



# Preliminary Results of the 2<sup>nd</sup> DSD Performances Review in Côte d'Ivoire

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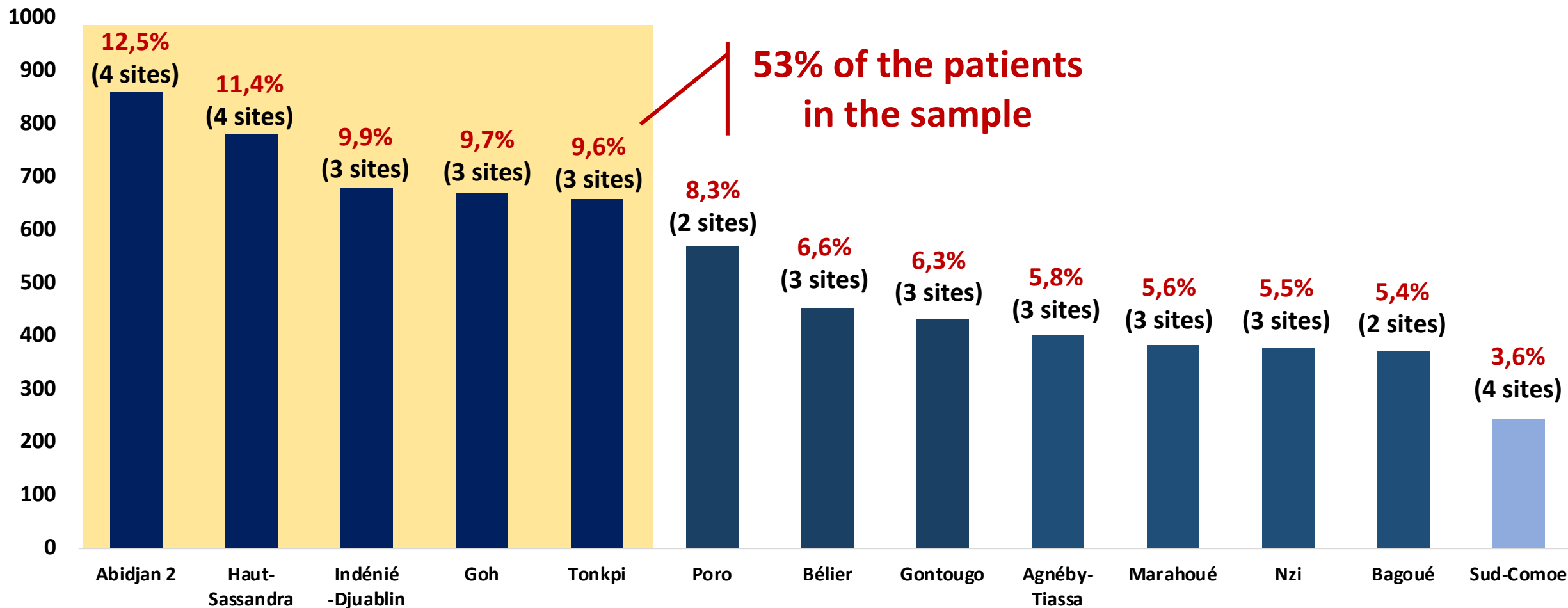


