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CQUIN:
Always Responding to the Moment

Wafaa El-Sadr, MD, MPH, MPA

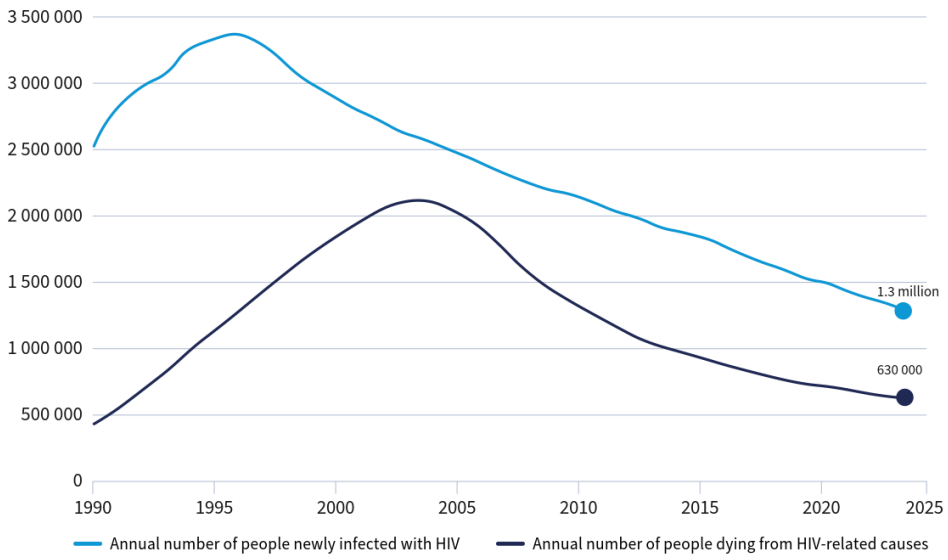
Works in Progress: Transforming the HIV Response in a Time of Change, April 20-22, 2026 | Nairobi, Kenya

Outline of the Presentation

- State of the global HIV epidemic
- CQUIN – The Learning Network
- How CQUIN does its work
- Responding to the moment
- Conclusions

State of the Global HIV Epidemic

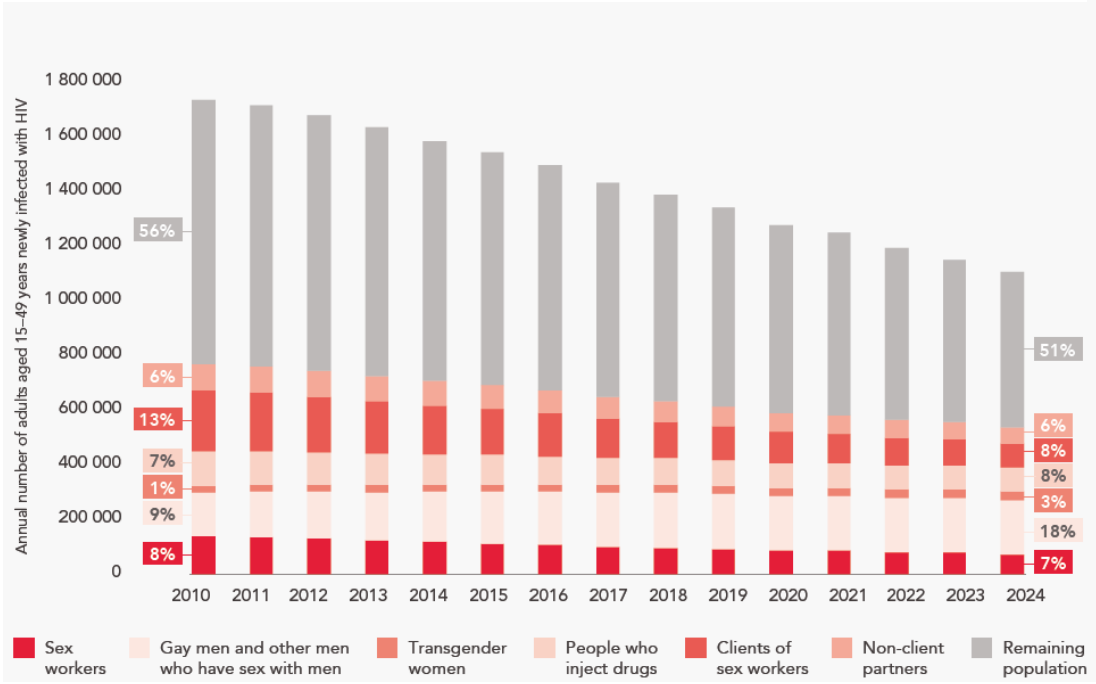
New HIV infections and HIV-related deaths 1990 to 2024



Note: These estimates were made before the implementation of cuts to foreign aid.

Source: UNAIDS/WHO estimates, 2025.

