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COP23 Vision and Strategy

COP23 Virtual Planning Meeting

PEPFAR Mozambique | April 3, 2023

Refresh on COP23 Co-Planning Meeting Priorities and Timeline

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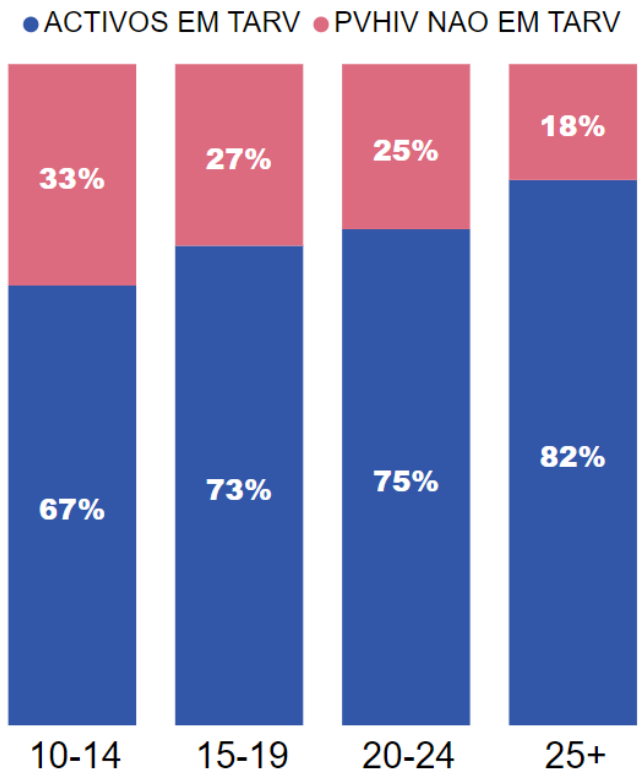
Joburg Recap: Consenso sobre as prioridades programáticas e lacunas a serem fechadas para o alcance das metas 95-95-95

Lacuna 1
Baixo alcance dos adolescents, jovens e PC

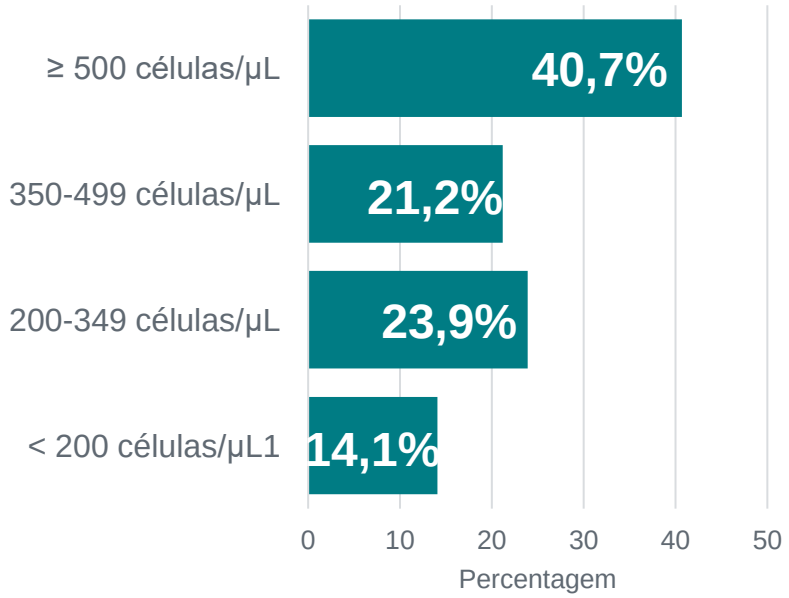


Lacuna 2
Fragilidade do sistema de saúde e comunitário

Unidade Sanitária destruida por um ciclone com uma tentativa de preservar as pastas clínicas

Lacuna 3
Comorbidades

Distribuição da contagem do CD4 entre adultos HIV pos que reportaram ser HIV neg e não tiveram ARV detectado no sangue (INSIDA)



Joburg Recap: Mudanças consensuais nas Prioridades Programáticas para o alcance das metas 95-95-95

Mudança #1 – Adolescentes, Jovens e PC

- Combater as barreiras de acesso aos serviços da PC e adolescentes
- Expansão de adolescentes e jovens mentores alinhados com “homens campeaões”
- Alinhamento dos programas existentes para adolescentes (DREAMS, Geração Biz, Viva +), contextualização e institucionalização, incluindo serviços direcionados aos rapazes

Mudança #2 – Fragilidade dos sistemas

- Apoiar o sub-sistema comunitário
- Sistemas eletrónicos individualizados para reporte de dados rotineiros
- Melhoria na monitoria dos programas PTV e TARV pediátrico através de melhor qualidade dos dados e melhores cálculos das estimativas (CLHIV)
- Utilizar os guiões e instrumentos do pais para os processos de planificação

Mudança #3 - Comorbidades

- Expansão da implementação dos serviços de DAH para +66 US (141 total) com foque na melhoria dos serviços
- Integração de saude mental no APSS com alinhamento dos calendários de visita

Retorno das pequenas subvenções para OBC para prevenção e tratamento (não CLM)

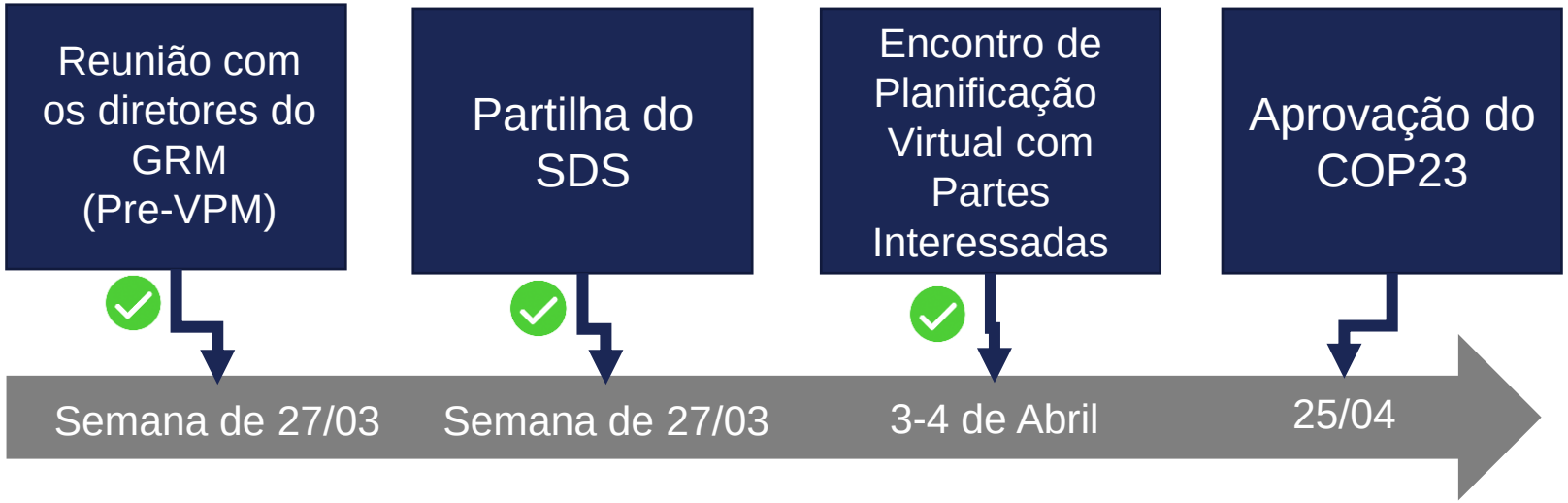
Proposta inovativa: Estabelecer um novo modelo, alavancando a experiência e o alcance das autoridades provinciais de Cabo Delgado, para fornecer serviços de qualidade em contextos de emergência

Joburg Recap: Plano de colaboração entre governo, sociedade civil e parceiros durante o período de co-planificação

Areas Chave por resolver durante o planificação no país

1. Engajamento multi-sectorial e de organizações juvenis e PC para desenvolver uma estratégia única – facilitado pelo CNCS
2. Seguimento do GF & PEPFAR sobre as necessidades de consumíveis
3. Seguir com o MISAU os resultados da reunião sobre sistemas de informação
4. Tomada de decisão sobre qual será o teste CD4 (plataforma e/ou teste rápido)
5. Encontrar a melhor abordagem para a literacia do tratamento
6. Encontrar a melhor forma de capacitar as OCBs institucionalmente

Linha do Tempo para Completar o COP



Plano de Engajamento da Sociedade Civil

- Encontros multisectoriais para jovens e PC
- Discutir ideais para o fundo adicional de equidade
- Partilha do SDS com a Sociedade Civil

COP23 Vision and Targets for Reaching 95-95-95

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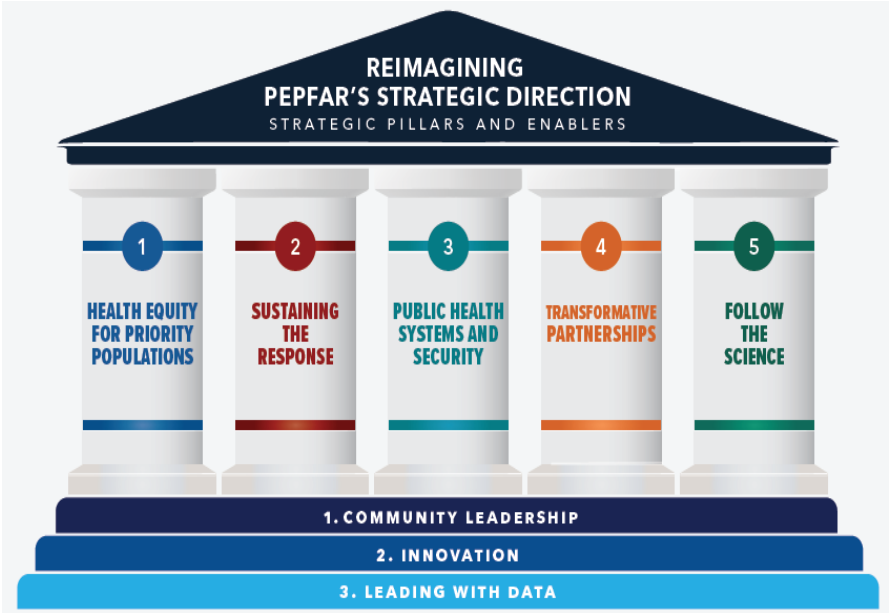
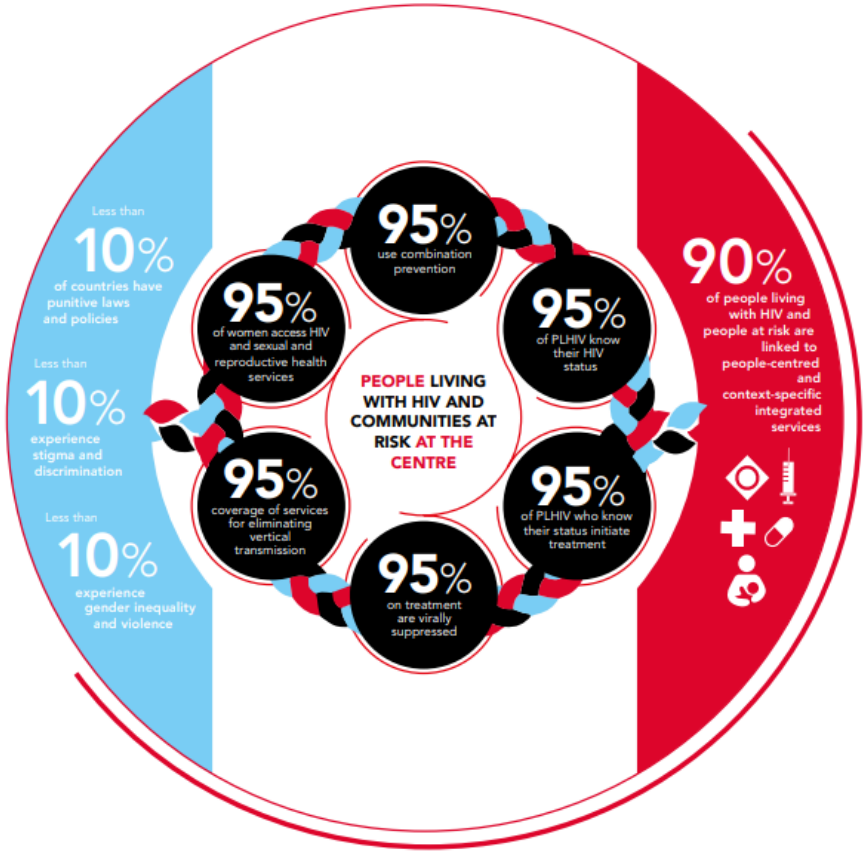
Aligning Program Priorities, Goals and Vision

