallpox 40 years ago. Investments in areas such as surveillance, training, innovation, community engagement and partnerships have improved the country’s capacities to prepare for and respond to health emergencies and outbreaks of diseases like COVID-19 and Ebola. More broadly, recognition of the need for strong and resilient health systems to manage external shocks, like health emergencies, is building. Most African countries are pursuing reforms to achieve Universal Health Coverage – to expand access to services with attention to equity and reaching the most vulnerable people.

Dr Moeti has worked with WHO for more than 20 years, and before this she worked with the Joint United Nations Programme on HIV/AIDS (UNAIDS) as Team Leader of the Africa and Middle East Desk in Geneva (1997–1999); with the United Nations Children’s Fund (UNICEF)

as Regional Health Advisor for East and Southern Africa; and with Botswana’s Ministry of Health as a clinician and public health specialist.

She is renowned for having led WHO’s “3 by 5” Initiative in Africa at the height of the HIV/AIDS epidemic, resulting in a significant increase in access to antiretroviral therapy among people living with HIV. This helped to shift HIV from a death sentence to a chronic illness in Africa.

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Times

NAC moves to bridge HIV services access gaps in persons with disabilities

“As the National AIDS Council, working with the Ministry of Health and Child Care, UNICEF and all partners, we are making sure that we address these gaps.”



By Michael Gwarisa

In the spirit of leaving no one and no place behind regarding access to comprehensive HIV services and care, the National AIDS Council (NAC), working with the Ministry of Health and other partners, are working on modalities to ensure persons with disabilities are prioritised in terms of access to key HIV services.

People with disabilities are at risk of HIV for many reasons and in most cases excluded from education, employment and healthcare. They are also vulnerable to sexual violence and abuse.

In an interview with HealthTimes at the ICASA conference underway in Harare, Dr Benard Madzima, the NAC Chief Executive Officer said they had made significant progress toward ensuring persons with disabilities are included in HIV care.

“The issue of people living with disabilities is an area that needs to be looked at. There are key gaps when you look at service delivery and provision of services. As the National AIDS Council, working with the Ministry of Health and Child Care, UNICEF and all partners, we are making sure that we address these gaps. Be it those who are visually impaired, those who are hard of hearing and those with physical disabilities, we feel that they have been left behind,” said Dr Madzima.

He added that they have started training primary councillors in sign language. During COVID-19, NAC also provided transparent masks that help persons with hard of hearing impairment to lip read which is key when dealing with sign language.

“We are also looking at providing

physical accessories like wheelchairs, we think there is a gap there and we are working with other partners as a part of social contracting. We are working with several organisations which work in that space. We want to applaud the Ministry of Health for launching the disability strategy and we will use that they get the services which they deserve.”

Zimbabwe launched the disability strategy in 2022 and the policy was developed with support from various stakeholders including the UN, seeks to address the marginalization and discrimination of Persons with Disabilities (PWDs), empower them to improve their quality of life and enable them to contribute towards the national development agenda.

Condoms galore at CONDOMIZE stand

By Michael Gwarisa

In a bid to promote safe sex, reduce HIV incidence and break the stigma around condoms, SAYWHAT’s CONDOMIZE campaign is riding on the ongoing ICASA conference to distribute free condoms and raise awareness of the benefits of safe sex.

Located in the community hall at the ICASA, the CONDOMIZE stand has become a hive of activity as young people from across genders, disabilities, and backgrounds are getting free condoms as well as demonstrations on the correct and consistent use of condoms.

The campaign kicked off in Epworth over the weekend ahead of the official ICASA commencement on Monday, December 2023.

Speaking to HealthTimes, Delight Murigo, master trainer for the CONDOMIZE Campaign said the campaign has been successful.

“The rationale behind this campaign is particularly to encourage young people to adopt responsible and safe healthy lifestyles. We have realised that HIV incidence is higher amongst young people and as a result, we target them with our interventions because we hope that by reaching out to them, we will reduce the HIV incidence within the country,” said Delight.

