



# Peer Learning with South-to-South Visits: Malawi to Uganda

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HIV LEARNING NETWORK  
The CQUIN Project for Differentiated Service Delivery

# Agenda

- South-to-south Experience
- Lessons Learned
- Next Steps

# Purpose of the visit

- To learn and appreciate the implementation of facility-based and community-based differentiated service delivery models (DSDM) in an urban setting
- To learn about how to engage communities in demand creation and participation in DSD
- To identify challenges and opportunities of adoption or adaptation of the TASO DSDM
- To understand how community-based ART service delivery data flows into the national M&E system

# South-to-South Experience – continued

Hosted by Uganda: 4<sup>th</sup> to 9<sup>th</sup> June 2018

The visit comprised of teams from:

- Kenya
- Malawi
- Kingdom of Eswatini

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- **Lessons Learned**
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# Lessons Learnt: Client Engagement

- Service delivery: patients are empowered and satisfied
- Prepacked drugs with patient name easily reach the patient, who signs for receipt at the community: Ideal for well resourced projects
- Planning: Client Council Facility Advisory Committee fosters the system
- Mobilization: Community dialogues; Community contributions, dramas
- Governance: 2 representatives serve on TASO Governance board
- Adolescents are also part of the patients receiving the models and their visits are aligned with school calendar holidays

# Lessons Learned – continued

- Roles and responsibilities well defined
- Data from community-based services enter mainstream data system within 72hrs

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# Next Steps

- Briefed the DHA Authorities and shared the lessons from the visit
- Lessons learnt have been currently supported by some approved models & will be implemented in a local setting
- Work with facilities to have VL focal persons to monitor and follow up VL results on every clinic day
- Engagement of Civil Society Organisations to help foster messaging around VL sample collection & result utilization
- Mapping partner support to scale up DSD models related to what we had seen in UG
- Share scale up plans between MoH Partners

# Other Considerations

- It would be great to get more experience from another country, and to see MoH implementation without partner support
  - At the moment, most of what we saw is being supported by PEPFAR via TASO
  - So a comparison visit would be ideal
- Meanwhile, we may need to think through systems efficiency and logistics/funding implications as we align the lessons to the endorsed Community provider ART nurse that will be implemented in Malawi

# *Learning about DSD for Fisher Folk at Lake Victoria*

