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Effectiveness of HIV Linkage to HIV Positive Clients on Treatment in Hospitals in Uganda: The Case of Mengo and Mukono Hospitals HIV Departments

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Abstract

Background: The HIV situation remains a challenge with an expected 36.7 million people infected. In Uganda more than 1,300,000 to 1,600,000 people were living with HIV/AIDS in 2015 out of 44.27 million Ugandans (UNAIDS, 2017), enrolling 230 HIV new infections daily. Despite of the endeavors in HIV/AIDS testing, linkage and enrolment remains a major challenge, adding to a majority testing positive without linkage to care. With this background, the study focused on the analysis of current prevalence rate, opportunistic infections, deaths, and attitude of those tested positive towards enrolling for treatment. The study also examined issues of stigma, denial, distance, negligence, and ignorance. The objectives of the study were to assess the linkage time lag between the time of testing and the time of actual enrollment of clients that test HIV positive. It also aimed to check the reported linkages and actual enrollments and to examine the reasons as to why those linked for care don't enroll for HIV care services.

Methodology: A total of 72 respondents including doctors, HIV positive clients and counselors were interviewed and secondary data from the hospitals was analyzed through a mixed methodology approach. The study showed a response rate of 87.3% analyzed by characteristics of gender, age, relationship and level of education. However, the study employed mostly qualitative techniques, though quantitative strategies were obtained. Data collection strategies included personal interviews and key informant interviews which were unstructured, and documentation

Results: Findings show the median enrollment into care was 7 hours in females and 24 hours in Males at p-value <0.001 level of significance. Furthermore the study shows that one hour increase in time lag to arrive at enrolment point was associated with 11% increased risk of non-enrolment (uRRs=1.11, 95%CI=1.0-1.2). Approximately there is a gap of 40% between total tests and enrollments from the two hospitals. Some of the reasons given were; stigma, denial, family issues, distance and health expenses.

Conclusion: The study concluded that many clients, especially men (40%), are not enrolling for care after testing HIV positive. Clients are in denial in the initial stages of knowing they are HIV positive but are already enrolled for care much later. This implies that more priority should be at intensifying community-facility linkage and facility-facility linkage model to bridge the gap. In addition government should enlarge funding in the HIV section to enhance free treatment. Since research showed men are most affected, male involvement and partner notifications will help out in enhancing Men enrollment. With all these combined the linkage gap would be cubed.

Keywords: HIV/AIDS; HIV Linkage; HIV Enrolment

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