

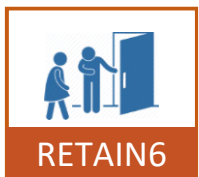
# Continuity of care during the first 6 months on ART in South Africa: Barriers and enablers

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Nothing to disclose



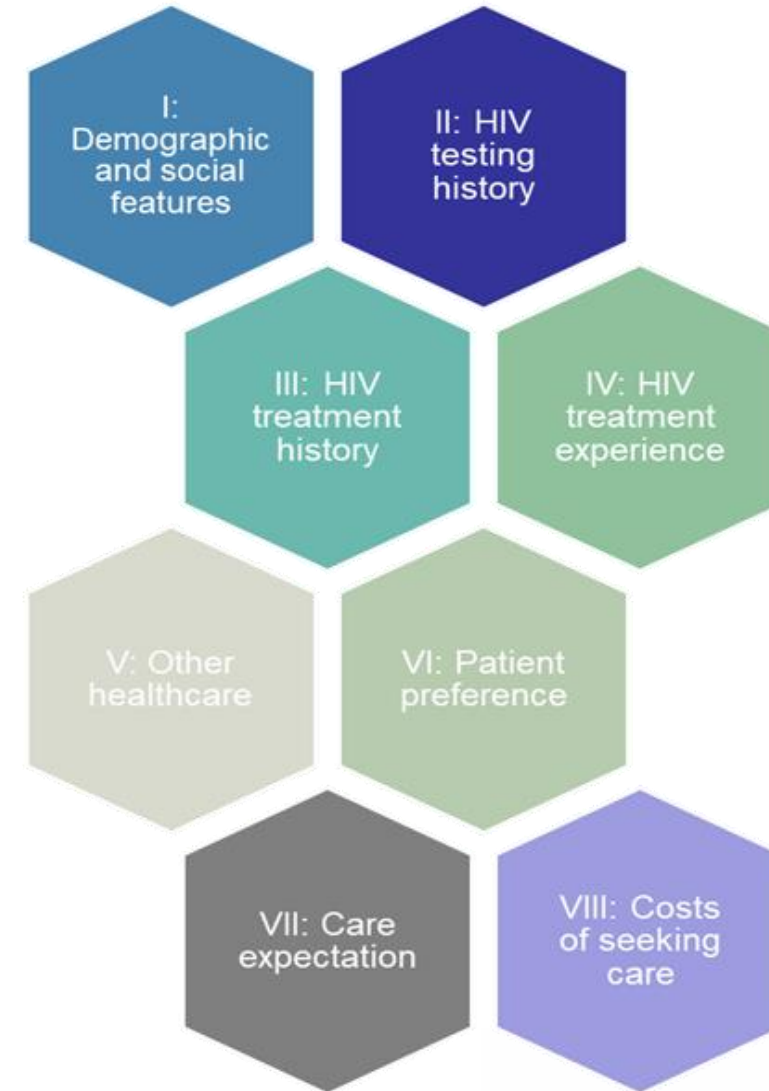
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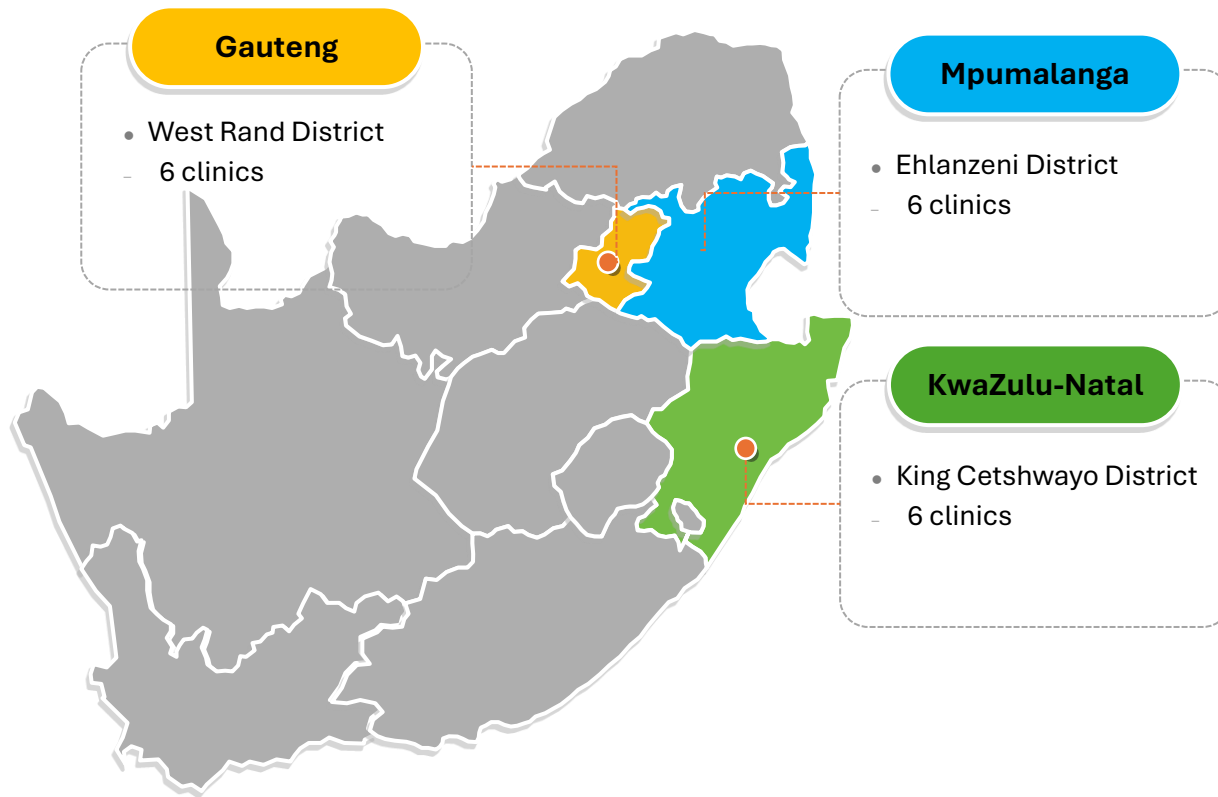


