



Ndivhuwo Rambau, Ritshidze & Treatment Action Campaign, South Africa
Building forward: Differentiated service delivery as a catalyst for sustained and integrated HIV services amid funding uncertainty

Lessons from South Africa: Impact of funding cuts on service delivery



 **IAS 2025**

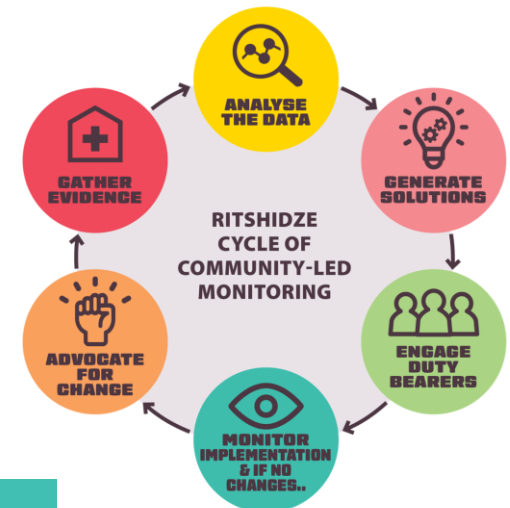


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Overview of Ritshidze CLM programme in South Africa



- Largest community-led monitoring system globally, led by the Treatment Action Campaign (TAC) with Health GAP & amfAR
- Empowers communities to collect and analyze data on public health services
- Focuses on improving HIV services and retention in care through direct accountability
- Uses surveys, interviews, and observations in clinics and communities
- Engages healthcare workers, people living with HIV (PLHIV), key populations, and facility users
- Since 2018:
 - 333,507 public healthcare users surveyed
 - 191,893 PLHIV surveyed
 - 44,942 key population members surveyed
 - 462 in-depth interviews conducted
- Results used to advocate for improvements through:
 - 60+ State of Health reports
 - 53 community accountability meetings
 - Thousands of quarterly reports & feedback sessions at all levels (facility to national)



All Ritshidze data collection tools and our data dashboard are available through our website: www.ritshidze.org.za

April- June 2025 Ritshidze data collection

	TOTAL	Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo	Mpumalanga	North West
Districts assessed	17	2	3	4	3	3	1	1
Facilities assessed	353	47	57	81	60	61	27	20
Patient surveys	17,664	2,260	2,971	3,932	3,204	3,155	1238	904
People living with HIV surveys	8,862	1,268	1,478	1,960	1,593	1,514	592	457
Facility manager surveys	337	43	56	78	60	60	20	20
Observations	333	42	52	77	59	59	24	20





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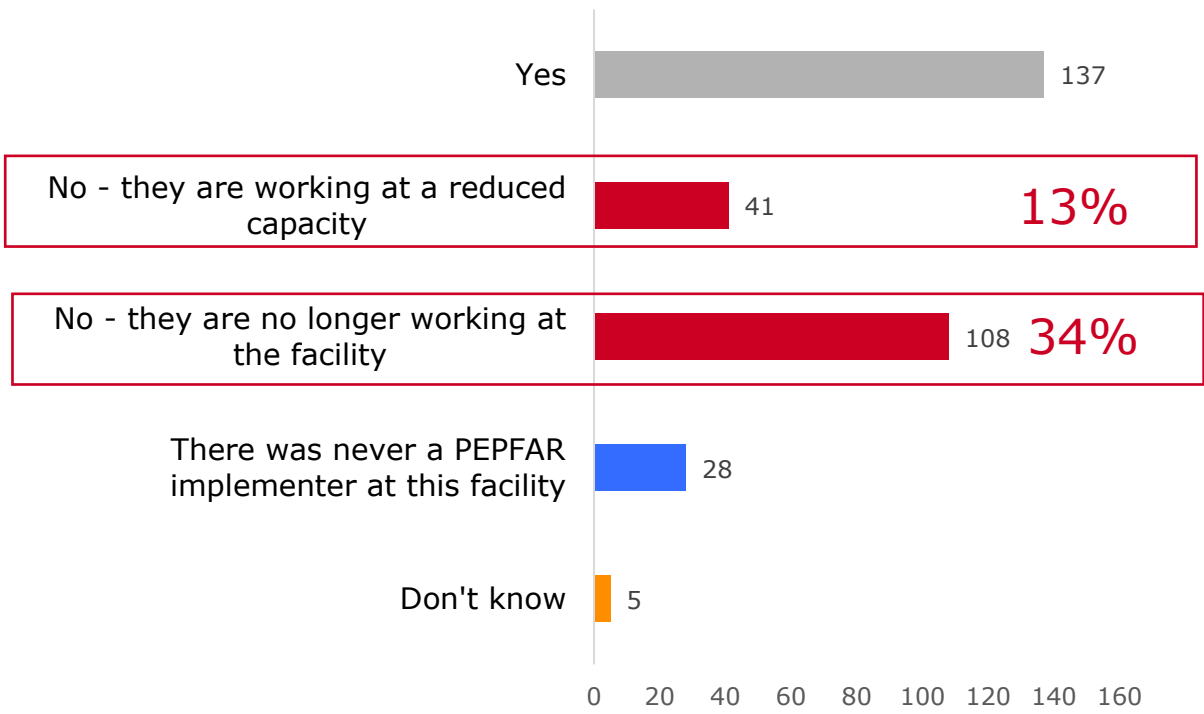
Results from facility staff surveyed

