

Opportunities for HIVST within the future of HTS

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Leveraging DSD Strategies to Optimize HIV Testing and Linkage Services

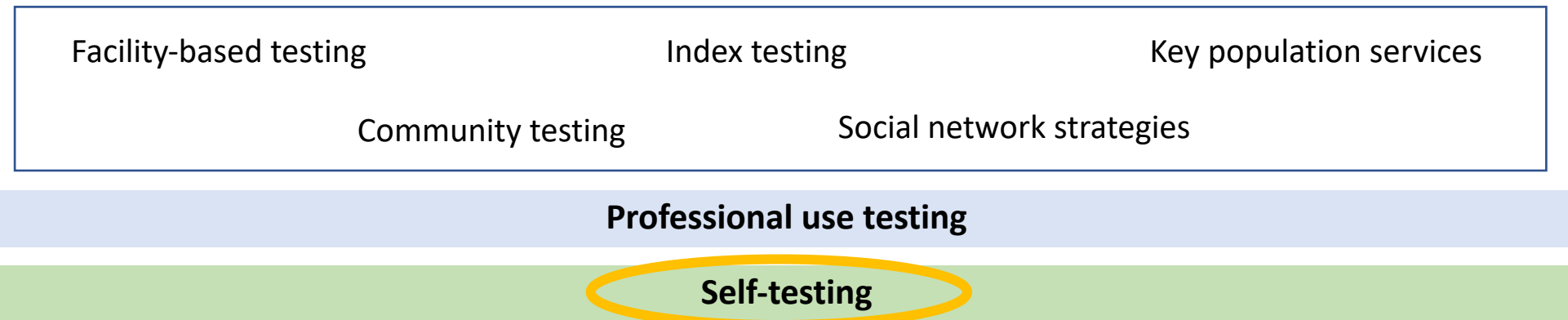
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Countries are facing a number of critical challenges in HIV testing which require leveraging new tools and approaches

How can you increase testing coverage to meet HTS treatment and prevention goals across the cascade and reach key/priority populations within resource constrained environments?

Countries have a number of strategies and tools:



- Lower-priced, WHO-qualified HIVST products offer exciting opportunities for national testing programs
- HIVST does not replace the need for professional use testing, but we should maximize its potential
- Presentation will highlight evidence around the opportunities for HIVST and experience and considerations for national scale-up from the Malawi context

Maximizing HIVST within national testing strategies offers a number of opportunities to support program goals

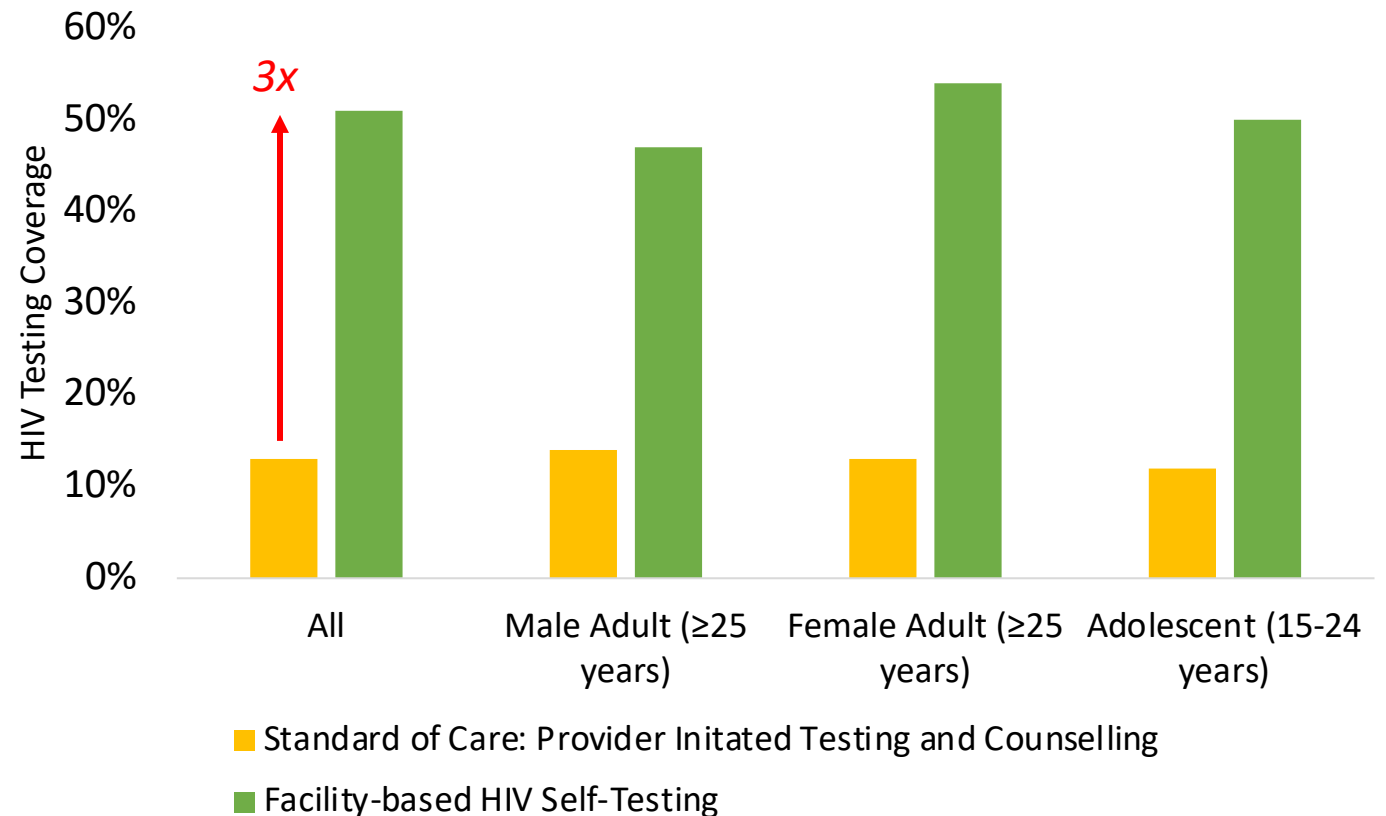
- 1 Increase testing coverage among priority populations
- 2 Reduce healthcare worker burden and introduce efficiencies
- 3 Support prevention service delivery
- 4 Increase client choice

