PO3/11

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FEASIBILITY AND POTENTIAL FOR IMPLEMENTING INDEX HIV SELF-TESTING IN UKRAINE (PILOT RESEARCH)

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BACKGROUND

Index testing (IT) for HIV infection has proven effective in identifying new cases of HIV infection in Ukraine; however, the number of index partners (IPs) participating in HIV testing is decreasing each year (likely due to reduced access to healthcare services during the war). The implementation of an intervention of index self-testing for HIV (providing PLHIV test kits for distribution among index partners) is potentially effective for identifying HIV cases. To evaluate the intervention, it is necessary to collect data from healthcare workers, PLHIV and statistic.

OBJECTIVES

To assess the feasibility and effectiveness of an HIV self-testing intervention based on a pilot study conducted in one region of Ukraine.

METHODS

The study has a combined design:

1) collection of implementation effectiveness data
2) collection of qualitative data from experts in the field of HIV prevention
3) collection of quantitative data (survey of PLHIV about IT)

RESULTS

The qualitative component revealed that the main gaps in IT include a shortage of personnel to conduct IT effectively, difficulties in tracking IP, and low availability of HIV testing services in remote rural areas. Experts expressed positive attitudes toward the use of self-tests, but the implementation of the proposed intervention raises some doubts and requires an assessment of its effectiveness.
The survey results showed that 73% of PLHIV expressed clear willingness to distribute the test kits among their index partners. Respondents rated their agreement with statements regarding the intervention (convenience for partners, willingness of PLHIV to participate, effectiveness of case detection, and reduction of barriers to testing) at 4.23 out of 5 points (mostly agree).
Overall, the assessment by PLHIV can be considered favourable toward the implementation of the proposed intervention. Over the 3 months of the intervention: 253 test kits were distributed to 107 PLHIV, and feedback was received from 180 partners, which is 71%. There were 10 positive results, accounting for 4% of the total tests distributed and 5.6% of those for which feedback was received. All individuals identified as HIV-positive were newly diagnosed and were referred for health care.

CONCLUSIONS

The evaluation of the intervention's effectiveness is ongoing. The case detection rate was comparable to that observed under routine practice of direct index testing protocol. Health professionals and PLHIV demonstrate a high level of adherence to the intervention. The intervention may warrant scaling up and further research.