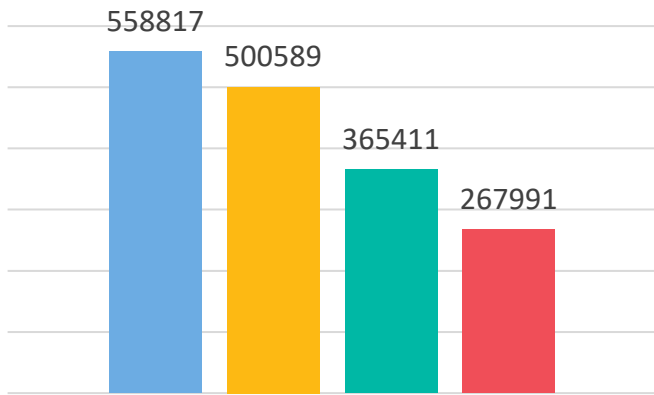


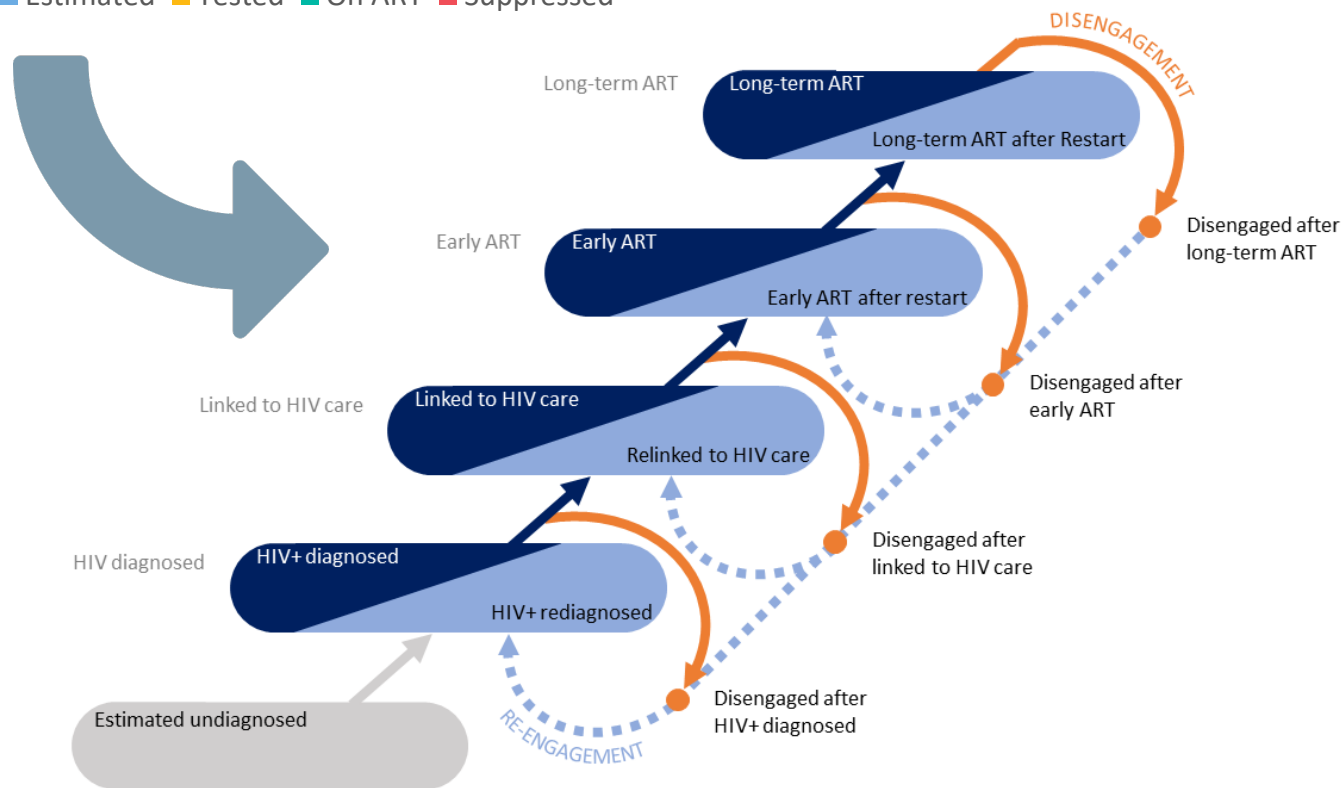
Patterns of engagement across the cyclical cascade in the Western Cape

Jonathan Euvrard
Department of Health & Wellness
Western Cape Government
South Africa





■ Estimated ■ Tested ■ On ART ■ Suppressed



Why populate a cyclical cascade?

