

High levels of mental distress among youth with HIV in Southern Africa: A description of enrollment into IMPAACT 2016, a randomized controlled trial of a peer-led, group-based mental health intervention

Dow D ^{1,2,3}, Libous J ⁴, Ponatshego P ⁵, Masheto G ⁶, Mvalo T ^{7,8}, Payesa C ⁹, Buckley J ¹⁰, Stranix-Chibanda L ¹¹, Nematadzira T ¹¹, Vhembo T ¹¹, Ace A ¹², Davies Smith E ¹³, Warshaw M ¹³, Townley E ¹⁴, Varechtchouk O ¹⁴, Lee S ¹⁵, Donenberg G ¹⁶

¹Duke University Medical Center, Durham NC, United States; ²Duke Global Health Institute, Durham, NC, United States; ³Kilimanjaro Christian Medical Centre-Duke Collaboration, Moshi, Tanzania; ⁴FHI 360, Washington DC, United States; ⁵Botswana Harvard Health Partnership, Molepolole, Botswana; ⁶Botswana Harvard Health Partnership, Gaborone, Botswana; ⁷University of North Carolina Project Malawi, Lilongwe, Malawi; ⁸University of North Carolina at Chapel Hill School of Medicine, Pediatrics, Chapel Hill NC, United States; ⁹Johns Hopkins Research Project-Kamuzu University of Health Sciences, Blantyre, Malawi; ¹⁰Perinatal HIV Research Unit (PHRU), University of Witwatersrand, Johannesburg, South Africa; ¹¹University of Zimbabwe Clinical Trials Research Centre, Harare, Zimbabwe; ¹²Frontier Science & Technology Research Foundation, Inc, Buffalo NY, United States; ¹³Harvard T.H. Chan School of Public Health, Center for Biostatistics in AIDS Research, Boston MA, United States; ¹⁴Division of AIDS, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda MD, United States; ¹⁵Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institutes of Health, Bethesda MD, United States; ¹⁶University of Illinois at Chicago, Center for Dissemination and Implementation Science, Chicago IL, United States



Youth with HIV self-reported high rates of mental distress across all sites in the IMPAACT 2016 randomized controlled trial. This demonstrates an urgent need to integrate mental health into HIV care.

BACKGROUND

- Rates of mental distress for youth with HIV (YWH) are not well described for Southern Africa.
- Depression, anxiety, and post-traumatic stress symptoms can negatively impact antiretroviral therapy (ART) adherence, resulting in virologic failure, and contribute to poor quality of life.
- IMPAACT 2016 evaluated a peer-led, group-based, trauma informed-cognitive behavioral therapy (TI-CBT) intervention against a discussion control arm.
- This abstract presents rates of mental distress based on screening for and enrollment into the IMPAACT 2016 randomized controlled trial.

Malawi (Lilongwe and Blantyre)
Botswana (Gaborone and Molepolole)
South Africa (Soweto)
Zimbabwe (St. Mary's, Seke North, Harare Family Care)

