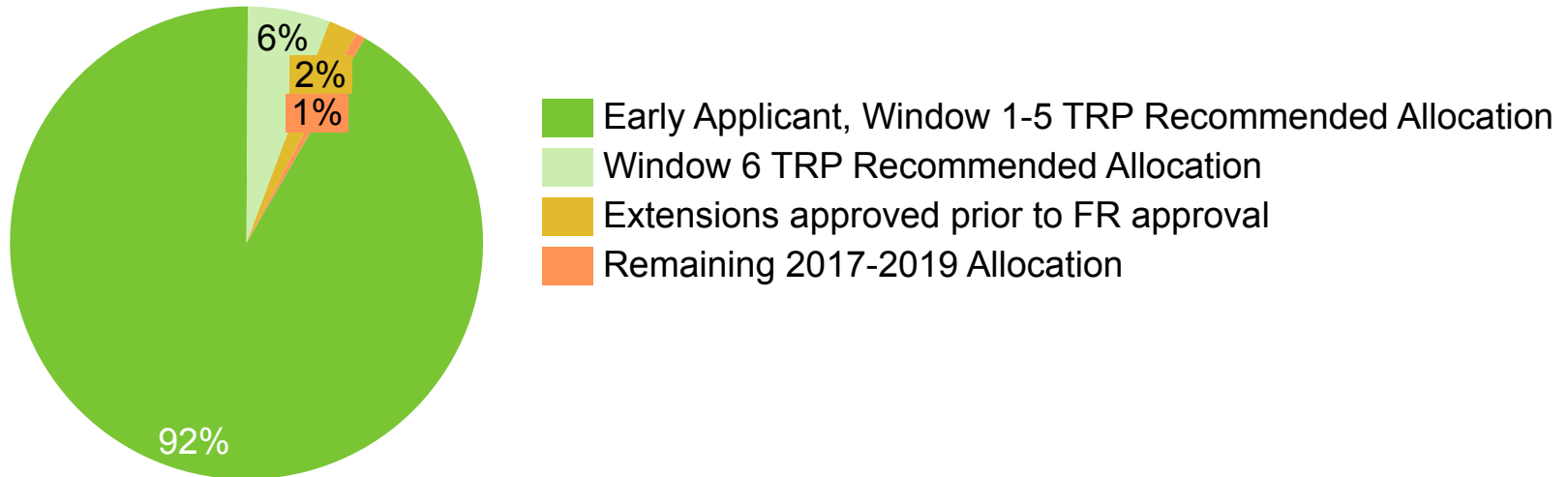


Outline

	Topic
1	Where are we?
2	Global Fund Investments and Impact
3	Why focus and invest in DSDs?
4	Priorities and Opportunities

Allocation funding recommended for grant-making

- US\$10.23 billion in allocation funding recommended for grant-making by end of window 6, representing 99.35% of total 2017-2019 allocation
- Window 6 recommended funding represents 6% of total 2017-2019 allocation
- Additional US\$341.7 million requested as Prioritized Above Allocation in Window 6

