District overview of travel time to ART facilities: Mangochi

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Objectives

- Map the estimated prevalence and number of people living with HIV (PLHIV) by approximately 1 km grid cells.
- Estimate the travel time to the nearest ART facility for PLHIV in Malawi.
- Identify optimal locations for additional facilities with ART service to reach PLHIV with long travel times to existing ART facilities (>60, 90, or 120 minutes).

Interactive results are available at: https://mrc-ide.github.io/mwi-hiv/ART_facilities/index.html.

HIV prevalence and PLHIV estimates

Figure 2 illustrates estimates for spatial HIV prevalence for adults aged 15-49 years. Figure 3 shows the estimated number of PLHIV (all ages), and the locations of health facilities with ART services (labelled with **A**) and without current ART services (labelled with **F**).

Table 1: Summary estimates for Mangochi, September 2020.

Total PLHIV (all ages)	61,355 (55,203–68,114)
HIV prevalence, age 15-49 years	8.2% (7.4%–9.1%)
Total patients receiving ART	68,268
Average walking time to nearest ART (minutes)	53 (51–55)
Number PLHIV > 60 minutes walking time	23,340 (20,616–26,428)
Percentage PLHIV > 60 minutes walking time	37.3% (35.2%–39.4%)

Table 2: Traditional authorities with the lowest and highest estimated number of PLHIV, 15-49 Prevalence, and average walking time, respectively.

	Lowest TA	Largest TA					
PLHIV	Lake Malombe: 0 (0-0)	TA Mponda: 10,054 (8,275–12,403)					
15-49 Prevalence	STA Lulanga: 5.1% (3.2%-7.6%)	Mangochi Town: 11.0% (8.4%–14.3%)					
Average Walking Time	Monkey Bay Urban: 10 min (10-10 min)	TA Chimwala: 93 min (89-97 min)					

Travel time to existing ART facilities

In Mangochi, there are 45 ART facilities that had at least 1 patient in September 2020. The median number of ART patients per facility was 870. The list of *active ART facilities* is in Table 4. Private not-for-profit facilities have been excluded from the analysis. Figure 4 shows the modelled travel times to the nearest active ART facility. The average walking time to the nearest facility for residents in each traditional authority are in (Figure 5).

- The estimated average walking time for PLHIV to the closest ART facility across Mangochi is 53 minutes (51-55 min).
- The shortest estimated average walking time to the closest ART facility is in Monkey Bay Urban (10 minutes (10-10 min)).
- The longest estimated average walking time to the closest ART facility is in TA Chimwala (93 minutes (89-97 min)).

An estimated 37.3% (35.2%–39.4%) of PLHIV reside more than 60 minutes walking time to their nearest ART facility, compared to 39.5% of the total population. This decreases to 16.5% (14.8%–18.3%) of PLHIV and 18.1% of the total population residing more than 90 minutes walking time to their nearest ART facility. More details are provided in Table 3.

Table 3: Estimated PLHIV and population not reached at different thresholds

Threshold (minutes)	Population not reached	As % of total population	PLHIV not reached	As % of total estimated PLHIV
45	649,079	53.0%	31,390 (27,948–35,081)	50.2% (48.3%–52.1%)
60	483,868	39.5%	23,340 (20,616–26,428)	37.3% (35.2%–39.4%)
90	221,147	18.1%	10,336 (8,790-12,063)	16.5% (14.8%–18.3%)
120	101,043	8.3%	4,671 (3,850–5,638)	7.5% (6.4%–8.7%)

Proposed facilities for new ART services

A list of 11 *non-ART facilities* were considered to identify existing health facility locations for expanding ART services, listed in Table 5. Figure 6 shows the number of PLHIV in grid cells where the estimated travel time is longer than 60 minutes and candidate new ART facilities.

- The TA with the largest number of PLHIV residing more than 60 minutes from their closest ART facility is TA Nankumba (5878 PLHIV (4627-7241) with walking time > 60 minutes).
- The facility that can reach the most PLHIV residing outside 60 minutes travel time is **Assalam Clinic**, with 1487 PLHIV (1054-1982) reached.

