The Global Fund's approach to strengthening the role of communities in responding to HIV and improving health

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"HIV Self Testing – Going to Scale" STAR workshop
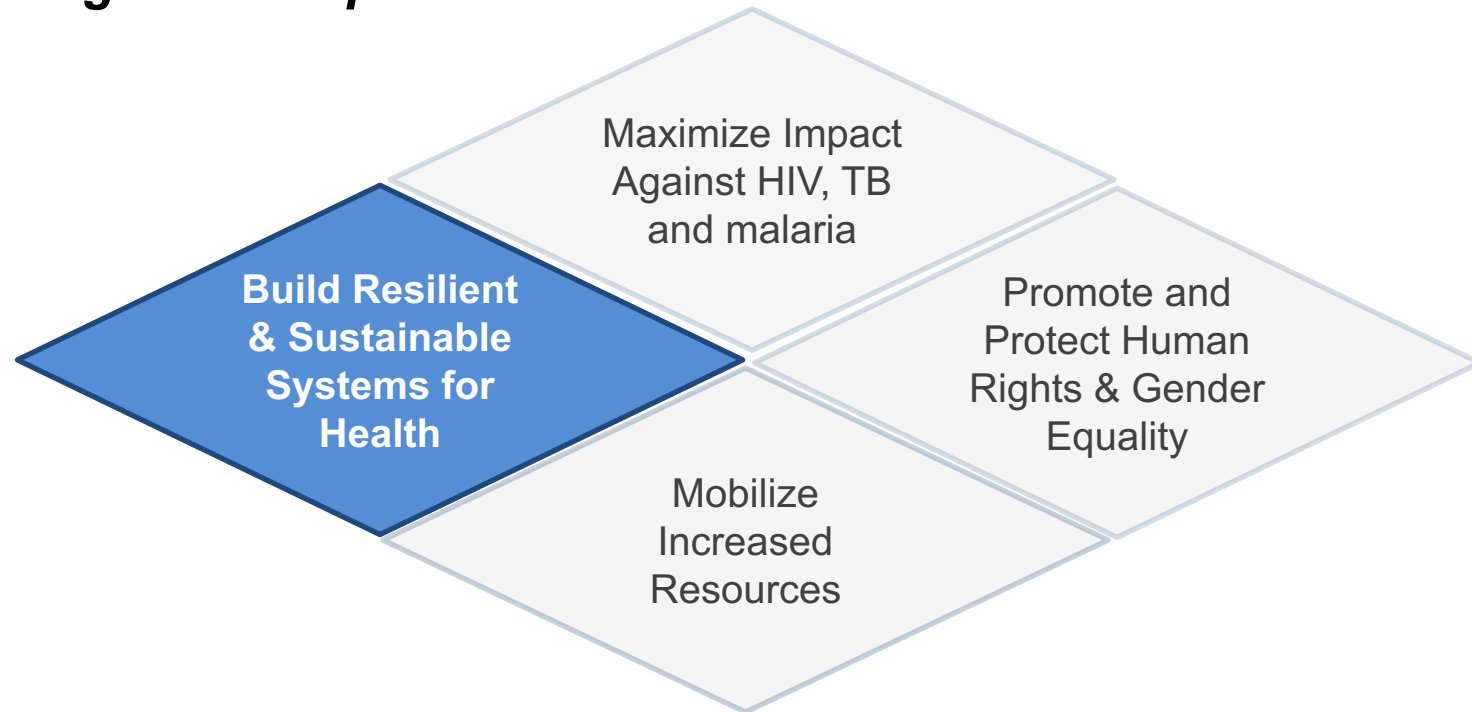*March 30th, 2017*

The Global Fund

Post-2015: a new global health agenda

Global Fund's Strategic Framework 2017-2022 emerged in response to a new global agenda for health influenced by several factors:

- Transition from MDGs to SDGs with a shift to a more diverse global development agenda
- Ebola crisis as a reminder that local health threats and weak health systems are global threats
  - Revealed unique problems of operating in COEs and the need for a more refined differentiated approach
- Renewed global commitment toward universal health coverage (UHC)
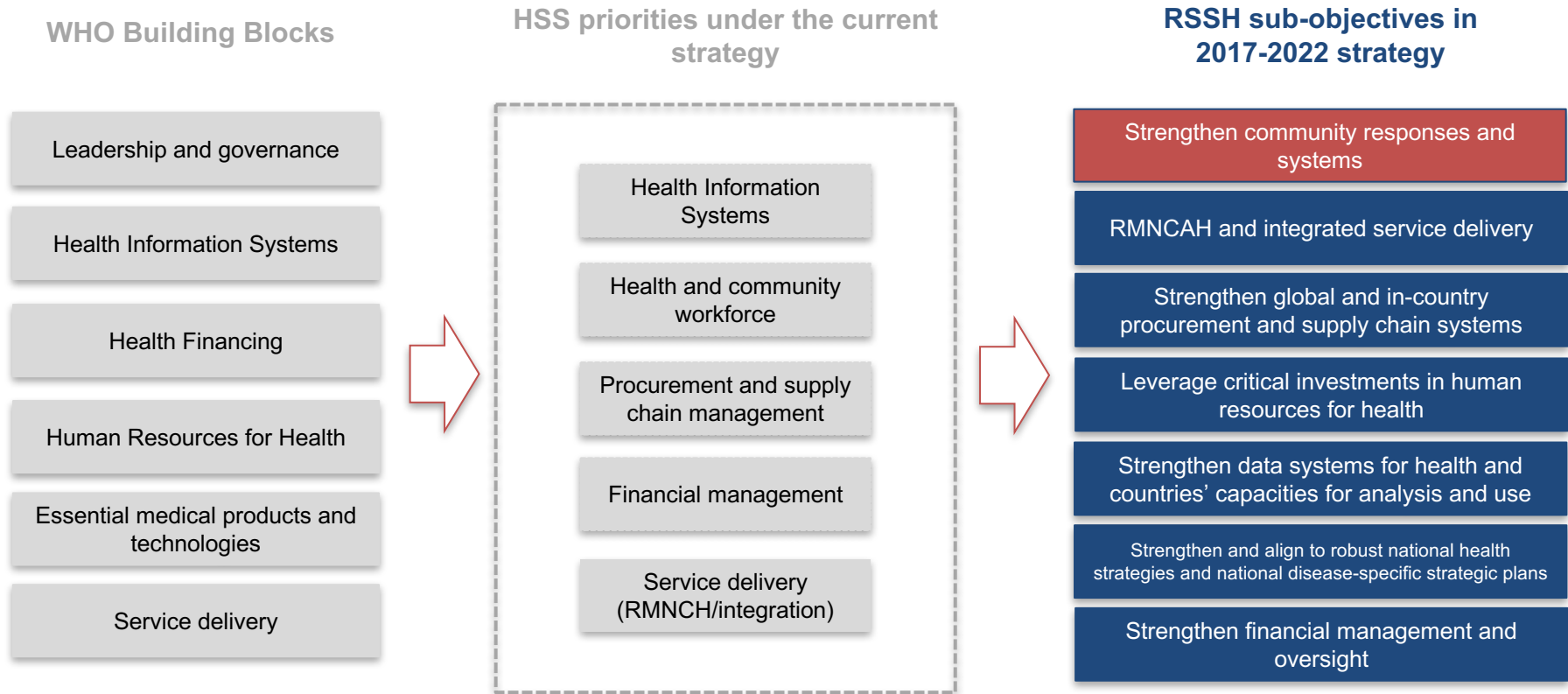
Global Fund's Strategic Framework 2017-2022
Investing to End Epidemics

Maximize Impact Against HIV, TB and malaria

Build Resilient & Sustainable Systems for Health

Promote and Protect Human Rights & Gender Equality

Mobilize Increased Resources

Strengthening systems for health is critical to attain universal health coverage and to accelerate the end of the epidemics

1. **Strengthen community responses and systems**
2. Support reproductive, women's, children's, and adolescent health, and platforms for integrated service delivery
3. Strengthen global and in-country procurement and supply chain systems
4. Leverage critical investments in human resources for health
5. Strengthen data systems for health and countries' capacities for analysis and use
6. Strengthen and align to robust national health strategies and national disease-specific strategic plans
7. Strengthen financial management and oversight