The CONDOMIZE Campaign was launched in November 2015 at the ICASA that was also held in Harare and the campaigns have been hosted since 2015 to date in different communities mainly targeting communities which are hotspots for HIV incidence. The campaign runs in partnership with the Ministry of Health and Child Care, the Zimbabwe National Family Planning Council, the United Nations Population Fund (UNFPA), SAYWHAT and other partners that program within the area of comprehensive

condom programs.

“As part of the CONDOMIZE campaign, we have what we call edutainment activities. These are activities where we don’t only provide information but we also do it in a fun and cool way. We have also what we call the Art area. We have realised that there is a lot of stigma that is associated with condoms. Even if you are to go to the shops, it’s not easy for you to access condoms because everyone will look at you with a discriminatory or stigmatising eye.”

The condomise campaign makes pieces of art to break the stigma associated with condoms and this includes condom dresses, condom earrings, condom crowns, and condom backpacks with the idea to make people feel comfortable with talking about condoms as one of the HIV prevention strategies.

Amongst the young people who visited the CONDOMIZE stand was Kelly Makura, a young woman living with a disability who was happy to have received her pack of condoms and a demonstration on how to use condoms correctly.

“I am a person with a disability and I have come to ICASA we are learning a lot about condoms and we have learned how to use condoms and how it is important for a person with a disability to protect during sex. It is simply because there are two things you are protecting that is HIV, STIs and pregnancy,” said Kelly. ENDS

African governments urged to provide sustainable funding for GBV fight

By Kuda Pembere

With donor fatigue looming, African governments should provide enough allocations towards tackling gender-based violence (GBV) in their countries, a Kenyan sexual reproductive health rights advocate said.

This was said by Ms Judie Amina during a HIVOS ICASA side event titled Redefining the Feminist Agenda: Co-creating Solutions to Ending Violence Against Women and Girls (EVAWG) in East and Southern Africa. Ms Amina said African governments should adequately fund programs to fight GBV issues in a manner that makes them sustainable.

“At the same time, there is quiet reliance on donors in funding. This means an opportunity to look at local funding and investments in ending violence against women and girls. “It doesn’t mean we don’t need support from donors, we still need that investment in ending violence against women and girls but in the country, we need budgets that are allocated for this.

“And not small budgets to show well...this country has 5 percent allocated, we need budget that is enough to be allocated to support this work. And budgets that are sustainable and not just end after a period,” she said.

She decried how some African countries are still to renew their commitments to be held accountable on GBV issues.

“At the same time, we are seeing quite a trend of regression in different parts of Africa, actually in different parts of the world. There is regression not only in the implementation of these policies but also in commitment to them.

“For example, the ESA commitments done in 2003, and then in 2021 there was a recommitment of these policies. But only a few countries of the east and southern African parts have committed to it, especially the eastern African countries, political issues.

“So we have Kenya did not recommit, Uganda did not recommit and this means that we no longer have a



Ms Judy Amina from Kenya

policy or commitment to hold governments accountable with.

“So that brings regression. Countries need to recommit to these policies so that we ground our advocacy on, something we can hold them accountable to,” Ms Amina said. Some African countries according to Ms Amina have depressive laws which instead of promoting sound social values, are doing just the opposite.

“And I know this is not news because the different countries represented in this room might be able to confirm this. For example, we have the

anti-homosexuality bills, Uganda and also in Ghana.

“In Kenya, we also have a Family Protection Policy that has already passed and there is a proposed bill on family protection. “I know it sounds well when you say Family Protection but when you read the bill, there is nothing on the family. It’s burying more of the family values that are supposed to be promoted,” she said. Sexual Reproductive Health Rights Alliance Uganda Youth Country Coordinator Ms Faith Mariah said gender-based violence issues are best

tackled if gender power relations are addressed.

Ms Ethel Musara said labelling the issue of marrying off adolescent young girls as child marriages is a misnomer. She said it should be called child violation or child molestation. Chief Bushu said the Victim Friendly Unit of the Zimbabwe Republic Police was inadequately capacitated to the extent that they did not have a vehicle to travel with when attending GBV cases.