Limitations

There are several important limitations to this analysis:

- Travel time surfaces and catchments may not optimally reflect typical routine travel or movement patterns, for example for work or other activities.
- Results do not represent uncertainty in the 1km gridded maps of PLHIV arising from uncertainty about the gridded populations.
- There are discrepancies in the gridded HIV prevalence estimates from the Bayesian geostatistical model and the Naomi estimates for some districts which should be further reviewed, especially neighbouring urban and rural districts.
- Geographic locations of some health facilities are discrepant between multiple data sources and need to be confirmed.
- The physical infrastructure and suitability of candidate health facilities for supporting an ART service is unknown.
- Optimisation analysis for locations for new facilities has not considered overcrowding, wait times, or
 other barriers to access at existing facilities. It could be more optimal to expand services in some
 geographically dense locations to address barriers to access.

Summary figures and maps

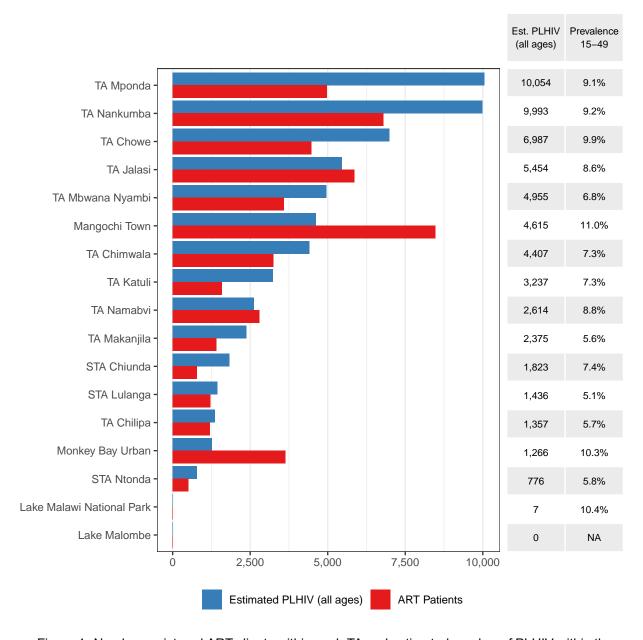


Figure 1: Number registered ART clients within each TA and estimated number of PLHIV within the TA. The right table indicates the estimated 15-49 HIV prevalence.

HIV prevalence in ages 15-49

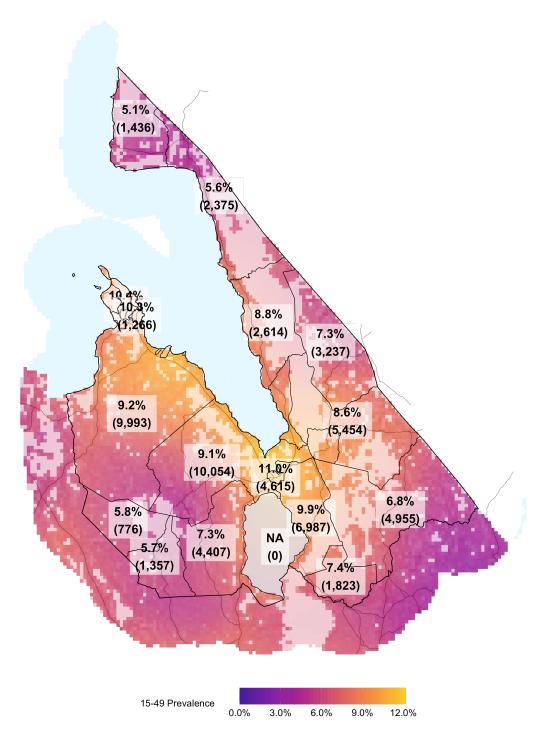


Figure 2: Estimated spatial HIV prevalence. Percentages correspond to TA level 15-49 HIV prevalence and numbers in brackets indicate the estimated number of PLHIV overall.

Estimated number of PLHIV at 1km square

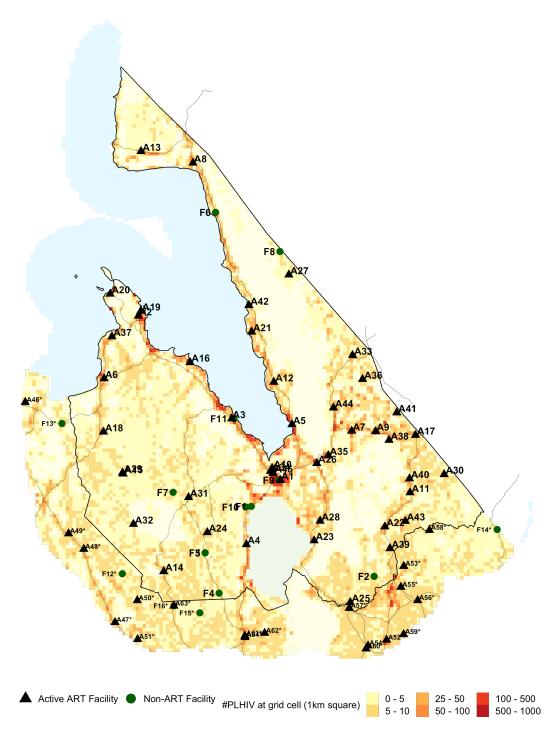


Figure 3: Estimated number of PLHIV on a 1km square.