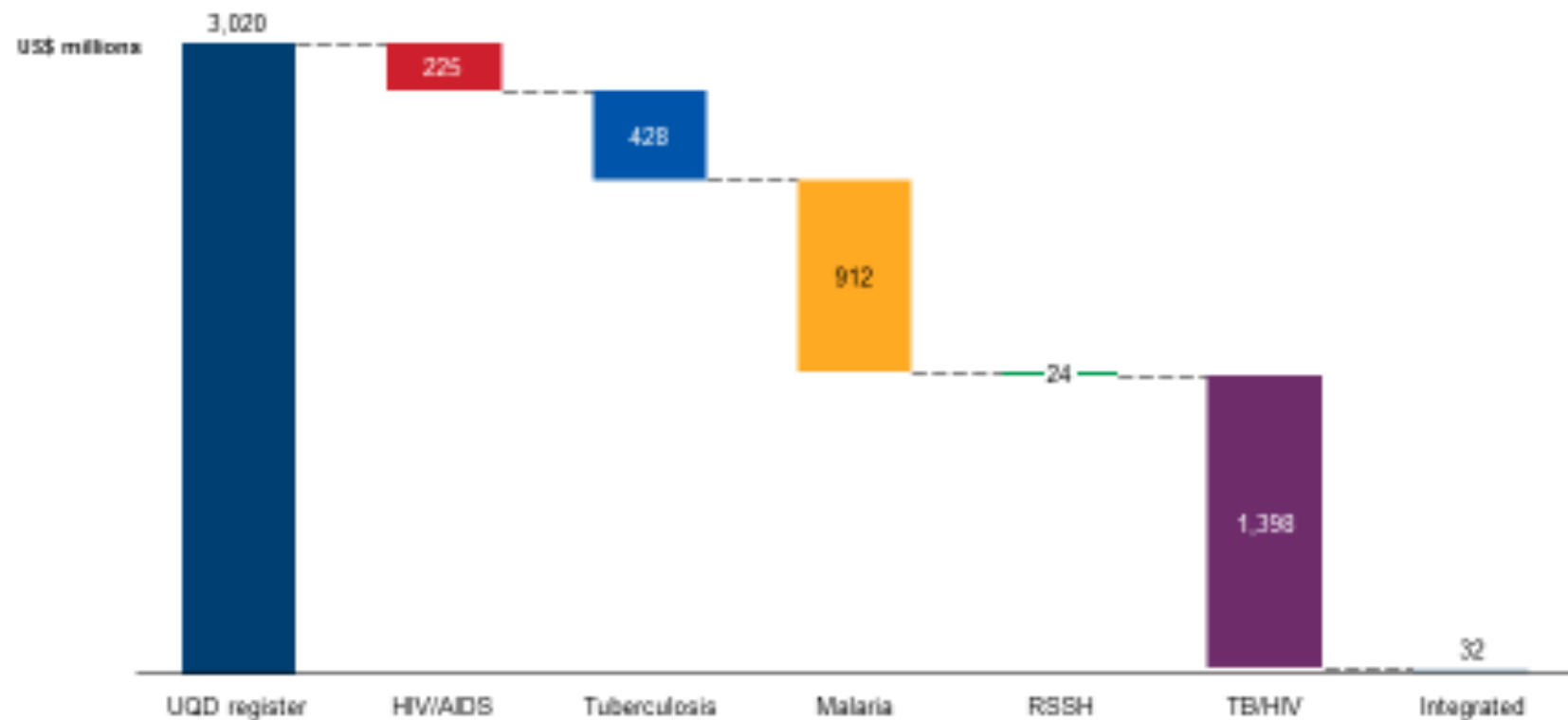


Source: Access to Funding database

As of 16 September 2018

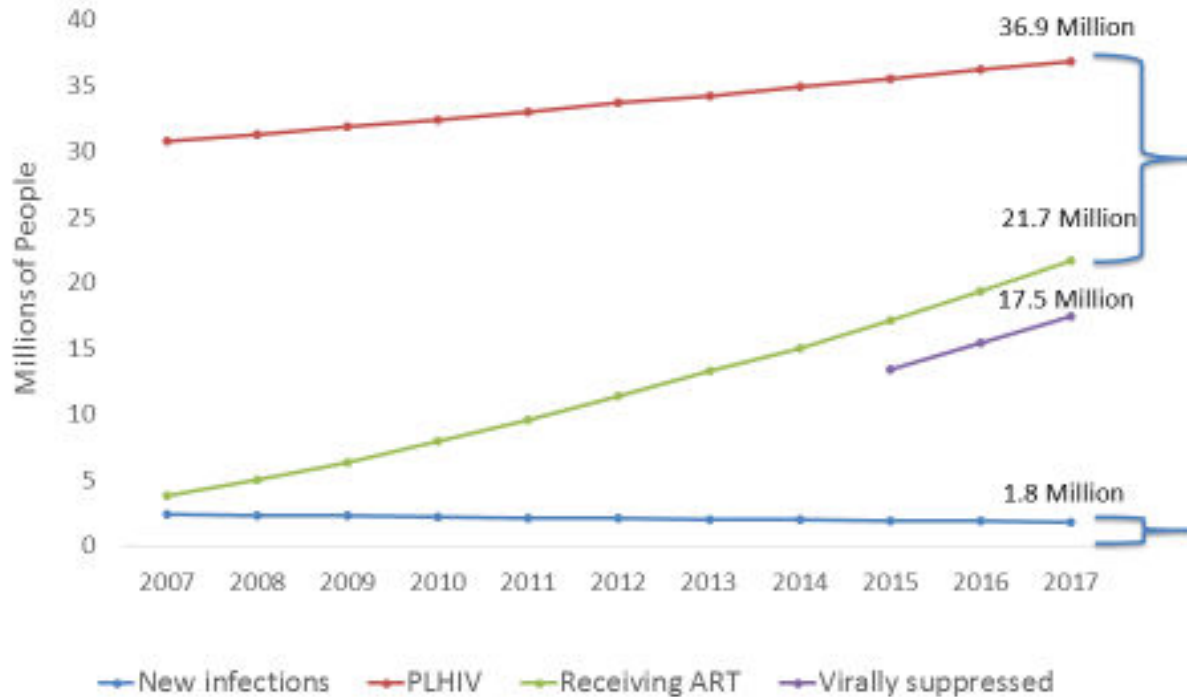
Includes iteration resubmission funds

UQD register



Note: UQD interventions are categorized into components as per the PAAR application

