

# Scaling-up National Advanced HIV Disease Systems in Zambia

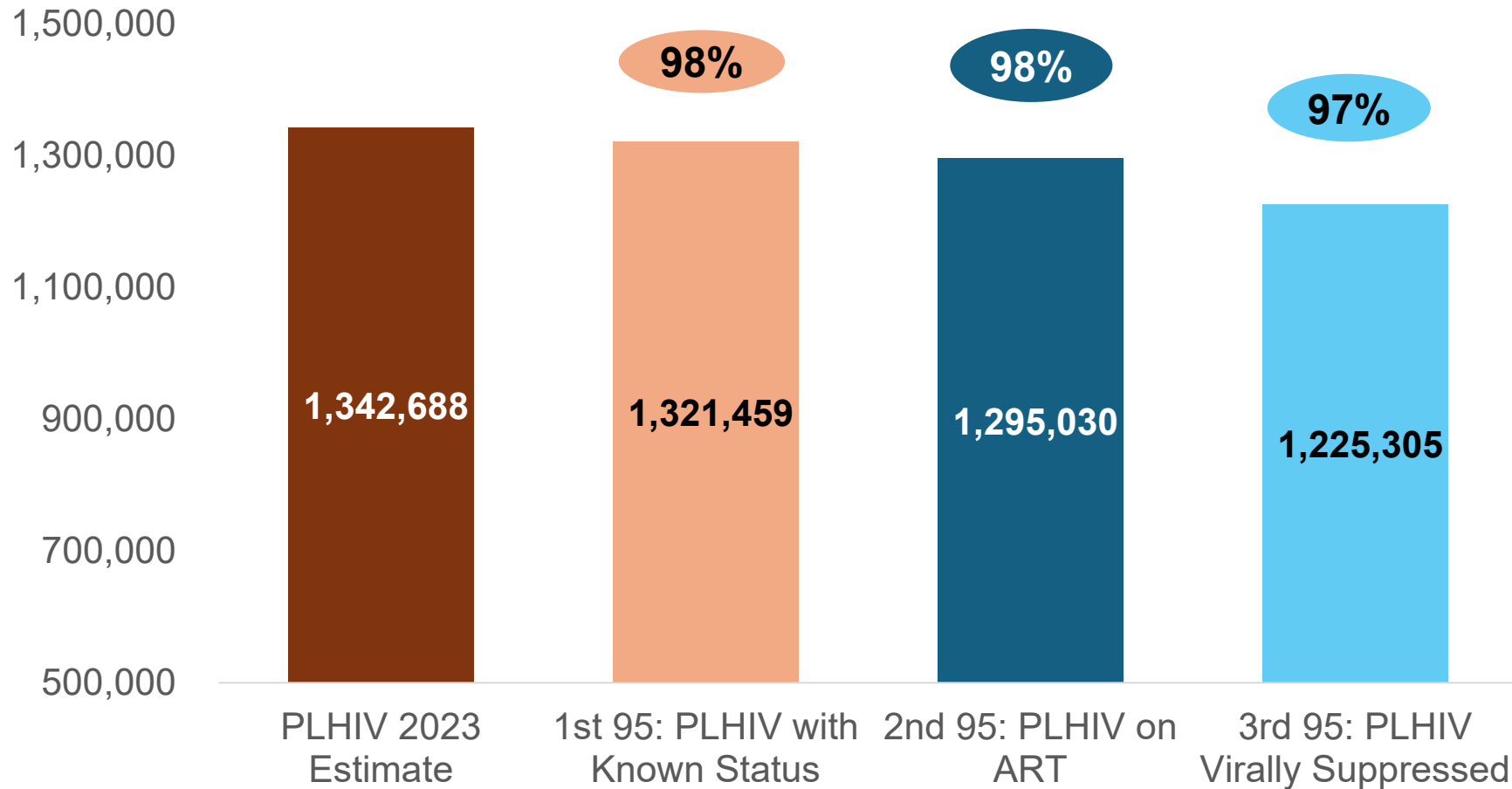
Dr SuilANJI Sivile  
Ministry of Health  
Zambia



# Content

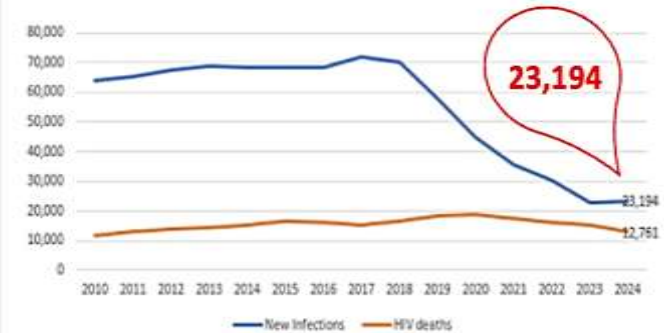
- **Background**
- **Process of installing AHD services in Zambia**
- **Challenges and Solutions**
- **CQI and AHD mortality surveillance**
- **Current performance**

# Background



- HIV Prevalence 11% (ZAMPHIA 2021)
- HIV Incidence 0.31% (ZAMPHIA2021)
- HIV incidence in females 0.66%
- 40% of New HIV infection among AYP
- **NHSP Target <15,000 by 2026**

Zambia Epidemiological curve 2024



This graph shows that the number of new infections is still high. We need to find those living with HIV and put them on treatment to stop the transmission of the virus.

# Process of installing AHD services in Zambia

## Leadership, policy and coordination

- NHSP and NASF in specific AHD targets
- Implementation framework
- AHD-SubTWG meets every two months
- CQUIN AHD CMM

## Commodities and inputs

- Liposomal Amphotericin B, Reserved AMR antibiotics and valgancyclovir in GC-6 and GC-7 and PEPFAR
- VISTECK
- New CD4 platforms and landscape mapping
- LAM and CrAg logistic and supply chain
- Forecasting and quantification of AHD commodities included in the HIV processes and report

## Service delivery

- AHD clinical guidelines
- Hub-Spoke Model centers of excellence (ATCs) as model sites
- AHD-QI integrated with mortality surveillance
- Integrated with NCD
- Community AHD package developed
- Facility and community models of AHD care