**HIV LEARNING NETWORK**  
The QUIN Project for Differentiated Service Delivery

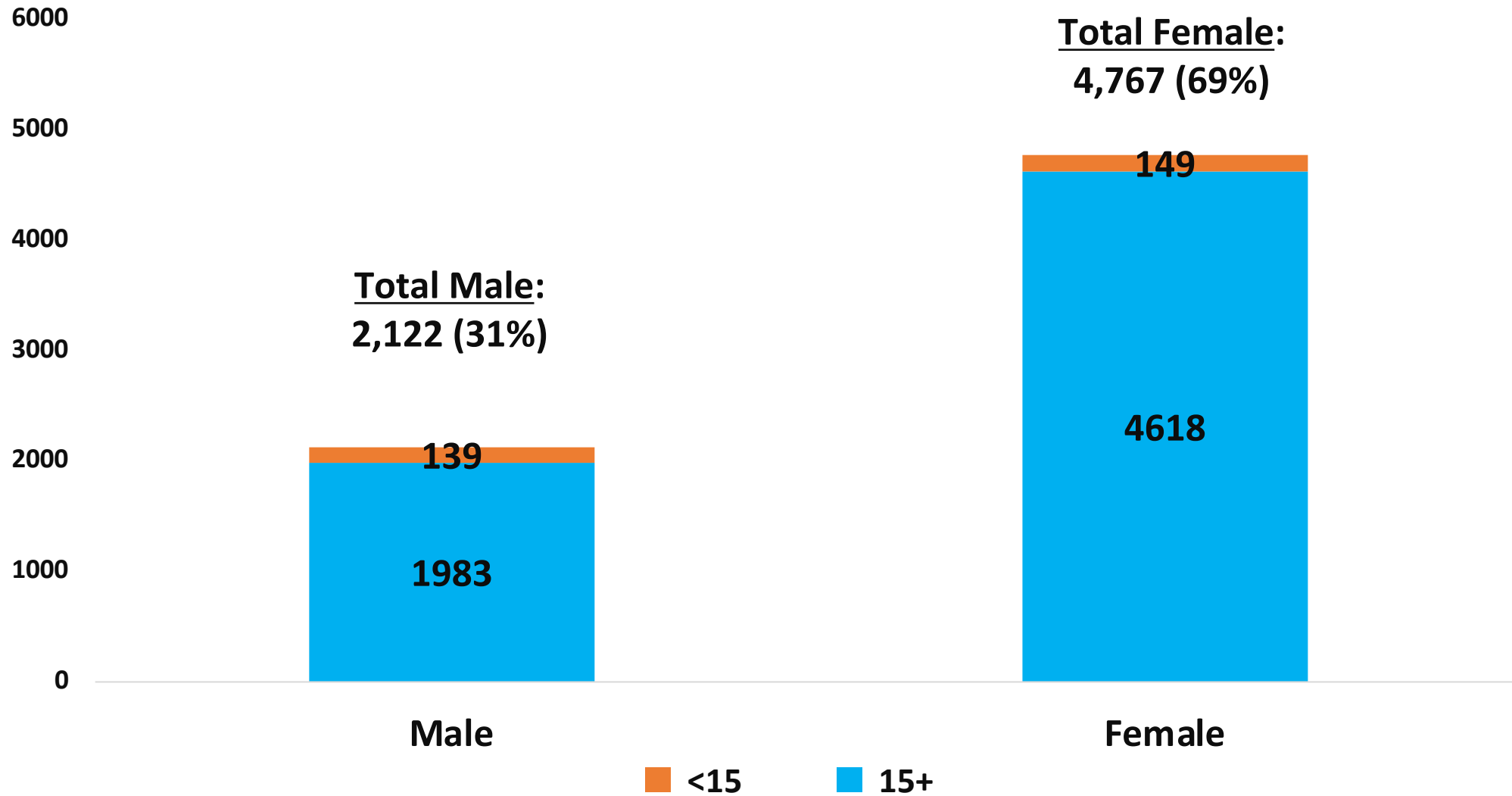


# I- RESULTS

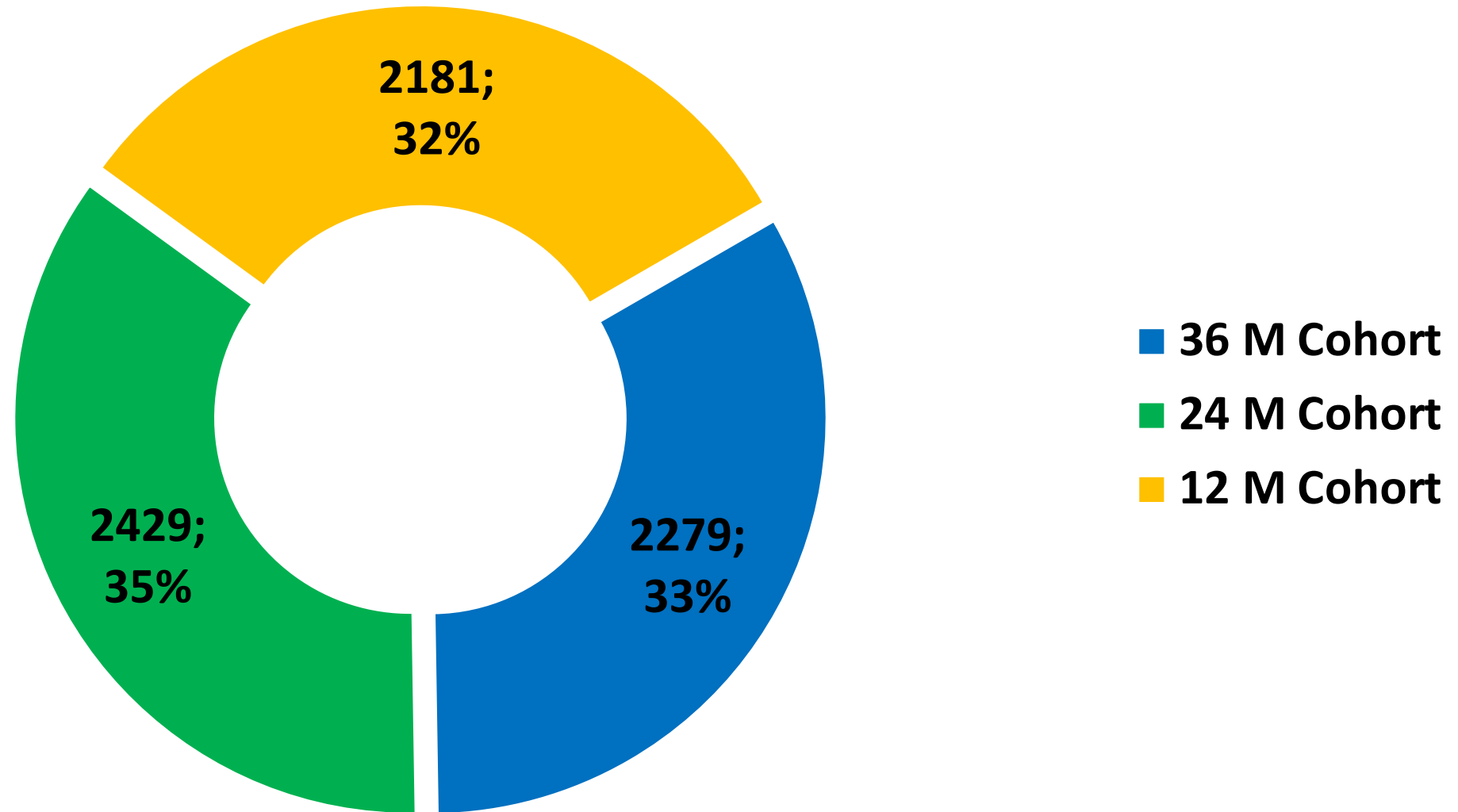
# 1- Distribution of patients by health region



