Progress report on DLI-K (HIV)

Health and Nutrition Service Access (HANSA) (Center for HIV/AIDS and STI)

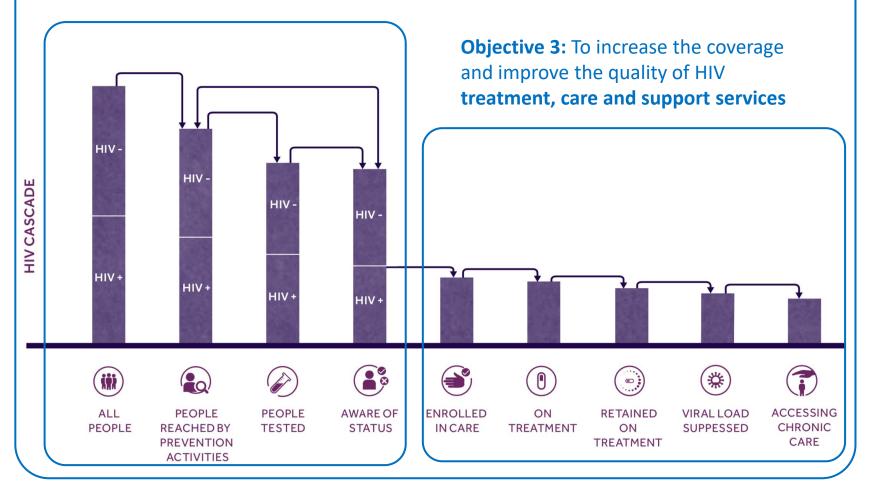
Outline:

- 1. National Strategic objectives and Goals
- 2. Highlight Progress update on HIV under HANSA (DLI-K) and HIV/C19RM
- 3. Progress report on HIV co-financing
- 4. Challenges

NSP Objectives, HIV cascade, and HIV Services

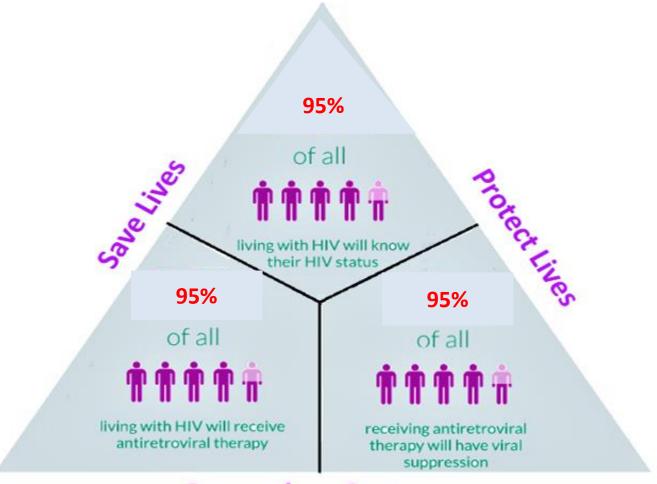
Objective 1: To create **an enabling environment** for an effective HIV response

Objective 2: To increase the coverage and quality of HIV **prevention interventions**



