Health systems, operational, social and economic research

PO - (8549) - ACHIEVING THIRD 90 AMONG KEY POPULATION-THROUGH DIFFERENTIATED CARE MODEL

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Background

Partners in Health and Development in Africa (PHDA) is an HIV/STI research centre that serves both female and male sex workers in Nairobi. PHDA offers HIV/STI care/treatment and prevention services to approximately 27,400 female sex workers and 1600 men who have sex with men. Currently the organization has 2384 HIV positive female and male sex workers who access HIV care and treatment services within PHDA. We realized HIV viral suppression of our clients was at 78% hence we came up with a strategy to reach at least 90% viral suppression.

Method

Patients who were virally suppressed had their scheduled clinic visits reduced to twice annually. While viremic clients visited the facility at least twice a month for direct observed therapy of ARVs. Clients who were non-viremic (champions) and willing to participate in support groups were selected through simple random sampling to join the viremic clients support groups. The champions encouraged the viremic peers on importance of adhering to treatment to gain viral suppression and reduce time spent at the facilities. Challenges and successes were also shared. This was done for a minimum of three consecutive months and graduation done upon viral suppression.

Results

Eighty eight percent (2117/2384) of the total positives were bled for viral loads within the year of which 78.3% (1658/2117) had viral suppression and 459/2117 had viral loads (VL) above 1000 copies per ml of blood. After the joint support groups with documented good adherence for at least three consecutive months the clients were bled for a repeat VL of which 84%(386/459) had suppressed. This increased the overall Viral suppression from 78.3% to 93.8%(2044/2177). There was 73% risk of being viremic if not attending support group

Conclusion

Differentiated care clients can work with Viremic clients to increase community viral load suppression.