



Delivering High-Quality DSD Services at Scale

A CQUIN Learning Network Workshop

April 26 - 29, 2022
Johannesburg, South Africa

State of healthcare for KPs in SA

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29 April 2022



HIV Learning Network
The CQUIN Project for Differentiated Service Delivery

RITSHIDZE OVERVIEW

- + Ritshidze was developed in response to this crisis by people living with HIV and activists. It aims to hold the South African government and aid agencies accountable to improve overall HIV and TB service delivery and to support getting to the 95-95-95 targets.
- + It was a major step forward when PEPFAR supported community-led monitoring — and it's important that it has become part of global guidance and is being adapted and rolled out in multiple other countries.
- + We need to identify and address challenges that cause PLHIV and KPs to never start treatment or disengage from care by holding local, national, and international officials responsible for delivering quality services to our communities.
- + Ritshidze monitors over 400 clinics & community healthcare centres across 29 districts in 8 provinces in South Africa — and unites the entire PLHIV Sector in South Africa. **It is one of the most extensive community-led monitoring efforts in the world.**



DEVELOPING THE REPORT



- + The report has been developed using a combination of qualitative and quantitative data collected through a large-scale data collection effort with a team of more than 50 KP data collectors
- + A total of 5,979 surveys were taken, combining 1,476 MSM, 2,397 PWUD, 1,344 sex workers, and 762 trans* people
- + KPs were identified through snowball sampling. Compared to a facility-based sample, this methodology allowed us to find more “hidden” KPs who may not use the facility as well as those more regularly accessing services
- + The quantitative data collection took place between August and October 2021 across 18 PEPFAR supported districts in 7 provinces
- + All Ritshidze data collection tools and our data dashboard are available through our website: www.ritshidze.org.za



PEOPLE NOT ACCESSING SERVICES



- + **20% of KPs we interviewed were not receiving services anywhere**
- + By province, the highest proportion of people not receiving services was in the Eastern Cape (43%) & the lowest proportion was in Mpumalanga (3%)
- + KPs with more than one KP identity were the most likely to not be receiving services anywhere showing that overlapping marginalised identities are making it more difficult to get healthcare

