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HIV CARE & TREATMENT

Bi-Directional Lessons Learned Across the HIV Treatment Cascade Between the RWHAP and PEPFAR

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- Commercial support was not received for this activity.

Learning Objectives



At the conclusion of this activity, participants will be able to:

- Describe the purpose of the Bi-Directional Lessons Learned initiative
- Discuss the key findings and recommendations for bi-directional sharing including use of the white paper
- Discuss the feasibility of adoption of bi-directional lessons learned

Project Background



- The RWHAP and PEPFAR have been successful in enabling millions of people with HIV to live longer, healthier and more productive lives
- RWHAP and PEPFAR have been serving people with HIV for 30 and 16 years respectively
- Both RWHAP and PEPFAR recipients have designed and implemented successful programs to serve focus populations, geographic regions and reach the their respective program goals of reducing HIV transmission, identifying people with HIV, linking and engaging people with HIV into HIV care and providing high quality care and services to support patients in reaching viral suppression

Relationship Between Stages of the HCC and 90-90-90 Goals



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First 90 – Diagnosed with HIV

Second 90 – Linked to care and prescribed ART

Third 90 – Engaged or retained in care and achieved viral suppression



Task 4 Discussion Focus

Bi-Directional Lessons Learned Initiative

Task 4

White Paper

- Clarifies the translatable RWHAP and PEPFAR experiences along the HIV care continuum and 90-90-90 goals
- Presents recommendations to RWHAP and PEPFAR Leadership

Task 2

Literature
Review

Task 3

Stakeholder
Workgroup

Task 5

Final Report
& Webinar



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White Paper

Bi-Directional Lessons Learned Initiative

- Describes the role of HRSA HIV/AIDS Bureau (HAB) in advancing the field of HIV care through RHWAP and PEPFAR programs
- Highlights ways HRSA's HAB is helping to achieve global goals for HIV epidemic control
- Provides information to yield a greater understanding of the possibilities for bi-directional sharing

Available for Download

TargetHIV.org

<https://targethiv.org/library/bi-directional-lessons-learned>



Areas for Sharing



RWHAP >>>> PEPFAR

- Case management
- Integration of behavioral health services
- Trauma informed care
- Capacity building of local institutions
- Use of Community Health Workers (CHWs)

PEPFAR >>>> RWHAP

- Differentiated service delivery
- Sustainability index dashboards
- Data use for real-time decision making
- Rapid initiation of treatment
- Capacity building of local institutions
- Use of Community Health Workers (CHWs)






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Sharing RWHAP Lessons with PEPFAR

Intervention Strategies Aligned to HIV Care Continuum



RWHAP & PEPFAR Intervention Strategies	Diagnosed with HIV 	Linked to Care 	Engaged/ Retained in Care 	Prescription of ART 	Viral Suppression 
Medical and non-medical case management		✓	✓	✓	✓
Integration of behavioral health services		✓	✓		✓
Trauma-informed care			✓		✓
Capacity building of local institutions		✓	✓	✓	✓
Use of CHWs in treatment initiation and adherence		✓	✓	✓	✓
Differentiated services delivery	✓		✓	✓	✓
Sustainability Index Dashboards			✓		✓
Data use for real-time decision making		✓	✓	✓	✓
Rapid initiation of treatment	✓	✓	✓	✓	✓

Integration of Behavioral Health Services



- Designed to attend to a combination of mental health conditions and/or substance use disorders
- HIV-related stigma and discrimination → higher proportion of depression, anxiety, psychological trauma, and substance use than general population
- Increased ability for clients to advocate for themselves and their care when behavioral health needs are met
- Provide services in HIV care and service settings
- Global shortage of behavioral health workers/providers (especially rural communities and low-resource settings)

Trauma-Informed Care



- Histories of traumatic experiences are prevalent among people with HIV
- Trauma-informed care recognizes past trauma and the resulting coping mechanisms when attempting to understand and response to client behaviors
- Requires an organizational commitment and high levels of cultural humility
- Use of trauma-informed was include for the first time in PEPFAR 2019 COP Guidance
 - Currently no PEPFAR targets or indicators to measure trauma-informed progress

