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TB/HIV Integration Conference

# Survival of HIV patients 10 years after ART initiation through HIV/AIDS Prevention Group (HAPG) Wellness Clinic, Bela-Bela, Limpopo

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South African TB Conference  
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***Reaching the Target***

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# Outline



- Background
- Methods
- Results
- Conclusion
- Scalability of the findings

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# Background

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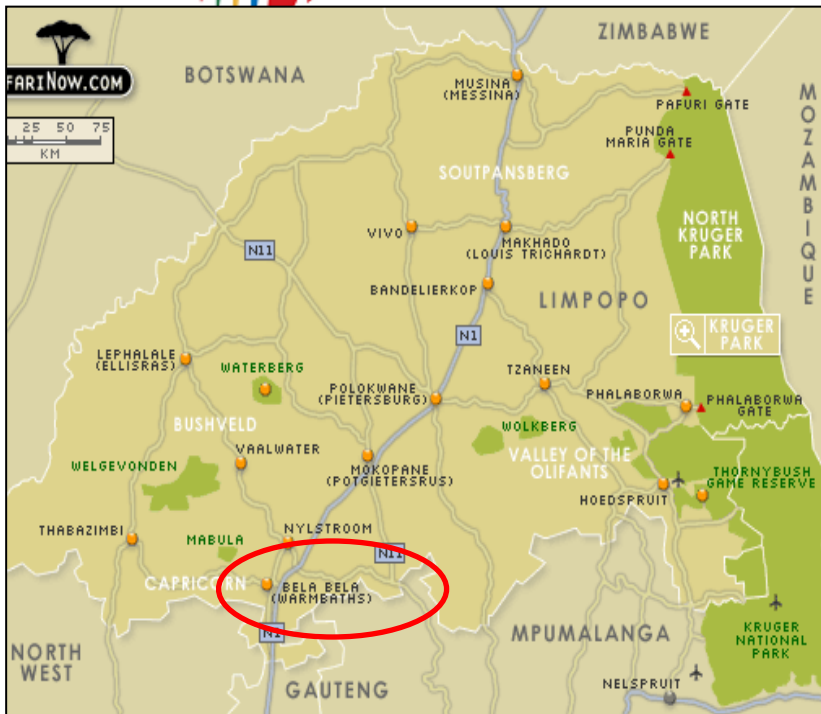
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# BelaBela, Limpopo Province

Waterberg District,  
Limpopo Province

Population: 63 000



33 997 HIV tests since 1996 by HAPG, 10688 tested HIV +  
14 333 HIV-infected people (DBSA database 2006)



## HIV/AIDS Prevention Group (HAPG)

- HAPG, an NGO, established a Wellness Clinic in 2001
- Served at primary health care level
- Antiretroviral therapy (ART) first introduced for staff members in 2002
  - Staff are alive and healthy to date
- In 2004, after discussions with the community, ART was made available to community members



## National Strategic Plan 2012-2016

- NSP launched on World AIDS Day, (1 December, 2011)
- The NSP sets a target of 70% survival among HIV-infected individuals after five years on ART
- This study showed evidence of survival from 2002 to 2012 for ART patients treated under HAPG
  - 32662 HIV tests conducted 2002-12 of which 9897 were HIV positive

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# Methods



# Methods

- HAPG provides comprehensive HIV service to community members
- HCT testing has been available in the community since 1996
- HCT testing conducted in conjunction with PHC clinics





## Referrals to the Wellness Clinic

- All people who tested HIV positive were referred to the Wellness Clinic
  - File opened for each patient
- Inclusion criteria for ART were according to the National HIV guidelines
- Patient data captured in MS Excel using patient files and other registers
- Triangulation done to verify results

