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A partner notification approach is effective and feasible in increasing HIV testing among partners of newly HIV-diagnosed persons in Tanzania

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Background

- An estimated 46% of people living with HIV infection do not know their status (WHO, 2015).
 - New or more effective approaches to HIV testing services (HTS) are necessary to reach the “first 90” of UNAIDS’s 90-90-90 strategy

“By 2020, 90% of all people living with HIV will know their HIV status”



Source: www.unaids.org/en/resources/documents/2014/90-90-90

Partner notification – a means of getting to the first “90”?

- Partner notification (sexual partners of HIV-diagnosed clients are contacted by their partner or a health care provider) highly utilized in US /Europe, but not widely used in Sub-Saharan Africa (SSA)
- Limited evidence available of efficacy of partner notification in identifying persons with undiagnosed HIV infection in SSA
 - A Malawi study (Brown et al) found 64% HIV infection rate among partners of index clients from STI clinics; in a Cameroon study (Henley et al) 50.1% of partners of index clients from ANC, VCT and inpatient wards were infected.

Notification and referral approaches

- Methods of sexual partner notification and referral:
 - **Passive referral:** index client notifies/refers partner(s) to HTS
 - **Provider referral:** health care provider anonymously notifies/refers partner(s) to HTS
 - **Contract referral:** index client attempts notification/ referral of partner(s) to HTS with agreement that health care provider will contact partner if index is not able to bring in by an agreed-upon date

Tanzania HIV testing services partner notification study

- Objective
 - To evaluate the **feasibility**, **acceptability** and **effectiveness** of a partner notification and referral approach to HIV testing services in the context of routine facility-based HTS in Tanzania.
 - Conducted in Njombe, Tanzania's highest HIV prevalence region (adult prevalence 14.8%)
 - Index clients drawn from voluntary counseling and testing (VCT) and provider initiated testing and counseling (PITC)

Methods

Cross-sectional, mixed methods study conducted in 3 hospitals from June to September 2015

- Index clients were requested to list all partners within past 12/24 months and offered choice of referral approach
- Intimate partner violence (IPV) screening at two stages: initial interview with index; at partner listing
- Partners presenting to the facility offered HTS and referred into HIV care and treatment if found HIV positive.
- Outcome measures:
 - % partners successfully referred to HTS;
 - % of HIV positive partners with undiagnosed HIV infection;
 - % of partners and index clients enrolled in HIV care and treatment

Our index clients

Index clients were newly HIV-diagnosed men and women; diagnosed during VCT or PITC; offered choice of referral method (passive, provider or contract).

- Eligibility criteria:
 - 18 years of age
 - willing to list partners for referral
 - non-pregnant



Ministry of Health
HIV Rapid Testing and Counselling Form
Version (January 2015)

