



Global Quality Report

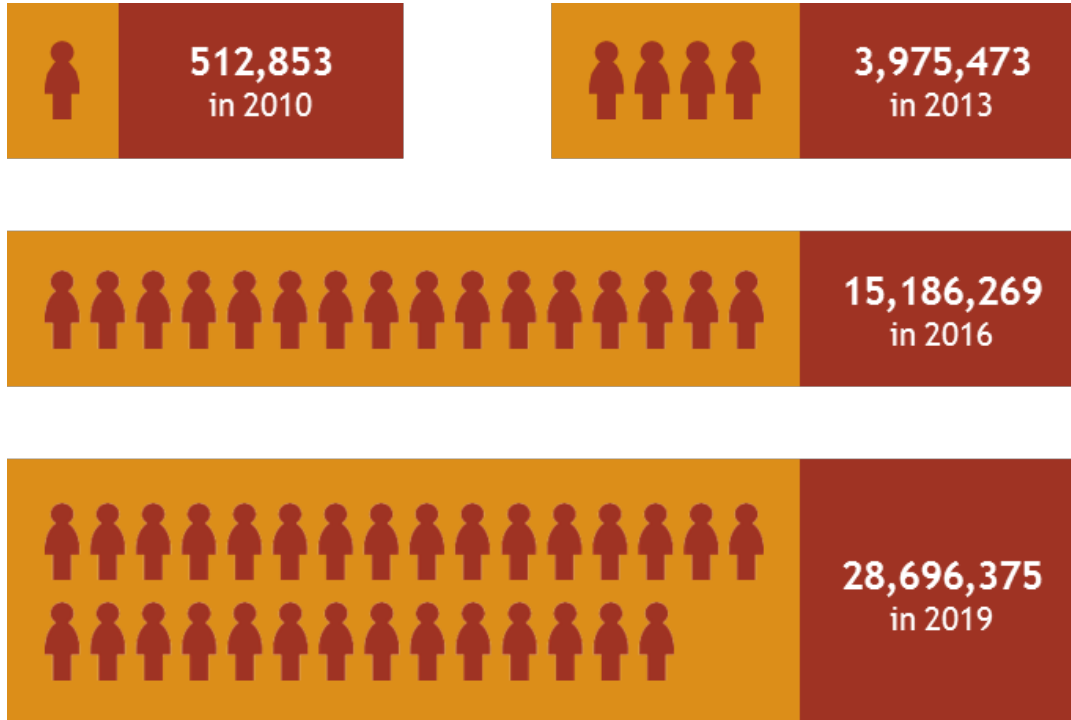
2019

Highlights

AHF

HIV Testing

More than 28 million persons were tested in 43 countries by the end of 2019

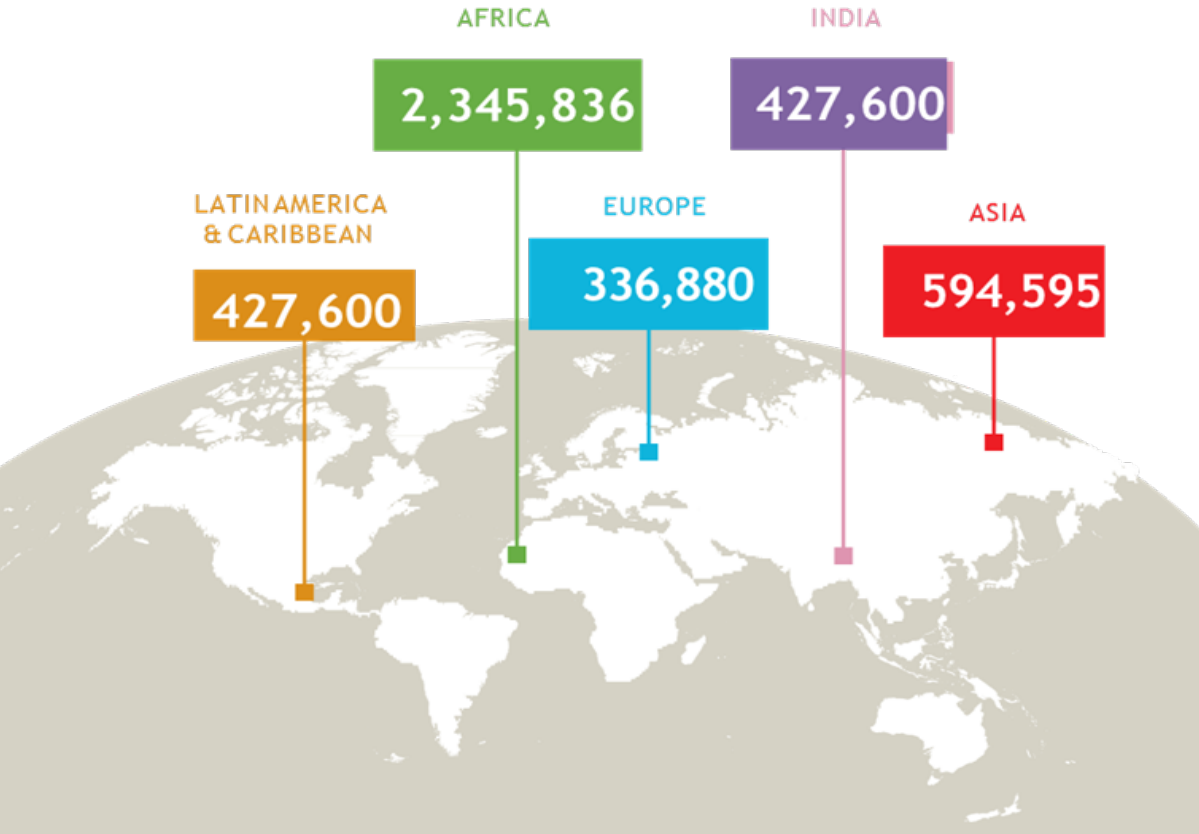


In 2019, AHF had reached over 28 million persons cumulatively with HIV testing services.

This is a result of partnership with Governments and Community Based Organizations (CBOs) currently in 43 countries under AHFs 5 Regional Bureau, Africa, Asia, Europe, Latin America and India that play an active role in implementing and sustaining the quality of AHFs prevention program.

AHF Prevention Program 2019

Testing by Regional Bureaus



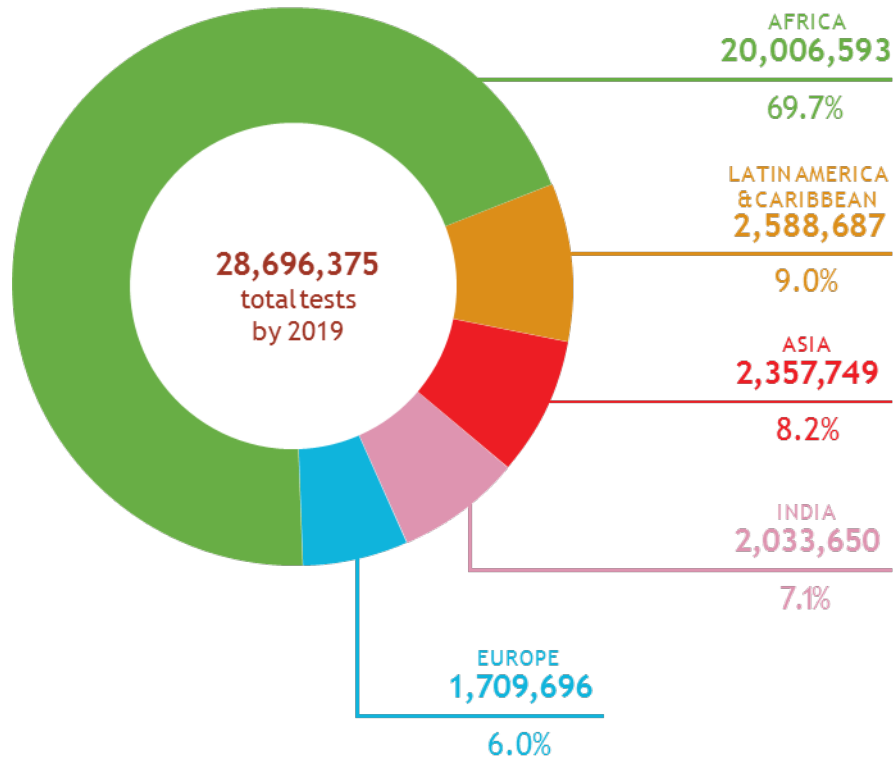
In 2019 alone, over 4 million HIV tests were performed.

Variety is related to the total number of test programs and facilities supported in each of the Regional Bureaus, which had set their targets accordingly.

Performance against these targets was excellent overall, exceeding targets rather than underachieving.

