

Social Network Testing Strategy among Adolescents and Young Key Populations in Zambia

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Leveraging DSD Strategies to Optimize HIV Testing and Linkage Services

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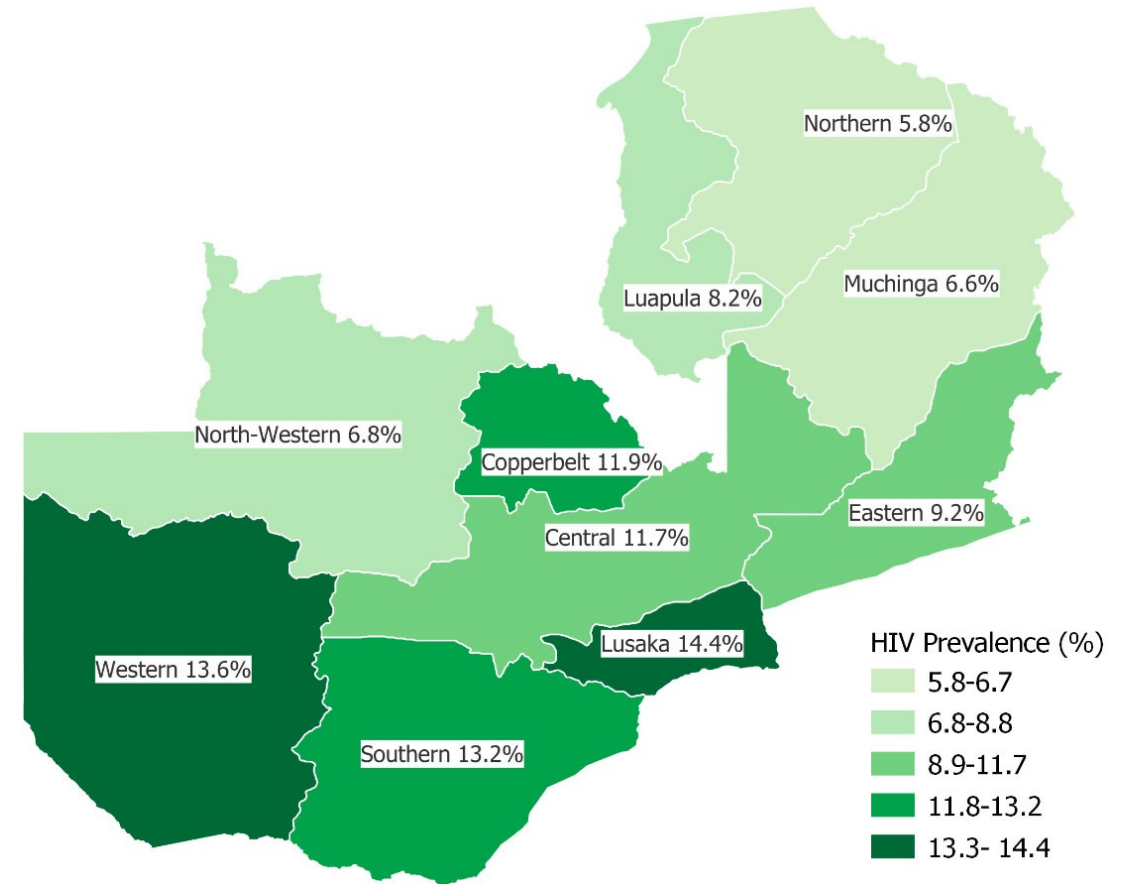


Outline

- Background
- Overview of the CIRKUIITS project
- SNS implementation among Adolescents and Young Key Populations in Zambia
- Results: HIV Testing and linkage to post test services
- Lessons learnt
- Conclusion

Overview of the Zambia HIV Epidemic

- Zambia is on track towards achieving the UNAIDS targets 95-95-95
 - 88.7% know their HIV status
 - 98% On ART
 - 96.3% Virally Suppressed
- Annual incidence of HIV among adults aged 15+ years is 0.31%,
 - ~28,000 new cases of HIV
- Prevalence of HIV among adults aged 15+ years in Zambia is 11.0%.



