

Preferences for services in a client's first six months on antiretroviral therapy for HIV in South Africa and Zambia: The PREFER study

Sydney Rosen^{1,2*}, Linda Sande¹, Vinolia Ntjikelane¹, Pamfred Hasweeka³, Prudence Haimbe³, Allison Juntunen², Mariet Benade², Nancy Scott², Priscilla Lumano-Mulenga⁴, Hilda Shakwelele³, Mhairi Maskew¹

¹Health Economics and Epidemiology Research Office, Faculty of Health Sciences, University of the Witwatersrand, Johannesburg, South Africa; ²Boston University School of Public Health, Boston, MA, USA; ³Clinton Health Access Initiative (CHAI) Zambia; ⁴Ministry of Health, Zambia

BACKGROUND

- Retention in care in the early treatment period after ART initiation is a key challenge facing HIV treatment programs.
- Disengagement from care in the first 6 months after initiation averages 20-30%.
- Differentiated service delivery (DSD) models offering flexible, convenient ART service delivery typically require ≥6 months on ART.

In their first six months on ART, clients in South Africa and Zambia express different preferences for clinic visit frequency and dispensing durations.

METHODS

- Observational, prospective cohort survey.
- Enrolled adult ART clients who were newly-initiated, re-initiated, or within their first 6 months on ART at 30 healthcare facilities in South Africa (SA) and Zambia.
- We report ART client experience and preferences for HIV service delivery in the first 6 months on ART.

RESULTS

Characteristics of enrolled participants

Variables		South Africa (n=923)	Zambia (n=773)
Gender	% Female	670 (73%)	515 (67%)
Age	Median; IQR	35 years (18-76)	34 years (18-75)
How often do people in the household go without food?	Never	627 (68%)	261 (33.8%)
	Seldom	70 (7.6%)	92 (11.9%)
	Sometimes	198 (21.5%)	352 (45.5%)
How easy would it be to access ZAR/ZMW 100 for emergency health care?	Often	28 (3.0%)	68 (8.8%)
	Very difficult	136 (14.7%)	189 (24.5%)
	Difficult	394 (42.7%)	442 (57.2%)
	Easy	351 (38.0%)	123 (15.9%)
	Very easy	42 (4.6%)	19 (2.5%)

HIV care experience

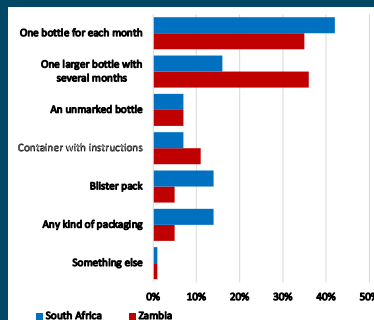
Variables		South Africa (n=923)	Zambia (n=773)
Months on ART	Initiating today	288 (31%)	261 (34%)
	Less than a month	155 (17%)	115 (15%)
	1-3 months	239 (26%)	172 (22%)
	3-6 months	216 (25%)	225 (29%)
Tested HIV+ before most recent ART initiation?	% Yes	323 (35%)	135 (18%)
	% No	600 (65%)	638 (82%)
Received pre-treatment counselling	% Yes	870 (94%)	734 (95%)
	% No	53 (6%)	39 (5%)
How did pre-treatment counselling make you feel?	Better	672 (77%)	615 (84%)
	The same	186 (21%)	114 (16%)
	Worse	12 (1%)	5 (1%)
Previous ART use (before current ART)?	% Yes	107 (12%)	12 (2%)
	% No	816 (88%)	98 (13%)
Have you missed visits by >2 days?	% Yes	68 (7%)	78 (10%)
	% No	855 (93%)	695 (90%)
Disclosed status to household?	% Yes	560 (61%)	496 (64%)
	% No	363 (39%)	277 (36%)
Do you have chronic conditions other than HIV?	% Yes	79 (9%)	98 (13%)
	% No	844 (91%)	675 (87%)
If yes, which conditions?	TB	12 (15%)	5 (5%)
	Diabetes	39 (49%)	32 (33%)
	Hypertension	11 (14%)	3 (3%)
	Other	9 (11%)	19 (19%)

- Relatively few clients in either country admitted prior positive HIV tests, prior ART exposure, or missed visits.
- Fewer than two thirds of clients in both countries had disclosed their HIV-positive status within their households.
- Diabetes was the most commonly reported co-morbidity.

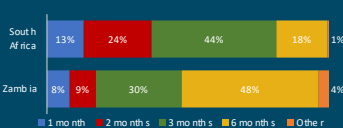
- From Sept 2022 to May 2023, we enrolled 923 ART clients in SA and 773 in Zambia.
- In both countries, roughly a third of participants were initiating ART at study enrolment, with the rest distributed between 0 and 6 months after initiation at the time of study enrollment.

Service delivery preferences

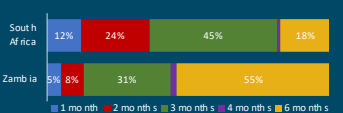
PREFERRED PACKAGING



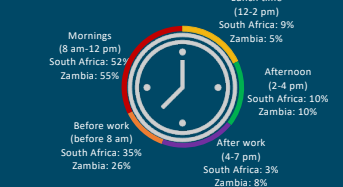
PREFERRED VISIT INTERVAL



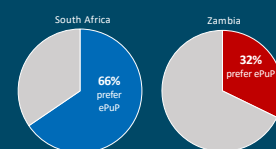
PREFERRED MEDICATION DISPENSING



CONVENIENT VISIT TIME



EXTERNAL PICKUP POINTS (ePuP)



- In each country, clients appeared to prefer the visit frequency and dispensing interval they were familiar with (e.g. every 3 months and external pickup points in South Africa; every 6 months and facility pickup points in Zambia).
- One-month ART medication bottles were preferred in both countries.
- Weekday mornings were strongly preferred for clinic visits in both countries.

LIMITATIONS

- Low rates of self-reported prior use of ART and HIV testing prior to current treatment period are likely underestimates.
- Responses on preferences for HIV service delivery may indicate ART client's current experiences and expectations rather than a true reflection of preferred models of care.

CONCLUSIONS

- Clients' expressed preferences for HIV service delivery during the first six months on ART differ by country and familiarity with existing models. The needs of treatment experienced clients may also differ from those newly initiating ART.
- Models of care addressing this key period of the cascade are yet to account for varying contexts and population preferences.