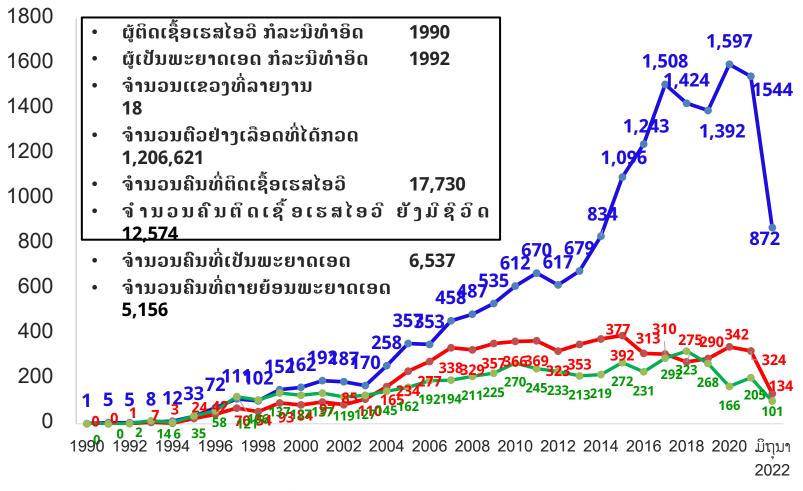


End the transmission of HIV/AIDS by 2030



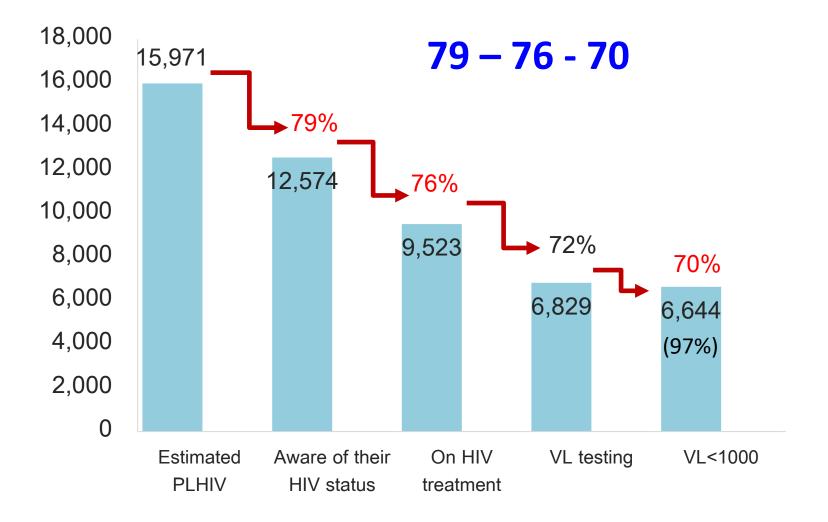
Strengthen Systems

ຈຳນວນຄືນຕິດເຊື້ອເຮສໄອວີ, ເປັນພະຍາດເອດ ແລະ ເສຍຊີວິດ ຍ້ອນພະຍາດເອດ ແຕ່ປີ 1990-ມິຖຸນາ 2022



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HIV cascade (as of June 2022)





Highlight





HANSA Project Components

Component 1: Integrating Service Delivery Performance with National Health Insurance Payments

Component 2: Service Delivery and Nutrition Convergence

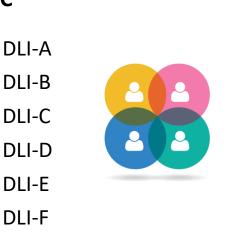
Component 3: Adaptive Learning and Project Management

Component 4: Contingent Emergency Response

Component 2: Service delivery

Strengthening PHC for performance and quality for UHC

- Performance and quality assessment at primary health
- Free MCH and timely payment to health center
- Supply of essential drugs and supplies at health center
- Deployment of clinical personnel at health center level
- Financial Management at health center
- Improved data and monitoring using DHIS2



DLI-B

DLI-C

DLI-E

DLI-F

(Addressing Malnutrition (focus on four priority prov	inces)	
	 Implementation of SBCC and GMP at village-level 	DLI-G	
	 Integrated outreach to remote villages 	DLI-H	
	 Increased coverage of MCH and immunization services 	DLI-I	
	Delivery of Priority Public Health Programs		
	 Improved TB notification 	DLI-J	
	 Increased coverage of HIV testing and treatment 	DLI-K	
	 Strengthening health security and preparedness 	DLI-L	

3 Indicators of DLI-K

Indicator DLI K - (a1) Percentage of FSW received an HIV test in the past twelve (12) months and know their results

Percentage of FSW received an Percentage Increase (FSW)									
HIV test in the past twelve (12)	Y0 —	→ Y1—	→ Y2 —	→ Y3 —	→ Y4				
months and know their results	0%	2%	2%	2%	2%				

Indicator DLI-K (a2): Percentage of MSM received an HIV test in the past twelve (12) months and know their results

Percentage of MSM received an	Percentage Increase (MSM + TG)								
HIV test in the past twelve (12)	Y0 —	→ Y1 —	→ Y2 ─	Y3 —	→ Y4				
months and know their results	0%	5%	6%	8%	10%				

