

# Are We Doing it Right! Community Innovations for ART Delivery

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#### Introduction

- Gay, bisexual and men who have sex with men (GBMSM) and other key populations continue to experience many forms of stigma while accessing health services.
- It is important to address structural/policy gaps that impede access i.e. criminalization, human rights and funding.
- To improve on *quality of care* it is critical to involve communities in designing and implementation of these interventions.
- Information and understanding of HIV prevention, care and treatment needs to be disseminated in language that can be interpreted and understood by key populations.
- We need to adopt and move interventions from *general* to *specific* without making communities and programs struggle to fit within a single approach.



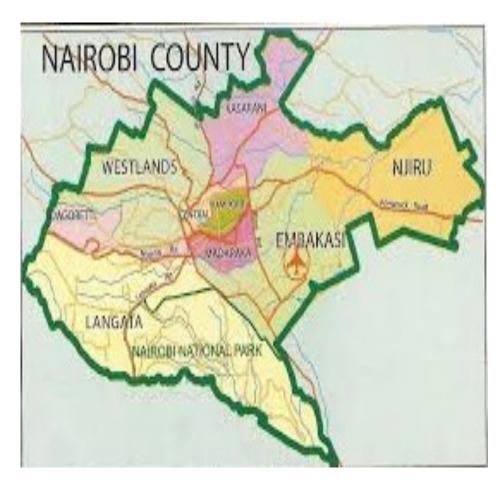
### Target & Coverage

We are a community organization working on MSM health and social well being in Kenya

Location: Nairobi County, expanding to Nyandarua

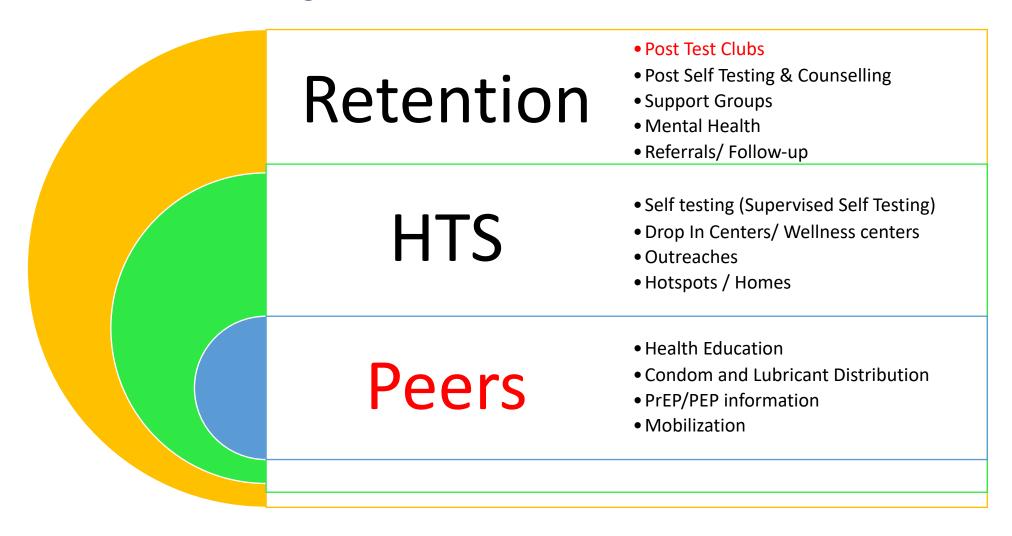
Populations served: GBMSM/TG

	Nairobi	Nyandarua
Beneficiary target	7,300	438
Staff	11	1
Outreach Workers	15	1
Peer Educators	178	7
Paralegals	13	1





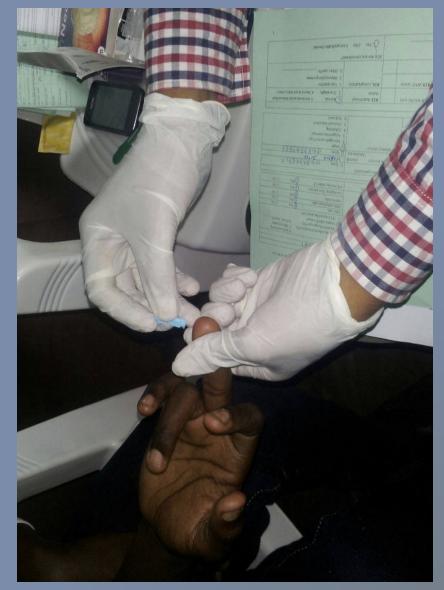
#### How are we doing it!





