



BACKGROUND

South Africa joined the CQUIN network in 2018. Our priorities for DSD scale-up include, but are not limited to, quality management for DSD, differentiated M&E, differentiated HIV/NCD services, DSD for advanced HIV disease (AHD), differentiated TB/HIV services, differentiated maternal and child health (MCH) services, DSD for key populations, DSD for mobile, migrant, and displaced populations, and differentiated HIV testing services. In South Africa, DSD is coordinated by the National Technical Working Group, which is also a platform ensuring involvement and meaningful engagement of recipients of care through the South Africa National AIDS Council (SANAC) and Civil Society Forum. Existing policies that support DSD include the 2019 *ART Clinical Guidelines; Revised 2020 Adherence Guidelines for Chronic Diseases (HIV, TB, and NCDs)*; standard operating procedures to support linkage to care, adherence, retention, and re-engagement in care; 2020 Community ART Standard Operating Procedures to intensify comprehensive community HIV and TB services; and the *Welcome Back Strategy*. Using the Operation Phuthuma Quality Improvement management framework, we are working to adopt full DSD quality standards.

DSD IMPLEMENTATION

South Africa's less-intensive models include **Facility Pick Up Points (FAC-PUP)**; **Adherence Clubs (AC)**; and **External Pick-Up Points (EX-PUP)**. The more-intensive model is called: **Conventional Model / Standard Care**, which covers more intensive standard care, clients newly initiated on ART, clients with AHD, clients who missed appointments, and those who de-registered from less-intensive models. People eligible for less-intensive models are adults over 18 years of age who have been on ART for at least six months and whose most recent assessment results were normal (this includes most recent viral load (VL) < 50 copies/ml in the past six months). For recipients of care with NCDs, this also includes most recent HbA1c taken in past six months ≤ 7% for diabetes and consecutive BP < 140/90 for hypertension. Approximately 4,200 health care facilities are providing differentiated ART to approximately 47% of the clients decanted to three of the less intensive models (FAC-PUP, AC, and EX-PUP).