Table 4: List of active ART facilities that had at least 1 registered ART patient in September 2020. The column "ART" indicates how many ART patients are registered at the ART facility. Facilities outside the district boundaries that may be accessible to residents within the district are marked with "*".

ID	District	TA	Name	Туре	Authority	Long.	Lat.	ART
A1	Mangochi	Mangochi Town	Mangochi District Hosp.	District hospital	Government	35.26	-14.48	8472
A2	Mangochi	Monkey Bay Urban	Monkeybay Community Hosp.	Rural/Community	Government	34.91	-14.09	2660
A3	Mangochi	TA Mponda	Koche HC	Health centre	CHAM	35.14	-14.33	2583
A4	Mangochi	TA Chimwala	Kukalanga HC	Health centre	Government	35.18	-14.64	2461
A5	Mangochi	TA Chowe	St Martins Mission Hosp.	District hospital	CHAM	35.29	-14.35	1718
A6	Mangochi	TA Nankumba	Malembo HC Mangochi	Health centre	Government	34.83	-14.24	1459
A7	Mangochi	TA Jalasi	Jalasi HC	Health centre	Government	35.44	-14.36	1432
A8	Mangochi	TA Makanjila	Makanjira HC	Health centre	Government	35.05	-13.72	1411
A9	Mangochi	TA Jalasi	Namwera HC	Health centre	Government	35.50	-14.36	1346
A10	Mangochi	TA Mponda	Mpondasi HC	Health centre	CHAM	35.24	-14.45	1322
A11	Mangochi	TA Mbwana Nyambi	Mulibwanji Hosp.	Rural/Community	CHAM	35.59	-14.51	1306
A12	Mangochi	TA Namabvi	Lungwena HC	Health centre	Government	35.25	-14.24	1300
A13	Mangochi	STA Lulanga	Lulanga HC	Health centre	CHAM	34.92	-13.69	1220
A14	Mangochi	TA Chilipa	Chilipa HC Mangochi	Health centre	Government	34.97	-14.70	1198
A15	Mangochi	TA Nankumba	Chipwaila HC	Health centre	Government	34.87	-14.47	1174
A16	Mangochi	TA Nankumba	Nkope HC	Health centre	CHAM	35.04	-14.20	1160
A17	Mangochi	TA Jalasi	Chiponde HC	Health centre	Government	35.60	-14.37	1138
A18	Mangochi	TA Nankumba	Nankumba HC	Health centre	Government	34.82	-14.37	1097
A19	Mangochi	Monkey Bay Urban	Malawi Army Marine Camp Hosp.	Dispensary	Other	34.92	-14.07	971
A20	Mangochi	TA Nankumba	Billy Riordan Memorial Health Clinic	Health centre	NGO	34.84	-14.03	953
A21	Mangochi	TA Namabvi	Namalaka HC	Health centre	CHAM	35.19	-14.12	905
A22	Mangochi	TA Mbwana Nyambi	Mkumba HC	Health centre	Government	35.53	-14.59	883
A23	Mangochi	TA Chowe	Malombe HC	Health centre	Government	35.35	-14.63	870
A24	Mangochi	TA Chimwala	Mtimabii HC	Health centre	Government	35.08	-14.61	794
A25	Mangochi	STA Chiunda	Chiunda HC	Dispensary	Government	35.44	-14.78	778
A26	Mangochi	TA Chowe	Malukula HC	Health centre	Government	35.36	-14.44	757
A27	Mangochi	TA Katuli	Lugola HC	Health centre	CHAM	35.29	-13.99	673
A28	Mangochi	TA Chowe	Mase HC	Health centre	CHAM	35.36	-14.58	641
A29	Mangochi	TA Nankumba	Chilonga HC	Health centre	Government	34.87	-14.46	571
A30	Mangochi	TA Mbwana Nyambi	Nangalamu HC	Health centre	Government	35.67	-14.47	562
A31	Mangochi	TA Mponda	Katete Community Hosp.	Rural/Community	CHAM	35.04	-14.52	559
A32	Mangochi	STA Ntonda	Phirilongwe HC	Health centre	Government	34.90	-14.59	515
A33	Mangochi	TA Katuli	Kaundu HC	Health centre	CHAM	35.44	-14.18	514
A34	Mangochi	TA Mponda	Mehboob Clinic	Health centre	NGO	35.24	-14.46	489
A35	Mangochi	TA Chowe	Chikole HC	Dispensary	Government	35.38	-14.42	484
A36	Mangochi	TA Katuli	Luwalika HC	Health centre	CHAM	35.47	-14.24	402
A37	Mangochi	TA Nankumba	Nankhwali HC	Health centre	CHAM	34.84	-14.14	387
A38	Mangochi	TA Jalasi	Sister Martha Hosp.	Health centre	CHAM	35.54	-14.39	367
A39	Mangochi	TA Mbwana	Somba HC	Health centre	Government	35.54	-14.65	366
	J	Nyambi						
A40	Mangochi	TA Mbwana Nyambi	Nancholi Disp.	Dispensary	Government	35.59	-14.48	344
A41	Mangochi	TA Jalasi	Chiumbangame HC	Health centre	Government	35.56	-14.32	314
	-							