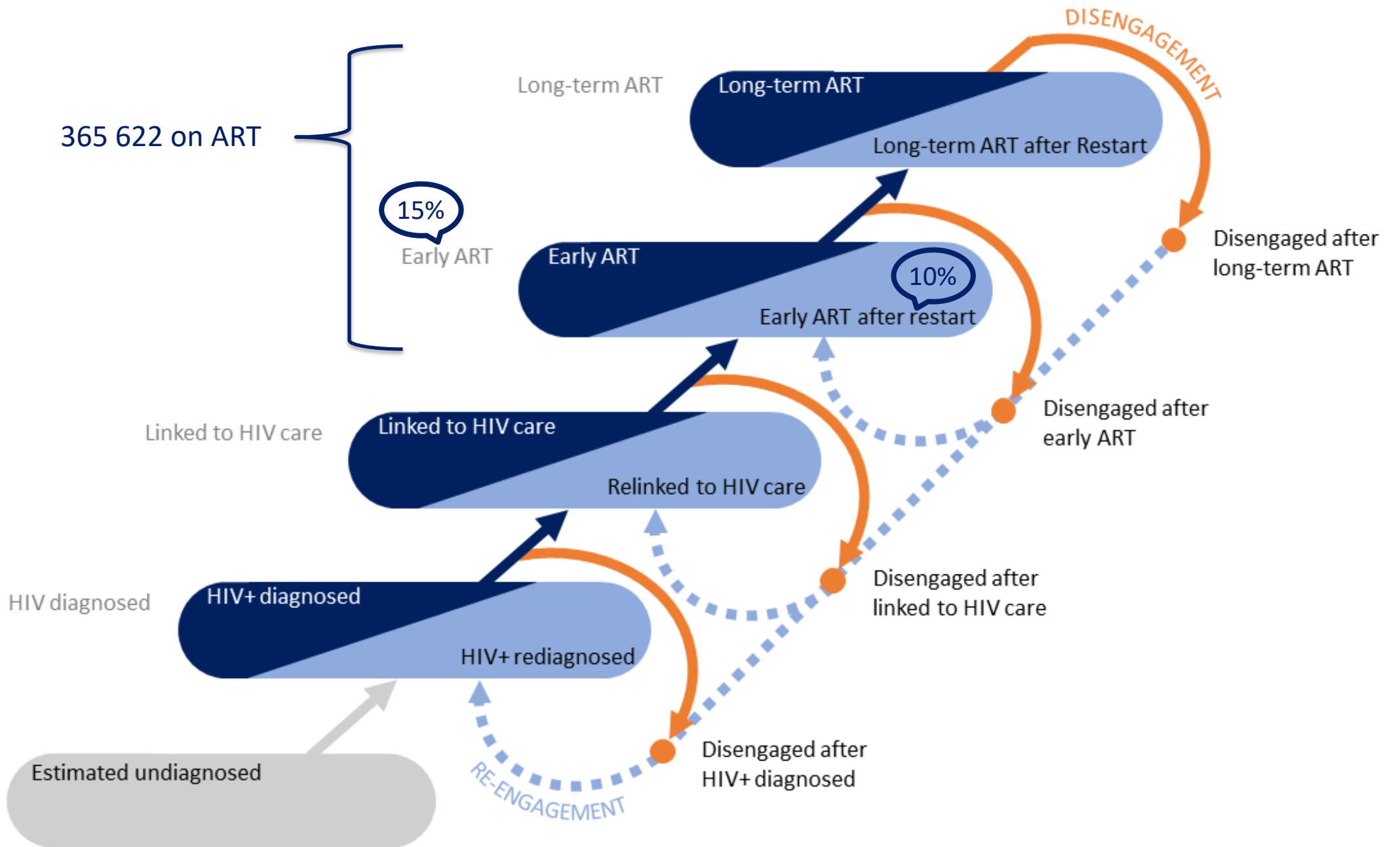
- Linear cascade shows:
Testing coverage is high
Initiations are high
ART coverage not increasing (much)
- **Where** on the cascade are people disengaging?
- **Where** on the cascade are people re-engaging?

How to populate a cyclical cascade?

