



Efficiencies for Clinical HIV Outcomes (ECHO)

Community dispensing of antiretrovirals by health providers in four provinces of Mozambique: Impacts on retention in care for patients on antiretroviral treatment.

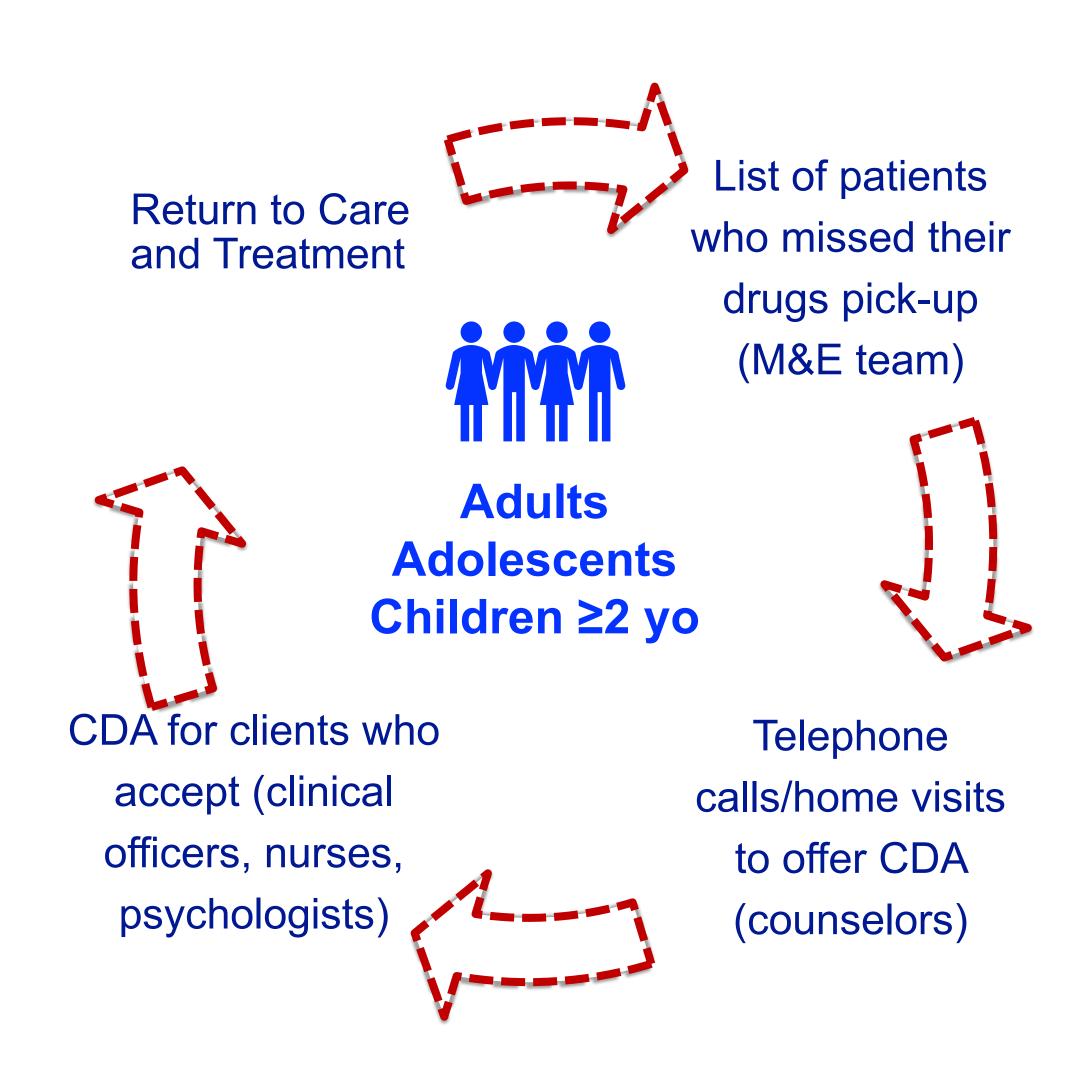
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BACKGROUND

With the expansion of the COVID-19 pandemic, USAID's ECHO (Efficiencies for Clinical HIV Outcomes) project implemented an alternative model of community distribution of antiretrovirals (CDA) by health providers for patients who missed their drugs pick-up due to lacking resources. This study analyzed the health outcomes of a cohort of patients who received CDA among 4 provinces of Mozambique (Manica, Niassa, Sofala and Tete).