ICASA 2023 ROADMAP

EVENTS ON CHILDREN & ADOLESCENTS



MONDAY 4 DECEMBER

TIME (CAT)	EVENT TITLE	CONVENER(S)	EVENT TYPE	LOCATION
11:35-12:15	Inclusion Drives Results: AGYW meaningful engagement and leadership in the Global Fund grant cycle 7	Global Network of Young People Living With HIV	Satellite Symposium	Diamond 1 & 2
13:20-14:05	Breaking Down Barriers: Empowering adolescents and youth in PEPFAR-supported countries to access HIV testing, treatment, and prevention services	PEPFAR	Satellite Symposium	Jacaranda 1 2 3
14:15-15:00	Accelerating Access to Better Medicines for Children: Ensuring successful introduction of pALD and sustainability of pDTG	Medicines Patent Pool, GAP-f partners	Satellite Symposium	Diamond 1 & 2

TUESDAY 5 DECEMBER

8:45-9:30	In the Daily Life of Adolescent and Young People with Disabilities: Focusing on HIV, SRHR and GBV	Main Conference	Special Session	VIP Lounge
8:45-9:30	Fostering Adolescent and Youth Health Resilience: Engaging diverse populations in HIV programming	JSI	Satellite Symposium	Sapphire
10:30-11:15	Embracing Disability and Sign Language in HIV and COVID-19: Zimbabwe national response towards universal health coverage by 2025	Disability Zone	Community Village Stage	Community Village
10:45-11:30	B4 – Adherence and Retention	Main Conference	Abstract Driven Session	VIP Lounge
10:45-11:30	Education Plus Investment Cases for Transformative Results – “Leveraging girls completion of secondary education for HIV prevention”	Main Conference	Special Session	Diamond 1 & 2
10:45-11:30	Ending AIDS in Pediatric and Children by 2030	Main Conference	Special Session	Jacaranda 1 2 3
12:05-12:50	Making It Last Longer: Considerations for HIV treatment optimization for children	Main Conference	Special Session	VIP Lounge
13:05-13:50	The Stepped Care Approach: Join us in defragmenting digital SRHR for young people	AIDSFONDS	Satellite Symposium	Diamond 1 & 2
15:05-15:50	Leadership Towards Effective and Sustainable National HIV Prevention Programmes in Africa: Country-led, community-led, precise and people-centered	UNAIDS	Satellite Symposium	Plenary
15:05-15:50	Transactional Sex or Sex Work? Does it really matter in meeting the HIV prevention needs of young girls and women? (EN/FR)	ViiV Healthcare	Satellite Symposium	Diamond 1 & 2

WEDNESDAY 6 DECEMBER

8:45-9:30	Young People Unite: Addressing inequalities, ending AIDS!	Main Conference	Special Session	VIP Lounge
8:45-9:30	Lifting Our Voices: Community engagement and gender equality on the path to WHO validation for EMTCT	Main Conference	Workshop	Diamond 1 & 2

Governments should take ownership of VMMC programs says AVAC

By Michael Gwarisa

To ensure the sustainability of Voluntary Medical Male Circumcision (VMMC) programs in the face of dwindling donor support and donor fatigue, African governments have been urged to fund and promote VMMC programs.

Since VMMC was recommended by WHO and the UNAIDS in 2007 as key to HIV prevention in high prevalence settings, about 35 million men have accessed services across 15 VMMC priority countries in Eastern and Southern Africa.

However, since inception, VMMC programs have been largely financed by donors and Multilateral funding agencies amidst indications that funding from these organisations towards VMMC is standing at US\$167 Million.

Speaking during a plenary session of Advancing Integrated Biomedical Prevention: Best Practices in Zimbabwe, Angelo Katumba, a Senior Program Manager at AVAC said they together with several partners came together to develop a Call to Action on VMMC where they highlighted key areas that need urgent attention to put VMMC back on track to pre-COVID-19 levels.

The Call to Action message includes Leadership and Governance, Finding and sustainability, Health Service Delivery, Global and Regional Advocacy, Partnership and Collaboration, Innovation and Commodities, communication and Demand Creation and Strategic Information and accountability.

“We have come with eight Call to Action messages the key message here is that the job is not yet done



Angelo Katumba

and there is a need to accelerate VMMC for HIV prevention. For example for the ministries of health, we are calling on them to take ownership of the VMMC programs and absorb them into their domestic funding and funding mechanisms as a step toward sustainability,” said Katumba.