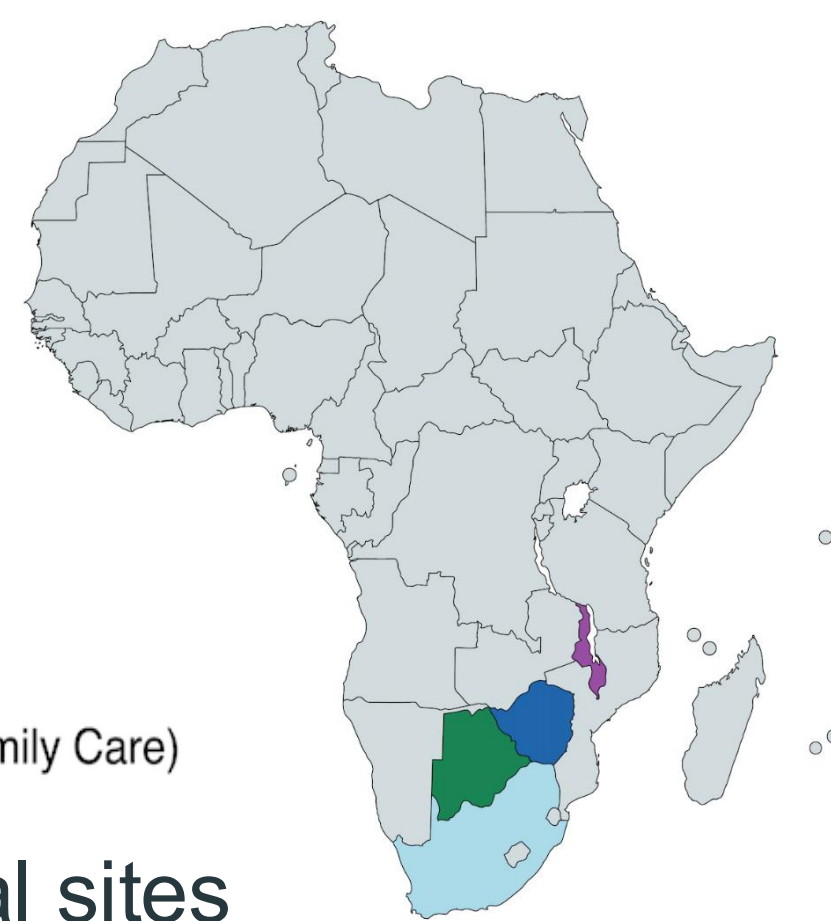


FIGURE 1. Location of trial sites

METHODS

- The intervention was delivered in six group sessions by trained peer leaders who receive weekly supervision.
- Enrollment criteria** include YWH (15-19 years-old) who i) know their HIV status; ii) have been prescribed ART for at least 6-months; iii) are not co-enrolled in any other MH intervention study; iv) have moderate to severe symptoms of mental distress according to self-report questionnaires.
 - depression (PHQ-9 ≥ 10),
 - anxiety (GAD-7 ≥ 10), and/or
 - post-traumatic stress (UCLA PTSD-RI ≥ 35)
- Recruitment occurred at adolescent HIV clinics and teen clubs.
- Screening and enrollment occurred from March to September 2024 across eight IMPAACT network sites in four Southern African countries.

TABLE 1: Percentage of Youth Meeting Enrollment Criteria by Country

Country	Screened N=365	Enrolled N=254	# youth with enrollment error*	% of youth with MH symptoms**
Botswana	69	50	3	68%
Malawi	87	66	5	70%
South Africa	29	20	2	62%
Zimbabwe	180	118	10	60%

*20 youth did not meet mental health criteria but were enrolled due to a scoring program error
**calculated as % of youth enrolled who met symptom threshold: (enrolled – error)/# screened

ACKNOWLEDGMENTS

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RESULTS

- Of the 365 youth screened, 261 (72%) met mental health eligibility criteria:**
 - 21 youth met criteria but did not enroll primarily due to school conflicts precluding participation in weekly group sessions, family emergencies preventing return for enrollment, or other reasons.
 - 20 youth were enrolled in error due to questionnaire programming errors:
 - Six youth enrolled in error who scored a nine on the PHQ-9 (i.e. <10)
 - 14 youth enrolled in error who had scores ranging between 22 and 34 on the UCLA-PTSD-RI (i.e. <35)
 - A total of 254 youth enrolled in the trial:
- Zimbabwe enrolled the most participants (46%); Malawi (26%), Botswana (20%) and South Africa (8%) (See Table 1)
- Most youth (65%) reported symptoms on more than one questionnaire; and 35% met criteria on all three (See Figure 2).**

