



# AYFHS Modular Training

## MODULE 3: Undetectable Viral Load: Adherence for ALHIV Treatment Success



# Thanks

- Participants
- Facility leadership
- Ministry of Health
- PEPFAR (PUSH and Star-L Districts)

All material developed for the training are based on Lesotho national health policy and guidelines.



# Training Certification Reminder

- Attendance
- Pre and post test score
- Between training, site support and data review.
- Reflect on the application and use of training content in the facility;  
Module 1: Friendly Health Services for adolescents and young people  
Module 2: Test & Treat for Adolescents and differentiated service delivery

**What has been accomplished? Why?**



# Welcome

## REVIEW GROUND RULES

- Participate
- Ask for clarification if unclear
- Provide constructive comments and share professional experience
- Cell phones on silent for 3 hours
- Prepare for success and certification
  - Participate in all trainings & pass test
  - Demonstrate use in the facility



# Module 3 Overview: 3 hours

TIME	TOPIC
10 min	Welcome & Opening
10 min	Pre Test
45 min	Introduction to Viral Suppression & Treatment Goals for Adolescents and Young People
20 min	5 A's of Adolescent Adherence
5 min	Break
15 min	Case Studies – ALHIV with detectable viral load results
60 min	Identifying Team Roles for Adherence in our facility
25 min	Planning for Increased Viral Suppression for AYP clients
5 min	Closing & Next Training Topic



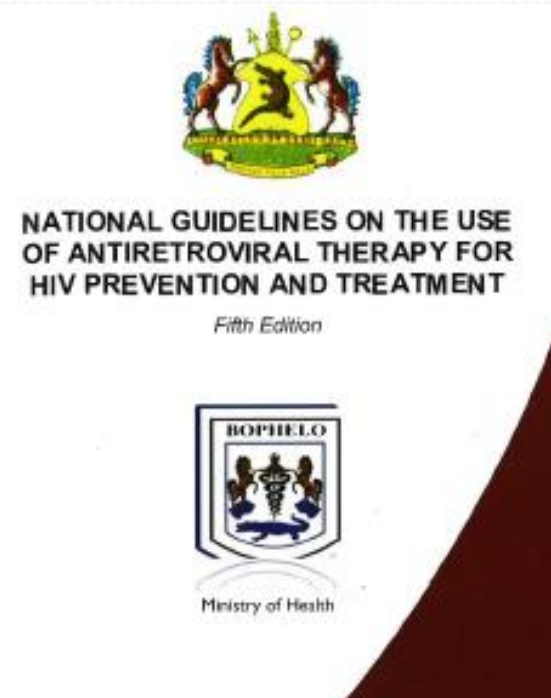
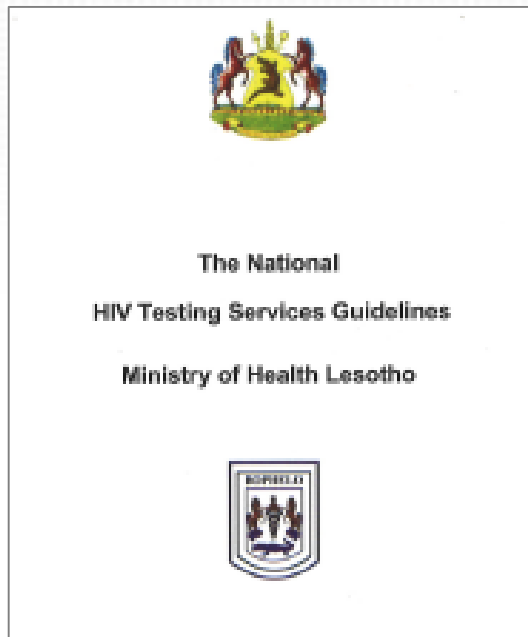


# Pre Test

- 10 minutes given to answer a multiple choice test on the topic area.
- At the end of the training, you'll be given a post-test to check your learning