# PREFER study

- PREFER-South Africa was a mixed-methods descriptive study under the Retain6 Project
- Aimed to generate detailed data about clients in their first six months after ART initiation or re-initiation
- Surveyed a sample of clients at 0-6 months after ART initiation or re-initiation
- Study enrollment period:  
7 September 2022 – 30 June 2023
- Identifiers collected to link survey to clinical outcomes records up to 14 months
- 15 focus group discussions (FGDs) conducted with sub-sample of enrollees



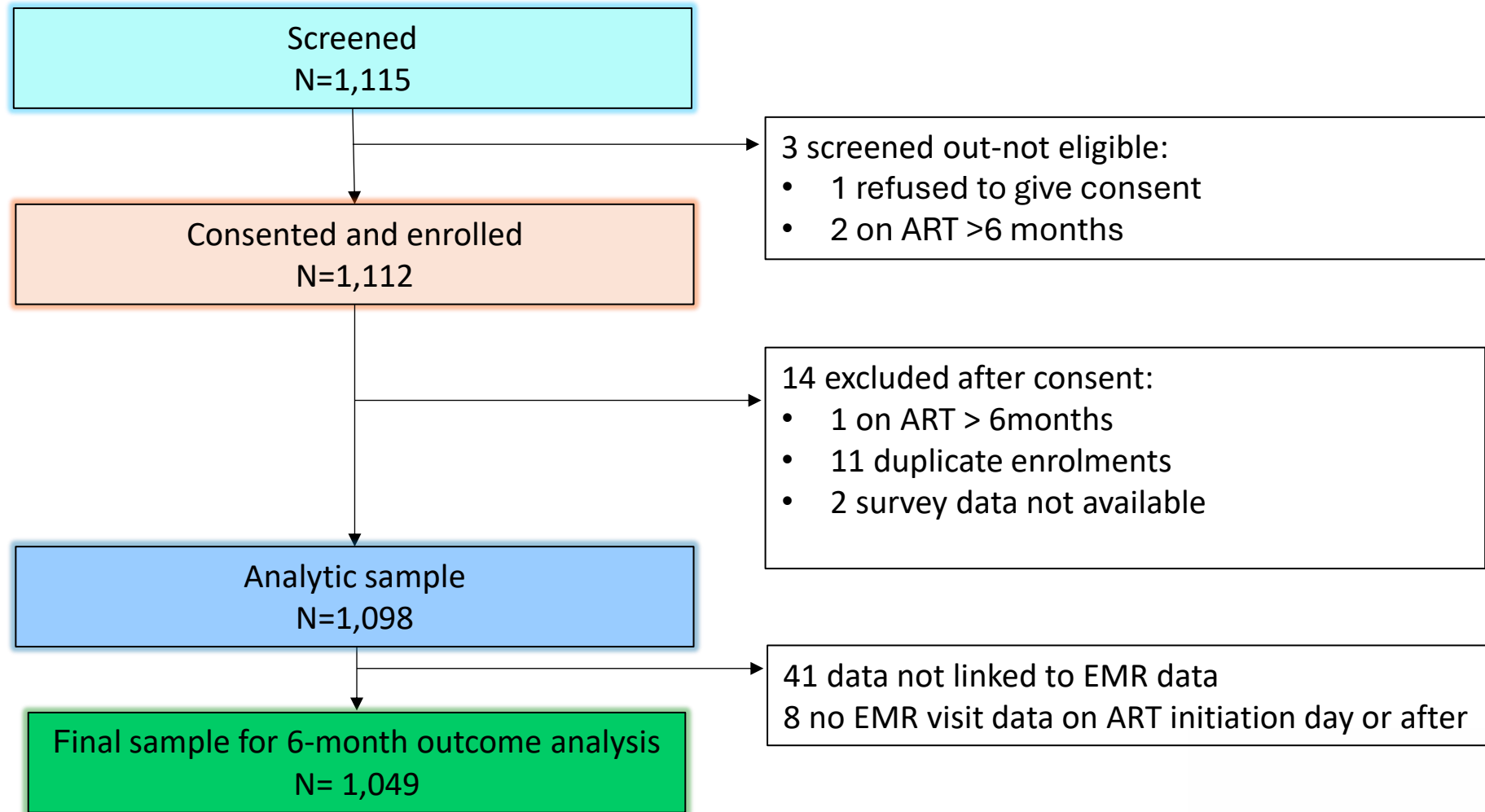
# Eligibility criteria and participating sites



Inclusion criteria for the PREFER survey:

- Living with HIV **AND** on ART for 0-6 six months at the study site, including those initiating on that day
- $\geq 18$  years old
- Presented at the study site for routine HIV-related care
- Provide written informed consent to participate

# Study enrolment



# Participant characteristics at enrolment (n=1,049)

Demographics		Total (n,%)
Age groups	18-24 years	190 (17%)
	25-49 years	809 (73%)
	>50 years	110 (10%)
Female (%)		750 (71%)
Education	Primary or less	395 (38%)
	Secondary	501 (48%)
	Post Secondary	153 (15%)
Employment status	Formal employment	228 (22%)
	Informal employment	206 (20%)
	Unemployed	538 (51%)
	Student/Trainee	77 (7%)
Baseline regimen	TDF/3TC/DTG	946 (90%)
	TDF/FTC/EFV	84 (8%)

## Socio-economic indicators (n,%)



**23%**

Reported food insecurity sometimes or often



**53%**

Said they'd have a difficult time acquiring ZAR100 (USD 5.50) for medical treatment

Time on ART at study enrolment



Initiating today (n=419)

38%

One month or less (n=159)

15%

One month to three months (n=252)

23%

Three months to six months (n=228)