HIV testing

Distribution by Regional Bureaus



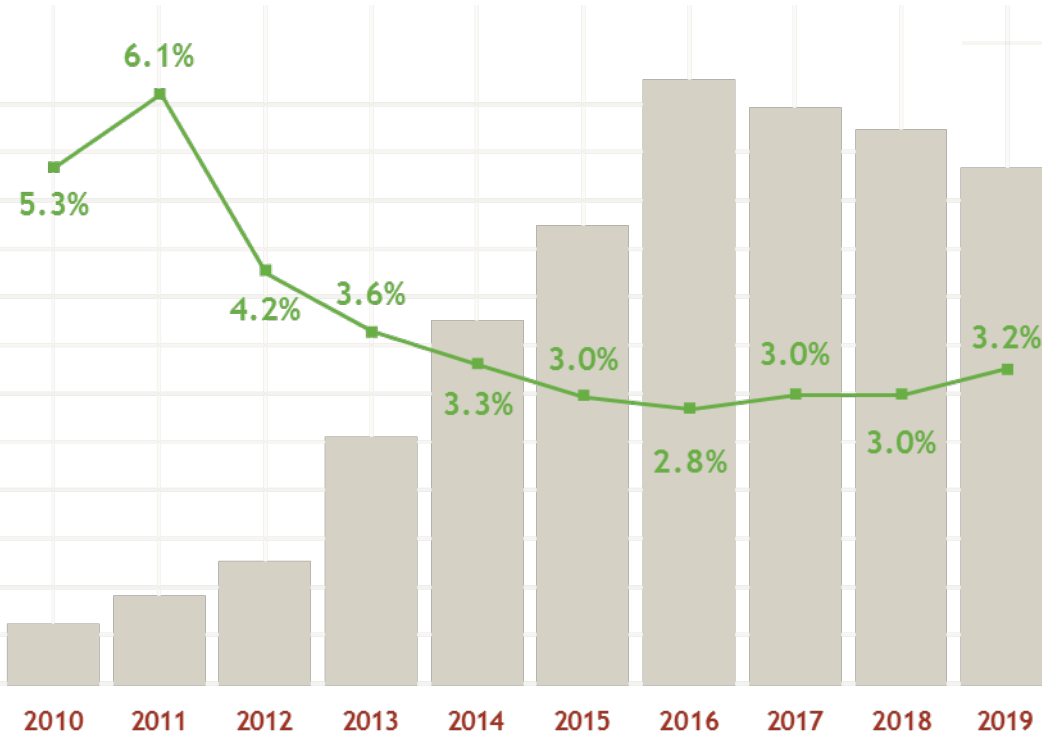
Regions continue to play an active role in implementing and sustaining the quality of AHFs prevention program.

Africa Bureau accounts for a larger share in the cumulative number of people tested over the years.

Of the over 28 million tests conducted, Africa Bureau accounts for 70%, followed by Latin America and Caribbean Bureau at 9%, with the Europe Bureau accounting for 6%.

HIV testing

Increasing numbers of people get to know their HIV status

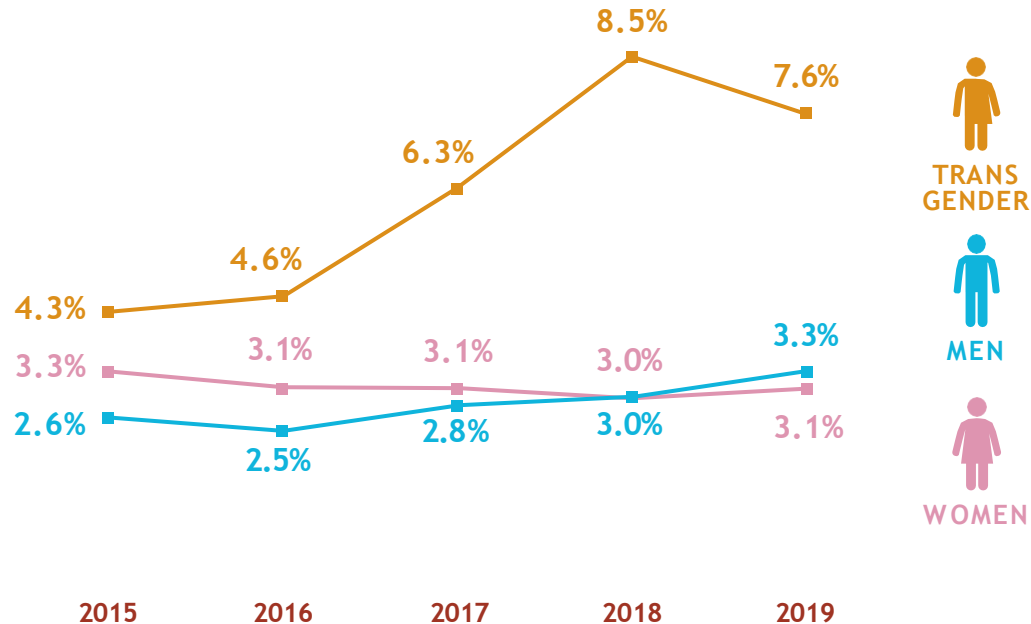


The overall percentage of newly infected persons among those tested has stabilized in the past five years at close to 3%, while total numbers tested decreased, pointing at the effect of targeted testing.

Countries apply effective and increasingly novel strategies in targeting PLHIV who are unaware of their status

HIV positivity

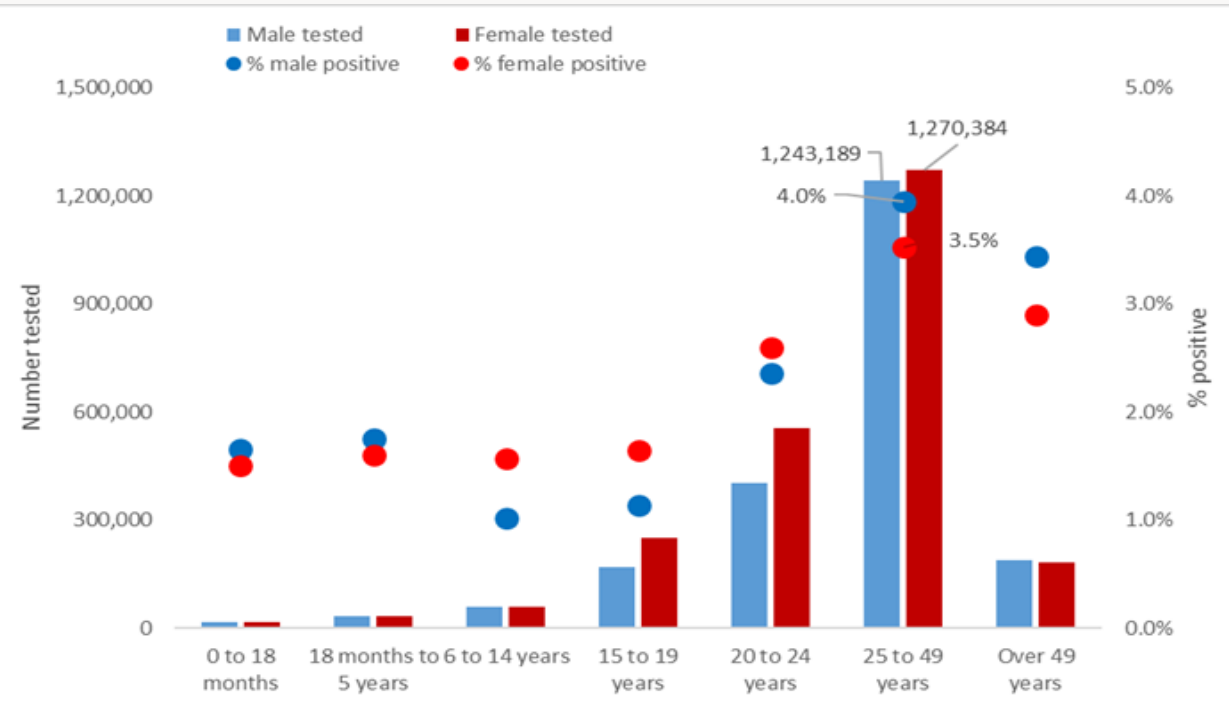
Positivity rate by gender 2015-2019



Throughout the past 5 years positivity is slightly higher among females than among men, mostly caused by the Africa data where consistently more women than men tested positive, whereas in the other bureaus more males than females test positive.

Transgender clients in India and the Latin America & Caribbean Bureaus have consistently high positivity, though total numbers of them tested are low, yet indicating that this vulnerable population deserves more attention.

