



POLICY BRIEF

Training traditional healers in delivering HIV testing and counselling improves HIV testing uptake

Key messages

- One in 20 Tanzanian adults aged 15 years and older is infected with HIV. Worryingly, three in 10 adults have never tested for HIV, while only one in five has tested for HIV in the past 12 months.
- If most adults do not know their HIV status, those who are HIV-positive will delay receiving antiretroviral therapy (ART). This will further delay the process of “ending AIDS.”
- We trained traditional healers to either deliver a rapid oral HIV test (Oraquick) to their clients or refer them to designated health facilities for HIV testing. We used Oraquick because it is approved for layperson use and is simple to administer and read results.
- One hundred out of 100 clients received a rapid oral HIV test at the traditional healer locations compared with 73 out of 100 referred clients who presented and received an HIV test at designated health facilities.
- Designing a programme that trains registered traditional healers in delivering HIV testing and counselling to their clients and/or referring them for HIV testing at health facilities will increase the rates of adults who are aware of their HIV status and thereby contribute towards zero new HIV infections.

EXECUTIVE SUMMARY

HIV testing is an initial and significant step towards ending HIV transmission. However, several barriers including distance and travel costs to the testing sites, stigma, and mistrust in biomedical care hinder people from HIV testing. In Tanzania where one in 20 adults aged 15 years and older is infected with HIV, three in 10 adults have never tested for HIV and only one in five has tested for HIV in the past 12 months. In this context, how can we increase the rates of HIV testing among adults in Tanzania? We conducted a study to evaluate the effectiveness of engaging traditional healers in HIV testing. We trained traditional healers to either deliver a rapid oral HIV test (Oraquick) or refer their clients to selected health facilities for HIV testing. Traditional healers successfully delivered rapid oral HIV tests to all 100 clients in the first group (100% uptake). They also successfully referred all 100 clients in the second group from which 73 presented and received an HIV test at a designated health facility within

90 days following study enrolment (73% uptake). To increase the rate of HIV testing among Tanzanian adults, we recommend designing and implementing a programme that trains registered traditional healers in delivering HIV testing and counselling and/or referring their clients for HIV testing at health facilities.

BACKGROUND

Goal 3 of the United Nation's Sustainable Development Goals (SDG 3) has a target of "ending AIDS" as a public health threat by 2030. Achieving this goal requires reaching three milestones. First, 95 out of 100 people living with HIV (PLWH) must know their HIV status. Second, 95 out of 100 people diagnosed with HIV must receive sustained antiretroviral therapy (ART). Third, 95 out of 100 people receiving ART must achieve an undetectable viral load [1,2].

HIV testing is the initial and significant step towards stopping HIV transmission and achieving the goal of "ending AIDS." However, different

barriers including long distance to the testing facilities, high travel costs, stigma due to HIV testing at health facilities, and mistrust in biomedical care reduce uptake of HIV testing services [3–7]. In Tanzania, one in 20 adults aged 15 years and older is infected with HIV [8]. Worryingly, three in 10 adults have never tested for HIV (and thus are unaware of their HIV status) and only one in five has tested for HIV in the past 12 months [8].

In an effort to increase the rates of HIV testing uptake among adults, strategies for testing outside of health facilities (community-based strategies) including mobile outreach clinics, distribution of HIV self-test kits, and home-based HIV testing have been tried out [9–12]. Although these strategies have increased HIV testing rates among adults, none has achieved a universal uptake (100% uptake). Studies conducted in Uganda and Tanzania have demonstrated that healthcare workers and traditional healers can collaborate [13,14] and improve

HIV testing uptake among adults [13]. Building on these studies, we conducted a study to evaluate the effectiveness of engaging traditional healers in HIV testing in Mwanza, Tanzania.

Researchers from the National Institute for Medical Research (NIMR) and Weill Cornell Medicine conducted this study in Mwanza city. To begin with, 10 traditional healers were trained in HIV transmission and counselling. Five traditional healers were trained on administering a rapid oral HIV test (Oraquick). Oraquick is approved for layperson use, simple to administer and read the results, and available in pharmacies across Tanzania. Another five traditional healers were trained in referring their clients for HIV testing at designated health facilities in Mwanza city [15].

The study recruited 200 participants in total. Eligibility criteria for participation were age 18 years and older, seeking care from a participating traditional healer, being

sexually active (ever had intercourse), reporting no HIV testing within the past 12 months, and not previously diagnosed with HIV. One hundred clients were seen by five traditional healers who provided HIV education and offered a rapid oral HIV test at the time of the visit. Another 100 clients were seen by the other five traditional healers who also provided HIV education and referred them to designated health facilities in Mwanza city where they could receive an HIV test within 90 days following study enrolment. Researchers monitored HIV testing uptake for each client referred to the health facilities within three months following study enrolment [15].

Traditional healers successfully delivered rapid oral HIV tests to all 100 clients in the first group (100% uptake). Furthermore, they successfully referred all 100 clients in the second group for HIV testing and counselling at designated health facilities. Seventy three in 100 clients who were referred, presented and received an HIV test within 90

days following study enrolment (73% uptake) [15].

POLICY OPTIONS

Training traditional healers to deliver HIV testing and counselling and/or referring their clients to the health facilities for HIV testing improves HIV testing among adults aged 15 years and older.

IMPLEMENTATION CONSIDERATION

We recommend designing a programme in which healthcare professionals will train registered traditional healers in delivering HIV testing and counselling and/or referring their clients to the health facilities for HIV testing and counselling. As evidence from our study and other related studies has shown [13,15], this programme has the potential to increase HIV testing rates among adults who are unaware of their HIV status and thereby contribute towards zero new HIV infections.

Tanzania has the unique opportunity to implement this programme for a number of

reasons. First, traditional medicine and traditional healers are recognized and endorsed by the World Health Organization (WHO) as key players in keeping populations healthy [16]. In Tanzania, the Ministry of Health is mandated, among other roles, to promote the use of traditional medicine. It also oversees and regulates traditional healers' operations as stipulated in the Traditional and Alternative Medicines Act (No. 23 of 2002) [17].

Second, most traditional healers in Tanzania are registered with the Traditional and Alternative Health Practice Council under the Ministry of Health. As such, the designed intervention would use the registered traditional healers since they are already recognized by the ministry. Furthermore, the Traditional and Alternative Health Practice Council can continue identifying and registering other unregistered traditional healers across the country in order to increase the number of those who would make good candidates to be trained to

participate in HIV testing interventions.

Third, Tanzania has enough and well-trained healthcare professionals working in the HIV/AIDS Care and Treatment (CTC) Clinics who can train traditional healers on HIV testing and counselling and the patient referral process. For instance, traditional healers who participated in our study were trained by the healthcare staff from the HIV/AIDS CTC of Bugando Zonal Referral Hospital in Mwanza.

Finally, our study and others have shown that traditional healers are both willing and able to facilitate HIV testing among their clients if they are trained by healthcare professionals [13,14,18]. Besides, key stakeholders in the HIV care cascade, including healthcare professionals, largely agree that improving HIV treatment and care requires a functional collaboration between biomedical healthcare professionals and traditional healers [14].

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Glossary

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral therapy
CTC	Care and Treatment
HIV	Human Immunodeficiency Virus
NIMR	National Institute for Medical Research
PLWH	People Living with HIV
SDG	Sustainable Development Goals
WHO	World Health Organization

