

DAPP Health Capacity Statement

Organizational Background

Development Aid from People to People in Zimbabwe (DAPP) is a locally registered Zimbabwean development organization (WO/22/80) that manages comprehensive multi-sectoral development programs and community-led projects to empower people with the knowledge, skills, and tools they need to improve their own well-being. For close to forty years, DAPP has been implementing projects in communities focused on: health; nutrition; maternal and child health; youth programming; community development, especially targeting marginalized children, women and youth; food security/agriculture, entrepreneurship, and small business start-up and management; vocational training (especially for youth); water, hygiene, and sanitation; malaria control and prevention; and HIV/AIDS and TB prevention, care, and treatment.

DAPP employs more than 149 staff, has more than 400 volunteers, and implements projects currently benefiting nearly 350,000 people annually. DAPP is a member of the Humana People to People (HPP) Federation, a global network of 32 organizations working in 43 countries in Africa, Asia, Latin America, Europe and United States. Through this affiliation, DAPP has the potential to collectively leverage the accumulated experience and expertise from Humana People to People sister organizations regionally and globally. DAPP has built a strong network of support across government, local authorities, private sector, business leaders, community, political and religious leadership. It has a portfolio of 16 projects valued at over US\$2.5 million. DAPP has achieved significant results particularly in Mashonaland Central, Manicaland and Masvingo Provinces.

DAPP has vast experience promoting the establishment of community groups and strengthening of community structures in a participatory manner, to help ensure the sustainability of development programs. Examples of community groups DAPP works with includes the establishment and training of water point committees, pre-school committees, farmers' groups committees, youth committees, community and school health clubs and support groups for people living with HIV and/or TB. DAPP has experience engaging different stakeholders, including parliamentarians, women's groups, religious, traditional and political leaders and the private sector, with the aim of promoting policy reforms, improving social norms, and behaviour change including promoting particular health seeking behaviors.

DAPP is governed by an elected Executive Committee, who are all Zimbabweans. The Country Director, also a Zimbabwean, is responsible for the day to day operations of DAPP and is supported by three different Department Heads, for Programs, Finance and Partnerships. The operations are directed by clear policies on governance, program management, financial management, communication and human resources.

DAPP conducts quarterly internal audits and annual independent audits are carried out by AMG global. DAPP's financial statements are prepared in accordance with internationally

accepted accounting principles. DAPP has solid experience in handling donor funds, e.g. from USAID, EU, Global Fund, PSI, GIZ, UNEP, UNICEF, and a broad range of foundations and business.

DAPP Program Design and Sustainability

All DAPP's programs are based **on people to people principles** – mobilizing, organizing and building capacity of people and communities to take charge of improving their lives. DAPP therefore places great emphasis on working closely with community structures such as ward development committees, traditional leaders and more. DAPP also works closely and continuously with local authorities and government ministries, in particular the Ministry of Health and Child Welfare, the Ministry of Public Services, Labour and Social Welfare, the Ministry of Lands, Agriculture & Rural Resettlement, the Ministry of Small to Medium Enterprises and Cooperative Development, the Ministry of Primary and Secondary Education, the Ministry of Women and Youth Affairs, the Ministry of Environment, Water and Climate, the Ministry of Primary and Secondary Education, the Ministry of Higher and Tertiary Education, the Ministry of Home Affairs, among others. This close coordination, cooperation and partnerships with other organizations has ensured that DAPP's projects are people-centred and, as such, maximize impact for beneficiaries while building possible synergies to leverage impact over the long term. The particular knowledge or experience of partner organizations – including other NGOs, CBOs, private sector actors, government officials and ministries – has ensured the achievement of project objectives. Furthermore, it has facilitated, amongst other things, the incorporation of sectorial expertise, program linkages and the consideration of other projects or governmental programs during project design and implementation.

DAPP specifically targets vulnerable groups, such as orphans and vulnerable children, child-headed households, females, people living with HIV/AIDS and TB, people with disabilities, unemployed youth, refugees, smallholder farmers suffering the effects of climate change, and people in rural areas living on less than a dollar a day. Priorities in all its programs are to address basic needs in areas such as health, education, water, sanitation, hygiene, disease prevention, food and nutrition security, and income generation.

HIV Technical Capacity

DAPP-Zimbabwe's comparative advantage on any HIV project is in community mobilization for the uptake of HIV prevention services, including testing and community health services among priority and key populations. The organization adopts an innovative, integrated, holistic HIV prevention, treatment, care and support approach at both community and facility levels that promotes demand and utilization of HIV services. The organization has a solid track record in the PEPFAR priority districts of Mashonaland East, Mashonaland Central and Harare Provinces where it has strong relationships with health services and communities.