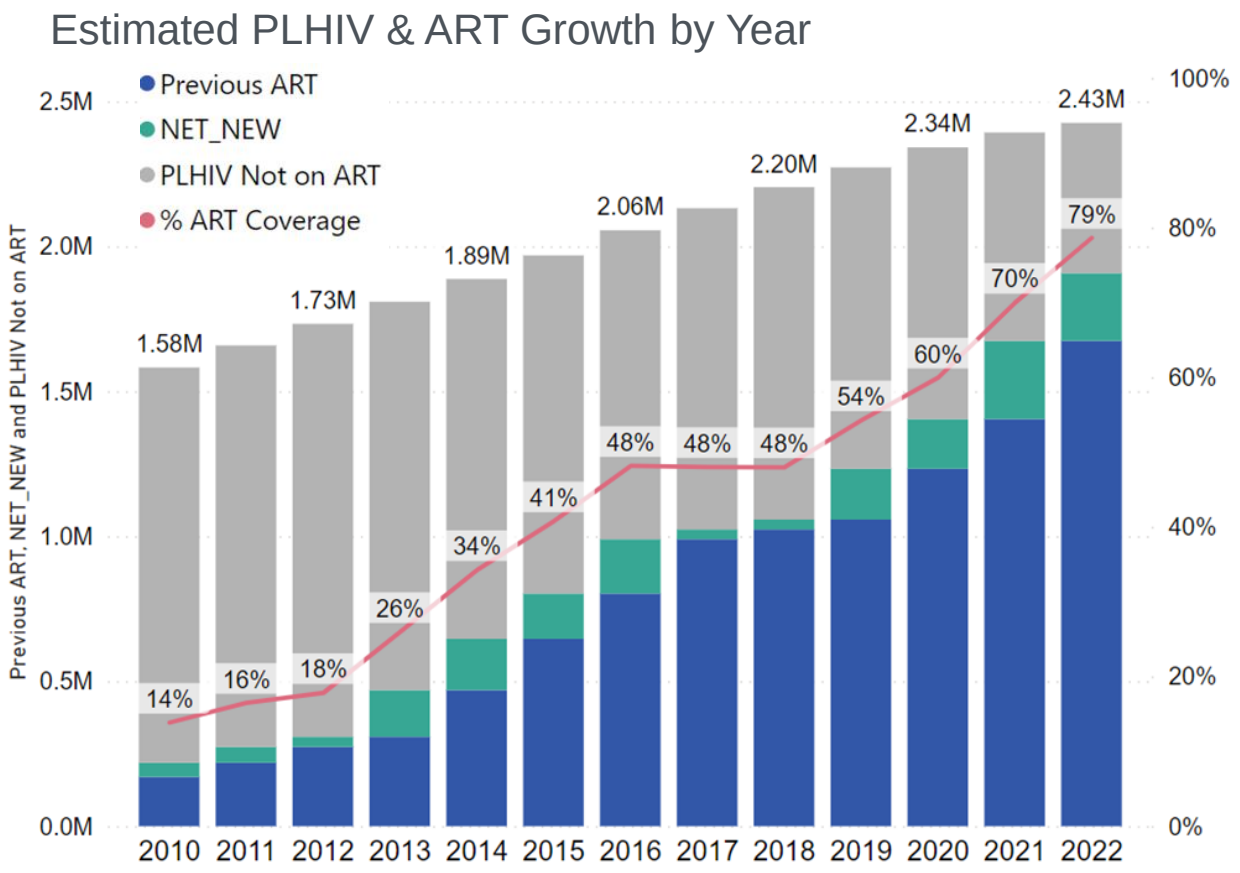


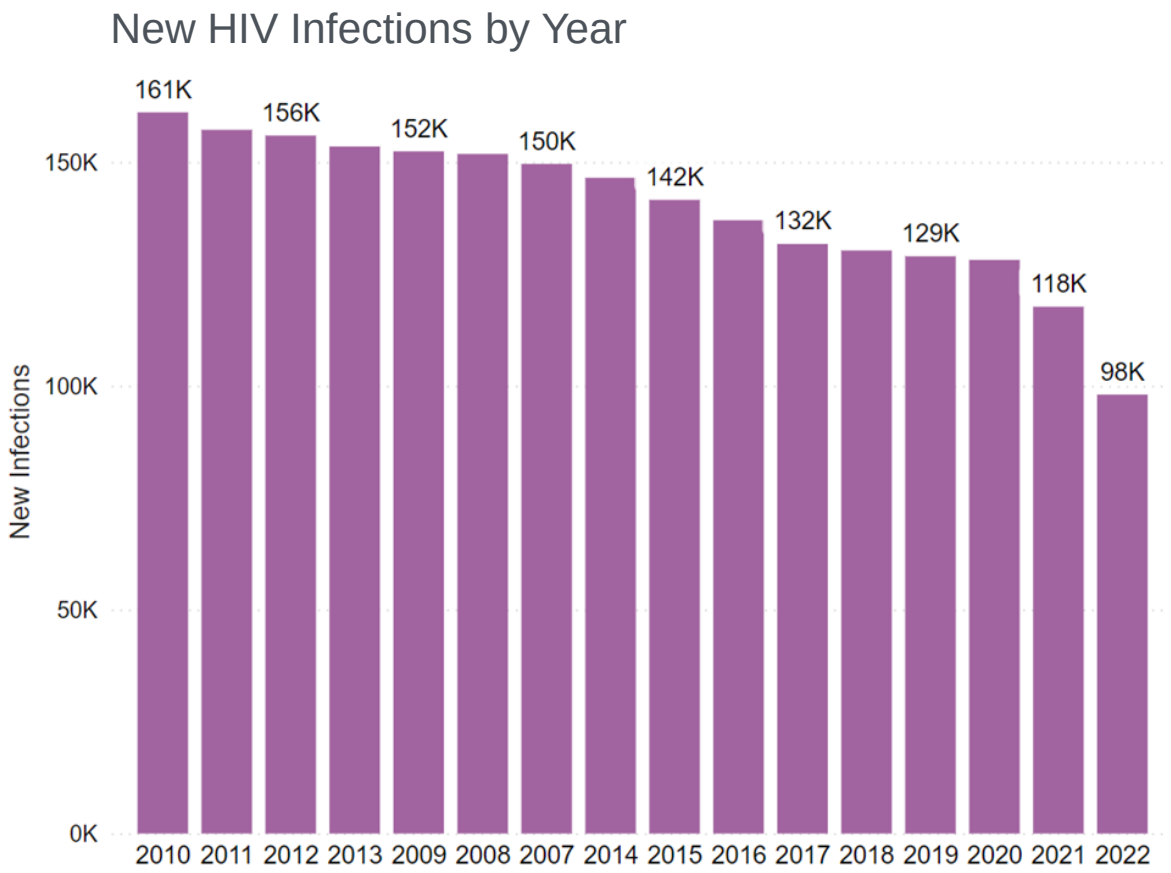
PROGRAM GOALS:

1. Reach global 95-95-95 treatment targets for all ages, genders, and population groups.
2. Reduce new HIV infections dramatically through effective prevention and treatment, in support of UNAIDS targets.
3. Close equity gaps for priority populations, including adolescent girls and young women, key populations, and children.
4. Transform the PEPFAR program towards sustaining HIV impact and long-term sustainability by strengthening the capabilities of governments to lead and manage the program, in collaboration with communities, the private sector, and local partners.
5. Make measurable and sustainable gains in partner country public health systems and health security to strengthen public health prevention, data, and response capabilities for HIV and other health threats.



Recap: Progress Over the Last Decade Shows Dramatic Gains



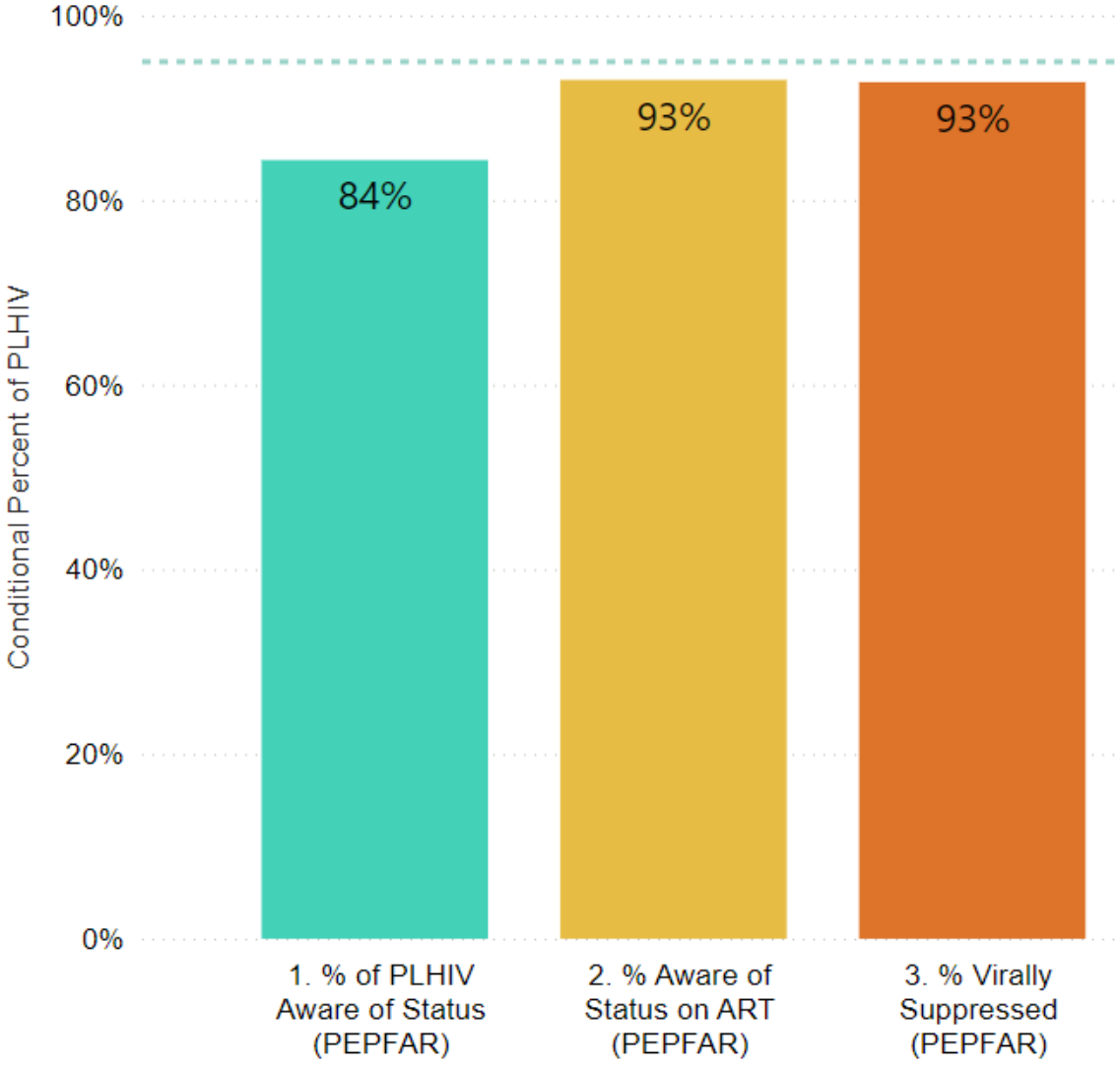


- As of December 2022, 79% of Mozambique's PLHIV are on ART (9% increase from December 2021)
- Between 2019 and 2022, 850K net PLHIV joined the treatment cohort, possibly contributing to the roughly 24% decline in estimated new infections between 2021 and 2022

** New Infections and PLHIV Estimates from UNAIDS Spectrum/NAOMI 2023 Estimates; * ART Coverage and VLS triangulated with DATIM reported TX_CURR & Viral Load Suppression 2023Q1*

Recap: Mozambique Estimated to be at 84-93-93 at FY23 Q1

FY23 Q1 Estimated Progress Towards 95-95-95

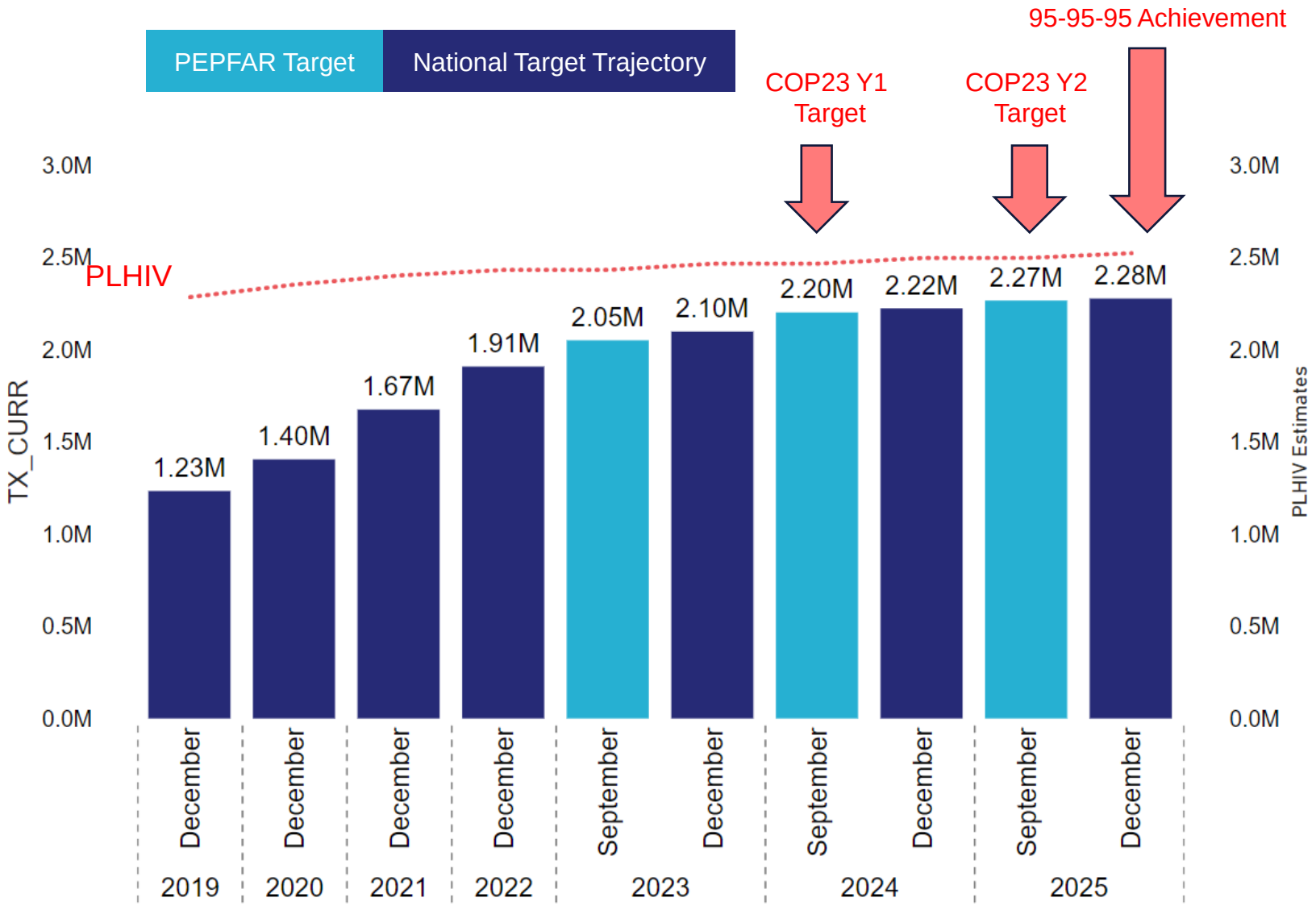


- Overall FY23 Q1 cascade 84-93-93
  - Population-level ART Coverage: 78%
  - Population-level VLS (pop VLS): 73%
- Population-level VLS lags for the following populations, largely due to the 1st 95:
  - Men
  - Children/adolescents
  - PLHIV in northern provinces
- Recent treatment program growth has been fastest in populations and places where we are farthest behind