- Unique identifier
- Patient-level data
- Linked across facilities
- Multiple data sources
- Clear branch logic
- Minimum data elements
 - Visits
 - Drugs
 - Labs

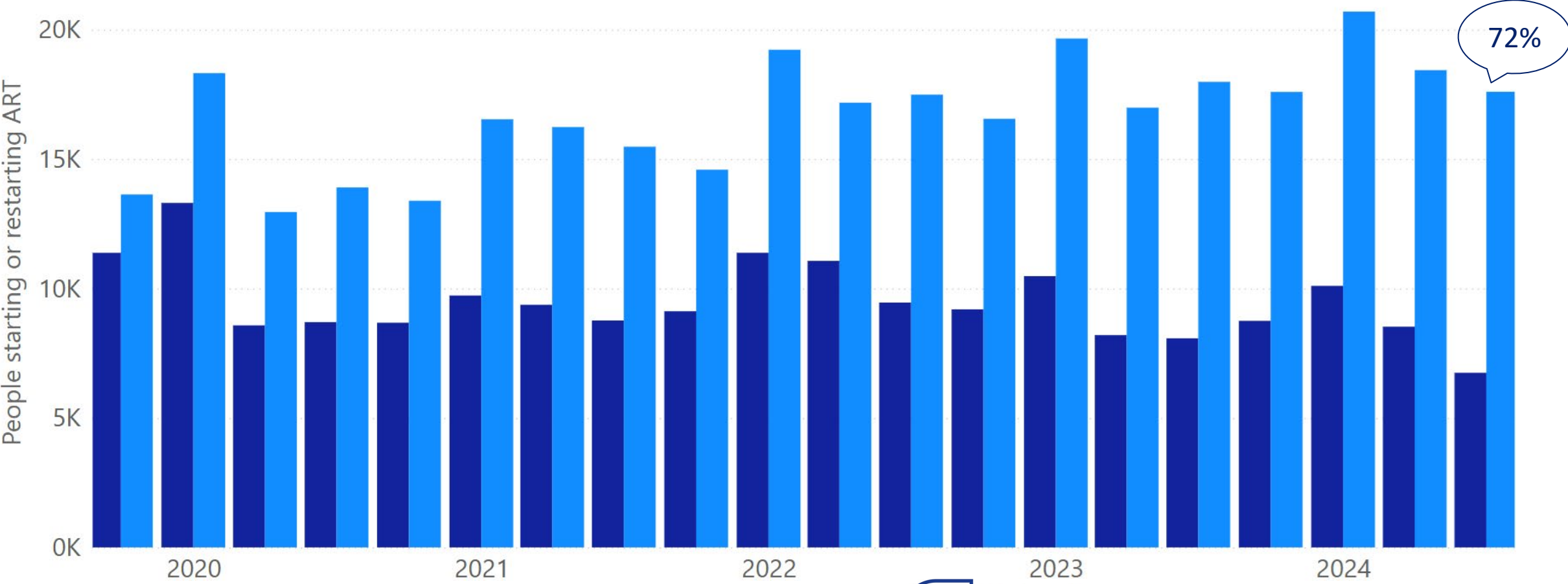


Cyclical Cascade



What did we find?

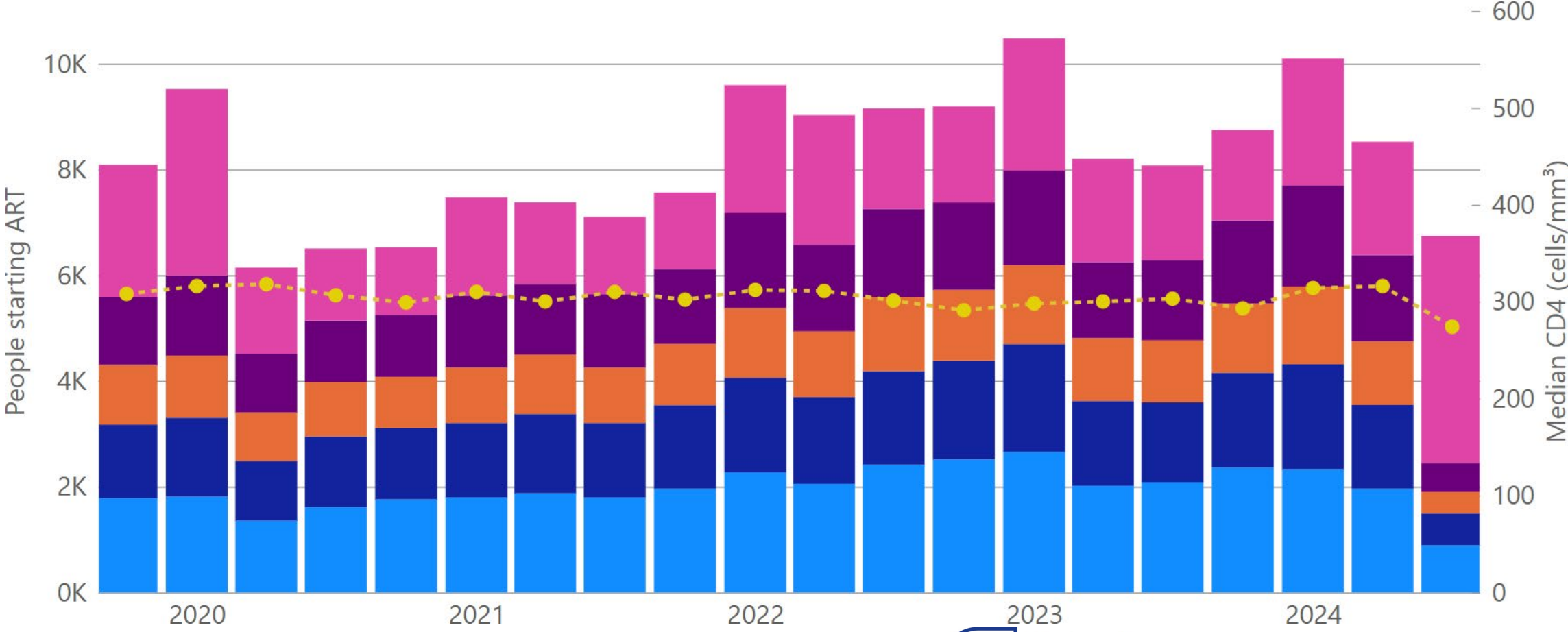
ART Experience ● Started ART ● Restarted ART



