



# CQUIN Differentiated MCH Workshop

May 25-27, 2021

## Opening Remarks

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**HIV Learning Network**

The CQUIN Project for Differentiated Service Delivery

# Outline

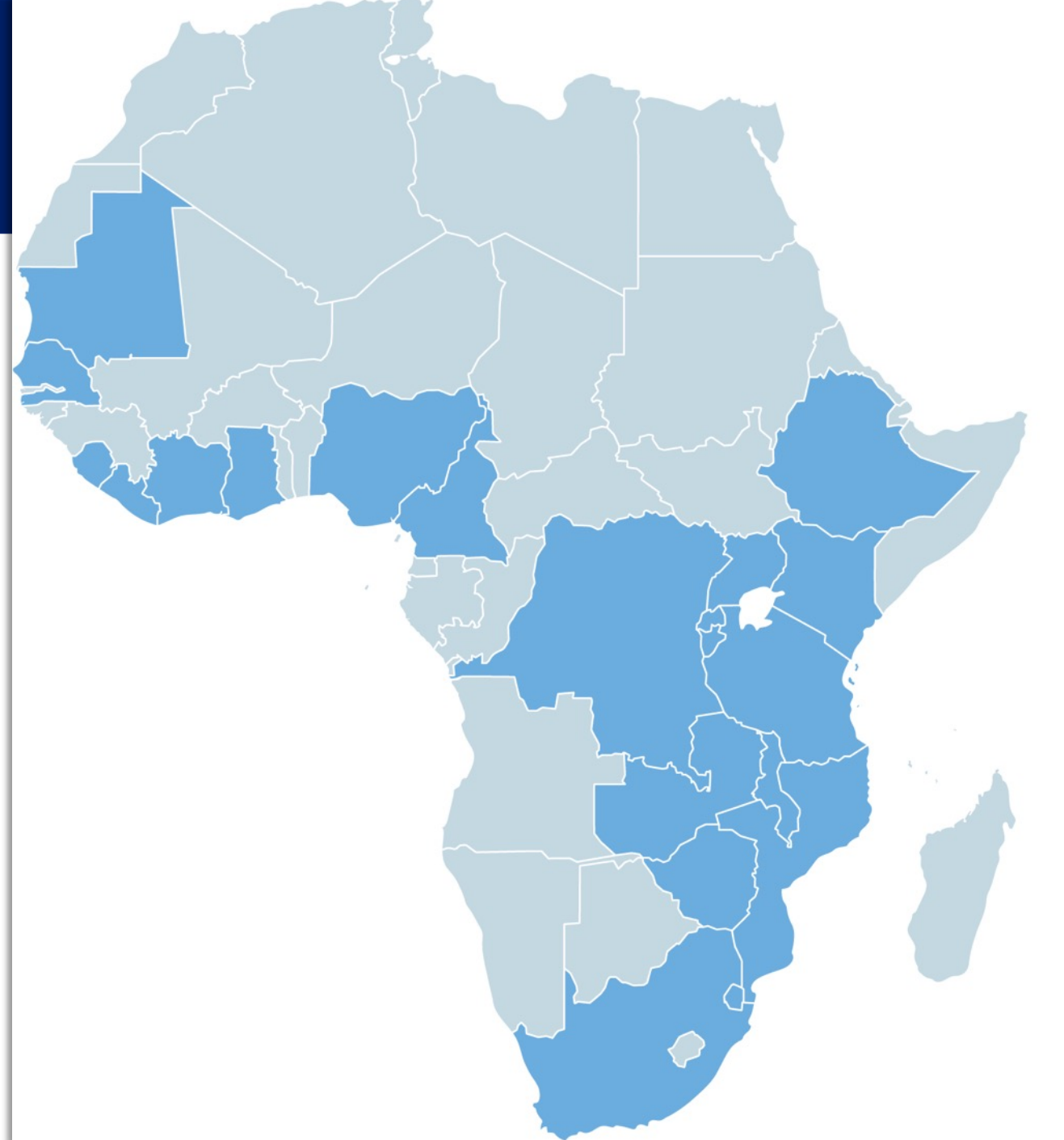
- The CQUIN Learning Network
- DSD and MCH: Making the Connection
- Meeting Objectives

# The CQUIN Learning Network


- The **HIV Coverage, Quality, and Impact Network** is a south-to-south learning network designed to accelerate implementation of high-quality differentiated service delivery to achieve HIV epidemic control
- Funded by the Bill & Melinda Gates Foundation
- Convened/led by ICAP at Columbia University

# The CQUIN Learning Network

- Burundi
- Cameroon
- CI
- DRC
- Eswatini
- Ethiopia
- Ghana
- Kenya
- Liberia
- Malawi
- Mauritania
- Mozambique
- Nigeria
- Rwanda
- Senegal
- Sierra Leone
- South Africa
- Tanzania
- Uganda
- Zambia
- Zimbabwe







# Bridging the Gap Between DSD Policy and Practice

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# How Does CQUIN Work?

