



Malawi Country Updates

Presenter: Stanley Ngoma Designation: DSD Focal Person



CQUIN 8th Annual Meeting | December 9-13, 2024 – Johannesburg, South Africa

Outline

- Where are we now?
 - Progress towards 95:95:95 targets
 - Treatment capability maturity model self-staging results
 - DART model mix and MMD
 - AHD CMM self-staging results
 - dHTS CMM self-staging results

• How did we get here?

- Stakeholder coordination and prioritization processes
- Engagement with CQUIN
- Update on Country Action Plans
- Update on Integrating Non-HIV and HIV Services
- Program sustainability efforts and opportunities
- Successes and Challenges
- 2025 Priorities



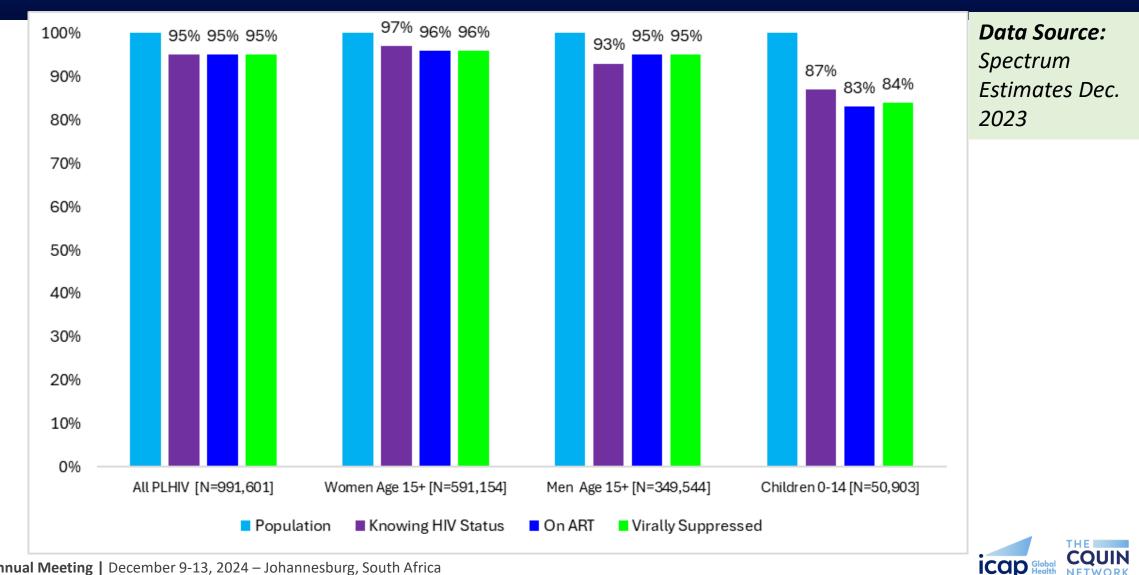
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Progress Towards the 95:95:95 Targets



Malawi Treatment CMM Results: 2024

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

- Ten domains have achieved a high level of maturity (dark/light green) while the MCH domain had the least mature scoring (red)
- The 2025 DSD country action plan will prioritize strategies to enhance the performance of less mature domains, while drawing insights from member countries that have witnessed success

• Priority domains in 2025 are MCH, M&E, FP, Quality and Impact domains



Malawi Treatment CMM Results: Change Over Time

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				

- The Training domain made substantial strides in maturity, moving from a less mature yellow to a more mature light green score.
 - This was achieved through the MOH securing funding to facilitate training sessions for healthcare providers.
- While several domains have demonstrated sustained maturity, challenges persist in certain domains. The Quality, FP, and M&E domains have not made significant progress.
- The MCH domain remains a significant concern, hindered by the national ART treatment policies not considering pregnant and breastfeeding women living with HIV and their infants to be eligible for less-intensive DART models



Malawi Differentiated Treatment Model Mix

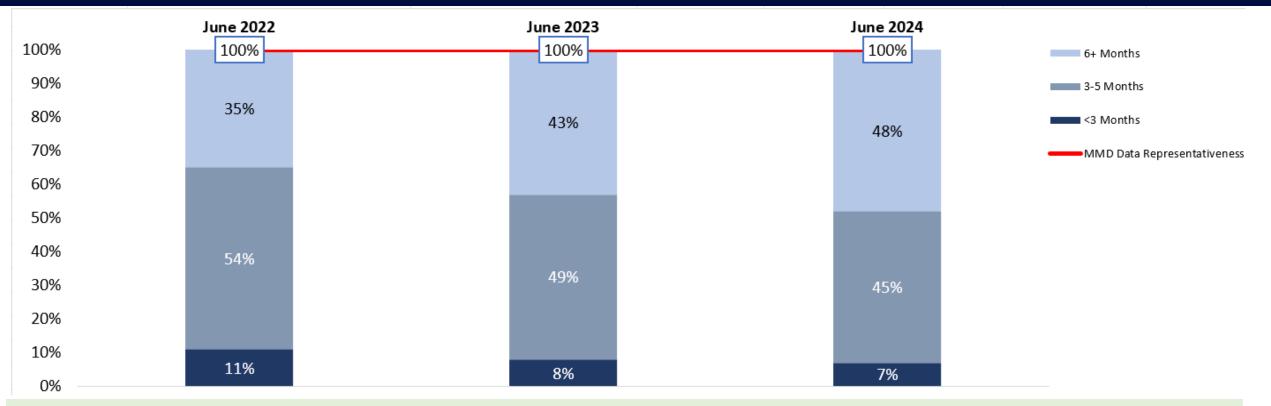
All DSD models currently implemented in Malawi have been captured in the EMR

