Differentiated HIV Service Delivery:
Optimizing Person-Centered HIV Services in Burundi

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BACKGROUND

Burundi launched differentiated service delivery (DSD) in 2017 and joined the CQUIN network in 2020. DSD is coordinated through a technical working group (Comité technique PSD) and recipients of care (RoCs) are engaged in DSD coordination, implementation, and monitoring. The following key documents have been developed: national DSD guidelines, standard operating procedures, and DSD quality standards.

Key priorities for DSD scale-up include scaling up DSD to all HIV sites, implementing and tracking quality improvement indicators at 20 sites, strengthening community engagement through community-led monitoring, enhancing integration of NCDs and FP into HIV services, and conducting a country-to-country visit that focuses on quality improvement and the integration of FP services and NCDs.

DSD IMPLEMENTATION

Figure 1: DSD Model Mix: Results *vs. projections*

FBI: Facility-based individual models
FBG: Facility-based group models
CBI: Community-based individual models
CBG: Community-based group models
Conventional: More-intensive models, including but not limited to those for people initiating ART and people with AHD
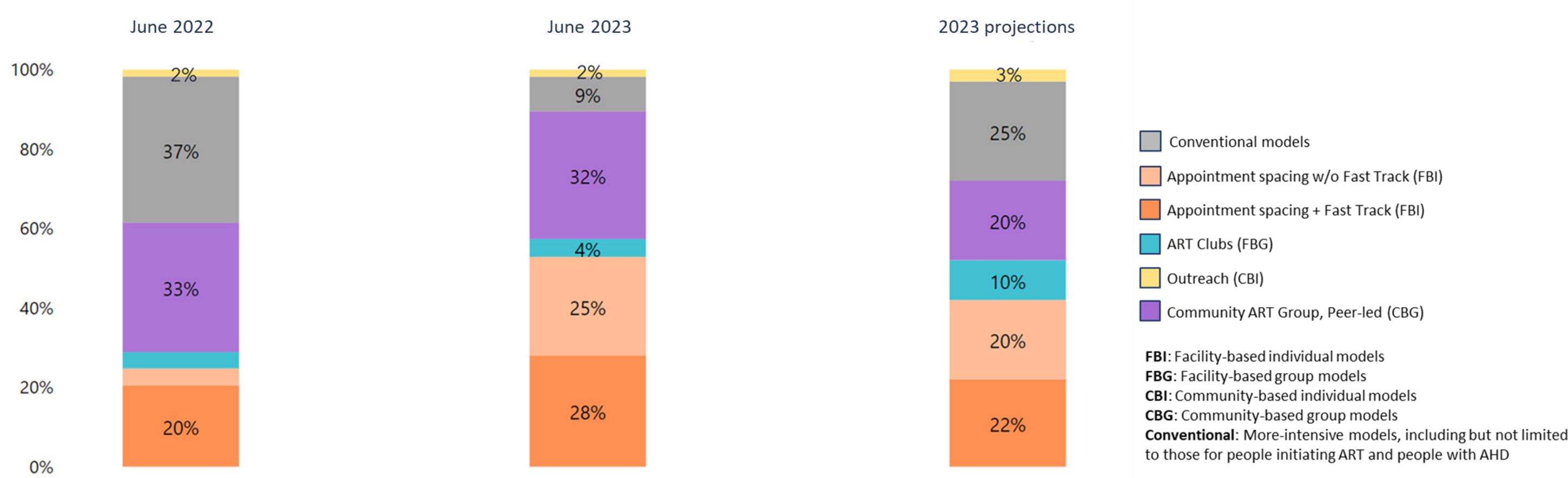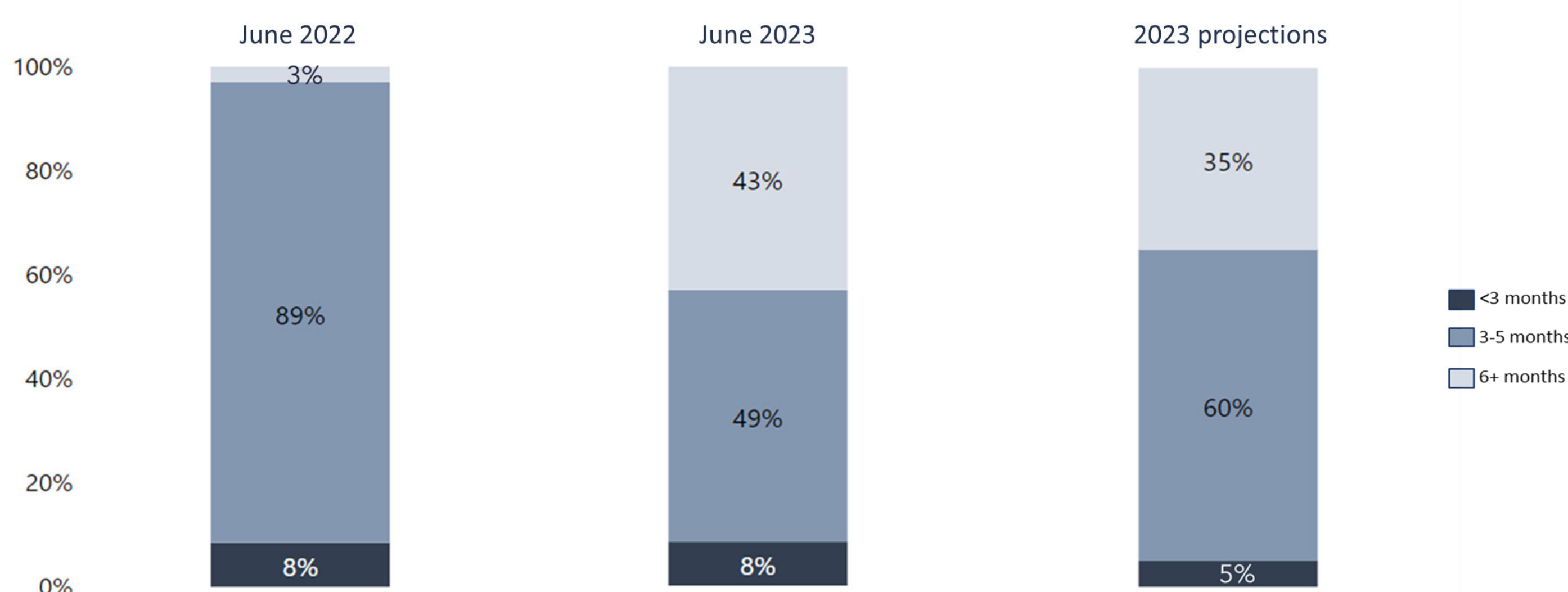
Figure 2: Multi-month Dispensing (MMD): Results *vs. projections*