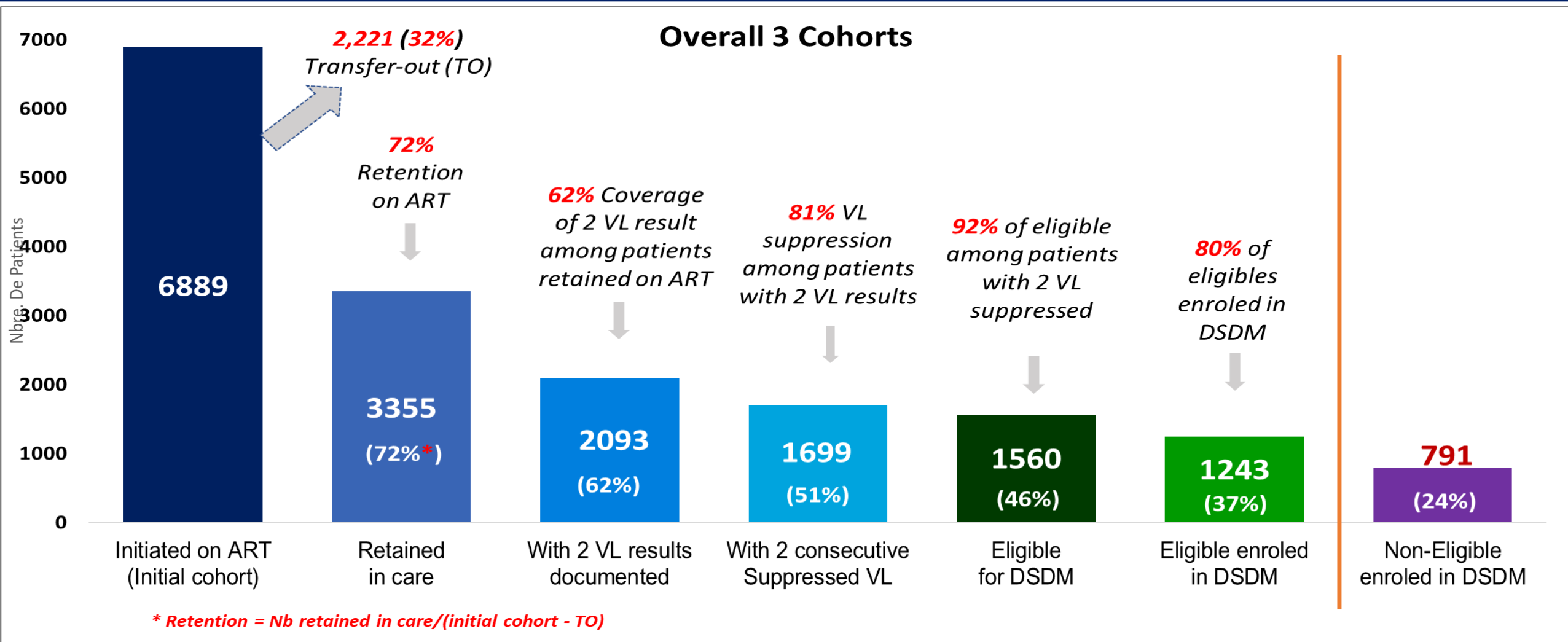
# 2- Distribution of patients by Sex/Age groups