Two studies in Malawi found that distribution of HIVST at OPD increased testing uptake among priority populations

Results

- HIVST offered in facilities is **acceptable**
- Results in similar positivity rates to standard PITC
- Can lead to a **3x increase in overall testing uptake** including among priority populations like men and young people
- **Higher linkage to care than community-based HIVST distribution**

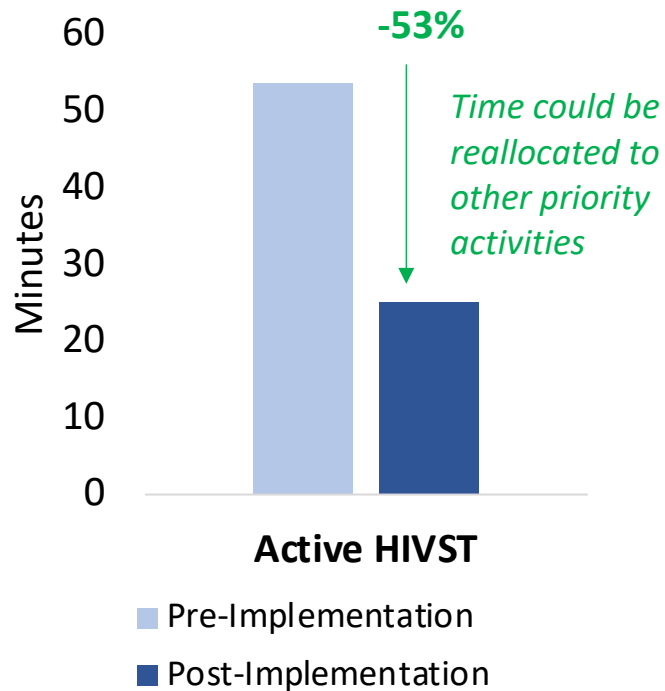
HIV testing coverage by sex and age across trial groups (n=5,885)
2018



HIVST distribution in OPD can reduce healthcare worker burden and increase efficiencies