Figure 1: DSD Model Mix: Results vs. Targets

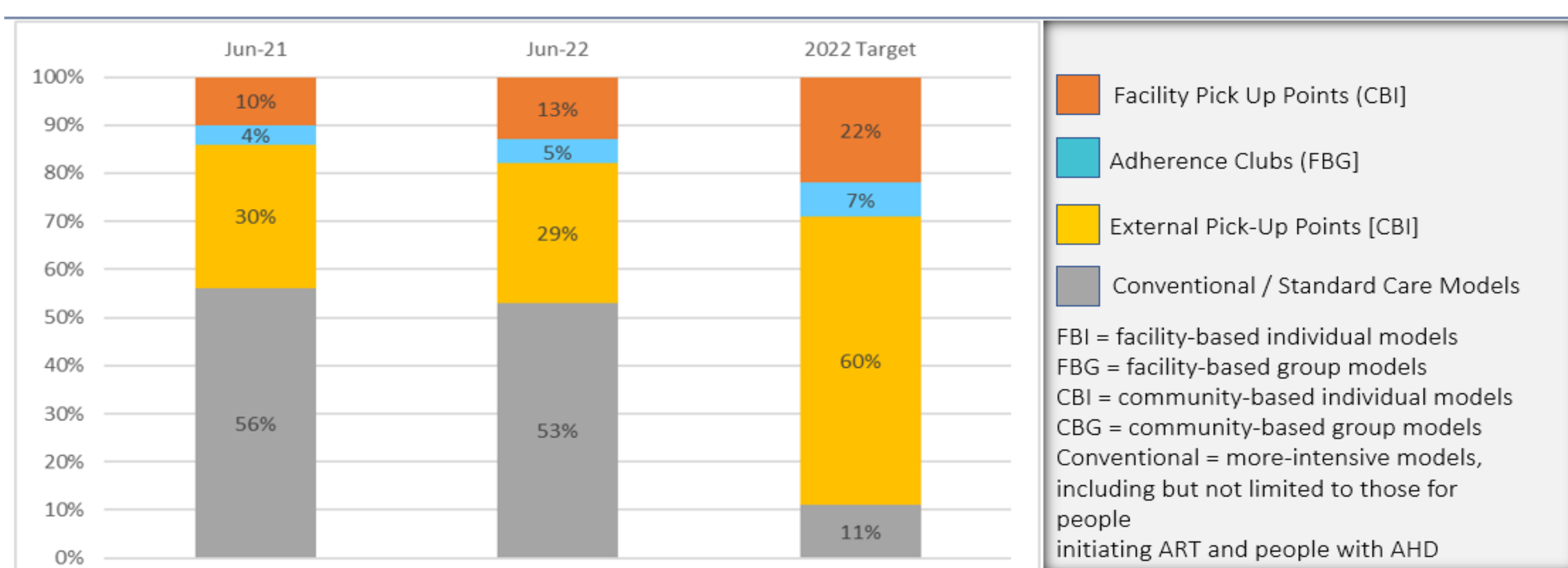
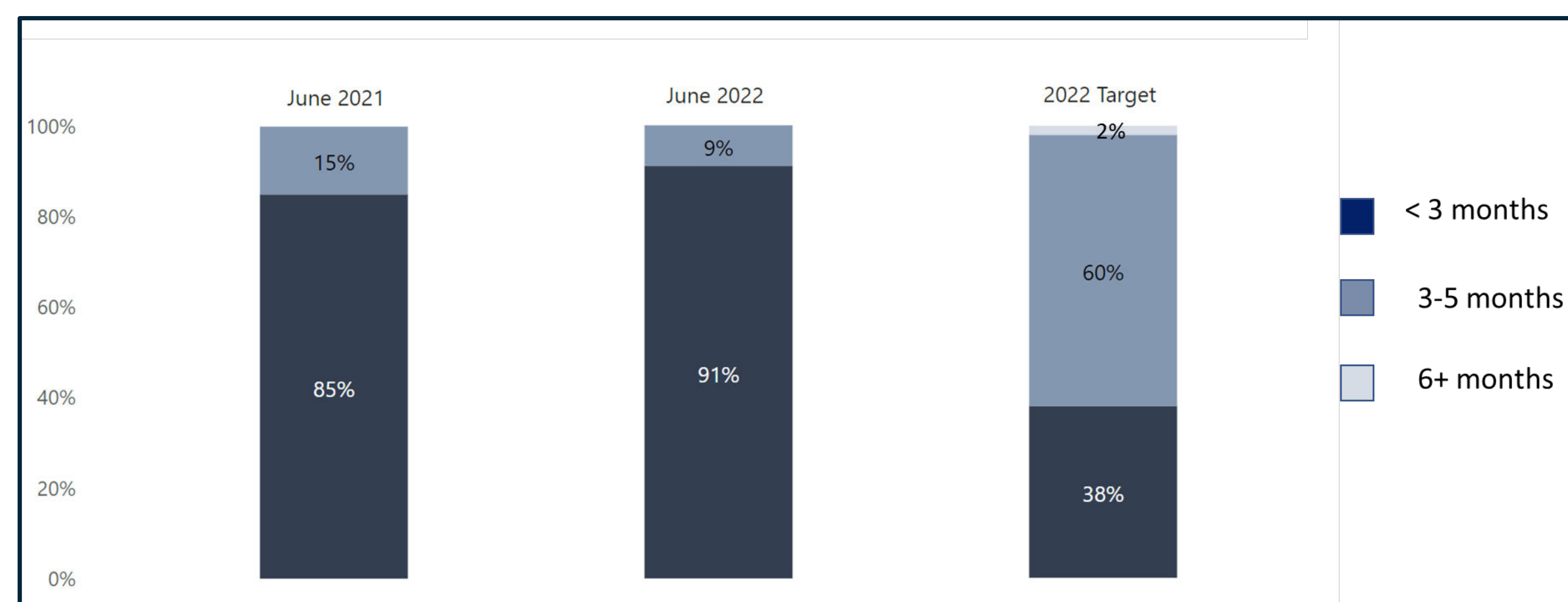


Figure 2: Multi-month Dispensing (MMD): Results vs. Targets



The source of data is Tier.net and represents 75% of all clients. The gaps in harmonizing M&E systems (Tier.Net and SyNCH-CCMDD) remain a critical area to be addressed to inform further DSD/DMOC scale-up. The 2021 Riots in Gauteng and KwaZulu-Natal (KZN) (which are the two highest-volume provinces), as well as the flood disaster that hit KZN, affected many external pick-up points.

