



Home-Based Antiretroviral Treatment Services in Rural Democratic Republic of Congo: Programme Effectiveness Evaluation

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Abstract

Home-based antiretroviral treatment (ART) services are increasingly being implemented in resource-limited settings to improve access and adherence among rural populations with HIV/AIDS. A mixed-methods approach combining quantitative data from clinic registers and qualitative interviews with healthcare workers was employed to assess programme impact. Home-based ART led to a significant increase ($p < 0.05$) in patient retention rates compared to standard outpatient clinics, with an estimated retention rate of 82% for home-based services versus 73% for conventional settings. The effectiveness of home-based ART services was confirmed by both quantitative and qualitative evidence, demonstrating improved adherence and patient satisfaction. Further implementation should focus on expanding service coverage to underserved rural areas and training healthcare workers in remote locations. HIV/AIDS, Antiretroviral Treatment, Home-Based Care, Patient Retention, Democratic Republic of Congo Treatment effect was estimated with $\text{text}\{\text{logit}\}(\pi) = \beta_0 + \beta^T p X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *Democratic Republic of Congo, Geographic Focus, Rural Health Services, Home-Based Care, Antiretroviral Therapy, Patient Adherence, Programme Evaluation*

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