A42 A43	Mangochi Mangochi	TA Namabvi TA Mbwana Nyambi	Kadango Disp. Sinyala HC	Dispensary Health centre	Private Government	35.19 35.58	-14.06 -14.58	300 123
A44 A45	Mangochi Mangochi	TA Jalasi TA Mponda	lba HC FPAM Clinic Mangochi	Health centre Special	Government NGO	35.40 35.25	-14.31 -14.47	120 24
A46* A47* A48*	Dedza Ntcheu Ntcheu	TA Kachindamoto TA Makwangwala TA Goodson Ganya	Kavuzi HC Bilira HC Bwanje HC	Health centre Health centre Health centre	Private Government Government	34.63 34.85 34.77	-14.29 -14.83 -14.65	371 1442 1034
A49* A50*	Ntcheu Ntcheu	TA Goodson Ganya TA Makwangwala	Sharpe Valley HC Chikande HC	Special Health centre	CHAM Government	34.74 34.91	-14.61 -14.77	709 541
A51* A52* A53* A54* A55*	Ntcheu Machinga Machinga Machinga Machinga	STA Mkutumula TA Kawinga TA Nyambi TA Liwonde TA Kapoloma	Kalimanjira HC Ntaja HC Nyambi HC Namandanje HC Nayinunje HC	Health centre Health centre Health centre Health centre Health centre	Government Government Government CHAM Government	34.91 35.53 35.57 35.48 35.57	-14.87 -14.87 -14.69 -14.88 -14.74	257 3450 1222 1070 1062
A56* A57* A58* A59* A60*	Machinga Machinga Machinga Machinga Machinga	TA Nkoola TA Liwonde TA Nyambi TA Kawinga TA Liwonde	Mpiri HC Mangamba HC Mkwepere HC Kayembe HC Mbonechera HC	Health centre Health centre Dispensary Health centre Health centre	Government Government Government Government	35.61 35.44 35.64 35.57 35.48	-14.77 -14.79 -14.60 -14.85 -14.89	976 928 645 289 202
A61* A62* A63* A64*	Balaka Balaka Balaka Balaka	TA Kalembo TA Kalembo STA Kachenga TA Kalembo	Kalembo HC Namdumbo HC Kapire Dream Centre Ulongwe HC	Health centre Health centre Health centre Health centre	Government Government NGO CHAM	35.18 35.23 35.00 35.18	-14.86 -14.85 -14.79 -14.86	1880 1050 1025 992

Table 5: List of non-ART facilities considered in the analysis. The column "PLHIV" indicates the number of PLHIV that currently need more than 60 minutes to walk to the closest ART facility but less than 60 minutes to the listed health facility in the table. Facilities outside the district boundaries that may be accessible to residents within the district are marked with "*".

