Positive Impact of Social Protection Scheme in Retention of PLHIV in the Continuum of Care

S. Agarwal, N. Pathak, D.S. Pandey, M.K. Hauzel, P. Pareek
Hindustan Latex Family Planning Promotion Trust, HIV/AIDS DIVISION, Gautam Buddh Nagar, India, Hindustan Latex Family Planning Promotion Trust, HIV/AIDS DIVISION

Background:
To improve the survival and quality of life of PLHIV, HLFPPT is managing Vihas programme in Rajasthan State by establishing 17 Care & Support Centres [CSCs]. CSCs are the comprehensive facility for providing, counseling, referral, outreach services and linkages to Social entitlements/welfare schemes to registered PLHIV.

Retention of PLHIV in treatment has always been a Challenge in Rajasthan State. As per 12 month retention data <74% clients were retained in treatment.

(Ref: Programme data Rajasthan: 2018-19)

Objective:
To facilitate the linkages of various social welfare schemes running by Government of India for increasing uptake of care and support services including retention of People Living With HIV (PLHIV). However, due to fear of identity disclosure, limited PLHIV focused schemes, lack of sensitivity towards PLHIVs across various line departments, complex documentation and time taking process, majority of clients are reluctant to avail the schemes.

Process:
To overcome the challenges HLFPPT ensured quality counseling to address the identity disclosure related issues

- Advocacy Meetings

Advocacy meetings with various line departments to fast track the process of PLHIV availing social benefits schemes and synchronized the effort of ART and CSCs.

- Mobilization and Awareness

Prior to the Linkage Camp, Sensitization and client mobilization was ensured through various means of communication including door-to-door & virtual approach.

- Service Delivery

To ensure the success of linkages camps, detailed guideline and monitoring schedule was developed and accordingly camps were organized. During the camp, a total of 2,553 PLHIVs were mobilized and 2,405 PLHIVs applied for various government welfare schemes like- Widow Pension, Palanhar Swasthya Beema Yojana, etc.

% of PLHIV Link with Social Welfare Schemes

- Palanhar Yojana 11%
- Widow Pension 13%
- National Food Security (AAY) 2%
- Bus Concession 19%
- Rail Concession 45%
- Bhamashah Swasthya Beema Yojana 5%
- Other 5%

HUMAN TOUCH: WALKING THE EXTRA MILE

In Rajasthan CSC facilitated Mrs. X (Name changed) to get the free bus pass with the CSC letter head since she was not having any documents. With the CSC endorsed letter head, a request to the Sarpanch (Village Head) was made for provision of Ration Card for Mrs. X. Within 15 days, she was provided a Ration Card based on which she could acquire Aadhar Card (UID), opened a bank account and further linked to Bhamashah Card along with various social benefits like Antyodaya Anna Yojana (AY). The effort put forth by the CSC team were appreciated by Mrs. X, leading her to take responsibility of her life i.e. regular visit to CSC adhering to treatment and enhanced trust with the CSC team.

Lesson Learnt:
A total of 2,405 PLHIVs were linked with various social welfare schemes. Further, retention of these linked clients were analyzed and it was evident that overall retention of all 2,405 linked PLHIV is >90% in comparison to the Rajasthan state 12 month retention average i.e., <74% for FY-2018-19.

The result clearly reveals that linkages with Social welfare scheme does have an impact on the retention of clients who are on treatment.

- Disclosure plays immense role and related to treatment access and adherence
- Social welfare scheme plays a major role in Retention of Active care
- Counselling is most crucial to identify the clients surrounding and his/her sexual behavior specifically for risk group.
- Continuous follow up of client is essential for achieving the needed result.

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ABSTRACT SUBMISSION

TITLE: POSITIVE IMPACT OF SOCIAL PROTECTION SCHEME IN RETENTION OF PLHIV IN THE CONTINUUM OF CARE

AUTHOR & AFFILIATION:
Sharad Agarwal, Neeraj Pathak, Dr. Sangita Pandey, Priyanka Pareek, Hindustan Latex Family Planning Promotion Trust, NOIDA (Uttar Pradesh), India

ABSTRACT:

BACKGROUND:
HLFPPT is managing Vihaan programme in 5 States of India with an objective to improve survival and quality of life of PLHIV by operationalizing 56 Care & Support Centres (CSCs). HLFPPT monitor and provide constant technical support to CSC which is a comprehensive facility for providing, counseling, referral, outreach services and linkages to Social entitlements/ welfare schemes to the registered PLHIV.

Retention in care in the treatment has always been a Challenge in the State of Rajasthan i.e. 76% (Ref: Programme data: 2018-19)

DESCRIPTION:
The linkages with social welfare scheme are playing an important role in increasing the uptake of care and support services but identity disclosure, limited PLHIV specific scheme, lack of sensitivity towards PLHIV across various line departments, complex documentation and time taking process majority of clients are reluctant to link with the schemes.

To overcome the challenges HLFPPT ensured quality counselling to address disclosure related issues, conduct state and district level advocacy meetings with various line department for easy processing to uptake the services and synchronized the coordinate effort of ART and CSC team.
Further to enhance uptake of Social welfare scheme “Linkages Camps” were organized and to ensure the success of linkage camps detailed guideline and monitoring schedule were developed. Prior the Linkage Camp the client mobilization was ensured and local donors/ NGOs were also mobilized to ensure the maximum benefits to PLHIV.

During the linkages camp 2,553 clients were mobilized about various social welfare schemes and 2,405 PLHIV applied for various welfare schemes. Out of 2,405 PLHIV, 1,121 forms were completed at spot and remaining 1,284 PLHIV whose forms were incomplete further followed for completing the forms.

**RESULT:**

All 2,405 PLHIV linked and availed the benefits of various social welfare schemes. Further, the retention of these linked clients were analysed, it was evident that the overall retention of all linked PLHIV is >90% in comparison to state average of retention (77%) for FY-2018-19. The result clearly reveals that linkages with Social welfare scheme have an impact on the retention of clients in treatment.

**CONCLUSION:**

Social welfare scheme uptake and retention of ART is closely interrelated. It plays very crucial role in reducing the rate of transmission and ART access. Hence, it should be a key component of all HIV related programme.