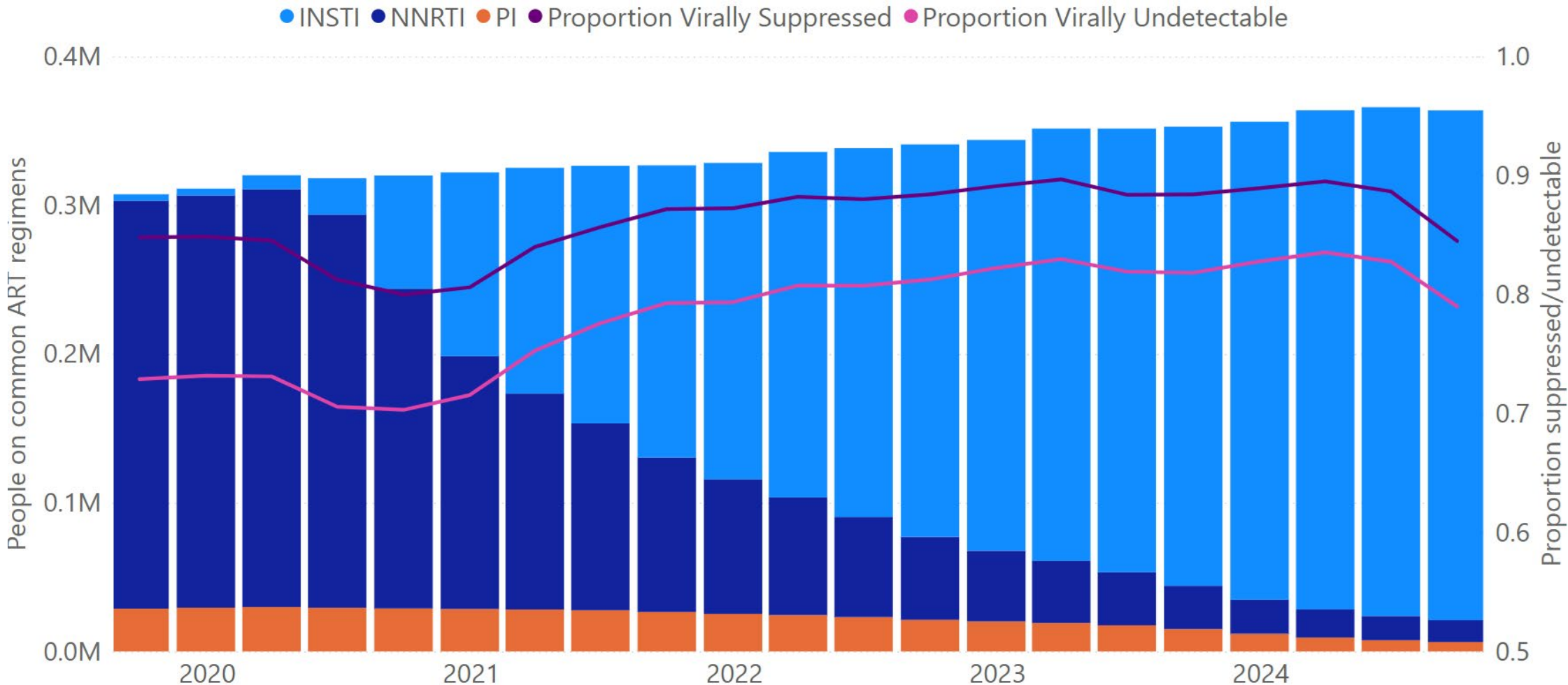
72%

What did we find?

