

ZHECT

ANNUAL REPORT

April 2016 to March 2017

ZAMBIA HEALTH EDUCATION AND COMMUNICATIONS TRUST (ZHECT)



Plot No. 1551, Church Road
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Lusaka
Zambia

March 2017

I Annual Highlights

April 2016	-Start of implementation of the Z-CHPP Project
May 2016	-Training of Lay Counselors and Behaviour Change Communication Volunteers for the Z-CHPP Project
June 2016	-Start of the Z-CHPP project implementation
July 2016	-UNFPA Conducted Training on the Out of School Curriculum -34 th Board Meeting (Jan to Mar 2016 and April to June quarters)
August 2016	-Participation in the Alliance Due Diligence
September 2016	-Start of implementation of the USAID Open Door Project (ODP) -ITOCA- for Z-CHPP
October 2016	-Training of Peer Promoters for the ODP Project
November 2016	-Training of the Peer Promoters/Adherence Counselors for Chooda -Development of the 2012-2016 Strategic Plan evaluation tools
December 2016	-Z-CHPP Project Annual Review; -Further Training of ODP volunteers selected from KPs -35 th Board meeting (July to Sept 2016 Quarter) -Annual review meeting for Z-CHPP -ZHECT Annual Christmas Break
January 2017	-Development/Refinement of more organizational policies
February 2017	-Start of the development of the ZHECT Business Strategy
March 2017	-Zambia ODP and DRC exchange visit -36 th Board Meeting (Oct to Dec 2016 Quarter)

II Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CDC	Centre for Disease Control
HIV	Human Immune Virus
HTC	HIV Testing and Counselling
M&E	Monitoring and Evaluation
MCP	Multiple Concurrent Partnerships
NAC	National AIDS Council
NGO	Non-Governmental Organization
ODP	Open Doors Project
PEPFAR	Presidential Emergency Plan for AIDS Relief
STI	Sexually Transmitted Infection
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
Z-CHPP	Zambia Community HIV Prevention Project
ZHECT	Zambia Health Education and Communications Trust

Organizational Management

Introduction

The Zambia Health Education and Communications Trust (ZHECT) is a local Non- Governmental Organization (NGO) founded in 2001 and registered under the Registrar of Societies to promote good health of Zambians in general but with specific mandate to contribute to a reduction in the spread of HIV and mitigating the impact of AIDS and other communicable and non-communicable diseases. ZHECT was re-registered by PACRA as a non-profit making Company Limited by Guarantee in September 2010

The organisation employs multifaceted responses to HIV/AIDS/STI/Cervical Cancer and unplanned pregnancy prevention and also offers integrated biomedical services to communities, workplaces, youth and other vulnerable and hard to reach populations. Other areas of focus include Sexual Reproductive Health, Gender Based Violence, Malaria Screening and Treatment, TB screening as well as creating linkages for continuum of care. Research, Capacity Building and Economic Empowerment area other areas of expertise that ZHECT uses to try and enrich/improve service delivery.

Organizational vision, Mission, Goal and Strategic objectives

ZHECT is, in its work, guided by the following Vision, Mission and Core Value:

Vision Statement

A healthy, well informed people in health matters with long life.

Mission Statement

To provide high quality health services, social behaviour change interventions and capacity building for the improvement of the health status and general wellness of people in Zambia.

Core Values (CREEIP)

ZHECT espouses the following core values:

- (a) **Commitment:** Exceed stakeholders' expectations through demonstrated care, compassion and confidentiality.
- (b) **Respect:** Employ the concept of UBUNTU which is to treat all stakeholders with utmost consideration and respect.
- (c) **Equality/Equity:** That all people should be treated the same, enjoying the same protection under the law, the same access to health/social services, and the same benefits and burdens, irrespective of race, gender, religion, ethnic / tribal origins, or HIV status.
- (d) **Effectiveness:** Promote self and organizational development, dynamism and cohesiveness.
- (e) **Integrity:** Provide role modelling through adherence to minimum acceptable behaviour standards.

(f) **Professionalism:** Exhibit the highest level of quality service provision, transparency, accountability, and responsibility in all endeavours.