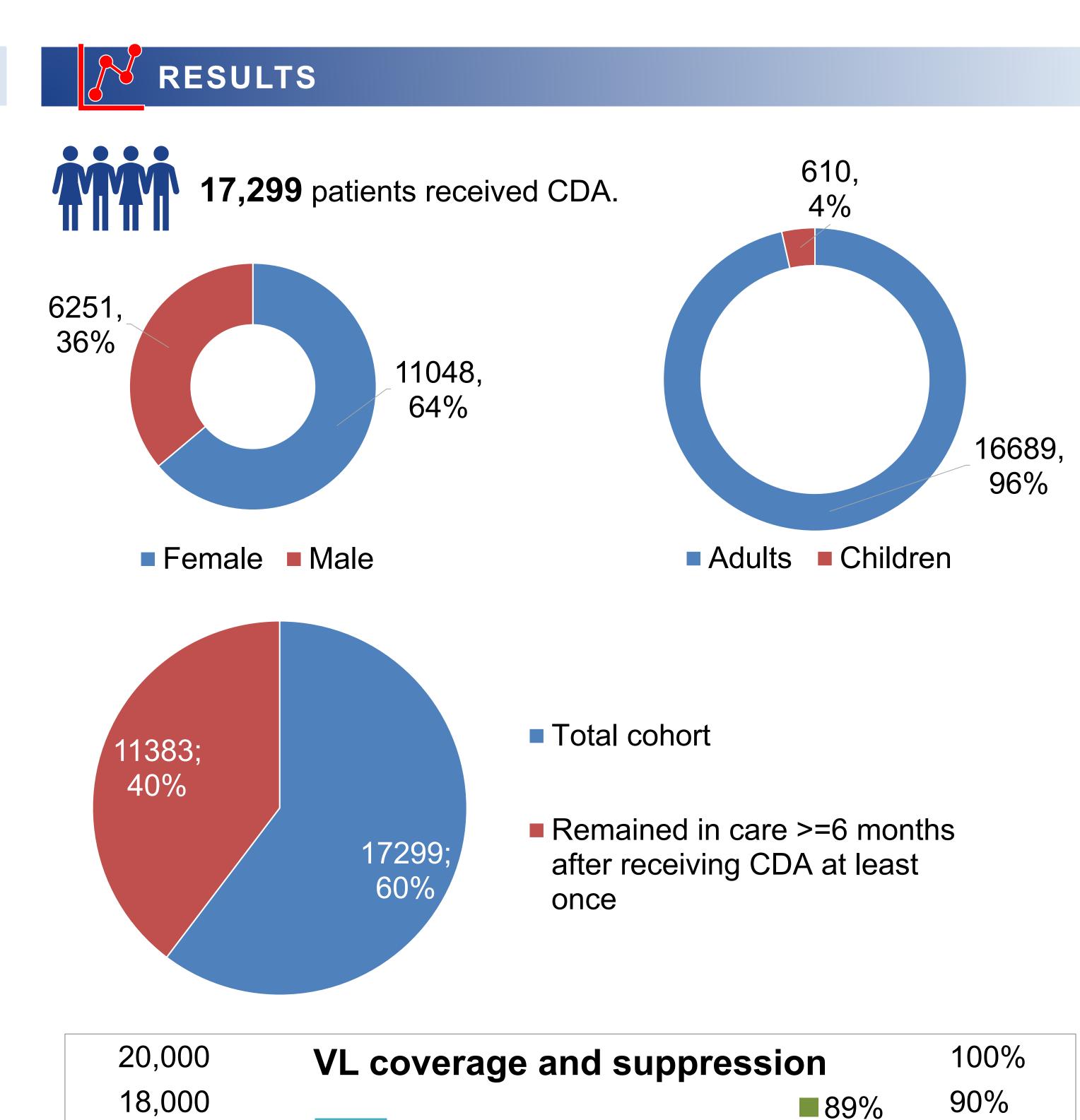




METHODS

This is a retrospective cohort study of routine data collected from electronic medical records of patients who received CDA from 06/21/2020 to 03/20/2022 from 81 health facilities among the four provinces. All patients were followed until 09/20/22 to assess long term retention in care (>=6 months) and viral load suppression (viral load <1,000 copies/ml).

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DISCUSSION

17,299

Total cohort

16,000

14,000

12,000

10,000

8,000

6,000

4,000

2,000

CDA has been a valuable strategy, allowing early intervention to offer community ARVs pick-up to those who have failed to receive their scheduled treatments directly from health facilities. The strategy can be used in other communities, particularly in remote areas where patients face similar challenges.

63%

10,911

With VL test

80%

70%

60%

50%

40%

30%

20%

10%

0%

9,763

VL suppressed