## Strategic informations

- Reports from EMR SmartCare
- HMIS
- REDCap

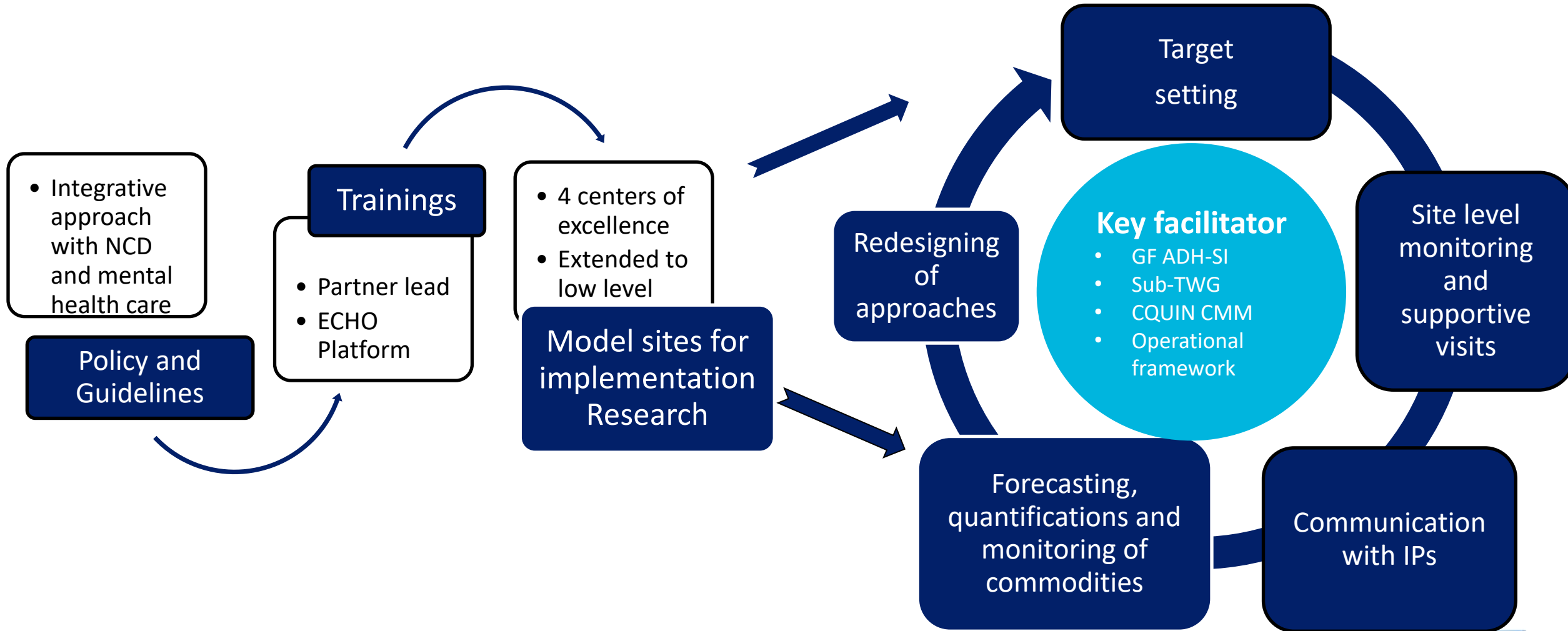
## Health workforce

- AHD focal point persons at national and subnational level
- Training in AHD in all 116 districts
- **Community health workers training underway**

## Health financing for AHD

- AHD services and commodities on NHIMA
- AHD included as a priority in the Zambia sustainability road map

# Scale-Up Process



# Progress, Challenges, and Solutions

Zambia AHD CMM – Trend over time

Trend Over Time	2022	2023	2024
Policies	Yellow	Dark Green	Dark Green
Guidelines	Dark Green	Dark Green	Dark Green
AHD Scale-up Plan	Light Green	Light Green	Dark Green
SOPs	Orange	Dark Green	Dark Green
Coordination	Dark Green	Dark Green	Dark Green
ROC Engagement	Dark Green	Dark Green	Dark Green
Training	Light Green	Dark Green	Dark Green
Diagnostic Capability 1	Orange	Dark Green	Dark Green
Diagnostic Capability 2	Dark Green	Red	Dark Green
Facility Coverage	Orange	Dark Green	Dark Green
Client Coverage 1	Red	Red	Red
Client Coverage 2	Red	Red	Red
Client Coverage 3	Red	Red	Light Green
Client Coverage 4	Red	Red	Yellow
Supply Chain	Yellow	Yellow	Yellow
M&E System	Yellow	Yellow	Yellow
Quality	Orange	Orange	Orange
Impact	Red	Red	Red

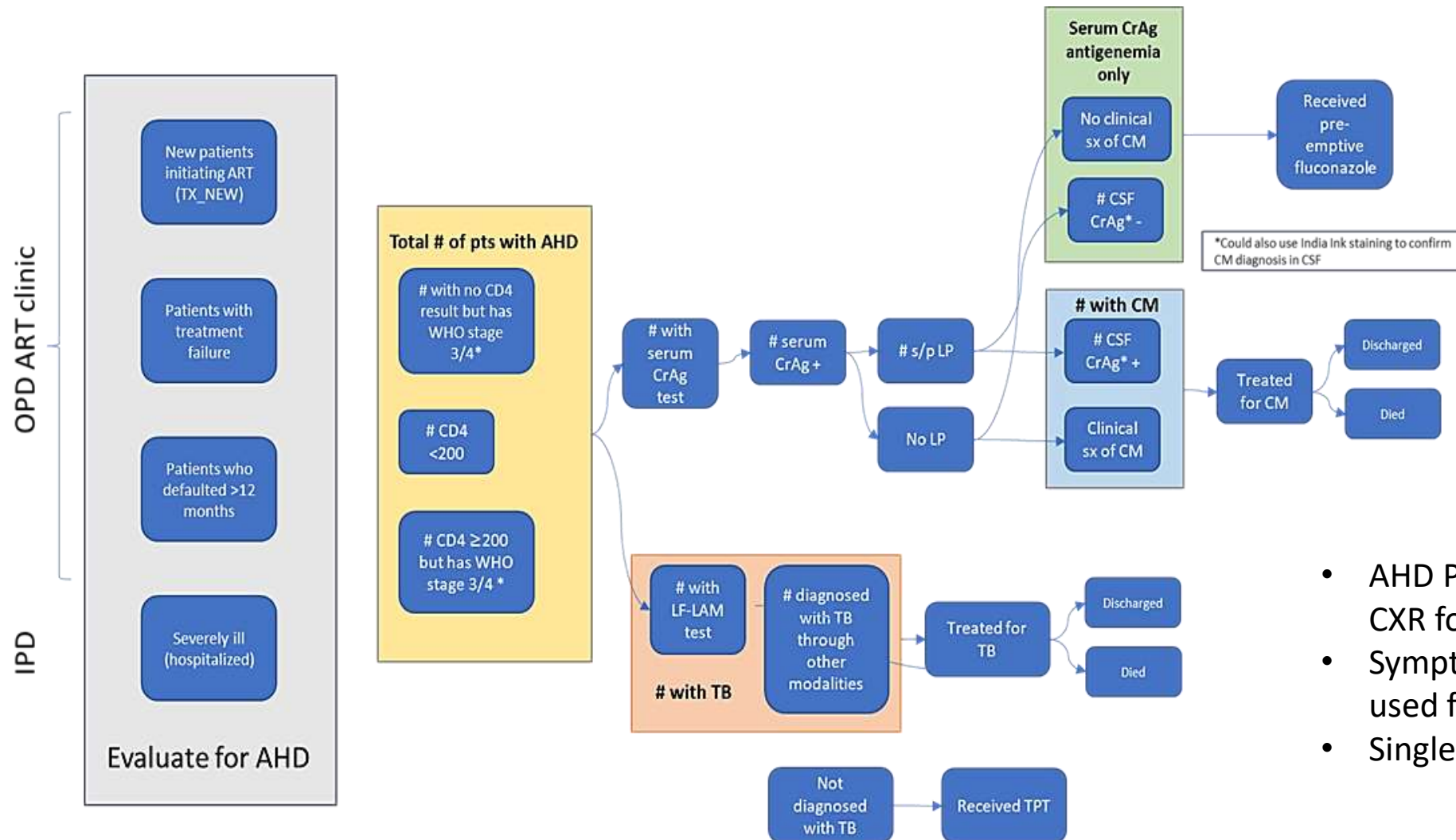
## Challenges

- CD4 testing platforms
- Logistics management of commodities
- Procurement of LAM
- M&E processes especially for in-patient AHD care
- Mortality still high among PLHIV (measurement of impact)
- Accuracy in VISITEC
- Poor community AHD

