

GLOBAL POLICY BRIEFING

AN INTEGRATED APPROACH TO ENGAGING AND RETAINING PEOPLE LIVING WITH HIV INTO HIGH QUALITY CARE

Summary

Challenges which impact the daily lives of people living with HIV (PLHIV) can influence their engagement and retention in care. This in turn impact treatment adherence, viral load suppression, and the global fight to eliminate HIV transmission and secure an AIDS-free future. Therefore, addressing the challenges and unmet needs of PLHIV - including those related to physical, mental, emotional and social well-being – is crucial to improving HIV health outcomes and achieving the UNAIDS 90-90-90 targets.^a Achieving life-long access to high-quality care, and prioritising PLHIV's health-related quality of life (HRQoL) is critical to ensuring that HIV increasingly becomes a smaller part of people's lives. Furthermore, given that effective management of infectious disease is fundamental to economic and social wellbeing, engagement and retention in care is important to advance targets associated with UN Sustainable Development Goal¹ 3 ('SDG-3' - related to health and wellbeing). Retention in care provides the opportunity to secure continued and effective treatment which also supports HIV prevention efforts through Treatment as Prevention^b (TasP). This represents an important part of the HIV response to secure an AIDS free future.²

Innovative HIV treatment and service delivery options are crucial to ensuring that PLHIV secure the high-quality treatment and care that they deserve. This is at the heart of ViiV Healthcare's mission to leave no person living with HIV behind and support the UNAIDS public health priority to end the AIDS epidemic by 2030.^{3,4,5}

2019 UNAIDS data estimates there are 38 million PLHIV. Of those living with HIV, 81% knew their status, 67% were accessing treatment and 59% were virally suppressed.⁶

This illustrates the need to bridge gaps between diagnosis, access to treatment and effective retention in care. ViiV Healthcare recognises the need for an integrated people-focused approach which engages and retains PLHIV into care. We are committed to the following policy principles which aim to improve HIV health outcomes via engagement and retention in care:



ViiV Healthcare's programme, partnerships and policies are committed to make HIV a smaller part of people's lives. We also dedicated to the development and delivery of innovative medicines. Our treatment options aim to engage and retain PLHIV in care to improve both their individual HRQoL and deliver wider public health benefits.^[i] Our efforts include exploring and developing innovative HIV treatments that:

- i) minimise the risk of drug toxicities particularly in populations living with HIV and other co-morbidities;
- ii) may offer a more convenient and discreet treatment option;
- iii) provide options for PLHIV who are treatment naïve, and those who are highly treatment experienced (people with multi drug resistant HIV);
- iv) and where possible, reduce the number of drugs needed in an antiretroviral regimen.



ViiV Healthcare invests in Implementation Science (IS)^c as well as digital and technological innovation to understand which evidence-based retention in care interventions work, where, and why. We prioritise evaluation and delivery of better health outcomes for PLHIV and improving HRQoL. This directly seeks to improve the everyday experiences of PLHIV and contribute towards achieving the UNAIDS 90-90-90 targets. IS-based interventions include employing mobile communications technology and data analytics to deliver more responsive service provision, targeted services for specific unserved or inadequately served populations and drive overall improvements in patient case-load management.

a The UN's 90-90-90 Targets seek to achieve (by 2020): 90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy and 90% of all people receiving antiretroviral therapy will have viral suppression.

b Treatment as Prevention (TasP) refers to the use of antiretroviral (ARV) medication to prevent HIV transmission.

c Implementation science works by addressing bottlenecks, testing interventions and evaluating the real impact of programmes to help inform global health practice.



ViiV Healthcare is dedicated to collaborating with diverse stakeholders - particularly PLHIV - to support programmes and evidence-based interventions that engage and retain PLHIV in care. This includes supporting community-led approaches through strategic interventions and thought leadership enabled by Positive Action. This programme works to address the current and future health needs of PLHIV. Activities include promoting meaningful engagement in decision-making processes which affect PLHIV and peer-support programmes such as treatment adherence clubs.

