



Five priority actions for differentiated ART delivery in West and Central Africa

INTEREST 2019

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PRIORITY ACTION 1

Endorse differentiated ART delivery for clinically stable clients.

- Support 90-90-90 targets where WCA is lagging
- Make services more accessible without providing comprehensive services everywhere
- Reduce HIV-related stigma





PRIORITY ACTION 2

Engage people living with HIV in the design and ART delivery of services.





PRIORITY ACTION 3

Extend ART refills for those who are adherent to treatment.



Case study: Providing 6-month ART refills in Guinea [9]

In Guinea, data from 2016 estimates HIV prevalence of 1.5%, ART coverage at 35% [10] and very high levels of HIV-related stigma. In 2014 during the Ebola outbreak, many clients faced restrictions in movement, resulting in a large proportion of the HIV cohort being lost to follow-up. A 6-month refill system, a *facility-based individual model*, was piloted and scaled up in response to this crisis. Clients were provided with 6-month ART refills (six bottles of 30 tablets each), known locally as “Rendez-vous à 6 mois” (R6M).

Impact: This approach was scaled up after the Ebola epidemic ended, reaching 1,166 adults, with 90% retained at 18 months.

ART REFILL & CLINICAL CONSULTATION [9]

WHEN	6 monthly
WHERE	Health facility
WHO	Doctor
WHAT	ART refill Clinical consultation Laboratory investigations (every 2nd visit) Psychosocial support Adherence check-up Rescripting



PRIORITY ACTION 4

Emphasize that adherent clients can collect ART refills without seeing a clinician.



“When I pick up my drugs at a community ART distribution point, I am supported and not stigmatised.

Client, DRC



PRIORITY ACTION 5

Enable the distribution of ART refills and psychosocial support by peers and lay providers, particularly for key populations.



Clients from key populations are supported in Côte d'Ivoire by key population peer navigators and peer educators. Working with clinical teams and community clinics, these peer providers support retention and adherence by providing community ART refills, as well as psychosocial support.



In Sierra Leone, peer female sex workers and men who have sex with men collect ART refills at health facilities for their peers. They then meet their peers at their homes or community venues to distribute the refill.



Programming in Ghana supports men who have sex with men to receive their ART refills at drop-in centers, mobile outreach and couriered ART refills and are also supported through peer providers.



Check out www.differentiatedservicedelivery.org

DIFFERENTIATED SERVICE DELIVERY

PRIORITIZING DIFFERENTIATED ART DELIVERY TO FAST TRACK REACHING HIV TARGETS IN WEST AND CENTRAL AFRICA

This brief outlines differentiated service delivery (DSD) as a key approach to achieving the Joint United Nations Programme on HIV and AIDS (UNAIDS) 90-90-90 treatment targets in West and Central Africa (WCA), focusing on differentiated antiretroviral therapy (ART) delivery for clients who are clinically stable on ART. It does so by demonstrating how the key DSD principles can be applied to develop differentiated ART delivery models that address the complex barriers to reaching HIV targets in the region. As outlined in the brief, WCA has unique barriers to addressing HIV related to complex political situations, health system and supply chain challenges and providing quality care in a lower HIV-prevalence context. In order to strengthen the HIV response in WCA, policy makers, funders and programme implementers need to:

- 1 Endorse differentiated ART delivery for clinically stable clients.
- 2 Engage people living with HIV in the design and delivery of ART services.
- 3 Extend ART refills for those who are adherent to treatment.
- 4 Emphasize that adherent clients can collect ART refills without seeing a clinician.
- 5 Enable the distribution of ART refills and psychosocial support by peers and lay providers, particularly for key populations.

HIV IN WEST AND CENTRAL AFRICA

Major progress has been made globally to move towards the UNAIDS 90-90-90 targets by 2020, with several countries in East and southern Africa close to epidemic control. In WCA, the response is lagging behind other regions. The region accounts for 21% of the world's new HIV infections and 30% of global AIDS-related deaths. Within the region, ART coverage varies hugely, from 30% in the Democratic Republic of the Congo (DRC) to 82% in Burundi [1].

In 2016, UNAIDS launched a WCA catch-up plan to set the 25 countries in the region on the fast track to achieving the 90-90-90 targets by 2020 [2]. Barriers to scale up in this region remain complex. The lack of political commitment and funding, high levels of stigma, and health systems prioritizing services associated with user fees work together to deprioritize effective resource allocation and focused management of the HIV epidemic. Planning HIV service delivery in these contexts poses specific challenges. Within the WCA region, there are low- and high-prevalence settings and, within a country, prevalence can vary dramatically from region to region and by population. Providing HIV care within weak health systems that are often struggling in situations of post or active conflict or recovering from the Ebola epidemic adds further complexity.

DIFFERENTIATED ART DELIVERY

DSD is centred on providing client-centred care that simplifies and adapts HIV services across the cascade to reflect the preferences and expectations of various groups of people living with and vulnerable to HIV while reducing the burden on health systems (Figure 1) [3]. DSD also applies beyond the treatment cascade to include prevention. Differentiated ART delivery specifically focuses on differentiating service provision to clients already on ART. This approach is strategic for the HIV response in WCA, where due to lower prevalence, people living with HIV are widely and unevenly distributed, making it difficult and inefficient to provide comprehensive fully decentralized ART services.

SUPPLEMENT

PRIORITIZING DIFFERENTIATED ART DELIVERY FOR CLINICALLY STABLE CLIENTS IN WEST AND CENTRAL AFRICA

A supplement to *A Decision Framework for antiretroviral therapy delivery*

This supplement to *A Decision Framework for antiretroviral therapy delivery* outlines how the key principles of differentiated service delivery (DSD) can be applied to develop antiretroviral therapy (ART) delivery models for clinically stable clients living with HIV in West and Central Africa (WCA). The aim is to provide:

- An overview of the principles of DSD and how these can be applied to develop differentiated ART delivery models for clinically stable clients
- Guidance on how to prioritize differentiated ART delivery for clinically stable clients in WCA
- Case studies from WCA illustrating differentiated ART delivery in action.

This supplement is for WCA national and district ART programme managers, implementing partners, community partners and donors. It should be read in conjunction with the comprehensive *A Decision Framework for antiretroviral therapy delivery*.

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- New documents to advocate for and support uptake of differentiated ART delivery in West and Central Africa – available in English and French
- Come speak to us at the IAS booth