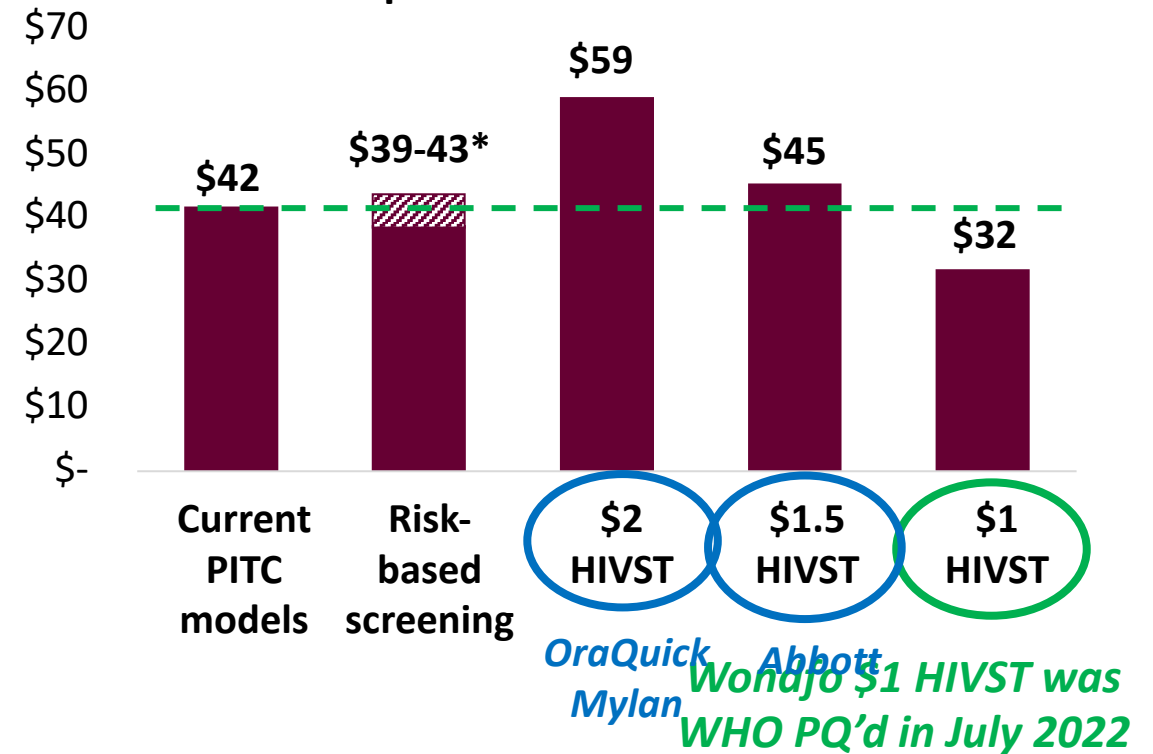
The same study in Malawi found HIVST distribution dramatically reduced HCW time required for testing.

Total healthcare worker time per test



Modeling using data from both Malawi and Uganda shows that with a \$1 HIVST, the cost per PLHIV is lower when compared to existing testing service delivery and than with screening tools.

Cost per PLHIV Identified



HIVST can reduce facility visits and provide additional choice for PrEP users

2022 WHO guidance highlights experience from COVID-19 and evidence that shows HIVST can complement existing HIV testing for differentiated PrEP service delivery

- Supported **continuity of services** during COVID-19 disruptions
- Gives **additional choice** to PrEP clients, offering convenience, privacy, and self-managed care
 - Literature review found that HIVST:
 - ↓ clinic visits
 - ↑ PrEP use among some populations
 - Studies among PrEP users in 4 countries found HIVST-supported PrEP delivery
 - ✓ acceptable
 - ✓ often preferable

Further operational research on HIVST for PrEP delivery will be critical to inform implementation and scale-up

Differentiated and simplified pre-exposure prophylaxis for HIV prevention

Update to WHO implementation guidance
TECHNICAL BRIEF



A range of HIVST products increases choice, supporting more client-centered service delivery and greater uptake

- Clients should continue to have choice between HIVST and professional use testing
- Preference between **blood-based** and **oral** HIVST is mixed
 - **Blood-based** can have perceived higher accuracy
 - **Oral-fluid** avoids the need for a finger prick
- Offering both **blood-based** and **oral** HIVST can increase uptake of HTS
 - A [study in Kenya](#) found that some men who declined professional-use and oral HIVST would have tested with blood based HIVST

High-quality, WHO PQ'd blood-based and oral fluid HIVST are available and feasible and acceptable for clients to use



