



Republic of Zambia  
Ministry of Health

## **HIV Self-Testing Task Force**

### **Terms of Reference**

**Directorate of Disease Surveillance, Control and Research**

**2016**

Under the HIV Testing and Counseling Technical Working Group (HTC-TWG), HIV Self-Testing (HIVST) Task Force supports Ministry of Health (MOH) to explore the potential of HIV self-testing aimed at increasing access to and coverage of HIV testing essential for achievement of the UN 90–90–90 global HIV targets – the first target being diagnosis of 90% of people with HIV. HIVST is a process in which an individual who wants to know his/her HIV status collects a specimen, performs a test and interprets the result by him- or herself, often in private.

## **Responsibilities**

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### **HIVST Policy development & Guidance**

- Advocate to high level policymakers, partners and key stakeholders for attainment of 90-90-90 global targets
- Advocate for HIV self-testing as an additional strategy to help mitigate HIV testing gaps
- Advocate for support in formative research on HIVST distribution to advise the National AIDS Council (NAC) and MOH on development of HIVST scale-up policies
- To provide technical guidance to the NAC and MOH during review of the Zambian national HIV testing guidelines and algorithm to incorporate HIVST
- To provide technical support for development of HIVST implementation tools and plans, in line with national and international targets and standards

### **HIVST Program Planning**

- To guide HIVST kits quantifications, procurement, supply chain and management systems by providing relevant recommendations for strengthening HIVST services
- Based on lessons from HIVST formative research, provide technical guidance regarding best practices for strengthening linkage and retention in care for HIV self-testers
- To conduct HIVST governance and program review in line with the Terms of Reference (TORs) of the Task Force under HTC-TWG through semi-annual planning and review meetings

### **HIVST Program Review**

- Conduct annual reviews of HIVST service coverage and provide programmatic and technical advice for improved performance
- Provide feedback and technical support to the GRZ and its implementing partners with regard to HIVST programmatic activities, studies and implementation
- Review the monitoring and evaluation (M&E) system, data collection, reporting structure and forms to incorporate HIVST, including reporting of social adverse events and pre and post market surveillance
- Provide evidence-based advice to the GRZ through data analysis and reporting
- Advise the GRZ on effective use of human resources for health in areas needing additional support and technical assistance for incorporation of HIVST services and care for self-testers

## Evidence Generation on HIVST community distribution

- In collaboration with the MOH national health research authority, review HIVST study findings to better inform GRZ on policy development for HIVST scale-up
- Stay abreast of HIVST evidence generation (studies, research and implementation) from other countries implementing HIVST in the region

## Functional Structure of the HIVST –Task Force

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The HIVST Task Force is a sub-committee within the HTC-TWG, with the following functional attributes:

- The HIVST –Task Force will be chaired by the GRZ through MoH.
- In order to ensure timely guidance and decisions, be it technical or programmatic, the HIVST Task Force should be chaired by the Director of Disease Surveillance, Control and Research, or any relevant staff of the MOH who has been delegated.
- The secretary of the subcommittee will be voluntary, on a rota basis among group members.
- Members of the HIVST Task Force should represent relevant organizations involved in HIV self-testing research and implementation (GRZ, donor agencies, UN organizations, non-governmental organizations, faith-based organizations, private organizations, higher learning institutions, research institutions, and associations, community voices and social scientists), the regulatory bodies (ZAMRA), representatives from procurement and national HIV reference laboratory, private health sector representation and pharmacy council

## Conduct of Meetings

- Quorum is at least 51% representation of all member organizations on record.
- Meetings will be held quarterly on the last Thursday to achieve the responsibilities of the task force.
- Extraordinary meetings may be called by the chairperson more frequently as need arises.
- The core business of every meeting agenda shall include to include at minimum:
  - a) HIVST Technical updates on research and implementation
  - b) Logistics and supplies
  - c) Monitoring and evaluation
  - d) Communications

## Channel of Communication and Reporting of Meetings Resolutions

- Minutes are the responsibility of the task force secretary, and must be ready no later than 5 working days following the meeting, and circulated to all task force members by e-mail
- After every Task force meeting, the Chair should inform the HTC-TWG regarding the resolutions made at the task force seating.
- The Chair should provide feedback from the HTC-TWG at the next Task force meeting (or earlier, depending on the urgency of the matter)
- Resolutions that require memos or circulars should be developed by the Secretariat and transmitted to the HTC-TWG

## **Collaboration with other groups and task forces**

- Primary HIV prevention: Male Circumcision TWG
- Sexual and reproductive health: Family Planning TWG
- HIV care and treatment: Adult/Paediatric ART TWG, PMTCT TWG
- Monitoring and Evaluation: M&E TWG
- Laboratory TWG