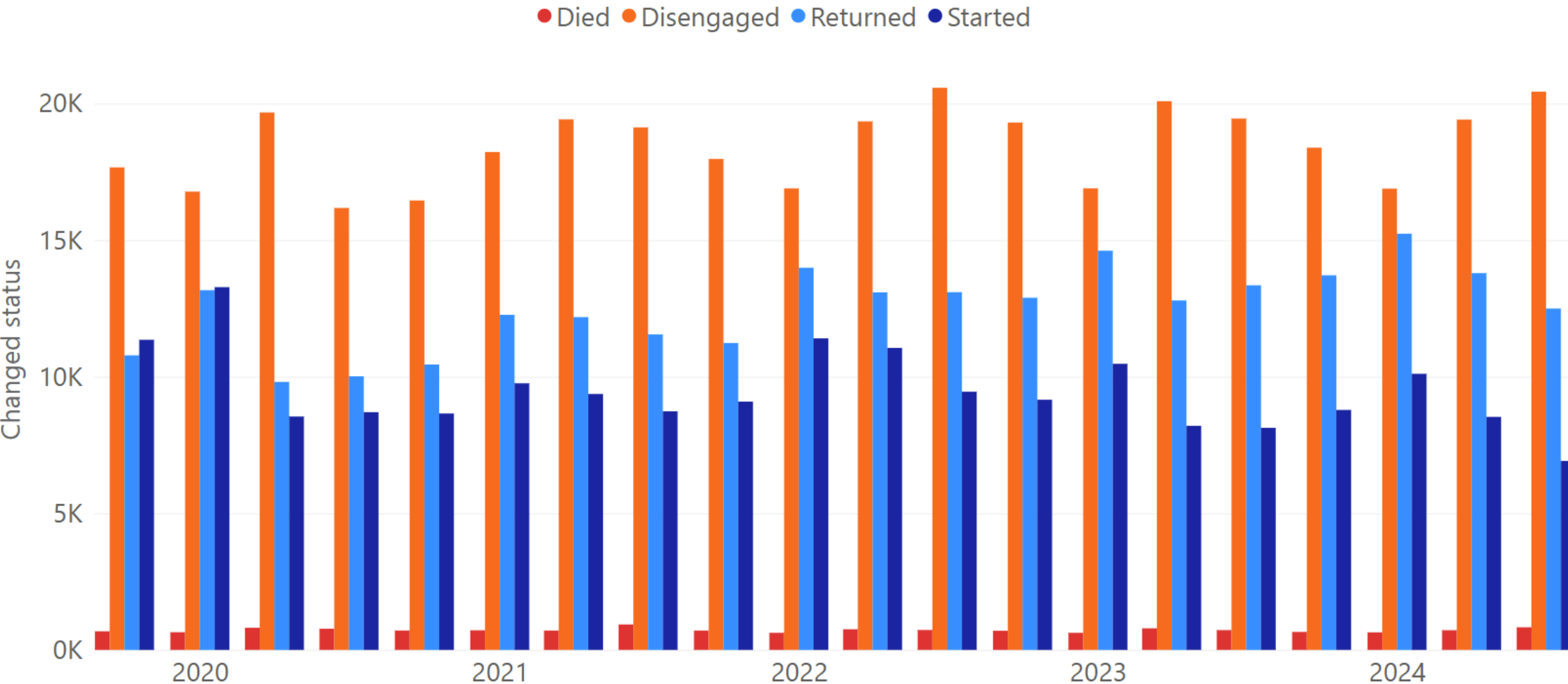
Baseline CD4 category ● <200 ● 201-350 ● 351-500 ● 500+ ● Not available ● Median



What did we find?