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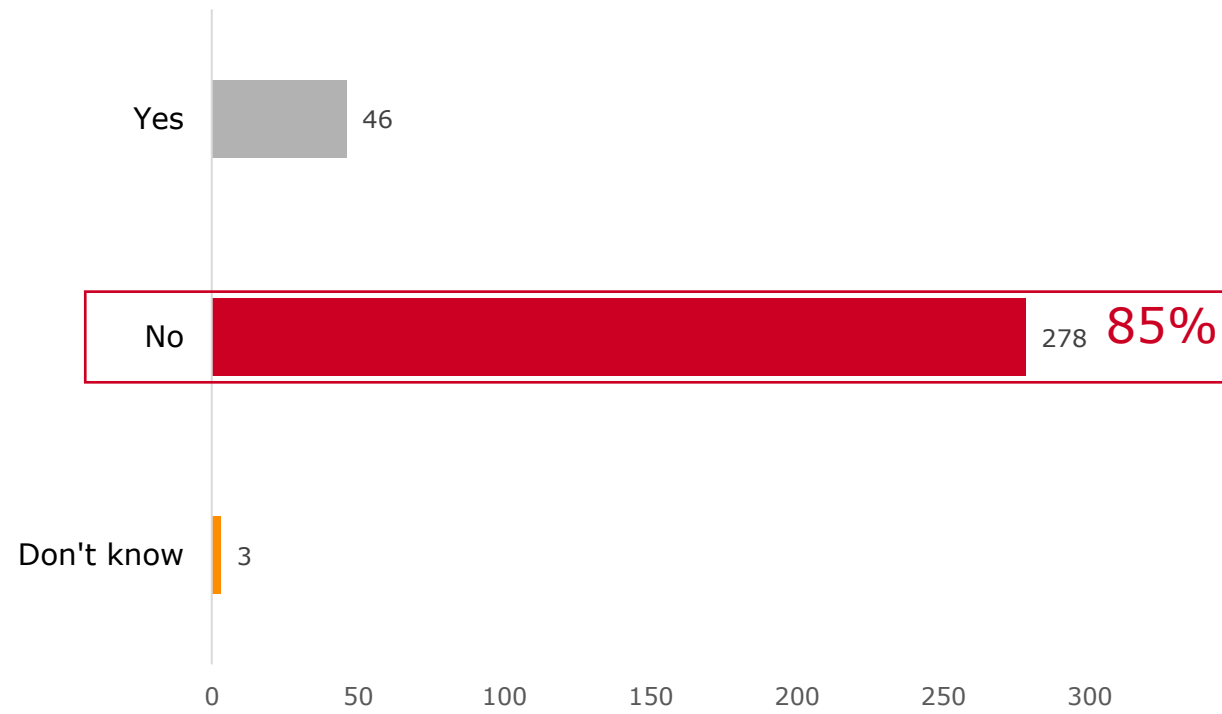
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Facility staff surveyed: **47%** of facility staff surveyed reported **reduced capacity** after PEPFAR disruptions

Is the PEPFAR implementing partner working as usual?

