The missing link in HIV prevention: Helping HIV-positive adolescents to reduce transmission in Southern and Eastern Africa

Lead Research Organisation: Aids and Society Research Unit, Centre for Social Science Research, UCT, SA
LRO Partners: University of Oxford, UK
Principal investigators: Dr R Hodes, Assoc Prof L Cluver, E Toska

Problem statement:
Although 90% of HIV-positive adolescents live in sub-Saharan Africa, limited research and interventions exist for this group outside the United States. There are an estimated 1.3–2.2 million HIV-positive adolescents in Southern and Eastern Africa, both vertically and horizontally infected. Evidence shows high rates of unprotected sex with other adolescents (27–90%), and low rates of disclosure of HIV-status to sexual partners. In addition, HIV-positive adolescents experience a range of vulnerabilities that reduce the efficacy of generalised prevention programmes, including cognitive and mental health issues, family-related challenges and material deprivation. This group has been neglected in HIV prevention efforts in the region, with no known studies testing interventions aimed at supporting HIV-positive adolescents to reduce sexual transmission.

Purpose:
The purpose of the study is to advance knowledge of how existing low-cost interventions can maximise the prevention of HIV transmission among adolescents and youth. It uses systematic review, quasi-experimental and qualitative methods to identify potential combinations of interventions that are likely to reduce HIV-transmission behaviour in HIV-positive adolescents. In addition, it pilot-tests the feasibility and acceptability of one combination identified from consultations with adolescents, community leaders and stakeholders.

Target group:
HIV-positive adolescents and youth.

Setting:
Amathole District, Eastern Cape Province, South Africa. The diversity of the sample and the context is intended to resonate with settings from other Southern and Eastern African communities to extend the programmatic and policy reach of the findings.

Scope of Work:
The study consists of three interdisciplinary research stages. Qualitative methods will be combined with quantitative longitudinal quasi-experimental methods, with a specific focus on identifying bottlenecks for obtaining viral load and CD4 count data to improve the availability of biological markers, including a systematic review and acceptability and feasibility testing of the intervention.

This study is nested in the longitudinal cohort study, Mzantsi Whakho.

Stage 1 (months 1–12) – during this stage the research team will conduct a systematic review of interventions to reduce secondary behavioural transmission by HIV-positive adolescents to their partners. In parallel, the study team will consult with stakeholders to receive input on this study and its research questions. The qualitative team will conduct a bottom-up ‘intervention audit' with community leaders and experts to assess the design, implementation and efficacy of known interventions.

Stage 2 (months 1–24) – during this stage the study team will augment the existing study by collecting and analysing longitudinal quantitative data of 800 HIV-positive and 300 HIV-negative adolescents from rural, peri-urban and urban communities. This will allow testing of direct and potentially mitigating effects of social protection combined with healthcare interventions. All analyses will be gender disaggregated. The team will also conduct in-depth
qualitative research to explore how adolescents perceive, experience and respond to the various HIV prevention and social protection initiatives to which they are exposed in a range of social contexts (including schools, clinics, churches, social welfare agencies, NGOs and via the media). Direct participant observation will be conducted in a range of locations and supplemented with in-depth interviews as well as focus groups and workshops.

Stage 3 (months 16–30) – during this stage the team will use the systematic review findings from Stage 1, with the new quantitative and qualitative evidence generated in Stage 2, to identify a potentially highly effective combination of these interventions. Formative operational research using pre- and post-testing and qualitative methods will be conducted during this stage to test feasibility and indications of effectiveness.