

Optimizing Person-Centered HIV Services in Zambia

Sivile Suilanj¹, Lubasi Sundano¹, Khozya Zyambo¹, Chimuka Sianyinda¹, Linah Mwango², Muhau Mubiana³, Natalie Vlahakis³, Natasha Mwelwa⁴, Priscilla Lumano Mulenga¹

1. Ministry of Health; 2. Ciheb Zambia; 3. Center for infectious Disease Research in Zambia; 4. Clinton Health Access Initiative

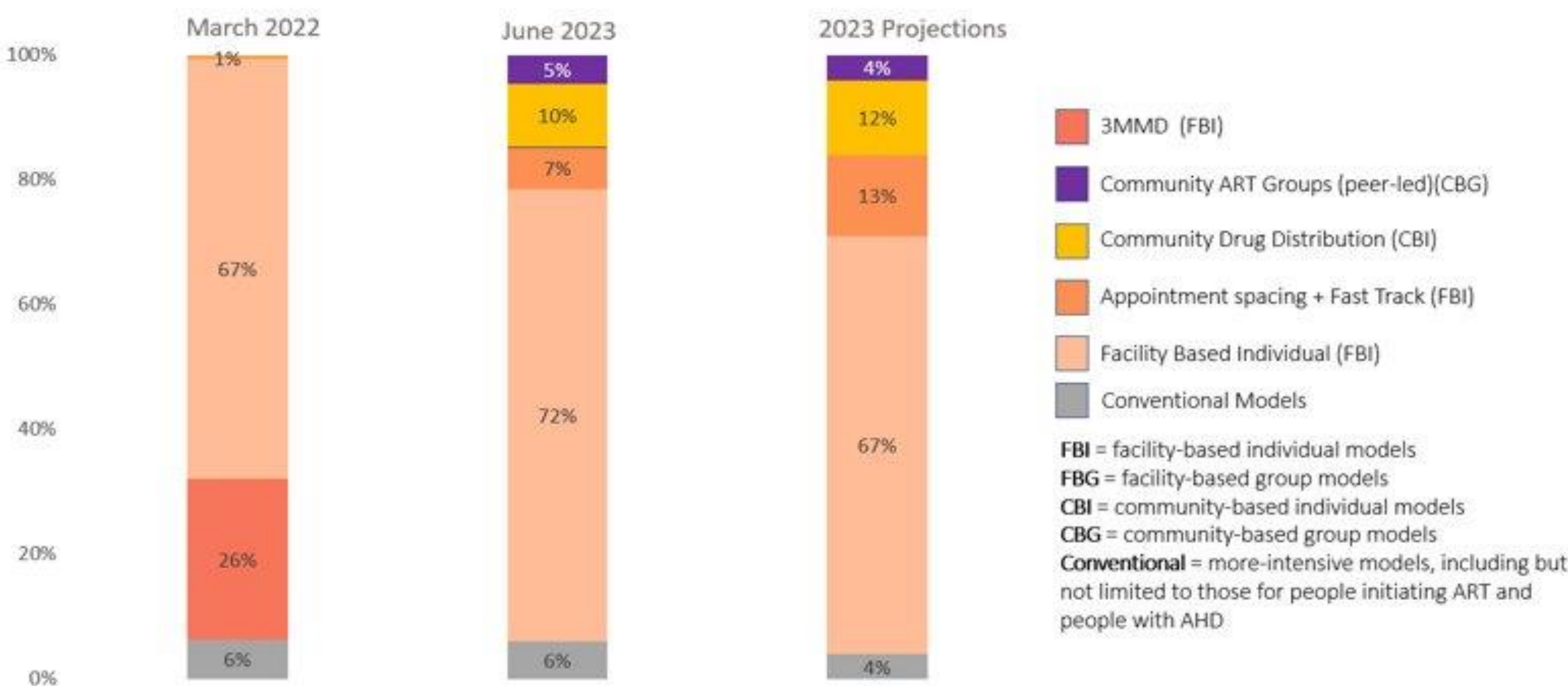


BACKGROUND

In 2017, Zambia's national differentiated service delivery (DSD) taskforce was established with the goal of developing DSD standards, strengthening DSD monitoring and evaluation, and conducting performance reviews (including