# Module 3 Key References



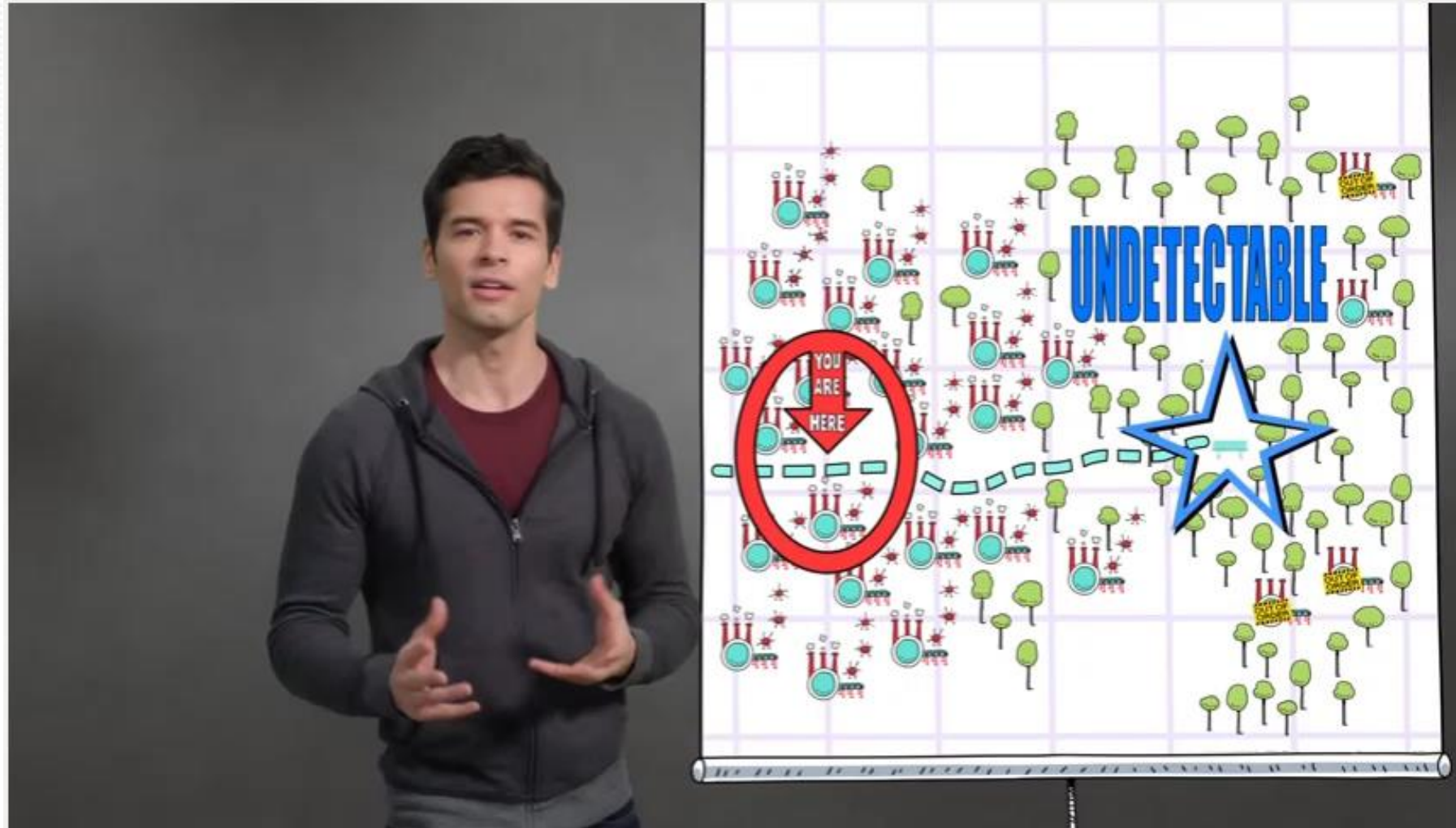
# Learning Objectives

- Understand Viral Load monitoring for adolescents
- Define adherence
- Describe the opportunities and challenges of adherence
- Learn the 5 A's for enhancing adherence for young patients
- Identify team roles through case study and real situations





# HIV: The goal of undetectable



# Viral Load

- What is it?
- What does it measure?
- How often should adolescents undergo viral load tests?



# Viral Load

- Tests measure the amount of virus in the body
- Adolescents should conduct VL tests every 6 months per national guidelines
- Undetectable is less than 1,000 copies per ml.
- Greater than 1,000 is considered detectable VL and patient should:
  - Return to monthly clinic visits if on a multi-month refill
  - Receive intensive adherence counselling
  - See page 51 of guidelines for complete algorithm.