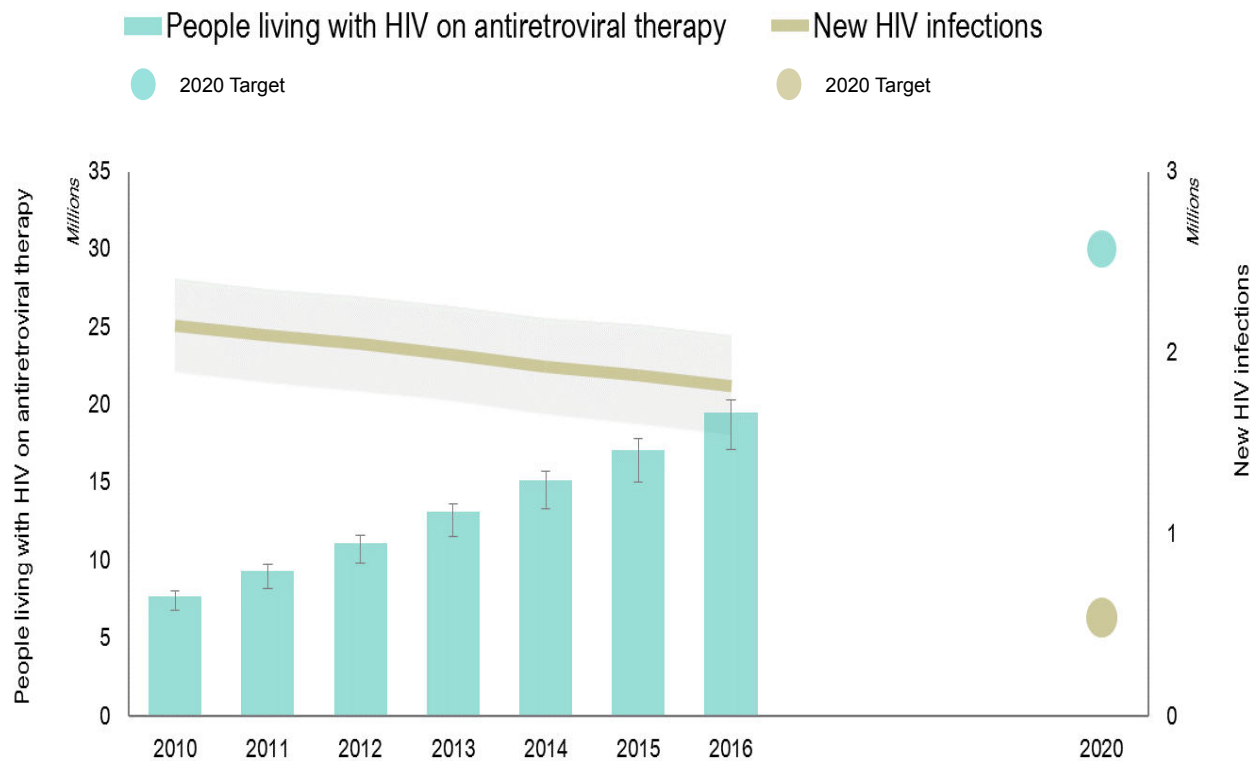
HIV Pandemic in 2018



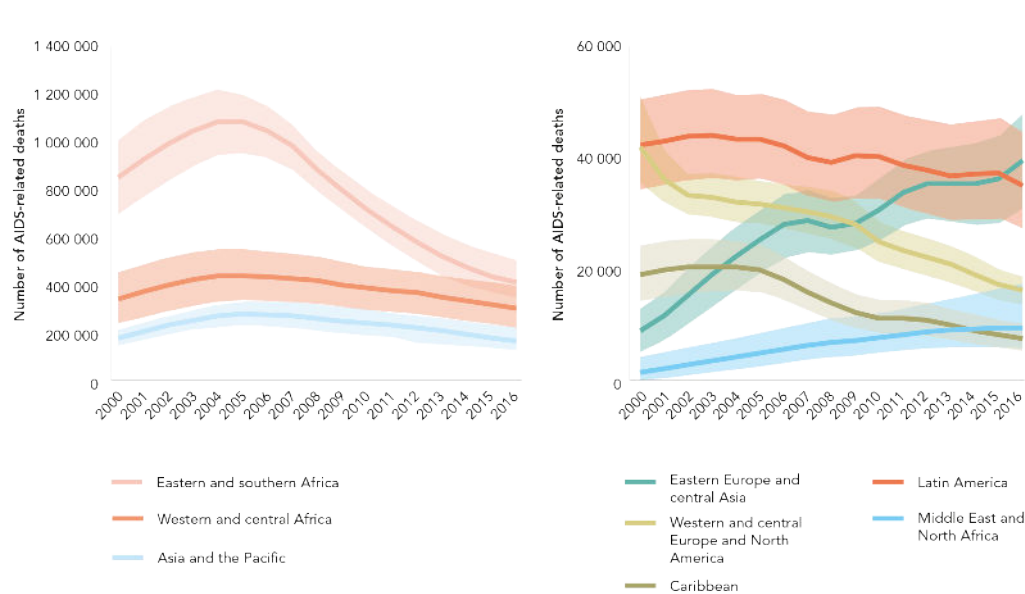
#AIDS2018 | @AIDS_conference | www.aids2018.org
Source: UNAIDS, 2018



New HIV Infections and People Living with HIV on Antiretroviral Therapy, 2010–2016 and 2020 Targets