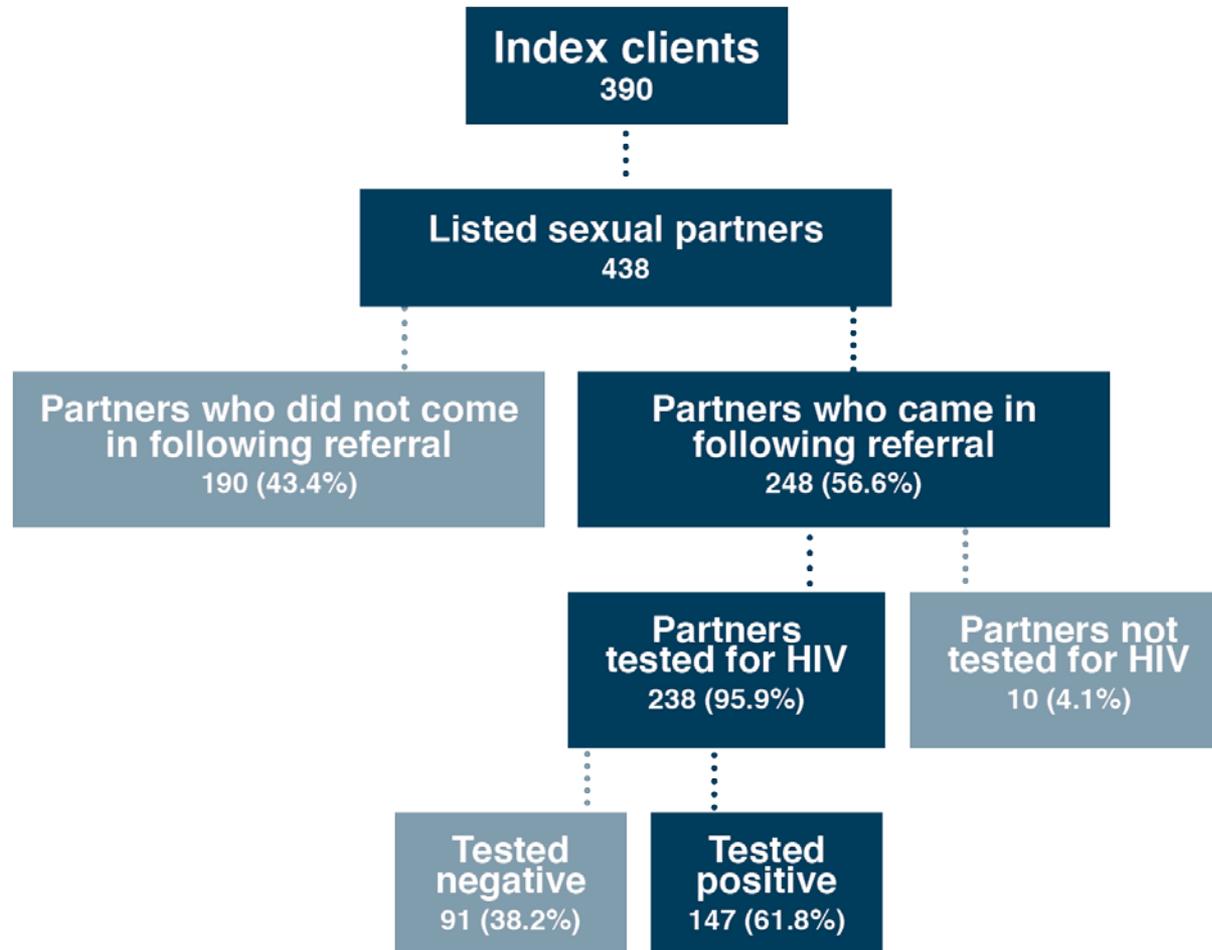
Register No.
District
HTC Site Name / Centre
Location Type (Urban/Rural)
Date of Medical Officer