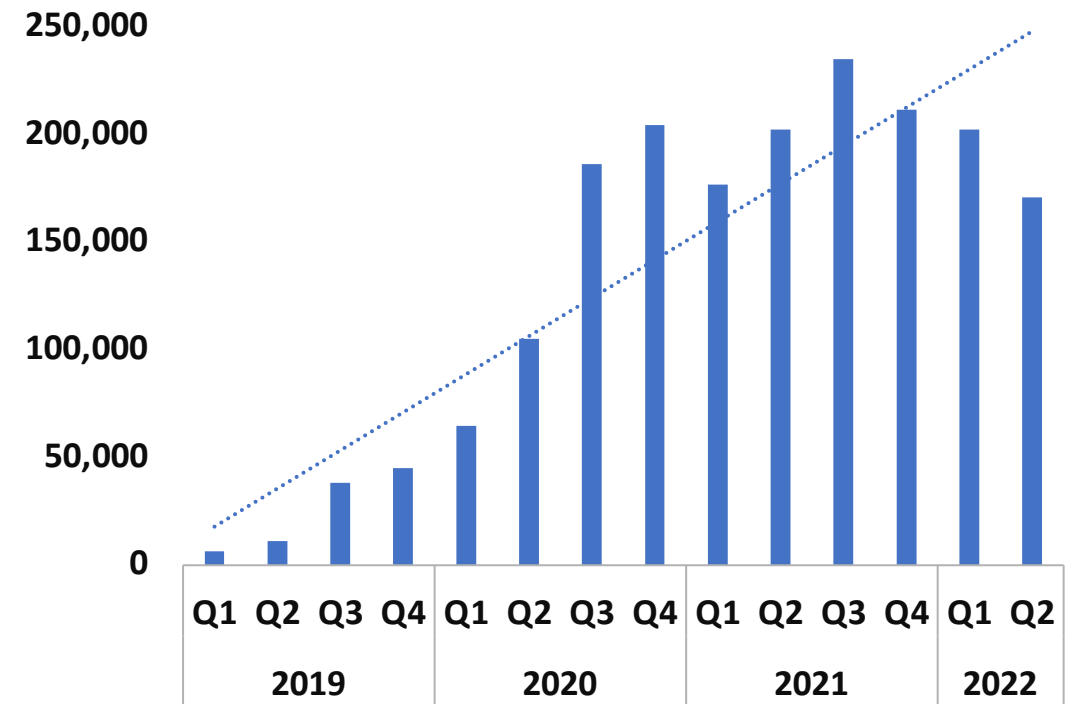
Implementation and scale-up of HIVST: *lessons from Malawi*



Malawi adopted HIVST into national policy in 2018 and has scaled distribution over recent years

- HIVST policy adopted in 2018, targeting men, youth, and hard to reach populations
- *2022 Integrated Testing Guidelines* extended target populations to include:
 - Maternal retesting and sexual partners
 - Key populations, including through social network strategies
 - PrEP clients
 - STI clients & their sexual partners
 - Adolescents >12 years
 - People in formal & informal work-places
 - Partners of index clients

HIVST Distribution in Malawi by Quarter
2019 – 2022 (1st H)



Source: National program data

Given availability of lower priced products, the Malawi MOH is **considering opportunities to further leverage HIVST.** Ministry worked with CHAI to map and assess **existing implementation to inform key questions around national strategy and implementation planning.**

Existing HIVST implementation shows high demand for HIVST and both opportunities and challenges for scale-up

Overall



Partners report high demand and highlight HIVST as effective, highly acceptable approach to reaching clients not accessing conventional HTS, especially men, youth, index clients, and key populations

Opportunity: Additional procurement could allow partners to expand distribution and build on successful implementation and address high demand for kits, especially in lower-volume districts

Distribution



Many distribution channels have been operationalized by partners, but secondary facility-based distribution and primary community-based distribution are prioritized.

Opportunity: Expanding priority channels in facilities can cost-effectively increase access to HTS. Investment in peer distributors and SNS can reach key and priority populations not attending facilities

Demand



Demand for HIVST is high, but lack of IEC materials and social marketing could limit reach of current distribution

Opportunity: IEC materials can help facilities sensitize clients and support standard messaging on HIVST and linkage during outreach. Opportunity to integrate instructions for use, linkage, and even results reporting into SMS information platforms.

Existing HIVST implementation shows high demand for HIVST and both opportunities and challenges for scale-up

M&E



There are limitations in current systems to easily capture both distribution data and results of clients who report using an HIVST.

Opportunity: Strengthen integration of HIVST data into national M&E systems/tools, including leveraging new digital data capture tools like ScanForm. Provide mentorship to improve reporting quality. Recognize that data visibility may be limited by private, autonomous nature of HIVST, but this is also why clients may choose to use it over professional RDTs.

HIVST Stocks



Shortages of HIVST lead to rationing of HIVST and limit potential reach

Opportunity: Leverage the availability of new lower-priced HIVST. Review quantification to reflect increased demand.

Thank you!

