

# PEPFAR

U.S. President's Emergency Plan for AIDS Relief

## Sustainable HIV Epidemic Control

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PEPFAR POSITION PAPER

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## Why is sustainability an issue for HIV epidemic control today?

The global response to the HIV pandemic has been unprecedented. Billions of dollars and millions of people were quickly mobilized to save lives and fight the pandemic. The gains have been tremendous. If country governments, donors, and civil society work in partnership, and continue to ensure every investment has a clear outcome, it is within our grasp to control the epidemic<sup>1</sup>. Yet, this potential success is at risk if we do not take decisive actions to ensure the HIV response is sustainable. A series of concrete actions are available that will have rapid impact and accelerate our progress towards long-term sustainability.

Given the magnitude of its contributions to the global HIV response, PEPFAR plays a major role in determining the future path of the HIV epidemic and bears great responsibility for ensuring that the HIV response is sustainable. Indeed, all PEPFAR investments move us closer to sustainability; only an epidemic that is shrinking and not expanding is financially sustainable. Ultimately the achievements of PEPFAR will be measured by their contribution to sustained control of the HIV epidemic. However, PEPFAR is not in this alone and all HIV development partners must do their part. As a key element of its partnerships with country programs, PEPFAR needs every country to commit to making the systems investments required for sustainability through increased resources and mutual accountability for results.

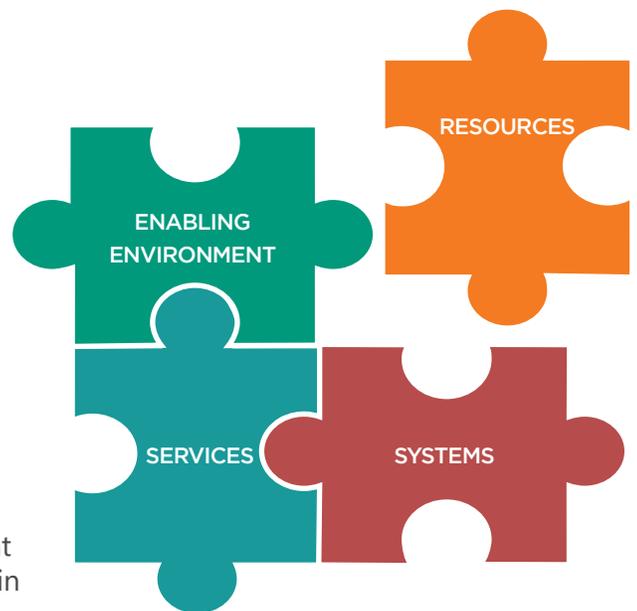
In 2015, PEPFAR took dramatic new steps to hardwire sustainability into its business processes, developing strategic approaches to move the sustainability agenda forward, and measure progress. This paper sets forth PEPFAR's tactics to sustainably build national HIV responses and practices that monitor progress toward sustainable epidemic control and achievement of the global 90-90-90 goal.

## What does PEPFAR mean by sustainability of the HIV response?

For PEPFAR, sustainability of the HIV response means that a country has the enabling environment, services, systems, and resources required to effectively and efficiently control the HIV and AIDS epidemic.

- The enabling environment reflects the political will to address the epidemic, ensure key policies are adopted and implemented quickly, and establish the legal framework within which all systems, services and financing function;
- HIV services meet the HIV prevention and treatment needs of everyone in the populace;
- Systems ensure quality, efficiency and effectiveness of HIV services; and
- Resources provide the financial, human and organizational capital required to keep systems and services operating.

Each element of sustainability is essential and each is complex. Elements are interrelated and mutually reinforcing, meaning that success in one element cannot be achieved without movement in the others. PEPFAR approaches each element guided by experience, evidence-based practices and a commitment to using PEPFAR resources effectively and efficiently for maximum impact. The sustainability elements and actions highlighted below are those PEPFAR believes are essential to achieving sustainability. Country context and the existing health infrastructure will dictate the pace and priority of investments in these actions; it will take more time to achieve some outcomes than others. But, all should be planned for and initiated within a specified timeframe so that the pathway to success is clear.