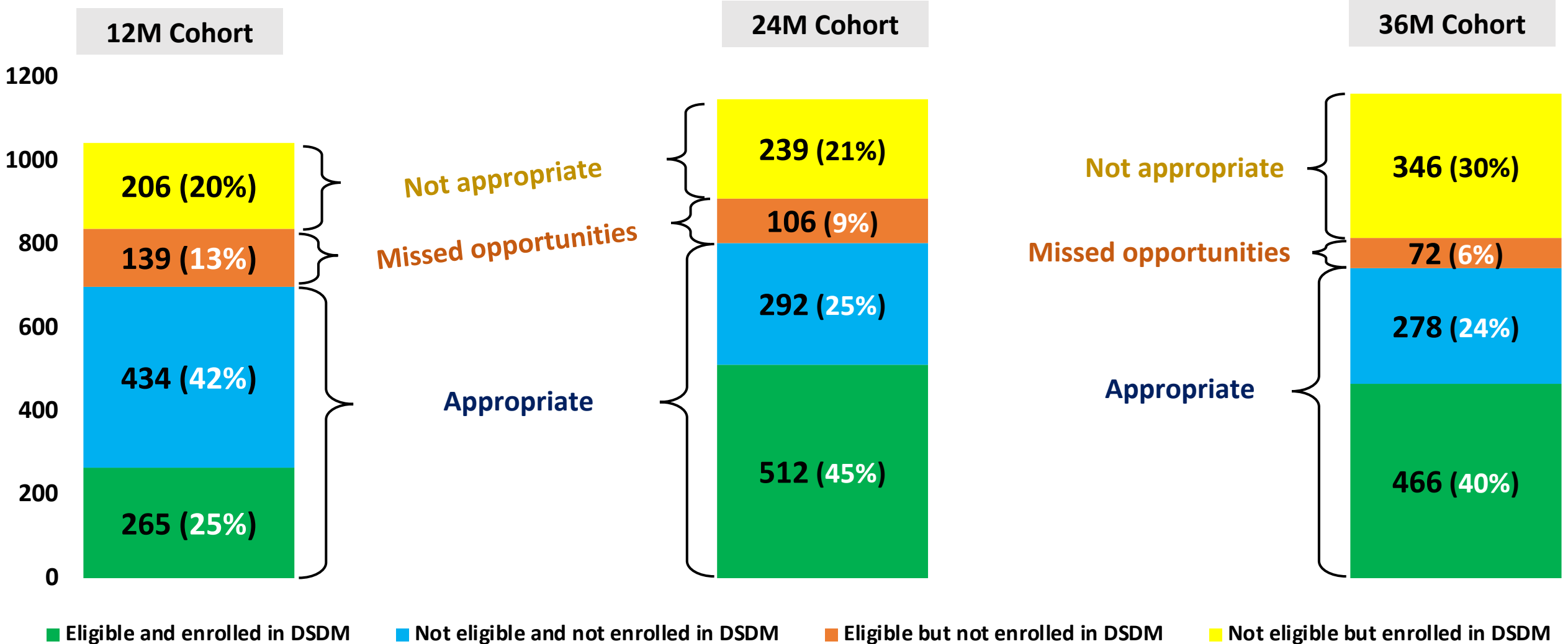
# 3- Distribution of patients by Cohort



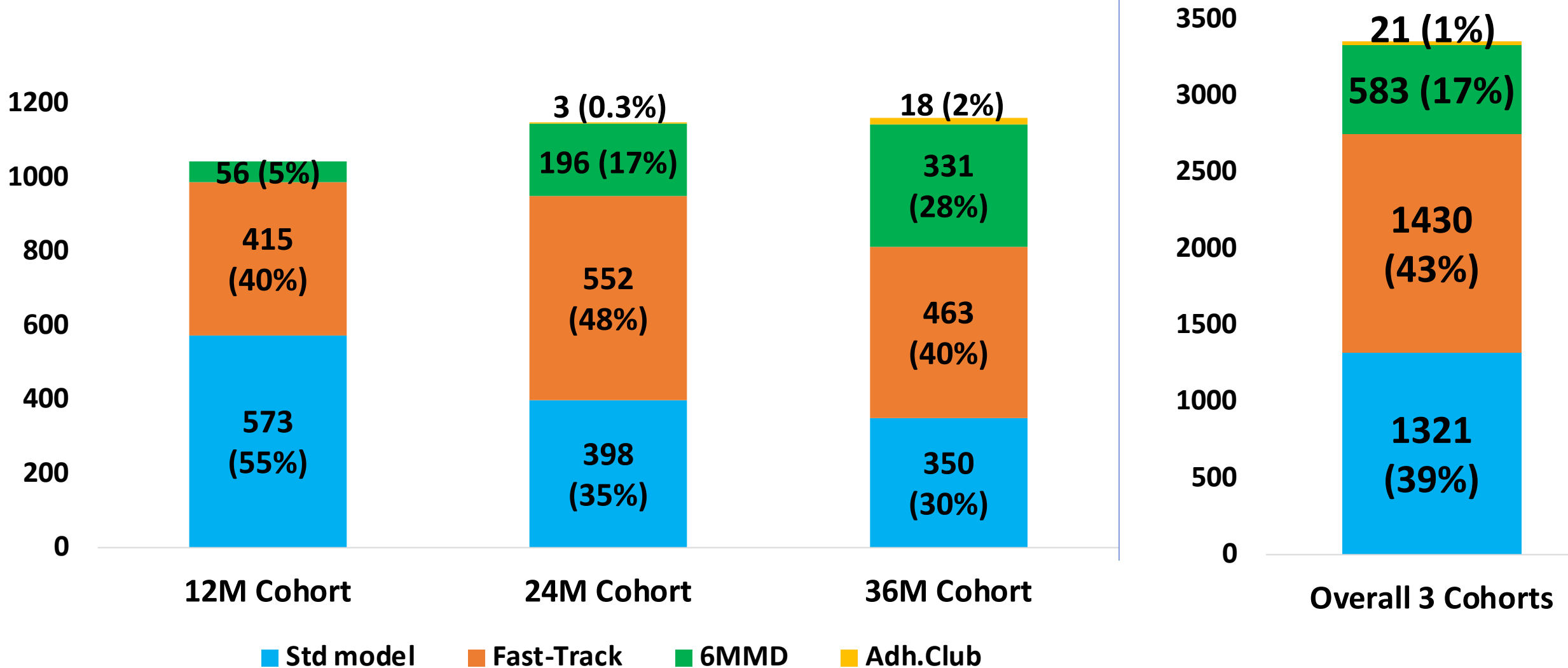
# 4- Cascade from ART initiation to enrollement in DSDM (overall 3 cohorts)