** Awareness of Status and PLHIV Estimates from UNAIDS Spectrum/NAOMI 2023 Estimates*
** ART Coverage and VLS triangulated with DATIM reported TX_CURR & Viral Load Suppression 2023Q1*

Mozambique Plans to Achieve 95-95-95 by December 2025

- PEPFAR targets are designed to align with MISAU's ambitious goal of achieving 95-95-95 by December 2025
- Trajectory anticipates progressive slowing of ART growth nationally



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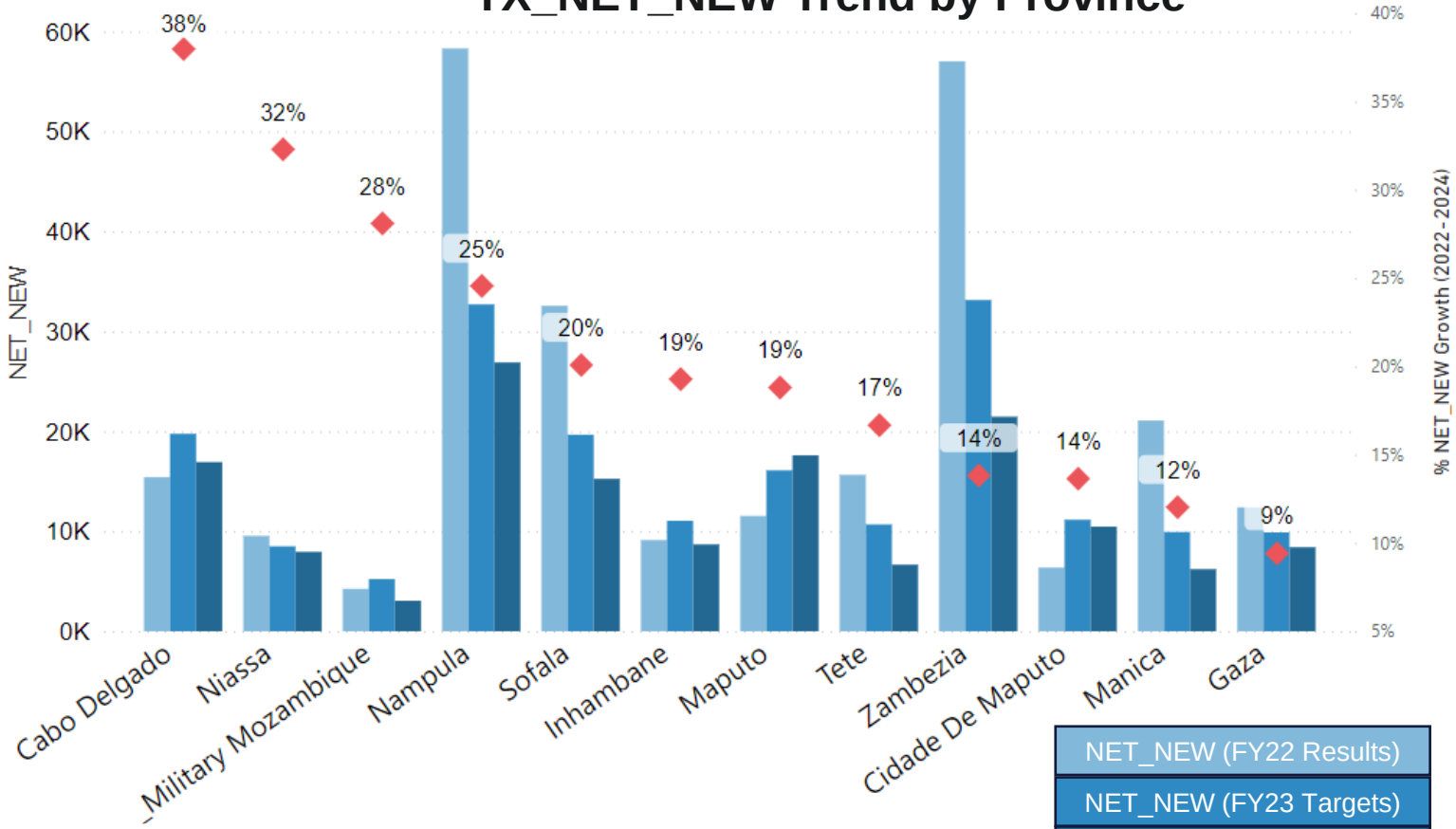
Trends in Proposed % ART Coverage and NET_NEW (FY22-FY24)

ART Coverage Trend by Province

Province	% ART Coverage (FY22)	% ART Coverage (FY23)	% ART Coverage (FY24)
Niassa	62%	71%	81%
Cabo Delgado	60%	71%	82%
Sofala	69%	76%	82%
Nampula	67%	75%	82%
Inhambane	72%	79%	85%
Tete	74%	81%	85%
Cidade De Maputo	76%	81%	86%
Manica	80%	85%	88%
Zambezia	80%	85%	90%
Maputo	79%	85%	92%
Gaza	86%	89%	93%
National	76%	82%	88%

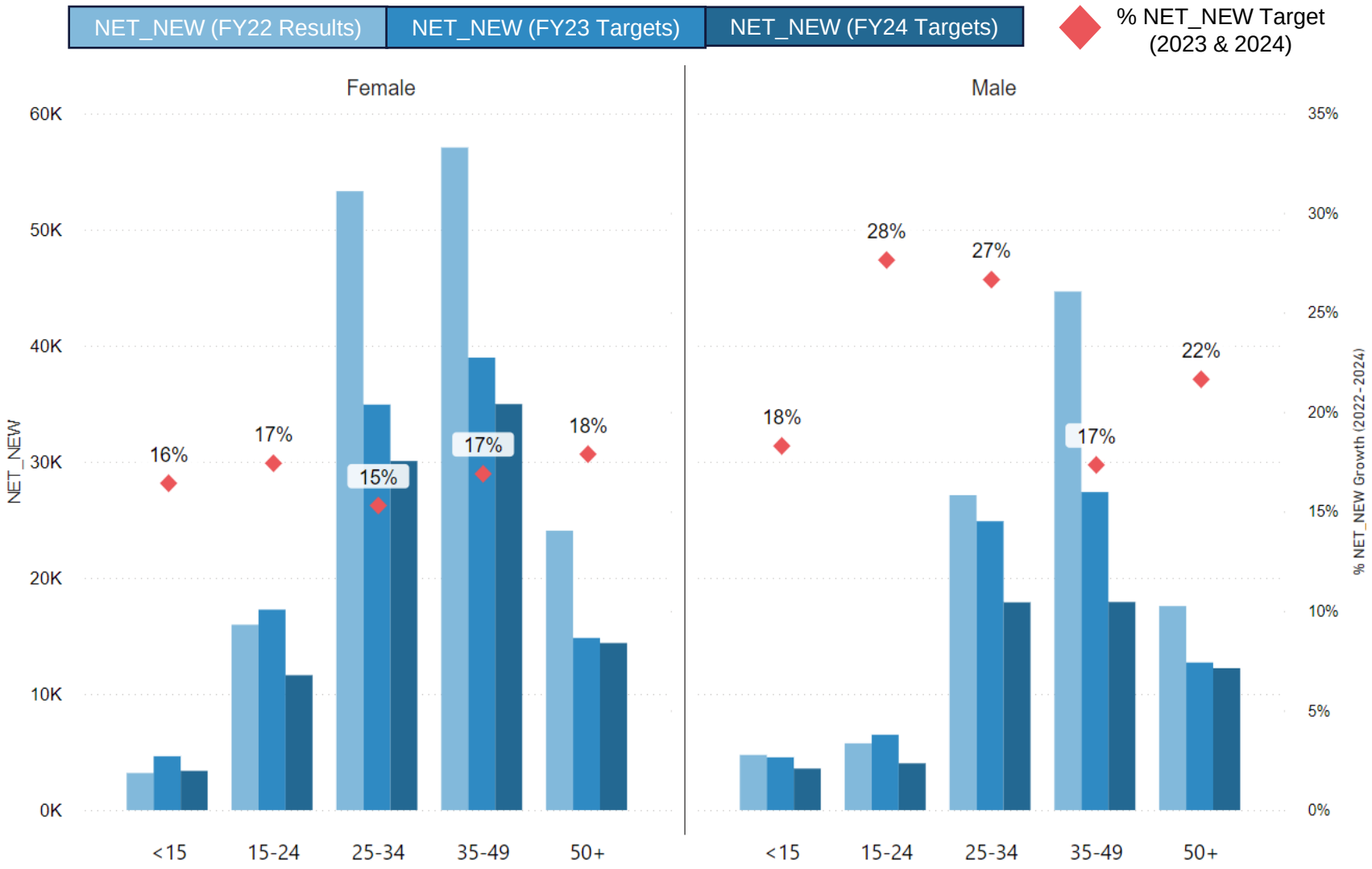
**Based on Spectrum estimated PLHIV for 2024*

TX_NET_NEW Trend by Province



- All provinces are set for >81% ART coverage by FY24
- Provinces with the largest ART coverage gaps were allocated the largest growth expectation
- All provincial targets were set in collaboration with MISAU's HIV Program

Age Sex Distribution of NET_NEW Targets (FY22-24)



- Age sex distribution of NET_NEW reflects the slowing of program growth in FY24
- Age bands with higher estimated ART coverage are targeted for slower growth relative to age bands with the largest gaps
- ABYM, who are farthest from epidemic control, are targeted for the highest percent growth

TX_CURR Proposed Trend			
Age/Sex	**FY22**	**FY23**	**FY24**
Pediatric	95,221	102,537	112,230
15+ Female	1,191,612	1,299,239	1,385,486
15+ Male	575,092	648,045	700,314

Recap: COP23 Vision to Reach 95-95-95

- **Focus on Equity**

  Tailor PEPFAR investments based on new population survey data to reach 95-95-95 and reduce new infections, focused on population groups and geographies farthest from epidemic control

  – Continue to strengthen, shift and selectively scale existing programming, which is increasingly focused on finding and treating clients in the population groups and geographies farthest from epidemic control
  – Increase focus on access to synergistic, combination prevention, in alignment with the National Prevention Roadmap
  – Continue to improve upon QA/QI and site-level mentorship to ensure high quality, person-centered, humanized services
  – Continue to strengthen community/facility-based interventions to reduce stigma and discrimination and improve HIV literacy

- **Strengthened Systems**

  Continue to strengthen Mozambique's public health systems

  – Continue to strengthen laboratory, HRH, supply chain, and data information systems
  – Continue support to Mozambique's MoH (MISAU), National AIDS Council (CNCS), NPHI (INS), and Central Medical Stores (CMAM), and provincial governments

- **Sustainable Response**

  Build upon strong partnerships for a sustainable long-term response

  – Ensure that communities, civil society and PLHIV are increasingly at the center of and driving the response
  – Collaborate to build a National Sustainability Roadmap, while concurrently supporting capacity within Mozambique
  – Leverage unique opportunity of the 2-year COP and 3-year GF grant cycle to ensure complementary programming

Addressing Gaps in Equity Populations

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COP23 Strategy to Close Equity Gaps for Children

PEPFAR/Mozambique proposes comprehensive HIV prevention measures and a continuum of appropriate care and treatment for mothers and their children, including:

- **Prevention of mother-to-child HIV transmission** by strengthening retesting for PBFW, enhancing PrEP accessibility, improving EID and consolidating mentor mother (MM) program to improve mother and baby pair HIV outcomes
- **Improvements in pediatric case finding** through systematic client chart review for missed children, and monthly site-level testing data review, etc
- **Improvements in service quality** through a focused mentoring package and intensive performance monitoring, aligned with the MoH's QI guidelines (and Global Alliance Plan/AP3)
- **Improvements in retention and viral suppression** by linking CLHIV to MM and OVC programs and expanding AHD services for the most ill
- **Better CLHIV estimates** to guide pediatric case-finding efforts and accurate assessment of coverage along the cascade

COP23 Specific Activities for Children

Prevention of Mother to Child Transmission

- Create an eMTCT validation committee NEW
- Strengthen the PBFW retesting strategy and linkage to PrEP
- Improve coordination and support to the Family Health Department NEW
- Continue engagement of WLHIV (MM, patient engagement and CLM) to improve PMTCT services and outcomes