NATIONAL GUIDELINES ON THE USE  
OF ANTIRETROVIRAL THERAPY FOR  
HIV PREVENTION AND TREATMENT

*Fifth Edition*



Ministry of Health





# Building Assets of ALHIV to Manage HIV



## **Asset-based approach:**

Identifies patient interests and strengths  
Sees adolescents as active part of care  
Develop potential  
See adolescents as the answer



## **Deficit-based approach:**

Responding to a problem  
Sees adolescents as recipients of care, passive  
Provider care is 'fixing problems' of ALHIV





# Setting Treatment Goals



My treatment goal is:

---

Next appointment is: \_\_\_\_\_

Referrals: \_\_\_\_\_

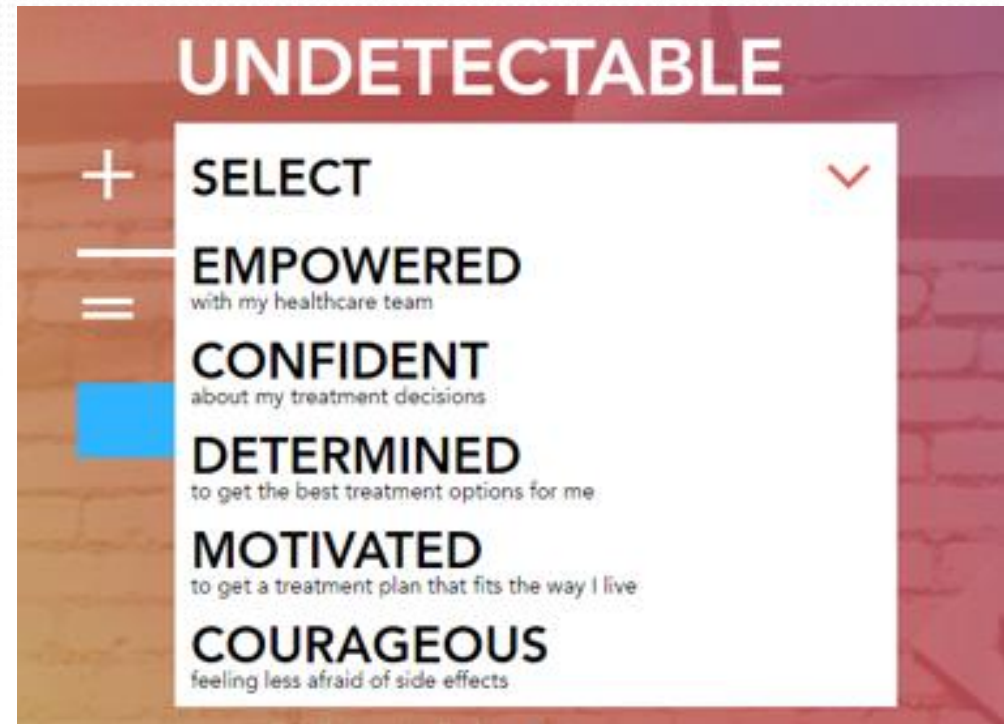
Between appointments  
contact \_\_\_\_\_



# Setting Treatment Goals

Help each patient identify steps to reach: 000

- Zero viral load
- Zero missed doses
- Zero missed appointments



So each ALHIV can continue onto their next goals in life!





# Adherence

- What does this mean?
- Why does it matter to patients?
- How do providers support adherence?



# Adherence

- Clinical definition: Taking 95%-105% of medications.
  - 4 R's: Right drug, Right dose, Right way, Right time
- Following an agreed upon care plan
  - Physical and mental health
- Attending scheduled clinic appointments
- Picking up medications on time (refills)
- Getting regular required lab tests





# Adherence Needs Support

- ARV's do not cure HIV.
- Have to be taken daily, for the rest of life.
- Pill is a reminder of HIV every day. With co-morbidities more so.
- Encourage healthy eating.
- Side effects – long and short term.
  - Vertical infect, post-pubertal youth often have treatment challenges associated with the long-term use of ART like ART-experienced adults, such as extensive resistance, complex regimens, and adverse drug effects.
- Stigma and discrimination.



