



Challenges of Scaling Up Provider-Initiated HIV Testing and Counseling in Kenya

by Francis Kathambana, Nancy Koskei, Joel Kuria, Pamela Lynam, Peter Cherutich, James Chembeni and Isaac Malonza

Abstract Issue

HIV testing and counseling services are the cornerstone of HIV prevention, care and treatment programs. In 2005, the Kenya Ministry of Health (MOH) developed national policy guidelines to mainstream Provider-Initiated Testing and Counseling (PITC) services in clinical settings. However, uptake of PITC at public hospitals has remained low (30%).

Description

- Dissemination of PITC guidelines and training of health workers has been conducted nationally by MOH and partners. Jhpiego and the MOH evaluated the PITC program two years after its introduction. PITC services were assessed in all eight provincial hospitals and two teaching and referral hospitals using structured interviews and focus group discussions.
- Identified challenges to PITC uptake included: staff shortages, limited number of PITC-trained personnel, lack of ownership of the PITC approach among health care workers, lack of tools to properly capture data, and supply chain and other logistical issues. In addition, overcrowding in outpatient and inpatient departments, lack of adequate space, and low staff morale were noted. Health workers' negative attitudes were an added stumbling block as some doctors viewed counseling as the role of non-medical personnel.

Lessons Learned

- Regular, multi-disciplinary team meetings at facilities to address gaps are important. Continuous supportive supervision and on-site mentorship are crucial in strengthening knowledge and skills.

Next Step

- A stakeholders' meeting will be held at the national level to review the program, discuss outcomes of the program evaluation and identify best practices to address gaps.

Introduction

- In generalized HIV epidemics, increasing access to HIV testing and counseling is an important strategy to increase access to HIV care, treatment and prevention services.
- To mainstream HIV testing and counseling services across the health system, the Kenya Ministry of Health developed national guidelines for Provider-Initiated Testing and Counseling (PITC) in 2005.
- To scale up PITC in clinical settings, Jhpiego, in collaboration with the Ministry of Health and partners, conducted the following activities:
 - Disseminated PITC national guidelines
 - Developed state-of-the-art training materials (Learning Resource Package for PITC, and Orientation Package to update health workers on national guidelines for PITC)
 - Developed core trainers for PITC at national and provincial levels
 - Trained of health workers in all national and provincial hospitals
 - Supported district level training of health workers



Program Results (2005–2007)

- 95 core trainers developed at national and provincial levels
- 409 service providers oriented on PITC
- 63 new PITC sites initiated in 15 districts countrywide
- 73% of service providers in 9 national referral and teaching hospitals trained
- Over 100,000 patients tested for HIV in national and provincial hospitals in 2007
- However, nationally, uptake of PITC has remained low (30%)

Program Evaluation

- To determine why PITC uptake was low, Jhpiego and MOH conducted an evaluation of the program two years after introduction
- PITC services were assessed in all eight provincial hospitals, and two teaching and referral hospitals
- Design: cross-sectional survey
- Period of evaluation: Nov–Dec 2007
- Evaluation sites: Kenyatta National Hospital, Moi Teaching and Referral Hospital, Mbagathi, Embu, Nyeri, Kakamega, Nakuru, Garissa, Coast and Nyanza Provincial Hospitals
- Target: MOH program focal persons, facility managers, PITC-trained providers and clients receiving services in the targeted facilities

PITC Evaluation Sites (Nov–Dec 07)



Evaluation Tools

TOOL	TARGET AUDIENCE
1. Service provider questionnaire	PITC-trained providers
2. Focus group discussion guide	PITC-trained providers
3. In-depth interview guide for health managers	Health Managers MOH
4. Facility contact questionnaire	Health facility manager/PITC focal person/ Matron-in-charge
5. Client exit questionnaire	Patients receiving care at facility

PITC in Clinical Settings



Acknowledgments

Donor: USAID/ACCESS
National AIDS and STIs Control Program, Ministry of Health
Health Facility Managers
Service Providers
Clients who participated in exit interviews

The opinions expressed herein are those of Jhpiego and do not necessarily reflect the views of the Kenya MOH, PEPFAR Kenya and USAID.

Cadres of Health Care Workers Providing PITC Services

PITC by:	Coast	Embu	KNH	Mbagathi	MTRH
Doctors	Yes	No	Yes	No	Yes
Clinical officers	Yes	Yes	No	No	Yes
Nurses	Yes	Yes	Yes	Yes	Yes
Lab technicians	Yes	No	No	Yes	Yes
Others	Yes	No	Yes	No	No

PITC by:	Nyeri	Kakamega	Nakuru	Garissa	Nyanza
Doctors	Yes	No	Yes	Yes	Yes
Clinical officers	Yes	Yes	Yes	Yes	Yes
Nurses	Yes	Yes	Yes	Yes	Yes
Lab technicians	Yes	Yes	No	No	No
Others	Yes	No	No	No	No

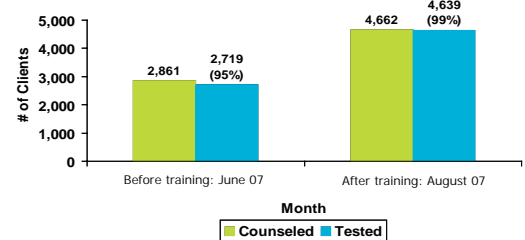
Availability of PITC within Facilities

PITC provided at	Coast	Embu	KNH	Mbagathi	MTRH
TB clinic	√	√+	√+	√	√+
STI clinic	√	√+	√	√	√
ANC clinic	√+	√+	√	√	√
MOPC	—	—	√	√	√
Maternity	√+	√+	√	√	√
Pediatric Ward	√+	√+	√+	√	√
Medical Ward	√+	√	√	√	√

PITC provided at	Nyeri	Kakamega	Nakuru	Garissa	Nyanza
TB clinic	√	√	√	√+	√
STI clinic	√	√	√	√+	√
ANC clinic	√	√+	√	√+	√
MOPC	—	—	√	—	√
Maternity	√+	√+	√	√+	√
Pediatric Ward	√+	√+	√	√+	√
Medical Ward	√+	√+	√	√+	√

NB: √+ Service available, dedicated space provided
√ Service available, no dedicated space provided
Blank space: No information provided
— No service

Number of Patients Offered PITC before and after Training in Selected Facilities



Challenges Identified by Facility Managers and Service Providers

- Staff shortage/staff rotation
- Increased workload, burn-out
- Supply chain and logistics issues—stock-outs of test kits
- Overcrowding in inpatient/outpatient departments
- Long client waiting time
- Lack of space/privacy/confidentiality
- Dealing with very sick patients
- Lack of tools to properly capture PITC data
- No IEC on materials on PITC
- Doctors view counseling as a role for non-medical personnel

Client Exit Interviews (N=91)

- 95% were given adequate time to decide whether to test
- 97% reported they were treated with respect
- 84% were accorded adequate privacy
- 95% were satisfied with the information and explanation given for HIV testing process and results

Next Steps

- Explore why doctors may not be actively involved in PITC services
- Increase PITC services at medical outpatient departments
- Stakeholder meetings to be held at national level to review the program, discuss challenges and identify best practices to address gaps