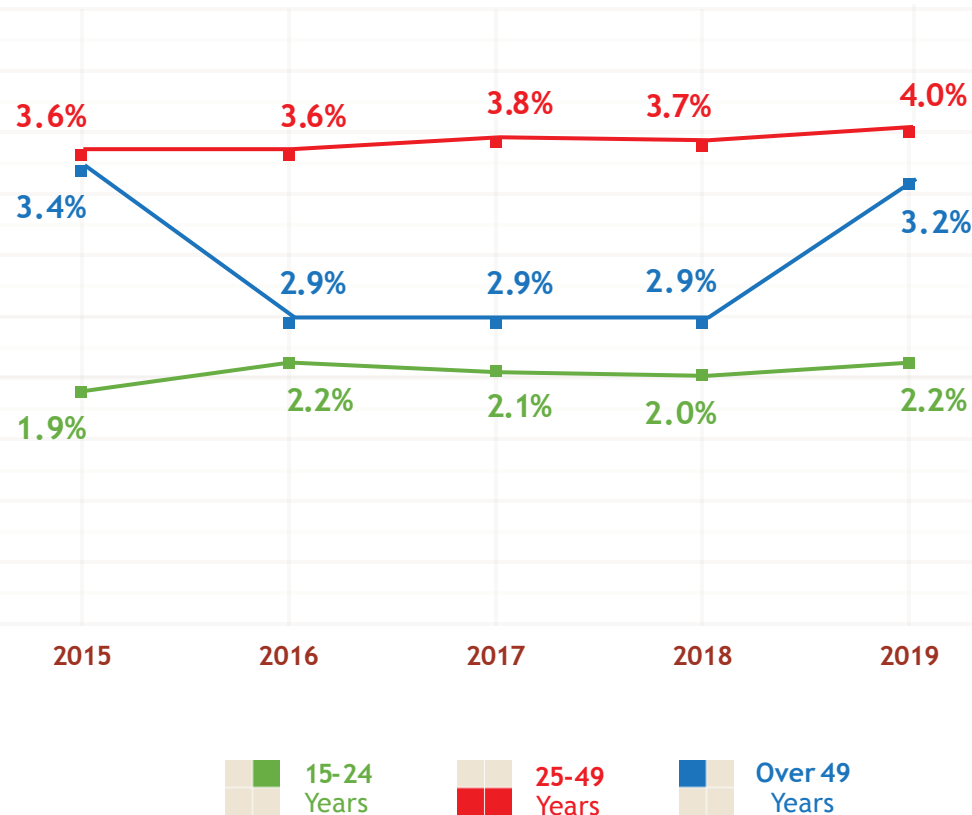
HIV-Test-positivity in 2019



In 2019 the overall positive yield appears highest (4%) among males in the 25 to 49 age group, home to the vast majority of testing, whereas in the younger age groups females test more often positive.

HIV testing

5 years trend in positivity ratio

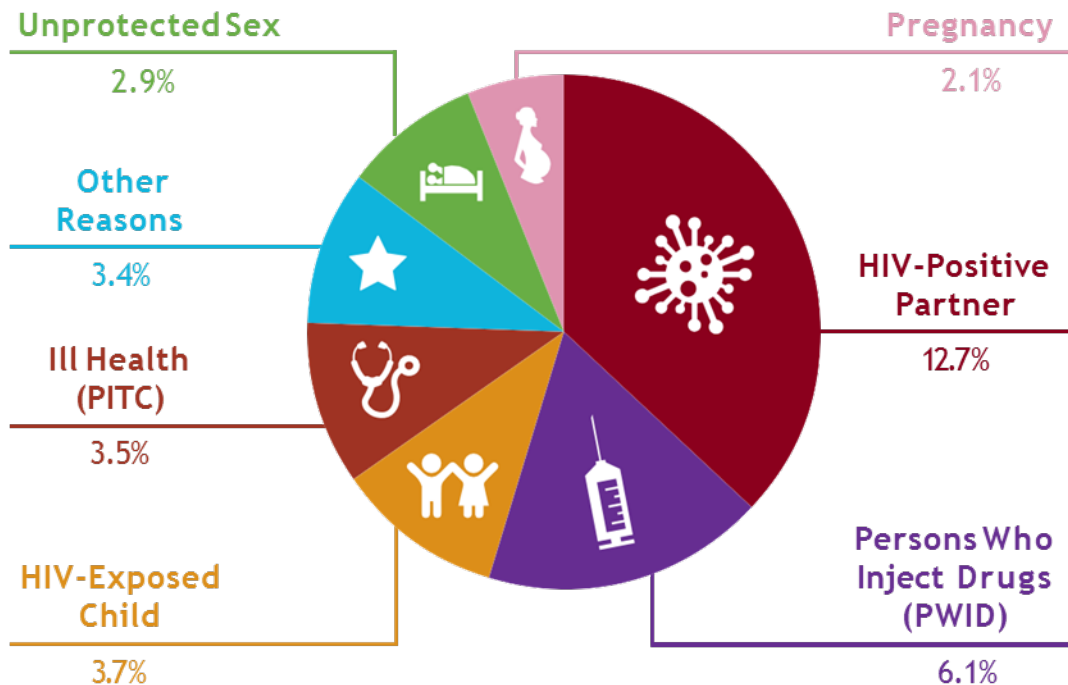


Positivity by agegroup shows little change over the past 5 years.

Overall positivity appears higher in the 25-49 year group, but there is large variation between countries.

HIV positivity

Reason for being tested in 2019

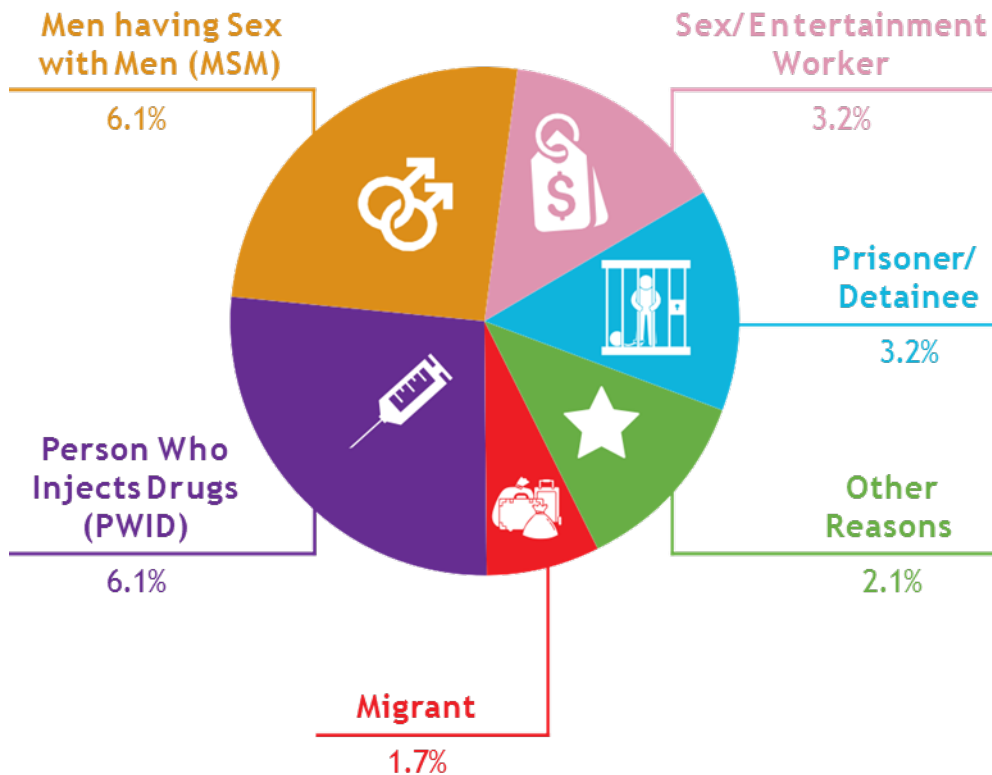


More concerted efforts are required to reach Persons Who Inject Drugs (PWID) and partners of HIV positives (index- testing) as they yield high positivity

Provider Initiated Testing & Counseling (PITC) for clients attending health facilities identifies many positives and should be intensified.