New HIV infections 2010 to 2024, by population



WHO (2025), UNAIDS Global Report (2026)

HIV: Not Yet Done

More Than **40 Million** People Worldwide are Living with HIV

Annual number of new HIV infections:

1.3 million

people were newly infected worldwide in 2024

People living with HIV:

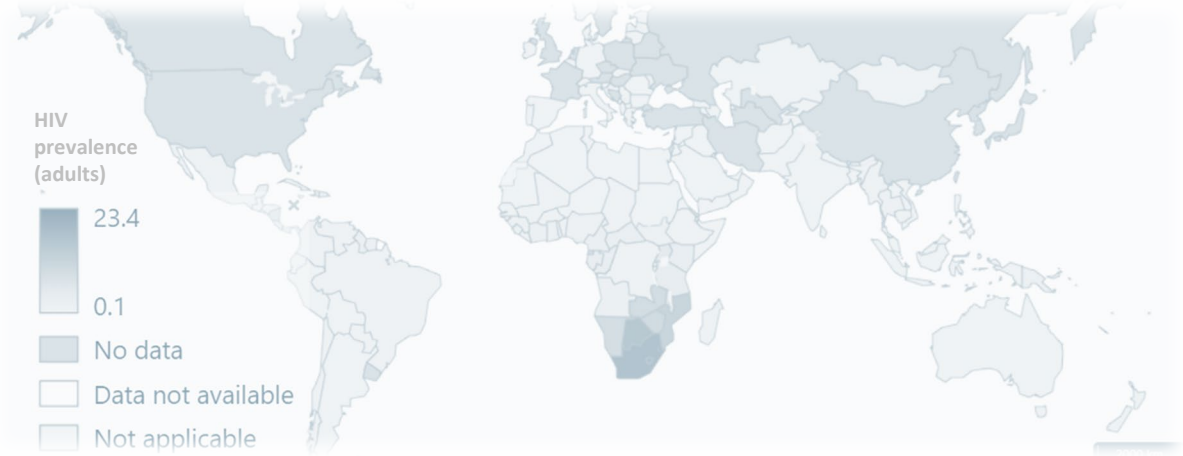
26.4 million

people were living in the **African Region** in 2024, accounting for **two-thirds** of people living with HIV worldwide

Annual number of HIV-related deaths:

630,000

people died from HIV-related illness in 2024



Source: WHO

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Why CQUIN?

- CQUIN was designed as a *policy accelerator* to address gaps between evidence and action and delays between policy adoption and implementation at scale
    - Initial focus on the use of DSD to enhance coverage and quality of HIV services
- Recognizes the importance of country leadership, joint learning, practical information exchange, and engagement of recipients of care and communities
- Focus on *diffusion of innovation*, common frameworks, mutual accountability, and friendly competition

CQUIN: Growing Together

- CQUIN launched in 2017, when improving the design and delivery of HIV service delivery was recognized as a priority for achieving epidemic control
    - Reaching more people (coverage) with improved person-centered services (quality)
    - Focus on differentiated service delivery
    - Initially 6 African countries
- Over time, network grew to 21 countries with expansion of technical focus – most recently to prioritization and redesign of HIV programs in a changed landscape

CQUIN Foundations

- Country Leadership
- Recipient of Care Engagement
- Global Partnerships
- Sharing and Learning Together
- Responding to Change

Foundation (1): Country Leadership

MOH are critical network partners

- Provide key leadership on CQUIN Advisory Group
- Help to prioritize technical focus, including meeting topics, C2C focal areas, community of practice selection and design
- Drive change at national level, including development and tracking of action plans based on capability maturity model staging