DAPP has successfully implemented a wide range of health projects that cut across the broader health sector, including on projects such as Total Control of the Epidemic (TCE), Hope Zimbabwe (HIV), Total Control (TC) - TB (integration of TB and HIV), Elimination 8 (mobile and in-situ Malaria testing along border areas) and C-WASH (fighting disease through access to water and sanitation facilities). DAPP has been a recipient of funding for HIV from both USAID/PEPFAR, Global Fund and others.

Cooperating closely national and international partners, DAPP's core work is with individuals and families to empower them to create better living conditions for themselves and their communities through programs, such as:

Total Control of the Epidemic (TCE) – 1996-2009

DAPP has implemented HIV programs in Zimbabwe since 1996 reaching more than one million people. Through the TCE program that was implemented in Bindura, Guruve, Mazowe, Mabvuku/Tafara, Zhombe, Shamva, Zvimba and Mt Darwin, DAPP has managed to improve HIV & AIDS knowledge, access to condoms, treatment adherence, and uptake of HTC/VCT, PMTCT and other SRH services for approximately one million people. The TCE project played a crucial role in empowering women to take the lead in developmental processes and to build assertive skills of girls and women. One evaluation report (for the Guruve TCE Project, 2007-2009) shows that 24,574 people were mobilized for HIV testing; 5,268 pregnant women were mobilized for PMTCT services; 249 TRIOs (treatment buddies) were formed and 76 Positive Living Support groups. The evaluation study also shows that HIV knowledge increased by 23% (from 75% to 98%) in the district.

HOPE Zimbabwe (1998 - Current)

HOPE in Bindura Province was DAPP's first HIV project aiming at providing HIV services to the province. In the period from 1999 to 2015 HOPE ran a NewStart Centre and facilitated HIV testing and counselling for 10,977 people. During this period, it became a popular centre for people to seek advice and services on HIV, and outreach campaigns were carried out on the project, as well, for example reaching out to Mudzi, Mabvuku/Tafara and Guruve.

In recent years, HOPE has worked closely with 11 clinics to offer post-test counselling to people who have tested HIV positive. Many participants in the post-test counselling have been encouraged to form TRIOs, small support groups, which then have been mentored by HOPE volunteers and therefore obtained excellent adherence results. Over the years more than 600 TRIOs have been formed for treatment support.

In, 2019, the HOPE Bindura project reached 42,174 people with key HIV/AIDS information and messages. HOPE Bindura referred 25,635 people for HIV counselling and testing at local health service providers. A total of 830 PLWA were organised in support groups and trained on proper nutrition and treatment adherence. A total of 212 TRIOs were formed. A total number of 3,318 youth and children benefited from HOPE Bindura activities through participation at Youth Friendly Corners and sporting activities. 1,777 people participated in

opinion forming meetings with communities and other stakeholders on gender based violence and early child marriage among other topics.

Total Control of Tuberculosis (TC-TB) (2015 - Current)

DAPP is currently implementing the Total Control of TB (TC-TB) program in Makoni District. The project goal is to reduce the rate of new infections of TB and to provide appropriate packages of treatment, care and support to people living with HIV and/or TB and their families. This will be achieved by increasing HIV and TB case finding and linkages to care at community and facility level. Main activities include:

- Addressing TB and HIV related stigma;
- Screening people for TB at the doorstep;
- Collecting sputum at the doorstep;
- Transporting sputum to the nearest diagnostic centre;
- Collecting test results and informing the clients;
- Providing HIV counselling and referral during family visits;
- Contact tracing;
- Treatment adherence for TB and HIV;
- Support for TB treatment completion.

DAPP utilizes a network of community-based volunteers, HIV/TB support groups at the community level, and health workers at the community and clinic level. The groups include people living with TB/HIV as peer educators. DAPP uses volunteers to complement the efforts of full-time staff in the TC-TB project as well as collaborating with community health workers. In all its health programmes, DAPP collaborates with MoHCC in trainings, monitoring and evaluation and backstopping of project activities.

To date the project has reached 150,100 people with TB and HIV information and messages. DAPP has trained 176 community volunteers and 141 community leaders in the district. Additionally, 13 DAPP staff have been trained by TB Alert in TB and HIV integration. Under the existing project 99,283 people have been screened for TB and 5,775 presumptive cases identified, of which 4,050 were tested. 106 TB cases have been identified including 54 HIV/TB co-infected patients. The project offered HIV testing and counselling to 1,394 people. 110 TRIOS were established to support treatment adherence. DAPP also donated a GeneXpert machine which is currently being used by Rusape Hospital.