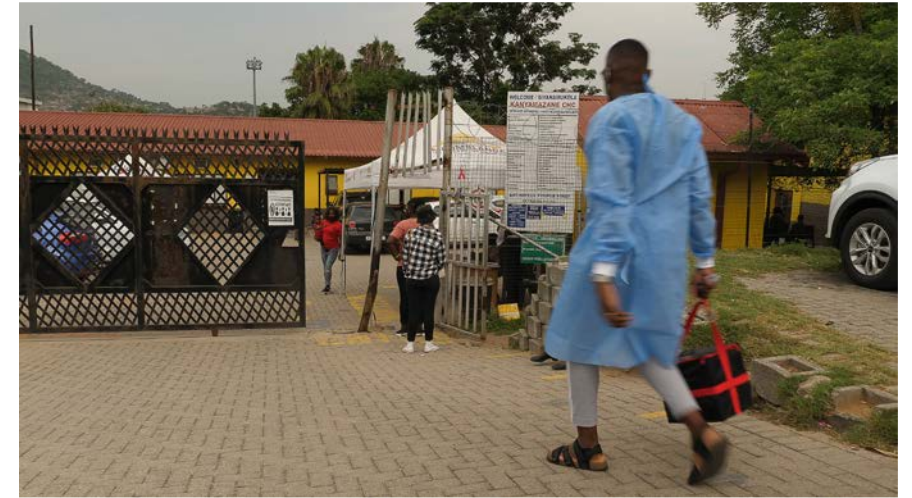


PEOPLE ACCESSING SERVICES

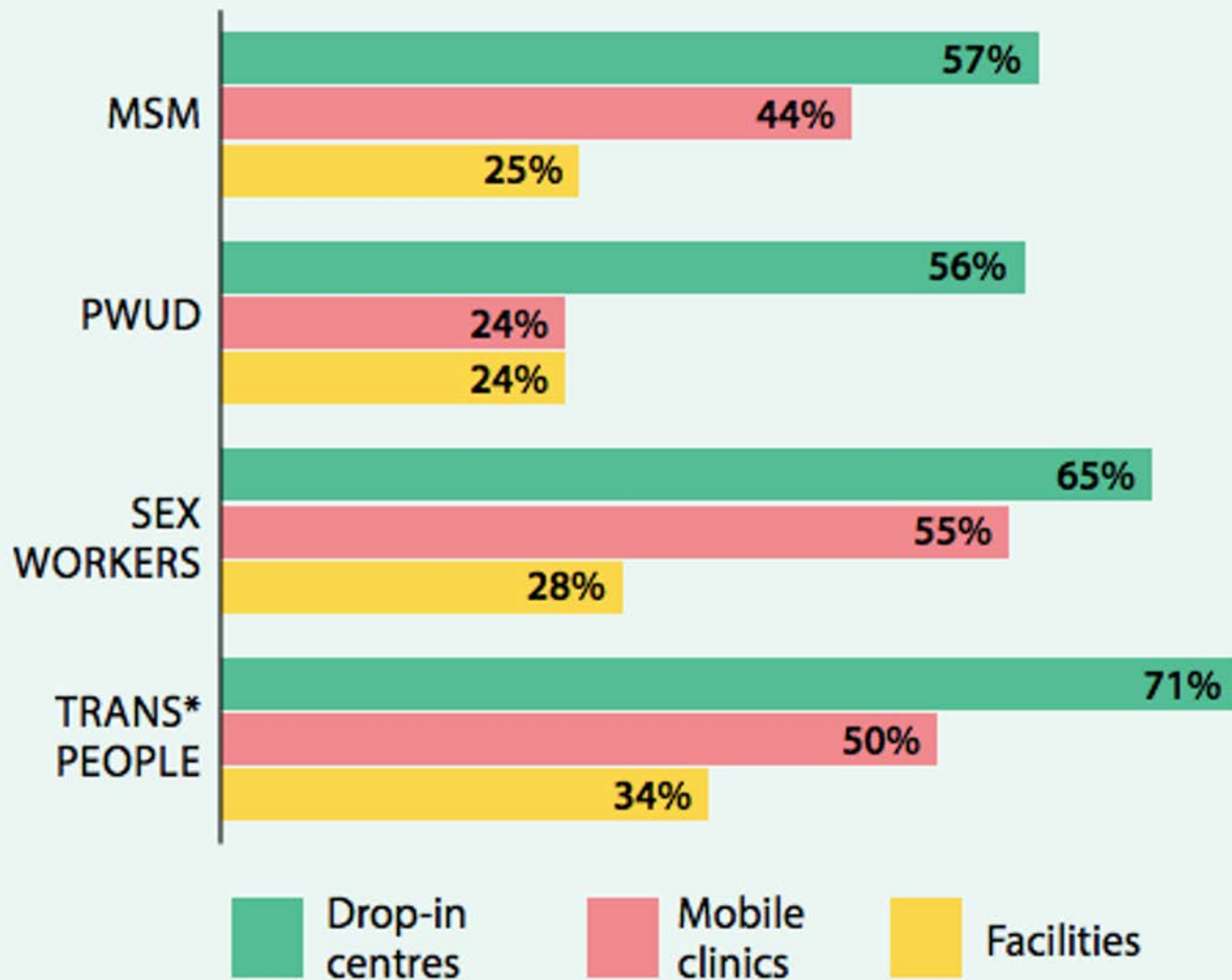


Of KPs who access services somewhere: proportion using facilities, drop-in centres mobile clinics, and private doctors

WHERE	MSM	PWUD	SEX WORKERS	TRANS* PEOPLE
Public health facility	86% (859)	85% (1,270)	76% (805)	75% (409)
Drop-in centre	6% (64)	10% (53)	2% (29)	2% (23)
Mobile clinic	8% (83)	12% (65)	7% (101)	21% (222)
Private doctor	7% (72)	10% (57)	8% (117)	5% (56)



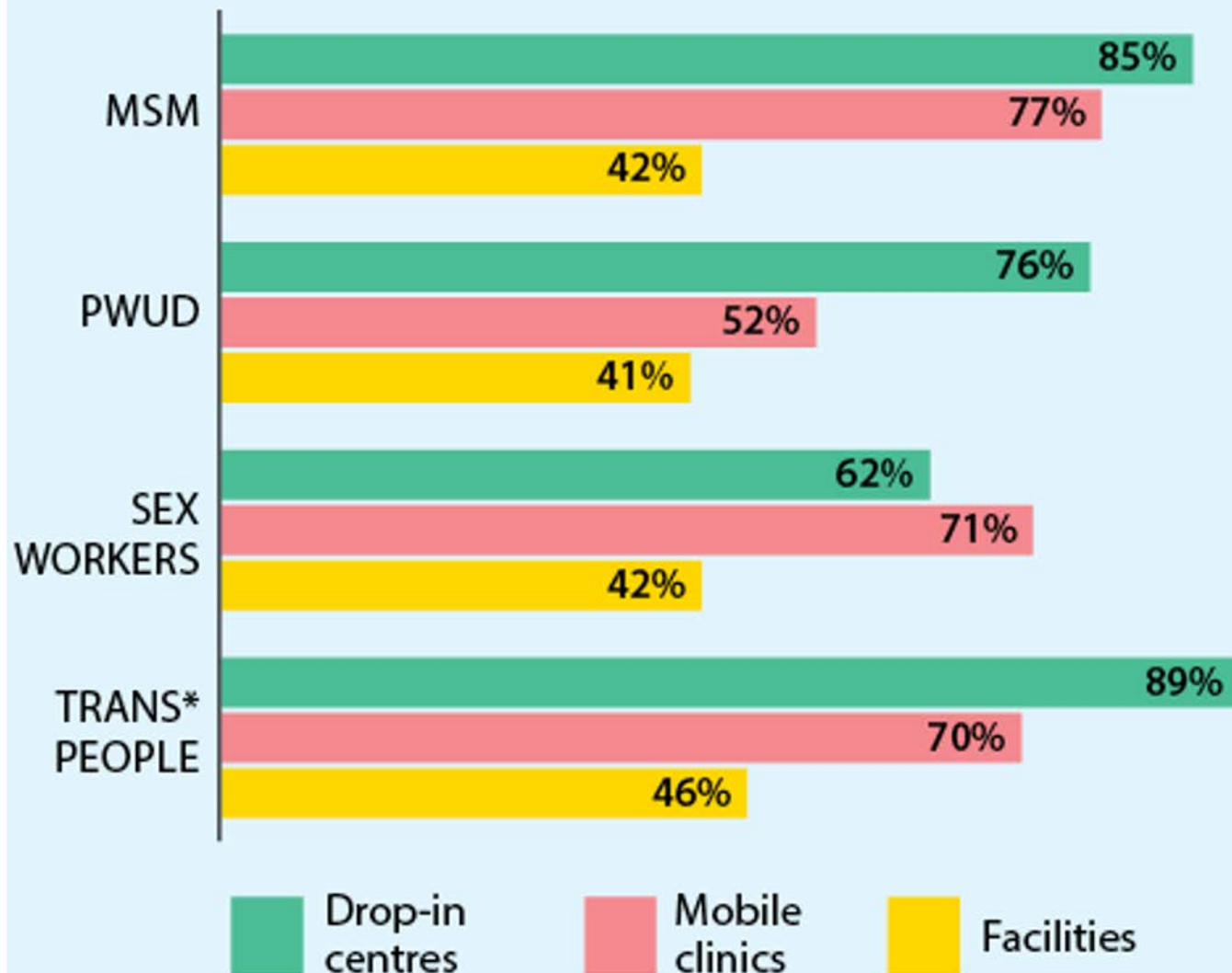
Percentage of respondents "very satisfied" with health services offered (percentage)



