

Enrolment of Clients Newly Initiated on Antiretroviral Therapy in Differentiated Models of Care in Malawi, South Africa, and Zambia

Timothy Tchereni¹, Vinolia Ntjikelane², Idah Mokhele², Amy Huber², Nkgomeleng Lekodeba², Andrews Gunda¹, Stanley Ngoma³, Rose Nyirenda³, Prudence Haimbe⁴, Hilda Shakwelele⁴, Priscilla Lumano-Mulenga⁵, Mpande M Mwenechanya⁶, Sydney Rosen^{2,7}, Sophie Pascoe²

1. Clinton Health Access Initiative, Lilongwe, Malawi, 2. Health Economics and Epidemiology Research Office, Faculty of Health Sciences, University of the Witwatersrand, Johannesburg, South Africa, 3. Ministry of Health, Lilongwe, Malawi, 4. Clinton Health Access Initiative, Lusaka, Zambia, 5. Ministry of Health, Lusaka, Zambia, 6. CIDRZ, Lusaka, Zambia, 7. Department of Global Health, Boston University School of Public Health, Boston, MA, USA

Background

- National guidelines for lower-intensity differentiated service delivery (DSD) models for antiretroviral therapy (ART) generally limit eligibility to “established” clients who have been on ART for ≥6 months.
- We assessed the extent to which healthcare providers are adhering to the 6-month eligibility criterion in Malawi, South Africa, and Zambia.

Providers report enrolling some clients into DSD models before 6 months on ART in order to serve clients better

Methods

- We surveyed healthcare providers at 42 public sector facilities in Malawi (12), South Africa (18), and Zambia (12) from Sept 2022 to Feb 2023.
- Providers were asked about their experience in enrolling clients into DSD models prior to 6 months after ART initiation.

Results

31% 68%

Median 38 years

Years in role mean 9 years

Table 1. Study participants' characteristics by country (n=344)

Characteristic (n, %)	Malawi	South Africa	Zambia	Total
N (row percentage)	110 (32)	115 (33)	119 (35)	344 (100)
Sex (female)	68 (25)	98 (41)	73 (31)	239 (74)
Cadre				
Doctor/clinician	28 (25)	1 (1)	10 (8)	39 (11)
Nurse	53 (48)	82 (71)	50 (42)	185 (54)
Lay counsellor/ CHW	11 (10)	15 (13)	21 (18)	47 (14)
Pharmacist	4 (4)	8 (7)	26 (22)	38 (11)
Other	14 (13)	9 (8)	12 (10)	35 (10)
Employer				
DOH/MoH	65 (59)	101 (88)	57 (48)	223 (65)
Support partner	45 (41)	14 (12)	62 (52)	121 (35)

Figure 2. Providers' comfort with offering DSD enrolment

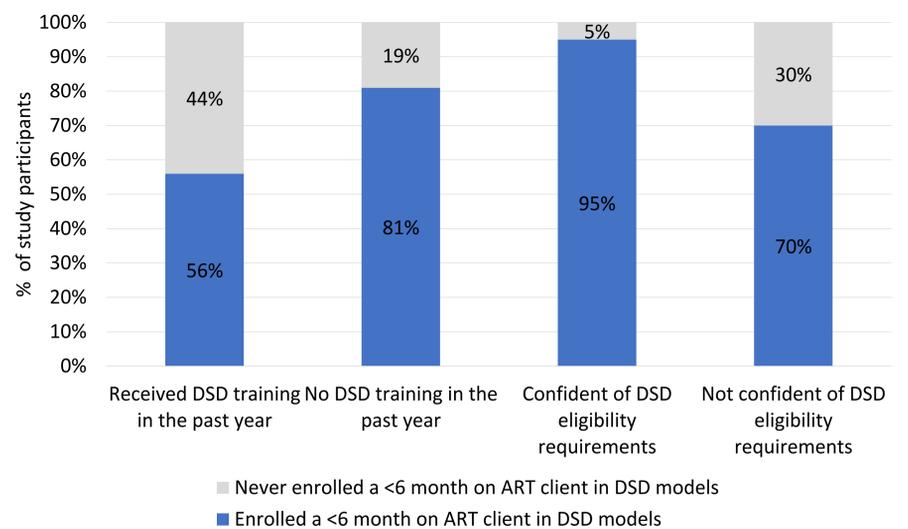


Figure 1. Proportion of study participants who enrolled ART clients on DSD models after < 6 months on ART