Foundation: Country Leadership

Tsitsi Apollo
Zimbabwe

Irenio Gaspar
Mozambique

Aleny Couto
Mozambique

Suilanji Sivile
Zambia

Raphael Adu-Gyamfi
Ghana

Amos Mulbah
Liberia

Sindy Matse
Eswatini

Clorata Gwanzura
Zimbabwe

Mirtie Getachew
Ethiopia

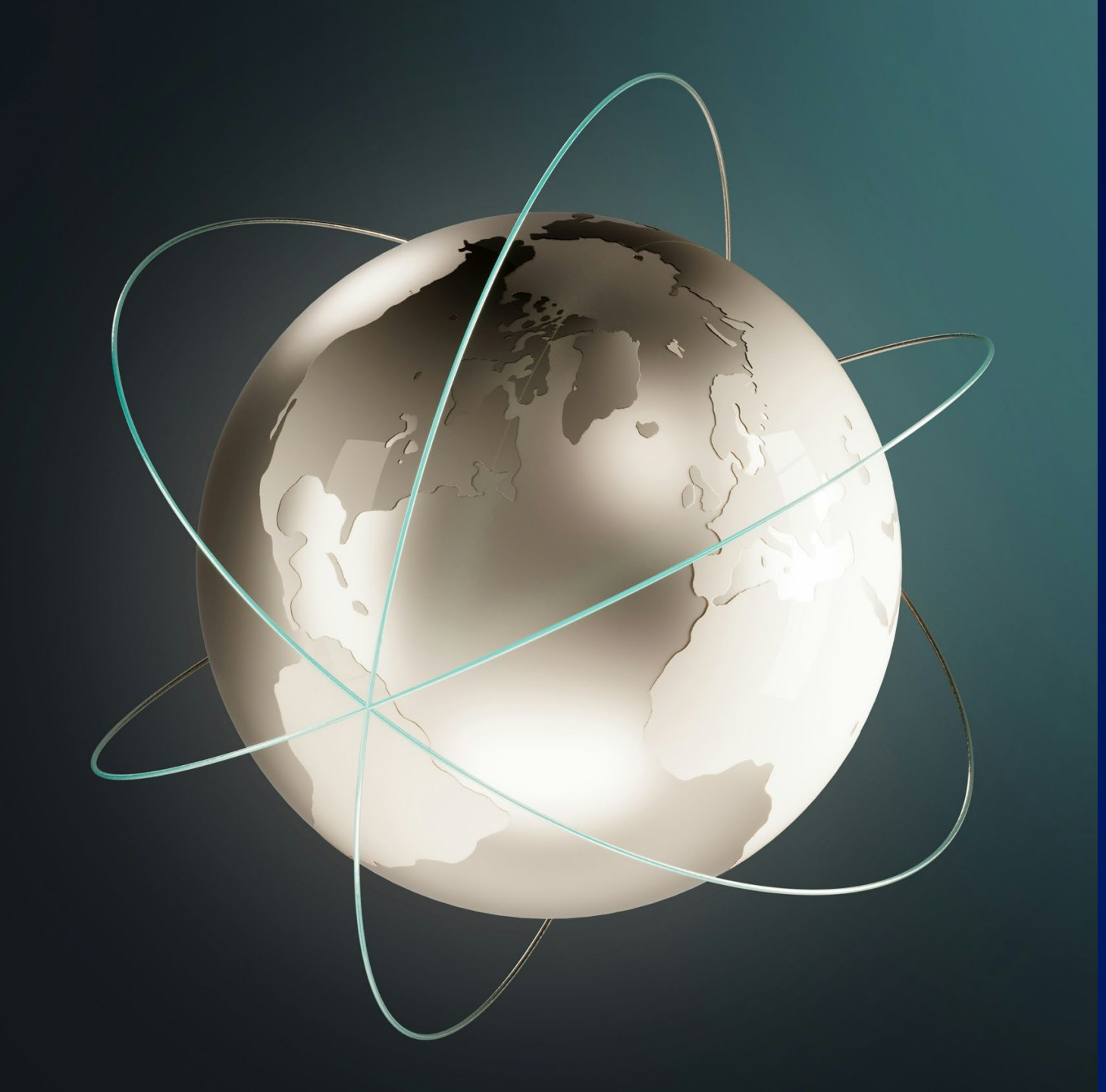
Cordelia Katureebe
Uganda

Musa Manganye
South Africa

Jonathan Flomo
Liberia

Foundation (2): Recipient of Care (ROC) Engagement

- Inclusion and empowerment of RoC throughout the network in partnership with ITPC and the Community Advocacy Network
    - At meetings, in webinars, on C2C visits, on Advisory Group
- Provision of support for technical projects including (but not limited to)
    - RoC Community Engagement tool
    - KP Quality indicators
- Support and mentoring for recipient of care/KP organizations and individuals



Foundation (3)
Global Partnerships

- WHO
- UNAIDS
- Global Fund
- US Government
- IAS
- ITPC

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Foundation (4) Sharing and Learning Together: Meetings, Poster Sessions and Tools Labs

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Sharing and Learning Together: Country to Country Visits

