

Prevalence and linkage to care

Nolwenn Conan, Epicentre, South Africa

Introduction

HIV population-based surveys allow community-level measurement of key HIV outcomes to define and prioritise interventions in HIV programs. We present the results of HIV population-based surveys conducted in three sub-Saharan countries: Zimbabwe, Malawi and Uganda.

Method

Cross-sectional population surveys were implemented in Gutu (Zimbabwe), Nsanje (Malawi) and Kasese (Uganda) between September and December 2016. Using multi-stage cluster sampling, we recruited individuals aged ≥ 15 years living in 2400 selected households in Gutu and 2443 households in Nsanje, and individuals aged 15-69 years living in 828 households in Kasese. Individuals who agreed to participate were interviewed and tested for HIV at their homes. Viral load was measured in all participants who tested positive for HIV, regardless of whether they were undergoing anti-retroviral therapy (ART).

Results

Among 5440 adults in Gutu, 5322 adults in Nsanje, and 1812 adults in Kasese, 88.9%, 87.8% and 95.9% were included and tested respectively. The overall prevalence was 13.6% (95%CI 12.6-14.5) in Gutu, 12.0% (95%CI 11.1-13.0) in Nsanje, and 17.5% (95%CI: 15.8-19.4) in Kasese.

Also calculated were the overall coverage in terms of percentage of persons: 1) testing HIV positive being aware of their HIV status, 2) with diagnosed HIV infection receiving sustained ART and 3) receiving ART having viral suppression. Analysis of the results stratified by gender and age group is still ongoing; these findings will be available shortly.

Conclusion

These HIV- population surveys allowed measurement of HIV outcomes at the community level and highlight the remaining gaps in the HIV cascade of care in each of the three settings. Further HIV population-based surveys could be envisioned in other settings with MSF HIV programs to estimate intervention impact in the community and to define which specific population groups should be targeted in the programs.

We conducted HIV population-based surveys in three different sub-Saharan African countries to identify gaps in the HIV cascade of care and to orient operational strategies for MSF HIV programs.