L.L. KIDWEE
LILONGWE HOSPITAL
27 JULY 2015

Results: Index clients and reasons for non-enrollment

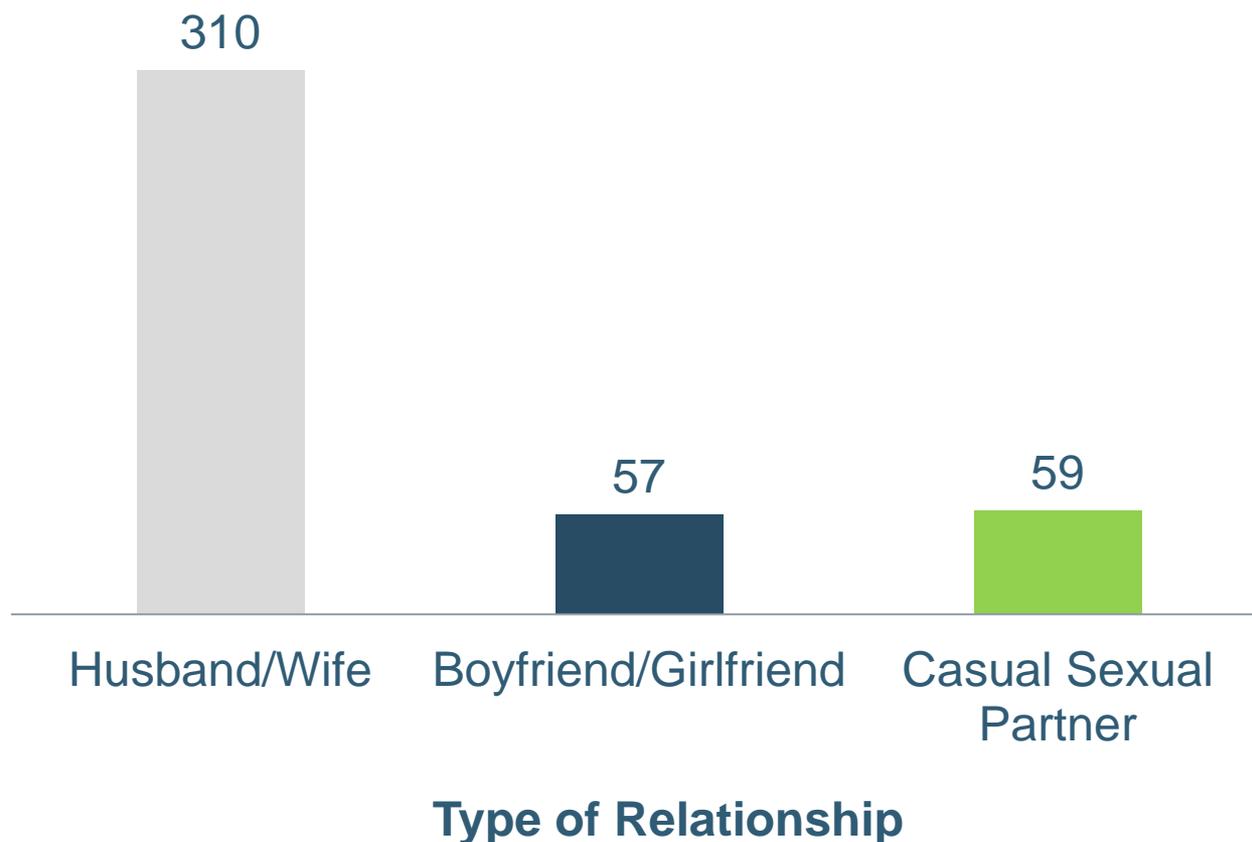
- Index clients (n=390)
 - 46.9% males, 53.1% females
 - Average age = 33 (range 18 – 71)
 - Enrolled from: VCT (55%), PITC (45%)
- 257 individuals (39.4%) were approached but did not enroll in the study. The leading reasons for non-enrollment:
 - no sexual partner within the last 12 – 24 months (n=167); distraught or declined (n=34); under 18 years (n=30)
 - 6 potential index clients screened out for IPV