HIV Test-Positivity

Key and vulnerable populations 2019

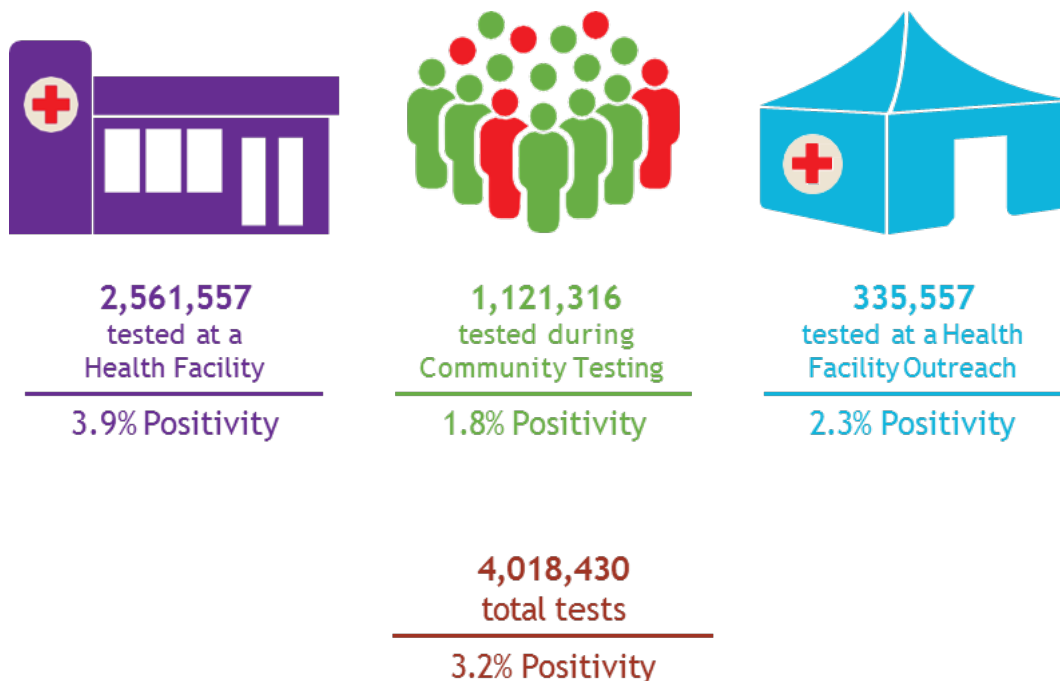


Innovative strategies are required to reach Men having Sex with Men (MSM) and People Who Inject Drugs (PWID) as they yield higher positivity rates.

Prison rates are substantial and call for effective prison HIV control programs.

HIV Test- Positivity

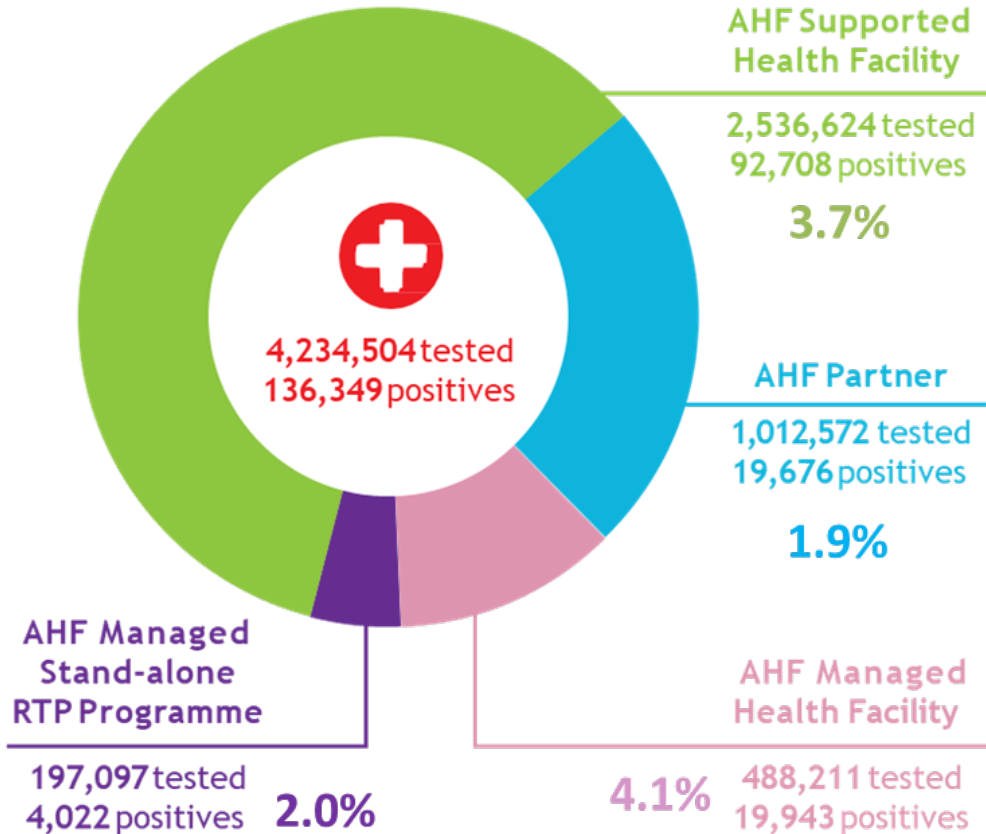
Testing by setting 2019



Positivity is highest in the Health Facility set up as compared to Community Testing or Health Facility Outreach Testing.

HIV Test - Positivity

Testing by program in 2019

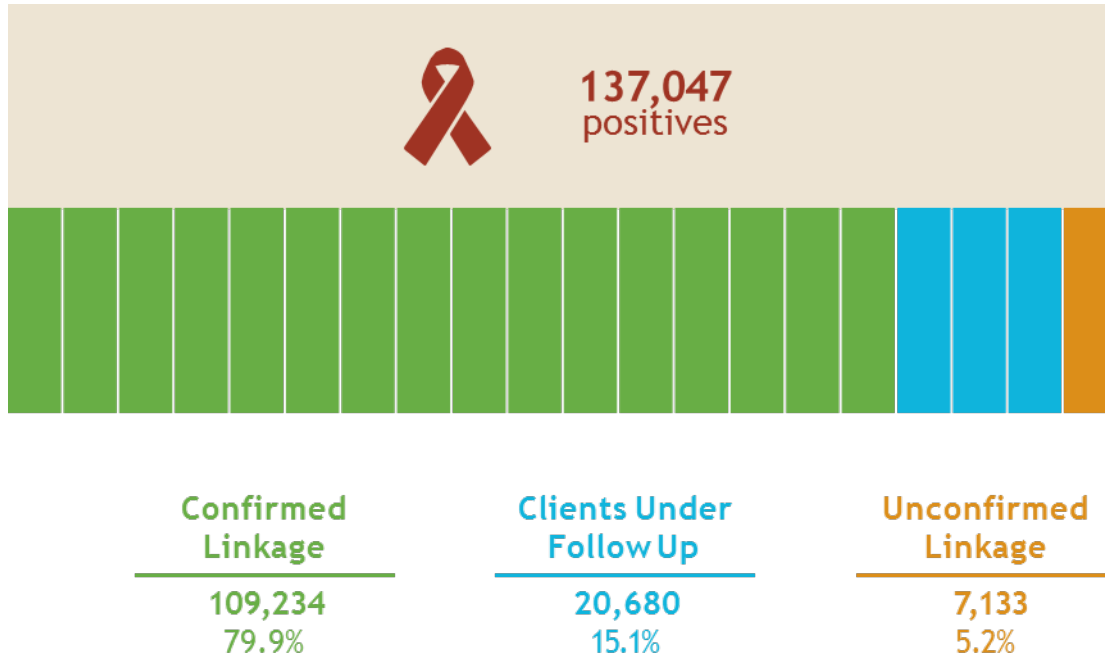


More than three quarter of all tests are carried out in health facilities, the remaining outreach testing, partner programs and AHF Rapid Test (RPT) programs, took place in a community setting

Compared to the other AHF test programs, positivity yield is significantly higher in AHF supported or managed health facilities than in community testing

Linkage into Care and Treatment

"Confirmed Linkage"



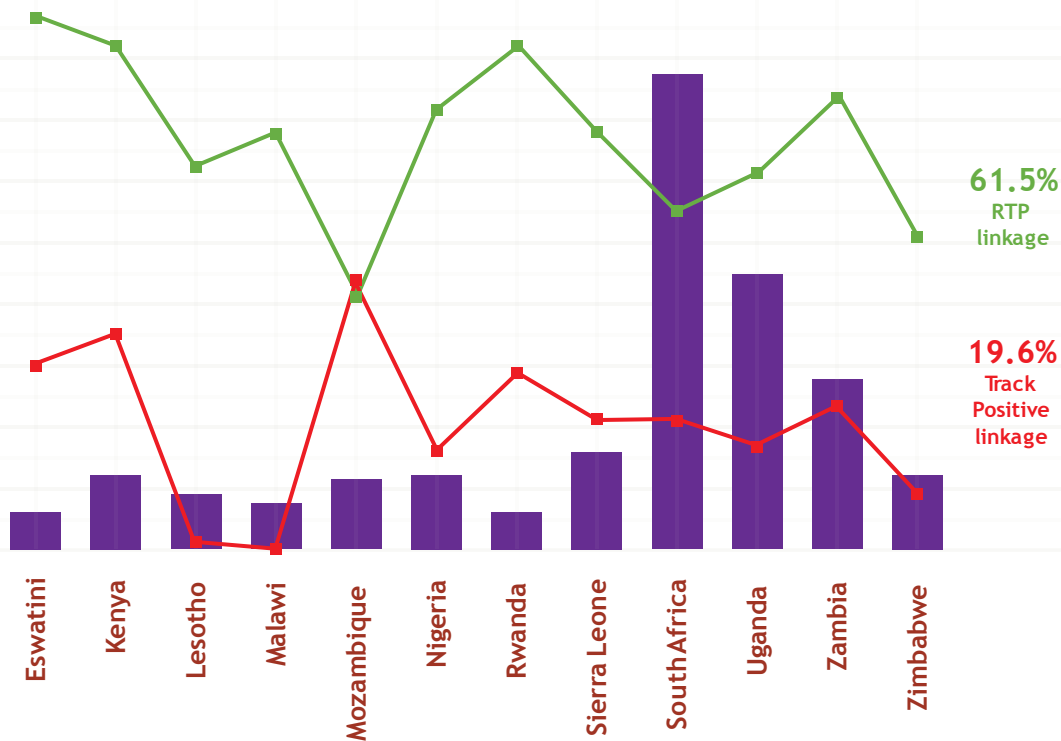
"Confirmed linkage" applies to an HIV-positive client who has attended a facility two consecutive times and is enrolled into care through an HIV-care facility registration or ID number.

