ASSISTED PARTNER NOTIFICATION SERVICES IN KAMPALA, UGANDA

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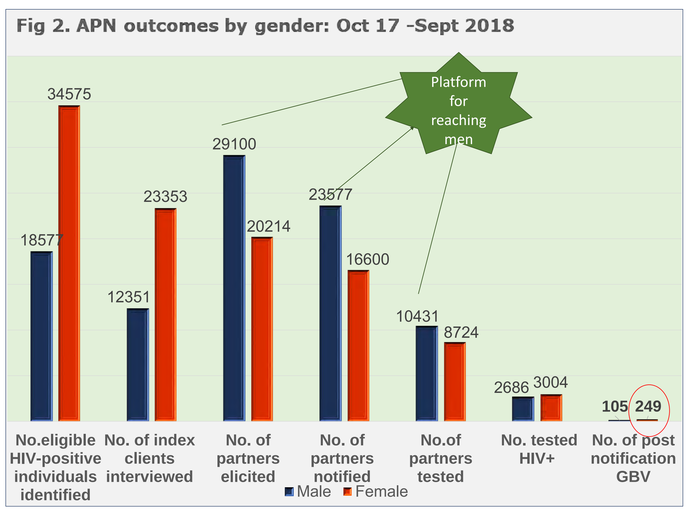
BACKGROUND

Uganda has an estimated 1.2 million people living with HIV (PLHIV) with a general prevalence of 6.2% among adults aged 15-49 and 6.9% in Kampala region, 77% (UPHIA, 2017) knew their status as of 2017, falling short of the UNAIDS 95% target of PLHIV who should know their status. To address this gap, the Infectious Diseases Institute implemented World Health Organization (WHO) recommended assisted partner notification (APN) in routine clinical services.

METHODS

Health workers were trained to implement APN at 69 health facilities in two urban Ugandan districts (October 2017–September 2018) Health workers identified eligible HIV-positive clients aged ≥15 years who had sexually transmitted infections, or a non-suppressed viral load and notifiable sexual partners with unknown HIV status. Eligible index clients provided written consent for an interview to elicit partner information and eventual notification. Health workers contacted partners through a phone call or home visit. and notified them of their possible exposure and offered HIV testing. All those tested were linked to treatment and prevention services. We followed up with index clients to determine whether they experienced GBV after APN.

Fig 2. APN outcomes by gender: Oct 17 -Sept 2018

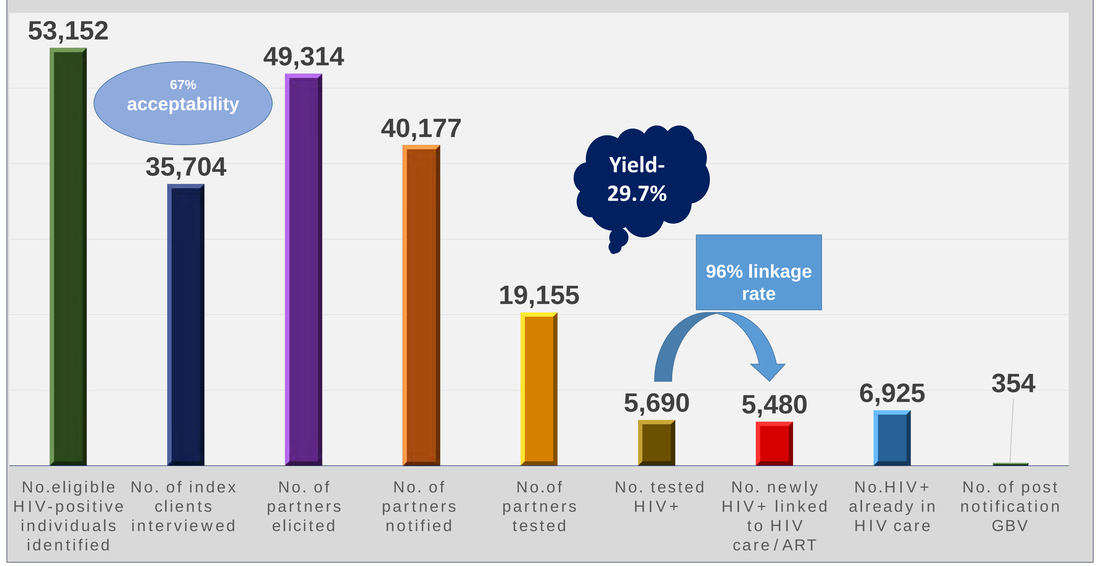


APN is a feasible and efficient approach for identification of HIV+ve cases and should be integrated in routine clinical services. However, there is need to monitor trends and to strengthen GBV services.

RESULTS

Of 53,152 index clients eligible for APN, 35,704 (67.4%) accepted to be interviewed. Of these, 12351 (34.5%) were men. APN teams identified 49,314 sexual partners, and 40,177 (81.5%) were notified of their exposure. Of those notified, 6925 (17.2%) knew they were HIV positive and were on treatment. Of those with previously negative or unknown status, 19,155 (61%) were tested at the notifying facility, and 5690 (29.7%) were HIV positive.. Following testing, 5480 (96%) of all newly identified HIV-positive partners initiated ART. 354 (0.99%) of index clients (women, 249[70.3%]) reported experiencing post-notification GBV. *Refer to figure 1*.

Fig 1.Outcomes of APN implementation:Oct'17 to Sept'18



There were more men elicited, notified and tested for APN services compared to women. However, the proportions that tested HIV +ve were comparable with 2686 (47%) men testing positive.
There were more women 249 (70%) who reported post notification GBV. *Refer to figure 2*.

CONCLUSIONS

- APN acceptability is relatively good at 67%
- There is very high yield of 29.7%
- High linkage to care at 96%.
- Investigation is needed to understand why fewer partners were elicited (1.4%) than suggested in the literature
- Need to understand why 40% of notified partners did not access testing services at the notifying facility.
- A follow-up of those who were not tested is needed to ascertain if they were tested elsewhere and linked to care.
- Although <1% of index clients reported GBV, we recommend carefully monitoring GBV and linkage to GBV services to help improve APN programs.

ADDITIONAL KEY INFORMATION

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Disclaimer
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