Forecasting HIV prevalence among individuals aged 15-49 years for Burundi using an exponential smoothing technique

Dr. Smartson. P. NYONI¹, Thabani NYONI²

¹ZICHIRe Project, University of Zimbabwe, Harare, Zimbabwe ²Independent Researcher & Health Economist, Harare, Zimbabwe

Abstract

This study uses annual time series data of HIV prevalence among individuals aged 15-49 years for Burundi from 1990 to 2020 to predict future trends of HIV prevalence over the period 2021 to 2030. The study utilizes Holt's double exponential smoothing model. The optimal values of smoothing constants α and β are 0.9 and 0.1 respectively based on minimum MSE. The results of the study indicate that annual HIV prevalence among people aged 15-49 years will continue to decline over the out of sample period. Therefore, we encourage authorities to improve HIV case detection and treatment among key populations and vulnerable groups.

Keyword (s): - Exponential smoothing, Forecasting, HIV prevalence

Background

According to the 2007 HIV seroprevalence survey, the prevalence of HIV in the general population in Burundi was reported to be 2.97% with rates varying between urban and rural areas, being higher in urban areas (4.59%) vs. 2.82%). The 2016–2017 Burundi Demographic and Health Survey revealed that 0.9% of men and women between the ages of 15 and 49 are HIV-positive. HIV prevalence is slightly higher among women (1.2%) than men (0.6%), and is more than three times higher in urban (2.5%) compared to rural areas (0.7%). In Burundi, the national HIV response is prioritized as evidenced by the implementation and development of national strategic programs in 2002-2006, 2007-2011, 2012-2016, 2014-2017, and 2018-2022 to fight AIDS. These programs seek universal access to quality HIV/AIDS prevention, treatment, and support services (Niejimana et al. 2021). The government of Burundi has made significant progress in controlling the HIV epidemic with a decline in seroprevalence in the general population from 6% in 2002 to 0.6% in 2018 (Njejimana et al. 2021). This significant drop was attributed to the rapid scale up of HIV testing services, increase in antiretroviral therapy coverage and implementation of the combination HIV prevention strategy (WHO, 2016). The aim of this paper is to model and forecast HIV prevalence among the 15-49 year age group using Holt's linear method. The results of this paper are envisioned to detect likely future trends of HIV prevalence among the 15-49 year age group and this will then guide planning and allocation of resources towards HIV prevention and treatment initiatives in order to achieve zero new infections by the end of 2030.

Literature Review

Author (s)	Objective (s)	Methodology	Key finding (s)
Sonko et al. (2022)	To assess predictors	A cross-sectional	The predisposing
	that influence the	study design was used	factors (socio-
	uptake of HIV testing	on 6194 subjects,	demographic and
	among youth aged	among which 4730	HIV knowledge) and
	15~24 years in The	were female. The	the need-for-care
	Gambia	analysis employed	factors (sexual risk
		Chi-squared tests and	behaviors) predict

ISSN NO: 2770-2936

September 2024

		hierarchical logistic	healthcare utilization
		regression.	services (HIV testing)
Nshimirimana et al.	To assess HIV testing	Cross- sectional	Despite the
(2022)	uptake and its	design involving	interventions
	determinants among	analysis of 2016	implemented to reach
	adolescents and	Demographic and	the 90- 90- 90
	young adults	Health Survey data	UNAIDS goals, HIV
			testing among youth
			in Burundi was low
Gelibo et al. (2022)	To identify	-used data from adults	uncircumcised men in
	geographic locations	aged 15–64 years	certain hotspot towns
	and drivers of HIV	who participated in	and divorced or
	transmission in	the Ethiopian	widowed individuals
	Ethiopia	Population-based	in hotspot
		HIV Impact	woredas/towns might
		Assessment survey	have contributed to
		(October 2017–April	the average increase
		2018	in HIV prevalence in
			the hotspot areas
Njejimana et al.	To determine and	-qualitative analysis	-the problem of
(2021)	characterize this	based on an extensive	HIV/AIDS stigma is
	problem in Burundi.	series of 114	widespread in
		interviews	Burundian society, as
			all participants in the
			research reported
			having experienced
			some kind of HIV
			stigma
Ouedraogo et al.	To determine the	A cross-sectional	HIV prevalence
(2019)	prevalence and	biological and	among MSM under
	correlates of HIV	behavioral survey	25 years old was 1.3%
		was conducted from	-
	MSM in Burkina	January to August	and 0.9% (95% CI:
	Faso	2013 among MSM in	0.4–2.5) respectively
		Ouagadougou and	in Ouagadougou and
		Bobo-Dioulasso	Bobo-Dioulasso,
			compared to 5.4%
			(95% CI: 2.2–12.5)
			and 6.6% (95% CI:
			3.4–12.3) among
			those 25 years old or
			older in these cities
			(p=0.010 and
			p<0.001
Yé et al. (2018)	To improve equity of	Using a quasi-	A 7.34% increase in
	access to health care	experimental	prenatal coverage, an
	and information	approach, a mobile	84% decrease in loss
	among women and	telephone system was	to follow-up for HIV
	PLWHAs by	set up at five health	(P < 0.001) and a 31%
	reinforcing	centres to provide an	increase in assisted
		automated reminder	deliveries in 2016 (P