He also called on governments to monitor policy implementation, programmatic progress and financial commitments and report these on an annual VMMC leadership scorecard.

He also urged civil society to spearhead efforts culminating in a concrete social impact.

While Multilateral funding agencies are currently contributing US\$167 Million toward VMMC, there Call to

Action to have them increase support to at least US\$250 Million per annum. An additional dedicated fund for innovation and research should be established to guide and promote novel approaches to VMMC for greater efficiency and effectiveness over the next five years.

“Ministers of finance and health must commit to an incremental increase in domestic funding for VMMC over the next two fiscal years, with a clear timeline and milestone for implementation. The private sector must actively participate as a significant partner in co-funding VMMC commodities and create mechanisms that tap private medical insurance as a means of sustainable funding.”

Meanwhile, Dr Brian Maponga, the

Director of Health Systems Acceleration and Project Lead • Population Solutions for Health (PSH) in Zimbabwe said they were implementing a project dubbed integrate which is supporting HIV biomedical prevention.

“We are supporting the transition of the vertical VMMC program to a locally drive program. We are expecting outcomes of this project where we are looking at testing, demonstrating and communicating sustainability models which can maintain VMMC coverage and can be applied more broadly,” said Dr Maponga.

The UNAIDS underscored two main challenges faced by voluntary medical male circumcision (VMMC) programmes which include dimin-

ished funding and low coverage among men in their twenties and older. While there is good progress in VMMC, the Global AIDS update highlights that VMMC coverage remains far from reaching the 90 percent global coverage target for impact in many subnational areas of priority countries.

Additionally, funding has declined by almost half since 2020 from approximately US dollars 285 million to US dollars 147 million for the 15 countries funded by the United States President’s Emergency Plan for AIDS Relief (PEPFAR). However, questions have arisen about VMMC’s cost-effectiveness under growing coverage of other biomedical interventions, such as antiretroviral treatment.

Zim Pentecostal churches culprits in child marriages spike

By Kuda Pembere

FOURTEEN percent of child marriages in Seke and Chihota area, in Mashonaland East province in Zimbabwe are happening in Pentecostal churches, a local research has found.

With much of the blame on child marriages being pinned on the apostolic sect also known as the white garment churches, it has emerged some Pentecostal churches also partake in that devious practice.

Speaking to Ms Kudzai Magaya, the programs and events manager at Catalyst, a civil society organization based here in Zimbabwe and Zambia on the sidelines of a HIVOS ICASA side event, she said she studied more than 10 churches where she unearthed this deviousness in Pentecostal churches.

“There is a research that I did and I think if you go on Shamwari yeMwanasikana also stated in corroboration that around Seke and Chihota areas 14 percent of the child marriages that happening there are from the Pentecostal church, yet the narrative within the society thinks that child marriages are prevalent in white garment churches,” she said.



She also noted that these Pentecostal churches hush up child marriages. “It is also key to note that in churches around us, we are seeing young girls pregnant but nobody is speaking about it. Nobody is saying anything about it. I don’t know the politics behind that.

“But I feel it is time we protect the girls in Pentecostal churches in the urban areas and if you move in Pentecostal churches in towns and cities you will see that. It is a narrative we

are not free to talk about. “I have been checking trends and not that I am a devil’s advocate but you hardly see programs that promote women’s rights, speaking about GBV or mental health.

“In most cases where issues of mental health are there, they resort to prayer yet not everything needs prayer as a solution but sometimes we need to advise congregants to seek professional counselling. I do believe God gave us the wisdom

to have professional counsellors or therapists,” she said. International Network of Religious Leaders Living with or Personally Affected by HIV & AIDS (INERELA+) Zimbabwe country coordinator Bishop Paul Juru said churches commanding respect over their congregants have a role to play in fighting GBV.

“Churches provide psychosocial support to the girls and boys or women who are affected. They can train males in fighting GBV against

women and girls. The church can easily do that and those are some of the interventions we are doing,” he said. “The church has to support and deliver action to eliminate all forms of violence against women and girls within the churches.”