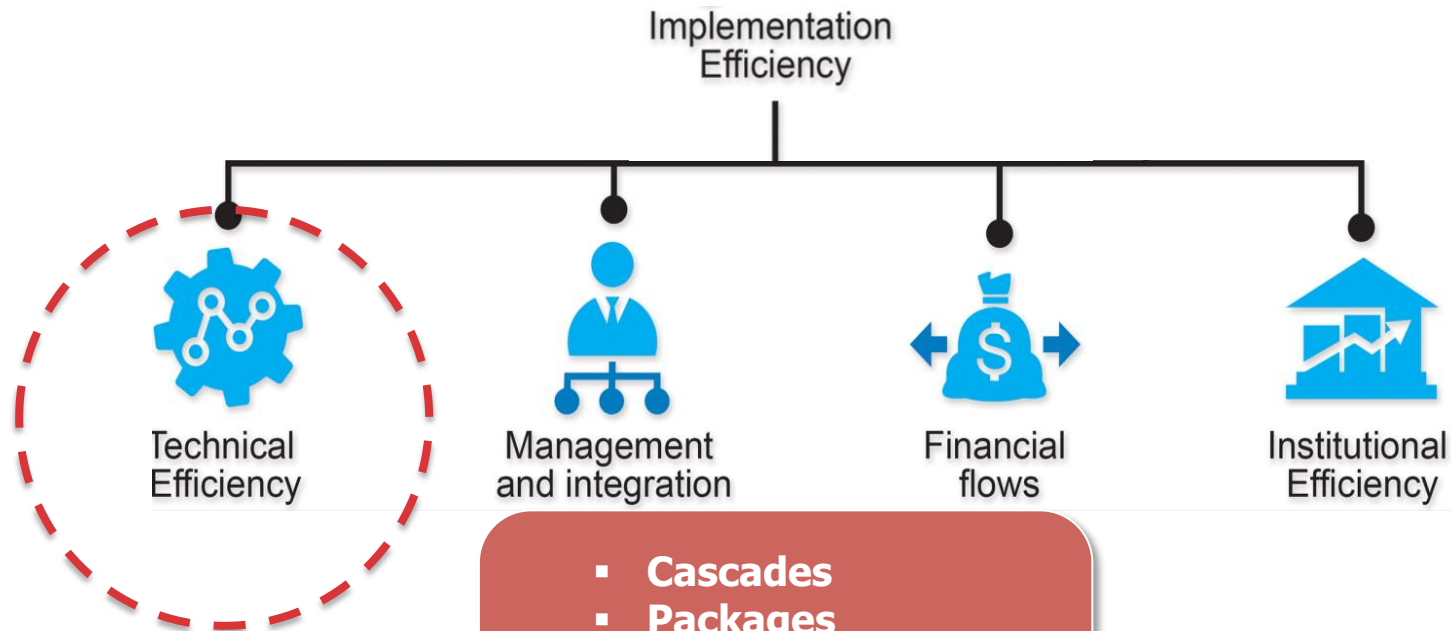
Decline in deaths sharpest in eastern and southern Africa



AIDS-RELATED DEATHS, BY REGION, 2000–2016

Source: UNAIDS 2017 estimates

Where to look for implementation efficiency



- Cascades
- Packages
- Program costs
- Volumes
- Procurements

HIV treatment and care module I – ‘what we expect’

Treatment, care and support	HIV care	<p>Includes HIV care given prior to antiretroviral therapy commencement, for programs that have not yet adopted “test and start treatment” as per WHO 2015 HIV treatment guidelines, such as:</p> <ul style="list-style-type: none">• Pre-antiretroviral therapy HIV care• Baseline clinical assessment and monitoring before treatment initiation• Treatment preparedness/education• Comprehensive support for people in HIV care (including psychosocial support)• Diagnosis and treatment of opportunistic infections and/or co-morbidities, including viral hepatitis• Therapeutic feeding for clinically malnourished people living with HIV• Linkages to antiretroviral therapy• Outpatient health services• Inpatient health services
	Differentiated antiretroviral therapy service delivery	<p>Activities could include:</p> <ul style="list-style-type: none">• Designing, developing, implementing (including training) differentiated service delivery models (eg. dispensing practices, follow-up time intervals, monitoring practices) using antiretroviral therapy drugs (first-, second -and third-line)• Performing cost-efficiency analysis of differentiated antiretroviral therapy service delivery models• Clinical monitoring of people on antiretroviral therapy that is not a part of strengthening and expansion of viral load monitoring or HIV drug resistance surveillance (for example, this could include CD4 count)• Linkages and referrals to treatment, care and support• Post-exposure prophylaxis or pre-exposure prophylaxis using antiretroviral therapy drugs for the prevention of HIV among people at substantial risk of acquiring HIV• All treatment activities should be differentiated to specific population needs as appropriate (e.g. adults, children, adolescents, key populations)
	Treatment monitoring - drug resistance surveillance	<p>Includes activities related to drug resistance monitoring, such as:</p> <ul style="list-style-type: none">• Surveillance of acquired HIV drug resistance in populations receiving antiretroviral therapy• Protocol development and training• Survey coordination• Site support visits• Laboratory functions (e.g. genotyping and shipment of specimens)• Technical support (e.g. protocol adaptation and analysis)• Data management (including data collection, report production, printing and distribution)