In Burundi, the following five, less-intensive models are available to people living with HIV who are established in care: Visit Spacing with FT (EV3), Visit Spacing without FT (EV6), ART Clubs, CAG, and Outreach.

There are 963 ART facilities in Burundi, 37% of which provide less-intensive DART. 70 % of people on ART are enrolled in a less-intensive model. Facilities reporting DSD data are primarily PEPFAR-supported high-volume sites.

While targets were not met for facility coverage, they are expected to be met next year with support from the Global Fund. For facility-based models and MMD6 coverage, targets were exceeded due to support provided by PEPFAR implementing partners (IPs) in the scale-up of visit spacing models and the implementation of the MMD6 project to accelerate MMD scale-up (with specific support from ICAP in Burundi).

CQUIN ENGAGEMENT AND ACHIEVEMENTS

- Burundi participates in the following Communities of Practice: M&E, TB-HIV, MCH, and dHTS.
- Key lessons learned from CQUIN meetings relate to combination prevention and the integration of FP and NCDs; as a result, Burundi is adjusting its policies to achieve these goals.
- Burundi implemented its first DSD Performance Review (DPR) with technical and financial support from ICAP in Burundi. During the DPR, indicators on FP (contraceptive method) and NCDs (HTN) were collected to inform efforts to integrate FP and NCDs.

