

Enhancing increasing HIV positivity yield through index contact testing at Chilubi Mainland District Hospital, Zambia

Nambeye Ireen^{1,&}, Gladwell Simubali¹, Munthali Charity¹, Nalube Victor¹, Mkandawire Mercy¹, Mukuka Tresphord¹, Mubanga Brian²

¹Chilubi Mainland District Hospital, Zambia, ²Jhpiego Zambia

&CORRESPONDING AUTHOR: Nambeye Ireen, Chilubi Mainland District Hospital, Zambia **EMAIL:** ireennambeye2019@gmail.com

CITATION: Nambeye Ireen et al. Enhancing increasing HIV positivity yield through index contact testing at Chilubi Mainland District Hospital, Zambia. *Journal of Interventional Epidemiology and Public Health*. 2025; 8 (Conf Proc 4): 22.

DOI: <https://doi.org/10.37432/JIEPH-CONFPRO4-00022>

LINK: <https://afenet-journal.org/enhancing-increasing-hiv-positivity-yield-through-index-contact-testing-at-chilubi-mainland-district-hospital/>

RECEIVED: 03/06/24 **ACCEPTED:** 11/08/24 **PUBLISHED:** 16/07/25

KEYWORDS: HIV Positivity Yield, index contact testing, Chilubi

This is part of the proceedings of the Zambia Field Epidemiology Training Program Alumni Conference, September 11 – 13, 2024

© Nambeye Ireen et al. *Journal of Interventional Epidemiology and Public Health*. This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Introduction

HIV index testing is a targeted HIV Testing Services (HTS) approach that offers testing to contacts such as sexual partners, needle-sharing partners, and biological children under 19 years of age born to women living with HIV. By February 2024, Chilubi Mainland District Hospital reported an index positivity yield of 3% (1/41), far below the annual target for positives identified through client index testing. 15%(6/41) was the desired performance, having a performance gap of 12%.As of February 2024, Chilubi Mainland District Hospital reported an index positivity yield of 3% (1/41) of the annual target for positives through client index testing. Therefore, it is against this suboptimal performance that the facility embarked on a quality improvement project to increase the index positivity yield from 3% to 15% by the end of June 2024.

Methods

The Fishbone diagram (Ishikawa) technique was employed to identify root causes, leading to the development of targeted interventions. The Fishbone technique was used to identify root causes and come up with numerous interventions. Thereafter, the focusing matrix was used to select the change ideas. Furthermore, the Plan Do Study

Act(PDSA) cycle was used to test the change ideas and the action was; Adopt those that led to improvement. Adapt to those that were modified. Abandon those that did not lead to improvement. Root causes identified included insufficient logistics for index contact tracing, inadequate staff counseling skills, shortages of HIV test kits, lack of Information, Education, and Communication (IEC) on index testing for ART clients, and poor data management. The root causes were lack of logistics for index contact tracing, poor index counselling skills among staff, inadequate HIV test kits, lack of information and education communication (IEC) on index testing among ART clients and poor data management.

Results

The index positivity yield increased significantly from 3% in February to 24% by June 2024The index positivity yield has increased from 3% in February to 24% in June 2024. Due to availability of test kits, having well trained counsellors, improved documentation, changing the point of testing and provision of mobile ART services, we were able to achieve these results surpassing our desired performance.

Conclusion

HIV index contact testing is crucial for promoting health and breaking the cycle of HIV transmission. Achieving success in this approach requires the availability of commodities and trained personnel, consistent client follow-ups, personalized counseling, and active community engagement through stakeholder meetings. HIV index contact testing is fundamental to the promotion of health and breaking the cycle of HIV transmission. To achieve this; availability of commodities and trained personnel, client follow-ups, phone calls, individualized counselling, and community engagement through stakeholders' meetings are pivotal.