Chief Bushu from Shamva district in Mashonaland Central also speaking at the event said he has since banned the sprouting of apostolic churches famed for practicing child marriages

FRIDAY 8 DECEMBER 2023

DAY, DATE AND TOPIC

Edutainment (Interludes in between sessions)– creative mechanics song poetry & music -

TOPIC: Sexual Orientation, Gender Identity and Expression (SOGIE)

Topic: Pasi pemuti talk- How to create feminist spaces that are inclusive and adaptive to diverse intersectionalities.

TOPIC: Youth Prison Pollution Alliance (Youth PoPs) discussion on drug and substance abuse

TOPIC: Cancer care for all. Addressing the needs of women and LGBTQI+ individuals- Exploring issues like access to screening and treatment. Experiences of stigma and discrimination in the health care settings.

TOPIC: Roundtable Conversation- Key takeaway lessons on how to make our communities safe and inclusive- Notes will be used to develop a Best practice guide.

FACILITATOR

Womandla and SWEAR

ARASA

Womandla

SANOP

Women Health Issues Trust :

Womandla

TIME

0900-1615hrs

10-15-16.15hrs

1015-1100hrs

1115-12.00hrs

1400-1500hrs

1530-1615hrs

VENUE

ARASA Community Booth No 15

ARASA Exhibition Booth No 34

ARASA Community Booth No 15

ARASA Community Booth No 15

ARASA Community Booth No 15

ARASA Community Booth No 15

SATURDAY 9 DECEMBER 2023

DAY, DATE AND TOPIC

TOPIC: Collaboration Opportunities

TOPIC: Accelerating Community Collaborations in ending HIV

FACILITATOR

ARASA

ACCEPT Consortium : Transmart Led

TIME

1015-12.00hrs

1030-1200hrs

VENUE

ARASA Exhibition Booth No 34

ARASA Community Booth No 15

Join us for 6 days of edutainment, vibrant discussions, learning and sharing platforms at ARASA Exhibition Booth No 34 , Community Booth -No 15, and at the Networking Side Event to be held at Holiday Inn Hotel, Harare .

Lots of prizes to be won! Save the dates and watch the space for more details!

Register for Networking Side Event on 5 Dec on following link: <https://forms.gle/uQYJcT5bUMqAgt5e7>

VIRTUAL PARTICIPANTS: CAN ACCESS THE NETWORKING SIDE EVENT MEETING USING THE FOLLOWING ZOOM DETAILS:

<https://us02web.zoom.us/j/8739812923?pwd=VXBzUEg0SENVbXYzTk0xeFFoUUdJZz09> | Meeting ID: 873 981 2923 | Passcode: 402144 |

Email: communications@arasa.info | Website: <https://arasa.info/> | Twitter: @ARASAcemms

Facebook: ARASA <https://www.facebook.com/AIDSandRightsAllianceforSouthernAfrica> | Instagram: https://www.instagram.com/arasa_network/

ARASA @ ICASA 2023 ROAD MAP



AIDS AND RIGHTS ALLIANCE FOR SOUTHERN AFRICA

ARASA @ ICASA 2023

ROAD MAP

4-9

DECEMBER

2023

HARARE ZIMBABWE

COME AND JOIN US!

MONDAY 4 DECEMBER 2023

DAY, DATE AND TOPIC

Display of ARASA Resource Materials
-Research based toolkits & manuals:

Self-Care, Bodily Autonomy and Integrity for Media, Sexual Orientation, Gender Identity and Expression (SOGIE) and SRHR advocacy toolkit for adolescent girls and young women...
any many more resources

FACILITATOR

ARASA

TIME

1015 - 1615 hrs

VENUE

ARASA Exhibition Booth No 34

TUESDAY 5 DECEMBER 2023

DAY, DATE AND TOPIC

Edutainment (Interludes in between sessions)- creative mechanics song poetry & music

Display of ARASA Resource Materials
-Research based toolkits & manuals:
Self-Care, Bodily Autonomy and Integrity for Media, Sexual Orientation, Gender Identity and Expression (SOGIE) and SRHR advocacy toolkit for adolescent girls and young women...
any many more resources