<sup>1</sup> PEPFAR defines epidemic control in standard epidemiologic terminology; the point at which new HIV infections have decreased and fall below the total number of deaths among HIV-infected individuals.

## PEPFAR's Sustainability Agenda

### ENABLING ENVIRONMENT

Good governance and leadership are prerequisites for an effective and efficient HIV response. They are also the base for the political will to address the epidemic for all members of society, a critical foundation of a sustainable response to the epidemic. A country that is able to sustainably control its epidemic has appropriate laws, regulations and policies; well-informed, data-driven, costed strategic plans based on a functional health and wellness agenda for all ages; and engages in meaningful coordination with other actors in the HIV arena.

**Laws, regulations and policies to promote effective and efficient HIV programming:** Rapid national development, adoption and implementation of key World Health Organization (WHO) HIV policies and globally accepted evidence-based clinical best practices are the most immediate and effective sustainability actions promoted by PEPFAR. Implementation of good policies saves lives and saves money. Priority policies currently promoted by PEPFAR for immediate adoption by national governments include:

- Test and START to initiate people on HIV treatment as soon as they test positive, in accordance with the 2015 WHO guidelines;
- Extended multi-month and same day scripting that allows stable clients on treatment to access six months of HIV drugs between checkups as part of a wellness agenda;
- Task shifting to allow lower level cadres of health workers to assume defined responsibilities;
- Differentiated care models that deliver different care packages for people based on their needs;
- Greater use of paid and certified community health workers for HIV treatment, including dispensing anti-retroviral medications (ARVs);
- Updating national health information systems to be able to monitor populations accessing services;
- Routine public release of HIV data;
- Inclusion of pre-exposure prophylaxis (PrEP) for eligible individuals in national guidelines;
- Saturating voluntary medical male circumcision coverage for males 15-29 years of age in high burden countries;
- Addressing health disparities and adapting non-discrimination healthcare policies that specify public health protections for specific populations in which the epidemic remains uncontrolled;
- Support for public health harm reduction services and opioid substitution therapy (MAT) for people who inject drugs,
- Engaging community-led civil society organizations as partners in the delivery of health services to reach underserved and marginalized communities;
- Promotion of efficient ARV procurement practices and lowest prices; and
- Promotion of responsible transition away from donor funding to systems that support funding and engagement of civil society organizations (CSOs).

### Illustrative Sustainability Outcomes for Enabling Environment

- **Immediate:** Policy/legal reform and implementation; strategic planning and prioritization of investments
- **Mid-term:** Increased role of civil society in policy monitoring and holding government accountable; data backed results for investments; continued strategic realignments
- **Long-term:** Civil society with capacity to hold government accountable and drive policy reform; engaged country government with political will

PEPFAR country programs are advocating with national governments for immediate policy change and assisting with implementation and oversight of the new policies over the medium and longer-term.

**Strategic planning for prioritized investments and impact:** Sustained control of the HIV epidemic requires multi-year, evidence-based national strategies that are prioritized by population, geographic area and interventions; costed; and financed—and reflect the participation and buy-in of stakeholders.

PEPFAR is modeling effective strategic and transparent planning through its annual Country Operational Plan (COP) process and working with partner governments and civil society to institutionalize multi-year strategic planning processes that:

- Are evidence-based for impact;
- Are data-driven – identifying populations and geographic areas that have the highest disease burden and need for services;
- Coordinate all HIV/AIDS implemented activities in the country, including those funded or implemented by civil society, private sector, and donor implementing partners;
- Prioritize investments in specific geographic locations and/or population groups and/or age groups where the impact on epidemic control will be the greatest;
- Analyze expenditure data to identify and increase efficiencies;
- Analyze performance data to identify effective programming approaches and improve poor performers;
- Ensure broad participation from government, civil society, communities, private sector, and other stakeholders;
- Hold sub-national units accountable to national goals and targets; and
- Ensure transparency in providing program targets, data and decision-making processes to all stakeholders.