# 5- Eligibility and enrollement in DSDM by June 2020

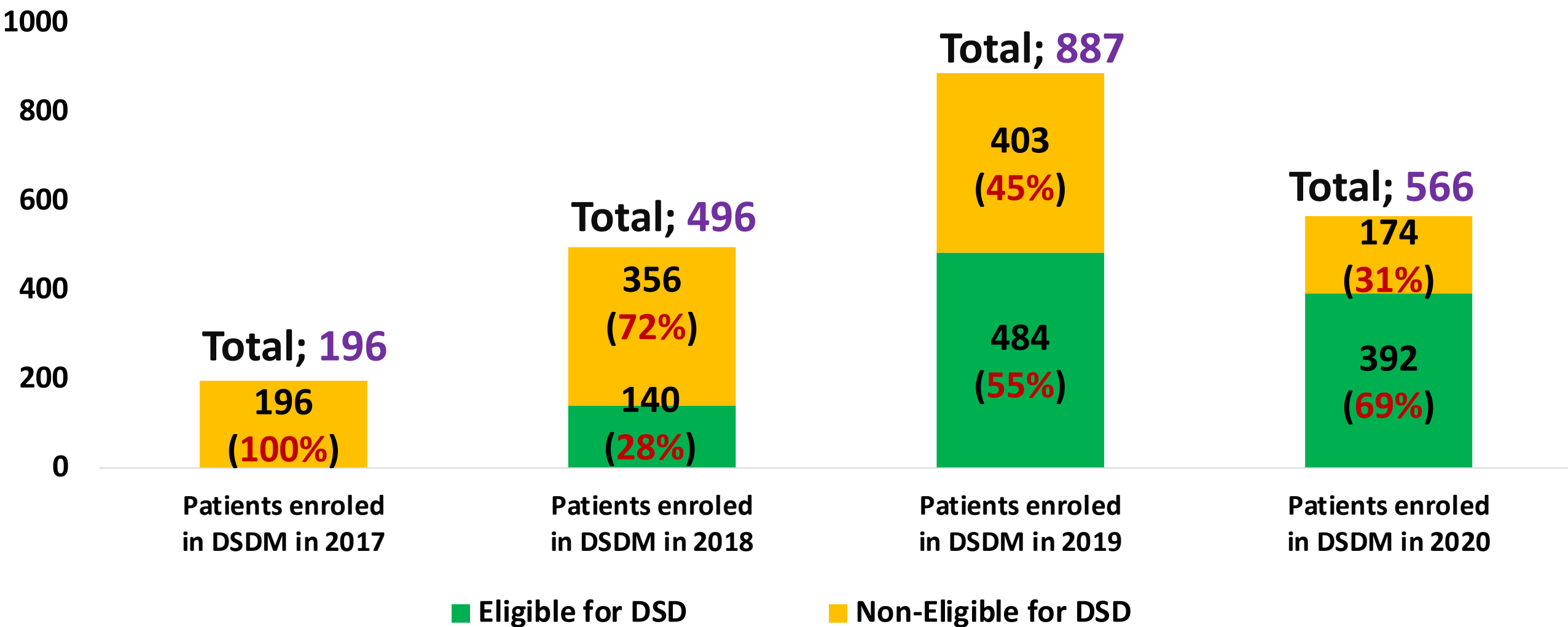


# 6- DSD Models coverage

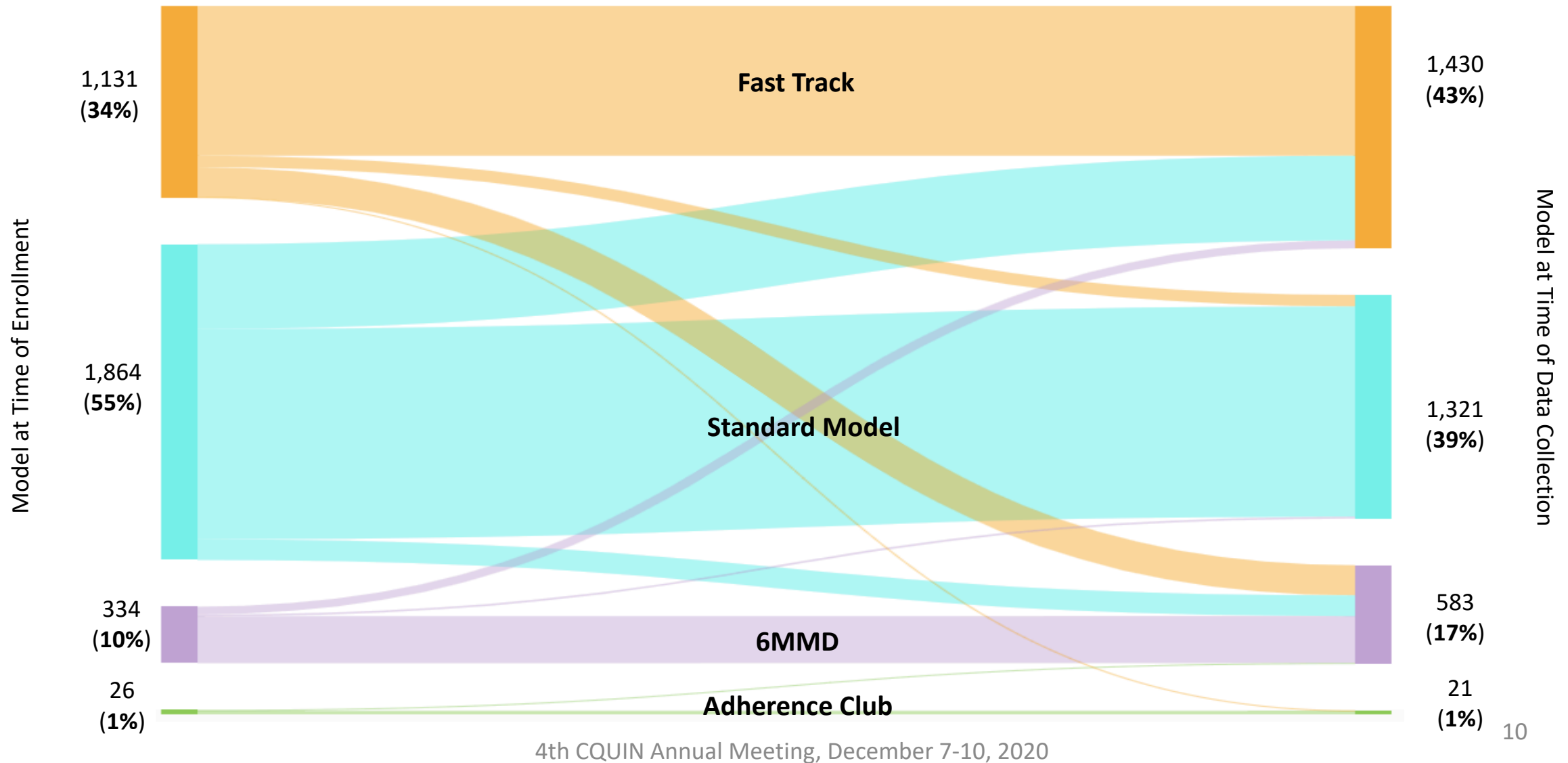




# 7- Trend of fidelity to eligibility criteria among patients enrolled in DSDM from 2017 to 2020

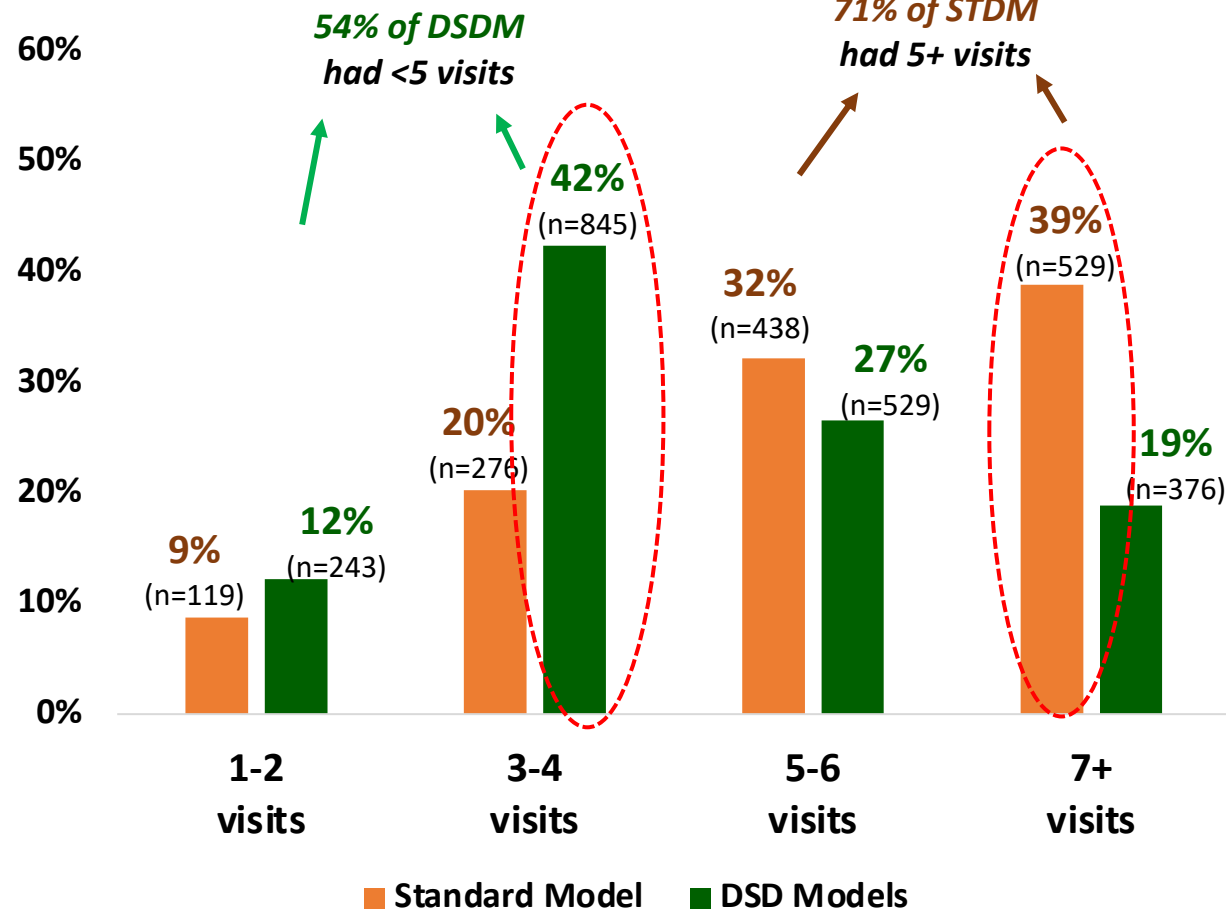


# 8- Switch of models of Care: Overall 3 cohorts

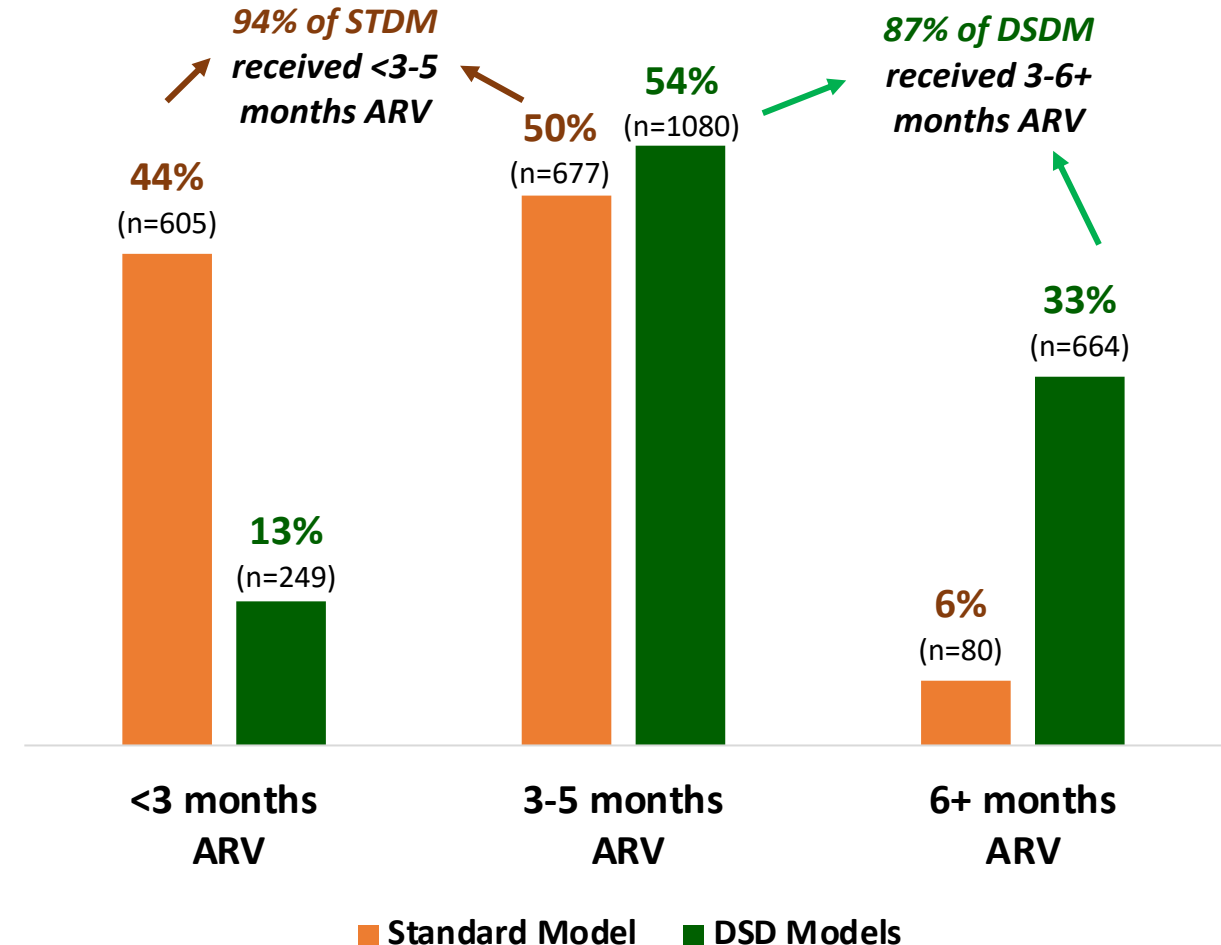


# 9- Priority Indicators

Annual number of clinical visits by patient



Quantity of ARV received at the last pick up visit



# 10- Comparison of outcomes at 12 and 24 months (Cohort of patients initiated on ART during Apr-June 2018)

Indicators	Outcomes		Outcomes of the <b>Apr-Jun 2018 Cohort*</b>			
			At 12 Months (During 2019 DPR)	%	At 24 Months (During 2020 DPR)	%
Cascade	<b>Initial Cohort</b>		<b>205</b>		<b>515</b>	
	Transfer-out		61	30%	190	37%
	LTFU		28	14%	60	12%
