

CQUIN Learning Network Concept Note:

Workshop on Differentiated Service Delivery for Adolescents Living with HIV

Venue: Johannesburg, South Africa

Date: October 24-27, 2017

Background:

Adolescents (aged 10-19 years) are a priority population for HIV prevention and treatment services. Although the 1.8 million adolescents living with HIV (ALHIV) account for 5% of HIV-infected individuals, they contributed 20% of new infections in 2015.¹ Mortality amongst ALHIV remains high, and they are the only age group in which deaths due to HIV are not decreasing.² Results from the Population HIV Impact Assessments (PHIA) highlight the disparity in treatment access amongst adolescents, and the low rates of viral suppression amongst this age group.³ In Zimbabwe, Malawi and Zambia, the PHIA showed 46.4% of ALHIV knew their HIV status, 82.3% were on ART and 79.3% were virologically suppressed, compared to 77.8%, 90% and 89.8% respectively for adults aged 35-59 years.

As countries scale up treatment for all, differentiated service delivery (DSD) has been proposed as a means to achieve the 90-90-90 goals.⁴ Differentiated service delivery models (DSDM) for stable adults have been implemented in multiple countries, but few of these models include adolescents, and most do not address the unique medical and psychosocial needs of ALHIV. In November 2016, WHO convened a group to review DSDM for specific populations including adolescents,⁵ noting that the majority of DSDM for ALHIV address the “what” of differentiated service delivery for adolescents not the “how” – e.g., they described the package of services to be delivered, but not the frequency, intensity, location or health care worker cadres delivering this package. In addition, the WHO review highlighted the fact that most of DSDM for ALHIV are small pilot/demonstration projects that have not yet been taken to scale.

ICAP at Columbia University supports the CQUIN learning network for differentiated care, designed to foster south-to-south knowledge exchange and co-creation. The nine member countries have prioritized DSD for ALHIV as an area of interest, and CQUIN is initiating a community of practice by hosting a multi-country workshop to support joint learning on taking DSD for ALHIV to scale. The meeting will focus on “state of the art” best practices and knowledge exchange, identifying barriers to scale-up, and opportunities for joint creation of resources and tools. Key questions include: which models can be scaled up to attract and retain more adolescents; how can existing programs be leveraged to provide adolescent-focused DSD; how can programs ensure a smooth transition of adolescents into adult DSDM; and how can quality DSD services be maintained. .

Meeting Goal and Objectives:

The goal of the meeting is to launch CQUIN’s ALHIV community of practice by convening the nine CQUIN countries to:

- Share experiences on the “how” of differentiated service delivery for adolescents
- Share resources and existing tools on DSDM for ALHIV, and
- Work together to develop tools and frameworks related to DSD for ALHIV

Participants:

The meeting will include approximately 60 people, including technical experts, and representatives from CQUIN member countries (Ethiopia, Kenya, Malawi, Mozambique, Swaziland, South Africa, Uganda, Zambia, and Zimbabwe). Illustrative participants include staff from MOH, DSD implementing partners, civil society, and/or USG agencies.

Agenda:

The meeting will begin with an opening reception on the evening of Tuesday, October 24th and end at close of business on Friday, October 27th. Day 1 will include a review of evidence, sharing of best practices and lessons learned, and initiation of group work; Day 2 – group work continues; Day 3 – report back and consolidation of group work, next steps and closing.

Deliverables:

- Country-specific assessments of the availability, diversity, quality and scale/coverage of ALHIV DSDM
- Synthesis of available ALHIV models, and their strengths/challenges/evidence base
- A prioritized list of opportunities for joint work/co-creation of resources for ALHIV DSD scale-up
- Initial drafts of tools/resources developed in breakout sessions
- Next steps and way forward, including country-specific action plans

¹ UNICEF. For every child end AIDS. Seventh Stock taking report.2016

² UNAIDS 2016

³ Justman Jessica. Real progress in the HIV epidemic: PHIA findings from Zimbabwe, Malawi, and Zambia. CROI 2017

⁴WHO. Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection Recommendations for a public health approach - Second edition. WHO 2016. Available at <http://www.who.int/hiv/pub/arv/arv-2016/en/>

⁵ WHO. Proceeding of WHO consultation on HIV DSD models for specific populations and settings, November 16-18 2016, Geneva