HIV status disclosure among ART-experienced adolescents and young adults in four African countries

#1060

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Background

Adolescents and young adults represent an increasing share of people living with HIV (PLWH) globally.

Barriers to long-term treatment success include disclosure concerns and stigma.

Goals:

1. Characterize HIV status disclosure among adolescents and young adults in AFRICOS.
2. Assess the relationship between status disclosure, ART adherence and viral suppression.
3. Assess whether age may moderate these relationships.

Methods

Study: The prospective African Cohort Study (AFRICOS) enrolls people with and without HIV, ≥15 years, at 12 PEPFAR-supported facilities in Kenya, Nigeria, Tanzania, and Uganda.

Inclusion: Most recent AFRICOS visit for participants living with HIV on ART and <25 years old.

Measures: Socio-behavioral questionnaires administered at enrollment and six-monthly visits; responses to questions around voluntary status disclosure are self-reported.

Statistical Methods:

- Patterns of status disclosure described.
- Robust Poisson regression used to assess relationships between disclosure to an immediate family member (spouse/partner, parent, sibling, or child) and:
  1) ART adherence (none vs 1+ missed doses in past 30 days).
  2) viral suppression (<1000 vs ≥1000 copies/mL) using data from participants' most recent visit.

Models were stratified by sex assigned at birth and age (< or ≥18 years).

Results

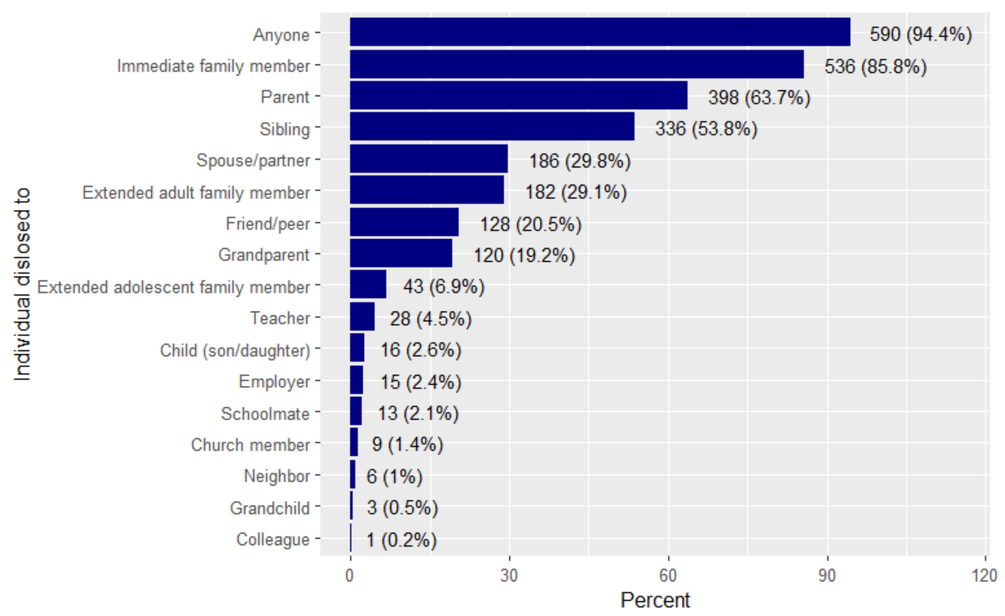
In total, 698 participants were <25 years, living with HIV and on ART including 625 complete cases.

Of these, **94.4%** had disclosed their HIV status at most recent visit (**Figure 1**), with no differences by sex assigned at birth (**Table 1**).

Adolescent disclosure of HIV status was *high* among immediate family members, but *low* outside the family.

Disclosure had a unique positive association with viral suppression for adolescents <18 years of age.

Figure 1. Percent HIV status disclosed by individual disclosed to at most recent AFRICOS visit



Results cont.

Table 1. Selected sex stratified characteristics at most recent AFRICOS visit.

	Male (N=246)	Female (N=379)	Total (N=625)	P-value
Vertical Transmission				
Not vertically transmitted	191 (77.6%)	322 (85.0%)	513 (82.1%)	0.066
Vertical transmission	55 (22.4%)	57 (15.0%)	112 (17.9%)	
ART Adherence				
No missed doses	206 (83.7%)	308 (81.3%)	514 (82.2%)	0.73
Missed 1 or more doses	40 (16.3%)	71 (18.7%)	111 (17.8%)	
Viral Suppression				
VL<1000 c/ml	213 (86.6%)	337 (88.9%)	550 (88.0%)	0.68
VL>=1000 c/ml	33 (13.4%)	42 (11.1%)	75 (12.0%)	

Table 2. Association of disclosure to immediate family member and ART adherence and viral suppression. Models stratified by sex and age categories.

	ART Adherence [No missed doses past 30 days]	Viral Suppression [<1,000 copies/mL]
Unstratified Estimates	1.0 (0.63 – 1.59)	0.95 (0.86 – 1.04)
Stratified Estimates	-	-
Male	1.01 (0.90 – 1.14)	0.90 (0.77 – 1.07)
Female	0.98 (0.86 – 1.12)	0.98 (0.88 – 1.10)
<18 years of age	0.99 (0.81 – 1.22)	**1.11 (1.02 – 1.20)**
≥18 years of age	1.00 (0.90 – 1.10)	0.91 (0.81 – 1.03)

**All models controlled for sex at birth, age, vertical transmission, and program site.*

Conclusion

Adolescent disclosure of HIV status was high among immediate family members, but low outside the family (**Figure 1**).

Disclosure to an immediate family member had a unique protective effect for adolescents <18 years of age (**Table 2**), suggesting importance of family support for viral suppression among younger adolescents living with HIV.

Next steps: Determine if treatment adherence may mediate the association between disclosure and viral suppression at younger ages.

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