HIV provider perceptions of COVID-19 disruptions in HIV service access in Lagos State

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BACKGROUND

• Health system resilience is the ability to prepare for, manage (absorb, adapt, and transform), and learn from shocks.

• Multiple surveys conducted during the COVID-19 pandemic have documented the pandemic’s variable impact on the disruption of HIV prevention, care, and treatment services and the provision of related services for sexual and reproductive health, mental health, TB, and malaria.

• The purpose of this survey is to understand the perceptions of providers and recipients of HIV care of the main drivers of HIV and related service disruptions in the 15 cities supported by the IAPAC/UNAIDS Fast-Track Cities project and what strategies helped to mitigate these disruptions.
METHODOLOGY

• A cross-sectional study was conducted in Lagos State in 2022 among 85 HIV care providers in health facilities to assess perceptions of HIV and related service disruptions during the COVID-19 pandemic.

• Data was collected using a 22-question, Likert Scale questionnaire over a 1-month period.

• Extension to on-going trainings on HIV care and treatment capacity building trainings
METHODOLOGY

The survey examined perceptions on the impact of COVID-19 on health systems and health system preparedness and planning in response to future crises, including pandemics. The questions covered the following areas:

1. Impact of COVID-19 on Health Systems
   - Level of disruption to the following HIV services (testing, ART initiation, retention, VL testing etc.)
   - Factors contributing to HIV service disruptions (appointment cancellations, diverting of medical staff to COVID-19 response, resources diverted to COVID-19 response, supply chain issues, shortage of equipment)
   - Demand issues contributing to HIV service disruptions (fear of infection, lockdowns, economic hardships)

2. Vaccine Resiliency and issues contributing to availability and rollout of the COVID-19 vaccine
   - Infrastructure
   - Vaccine hesitancy

3. Preparing and Planning
   - Preparing and planning for future crises
   - Expanding the role of community health workers in HIV
   - role of virtual/telehealth services
   - HIV differentiated service delivery (MMD, DDD)
RESULTS

Respondents by Health Worker Category (n=85)

- HIV physicians: 58%
- Nurses: 24%
- Pharmacists: 10%
- Community health workers: 6%

Moderate and/or Severe Disruption to Essential Services

- Viral load testing: 60%
- Adherence to ART regimen: 46%
- Retention on ART: 54%
- New initiation of ART: 58%
- HIV linkage to care after a positive HIV test: 70%
- HIV testing services: 80%
Establishing community outreach mechanisms to ensure delivery of essential services in communities where people live

Creating a platform for reporting inventory and stockouts and for coordination of redistribution of supplies

Establishing community outreach mechanisms to ensure delivery of essential services in communities where people live
CONCLUSION AND RECOMMENDATIONS

• The ability of health systems to plan for and provide differentiated care solutions
• Understanding the impact of COVID-19 on the delivery of HIV care and treatment is key to urban response preparedness for future crises and ensuring health systems remain resilient.
• Data will inform the development of a framework for resilient urban HIV responses in response to future crises.
• Moving forward, there is a need to continue strengthening systems in place to facilitate:
  • Community engagement in service implementation and monitoring
  • Visit spacing and multi-month dispensing
  • HIV self-testing
  • Telehealth and telemedicine