Differentiated HIV Service Delivery: Optimizing Person-Centered HIV Services
Progress Update on DSD Implementation

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BACKGROUND

Liberia joined the CQUIN network in 2019 following a differentiated service delivery (DSD) feasibility assessment supported by the Global Fund. The country developed a National DSD Operational Guide in 2018 and finalized its National DSD Guidelines in 2023, which were launched in June 2024. These efforts have resulted in the program implementing seven DSD models, six of which are specifically tailored for stable ART clients. Implementation of DSD in Liberia is led by the National DSD Technical Working Group, with active participation from PLHIV organizations LIBNEP+ and CSOs, alongside advocacy networks like SAIL. These groups work closely with the NACP and MOH on the implementation of community DSD.

Key Priorities for DSD Scale-Up:
1. Integration of non-HIV services with HIV
2. Addressing Advanced HIV Disease (AHD) services
3. Strengthening quality improvement and assessments
4. Expanding Differentiated HIV Testing Services (dHTS)
5. Scaling up TB Preventive Services

DSD IMPLEMENTATION

Figure 1: DSD Model Mix: Trend Over Time, 2022-2024

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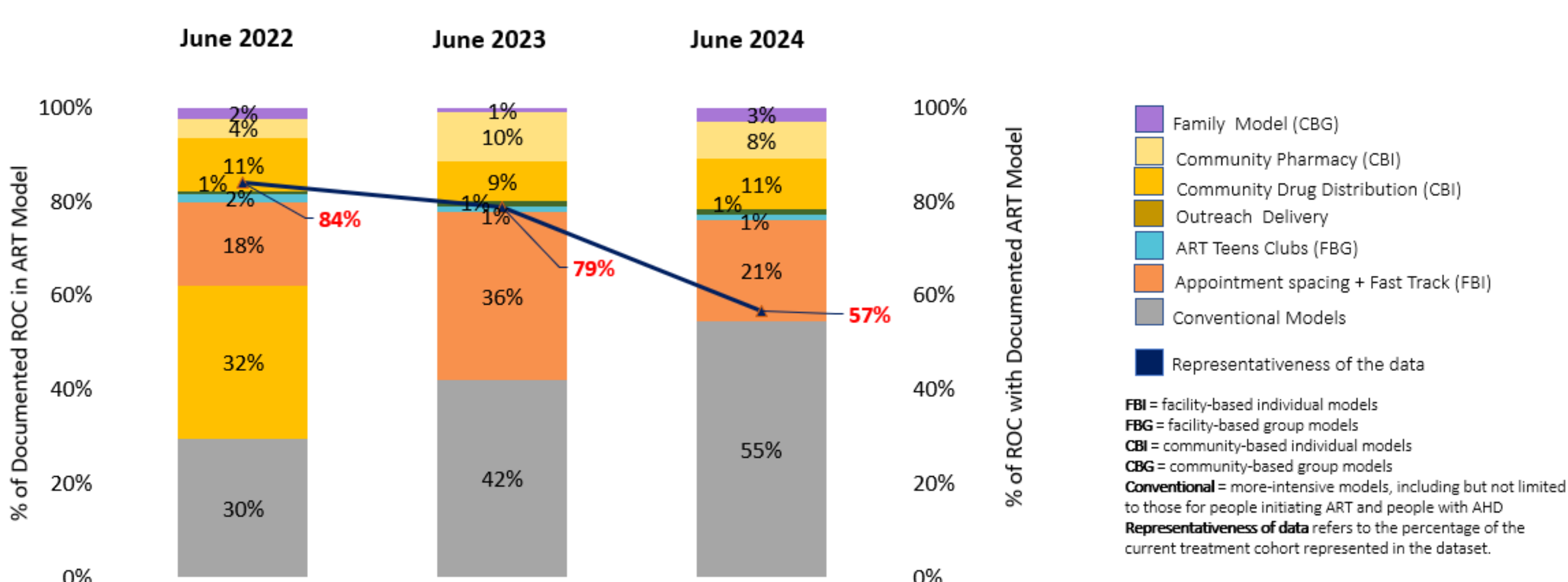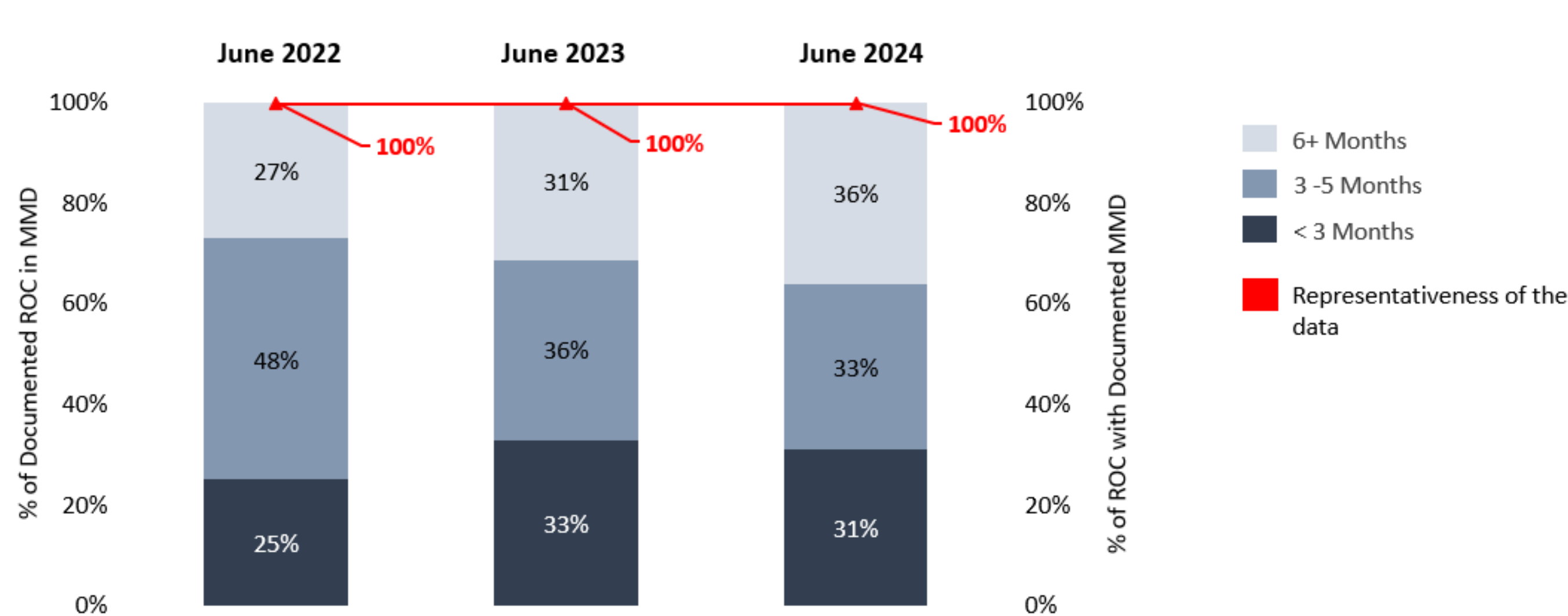### Figure 2: Multi-month Dispensing (MMD): Trend Over Time, 2022-2024