### A Blueprint for PEPFAR to Assist Cambodia in Achieving and Sustaining Epidemic Control through 2025

Cambodia's successful national response to the HIV epidemic and its ability to achieve its national HIV goal of "virtual elimination" by 2025 was threatened by decreasing external funding. In response to the urgent need for action, in 2015-16, the PEPFAR team in Cambodia collaborated with stakeholders to assess how financial and programmatic contributions should evolve to support sustainability. An expert USG interagency and multidisciplinary team interviewed Royal Government of Cambodia officials from multiple ministries, civil society organizations, representatives of key populations, UN and bi-lateral donors, and PEPFAR-funded implementing partners to examine needed programmatic and financial transitions, health sector influences on the national HIV response and strengths and vulnerabilities in the national response, and identified six core areas where PEPFAR could optimize its resources: strategic information, HIV response optimization, supply chain and procurement, human resources for health, health financing, and policy. The blueprint prioritizes recommendations in each area and suggests metrics for tracking progress in achieving and sustaining epidemic control.

**Civil society and community leadership for accountability and problem solving:** Sustained, effective epidemic control requires that communities and civil society, including individuals, community-based organizations, faith-based organizations, traditional healers and leaders, municipal authorities, human rights champions, and others, be included in all aspects of HIV planning and implementation, hold PEPFAR and the government accountable, and identify challenges and solutions to the HIV epidemic. Meaningful engagement must be ongoing and based on the belief that all people are entitled to health, well-being and legal protection to ensure the health of communities.

For a sustainable HIV response, PEPFAR is engaging with communities and civil society and building their leadership in:

### The Power of Community Engagement

Working alongside public health and other systems, community responses are critical to the success and sustainability of the global response to HIV.\* Only by bringing members of communities and their leaders into planning and monitoring processes can we ensure that solutions to the HIV epidemic are culturally appropriate and viable over the long term. When communities participate in planning they are invested in the solution; when they participate in results monitoring they can hold governments more accountable; when they engage in data collection they become more aware of the scope and nuances of the problem. Communities bring new ideas, new energy, and urgency to resolving a problem affecting them, their families, and their neighbors.

\*UNAIDS, "Communities Deliver"

- Meaningful engagement at the local and national levels in policy making, planning and monitoring;
- Advocating with and on behalf of key populations that often remain at the fringes of the global HIV response;
- Combating stigma, discrimination and violence against those affected by HIV; and
- Participating in data collection and understanding data use for decision-making and accountability.

## SERVICES

Delivering effective, high quality health services at the lowest possible cost is the heart of a sustainable HIV response. By supporting effective and efficient health services, countries will not only be able to control the HIV pandemic but tackle disease prevention and chronic diseases. A "one size fits all" model at health centers and general non-differentiated population approaches are not effective. Diseases are often geographically focused and equal rather than equitable investments result in some dramatically underserved communities and others with expiring surpluses. This means ensuring that the right mix of HIV services is available where needed for both the general population and vulnerable, "hard to reach" population groups, at a cost that is affordable.

We are now entering what may well be the most difficult phase of controlling the global HIV epidemic: building on the gains already achieved to prevent new infections, retain patients on treatment to achieve viral suppression, and also bringing treatment to those who have thus far been left behind, and those who are at high risk of infection or transmitting the virus and unaware of their HIV status and do not understand their risk of infection. The HIV epidemic in 15-30 year olds is continuing and will require new approaches to be effectively controlled. This age group does not have routine interaction with any part of the health system and does not understand their HIV risk, know their HIV status or have access to treatment with test and treat policies.