Indicator DLI-K (b): Number of HIV positive cases currently on treatment

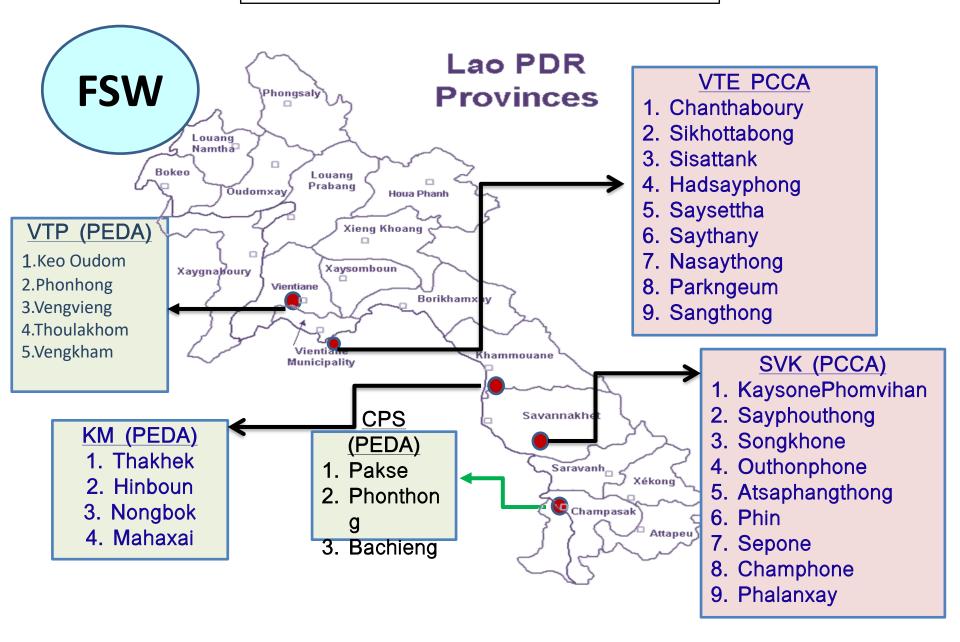
Number of HIV positive cases	Percentage Increase (on ART)									
currently on treatment	Y0 —	→ Y1 —	→ Y2 —	→Y3—	→ Y4					
	0%	1.7%	4%	5%	5%					

Period of implementation on DLI.K

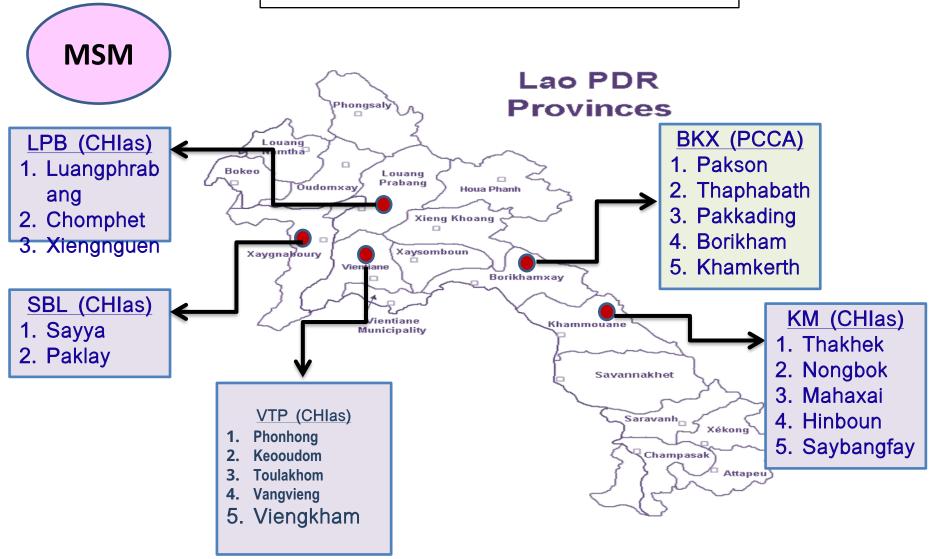
YEAR	Period
Y 1	01/01/2021 to 31/05/2021 (5 months)
Y 2	01/06/2021 to 31/05/2022 (12 months)
Y 3	01/06/2022 to 31/05/2023 (12 months)
Y4	01/06/2023 to 31/05/2024 (12 months)

