



Indonesia. Photo Credit: Andi Gultom/Chemonics

Accelerating Progress Toward HIV Epidemic Control

An estimated 38 million people are living with HIV globally, yet only two-thirds are on the treatment they need to live productive lives.¹ With more than a decade of experience accelerating the global response to HIV/AIDS, Chemonics' network of health experts shares a simple value: The challenges we face today are best solved by sharing knowledge, expertise, and experience to deliver results. We pursue a higher standard to help communities achieve and sustain HIV epidemic control.

Our Work

Progress against HIV requires integrated approaches that consider economic, sociocultural, political, and environmental factors. Working with national and subnational governments, the private sector, and affected communities, we enable local partners to lead, scale, and institutionalize the delivery of more equitable, high-quality HIV services. We leverage our crosscutting in-house expertise in health systems strengthening to design and implement innovative, sustainable solutions that strengthen efforts to eliminate HIV transmission. Through our data-driven, accessible, resource-efficient, and sustainable approaches, we improve the lives of those infected and affected by HIV/AIDS around the world, even as the COVID-19 pandemic threatens the provision of essential health services.

Optimizing the Health Workforce to Achieve HIV Goals

A strong health workforce is essential to reaching and sustaining HIV epidemic control. Through the [USAID Nigeria Strategic HIV/AIDS and TB Response Program \(SHARP\) Task Order 1 and 3 \(TO1, TO3\)](#), we worked with local partners to improve the distribution and effectiveness of HIV case managers at more than 200 government-supported facilities in Northern Nigeria. We analyzed existing data to adjust case managers' client ratio and individual targets. This increased case findings, client retention, and viral load collection coverage and suppression rates.

Through the [USAID Human Resources for Health in 2030 \(HRH2030\)](#) program, we collaborate with local governments to plan and manage the number and types of health workers to effectively combat HIV/AIDS. Leveraging tools such as the [HRH Optimization Tool for Antiretroviral Therapy](#), we support countries to assess the composition,

¹ <https://www.unaids.org/en>; <https://www.hiv.gov/hiv-basics/overview/data-and-trends/global-statistics>

BY THE NUMBERS



27.9M
viral load tests to
17 COUNTRIES



12.5M
patient-years of
HIV TREATMENT
provided through the
provision of ARVs



293
PEPFAR-supported
HEALTH WORKERS
TRANSITIONED TO
GOVERNMENT PAYROLLS
in Malawi in first major
transition from PEPFAR
to local government

workload, and functions of health care workers. We support decision-makers to consider more efficient staffing and/or differentiated service delivery models, promote high performance, strengthen community-facility linkages, and advance evidence-based innovations, such as multi-month distribution (MMD) of antiretroviral medicines (ARVs).

Strengthening Health Supply Chains to Procure, Deliver, and Monitor HIV Commodities

Through the [USAID Global Health Supply Chain Program—Procurement and Supply Management \(GHSC-PSM\) project](#), [GHSC Francophone TO](#), and [Integrated Health Supply Chain—Technical Assistance Activity in Côte d'Ivoire TO](#), we ensure the uninterrupted supply of essential HIV commodities to places where they are most needed for progress toward global 95-95-95 goals. GHSC-PSM provides technical assistance to ensure the procurement and delivery of vital commodities for HIV, including ARV, condoms, voluntary medical male circumcision kits, and viral load and early infant reagents. To date, Chemonics has supported the direct procurement of HIV commodities in 40 countries and used HIV/AIDS funding to strengthen health systems in 32 countries.

We use in-depth analyses of market dynamics, market-based approaches, and supply chain delivery innovations — such as unmanned aerial vehicles and leveraging private sector partners — to support greater ownership among subnational governments to provide cost-effective HIV services and commodities.

Enabling Local Partners to Strengthen the HIV Response

Building the capacity of local stakeholders and communities to support sustainable health systems is a key tenet of Chemonics' programming. We work with local governments and diverse private sector partners to develop the tools and information to pursue evidence-informed actions that optimize human, financial, material, and technical resources to deliver high-impact HIV services:

- Through technical assistance and commodity procurement, we support countries' transition to the newest combined treatment (Tenofovir, Lamivudine, and Dolutegravir) and MMD; and we build capacity in data analysis and budgeting for improved resource allocation and decision-making.
- In **Indonesia**, we strengthened capacity of facility-, district-, and province-level stakeholders to use HRH, and HIV data to improve the quality of HIV care.
- In **Haiti and eSwatini**, we built country capacity to strengthen laboratory forecasting and supply planning to ensure that health ministries could procure their own viral load testing reagents, specimen collection consumables, and testing equipment to contribute to reaching the third 95.
- Through training in **Malawi**, we increased the competency of health care workers to manage clients on ART and increased the number of health workers providing HIV/AIDS services.

SNAPSHOT ON NIGERIA

Supporting Local Partners to Build Resilient Systems for HIV Epidemic Control in Nigeria

As the lead partner on USAID GHSC-PSM and USAID SHARP TO1 and TO3 in Northern Nigeria, Chemonics provides critical technical assistance for supply chain management and clinical service delivery to improve HIV and TB outcomes. Through these projects, we work across the continuum of care, from building government capacity to deliver HIV commodities to working with health workers and community ART groups so that ARVs reach patients.

Through Nigeria SHARP TO1 and TO3, we work in 146 facilities across 11 states to assist the Nigerian government, frontline health workers, and communities to deliver high-quality HIV and TB services. Concurrently, through the GHSC-PSM project, we support health ministry staff in all 36 states to scale HIV services by providing an uninterrupted supply of HIV commodities and developing laboratory networks for efficient viral load testing and TB diagnosis. In response to COVID-19, SHARP applied differentiated service delivery models to ensure continuity and increased equity of access to HIV/AIDS services and commodities. We expanded and accelerated MMD of ART, adding new clients for treatment and increasing rates of viral load suppression. GHSC-PSM engaged private sector partners in Nigeria's lab sample network to enhance access, efficiency, and accuracy of quality testing; it also strengthened the supply chain processes amid COVID-19 and future emergencies. Implementing a patient-centric treatment approach has reduced the burden of care for local partners and increased resiliency of Nigeria's health service and supply chain systems.