Currently, the data is managed at IP level

- The national EMR reporting on RoC DSD model mix will be piloted once funding has been secured
 - The pilot will involve selected HF across the country to evaluate the system's functionality and reporting efficiency
 - Lessons from the pilot will guide national roll-out and further system enhancements



Malawi Differentiated Treatment: Multi-Month Dispensing



- The % of RoC on shorter spacing intervals has steadily declined from 2023 to 2024
- The proportion of RoCs receiving 6+MMD increased by 5% between June 2023 and June 2024
- MMD data source: The EMR with 100% coverage of the national treatment cohort



Malawi AHD CMM Results 2024

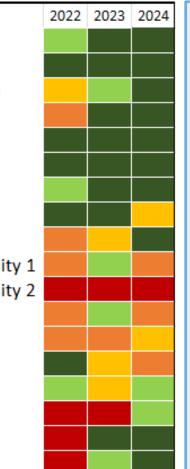
Policies				
Guidelines				
AHD Scale-up Plan				
SOPs				
Coordination				
ROC Engagement				
Training				
M&E System			Diagnostic Capability 1	
Quality	Client Coverage 3	Client Coverage 1	Facility Coverage	
Impact	Client Coverage 4	Supply Chain	Client Coverage 2	Diagnostic Capability 2
Most mature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

- Most mature staging (Dark/ light green) was achieved in 67% (12 out of 18) of domains within the AHD CMM.
- In FY25, Malawi will prioritize strengthening the least mature domains while continuing the scale-up of AHD services.
- M&E tools for AHD are being utilized across all AHD sites nationwide.
- Comprehensive supervision and mentorship tools for AHD are established and operational.



Malawi AHD CMM Results – Trend Over Time (2022-2024)

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



- Overall, 67% of AHD CMM domains are in the most mature staging
- M&E system: All the necessary AHD-related data elements are being systematically collected, reported, analyzed, and reviewed regularly and are integrated into national M&E tools and the national HMIS for HIV/ART services
- Facility Coverage regressed in maturity due to insufficient data to adequately describe services provided onsite or through referral systems for the spokes
- The least mature domains will be an area of focus for FY25 because it's essential to strengthen AHD services and maximize health outcomes for people living with HIV



Malawi Differentiated Testing CMM – 2024

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

- 86% (19 out of 22) of the domains are most mature
- In 2025, Malawi will prioritize strengthening the least mature domains while sustaining progress with the more mature domains
- The M&E of dHTS now captures client-level data using the ScanForm technology

ale-up Plan
kage to Prevention
pact: Linkage to Prevention



Malawi

dHTS		
Domains	202	
Policy: Strategic Model Mix		
Policy: Optimizing HIV Testing		
Policy: Linkage		
Finance/Resource Allocation		
SOPs		
Scale-up Plan		
Community Engagement		
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DART		
Domains	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		

AHD			
Domains	2024		
Policies			
Guidelines			
AHD Scale-up Plan			
SOPs			
Coordination			
ROC Engagement			
Training			
Supply Chain			
M&E System			
Diagnostic Capability 1			
Diagnostic Capability 2			
Facility Coverage			
Client Coverage 1			
Client Coverage 2			
Client Coverage 3			
Client Coverage 4			
Quality			
Impact			

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Overview of the HIV Program 2024 CMM Results

- Across the three CMMs i.e. dHTS, DART and AHD enabling domains such as policies, guidelines, coordination and training show relatively robust and sustained progress
 - Many indicators within these domains are green, signaling maturity and consistent implementation across programs.
 - 13% of the domains showed an upward shift from FY23 to FY24
- Program priority areas include AHD diagnostic capability 2, dHTS scale-up plan, dHTS linkage to prevention and impact of dHTS linkage to prevention
- Plans to ensure outcome domains are addressed in an integrated manner include:
 - Strengthening of diagnostic capabilities through cross-program resource sharing
 - Implement joint Quality Improvement (QI) initiatives
 - Focus on data integration for strategic • decision-making