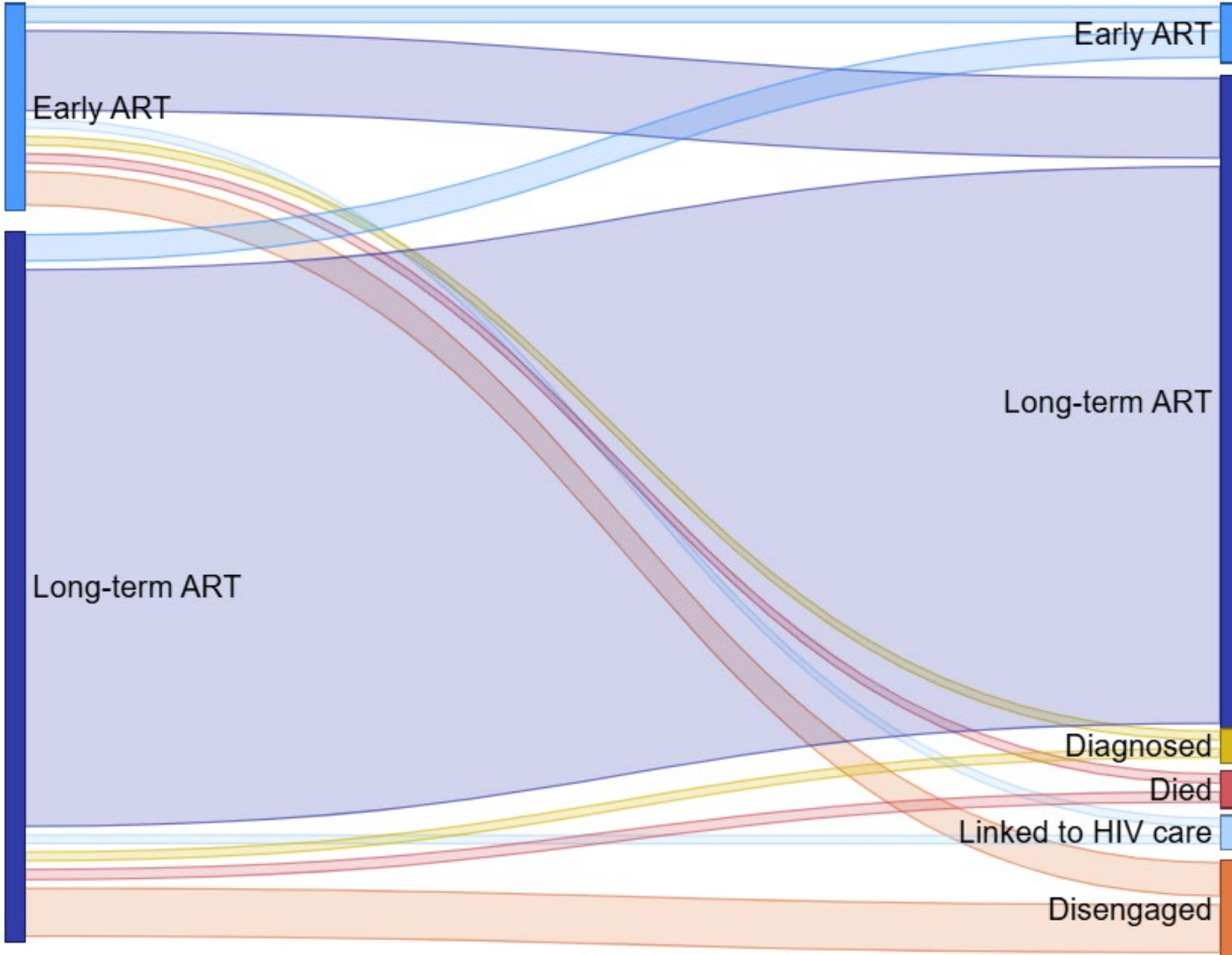


What did we find?