Tanzania & Zambia visit Uganda

Mozambique & Eswatini visit Ethiopia

Zimbabwe visits Malawi

South Africa visits Nigeria

Eswatini, Moz & Zambia visit Tanzania

Senegal visits Cote d'Ivoire

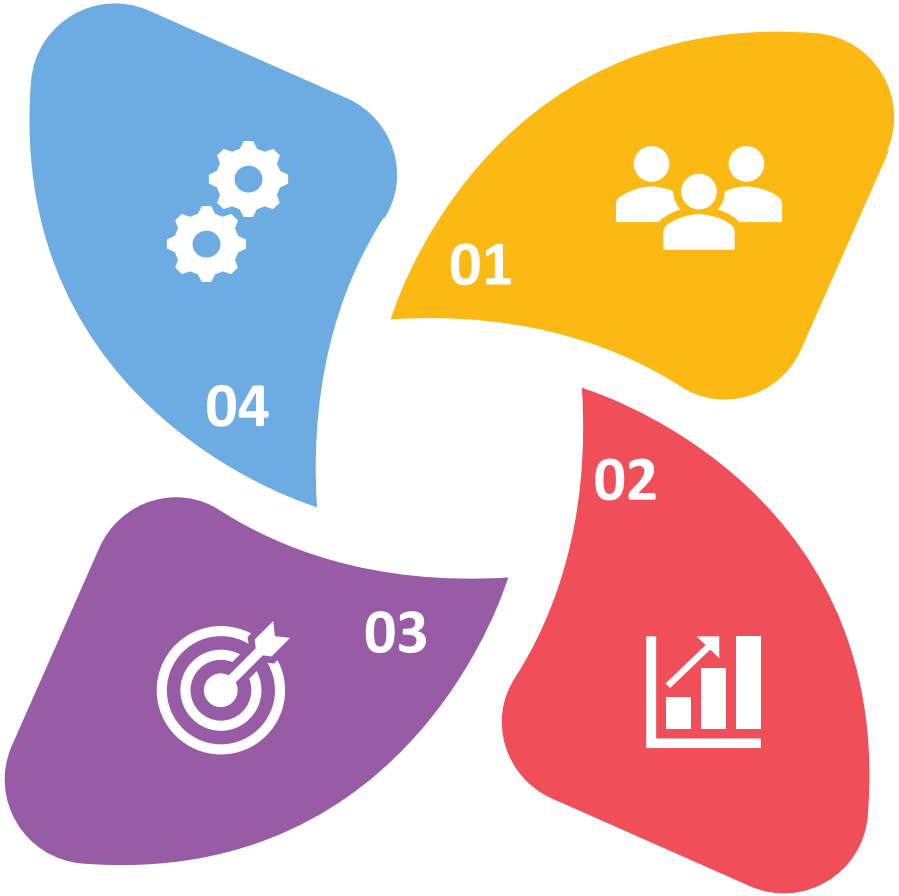
Sharing and Learning Together: Communities of Practice

Service Delivery CoP

Strategic Priority:
Identify, refine, and scale innovative, efficient, and high-impact models of HIV service delivery, including the integration of HIV care and treatment into routine healthcare to promote sustainability and reach.

Quality Management CoP

Strategic Priority:
Advance service quality by scaling and adapting CQUIN-developed tools in alignment with evolving service delivery models and recipient needs.



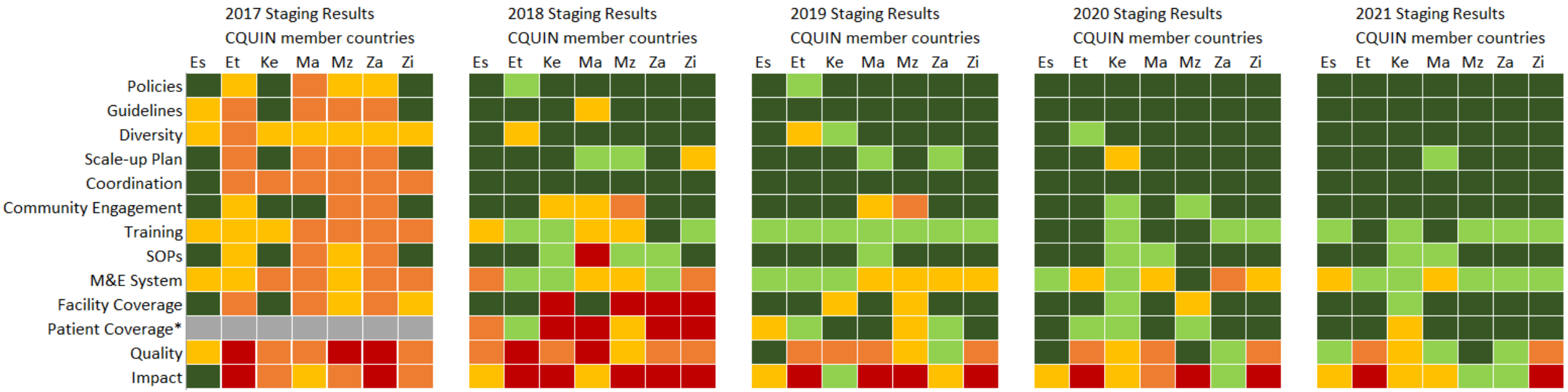
Community Engagement CoP

Strategic Priority:
Strengthen advocacy for community engagement and community-led monitoring of service and system adaptations.

Monitoring and Evaluation CoP

Strategic Priority:
Align M&E indicators with prioritized HIV services and expand and strengthen government-owned and -led elements of comprehensive M&E systems.