## Solutions

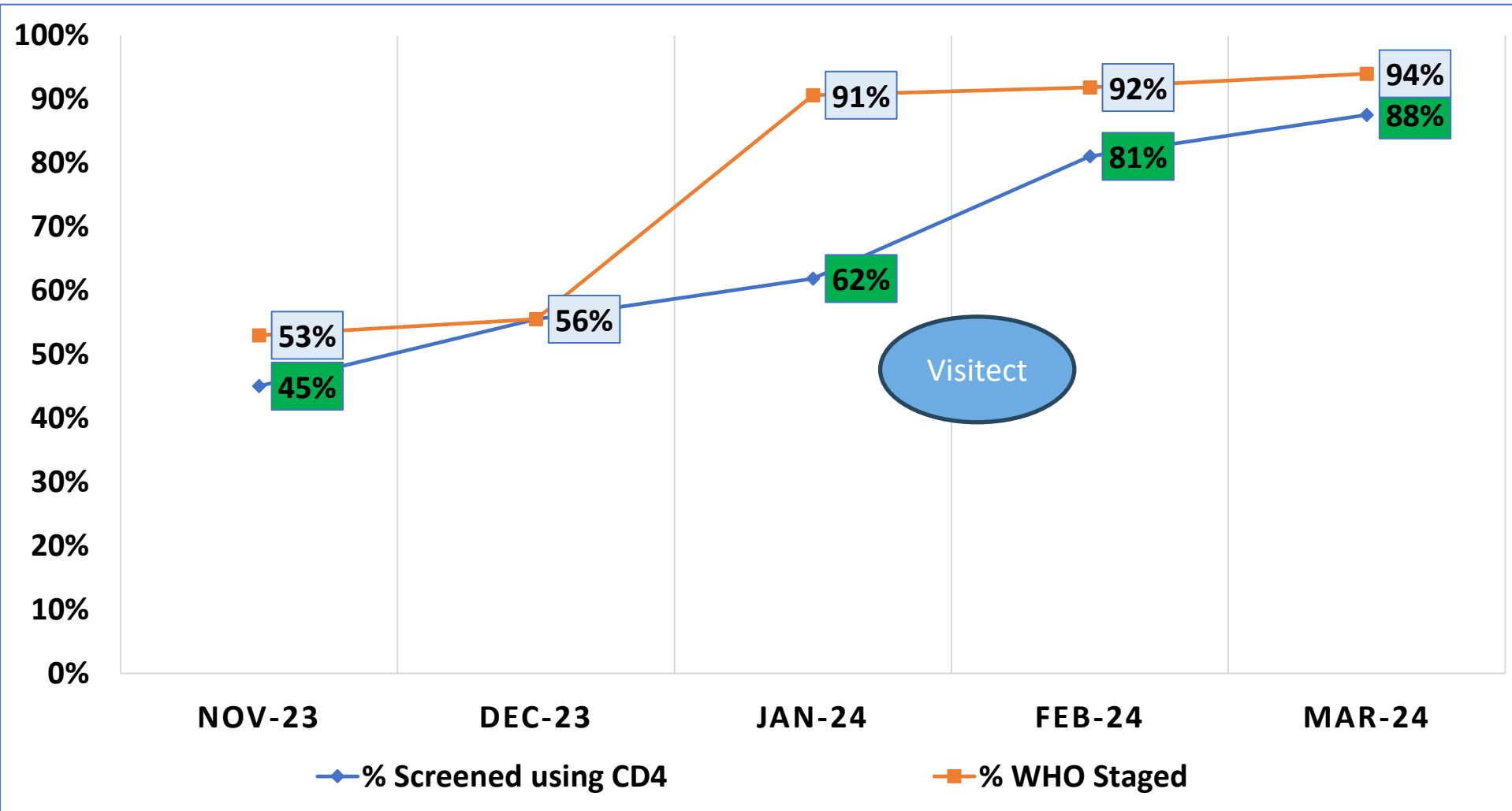
- CD4 facility mapping
- Adoption of newer platforms
- Linkage of AHD data monitoring to data-hub for big high data analysis
- Technical support in commodity management with involvement of implementing partners
- Developed community AHD guidelines

# Progress in AHD Package of Care Provision



- AHD Package of care include reflex CXR for all AHD
- Symptoms screening and LF-LAM used for TB
- Single dose Amphotericin B

# Progress in Screening for AHD



- Accelerated increase in the screening for AHD using CD4 cell testing
- Still have challenges with CD4 testing platforms



# AHD Implementation Model Scale-Up and TB LAM Uptake

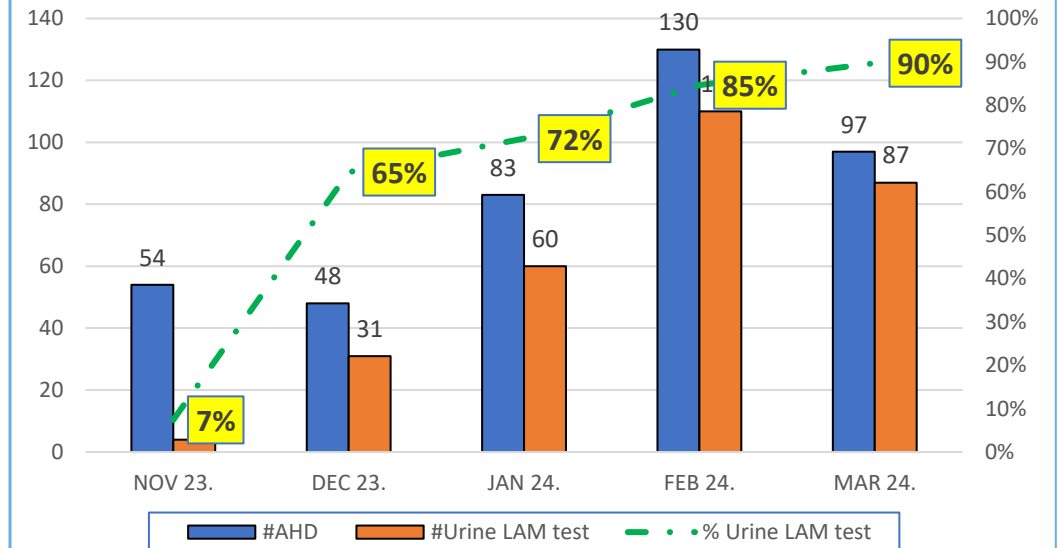


- 70 functional hubs of target 149 hubs
- 330 target/functional spokes
- 2200 rural spokes

LEVEL OF CLASSIFICATION	
	<b>HUB:</b> First level, District Hospital, Specialist Hospitals, Teaching Hospitals
	<b>SPOKE:</b> Health Centre, Zonal Clinic
	<b>REMOTE SPOKE:</b> Community, Health Posts and Outreach points