For the >137,000 clients who tested positive in 2019 almost 80% were reported linked to a Care&Treatment Facility.

However, often confirmation is missing, when strictly adhering to the definition of confirmed linkage.

Linkage Variance

"Track Positive" tool - Africa Bureau



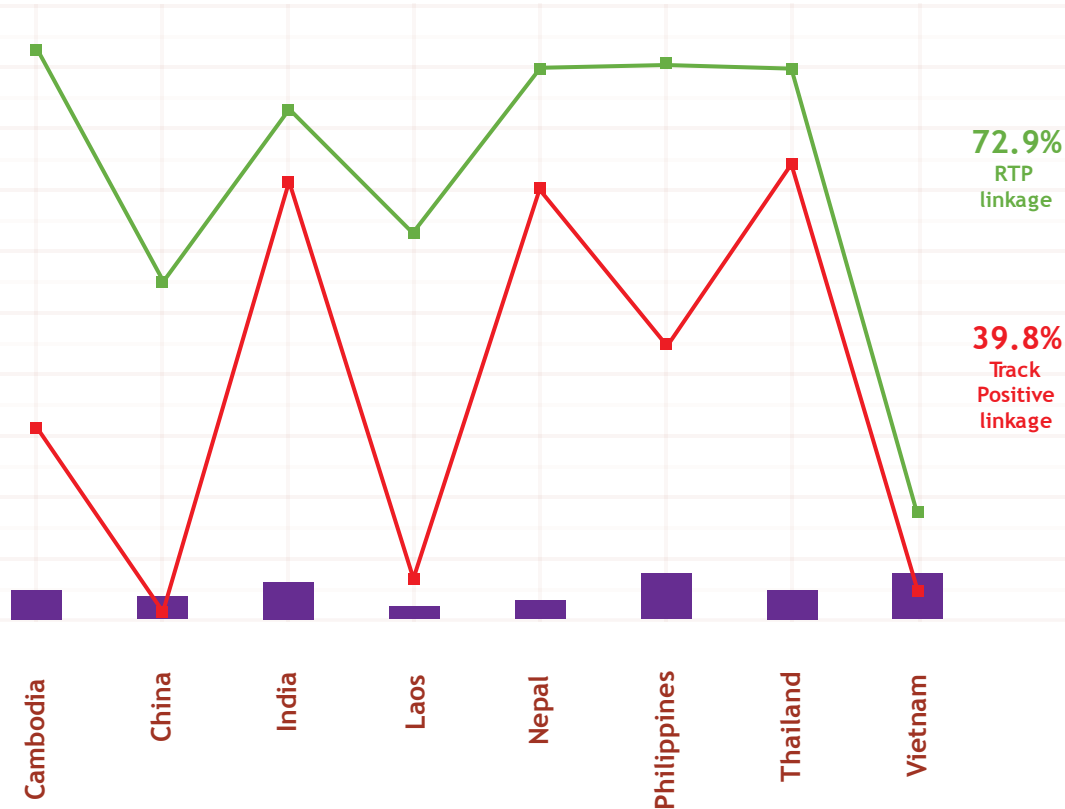
Track positive is an online digital tool that brings about visibility and eventually confirmation of Linkage by monitoring the whole process until enrolment in care.

It documents when a client was diagnosed positive, where the client was referred to, how the follow-up was done, where the client was enrolled and it eventually confirms linkage by providing the dates of two consecutive visits.

Being introduced in Asia, Africa and India Bureaus in 2019, it validates the results of the routine reports

Linkage Variance

"Track Positive" tool - Asia Bureau

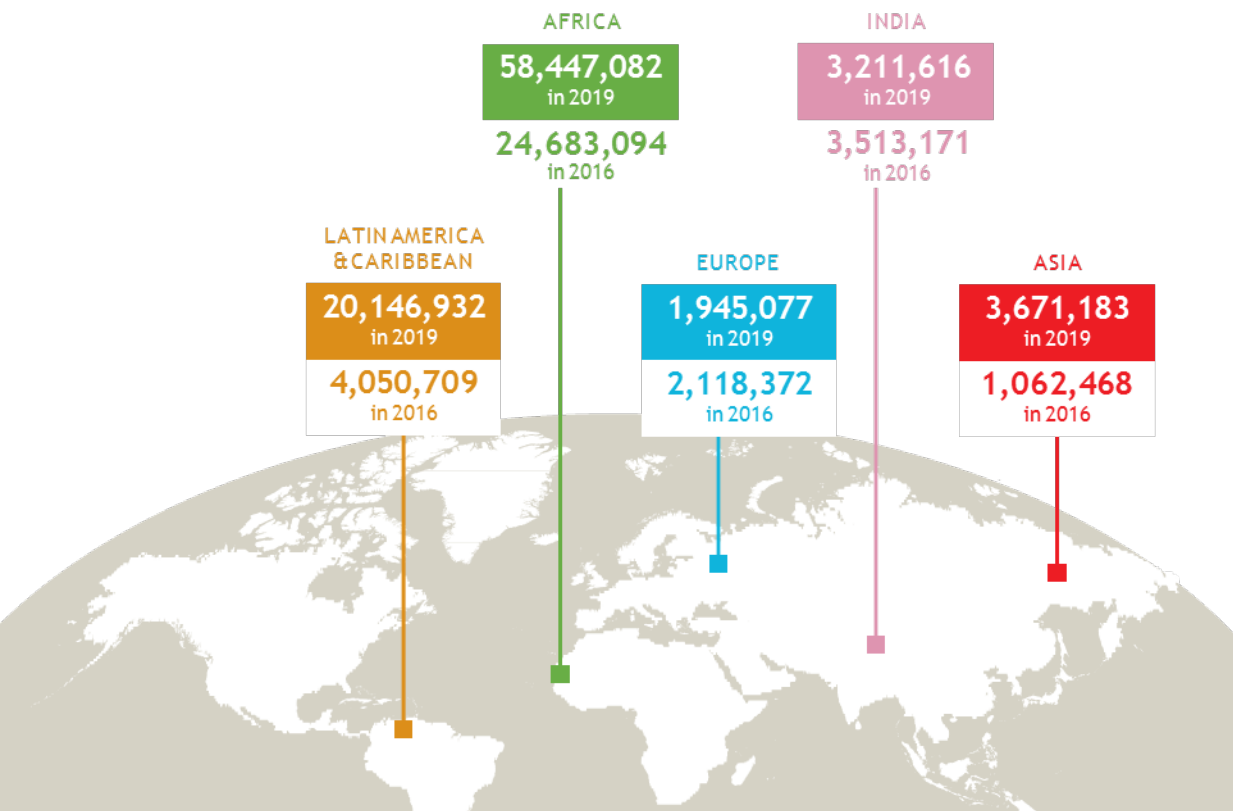


The variance shows that for all countries that began reporting through "Track Positive" the confirmed linkage rates were significant lower than those reported through the routine monthly reporting.

This is mostly explained by the fact that just referring the client to a C&T facility is recorded as "Linked" without the required confirmation.

AHF prevention program

Growth of Condom Distribution 2016-2019



More condoms were distributed in 2019 as compared to 2016, due to reinvigorated efforts by the bureaus and streamlined reporting process by the Global HMIS.