- Countries join at MOH level with a formal letter of interest
- Most engage a core group – MOH, national network of people living with HIV, donors, implementing partners, civil society
- Baseline and periodic self-assessment using the CQUIN staging dashboard
- Countries develop DSD work plans, commitments and targets
- Opt-in demand-driven approach to participation in various network activities and TA
- Network members exchange knowledge, and share data on progress of scale up, best practices and lessons learned



# Illustrative CQUIN Activities

- **South-to-south learning**

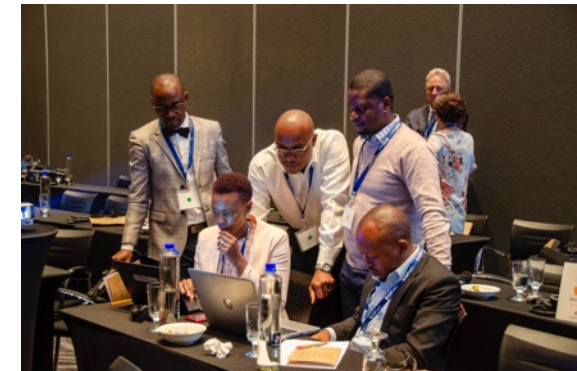
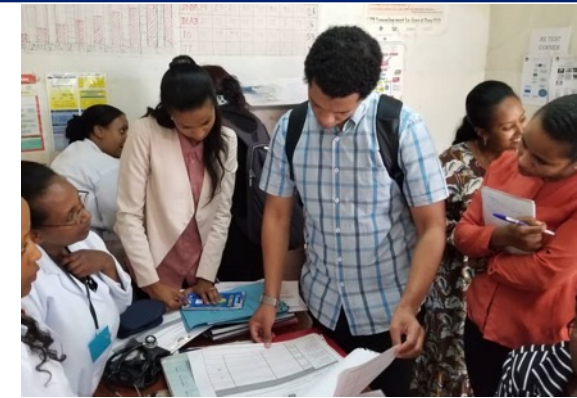
- Meetings and workshops
- South-to-south visits
- Communities of practice
- Website, webinars, monthly newsletter

- **Focused technical assistance**

- Seconding national DSD coordinator to MOHs
- Support for national DSD review meetings
- ICAP consultation/TA

- **Implementation research**

- Catalytic projects



# CQUIN Communities of Practice



HIV Learning Network:  
The CQUIN Project for Differentiated Service Delivery

Newsletter Signup

Select Language



About CQUIN

Network Countries

South to South Learning

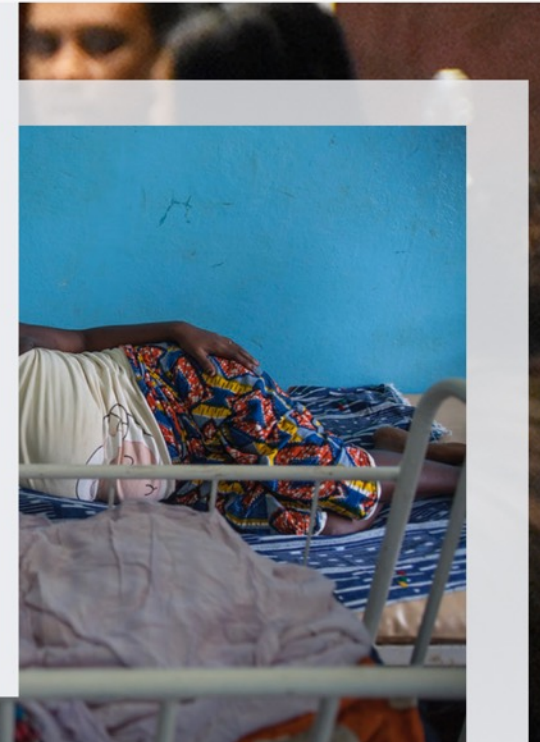
Network Focus Areas

News and Events



**CQUIN**  
**LEARNING**  
**NETWORK**  
Shaping the Future

- COVID-19 and DSD
- Monitoring & Evaluation of DSD
- Quality and Quality Improvement
- Differentiated TB/HIV Services
- DSD for Advanced HIV Disease
- DSD for Key and Priority Populations
- Differentiated MCH Services
- DSD for Men
- DSD for People with both HIV and NCDs



