SUMMARY REPORT

Developing a collaborative partnership to improve the transition to adult care and health outcomes among adolescents living with HIV in South Africa

TRIP: 1-15 April 2019
UWC FACULTY: BRIAN VAN WYK
MU HOST: MICHELLE TETI
DATE OF REPORT: 31 July 2019

OVERVIEW OF PROJECT AND VISIT
Prof Teti and I met in 2017 and agreed that a research collaboration would be fruitful, both to advance our research agendas and advance public health. The overall purpose of our work is to improve the wellbeing of a vulnerable group of South Africans, adolescents living with HIV (youth aged 10-19 years); and who are on antiretroviral therapy.

Prof Teti visited to UWC in July –August 2018 on a UMSAEP grant. During this visit she trained the UWC-SOPH project team in Photovoice methodology and ethics. We also conducted site visits and meetings with relevant stakeholders. Based on this information, we revised the Photovoice protocol, to using camera phones for the project rather than normal cameras. With the assistance of MU School of Health Professions Catalyst grant, we were able to procure 18 camera phones.

I was successful in securing a MRC-Self-initiated research grant to conduct formative research on Improving adherence, retention in care and treatment outcomes for adolescents on anti-retroviral treatment in the Western Cape Metropole.

I successfully applied for UMSAEP funding to travel to Columbia, Missouri. The goals of the trip were to: (1) Receive training in analysis of photovoice data; (2) Analyse text and visual data from pilot study and write the findings; and (3) Explore possibilities for a Fulbright application for Prof Teti to spend extended time in Cape Town, South Africa in 2020. In addition, I also used the time away to work on three manuscripts on adolescents and HIV treatment, which I subsequently submitted for peer review.
PROGRESS TOWARDS OUTCOMES
Upon my return we finalized the manuscript based on the pilot study. We identified a special issue on “Constructions of ‘Children’s voices’ in qualitative research” in the *International Journal of Qualitative Methods*, as the target journal.
We have completed photovoice group discussions in one site; and plan to complete data collection in the other two sites in the next two months of August and September 2019.

PLANNED WORK
The formative research in Cape Town is ongoing until end of 2019. As photovoice data collection is completed in each research site, I would transfer the knowledge that I gained from my visit with Prof Teti, to the respective members of my research team to analyse the text and visual data from each site and develop case narratives for each facility. Prof. Van Wyk is also planning to visit MU during October - November to analyze all the Photovoice data, and write a publication on this. Further, this would also be occasion to discuss plans for presenting our findings and developing photo exhibitions. At this stage, we plan photo exhibits at the selected research sites, and submission of an abstract (or two) to the International AIDS 2020 conference in California, USA.

TIMELINES
END OF JULY 2019: Pilot study written up for publication (due Aug 31)
JULY – AUGUST 2019: Photovoice data collection completed in all three sites; Emergent analysis of qualitative data for each site to develop case narratives.
SUMMARY
Adherence to ART and retention in care are essential to improve health outcomes for adolescents living with HIV, and to help them reach undetectable levels of HI-virus when they would not be transmittable either (U=U). It is critically important for us to continue this work. The UMSAEP allowed us to further develop our partnership, conduct this research with adolescents using innovative methodologies; and in doing so gain valuable insights towards developing interventions and programmes that are embedded in the health systems to improve treatment outcomes for adolescents living with HIV in the Western Cape province of South Africa. We believe that towards the beginning of 2020, we would have a greater understanding of what such an “intervention” should look like, and would be able to develop a “proof of concept” study to test this intervention. We will consider further NIH calls as well as calls by UK-MRC/DiFiD to write collaborative grant proposals.