AHF prevention program

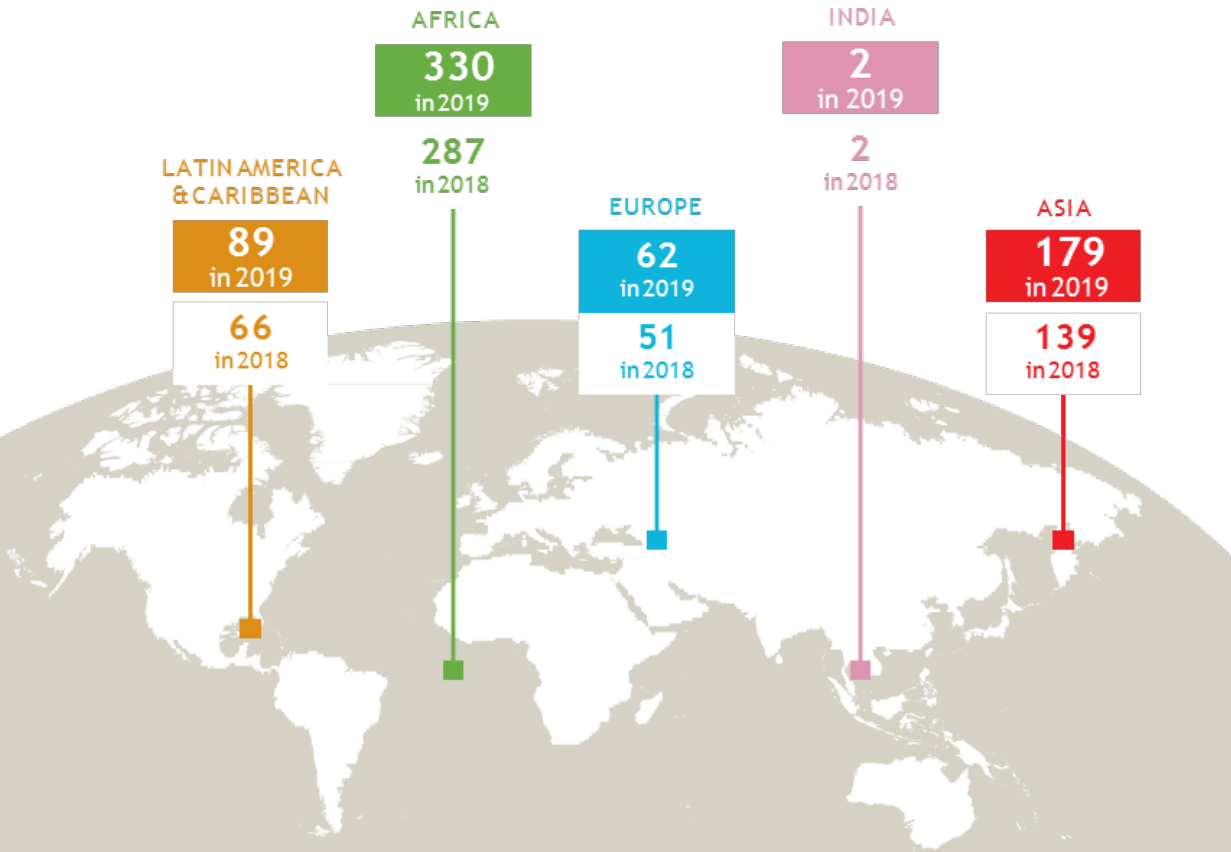
Growth of Condom Distribution 2016-2019



The introduction of online reporting has seen timely submission of inventory reports and close monitoring of consumption by the countries.

HIV Care and treatment

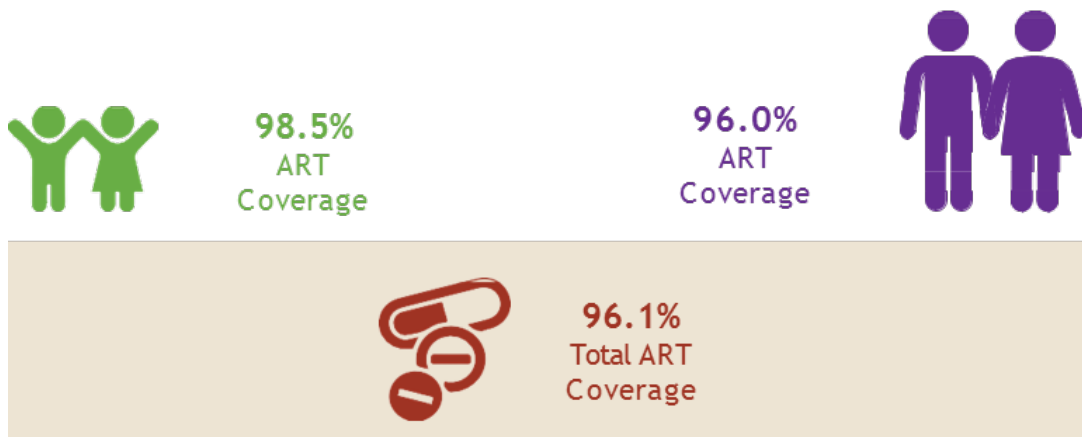
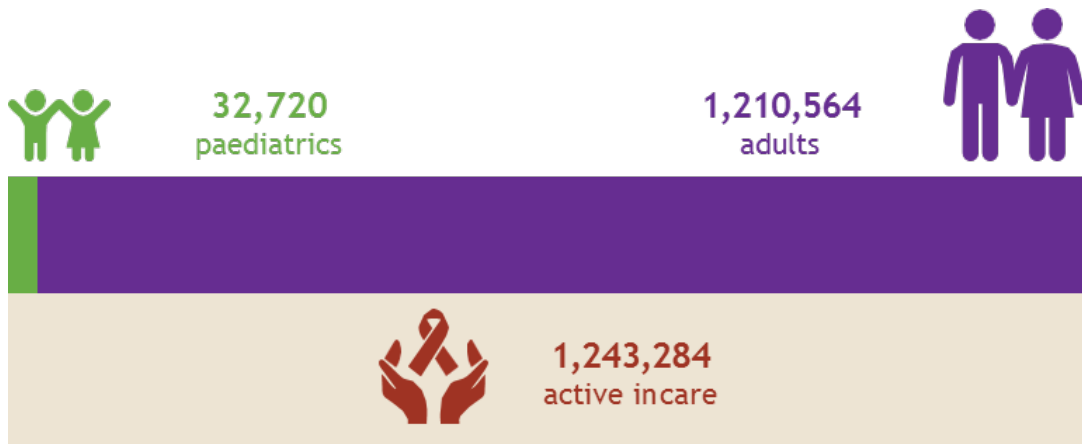
Increase of facilities by bureau 2018-2019



AHF-managed and supported facilities providing HIV care have grown exponentially over the years, from 94 in 2012 to 662 by the end of 2019.

HIV Care and treatment

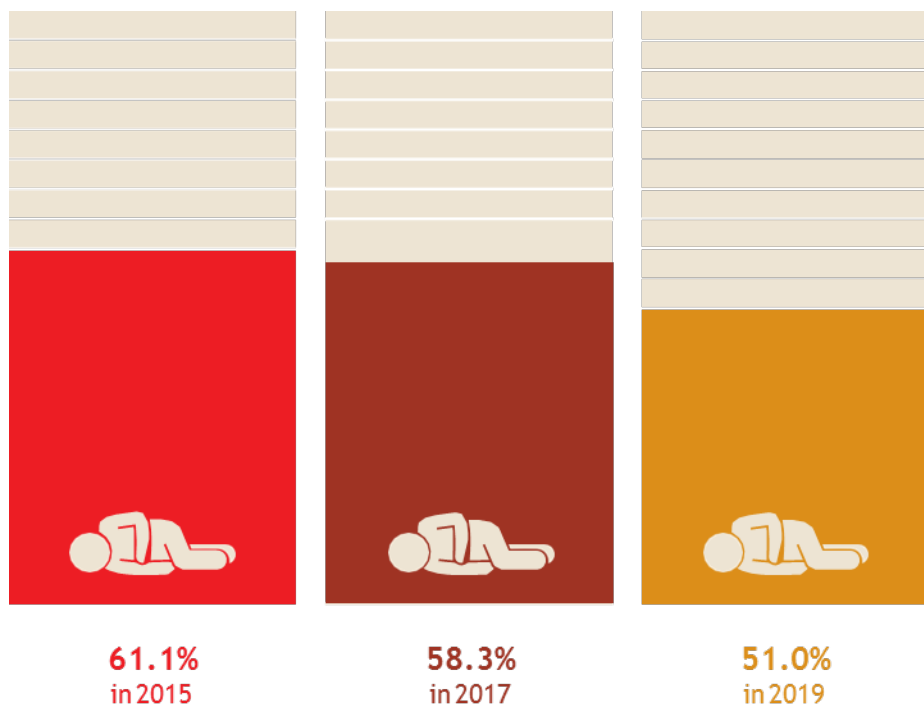
Over 1 million lives in HIV care (2019)



Improved uptake of the 'Treatment for All' strategy for identified positive clients in all countries has seen increased ART coverage and dwindling numbers of clients not-on-ART.