Implementers DLI-K : CHAS, PCCAs, CHIAs and PEDA

Implementing Areas

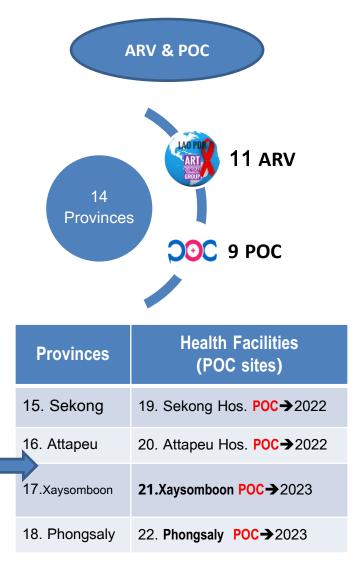


Implementing Areas



Health facilities provide services on ARV drugs for PLHIV

Provinces		Health Facilities (ART and PO	C sites)
1. Vientiane Capital	1. 2. 3.	Sethathirath HospitalARVMahosoth HospitalARVFriendship HospitalARV	
2. Khamouane	4.	Khamouane Provincial Hospital	ARV
3. Savanaket	5. 6.	Savanaket Provincial Hospital Songkhone District Hospital	ARV POC
4. Champasack	7.	Champasack Provincial Hospital	ARV
5. Saravanh	8.	Saravanh Provincial Hospital	POC
6. Louangprabang	9.	Louangprabang Provincial Hospita	I ARV
7. Oudumxay	10.	Oudumxay Provincial Hospital	POC
8. LouangNumtha	11.	LouangNumtha Provincial Hospita	al ARV
9. Borkeo	12. 13.	Borkeo Provincial Hospital Tonpeung District Hospital	ARV ARV
10. Huaphanh	14.	Huaphanh Provincial Hospital	ARV
11. Vientiane Provincial	15.	Vientiane Provincial Hospital	POC -> 9/2021
12. Xayabury	16.	Xayabury Provincial Hospital	POC -> 8/2021
13. Borikhamxay	17.	Borikhamxay Provincial Hospital	POC → 2022
14. Xiengkoung	18.2	Xiengkhoung Provincial Hospital	POC → 2022



Priority HIV Programs under HANSA

Highlight Key Progress:

- The HIV program focus on the following 5 priority strategies: i) ensuring prevention of HIV transmission; ii) case finding; iii) linkages to care; iv) ART enrollment; and v) viral load suppression
- ✓ HIV testing coverage targets for FSW were set to increase at a 2% rate on a yearly basis: Y1 & Y2 has reported fully-achievement; and proress updates at 45% of 8779 FSW targte in Y3.
- ✓ HIV testing coverage targets for MSM were set to increase by 5%, 6% & by 8% on years 1-3. Y1 & Y2 has reported fully-achievement; and progress updates at 52% of 3256 MSM/TG target in Y3 so far.
- ART enrollment targets were set to increase by 1.7%, 4% & 5% on years 1-3 respectively. Y1 over-achieved at 109%; Y2 has reported overachievement at 106.2%; and a 99.8% progress of achievement of 9808 PLHIV on ART in Y3.

The HIV program accelerated implementation and is currently on track to fulfill year 3 HANSA targets

Key recommendations from Joint MTR HANSA project during 1-11 November 2022

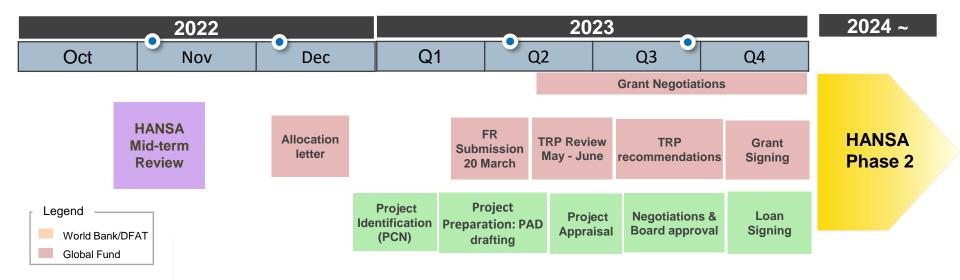
- ✓ Integration of TB, HIV and malaria services into primary health care: Opportunities to de-centralize and integrate TB, HIV and malaria services into the primary health care level
- CHAS with the support of technical partners including WHO, CHAI, UNAIDS and CSOs, consider a revision to 2023 program targets to ensure further alignment and support for national targets.