Administration Structures

ZHECT is managed by a Board of directors comprising the following distinguished Board members:

- | | | |
|----|---------------------|------------------------|
| 1. | Mr. Felix Banda | Board Chairperson |
| 2. | Dr. Sharon Kapambwe | Board Vice Chairperson |
| 3. | Dr. Theresa Nkole | Member |
| 4. | Mr. Evans Muhanga | Member |
| 5. | Mr. Daniel Sichombo | Member |
| 6. | Mr. Windu Matoka | Member |
| 7. | Ms. Faustina Mwenda | Member |

The Board of directors has three sub-committees that discuss relevant issues before they are discussed in the main Board meeting. These are the technical, finance and administration and the audit subcommittees.

Internal Management Structures

ZHECT is led by a Chief Executive Officer (CEO) who is supported by a management team comprising four heads of department: Director Research Monitoring and Evaluation, Director Programs, Director Service Delivery and Director Finance and Administration.

Staffing

As at March 2017, ZHECT had a total of 38 employees broken down as follows:

No	Category	Number	Status
1	Management	4 Senior and 1 Middle management	4 Part time 1 full time
2	Technical	17	All full time
3	Monitoring and Evaluation	5	Full time
4	Finance	2	Full time
5	Information Technology	1	Part time
7	Administration	3 Drivers 1 Office Assist/Receptionist	Full time
	Total	34	
8	BCPs, Pes and LCs	480	Volunteers

Summary of Programmes implemented in the year

The HIV epidemic landscape in Zambia has in the past three decades been declining from a high of over 20% to just above 13% now according to the Zambia Demographic and Health Survey (2013/14). This reduction has had serious international and national financial and programming undertakings. Currently Zambia has embarked on an ambitious UNAIDS/PEPFAR model of 90, 90, 90 by the year 2030 which envisions that 90 percent of all people living with HIV will know their HIV status; 90 percent of all people diagnosed with HIV infection will receive sustained antiretroviral therapy and 90 percent of all people receiving antiretroviral therapy will have attained viral suppression by the year 2030. ZHECT has therefore joined in the foray of these activities by implementing projects that will contribute to the attainment of this vision.

Project Management activities

Board Meetings

The Board of directors meets quarterly in providing organizational oversight functions. In the year the Board met four (4) times.

No	Date	Meeting series	Quarter Reported
1	1 st June 2016	33 rd Board meeting	Oct to Dec 2015 and Jan to Mar 2016
2	27 th August 2016	34 th Board meeting	April to June 2016
3	10 th December 2016	35 th Board meeting	July to Sept 2016
4	11 th March 2016	36 th Board meeting	Oct to Dec 2016

Among the resolutions the ZHECT Board of directors made during the year included among others:

- ✚ With staff now being paid only for the work they put in (LOE) it means that ZRA and NAPSA obligations would be covered 100% and this will to the organization not to accumulate further liabilities resulting from staff salary gaps. The Board therefore requested that Management takes this opportunity to seek ways of reducing outstanding liabilities to staff.
- ✚ ZHECT was requested to strengthen its sustainability base through formulation of a business plan (which could encompass totally different line of business from what ZHECT is currently running) with one of the Board members helping guide its formation.
- ✚ ZHECT should open a reserve account and begin to build up a fund whose accrued interest could support minor operation's funding requirements.
- ✚ The Board encouraged ZHECT to strive to seek funding support away from its traditional funding sources
- ✚ ZHECT management to seek a waiver on the penalties from ZRA.

Management Meetings

The ZHECT Management team meets once weekly on Mondays to review activities of the previous week and those -planned for current week. The management team has been documenting all the meeting minutes and filing them in the CEOs office.

Appraisals Undertaken

On a bi-annual basis staff undergo performance appraisals. The last appraisal was conducted in March 2017. Heads of department and all supervisors appraised their subordinates. The CEO appraised all Directors and Managers and in-turn she was appraised by the Board.

Resource Mobilization Activities

ZHECT has been using two platforms to mobilize financial resources:

1. Bidding for and/or responding to RFPs/RFAs in which the organization submitted a number of proposals. During the year two of the projects applied for in the previous year were awarded:
 - The Zambia Community HIV Prevention Project and the
 - Open Doors ProjectBoth projects are being funded by PEPFAR through USAID. ZHECT also continued having discussions with possible partners for upcoming Requests for Proposals (RFPs/RFAs) some of which had started to come out in a bid to replace most of the closing/closed projects especially those under the President's Emergency Plan For AIDS Relief (PEPFAR). Three proposals were being considered.
2. Provision of Consultancy services which include research and capacity building activities like trainings and HIV/AIDS program management.

