

Ensuring continuity of care for PLHIV and those at risk in crisis: using mobile clinics to provide integrated HIV care in the aftermath of 2019 flooding in Malawi

Mphatso Phiri¹, Elizabeth Geoffroy², Nelson Khozomba¹, Joyce Jere¹, Todd Schafer², Ketwin Kondowe³

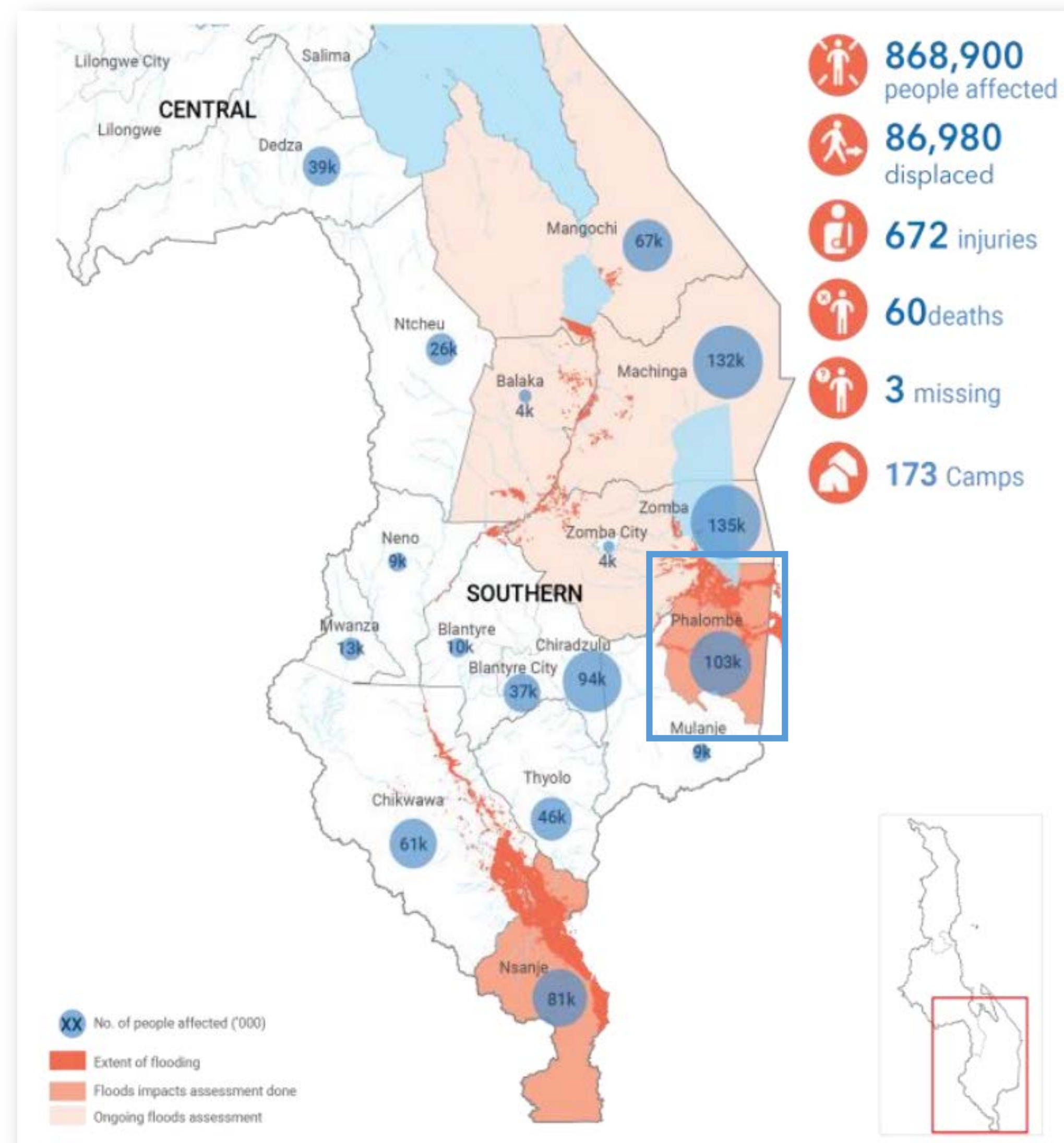
1. Global AIDS Interfaith Alliance, Malawi, 2. Global AIDS Interfaith Alliance, USA, 3. Phalombe District Health Office, Malawi

Background

Sustained heavy rains in the lead-up to Cyclone Idai in March 2019 caused extensive flooding and widespread damage in Southern Malawi.