# Evidence shows adolescents are less adherent

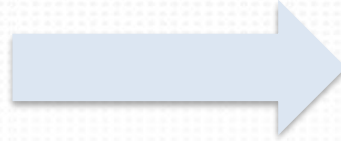
HIV-positive adolescents on ART generally have lower viral suppression rates than either adults or younger children.

- Relatively lower adherence to ART
- As with other chronic conditions
- Normal developmental changes (transition to independence) impacts on the management of the condition
  - Home – schools – life – relationships – own families



# Implications of Poor Adherence

**Resistant  
strains**



**Limited future ART  
regimen options**

**Virological  
failure**

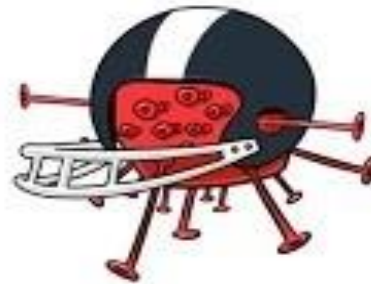
**Immunological  
failure**

**Clinical failure**

**Death**



# Treatment Challenges

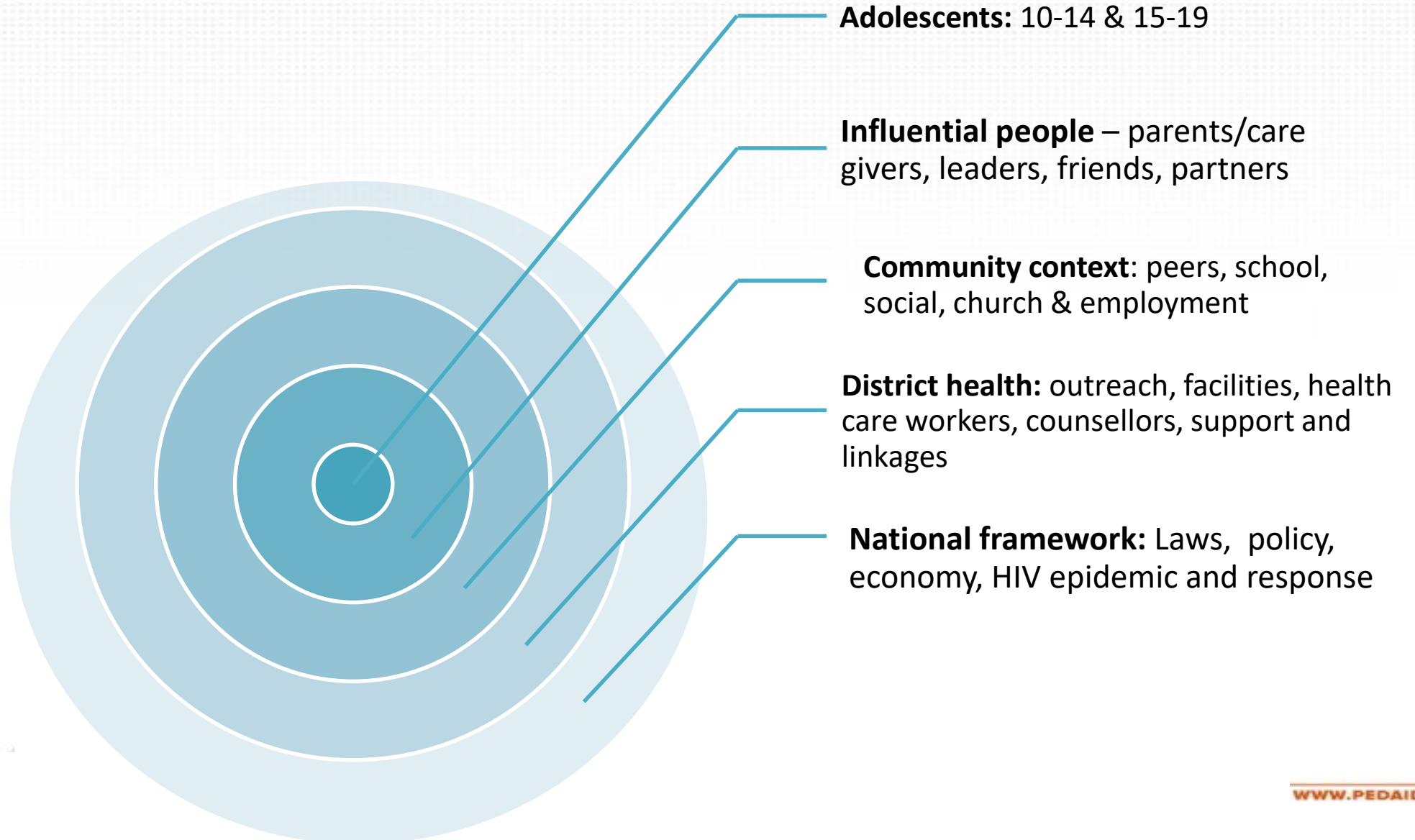


# RESISTANCE





# Spheres of Influence in Adolescent Lives



# 5 Reasons to Stay on Treatment

1. Less HIV in you
2. Protect your partners
3. More CD4 cells
4. Less inflammation
5. Avoid resistance

<https://www.youtube.com/watch?v=3m-NGmFV0b0>



# Case Study for Reflection:

## Use your clinic experience with patients to brainstorm.



**What adherence challenges might arise with this client?**

**What adherence opportunities are available for this client?**

Adolescent boy in a nearby secondary school, age 16 years old.





# Case Studies for Reflection



**What adherence challenges might come up with this client?**

**What adherence opportunities are available for this client?**

Adolescent girl living with HIV in boarding school, age 12 years old.



# Case Studies for Reflection



**What adherence opportunities are available for this client?**

**What adherence challenges might come up with this client?**

Teen pregnant at age 17 years from Maseru and not working. She is not living with the father of the baby.



# Consider the following areas in discussion:

- Client motivation
- Lifestyle
- Treatment support
- Psychosocial (emotional and social)
- Health systems and care model
- Physical factors and disease progression