Global Fund's investments in health systems: shifting the mindset

WHO Building Blocks

- Leadership and governance
- Health Information Systems
- Health Financing
- Human Resources for Health
- Essential medical products and technologies
- Service delivery

HSS priorities under the current strategy

- Health Information Systems
- Health and community workforce
- Procurement and supply chain management
- Financial management
- Service delivery (RMNCH/integration)

RSSH sub-objectives in 2017-2022 strategy

- Strengthen community responses and systems
- RMNCAH and integrated service delivery
- Strengthen global and in-country procurement and supply chain systems
- Leverage critical investments in human resources for health
- Strengthen data systems for health and countries' capacities for analysis and use
- Strengthen and align to robust national health strategies and national disease-specific strategic plans
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What do we mean by communities?

- The people or groups of people:
  - Whose health we want to improve
  - Who are particularly affected by a given health problem
  - Who have particular characteristics (geography, behavior, culture, gender, age…) or vulnerabilities in common
  - Who are theoretically part of any number of "communities"
  - Who may or may not identify with those "communities"

- Important to qualify what we mean – we may think we're talking about the same thing when we are not.

Understanding community responses and systems as critical to RSSH

- Better health is the product of:
  - Health services and interventions
  - Positive community norms and actions both in the general population and within specific community groups
  - Community ownership and accountability to communities

- Why "*responses and systems*"?
  - Communities respond spontaneously to problems
  - These responses are rarely "systematic" in the usual health systems sense (and this may be for the best)
  - However, bringing some community actions into a systems framework can lead to broad reach and large-scale impact

Community responses and systems: diverse and complex!

Community systems formalised under health systems
- CHW/iCCM
- Formalised local governance

Community systems partially captured under health systems
- Community health education
- Health commodity distribution
- Adherence support, home care

Community systems outside of the formal health sector
- Social determinants (human rights progs, gender norms)
- "Under radar" services
- Community led social accountability

Different community systems strengthening approaches required for each of these

Linking community responses and integrated service delivery

- Global Fund strategy emphasizes integrated service delivery

- Four areas prioritized for investment:
  - ✓ Ante-natal care
  - ✓ Integrated community case management
  - ✓ Integrated sexual and reproductive health-HIV services
  - ✓ Adolescent health

- Countries must evaluate what packages of services and models of delivery are appropriate and feasible, including community interventions that are not yet systematically supported by the health system

Strategy Implementation 2017-2022: high level actions for community responses and systems

- Producing revised application guidance for integration of community responses and strengthening systems

- Identifying mechanisms and disseminating guidelines/tools for effective and efficient sub-granting by PRs to community level, including differentiation factors

- Developing and increasing uptake of community led monitoring / feedback mechanisms – piloting and operations research, dissemination of guidance, potential reprogramming of unspent funds

- Advocacy and technical assistance for more systematic inclusion in Global Fund grants

Where does HIV self testing fit in (1)?
To begin with, take it out of the health facility

- We often see very low yield of HIV testing, when it is carried out in health facilities

- In one example, 1% of tests were positive in facilities in a city with estimated 2% HIV prevalence; but in community ART distribution points VCT yielded as many as 25% positive test results

- Crucial to support and engage with innovative ways to help people know their status and access treatment if they need it

- Global Fund and UNITAID have established an expert review panel to evaluate new diagnostic products

Where does HIV self testing fit in (2)?

- A good example of the need for "adaptive" systems for health

- What about integrated service delivery and our "three blobs"?

  - Delivery of HIVST <u>and</u> provision of / information on other services (esp. HIV/SRH and AH) through "formal"/ "institutionalised" community systems

  - Delivery of HIVST <u>and</u> education/information on other services <u>and</u> referral, support, counselling etc. at individual and community level through "less formal" community systems

  - "Under radar" HIVST delivery, monitoring of uptake in communities including of potential abuses/misuses, advocacy and monitoring of availability of linked services

Summary

1. Although RSSH are dependent on a broad eco-system, community systems are often neglected.

2. Formal health sector and community systems are co-dependent elements but not always coordinated or cooperative. Sometimes an important and necessary tension.

3. Supporting community responses eases burden on the health sector and make programs effective and equitable.

4. Better tools and know-how for systematizing community responses at scale and increasing uptake are needed.

5. New interventions like HIVST are "user-led", so community engagement has never been more important.