Health system strengthening: Expansion of HIV testing and counseling (HTC) programs/centers to extend services for non-communicable diseases (NCDs) in Africa

Situation

During the peak of the HIV/AIDS epidemic, the World Health Organization (WHO), United Nations and governments across Africa launched many aggressive initiatives to tackle the spread of HIV and AIDS. One of which involved the setting up of HIV/AIDS counseling and testing (HTC) centers across Africa designed to create awareness, conduct testing services, provide trainings to health-care workers, delivery of free contraceptives and distribution of anti-retroviral to those affected¹⁻³. The initiative is one of the biggest collaborative health efforts seen in the world where dedicated resources, infrastructure, labs, skilled labor and systems were put in place to tackle the disease. The efforts have paid off over the years, as witnessed by the reduction in burden of disease of new infections reported in the past 15 years⁴. The outcome of this was felt in the health systems infrastructure where funding was cut drastically leaving many of the HTC centers/programs being underutilized ^{5,6}. At the same time, Non-communicable diseases (NCDs), such as cardiovascular diseases, cancers, diabetes, and chronic respiratory diseases, became the leading cause of death in most regions of the world⁷.

Africa is expected to have the world's largest increase in NCD deaths over the next decade⁷. This will impose a significant burden to the continent, which is also projected to see its population double within the next generation^{7,8}. Africa has taken tremendous strides in reducing the burden of communicable diseases but with the increase in NCDs tremendous pressure is being placed on the already over stretched health systems across the continent ⁸. The United Nations recognizes the need to reduce NCDs and therefore included it in the sustainable developments goals (SDG) i.e SDG 3.4 by 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

Proposal

To collaborate with NGO's and Ministries of Health's to revamp the existing health system infrastructure of HTC to extend the inclusion of programs involving NCD's. The reach of the HIV/AIDS program was enormous and substantial for Africa. This potential can be used to our advantage to disseminate initiatives related to NCDs.

Target

- Maximize use of existing HTC centers or centers (hospitals, clinics etc) running HTC programs to leverage investments for the prevention, care, and treatment of NCDs.
- Increase collaboration with NGOs and Governments within the region to support GSK's Africa 2020 Strategy.
- Generate added value for patients/ clients of HTC centers/programs.

Scope

 Feasibility on embedding project and the scope of countries is currently under investigation

Research suggests:

- No concrete data is available on number of HTC's being operational/non-operational in Sub-Saharan Africa (SSA).
- There is a need for service integration in resource starved settings 9

• Research also suggests such an activity has been conducted on smaller scale and has been found to be successful:

Two proof of concept studies conducted in Swaziland and Ethiopia by Rabkin et al., looked at utilizing current HTC programs to scale up activities for Diabetes Mellitus. In Swaziland, an assessment illustrated gaps in the approaches used to support DM services at 15 health facilities, despite the existence of chronic care systems at HIV clinics in the same hospitals, health centres, and clinics. In Ethiopia, a pilot study found similar gaps in DM services and illustrated the potential to rapidly improve the quality of care and treatment for DM by adapting HIV-specific policies, systems, and tools¹⁰.

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