service quality assessments). The taskforce has representatives from the Ministry of Health, donors, implementing partners, and civil society organizations. While the 2017 DSD strategy focused on providing DART to people living with HIV who were established on treatment, the 2022 - 2026 DSD implementation framework prioritizes differentiating services for all people living with HIV.

DSD IMPLEMENTATION

Figure 1: DSD Model Mix: Results vs. Projections



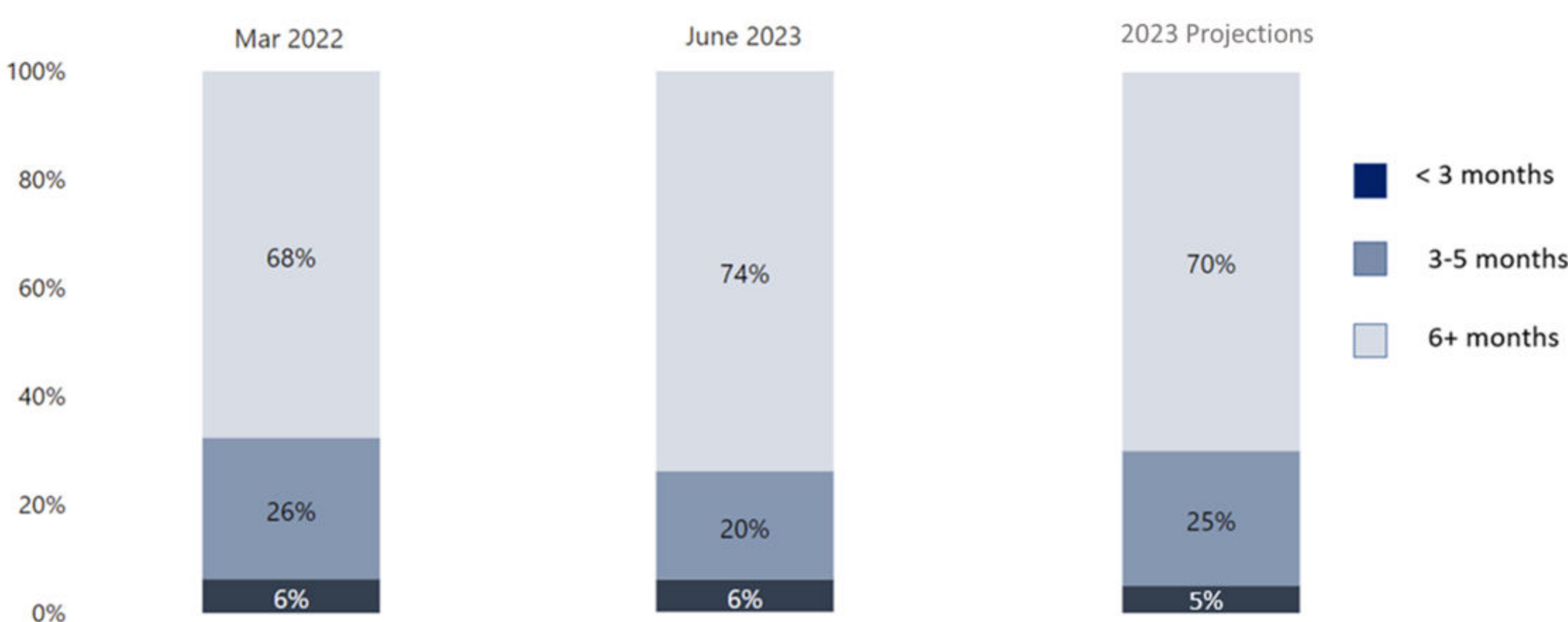
More-intensive models offered in Zambia include direct observed therapy, viremic ART specific clinic, and peer-patient pairing.