*Spoke Model, and the Levels of Classification*

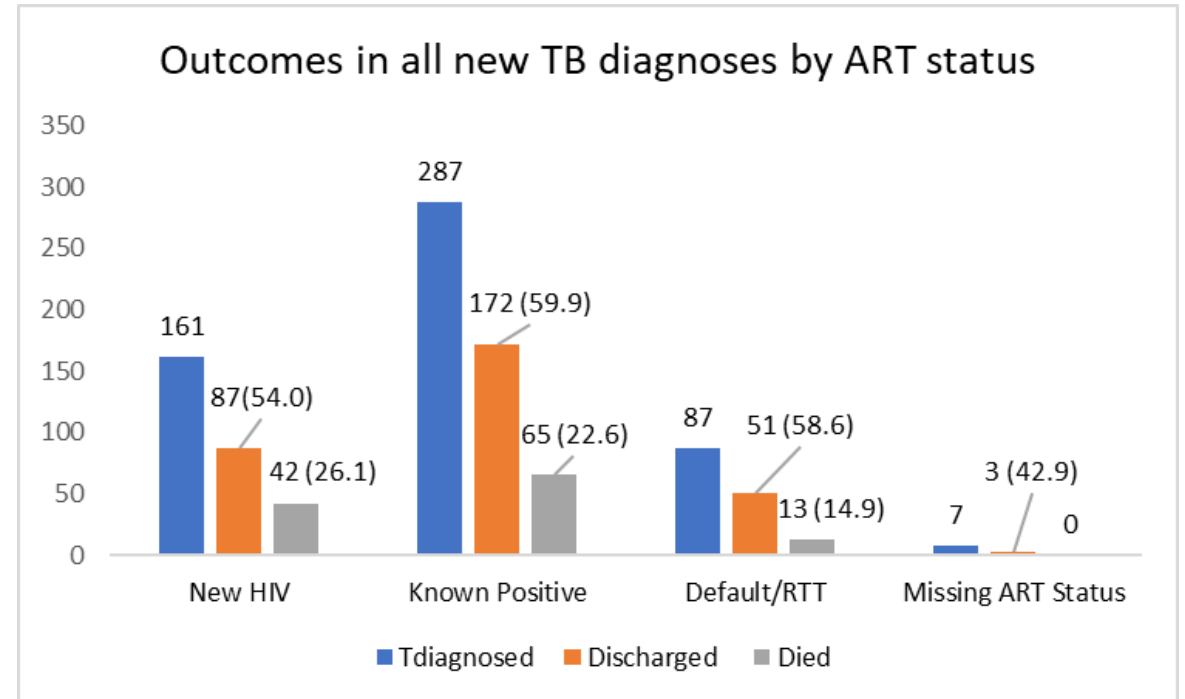
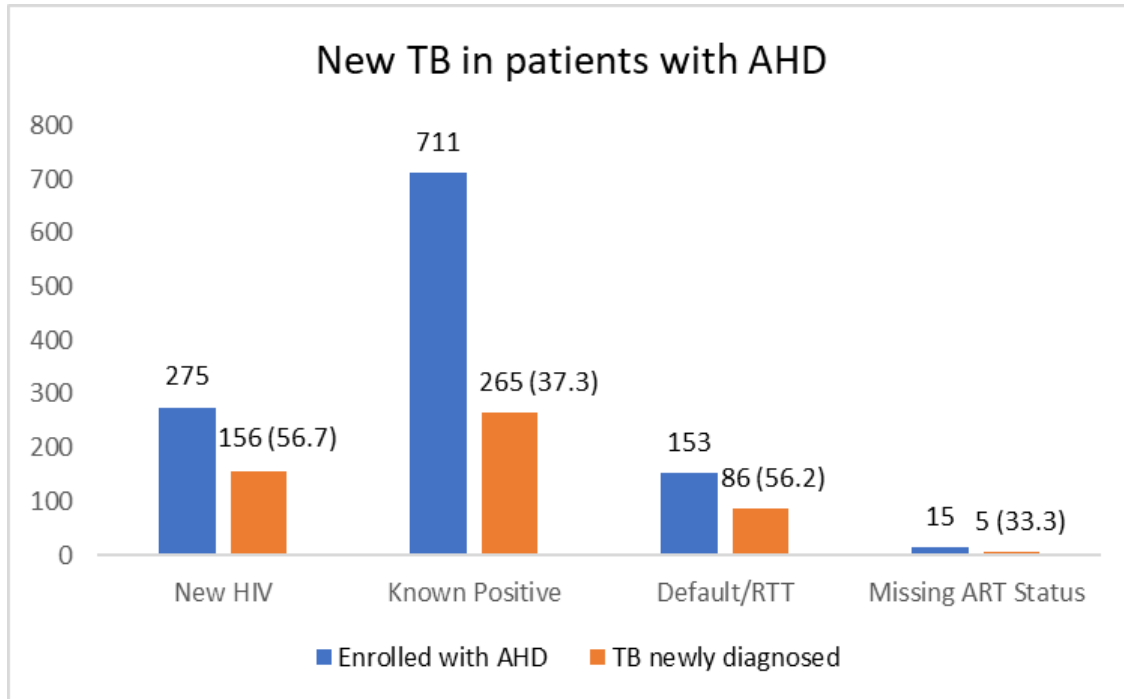
AHD Clients Screened with Urine TB LAM, Rural Western province (42 Sites), Nov 23 - Mar 24.



- Community AHD services are underdeveloped.
- Community AHD training package developed

- LF-LAM positivity rate at PHC is around 2 percent
- LF-LAM out of stock currently