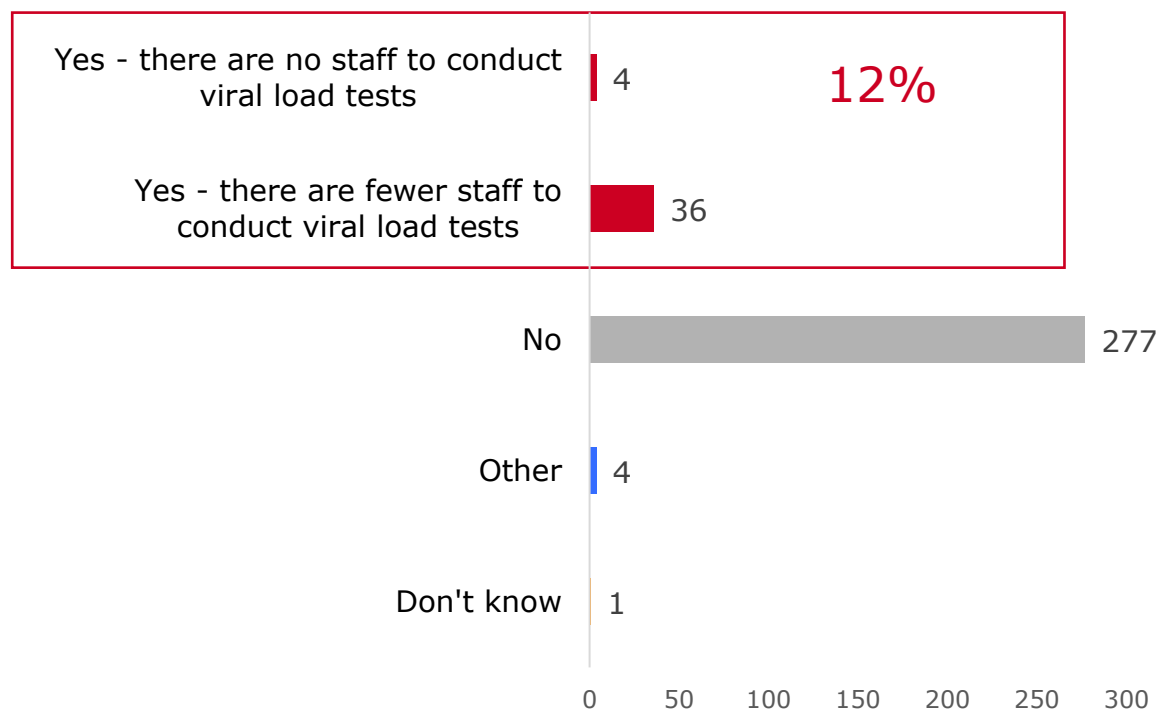


Facility manager: does the facility have enough staff?

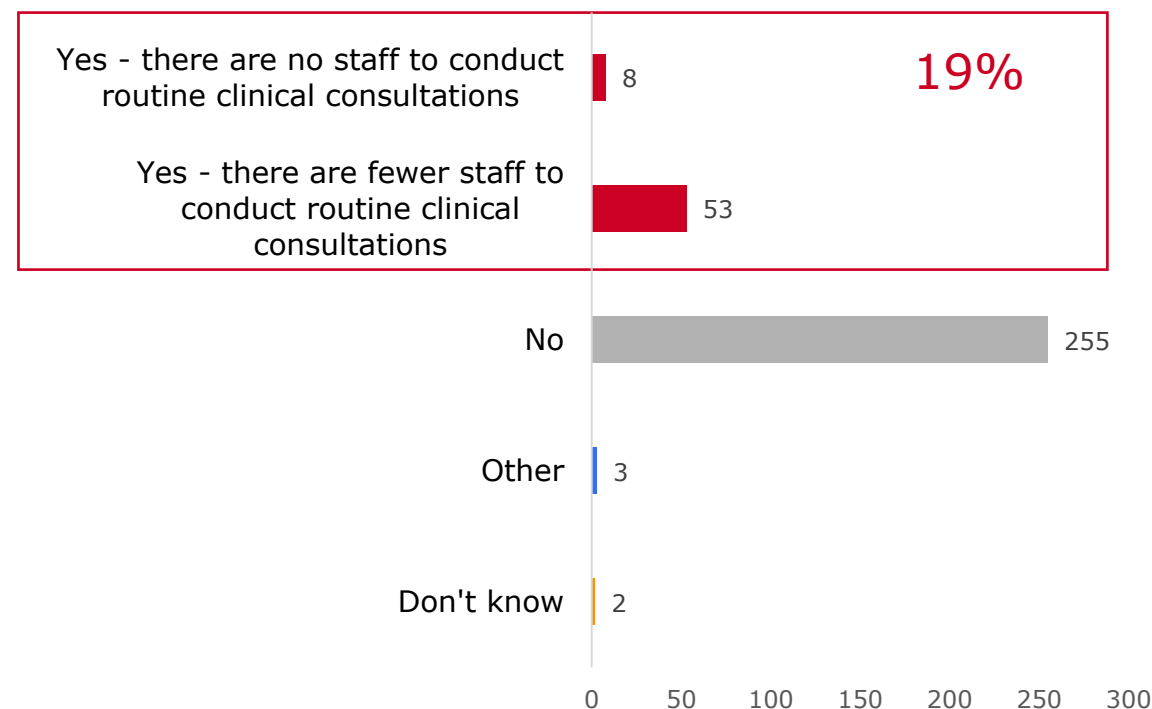


Facility staff surveyed: Report **negative impact on viral load testing and routine clinical consultants** after PEPFAR withdrawal

Have viral load testing services been affected by the PEPFAR withdrawal?



Have routine HIV clinical consultations been affected by the PEPFAR withdrawal?





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Results from patients surveyed