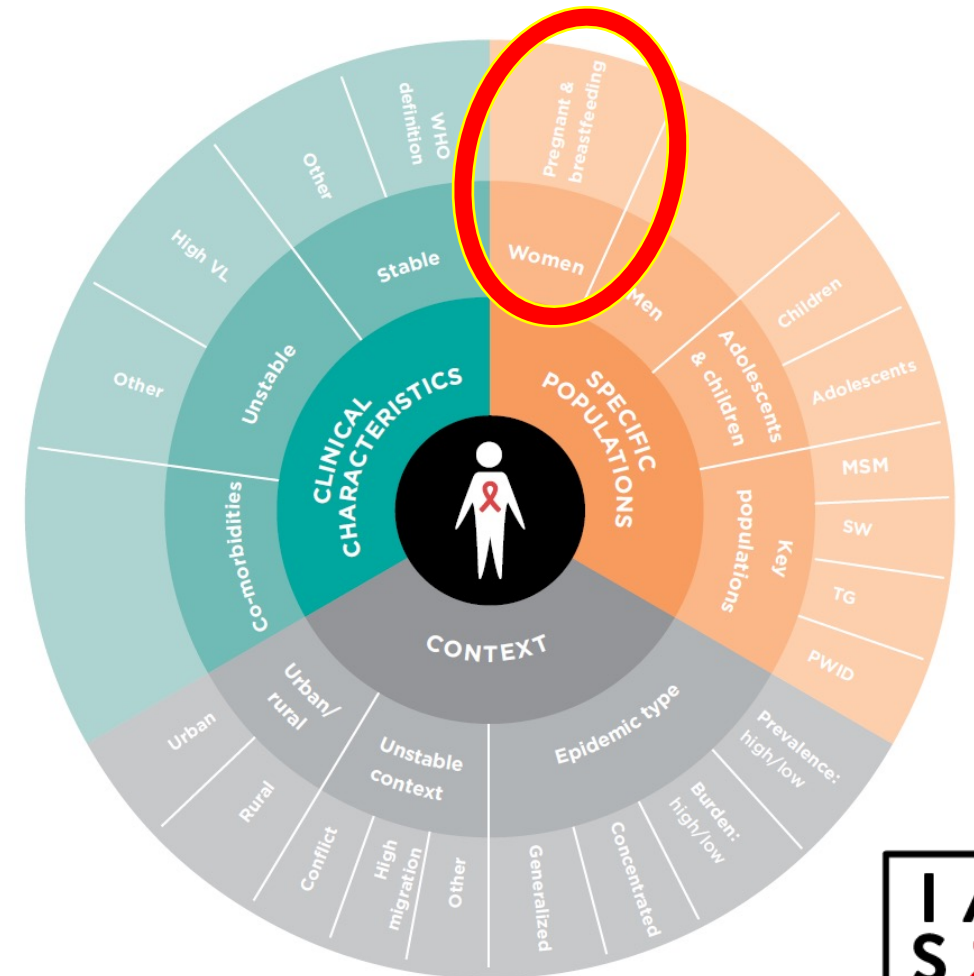


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# DSD and MCH: Making the Connection

- Differentiated service delivery tailors the design of HIV programs for different groups in order to meet their needs and expectations and to deliver high quality high impact services
- This includes less-intensive models for people doing well on treatment and more-intensive models for those who need it
- Many/most people will move between models over time

