

# Framing Remarks on Linkage to Re-engagement

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**Leveraging DSD Strategies to Optimize HIV Testing and Linkage Services**

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# Dis-engagement and Re-engagement Pathways

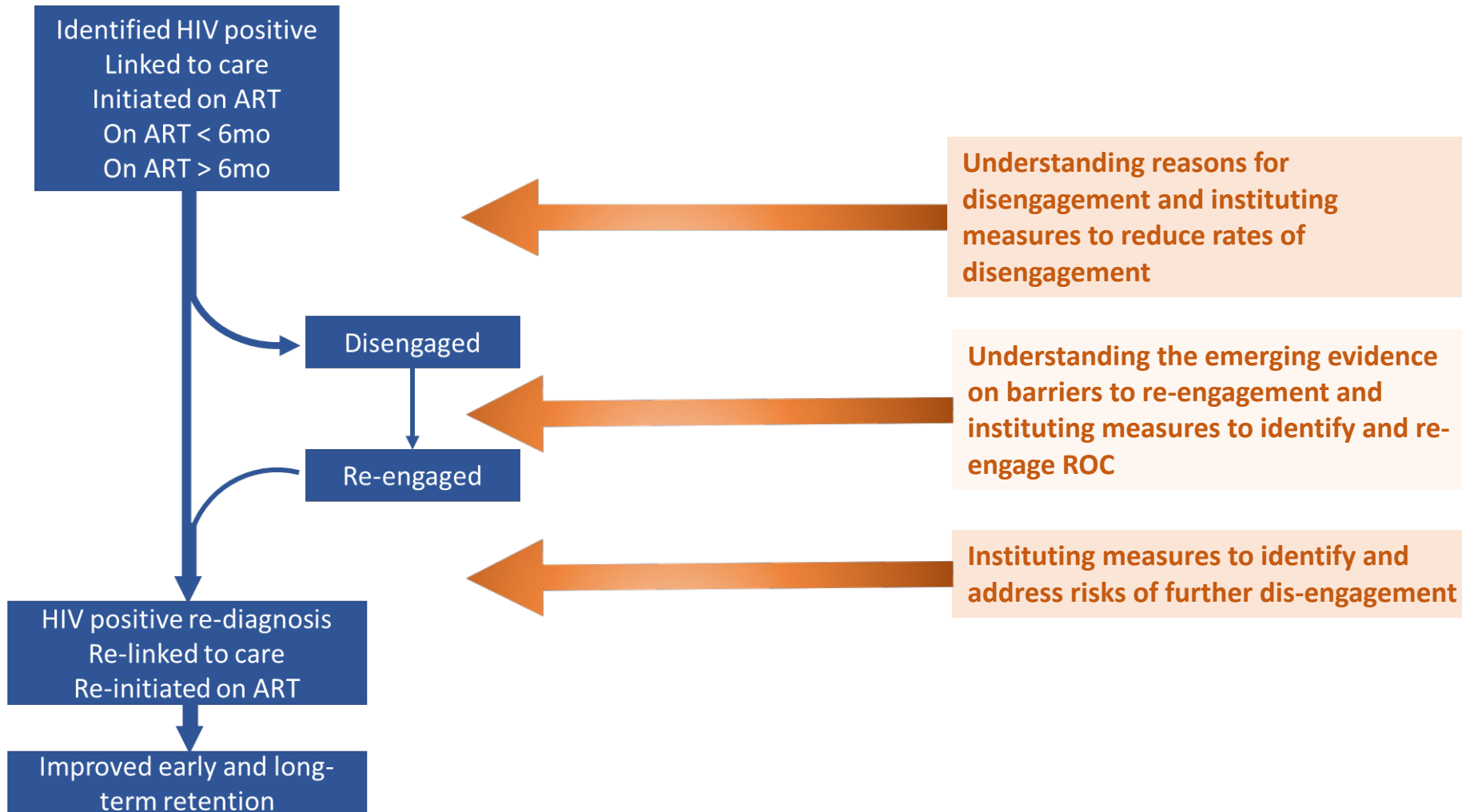


Image adapted from Ehrenkranz P, et al. (2021)