Background -Social Network Testing Strategy among AYP

- Adolescents and young people (AYP) aged 15-24 years constitute a third of the population, still account for 42% of all new HIV infections¹
- HIV Testing coverage; 59% of girls and 46% of boys aged 15-19²
- AYP from key populations (KPs) face multiple barriers to accessing health services
 - Social economic, legal environment, Structural
- Social network strategy (SNS) is an incentive-based HIV testing modality that works on the assumption that people in the same social network share similar HIV risk
- The CIRKUIITS project, with funding from PEPFAR CDC, aimed to enhance access to HTS for AYP KPs through SNS

1. Spectrum report 2022

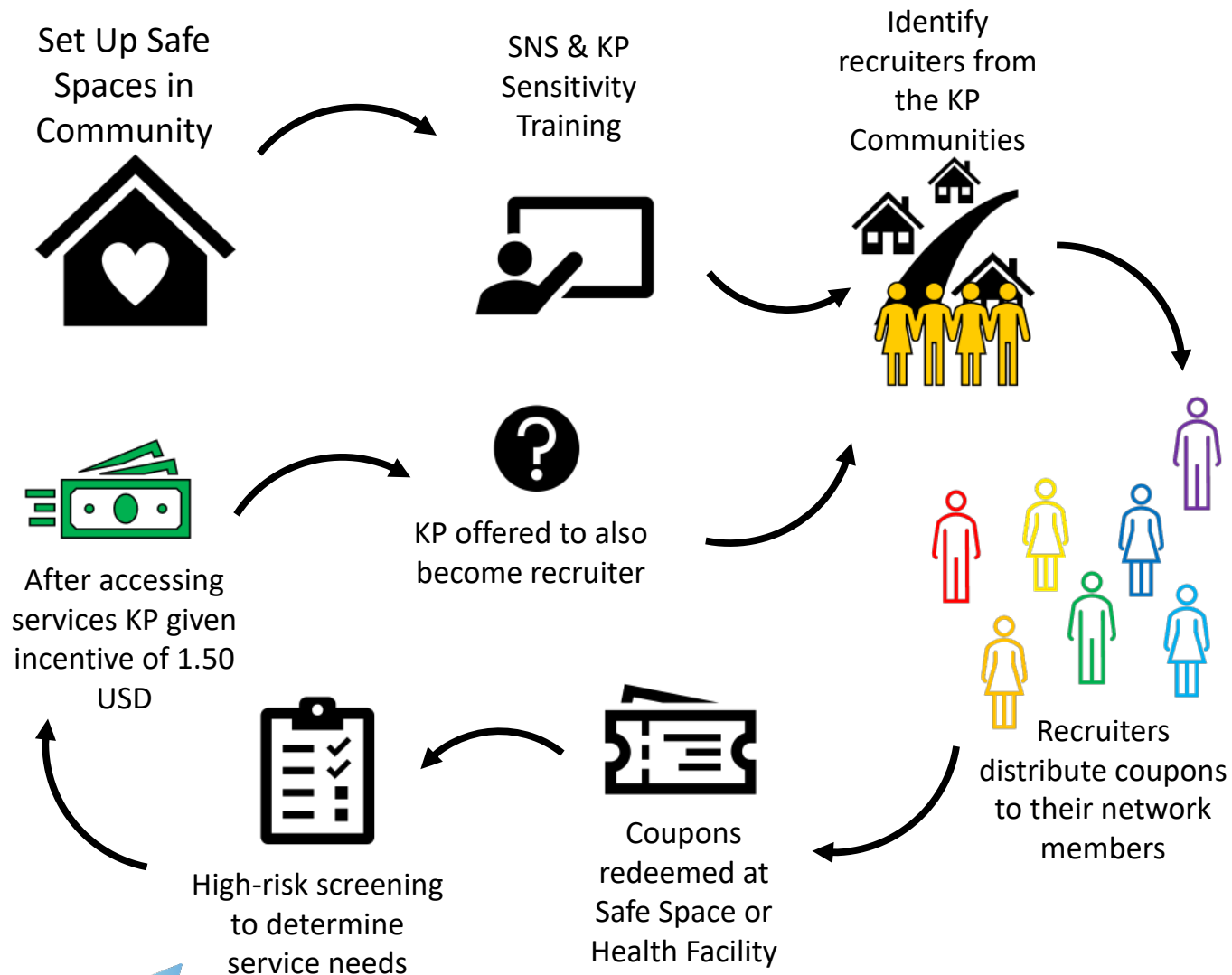
2. Zambia: DHS, 2018 - Final Report

CIRKUIITS Project-objective and scope

- Year 5 of project, funded by PEPFAR, through CDC
- **Objective:**
 - To improve HIV prevention and case-finding for key and priority populations in Zambia
- **Implementation Sites**
 - **15 DREAMS centers:** Mazabuka, Monze Mongu
 - **4 Adolescent friendly safe spaces** Nkeyema, Kalabo, Sichili and Sesheke
 - **13 KP safe spaces:** Lundazi, Chipata, Petauke, Mazabuka, Monze, Choma, Kalomo, Livingstone, Senenga, Kalabo, Mongu, Kaoma



Implementing Social Network Strategy-Steps



- SNS and KP sensitivity trainings conducted for 45 peer promoters, nurses, and community liaison officers.
- Peer promoters identified recruiters; each recruiter given 5 coupons to distribute to network members.
- Upon arrival at the safe space or health facility, KP were classified and screened for HIV high-risk to ensure they receive the appropriate services.

