

Improving the detection of HIV cases

Creating a partnership between traditional health practitioners and the public health care system in Ghana

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BACKGROUND

Of the estimated 221,941 people living with HIV (PLHIV) in Ghana, approximately 130,000 need treatment. In some regions, only 29 percent of those who need treatment receive antiretroviral therapy. According to the records of the National AIDS Control Program, five percent of PLHIV who have been treated with antiretroviral therapy have been “lost to follow up.”

Poor treatment uptake and the use of traditional health care methods are associated with the belief that HIV can be supernaturally acquired and supernaturally treated. Traditional health practitioners “treat” HIV infections with methods based on spiritual, religious and other local beliefs. These practitioners may see up to 80 percent of the sick people (including all ailments) in a community, typically at “spiritual camps” designed for healing and treatment.

Traditional health practitioners have little awareness of the approaches used by Western medicine to treat and support PLHIV. As a result, traditional practitioners often keep PLHIV at the spiritual camps until it is too late to treat them. This situation is exacerbated by a deep mistrust between traditional health practitioners and public health care providers, which discourages the prompt referral of patients from the spiritual camps to public health clinics.



Taking the blood sample for the HIV test—client is very ill. The mother is looking on.

COURTESY OF LIFE RELIEF FOUNDATION, A LOCAL NGO (PLHIV) IN THE WESTERN REGION

CONCLUSIONS

The identification of PLHIV at spiritual camps is improved when traditional health practitioners receive training on HIV and learn to trust the public health sector. We recommend the expansion of this approach throughout Ghana.



Educational session on HIV with inmates (sick) at a prayer camp

COURTESY OF RURAL AID ALLIANCE FOUNDATION, A LOCAL NGO (PLHIV) IN THE WESTERN REGION

METHODS

The USAID-Ghana SHARPER Project worked with 106 traditional health practitioners in the Central and Western Regions of Ghana to improve case detection and treatment uptake for PLHIV. The traditional health practitioners received training on the transmission of HIV, current therapies, and HIV prevention methods (including the use of condoms and lubricants).

In some instances, public health staff helped to dispel myths and fears among the patients at the camps by explaining the basic facts of HIV, emphasizing the importance of knowing one’s HIV status, and describing the potential of living a positive life with HIV. The patients were then invited to receive an HIV test.

A patient-referral network was created by linking the traditional practitioners with public health care providers (who provide antiretroviral therapy and care for sexually transmitted infections).



At sharing information and networking between the traditional health practitioners, programme managers of implementing partners and health care workers at the ART units.

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RESULTS

The traditional health practitioners collaborated with the public health staff for educational sessions at the camps. Patients at the camps were tested for HIV, counseled and referred to facilities that provide antiretroviral therapy. The rate of HIV case detection varied—from 5 out of 33 patients tested in one camp, to 5 out of 73 patients at another camp. The patients who tested positive were referred for confirmation of the results to the nearest health facilities.

Effective referrals typically required phone calls from the traditional practitioners to the HIV counselors. Some of the traditional health practitioners who received training have been recognized by their communities for providing effective referrals for PLHIV.



Carrying out the HIV test in another camp.

COURTESY OF LIFE RELIEF FOUNDATION, A LOCAL NGO (PLHIV) IN THE WESTERN REGION

Peoples Tested by Implementing Partner at the Camps in the Western and Central Regions

Region	Implementing Partner (NGO)	Number of Prayer Camps	Number of Tested	Referrals to ART Facility	Result	Percentage of Number Tested
Western	LRF	35	403	15	9 reactive, all positively confirmed, one critically ill passed away on admission	3.7
Western	RAAF	6	175	12	All on put on treatment. One later discharged was sent to another camp and thus lost to system.	6.9
Central	HFFG	23	504	12	Test result confirmed and put on treatment.	2.4

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