DART CAPABILITY MATURITY MODEL SELF-STAGING

Figure 3: CQUIN Treatment Capability Maturity Model Staging Results: 2022

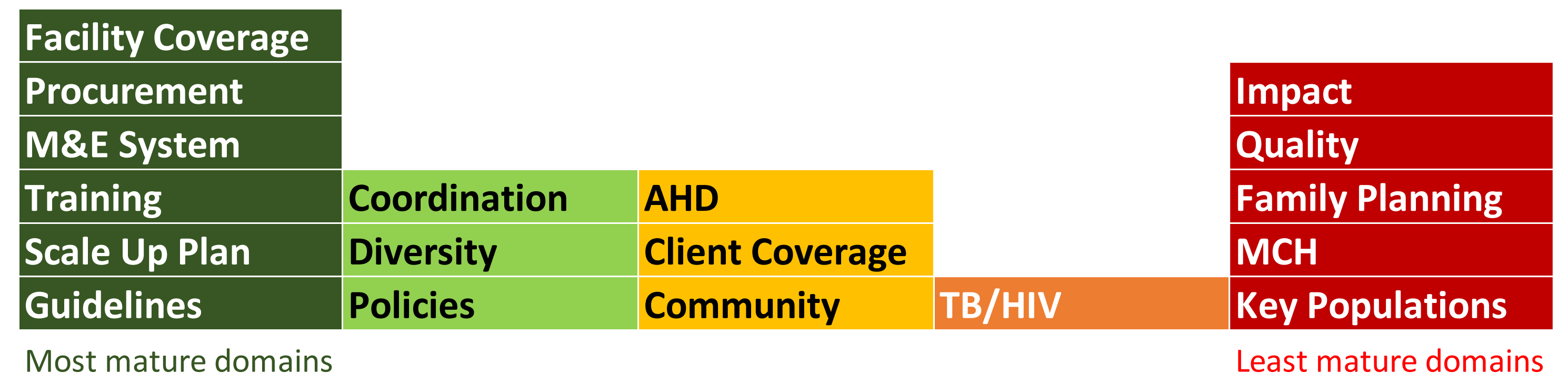
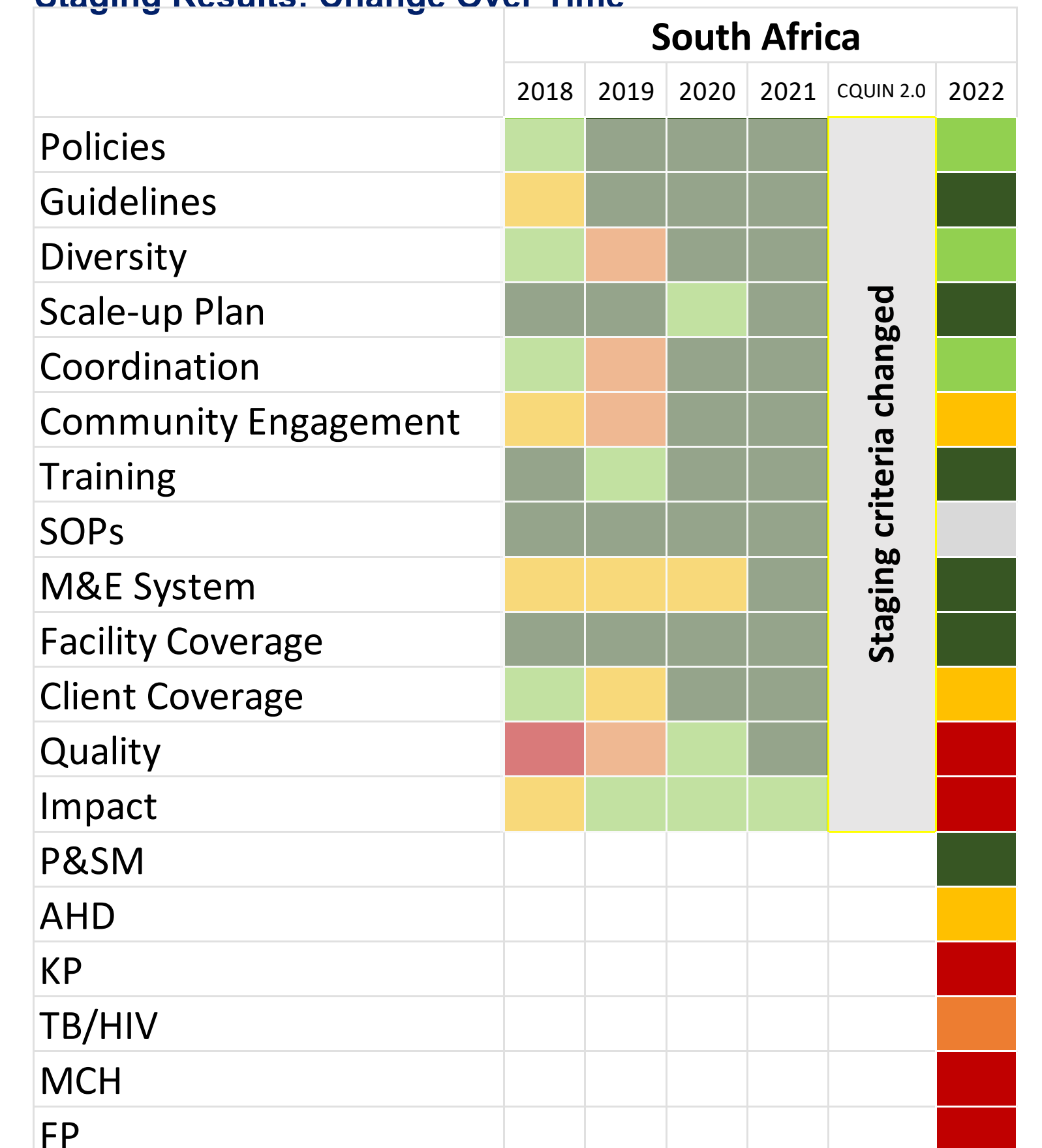