Mortality trends

Continued decline in HIV-related deaths over the years

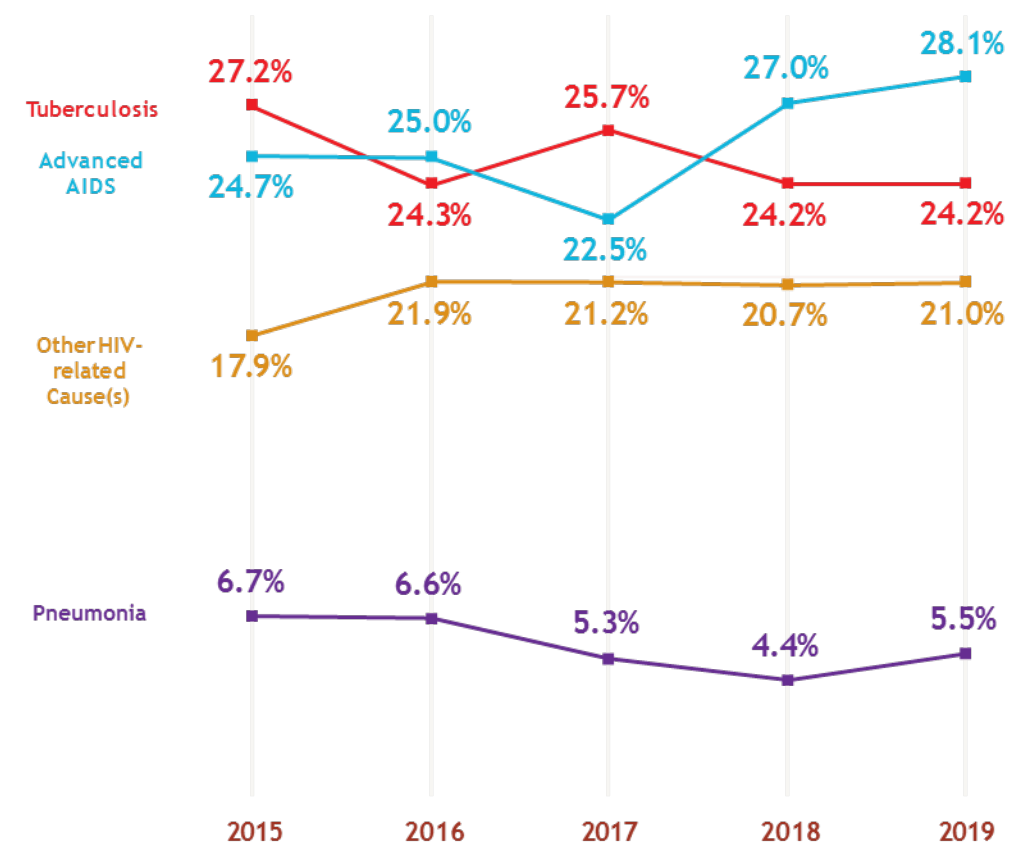


There has been a marked decline in the proportion of HIV-related death among total deaths (61% and 51% in 2015 and 2019 respectively) as reported by AHF Global Program facilities.

Tuberculosis, Advanced HIV Infection and Pneumonia have been leading causes of death in all the 5 years.

Top 4 HIV-related Death Causes

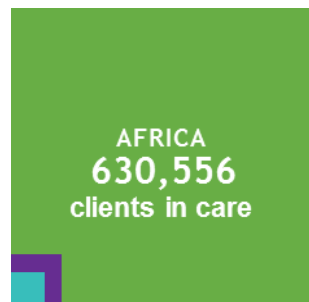
Five-year mortality trend by cause and by year



	2015	2016	2017	2018	2019
Tuberculosis	27.2%	24.3%	25.7%	24.2%	24.2%
Kaposi Sarcoma	1.5%	1.1%	0.9%	1.1%	0.8%
Lymphomas	1.1%	1.4%	1.3%	1.0%	1.3%
Cytomegalovirus	0.2%	0.4%	0.2%	0.5%	0.1%
Cryptococcal Meningitis	3.1%	3.1%	4.1%	3.5%	2.5%
Pneumonia	6.7%	6.6%	5.3%	4.4%	5.5%
PCP	2.1%	1.7%	2.9%	2.5%	2.3%
Sepsis	3.0%	2.5%	2.4%	3.0%	2.3%
Cirrhosis / ART induced liver failure	2.5%	2.7%	4.3%	2.5%	3.1%
ART induced renal failure	1.1%	0.9%	1.2%	1.7%	1.8%
ART-induced anemia	1.4%	1.3%	1.2%	1.2%	1.0%
Severe ART side effects	0.1%	0.1%	0.3%	0.3%	0.2%
Toxoplasmosis	1.6%	1.5%	0.9%	1.3%	1.1%
Bacterial meningitis	2.3%	1.5%	1.0%	0.8%	0.7%
Cryptosporidiosis / Chronic diarrhea	2.0%	2.3%	2.4%	2.2%	2.0%
Treatment failure	1.5%	1.7%	2.0%	2.1%	2.0%
Advanced AIDS	24.7%	25.0%	22.5%	27.0%	28.1%
Other HIV-related cause(s)	17.9%	21.9%	21.2%	20.7%	21.0%

Clients No-Longer-In-Care

Proportion by Regional Bureau (2019)



102,039 NLIC 13.9%
69,675 LTFU 9.5%



8,127 NLIC 7.2%
2,443 LTFU 2.2%



30,534 NLIC 9.6%
17,941 LTFU 5.6%



22,776 NLIC 12.1%
15,383 LTFU 8.2%



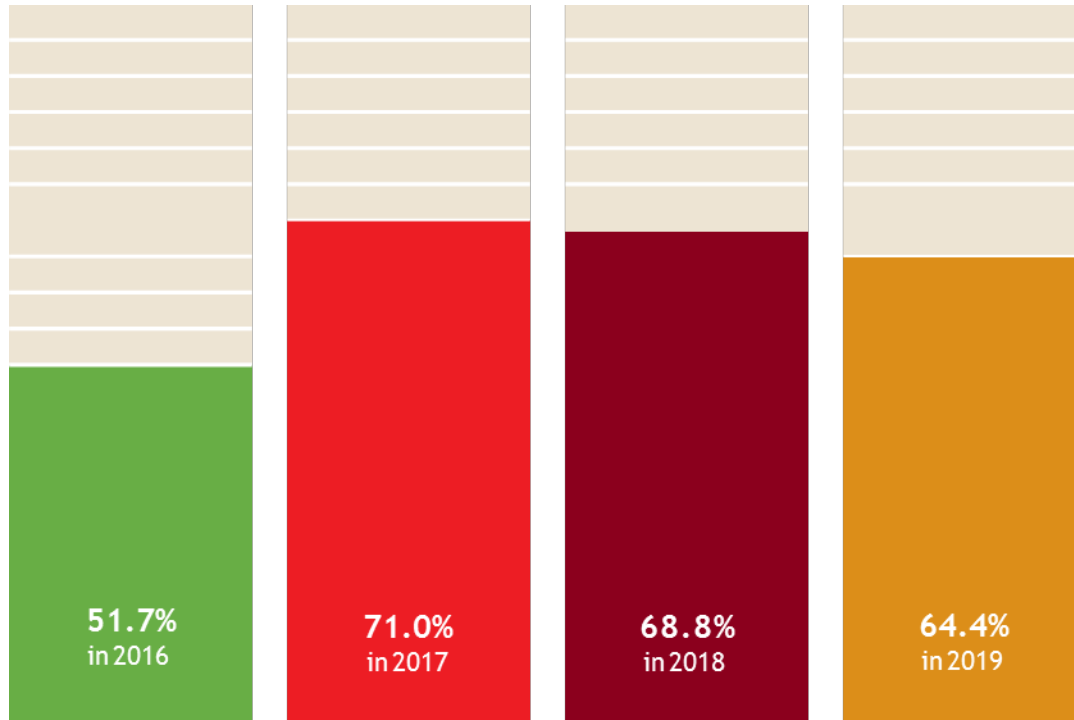
369 NLIC 12.1%
150 LTFU 4.9%

Clients “No Longer in Care” (NLIC) are not anymore attending the reporting facility for HIV care and treatment. The reasons:

1. Transfer Out: clients are linked to another C&T facility after initial enrolment in the transferring facility.
2. Relocated: clients who have migrated to another area of residence and may have accessed a C&T facility to continue care.
3. Refused Treatment
4. Lost to Follow-Up (LTFU): clients who did not attend a clinical consultation or did not pick up ARV drugs within 90 days (≤ 90 days) after their last missed appointment.