24%

**24%**

presented with a CD4 count <200 cells/mm<sup>3</sup>

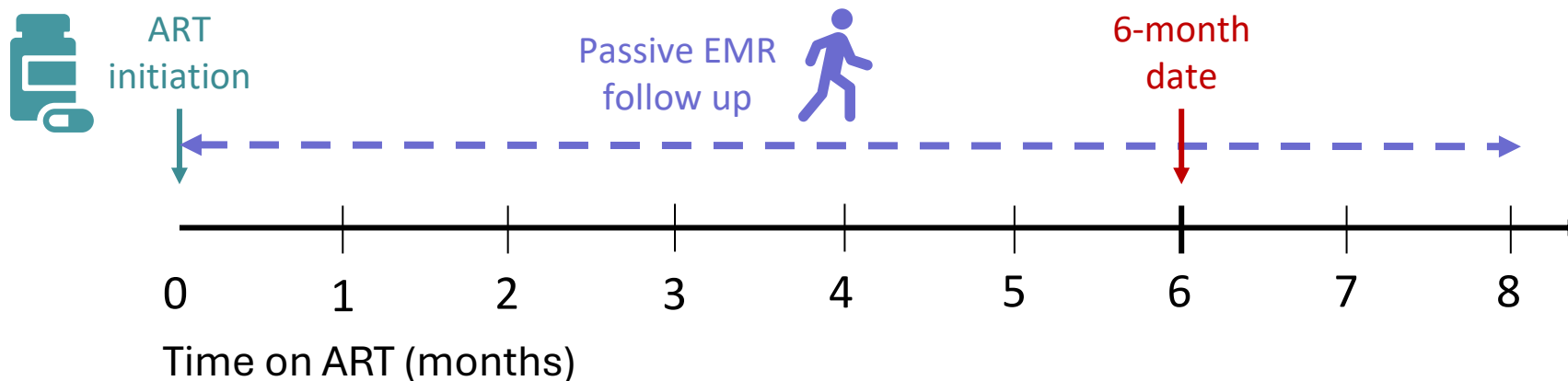
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# Outcome definitions

<b>Continuously in care</b>	In care	All scheduled visits during the first 6 months after initiation observed within 28 days of scheduled visit date
	Transfer	Documented transfer to another care facility prior to 6-month date
<b>Disengaged from care</b>	Died	Documented date of death in EMR prior to 6-month date
	Immediately disengaged	No visit after the ART initiation visit observed in the EMR
	Disengaged from care during first 6 months on ART	$\geq 1$ visit after ART initiation visit observed in the EMR; last scheduled visit in 6-month period not attended
<b>Cyclical engagement</b>	Treatment interruption followed by re-engagement in care by 6 months on ART	$\geq 1$ visit after ART initiation visit attended $>28$ days late



# Results: Disengagement from HIV care

	Continuously in care (n=815)	Not continuously in care (n=234)	Crude RR (95% CI)
<b>Overall</b>	<b>243 (81%)</b>	<b>58 (19%)</b>	-
<b>Age</b>			
18-24 years	132 (73%)	49 (27%)	<b>1.27 (0.97 - 1.67)</b>
25+ years	683 (79%)	185 (21%)	Reference
<b>Gender</b>			
Male	224 (75%)	75 (25%)	Reference
Female	591 (79%)	159 (21%)	<b>0.85 (0.67-1.07)</b>
<b>Education level</b>			
Primary or less	303 (77%)	92 (23%)	1.07 (0.85 - 1.35)
Secondary or tertiary	512 (78%)	142 (22%)	Reference
<b>Relationship status</b>			
Have a partner	259 (78%)	75 (22%)	Reference
No partner/not living with a partner	556 (78%)	159 (22%)	0.99 (0.78 - 1.26)
<b>Money for health care</b>			
Easy	360 (78%)	100 (22%)	Reference
Difficult	455 (77%)	134 (23%)	1.05 (0.83 - 1.32)
<b>Food scarcity</b>			
Never/seldom	639 (79%)	166 (21%)	Reference
Sometimes/often	176 (72%)	68 (28%)	<b>1.35 (1.06 - 1.72)</b>

Overall **22%** clients were not continuously in care during the first 6 months after ART initiation

**Of those not continuously in care:**

- **2%** died
- **13%** immediately disengaged
- **25%** disengaged during the first 6 months
- **61%** interrupted treatment and then re-engaged



