

CS-CLMA yields a successful decline in ART defaulters

Reported by Fortina Kazembe



Community Consultative Group (CCG) meeting at Kasungu Boma

There has been a successful decline in ART defaulters from 1,138 in the previous quarter to 757 in the current quarter at health facilities the Citizen Science-Community Led Monitoring and Advocacy (CS-CLMA) project is working in Kasungu District a development which agrees with the National Strategic Plan 2020-2025 (NSP 2020-25) in which it is asking for an improvement in ART retention and adherence among adults, adolescents, and children.

In her presentation of the findings at the Community Consultative Group (CCG) meeting that brought together 15 representatives from related government departments such as health facilities, Civil Society Organizations (CSOs), International Partners based at district level, People Living

with HIV (PLHIV) and key populations the Monitoring and Evaluation (M & E) Officer Tayana Tembo from the Malawi Network of Religious Leaders Living With or Personally Affected by HIV (MANERELA+) on 22nd June, 2023 at Kasungu Boma pointed out that the success was achieved alongside some challenges.

“Long distance to the health facilities, unreported transfers by clients, individual reasons linked to forgetfulness of refill appointments, patient fatigue to continue medication, perceived self-stigma like not wanting to be seen accessing ARVs and financial barriers related to costs incurred to access ARVs,” cited the M & E Officer as some of the factors contributing to defaulting in ART.

The CCG is an initiative of the CS-CLMA project which is jointly being implemented by the MANERELA and Network of Journalists Living with HIV (JONEHA). The project gets its funding from the Bill and Melinda Gates Foundation through the International Treatment Preparedness Coalition (ITPC). The CS-CLMA is being implemented in Kasungu and Dedza at 14 facilities.

On the long distance as one of the contributing factors to defaulting the PEPFAR Country Operational Plan 2023 (COP 23) quotes a study by Lam and Eaton, 2021 on Priority locations for additional ART facilities to reach PLHIV with long travel time to existing facilities shows that there were

an estimated total 207,000 PLHIV residing greater than 60 minutes from an existing ART facility and 74,000 PLHIV living at a distance greater than 90 minutes from an existing ART facility.

The COP 23 is recommending PEPFAR to scale up T=T interventions and dissemination of messages in high burden districts with limited interventions, community ART distribution, community ART Pick up points and support IP interventions towards bringing Differentiated Service Delivery (DSD) closer to recipients of care such as through Community ART Groups. Undetectable equals Untransmittable U=U is locally translated into *Tizirombo tochepe = Thanzi* (T=T).

The NSP is focusing on improving ART outcomes, access, coverage and retention in care particularly for peri-urban population, men, and key populations with the following targets: to reach 1,015,000 people on ART by 2025, increasing paediatricians ART coverage from 68% to 85% and improving retention in HIV care at 12 months from 72% in 2019 to 85% in 2025.

The National HIV and AIDS Policy 2022-2027 in Policy Statement 1 it declares that the Policy will ensure increased access and uptake of high quality ART, STI, TB and other health services are promoted in order to reduce mortality by enhancing adherence to treatment and retention in care among PLHIV.

NUMBER OF DEFAULTERS VS ALIVE ON CARE

