

## Health Connectors: Personalised navigation for young people to achieve the second 90 in two South African health districts

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### BACKGROUND

Loss to follow-up and loss to ART initiation are substantial problems in adolescent HIV patients<sup>1</sup>. Among adolescents initiating antiretroviral treatment (ART), retention in health care services is associated with better ART adherence and higher rates of virological suppression<sup>2</sup>. Contact with peer navigators can reduce barriers for people to link and be retained in care<sup>3</sup>. Peer navigators help orientate adolescent patients to the health care system in a youth-friendly way, and positively influence treatment initiation and retention, as well as HIV prevention practices<sup>4</sup>.

Wits RHI's USAID-funded Adolescent Innovations Project (AIP) has developed, implemented and evaluated a replicable model of targeted and linked interventions to improve the screening, diagnosis, quality of care, adherence, retention and transition of ALHIV. One of these innovative innovations is Health Connectors.

### METHODS

Health Connectors work in public health facilities and are involved in a range of activities targeting 12-24 year old patients including identifying patients new to the health care system and patients who have defaulted ART, linking new and returning patients to supportive retention services such as adherence support, Youth Care Clubs, navigating health and social services, referral to NGOs, and other clinical and support services. Health Connectors also support HIV-positive adolescents and youth to initiate and maintain ART in the first months, and help HIV-negative patients to access HIV prevention and sexual and reproductive health services. Health Connectors services are delivered in-person, through SMS and 'WhatsApp', and telephonic consultations. Since March 2017, Health Connectors have been embedded in primary health care quality improvement teams in two health sub-districts: Sub-District F, in the City of Johannesburg and Matlosana sub-district, in North West Province. Health Connectors recruit patients from local clinics and are in contact a minimum of one time per week until both parties agree that the patient is stable and in the care that is right for them.

We evaluated the first year (03/2017-02/2018) of the Health Connector programme by analysing weekly communication summaries and progress along the 90-90-90 cascade. This information was captured into a REDCap database by the Health Connectors.

### WHAT IS A HEALTH CONNECTOR?



**Health Connectors** work in primary health care facilities. They facilitate adolescent and youth patients' linkage to care and return to care, and assist from HIV diagnosis to antiretroviral treatment initiation, and assist with access to HIV prevention for HIV negative young people.

### WHO ARE HEALTH CONNECTORS?



Health connectors are **young people, trained** graduates of a national health promotion programme and knowledgeable about the **health care system**. They are not counsellors, but they provide **information and support** by phone or in person. Each Health Connectors works in **3-4 clinics**.

### WHAT SUPPORT DO HEALTH CONNECTORS PROVIDE?



Via phone, text message, and in-person meetings, Health Connectors assist young patients to navigate the health care system and keep appointments, and provide information about the HIV care cascade.

Support for HIV-positive adolescents
▶ Link newly diagnosed patients to ART treatment and care
▶ Telephonically trace ART-defaulted patients and facilitate their return back to care
▶ Assist patients to navigate the health care system, including assistance with appointment making
▶ Support patients with ART initiation and adherence
▶ Refer patients to support services and long term care support, including Youth Care Clubs
▶ Provide psychosocial support and refer for further care as needed
▶ Facilitate HIV status disclosure

Support for HIV-negative adolescents
▶ Assist patients to navigate the health care system
▶ Educate patients about HIV prevention and help determine the most appropriate prevention methods, including accessing pre-exposure prophylaxis (PrEP)
▶ Refer patients to other support services such as education and employment assistance
▶ Provide psychosocial support and refer for further care as needed



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### RESULTS AT YEAR ONE

#### WHO ARE OUR PATIENTS?

 558 patients	 91% HIV infected
 83% female	 64% on ART at programme start
 21 median age	

#### HOW HAVE PATIENTS BEEN SERVED?

 76% of ART- uninitiated patients initiated treatment
 6 weeks average that patients remain in Health Connector programme
 3118 person-weeks of Health Connector-patient interaction
 Adhering to treatment is the most common topic of discussion between Health Connectors and patients

### CONCLUSION

The Health Connectors innovation presents a promising model to help achieve the second 90 and support the third 90 for adolescents and youth.

Health Connectors have also proven useful in linking HIV positive patients to long term care by enrolling them in Youth Care Clubs, which support retention in care.

Patient profiles demonstrate that even adolescents already initiated on ART need peer support. However, despite personalised peer support one-quarter of young patients are still not initiating on ART, and further clinical and social support is needed to increase initiation rates.

Health Connectors innovation is contributing to achieving adolescent and youth 90/90/90 goals and provide a simple example of successful differentiated care needed for this population.

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