Figure 3 shows the results of South Africa's recent self-assessment using the CQUIN DART capability maturity model. In 2022, South Africa achieved the most mature stage (dark green) in six domains, while five domains were in the least mature (red) stage.

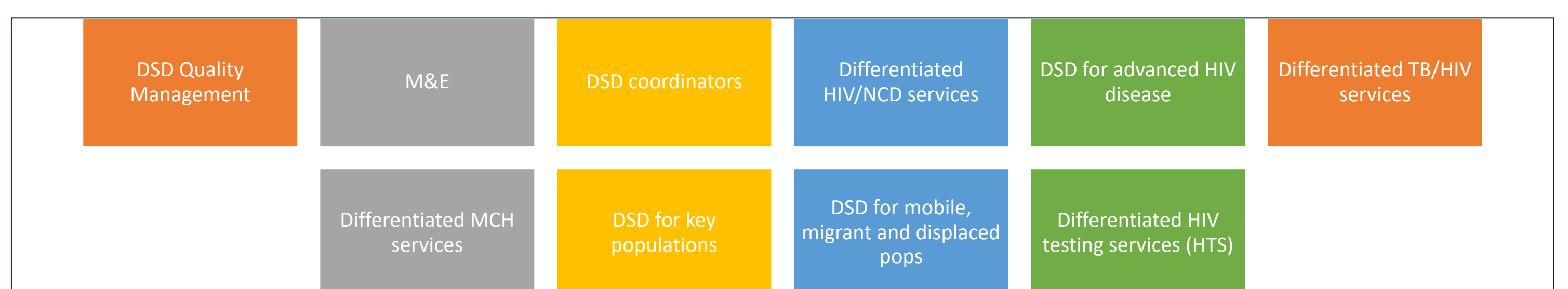
Figure 4 describes DART dashboard progress over time and results of the revised and expanded DART capability maturity model used in 2022.

Figure 4: CQUIN Treatment Capability Maturity Model Staging Results: Change Over Time



CQUIN ENGAGEMENT AND ACHIEVEMENTS

South Africa participates in the following CQUIN communities of practice:



South Africa is planning a country-to-country learning exchange visit to Nigeria to learn and understand the impact of Decentralized Drug Distribution (DDD) through private pharmacies and other community-based ART models. Participation in CQUIN meetings has been instrumental to South Africa's substantial progress toward taking high-quality DSD to scale through use of the CQUIN capability maturity model, national data, DSD Performance Reviews, and evidence-based case studies. Contributions of the CQUIN network have helped broaden our technical focus beyond differentiated treatment for people doing well on ART to include DSD for advanced HIV disease, differentiated TB/HIV services, MCH, key populations, people with HIV and NCDs, and other priority sub-populations in South Africa.

NEXT STEPS/WAY FORWARD

South Africa seeks to prioritize and optimize the following interventions to support DSD scale-up:

- Improve differentiated HIV testing services (dHTS) and address the gaps hindering achievement of the 1st 95% (increased case-finding)
- Improve differentiated linkage to prevention, care, and treatment and address the 2nd 95% (optimized ART initiation and adherence to treatment)
- Improve/address gaps in retention
- Improve differentiated re-engagement and address the 3rd 95%
- Adapt quality standards and assessment tool for DSD