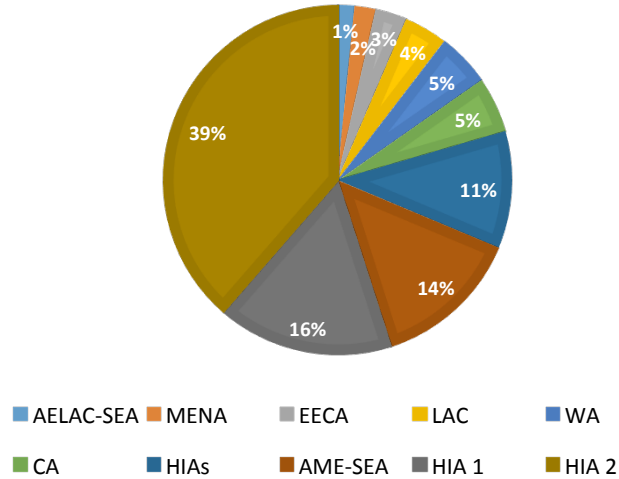


Global Fund is investing in HIV/AIDS in **> 100 countries** globally in the current allocation cycle (2017 – 2019)

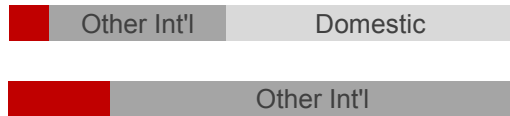
Total GF HIV investment (2017-2019) **> US\$ 5.2 billion**

Allocation amount \approx **US\$ 5.1 b**
Catalytic investment = **US\$ 200 m**

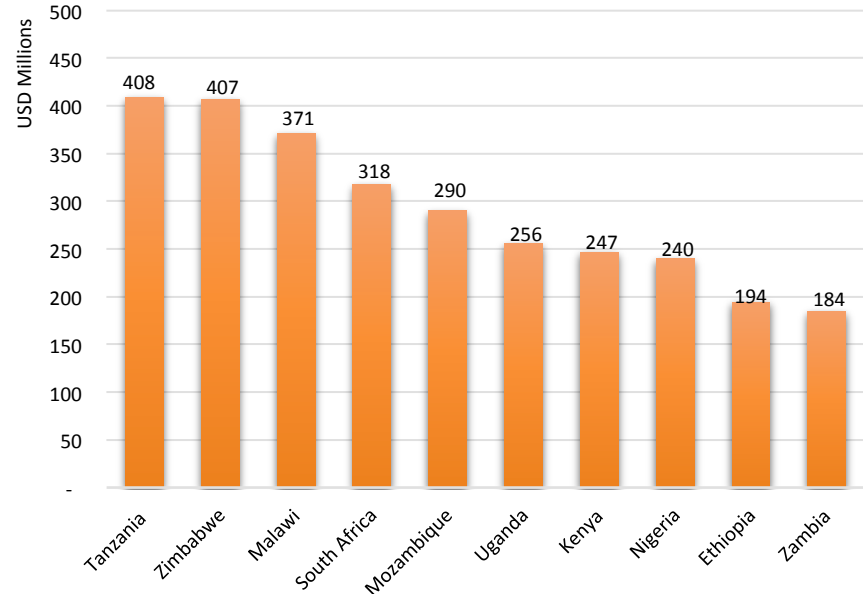
GF ALLOCATION BY REGION (HIV): 2017-2019



