Prevalence and factors associated with antiretroviral therapy adherence among farm workers living with human immunodeficiency virus in a selected sub-district in Limpopo Province, South Africa

P2-K8

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The study included 445 participants with an average age of 43.5 years. A proportion of 74.2% of farm workers were adherent to antiretroviral therapy, while 28.5% were non-adherent based on adherence to refill appointments. In multivariate logistic regression analysis, the odds of adhering to antiretroviral therapy increased with age from the category of 30-39 years and tertiary level of education.

BACKGROUND

- Adherence to antiretroviral therapy (ART) is crucial for effective therapy and long-term viral suppression in people living with human immunodeficiency virus (PLHIV)[1].
- South Africa has not reached the second and third 95% cascade to have PLHIV initiated on ART and being virally suppressed[2].
- The main focus of ART adherence has been on different population groups, neglecting farm workers, who are essential for supply chain and food security but are under-served and at higher risk of HIV acquisition and transmission.
- Farm workers face obstacles in accessing HIV prevention and treatment services, geographical isolation, and challenges in ART access and continuity of care[3].
- This study was aimed to determine ART adherence and associated factors among farm workers living with HIV in a selected sub-district in Limpopo Province, South Africa.

METHODS

- A descriptive-analytical cross-sectional study was employed.
- A random sample of 445 farm workers aged 18 and above, working in farms within a selected sub-district in Limpopo Province, were included.
- A semi-structured questionnaire was used to gather information on ART adherence, socio-demographic factors, clinical knowledge, behavioural, and perceptions of the farm workers.
- Clinical data were extracted from clinic folders or the Three Interlinked Electronic Register for Tuberculosis and HIV (TIER.Net) version 1.13.
- The level of ART adherence was measured by viral suppression and compliance in collecting monthly ART supplies.
- Data analysis was performed using STATA software version 17.
- Frequencies and percentages were used to summarise the descriptive data.
- Adjusted Odds Ratios (aOR) and 95% Confidence Intervals (CI) were used to assess the factors predicting ART adherence at a p<0.05 level of significance.

RESULTS

Prevalence of adherence to antiretroviral therapy

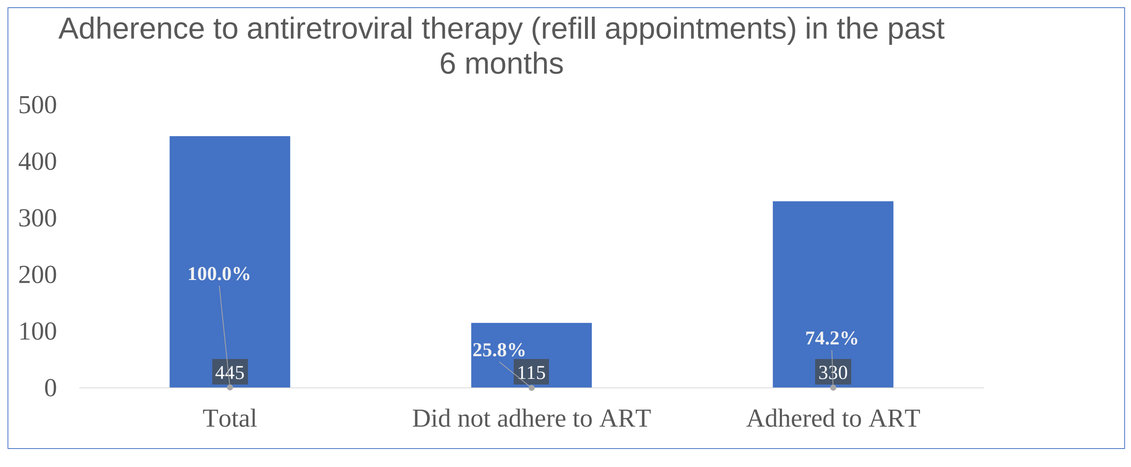

Figure 1. Prevalence of adherence to antiretroviral therapy among farm workers

Reasons for non-adherence to antiretroviral therapy

The major reason for non-adherence was travelling due to work, n=61 (57.0%), forgetfulness n=11 (10.3%) and inability to take time off work to collect ART supply, n=13 (12.1%).