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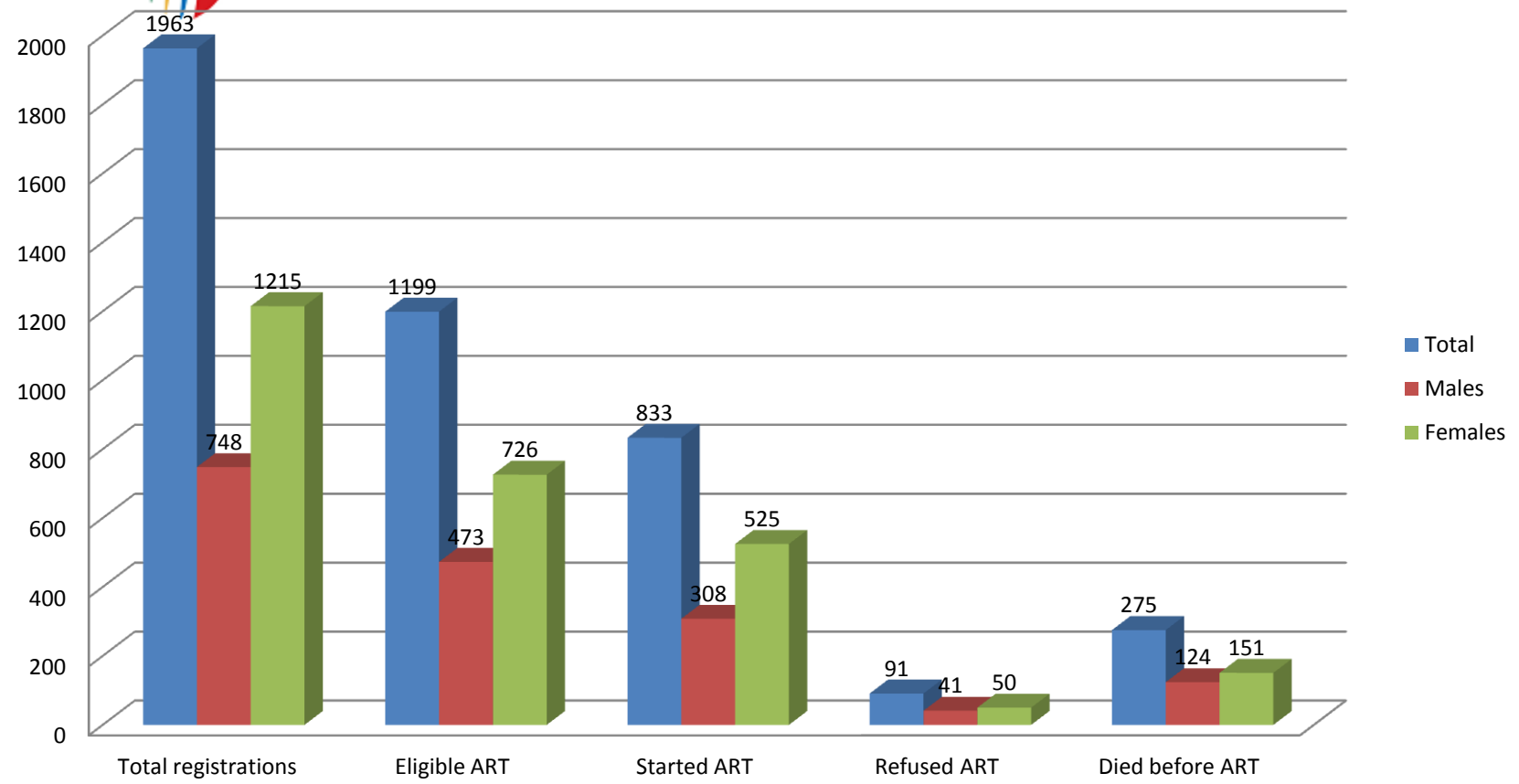
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# RESULTS



### HAPG registrations 2002-2012





## Results/2

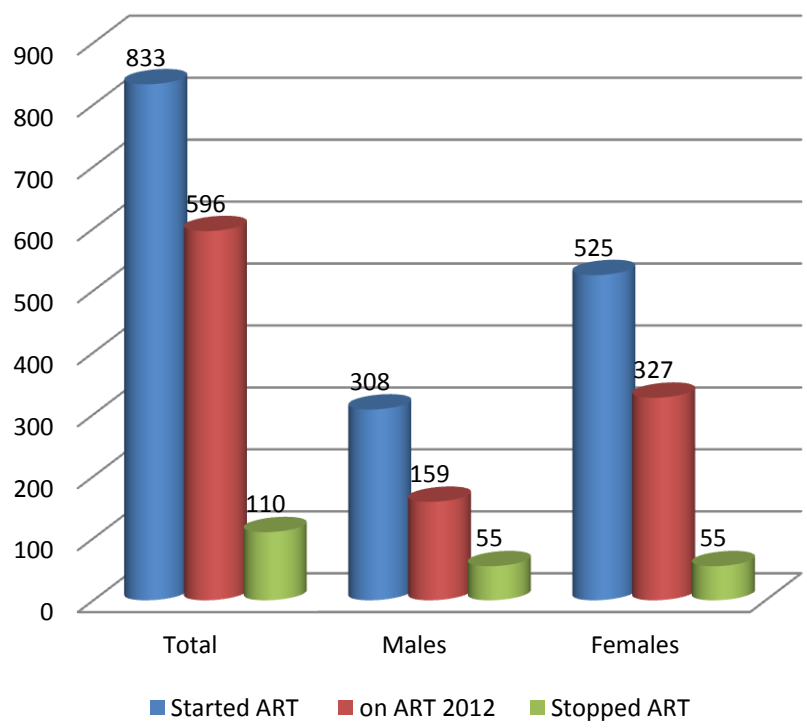
- Abrupt withdrawal of funding in 2009
  - 490 patients transferred to the nearest PHC clinic
- Within 1 year of the transfer, 30% patients got lost
- Support group members did home visits to all transferred patients