ZHECT has been contracted by Metabiota, to determine HIV transmission pathways among Female Sex Workers and military populations in barracks and surrounding civilian populations, although the study took long to start. ZHECT conducted some minor consultancy work with Lumwana mine (psychosocial counselling training), Parliament, Ecobank, Airtel (all were supported with HTC towards commemoration of the World AIDS Day)

Policy Revisions

A number of policies were developed/refined and sent to ZHECT's stakeholders. Some of the new policies were recommended after ZHECT underwent a due diligence

The policies ZHECT came up with included

- Gender policy
- Child Protection Policy
- Volunteer Policy
- Disability Policy
- Workplace HIV/AIDS Policy

Development of the Business Plan

Supported by one of the Board members (Mr. Windu Matoka), ZHECT was provided with a template to work with to develop a business plan that would guide the

Organizational Achievements by Project

Introduction

ZHECT is slowly steadying up after a heavy financial down turn in the past two years-2015 and 2016. ZHECT started implementing two long-term projects- the Zambia Community HIV Prevention Project (Z-CHPP) and the Open Doors Project (ODP) which both started in 2016 and will run for five and three years respectively. The five year CDC supported HIV testing project implemented under sub-contract from IntraHealth was in its second final year. Other short-term projects ZHECT was implementing include the Chooda supported project that targeted to improve the situation of Adolescents Living with HIV and the six months Metabiota research project that was targeting to determine the HIV transmission pathways among military personnel, Female Sex Workers and civilian populations.

Zambia Community HIV Prevention Project (Z-CHPP)

General

ZHECT has partnered with PACT to implement the Zambia Community HIV/AIDS Prevention Project (ZCHPP). The Z-CHPP project is aimed at accelerating progress towards Zambia's goal of reducing new HIV infections by increasing adoption of high impact HIV services and protective behaviours among at-risk populations, using evidence-based and locally owned solutions (90-90-90 strategy).

Target Population

The project targets Priority Populations particularly Adolescent Girls and Young Women (AGYW) including their sexual partners, discordant couples, and PLHIV as well as Mobile Populations who include (Sugar cane Cutters, Fish mongers, Miners, Cross boarder traders). The project operates in three districts of Southern province – Livingstone, Choma and Mazabuka.

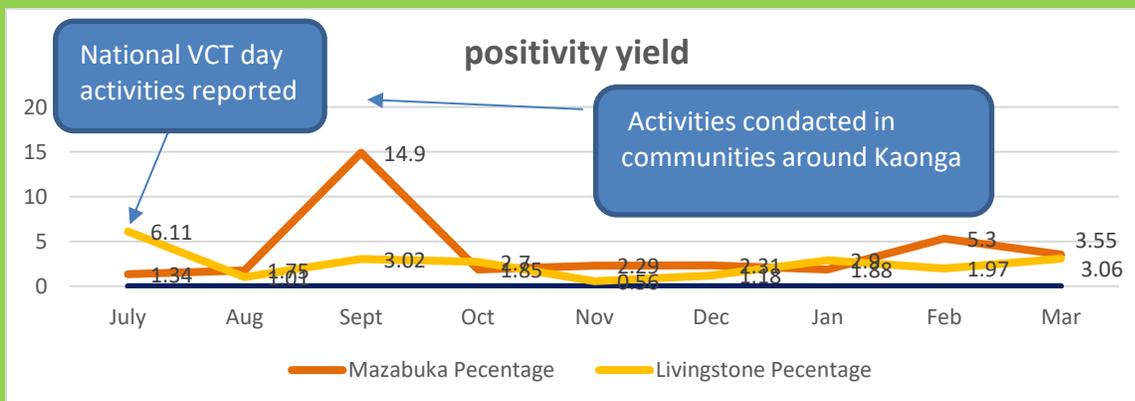
Key Activities and Performance in the year

Selected and trained Peer educators, Lay counsellors and Field facilitators to mobilise and disseminate behaviour change communication messages (BCC), HTS and Own Savings for Wealth Creation (OSAW) activities respectively.