The Challenge

Significant advances in HIV treatment and care have redefined the challenge of managing HIV as a lifelong condition. This is particularly important given the pressing public health need to improve its management as a chronic disease, alongside addressing a host of co-morbidities (both HIV and non-HIV related), co-infections and psychosocial issues. Prompt referral, immediate enrolment and retention in both clinical and non-clinical care support services are vital for improving HIV outcomes and HRQoL for PLHIV.^{7,8} These insights have been underlined by ViiV Healthcare's Positive Perspectives study series. ViiV Healthcare's Positive Perspectives study (PP2) surveyed 2389 PLHIV across 25 countries. The study is one of the largest of its kind, having developed from an earlier study (PP1), with the objective of understanding the unmet needs and challenges experienced by PLHIV. The study was informed and developed by an international advisory committee of advocacy and medical experts including people living with HIV^{9,10}. The study findings highlight the importance of a holistic approach to care by engaging people living with HIV in open dialogue and joint decision-making with their healthcare providers (HCPs).¹¹ Furthermore retention in care catalyses important public health prevention efforts – underpinned by treatment adherence and viral suppression of PLHIV – by reducing the risk of HIV transmission.¹² In contrast, delays in linkage to care^d are associated with late antiretroviral therapy (ART) initiation, faster disease progression and increased risk of morbidity and mortality.¹³

Innovative treatment solutions; aiming to make HIV a smaller part of peoples' lives

ViiV Healthcare has pioneered the development of several new medicines and combination treatments for PLHIV. This includes antiretroviral medicines for naïve, switch (changing medication) and highly treatment experienced populations.^{14,15} Our clinical research collaborations also seek to support a broad spectrum of PLHIV. This includes under-represented and under-served population groups: men who have sex with men (MSM), sex workers, transgender people, people who inject drugs, those incarcerated, women, children and those aged over 50. We continue to innovate with the aim of making improvements in areas such as tolerability and safety; reducing the risks of drug resistance and drug interactions. We also seek to improve dosing schedules and convenience by exploring the development of novel dosing schedules including investigational long acting injectable formulations, implantables and self-administration options.¹⁶ In addition, ViiV Healthcare is committed to developing age-appropriate formulations of our medicines for children.¹⁷ This enables PLHIV to live full, active and productive lives, while making progress on public health priorities to end the AIDS epidemic by 2030.

Collaborating to deliver evidence-based interventions:

Technological innovation empowering PLHIV to remain in care

Linkage to and retention in care are both global challenges which must be more effectively addressed if the UNAIDS 90-90-90 targets are to be achieved by the end of 2020. In 2019, only 67% of all PLHIV were accessing ART and only 59% were virally suppressed.⁶ This data signals that global public health policy needs to be better-informed by evidence-based interventions which link and retain PLHIV in treatment and care.

To this end, ViiV Healthcare has collaborated with patient advisory groups and healthcare professionals (HCPs) to develop 'UNITY', an interactive online tool designed to support and empower PLHIV during healthcare appointments. Prior to a consultation, PLHIV complete an on-line questionnaire, and Unity generates an appointment guide^e to help steer open and active dialogue with HCPs.¹⁸ Frequent questionnaire completion facilitates improved care monitoring. This has the potential to support greater treatment adherence, and provides opportunities to assess appropriate treatment options, all of which underpin retention in care. UNITY also has the potential to more easily identify ways to improve overall HRQoL outcomes for PLHIV. In addition, the Faculty of Medicine (Fundação Faculdade De Medicina) in São Paulo and ViiV Healthcare are collaborating on an implementation study to understand how to successfully implement a Clinical Monitoring System (SIMC) which can improve the tracking and monitoring of PLHIV to reduce loss to follow up care.

^d Linkage to care is typically defined as the completion of a first medical clinic visit within 30 days after an HIV diagnosis.

^e There are three components of the tool: the [Questionnaire](#), the [Appointment Guide](#) and the [Information Centre](#)

A peer-to-peer mobile phone app providing professional support

Interventions that address behavioural^f challenges related to HIV treatment adherence are critical. Demand-side interventions include: motivational counselling as part of a more comprehensive package of support. This also includes mobile phone appointment alerts to reduce the number of missed appointments.^{19 20} Furthermore, combining innovative HIV testing strategies (including self-testing) with care and support can increase HIV testing uptake and create more effective links to treatment and care.²¹

ViiV Healthcare's digital and technology innovation unit, the Hive, has supported the development of a free, peer-to-peer mobile app called PeerStrong, developed by Inquisit Health Inc. PeerStrong enabled PLHIV to receive one-to-one support via anonymous live-chat - across digital channels - with advice from a trained peer-counsellor. The app provides the additional option of introducing users to a broader peer-discussion community to reduce patient isolation and improve HIV health outcomes by supporting retention in care.²²

