

Background

The first case of COVID-19 in Zambia was reported on March 18, 2020; by October 2020, total cases rose to 16,325. At the start of the pandemic, the Ministry of Health established a partial lockdown across the country, which was lifted in May. HIV care and treatment facilities implemented innovative strategies to maintain HIV testing services. In preparation for the second COVID-19 wave, we described interventions deployed as part of the CIRKUIITS program and its effect on testing yield.

Description

CIRKUIITS community health workers (CHWs) completed training on COVID infection prevention measures and received personal protective equipment (PPE). CIRKUIITS deployed CHWs to hotspot areas and communities with high HIV burden, and organized demand creation activities to support HIV testing. When a HIV positive client was identified, CHWs conducted partner notification services and index testing, and distributed HIV self-test kits to partners. CHWs escorted newly identified HIV positive clients to an appointment at the health facility, as walk-in appointments were not allowed. We examined routinely collected aggregate data from January 2019 to September 2020 across 122 health facilities and their communities in Eastern, Western, and Lusaka Provinces. Descriptive analysis and tests of trend were performed.

Lessons learned

Overall HIV positivity yield remained stable from January 2019 to September 2020 (Figure 1A). No significant decrease in the number of clients tested ($p=0.861$) or HIV positive clients ($p=0.362$) was shown during this period. No significant change on the testing yield trend was observed ($p=0.930$) overall or by testing modality ($p=0.12$ for Index, $p=0.14$ for voluntary counseling testing, $p=0.93$ for other modalities) (Figure 1B).

