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The HIV cascade of care and service utilisation at sex work programmes among female sex workers in South Africa

Research Report for Master's in Public Health

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University of the Witwatersrand

Declaration

I, Maya Jaffer, student number 1922750, declare that this research report is my original work. It is submitted in partial fulfilment of the requirements for the degree of Master of Public Health, in the field of Health Systems and Policy, at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination to this or any other university.

I have read the sections on referencing and plagiarism in the WITS Plagiarism Policy. I am aware that the plagiarism is wrong and that the University of the Witwatersrand may take disciplinary action should plagiarism be found in this work. I have followed the required conventions in referencing the thoughts and ideas of others. I confirm that all of the work submitted in this thesis is my own unaided work except where I have explicitly indicated otherwise.

Signed: 

Date: 16th September 2021

Abstract

Introduction

Female sex workers (FSWs) in South Africa experience uniquely high prevalence of HIV. There are multiple barriers to FSWs accessing HIV testing and treatment services, including the effects of stigma on health-seeking behaviour. It is well-established that engagement with HIV services is improved in the setting of a sex worker friendly programme. Therefore, National Department of Health (NDoH) has scaled-up specialised programmes to provide HIV services through the implementation of the National Sex Work HIV Plan 2016-2019, with the aim of reaching the 90:90:90 cascade of care (CoC) goals. This study aimed to describe the current CoC in FSWs in South Africa, and explore the impact on service use at these sex work programmes on this CoC.

Methodology

The primary study was a cross-sectional national study, that collected survey and laboratory data from FSWs in all nine provinces of South Africa, from February – July 2019. This secondary analysis considered all 1862 participants with HIV in this study. New variables were created to describe the HIV CoC with respect to known positivity, current antiretroviral treatment (ART) and viral suppression. A multivariable regression model assessed factors associated with successful viral suppression, including sex work programme service use variables.

Results

1862 FSWs with HIV were enrolled. 92% (1708/1862) were known HIV positive, and 87% (1453/1673) of these currently on antiretroviral treatment (ART). Of those on ART, 74% (1024/1385) were virally suppressed. Age was strongly associated with the CoC, with younger FSWs less likely to be on ART or virally suppressed ($p<0.001$). FSWs using HIV services from specialised programmes were 1.4 times more likely to be virally suppressed (95% CI: 1.1 – 1.9, $p=0.012$) than those not.

Conclusions

The HIV CoC in FSWs in South Africa is high, with marked improvement from previous estimates, prior to the implementation of the National Sex Work HIV Plan 2016-2019. Known positivity and current ART treatment effectively reach 90:90:90 goals, though viral suppression lags significantly behind. The findings affirm the work of sex work programmes, with the use of HIV services from these programmes improving the odds of viral suppression in the multivariable regression model. Further attention needs to be paid to the poorer CoC outcomes in younger FSWs, who are less likely to be on ART or virally suppressed.

INDEPENDENT ETHICS COMMITTEE APPROVAL FORM

Ethics Reference No.	**180809**	**Date of Meeting**	**31-Aug-2018**
		Recertification Due	**30 August 2019 (If applicable)**

Principal Investigators:	Ms J Coetzee	**Investigators:**	Dr M Jaffer
			Dr AWA Kinghorn
			Prof NA Martinson
			Ms MS Milovanovic
			Mr K Otwombe

Protocol Title:	**Modelling HIV & Associated Factors amongst Sex Workers in South Africa**

DOCUMENTS REVIEWED			**Tick As Appropriate**	**Yes**	**No**
Protocol Number	**SW-SIB**	**Date:**	01-Sep-2018		
Protocol	Protocol: NFAHI-FSW02, Version 1.0 - WITHDRAWN	**Date:**	01-Aug-2018	☑	☐
	Protocol: SW-SIB, Version 2.0	**Date:**	01-Sep-2018	☑	☐
Investigator's Brochure	N/A - Version: N/A - Dated:			☑	☐
Subject Information/Consent Form	Participant Information Leaflet and Informed Consent Form - Version: 1.0 - Dated: 01 Sep 2018			☑	☐
	Data Collection Flow Chart - Version: - - Dated:			☑	☐
Advertisements	Draft Coupon - Version: - - Dated:			☑	☐
Questionnaires	Study Questionnaire - Version: - - Dated: 02 Aug 2018			☑	☐
Insurance/Compensation	N/A	Valid From	To:	☐	☑
Synopsis of Study/Trial Summary	National Sex Work Study			☑	☐
Other Documentation	Protocol Synopsis - Dated: 01 Aug 2018			☑	☐
	HREC Application Form - Dated: 07 Aug 2018			☑	☐
	NHREC Trial Application ID#5095 - Dated: 06 Aug 2018			☑	☐
Relevant Trial Hospital/(s)	Chris Hani Baragwanath Hospital			☑	☐
Syndicate and/or Research Unit	Peri-Natal HIV Research Unit - PHRU			☑	☐

DETAILS OF COMMITTEE	
Name	University of the Witwatersrand Human Research Ethics Committee: (Medical)
Address	Research Office, Senate House University of the Witwatersrand, 1 Jan Smuts Avenue, BRAAMFONTEIN, Johannesburg, 2000

DETAILS OF MEETING	**Yes**	**No**
Is the Investigator a member of the committee ?	☐	☑
If "Yes" did he/she vote ?	☐	☑
Is the Committee organised and operated according to applicable laws and regulations together with ?	☑	☐
Local GCP requirements ?	☑	☐
ICH GCP requirements ?	☑	☐
FDA GCP requirements ? FWA Registered No. IRB00001223	☑	☐
Progress reports required either in March and September or six monthly from start of study ?	☑	☐

DECISION ON APPROVAL : Is approval given to conduct the trial ?		**Tick As Appropriate**
Yes - with no conditions		☑
Remarks :	Our expectation is that our requirements are fulfulled once a company has submitted and uploaded relevant approvals onto NHRD.	
Yes - with conditions		☐
Specify conditions :		
No		☐
Specify reasons		