

Publication

Creating access to SARS-CoV-2 screening and testing through community-based COVID-19 case-finding, observations from cross-sectional studies in Lesotho and Zambia

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)

ID 4700042

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Year 2023

Title Creating access to SARS-CoV-2 screening and testing through community-based COVID-19 case-finding, observations from cross-sectional studies in Lesotho and Zambia

Journal BMC public health

Volume 23

Number 1

Pages / Article-Number 1414

Keywords Humans; *SARS-CoV-2; *covid-19; COVID-19 Testing; Cross-Sectional Studies; Lesotho; Pandemics; Zambia; Community Health Workers; Covid-19; Community testing; SARS-CoV-2

Mesh terms Humans; SARS-CoV-2; COVID-19; COVID-19 Testing; Cross-Sectional Studies; Lesotho; Pandemics; Zambia; Community Health Workers

BACKGROUND: The health impact of the COVID-19 pandemic largely depends on the ability of the healthcare systems to develop effective and adaptable preparedness and mitigation strategies. A collaborative initiative (BRCH-EDCTP COVID-19 Initiative) was set up between Lesotho and Zambia early on in the pandemic, to jointly conduct a project to investigate creating access to SARS-CoV-2 screening and testing through community-based COVID-19 case-finding. **METHODS:** Two different community case-finding strategies were deployed. In Lesotho, an approach was implemented whereby a community (village) health worker screened community members at their home or during community gatherings for COVID-19 signs and symptoms. All community members who screened positive were then offered SARS-CoV-2 testing. In Zambia, so-called community hubs, staffed by community health care workers, were set up at different locations in the community for people to walk in and get tested for SARS-CoV-2. Hubs changed location from week-to-week and targeted transmission hotspots. All persons visiting the hubs were offered testing for SARS-CoV-2 irrespective of self-reported signs and symptoms of COVID-19 though information was collected on occurrence of these. Testing in both approaches was done using SARS-CoV-2 rapid antigen tests. **RESULTS:** Setting up testing in the community setting was feasible in both countries. In Lesotho in the village health worker approach, over a period of 46 weeks, 7221 persons were screened, and 49 (11.4%) SARS-COV-2 cases identified among 428 COVID-19 screen positive participants. In the community hubs among 3150 people tested, 166 (5.3%) SARS-CoV-2 cases were identified in a period of 26 weeks. From the community hubs approach, where all seen were offered COVID-19 testing it was learned that people screening positive for COVID-19 signs and symptoms were more likely to test SARS-COV-2 positive, especially those reporting classic COVID-19 symptoms like loss of sense/smell for a short period of time (1-3 days). **CONCLUSIONS:** In conclusion, in this project we learned that implementing COVID-19 screening and testing by lay health workers in the community is possible. Characteristics of the population screened, tested, and identified to have SARS-CoV-2 are described to help guide development of future testing strategies.

ISSN/ISBN 1471-2458

URL <https://doi.org/10.1186/s12889-023-16306-2>

edoc-URL <https://edoc.unibas.ch/95985/>

Full Text on edoc Available;

Digital Object Identifier DOI 10.1186/s12889-023-16306-2

PubMed ID <http://www.ncbi.nlm.nih.gov/pubmed/37488552>

ISI-Number WOS:001035797200005

Document type (ISI) Journal Article