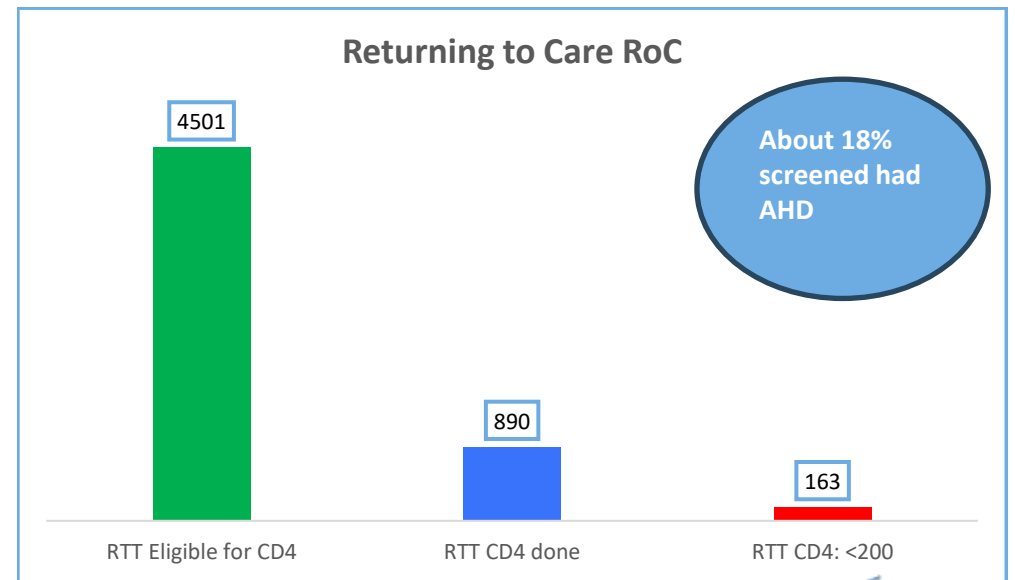
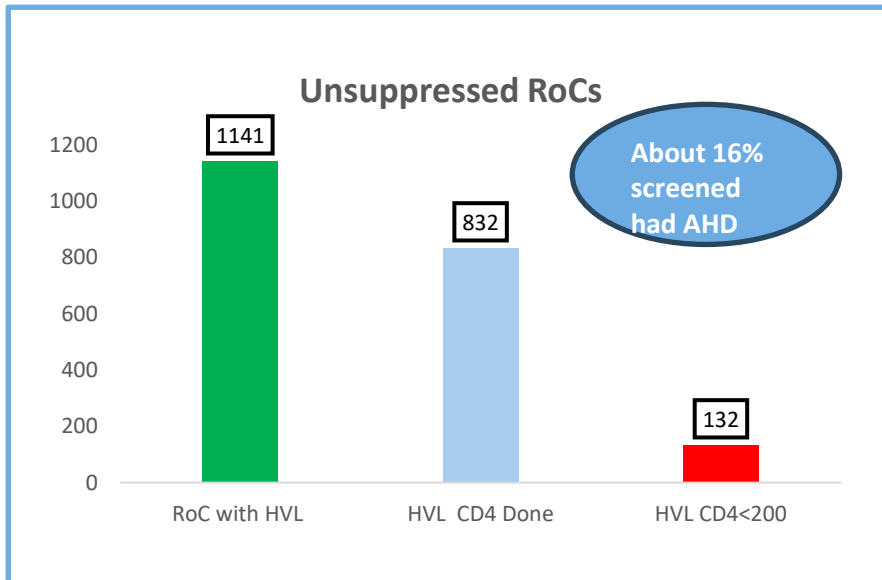
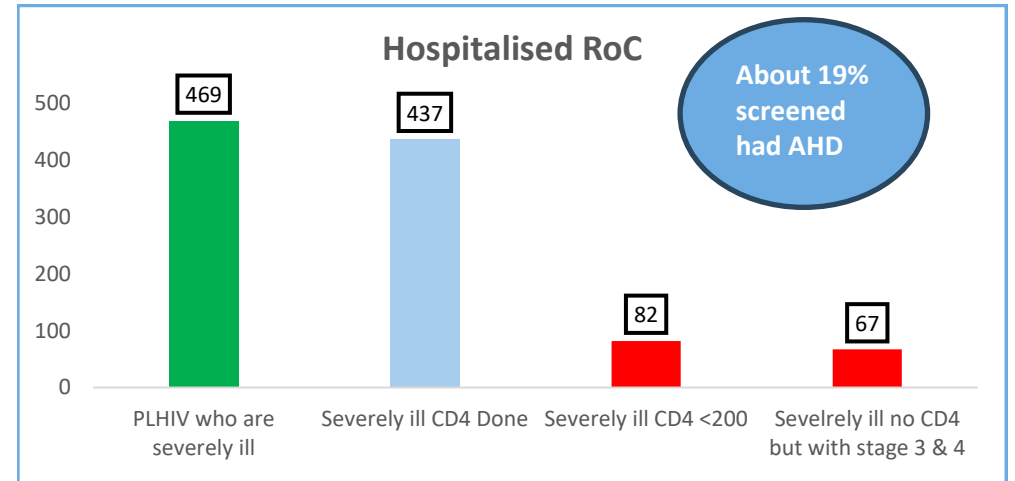
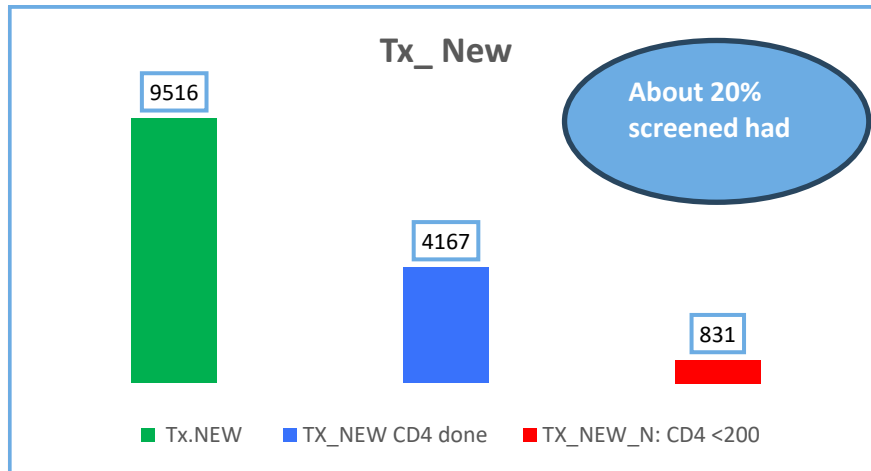
# In-Patient AHD Outcomes



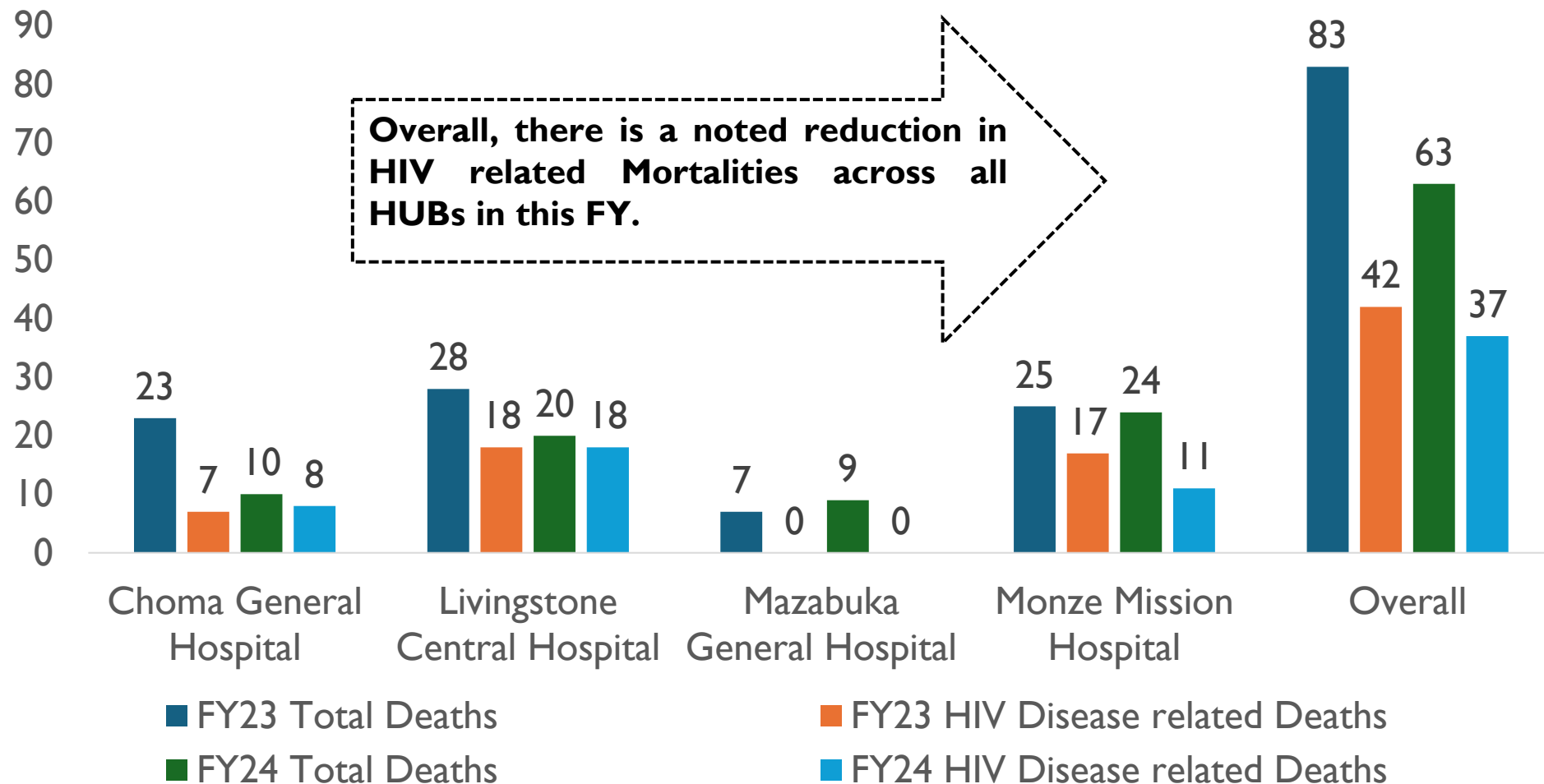
- 35% of TB/AHD cases treated in hubs are diagnosed at hubs suggesting substandard screening in spokes, late diagnosis and poor care pathways