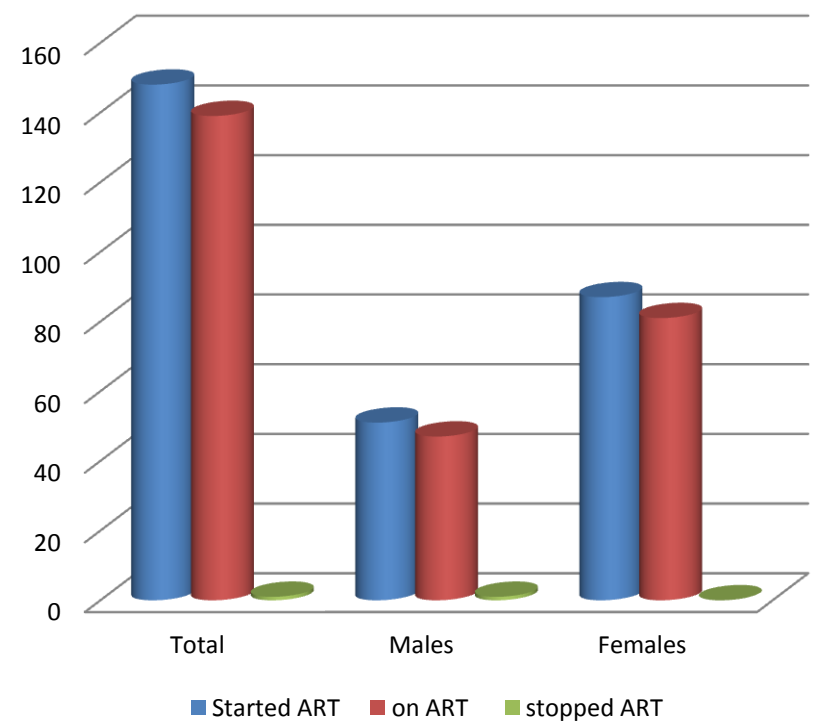
# Results/3



**Patients alive after 10 years ART,  
71.54%**



**HAPG Wellness patients alive  
after 10 years ART, 94.5 %**



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## Conclusion



# Conclusion



- Several studies show that many patients in the public sector are lost either before or after starting ART
- Effective data collection in Wellness Clinics is required for adequate planning at provincial and national levels
- The NSP target is reasonable and achievable



## Scalability of Findings



- Monitoring and evaluation of patient outcomes is
  - Achievable
  - Provide the public sector with relevant information to sustain treatment
  
- NGOs should support the government to provide appropriate and adequate monitoring and evaluation





Review

# The experience of the Bela Bela HIV prevention group with the roll out of Antiretroviral therapy at the Primary Health Care level

Ndjeka NO, MD (Kin), DHSM (Wits), M Med (Family Medicine)

I Manhaeve C, Diploma in Commerce & Finance, Diploma Advanced Counselling (UNISA)

(SA Fam Pract 2006;48(4): 56-57)

## Introduction

The use of antiretroviral therapy (ART) has been shown to have significantly improved morbidity; mortality and prognosis of AIDS related conditions.<sup>1</sup> HIV/AIDS has become a chronic

2004 to the end of February 2005.

The wellness clinic was established a year after an exposure visit to MSF Kayelitsha and Masipumelela projects in the Western Cape. ART was implemented at the Bela Bela

adherence counseling, a home visit is conducted before the application is presented to the selection committee. Patients who could not undergo the ARV adherence counseling had a family

**WELLNESS CLINIC AT PHC LEVEL IS THE IDEAL PLACE TO TREAT HIV PATIENTS AS DISCUSSED DURING THE SA AIDS CONFERENCE IN 2005. NIMART NURSES NEED MEDICAL SUPPORT TO BE ABLE TO GIVE THE BEST POSSIBLE CARE.**

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# QUESTIONS



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