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FACILITY STAFF ATTITUDES

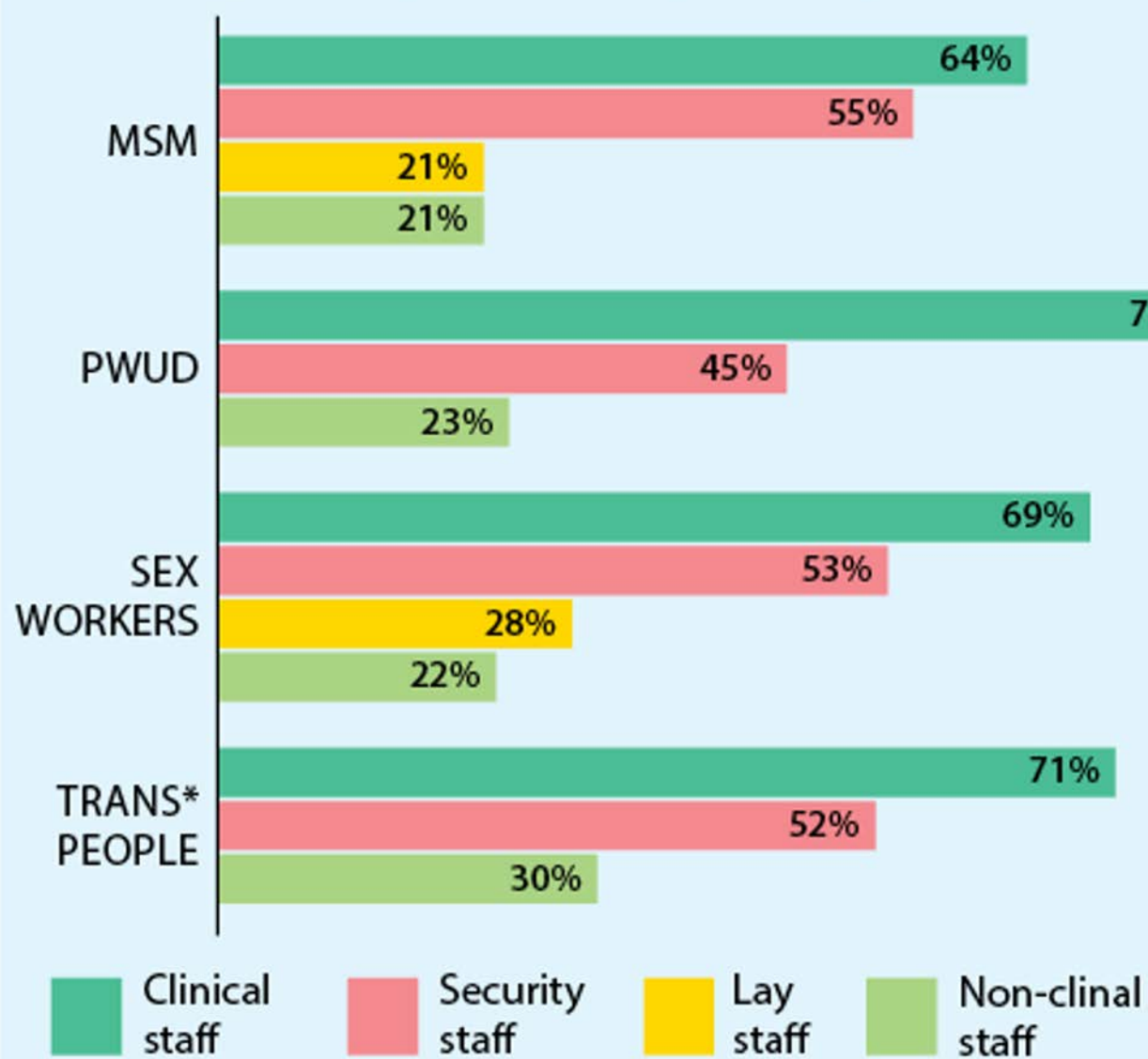
Percentage of respondents reporting staff are always friendly and professional (percentage)



+ **For those not getting health services anywhere:** a lack of friendly services was the reason reported by 30% of MSM, 26% of PWUD, 32% of sex workers, and 45% of trans* people

+ **For drop-in centre and mobile clinic users:** most common reason for not using a public health facility is because the care is not friendly (as reported by 66% of MSM, 61% of PWUD, 55% of sex workers, 64% of trans* people)

Percentage of respondents reporting staff as unfriendly and unprofessional (percentage)



"The staff here in this clinic do not treat us people who use drugs as human beings. They are so judgemental towards us. They are calling us names that make us feel offended."

— PWUD, Illovo Ntsimbini Clinic, KZN, August 2021.

"Their services are poor, especially for MSM. There is no respect, more so by the security guard. The last time I went to the clinic... the way I was treated, the manner that the nurse addressed me, was discriminatory, and I ended up leaving the clinic and went to the chemist to buy medication."

— MSM, Thanduxolo Clinic, Eastern Cape, August 2021.