- In hospital TB/AHD case fatality rate at 25%
- Optimised TB treatment in AHD (Disseminated TB) is urgently required
- Causes of death are correctable conditions like uncorrected anaemia, hypoglycaemia, septic shock

# AHD Screening by Patients Results From Subnational Level

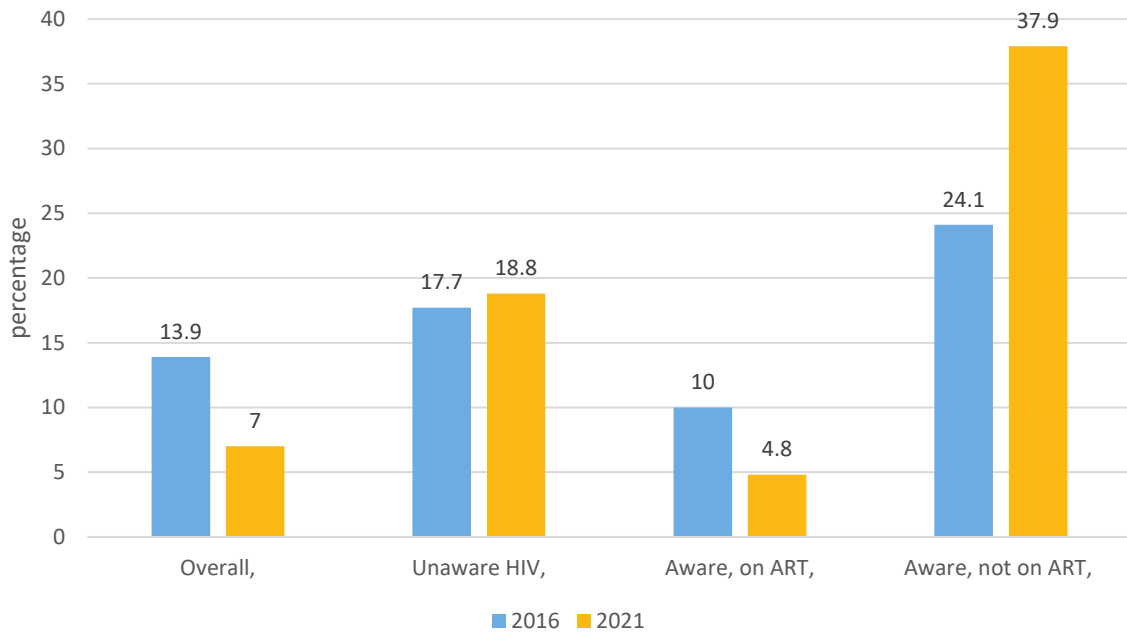


# Progress in reducing HIV related mortalities from subnational analysis



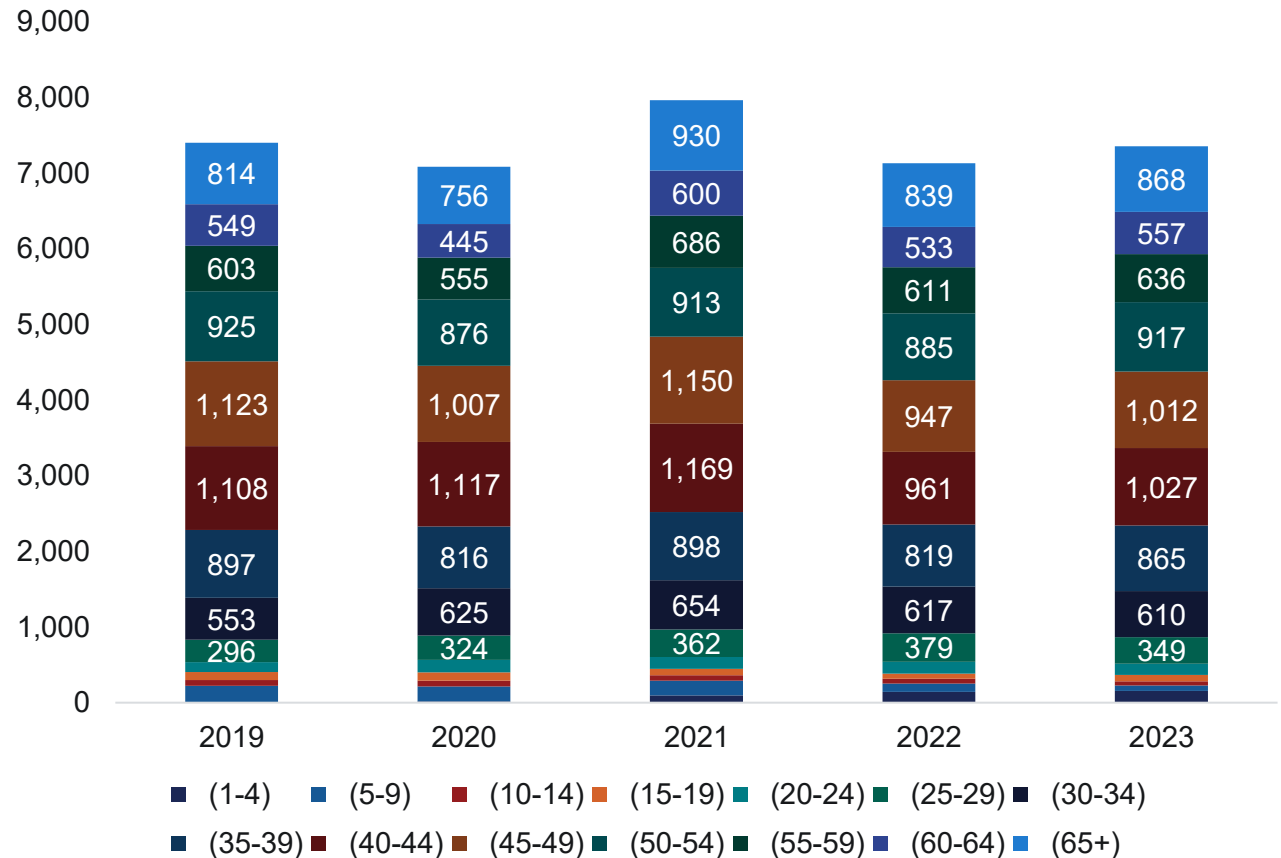
# Impact of AHD Program in Zambia

Weighted proportion PLHIV aged 15-59 years with advanced HIV disease (CD4+ count <200) by awareness status in Zambia – 2016 (N = 2,467) versus 2021, (N = 2,205)



ZAMPHIA

Mortality among RoC remains consistent; ~7,000 deaths annually for the past 4 years and higher among 40 – 49 YO's



