2017 Country/Regional Operational Plan Approval Meeting

Dominican Republic

OUTBRIEF
March 16, 2017
Outline

BACKGROUND AND CONTEXT
• Epidemiologic data and programmatic results to date
• Investment profile
• Stakeholder Engagement in COP/ROP process
• Policy Status and Gap Analysis
• PEPFAR-Supported Results

PEPFAR COP/ROP 2017
• Goal Statement
• Overview of Strategic Outcomes
• Overview of budget and targets

DOMINICAN REPUBLIC STAKEHOLDERS
• Updates from Government of Dominican Republic
• Feedback from stakeholders
BACKGROUND AND CONTEXT
Trends in Prevalence and Incidence

**Population**

<table>
<thead>
<tr>
<th>Population</th>
<th>Estimated Prev</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSW</td>
<td>1.7% - 6.3%</td>
</tr>
<tr>
<td>MSM</td>
<td>3.9% - 6.9%</td>
</tr>
<tr>
<td>Migrants</td>
<td>4.9% - 6.6%</td>
</tr>
</tbody>
</table>

Source: Spectrum 2016, IBBS 2012
KP/PP PLHIV Burden by Province

FY14-18 Provincial Rationalization

FY14 - 27 provinces
FY15 - 16 provinces
FY16 - 6 provinces
FY17/18 - 4 provinces

Dominican Republic National Clinical Cascade

Sustainability - Investment Profile

HIV Expenditures by Funding Source, PORTIA/UNAIDS 2014 (unpublished)

- Household: 33%
- PEPFAR: 27%
- GoDR: 21%
- UN Family: 1%
- Global Fund/CONAVIHSIDA: 12%
- Global Fund/IDCP: 6%

MEGAS 2012: 50.0% international cooperating agencies; 25.9% households; 24.1% government
Sustainability – HIV Commodity Procurement

Source: SIAPS Project, 2017
Advancing PEPFAR-Global Fund Collaboration

Key Areas

1. Commit to project coordination and planning
2. Share and align data reporting
3. Map geographic activities
4. Provide GF sub-recipients with HTS and linkage technical assistance
5. Document and share KP best practices

MOU for Collaboration (Jan 2017)
Stakeholder Engagement Core Themes

Policy
- Current Policy Guidelines / Test and START
- Domestic resource mobilization
- PrEP
- Facilitate enhanced civil society engagement

Services
- Need for new testing modalities
- Differentiated models of care
- HRH and addressing stigma & discrimination

Systems
- Supply chain
- Comprehensive information system, including KP/PP tracking
PEPFAR/DR FY 2017 Q1 Results
FY17 HTC_POS Targets, Q1 Results and Yield

NGO Facilities

- CLINICA DE FAMILIA: 7%
- CEPROSH: 12%
- IDEV: 22%
- COIN: 32%

Public Facilities

- HOSP FRANCISCO GONZALVO: 4%
- HOSP RICARDO LIMARDO: 4%
- LOTES Y SERVICIOS: 6%
- CENTRO SANITARIO: 6%
- JUAN XXIII: 6%
HTC_POS, TX_NEW FY17 Targets and Q1 Results

NGO Facilities

Public Facilities

CLINICA DE FAMILIA  CEPROSH  IDEV  COIN  HOSP FRANCISCO GONZALVO  HOSP RICARDO LIMARDO  LOTES Y SERVICIOS  CENTRO SANITARIO  JUAN XXIII

HTC_POS Q1 Result
TX_NEW Q1 Result
HTC_POS FY17 Target
TX_NEW FY17 Target
Centro Sanitario: Q1 HIV Clinical Cascade

COIN: Q1 HIV Clinical Cascade

NGO

Public

Linkage ~70%
DR COP 2017 Strategy

**Goal:** Strengthen GODR’s efforts to achieve epidemic control

**SO1:** Implement KP/PP service delivery models (NGO twinning and mobile clinics)
- Document efficient service delivery models for KP/PPs
- Improve HTS yield through different testing modalities
- Improve linkage to treatment
- Implement differentiated models of service delivery

**SO2:** Provide TA to GODR to:
1. Strengthen laboratory capacity to increase access to VL testing to 90%;
2. Support commodities forecasting and supply chain management;
3. Build capacity and support training in human resources for health

- Accelerate implementation of universal Test and Start
  - Reduction in stigma & discrimination and GBV
  - Build workforce capacity to provide quality services to KP/PPs
  - Establish comprehensive HIV information system to track KP/PP cascades
  - Supply chain strengthening
  - Cost service delivery models

- Ensure commodity availability and sustained 100% domestic financing of HIV commodities
- Scale-up of viral load testing
Structured Plan for Twinning Model