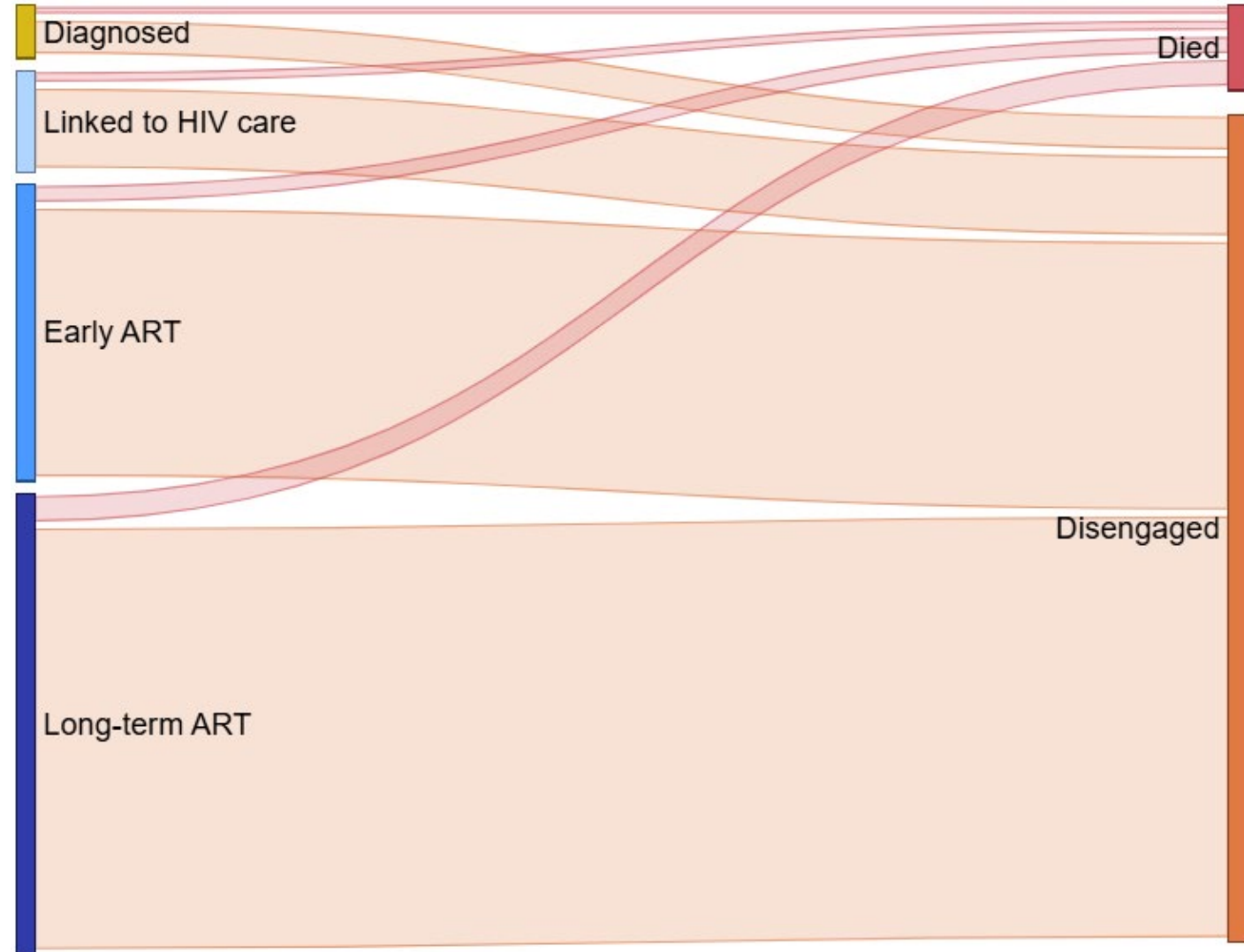
What did we find?

- Among people on ART six months ago, where are they now?