Less-intensive models include:

- **Facility-based:** Urban & Rural Adherence group, Fast Track ART Service, Multi-month Scripting and dispensation, Before/After hours, and weekend models
- **Community based:** Community ART Distribution Points, Health Post, Community Post, Retail Pharmacy, Mobile ART Distribution, Community ART Service Delivery, Community Adherence Groups, and Community ART Access Points

All 2,556 ART facilities in Zambia provide less-intensive models and 94% of recipients of care are enrolled in a less-intensive model.

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



As of June 2023, 74% of recipients of care on ART were receiving >6 months, 20% were receiving 3-5 months, and 6% were receiving <3 months. The target was achieved as a result of Zambia's strong supply chain system.

CQUIN ENGAGEMENT AND ACHIEVEMENTS

- Zambia belongs to eight CQUIN Community of Practice: M&E, QI, AHD, HIV/TB, HIV/NCD Services, Differentiated MCH, DSD for KPs, and DSD for migrant and mobile populations.
- Zambia visited Eswatini in February 2023 to learn about AHD supply chain systems and hosted Nigeria for a country-to-county exchange visit in September 2023 that focused on DSD for men.
- A total of 50 men's clinics and 60 community posts were opened to increase HIV testing services among men in 27 target districts.

DART CAPABILITY MATURITY MODEL TRENDS (2022-2023)