TOPIC: ARASA regional SRHR programmes

FACILITATOR

Womandla and SWEAR
ARASA

TIME

900-16-15hrs

1015-1100hrs

1015-1615hrs

1100-1200hrs

VENUE

ARASA Community Booth No 15

ARASA Community Booth No 15

ARASA Exhibition Booth No 34

ARASA Community Booth No 15

4-9 December 2023, Harare, Zimbabwe



Australian Government enters new partnership with UN-AIDS to let communities lead in ending AIDS in Asia Pacific

As part of its ongoing support for ending AIDS in Southeast Asia and the Pacific, the Australian Government is investing up to AU\$12 million in a new partnership supported by UNAIDS and Health Equity Matters. The funding will help local communities and governments in the region improve HIV prevention, testing and treatment while reducing stigma and discrimination.

"UNAIDS values Australia's long-standing partnership globally and in the Asia-Pacific region, and particularly its commitment to community leadership," said Eamonn Murphy, UNAIDS Regional Director, Asia Pacific and Eastern Europe and Central Asia. "By both increasing service access and lowering HIV-related stigma and discrimination, we can accelerate progress toward ending AIDS as a public health threat."

In her announcement of this partnership, marking World AIDS Day, Australian Minister for Foreign Affairs, Senator the Hon Penny Wong said, "Globally we have made remarkable progress in the fight against HIV, but there is still more to be done. It is critical that Australia supports communities in our region to end the HIV epidemic, including through sharing our own knowledge and experience."

Australia's own national testing, treatment and viral suppression results are on track to reach the 95-95-95 targets by 2025. As of the end of 2021, 91% of people living with HIV were diagnosed, 92% of those diagnosed were on treatment and 98% of those on treatment were virally suppressed. "Among the factors contributing to Australia's prevention, testing and treatment success is its historical bipartisan commitment to partnering with civil society in the HIV response," Mr Murphy said.



"It is this approach that we need to expand throughout the region."

HIV infections in the region are not yet falling fast enough to meet vital targets, and there are rising epidemics in a number of countries including Papua New Guinea, Fiji and the Philippines. Stigma and

discrimination are contributing to the rise in new HIV infections, obstructing access to HIV prevention, testing and treatment services for men who have sex with men. Community- and key population-led service delivery is a critical tool for reaching people, especially young people, not yet

accessing services.

"The most effective way to treat and prevent HIV is to empower the people who most feel its impact," stressed Health Equity Matters CEO, Adjunct Professor Darryl O'Donnell.

The initiative, currently still under development, reflects a new model of partnership with community organizations which UNAIDS highlighted in this year's World AIDS Day report as critical to ending AIDS.

ICASA 2023 provides an opportunity to highlight the challenges and successes of the HIV, hepatitis and STI responses across the WHO's African Region, while addressing HIV/STI research, and implementation science in the context of wider pandemic preparedness and response. WHO is convening 8 main satellites sessions and 2 special sessions, to share its latest scientific and normative work on the following areas:

- Differentiated Service Delivery;
- Key populations and stigma;
- New WHO guidelines on HIV, viral hepatitis and STIs;
- PrEP and long-acting products;
- TB prevention;
- Outbreaks and emergencies, preparedness;
- HIV and non-communicable diseases integration;
- Elimination of mother-to-child transmission (MTCT);
- Special sessions (with SAA ICASA);
- Vaccines (Malaria); and
- Hepatitis.

Furthermore, WHO will have a leading role across the conference agenda and pre-meetings, including the participation in the opening ceremony, plenary sessions, press conferences, workshops, bilateral meetings and engaging with communities and people living with or affected by HIV.

About ICASA

The biennial International Conference on AIDS and STIs in Africa, ICASA, is the main and largest African forum for bringing together key HIV, sexually transmitted infections (STI) and communicable disease stakeholders, including heads of state and government, ministers, national HIV programmes staff, advocates, scientists, policymakers, service providers, donors, civil society representatives, communities and people living with HIV and STIs.

