Pilot of a Community-Based Hybrid HIV Testing Program as a Strategy to Saturate Testing Coverage in Western Kenya

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BACKGROUND

HIV epidemic in Homabay County, Kenya

- Homabay County had the highest HIV incidence in Kenya in 2015.
- HIV prevalence in Homabay County was 26% in 2015
  - 4.5 times higher than the national prevalence
- Increasing access and uptake of HIV testing services (HTS) is a critical first step for linking individuals to prevention, care and treatment services.
- We piloted a community-based "Hybrid" HTS program that included the following components:
  - Community mapping
  - Household census
  - Multi-disease community health campaigns (CHCs)
  - Home-based HTS

METHODS

Program Implementation

- From July through September, 2016
- Implemented in Mbita sub-county: Lambwe, Rusinga
- HTS eligibility criteria according to national guidelines
  - Not previously-diagnosed with HIV
  - 15 years or older (exception: sexually-active youth <15)
- Previous HIV test >3 months (exception: recent risk)

Program Services

- Services at Community Health Campaigns
  - Screening, testing and referrals for HIV, tuberculosis, malaria, hypertension and diabetes
- Tracking of enumerated residents who did not attend CHCs to offer home-based HTS

RESULTS

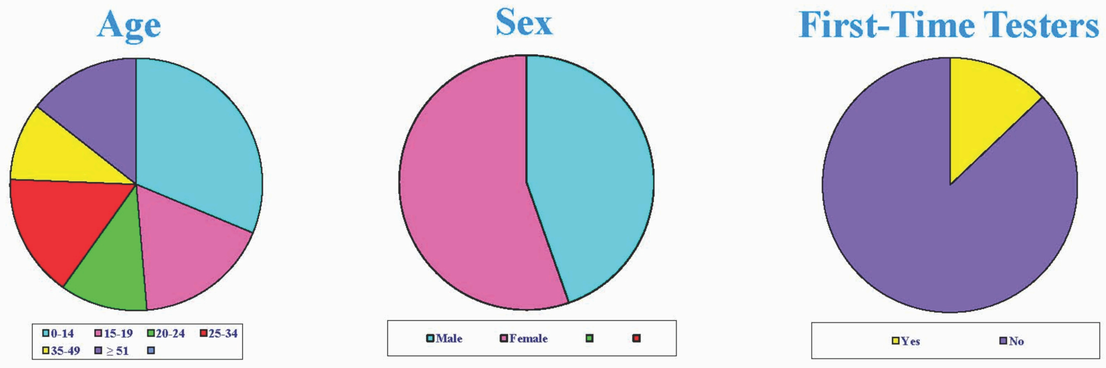
Hybrid HTS Program Participants

- 28,885 persons reached in total
  - 25,340 enumerated Rusinga and Lambwe residents
  - 3,545 non-residents
- 19,288 persons participated in CHCs & tracking activities
  - 14,015 persons attended CHCs
  - 5,273 persons were tracked to offer home-based HTS

HTS Eligibility, Testing Uptake and Results

- 1.2% prevalence of newly-diagnosed HIV cases
- Among persons newly-diagnosed at CHCs, 68% (63 of 93) accepted same-day ART initiation as part of the campaign
- Among 9,378 eligible residents
  - HTS achieved in 77% of adult (4,891 of 6,348)
  - HTS achieved in 100% of children (3,028 of 3,030)
  - Yielded 87 newly-diagnosed cases
- Newly-diagnosed cases represented 7% of 1,330 total HIV cases among residents the community (newly-diagnosed and previously-diagnosed)

Characteristics of HIV Testers



- 13% of persons accepting HTS were first-time testers
  - 84% of first-time testers were 24 years old and younger
  - 62% of first-time testers ages 15-49 years were male
- Persons with no prior testing history were less likely to accept HTS (aOR=0.269; p<0.001)
- Age and sex were not associated with HTS acceptance

CONCLUSIONS

- The hybrid HTS program diagnosed persons previously unaware of their HIV-positive status, thereby enabling linkage to care and same-day treatment and reducing onward transmission risk.
- Hybrid approach of CHCs in combination with home tracking is an effective strategy for increasing HTS uptake among men and young people.
- Pilot was among the first programs to implement new national guideline of ART initiation upon diagnosis.
- Increasing HTS uptake among persons never tested or potentially at-risk for HIV remains challenging.
- Lessons learned from this pilot will inform future implementation of HIV testing approaches in sub-Saharan Africa.

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