

Community concerns about treatment as prevention for sero-discordant couples in Harare, Zimbabwe

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Issues: HIV Prevention Trials Network (HPTN) 052 shows ART initiation or treatment as prevention (TasP) with a CD4 count of above 350-500 cells reduces HIV transmission by 96% among sero-discordant couplesⁱ. In Zimbabwe 12% of couples are sero-discordant and could potentially benefit from TasP while also impacting the overall HIV incidenceⁱⁱ. Clearly TasP implementation should not adversely affect access to ART for the clinically eligible.

Description: the advocacy project was part of the author's AIDS Vaccine Advocacy Coalition (AVAC) HIV Prevention Research Advocacy Fellowship. AVAC is a global advocacy coalition for bio-medical HIV prevention strategies. To provide guidance for TasP policy development in Zimbabwe community consultation meetings to explore perceptions on acceptability and feasibility of implementing TasP for sero-discordant couples were held.

Lessons learned: acceptability of TasP for sero-discordant couples was met with mixed feelings. While people seemed to understand potential benefits of TasP for the community specifically and the fight against HIV in Zimbabwe more broadly, they had concerns about its feasibility. Discussants particularly those HIV positive feared implementing TasP will increase financial costs for medication and human resources thereby worsening their access to life saving medication. Women reported being willing to take TasP while men appeared more reluctant citing lack of conclusive evidence on drug safety and its benefits over other methods like male condom and behaviour change. Benefits of TasP are multiplied when couples test together and mutually disclose their status. Few discussants reported being aware of their partners' statuses citing low risk perception, stigma and discrimination, gender based violence and poor service delivery. Female discussants, particularly those with mobile partners were more enthusiastic about Pre-Exposure Prophylaxis (PrEP) than TasP.

Next steps: while potential benefits of TasP are undeniable, challenges to implementing TasP are many including perceived difficulty in accessing treatment among those clinically eligible and sub-optimal rates of HIV testing. In order to create a more conducive environment for supporting implementation of TasP for sero-discordant couples there is need to expand ART guidelines to 500; create demand for CHTC TasP and PrEP; capacity building for service providers, domestic resource mobilization and stigma and discrimination reduction in health care settings

ⁱ HPTN Trial retrieved from http://www.hptn.org/research_studies/hptn052.asp on 23 October 2012

ⁱⁱ Zimbabwe National Statistics Agency (ZIMSTAT) and ICF International (2012). *Zimbabwe Demographic and Health Survey 2010-11*. Calverton, Maryland: ZIMSTAT and ICF International Inc