Table 2: Numbers Reached relative to Targets for Z-CHPP October 2016 to March 2017

April 2016 to March 2017	Reached	Overall Target	Percent
HIV Prevention 1.1 Number of individuals from priority populations who completed a standardized HIV prevention program that is based on evidence and meets the minimum standards required during the reporting period (PEPFAR Required)	Total 41,632	29,422.5	141%
	Male 24,435		
	Female 17,197		
Condom Distribution 1.2 Number of male and female condoms distributed to end users during the reporting period	Total 379,902	54,199.5	700 %
	Male 313,173		
	Female 66,729		
Trained Volunteers 1.3 Number of community HIV/AIDS prevention volunteers trained	Total 86	86	100%
HTC 2.1 Number of individuals who received HIV Testing and Counseling (HTC) services for HIV and received their test results (PEPFAR Required)	Total 15,018	2790	538%
	Male 5,933		
	Female 9,085		
Positivity Number of positives from the priority population	Total 434	17% of all tested	2.9%
	Male 143		
	Female 291		
Successful Referrals 2.2 Percent of successful (complete) referrals for HIV-related services	162	90%	37%
OVCs served	339	1011	33.5%

ZHECT’s performance in reaching out to priority populations has been impressive. Although the start was slow the organization has exceeded nearly all the targets. This was attributable to the active cadre of well-motivated volunteers and the expansion of the project to Choma.



Note: yellow color represents Livingstone and brown represents Mazabuka

The graph above shows the positivity rate in the two districts which has an average of 2%. Mazabuka has experienced a higher positivity rate compared to Livingstone attributed to effective targeting.

Successes/Impact of the Project

ZHECT has established itself as a key partner in the operational districts and has become a source of commodities like condoms. This has widened the scope of the fight against HIV in terms of ZHECT's mandates.

The organization under the Z-CHPP project has recruited competent staff and has enjoyed committed Leadership.

Challenges

- ✓ There were delays in the project support to the process of mapping hot spots for priority populations and help increase the HIV positivity yields
- ✓ Lack of accurate data to ascertain the actual prevalence rate in the districts.
- ✓ Delayed development of data collection tools by the prime led to losing out on various target populations particularly OVCs

CDC/HTC Project- IntraHealth

General

The CDC/IntraHealth supported project is funded by PEPFAR. Currently the oldest project ZHECT is implementing, the HTC project is now in its last year. The project started in Southern province shifted focus midway to target high HIV prevalence sub-populations both in terms of spatial orientation and risk category. The project therefore targets **priority** (young men and young women, pregnant women and discordant couples) and **Key** populations (Female Sex Workers and Men who have Sex with Men).

Key Services Provided and Activities Undertaken

In order to increase access and demand for HTC, ZHECT has been conducting outreach activities to mobilize target populations to access services from IntraHealth Zambia who operate from strategic Health facilities through trained Behaviour Change Promoters.

Project Performance

The table below shows the performance of ZHECT relative to its targets. The organization has significantly over-performed its targets in reaching out to Priority and Key populations. In relation to Key populations the project reached more FSWs compared MSM where a paltry 4.0% was reached.

Table 3: IntraHealth Project achievements in April 2016 to March, 2017

No	Indicator	Reached	Target	Percentage
1	No. of individuals reached among general population	0	0	0
2	No. of individuals reached among Priority population	35165	7,248	500
3	No. of Individuals reached among Key Populations (FSW)	9406	5,640	200
4	No. of Individuals reached among Key Populations (MSM)	26	600	4.0
5	Individuals counselled as a couple	11,848	18,512	64.0
6	Number of condoms distributed	904784	-	-

ZHECT's performance in reaching out to priority population has been very high, beating its target by more than 500 percent. This was attributable to the active cadre of well-motivated volunteers and the expansion of the project to Shibuyunji district while the targets given to ZHECT for the Fiscal Year were not adjusted.

Project Successes

Strategic Partnership with Medical Stores Serves Many Sites

ZHECT's strong linkage with Medical Stores Limited (MSL) has had strategic significance as the sites have benefited significantly from enhanced access to condom and HIV testing reagent supplies.

