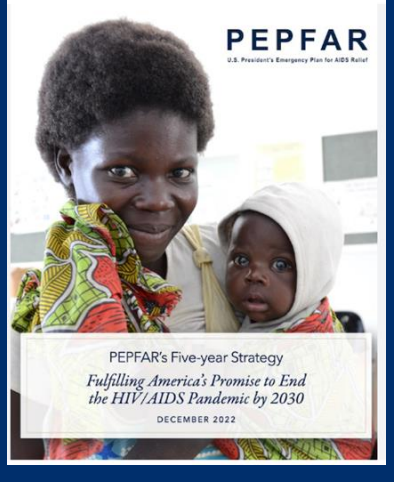
USAID | DEMOCRATIC REPUBLIC OF THE CONGO

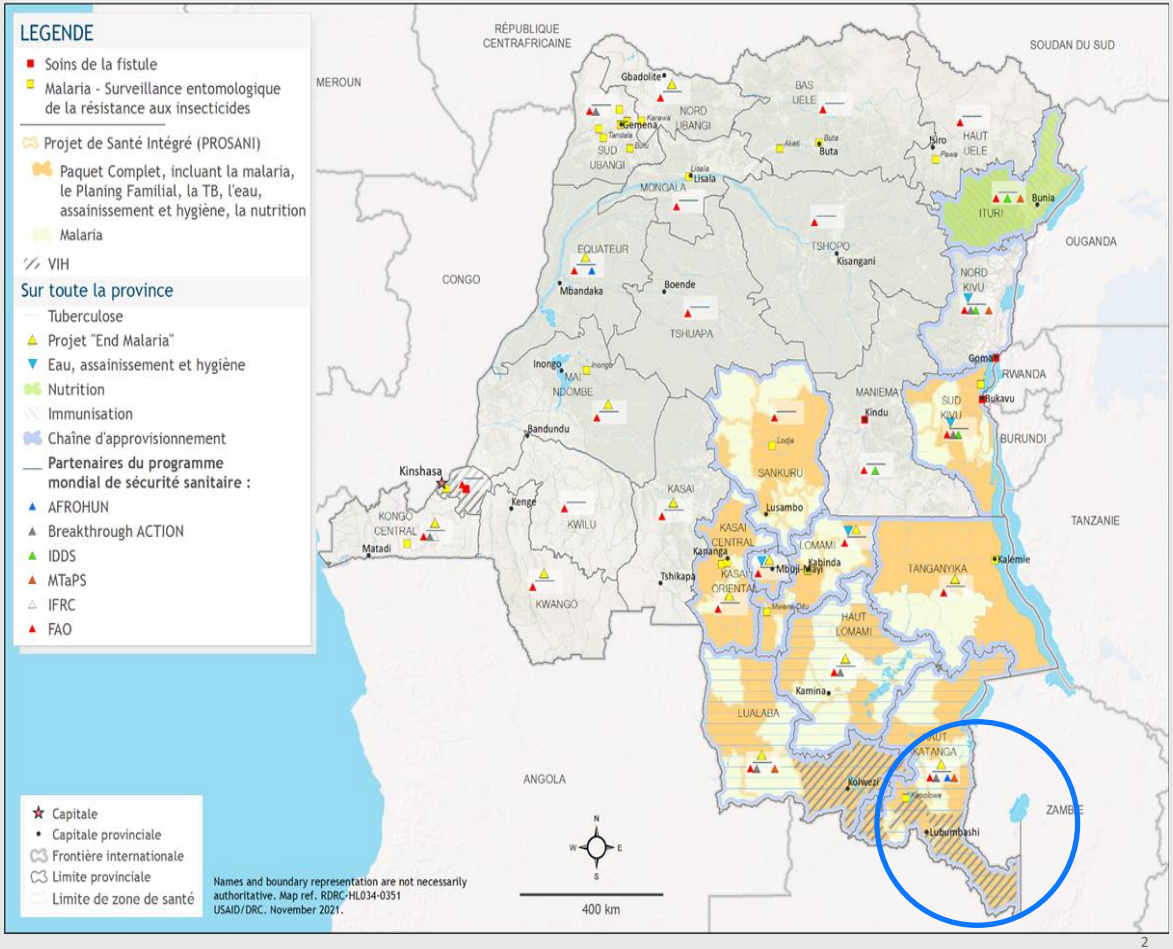
ESPOIR 2030 HAUT-KATANGA OVERVIEW
Pre-Application Meeting