### Illustrative Sustainability Outcomes for Services

- **Immediate:** Differentiated service delivery models; extended and same day scripting; population, age and geographic prioritization
- **Mid-term:** Hard-to-reach populations (including youth) are being served
- **Long-term:** Stigma and discrimination have been decreased or eliminated; service delivery systems are reaching all population groups

**Comprehensive, wellness-based health care services that address a broad range of health needs:**

HIV positive patients on long-term treatment have a broad range of health needs that are different from those of a patient requiring acute care. Sustainable epidemic control requires that those on life-long treatment be systematically monitored and assisted in immediately resolving any problems they encounter to adhering to their treatment regimen and remaining virally suppressed.

To address the evolving health care needs of patients on anti-retroviral treatment, PEPFAR is helping countries build HIV wellness models that:

- Integrate health promotion and wellness for stable patients (a chronic care management approach);
- Include differentiated service delivery models that optimize the delivery of HIV prevention, care and treatment services for both patients and health care providers;
- Adopt same day and extended scripting for stable patients; and
- Apply modern quality improvement methodologies to managing and providing HIV/AIDS services.

**Differentiated Service Delivery Models**

PEPFAR is demonstrating that stable clients can successfully continue treatment with six month appointments and drug supplies. This change could potentially allow current treatment sites to add 40-50% more clients with the same facility, personnel, and cost.

**Health care services tailored to demographic and health care needs:** Many factors, including age, gender, risk group, and cost, influence whether or not health care services meet the needs of a particular population. A sustainable HIV response assesses population and epidemiological data and delivers those services that meet the specific health needs of a community.

To ensure the right services are available to the right people at the right time, PEPFAR is:

- Prioritizing those population groups, age groups, and geographic areas with the greatest HIV incidence and greatest unmet need;
- Promoting people-centered care that is focused and organized around the health needs and expectations of people and communities and is sensitive to national, sub-national and local diversity;
- Promoting task shifting from healthcare facilities to community-based service providers, allowing community health workers to provide services such as HIV testing, ARV distribution, adherence clubs; and
- Working with communities and civil society to identify challenges and gaps in HIV service delivery for their community and develop solutions.

**HIV services that make provisions for stigma and discrimination:** HIV is still a disease with stigma, hindering many vulnerable populations, including adolescents and young women, from accessing services. In addition, a significant number of new HIV infections today are occurring among people and groups that are marginalized, not respected, and often fearful of accessing life-saving services and care. These populations, often referred to as key populations, include men who have sex with men, people who inject drugs, prisoners and others in detention, sex workers and transgender individuals. Epidemic control requires reaching these groups with appropriate, non-discriminatory services and addressing the root causes of why they are left behind.

To reach those most challenged by stigma and discrimination with critical HIV services, PEPFAR is:

- Prioritizing investments in service delivery for vulnerable and hard-to-reach populations;
- Addressing laws, policies and cultural norms that stigmatize and discriminate against vulnerable and key populations;
- Promoting dignity and human rights; and
- Working with vulnerable groups and key populations to identify challenges to service delivery and overcome barriers.

## SYSTEMS

Quality health systems are essential for delivering health care services that meet the health needs of a population. A sustainable HIV response includes systems that ensure the quality, efficiency and effectiveness of services and provide transparent data to drive decision making.

**Health care systems to deliver cost effective, high quality and safe services:** The HIV environment is dynamic. As the epidemic and technology change, health delivery systems must also adapt to continue to deliver a cost effective, high quality and safe continuum of health promotion, disease prevention, diagnosis, treatment, and disease management services through the different levels and sites of care.

To build sustainable health care systems, PEPFAR is:

- Encouraging public and private health services, including public support for community-led health providers, and ensuring policies are in place to support such systems;
- Supporting 'state of the art' monitoring systems that integrate all aspects of health services in an efficient, cost effective and inclusive manner, including an emergency management response, linked to surveillance;
- Integrating supply chain systems and developing a national supply chain plan that guides investments in the supply chain; and
- Ensuring laboratory capacity (including workforce, equipment, supplies, and quality) match the services required for people living with AIDS.