Global Fund accounts for **8%** of global HIV funding and **20%** of international financing



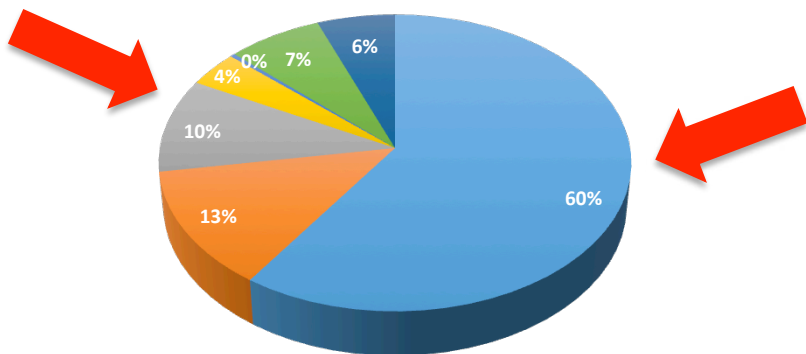
Top 10 HIV grant allocations: 2017-2019



The **top 10 countries** with HIV grant allocations account for **57%** of GF investment in HIV & **67%** of the estimated global HIV burden (UNAIDS data 2017)



Global Fund investment by modules in windows 1-5*:
almost **US\$ 3.1 b** so far in this funding cycle



■ Treatment, care & support	■ Prevention
■ Prog. Mgt	■ HIV Testing Services
■ TB/HIV	■ RSSH
■ Other modules	

**Based on windows 1-5 submissions by countries (as of May 2018); does not include Nigeria and South Africa that are among top ten HIV allocations.*

HIV Catalytic investment (US\$ 200 m)

Matching funds = US\$ 150 m

Multi-country proposals = US\$ 50 m

Matching funds = US\$ 150 m

- Scale-up evidence-based interventions with a focus on the highest burden countries with the lowest economic capacity and on **key and vulnerable populations** disproportionately affected by the three diseases (US\$ 50M) – 9 countries
- Scale-up programs to support **women and girls**, including programs to advance sexual and reproductive health and rights (US\$ 55M) – 11 countries
- Introduce and scale-up programs that remove **human rights barriers** to access to health services (US\$ 45M) – 20 countries

Multi-country (Sustainability of services for key populations) = US\$50 m

- LAC region (17 m; 2 grants anticipated: 1 for Latin America, 1 for Caribbean)
- EECA region (13 m)
- SEA region (12.5 m)
- MENA (7.5 m)

TRP -Observations

Treatment Issues:

- **1st 90:** Good differentiated models of HIV testing are being proposed and will be increasingly important to re-evaluate and improve strategies as we get closer to 90/95
- **2nd 90:** Less well described differentiated models of care. Increasing issues with access to affordable medicines through domestic procurement.
- **3rd 90 Viral suppression:** Ongoing challenges with integration of disease specific components e.g. Laboratory and transport systems for efficiencies.

Recommendations

- Future funding requests should continue to work toward inclusion of disaggregated data, including prevalence, incidence and cascade data, to the extent relevant and feasible. Diversified methods for collecting data should be encouraged.
- Analysis of value for money of different testing strategies which include yield as well as linkage to care will be increasingly needed as we get closer to targets.
- Sustainability issues will need to look beyond ART and include HRH and procurement of laboratory commodities

West and Central Africa:

The challenges and ways forward

Key Issues

- ART:
 - low coverage; high investments; gaps in funding; risk of low program quality
- HIV Testing: catching up on 1st 90
- RSSH:
 - critical gaps in HRH, infrastructure & equipment, procurement, leadership & governance
 - High Out-of-pocket costs (25% of current health expenditure)
 - Weak community systems
- Complex situations requiring different approaches