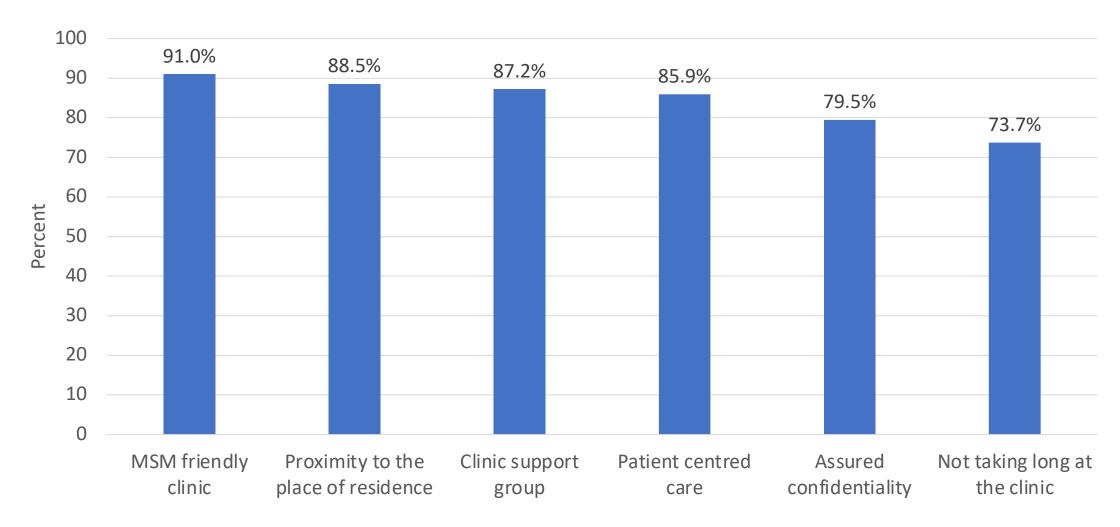
# Barriers to HIV testing and ART adherence for MSM

- Limited support with proper counseling/information after MSM become aware of their status
- Lack of information on ART regimens and appropriate care services
- There is no continuous counseling after diagnosis or proper follow-up sessions
- Cultural norms/religious practices and beliefs
- Belief that viral suppression means one is negative and may stop taking drugs
- Non-acceptance of successful models like case-manager navigation
- MSM that are still closeted do not want to come out to the program
- Poverty/socioeconomic status





#### What makes an ART refill a good experience? (N=330)





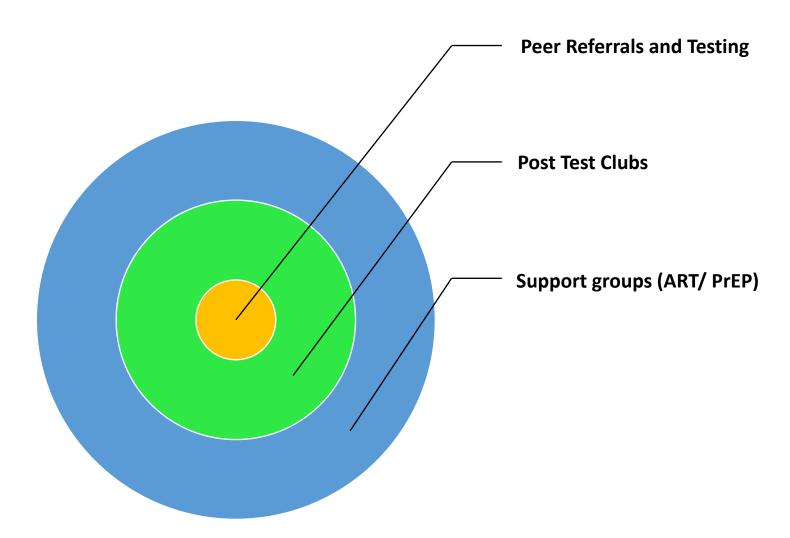
#### Why Post Test Clubs?

- Increase self-worth and self-esteem for health seeking.
- Increase agency and power for health seeking.
- Identify prevention and risk reduction options for HIVpositive people.
- Implement a menu to achieve 3SB (Safer Sexual Behavior).
- Increase agency, power and skills to access key services, effectively assess their risk for STIs/HIV, and identify gender and sexual roles that hinder or support 3SB.
- Understand the impact on risk, alcohol and substances abuse, and identify strategies for reducing risk and vulnerability.
- Increase agency and skills to promote human rights, to address stigma, discrimination and barriers to information to lead a safe and satisfying life.
- Improve the livelihood of the group.
- Empower the group members with skills and knowledge.





### Implementation of Post Test Clubs



Post Test Clubs include post-test counselling sessions, referrals and case management.

The groups comprise of 30 people and meet monthly (in-person or virtually)



### Post Test Club Impact

- Increased confidence with the community after testing
- Reduces fear of results and testing
- Improves retention
- Builds knowledge among members on prevention and care
- Improves mental health through the support groups
- Creates responsibility among members to keep each other in check
- Reduces violence



#### **Lessons Learned**

- Brings communities of key populations together
- Promotes test and treat initiatives
- Reduces stigma and fear of testing
- Increased knowledge and access to health services
- Creates visibility of hidden and hard to reach MSM within populations.
- Easy to have tailored approaches for different groups because of their needs



## **Support Group Session**







## Thank you!