April 2, 2024



DRC HIV Context

- 90 millions (UNAIDS estimate)
- HIV Prevalence: 1.2% (2013-14 DHS)
- Seroprevalence (PW): 15-49 (1.6%)
- PLHIV: 506,405 (Spectrum,2021)
- PLHIV diagnosed: 80%
- PLHIV on ARVs: 97%
- Viral Load suppression: 87%
- TB incidence: 322/100,000 (WHO, 2019)
- Prevalence of HIV among TB patients: 8% (PNLT, 2010)



USAID Espoir 2030 Haut-Katanga overview

1. **Location** :Haut Katanga province

- 3 Health Zones: Sakania, Kapolowe and Panda

2. **Package of services in summary** :

- Service delivery in 3 HZs
- All aspects of HIV epidemic control and prevention, OVC, and KP programming

PEPFAR
20 YEARS OF IMPACT

USAID Espoir 2030 Haut-Katanga

Goal: Improved HIV response to ensure sustained epidemic control in targeted health zones

Obj 1: Increase uptake of HIV and other prevention services for priority and key populations	Obj 2. Increase uptake of HIV testing services at both facility and community levels	Obj 3. Increase uptake and continued engagement in HIV treatment, OVC, and laboratory services	Obj 4. Strengthen DRC health data systems for the management and evaluation of the HIV response
IR. 1.1 Improved community environment to support prevention services IR 1.2 Increased availability and uptake of HIV and other prevention services at both facility and community levels IR.1.3 KPs and other high risk populations networks strengthened	IR 2.1 Increased availability of comprehensive HIV testing services IR 2.2 Improved HTS approaches to optimize HIV finding and linkage to ART services IR 2.3 Improved integration of self-testing and other innovative testing approaches	IR 3.1 Improved access to comprehensive HIV care and treatment, and support services for adults and children IR 3.2 Improved health, wellbeing, protection, and economic security among OVC and their families IR 3.3 Improved access to lab services	IR 4.1 Streamlined data collection processes and procedures to improve functionality of data collection systems IR 4.2 Increased use of reliable data to improve quality and effectiveness of service delivery

PEPFAR 20 YEARS OF IMPACT

Guiding Principles for Technical Approach

The Strategy is built on a set of USAID foundational principles, which will be incorporated into all planning and activities

Localization & innovative partenership/Sub-awards

Environmental Compliance and management

Partenrship with GDRC

Synergy and complementarity with USAID-funded

Youth engagement

Gender, Diversity, Equity, Inclusion & Accessibility

Mental health & Psychococial support

Private Sector Engagement

Evidence and Innovation

Coodination & Collobaration GF

Dataquality and use

Digital Information Systems & tools

PEPFAR DRC critical objectives

Testing Gaps, Index & self testing

Reduction of LTFU

MMD

Patient center HIV services

Reduce testing & treatment gaps among PP

AYGW, Children, PBFW, KPs

Integration of AHD

Cohort certification

Scale up of PrEP

+

Integration of Family Planning & mCPR in Kinshasa

Leverage HIV platform (COVID, Cancer, HTA)

Obj 1: Increase uptake of HIV and other prevention services for priority and key populations

- Improved linkages and networks between families, communities, and facilities that enhance easy access to comprehensive and integrated HIV prevention services
- Increased sensitization and education of HIV, prevention (including FP), and social-cultural behavior
- Reduced levels of stigma and discrimination among health providers
- Increased capacity of HIV services to mitigate barriers (i.e., social, financial) to accessing HIV services for PLHIV and affected families
- Increased community engagement to counter sexual and gender-based violence (SGBV) and support survivors
- Improved violence protection and response systems for KPs and PLHIV
- Strengthened referral and coordination mechanisms at subnational levels to address barriers to KPs and PLHIV access and service uptake
- Increased number of facility and community sites that provide comprehensive HIV prevention services
- Increased uptake of PrEP (PrEP_NEW) by priority and KPs