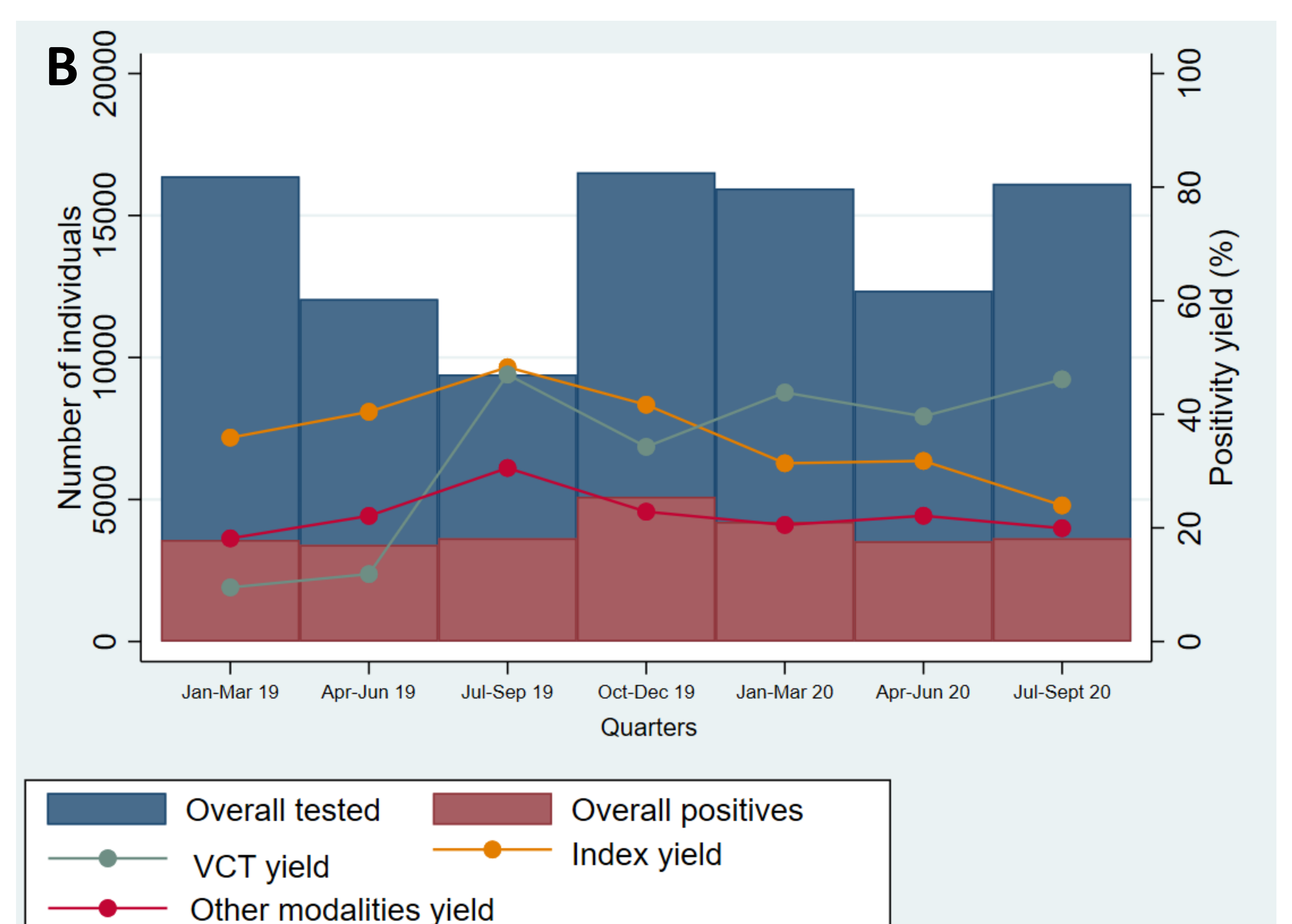
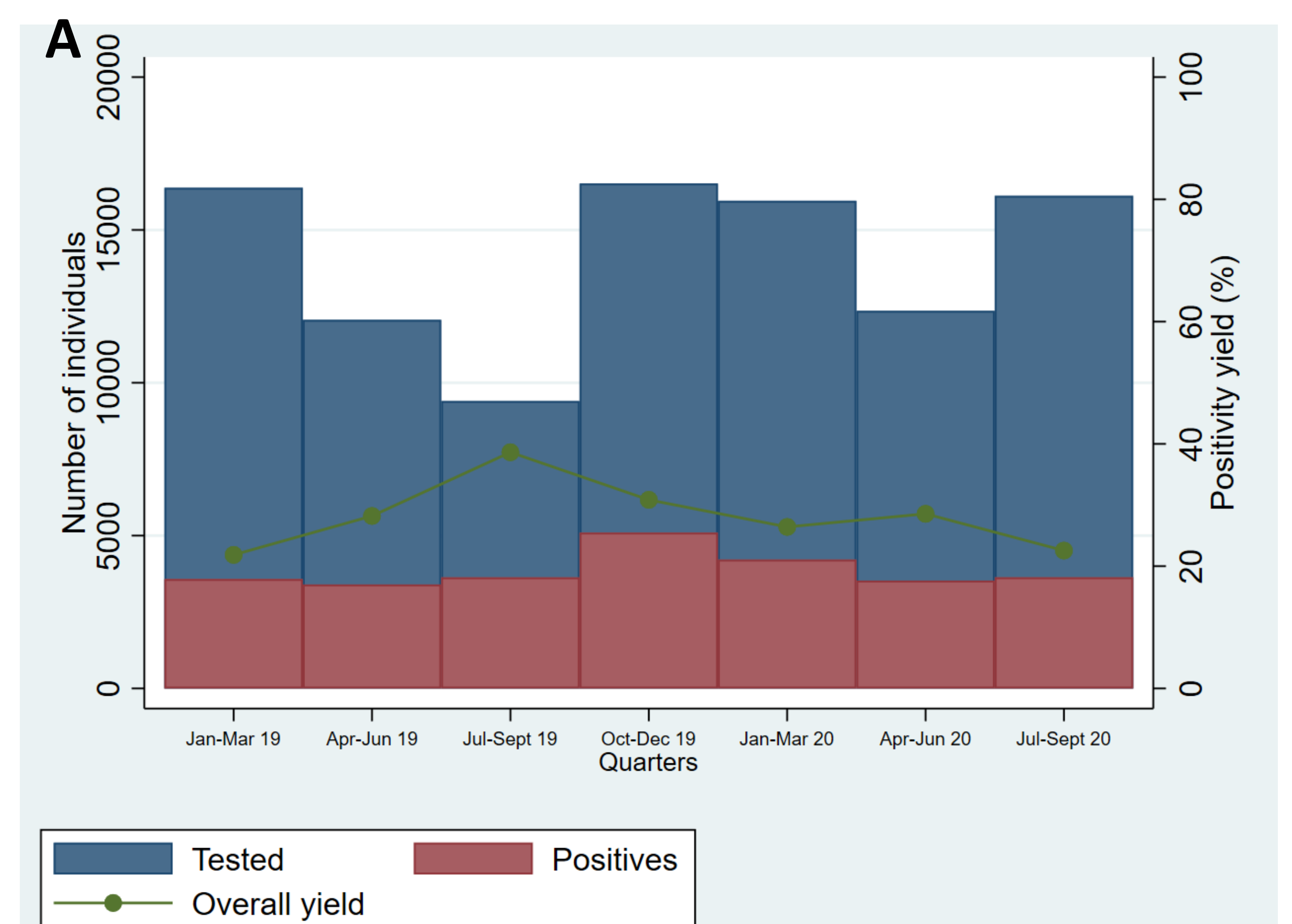


Figure 1. CIRKUIITS (A) overall testing yield and (B) by modality from January 2019 to September 2020.

Conclusions and next steps

CIRKUIITS has rapidly adapted to the COVID-19 pandemic to prevent disruptions in HIV services. Training of CHWs and provision of PPE enabled CHWs to carry out community service delivery. By utilizing index testing, HIVST, and facility appointments, high positivity yield was maintained during pandemic times.