



Liberia Updates

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July 10, 2024

Outline

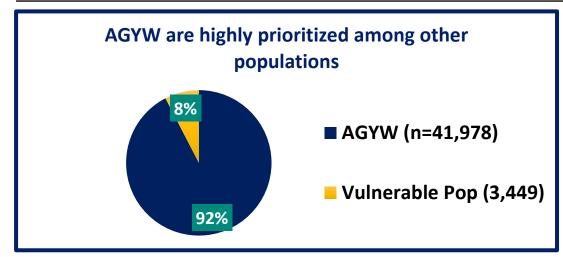
- Country background
- Progress on implementing 2023 action plans
- 2024 dHTS CMM self-staging results
- DHTS CMM Results 2023 vs 2024
- Activities that influenced the 2024 CMM results
- Engagement with CQUIN and other stakeholders on dHTS
- 2025 dHTS CMM priority activities and projected scores
- Cross-learning topics of interest in 2024
- Acknowledgement

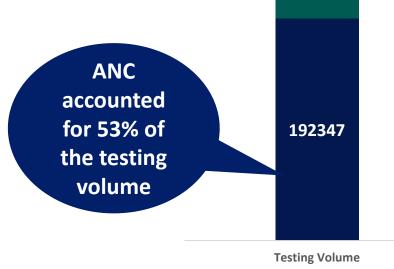


Country background: HIV statistics and testing model mix

Country Context (UNAIDS Spectrum estimates 2024)

		Children(0-14)	Female(15+)	Male(15+)	All ages
•	Estimated PLHIV	2799 (8%)	20106 (60%)	10863 (32%)	33,768
•	1 st 95	1,041 (37%)	17,491 (87%)	8,563 (79%)	27, 095 (80%)
•	2 nd 95	865 (31%)	17,257 (86%)	8,505 (73%)	26, 627 (98%)
•	3 rd 95	774 (28%)	16,402 (82%)	80,26 (74%)	25,202 (95%)
•	HIV prevalence	-	1.20%	0.70%	0.90%
•	HIV incidence	-	-	-	0.15%





Testing model mix (April 2023-March 2024, HMIS)

19624

37950

99340

■ Selt-test (3%)

■ Voluntary testing (5%)

■ CHA/P referral (1%)

Outreach (10%)

■ Provider initiated (27%)

■ ANC (53%)



Progress on implementing 2023 action plans: activities where progress was achieved

Domain	Activity	Progress made by March 31, 2024		
Linkage to prevention	 Optimize linkage of HIV negative people to prevention services 	Ledgers updated to include linkage to preventive services		
Linkage to Treatment	 Conducting one stop shop for HIV services at community level: Test, Link, and Treat 	There is a ledger to capture linkage to treatment in the national HMIS		
Population coverage	 Scale up HIV testing for KP and PPS (Long-distance transport workers, uniformed personal, hotspot testing 	Completed the dHTS guideline and updated the Algorithms		



Activities where progress/implementation has delayed

Domain	Activities Prioritized	Reasons for implementation delay	Plans for remediation
Implementation and scale up plan	 Validate dHTS guidelines 	 Awaiting validation 	 Lobby funding tom validate the guidelines
dHTS Training	 Develop dHTS curriculum and material for training 	 Delayed guideline validation means the curriculum could not be developed 	Guideline validation will allow us to develop the curriculum



Activities that were de-prioritized/dropped

Domain	Activities Initially Prioritized	Reasons for de-prioritization	
Population coverage	Prioritize testing Penpen /Keke riders (bikes and tricycles) riders	Currently not budgeted under GF (the Global Fund)	
Knowledge of HIV status	Use the secondary and tertiary school health clubs for mobilization	These are no priority activities for our partners	



2024 dHTS CMM Results

Policy: Strategic Model Mix				
Policy: Optimizing HIV Testing?				
SOPs			Scale-up Plan	Finance/Resource Allocation
Community Engagement			Private Sector Engagement	Linkage to Prevention
Coordination	Policy: Linkage		M&E	Clinical Services
dHTS Training	Linkage to Tx: Verification	Linkage to Tx: Timely Linkage	Population Coverage	Impact: Knowledge of Status
Procurement/Supply Chain	Proficiency Testing	Impact: Linkage to Tx	EQA/IQC	Impact: Linkage to Prevention

Observation:

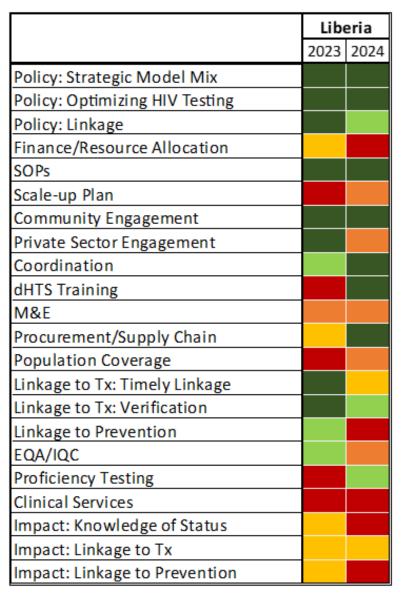
Most mature domains

- Results reflect the true picture on ground as of time of staging
- Progress has been made in a number of areas since last staging
 - Funding constraints hinder timely implementation of action plans



Least mature domains

dHTS CMM results - 2023 vs 2024



Observations

- Improved in 6/21 domains
- Regressed in 8/21 domains was due:
 - Revision of national HTS guidelines
 - Better understanding of the staging criteria
- 2024/2025 implementation will focus on the identified gaps



Key lessons learned over the past year – facilitators and barriers

Facilitators

Collaboration between
 National program and USAID partners have led to achievement beyond expectation

Barriers/Challenges

- Lack of funding for national program from Global fund impedes planning and implementation
- Poor staff morale due to delayed payments of salaries and allowances

Supply chain interruptions



Engagement with CQUIN and other stakeholders on dHTS

Technical assistance received

 Technical support from CQUIN has help us to update our guideline, algorithms for all population

Meetings attended

- CQUIN's financial support for our staging was very valuable in the phase of lack of funding for NACP
- Attended annual meeting in November 2023, plus several Virtual dHTS calls

Tools

 The national program have incorporated the 4D strategy from Malawi into our guidelines to support adherence

• DPR

- First DPR conducted in March 2024 included HIV testing indicators
- Was fully supported by ICAP/CQUIN and help with the training of data collectors and data analysis after the survey.
- The Dissemination for the results with stakeholders is schedule for June 26 & 27,2024



2025 dHTS CMM priority activities and projected scores

	Domain	2024 score	2025 Aspiration al score	Planned actions
•	Quality 1: EQA/IQC			 Integrate EQA/IQC with onsite data verification
•	Linkage to prevention			 Scale up recording and reporting of Linkage to prevention data
•	Quality 3: Clinical services			Integrate clinical quality assessment with onsite data verification



Cross-learning topics of interest in 2024

 Hepatitis response (testing, triple elimination, vaccination and treatment)

 Dealing with traditional and religious leaders in responding to testing and lost to follow up

HIV services in workplace (mines)



Acknowledgements

FHI360:

 Developing tools and updating of guidelines and ledgers and etracker for services delivery which include dHTS and our community data collection tools

CQUIN

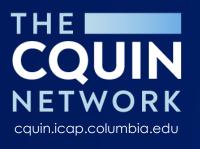
- Technical Support
- Financial support for staging meetings
- Sharing of tools and resources
- Supporting DPR

ROC

Being always part of the response







Thank You!