Addressing structural obstacles to accessing HIV services

Interventions that address structural^g challenges related to HIV treatment adherence are also critical. This includes supply-side interventions such as abolishing user fees, addressing challenges associated with taking time off work to access care, subsidised transport for clinic visits and establishing satellite health centres which provide HIV services in remote areas where demand is high. Within healthcare systems, service delivery challenges include: lengthy clinic waiting times; inadequately-trained HCPs; health worker shortages; inconvenient clinic operating hours; and hard-to-reach facility locations, all of which present barriers and reduce retention in care.²¹

ViiV Healthcare recognises that access to convenient and affordable transport represents a significant barrier to accessing HIV healthcare services across the US. In response to this challenge, our Implementation Science team has partnered with the University of South Carolina, to initiate a study to determine the effectiveness of ride-sharing services, including Uber and Lyft, in improving access and retention in care for PLHIV.²³ The advent of COVID-19 has introduced a temporary study pause due to limited service availability.

Strengthening community-led interventions to improve retention in care

Tailoring support to key and priority populations

Barriers to linking and retaining PLHIV in care are often amplified by the fact that these populations are frequently socially marginalised, publicly stigmatised, encounter institutional discrimination and experience the legal injustice of criminalisation. Inadequate protection of rights and access to justice disproportionately affects key^h and priorityⁱ populations and results in largely insufficient HIV service availability, accessibility and acceptability.²⁴ As such, key and priority populations are disproportionately represented in new infection rates, and in 2019, 62% of new HIV infections globally were among key populations.⁶

To improve engagement and retention in care among key populations, ViiV Healthcare's Positive Action programme has established an innovation platform entitled 'Positive Action Challenges (PAC)'. By collaborating with partners such as the International AIDS Society (IAS), among others, this initiative is designed to drive cross-sector collaboration to support community-developed solutions. PAC seeks to build the capacity and capabilities of PLHIV to shape and lead HIV service provision for key and priority populations. PAC Challenge funding committed to-date has supported improved access to sexual health and reproductive rights services for sex workers, as well as driving novel approaches to improve access to legal support services for sex workers and people who inject drugs (PWID).

Addressing the needs of paediatric populations

Adolescents also face a variety of challenges when transitioning from paediatric HIV care to adult services which can lead to challenges associated with treatment adherence and retention in care. In some countries, transition protocols may be inadequate or simply non-existent. Recent research identified that the risk of ART failing to suppress viral loads to undetectable levels increased more than fourfold during the transition to adult care for 18 to 19-year olds.²⁰ To address this challenge, ViiV Healthcare has provided catalytic investment to support the development of robust evidence to demonstrate that peer support programmes can successfully engage and retain young people in care.

^f Behavioural factors are those affecting uptake of treatment and services

^g Structural factors are those affecting service delivery

^h Key HIV populations include: men who have sex with men, sex workers, people who inject drugs, transgender people and people incarcerated

ⁱ Priority HIV populations include: unregistered migrants, people living with disabilities as well as adolescents, girls and women

The Zvandiri (*'As / am*) Community Adolescent Treatment supporters (CATs) programme in Zimbabwe provides integrated HIV peer support services to adolescents and young people. The programme has informed public policy and implementation practice to support improved retention in care for young people. The initiative includes family planning, mental health, social protection and support for young mothers, and has leveraged support from the public, private and not-for-profit sectors to scale-up, accelerate and secure programmatic sustainability across Zimbabwe, Eswatini, Ghana, Mozambique, Namibia, Nigeria, Rwanda, Uganda and Tanzania. Additional programme partners include the Bill and Melinda Gates Foundation, Elizabeth Glaser Pediatric AIDS Foundation, the Government of Zimbabwe, UNICEF and USAID.^{25,26}

An integrated approach to engaging and retaining people living with HIV into high quality care is an important public health priority, which addresses the global HIV response. It provides stable and effective treatment which offers the prospect of improving PLHIV's health-related quality of life to live full, active and productive lives. In addition, retention in care provides important support to address HIV prevention which seeks to contribute to create an AIDS free future by 2030.

ViiV Healthcare global policy briefings series:

Making HIV a smaller part of people's lives

ViiV Healthcare has developed a series of global policy briefings which outline our commitments through diverse partnerships to tackle key global public health priorities affecting the global, regional, national and community HIV response. We aim to inform public policy and healthcare delivery to ensure no person living with HIV is left behind, by supporting communities affected by HIV.

About ViiV Healthcare

Established in November 2009, we are the only pharmaceutical company solely focused on combating, preventing and ultimately curing HIV & AIDS. ViiV Healthcare is dedicated to researching and delivering innovative HIV medicines and solutions which make HIV a smaller part of people's lives.

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