

# Feedback from sustainability pre-meeting

**Prof. John E. Ataguba**

**[1] Executive Director: African Health Economics and Policy Association (AfHEA)**

**[2] Professor and Canada Research Chair in Health Economics, U of Manitoba**

**[3] Co-chair, Health and Community Systems Strengthening thematic group for the HCWG**



# Outline

Introduction

Introduction to the HCWG

Introduction to the CQUIN network

Key issues from the meeting

Uganda & Kenya presentations

Extra!

# Introduction

- HIV as a major global challenge with significant burden in Africa, esp. West, Central and North Africa
  - An increase in PLWHIV in Africa expected if HIV support flattens
- Many challenges facing countries
  - Pandemics, economic downturn, conflicts, etc.
- HCWG aims to accelerate and sustain the HIV response in Africa
  - Led by African stakeholders
  - African voice
  - African perspective on a sustainable HIV response



HCWG → Africa-led HIV Control Working Group

# Introduction – The HCWG

## HCWG recommendations

- African Representation, Governance and Accountability
  - Global health should be global especially in decision making and represent African diversity
  - Need a reprioritization of HIV
  - Must engage African leaders in all decision making
- Increased Health and HIV Financing from domestic sources
  - More domestic resources
  - Global solidarity toward building African capacity for self-sustainability
  - Improved use of Africa led research and data management

# Introduction – The HCWG

## HCWG recommendations

- Universal Health Coverage and Building with Communities
  - Strengthen health systems
  - UHC that is equitable and quality
  - Rights to health
  - Deliberate and inclusive participation of the community in planning and particularly primary prevention

## Call to action

- Financing – new domestic strategies
  - Health systems – UHC and integration
  - Gender equity – equity and rights of key population
  - Community engagement (meaningful) – integrating into health systems
  - Africa-led- self-sustainability and resilience



# Introduction – CQUIN

## Preaching to the choir!

- An impact network
  - Started in 2017
  - Now in the 2<sup>nd</sup> phase
  - Spans 21 countries health system leaders to accelerate the scale-up of high-quality, high impact HIV services
  - CQUIN Activities since 2017

## Shared themes

- Coordination
- Integrated service delivery
- Data for decision making
- Recipient of care engagement

# The Meeting: Overview



The African-led HIV Control Working Group  
@HIV\_CWG



@HIV\_CWG & CQUIN join forces! A crucial meeting was held yesterday in Johannesburg to discuss the future of #HIV. The meeting explored African-led, sustainable HIV responses and heard Ministry of Health representatives' visions. #HIVResponse #GlobalHealth #HCWGW #CQUIN #African



1:36 PM · Dec 9, 2024 · 243 Views

## The END?

# Key Issues From the Meeting

- Successful integration of MCH/HIV in Uganda
  - led to FP/HIV integration and improved referral services
- Mozambique: Similar to Uganda
- Both struggling with NCD/HIV integration
- Utilizing current funding streams to improve integration (sustainability)
  - HIV funded while NCDs not so funded by global sources
  - Should advancing integration primarily fall upon country financial resources?
  - Is there a need to work with funders to liberalize how HIV funding supports integration?



# Key Issues From the Meeting

- Avoiding silos
  - Integrate HIV into everything else
  - Challenge: funding is not set up to support such integration
    - E.g., donor funding is >74% in Kenya
- Young women and adolescent girls need to be prioritized
- Communities must be at the centre of response
  - No sustainability without the community
- Data systems critical to support integration
- Need to bring together external funders, coordinating bodies, and country governments to define how we address the pillars of sustainability with current funding streams

# Country Presentations - Uganda

- Uganda's vision/plans for DSD, Integration, and Sustaining the HIV Response
  - Dr. Cordelia Kathureebe
- Assessment of sustainability of the response conducted
  - Stakeholders agree High-Level Outcomes (HLOs)
  - Feeds into the country's comprehensive roadmap
  - Emphasis on Research and Innovation
- Integration as key for the roadmap
  - Program integration
  - Integration and DSD
- Community systems investments
  - Train community members
  - Foster community ownership
  - Promote peer education

“A state where Uganda is able to accelerate and maintain HIV programme performance and health outcomes for people living with, affected or at risk of HIV for decades to come, delivered within the broader national financial, political, legal, social and health ecosystems in the country.”

