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Public Health: A solution to major HIV implementation challenges in Zambia, Africa

Public Health on the Go Webinar

Mwayabo Jean Claude Kazadi, MD, MPH, MBA, (PhD)

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Presentation layout

1. Objectives of the presentation
2. Past and current HIV situation in Zambia and Africa.
3. Different HIV implementation challenges with appropriate public health responses, across time
4. conclusion

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Objective

- Learn on the burden of HIV in Africa and specifically in Zambia
- Better understand the contribution of public health approaches to HIV management in Zambia

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HIV in Zambia and Africa

- In 1998, Sub-Saharan Africa was home to 70% of the people who became infected with HIV.
- Four-fifths of all AIDS deaths occurred in Sub-Saharan region in 1998.
- Africa has been the global epicenter for HIV infection and in 1998, 9 out of 10 of infection among children under 15, were in Africa.

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HIV in Zambia and Africa

- Zambia's first AIDS case was reported in 1984. Today Zambia has a generalized HIV/AIDS epidemic that appears to be stabilizing.
- According to US Census Bureau, the level of HIV sero-prevalence in pregnant women increased from 8 percent in 1985 to 27 percent in 1992, in Lusaka, the capital of Zambia.

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Community Home Based Care (CHBC)

- With the above described HIV burden, we experienced Floor beds, Hospital Overstay due to Chronic disease. CHBC was established to overcome these challenges.
- CHBC is defined as any form of care given to ill people in their homes.
- Such care includes physical, psychosocial, palliative and spiritual activities. It improves adherence and retention as well.

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Community Home Based Care (CHBC)

- The goal of CHBC is to provide hope through high-quality and appropriate care that helps ill people and families to maintain their independence and achieve the best possible quality of life.
- The two (2) main words in CHBC programming are **families** and **communities**. Families are the central focus of care and form the basis of the CHBC team. Communities are places where people live and a source of support and care to individuals and families in need.

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Community Home Based Visits

- Visiting patients in their homes, in the rural Sichili, Western Province of Zambia, in 2006.
- Between 70% and 90% of illness care takes place within the home.

16/02/2006

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Community Based Antiretroviral Therapy (CBART)

- After implementing successfully the CHBC and with the availability of antiretroviral, more people accessing ART. Clinic overcrowded and retention were the main challenges.
- Need to decongest clinics, improve patient's follow up, retention, suppression and reduce community transmission. (Solution=CBART)
- In sub-Saharan Africa, models of care needed to adapt to support continued scale up of antiretroviral therapy (ART) and retain millions in care.

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Community Based Antiretroviral Therapy (CBART)

- Due to shortage of clinicians, the task shifting was adopted, allowing trained/oriented lower cadres to provide ART care in communities.
- These services were provided as outreaches in some countries and as home care visits in others. And these two are completely different in term of actual implementation.

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Community Based ART

- Regular outreaches in the community to provide HIV testing, treatment and follow up. These outreaches were conducted three (3) time a week and the outreach teams were made of a clinician, lab technician, Pharmacy Technician, Adherence and Community officers, and Psychosocial counselor.
- Home Based ART is provided by trained Community Based Health Volunteers. Taking refills medications (ARVs) to stable patients.

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Community Health posts

- Once more patients were initiated on ART and better followed up through Community Based ART models. The following challenges emerged: Male gaps in accessing ART and retention, as well as the need to achieve HIV epidemic control (“Elimination”)
- The community health post (CHP) Model is a community model of care designed to expand HIV care by improving the efficiency and efficacy of HIV case finding, linkage to treatment, and retention in care.

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Community Health posts

- It focuses on identifying people living with HIV (PLHIV) and linking them to same-day ART initiation.
- The model decentralizes HIV service delivery, including HIV testing, ART initiation and continuation, and phlebotomy, from ART facilities to static CHPs.

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Community Health posts

- The CHP model aims to harnesses existing community platforms (such as churches, markets, and bus stops) and resources to deliver more accessible HIV continuum of care services and alleviate the burden on overwhelmed health systems in high HIV burden countries.
- The model is designed to address the time, resource, and stigma constraints of accessing HIV treatment and care from traditional clinic settings.

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TB DOT??

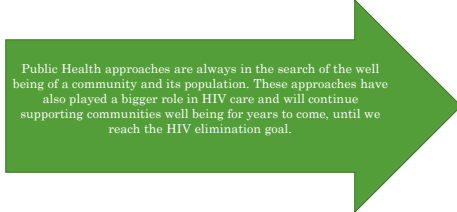
Index Testing (HIV epidemic control)

- Including the “Know Your Child HIV Status” (KYCHS)
- Index testing, also referred to as partner testing/partner notification services, is an approach whereby the exposed contacts (i.e., sexual partners, biological children and anyone with whom a needle was shared) of an HIV-positive person (i.e., index client), are elicited and offered HIV testing services.

Effectiveness Index vs Door To Door Testing???

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Way forward



Public Health approaches are always in the search of the well being of a community and its population. These approaches have also played a bigger role in HIV care and will continue supporting communities well being for years to come, until we reach the HIV elimination goal.

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