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

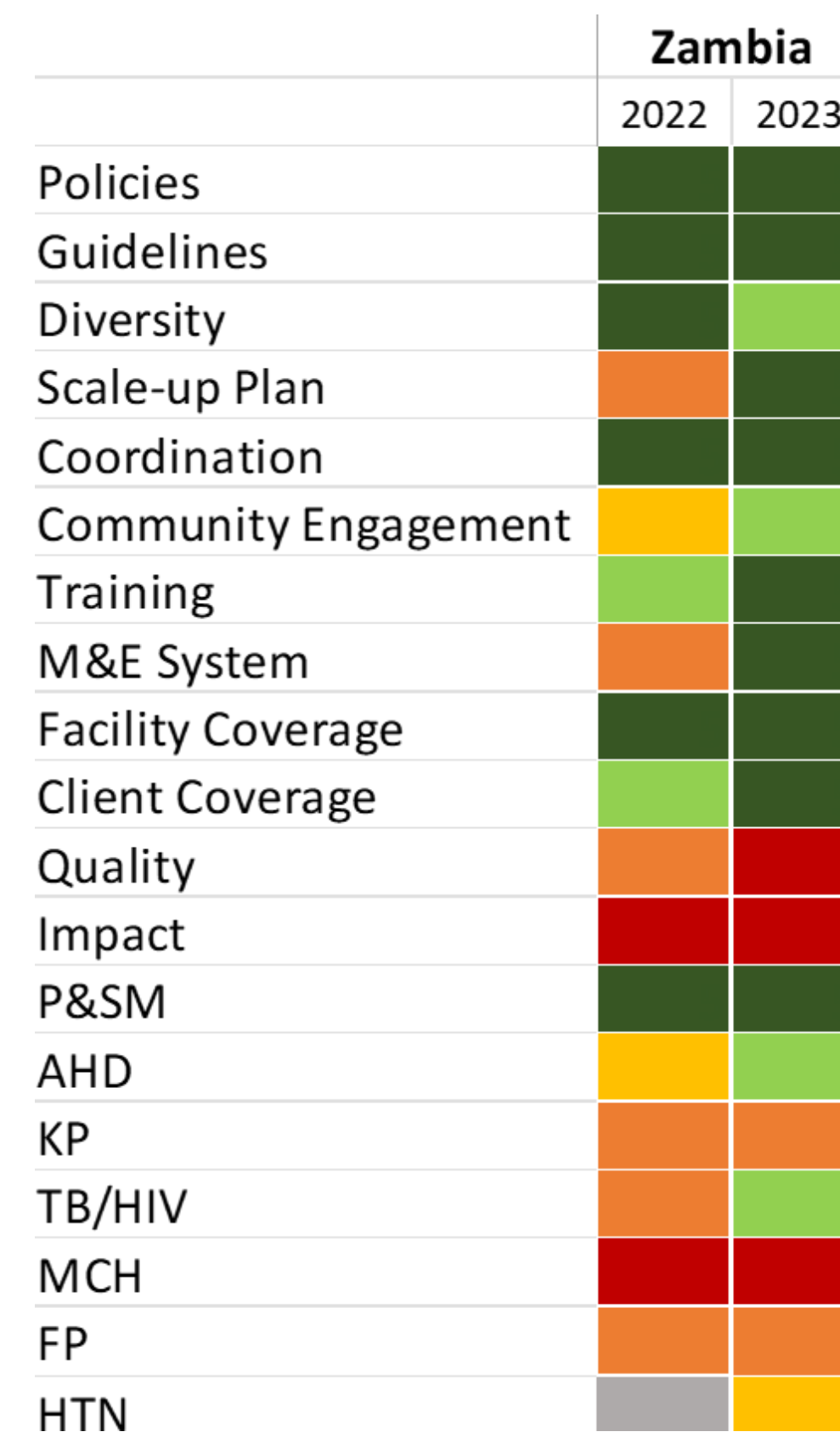


Figure 3 shows the results of Zambia's self-assessments using the CQUIN DART capability maturity model in 2022 and 2023. In 2023, Zambia achieved the most mature stage (dark green) in **eight domains**, while **three domains** remained in the least mature (red) stage.

Progress in the domains of Scale-up Plan, Community Engagement, Client Coverage, AHD, and M&E was achieved with support from Global Fund DSD SI funding.

Impact and Quality domains remain among the least mature domains, as Zambia has not yet developed quality standards or performed DSD performance reviews or service quality assessments.

AHD CAPABILITY MATURITY MODEL SELF-STAGING

Figure 4: AHD Capability Maturity Model Results, 2023

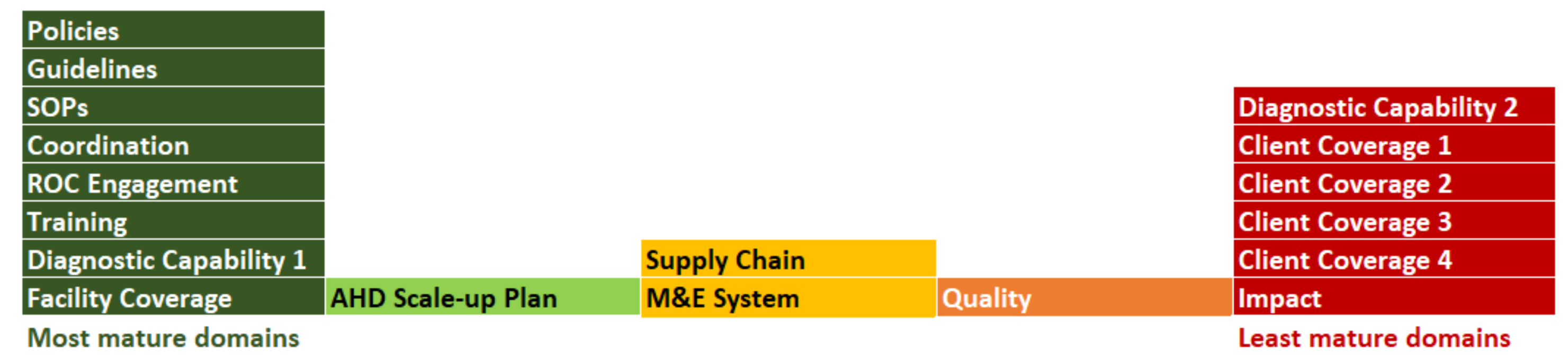


Figure 4 shows the results of Zambia's recent self-assessment using the CQUIN AHD capability maturity model.