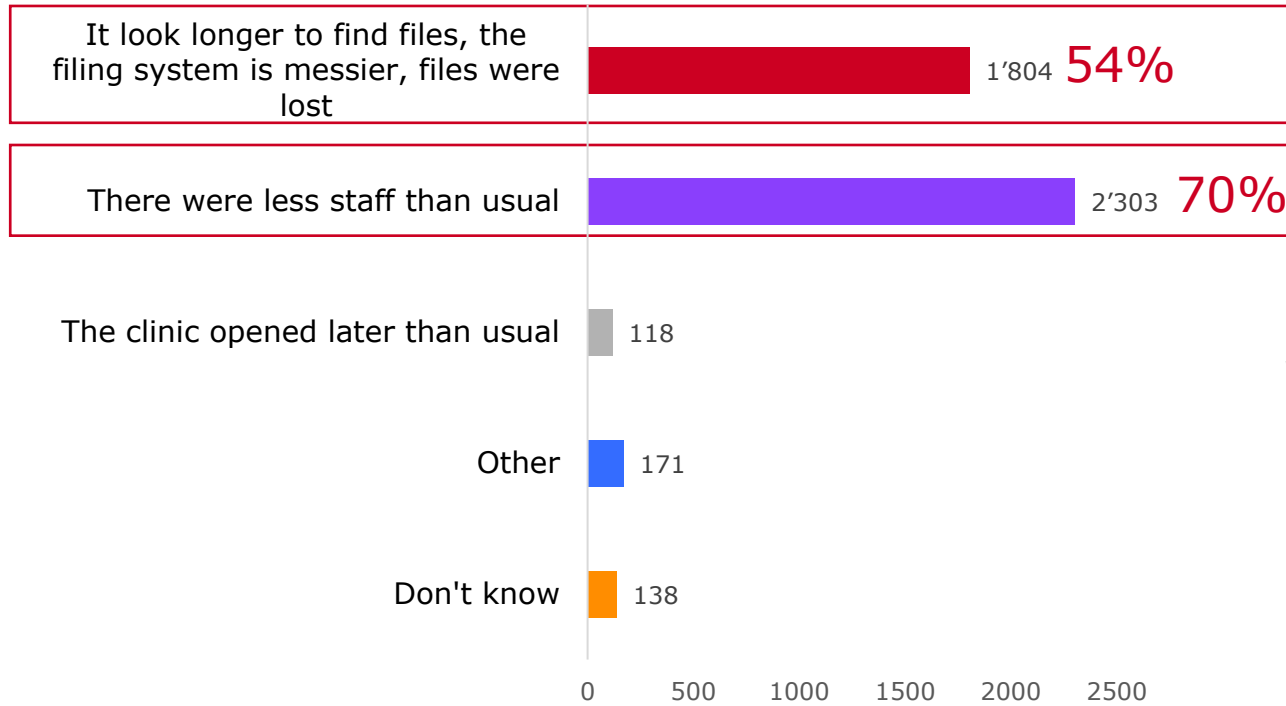
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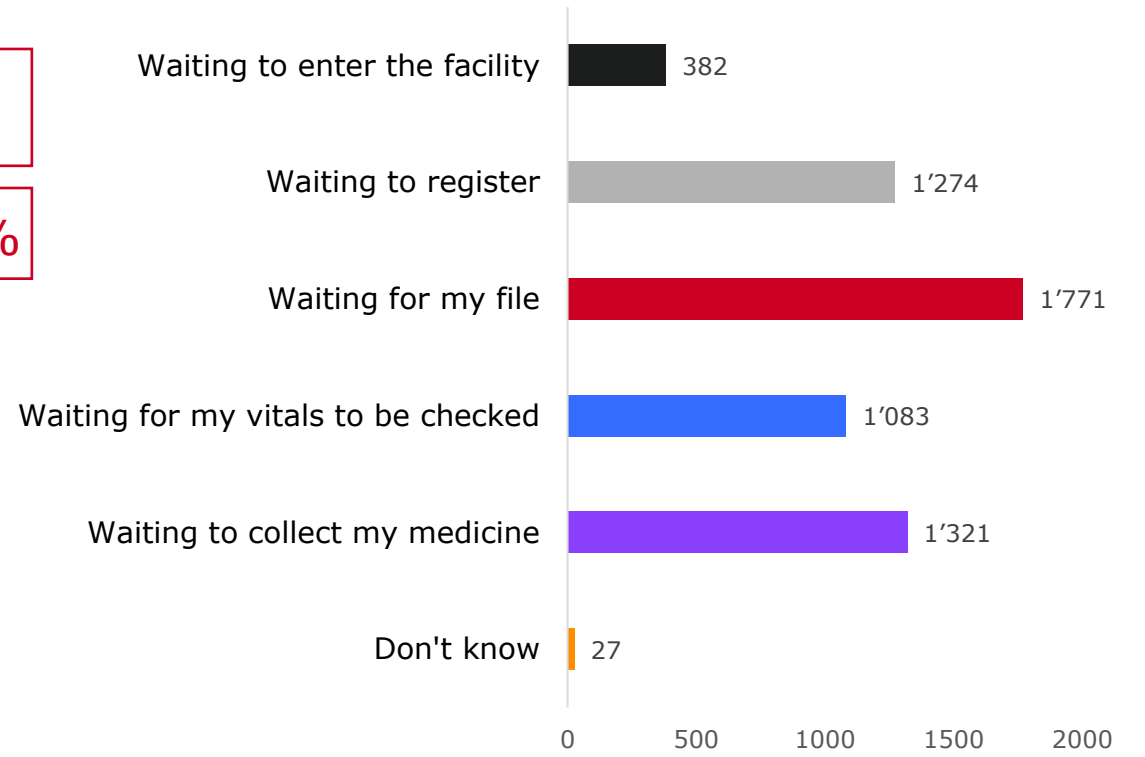
Patients surveyed: **22%** of public healthcare users reported **longer delays** than before PEPFAR disruptions: *Why and where...*



Why do you think the delays were longer than usual?