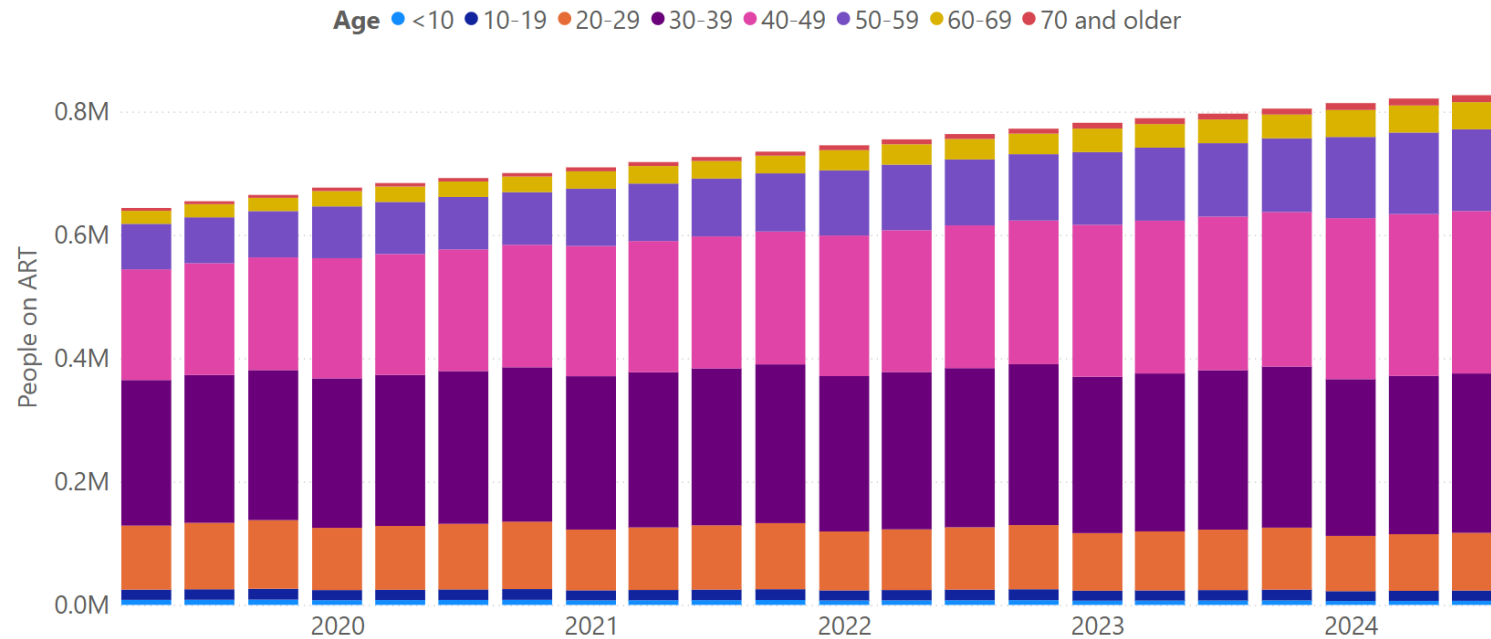
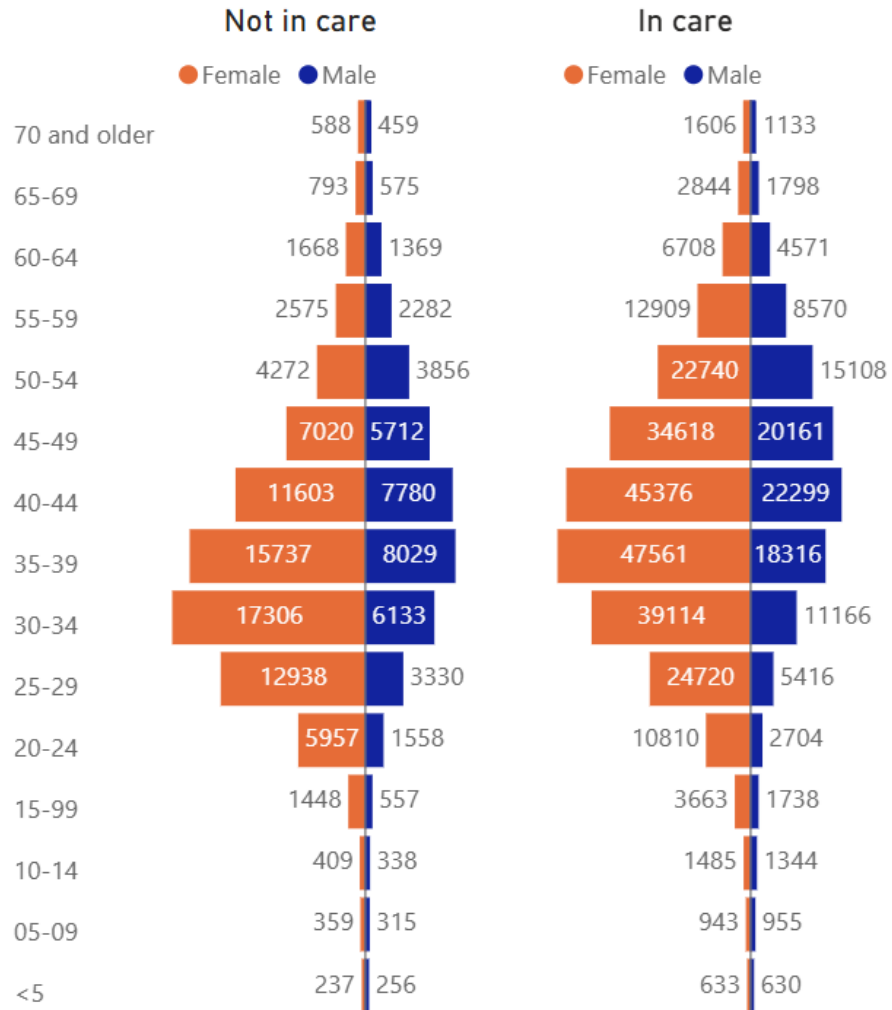


What did we find?

- Among people who disengaged or died in the past six months, where were they?

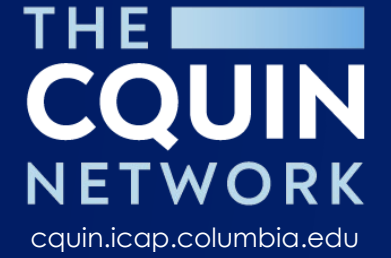


Demographics



Conclusions

- South African HIV epidemic generalized and maturing
- “Early ART” period of higher risk of interruption
- But interruptions occur at all points on the cascade
- Sustainable, broad interventions to improve ART coverage
- Make it easier for everyone to access effective ART as consistently as possible



Thank You!