Intensified School Based Priority Population Outreaches

As a result of increased reports of teenage pregnancies in schools particularly at Munyati and Shabasonje primary schools ZHECT's Social Behaviour Change Promoters in Shibuyunji increased their mobilization and information dissemination activities among in-school priority populations, promoting delaying sexual debut as well as working with other partners. This has led to promotion of joint activities thus reducing some costs

USAID Open Doors Project

General

The *USAID Open Doors Project (ODP)* is a five-year Cooperative Agreement between FHI 360 and the U.S. Agency for International Development (USAID) through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) that will be implemented for three years in the case of ZHECT.

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The project is designed to contribute to the goal of increasing access to and use of comprehensive HIV prevention, care and treatment services by key populations (KPs) in targeted districts/ provinces of Zambia (Chililabombwe, Chirundu Kapiri Mposhi and Solwezi).

It targets to address key determinants of risky behaviour; increase availability of high impact HIV and other health services and to strengthen capacity of local stakeholders to plan, monitor, evaluate and ensure quality interventions.

Key Activities and Performance by end of March

ZHECT provided Behaviour Change Communication messages, biomedical and referral services to these hard to reach but very vulnerable target populations. This involved provision of Counselling and Testing Services (STS), promotion of prevention services and referral to continuum of care among others. The following table shows the performance of the ODP in the half-year the project had been in operation.

Table 2: Performance Relative to set Targets for ODP

Indicator/Activity	No	Overall reached (All sites)	Target (Oct -Mar)	Percentage		
Result 1: Key Determinants of risky behaviour among Key Populations addressed						
Behaviour Change Communication	FSW	583	1378	42.0%		
	MSM	469	1123	41.8%		
	TG	105	21	500.0%		
	Total	1157				
Result 2: Increased availability of high impact HIV and other health services for key populations						
HIV Testing Services	FSW	+ve	251	1680	1378	122%
		-ve	1429			
	MSM	+ve	12	296	1123	26.0%
		-ve	284			
	TG	+ve	3	55	21	262.0%
		-ve	52			
Total		1379				
Number of clients who tested HIV +Ve		266	-			
Result 3: Strengthened capacity of stakeholders to plan, monitor, evaluate and ensure quality interventions						
Type of Cadre re-trained	FSW	15	-			
	MSM	11	-			
	TG	4	-			

ZHECT's performance has been increasing with time with the project exceeding its set targets in some indicators. The numbers reached have shown increasing trends from October 2016 to March 2017.

Overall project HIV prevalence among the different KPs shows that for FSW it was at 15%, MSM was at 6% while TG it was at 6.0 %. The results show that the 'hard core' MSM and TGs who are likely to increase the prevalence, were difficult to find and therefore in terms of their accessing services. This result conflicts the known facts that prevalence in these subgroups is very high.

Balancing of Staff Providing Services in the Sites

The organization made some administrative transfers by moving some Health Care Providers to other sites to balance the gender. This ensured that all sites have both male and female HCPs. This allows for gender choices among clients hence effective serving of our clients.

Re-training of the Volunteers

ZHECT re-trained 30 Peer Promoter volunteers in Solwezi and Chililabombwe using the newly developed and approved training materials for the project. The ratio of 60% SW and 40% MSM/TGs based on the relative populations.

Joint Data Quality Assessments

The joint assessment team comprising the ZHECT Research and M&E and the ODP secretariat teams undertook the exercise in all the ZHECT sites. The ZHECT sites were generally very impressive with most of them achieving 100% scores on most indicators while all the weaknesses identified were corrected in a specified time frame.

Project Successes

Overall the results of the DQAs in the ZHECT sites were impressive. Data quality Audits exposed strong quality and ZHECT/ODP identified some of the sites as centres of excellence in terms of data management. The joint DQA team identified very effective filing systems in Solwezi and requested the site for a write-up that should be used in the rest of the project as a best practice.

Caring for Adolescents Living with HIV/AIDS (ALWHA)

Introduction

The Caring for Adolescents Living with HIV/AIDS (ALWHA) is a project supported by Chooda. The project supports young people who neonatally and perinatally acquired HIV and therefore face challenges related to their HIV positive status especially issues of acceptance, sex and sexuality, adherence to AIDS treatment as well as appreciating their Sexual Reproductive Health (SRH).