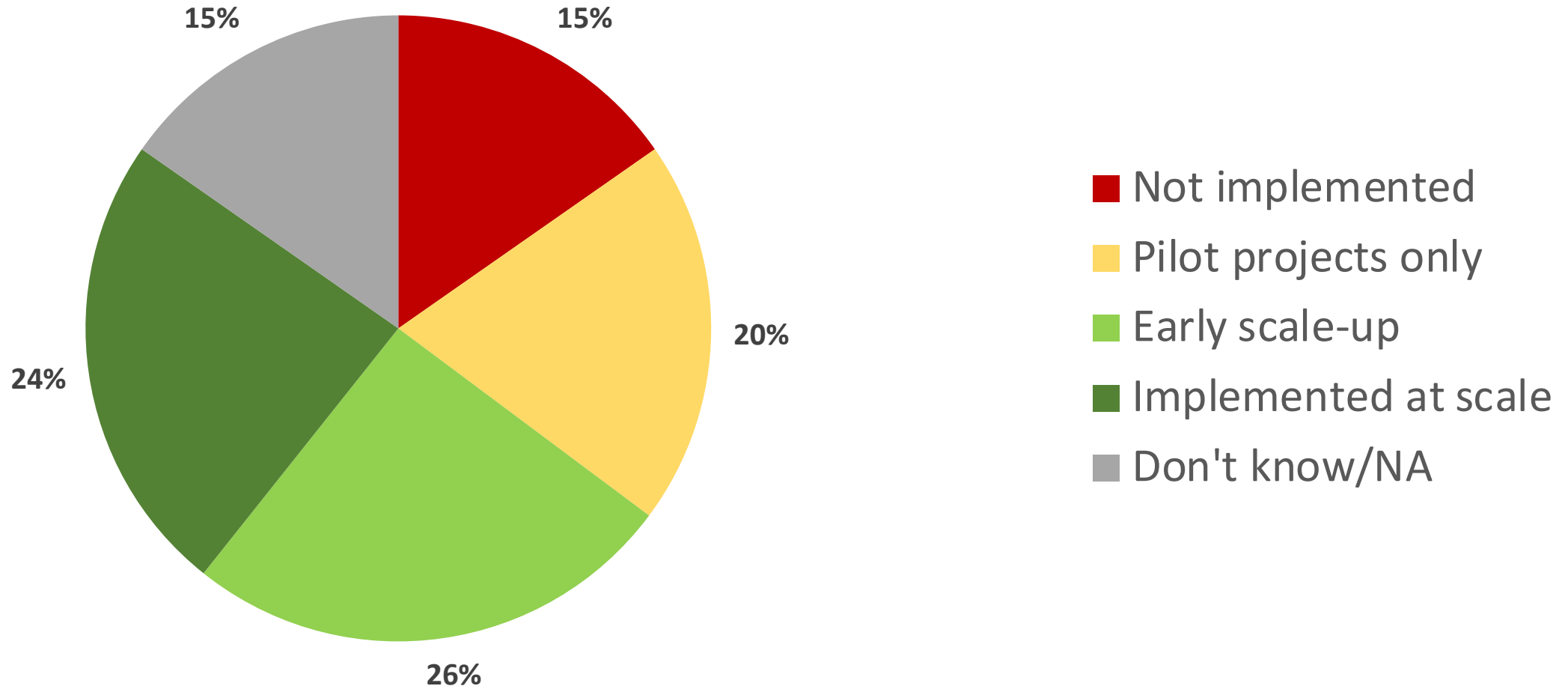


# Meeting Design & Content

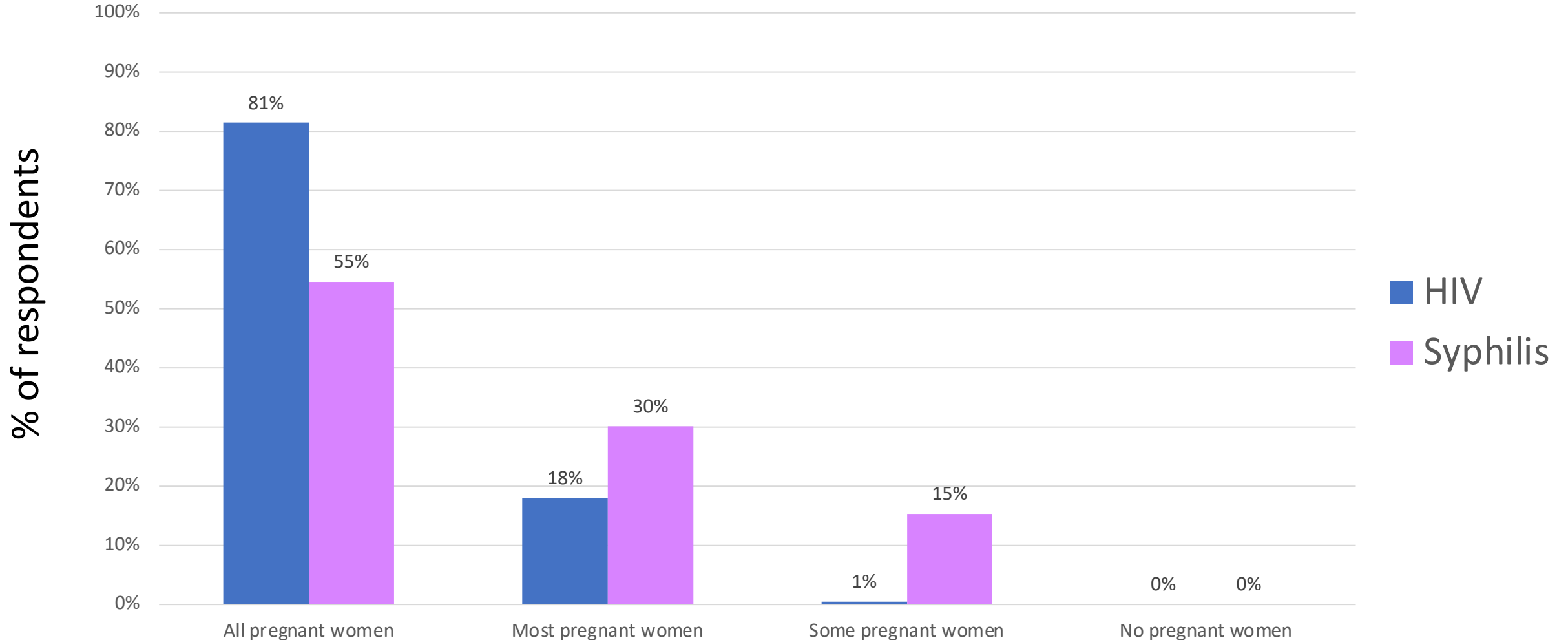
- Nonpregnant women living with HIV (WLHIV) who are enrolled in less-intensive differentiated ART models (DART)
- Pregnant WLHIV
  - Women who are diagnosed with HIV and start ART during pregnancy
  - Women on ART who become pregnant
- Post-partum women