Looking ahead under HANSA 2:

- ✓ Opportunities for the next GF investment period 2024-2026: achievement of national targets of reaching 95-95-95 by 2025, address barriers for access, integration of HIV services through PHC, community-led responses
- ✓ UNAIDS to support development of the national M&E framework, mid-term review and National Strategic Plan
- CHAS and CSOs working alongside IQVIA team to support roll out of differentiated service delivery models to reach key populations
- Evaluation & community consultation to provide additional findings and recommendations into program design for the next investment period

HANSA Phase 2

• Proposed timeline for HANSA 2 preparation, including the alignment with the Global Fund grant funding request



Timeline for Joint TB/HIV Mid-Term Review

Annex 1 TB/HIV midterm review time table (update NOV 2022)

		Oct-22	2		Nov	/-22			Dec	:-22			Jan	1-23			Feb)-2 3			Ма	r-23	
Activity	W2			W1			W4	W1			W4	W1		W3	W4	W1		W3	W4	W1		W3	W4
I - Mid Term Review							•																
a) Concept note: Objectives + Scope (topics), data collection + indicator Review team (MTR lead team, TB team, HIV team), TA internal/external, Budget																							
b) Desk review: Analytical framework Compile all docs, Output																							
c) Field visit: Check list, sites, People to interview																							
d) Partners Workshop: Consolidated TB + HIV findings																							
Draft report shared with stakeholders																							
II- NSAP update 2026-2030																							
III- Funding request																							
Early draft FR to be shared with CCM and GF CT																							
Final FR to GF on 20th March 2023																							

Overview of C19RM funding for HIV program

- Implementation Period 3 years :
- Activities and Budget 3 years:
- Main Focus of C19RM Funding:
- 1 January 2021 31 December 2023
 - 667.526 USD (budget approved after reprograming)
 - Mitigation of Covid19 risks for the HIV programs

- The Signed contract between DPC/NPOC/PR and CHAS to Implementation Project: 1st October 2021
- Completed open bank account for COVID-19 funding in November 2021.
- Recruited Project coordinator and Finance officer.

GF-C19RM approved budget and key activities

Year	Budget Approved
2021	\$ 145,247.52
2022	\$ 280,355.49
2023	\$ 241,923.01

Scale up differentiated HIV testing and POC lab testing

Scale up differentiated ART services or Point of Care (POC) in 2 more provinces (PSL + XSB) and 4 central hospitals

Support on site coaching for care and treatment services in POC sites, including HTC quality services and referral system improvement

Capacity building of health care providers and strengthening highquality of HIV services

Support S&D CQI intervention in ART/POC sites, including patients experiences on mental health issues

Improve data management for CSOs partners by developing SOP, data dictionary and Training

HIV Co-financing Budget 2021-2023

Year	Budget Commitment	Budget Amount Approved	Amount spent (update Nov 22)	(%)
2021	\$ 156,783	\$ 167,856	\$ 162,192	103%
2022	\$ 573,304	\$ 454,504	\$ 395,540	69%
2023	\$ 1,079,308	\$ 785,937 (not yet approved)		

Challenges

- Corona virus 19(COVID-1) pandemic is impact to reach the target group (Key population FSW and MSM) harder in Year 1.
- The approved budgets (HANSA&C19RM) have been delayed transferring, the access and referral the target groups has decreased.
- The GF investment through HANSA and C19RM does not achieve the national targets, particularly the high risk groups e.g. FSW achieved 68% and MSM achieved only 10% of NSP targets
- GF investment is now decreasing, while the innovative prevention approaches are needed to continue reaching those KPs.
- Hidden KPs is still challenge to reach and recruit for HIV testing which needs to review the strategies and interventions to address those un-reached.
- C19RM budget is not allow for HIV commodities, even for TB/HIV prevention approach such as TB-LAM, TPT products
- HIV commodities gap through co-finance commitment which is approved in local currency (kip) therefore currency depreciation is challenging;
- Co-finance budget for 2023 not yet approved, and due to currency depreciation, it might not sufficient for forecasted needs

THANK YOU



Photos from GF Field visit during joint mission, Nov 2022