

HIV Testing Yield in a Key Population Project in Namibia



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Background

- Globally between 40-50% of all new HIV infections in adults occur among key populations (KPs) and their partners. The picture is similar in sub-Saharan Africa with KPs disproportionately affected by HIV.
- KPs are often extremely difficult to reach for critical testing, care and treatment services.
- The Society for Family Health (SFH), a local non-governmental organization (NGO) in Namibia conducts a KP program along with partners Walvis Bay Corridor Group, Namibia Planned Parenthood Association and other KP organizations, and aims at expanding access, utilization and quality of HIV prevention, care and treatment interventions among KPs to achieve epidemic control.
- A mixed HIV testing model approach is implemented by the project including facility-based testing and testing at strategic “hotspots” in the community using mobile van outreach.

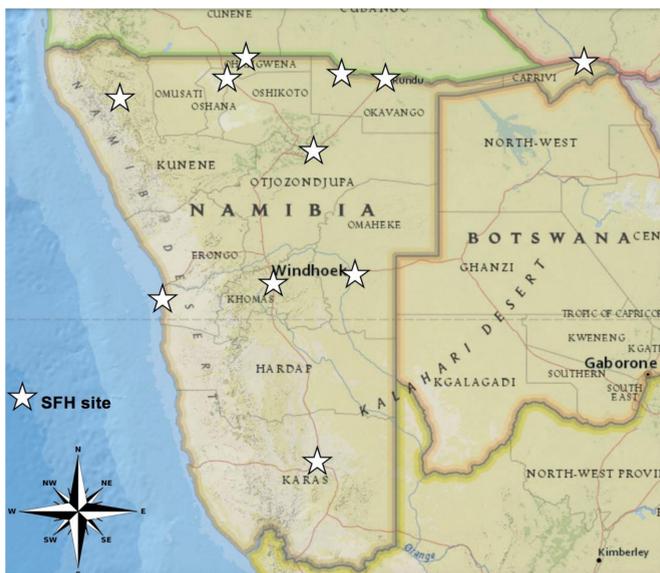
Objectives

- We sought to describe the HIV testing yields among KPs (including FSW and lesbian, gay, bisexual, transgender, and/or intersex (LGBTI)/MSM) in our project operating in ten regions in Namibia and compare with GP testing yields in the same regions.

Methods

We analysed secondary data collected from July 2016 to June 2017, captured in the project electronic database. Data were exported, cleaned and analysed using STATA 13.

Figure 1: Geographic Location of SFH Sites



11 Regions
 //Karas
 Erongo
 Kavango East
 Kavango West
 Khomas
 Kunene
 Ohangwena
 Omaheke
 Oshana
 Otjozondjupa
 Zambezi

Table 1: Characteristics of Tested Individuals

Characteristic	Overall	HIV Positive	HIV Negative	P-value
Sex				0.006
Female	12,159 (53.8)	404 (59.8)	11,755 (53.6)	
Male	10,399 (46.0)	271 (40.1)	10,128 (46.2)	
Transgender	49 (0.2)	1 (0.2)	48 (0.2)	
Organization				<0.001
SFH	2489 (11.0)	100 (14.8)	2,389 (10.9)	
WBCG	7,419 (32.8)	235 (34.8)	7,184 (32.8)	
NAPPA	12,676 (56.1)	338 (50.0)	12,338 (56.3)	
Other	26 (0.1)	3 (0.4)	23 (0.1)	

Table 1: Characteristics of Tested Individuals

Characteristic	Overall	HIV Positive	HIV Negative	P-value
Region				<0.001
Karas	2,036 (9.0)	95 (14.1)	1,941 (8.9)	
Erongo	8,607 (38.1)	138 (20.4)	8,469 (38.6)	
Hardap	13 (0.1)	0 (0.0)	13 (0.1)	
Kavango East	51 (0.2)	5 (0.7)	51 (0.2)	
Khomas	5,433 (24.0)	141 (20.9)	5,433 (24.0)	
Ohangwena	2,741 (12.1)	98 (14.5)	2,741 (12.1)	
Omusati	24 (0.1)	0 (0.0)	24 (0.1)	
Oshana	613 (2.7)	27 (4.0)	586 (2.7)	
Otjozondjupa	88 (0.4)	2 (0.3)	86 (0.4)	
Zambezi	3,003 (13.3)	170 (25.2)	2,833 (12.9)	
Birth				<0.001
Namibia	20,918 (92.5)	594 (87.9)	20,324 (92.7)	
Other	1,689 (7.5)	82 (12.1)	1,607 (7.3)	
Marital Status				<0.001
Cohabiting	1,463 (6.5)	94 (13.9)	1,369 (6.5)	
Divorced/separated	105 (0.5)	3 (0.4)	105 (0.5)	
Married	2,833 (12.6)	94 (13.9)	2,833 (12.6)	
Minor	76 (0.3)	2 (0.3)	76 (0.3)	
Never Married	17,960 (79.7)	472 (69.9)	17,960 (79.7)	
Widowed	86 (0.4)	10 (1.5)	86 (0.4)	
Education				<0.001
None	941 (4.2)	52 (7.7)	889 (4.1)	
Primary	4,946 (22.0)	225 (33.4)	4,721 (21.6)	
Secondary	14,057 (62.4)	361 (53.6)	13,696 (62.7)	
Tertiary	2,578 (11.5)	36 (5.3)	2,542 (11.6)	
Last tested				<0.001
1 year or more	7,565 (33.5)	260 (38.5)	7,305 (33.3)	
1-6 months	4,183 (18.5)	111 (16.4)	4,072 (18.6)	
7-12 months	7,761 (34.3)	189 (28.0)	7,572 (34.5)	
Never	3,095 (13.7)	116 (17.2)	2,979 (13.6)	
Population				<0.001
MSM	1,272 (5.6)	46 (6.8)	1,226 (5.6)	
Other	17,718 (78.4)	451 (66.8)	17,267 (78.8)	
FSW	3,612 (16.0)	178 (26.4)	3,434 (15.7)	

Results

- In our KP program, 22,610 clients were tested, 676 (3.0%) HIV-positive and 21,934 (97.0%) negative.
- Amongst all tested, 4,884 (21.6%) were identified as KPs while 17,718 (78.4%) were GP.
- Amongst KPs tested, 3,612 (74.0%) were FSWs while 1,272 (26.0%) were LGBTI/MSM.
- Amongst KPs tested, 224 (4.6%) tested HIV positive compared to 451 (2.6%) among the GP; 46/1,272 (3.6%) LGBTI/MSM tested positive for HIV; 178/3,612 (4.9%) FSWs tested positive for HIV.

Conclusions and Recommendations

- By implementing programs targeting KPs, the project is identifying a higher proportion of individuals living with HIV compared to GP testing.
- The program should continue to offer KP-targeted services while utilizing evidence-based and innovative methods to target testing to individuals most at-risk of HIV.

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