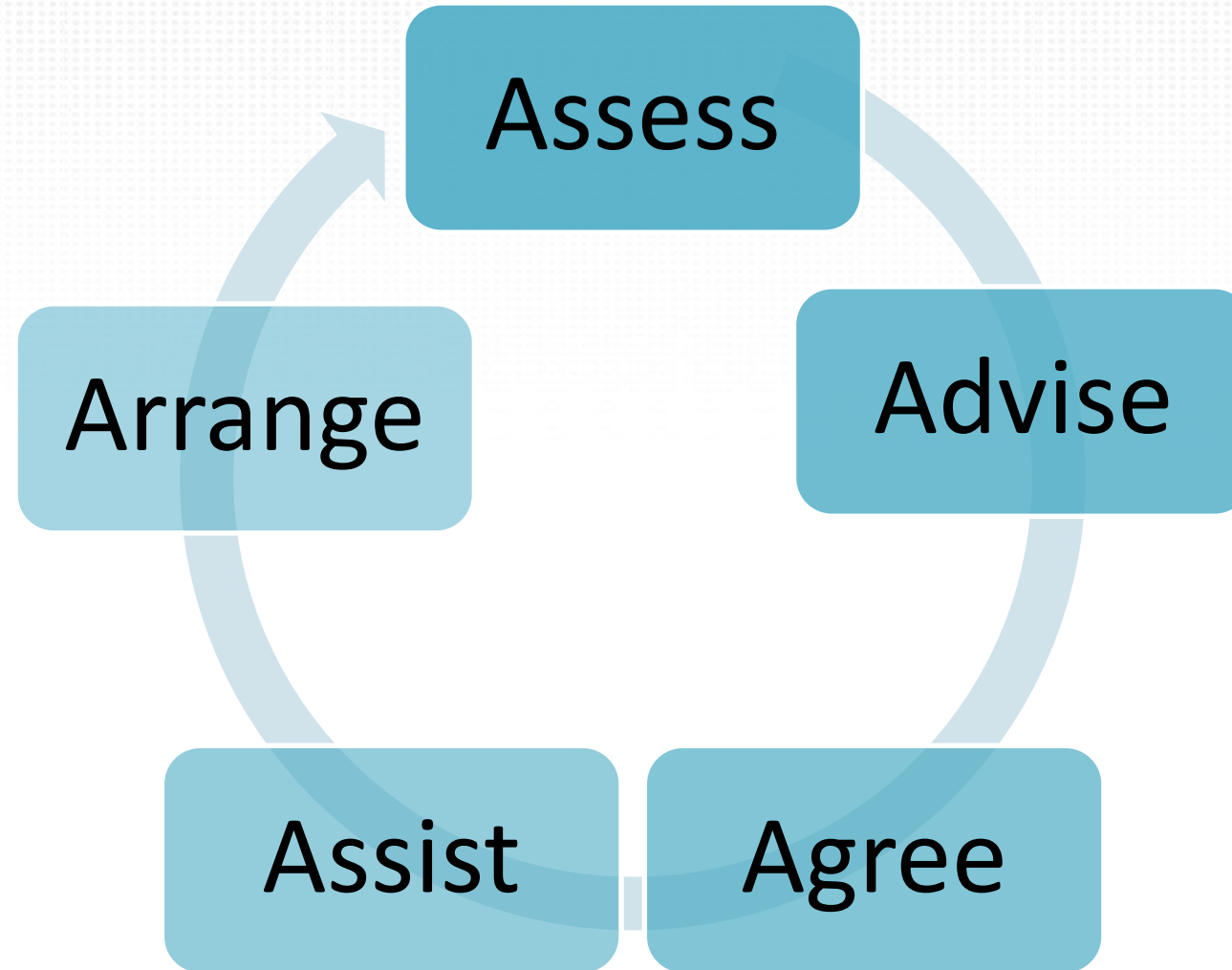


# Reflect on Discussions:

- What happened in groups? Was it easy to complete the exercise? Why or why not?
- What do we learn about adolescent clients from our discussions? (positive and negative)
- What can we take into our work in the clinic?



# Adolescent 5 A's Handout



# Measuring Adherence

- Self reporting
  - Pill counts
  - Pharmacy records; refills
  - Biological markers- viral load
- 
- What of these methods works best for adolescents?





# Job Aids

- Use the 5 A's helps to ensure that younger clients are fully informed and decide on their own treatment steps.
- Job aids can help – cards that are filled in by patients
  - Make each patient determine their own steps to achieve before the next appointment
  - Help ensure that other services that will assist with their treatment are accessed:
    - Social worker, Psychologist, Nutritionist, Counsellor
    - Peer support groups
    - SRH; family planning or preparing for pregnancy



# Tips to Enhance Adherence for ALHIV

- Patient support via counselling – professional, lay and peers
- Medication diaries or pill boxes
- Treatment support / buddy system (peer, friend, family)
- Modified Directly Observed Therapy/DART
- Ensure basic adherence needs are met (food, transport, etc.)
- Electronic devices (setting alarms on phones/watches)



# 10 Tips for Effective Adherence Counseling

1. Listen to the client; use appropriate body language and eye contact.
2. During each visit, teach the importance of adherence to treatment, drug side effects, the consequences of poor adherence, etc.
3. Provide a comfortable atmosphere for the client to ask questions, and respond to questions and concerns appropriately. Maintain client privacy and confidentiality.
4. Respect the client's needs, choices and values.
5. Ask questions to identify high-risk behaviors. (Open-ended questions tend to work best).





# 10 Tips for Effective Adherence Counseling

6. Respond to questions, provide information, and correct any false information.
7. Be gently persuasive, but allow the client to make his/her own decisions
8. Reinforce what the client needs to know: emphasize, summarize and repeat key information. Ask the client if he/she has any questions.
9. Never blame the client for failing to adhere; instead, seek ways to inspire improved adherence. Much of the follow-through on adherence is about TRUST.
10. Support the client in developing the resources, support and arrangements they need to ensure adherence.