Promoting Sexual and Reproductive Health Rights (SRHR) Joint In Circuit (JIC)

From 2014-16, DAPP conducted a program on Sexual Reproductive Health in Mash Central and Manicaland. The program used the tool developed by GIZ called JIC (Join in Circuit), which equips youth with knowledge and information on behaviour change. The JIC sets were established as community resource centres and helped youth in particular to obtain access to

reproductive health and family planning, messaging, services and products, and how to mitigate against HIV and other sexually transmitted diseases. DAPP Zimbabwe has reached more than 3,000 adolescents through the 3-year program targeting youth aged 15 - 24 years old who were both in- and out-of-school. Nurses were trained in the provision of youth-friendly services, life skills and adolescent reproductive health in order to provide access to appropriate, targeted sexual and reproductive health services. This effort included establishing a youth-friendly corner at Mutasa Clinic where adolescents have access to SRHR information. DAPP has since established at least 10 youth-friendly corners in Mutasa (Child Aid), Harare (Hope Harare), Bindura (Hope Bindura) and Rushinga (Child Aid).

Geographic Experience and Coverage

DAPP-Zimbabwe has much to offer from its geographic experience, relationships with key stakeholders and credibility in communities, and complementary projects at the local, provincial and central levels among government ministries and civil society organizations. DAPP Zimbabwe has a proven track record of working in various geographic regions of Zimbabwe, including overcrowded urban areas and hard-to-reach rural communities and border settlements. DAPP is operational in Mashonaland Central, Manicaland, Matabeleland South, Masvingo and Harare provinces. In addition, DAPP previously worked in Mashonaland West on the TCE program and in Mashonaland East on the Hope program.

List of Health Programs since 2010

Donor	Grant Amount	Name of Project	Project goals and objective/ project activities	Location and duration
Funded by members of Humana People to People in Europe and US with app. 100,000 usd per year.	On average 100,000 usd per year.	Hope Bindura	<p>The goal is to raise awareness about HIV, TB, Sexual Reproductive Health, STI's and other related diseases.</p> <p>Conduct HIV testing and counseling, mobilization for PMTCT, VMMC, and distribution of condoms.</p> <p>Conducts post-test counseling and creates support structures for PLHIV, including nutrition support.</p> <p>Trains community volunteers and works closely with Min of Health in the district and local health facilities.</p>	Bindura from 2010 up to date
Population Service	US\$200,000 renewed	Hope Bindura	HIV Counseling and Testing (New Start).	2010-2015

Donor	Grant Amount	Name of Project	Project goals and objective/ project activities	Location and duration
International	annually			
Humana People to People Deutschland e.V.	US\$240,000	TC TB Makoni	The goal is to reduce the rate of new infections for HIV and TB and to provide appropriate packages of treatment, care and support to HIV and TB infected people and their families. The objective is to increase HIV and TB case finding and linkages to care at community and facility level.	Makoni district and January 2017- December 2019
Global Fund Malaria E8 through ADPP Mozambique	US\$1,000,000	“Installation and Implementation of Health Service Posts for Expanded Access to Malaria Diagnosis, Treatment, and Surveillance”	To support national cross- border and district community based malaria elimination programs to address the problem of cross- border parasite transportation targeting the migrants and mobile populations and the local malaria transmission in underserved hard to reach communities in border districts	Rushinga, Mutasa and Beitbridge districts and May 2017 – March 2019
USAID DGP	\$1,499,703.00	Community Water Supply, Sanitation, Hygiene (C-WASH) and Natural Resource Management	To address intricate and interwoven components of food availability, access and utilization and WASH, so as to improve nutrition and health status of beneficiaries.	Nyanga, Mutasa, Chipinge and Chimanimani Districts 2015-2017
Practical Action and EU	\$1,000,000	Water, Sanitation and Hygiene Promotion	To adapt and promote community led approaches as a model for service delivery of safe water, adequate sanitation and application of health and hygiene practices in rural districts of Gwanda and Mwenezi of Zimbabwe.	Mwenezi 2011-2016
Oak Foundation	\$240,000	Sexual Reproductive Health and Rights	To strengthen HIV/STI prevention for adolescents and youths (15-24 years) through community capacity and involvement.	Bindura 2013-2016
GIZ	\$210,000	Sexual Reproductive Health and Rights	To empower women and girls to fight harmful traditional practices, poverty and HIV/AIDS and enable them involve fully in	Mutasa 2009-2015