Pediatric Case Finding

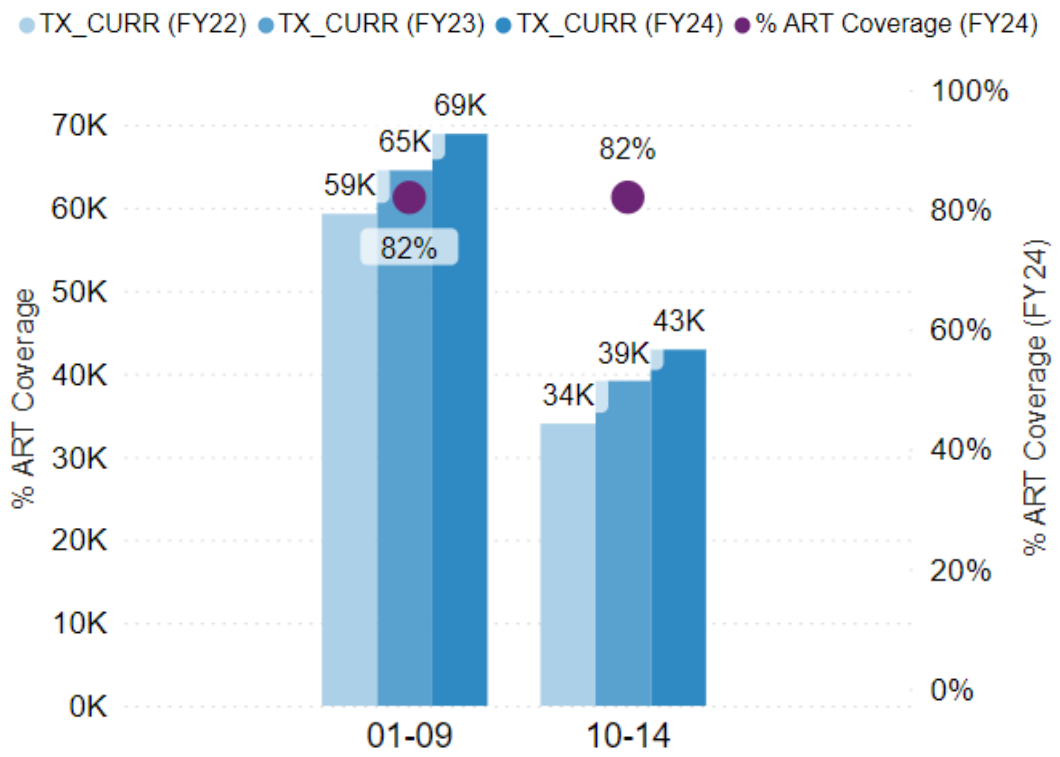
- Conduct ANC surveillance to improve CLHIV estimates LIFT
- Perform site-level analysis to identify gaps in flow and use of pediatric HIV screening and testing algorithms NEW
- Mop-Up Campaign of Mastercards to ensure HIV testing for <15yo biological children of active PLHIV on ART LIFT
- Continue support for pediatric monthly data review and QA activities (including CCS and CCD data)
- Use EPTS for electronic data reporting in at-risk child consultation clinics, including on HEI data

Retention in Care and Viral Load Suppression

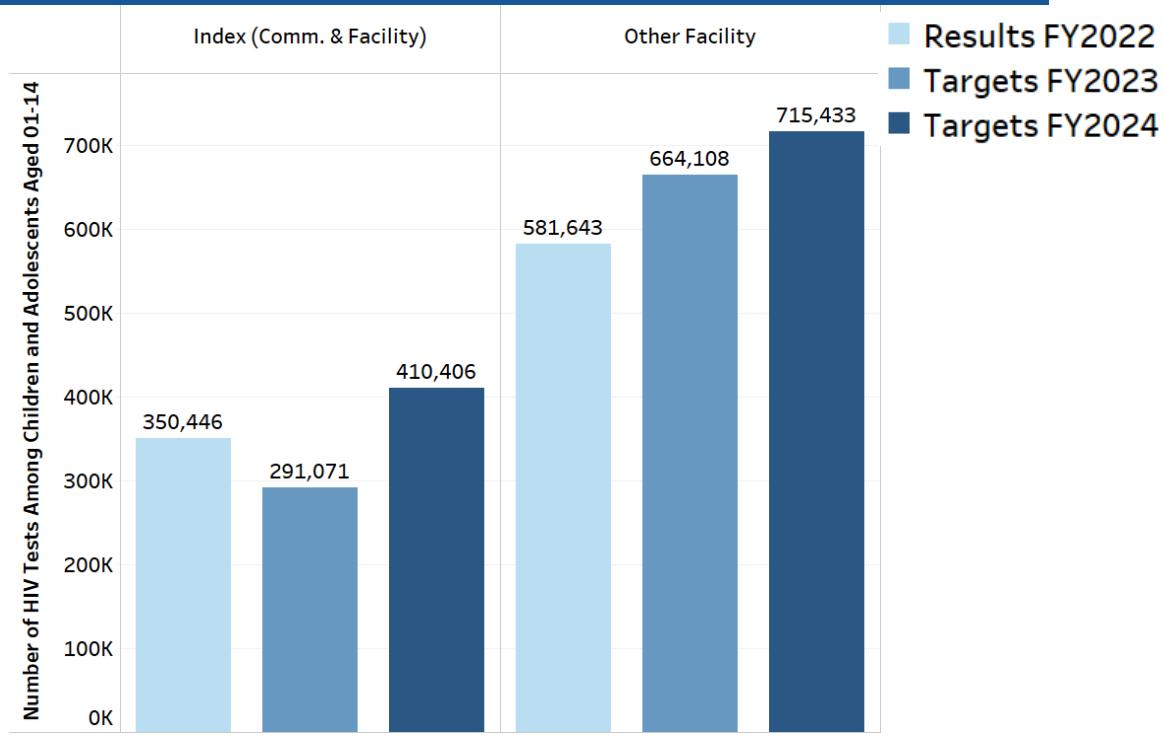
- Strengthen DSD model implementation
- Strengthen mentoring program to improve quality of services for CLHIV and caregivers (MISAU QI guidance)
- Expand OVC comprehensive case management to Niassa Province NEW
- Strengthen mentor mothers support for CLHIV <10yo
- Expand pediatric advanced HIV disease interventions to 66 sites NEW
- Implement case conferencing for patients with poor ART outcomes NEW

COP23 Treatment and Testing Targets for Children & Adolescents

Pediatric TX_CURR Trend and % ART Coverage



Pediatric HTS Trend (Index & Facility-Based)



- Treatment targets have been set to reach 82% ART coverage for CLHIV (1-14) by FY24
- Contributors to reaching these targets include improvements in retention and case identification through index and facility-based testing modalities

COP23 Strategy to Close Equity Gaps for Adolescents & Youth

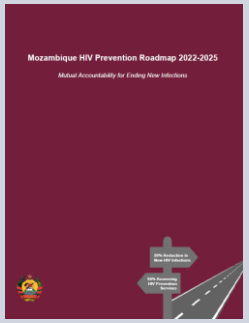
To support the achievement of 95-95-95 by December 2025, PEPFAR/Mozambique is committed to a multi-pronged approach to addressing the unique needs of adolescents and youth, including:

- **Accessing the hardest to reach** adolescents and youth and facilitating them to **determine their HIV status**
- Ensuring adolescents who **test negative stay negative and empowering AGYW**
- **Shifting gender norms** through strategic engagement with adolescent boys and young men
- Providing **adolescent- and youth-friendly health services** to strengthen prevention, decrease interruptions in treatment and improve adherence
- **Engaging youth as HIV program co-creators** and not just as service beneficiaries

COP23 Specific Activities for Adolescents & Youth

Prevention

- Align with National Prevention Roadmap
- Expand access to PrEP and other combination prevention for adolescents >15 years
- Implement peer support for HIV-negative PBFW 15-19yo to strengthen HIV prevention service access
- Support prevention and testing services at of youth community centers in DREAMS and non-DREAMS districts
- Strengthen support for STI screening and treatment



DREAMS/AGYW

- Align existing adolescent programs
- Reach ABYM through approved contextual interventions to address norms change and GBV prevention
- Assess barriers to adolescent and youth-friendly services (AYFHS) for youth (including PrEP)
- Continue to evaluate and improve quality of AYFHS
- Reach adolescent boys in youth community centers
- Resume community dialogues with community/religious leaders/male partners of AGYW
- Strengthen Youth Engagement Strategy

Case Finding

- Implement a site level analysis to identify gaps in the flow and use of HIV screening and testing algorithms
- Strengthen training for HCW to actively identify KP, young women living with HIV
- National campaign to create demand among youth for testing and combo prevention services to reduce high incidence in AGYW
- Expand coverage of index case testing and community-based testing for adolescents and young adults aged 15-24
- Increase demand creation for HIV-self-testing and kit distribution through adolescent youth mentors in communities

COP23 Specific Activities for Adolescents & Youth

Retention

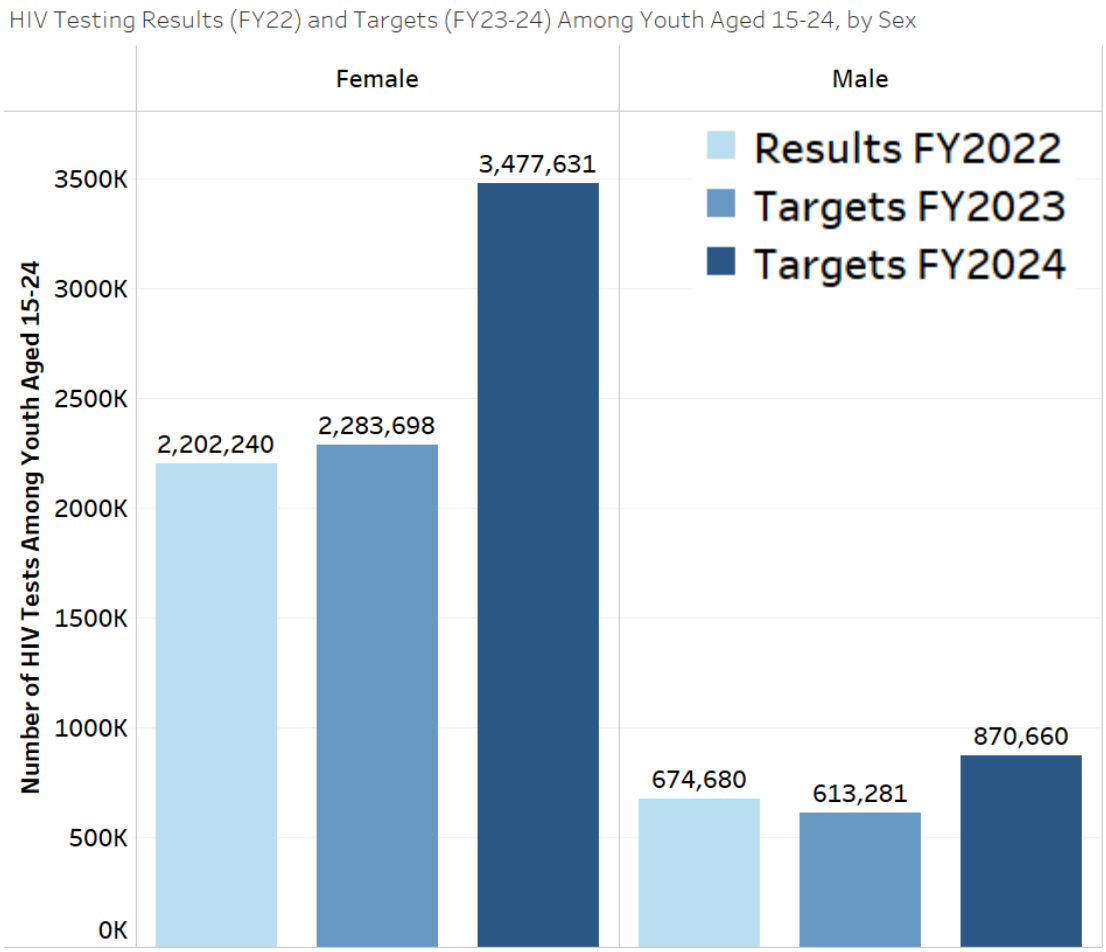
- NEW Implement transition package for ALHIV from adolescent to adult services
- NEW Expand AYM to 39 priority sites (reaching 179 by the end of COP23)
- Provide socio-economic support for ALHIV
- Engage ALHIV and youth leaders in the decision making and treatment literacy process
- Use CLM to improve ALHIV services