The ICASA Conference is Africa's most influential meeting on HIV/STIs. It is organised by the Society for AIDS in Africa which was founded in 1989. WHO is a standing co-organizer of ICASA and takes this opportunity every 2 years to promote and present its policies, guidelines and tools, and to demonstrate its leadership and contribution to the health sector responses to HIV, STIs, hepatitis, monkeypox, and integrated approaches for service delivery. The ICASA Conference attracts up to 4 000 participants from most WHO Member States in Africa; therefore, it is an event of prime importance in the context of HIV, hepatitis and STIs.

Related

WHO @ ICASA 2023

WHO @ ICASA 2023 programme

Session flyers

Realizing the potential of HIV and STI service integration: expert consensus building workshop | Monday, 4 December, 13:00 – 17:00, Bronte Hotel

Can vaccines control STIs? A public health perspective | Wednesday, 6 December 2023, 10:45 – 11:30 AM

A call for data use for evidence-based decision making to optimize differentiated service delivery implementation | Wednesday, 6 December, 15:05 – 15:50, Satellite room: Sapphire

More

Global HIV, Hepatitis and STIs Programmes

ICASA 2023 conference website

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6. Threats or intimidation of any kind
7. Neglect of a child

Get in touch with any of these numbers for free assistance in Zimbabwe

Help needed	Who can help?	Coverage	Their Contact details
Counseling/emotional support	<ol style="list-style-type: none"> 1. National GBV Hotline 2. Childline 3. Ministry of women affairs 4. Department of Social Development 5. Musasa 6. Shamwari Yemwanasikana 7. Padare/Men's Forum 8. Contact 	National	<ol style="list-style-type: none"> 1. 575 2. Call 116 App 0732116116 3. District office near you 4. District office near you and Ward Child Care Workers 5. Econet 08080074 Netone 08010074 Telecel 0731080072-4 6. Toll Free 08011034 Helpline 0777851120 7. Helpline 0776027290 8. Netone 08010186/7 Whatsapp 0719528158/9
Reporting violence	<ol style="list-style-type: none"> 1. National Hotline 2. Ministry of Education 3. Childline 4. Saywhat Hotline 5. ZRP Victim Friendly Unit 6. Zimbabwe Gender Commission 7. Shamwari Yemwanasikana 8. Issues/Pane Nyaya 	national	<ol style="list-style-type: none"> 1. 575 2. 317 3. 116 or App 0732116116 4. 577 5. Econet 08080554 Netone 080101149 Telecel 0735342874 6. Toll Free 08004379 7. Toll free 08011034 Helpline 0777851120 8. Media 0773910095
Place of safety/Fostering	<ol style="list-style-type: none"> 1. Department of Social Development 2. Ministry of women affairs 3. Musasa 	National	<ol style="list-style-type: none"> 1. Any district office or CCW in your Ward 2. Any district office near you /WardCo 3. Econet 08080074 Netone 08010074 Telecel 0731080072-4

Health and Safety Measures Published For Delegates Attending ICASA 2023 In Harare

The ICASA Conference will run from 4 to 9 December, 2023 at the Harare International Conference Center (HICC). The conference will be running under the theme, “AIDS IS NOT OVER: Address inequalities, accelerate inclusion and innovation.”

Attendee health and safety measures

Here’s all you need to know for attending ICASA 2023 safely, responsibly, and confidently. Note that some guidelines are mandatory.

NB: All delegates should have their COVID-19 vaccination cards and yellow cards. Cholera vaccination cards if available will also be appreciated.

Action to take in advance

Mandatory – badging

To avoid lines, we’ll email your QR code confirmation in advance. Please have this QR code with you on your smartphone or as a printout when you arrive at the conference venue. Badge holders and lanyards will also be available at registration desks.

AT RAINBOW TOWERS HOTEL & CONFERENCE CENTER – moving around the Conference

Wearing face masks is mandatory within the Rainbow Towers Hotel & Conference Center (except for medical exemptions). Staff, Security, and ICASA 2023 Volunteers are jointly responsible for monitoring face-covering compliance and both are authorized to escort people out of the venue in the case of non-compliance.

Mandatory – Staff access to booths

Booths with exhibiting partners will have their own dedicated info desk.