Capacity Building of Local Institutions



- Addressed in both RWHAP and PEPFAR settings, providing an opportunity for ongoing bi-directional sharing
- AETC provides training, TA, and capacity-building support for RWHAP recipients and is comprised of multiple programs
- Learning Collaborative projects offer a framework and group consultation to improve HIV care systems by defining effective, quality management plans and implementation processes
- HRSA TA projects support capacity building at jurisdictional and clinical site levels
- Capacity assessments, such as the Clinical Assessment for Systems Strengthening (CLASS) framework is a way for organizations to look at governance as well as clinical and administrative operations



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Sharing PEPFAR Lessons with RWHAP

Differentiated Service Delivery



- Adapts HIV services across the continuum to reflect the preferences and expectations of different groups of people with HIV
- PEPFAR emphasizes DSD tailored to drug delivery approaches
 - Strategies for overcoming barriers to ART retention, such as wait times in clinics
- Differentiated ART delivery intervention strategies include:
 - Multi-month ART scripting for stable clients
 - Empanelment (adapted from RWHAP)
- Analyzing disaggregated data can identify populations to engage using DSD

Sustainability Index Dashboards



- Used to assess the current state of sustainability of national HIV/AIDS responses
- Routine monitoring tool that provides critical inputs to the annual development of PEPFAR Country and Regional Operational Plans
- Broad ownership: PEPFAR teams, partners, and stakeholders work together to complete
- “Above-site” tool, aka not directly related to on-the-ground service delivery
- Designed to chart progress over time
- Not designed to be decisional or dictate investment

Data Use for Real-Time Decision Making



- This type of disaggregated, site-level data allows detailed epidemiologic analyses
- Strengthens program accountability
- For under-performing sites, PEPFAR analyzes data daily or weekly and actively monitors progress towards 90-90-90 goals
- PEPFAR Oversight and Accountability Review Team (POART) calls occur quarterly
- Programmatic data should be accessible to all users, from top-level leaders to end users
- Desire from PEPFAR stakeholders to examine interventions that were not successful and why



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Recommendations

Recommendations for PEPFAR Leadership



- Further development of trauma-informed care and integration of behavioral health services
- Build capacity within PEPFAR CSOs, particularly by improving their health literacy and strategic use of data
- Identify ways to replicate client-centered care offered through the RWHAP comprehensive care package in the various country contexts
- Include information about intervention strategies from the RWHAP community to the Inter-agency Collaborative for Program Improvement (ICIP) email digests

Recommendations for RWHAP Leadership



- Broaden audience for webinars offered to RWHAP recipients to include PEPFAR practitioners
 - Information needs to be digestible and brief
- Invite a group of RWHAP practitioners to listen to the data review meetings during the POART calls
 - These calls may increase RWHAP practitioners' understanding of how to use their data, look at problems identified by the data, and address them
- Assess the ways RWHAP could share experiences in data triangulation from multiple sources
 - Variety and different levels of data within PEPFAR

Recommendations for RWHAP and PEPFAR Leadership



- Continue opportunities for bi-directional sharing – **AIDS 2020, Ryan White National Conference and American Public Health Association**
- Identify ways to make TargetHIV, AETC website, and PEPFAR Solutions more widely known and accessible to broader audiences
- Support future replication and adoption of bi-directional interventions through RWHAP and PEPFAR funding streams
- Support mentorship in bi-directional learning opportunities by leveraging the AETC and international workforce training networks
- Facilitate bi-directional sharing of intervention strategies among direct service providers, including CHWs and peers
- Identify opportunities to work with S/GAC to create an annual award for best practices that led to best outcomes



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Acknowledgements



The Abt Associates Bi-directional Lessons Learned Team:

- Cristina Booker, Project Director
- Laura Edwards, Project Manager
- Catherine Thompson, Expert Advisor

HRSA colleagues:

- Naomi Freeman
- Laura Cheever
- Harold Phillips
- Tanchica West

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