



Disability, HIV and AIDS Trust

Creating an Inclusive Society

Six Months Activity Update

July – December 2014

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Abbreviations and Acronyms

AIDS	Acquired Immuno Deficiency Syndrome
ARASA	AIDS and Rights Alliance for Southern Africa
BOCONGO	Botswana Council of NGOs
BOFOD	Botswana Federation of the Disabled
BONASO	Botswana Network of AIDS Service Organizations
DFID	Department of Foreign and
DHAT	Disability, HIV and AIDS Trust
DRF	Disability Rights Funds
EHPISA	Evidence for HIV Prevention in Southern Africa (EHPISA)
FEDOMA	Federation of Disability Organization in Malawi
HIV	Human Immuno Virus
IGP	Income Generation Project
MACRO	Malawi AIDS Counseling Resource Organization
MHRC	Malawi Human Rights Commission
M&E	Monitoring and Evaluation
NAPHAM	National Association of People Living with HIV and AIDS in Malawi
NAPSAR ⁺	Network of African People living with HIV, Southern Africa Region
Oxfam	Oxford Committee for Famine Relief
SAT	Southern African AIDS Trust
SFH	Society for Family Health
SRHR	Sexual and Reproductive Health Rights
TB	Tuberculosis
YWCA	Young Women Christian Association
YwHI	Youths with Hearing Impairments
ZAFOD	Zambia Federation of Disability Organizations
ZBCA	Zimbabwe Business Council on AIDS
ZNAD	Zambia National Association of the Deaf

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1.0 Introduction

This quarterly report covers the months of July - December 2014. Over this period, The Highlights of the quarter are that DHAT team focused mostly on Sexual and Reproductive Health Programs and strengthening the country networks in order to have strong regional base. In particular, the work on mobilization of resources for program support and establishment of country networks to facilitate collaboration on these issues was continued.

2.0 Programs Major Highlights

2.1 SRHR Network Meetings

a. Key Populations Initiative: In September, we participated in the “Key Populations, united in action – leaving no one Behind” regional workshop organized NAPSAR. This initiative “Key Populations, united in action - leaving no one behind” targets those who have the least voice due to double stigma from both identifying as a member of key population and also living with HIV. It was expected outcome of the workshop that the initiative will support advocacy work for domestication of international agreements and protocols in relation to key populations living with HIV.

b. SRHR Training Initiatives:

- (i) An SRHR training workshop was conducted in July for ten organizations that have associations with disability programming in Bulawayo. The training focused on Advocacy and HIV and AIDS and SRH issues. This session provided participants with information on key HIV and AIDS and SRH issues which included values and behaviors; sexual transmitted diseases; HIV prevention; gender based violence; health and human rights. An advocacy committee was established.
- (ii) Two training workshops were conducted in collaboration with the Southern African AIDS Trust (SAT). The first purposed to sensitize the health workers on the public health needs and challenges faced by persons with disabilities. The second focused on disability inclusion in health services and addressing barriers to health care. Health workers from ten major hospitals participated. The rationale of the training workshops was to ensure health workers have a better understanding how to mainstream the disability in the services.

2.2 Monitoring Visits Major Tasks

Monitoring visits were conducted in Hwange and Binga. The purposes of the visits were monitoring the progression of the livelihood and HIV and AIDS project being carried out in the two communities. The livelihood projects are the goat rearing and fish sales project in Binga and Hwange respectively. The finding from the monitoring visit is that relationships between community leaders and beneficiaries was lacking. Therefore engagement of community leaders was important for purposes of visibility and transparency. The beneficiaries also required SRHR awareness in order to empower them with information.

2.3 Dialogue for Health Meeting

Dialogues for Health meetings were held in with Youths with Hearing Impairments (YwHI) and persons with disabilities in Harare and Hwange respectively. The created a platform for youths with hearing impairments to establish their concerns on sexual and reproductive health and rights. The health dialogues suggested solutions to addressing the challenges encountered by persons with disabilities through the identified advocacy issues.

2.4 Training Support Initiatives

The AIDS and Rights Alliance for Southern Africa (ARASA) is a regional partnership of non-governmental organisations (NGOs) working together to promote a human rights-based response to HIV and TB in east and Southern Africa through capacity building and advocacy.

In the last three years DHAT has participated in the training through selected individuals involved in implementing DHAT programs in the focus countries. In the last six months DHAT volunteer coordinators from Botswana and Malawi successfully participated in the 2014 program. ARASA has granted Malawi a USD10,000 support grant to train and share knowledge acquired with Disabled Persons Organizations and other partners in Malawi.

In addition, DHAT facilitated a Human Rights and programming for PWDs special focus on Access to health Services by persons with disabilities in November 2014. The outcome of the workshops is that there is a comprehensive understanding of the relationship between health and human rights and the importance of a rights-based response to HIV and TB. Secondly participants acquire knowledge on good practice in advocacy for a rights-based response to HIV and TB.

