

High initiation of pre-exposure prophylaxis (PrEP) among clients following STI diagnosis in Mazowe district, Zimbabwe from October 2023 through September 2024

Precious Moyo¹, Everson Molande¹ Joseph Murungu¹, Shamiso Nyakuwa¹, Imelda Mahaka¹, Gloria Gonese², Batsirai Makunike², Casper Hera², Edson Chidovi², Takunda A Sola², Haddi Jatou Cham³, Tendayi Mharadze³, Kerry A. Thomson⁴

¹Pangaea Zimbabwe (PZ), Harare, Zimbabwe; ²Zimbabwe Technical Assistance, Training & Education Center for Health (Zim-TTECH), Harare, Zimbabwe; ³Ministry of Health and Child Care (MOHCC), Harare, Zimbabwe; ³Division of Global HIV and TB (DGHT), U.S. Centers for Disease Control and Prevention (CDC) Zimbabwe; ⁶International Training and Education Center for Health (I-TECH), University of Washington, Seattle, United States

Background

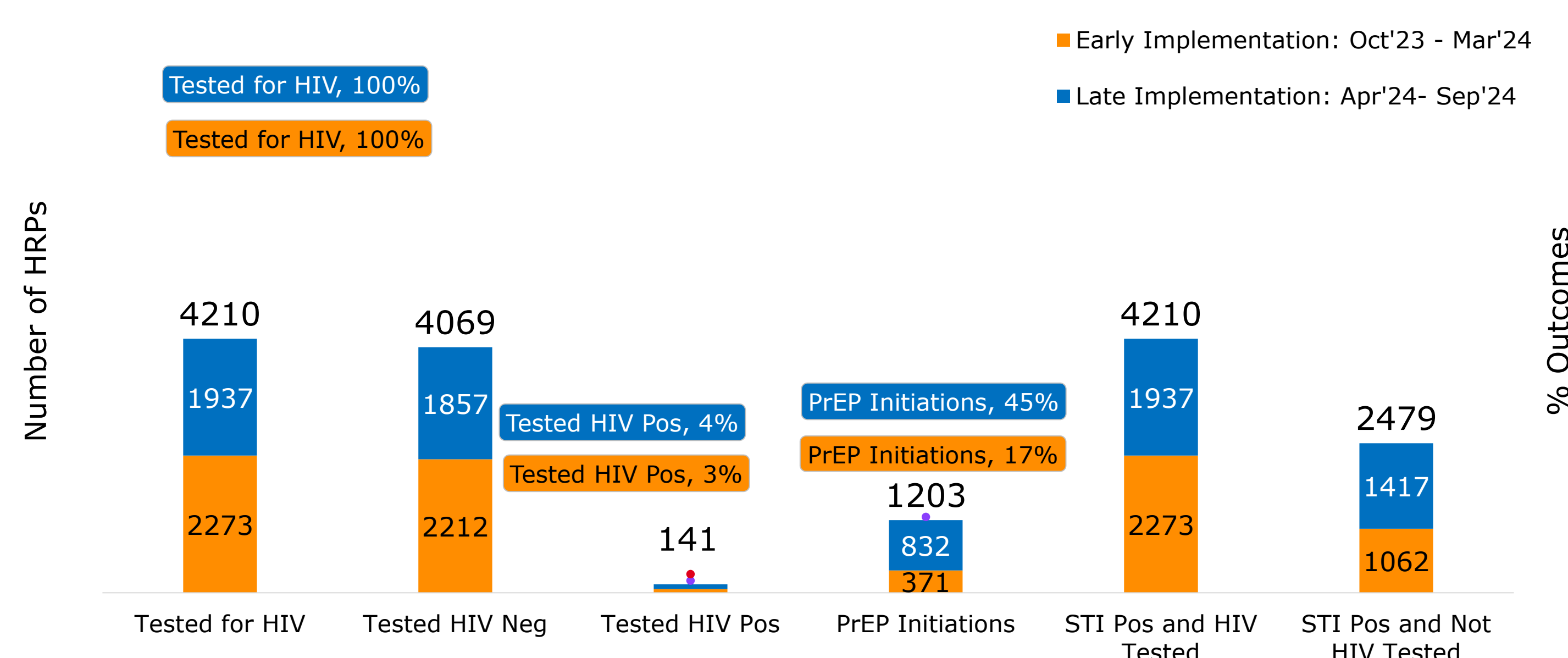
- ❑ Clients diagnosed with sexually transmitted infections (STIs) are at heightened risk of HIV acquisition.
- ❑ Integration of STI screening, HIV Testing Services (HTS), and pre-exposure prophylaxis (PrEP) services has the potential to identify and link at-risk individuals to PrEP.
- ❑ Gaps remain in ensuring that clients with an STI diagnosis also receive HIV testing and PrEP services, on the same-day. These gaps are due in part to these services being siloed. There is also lack of documentation of HTS and PrEP referrals at facilities.

Description

- ❑ From October 2023 to September 2024, an intervention was implemented at 17 healthcare facilities in Mazowe district to address missed opportunities for HIV testing and PrEP initiation among clients diagnosed with STI.
- ❑ During the late implementation phase (April–September 2024), healthcare workers were trained on using the revised national STI register, which includes HIV testing and PrEP screening documentation.
- ❑ All HIV-negative STI clients were identified as PrEP eligible. To support the intervention, monthly in-person monitoring visits were conducted to provide mentorship, assess service delivery, and improve documentation.
- ❑ HIV testing and PrEP initiation rates were compared before and after the intervention to evaluate its effectiveness.

A comparison of PrEP uptake among STI clients (Oct'23-Sep'24)

Comparison of HIV and STI Testing and PrEP Initiations:
Early vs. Late Implementation Outcomes (Oct'23 - Sep'24)



Lessons learned

- ❑ Intensified in-person monthly monitoring support to facilities aimed at building capacity to improve HIV testing among clients diagnosed with STIs and ensuring proper documentation led to a notable increase in PrEP initiations during the late implementation period (April to September 2024).
- ❑ From October 2023 - September 2024, 4,210 (69.7%) of 6,036 clients testing positive for STIs received HIV testing after orientation of health care workers.
- ❑ Of those tested, 2,212 (96%) were HIV-negative (October-March, early implementation) and 1,857 (96%) (April-September, late implementation), with a 3.3% positivity rate.
- ❑ With continued site support, PrEP initiation gains were made among STI clients with 832 STI clients being initiated on PrEP on late implementation compared to 371 in early implementation.
- ❑ PrEP uptake increased by 124% from 371 to 832 in the early-implementation to late-implementation period, respectively, reflecting the impact site support has on program improvement.



PrEP support team at Mvurwi Hospital in Mazowe district

Conclusions

- ❑ STI diagnosis serves as an entry point for PrEP counselling, highlighting the importance of integrating PrEP services into STI service delivery.
- ❑ HCW capacitation and support, and tailored screening tools can facilitate same-day PrEP counselling among STI-positive HIV negative clients.
- ❑ Optimizing PrEP uptake among STI clients can ultimately reduce HIV incidence in a high-risk groups.
- ❑ Adhering to integrating PrEP eligibility for STI-positive clients could further increase coverage to high-risk groups.