DART CAPABILITY MATURITY MODEL TRENDS (2022-2023)

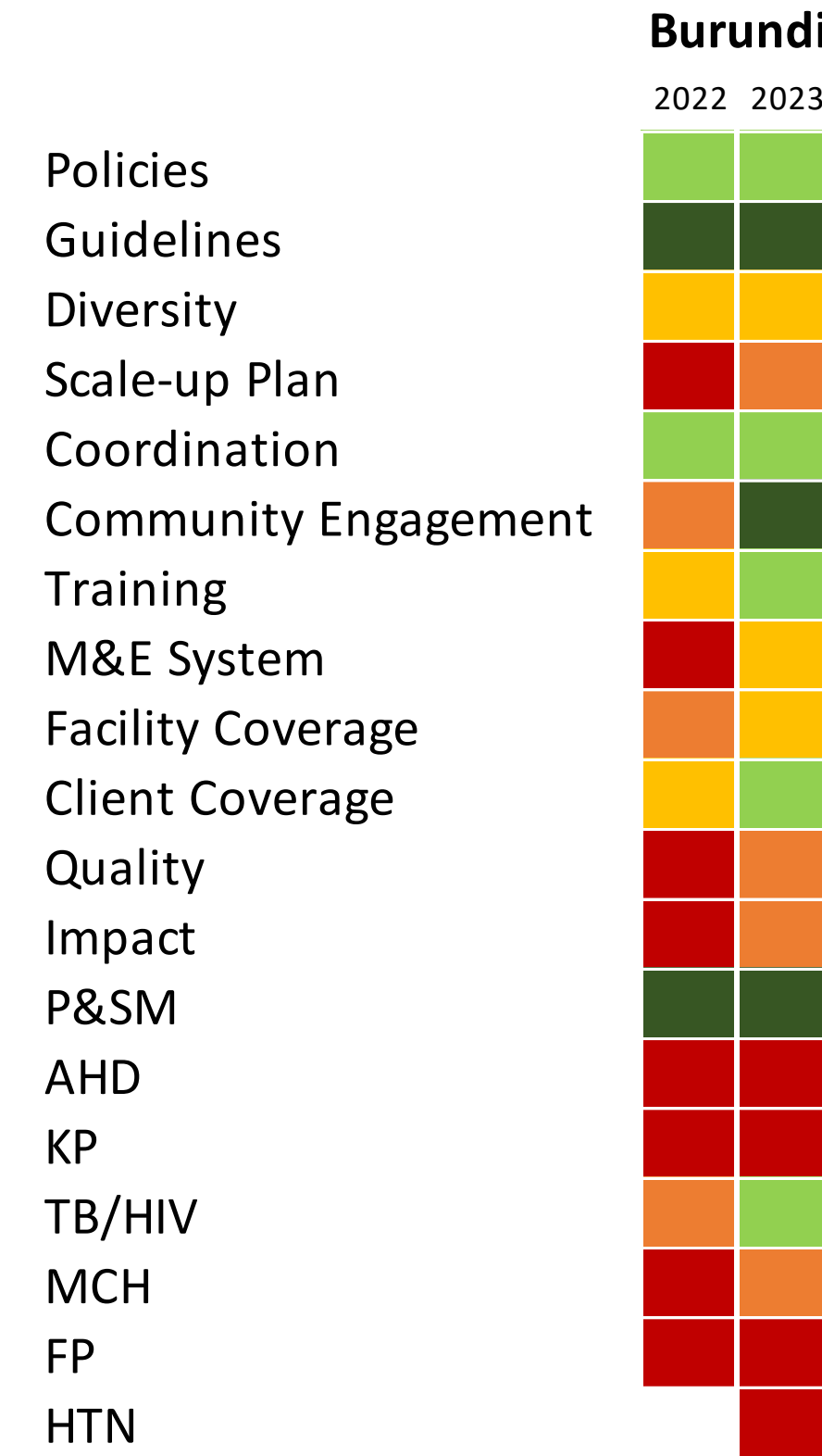Figure 3: DART Capability Maturity Model Trends (2022-2023)