REFUSED ACCESS

Percentage of respondents who had been refused access to services at the facility because they are a KP (percentage)



SAFETY AT THE FACILITY



- + The majority of KPs interviewed **did not feel safe** and protected from verbal or physical abuse, verbal or physical harassment, or risk of arrest at public health facilities used
- + Only 35% of MSM, 34% of PWUD, 50% of sex workers, and 42% of trans* people felt “very safe” using the facility
- + Similarly, only 33% of MSM, 32% of PWUD, 38% of sex workers and 36% of trans* people felt comfortable at the facility



PRIVACY VIOLATIONS: THOSE USING FACILITY



	Respondents who think privacy is not well respected at facilities, % (n)	Most common privacy violations
MSM	19% (167)	Disclosure of HIV status (identified by 55% [92] of those asked), disclosure as MSM (52%,87), and counselling patients together (25%, 42)
PWUD	26% (357)	Disclosing someone was a PWUD (identified by 66% [234] of those asked) and disclosing HIV status (46%, 164).
Sex workers	28% (232)	Disclosure of HIV status (identified by 45% [105] of those asked), disclosure as a sex worker (44%, 102), and counselling patients together (33%, 76).
Trans* people	21% (93)	Disclosing a person was trans (identified by 55% [51] of those asked) and disclosing HIV status (46%, 43).

PRIVACY VIOLATIONS: THOSE NOT USING FACILITY



For those not getting health services

anywhere: a fear of exposure was one of the major reasons given by 27% of MSM, 18% of PWUD, 23% of sex workers, and 21% of trans* people, and a lack of privacy was the reason given by 26% of MSM, 19% of PWUD, 28% of sex workers, and 35% of trans* people.

Of respondents using drop-in centres and mobile clinics: 49% of MSM, 53% of PWUD, 40% of sex workers, and 54% of trans* people reported the lack of privacy as one of the main reasons for not using a public health facility.

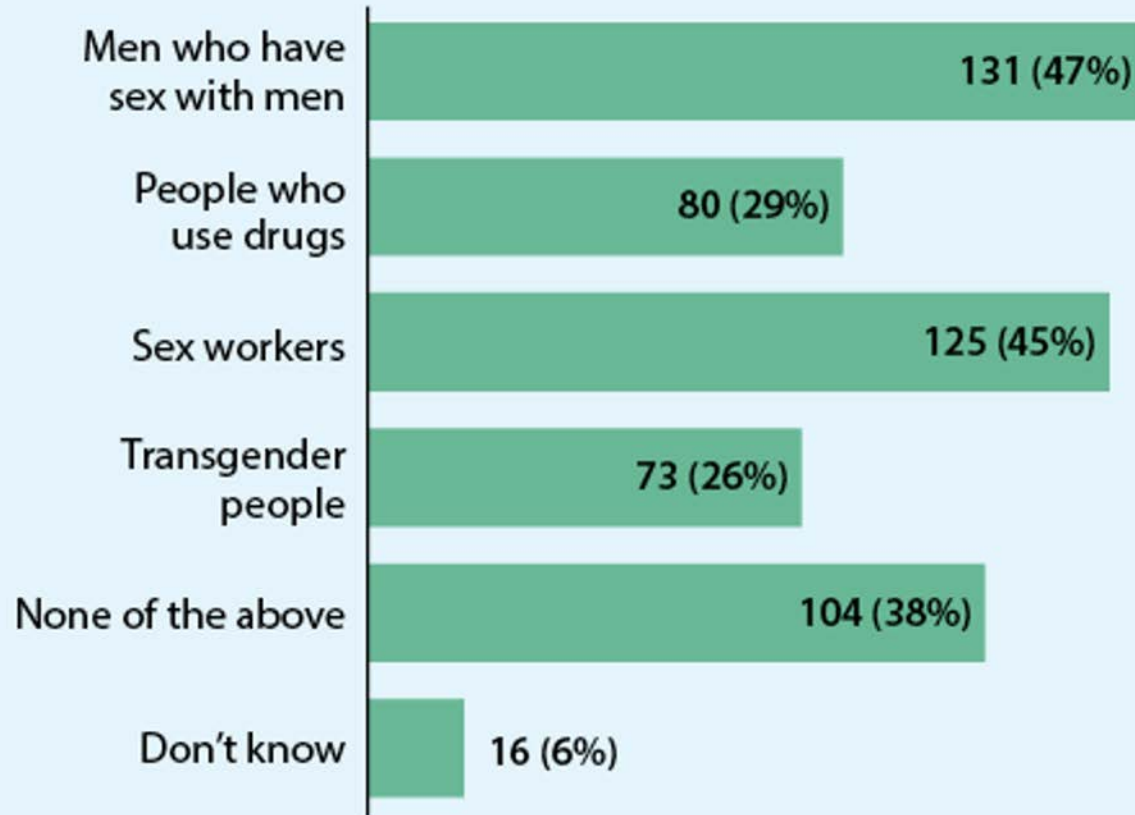
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**KP SPECIFIC
SERVICES AT
FACILITIES**