2.5 Sepo II Data Analysis

The Sepo II (meaning Hope in *Silozi* of Zambia) data analysis meeting took place in Lusaka Zambia, November. 2014. The purpose of the research to conceptualize HIV within a rehabilitation paradigm in a hyper endemic country in order to advance practice, education, policy and advocacy and research that enhances the lives of people living with HIV. DHAT contributed significantly in the basic needs component of the data synthesis. Interest of DHAT in the research is to identify and isolate data that is related to episodic disability experienced by people living with HIV.

2.6 Country Program Support

Last November, we submitted two proposals to DFID on Sexual and Reproductive Health (SRHR) focusing on communication between deaf clients and service providers and access to SRHR services in major health facilities in Malawi, Mozambique, Zambia and Zimbabwe.

The program support visits to Malawi and Zambia were to follow up and strengthen the Disability Rights Fund (DRF) supported project in Malawi and the SRH project supported by Society for Family Health (SFH) in Zambia. Secondly we undertook a mission to Malawi and Zambia in November to continue discussions with ZAFOD and FEDOMA on strengthening relationships regarding the proposed SRHR submissions as well as the longer term partnerships in disability and health rights.

The visit was specifically to seek support from the Federations of Disability Organizations of Malawi and Zambia on the content and prospective mode of implementation of the SRHR proposal submitted to DFID.

The visit identified some inadequacies in operational requirements for the DRF program implementation necessary for program management and Monitoring and Evaluation (M&E). These include documentation of program reports, bank documents, organizational policies and DHAT marketing materials.

In Zambia, SRH SFH supported program has been suspended due to financial constraints experienced by the local SFH program. SFH has given indications that the SFH programs will be expected to commence again in the first quarter of 2015. Subsequently, the SRH outreach activities are expected to commence at ZNAD premises

In Botswana meetings were conducted with BONASO, BOCONGO and BOFOD. The meetings focus on roles of individual organisation in the National Advocacy Task Team. It was agreed that BOFOD should take lead in organizing the Task Team meetings to be supported by DHAT.

2.7 Policy Analysis Meeting – Malawi

The Policy and legislation analysis meeting was held on 29 October 2014 at the Bridgeview Hotel. The meeting analyzed policies and legislation in Malawi. The meeting recommended that follow-ups at the National Assembly (with parliamentarians) should ensure policies and legislation are implemented. The Malawi Human Rights Commission (MHRC) should strengthen DPOs in dealing with Human Rights Violations.

2.8 Online Communication Platforms

- i. Readership of the website <http://www.dhatregional.org> and facebook page <https://www.facebook.com/pages/Disability-HIV-and-AIDS-Trust> remained constant during the last six months. The most accessed document was the Sepo study. However, the two communication platforms continue to provide information image of DHAT. In the next fiscal year, we will increase efforts to update the two platforms. Efforts are being made in the first quarter of 2015 to increase the readership.
- ii. The following IEC materials were development and produced in the last six months: “UNCRP adapted version” ”Getting to Zero in Africa”, “Sexual Violence”, “Disability Rights are Human Rights Stickers”, “Policy Briefs” and “Life through my eyes DVDs”.

2.9 Partnerships and Strategic Alliances

In Malawi, the Malawi AIDS Counseling Resource Organization (MACRO) and National Association of People Living with HIV and AIDS in Malawi (NAPHAM) were held. *The* purpose of the meeting was to ensure disability inclusion in the action plans of the two organizations and to initiate formal collaborations. We also need to maintain the support in the current DHAT Malawi Disability and HIV and AIDS programming.

On the other hand, an information sharing meeting on SRHR programming for Persons with Disabilities was held with the National AIDS Council of Malawi. Similarly, we also held information sharing meeting on SRHR programming with the NAC Zambia.

DHAT participated in an activity to review the Progressio Zimbabwe 2010-2015 Strategic Plan and related activities. The information generated from the review was used to further inform the development of the organization’s 2016- 2019 Strategic Plan. The review was conducted with other relevant partners from the Progressio networks and implementing partners.

A meeting was held with Bethany Trust between to identify areas of programming and collaboration in the midlands of Zimbabwe. Bethany Project’s niche is empowering communities to care and support children affected by HIV and AIDS, children with disability and those who are vulnerable. The outcome of the meeting was that DHAT will

work towards disability mainstreaming and program strengthening to ensure that inclusion of Persons with Disabilities.

In September a meeting to formally establish a working relationship with the Zimbabwe Business Council on AIDS (ZBCA) was held. An MoU was formally established. The rationale was to ensure disability inclusion the Business Council on AIDS programming.

