

Client Evaluation of Peer Counselor Performance in a Rural PMTCT Program in Nigeria



Grace Manji-Obadiah¹, Erika Saunders², Chinenye Fan-Osuala¹, Iboro E. Nta³, Nadia A. Sam-Agudu^{1,4}.

¹International Research Center of Excellence, Institute of Human Virology Nigeria, Abuja, Nigeria; ²School of Pharmacy, University of Maryland Baltimore, Baltimore, USA; ³ Health Systems Strengthening and Program Evaluation, Institute of Human Virology Nigeria, Abuja, Nigeria; ⁴University of Maryland School of Medicine, Baltimore, USA.

Background

PMTCT service scale-up in Nigeria has been challenging, particularly in rural areas where professional health workforce is limited and uptake is low. Engaging experienced HIV+ women to serve as lay peer counselors (PCs) is important in optimizing outcomes among PMTCT clients. MoMent Nigeria is a two arm implementation research investigating the impact of a structured, supervised peer counselling program on PMTCT outcomes in rural areas. Client-focused audits of PC activities were conducted to evaluate performance and for Quality Control (QC).

Methods

PC audits were conducted in batches over an 18 month period, among PC clients who were HIV-positive women at different stages of the PMTCT cascade. A structured 19-item interviewer-administered questionnaire was used to survey clients. Interviewees were randomly selected from among clients engaged with PCs for ≥ 3 months. Descriptive statistics, Chi-square comparison of proportions and tests of association were applied to the data.

Findings

Of 497 study clients enrolled, 92 (18.5%) were interviewed: 59 (64.1%) from intervention (structured, high-supervision PC program) and 33 (35.9%) from control (loosely-structured, limited supervision PC program) sites (**Table 1**).

Median age of evaluators was 29 years, and 91% were married with a median of 2 children. Over a quarter (26.1%) of clients did not know their PC's HIV status, which did not differ between the intervention and control arms (23.7% vs 30.3%, $p=0.98$). Monthly median number of PC visits to client's home did not differ either [3 (IQR 1-4) vs 2 (IQR 0-4), $p=0.84$]. Overall, 81.6% of all PC clients interviewed rated their PC support services as "Very Good" or "Excellent", with no difference between the two arms.

Table 1: Client Evaluation of Peer Counselor Performance

Characteristics	N (%) or Median (IQR)			p-value
	Intervention N=59	Control N = 33	Total N=92	
Age (years)	28 (25-32)	29 (25-31)	29 (25-31)	-
Marital status				
Single	6 (10.2)	2 (6.1)	8 (8.7)	-
Married	53 (89.8)	31 (93.9)	84 (91.3)	
Currently Breastfeeding				
Yes	39 (66.1)	25 (75.8)	64 (69.6)	-
No	19 (32.2)	8 (24.2)	27 (29.3)	-
No. of monthly PC visits to clients				
At home	3 (1.0-4.0)	2 (0.0-4.0)	2 (0.0-4.0)	0.196
At the PHC	1 (0.0-2.5)	1 (0.0-2.0)	1 (0.0-2.0)	0.697
At other venue	0 (0.0-1.0)	0 (0.0-1.0)	0 (0.0-1.0)	-
No PC contact	4 (6.8%)	6 (18.2%)	10 (10.9%)	0.159
Clients' perspective of PCs' support				
Excellent/Very good	46 (77.9)	29 (87.9)	75 (81.6)	0.285
Clients' knowledge of PC HIV Status:				
Yes	45 (76.3)	23 (69.7)	68 (73.9)	0.980
No	14 (23.7)	10 (30.3)	24 (26.1)	

Interpretation

Overall, PCs were well-received among rural PMTCT clients, however PC disclosure to clients appears to be suboptimal. Although not significant, the proportion of clients not visited was higher among less supervised PCs which may be due to less oversight. While PCs are well received, increased supervision may be useful for better psychosocial support and outcomes.

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