

Integration of vertical programmes in response to community need: Integrating HIV testing into Kenyan community health systems

Authors:

Otiso, Lilian¹; Mireku, Maryline¹; Kiruki, Millicent¹; Karuga, Robinson¹; McCollum, Rosalind²; de Koning, Korrie³ Taegtmeyer, Miriam²

Affiliations:

1. Liverpool VCT, Care and Treatment (LVCT), Kenya
2. Department of International Public Health, Liverpool School of Tropical Medicine, Pembroke Place, Liverpool, UK
3. Royal Tropical Institute, Amsterdam, the Netherlands.

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Introduction

The call for integration of HIV into other health services is strengthened by the current context of scale-up, sustainability and reduced donor funding. HIV programs in Kenya, an HIV endemic country, with 53% HIV positive individuals untested, are vertical, often run by non-governmental organizations. The Kenya community health strategy (CHS) defines service provision at household level and offers potential for such integration. We sought to identify opportunities and constraints for the integration of home-based HIV testing and counselling (HBTC) within the broader CHS to improve acceptability and performance of community based services.

Methods

We conducted a context analysis using qualitative research in peri-urban Nairobi and rural Kitui, exploring community and provider perceptions of integration. We carried out 40 in-depth interviews with policymakers, district and facility managers, and 10 focused group discussions with community health extension workers (CHEWs), community health workers (CHWs), HBTC providers and community members. We specifically asked about current practice and the need, willingness and concerns around HBTC service integration. Data was digitally recorded, translated, transcribed and coded in Nvivo10 prior to framework analysis.

Results

HBTC is offered in the community by NGO-employed HBTC lay counsellors as a vertical program that it is not part of the current CHS. Policymakers expressed a strong desire to have CHWs trained to offer HBTC in households. There was enthusiasm and willingness among community members who stated that this

would increase access to testing of men. Some concerns about stigma and confidentiality remained among all respondents who stated that training on confidentiality was required.

Discussion/Conclusion

Our findings reveal community demand for integrated HBTC at household level that is endorsed by providers and policymakers and practical suggestions on how to overcome challenges in implementation, give potential for leveraging existing funding and expertise to meet community needs and national health priorities.