

# Key Informants Perspectives on HIV Programs and Policies for Farm Workers in South Africa

Nosimilo Mlangeni<sup>1,2</sup>, Martina Lembani<sup>3</sup>, Olatunji Adetokunboh<sup>1</sup>, Peter S Nyasulu<sup>1,4</sup>

<sup>1</sup>Stellenbosch University, Cape Town, South Africa, <sup>2</sup>National Institute for Occupational Health, Johannesburg, South Africa, <sup>3</sup>University of Western Cape, Cape Town, South Africa, <sup>4</sup>University of Witwatersrand, Johannesburg, South Africa

Efforts to bring HIV services to where farm workers are, including mobile and community based services, and workplace HIV services, bridge the access gap and improve treatment outcomes. Sector specific HIV policy and program are necessary to ensure achievement of 95-95-95 targets

## BACKGROUND

- Ending HIV calls for optimal HIV prevention and care for all
- The progress towards UNAIDS 95-95-95 targets is uneven across populations between and within countries
- Farm workers are one of the sub-populations with poor progress towards the 95-95-95 targets in South Africa
- Due to their transient nature, they experience treatment disruptions which affect continuity of care
- This study aimed to explore HIV program implementers' and program experts' perspectives on the challenges and opportunities in providing HIV prevention and care to people working in farms

## METHODS

- An exploratory qualitative study design was employed, consisting of analysis of policy documents and in-depth interviews with key informants
- Key informants were selected based on their roles in HIV program at health facilities, program and policy levels
- READ approach was followed for document analysis
- Interviews data were analyzed following an inductive approach

## RESULTS

- Eight key informants were interviewed (Fig. 1), eight policy documents analyzed
- Three themes emerged from the findings (see table1)
- Challenges in service provision include poor treatment retention due to seasonal employment and distance to health facilities, fragmented service delivery models, and clinic schedules conflicting with employment arrangements

*"When we deal with farm workers, we are dealing with mobile patients. It is not easy to collaborate with them because sometimes you find that they just disappear. Somewhere somehow, they just cross the border, and you will remain here with loss to follow-ups"* **KI 001-implementer**

Table 1. Themes and subthemes

THEME	SUB-THEME	SUB-THEME	SUB-THEM
Challenges in provision of HIV services	Individual worker challenges	Service level challenges	Program and policy shortfalls
Effective strategies: what has worked	Community-based support	HIV prevention and awareness strategies	Improving access and linkage to care
Program and policy recommendations	Health promotion strategies	Customized HIV services	Policy and governance

## RESULTS CONTINUED

- There is a gap in policies that address HIV among farm workers
- Effective and recommended strategies include: Community based services such as adherence clubs and community health workers, mobile services, and employer support through transport or workplace programs

*"Mobile clinics act as lifelines, reaching migrant farmworkers where they are. It's not just about tests; it's about bridging the gap between distance and care"* **KI 007-academic**

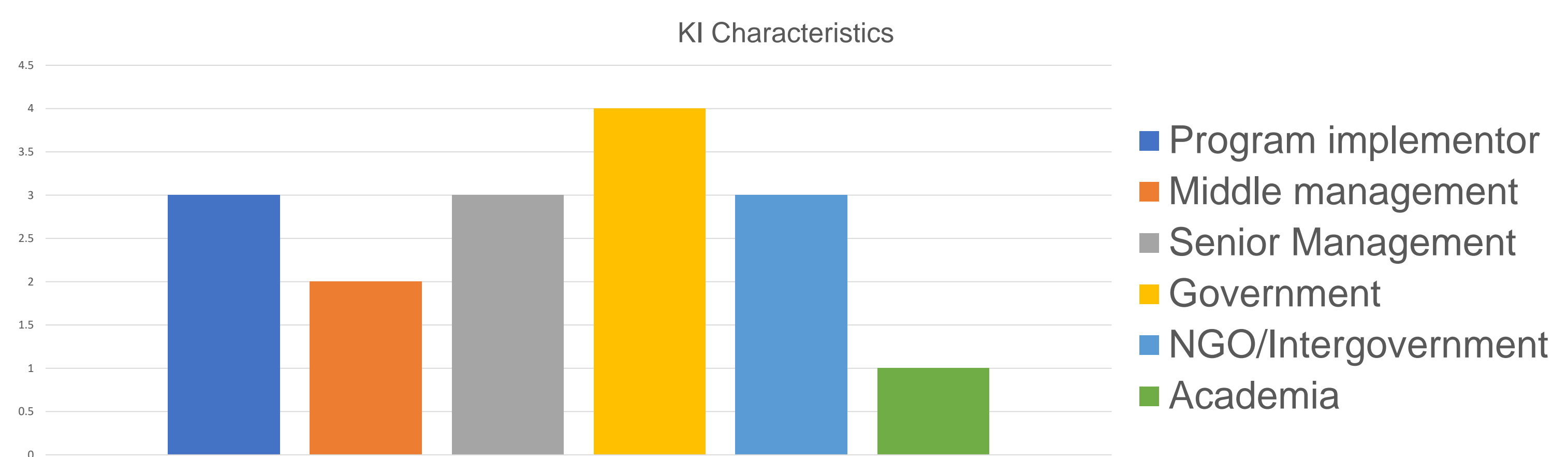


Figure 1. Characteristics of Key Informants

## CONCLUSIONS

- Despite progress in expanding HIV testing and treatment, there are still several challenges in the programs and policies for farm working populations
- There are several structural barriers limiting HIV prevention and retention in care for farm workers, affecting 95-95-95 targets for this sub-population
- Although community based services improve access for farm workers, the coverage is poor
- Main recommendations include a design of standardized HIV workplace policies and programs by the agricultural sector
- The study findings provide a strong basis for engaging current policies and developing a model of care that will ensure that farm workers are not left behind in the quest to end HIV and to achieve the 2030 developmental goals

## ADDITIONAL KEY INFORMATION

Author Contact Information: [NosimiloM@nioh.ac.za](mailto:NosimiloM@nioh.ac.za)

Funding Source: National Research Fund (NRF), Harry Crossley Foundation

Acknowledgements: We acknowledge the Stellenbosch University, the National Institute for Occupational Health, a division of the National Health Laboratory Service, our funders (NRF and Harry Crossley Foundation through Stellenbosch University), and all our study participants