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HIV SELF-TESTING AFRICA

Door-to-door distribution of HIV self-test kits: a qualitative study among community-based test kit distributors in Zimbabwe

AUTHORS:

Madanhire C¹, Ruhode N¹, Sibanda E L¹, Nyirenda L², Cowan F M^{1,2}, Taegtmeyer M²

¹ Centre for Sexual Health and HIV/AIDS Research (CeSHHAR) Zimbabwe, Harare, Zimbabwe

² Liverpool school of Tropical Medicine, Liverpool, United Kingdom

BACKGROUND

- HIV self-testing (HIVST) increases uptake and frequency of testing among target populations such as men and young people in Sub-Saharan Africa
- Optimum HIVST distribution models are unclear.
- In Zimbabwe we explored door-to-door distribution of HIVST by trained community-based distributors (CBD), where CBDs attempted to visit every household in their community to offer test kits over 4-6 weeks. Here we report on a qualitative study to explore views and experiences of CBDs on the distribution model.

METHODS

- In-depth interviews were held with CBDs from 9 communities post-distribution to explore their experiences and views on HIVST distribution.
- In addition CBDs from 4 communities were trained to keep audio diaries to document daily experiences, feelings and reflections during kit distribution for 6 weeks.
- All data were transcribed, translated and analysed thematically.



RESULTS

- 31 CBDs were interviewed between November 2016 - June 2017, and 15 kept audio diaries between January and April 2017.
- CBDs were enthusiastic about door-to-door distribution because it is a novel intervention which added value to their existing portfolio of tasks.

"...It's all the same I have always enjoyed doing this , and it has always been my job to motivate people in my community .."
Female CBD - IDI Gweru

RESULTS continued

- CBDs observed that door-to-door HIVST distribution was widely accepted by communities and increased testing uptake.
- The intervention resulted in testing of numerous first time testers including men and young people.

"...Uhhh I told him...I showed him the kit and explained how it works. He is a 55 year old man. He then said he is so thankful because he will get tested for the first time in his life, since he was born he has never tested." (Female CBD – Audio diary Bulilima)

- CBDs viewed women and young people as embracing HIVST more than men, reporting that women perceived HIVST as an opportunity to generate discussion about HIV with their partners.

"...the women immediately take advantage of the situation and say "husband we need to take two kits so that we test..." (Male CBD – IDI Gweru)

- CBDs perceived men as the key decision makers, reporting that some women who wanted to test could not do so without their partners' permission.

"They might have a voice but when we get to these matters when the father says no, it's not possible to do anything" (Male CBD – IDI Murambinda)

- Women denied access to HIVST by partners secretly approached CBDs.
- Members of certain religious sects were reluctant to openly accept HIVST, some approached the CBDs in secret to access kits.
- Some young people preferred engaging the CBDs away from home.

"... yesterday we were just covering up afraid of our father, we want to but we want to do it when we are alone". (Female CBD – Audio diary Bulilima)

- CBDs felt they had inadequate knowledge and skill to provide comprehensive information and post-test counselling.

"There are some people who asked questions that I failed to answer because our training did not cover a lot of issues." (Male CBD – IDI Murambinda)

- They had difficulty coping with demands of distribution and their personal chores and other volunteer roles and recommended substantial incentives in view of their demanding roles.

"... I am just arriving from my distribution, eeh, yah, I am drained because of... walking, because eeh, I am a child care worker, so... reports will be required every month..... But haah, our job demands some means of transport like a bicycle" (Male CBD – Audio diary Gweru)

CONCLUSION

The community-based distribution model for HIVST kit distribution is a promising and acceptable approach among both users and community volunteers. The model has potential to increase the uptake of HIV testing in general as evidenced by the numerous first time testers. Addressing some of the challenges highlighted in this study could optimise the model. For instance, devising sustainable incentivisation mechanisms will provide key lessons as HIV Testing programmes scale up and integrate kit distribution into public health delivery systems

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CONTACT

Claudius Madanhire
cmadhanire@ceshhar.co.zw
Phone +2634 332074
Website: <http://hivstar.lshtm.ac.uk/>