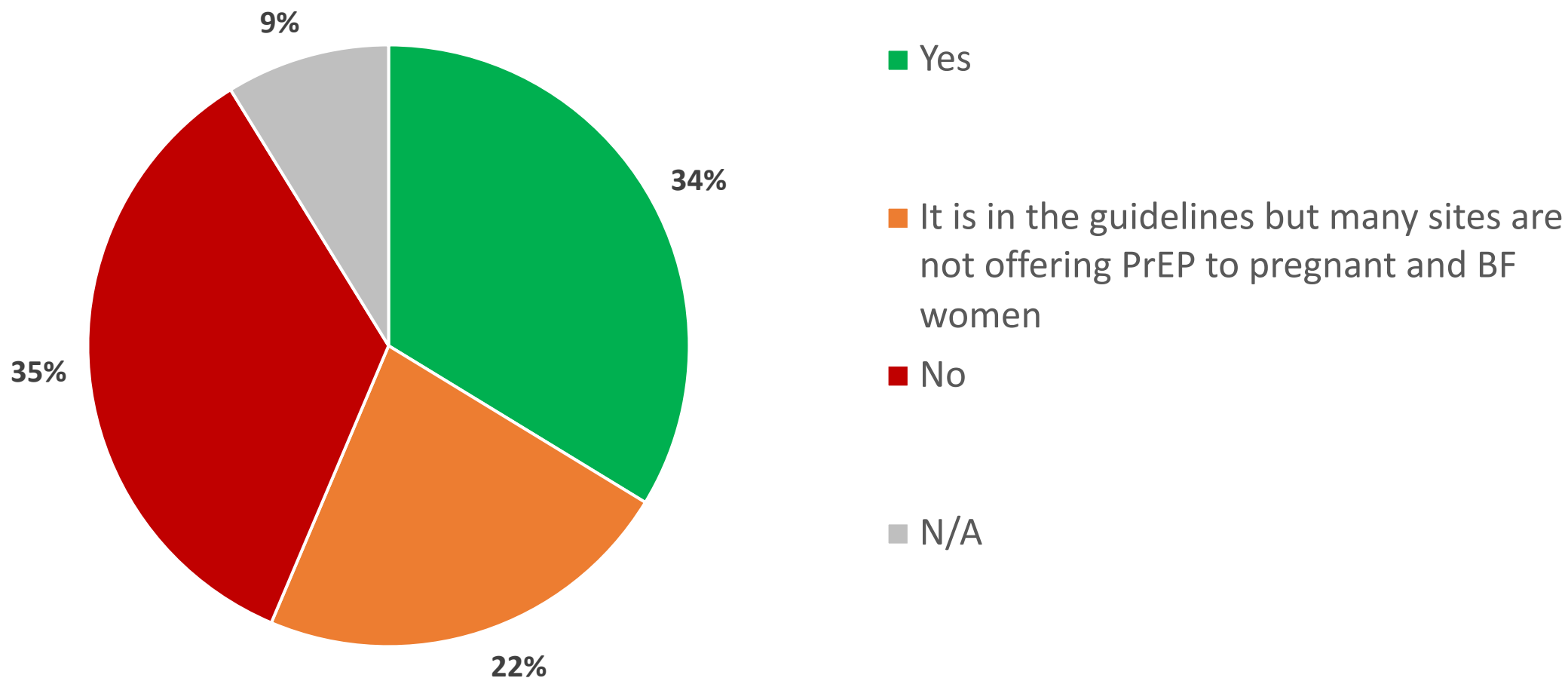
# To what extent is DSD for pregnant and postpartum women living with HIV implemented in your country?



