

**Project title:** Treatment as prevention in correctional facilities in Southern Africa.

**Lead Research Organisation:** The Aurum Institute (Aurum)

**LRO Partner:** Centre for Infectious Disease Research in Zambia (CIDRZ)

**Principal investigator:** Dr Salome Charalambous

**Problem statement:**

Limited data from Southern Africa suggest that the concentration of HIV-infected individuals and high-risk sexual behaviours in correctional facilities may be driving HIV transmission in incarcerated populations. Despite the implications of this on individual and public health, little evidence exists to guide implementation of proven HIV prevention strategies in correctional settings. The strategy proposed in this project, Treatment as Prevention, includes the provision of immediate anti-retroviral therapy (ART) for those identified as living with HIV using a “universal test and treat” (UTT) approach. This strategy offers the promise to prevent HIV transmission among prisoners and improve inmate health and tuberculosis control. Such immediate treatment of HIV infection has most recently been shown to have significant morbidity and survival benefits for persons living with HIV.

**Purpose:**

After relevant regulatory approvals are obtained, the study, using a serial cross-sectional design with nested cohorts, will aim to demonstrate the feasibility of UTT implementation in correctional settings to inform policy makers towards supporting UTT scale-up in correctional settings.

**Target group:** HIV-positive inmates.

**Setting:** Three correctional facilities – one in Zambia and two in South Africa.

**Scope of Work:**

The project will implement and evaluate UTT in three correctional facilities. Four study objectives will:

- Characterise the continuum of care under UTT and compare the proportion of inmates achieving key indicators (HIV tested, ART initiated, TB screened, retained on ART, virologically suppressed) to *a priori* benchmarks;
- Apply qualitative and quantitative methods to identify health-system and individual-inmate barriers to, and facilitators of, UTT to refine implementation using quantitative surveys and in-depth interviews;
- Characterise the resources needed and steps taken to achieve a functioning UTT programme within correctional environments using a model building/ costing approach; and

- Use lessons learnt and the results of key informant interviews with policy makers in RSA and Zambia to identify key policy stakeholder concerns and questions in order to facilitate UTT scale-up within correctional facilities in Southern Africa.

Regulatory and Ethics approvals have been submitted to the University of Zambia & Biomedical Research Ethics Committee; to the University of North Carolina and Johns Hopkins Institutional International Review Boards; to the University of the Witwatersrand Human Research Ethics Committee; the South African Department of Correctional Services and the Zambian Ministry of Home Affairs. The study has been discussed with, and has the support of, senior staff responsible for HIV control in the South African National Department of Health and the Zambian Ministry of Health.