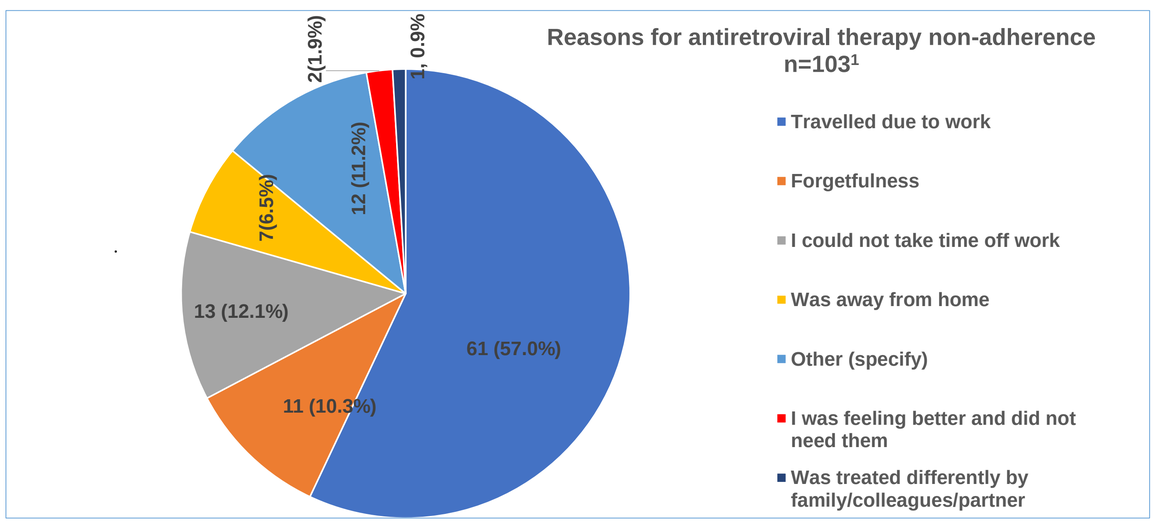

Figure 2. Reasons for antiretroviral therapy adherence among farm workers

Findings show that 74.2% of farm workers were adherent to ART, and 28.5% were non-adherent to ART and had missed their ART refill appointment at least once in the past six months.

RESULTS CONTINUED

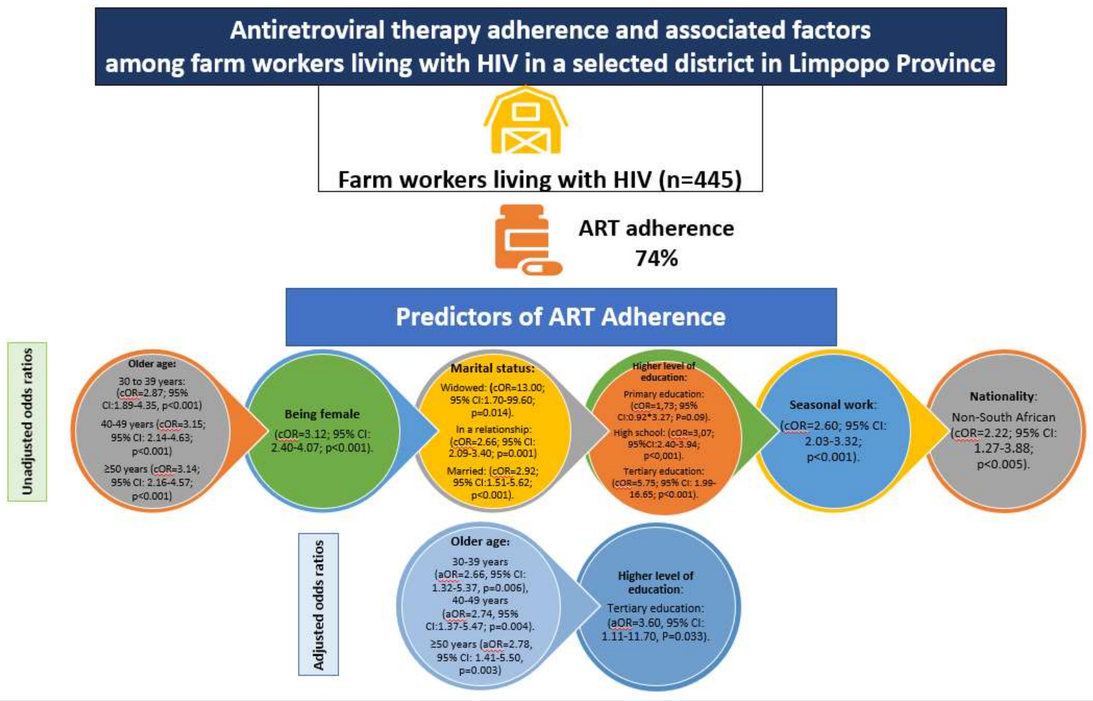

Figure 3. Summary of main study findings

CONCLUSION

- The study demonstrated a good prevalence of ART adherence just below the recommended standard
- Younger workers face barriers like balancing social life, work, school, and stigmatisation.
- Low education levels and literacy contribute to poor ART adherence.
- Efforts to improve ART adherence must take multiple levels of constraints into account and combine behavioural and environmental components such as intensive health education in virtual platforms, community/farm medicine pick-up points, longer ART supply, and longer clinic hours.

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