# To what extent are HIV and syphilis testing provided to pregnant women in your country?

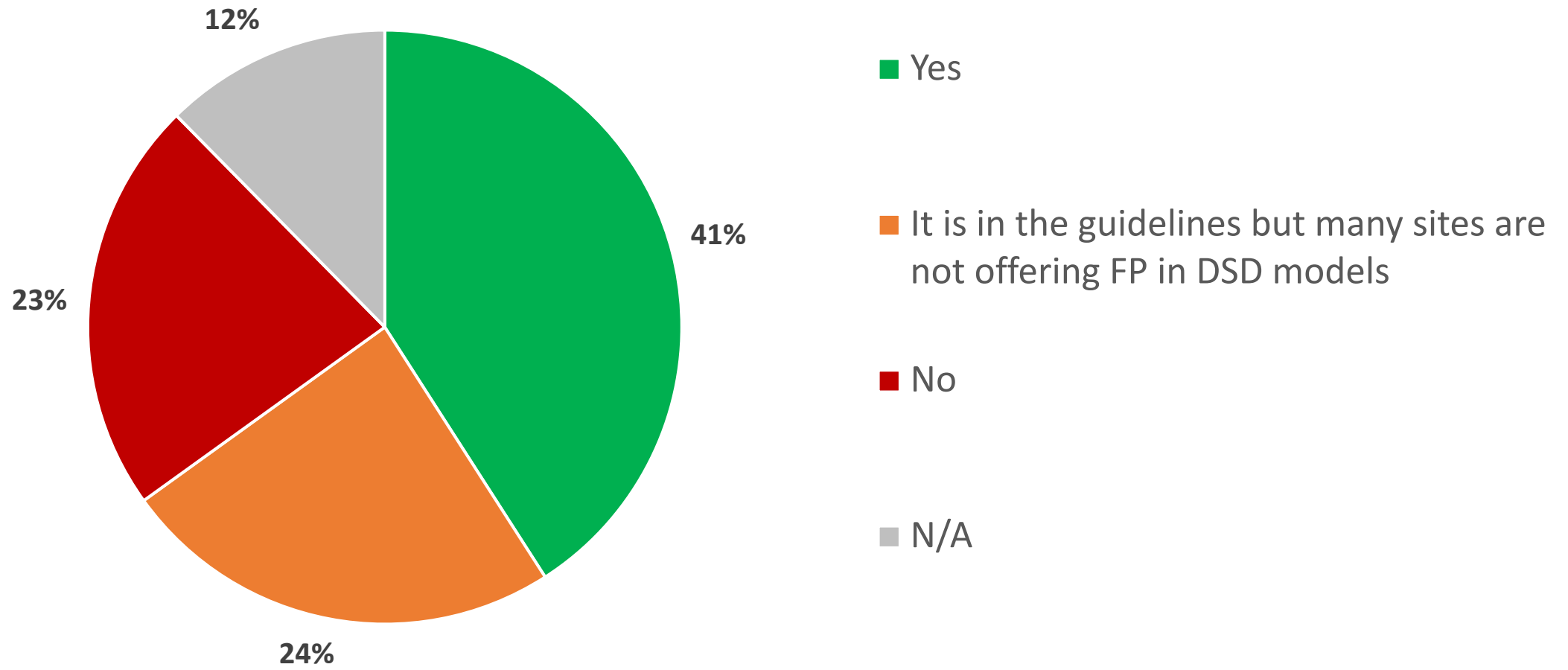


# Do you offer PrEP to pregnant and breastfeeding women in ANC and/or MCH clinic ?

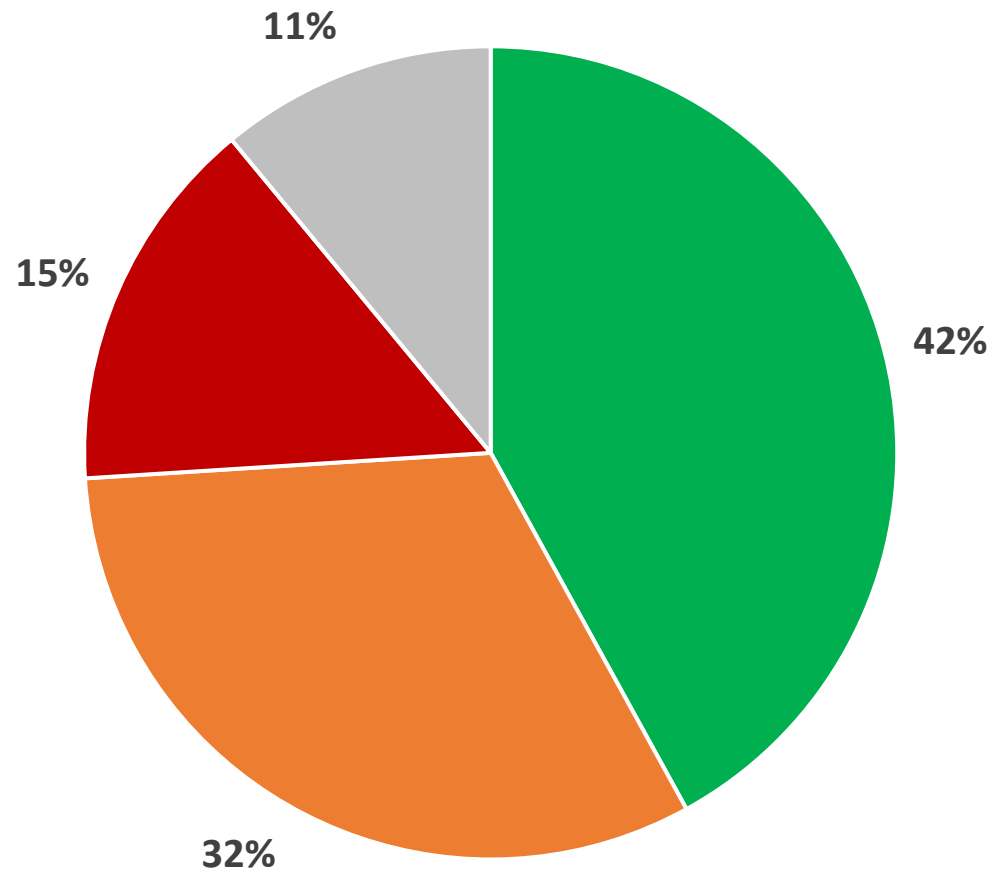




# Do HIV-positive women enrolled in differentiated treatment models receive family planning (FP) via their DSD model?

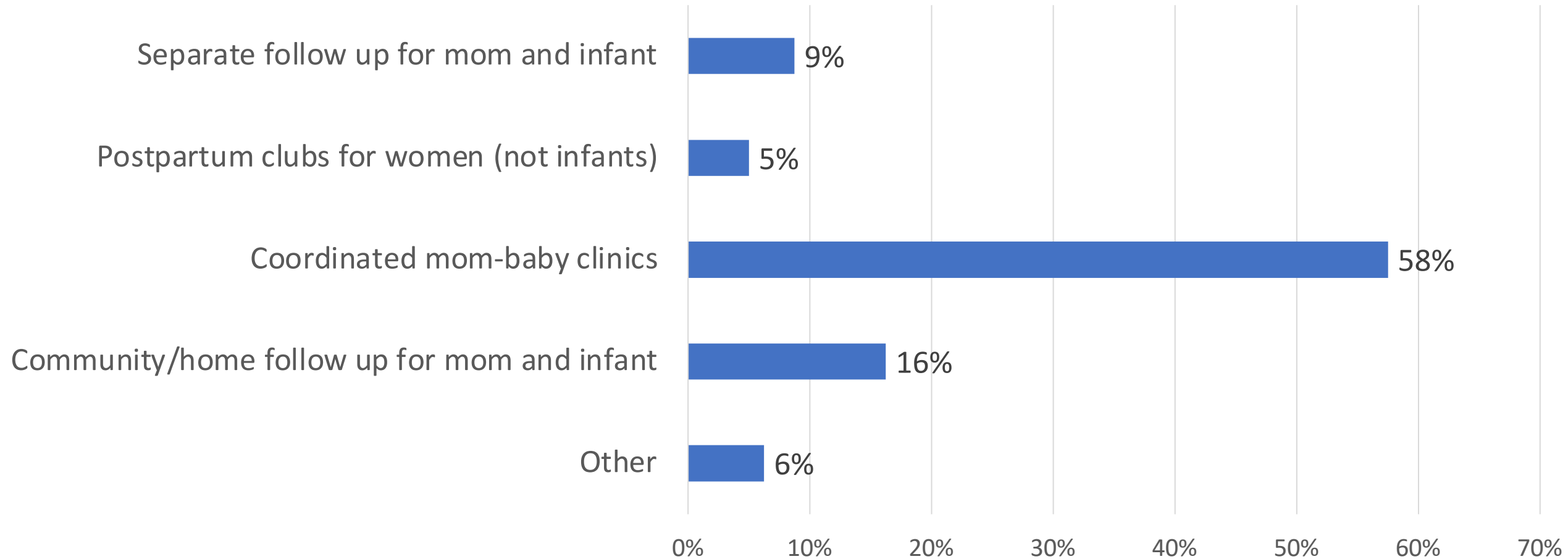


# Is the pregnancy/BF status of women enrolled in DSD models routinely monitored and documented in your country?



- Yes, our monitoring tools for DSD can capture if a woman enrolled in DSD becomes pregnant or is BF
- No, we cannot disaggregate pregnancy or BF status from DSD reporting, but we can disaggregate using facility/conventional tools
- No, we cannot disaggregate pregnancy or BF status of women on ART with any of our existing tools

# What postpartum models of care do you offer women living with HIV (WLHIV) in your country?





# Limited Data

- 61% of respondents said they had data about the number of PLHIV who are pregnant and enrolled in less-intensive treatment models
- 55% had data about DSD and MCH outcomes (e.g., retention, viral suppression) for pregnant or BF women enrolled in less-intensive DSD treatment models
- 36% had data about the quality of DSD for PMTCT services
- 32% had data on family planning provision within community-based DSD models

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# Workshop Objectives

- Present basic concepts and global guidance for HIV prevention, treatment and support of women of reproductive age