	Died		15	7%	43	8%
	Stopped treatment		1	0%	4	1%
	<b>Retained in care</b>		<b>100</b>	<b>69%</b>	<b>218</b>	<b>67%</b>
	With 2 VL results documented		49	49%	180	83%
	<b>With 2 consecutive Suppressed VL</b>		<b>39</b>	<b>80%</b>	<b>150</b>	<b>83%</b>
	Eligible for DSDM		16	41%	141	94%
	<b>Eligible Enroled in DSDM</b>		<b>3</b>	<b>19%</b>	<b>125</b>	<b>89%</b>
Distribution of ART models	STD Model		83	83%	46	21%
	Fast-Track		11	11%	135	62%
	6MMD		6	6%	37	17%
Appropriateness of enrolement in DSDM	Eligible and enrolled in DSDM		3	3%	125	57%
	Not eligible and not enrolled in DSDM		70	70%	30	14%
	Eligible but not enrolled in DSDM		13	13%	16	7%
	Not eligible but enrolled in DSDM		14	14%	47	22%
VL Coverage and VLS rate (Last VL result in the last 12 months)	STD Model	Retained in Care	83		46	
		Last VL results documented	73	88%	36	78%
		<b>Last VL Suppressed</b>	<b>57</b>	<b>78%</b>	<b>29</b>	<b>81%</b>
	DSD Model	Retained in Care	17		172	
		Last VL results documented	17	100%	158	92%
		<b>Last VL Suppressed</b>	<b>17</b>	<b>100%</b>	<b>152</b>	<b>96%</b>

\* Improvement of data collection from DSDPR 2019 to DSDPR 2020: data from 205 to 515 patients were collected

- Almost the same retention rate
- Significant improvement in VL coverage
- Slight improvement in VL Suppression
- Significant improvement in % of Eligible patients and in % of Eligible patients enrolled in DSDM
- Significant increase in % of patients in DSDM (from 17% → 79%)
- Significant change in the appropriateness of enrollment in DSDM, with initially 3% of eligible enrolled in DSDM to 57% in 2020
- Improvement in VL suppression in STD Model
- Slight decrease in VLS in DSD Model, but still high

## II- LESSONS LEARNED

- The involvement of Districts staffs (HIV/DSD Focal Point and M&E Lead) facilitated data collection despite the electoral context and Covid19
- The transmission of the listings from the EMR (SIGDEP2) (listing of patients characteristic; listing of patients in care, listing of Stable and unstable patients) before data collection has improved the quality and completeness of the data collected (compared to the 2019 DSDPR)
- The performances in patients enrolled in DSDM (Retention, Viral Load Coverage and CV suppression) are maintained over the years
- The virtual coaching sessions organized by the PNLs following the dissemination of the DSD guidelines, the interventions of the district DD Focal points with the support of the IPs contribute to improving compliance with the eligibility criteria for DSD over the years
- The COVID pandemic has almost led to the abandonment of community models

**Thanks**