

Innovative methods to successfully upscale Community Based screening of Non-Communicable Diseases within an HIV Testing program in South Africa

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BACKGROUND AND OBJECTIVES

Non-Communicable Diseases (NCD) such as hypertension and diabetes have been identified as the next potential epidemic in South Africa hence the Department of Health's emphasis on comprehensive health screening in community-based HIV counselling and testing (CBCT) services. This paper evaluates the success in incorporating NCDs screening services by lay counsellors using screening monitors in CBCT programs.

METHODS

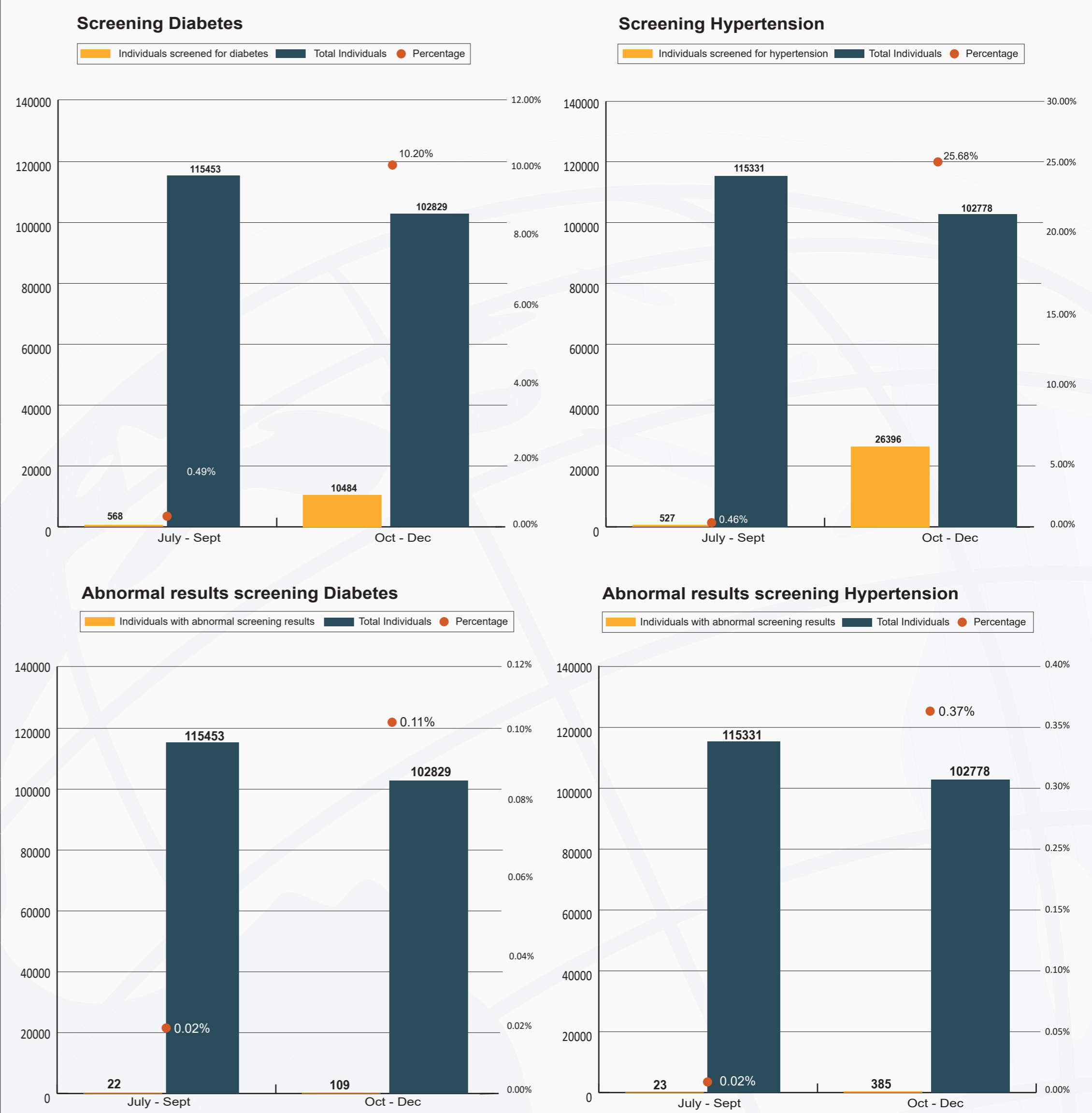
A cross sectional study design was implemented. From January 2018 counsellors screened clients in the communities for NCD's using a paper-based questionnaire and supervisors screened with NCD monitors. Screening with NCD monitors was upscaled through capacity building of selected counsellors in July-September 2018. Descriptive analyses were conducted to analyse the impact of the upscale by comparing the results of July-September with October-December 2018.

RESULTS

In the period July-September, 568/115453 (0.5%) individuals were screened for diabetes with a monitor compared to 10484/102829 (10.2%) individuals in the period October-December 2018. During July-September, 22/115453 (0.02%) individuals were identified with abnormal results after screening them via a monitor compared to 109/102829 (0.11%) individuals in October-December resulting in five times more individuals that were identified with abnormal results in the later period compared to the first period.

In the period July-September, 527/115331 (0.5%) individuals were screened for hypertension with a monitor compared to 26396/102778 (25.7%) individuals in the period October-December. During July-September, 23/115331 (0.02%) individuals were identified with abnormal results compared to

385/102778 (0.4%) individuals during October-December 2018 resulting in twenty times more individuals that were identified with abnormal results in the later period compared to the first period.



CONCLUSION

Identifying individuals with abnormal screening results by using a monitor has been significantly upscaled in only three months. Adding NCD screening with monitors proves an effective way to identify cases that would have potentially been missed.

Keywords: Screening, Upscaling, HIV testing, Community Based, Hypertension, Diabetes, Monitor.