Source: SmartCare



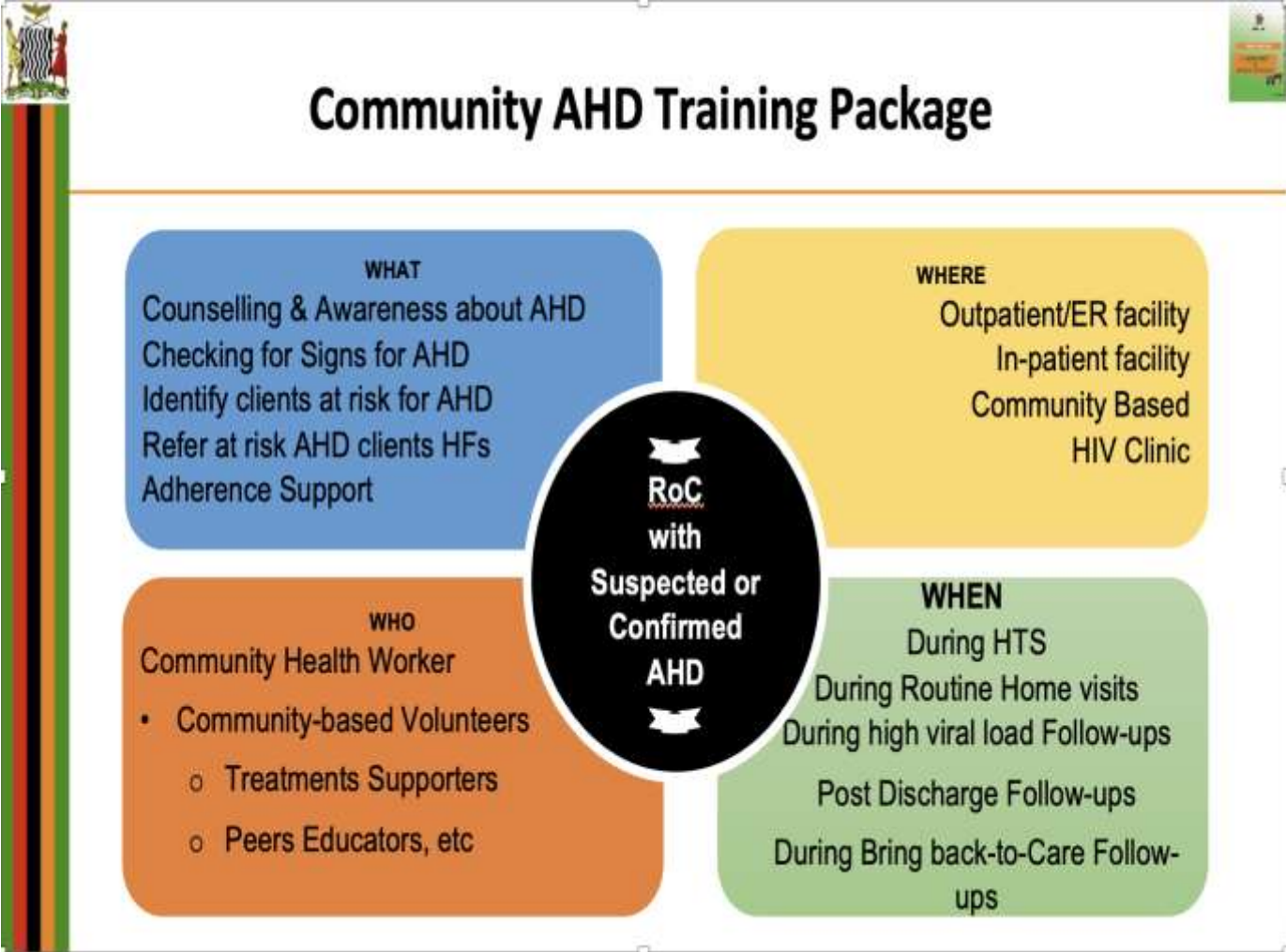
# Prevention of AHD

- Early identification of AHD in community. Basic screening - illness suspicious of AHD-symptoms to look out for;

- **Coughing**
- **Weight loss**
- **Fever**
- **Night sweats**
- **Confusion**
- **Diarrhea**

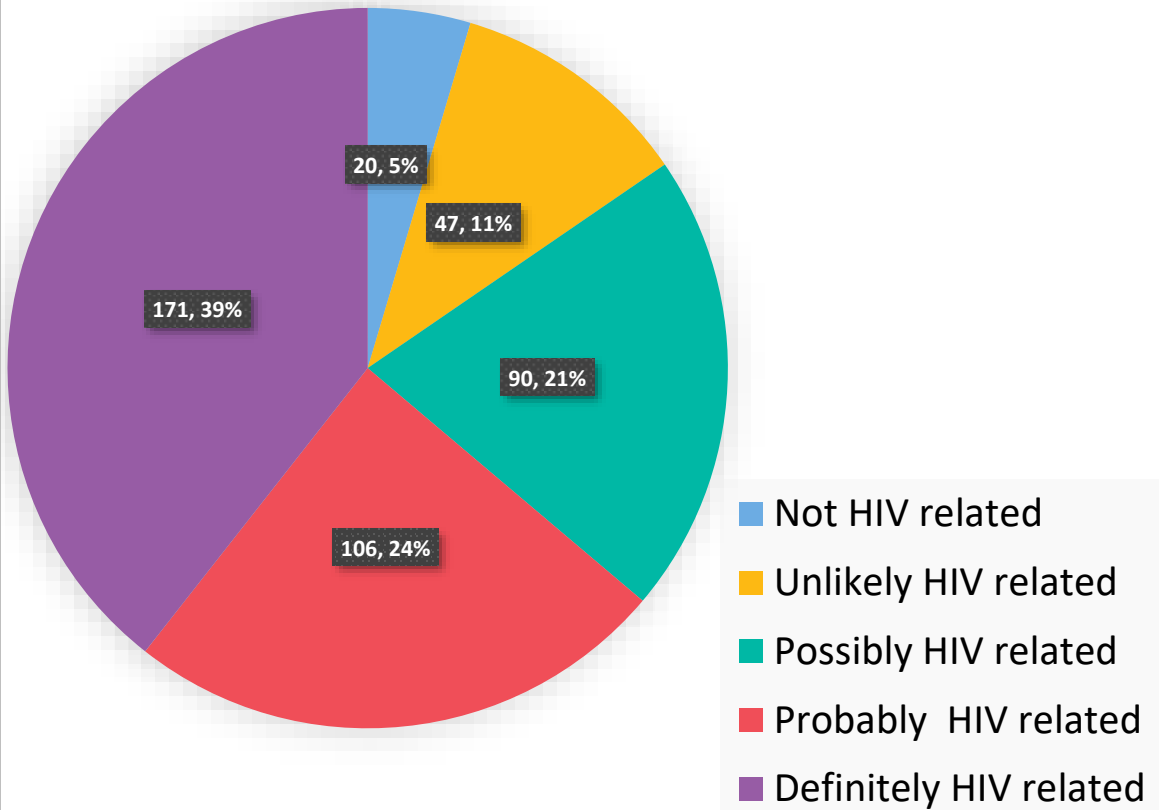
**Early bidirectional community-facility linkages**

