

Integrated community delivery model to improve PrEP uptake and continuation for AGYW in Mazowe district, Zimbabwe

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Background

The Ministry of Health and Child Care (MOHCC) has been offering oral pre-exposure prophylaxis (PrEP) as part of combination HIV prevention in Zimbabwe since 2017. PrEP is effective in reducing the risk of HIV acquisition. The level of protection is directly linked to adherence to daily oral PrEP.

Access to HIV prevention services, including PrEP, is a challenge for members in hard-to-reach rural communities and further compounded by COVID-19 travel restrictions.

Pangaea Zimbabwe AIDS Trust (PZAT), in collaboration with MOHCC and Zimbabwe Technical Assistance, Training and Education Center for Health (Zim-TTECH) embarked on integrated clinical outreach services to ensure continuity of HIV services including PrEP uptake, effective use (adherence) and continuation among vulnerable adolescent girls and young women (AGYW).

Description



Image 2: Mazowe district PrEP Champions

From January to August 2021, integrated clinical outreach services were conducted in Mvurwi Hospital farming areas, Mazowe District on a monthly basis. The comprehensive package of services brought HIV testing, oral PrEP, linkage to HIV treatment, family planning, gender-based violence prevention and childhood growth monitoring to community doorsteps. In total, there are 11 outreach points, serving 22 farming communities.

The outreach clinical services were offered either outdoors, in isolated farmhouses/barns or schools depending on the setup of the outreach point.

Outreach points were identified based on the proximity to a health facility, prioritizing areas that are furthest. MOHCC and implementing partners collaboratively mapped points and planned the outreach visits.



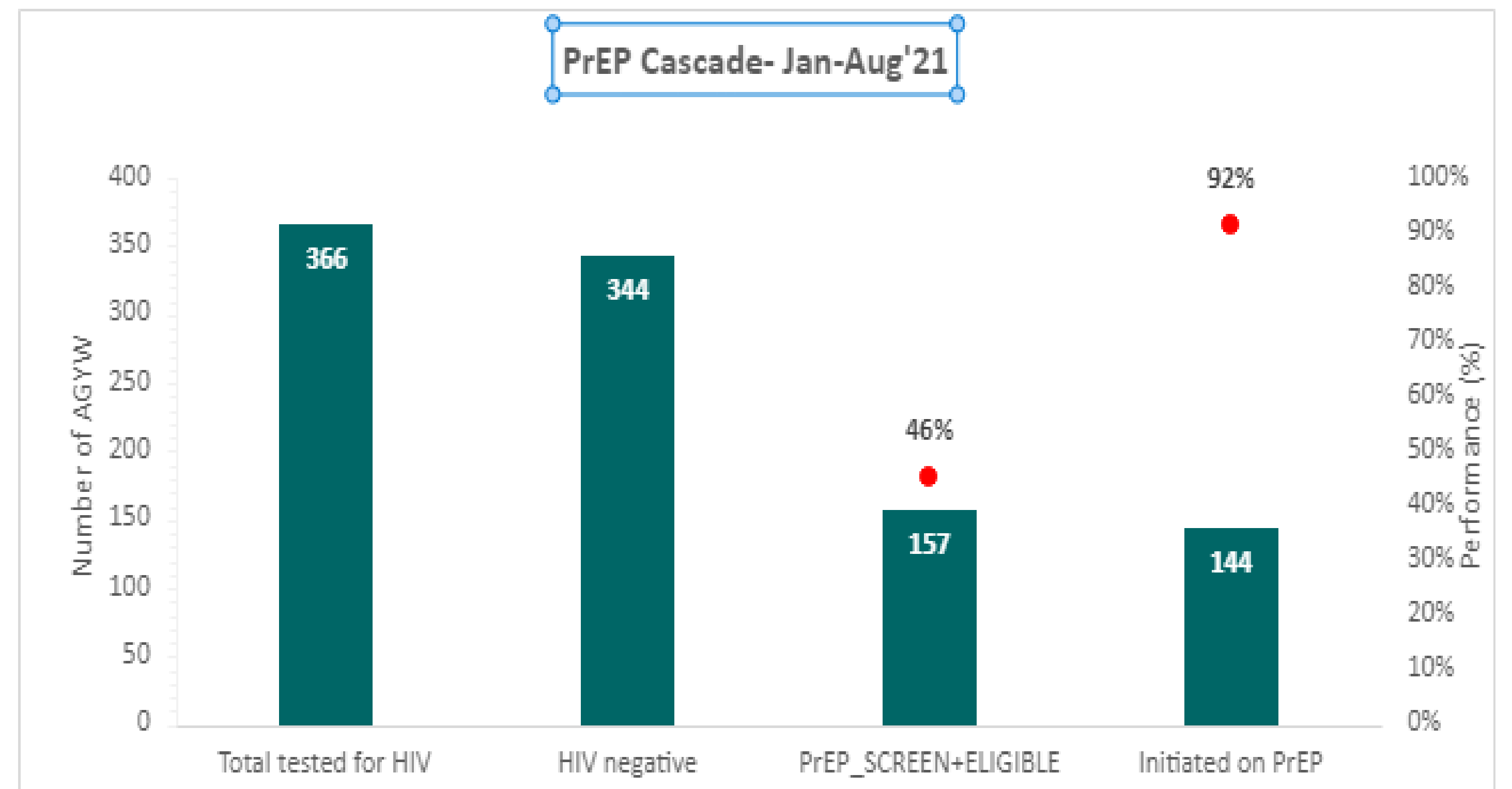
Clients mobilized for PrEP were tested for HIV. Those found negative were screened for eligibility using a standardized risk assessment tool. Those eligible were offered PrEP. PrEP Champions are responsible for tracking clients to return for PrEP resupplies.