The project therefore forms support systems for adolescents and young adults living with HIV/AIDS to be able to appreciate and live positively with their situation. The project uses peers to mobilize and disseminate information as well as distribute condoms.

Key Services Provided in the year

The trained Peer Promoters continued to identify and provide an environment where ALWHA feel free and open up.

Recruitment of ALWHA into the program

A total of 70 new cases of ALWHA were identified and linked to existing support groups through the NZP+ Chapters to build their capacity to take leadership and spearhead the process of making health information and services more available, accessible and acceptable.

Information Dissemination

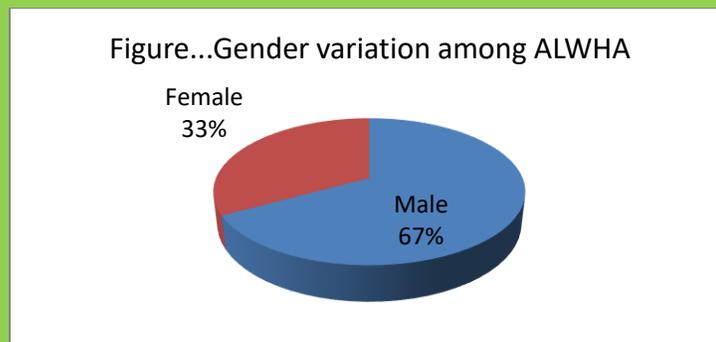
The peer promoters have continued providing their fellow adolescents with available options and work with them to adhere to their treatment plans.

Preparations for the Bicycle Ride Event

The ZHECT team has been interacting with the trained Peer Promoters to collect Life Story for the purpose of show-casing activities adolescents are doing in the project during the bicycle ride event by the Chooda team from the United States of America on the 1st of July 2017.

Project Performance

The figures below show the gender differentiation for the ALWHA recruited



ZHECT has already passed the target of 150 ALWHA in just a quarter. This could imply that the problem is much greater than had been anticipated.

Project Successes

More Young Men and Women Being Enrolled and Coming to Terms with their Situation

The Chooda project is making serious strides by actively identifying and recruiting participants into the project. The project now has over 175 active members of HIV positive youth who have enrolled and are involved in a number of activities including recreational activities. More of the young men and women have opened up.

“I had been contemplating suicide when I got to know my situation. But now I have come to terms with my it. Thanks to this project.” said a 14 year old young girl.

“I hated my mother after she told me she is the one who infected me. I now understand that it may not have been her fault too. I have a lot of information now on channels of HIV infection- Thanks to ZHECT and the Chooda project.” Said a young male

It was observed that more than 70% of the participants got HIV through Mother to Child Transmission.

Metabiota Sexual Network Study

General

This research project was scheduled to start January 2017. So far it has been confined to planning meetings to put all necessary logistics and other requirements in place. The research is a scientific enquiry using genotyping to determine HIV transmission channels between Female Sex Workers and the military personnel.

Key activities undertaken

The activities conducted in the quarter included

- Planning the key personnel to participate in the project from the Ministry of Defense,
- Finalization of the protocol in readiness to submit to the ethics committee
- Decision to confine the research to Kabwe

The last phase of the preparations will be a visit by the US-based Metabiota team to assess the readiness of the activities on the ground which will; be followed by a training possibly in July 2017

The Alliance Due Diligence

Of the 3 shortlisted organizations, ZHECT was selected by International HIV/AIDS Alliance to be their linking organization for Zambia. This provided an opportunity for the Board Chair and the CEO to attend the Blue Sky Week in Botswana in September where a number of issues regarding the new direction of International AIDS Alliance were discussed. Before ZHECT can fully be made a linking organization, it has to undergo a Due Diligence. The purpose is to bring ZHECT to a new level of strength by ensuring that all policies and

processes are in place and that ZHECT is adhering to laid down procedures. This exercise is planned to take place during the week of 14th November, 2016 after which a report of the findings will be presented so that gaps can be worked on.