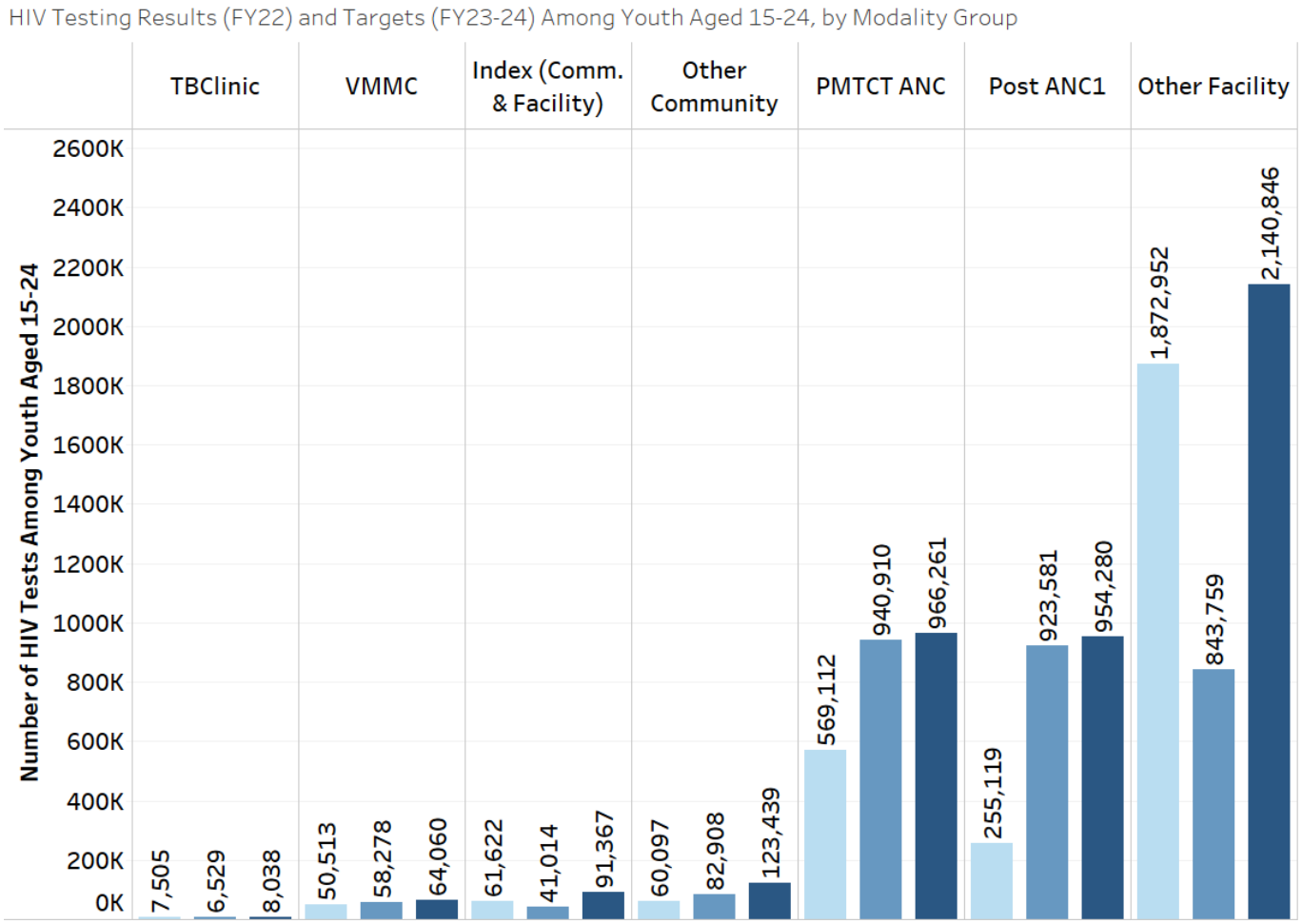
Viral Load Suppression

- Use provincial mentoring teams to reinforce clinical and psychosocial support mentoring, consistent with MISAU's QI strategy
- Implement DSD models, including implementation of the youth-friendly services package
- NEW Implement case conferencing for patients with poor ART outcomes
- NEW Increase the OVC footprint and actively enroll HEI of high-risk PBF adolescents
- Strengthen collaboration and complementarity of AYM support and OVC case management services to ALHIV

Cross-cutting engagement of youth civil society through the planning and implementation cycle

COP23 Testing Targets Set for Youth Aged 15-24





- **50% increase in testing targets** for females and males aged 15-24, over COP22 targets
- Largest increases in **index and other community-based** testing modalities

**Large numbers of tests reported as "Other Facility" in FY2022 were accompanying partners of women tested as part of PMTCT or Post-ANC*

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COP23 Strategy to Close Equity Gaps for Key Populations

PEPFAR/Mozambique recognizes the need to protect the sexual and reproductive health and human rights of key populations by:

- **Accessing the hardest to reach** KP, including utilization of a social-media-based virtual platform, and facilitating them to **determine their HIV status** in community and facility settings
- Supporting KP who **test negative to stay negative**
- **Understanding KP size estimates and behavioral risk factors** through integrated biobehavioral surveys
- **Safeguarding KP** through improving access to legal services and advocating for more supportive and protective legislation
- Providing **KP-friendly health services** to decrease interruptions in treatment and improve adherence, including expanded coverage of facility-based peer navigators
- **Building the capacity of KP-led organizations** to effectively engage as **HIV program co-creators and implementers**

COP23 Specific Activities for Key Populations

Improve Access to Health Services

- LIFT Implement updated KP and STI guidelines, including training, supportive supervision, and mentorship of health providers
- Expand implementation of differentiated service delivery models (e.g., mobile clinics) that offer PrEP and self-testing services
- Strengthen clinical cascade monitoring for KP, through to viral suppression
- Expand the peer navigator cadre to additional health facilities used by KP
- LIFT Establish a virtual platform to reach under-served KP (especially MSM and TG) via novel social media channels

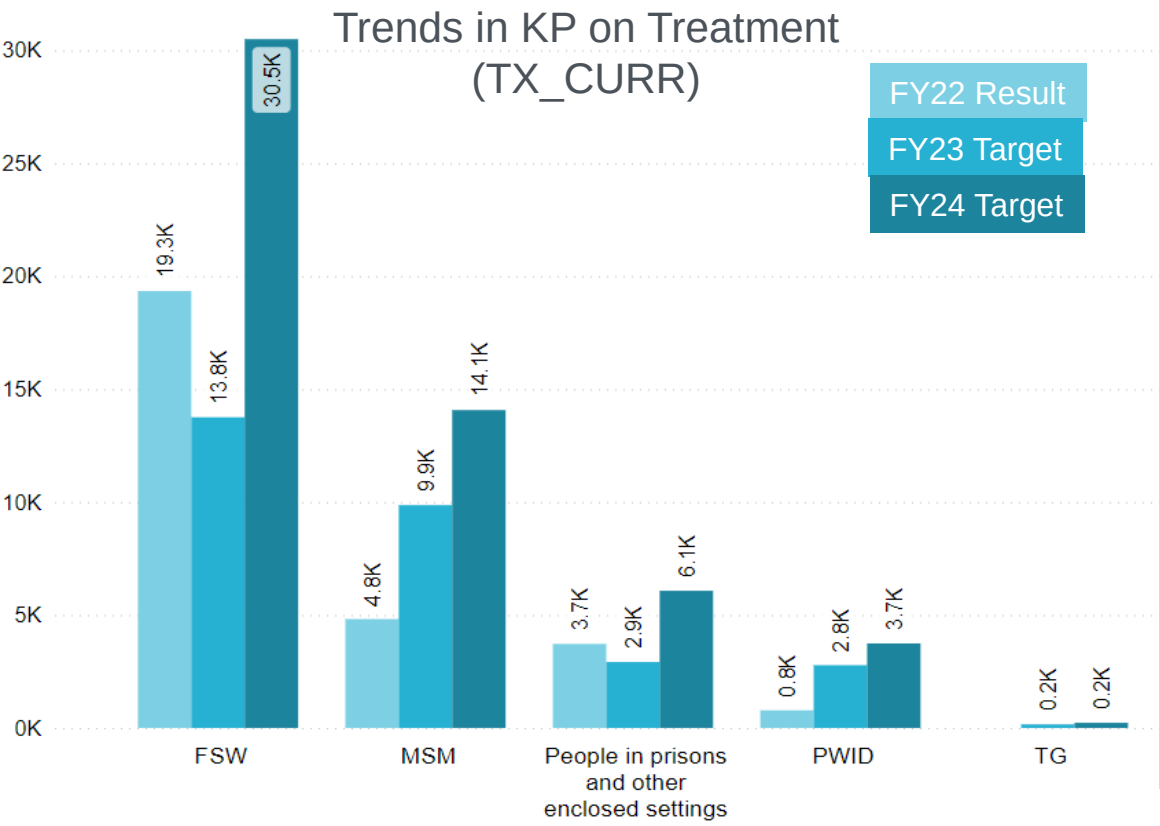
Address Structural Barriers for KP

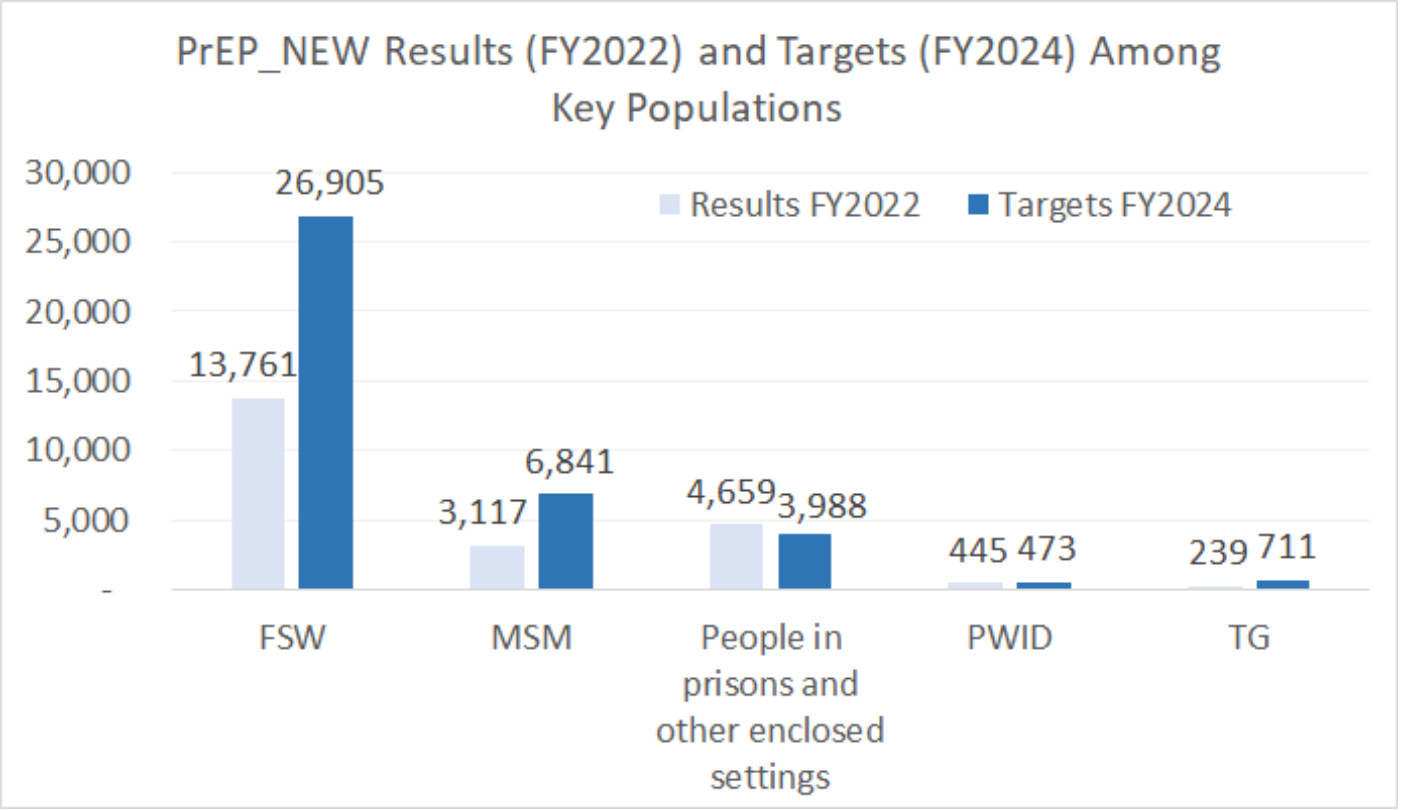
- LIFT Establish KP-specific community dialogues to reduce stigma, discrimination and harmful societal norms, thereby reducing structural barriers to KP in accessing health services
- Strengthen support for KP who are victims of GBV and provide linkage to appropriate health and legal services
- Continue to strengthen collaboration with the justice sector in efforts to address legislative reform, prevent and improve legal protections against all forms of violence against KP

Strengthen the Evidence Base for KP

- NEW Continue to strengthen service monitoring for Key Populations (improving coordination between community and facility partners)
- Support implementation of IBBS survey with key populations
- Expand proven strategy of micro-planning for efficient KP program implementation

COP23 Treatment and PrEP Targets for Key Populations





- Significant increase in active documented KP on ART across all sub-groups
- Significant increase in treatment and PrEP targets for all sub-populations
- Community HTS strategies to effectively reach these populations will be implemented to align with these ambitious targets

COP23 Strategy for Community Engagement

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PEPFAR Mozambique's Community Engagement Strategy

PROGRAM DESIGN

- **Engagement for COP23** development
- **Sharing of quarterly results** for discussion and feedback
- Regional **consultations with CSOs** to inform COP23 Y2
- Triangulation of **CLM data** with other data sources for program improvement
- **Marketing Advisory Group** members

PROGRAM IMPLEMENTATION

- Direct community **grants** for CBOs´ innovative health promotion activities
- **Sub-grantee recipients for community programs**, including outreach, demand creation, and health literacy
- Hiring of >21K **CHWs for direct service delivery**, of which approximately 4K are peers (MM, AYM, MC, and others)

CAPACITY BUILDING

- Support **PLASOC-M & National Steering Committee of FBOs** executive functions & capacity building
- **Institutional capacity** building for CBOs
- **Technical capacity** building for CBOs, FBOs, and village health committees (VHC)