FEW SPECIFIC SERVICES FOR KPs

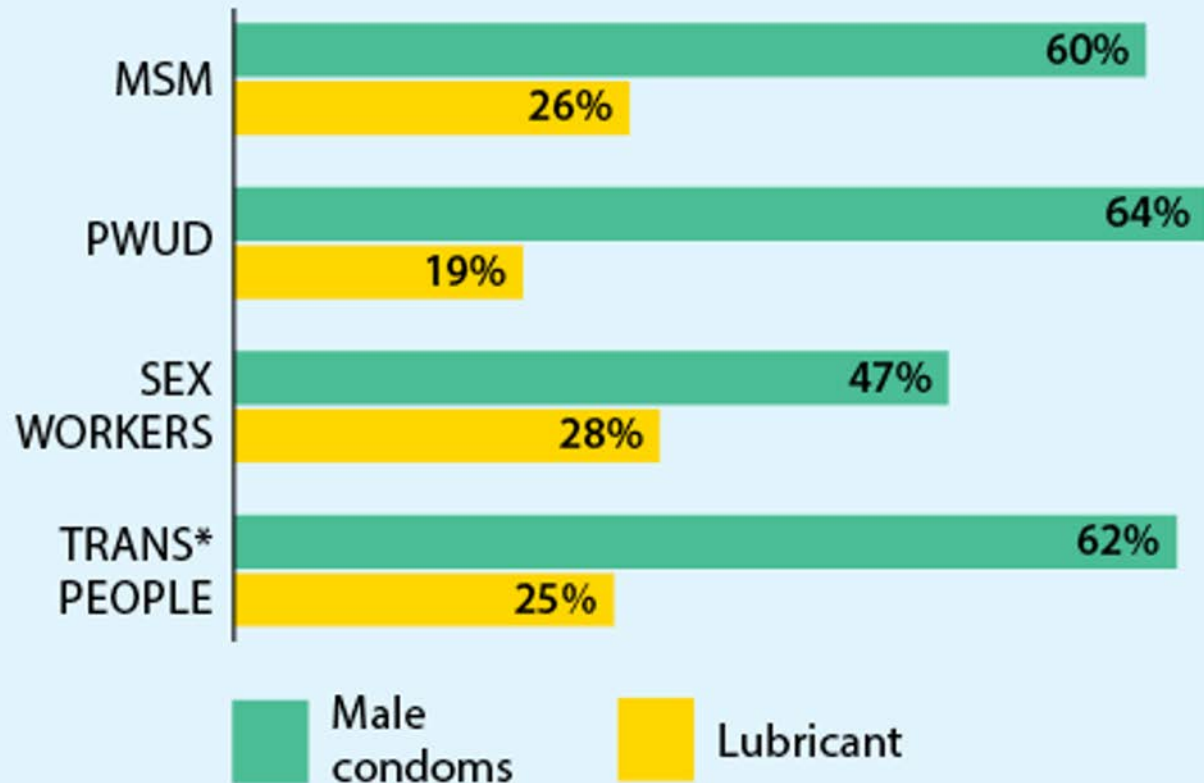


Are there specific services of any of the following populations?



CONDOMS + LUBRICANT

Percentage of respondents reporting male condoms and lubricant available at facilities (percentage)



"They don't know I am a sex worker. I don't want them to know because the treatment will be bad for me. They are not treating other sex workers well, for example, they are shouted at if they take many condoms. It's embarrassing to be shouted at for taking more condoms... there is no STI screening or treatment done."

– Sex worker, Bloemspruit Clinic, Free State, March 2021.



HARM REDUCTION



On-site drug dependence initiation and treatment (e.g. methadone): reported to be available by only 9% of PWUD using facilities compared to 24% of drop-in centre users and 12.5% of mobile clinic users.

Unused needles: reported to be available by 3% of PWUD using facilities compared to 10% of drop-in centre users and 8% of mobile clinic users.

What additional services would you like at facilities?

- + 61% of PWUD we spoke to would like on site drug dependence initiation and treatment (e.g. methadone)
- + 55% would like referrals for drug dependence initiation and treatment (e.g. methadone)
- + 45% would like on site drug-dependence counselling and support

GENDER AFFIRMING CARE



- + Ritshidze data show that 10% of mobile clinic users, 7% of facility users, and just 5% of drop-in centre users said hormone therapy was available.
- + Yet 58% of respondents would like hormone therapy at facilities.



DROP-CENTRES & MOBILE CLINICS



RITSHIDZE
SAVING OUR LIVES

**STATE OF
HEALTHCARE
FOR KEY POPULATIONS**

JANUARY 2022

Satisfaction level of KPs interviewed using drop-in centres and mobile clinics

	MSM	PWUD	SEX WORKERS	TRANS* PEOPLE
Respondents who were "very satisfied" with drop-in centres	57% (43)	56% (23)	65% (19)	71% (47)
Respondents who were "unsatisfied" or "very unsatisfied" with drop-in centres	3% (2)	5% (2)	0% (0)	3% (2)
Respondents who were "very satisfied" with mobile clinics	44% (38)	24% (25)	55% (127)	50% (34)
Respondents who were "unsatisfied" or "very unsatisfied" with mobile clinics	3% (3)	4% (4)	1% (3)	6% (4)

Percentage of respondents not aware of any drop-in centres (percentage)