	community	service for health care	< 0.0001) were
	participation.	consultation	observed in
		appointments.	intervention areas.
		Performance	
		evaluations based on	
		key performance	
		indicators were	
		subsequently	
		conducted.	
Kirakoya-	To examine the	Applied modified	For both genders, age,
Samadoulougou et al.	influence of both	Poisson regression	education, religious
(2017)	individual and	models.	affiliation, household
	community-level		wealth, employment,
	determinants of HIV		media exposure,
	testing uptake in		sexual behaviors, and
	Burkina Faso		HIV knowledge were
			associated with HIV
			testing

Methodology

This study utilizes Holt's double exponential smoothing technique to model and forecast future trends of HIV prevalence among individuals aged 15-49 years in Burundi. In exponential smoothing forecasts are generated from the smoothed original series with the most recent historical values having more influence than those in the more distant past as more recent values are allocated more weights than those in the distant past. This study uses the Holt's linear method (Double exponential smoothing) because it is an appropriate technique for modeling linear data.

Holt's linear method is specified as follows:

Model equation

$$R_t \!\!=\!\! \mu_t + \rho_t \boldsymbol{t} + \boldsymbol{\epsilon}_t......[1]$$

Smoothing equation

$$S_{t} = \alpha R_{t} + (1-\alpha) (S_{t-1} + b_{t-1})...$$
[2]

 $0 < \alpha < 1$

Trend estimation equation

$$b_t = \beta (S_t - S_{t-1}) + (1-\beta)b_{t-1}....[3]$$

 $0 < \beta < 1$

Forecasting equation

$$f_{t+h} = S_t + hb_t...$$
 [4]

R_t is the actual value of HIV prevalence at time t

 ε_t is the time varying **error term**

September 2024

ISSN NO: 2770-2936

 μ_t is the time varying mean (**level**) term

 ρ_t is the time varying **slope term**

t is the trend component of the time series

S_t is the exponentially smoothed value of HIV prevalence at time t

 α is the exponential smoothing constant for the data

 β is the smoothing constant for trend

 f_{t+h} is the h step ahead forecast

b_t is the trend estimate (slope of the trend) at time t

 b_{t-1} is the trend estimate at time t-1

Data Issues

This study is based on annual HIV prevalence among individuals aged 15-49 years in Burundi for the period 1990 - 2020. The out-of-sample forecast covers the period 2021 - 2030. All the data employed in this research paper was gathered from the World Bank online database.

Study findings

Exponential smoothing Model Summary

Table 1: ES model summary

Variable	R
Included Observations	31
Smoothing constants	
Alpha (α) for data	0.900
Beta (β) for trend	0.100
Forecast performance measures	
Mean Absolute Error (MAE)	0.161177
Sum Square Error (SSE)	1.878896
Mean Square Error (MSE)	0.060610
Mean Percentage Error (MPE)	1.851341
Mean Absolute Percentage Error (MAPE)	5.664207