Foundation 4: Anchored in Self-staging & Measuring (DSD CMM) (7 countries 2017-2021)



The 5 stages of the capability maturity model:

- Early or preliminary stages of planning and development; useful in identifying next steps to take in the scale-up process
- Work has begun and the initial efforts are ongoing; highlights areas that can be prioritized for improvement
- Efforts have resulted in measurable progress, such as a draft for review of achievement of more than 25% progress to a target
- Considerable progress has been made, resulting in over 50% progress to a target or working systems only in need of finalization
- Achievement of a highly-evolved implementation; further improvements and refinements can be made as needed

*Patient coverage was not assessed in 2017 CMM

Foundation 5: Responding to Change

Updated Theory of Change

Strategies

- Robust peer-to-peer exchange of best practices, knowledge, information, tools and resources
- Multi-stakeholder collaborations to co-create tools and resources to address gaps in HIV service delivery
- Data review, evaluation (e.g., capability maturity models), and analysis of HIV services at national levels
- Support for design, implementation and evaluation of new/innovative service delivery models, including training, technical assistance, and quality management
- Leveraging the CQUIN platform *(including meetings, webinars, and linkages to global experts)* to disseminate best practices related to modeling, financing, and supply chain.

Shorter-term Objectives

- Prioritization of HIV services and the alignment of M&E program indicators in the context of reduced resources
- Identification and scale-up of innovative, efficient, high-impact models of service delivery that are feasible to implement within the revised resource envelope *(e.g., integration of HIV services into routine health care services, DSD, other)*
- Increased knowledge and skills needed to mitigate the impact of declining resources on service quality and coverage
- Facilitate the collection, analysis, and use of HIV service data for quality management and decision making

Longer-term Objectives

- Country-owned, community-driven, and data-informed sustainable programs
- Active, meaningful engagement of communities in priority setting and implementation planning
- Integration of HIV M&E and quality management systems into national systems
- Documentation of the impact of reduced resources on HIV service delivery and health outcomes

Outcome

Mitigate the impact of decreasing resources on HIV programs and population health by supporting countries to optimize and sustain the coverage and quality of essential HIV services

Integration: Pathway to Quality and Sustainability

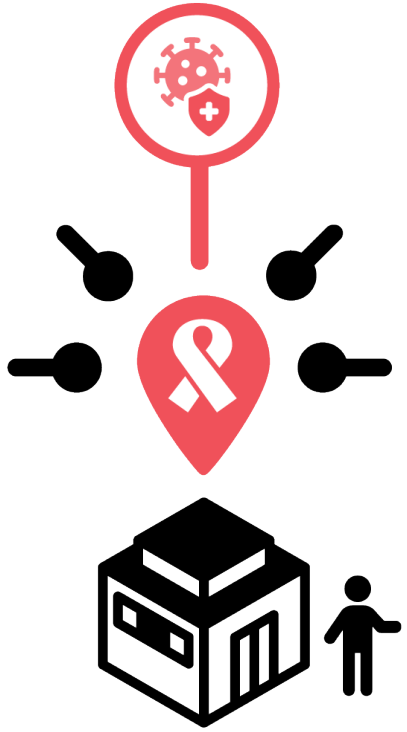
Journal of the International AIDS Society

The Promise of Integration of HIV Into Primary Care: Challenges and Opportunities