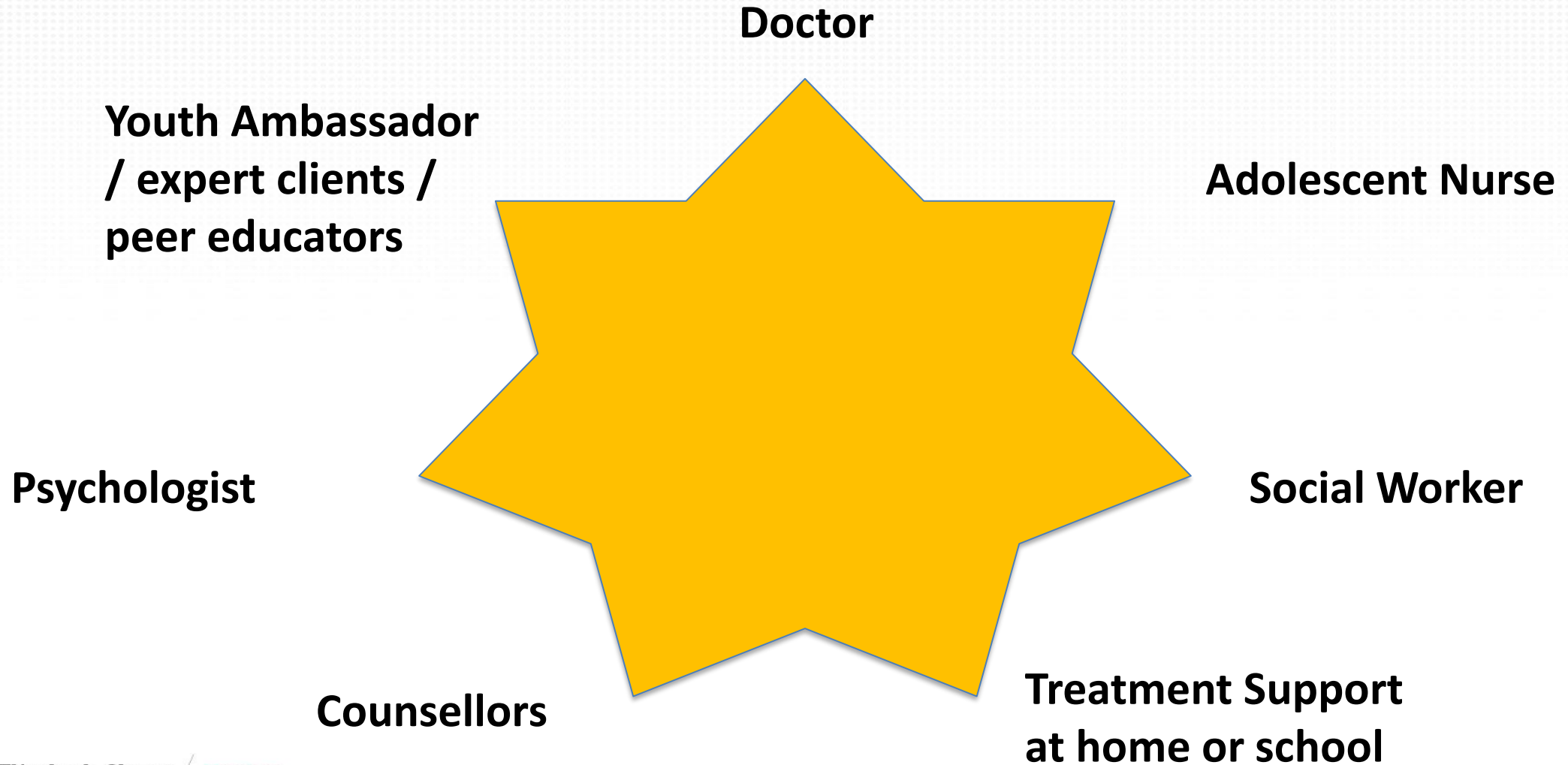
# Case Study

- Take a slip of paper; complete the information and place it back in the basket.
- Each slip is asking you to identify something from experience; about a challenging patient living with HIV between the ages of 10-24 years, married or pregnant too.
- *Please do not include identifying information in the details.*

Area	Patient details
Age	
Sex	
On ART for ____ time	
Medical history notes	
Social support	
Viral Load = Adherence	
Challenges	



# District ALHIV Team Support





# Case Study Group Work:

Discuss the patient case together. Answer the following:

- What are the priority needs?
- What is the management plan?
- Which staff will support this and how?



# Process Case Studies:

- What happened in your case study? Was it easy to complete the exercise? Why or why not?
- What do we learn about real clients from our discussions? (positive and negative)
- What can we take into our work in the clinic?
  - What professional values play a role in this work?
  - Can providers work as a team to address patient's adherence needs?



# Next Steps for Achieving VS in Our Facility

- What do we need for our clients without VL results? With detectable VLs?
- What are the steps for case management of adherence?
- Who will assist with this? How?

Make notes on the Module Report.



# Review Learning Objectives; Do we?

- Understand Viral Load monitoring for adolescents
- Define adherence
- Describe the opportunities and challenges of adherence
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# Closing

- Thanks
- Attendance
- Next module topic and date