Figure 3 shows results of the country team's self-assessment using the CQUIN DART capability maturity model in 2022 and 2023.
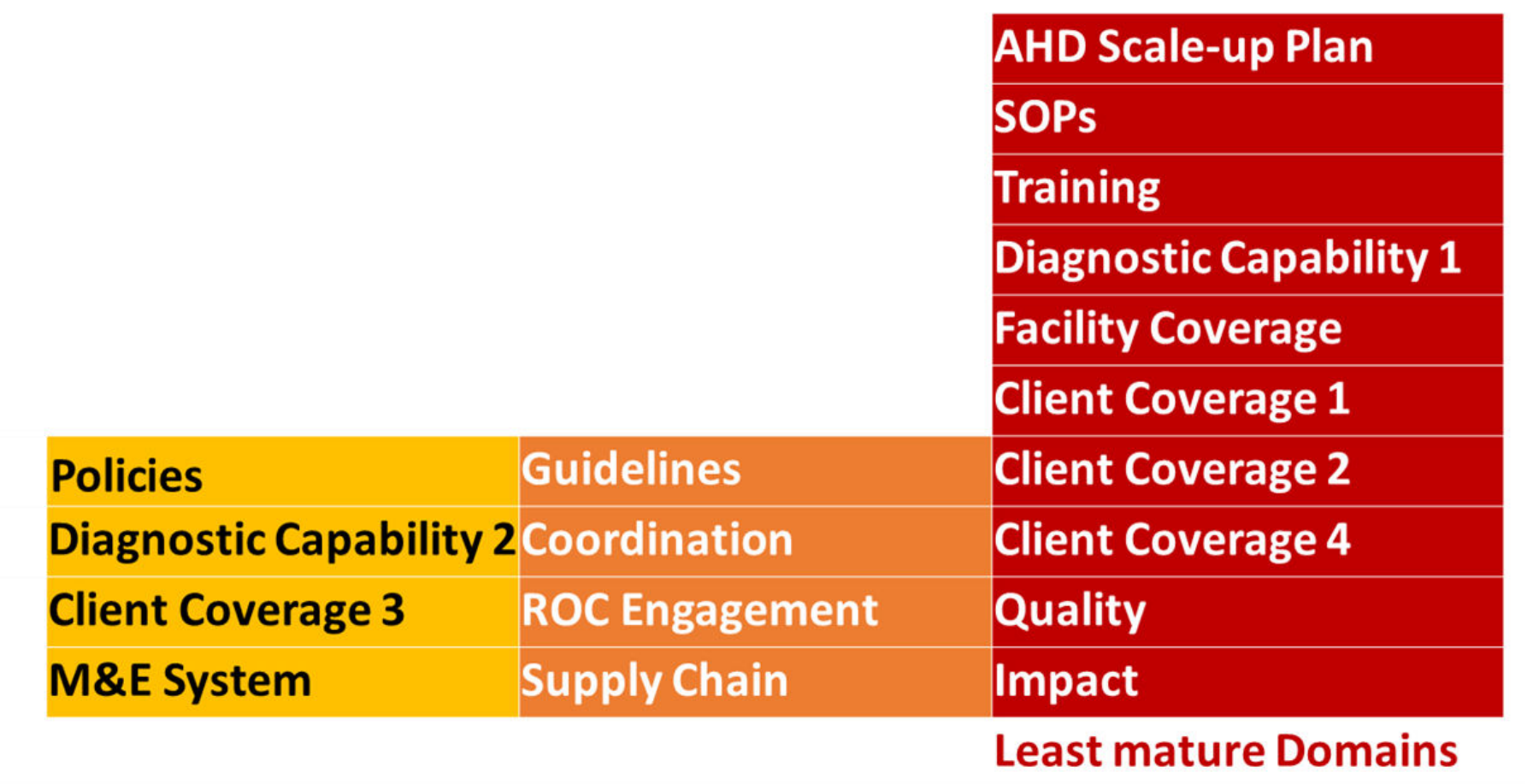
In 2023, Burundi achieved the most mature stage (dark green) in **three domains** (Guidelines, CE, P&SM), while **four domains** (AHD, KP, FP, HTN) remained in the least mature (red) stage.

Significant improvements have been made in three domains (Training, Client coverage, TB/HIV), which are now in light green due to IP support and effective planning.

Challenges remain in the domains of KP DSD models, NCDs (HTN), and FP Integration.

