



A report on HIV Prevention Communication Training (New Evidence – New Thinking) held in Morogoro Hotel from 19th-22nd January 2010, Morogoro Region.

Introduction

As in other countries of sub-Saharan Africa, AIDS has become a serious threat to the health and well-being of the Tanzanian population. Mujinja P. *et al*, (2009) narrate that about 1.5 million of Tanzanians are infected, of which approximately 10% of the number are children, in on top of that, it is estimated that over 200,000 of the people are infected with HIV each year. While being encouraged with the recent decline in national HIV prevalence as between 2003 to 2008, the overall adult prevalence rate fell by 1% (from 6.7% to 5.7%)¹. In the actual fact, the rate and numbers of new infections - over 200,000 annually is very high. This situation means that the current prevention interventions are not having the desired impact and in the long run, investments in HIV/AIDS care and treatment will be overwhelmed.

Basing on that ground, stakeholders who dealt with the AIDS fight among communities, struggling find the source of this trivial increase in new infections, including reviewing policies, various acts and prevention techniques used to combat this pandemic disease and come up with measures or good strategies in a manner that will suit the prevailing situation. That includes finding what works and what does not work in dealing with HIV and AIDS.

Therefore Tanzania AIDS Forum (TAF) as an umbrella in collaboration with the Centre for Aids Development Research and Education (CADRE) of South Africa prepared a training to empower different organisations from various

¹ 2007-08 Tanzania HIV/AIDS and Malaria Indicator Survey (THMIS)

places of the country. The training was about HIV Prevention Communication which focuses on empowering participants to find out what really works as far as prevention is regarding and what does not work.

The aim was at the end of the day the organizations within their working area and prevention (one of the thematic area) come up with the suitable solution to curb the situation, finding the intervention which will fulfil the intended objectives.

Participants of the training

All practitioners from various organizations dealing with HIV prevention in



Tanzania, under the umbrella of TAF were participated in the training, including the TAF Board members. *Participants list is attached at the end of the report as annex 01 shown.*

Facilitators and events management in training

The four day training was facilitated by Dr Kevin Kelly – The Director of CADRE and Dr. Asta Rau (senior researcher) also from CADRE. Apart from that, Violet Mathew and Agnes Kisala were managing the whole event, in a manner that the training goes as planned.

Objectives of the training

- Orienting participants the key ideas and evidence in new prevention thinking
- Improve knowledge and understanding of priority prevention thinking
- To guide participants in identifying and discussing challenges and opportunities for prevention programming in their organizations and communities.

Topics taught

- a) Know your epidemic. Know your response
- b) Prevention design and management
- c) Pattern of sexual association
- d) Positive prevention

A. Know your epidemic. Know your response

The main issue under here was to empower participants to come up with up to date HIV/AIDS facts and trends in our country and the whole world at large. In this manner people could change and provide new prevention thinking (evidence based approaches towards the fight this pandemic disease). i.e.

- I. Get the clear picture of the disease in our communities we are living
- II. Highlights modes of transmission
- III. Reviewing prevention options that what works? And what does not work?

B. Prevention design and management

On this, facilitators were trying to orient the participants with the importance of communication in prevention of HIV among people. Being contributed by multiplicity of factors HIV prevention need to be designed in a manner that can suit and leads to successful results, sometimes a combination of intervention/programs can be of very vital towards the fight, or the use of other model known as Results Based Management (RBM).

C. Pattern of sexual association

The aim here is to identify how multiple concurrent partnership work, knowing the source/drives of MCP, and find the suitable communication strategy for dealing with it. This includes identifying the groups who are at higher risk of engaging into these activities.

D. Positive prevention

This aim at orienting participants on the latest/current thinking on preventing with HIV positive people. Developing prevention priorities for positive people, communication among positive and interventions needed to prevent positive prevention.

Challenges arose

- ❖ The government is concentrating on PMTCT and VCT and forgetting supplementing breast feeding as a preventive measures to young children's.
- ❖ The training time /period were very short regarding the importance of the course.
- ❖ Communication is very big problem to most people in relation especially the married couple.
- ❖ The risk of getting infected with the virus is high during the first three weeks.
- ❖ The use of condoms as a tool measure of prevention is not consistently especially for long multiple concurrent partnership overlapping at a time.
- ❖ Married people are engaging into multiple concurrent partnership

Observations

- Prevention being one of the thematic area among others in Tanzania, it has been implemented by a wide range of stakeholders, including line ministries and their networks at regional, district and sub-district levels, international and national organizations, Civil society organization (CSO's), private sectors, PLHIV networks, research institutions, and international development partners.
- Inadequate linkage between the Civil Society organizations, especially when implementing their project.

- There's competition of resources when implementing HIV prevention programs among organizations and sometimes repetition of the certain activities in the same area.
- Most of the prevention strategies used is not working as it's not community based priorities instead its donor based strategies.

Recommendations

The prevention of HIV infection is a national priority; hence to achieve the intended goal combination of intervention/programs will be an ideal strategy towards the fight against this pandemic disease. In that base CSO's should program their activities based on the real situation prevailing on hand, in a sense that implement those activities which brought positive results (what work) and identify the obstacles and means of solving for better welfare of the Tanzanian nation.



Training facilitator (Asta Rau), in a photo with all participants in the prevention Training