**Supportive services**

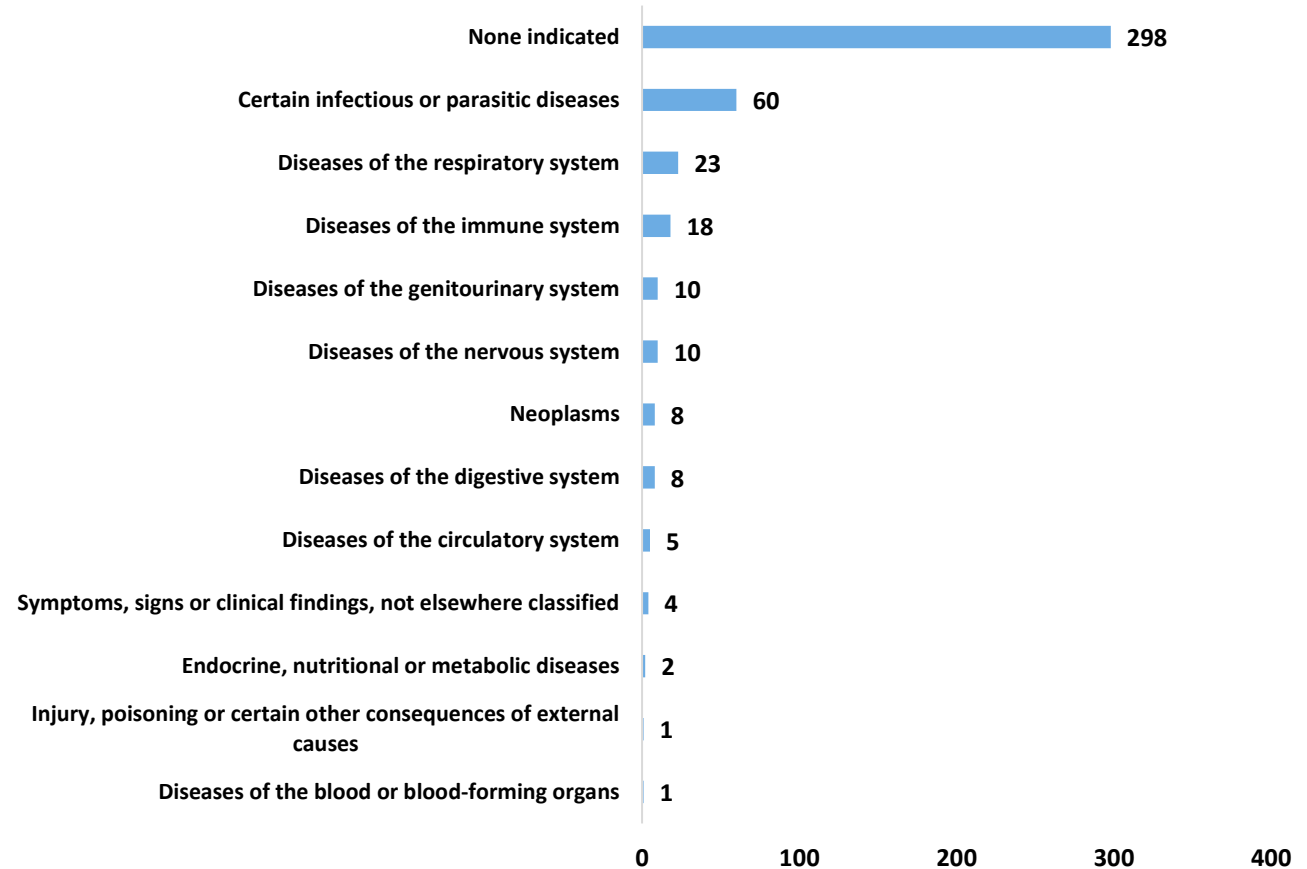


# Causes of Death

## Causes of Death



## Causes of death based on ICD-11

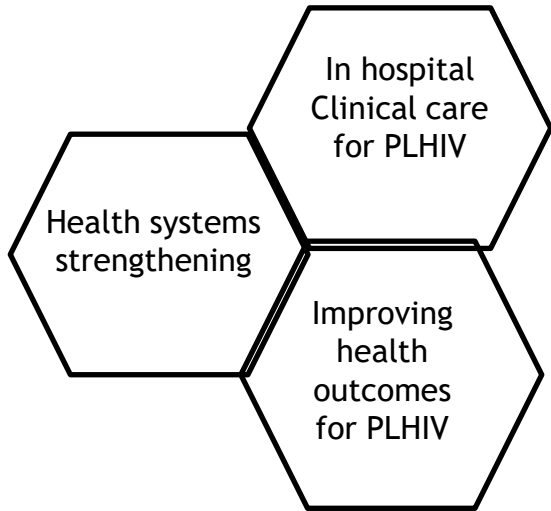


# Implementation of AHD Service Quality Standards

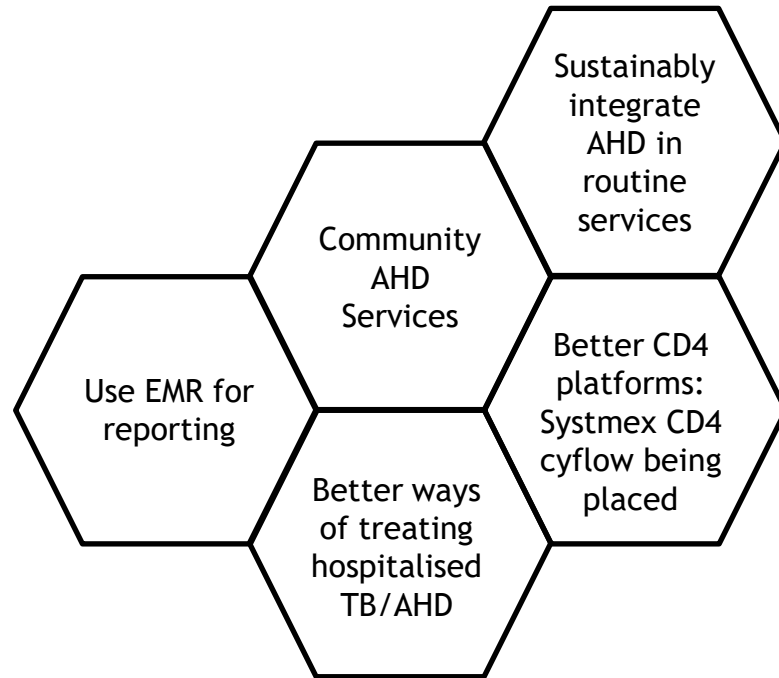
- **CQUIN AHD service quality standards tools implementable at facility and national level**
- **Some indicators require contextualization**
- **Community AHD services performed poorest in the Zambia assessment**
- **In-patient quality standards linked to HIV mortality audit/reviews tools**



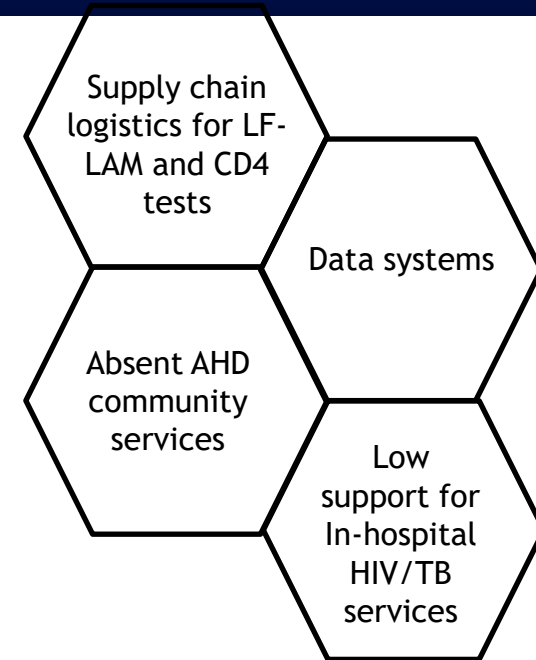
# Summary



**Advantages of implementing advanced HIV disease package in the country**



**Plans for future scale up and existing and lacking support in the country**



**Highlight the remaining challenges**



# Thank You!