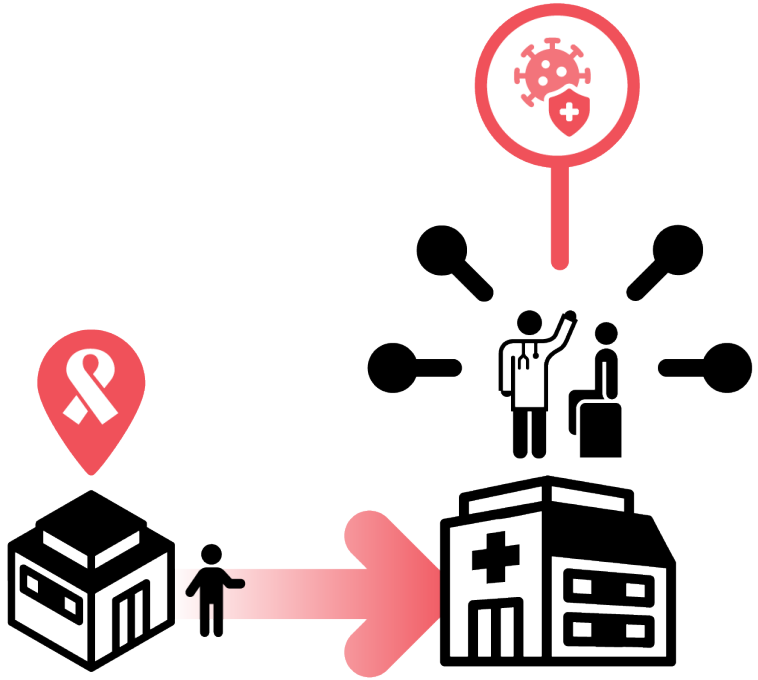
Wafaa M. El-Sadr | Joey Platt

ICAP at Columbia University, New York, New York, USA

Direction of Integration



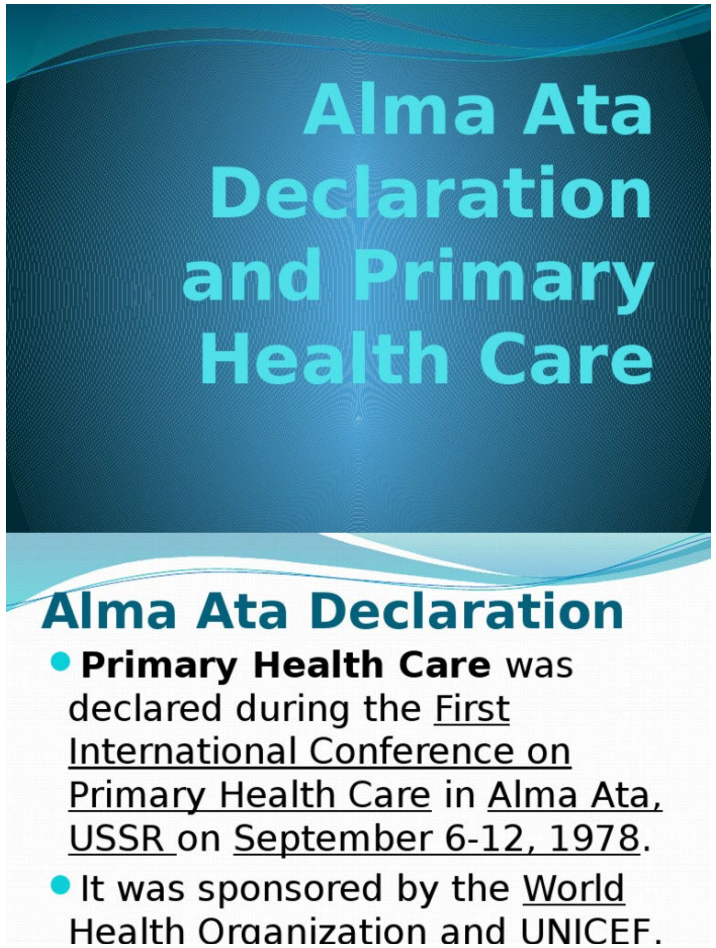
Integration of Non-HIV Services into HIV Programs



Integration of HIV Services into Primary Care (non-HIV Programs)

Integration: Opportunities and Challenges

Opportunities	Challenges
Strengthened primary healthcare systems	Potential decrease in quality of HIV care due to limitations in primary care infrastructure (e.g. facilities, supply chains) and skills of workforce
Improved access to comprehensive continuity care for a breadth of chronic conditions	Potentially reduced access or interruption of care
Improved HIV and non-HIV-related health outcomes	Insufficient funding and resources to facilitate integration and the expanded scope of care
Cost and resource efficiencies	Potential increased stigma and discrimination for key populations with provision of services in primary care settings rather than population-specific settings
Sustained country-supported HIV responses	Increased workload for primary care workforce and need for capacitation on HIV care
Decreased stigma for people accessing HIV services	Limited provision of population-specific services and outreach