# Country Presentations - Kenya

- Integration of Services, Sustaining the HIV Response, Plans for DSD
  - Dr. Rose Wafula
- Made significant progress on the 95:95:95 target
- Launched the country's sustainability operational plan on 1 Dec 2024
  - Resilient HIV response beyond 2030 roadmap
- Top on agenda
  - Mainstream HIV into broader health system (PHC and UHC)
  - Innovative approaches towards integration
  - Addressing the financing gap affecting sustainability
  - Develop integration framework, toolkit and M&E framework

**Resilient systems  
that are responsive  
to changes**

Closing the gaps to reach targets and sustain existing gains, HSS, align priorities for UHC, transform HIV program as strategic shifts

Counties, communities  
and all actors are critical

# Beyond a Single Country: “Global” Sustainability

**Table 2** Income inequality and HIV/AIDS outcomes

	HIV incidence model			AIDS mortality model		
	Global sample	Excluding Africa	Only Africa	Global sample	Excluding Africa	Only Africa
Gini index	6.31*** (0.384)	4.70*** (0.464)	8.48*** (0.715)	7.62*** (0.462)	8.33*** (0.604)	6.13*** (0.759)
Covariates	Yes	Yes	Yes	Yes	Yes	Yes
UNAIDS regions and year fixed effects	Yes	Yes	Yes	Yes	Yes	Yes
Observations (n)	3183	2211	972	3283	2211	972
HIV incidence (t+1) and AIDS mortality (t+1) response to 25% reduction in Gini index	0.14*** [0.007]	0.29*** [0.005]	2.11*** [0.048]	6.58*** [0.341]	17.39*** [0.174]	11.45*** [3.191]

Dependent variables were the natural logarithm of HIV incidence rate per 1000 people at time t+1 and the natural logarithm of AIDS mortality rate per 100 000 at time t+1.


Analytical SEs in parenthesis (); bootstrapped SEs using 500 replications in square brackets []; \*\*\*p<0.01.

Covariates include current health expenditure per capita and World Bank income categories (low, lower middle, upper middle and upper income countries); UNAIDS regions included East and Southern Africa, West and Central Africa, Asia and Pacific, Eastern Europe and Central Asia, Latin America and the Caribbean, North Africa and the Middle East, West and Central Europe and North America.

- More unequal countries show higher HIV incidence and AIDS mortality
- Policy responses to tackle income inequality, which is significantly associated with adverse pandemic outcomes is critical
- Income inequality (within and between countries) undercuts effective HIV/AIDS sustainability response

BMJ Global Health

## Income inequality and pandemics: insights from HIV/AIDS and COVID-19 – a multicountry observational study

John Ele-Ojo Ataguba,<sup>1,2</sup> Charles Birungi,<sup>3</sup> Santiago Cunial,<sup>4</sup> Matthew Kavanagh <sup>5,6</sup>

**o cite:** Ataguba JE-O, irungi C, Cunial S, *et al.* Income inequality and pandemics: insights from HIV/AIDS and COVID-19—a multicountry observational study. *BMJ Glob Health* 2023;8:e013703. doi:10.1136/bmjgh-2023-013703

**Handling editor** Seye Abimbola

Received 14 August 2023

Accepted 7 September 2023

### ABSTRACT

**Objectives** Assess the relationship between income inequality and HIV incidence, AIDS mortality and COVID-19 mortality.

**Design** Multicountry observational study.

**Setting** 217 countries for HIV/AIDS analysis, 151 countries for COVID-19 analysis.

**Participants** Used three samples of national-level data: a sample of all countries with available data (global sample), a subsample of African countries (African sample) and a subsample excluding African countries (excluding African sample).

**Main outcome measures** HIV incidence rate per 1000 people, AIDS mortality rate per 100 000 people and COVID-19 excess mortality rate per 100 000 people. The Gini index of income inequality was the primary outcome variable.

### WHAT IS ALREADY KNOWN ON THIS TOPIC

- ⇒ Earlier in the AIDS pandemic, a positive relationship between income inequality and HIV prevalence in sub-Saharan Africa was found.
- ⇒ The relationship was less clear outside African countries.
- ⇒ Some single-country studies suggest a link between income inequality and HIV transmission among specific groups.
- ⇒ Studies primarily from higher income contexts, where data are available, show a positive relationship between income inequality and COVID-19 cases or mortality.

### WHAT THIS STUDY ADDS

# Take Home Lessons From the HCWG

## Some prerequisites to achieve sustainability

① Increased African voice in decision making

② Integration

③ Domestic funding of HIV response

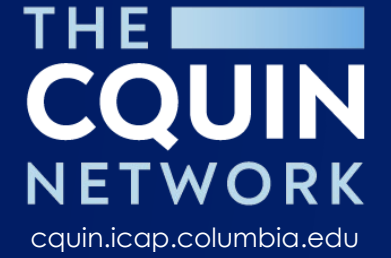
④ Innovations (e.g., data management)

⑤ Community engagement in health systems

⑥ Research

⑦ African manufacturing of commodities and drugs

⑧ Other?



Thank You!

