Maintaining HIV Care Amidst the COVID-19 Pandemic: Differentiated Service Delivery to Optimize Viral Load Monitoring

With support from PEPFAR through USAID, the Reaching Impact, Saturation, and Epidemic Control (RISE) project is working closely with the Ministry of Health, local partners and community volunteers to achieve epidemic control across four states in Nigeria (Akwa Ibom, Adamawa, Cross River and Niger). RISE-Nigeria applies a combination of innovative, evidence-based approaches to help clients achieve and maintain viral suppression, the hallmark achievement in the HIV continuum of care. In line with the UNAIDS 95-95-95 goals, RISE-Nigeria is committed to achieving viral suppression in at least 95% of the approximately 78,000 clients receiving antiretroviral treatment (ART) through RISE-supported services – even in the midst of the global COVID-19 pandemic.

Theresa Ushie, recalls her HIV diagnosis in 2017 as “a very dark time in my life because I was so sick, to the extent that suicide was becoming an option rather than seeing myself in excruciating pain.” Though Theresa started treatment immediately at the time of her diagnosis, she had to travel long distances to obtain ART refills from the hospital, and at times she was too sick to travel or lacked the funds for transportation. In October 2019, the RISE project began offering HIV care and treatment services in her community, making it easier for Theresa to access care and treatment.

Only a few short months after RISE initiated ART services in Theresa’s community, the COVID-19 pandemic struck – requiring RISE to immediately identify new ways to keep clients like Theresa safely connected to ART and viral load testing services, while mitigating the risk of COVID transmission within ART clinics. When the Government of Nigeria issued a mandatory lockdown to curtail the spread of the novel coronavirus, many people living with HIV (PLHIV) delayed or cancelled appointments for ART refills and viral load (VL) testing.

Because PLHIV require uninterrupted care and treatment services in order to maintain viral suppression, the RISE Nigeria team swiftly adapted client engagement approaches to surmount the

Compared to baseline at the beginning of the COVID-19 pandemic, RISE has increased VL coverage (VLC) from 71% in March 2020 to 96% as of September 2020, and similarly increased VL suppression (VLS) from 83% in March 2020 to 89% in September 2020.

Photo: Mrs. Theresa being visited at her home by a RISE case manager and VL champion
challenges of COVID-19 while remaining in compliance with recommended COVID-19 mitigation measures and guidelines. One such modification was the introduction of a novel client-centric, differentiated service delivery model for VL (DSD4VL), which was designed to provide access to VL testing services for RISE clients outside of public health facilities. Through DSD4VL, RISE-Nigeria offered viral load sample collection to eligible clients at convenient service outlets including clients’ homes and other community locations (private pharmacies and patent medicine vendors). In many cases, RISE was also able to provide refill services for anti-retroviral (ARVs) and other services during the home VL visit. As of September 2020, 27% of RISE-Nigeria’s ART clients (17,049) were receiving home-based ART refills, a service which was not offered before the emergence of COVID-19.

RISE-Nigeria is reaching both adults and younger clients through the DSD4VL approach, ensuring that pediatric and adolescent clients also have access to continued HIV services during the COVID pandemic. Between March and September 2020, pediatric VLC increased by 20%, and VLS increased by 19%; and among adolescents and young people, VLC increased by 20% and VLS by 6%. In the early days of the COVID-19 lockdown, Theresa, like many clients, was concerned about her health until she received a call from her case manager who offered to pay her a home visit. She has since welcomed the RISE team for multiple home visits, taking advantage of the home delivery of ARVs and regular VL sample collection. Theresa is pleased to have a dedicated team committed to her care at such a difficult time. She expressed gratitude to the RISE team with confidence about her health saying, “Each time my case manager praises me and says ‘madam well done, your viral load is suppressed’, it gives me hope of surviving and living longer.”

Although RISE-Nigeria began providing the DSD4VL service during the initial COVID-19 lockdown, the project continues to experience high demand for this service and other home-based services since the risk of COVID-19 exposure within health facilities is an ongoing concern for PLHIV.

Photo credit: Ojong Ejoh, Laboratory Officer, Cross River state - RISE/Nigeria