# Results: Disengagement from HIV care

## Clinical and treatment history



	Continuously in care (n=815)	Not continuously in care (n=234)	Crude RR (95% CI)
<b>Overall</b>	<b>243 (81%)</b>	<b>58 (19%)</b>	-
<b>Treatment classification</b>			
On treatment	482 (81%)	114 (19%)	Reference
Newly initiating	208 (70%)	88 (30%)	<b>1.55 (1.22 - 1.98)</b>
Re-engagement	125 (80%)	32 (20%)	1.07 (0.75 - 1.51)
<b>Advanced HIV disease</b>			
CD4 count ≥200 copies	525 (77%)	161 (23%)	Reference
CD4 count <200 copies	207 (81%)	48 (19%)	<b>0.80 (0.60 - 1.07)</b>
Missing	83 (77%)	25 (23%)	0.99 (0.68 - 1.43)
<b>WHO stage at initiation</b>			
Stage1	703 (78%)	201 (22%)	Reference
Stage2	63 (77%)	19 (23%)	1.04 (0.69 - 1.57)
Stage3 and 4	32 (78%)	9 (22%)	0.99 (0.55 - 1.78)
Unknown	17 (77%)	5 (23%)	1.02 (0.47 - 2.23)
<b>Baseline regimen</b>			
TDF/3TC/DTG	742 (78%)	204 (22%)	Reference
TDF/FTC/EFV	58 (69%)	26 (31%)	<b>1.44 (1.02 - 2.02)</b>
Other	15 (79%)	4 (21%)	0.98 (0.41 - 2.35)





# Results: Disengagement from HIV care

Isolation  
and need  
for  
support



	Continuously in care (n=815)	Not continuously in care (n=234)	Crude RR (95% CI)
I prefer to attend clinic visits...			
Alone	705 (72%)	195 (28%)	Reference
With a family member or friend	110 (65%)	39 (35%)	<b>1.21 (0.90 - 1.63)</b>
I prefer HIV treatment outside the clinic			
No	289 (78%)	81 (22%)	Reference
Yes	526 (77%)	153 (23%)	1.03 (0.81 - 1.31)
In this clinic you're able to talk to the doctors or nurses in private			
Disagree	97 (76%)	30 (24%)	Reference
Agree	704 (78%)	197 (22%)	0.93 (0.66 - 1.30)

Treatment  
readiness



	Continuously in care (n=815)	Not continuously in care (n=234)	Crude RR (95% CI)
Do you wish you were offered more/the same/less HIV information?			
Same or less	418 (78%)	121 (22%)	Reference
More	397 (78%)	113 (22%)	0.99 (0.79 - 1.24)
Do you wish you were offered more/the same/less counselling?			
Same or less	420 (78%)	116 (22%)	Reference
More	395 (77%)	118 (23%)	1.06 (0.85 - 1.33)

# Results: Disengagement from HIV care

Experiences and perceptions of facilities and staff



	Continuously in care (n=815)	Not continuously in care (n=234)	Crude RR (95% CI)
<b>The doctors/nurses discussed the treatment fully with me</b>			
Disagree	43 (75%)	14 (25%)	Reference
Agree	767 (78%)	220 (22%)	0.91 (0.57 - 1.45)
<b>I find it easy to tell the health workers when I have missed taking my tablets</b>			
Disagree	146 (78%)	42 (22%)	Reference
Agree	573 (78%)	159 (22%)	0.97 (0.72 - 1.31)
<b>The health workers are too busy to listen to my problems</b>			
Disagree	728 (78%)	202 (22%)	Reference
Agree	72 (73%)	26 (27%)	<b>1.22 (0.86 - 1.74)</b>
<b>Some staff do not treat patients with sufficient respect</b>			
Disagree	611 (78%)	171 (22%)	Reference
Agree	151 (76%)	49 (24%)	1.12 (0.85 - 1.48)
<b>The facilities are dirty</b>			
Disagree	773 (86%)	126 (14%)	Reference
Agree	97 (85%)	17 (15%)	1.06 (0.67 - 1.70)
<b>The queues to see a doctor or nurse are too long at this</b>			

# Key messages

- Rates of disengagement during the early treatment period are high
  - **Drivers of immediate disengagement need to be explored**
- Treatment interruptions and re-engagement in care occur frequently
  - **What service delivery needs might these clients have?**
- Young clients and those needing support are also at greater risk of disengagement
- Financial difficulty remains a barrier to continuity of care
  - **Confirmed in qualitative work**
- Clients presenting with AHD had similar or better treatment outcomes
  - **Impact of treatment interruption after low nadir CD4 count to be considered**

# Acknowledgements

- Retain6 project team
- AMBIT study teams
- SENTINEL site staff and clients
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