### Illustrative Sustainability Outcomes for Systems

- **Immediate:** Transparent data systems
- **Mid-term:** Integration of health promotion and wellness HIV services; integrated supply chains; adequate laboratory capacity; participation of civil society in data collection
- **Long-term:** People-centered care

### Flexible data systems that provide granular and transparent information to inform decisions:

Transparent, accurate, timely health, epidemiologic, performance, and financial/expenditure data are essential for making informed and impactful investments that drive long-term improvements in health care services and systems and lower costs. In addition, they allow for the type of active surveillance that allows a country to respond quickly to outbreaks and contain them before they get out of hand. Access to data builds ownership, enhances problem solving, promotes accountability and allows for real-time decision-making that get a country to epidemic control.

PEPFAR embraces the U.S. Government's commitment to the International Aid Transparency Initiative and Aid Effectiveness and is:

- Supporting governments to improve national health information systems which provide real-time data to monitor the HIV response by population and geography;
- Implementing epidemiologic surveys and routine surveillance activities that measure not only where the epidemic is but identify populations where HIV may be expanding;
- Promoting analysis and visualization of data so that stakeholders can understand it and appropriately act on the data;
- Making PEPFAR data at granular levels readily available to all interested parties through the Panorama Spotlight tool ([www.pepfar.gov](http://www.pepfar.gov));
- Publicly displaying the results of its Sustainability Index and Dashboard monitoring tool for each PEPFAR partner country (<http://www.pepfar.gov/countries/cop/c71524.htm>); and
- Working with partner governments and civil society to enhance the transparency of surveillance and survey data, expenditure data, performance and service delivery data, and procurement processes.

## ORGANIZATIONAL, FINANCIAL, AND HUMAN RESOURCES

Significant progress has been made in improving quality and access to HIV services, but sustainability requires that more be done to improve efficiencies and find the least expensive ways to deliver quality services in a manner that aligns with the demand for services and reaching epidemic control.

### Adequate financial resources to meet needs:

A stable financial resource base, mobilized both domestically and externally, is essential for sustainability and critical for long-term planning and decision-making. Because funding will always be limited, the impact of each dollar must be stretched by ensuring that investments are strategic, effective and cost efficient.

### Illustrative Sustainability Outcomes for Resources

- **Immediate:** Right policies enacted, Ministry of Finance is partner in efficiency agenda; effective use of community health workers
- **Mid-term:** Increased domestic funding for health and HIV; HIV included as line item in national budget; task shifting implemented
- **Long-term:** Universal health care/ health financing; a sustainable workforce, with appropriate task shifting and active involvement of community health worker cadres; a professional, motivated and retained public sector workforce.

For PEPFAR, financial sustainability is located at the intersection of epidemiology and economics. It is the ability to afford epidemic control and to secure a stable funding source for HIV treatment, prevention and surveillance and the health system that supports the program after control is achieved. To ensure that the financing is available, PEPFAR is:

- Focusing on the efficient use of existing resources to ensure that maximum performance is achieved with limited funding;
- Standardizing and sharing budget and expenditure data with the Global Fund, partner governments, civil society, and other donors to develop a complete picture of HIV financing;
- Engaging Ministries of Finance to ensure comprehensive HIV programs are developed and funded in national budgets with increasing shares domestically funded over time;
- Working with partner governments and civil society to develop key systems, including secure procurement supply chains and financial management systems, to maintain services and epidemic control;
- Encouraging the expansion of private health sector and insurance regimes;
- Leveraging resources through public private partnerships to expand services and foster innovation;
- Securing policies and financing mechanisms that allow partner governments and other development partners to directly support civil society for community-based health service delivery;
- Supporting the drive for universal health coverage and self-financing schemes to support universal coverage;
- Exploring innovations that provide incentives for co-financing, such as impact-based agreements; and
- Capacitating local organizations to be full partners in reaching sustained epidemic control.

