



# PSI AT AIDS2022

## EFFECTIVENESS OF REAL-TIME CLIENT TRACKING TOOLS IN REDUCING INTERRUPTION IN TREATMENT: EVIDENCE FROM A LOW RESOURCE SETTING, ZIMBABWE

### AUTHORS

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### LESSONS LEARNT

IIT was 7.1% [6.1% – 8.2%: 95% CI] at the onset of the intervention in February 2021 and dropped almost monotonically to 0.4% [0.3%-0.5%: 95% CI] by December 2021. There were no differences in the exponential decay of IIT in the period by population type (illustrated in the graph), age nor by gender. Real-time data enabled a timely client-provider interaction that resolved challenges faced by the client (including COVID-19 induced travel restricts). The CQI strategy included differentiated service delivery to improve access to ART medication.

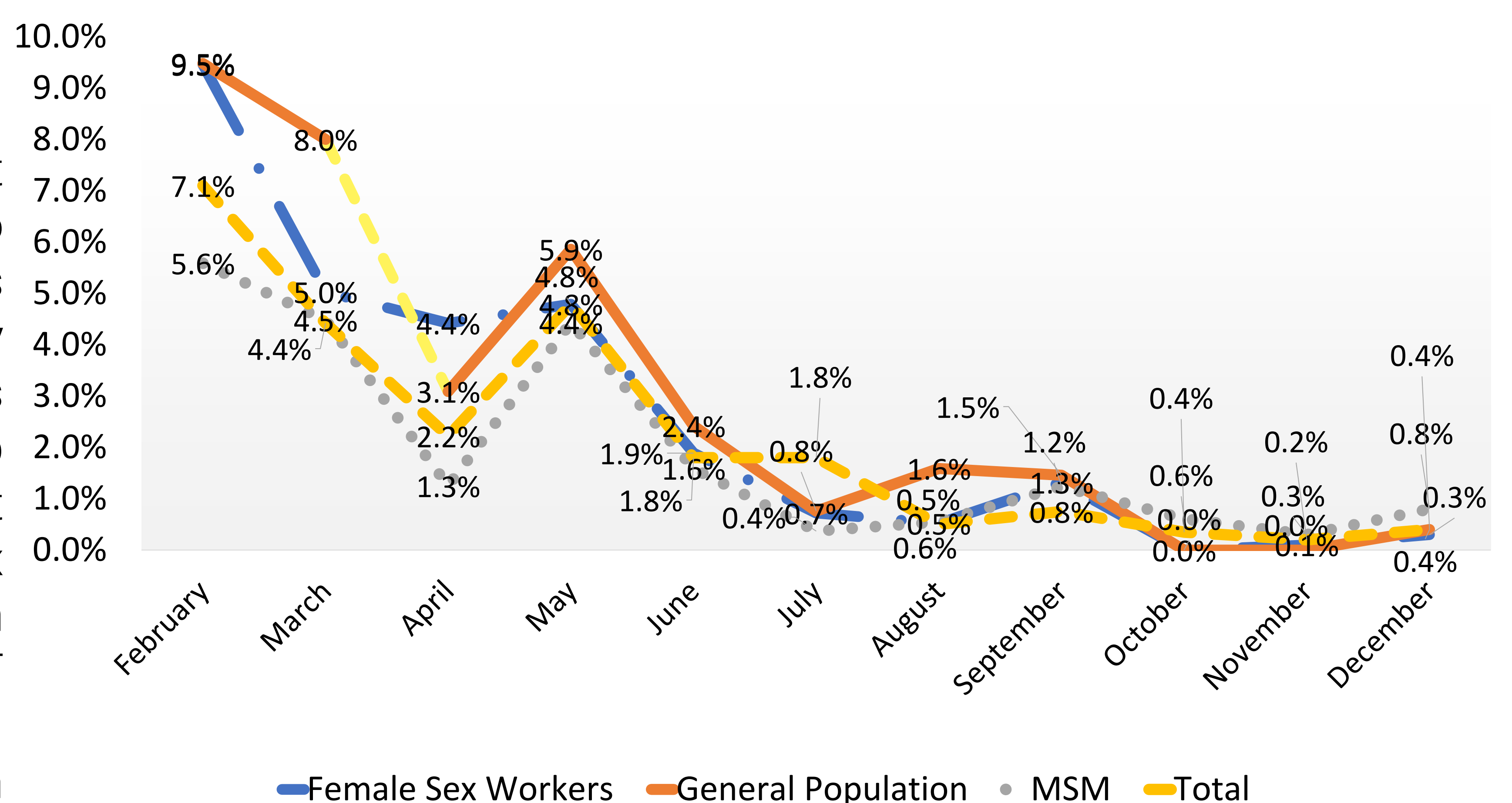
### BACKGROUND

Despite the impressive progress on achieving the UNAIDS 95-95-95 goal for HIV epidemic control by 2030, Interruption in Treatment (IIT) remains one of the biggest threats in Sub-Saharan Africa especially due to COVID-19 among other challenges. UNAIDS estimates that one in five experience IIT after being on ART for at least 12 months. In Zimbabwe IIT is equally high (estimated at 13-20%). Population Solutions for Health (PSH) with USAID funding, invested on a client-level electronic record management system (Bahmni) that generates real-time data to improve ART retention.

### DESCRIPTION

Between February – December 2021 PSH implemented a Continuous Quality Improvement (CQI) intervention utilizing the Bahmni EMR to generate real time ART data across six sites from 5 districts in Zimbabwe. A weekly electronic line list of clients due for ART refills was generated to facilitate client follow up through phone calls and home visits. The Last Mile team tracked 7,903 clients; Female sex workers (FSW), Men who have sex with Men (MSM) and General Population (GP) on ART from February to December 2021 implementing the CQI strategy and recording month on month IIT to assess effectiveness of this innovation.

Figure1: Month on month Interrupted in Treatment (IIT) by Population type



### CONCLUSIONS/NEXT STEPS

The EMR has shown to be an effective tool in tracking clients on ART to reduce IIT. Generating real time data allows for a much more rapid and effective client-provider interaction that translates into improved ART cohort management. This innovation must be scaled up especially in low resource settings where patients face diverse challenges that result in IIT.