Monitoring and Evaluation Activities

The Research Monitoring and Evaluation department has been providing regular monitoring and evaluation services on the various projects including guiding the various project teams in understanding the project indicators, supporting with related M&E trainings, developing project data collection and management tools as well as conducting data quality assessments. The department has compiled quantitative reports to partners.

Data Quality Assessment

The exercise was conducted in the Z-CHPP and ODP projects in all the operational districts and a

report compiled and facilitating correction of the identified weaknesses. The DQA compared the reported to the actual data counts for the different indicators and determined areas of that were weak by identifying variances that were outside the range of +/-5 using standardized DQA tools.

Evaluation of the 2012 - 2016 and Development of 2017-2021 Strategic Plans

The evaluation of the 2012 to 2016 Strategic Plan was conducted in two stages:

- Through a survey that involved use of both qualitative and quantitative data collection and
- Reviewing respective projects' achievements implemented during period of the strategic plan

ZHECT is almost concluding the evaluation of the 2012 to 2016 Strategic Plan. The evaluation team started the analysis of the collected data that included data from questionnaires, FGDs and Semi-Structured Interviews.

Over the lifespan of the Strategic Plan, ZHECT has implemented about 17 long-term (minimum of three years) and short-term (one or two years duration) projects and about 17 one-off activities. Among these long-term projects two were closed prematurely without explanation from the donors and they included the ZPI and SHARe II projects.

ZHECT at Fifteen

Although ZHECT did not make celebrations to mark its 15 years of existence as an organization (like was the case at 10 years), ZHECT put together its achievements over the 15 years period to circulate to the different partners.

The highlights of the 15 years analysis included:

- Total number of people reached with different services in the 15 years of existence = 3,052,549
- Total number of individuals reached with different trainings = 4,042
- Total number of individuals reached with Counselling and Testing Services = 399,263
- Total number of individuals referred for different services = 19,904
- Number of individuals enrolled on ART = 1,362
- Number of individuals provided with Palliative Care: = 1,336
- Number of children benefiting from OVC care = 1,143
- Number of individuals reached with information dissemination = 2,466,441
- Number of Condom Outlets opened = 29749
- Number of condoms distributed to end users = 2, 310,909
- Number of IEC materials distributed in different projects = 22,965,
- Number of STI cases diagnosed and treated = 32,830
- Number of individuals who accessed family planning services = 146,132
- Number of individuals tested and treated for malaria = 136,931

Challenges Experienced in the Year

Challenges Experienced through the year

Under the ZCHPP

The Data assessments have reflected very low HIV prevalence in the target districts among the target populations of around 2% on average. However project and national statistics show that the target populations in Southern province have a prevalence of at least 17%. This reflected the need and led to the M&E dept to engage district Coordinators to strategise the targeting in order to capture the really needy priority population.

The high frequency of meeting called by the Prime (Pact) affected project activity implementation

The generation of project data collection tools and/or revision has up to the end of the year not been concluded and has the potential to undermine data quality. Various versions have been developed and abandoned with changes in the core staff at the Prime.

Delayed procurement of the referral boxes has affected achievements of one of the project indicators: *number of completed referrals*

Under the CDC-HTC

Delayed disbursement of funds and lack of rain season gear affected effective implementation of the project..

Under the ODP

Some key populations have been difficult to deal with

Chooda

Resources to conduct some key project activities have been limiting

Commemoration of Important events and Increasing Visibility.

ZHECT participated in World AIDS Day (WAD) by providing Counselling and Testing services to selected organizations. These included Parliament which was provided with information on leadership responsibilities; Airtel and Eco bank which only facilitated their staff accessing HTC services.

In addition to provision of HTC services ZHECT provided information to staff in these workplaces, advocacy among national leadership to spearhead the fight against HIV/AIDS and supplied some important commodities for prevention

Financial Issues

The Organizational Income Situation

ZHECT managed to receive a total of K7,978,891=00 from the different projects implemented in the year. This was from ODP, Z-CHPP and IntraHealth projects put together

Conclusions and Lessons Learnt

ZHECT has performed well in all the projects that the organization has implemented in the year as most of the projects' targets were reached beyond 100%.

Although ZHECT started implementing two new projects (ODP and Z-CHPP), the organizational financial requirements still outweigh the amounts received .