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Introduction

In 2015, WHO and UNAIDS developed the **Global Standards for Quality Health Care Services for Adolescents**. The aim of these standards is to assist policy-makers and health service planners to improve the quality of health care services for adolescents, ensuring they find it easier to obtain the health services that they need to promote, protect and improve their health and well-being. Each of the eight Global Standards reflects an important part of quality services and defines the required level of quality in the delivery of services.

The Zvandiri programme is a comprehensive, layered, differentiated HIV service delivery model for children, adolescents and young people. Services are primarily led by trained, mentored young people living with HIV, aged 18-24 years, known as Community Adolescent Treatment Supporters (CATS). CATS provide peer-led services across the HIV cascade, supported by health care workers (HCWs), social protection officers, Zvandiri Mentors and implementing partners. Additional services are provided for HCWs, social protection cadres, families and communities to strengthen outcomes for children, adolescents and young people.

This case study tells the story of Vimbai, a CATS from Harare, Zimbabwe. Through Vimbai's story, we demonstrate how the *Zvandiri* programme applies each of the Global Standards, highlighting the vital role of young people in ensuring the provision of comprehensive quality health services which respond to their needs. Programme and research data confirms improved uptake of HIV testing services, linkage to antiretroviral therapy (ART), retention, viral suppression and mental health among adolescents engaged in *Zvandiri*, compared with standard care.

¹ WHO (2015). Global Standards for Quality Health-Care Services for Adolescents: A guide to implement a standards-driven approach to improve the quality of health-care services for adolescents. Geneva: WHO. Available at: https://www.who.int/maternal_child_adolescent/documents/global-standards-adolescent-care/en/

The health system must ensure that adolescents are knowledgeable about their health and know where and when to obtain health services.

Trained, mentored Community Adolescent Treatment Supporters (CATS) provide adolescent-focused health information for their clients living with HIV, to ensure they are knowledgeable about their health and are linked to the services they need.

> Vimbai engages Kundai in a counselling session during a home visit. She is using a card game called Masas' to explain ARVs, adherence, the immune system and viral load in simplified terms. During the visit, she identifies 'red flags' – signs that Kundai needs further support – and links him to appropriate support services.



The health system must ensure that adolescents are knowledgeable about their health and know where and when to obtain health services.

CATS adopt an index case-finding approach to support undiagnosed children, adolescents and young people to get tested for HIV. During home visits and clinic reviews with their HIV positive clients, CATS identify siblings, children or sexual partners in need of testing for HIV.

After the counselling session with Kundai, and with permission from the caregiver, Vimbai is now sharing information around HIV testing services with Kundai's sister, explaining how to use the HIV self-test kit. After testing and receiving a reactive result, Vimbai links Kundai's sister to the clinic for confirmatory testing.



The health system must ensure that parents and guardians and community organizations recognize the value of providing health services to adolescents.

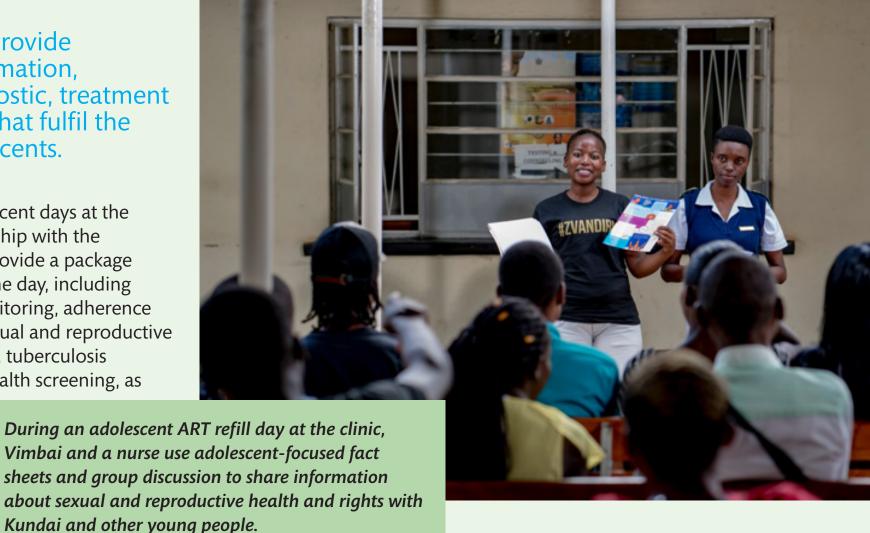
CATS provide information, counselling and support to the caregivers of their clients through home visits, clinic reviews, phone calls, SMS, support groups, and during caregiver meetings supported by *Zvandiri* staff and HCWs.

During a home visit, Vimbai provides Kundai's father with caregiver support through ART and adherence counselling. These sessions help caregivers to understand the care and support their children need and prepare them to support with issues such as adherence. Vimbai also conducts a mental health screening for Kundai and provides Kundai and his father with information about mental health conditions.



Facilities need to provide a package of information, counselling, diagnostic, treatment and care services that fulfil the needs of all adolescents.

CATS co-facilitate adolescent days at the health facility in partnership with the clinic staff. These days provide a package of services all on the same day, including ART refill, viral load monitoring, adherence support, counselling, sexual and reproductive health and rights (SRHR), tuberculosis screening and mental health screening, as well as fun games.



Health care providers must respect, protect and fulfil adolescents' rights to information, privacy, confidentiality, non-discrimination, non-judgemental attitudes and respect.

Health care workers are trained and mentored to provide adolescent-friendly services. CATS are core members of this health care team. Trained health care workers and CATS respect and protect the individual needs and experiences of their clients. They nurture a trusting, caring and non-judgmental relationship with their clients, enabling them to talk about the challenges they face, so that they may then be supported to develop coping strategies and resilience and to receive the services they need.