Mentorship Package
- Clinical training
- KP/PP specific packages
- Sensitization and KP competency training
- QI plans
- Coordinating CSO relationships
- Structural interventions to make facility more KP-friendly

Key Clinical Services
- Test & START
- Different models of care
- TB/STI screening
- Condom distribution
- Population-specific services
- Stigma-free services
- QI
- GBV screening, treatment, and referral
- KP/PP peer navigators
- Special/extended hours

CBOs/Promoters

Community Prevention and CBHTS

Accompanied Referrals
Social Network Strategy

Targeted HTS

Peer support group
Tracking lost-to-follow-up
Accompanied referrals to psycho-social services
FY 2018 Clinical Cascade Targets by Source

Linkage: Facility 90% Facility; Community 80%; GF 50%; Index 100%

Retention
82-90% 80% of eligible tested; 85% suppressed

80% of eligible tested; 85% suppressed
FY 2018 HTC Volume, Yield and Unit Budget per Positive by Modality

<table>
<thead>
<tr>
<th>Modality</th>
<th>Volume</th>
<th>Yield</th>
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</thead>
<tbody>
<tr>
<td>HTS Facility - NGO</td>
<td>$58 UB</td>
<td>4.8%</td>
</tr>
<tr>
<td>HTS Facility - Mobile Clinics</td>
<td>$40 UB</td>
<td>7.0%</td>
</tr>
<tr>
<td>HTS Facility - Public Sector</td>
<td>$79 UB</td>
<td>3.6%</td>
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<tr>
<td>HTS Facility - Index Partner Notification</td>
<td>$71 UB</td>
<td>15.0%</td>
</tr>
<tr>
<td>KP-focused HTS</td>
<td>$780 UB</td>
<td>3.0%</td>
</tr>
<tr>
<td>KP HTS Index Social Network Strategy</td>
<td>$491 UB</td>
<td>7.0%</td>
</tr>
<tr>
<td>Migrant-focused HTS - Mobile Units</td>
<td>$780 UB</td>
<td>7.0%</td>
</tr>
<tr>
<td>Migrant HTS Index Social Network Strategy</td>
<td>$491 UB</td>
<td>7.0%</td>
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COP16-17 Target Comparison

<table>
<thead>
<tr>
<th>COP</th>
<th>HTC Facility</th>
<th>HTC_POS Facility</th>
<th>HTC Comm</th>
<th>HTC_POS Comm</th>
<th>HTC Index</th>
<th>HTC_POS Index</th>
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</thead>
<tbody>
<tr>
<td>COP16 Targets</td>
<td>38,013</td>
<td>1,907</td>
<td>48,959</td>
<td>2,448</td>
<td>2,652</td>
<td>252</td>
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<tr>
<td>COP17 Targets</td>
<td>42,896</td>
<td>2,181</td>
<td>51,660</td>
<td>1,550</td>
<td>1,828</td>
<td>275</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COP</th>
<th>TX NEW</th>
<th>Net New</th>
<th>TX CURR</th>
<th>TX RET</th>
<th>TX PVLS</th>
</tr>
</thead>
<tbody>
<tr>
<td>COP16 Targets</td>
<td>6,087</td>
<td>3,639</td>
<td>14,861</td>
<td>7,458</td>
<td>9,418</td>
</tr>
<tr>
<td>COP17 Targets</td>
<td>3,321</td>
<td>1,398</td>
<td>15,463</td>
<td>15,275</td>
<td>12,209</td>
</tr>
</tbody>
</table>

COP16/FY17 - COP17/FY18 Facility Cascade Comparison

- HTS_TST Facility: FY 2017 46,303, FY 2018 42,896
- HTS_TST_POS: FY 2017 2,068, FY 2018 2,181
- TX_NEW: FY 2017 6,085, FY 2018 3,361
- TX_CURR: FY 2017 14,098, FY 2018 15,496
- TX_PVLS: FY 2017 9,852, FY 2018 12,252

FY 2017: Blue; FY 2018: Red
National cascades: projections with PEPFAR support for Test and START

National Cascade 2016 - 2018

- PLHIV
- Diagnosed
- ART
- VL supp
Expenditure and Budget Trend, FY14-19

FY14-16 Expenditures and FY17-19 Budgets by Program Area

- Prevention
- PMTCT
- Counseling & Testing
- Care & Treatment
- Lab Service Delivery
- Strategic Information
- Health Systems
Dominican Republic Stakeholders
Updates from the Dominican Republic

Country progress and political commitment towards accelerating achievement of 90-90-90

GoDR took over ARV procurement and increased domestic commodity funding by $3 million in 2017

Gratitude for PEPFAR’s collaboration and contribution to the initiation of Test & START at 11 sites (on October 1, 2016)

GoDR commitment to scaling Test & START

The results from PEPFAR’s models serve to inform the national HIV response and scale-up
¡Gracias!