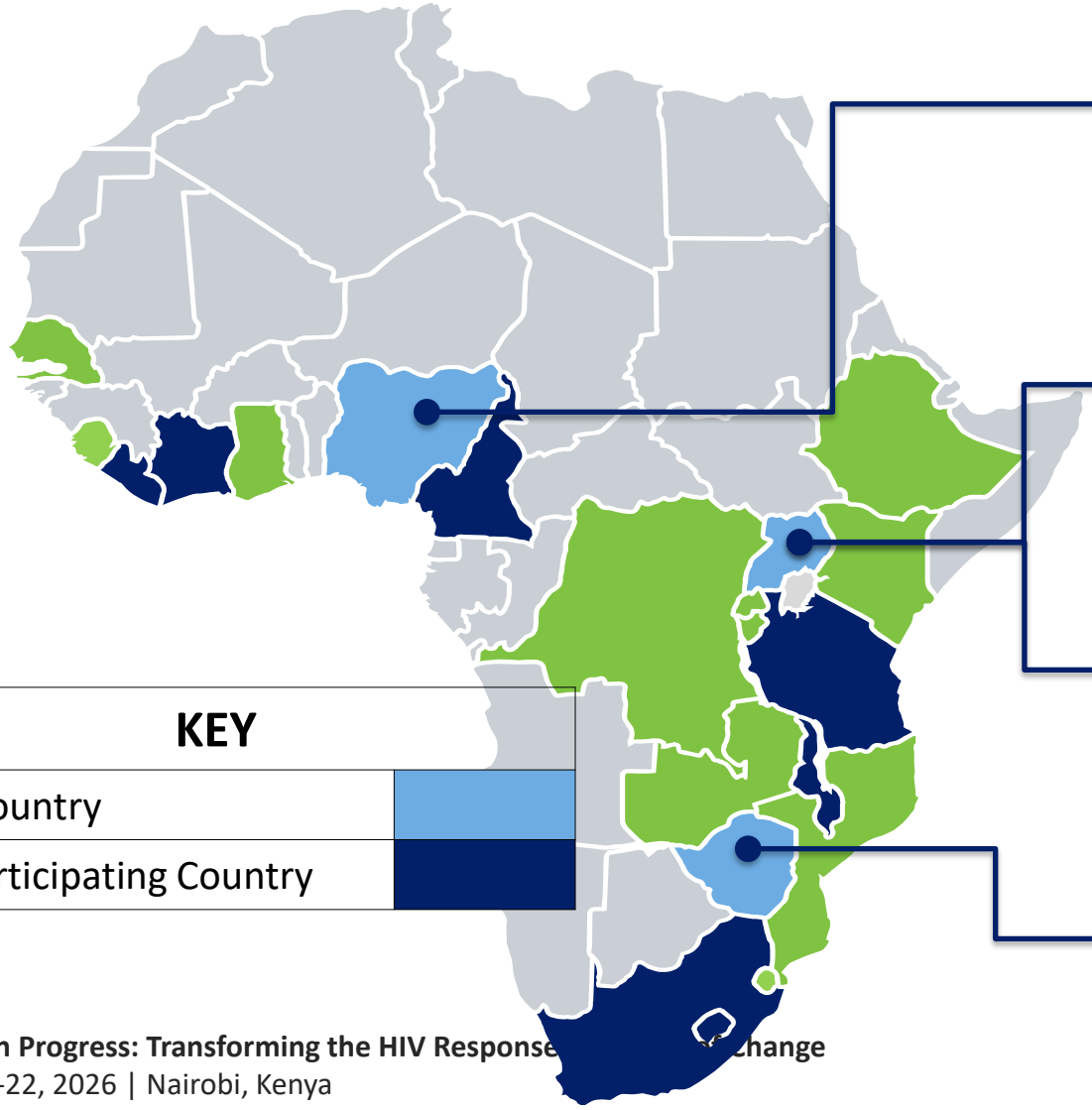


El-Sadr and Platt, IAS 2026

CQUIN Responds to the Moment (1)

1. **Strategic Planning & Prioritization**
   - Conducted **scenario-based HIV service prioritization** (Jul–Sep) with 16 countries
     - expanded to all 21 countries for revised prioritization (Oct–Nov)
   - Prioritization outputs informed Global Fund GC7 reprioritization, PEPFAR bridge funding decisions, and national guideline revisions
2. **Global Tools & Technical Support**
   - Rolled out tools from global partners:
     - PATHS, IAS TIER, UNAIDS/WHO guidance, CQUIN Modified TIER Tool
   - Launched CQUIN toolkits:
     - M&E Indicator Prioritization Tool, Service Quality Assessment, KP-Friendly Services Toolkit, M&E Vulnerabilities Assessment, and HIV Services Integration CMM
3. **Country-to-Country Learning & Exchange**
   - **Seven in-person C2C visits**
     - Liberia/Malawi→Nigeria; Cameroon/Côte d'Ivoire→Uganda; South Africa→Zambia; Tanzania/Lesotho→Uganda
   - **Six virtual C2C exchanges** on HIV service integration and AHD.

C2C Visits Overview: 7 countries in 2025



KEY	
Host Country	
C2C Participating Country	

Malawi & Liberia March 18-20: AHD
March 18-20: AHD

Cameroon & Côte d'Ivoire June 23-28: Integration

Tanzania & Lesotho October 22: Integration/AHD

South Africa July 09-10:
6 MMD

CQUIN Responds to the Moment (2)

4. **Webinars & Communities of Practice**
   - Hosted **seven major webinars** on the emergency response amid financial shifts, service and M&E prioritization, Community Engagement in Times of Crisis (with ITPC) and HIVST expansion
   - Revised **Communities of Practice** from 11 to four (M&E, Quality Management, Community Engagement, Service Delivery).
5. **Monitoring & Evaluation Strengthening**
   - Supported **national HMIS data reviews (2024–25)** revealing decline in HTS, ART initiations, VL testing, and PrEP initiation in many countries.
   - Piloted **M&E system autonomy/vulnerability assessments** in multiple countries, identifying gaps in HRH, data quality, community-led monitoring, and HMIS resilience.
6. **June Meeting – Johannesburg, SA, June 2025**
   - Convened 21 countries, global partners, and civil society to launch the CQUIN 2.0 Pivot under the theme Meeting the Moment: Transforming the HIV Response in a Time of Change.
7. **CQUIN 9th Annual Meeting – Durban, SA, Nov 2025**
   - Convened 21 countries, global partners, and civil society for four days of technical sessions, country updates, systems panels, and action planning under the theme Delivering Differently: Prioritize. Adapt. Sustain.