Residual Analysis for the Applied Model

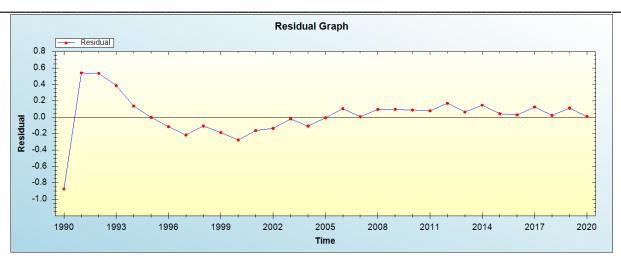


Figure 1: Residual analysis

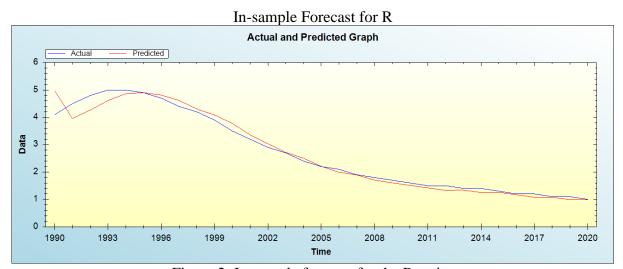


Figure 2: In-sample forecast for the R series

Actual and Smoothed graph for R series

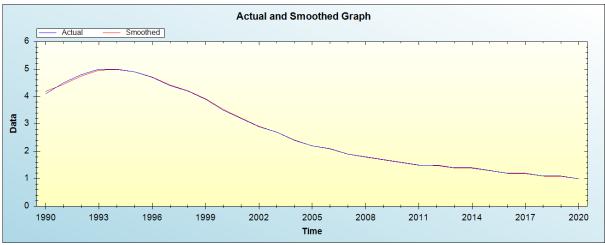


Figure 3: Actual and smoothed graph for R series

Out-of-Sample Forecast for R: Actual and Forecasted Graph

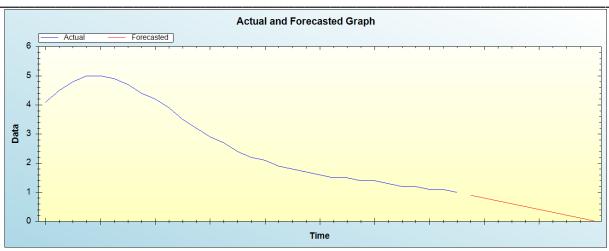


Figure 4: Out-of-sample forecast for R: actual and forecasted graph

Out-of-Sample Forecast for R: Forecasts only Table 2: Tabulated out-of-sample forecasts

Year	Forecasted HIV prevalence
2021	0.9013
2022	0.8035
2023	0.7058
2024	0.6081
2025	0.5103
2026	0.4126
2027	0.3148
2028	0.2171
2029	0.1193
2030	0.0216

The main results of the study are shown in table 1. It is clear that the model is stable as confirmed by evaluation criterion as well as the residual plot of the model shown in figure 1. It is projected that annual HIV prevalence among individuals aged 15-49 years will continue to decline over the out of sample period.

Policy implication and conclusion

Our model projections indicate that Burundi will be able successfully control the HIV epidemic in the out of sample period, however there is still need to improve HIV case detection and treatment among key populations and vulnerable groups.

References

- [1] Njejimana, N.; Gómez-Tatay, L.; and Hernández-Andreu, J.M (2021). HIV—AIDS Stigma in Burundi: A Qualitative Descriptive Study. Int. J. Environ. Res. Public Health 2021, 18, 9300. https://doi.org/10.3390/ ijerph18179300
- [2] Ministere de la santé Publique et de la lutte Contre le SIDA [Burundi] (MSPLS); Conseil National de Lutte Contre le SIDA [Burundi] (CNLS). Plan Estratégique National de Lutte Contre le SIDA 2012–2016; MSPLS; CNLS: Burundi, 2012. Available online: https://www.ilo.org/wcmsp5/groups/public/--ed_protect/---protrav/---ilo_aids/documents/legaldocument/wc ms_202048.pdf (accessed on 2 September 2021).
- [3] MinistèreàlaprésidenceChargédelaBonneGouvernanceetduPlan [Burundi](MPBGP);MinistèredelasantéPubliqueetdela lutte Contre le SIDA [Burundi] (MSPLS); Institut de Statistiques et d'études économiques du Burundi (ISTEEBU); et ICF. Enquête

ISSN NO: 2770-2936 September 2024

Démographique et de Santé au Burundi 2016–2017: Rapport de Synthèse; ISTEEBU; MSPLS; ICF: Rockville, MD, USA, 2018. Available online: https://dhsprogram.com/pubs/pdf/SR247/SR247.pdf (accessed on 2 September 2021)

[4] World Health Organization (WHO). Global Health Sector Strategy on HIV 2016–2021. Towards Ending AIDS; WHO: Geneva, Switzerland, 2016. Available online: https://apps.who.int/iris/handle/10665/246178 (accessed on 2 September 2021).