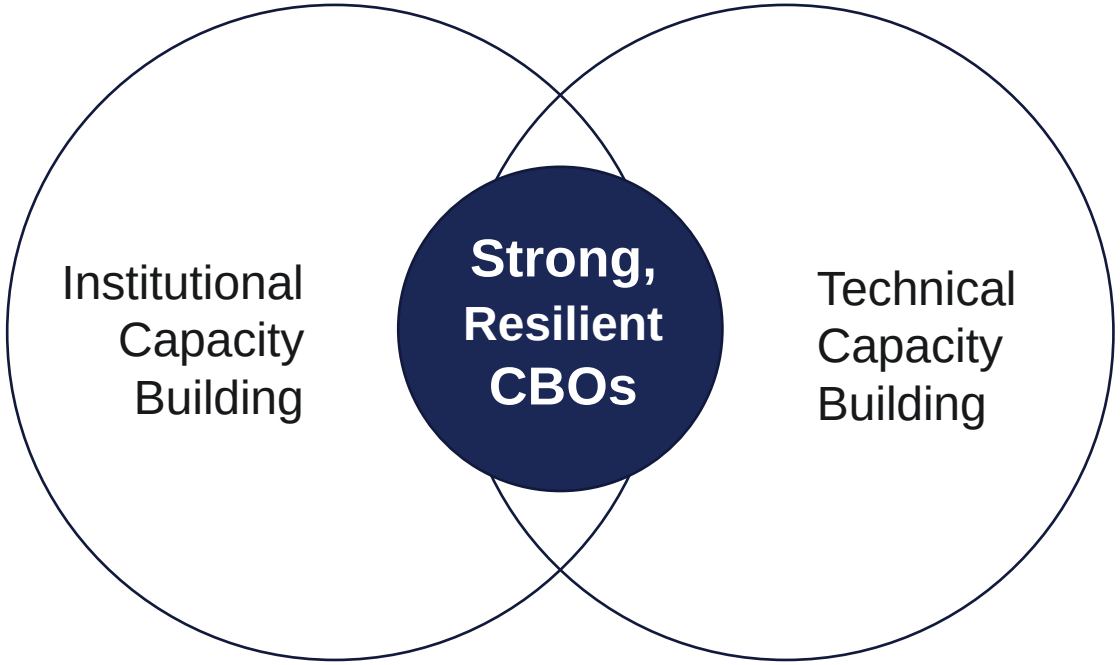
MONITORING/FEEDBACK

- Support to **CLM implementation** in 300 health facilities
- **Client engagement in QI activities**
- Support for **health service users' feedback systems**
- Strengthen **VHC & Humanization Co-Management Committees**

COP23 Strategy for CBO Capacity Building

Institutional Capacity Building

- Strategic planning
- Resource mobilization
- Proposal writing
- Organizational policies
- Organization structure
- Human resources management
- Admin/Financial procedures
- M&E systems
- Communications



Technical Capacity Building

- CLM
- Community mobilization
- Demand creation
- Health literacy
- Legal literacy
- Stakeholder engagement
- Advocacy
- HTS
- ART adherence support
- Harm reduction
- GBV sensitization
- Savings and loans groups

COP23 Optimized Approach to HIV Literacy

LIFT

National campaign to create demand for testing/combination prevention services to reduce high HIV incidence among AGYW

LIFT

Innovative interventions to improve outreach of KP and adolescent and youth through the usage of digital media

Undetectable=Untransmittable

U=U

Treatment literacy in health care and community settings; focus on VL and U=U

Faith-based interventions focused on HIV literacy promotion at the community level, including through community mobilization

SOMOS IGUAIS

Strategic marketing campaign focused on reaching men living with HIV aged 25-34

NEW

Funding for CBOs, including for KP- and PLHIV-led organizations, to directly implement innovative treatment literacy activities

In-service training:

- health care providers interpersonal communication skills
- lay counselors DSD demand creation

NEW

Training package with harmonized, evidence-based HIV messages for use by peer educators and lay counselors

Update on Multisectoral Engagement on Youth

"Reflexão sobre o HIV nos Adolescentes e Jovens"

Meeting Scheduled for April 20

Meeting Objectives

- Provide a platform for youth, including young KP, to vocalize their needs
- Raise multi-sectoral awareness of youth health service access barriers
- Bring stakeholders together to maximize complementarity
- Align existing country programs for youth (CNCS leadership in consultation with youth representatives)
- Discuss potential development of a “GIAY” (Great Involvement of Adolescents and Young People)

Audience

- GRM (CNCS, MISAU, Ministry of Youth, MGCAS, National Youth Council, Youth Coalition Association, etc.)
- International partners (UN Family Organizations, Bi/Multilateral donors, international NGOs)
- Other civil society organizations

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COP23 Strategy for Other Priority Populations

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COP23 Strategy for Engaging Men

PEPFAR/Mozambique recognizes the need to provide tailored, male-friendly services to close equity gaps towards 95-95-95 through:

- Improving quality of the **Male Engagement package** at all AJUDA sites through national training of HCWs on enhanced communication techniques, expanded use of Male Champions, and use of ME dashboard for CQI NEW
- Diagnosing more men living with HIV through **male-targeted testing efforts**, including HIV self-testing and community-based HTS
- Preventing new HIV infections in men through the provision of **combination prevention** interventions
- Maximize existing communication platforms (ALO VIDA) to increase the proportion of **men accessing and adhering to ART** through male -specific treatment and adherence messaging

COP23 Strategy for Internally Displaced Persons

PEPFAR/Mozambique's strategy for improving ART access and retention among IDP in Northern Mozambique focuses on:

- **Directly funding provincial government to** reach IDPs in the hardest-to-reach districts ("Juntos" model) NEW
- Expanding **DSD models** for hard-to-reach IDP via newly **expanded national guidelines for emergency settings** (e.g., 6MDD, mobile brigades, and community ARV distribution)
- Ensuring **access to mental health, social support & GBV screening**
- Improving **tracking and reintegration** of patients in C&T (including through new patient tracking booklets)
- Conducting **IDP surveillance**, in collaboration with the International Organization of Migration (IOM)
- Strengthening **humanitarian partner coordination**, in collaboration with the WHO-led Health Cluster

Joint PEPFAR, IOM, partner and DPS/SPS staff in a Mobile brigade during an IDP camp visit in Chiure, Cabo Delgado

COP23 Strategy for Military Populations

PEPFAR/Mozambique recognizes the importance of supporting FADM with service provision for active-duty military members and civilian populations to drive down HIV incidence, through:

- **Integrated, person-centered facility-based services** (testing, treatment, prevention, laboratory), including for KP
- Targeted testing to **active-duty military** outside health facilities, expanding support to **isolated FADM facilities** that currently have no services, and increasing combination prevention efforts in the north region where the SABERS indicates highest prevalence
- **Differentiated services** to isolated **troops fighting terrorism** in Cabo Delgado
- Expansion of **AP3** (+2 sites) and implementation of **adolescent youth mentors** & **male champion strategies** (+3 sites)

NEW

COP23 Strategy for Combination Prevention

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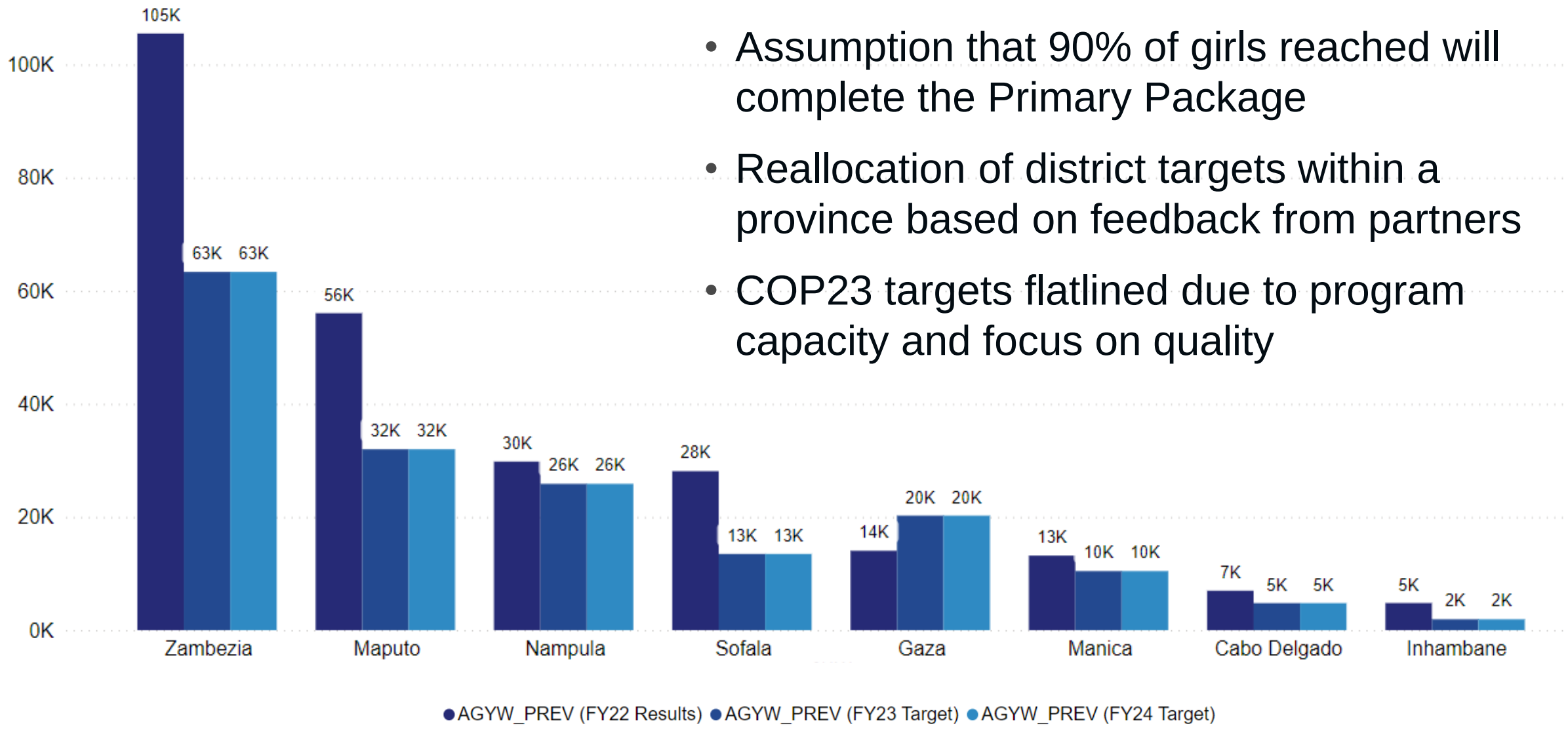
COP23 Supports Implementation of the Nat'l Prevention Roadmap

COP23 Strategy for Equitable Combination Prevention

PEPFAR/Mozambique aims to accelerate the reduction of new HIV infections through synergistic combination prevention programs, aligned with ***National Prevention Roadmap***:

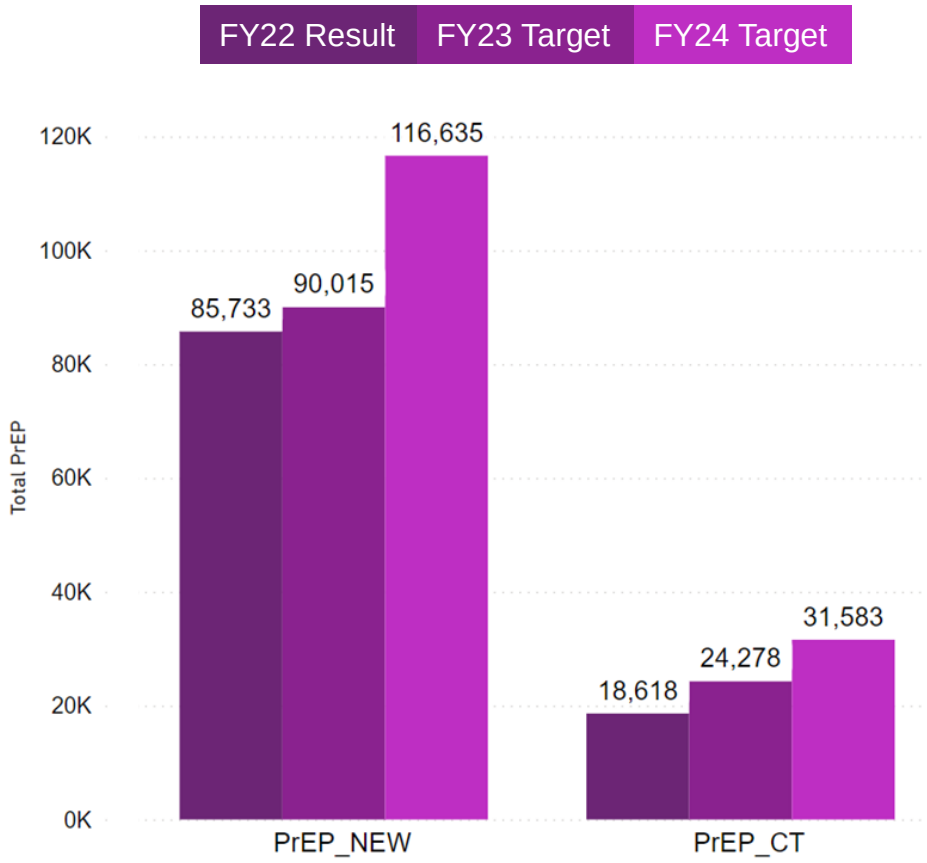
- Increased **HTS among priority groups** (e.g., children, adolescents, youth, men, and KP)
- Strengthened **condom and water-based lubricant distribution** and service integration, especially for AGYW, youth, and KP
- Support for scale-up of **STI screening/treatment** for KP and AGYW LIFT
- Accelerated **PrEP and PEP** service expansion, with focus on high-incidence areas and sub-populations (AGYW & KP)
- Accelerated **VMMC programming** to address coverage gaps among men aged 15-29
- Innovative interventions to improve **outreach** to KP, adolescents and youth through **digital media** and **community dialogues** LIFT
- National **testing/combination prevention campaign** for youth, including tailored messaging to address AGYW barriers LIFT

