

# Improved retention among adolescents enrolled in the Red Carpet Program—a fast-tracked, peer-led support initiative for HIV care and treatment in Malawi: A quasi-experimental study

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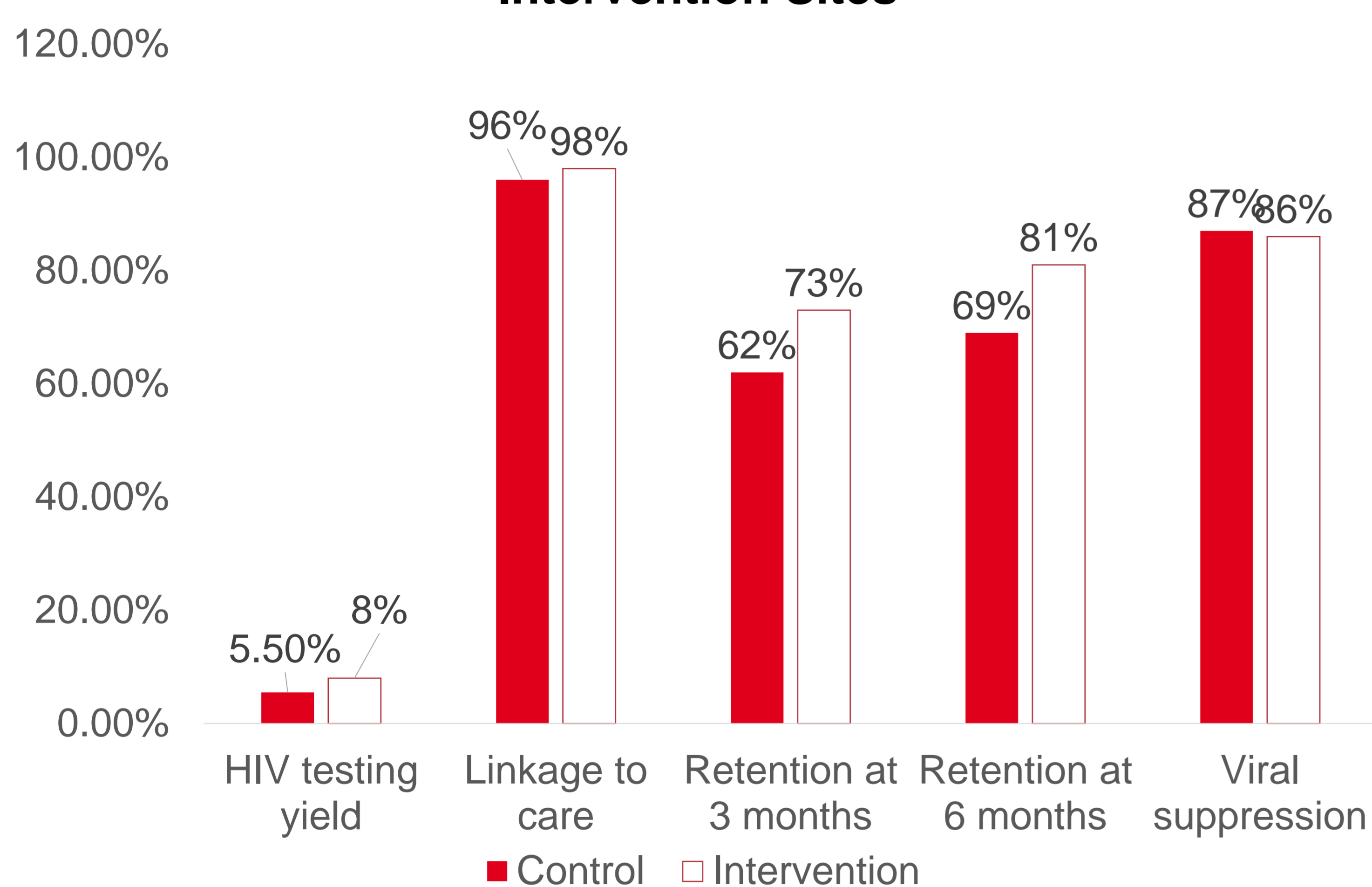
## BACKGROUND

- Adolescents and youth living with HIV (AYLHIV) consistently experience poor outcomes along the HIV cascade
- EGPAF-Malawi adopted the evidence-based Red Carpet Program (RCP) to provide AYLHIV fast-tracked services, utilizing multidisciplinary teams and a trained youth cadre to support HIV identification, linkage to ART, retention in care, and viral load suppression (VLS)
- We evaluated the effect of RCP on HIV testing, linkage to care, retention, and VLS among AYLHIV in Blantyre, Malawi

## METHODS

- This quasi-experimental study compared individual and aggregate-level HIV treatment outcomes among newly-identified AYLHIV enrolled in four intervention health facilities that implemented RCP with three control facilities between July 2020-March 2021
- Matching was used to select control sites based on similar patient volumes and retention rates (within +/-5%) with intervention sites based on baseline figures
- We compared testing yield, linkage to ART, retention in care, and VLS of AYLHIV enrolled in RCP sites to AYLHIV at control sites over the same period
- Proportions and Chi-square tests were used to compare outcomes between control and intervention sites

HIV Treatment outcomes comparing Control and Intervention Sites



\*4 intervention sites and 3 control sites



## RESULTS

- Data were abstracted for 489 AYLHIV from intervention/RCP sites and 253 AYLHIV from control sites. Females accounted for 85% of the AYLHIV at control sites compared to 78% at RCP sites
- The median age at ART initiation was 21 years in both sites
- The **average HIV testing yield was 8% (499/6,336) at RCP sites and 5.5% (251/4,534) at control sites**
- Linkage to ART was 98% (490/499) at RCP sites compared to 96% (241/251) at control sites**
- Retention was higher in RCP sites with 73% of AYLHIV in care at three months compared to 62% in control sites (p=0.08) and 81% at six months compared to 69%, respectively (p=0.004) after ART initiation**
- Only 45% of AYLHIV had VL done. The VLS rate difference was minimal between control and intervention sites (87% vs. 86%; p=0.83)

## CONCLUSIONS

- RCP sites had significantly better retention among AYLHIV vs control sites; HIV testing yield and ART linkage was slightly higher in RCP sites
- COVID-19 restrictions posed challenges for VL testing and documentation
- The RCP model has the potential to be scaled up to improve AYLHIV outcomes

	VL collected		VL not collected		Total	P-value
	N	%	N	%		
<b>Control</b>	109	43%	144	57%	253 (100%)	0.51
<b>Intervention</b>	223	46%	266	54%	489 (100%)	
<b>Total</b>	332	45%	410	55%	742 (100%)	
	VL suppressed		VL unsuppressed		Total	P-value
	N	%	N	%		
<b>Control</b>	60	87%	9	13%	69 (100%)	0.83
<b>Intervention</b>	103	86%	17	14%	120 (100%)	
<b>Total</b>	163	86%	26	14%	189 (100%)	