ATTITUDES AT DROP-IN CENTRES & MOBILE CLINICS

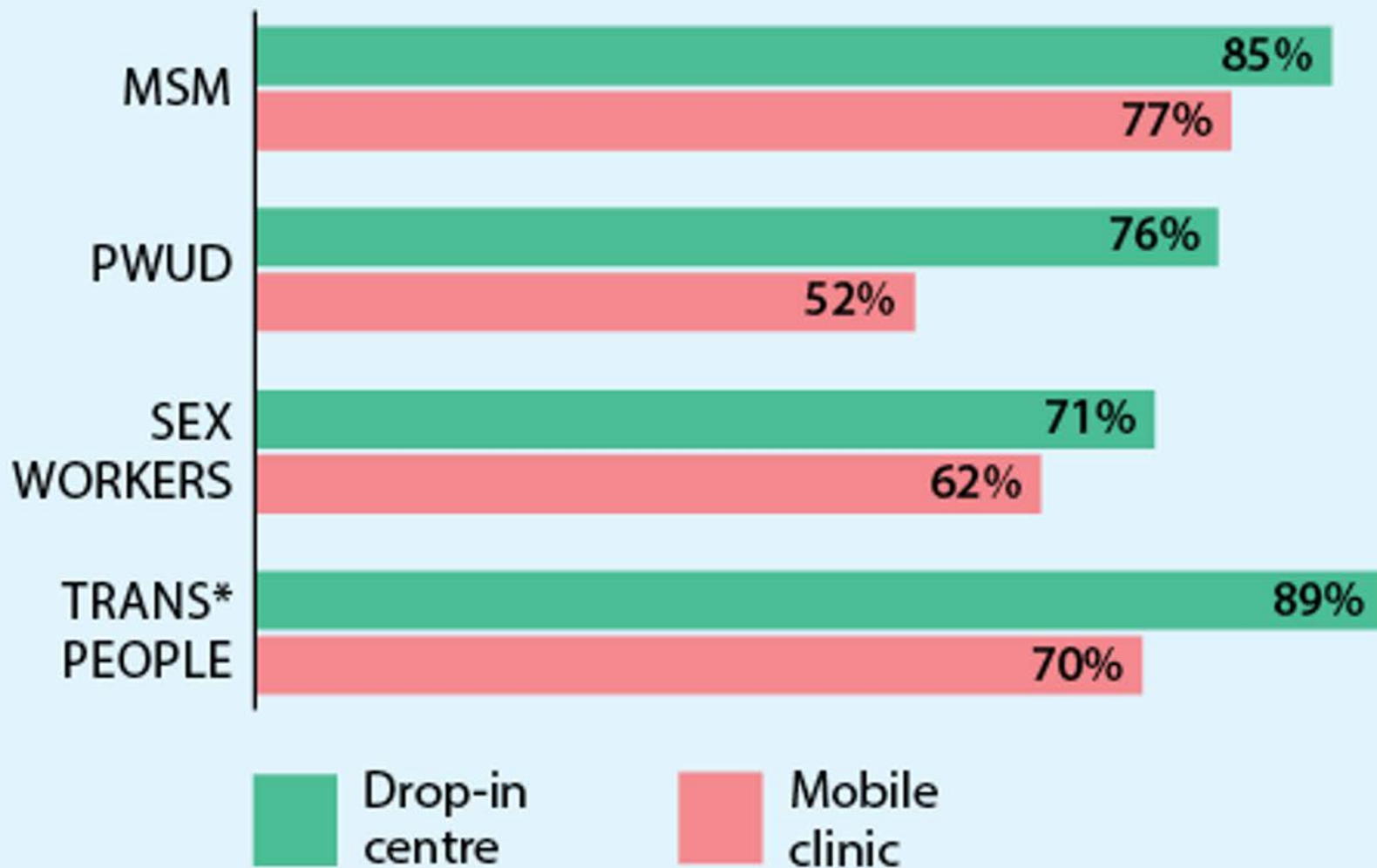


RITSHIDZE
SAVING OUR LIVES

**STATE OF
HEALTHCARE
FOR KEY POPULATIONS**

JANUARY 2022

Percentage of respondent reporting that drop-in centre and mobile clinic staff are always friendly (percentage)



SAFETY



Do you feel safe?

At the drop-in centre: only 64% of MSM, 59% of PWUD, 62% of sex workers, and 76% of trans* people felt “very safe”.

At the mobile clinic: only 51% of MSM, 30% of PWUD (less than at the health facility), 61% of sex workers, and 61% of trans* people felt “very safe”.

Do you feel comfortable?

At the drop-in centre: only 65% of MSM, 58% of PWUD, 59% of sex workers and 77% of trans* people felt comfortable.

At the mobile clinic: only 49% of MSM, 29% of PWUD (less than at the health facility), 61% of sex workers and 61% of trans* people felt comfortable.



CONFIDENTIALITY

	Respondents who think privacy is well respected at drop-in centres	Respondents who think privacy is well respected at mobile clinics
MSM	93% (70)	83% (72)
PWUD	90% (37)	55% (57)
Sex workers	83% (24)	84% (193)
Trans* people	94% (62)	78% (54)

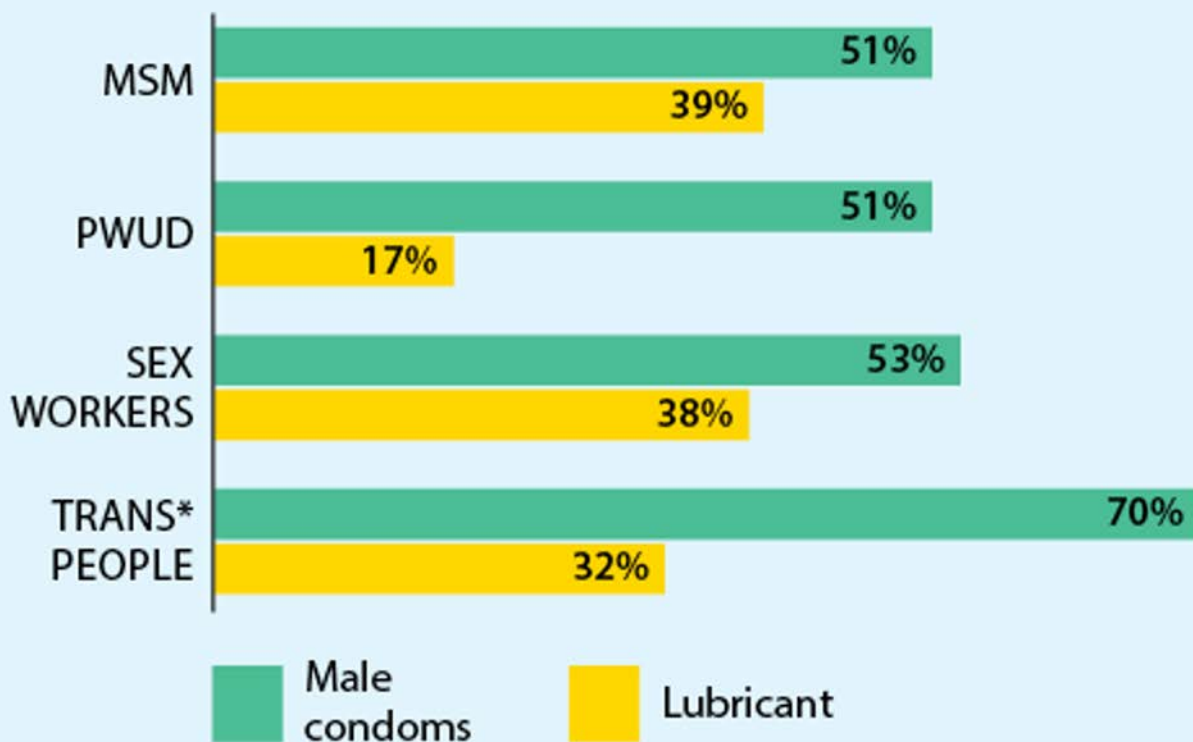
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KP SPECIFIC SERVICES AT DROP-IN CENTRES