HIV Impact Network for Vertical Transmission Elimination (HIVE)

HIVE is a *knowledge exchange platform* that will catalyze advancement in *coverage and quality of impactful services* designed to prevent vertical transmission of HIV

- Convenes health system leaders & global stakeholders to participate in joint learning, exchange of best practices, and co-creation of tools and resources to support country priorities
- Provides opportunities for experience-sharing and peer-to-peer learning for rapid adoption of best practices and impactful interventions to address gaps
- Supports collaborative problem-solving and enables member countries to request technical assistance from ICAP and PATA

Member countries

Kenya, Mozambique, Nigeria, South Africa, Zambia, and Tanzania

- Conduct annual self-assessments through a multi-stakeholder participatory process using the HIVE capability maturity model
- Determine their priorities, develop action plans, and commit to targets, leveraging and supplementing existing country priorities

HIV Impact Network for Vertical Transmission Elimination

PATA

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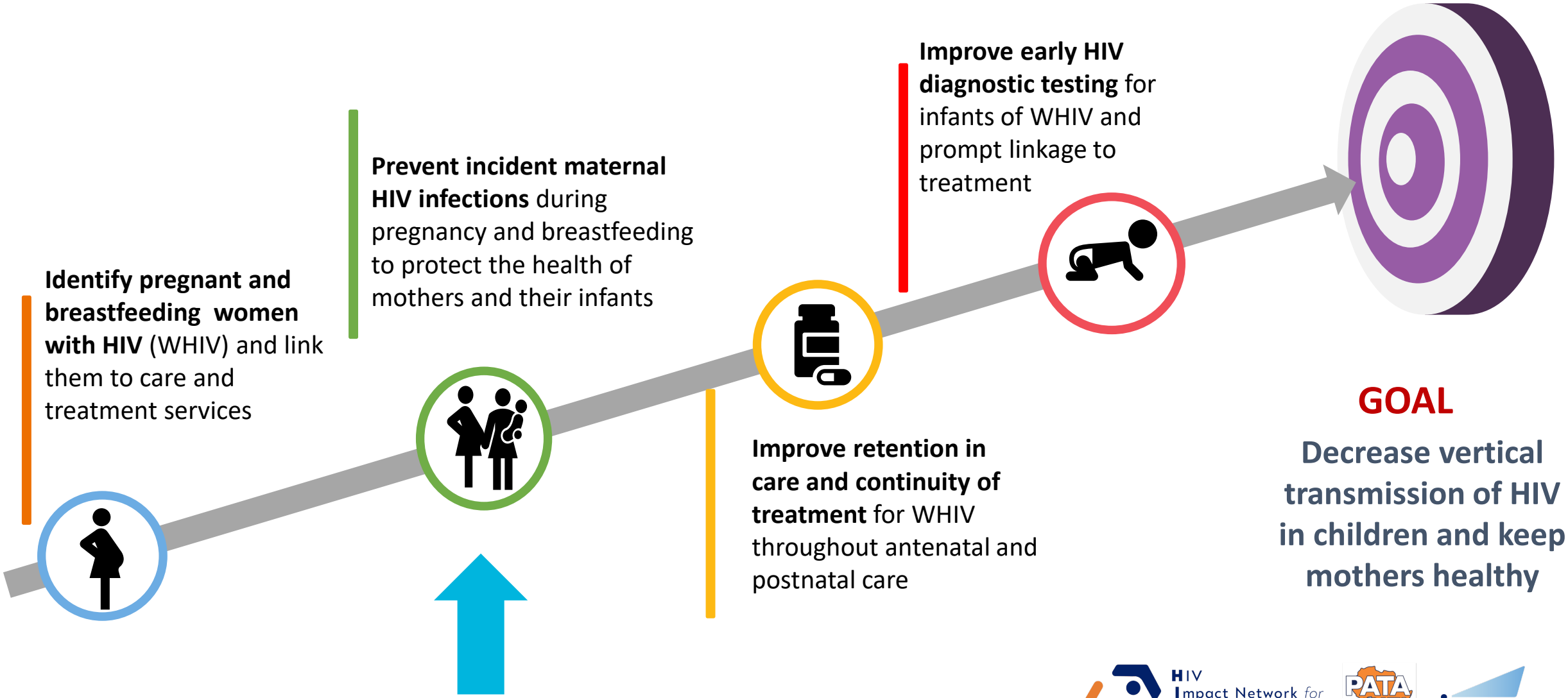
HIVE Goal and Objectives



HIV Impact Network for Vertical Transmission Elimination

PATA

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Sharing and Learning During Change

- Sharing lessons during emergencies
  - COVID-19 pandemic
  - Post-election violence
  - Cyclones in Mozambique

CQUIN Activities

- 28 all-network meetings
- 22 country-to-country visits
- 11 communities of practice, now focused on 4 COPs
- 72 webinars
- 39 country data performance reviews (DPRs)
- 76 newsletters

The Magic of CQUIN and HIVE

Visionary

Evidence

Nimble

Trust

Commitment

Solidarity

Respect

Inclusive

Partnerships

Learning

Ambitious

Centering community

Problem-solving

Results

Responsive

Creativity

Efficiency

Sharing

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Our Journey Together Continues

Thank You!