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Stakeholder Coordination and Prioritization Processes

DSD coordination process

- DSD sub-group level with guidance from the national C&T TWG
- Three DSD coordination meetings were convened since the last annual review meeting in Durban
- Three DSD staging meetings have been done since last year i.e. DART, AHD and dHTS

RoC organisations represented include:

- JONEHA
- Manet+
- COWLHA
- Manaso
- Y+

Confirmed funds and prioritized activities by different donors

- $\circ~$ Integration of DSD models in the EMR
- Mentorship on TB/HIV service integration
- Capacity building of health care providers in provision of FP and ART services with AHF support

Processes used to prioritize activities in the action plans to get donor buy-in

- $\circ~$ Joint planning with DSD stakeholders
- Alignment of action plans with the funding cycles for both COP22 and GF/C
- $\circ~$ Grant application and negotiation



Engagement with CQUIN

Communities of Practice: Malawi is an active member of the following 10 CoP:

- M&E
- Quality & QI
- MCH
- HIV/NCD Services
- FP
- HIV/TB
- Key & Priority Populations
- HIV Testing & Linkage
- Community Engagement in DSDs
- DSD Coordinators
- CQUIN 8th Annual Meeting | December 9-13, 2024 Johannesburg, South Africa

 C2C Visits: Malawi hosted Zimbabwe for a C2C learning exchange visit on the differentiated models for re-engagement into care





Update on Country Action Plans from 2024 Meetings

- Activities that have been successfully completed include:
 - Conducted situational analysis to understand the level of service integration across facilities supported by MoH and partners
 - Conducted mentorship on TB/HIV service integration (AHD) with WHO support
 - Finalized development of integrated HIV/SRH/MCH/GBV guidelines, protocols and SOPs
 - Strengthened systems for EID including prompt HIV testing and early initiation of ART for HIV positive children

- Activities that are still ongoing include:
 - Integration of FP into DART Models
 - Train additional healthcare workers on KPfriendly services
- Activities that were dropped include:
 - Align ART and NCD care appointments for the recipients of care for both HIV and NCD treatment services.
 - Conduct orientation of TB officers to ensure that TB commodities are accessed by PLHIV
 - Conduct regular district level reviews of TPT and TB treatment cascades



Update on Integrating Non-HIV and HIV Services

- Policy support: HIV/NCDs integrated in current HIV treatment guidelines
- Integration leadership roles have been defined with the Directorate of HIV/AIDS to take lead
- Defined the models of integration based on the available HF capacity

 Services for HIV integration include: HTN, DM, CaCx and Mental Health (Depression, Anxiety etc.)
- Integration sub-committee developed with CSO engagement
- Developed tools for HIV/NCD integration baseline assessment

Conducted the first round of pilot data collection

• M&E for Integration: To be included in the existing HIV M&E tools



Program Sustainability Efforts and Opportunities

- Country-owned and country led HIV response including DSD programs
 - Highest political endorsement to the country's strategic plan
 - Alignment to HSSP Ⅲ including the "One Plan, One Budget, One Report" framework
- Full integration of the HIV program into the routine health system
 - Service delivery (especially at the primary level), HRH, strategic information, supply chain management, leadership and governance and health infrastructure
- Share of domestic financing allocation to the HIV program to increase to at least 30% by 2030 with 50% as an ideal target



DSD Implementation Successes in 2024

- Conducted dHTS, AHD and DART CMM self-staging
- Conducted situational analysis to understand the level of service integration across facilities supported by MoH and partners
- Conducted a baseline assessment to select high-volume HF where integration will be enhanced and tracked
- Supported HF with required commodities for HTN and NCD case management
- Conducted integrated support supervision to HF implementing HIV/HTN as part of routine quarterly supervision visits



Challenges in DSD Implementation in 2024

- **M&E**: Inability of the national HMIS to track DSD model mix coverage
 - National EMR is in the process of incorporating DSD data reporting elements centrally
- Supply chain gaps: Inconsistent access to TB-LAM test kits hampered service delivery
- Conflicting priorities between DSD program implementation and other assignments
 - Unable to conduct DPR in 2024. Plans are underway to have Malawi's 1st DPR in 2025
- Inadequate funding to carry other activities in the 2024 country action plan



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DSD Priorities for 2025

2025 most important DSD-related goals and/or projections

- Expanding the HIV/NCD integration agenda
- Scale-up of the AHD program
- Addressing retention and re-engagement to treatment
- Improving data quality and management

2025 planned lessons to gain from other CQUIN countries

- Strengthening sustainability and local ownership of HIV programs
- Integrating person-centered services
- Best practices in PrEP and Long-Acting ARVs
- Data-driven quality management

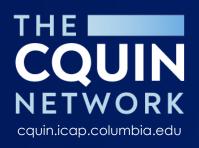


Acknowledgements









Thank You!

