

# A case for referrals

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## Introduction

The past 5 years have seen huge developments in the approach to eliminating new HIV infections. Early detection and treatment have proven to be effective prevention tools. In response to these findings, many governments and NGOs have scaled-up HIV testing in an attempt to increase uptake and utilization of ARVs.

However, despite the strides made in getting people to know their status, significant proportions of clients never attend their first clinical visit following an HIV positive diagnosis. The gap between a positive HIV test and enrollment into care continues to widen.

Based on policies of confidentiality and anonymity, organizations conducting HIV testing forgo collecting personal details for follow-up. In theory this is to combat stigma and discrimination, but in practice this results in higher levels of pre-ART loss to follow-up.

This gap reflects the need for more effective linkage of HIV counseling, testing, and referral services.



Figure 1. GRS coach records contact details of youth before HIV test

## Materials and methods

In an attempt to combat outreach-based loss to follow-up, Grassroot Soccer Zambia (GRSZ) has begun mandating active referrals to care for all youth under 20 years testing HIV positive.



Figure 2. Referral form completed on-site after HIV positive diagnosis

These youth are given an appointment at nearest clinic and accompanied to first visit by a peer counselor.

## Results

In 2004, President Mwanawasa promised to provide ARVs to 10,000 people by the end of the year. Exceeding this, he set another to reach 100,000 by the end of 2005.

At the end of 2009, 64 percent of the 440,000 people in Zambia needing ARV treatment were receiving it.

As of 2009, more than one and a half million people aged 15 and over were tested for HIV and received their results; double that of the previous year and quadruple that of 2006.

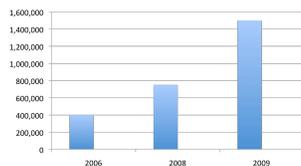


Figure 3. Public and private HIV testing trends in Zambia (NAC, 2011)

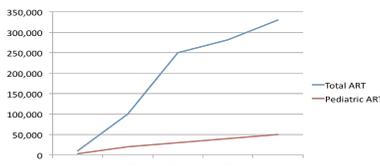
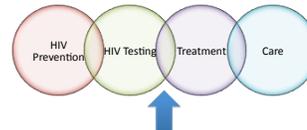


Figure 4. ART initiation in Zambia (UNGASS, 2011)

Despite large-scale improvements of getting people tested for HIV, there has not been an associated increase in the uptake of ARVs.

## 'Bridge the Gap'

GRSZ links HIV prevention, Testing, Treatment, and Care through soccer.



Most important part: the case for active referrals

### 4 steps to an effective referral:

1. Shared confidentiality between testing organization and clinic.
2. Pairing of peer counselor with youth testing HIV positive.
3. Home visit results delivery and disclosure.
4. Clinical visit accompaniment.

\*(Post enrollment – ongoing psychosocial support)

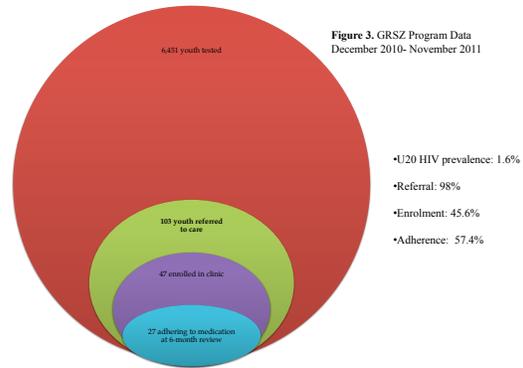


Figure 3. GRSZ Program Data December 2010- November 2011

- U20 HIV prevalence: 1.6%
- Referral: 98%
- Enrollment: 45.6%
- Adherence: 57.4%

## Conclusions

This poster is a call for action. For over two years, GRS Zambia has been testing youth under 20 years of age at community-based HCT tournaments. All youth who test positive receive an active referral to care.

The GRS program data suggests immediate, on-site referrals to care and treatment following a positive HIV diagnosis has beneficial outcomes in three key areas.

- Clinical enrollment
- Adherence
- 6-month follow-up

GRSZ is currently working with the Ministry of Health in Zambia to incorporate active referrals as an essential component to HIV testing in adolescents.

## Literature review

Author	Year	Title	Journal	Where	N/No/Pop	Methods	Key Findings	GRSZ Implications
Dennis et al	2008	HIV Testing in Zambia: A Review of the Literature	AIDS Education	Zambia	450	Cross-sectional survey	GRSZ testing volume 40%, and retention 40%.	Research supports home visit with counseling to increase HIV testing.
Kwambale et al	2010	Linkage to HIV Care and ART	PLoS ONE	Cape Town	156/19/ 200	Review of HIV testing registers, CD4 counts and ART registers	62.6% of individuals accept CD4 care and 40% of those who do not accept CD4 care are lost to follow-up.	Research consistent with TTT model of HIV testing and ART registers.
Loewen et al	2010	The 'Narrow' of Linkage: From HIV Test to Care	PLoS ONE	Durban	712 adults	Multi-stage analysis to identify factors associated with PLIC.	45% of those who tested HIV positive did not enroll in care.	Research supports home visit with counseling to increase HIV testing.
Rosen et al	2011	Retention in HIV Care	PLoS Med	Sub-Saharan Africa	28 articles	Systematic literature review	Retention in HIV care is low, ranging from 20% to 80%.	Research consistent with EAP model.
Garland et al	2011	HIV Counseling, Testing and AIDS Education	AIDS Education	USA	42 adults	Structural and qualitative interviews among providers	3 main factors for not enrolling care: 1) lack of active referral, 2) no access to care, 3) no access to ART.	Research points to best areas GRSZ should focus on.
Stear et al	2011	Monitoring & Evaluation of HIV CTU Services	AIDS Education	USA	8 articles	Review of 8 articles relating to HIV CTU services	Review of 8 articles relating to HIV CTU services	Research points to best areas GRSZ should focus on.
ZPCT	2008	ZPCT VCT Referral and M&E Report	ZPCT	Zambia	PLHA in Zambia	Programme overview	No findings shared on discontinuation of CTU services.	Research points to best areas GRSZ should focus on.
CDC	2008	HIV Counseling, Testing and Referral (CTR) Guidelines	Report	USA	Policy	Guidelines for effective CTR with strategies to increase uptake.	Guidelines for successful counseling, testing, and referral in the US.	Research consistent with EAP model.
Martinez et al	2003	Translating youth into care through outreach	Journal of Adolescent Health	USA	107 newly identified HIV positive youth	Cross-sectional survey	Outreach intervention increased HIV testing and linkage to care.	Research highlights need for individual case management for each youth.
CDC	2006	Linkage to Care in non-clinic settings	PLoS ONE	CDC	5 LTC programs	Review of 5 studies LTC programs	Review of 5 studies LTC programs	Research points to best areas GRSZ should focus on.
Krebs et al	2008	Community-based Follow-up AIDS Care (CFUAC)	PLoS ONE	Lusaka	1,343 patients with recent serostatus	Follow-up home visits using mobile phones	Follow-up home visits using mobile phones	Research points to best areas GRSZ should focus on.
Wilson et al	2012	Identification of HIV-infected youth and linkage to care can be major challenges	HIV Clinics	USA	Overview	Summary of Special Issues on Adolescents and HIV	Summary of Special Issues on Adolescents and HIV	Research points to best areas GRSZ should focus on.

## Acknowledgments

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