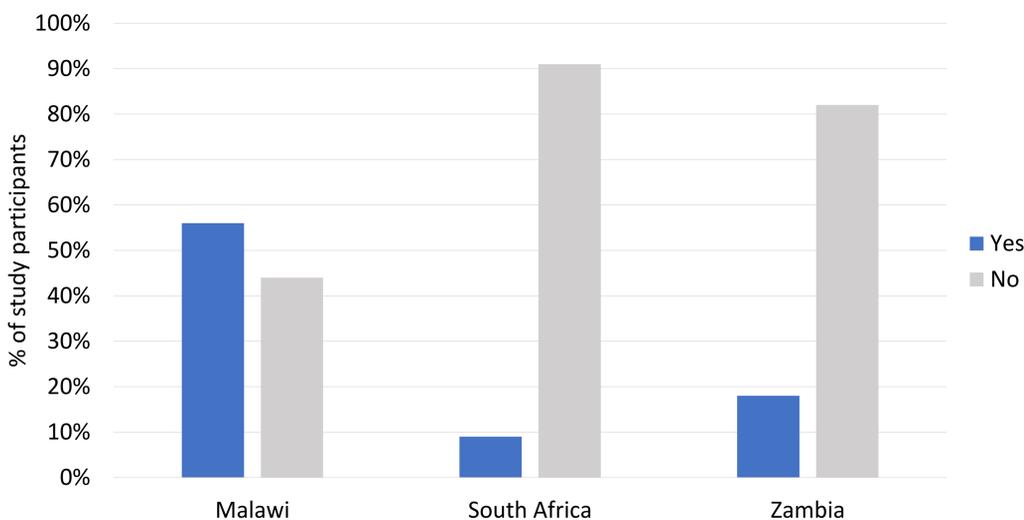
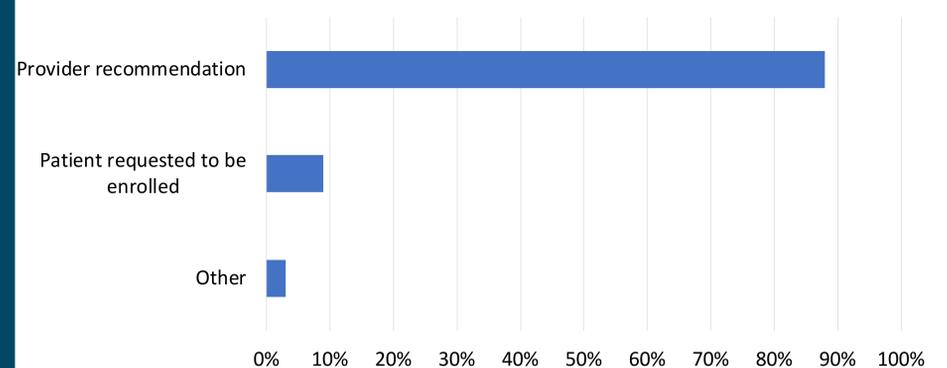


Figure 3. Reported reasons for early DSD enrolment



- 27% of providers reported enrolling clients in a DSD model after <6 months on treatment (67% Malawi, 11% South Africa, 23% Zambia) (Figure 1)
- Providers with less recent DSD training were more likely to enroll clients early, as were providers who were more confident about DSD eligibility requirements (Figure 2).

- Most clients enrolled in DSD models after < 6 months on ART did so at the recommendation of the provider; very few requested it themselves (Figure 3).

Qualitative

- Many providers (51% (n=93)) were concerned that enrolling ART clients on DSD early would negatively impact viral load suppression and ART adherence.
- Those who enrolled ART clients early mentioned that this served the best interests of the clients.

Conclusion

- Many providers reported enrolling clients into DSD models early to serve them better.
- Achieving optimal balance between provider adherence to guidelines and provider judgment regarding clients' welfare should be considered in evaluating and improving DSD programs.