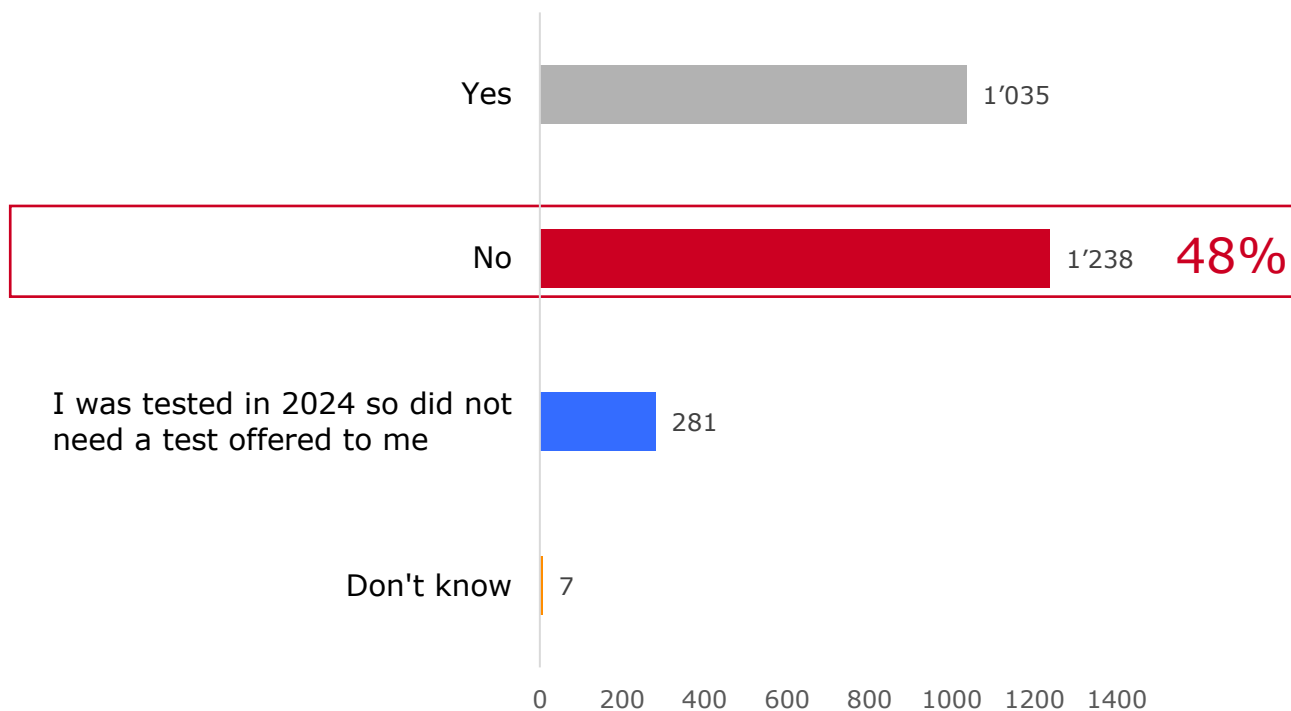


Where were the delays longer than usual?



Patients surveyed: **48%** reported **not being offered HIV testing** when attending a health facility

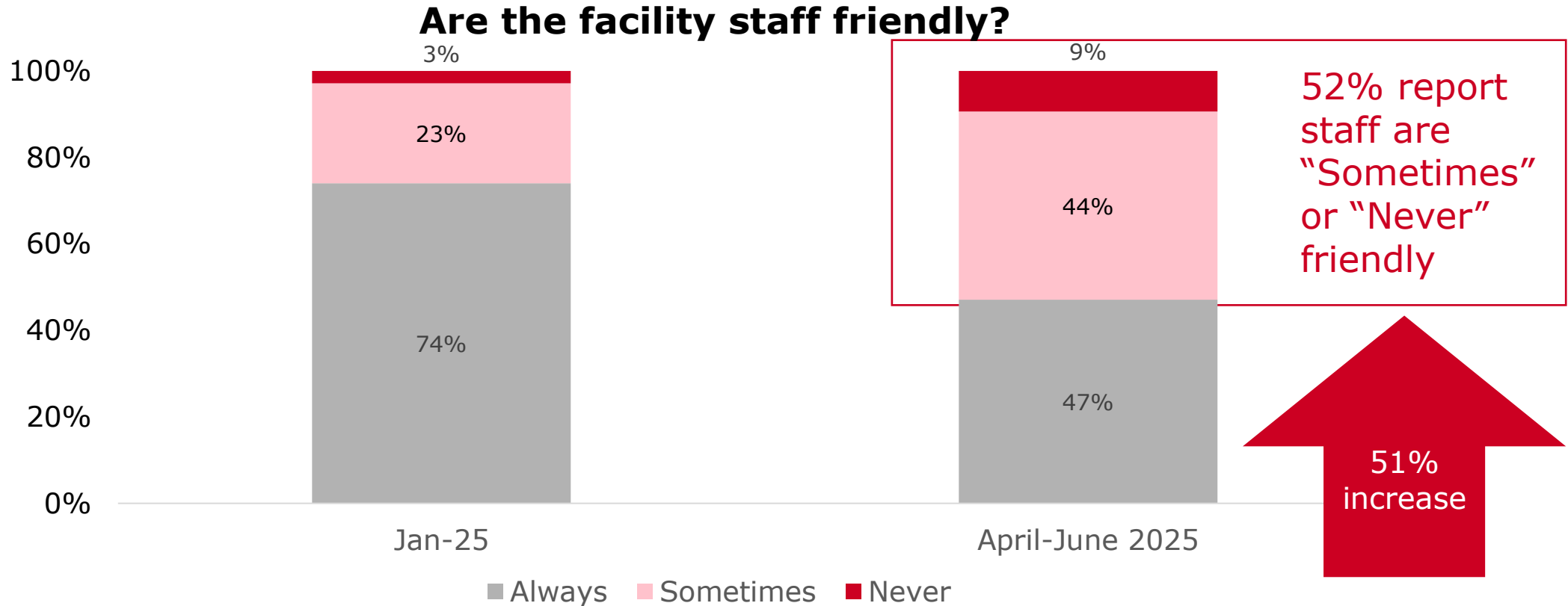
Were you offered HIV testing today (including an HIV self-test)?