ID	District	TA	Name	Туре	Authority	Long.	Lat.	PLHIV	95% CI
F1	Mangochi	TA Chimwala	Assalam Clinic	Clinic	CHAM	35.19	-14.55	1487	(1054-1982)
F2	Mangochi	STA Chiunda	Mbalama Disp.	Dispensary	Government	35.50	-14.71	527	(361-748)
F3	Mangochi	TA Chimwala	Ngala HP	Health Post	Government	35.08	-14.66	391	(267-549)
F4	Mangochi	TA Chimwala	MWATAKATA	Health Post	Government	35.11	-14.76	379	(255-532)
F5	Mangochi	TA Chimwala	NGATALA	Health Post	Government	35.08	-14.66	391	(267-549)
F6	Mangochi	TA Makanjila	LUKOLOMA	Dispensary	Government	35.10	-13.83	250	(128-439)
F7	Mangochi	TA Mponda	MAONI	Health Post	CHAM	35.00	-14.51	119	(74-178)
F8	Mangochi	TA Makanjila	Maleta HP	Health Post	Government	35.26	-13.93	117	(68-189)
F9	Mangochi	Mangochi Town	BLM Mangochi	Special	NGO	35.26	-14.48	308	(223-411)
F10	Mangochi	TA Chimwala	St. Johns Seminary	Clinic	CHAM	35.18	-14.55	1315	(932-1754)
F11	Mangochi	TA Mponda	Maldeco Fisheries Clinic	Clinic	Government	35.15	-14.33	0	(0-0)
F12*	Ntcheu	TA Goodson Ganya	Solomon Village Clinic	Clinic	CHAM	34.87	-14.71	538	(362-734)
F13*	Ntcheu	TA Masasa	Phanga Disp.	Dispensary	Government	34.72	-14.34	211	(139-316)
F14*	Machinga	STA Chesale	CHIMBIRA	Health Post	Government	35.81	-14.60	97	(51-165)
F15*	Balaka	STA Kachenga	Nambira HP	Health Post	Government	35.06	-14.80	368	(244-512)
F16*	Balaka	STA Kachenga	Kapire HC	Health Centre	CHAM	35.00	-14.79	0	(0-0)

Travel Times to Closest ART Facilities

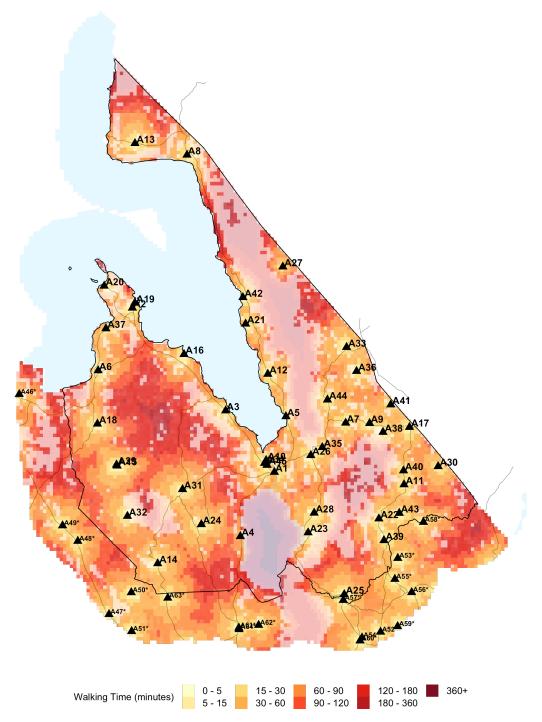


Figure 4: Estimated travel times to the closest ART facility. Travel times were calculated using data on road infrastructure, types of terrain and land elevation.

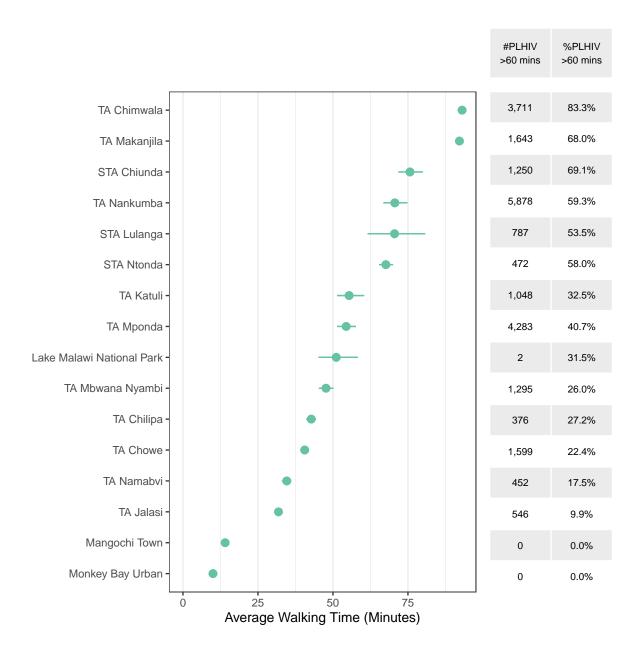


Figure 5: Estimated average walking time to the closest ART facility, weighted by the estimated number of PLHIV within the traditional authority. The right table indicates estimated number and proportion of PLHIV that need more than 60 minutes to travel to the closest ART facility, respectively.