Health facilities must have convenient operating hours, a welcoming and clean environment and have equipment and supplies that ensure effective service provision.

CATS work alongside the doctors, nurses and counsellors and have been fully integrated within their respective clinics. When adolescents attend the clinic, the CATS is there to welcome them, to provide dedicated support, and to link them to the services they need.



Vimbai is counselling Kundai during a routine clinic visit. She uses information and counselling tools which have been developed by young people, for young people. These tools cover a wide range of topics including ART and viral load, mental health, SRHR, tuberculosis, disability and prevention of mother-to-child transmission.

Health facilities must have convenient operating hours, a welcoming and clean environment and have equipment and supplies that ensure effective service provision.

Services are planned so that adolescents can be seen on Saturdays if a week day is inconvenient for them. But CATS also follow up with their clients by SMS or WhatsApp to check in on how they are doing, any challenges they may be facing, and to send reminders for clinic visits, adherence and support groups.

Vimbai checks in on her clients and provides counselling and follow up through phone calls. Mobile health is important for CATS in sending adherence and clinic reminders and booking appointments for future home visits. Mobile health has been scaled up during COVID-19, enabling CATS to sustain virtual case management of their clients.

Health facilities must have convenient operating hours, a welcoming and clean environment and have equipment and supplies that ensure effective service provision.

In between clinic appointments, adolescents are visited at home by their CATS. This is a critical opportunity for adolescents to be supported in their own environment by a trusted peer who understands their needs and experiences.

Vimbai arrives at Kundai's home for a routine visit. During the visit, Vimbai uses adolescent-focused counselling approaches to support Kundai and to identify challenges he may be facing. She will also ensure he is linked to additional services as needed and counsels and supports Kundai's caregivers.



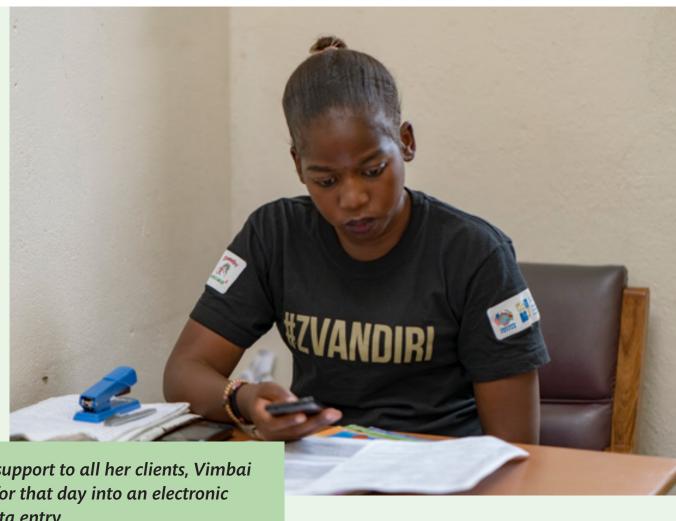
Health facilities must provide quality services to all adolescents, irrespective of their ability to pay, age, sex, marital status, education level, ethnic origin, sexual orientation or other characteristics.

CATS manage a caseload of clients that includes adolescents with a wide range of experiences. This includes adolescents with mental health conditions, disability, those at risk of or experiencing abuse or neglect, young key populations and young mothers and fathers.



Health facilities must collect, analyse and use data on service utilization and quality of care, disaggregated by age and sex, to support quality improvements.

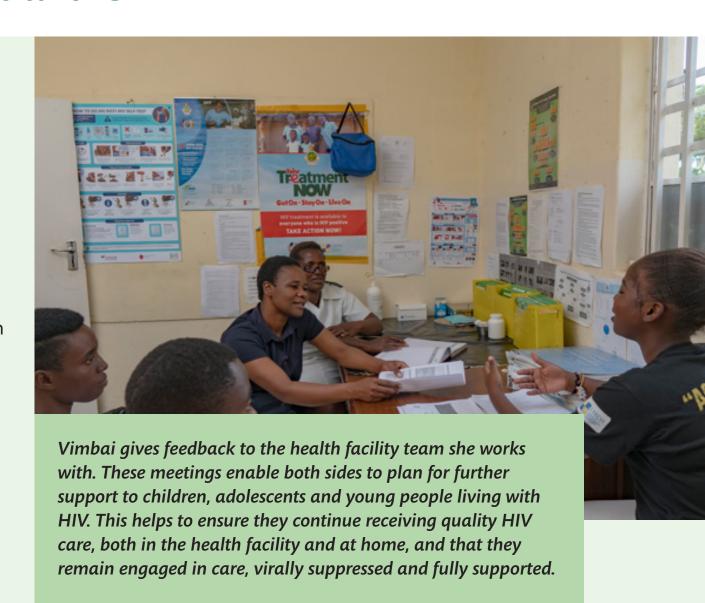
In Zimbabwe CATS manage their caseload data using the Zvandiri Mobile Database Application (ZVAMODA). This digital case management system enables CATS to enter real-time data on the clinical and psychosocial circumstances of each individual client, as well as the services they receive. Working with health facility staff, this is then used to track and plan for service provision.



After providing care and support to all her clients, Vimbai enters all contacts made for that day into an electronic database for real-time data entry.

Adolescents must be involved in the planning, monitoring and evaluation of health services and in decisions regarding their own care, as well as in certain appropriate aspects of service provision.

CATS work in partnership with health facility staff to plan, monitor and evaluate the health services available for adolescents in their districts. This is done at site level, but also at district, provincial and national level, where CATS are actively engaged in planning and monitoring of the national response for children, adolescents and young people living with HIV.



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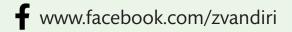
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