Phalombe District, where 16% of adults are living with HIV, was declared a disaster area with nearly 23,000 households and more than 100,000 residents, nearly one quarter of the district's population, impacted by the storm. Over 5,500 residents were forced to shelter in displacement camps, tents or repurposed community structures such as schools and churches, and were in desperate need of medical care and treatment as well as sanitation facilities to prevent cholera outbreaks and other water borne illnesses.

Impact of the cyclone on Southern Malawi ¹



Families gathered at displacement camp to be assessed by GAIA mobile health clinics. The assessment revealed that people needed new health passports, treatment for malaria, safe water and bed nets.

Program Description

The Global AIDS Interfaith Alliance (GAIA), a nongovernmental organization, operates mobile clinics in Southern Malawi, including Phalombe. During the flooding GAIA worked closely with the District Health Office to quickly mobilize resources to respond to the crisis.

Working with the district's disaster response team, GAIA identified the need for urgent medical care, food, sanitation, HIV prevention efforts and ongoing care for people living with HIV. GAIA committed to share the cost of operating five weekly mobile clinic sites at each of the displacement camps from March-July 2019. With available funding and additional district support, clinics continued operating 3 days per week through December 2019.

GAIA was responsible for providing:

- The clinic vehicle and fuel
- A driver, a lead nurse, and a nurse aide
- Some medicines and supplies



The Phalombe DHO was responsible for providing:

- a nurse and an HIV diagnostic assistant (HDA)
- Essential medicines and supplies



In addition, GAIA supported the camps with water purification stations and supported the procurement, transportation and distribution of bed nets to protect residents from Malaria through the rainy season

GAIA supported the procurement and distribution of thousands of bednets by the district health office to protect displaced families, or those whose nets had been lost or destroyed in the flooding.



An elderly man, paralyzed in both legs and suffering from hypertension, lost his home in the flood. Due to his condition, he was not able to get to a displacement camp. Members of the village quickly banded together to build him a new, grass-thatched home on the site of the home that was destroyed. The GAIA mobile clinic visited him to assess his health and provide him his needed medications.

Results

The emergency relief clinic assisted provided 14,136 health visits over the 9 month period.

- The clinics provided care to an average of 104 clients daily
- 78% of clients accessing services were female
- The HDA tested 766 people at risk for HIV with 4 testing positive (all women) who were all linked immediately to care.
- 113 clients were screened/treated for STIs, of which 83 received HIV testing.
- 255 HIV+ clients were provided care for other ailments
- 699 clients were treated for Malaria
- 1,739 were treated for diarrheal diseases

We provided health talks on HIV prevention/treatment, sanitation, and other communicable diseases.

Having nurse-led clinics, as opposed to GAIA's traditional clinical officer led clinics, lowered operating costs and allowed for most clients to be screened and treated at the clinic and while those needing a higher level of care were referred and/or transported to the nearest health facility or hospital as necessary.

Conclusions

GAIA's mobile clinic model enabled a quick response to the floods and concomitant urgent medical needs; the Phalombe DHO's commitment to support mobile clinics allowed for continuity of care for both acute and chronic conditions especially HIV, and helped avoid an outbreak of cholera. Flexible mobile outreach clinics nimbly provide quality, efficient, cost-effective care in a high-HIV burden district. They provide a model for how to ensure continued care for populations at risk of climate crisis in geographies with limited resources for healthcare.



Residents of the displacements camps being triaged and organized for health care assessment



Destruction of roads and bridges made access to and provision of care in remote areas challenging

Acknowledgements/References

1. 2019 FLOOD RESPONSE PLAN and APPEAL, The Republic of Malawi, Ministry of Homeland Security Department of Disaster Management Affairs, (Developed in collaboration with UN Humanitarian Country Team and Partners) <https://reliefweb.int/sites/reliefweb.int/files/resources/FINAL%20Malawi%20Flood%20Response%20Plan%20March%20-%20May%202019%20-28March2019.pdf>

GAIA's Mobile Health Clinics are implemented in partnership with:



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