In 2023, Zambia achieved the most mature stage (dark green) in **eight domains**, while **six domains** remained in the least mature (red) stage.

dHTS CAPABILITY MATURITY MODEL SELF-STAGING

Figure 5: dHTS Capability Maturity Model Results, 2023

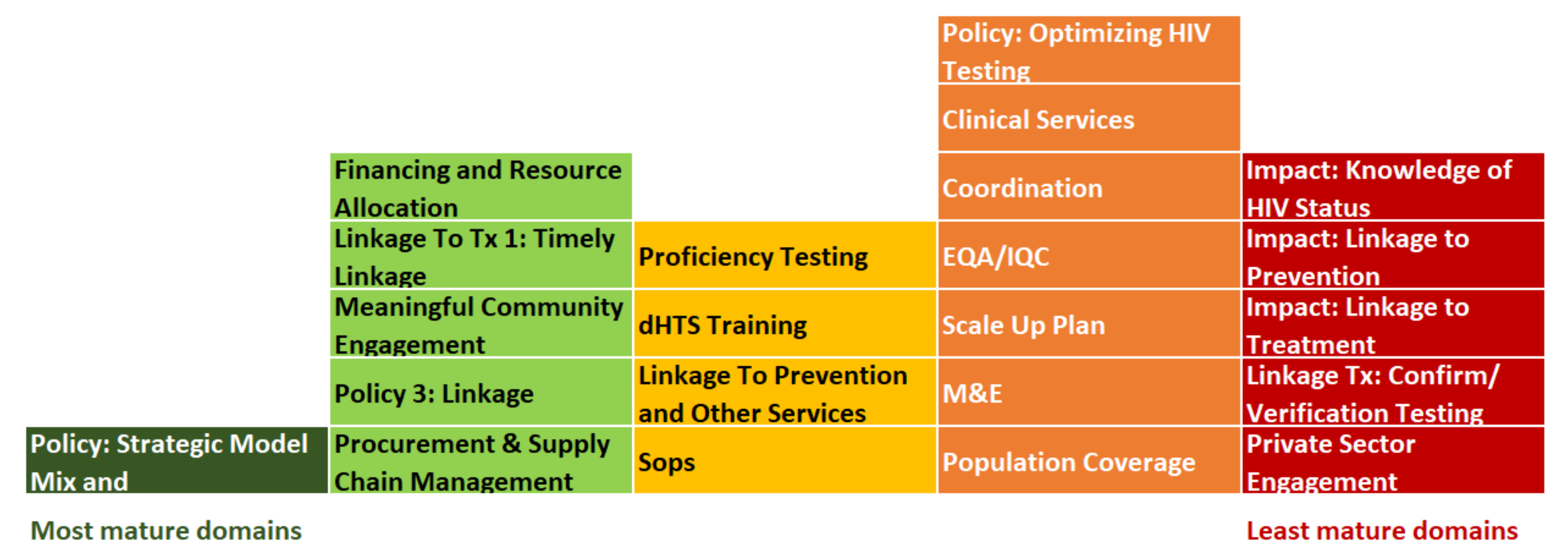


Figure 5 shows the results of Zambia's recent self-assessment using the CQUIN dHTS capability maturity model.

In 2023, Zambia achieved the most mature stage (dark green) in **one domain**, while **five domains** remained in the least mature (red) stage.

NEXT STEPS / WAY FORWARD

Priority next steps include:

- Conducting a DSD performance review
- Conducting a service quality assessment
- Strengthening M&E for DSD and AHD
- Integrating NCD care in ART clinics