In a mixed urban and rural lake-zone Council of ~150,000 persons, the Bukoba Combination Prevention Evaluation (BCPE) aims to enroll in care and initiate on ART ≥90% of HIV infected adult residents aged 18-49 years by the end of a 2.5 year intervention (Oct 2014 - March 2017). To help achieve this goal, BCPE has implemented an innovative, peer-delivered, linkage-case-management (LCM) program for persons diagnosed in community and clinical settings. Through LCM, HIV-positive clients receive a package of peer-delivered linkage services recommended by CDC/WHO.

**LCM Services**

- Point-of-diagnosis, individualized, peer-delivered counseling, escort to care, and treatment support.
- Seamless transition of LCM services between ECs for clients diagnosed in community settings and for clients who wish to transfer between facilities.
- Three face-to-face counseling sessions on HIV care, disclosure, and resolving real and perceived barriers to care; supplemental sessions conducted as needed.
- First-visit escort or transport (if needed), expedited registration and treatment at HIV-care facilities (CTC).
- Follow-up support calls and appointment reminders.
- Integrated index-client HTC to support disclosure, and to facilitate testing and linkage to care HIV-infected sex partners and family members.

**Eligibility**

HTC clients are eligible if they:
- Test positive for HIV
- Have not received HIV care in last 90 days
- Consent to receive LCM services

**Key Programme Features**

- Integrated with community-based HTC conducted by 7 field teams and provider-initiated HTC conducted at 11 facilities.
- LCM services provided by HIV+, Expert Client linkage counsellors (ECs), who are trained to provide psychosocial support and counseling on HIV care and ART adherence.
- Linkage cases managed through phone and in-person counseling and support for up to 90 days.
- Dedicated linkage and retention nurses at clinics to manage LCM services, and to expedite and coordinate HIV care and treatment.
A paper-based, linkage register system is used to monitor and evaluate (M&E) LCM services delivery, enrollment in HIV care, and ART-initiation outcomes. Each client has a case file that includes forms which are used to manage cases and to document delivered services. Key LCM service indicators and clinical outcomes (from CTC charts) are transcribed onto linkage registers for monthly compilation and reporting.

**Eligibility & Consent**
- 4,273 (89%) of 4,805 eligible clients LCM consented
- 4,205 (98%) cases closed and available for M&E
  - 2,232 (Oct 2014 – Dec 2015; ART at CD4<350)
  - 1,221 (Jan 2016 – Sept 2016; ART at CD4<500)
  - 752 (Oct 2016 – Mar 2017; Test & Start)

**LCM Services Delivered**
Of 4,205 closed cases:
- 2,805 (67%) escorted to CTC by foot
- 675 (16%) escorted to CTC by car
- 458 (11%) met at CTC by appointment
- Median (IQR) phone contacts: 2.0 (0.5-3.9)
- Median (IQR) sessions completed: 2.6 (1-3)
- 229 partners and 462 family members tested by LCM program.
- 120 (52%) partners and 56 (12%) family members tested HIV-positive.

**Enrollment in HIV Care and ART Outcomes**
Of 4,205 closed cases:
- **3,918 (93%)** enrolled in HIV care within 90 days:
  - 95% of 1,650 males and 92% of 2,555 females
  - 98% of 148<15 years, 88% of 837 15-24 years, 94% of 2,923 25-49 years, and 96% of 297 >49 years
  - 90% of 2,232 clients during CD4<350 era
  - 96% of 1,221 clients during CD4<500 era
  - 97% of 752 clients during Test & Start era
  - 95% of 3,537 clients diagnosed in facilities
    - 98% of 525 facility clients during Test & Start
  - 82% of 668 clients diagnosed in the community
    - 96% of 117 community clients during Test & Start
- **2,521 (60%)** initiated on ART within 90 days*
  - 47% of 2,232 clients during CD4<350 era
  - 67% of 1,221 clients during CD4<500 era
  - 86% of 752 clients during Test & Start era
*Of all 4,205 LCM clients.

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