- Review research, case studies and best practices related to integration of maternal child health and HIV service delivery including multi-month dispensing (MMD) for FP and ART, and integrated models of HIV and syphilis testing and treatment
- Collaboratively explore barriers and facilitators to DSD for MCH clients
- Discuss models for monitoring the transition of MCH clients between MCH and HIV services
- Share tools, resources, and job aides
- Identify common gaps, challenges, and opportunities for future joint-learning, co-creation of tools and resources, and future south-to-south exchange visits
- Encourage CQUIN member countries to develop action plans to improve/scale up differentiated MCH services

# Workshop Agenda

Tuesday 25 May		Wednesday 26 May			Thursday 27 May		
Welcome & Framing Remarks:		Welcome/Recap of Day 1			Welcome/Recap of Day 2		
<b>Plenary presentation 1:</b> Addressing the needs of WLHIV across the <u>lifecourse</u>  <b>Plenary presentation 2: Pregnancy and STI prevention for women on ART</b>		<b>Plenary presentation 3 :</b> Optimizing treatment and vertical prevention during pregnancy  <b>Plenary presentation 4:</b> Person-centered care and patient pathways			<b>Plenary presentation 5:</b> Treatment and prevention during the postpartum period  <b>Panel Discussion:</b> Reflections on plenary presentation		
Break (30 min)		Break (30 min)			<b>Plenary Debate:</b> All moms/baby pairs should be followed in a DSD model as a unit		
<b>Panel Discussion:</b> Pregnancy and STI prevention for women on ART		<b>Panel Discussion:</b> Optimizing treatment during pregnancy for women on ART (and in DSD)			Break (30 min)		