Objective 2: Increase uptake of HIV testing services at facility and community levels

- Improved HTS services targeting priority and KPs
- Improved capacity among health and community providers to deliver high quality HTS services including self-testing and index testing
- Improved HTS community approaches with an emphasis on a) the scaling-up index Client trailing; b) Case finding in children; c) HTS focus in priority populations through mobile sites; d) testing and finding men; e) partner notification; f) home testing of consenting post-partum breast feeding mothers and their partners; f) high quality self-testing and; g) promotion of recency testing
- Improved HTS facility approaches by optimization of provider initiated testing and counseling (PITC) and other testing entry points, a strict use of validated HIV risk assessment tools and the improvement of linkage to care
- Improved linkages between HTS, care, and treatment services; by increasing linkage to care more than 95%, increasing early treatment initiation, improvement of same day initiation and the inter - and intra-facility as well as community-facility linkage, the tracking and linkage of men to treatment and their retention to care
- Improved linkage between HTS and effective prevention strategies to assist those testing HIV-negative to maintain their status including scale of PrEP for priority and KPs
- High quality, comprehensive PMTCT program established with reduced default rates of

mother/infant pairs by intensifying early infant diagnosis (EID) of new-born by midwives and results tracking with emphasis on EID at 2 months. Optimization of final PMTCT outcome and reducing unknown final status among HIV exposed infants

- Increased use of HTS/Self Testing, especially among high risk populations, AGYW, pregnant and breastfeeding women, sero-discordant couples and KPs

Objective 3: Increase uptake and continued engagement in high quality of HIV treatment, OVC and laboratory services

- Functional adherence support systems established at both facility and community levels to ensure retention for adults and children on ART
- Increased number of HIV-positive adults and children receiving care and support services outside of the clinic
- High-quality, innovative approaches implemented at both facility and community levels
- Increased availability of TB/HIV services as part of a comprehensive package of services
- Strengthened links between health facilities and community-based support services.
- Improved linkages and systematic referrals between health facilities and OVC programs in the community
- Increased number of trained community health workers actively supporting HIV care and treatment services, adherence, retention, and linkages between community and health facilities
- Expansion of ART capacities dispensation by increasing capacity of all facilities to initiate

Objective 3: Increase uptake and continued engagement in high quality of HIV treatment, OVC and laboratory services

- Strengthen ARV optimization, especially for children through promotion and delivery of Dolutegravir fixed dose combination with tenofovir and lamivudine (TLD) and other ARV regimen optimization
- Extension of the management of HIV advanced disease, including diagnosis of advanced HIV disease (AHD) through Cluster of differentiation 4 (CD4) testing, serum cryptococcal antigen (CrAg) screening TB Lam and their treatment
- Increased differentiated models of treatment services both at the facility and community levels
- Expanded ARV Multi-Month Dispensation (MMD) across recommended ages bands
- Improved management of HIV advanced diseases in line with Office of the Global AIDS Coordinator (OGAC) and WHO evolving recommendations
- Increased gain on TX_NET_NEW maintained over the fiscal year
- Decreased number of patients who interrupted their treatment along the clinical cascade
- Improved ART enrollment specifically for children
- Improved virally suppression for both adults and children
- Increased patient satisfaction with care and treatment services
- Reduced economic vulnerability of OVC target households
- Increased utilization of health/HIV, nutrition, education, protection, psychosocial, and economic strengthening services among target orphans and other vulnerable children and their families
- Increased number of patients under optimized regimens as per the national and OGAC's guidelines

Indicators for Objective

Objective 4: Strengthened DRC health system for the management and evaluation of the HIV response.

- Adequate supply chain management and monitoring for adult and pediatric HIV commodities
- Expansion of cohort management software (i.e. Tier.Net) in all high-volume sites.
- Appropriate data validation processes and strategic information exchange fora are in place
- Quality evidence generated through M&E and operations research are used for decision making
- Adequate system for scaling up routine VL monitoring is in place
- Clear leadership exists at provincial and health zone levels to provide a vision and strategy to train and retain skilled health workers
- There is improved GDRC communication and coordination of donors and implementing partners, including PEPFAR and the Global Fund
- The role of PNLS in supporting the HIV response at decentralized levels is well defined and implemented

Thank you