Clients Lost-To-Follow-Up

Proportion LTFU among all clients reported as No-longer-in-Care 2016-2019

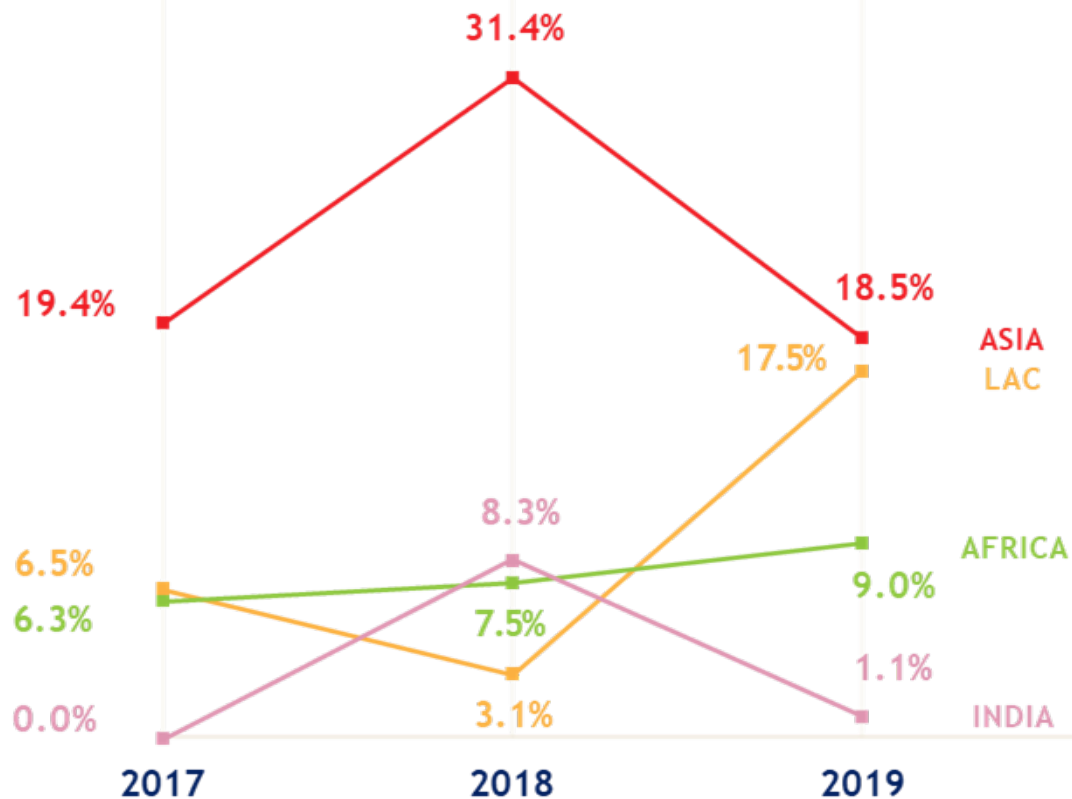


A high proportion of clients is reported as Lost-To-Follow-Up (LTFU) among clients No-Longer-In- Care (NLIC).

Optimize Retention Initiative (ORI) is aimed at reversing this trend through increased client satisfaction and improved care, less LTFU and discontinuation of treatment as well as addressing HIV-related mortality.

Clients Returned to Care

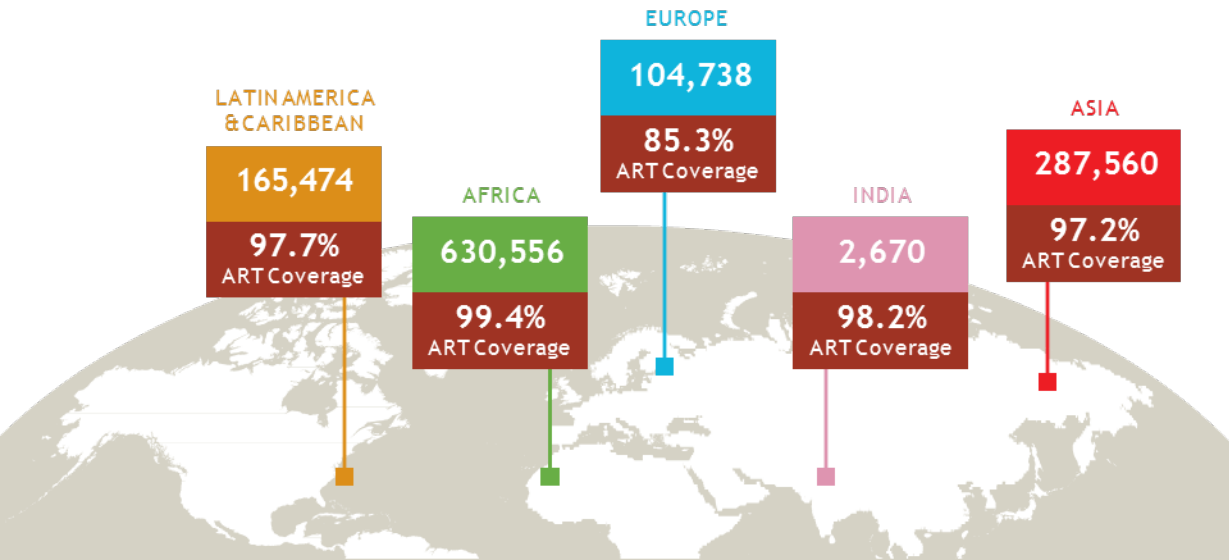
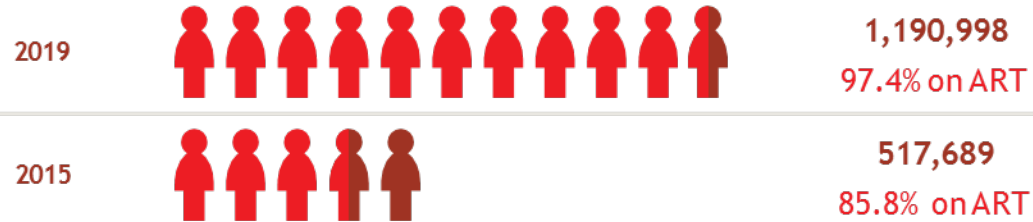
Increased numbers of clients returning in care



Countries have invested in efforts to follow up clients no longer in care.

Globally, more clients were returned to care in 2019. Asia and the Latin America and Caribbean Bureaus reported the highest proportion of clients brought back to care in 2019

Clients initiated on ART



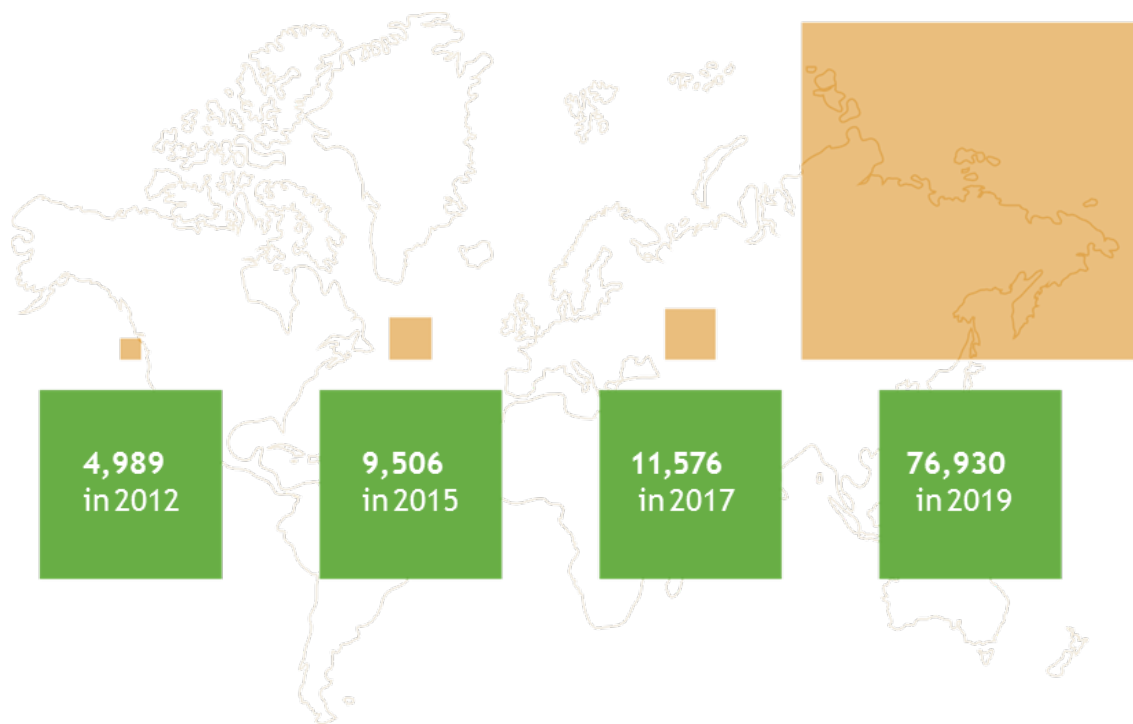
Percentage of clients on ART has improved to near 100% with growth of clients active in care to over 1 million in 2019*.

Early ART initiation for newly identified positives and an increase in the number of AHF supported facilities globally have boosted ART coverage

Africa Bureau supports more than half of the total active clients with 99% ART coverage.

* Census excludes wellness centers in Latin America

Census Growth - Wellness clinics (2012-2019)



Wellness Clinics managed by AHF in the Latin America and Caribbean Bureau provide comprehensive preventive care, HIV Testing and STI management for PLHIV. Clinics have increased over time, supporting an ever growing number of clients, reaching 76,390 by 2019.

Structured reporting on WebPPR has facilitated streamlining of reports for wellness clinics where multiple indicators can now be tracked.

Global Medical, Quality and HMIS Teams Core Objective

to be assured, through data and evidence,
that every AHF patient is receiving
an excellent standard of care

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