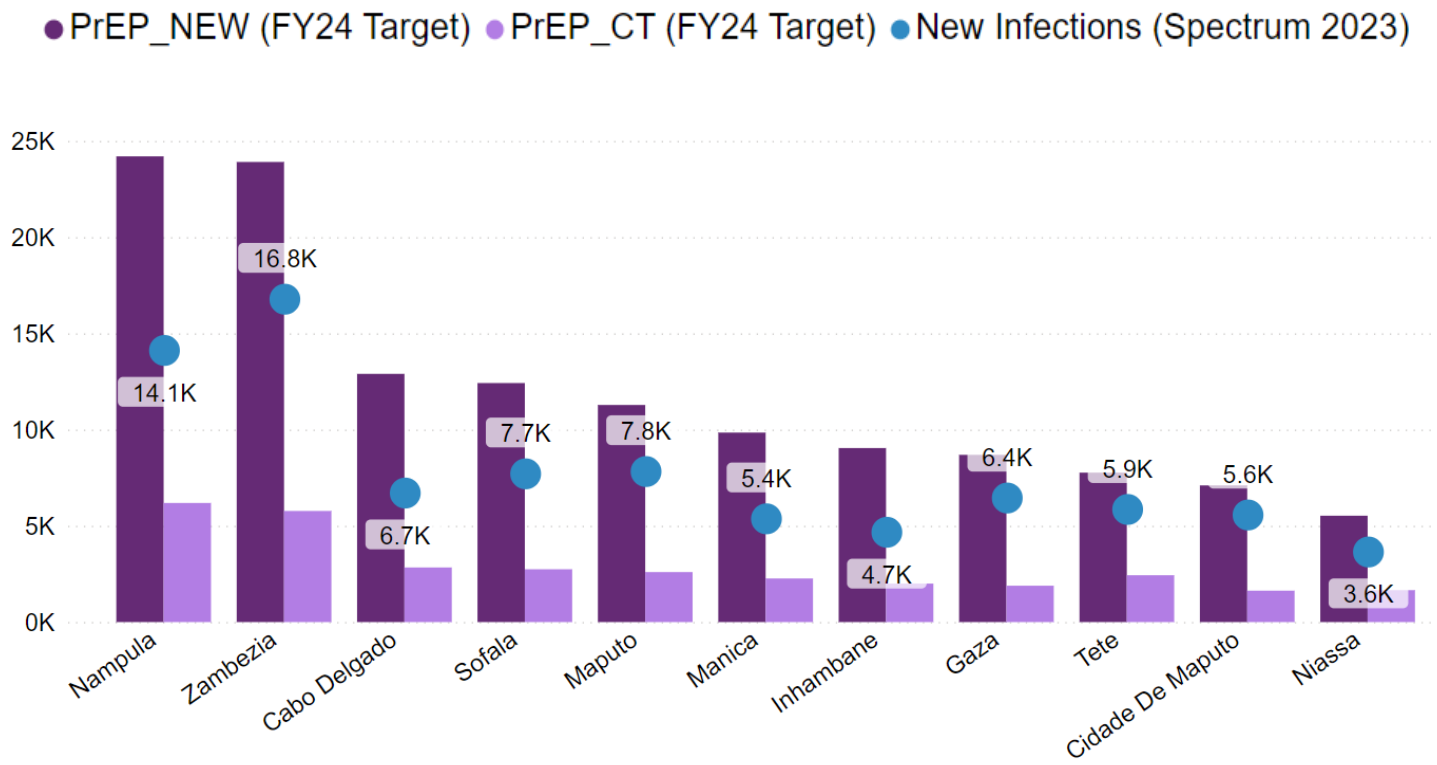
COP23 Targets for AGYW_PREV (10-24, DREAMS Districts)



- Assumption that 90% of girls reached will complete the Primary Package
- Reallocation of district targets within a province based on feedback from partners
- COP23 targets flatlined due to program capacity and focus on quality

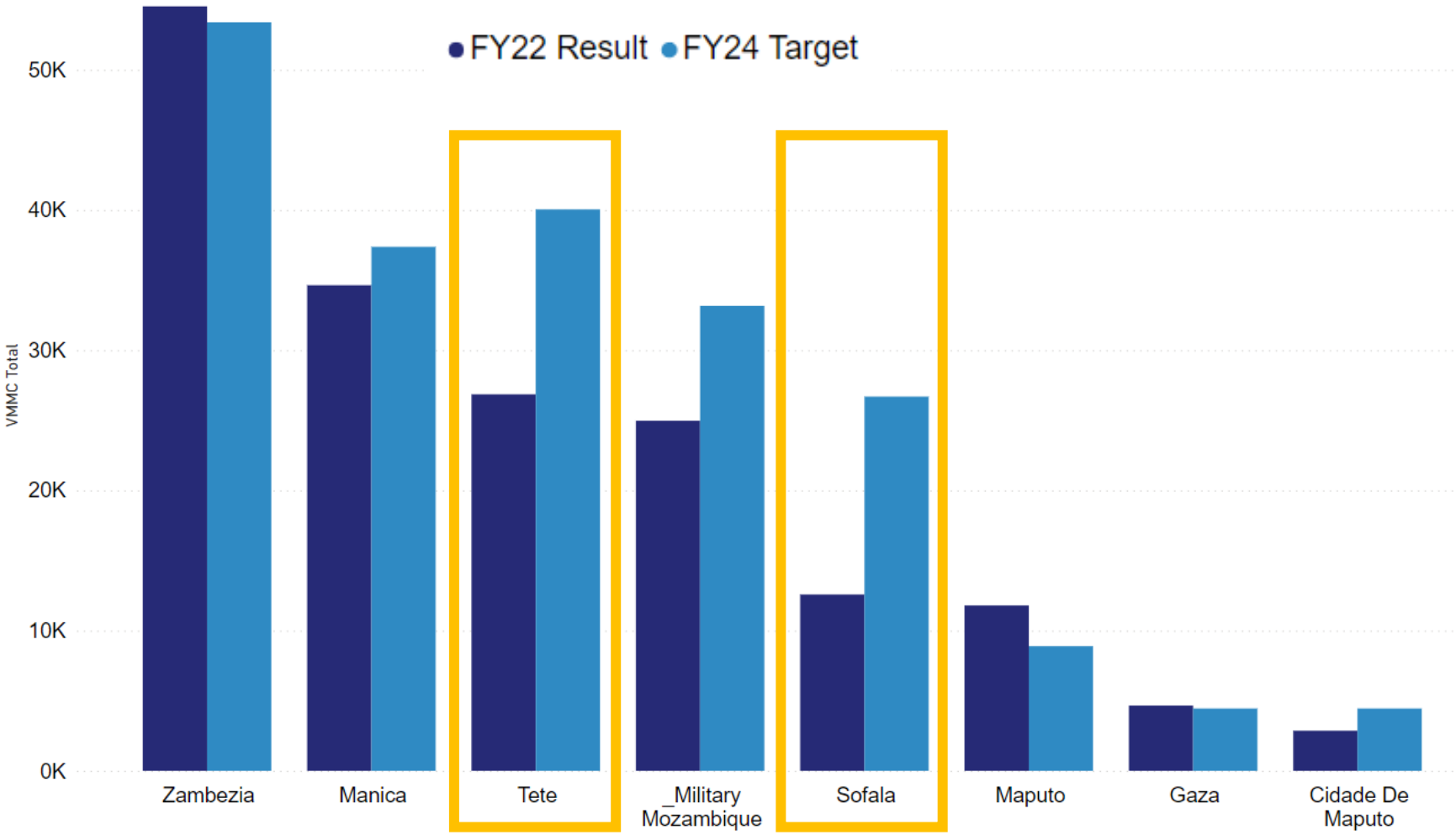
COP23 Targets for PrEP





- Significant expansion of PrEP proposed for COP23 (30% PrEP_NEW increase)
- PrEP targets allocated based on provinces with higher estimated new infections and existing DREAMS programming

COP23 Targets for VMMC



- FY24 VMMC targets for 15-24 years olds are targeted to achieve 94% VMMC coverage in prioritized provinces
- Accelerated performance is anticipated for Tete and Sofala Provinces, where VMMC coverage is estimated to be the lowest *(based on DMPPT2)*

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Addressing Comorbidities

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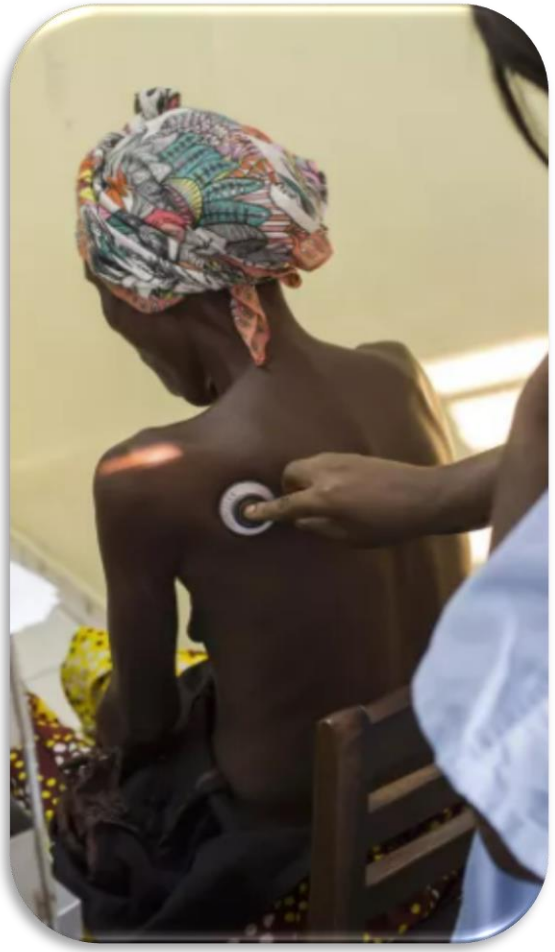
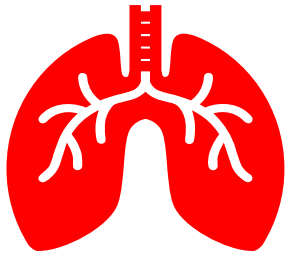
COP23 Strategy to Address HIV Comorbidities

PEPFAR/Mozambique proposes to more holistically address the health care needs of PLHIV with comorbidities to improve morbidity, mortality and delivery of person-centered care by:

- Scaling the availability, quality and scope of **services for advanced HIV disease**, including expansion to 66 additional sites
- Improving the **TB screening, diagnostic and treatment cascade** for PLHIV, including through service integration and new diagnostic technologies
- Implementing and scaling a simplified and more **sustainable approach to mental health service delivery**, through integration into the national psychosocial support (APSS) processes and improved reporting
- Expanding access to **high quality of screening and treatment of pre-cancerous cervical lesions** to reach elimination goals by 2030
- Begin to support stronger **NCD-HIV service integration** through creation of a national NCD TWG, operational guidance, and integrated training/reporting



COP23 New Activities to Address HIV Comorbidities



NEW Mental Health

- More sustainable MH approach, including:
  - Strengthen integration of MH into APSS services
  - Expanded screening criteria
  - Simplification of the training package
  - Maximization of existing HR and no staff recruitment
- Expand to additional 3-6 sites
- Use of HIS to ensure automated reporting/monitoring

NEW Tuberculosis

- Digital Xray and CAD expansion
- GeneXpert stool testing expansion
- Universal HIV testing for all TB presumptive clients
- Expanded TB One Stop Shop model to 3 new sites/province
- Optimized use of DISA for TB culture, drug sensitivity testing and pilot GX lab result capture

NEW Advanced HIV Disease

- More robust TA to implementing sites
- Scale up of AHD to 66 additional sites
- Support for Kaposi Sarcoma Centers (2 per province)
- Integration of AHD tests results in DISA system

COP23 New Activities to Address HIV Comorbidities

NEW Cervical Cancer Prevention

- Expand thermal ablation to cover a total of 507 sites (~80% of AJUDA sites) by the end of COP23
- Use of updated CECAP M&E tools to report CECAP results in the EPTS
- Support advocacy for funding CECAP (HPV tests and other commodities) through other donors
- Strengthen civil society engagement on cervical cancer prevention activities

NEW Non-Communicable Diseases (NCD)

- Create national TWG for HIV and NCD services integration
- Develop an Operational Guide to integrate service delivery for PLHIV with comorbidities
- Support a workshop for validation of the operational guide
- Refresher training of PHC providers (including HIV clinicians) on comorbidities management
- Maximize HIS to ensure integrated reporting and monitoring of PLHIV with comorbidities

Update on the MISAU Strategy for CD4 and AHD Testing

On March 16, a meeting was held during the HIV Program's Annual Meeting to discuss the national strategy for CD4 testing in Mozambique; strategy finalization is still underway

MOH strategy for CD4, CrAg and TB LAM roll out

- Reagent rental for 43 FACSPresto instruments using current GF grant
- Purchase of VISITECT tests using current GF grant
- Purchase of all CD4 commodities with new grant including: (1) equipment for hospital level laboratories; (2) VISITECT for periphery sites; and (3) maintenance contracts for PIMA instruments
- Quantification of CrAg and TB LAM in HIV proposal

PEPFAR-support for CD4 roll out and AHD testing

- DISA LIS at all AHD sites to support onsite data entry and transfer to openLDR
- AHD dashboard and regular reports
- Training and technical assistance
- External quality assessment and continuous quality improvement

Health Systems Strengthening

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COP23 Strategy for Health Systems Strengthening

Vision: Strengthen Mozambique's public health systems, pandemic preparedness, and community-led efforts to sustain long-term HIV impact, which can be leveraged for epidemic surveillance and to deliver sustainable health care for PLHIV and other beneficiaries

- Continued support to the Mozambique NPHI (INS) and MISAU for **public health preparedness, epidemiology/surveillance and data analysis**
- Support for robust **supply chain management** and agile **sample transport systems** to ensure commodity availability and visibility down to the last mile
- Continued support to strengthen **laboratory capacity, testing quality, and management systems** to ensure scale of HTS, VL, EID, AHD, and other multi-disease testing
- Strengthened **capacity and sustainability of the HRH workforce** and management system, including at the community level
- Support for **minor renovations** to improve service delivery quality

COP23 Specific Activities for Systems Strengthening

Supply Chain

- Support the Quantification and Supply Planning (QAT)
- Support the supply chain end-to-end visibility (Control Tower, n-SIMAM, SIGLUS)
- Build national and sub-national capacity to manage outsourced services
- Support the first and last mile distribution of HIV products
- NEW Support ANARME to enhance their regulatory capacity for increased efficiencies in medicines' registration and importation processes