Image 2: Outreach HIV testing services for PrEP resupply in Mvurwi, Mazowe district

Lessons Learned

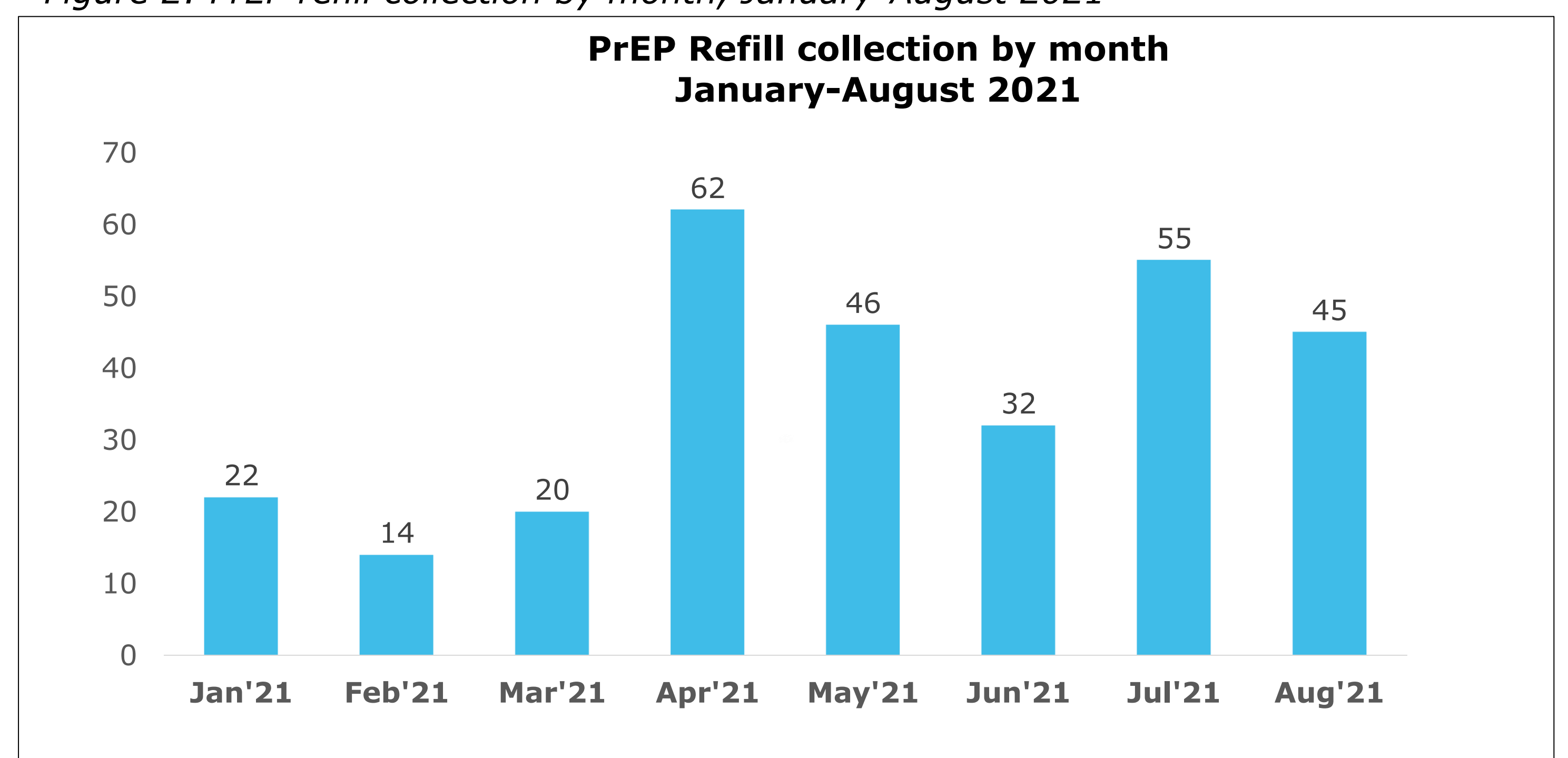
Integrated delivery of services at the community level improved access and utilization to PrEP. In COP 20 (October 2020 to September 2021), the district surpassed the target for PrEP initiation for AGYW. A total of 977 AGYW (221%) were initiated on PrEP against an annual target of 442.

Figure 1: AGYW accessing HIV testing and PrEP services through community outreach in Mazowe District, January-August 2021



Community HIV prevention services provision improves uptake of HIV prevention including PrEP services. Between January and August 2021, outreach statistics show that 344 out of 366 (94%) AGYW tested for HIV were negative, 157 (46%) were assessed for risk and 144 (92%) were initiated on PrEP.

Figure 2: PrEP refill collection by month, January-August 2021



PrEP initiations increased from an average of 13 new initiations per month to about 26 while PrEP refills increased from an average of about 19 collections per month to about 48 average collections. The maintenance of client confidentiality builds trust and improves health service uptake hence the high number of AGYW accessing oral PrEP during the outreaches.

Conclusions

Collaboration across organizations through integrated planning and implementation (HIV testing, oral PrEP, linkage to HIV treatment, family planning and gender-based violence prevention) is essential for successful delivery of HIV prevention services, including PrEP.

Comprehensive HIV service provision can be effectively implemented with demand generation by PrEP Champions. Under COVID-19 travel restrictions, communities can still access health services, including PrEP, using this delivery model.