Results: Study overview

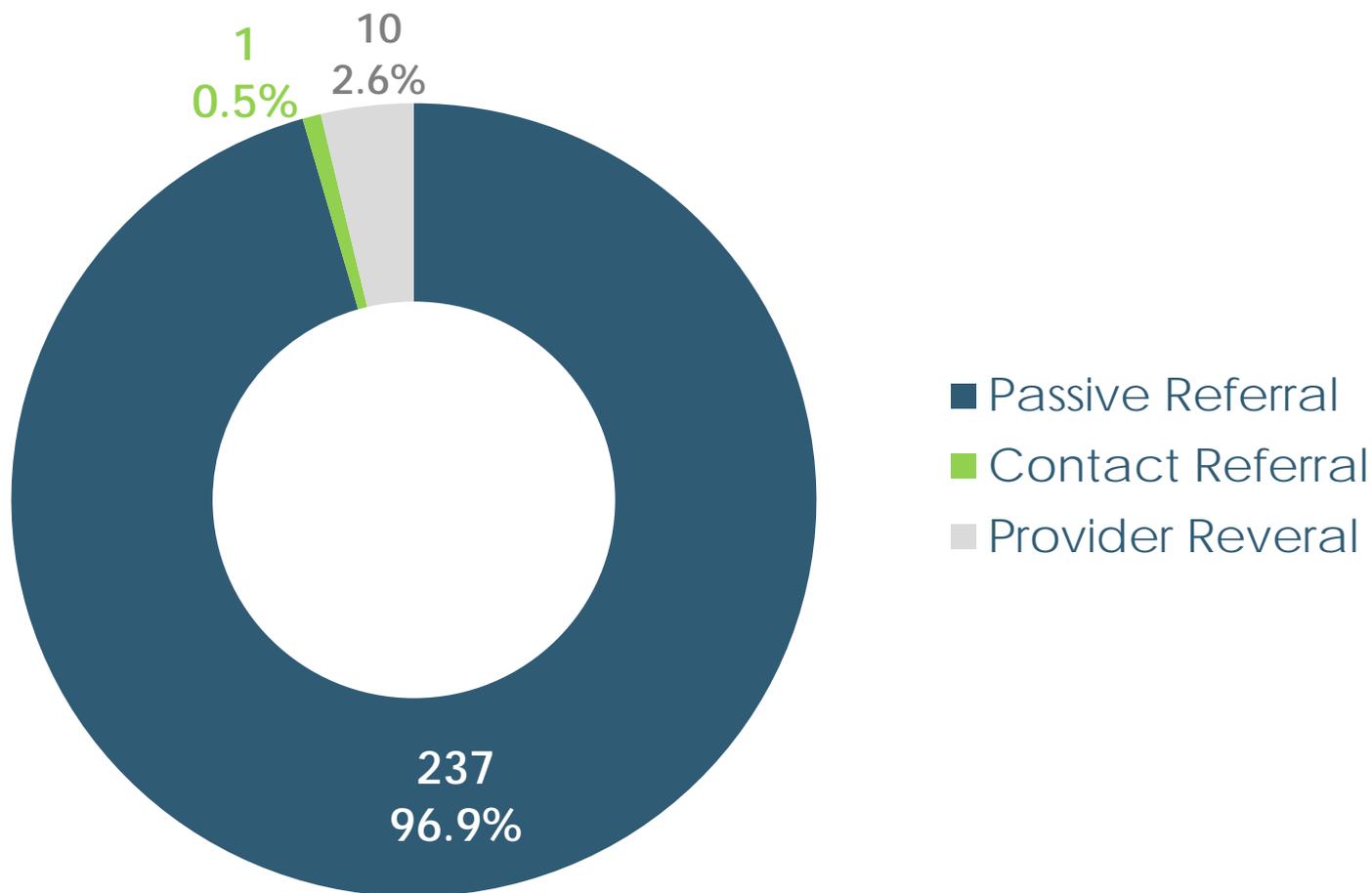


Results: Types of sexual partners listed by index clients

Three quarters of partners listed (73.2%) were spouses



Results: Partners who came to the facility following referral (n=248)



HIV Testing among partners

- Of the 248 partners who came to the health facility, 238 (96%) were tested
 - 147 (61.8%) found to be HIV positive



**All newly
diagnosed**

- 53.5% of male partners
- 67.9% of female partners
- 36% of the partners were HIV negative (88 sero-discordant couples)

Conclusions

- This study demonstrated feasibility, acceptability and effectiveness of partner notification/referral in context of facility-based HTS in Tanzania.
 - Feasibility/ Acceptability: 59.7% of newly diagnosed HIV positive individuals were eligible and agreed to become index clients / participate in partner notification
 - Effectiveness: 61.8% of partners tested HIV positive and 62% were linked to care

Acknowledgements

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