Were you offered HIV testing today (including an HIV self-test)?

Province	Yes	No	I was tested in 2024 so I did not need a test offered to me	Score
North West	13	2	4	87%
Eastern Cape	184	107	27	63%
Gauteng	193	136	108	59%
Limpopo	39	29	17	57%
Mpumalanga	247	247	16	50%
KwaZulu-Natal	211	408	94	34%
Free State	148	309	15	32%

Among patients surveyed: Less friendly services since January in KZN, Mpumalanga and the Free State





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Results from people living with HIV surveyed

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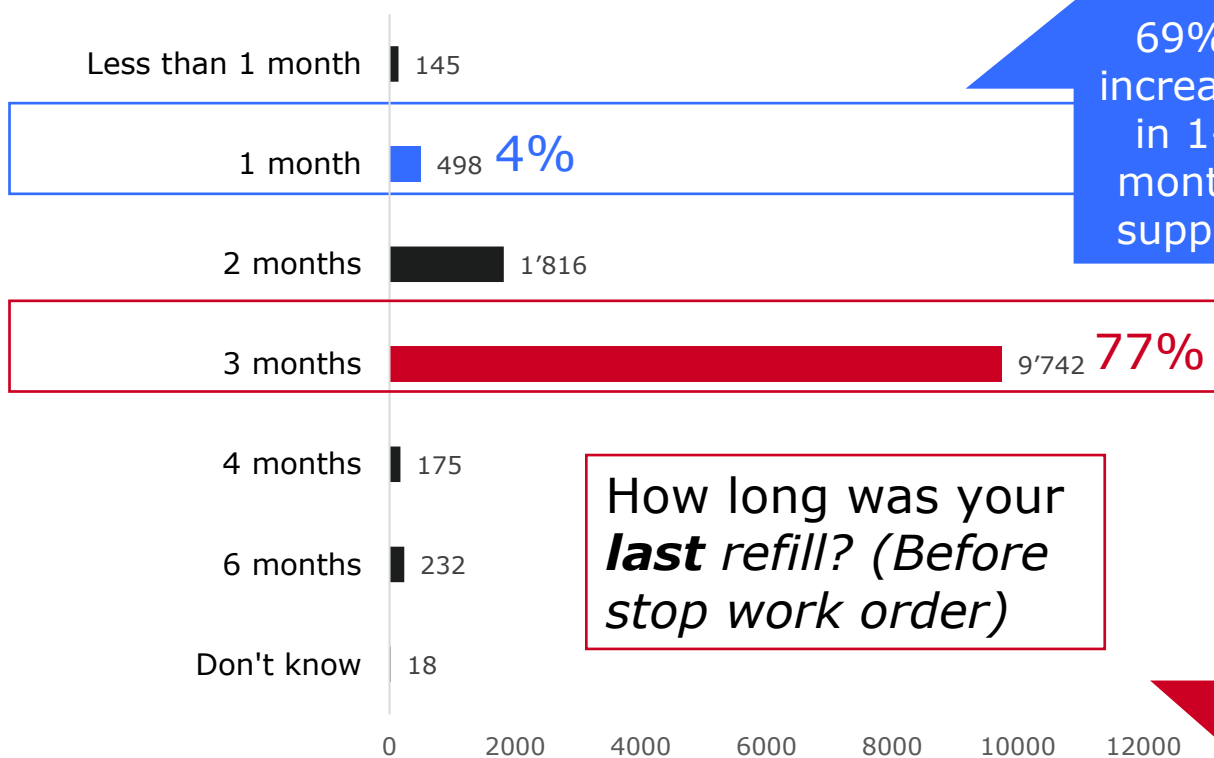
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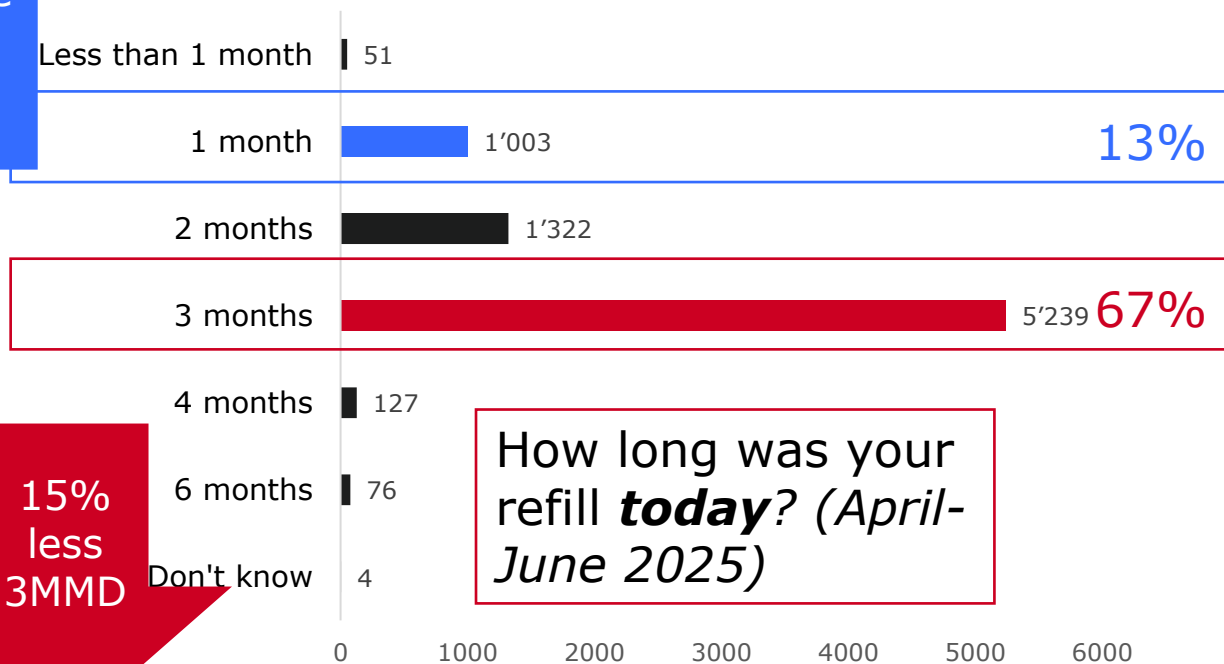
People living with HIV reported: **69% increase in 1-month ARV supply, 15% decrease in 3-month supply and no implementation of 6-month supply** despite commitment