Areas outside 60 minutes travel

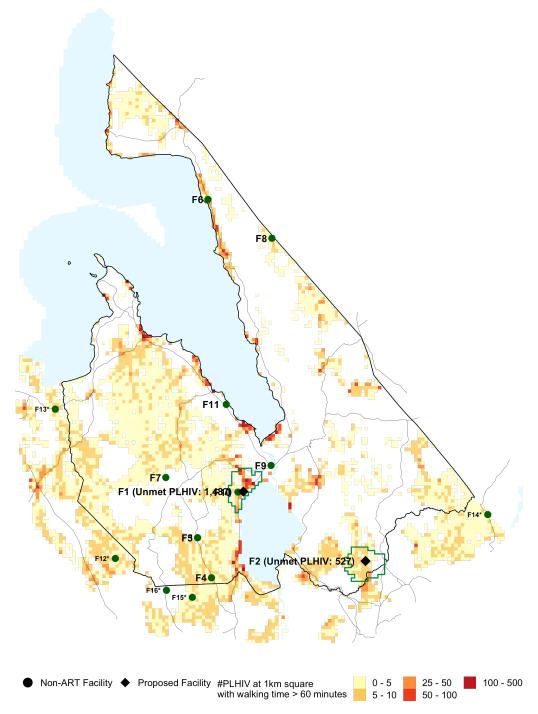


Figure 6: Proposed facility locations. Areas where the walking time to the closest ART facility is <60 minutes have been removed. Green lines indicate the 60-minutes catchment area of the proposed facility.

Appendix (Methods Summary)

The analysis involved several steps:

 Creating a map of spatial prevalence by approximately 1km grid cells. We used cluster-level survey data from the 2015/16 MDHS and MPHIA household surveys and HIV prevalence amongst ANC clients from routine health facility data to obtain a gridded PLHIV prevalence map (1km grid cells).

Mangochi

- 2. Calculate the estimated number of PLHIV in each 1km grid cell.
- Modelled estimates of total population by 1km grid cell were sourced from the WorldPop project (https://www.worldpop.org/geodata/summary?id=49698). Gridded populations are constrained to only grid cells containing built settlements based on satellite imagery.
- Gridded populations were adjusted to match traditional authority (TA) population data from the 2018 household census, projected forward to 2020 based on district population projections.
- Gridded HIV prevalence (step 1) was multiplied by population for estimates of the distribution of PLHIV by 1km grid cell.
- The gridded PLHIV in each district were scaled to align to total PLHIV in each district from the from 2020 Naomi model estimates.
- 3. Calculate walking travel time for PLHIV to existing ART services. We used data on land cover terrain type (Global Land Cover 2000), roads (OpenStreetMap), elevation (GMTED2010), and water bodies (NASA Shuttle Radar Topography Mission) to model walking time from each grid cell to 757 public or not-for-profit health facilities providing ART services using the AccessMod software. Walking speed was assumed to be 6-7km/h on roads and 2-3 km/h on non-road surfaces.
- 4. Analyse the number and locations of PLHIV residing greater than 60, 90, or 120 minutes walking time from existing ART facilities. Grid cells were classified by the travel time to the nearest public or not-for-profit ART facility using the travel time model. Maps were filtered for PLHIV residing greater than 60, 90, or 120 minutes, thresholds of interest defined based on discussions with the Department of HIV and AIDS (DHA).
- 5. Identify optimal locations to reach the most PLHIV who currently reside greater than 60 or 90 minutes from ART services. An optimisation algorithm was implemented to systematically select the best facilities and locations where ART service delivery can be introduced to reach the most PLHIV residing outside travel time thresholds.

The list of 757 active facilities currently providing ART services was sourced from DHA-MIS database. Facilities that were private-for-profit were excluded from the analysis of travel time catchments. Health facilities which do not currently provide an ART service, which are candidate locations for expanding ART services, were sourced from facilities visited during the 2018/19 Service Availability and Readiness Assessment (SARA). Candidate facilities included existing health posts which are not staffed full time.