Entering the Conference

Traffic flow in and out of the conference center will be carefully managed. As much as possible we will ensure one-way movement of people to minimize contact. There will be appropriate signage provided and volunteers to assist and guide delegates to their various destinations.

Exhibition hall density

Wider aisles will be added wherever possible and the conference will provide more seating areas in the exhibition hall to reduce crowding and improve traffic flow.

Mandatory – Refreshments

The conference venue will provide an extended range of individually packaged food items and will observe all applicable COVID-19, public health and safety standards.

Cleaning standards and special measures during the Conference

Mandatory- Exhibition Hall cleaning

The convention space will be cleaned regularly including electrostatic spray treatment every night in accordance with ICC standards. Exhibitors will also be required to clean meeting areas between each appointment or meeting.

Mandatory – Health and Safety monitoring

ICASA 2023 staff, volunteers, and security at the venue will continually monitor the COVID-19 and public health safety protocols across the conference to ensure compliance.

Hand Sanitizer

Hand sanitizer dispensers will be placed throughout the conference venue as well as the exhibition hall and community village. Attendees are encouraged to sanitize their hands frequently and after every meeting.

Meeting/Conference rooms

Meeting rooms will be set up in compliance with the current social distancing and room capacity guidelines in Zimbabwe to ensure you can take part safely in ICASA 2023 sessions.

Other Safety standards

The venue has implemented a vast range of health and safety measures which are not detailed on this page but can be viewed on the Rainbow Towers Hotel and Conference Centre website.

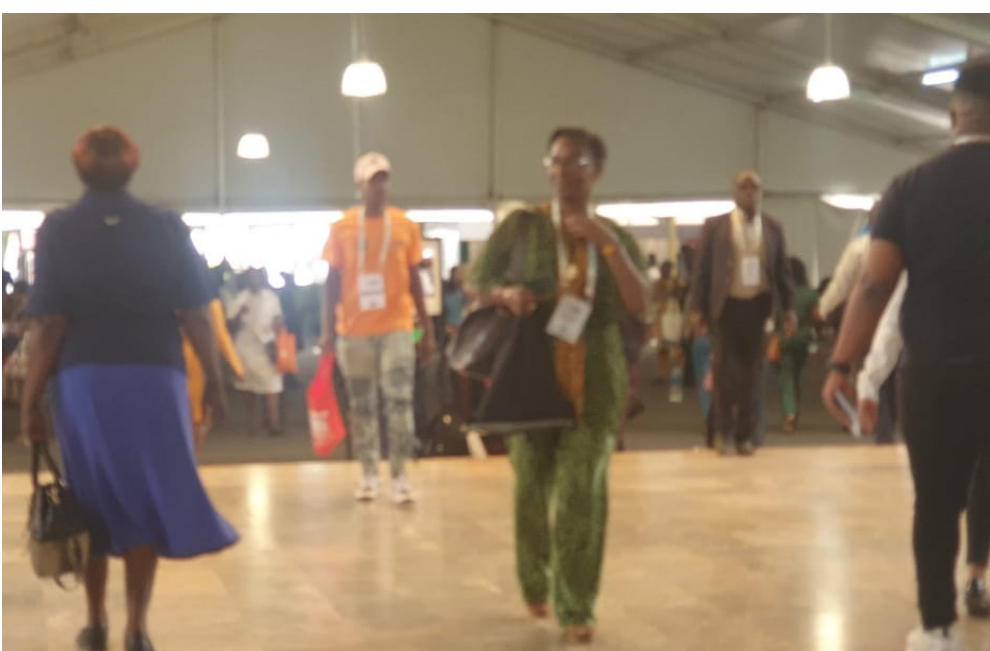
Importantly, the entire Rainbow Towers Hotel & Conference Center, including the exhibition halls, is equipped with highly efficient ventilation systems concurrent with International Conference standards.

Important notice: All delegates are required to avoid eating street food and purchasing from street hawkers. All delegates are to patronize restaurants within the conference venue.

In case of a positive COVID-19 test, the affected delegate will cater for all related costs, including quarantine.

Medical Travel Insurance

Delegates must hold valid medical travel Insurance to cover his or her duration.



Enjoy ICASA random photo moments