2.10 Human Resources

The Disability Technical Advisor; Mr. Farai Mukuta, was recruited to provide additional support to resource mobilization efforts and disability programming. The Advisor commenced work on 1st November 2014.

3.0 Governance Major Highlights

3.1 Regional Governance Meetings

A full board meeting was not held during the reported period. The meeting of the Executive Director and Botswana based board members (Isaiah Thapisa and Ramabokwa Omphemetse) at Big Five Lodge in Botswana on 10th December 2015. The meeting dwelt on action points raised in the last board meeting.

The Executive Director and the Chairperson had meeting with Julia Bothasitse – (Volunteer Coordinator) regarding her permanent engagement with DHAT. It was explained to Julia that DHAT was not ready to engage her on permanent bases due to non availability of funds. However, it was agreed that once DHAT raise resources Julia could be considered for coordinator post.

3.2 National Governance Meetings

The Malawi governing board has been established with seven members. The board is composed of eight members. The board is chaired by Mr. David Njaidi. There is need to ensure that the local board make efforts towards quality enhancement and innovation. This will guarantee good governance and sustainable program implementation.

4.0 Resource Mobilization Major Highlights

The following resource mobilization efforts through proposal writing were submitted to various funders.

4.1 Funded Proposals

- i. ARASA application for USD10000 grant on HIV and AIDS, TB and Human Rights training
- ii. Disability Rights Fund (DRF) proposal

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- iii. ANCP Innovation Fund Proposal 2014-15 to Oxfam

4.2 Not Funded Proposals

- i. Expression of Interest for the EHPSA Regional Research and Innovations Fund with Professor Shoko of the University of Zimbabwe
- ii. Modeling Access to SRHR services for Hearing impaired Persons in DHAT focus countries
- iv. SRHR sensitization for persons with Disabilities in the DHAT focus countries
- v. Disability Rights Fund RF proposal
- vi. Swedish Organisation for Individual Relief (SOIR)
- vii. SAVE Tool Kit proposal on practical Guide to the SAVE Prevention Methodology by Persons with Disabilities in Botswana, Malawi, Mozambique, Lesotho, Swaziland, Zambia and Zimbabwe

5.0 Major Achievements

The six months July – December 2014 has seen the delivery of a number of significant actions from the strategy 2014 – 2019. The Major achievements for the last six months include:

- ✓ Development of the Strategic and Advocacy Frameworks 2014 -2019 by Staff, Board members and national regional partners and parliamentarians
- ✓ Acquisition of the USD20000 and USD10000 grants for program support of UNCRPD implementation and Disability and AIDS rights respectively. The support was acquired from the DRF and ARASA
- ✓ Establishment of the Malawi eight member executive committee. The Chairperson is Mr. David Njaidi.
- ✓ Successful negotiation for continued support to the Zimbabwe program from Oxfam (How much was involved Hamida??) and program vehicle funding

6.0 Appendix

6.1 July - December 2014 Programme Financial statements

Programme	Funder		Total
	SAT	Oxfam	
Budget line			
Administrative(salaries and allowances)	26,829.09	2,901.60	29,730.69
Programme(salaries and allowances)	57,755.46	4,578.60	62,334.06
Office cost	10,527.63	3,321.83	13,849.46
Travel	273.00	304.00	577.00
Audit	2,320.00	400.00	2,720.00
Equipment	-	305.00	305.00
Awareness Raising/Community mobilisation	-	700.00	700.00
Monitoring & Evaluation	5,247.00	5,318.00	10,565.00
DHAT Visibility & Marketing	308.00	-	308.00
Strengthening DHAT website	400.00	-	400.00
National/Regional meetings	2,132.00	1,782.00	3,914.00
Community Dialogue	-	799.00	799.00
Network & Feedback training	-	1,541.00	1,541.00
Skill training in Disability Accessible SRH, HIV & Aids service	-	3,663.50	3,663.50
Production of IEC material on HIV & Aids	-	3,622.72	3,622.72
Development of Best Practice on Disability, SRH, HIV & Aids	-	2,312.00	2,312.00
Livelihoods	-	2,800.00	2,800.00
Rapid Assessments	-	433.00	433.00
Stakeholders Workshop on disability workshop	-	4,158.00	4,158.00
Mentoring of partners on disability inclusion	-	2.50	2.50
Annual participatory review	-	4,684.00	4,684.00
Community health dialogue	-	921.00	921.00
Dialogue with Parliamentarians & other government departments	400.00	400.00	
Production of policy briefs	-	850.00	850.00
Forums on Disability, HIV and SHR that will influence policy	-	171.00	171.00
Total Expenditure	105,792.18	45,968.75	151,760.93
Income	152,737.00	100,000.00	252,737.00
Surplus/(Deficit)	46,944.82	54,031.25	100,976.07