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- The graph indicates a 5% increase in 6 multi-month dispensing (MMD) uptake from 2023 to 2024
- This growth is linked to the roll-out of provider training on DSD implementation
- Stable and virally suppressed clients qualify for less intensive models
- 238 health facilities offer ART services, 61% providing less intensive DSD models
- By June 2024, 69% of recipients of care (ROC) received >3MMD.
- Currently ROCs can be enrolled in the following less intensive DART models:
  - Community Pharmacy
  - Family/Support Group Model
  - Community/Home Delivery
  - ART Teen Club
  - Appointment Spacing + Fast Track
  - Health Worker/Peer-Led

CQUIN ENGAGEMENT AND ACHIEVEMENTS

- Liberia is a member of all the CQUIN community of practices
- No country-to-country exchange visits took place in 2024
- Through the country action plan, we can monitor progress and track improvements in ROCs and overall service quality
- Engagement with CQUIN has enabled the National Program to introduce DSD program, facilitating smooth service provision to ROCs and promoting the decentralization of services for their convenience

DART CAPABILITY MATURITY MODEL TRENDS (2022-2024)

Figure 3: DART CMM trends (2022-2024)

Domains	2022	2023	2024
Policies			
Guidelines			
Diversity			
Scale Up Plan			
Coordination			
Community			
Training			
M&E System			
Procurement			
Facility Coverage			
Client Coverage			
AHD			
Key Populations			
TB/HIV			
MCH			
NCD/HIV			
Family Planning			
Quality			
Impact			

- Liberia has achieved a stepwise improvement in domain maturity, reaching 53% (10 dark/light green domains) in 2024
- Liberia remains concerned about the integration of (TB, HIV, MCH, NCD, and FP) and the improvement of Quality domains
- Integrated services for TB, NCD, and FP have commenced, with pilot programs already underway for MCH and Mental Health
- In 2025, we aim to enhance integrated services further and prioritize the quality-of-service delivery

AHD CAPABILITY MATURITY MODEL SELF-STAGING

Figure 4: AHD CMM results, 2024

Polices					Diagnostic Capability 1
Guidelines	AHD Scale-up Plan			Facility Coverage	Diagnostic Capability 2
Coordination	SOPs	Client Coverage 3		Client Coverage 1	Client Coverage 2
ROC Engagement	Training	Supply Chain	M&E System	Client Coverage 4
			Quality	Impact

Most mature / Least mature

- In the 2024 AHD staging, 39% (7 out of 18) of domains achieved maturity (dark/light green)
- Outcome domains are the least mature, with only 28% (5 out of 18) achieving maturity
- AHD is a priority for Liberia, and we have planned nationwide training for mid-level health workers, who constitute 98% of service providers for HIV
- All outcome domains have been incorporated into our plans for 2025

dHTS CAPABILITY MATURITY MODEL SELF-STAGING

Figure 5: dHTS CMM results, 2024

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

Most mature domains / Least mature domains

- In the 2024 dHTS CMM staging, 45% (10 out of 22) of the domains scored dark/light green
- The finance and resource allocation, private sector engagement, and linkage to treatment domains, including timely linkage, linkage to prevention, and EQA/IQC, notably regressed
- The least mature domains reflect the current reality at the time of the staging; however, significant improvements have been implemented since then, and we anticipate progress in the next staging
- The least mature domains have been prioritized in our implementation plan for 2025

NEXT STEPS / WAY FORWARD

- Across the enabling domains, there is consistency with only a few domains classified as least mature, and there are plans in place to improve these areas
- The Impact Domains and Quality Domains of DSD implementation are prioritized for strengthening in our action plan
- In our 2025 plan, we have prioritized all outcome domains with least mature scores for improvement; for example, the TB/HIV roll-out began two months ago, and integration efforts for MCH, FP, and NCD are ongoing
- We have completed training for trainers in HIV and Mental Health integration and have started training providers in four of the fifteen counties
- In 2025, we will focus on addressing issues related to integration, re-engagement, and the quality of services