Laboratory

- Support LIS expansion and dashboards
- Expand CQI programs and EQA coverage
- NEW Implement digital platforms to manage and monitor rapid test CQI (RTCQI+) and EQA
- Strengthen laboratory leadership at all levels and build technical capacity for HIV related diagnostics including for AHD package (CD4, CrAg, TB LAM)
- Strengthen local capacity for management and implementation of laboratory CQI programs and LIS
- Implement laboratory-based HIV drug resistance surveillance using CADRE approach

COP23 Specific Activities for Systems Strengthening

Human Resources for Health

- Continue support to DSD staff through clinical partners and G2G partners
- Continue support for the GRM for transition on staff to GRM payroll
- Continue support to maximize contribution of existing lay staff
- NEW Support for implementation of the National Community Health Sub-system
- NEW Support for pre-service training of PEPFAR supported CHW to transition to APS

Infrastructure

- Support for improvements of HF working conditions and privacy for HIV service delivery through minor renovation and pre-fabs
- Support for expansion of VL laboratory coverage through construction of the Inhambane province laboratory; this is the only province without a VL lab

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Update on MISAU Acceptance of EPTS for Routine Reporting

On March 17 at the National HIV Conference MISAU presented the findings and implications of the EPTS assessment conducted in Oct/Nov '22

- Assessment results were presented by the Department of Planning and Cooperation (DPC), which oversees MISAU Health Information Systems
- Evaluation was positive and recommended using EPTS for reporting in Mozambique
- Despite evaluation results, DPC expressed concerns about the verticalized nature of EPTS and limited national HF coverage
- PEPFAR/Mozambique plans to meet with DPC to discuss the acceptability of using EPTS for national reporting while a sustainability roadmap is developed, and a funding source is identified for addressing DPC concerns

Program & Data Quality

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COP23 Strategy for Program Quality

PEPFAR/Mozambique will strategically align with MISAU's national QI program to fully support the **one country, one program approach**, while maintaining **intensive site-level monitoring** and technical assistance to implementing partners in AJUDA sites, through:

- **A standardized approach** to providing supervision at all sites, using MISAU tools and reporting framework NEW
- Quarterly data review with GRM and PEPFAR IPs to **jointly monitor performance** (including on MER and customized indicators) and agree upon **site-level action plans**
- **"Strike teams"** deployed to low-performing sites to offer intensive TA for specific program areas of concern
- **MISAU-hosted quarterly reviews** with provincial/district health authorities to discuss findings from QA/supervision visits conducted by PEPFAR and GRM
- USG commitment to ensure that **MISAU QI priorities are integrated** within all IP site strategies and monitoring practices

COP23 Strategy for Data Quality

PEPFAR Mozambique is committed to strengthening data quality at all levels of the national reporting system through collaboration with GRM in joint data quality improvement initiatives. This includes:

- Implementation of joint (MISAU & PEPFAR) **Data Quality Assessments** (DQA) using **standardized tools and methodology**
- Development of a **routine dashboard** for ongoing data quality monitoring
- **Surveillance of ANC routine testing** for collection of high-quality ANC HIV prevalence assumptions resulting in improved Spectrum/Naomi CLHIV modeling
  - Surveillance will also collect other data used to better inform CLHIV modeling and program design
  - Initiative will help to better document and understand the gaps/challenges in routine ANC reporting systems

LIFT

Strategy for Sustainability

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COP23 Strategy for Program Sustainability

PEPFAR/Mozambique will continue to work with the Government of Mozambique and other stakeholders to build a shared vision for sustainability of the HIV response, which prioritizes:

- Development of a **sustainability roadmap** that defines a specific set of milestones to transition programs toward increasing local leadership and management of the HIV response
- Promote a government-led **national dialogue** and regional consultation workshops on sustainability
- Continued **capacity building** efforts toward local government and affected communities (PLHIV- and KP-led organizations) and other stakeholders to assume more responsibility of the HIV response
- Expanded roles for **central and provincial government** to directly implement key interventions, including through **gradually transfer** of site, staff and program area responsibility, while continuing to **strengthen health systems**

COP23 Strategy for Sustainability

1

POLITICAL

Commit to maintaining HIV on the national agenda; Advocate for favorable policies for priority populations; Mobilize domestic and external resources; Ensure PLHIV are central to the national dialogue

2

PROGRAMMATIC

Build technical, managerial, and institutional capacity of central/provincial governments as well as civil society actors; transfer more responsibility to government and civil society through short-, medium-, and long-term milestones for sustainability

3

EPIDEMIOLOGIC

Achieve 95-95-95 targets; Reduce new infections; invest in robust data information systems to sustain the response; ensure strong surveillance systems to detect HIV and other disease outbreaks in a timely and efficient manner;

4

FINANCIAL

Building financial capacity for funding management and absorption by central/provincial governments as well as civil society organizations; advocate for increased domestic funding for HIV (incl. key populations); Increase direct funding to local entities

Budget Overview

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COP23 Budget Planning Level Letter Directives

- **Total COP23 Year 1 budget: $416,875,000**
- Includes mandatory "Directives" from the United States Congress, as well as "Initiative Controls" for specific program areas

Table 2: Congressional Directive Controls

	Appropriation Year	
	FY23	TOTAL
C&T	$286,000,000	$286,000,000
OVC	$36,000,000	$36,000,000
GBV	$3,800,000	$3,800,000
Water	$600,000	$600,000

Table 3: Programmatic/Initiative Controls

	Bilateral	Central	TOTAL
Total Funding	**$415,975,000**	**$900,000**	**$416,875,000**
Core Program	$342,901,099	$0	$342,901,099
Cervical Cancer	$5,500,000	$0	$5,500,000
Community-Led Monitoring	$0	$0	$0
Condoms (GHP-USAID Central Funding)	$0	$900,000	$900,000
DREAMS	$35,000,000	$0	$35,000,000
KP Survey	$2,200,000	$0	$2,200,000
OVC (Non-DREAMS)	$7,693,900	$0	$7,693,900
VMMC	$22,680,001	$0	$22,680,001

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COP23 Budget Allocation by Program Area

	Program Area	COP22 Budget	COP23 Budget	% Change
Budget Increase	Direct Services (HTS, C&T, PMTCT), non SPS/DPS	$ 141,048,304	$ 143,919,415	2%
	VMMC (due to reduced commodities carryover*)	$ 22,680,000	$ 23,461,329	3%
	Supply Chain Programming	$ 18,975,561	$ 21,171,518	12%
	G2G (National and Provincial, NOS**)	$ 14,058,725	$ 16,459,150	17%
	OVC	$ 11,843,248	$ 12,393,248	5%
	KP	$ 7,585,784	$ 7,960,784	5%
	TB-HIV	$ 6,414,723	$ 6,496,077	1%
	Lab	$ 5,997,454	$ 6,370,671	6%
	Above Site Surveillance	$ 1,579,676	$ 3,972,622	151%
	Above Site HSS	$ 2,155,879	$ 2,820,786	31%
	GBV (NOS**)	$ 2,392,356	$ 2,689,556	12%
Budget Maintained	Commodities (including condoms)	$ 77,779,719	$ 77,779,720	0%
	DREAMS	$ 35,000,000	$ 35,000,000	0%
	Cervical Cancer	$ 5,500,000	$ 5,500,000	0%
	Above Site HIS	$ 4,377,572	$ 4,383,023	0%
	CLM	$ 3,350,000	$ 3,350,000	0%
	AS/Data quality	$ 948,766	$ 944,529	0%
Budget Reduced	PrEP (due to increased commodities carryover*)	$ 3,783,207	$ 2,673,414	-29%
	AS/Infrastructure	$ 1,857,607	$ 1,625,000	-13%

VMMC commodities budget increased and PrEP commodities budget decreased for COP23 due to impact of changes in available commodities carried over from COP22; targets increased for both

****NOS: not otherwise specified (G2G & GBV funding also included under other program areas)***

- Almost all program areas have a flat or increased budget in COP23, due to overall budget envelope increase and a flatlined commodities budget
  - Increased funding for stake holder-identified priorities (G2G/CBO funding, OVC, KP, GBV, HSS)
  - VMMC and PrEP commodities budgets impacted by available commodity carryover from COP22; but targets increased for both program areas
- LIFT UP initiative funding for up to $3M to close equity gaps for CLHIV, AGYW and KP not yet included (*pending HQ decision*)

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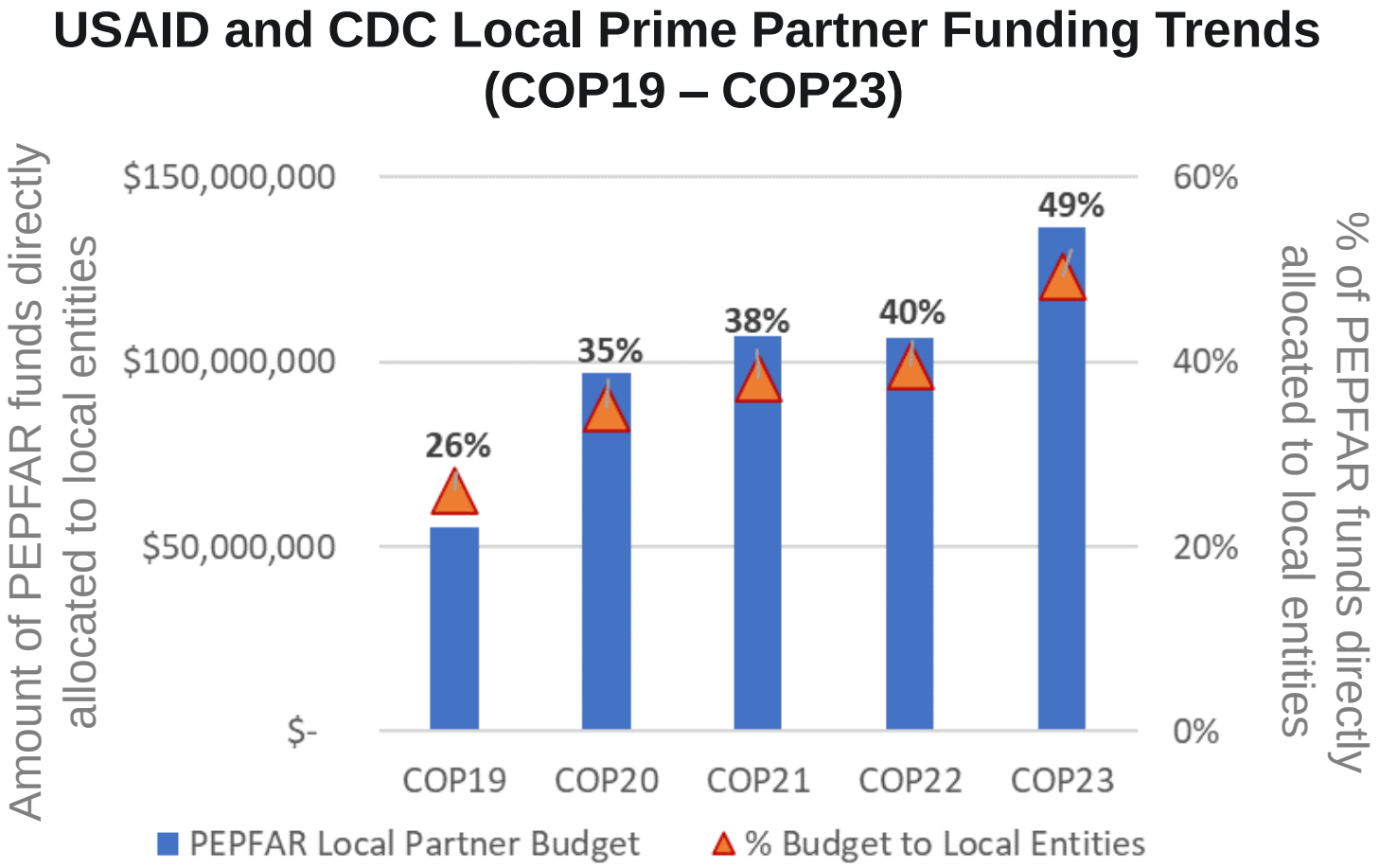
Increased Focus on Localization



*Note 1: Local partners include host government and locally-registered non-governmental organizations that receive **direct** funding from USG (no sub-awards)*
*Note 2: *Excludes commodities and USG management and operations (CODB) costs*

- PEPFAR/Mozambique has steadily increased direct funding for local and G2G partners
  - 49% local partner funding for USAID and CDC in COP23 excludes sub-awards to many local and G2G entities
  - We are working towards the PEPFAR global benchmark for 70% funding to local prime partners

Wrapping Up

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COP23: Making Progress Together

To support the achievement of 95-95-95 by December 2025, PEPFAR/Mozambique is committed to engaging all stakeholders (including affected communities) through funding agreements and effective and consistent consultation to:

- Address gaps in **equity populations**
- Provide a **continuum of services**, from combination prevention to HIV care and treatment, tailored to beneficiary needs
- Prepare for the next phase of the national HIV response through **strengthening the health system**
- Establish a joint **sustainability roadmap**

A family is tested for HIV as part of a household testing effort by a community health worker – Sofala Province

Next Steps

Finalize COP23 Process

- Resubmit COP23 tools on April 12 (Checkpoint #2)
- Await decision on LIFT Up Equity proposals
- Finalize SDS and COP23 tools by April 18
- Prepare for virtual COP23 Approval Meeting on April 25

Review COP23 Process

- Seek feedback from stakeholders on this year's process
- Document results as considerations for COP23 Y2 and COP25

Revise Consultative Processes

- Enhance processes for ongoing engagement with civil society
- Engage the National Youth Council to provide feedback to HIV stakeholders on a semi-annual basis

Estamos Juntos!

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