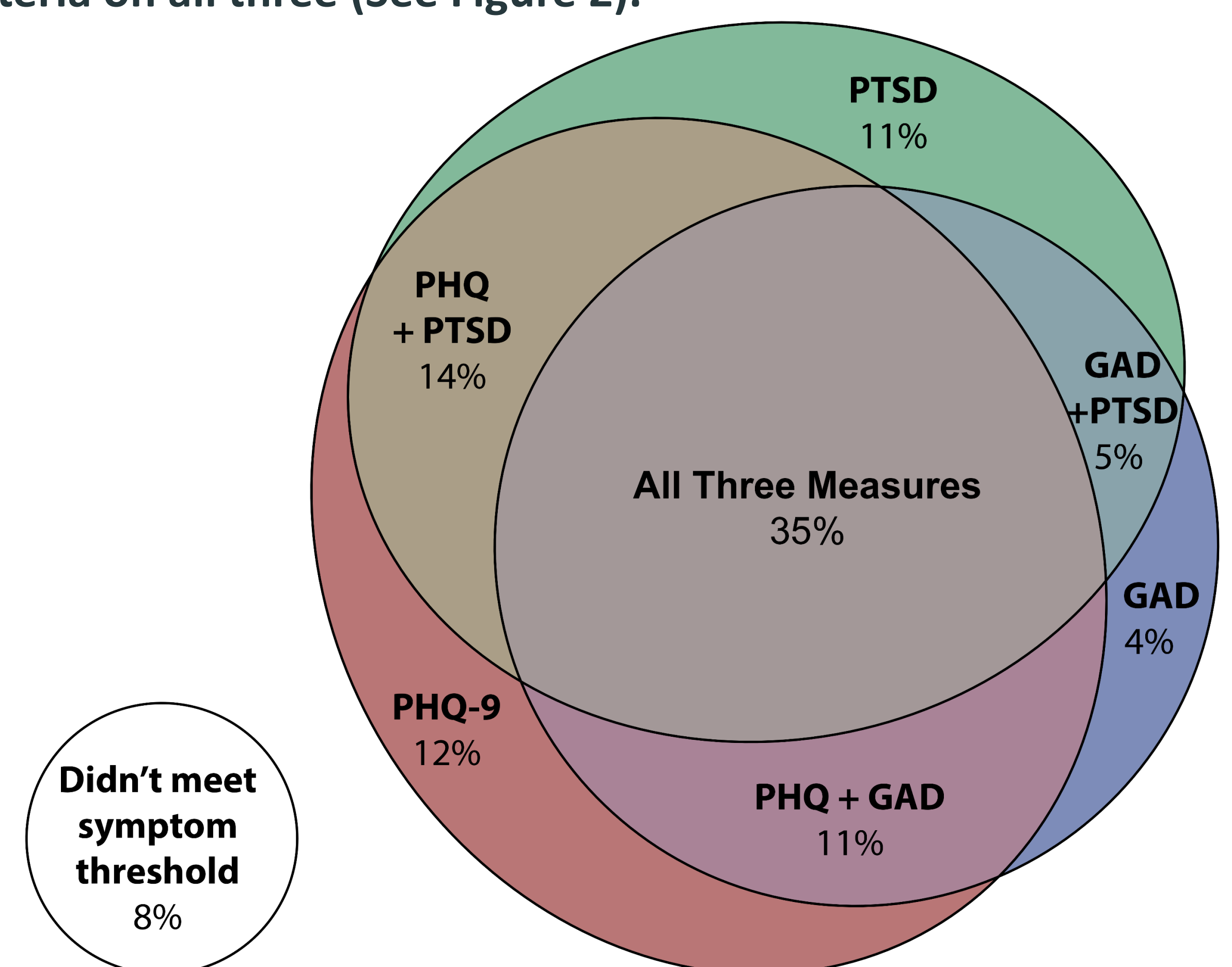


FIGURE 2: Mental Distress Symptoms Among Enrolled Youth

CONCLUSIONS

- Successful enrollment into IMPAACT 2016 underscores the extremely high rates of mental distress among YWH and their desire for care.
- These data amplify the urgent need to integrate mental health screening and services into HIV care and treatment programs for youth in Southern Africa.