Length of HIV medicine refill



How long was your **last** refill? (Before stop work order)

At your ARV refill today, how long were you given HIV medicine for? This is how many pills you are going home with today



How long was your refill **today**? (April-June 2025)

69% increase in 1-month supply

15% less 3MMD



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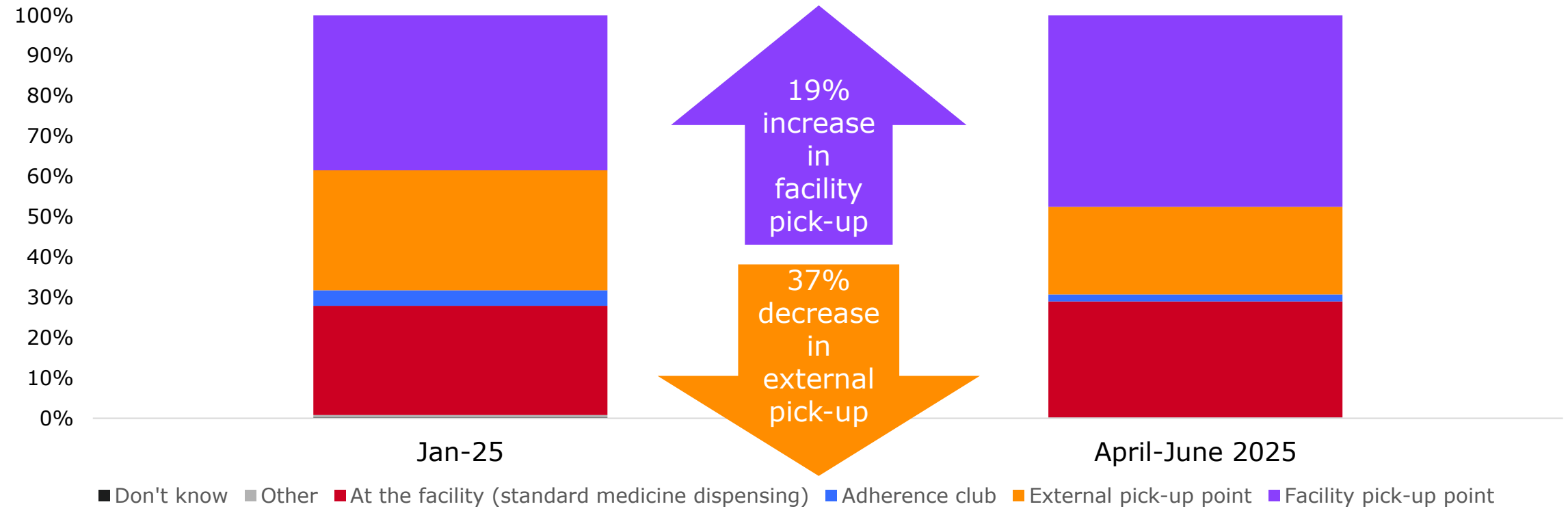
Increases in 1-month supply across all provinces (except North West)