Break (30 min)		Break (30 min)			<b>DSD for mom/baby pairs</b>	<b>Integration of FP in post-partum care</b>	<b>Prevention of HIV during BF (retesting &amp; PrEP)</b>
<b>Testing for HIV and syphilis</b>	<b>Family planning in DSD models</b>	<b>Optimal models for pregnant HIV+ women (French)</b>	<b>Optimal models for pregnant HIV+ women (English)</b>	<b>Prevention/ integration of STIs during pregnancy</b>	10:30 -11:00 Break (30 min)		
					11:00 – 11:30 Plenary: Next steps / charge to countries		

# Leveraging the CQUIN platform to promote south-to-south exchange about DSD and MCH



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## Leveraging the Lessons of Differentiated Service Delivery to Provide High-Quality Integrated Maternal and Child Health Services

- Conference Home
- Agenda
- Plenary Sessions
- Parallel Sessions

A CQUIN Learning Network Virtual Meeting

Dates: May 25 – May 27, 2021

With the support of the Bill & Melinda Gates Foundation, [ICAP at Columbia University](#) assists network member countries to adopt, implement, and expand effective DSD models by enabling experience sharing, cross-learning, and collaborative problem-solving, and by providing targeted, demand-driven technical assistance and support.

The workshop will explore the needs of women at risk of becoming infected and/or living with HIV along the MCH continuum, with a focus on:





# Thank You

- Workshop planning group
- Presenters and panelists
- Partner countries
- The International AIDS Society (IAS)
- The International Treatment Preparedness Coalition (ITPC)
- The Bill & Melinda Gates Foundation