Focus

1. **Efficiencies** through program quality/Differentiated Service Delivery:

- Decentralization, task shifting, multi-months ARV scripting
- Cascade analysis; program adaptation; ART cohort audits

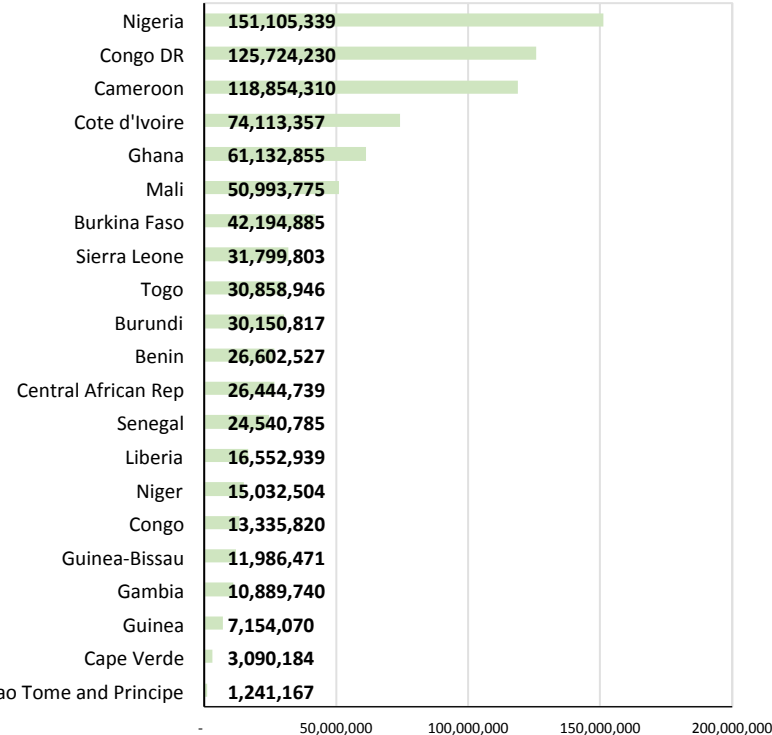
2. Implementation of **differentiated HIV testing strategies** (including EID & strengthening of lab systems:

- Portfolio improvement and in-country support (partners)

3. Investments in **health & community systems**/involvement of community in service delivery/task-shifting

4. **Defining DSD** and quality in WCA context

Global Fund HIV funding (in USD) in WCA, 2018-2020



Implementing Differentiated HIV Testing Services in Global Fund Grants

Goal:

1. To improve testing coverage or knowledge of status of HIV and linkage to treatment and prevention services
2. To improve the efficiency of testing including testing yield

Objectives:

- Conduct situational analysis of HIV testing services in select countries, including policies; approaches; scale; target populations; yield; program quality; linkage to treatment, care and support and prevention services
- Support select country HIV programs to rethinking their HIV testing programs, and selecting and implementing the right mix of differentiated testing approaches to efficiently reach undiagnosed people with HIV and link them to prevention and treatment services;
- Revise Global Fund grants in line with new national HIV testing services strategy;
- Monitor implementation of revised country plans and outcomes of revised HIV testing strategies, with regard to uptake in ART and linkage to prevention services.

Priority Countries:

- Cameroun, Malawi, Nigeria, Tanzania, Zambia, Lesotho, Indonesia
- West and Central Africa Region (**regional priority**): CAR, Mali, Chad, Liberia, Guinea

Asks

- Mortality! Advanced Disease!!!
- ‘CQUIN’ West Africa
- ‘CQUIN’ Prevention
- Guidance on defining measures of Program Quality in an era of UHC
- ‘Simple guidance’ on indicators for HIV program quality assessments



Thank You