AHD CAPABILITY MATURITY MODEL SELF-STAGING
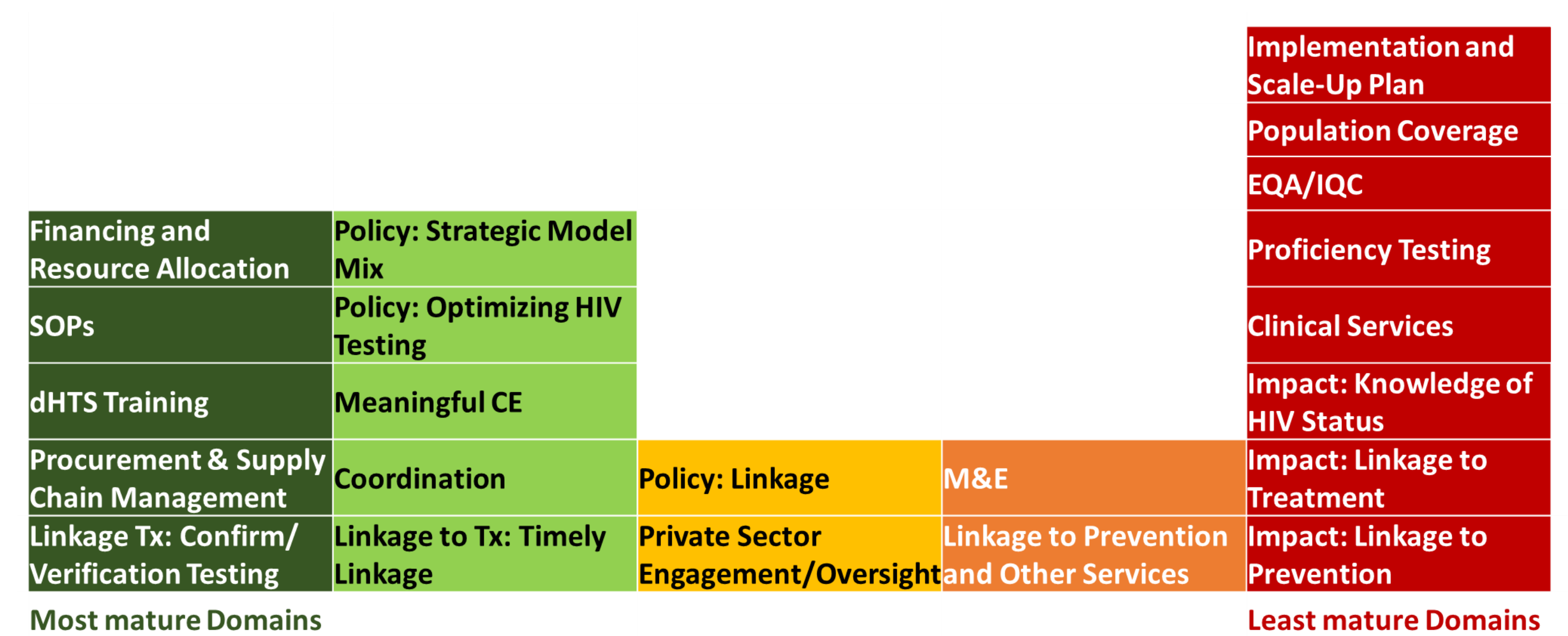
Figure 4: AHD Capability Maturity Model Results, 2023

Most mature Domains		Least mature Domains

Figure 4 shows results of the country team's recent self-assessment using the CQUIN AHD capability maturity model. In 2023, Burundi didn't achieve the most mature stage (dark green) in any domain, while **10 domains** remained in the least mature (red) stage.

dHTS CAPABILITY MATURITY MODEL SELF-STAGING

Figure 5: dHTS Capability Maturity Model Results, 2023

Most mature Domains		Least mature Domains

Figure 5 shows the results of the country team's recent self-assessment using the CQUIN dHTS capability maturity model. In 2023, Burundi achieved the most mature stage (dark green) in **five domains**, while **eight domains** remained in the least mature (red) stage.

NEXT STEPS / WAY FORWARD

Priority next steps include:

- Scaling up DSD models to all HIV sites, including non-PEPFAR-supported sites
- Implementing and tracking quality improvement indicators at 20 sites
- Strengthening community engagement through community-led monitoring
- Accelerating the integration of NCDs and FP with HIV services
- Conducting a country-to-country visit to learn about DSD quality improvement and the integration of FP services and NCDs
- Conducting a second DPR, with CQUIN technical and financial support