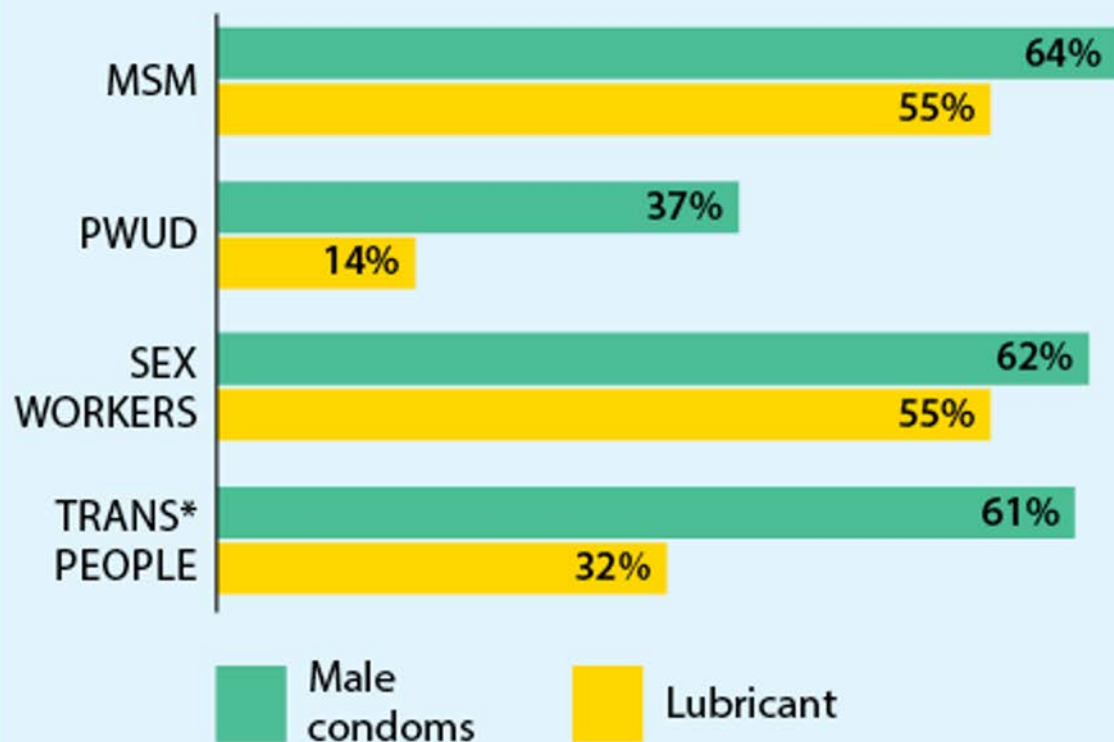


CONDOMS + LUBRICANT

Percentage of respondents reporting male condoms and lubricant available at drop-in centres (percentage)

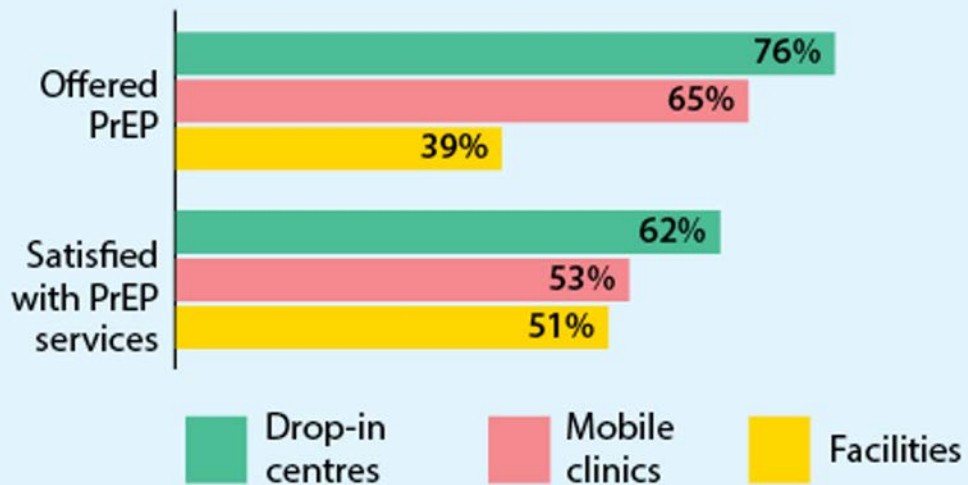


Percentage of respondents reporting male condoms and lubricant available at mobile clinics (percentage)