# Dis-engagement and Re-engagement Pathways

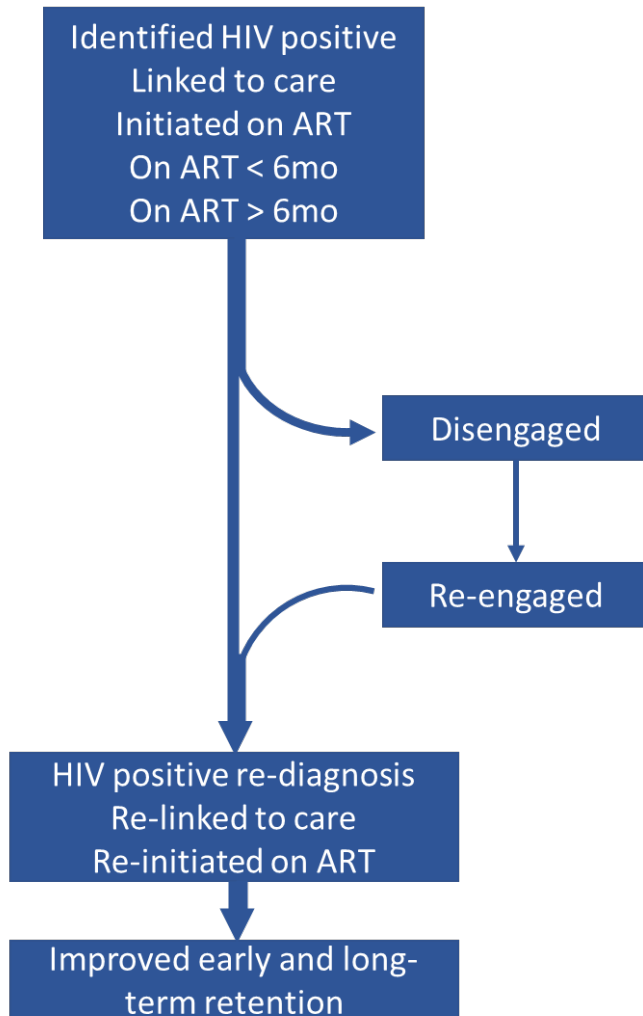


Image adapted from Ehrenkranz P, et al. (2021)

- **Structural** (27.3%), **psychosocial** (13.9%), and **clinic-level barriers** (13.4%) lead to silent transfers and disengagement: 31% of patients silently transferred or disengaged<sup>1</sup>
- Health services should be **responsive to the changing life circumstances** of recipients of care<sup>2</sup>
- Overall, across all studies, reengagement programs were able to return **39%** (95% CI: 31% to 47%) of all patients who were characterized as LTFU.<sup>3</sup>
- Reengagement contact resulted in **58% return** among those found to be alive and out of care (N = 17 studies).<sup>3</sup>
- In 9 studies that had a control condition, the **return was higher among those in the reengagement intervention group** than the standard of care group (RR: 1.20 (95% CI: 1.08 to 1.32, P < 0.001).<sup>3</sup>
- Many healthcare workers (**78%**) believe that the Welcome Back approach help to improve client-provider relationships.<sup>4</sup>
- Retesting rates - By 2020 projecting that up to **58%** of positive tests were results of people who had been diagnosed previously with multiple contributory factors including re-engaging into care.<sup>5</sup>
- Train HCWs to be welcoming, establish systems to triage for re-testers, use HTS cadres to counsel recipients of care on re-engaging and staying on treatment while **addressing the specific barriers led them to disengage.**<sup>6</sup>
- Revising EMRs to include Unique ID systems that can track retesting

<sup>1</sup>Izukanji S et al, 2021. <https://pubmed.ncbi.nlm.nih.gov/33011803/>; <sup>2</sup>Bisnauth MA, et al 2021. <https://pubmed.ncbi.nlm.nih.gov/34473742/>; <sup>3</sup>Mirzazadeh A et al, 2022. <https://doi.org/10.1371/journal.pmed.1003940>; <sup>4</sup>Bisnauth MA, et al 2022. <https://pubmed.ncbi.nlm.nih.gov/35037586/>; <sup>5</sup>Giguère K, et al, 2021. [https://doi.org/10.1016/S2352-3018\(20\)30315-5](https://doi.org/10.1016/S2352-3018(20)30315-5); <sup>6</sup>Lighthouse Trust Newsletter, Quartet 3, 2022. <https://www.mwlighthouse.org/resources/newsletters/quarterly-newsletters/55-quarter-3-april-june-2022/file>;

## Session Objectives

- To understand why people who were previously engaged in treatment / on ART re-test.
- To identify how to address some of the reasons people use testing as a re-engagement strategy.

# References

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Thank you!