	At your last ARV refill (January 2025)	At your ARV refill today (April to June 2025)	Change	At your last ARV refill (January 2025)	At your ARV refill today (April to June 2025)	Change	At your last ARV refill (January 2025)	At your ARV refill today (April to June 2025)	Change
Province	% 1 week - 1 month			% 2MMD			% 3MMD-6MMD		
North West	8% (96)	0% (0)	↓ 8%	12% (146)	0% (0)	↓ 12%	80% (988)	100% (212)	↑ 20%
Limpopo	1% (7)	2% (29)	↑ 1%	1% (7)	14% (186)	↑ 13%	97% (505)	83% (1,081)	↓ 14%
Eastern Cape	6% (86)	6% (76)	No change	22% (327)	5% (66)	↓ 17%	72% (1,064)	88% (1,117)	↑ 16%
Mpumalanga	5% (46)	6% (26)	↑ 1%	11% (113)	20% (95)	↑ 11%	84% (845)	74% (347)	↓ 10%
Gauteng	5% (183)	10% (135)	↑ 5%	13% (466)	13% (172)	No change	81% (2,860)	76% (1,002)	↓ 5%
Free State	5% (36)	23% (210)	↑ 18%	27% (217)	30% (281)	↑ 3%	68% (541)	47% (431)	↓ 21%
KwaZulu-Natal	4% (160)	24% (570)	↑ 20%	11% (397)	21% (519)	↑ 10%	84% (3,165)	54% (1,289)	↓ 30%

Largest increases in the Free State and KZN

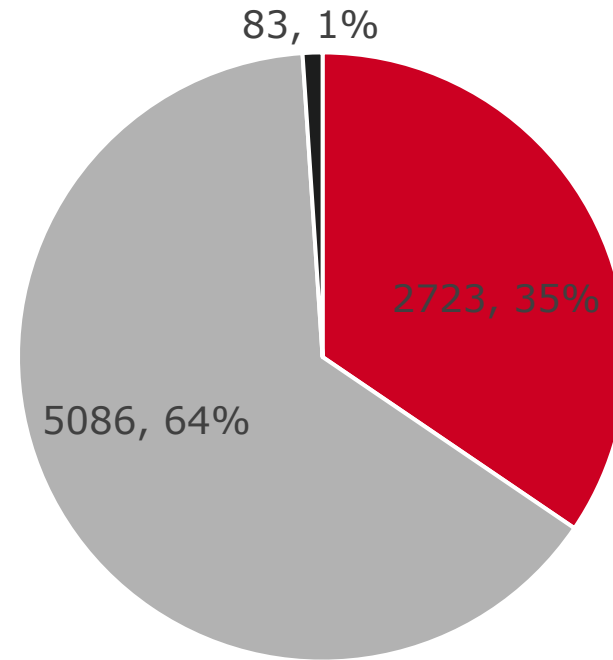
People living with HIV reported: **37% reduction** in external pick-up points, **19% increase** in facility pick-up points

Where do you collect ARVs?



Among people living with HIV surveyed: **35% said it took longer to collect their ART refill parcel after PEPFAR disruptions**

Today did it take longer to collect your parcel than before the end of January?



■ Yes ■ No ■ Don't know

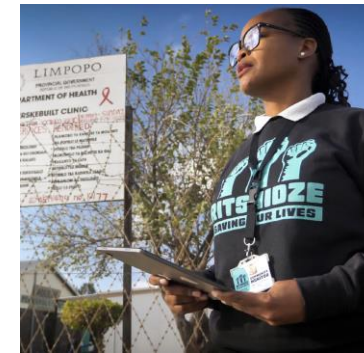


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Community-led monitoring (CLM) matters now more than ever!



- **Ritshidze helps government act:** Our CLM highlights where services are working – and where they’re failing – in real time.
- **Trusted by the system:** Facility, district, and national leaders now rely on Ritshidze insights to guide response.
- **But coverage is shrinking:** Fewer sites, fewer reports, less feedback & engagements happening due to all Ritshidze funding being cut by PEPFAR – and new rounds of monitoring will be unable to take place.
- **Continued funding is vital:** To keep HIV services accountable and community voices heard across all districts.





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