**Human resources to improve health care delivery:** The planning, development, management, performance, and retention of the health workforce has long been recognized as key to being able to deliver the volume and quality of HIV/AIDS services needed for sustained epidemic control. To date, much of the emphasis has been on in-service and pre-service training. While these are critical and must continue, sustainability also demands innovations that reduce costs and bring services closer to communities.

For PEPFAR, innovative approaches to sustainable human resource development include:

- Supporting transformative models of medical education that improve the quality of clinical education and care and expand the quantity, quality and relevance of the nursing and midwifery professions;
- Creating a cadre of professionals with the ability to detect and respond to public health threats;
- Task shifting from healthcare/tertiary systems to community-based services for more efficient use of available human resources;
- Devising retention strategies that reduce employee turnover;
- Using community health workers for service delivery, including community-based testing, adherence monitoring, and linking clients to health facilities;
- Expanding the role of communities and civil society in health care delivery; and
- Collecting health workforce data and using it for effective workforce planning and management.

**Organizational capacity to run programs:** A sustainable national HIV response requires that government, local research and development institutions, nongovernmental organizations, networks, communities, academia and the private sector all have the ability to finance, plan, manage, implement and monitor programs, both in the immediate and longer term.

PEPFAR's sustainability agenda includes emphasizing:

- Organizational capacity strengthening in relationships with government; and
- Strengthening the capacity of civil society to play a service delivery and advocacy role in the HIV epidemic.

## Hardwiring Sustainability into PEPFAR's Business Practices

Unless organizations and institutions deliberately incorporate concrete steps to support sustainability outcomes into their business processes, actual change does not occur. PEPFAR is actively developing and using tools and other resources to measure and monitor progress at the national level for sustainable epidemic control.



**Assessing and monitoring progress toward sustainability:** PEPFAR developed the Sustainability Index and Dashboard (SID) to monitor four domains of sustainability: government, leadership and accountability; national health system and service delivery; strategic investments, efficiency and sustainable financing; and strategic information. The 2016 SID results, available at <http://www.pepfar.gov/countries/cop/c71524.htm>, will serve as each country's baseline. The process of completing the SID provided a critical opportunity for a transparent, dedicated dialogue on sustainability with national stakeholders to heighten awareness of sustainable epidemic control and the investments required to get there.

**Defining an investment portfolio with clear outcomes:** In 2016, PEPFAR country programs used the SID and other information to systematically identify key programmatic and policy gaps preventing the achievement of epidemic control, the systems barriers to address each gap, the investments to be directed toward overcoming the barriers, and the expected three year outcomes of the planned systems investments in these areas.

**Monitor system outcomes:** In 2017 and 2018, PEPFAR country programs will undertake reviews of their systems investments for outcome achievement and relative cost, evaluating progress against annual benchmarks and realigning systems activities, as needed.

## Summary

Building on the current progress, additional and continuous steps must be taken to ensure the sustainability of the HIV response; the tremendous gains of the past three decades are in danger of being lost as the window of opportunity to control the epidemic snaps closed. PEPFAR has responded to this imperative by hardwiring sustainability into its business practices and expecting partner countries to commit to sustainability investments and meaningfully engage communities and civil society in their HIV response. In partnership with national HIV responses and others, PEPFAR programs are urgently taking immediate, near-term and longer-term critical actions to ensure that the right enabling environment, systems, services, and resources are in place to sustainably control the HIV epidemic. Progress is being continuously tracked and measured. With a clear focus on building sustainability into national HIV responses, the HIV epidemic can be controlled. We will achieve an AIDS-free generation and ensure effective systems are available for control of all future pandemics and chronic diseases.