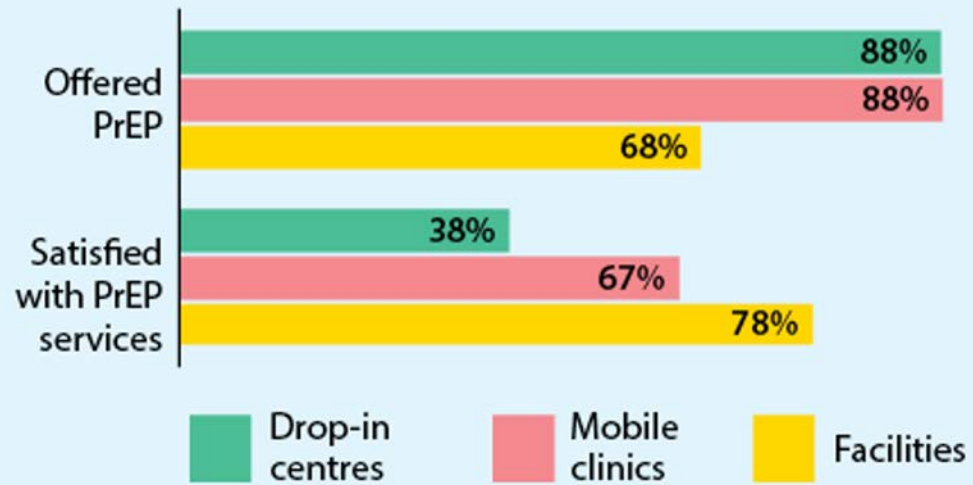




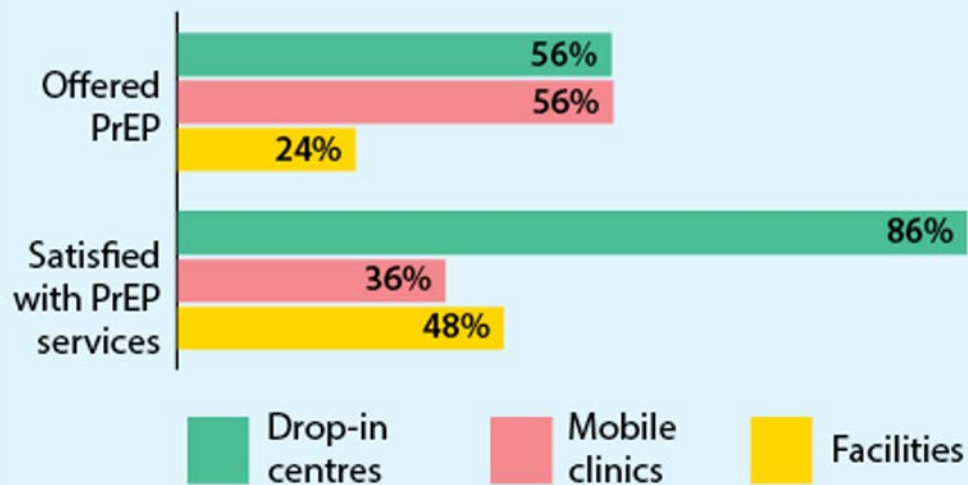
MSM and PrEP



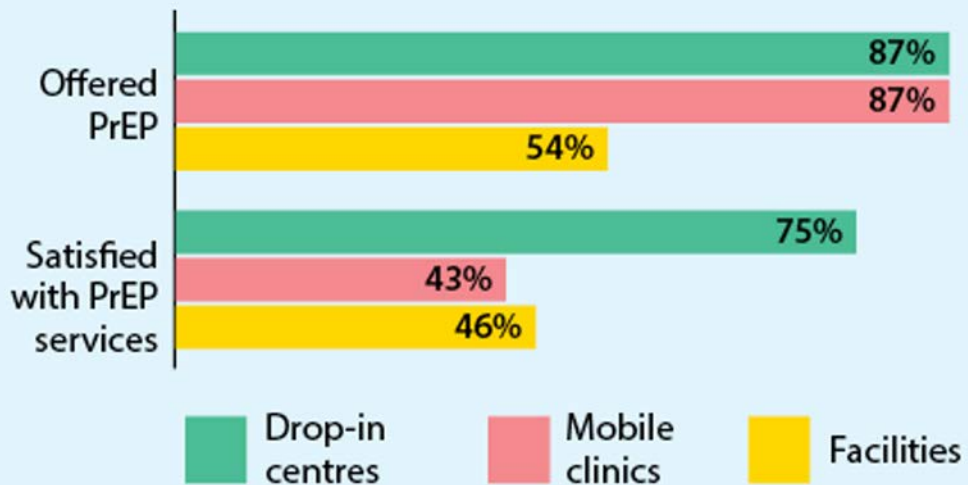
Sex workers and PrEP



PWUD and PrEP



Trans* people and PrEP



LOW PEP AVAILABILITY



PEP services at drop-in centres reported by KPs

	MSM	PWUD	SEX WORKERS	TRANS* PEOPLE
% of respondents who report that PEP is available	27% (20)	5% (2)	17% (5)	21% (14)

PEP services at mobile clinics reported by KPs

	MSM	PWUD	SEX WORKERS	TRANS* PEOPLE
% of respondents who report that PEP is available	18% (16)	6% (6)	25% (58)	28% (19)

HARM REDUCTION



On-site drug dependence initiation and treatment (e.g. methadone): reported to be available by 24% of drop-in centre users and 12.5% of mobile clinic users.

Unused needles: reported to be available by 10% of drop-in centre users and 8% of mobile clinic users.



HARM REDUCTION



What additional services would you like at drop-in centres?

- + 49% of PWUD we spoke to would like on site drug dependence initiation and treatment (e.g. methadone) at drop-in centres
- + 41% would like referrals for drug dependence initiation and treatment (e.g. methadone)
- + 37% would like on site drug-dependence counselling and support.

GENDER AFFIRMING CARE



- + Ritshidze data show that 10% of mobile clinic users and just 5% of drop-in centre users said hormone therapy was available.
- + Yet 76% of respondents would like hormone therapy at drop-in centres.



WE DEMAND

**DIGNIFIED
SAFE & FRIENDLY
HEALTHCARE NOW!**

**FOR LGBTQIA+ PEOPLE, SEX WORKERS &
PEOPLE WHO USE DRUGS**

FIX OUR CLINICS





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