Results -1/3

KP AYP (15-24yrs) – Population characteristics (Oct 21 – Dec 22)

FSW-Receive money or goods in exchange for consensual sexual services or erotic performances

MSM-Male persons who engage in sexual activity with members of the same sex

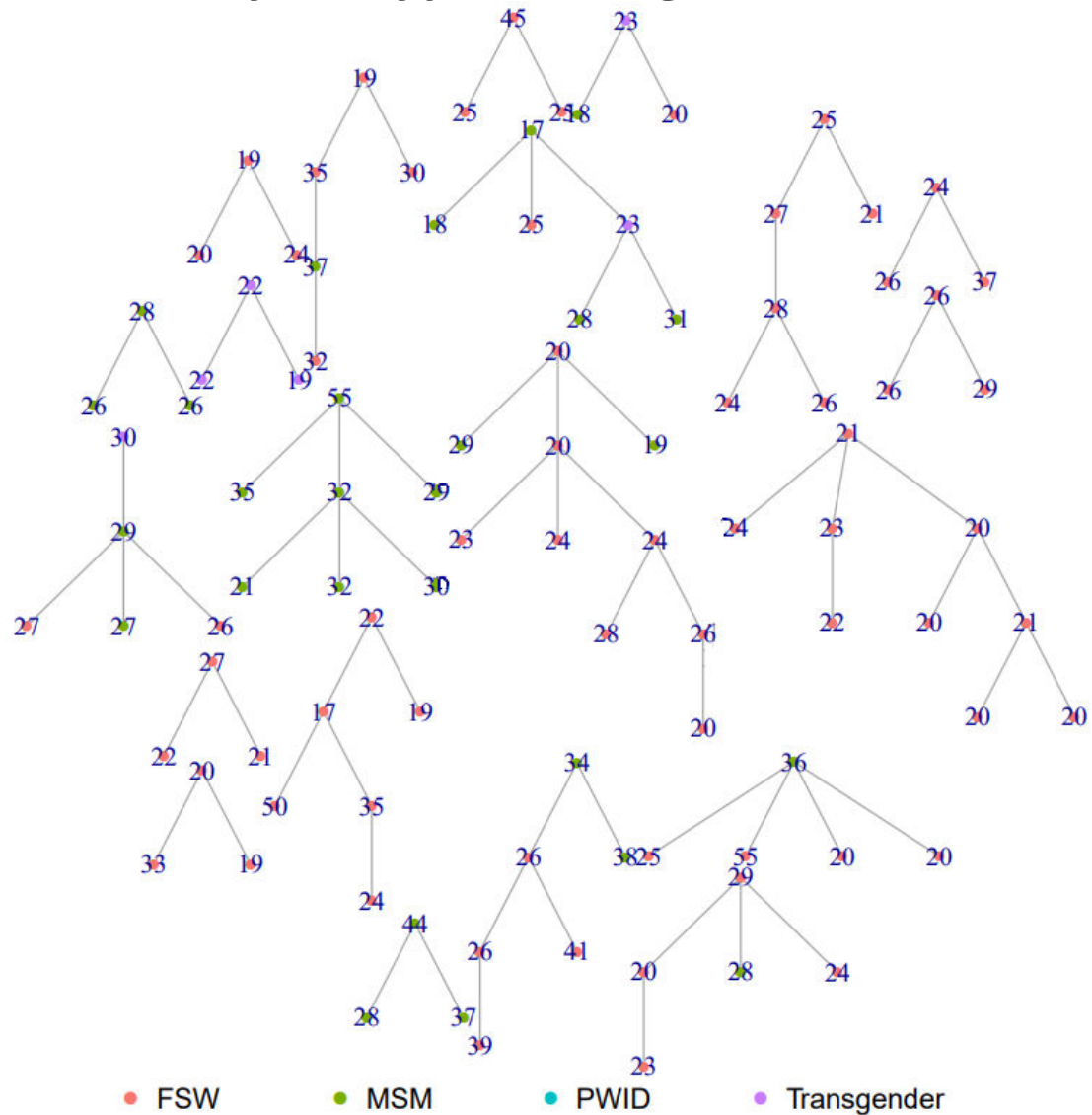
PWID-People who inject substances for pleasure

TG-Gender expression does not conform to that typically associated with the sex to which they were assigned at birth

	FSW N=366	MSM N=159	PWID N=19	TG N=42	Total N=586
Gender					
Female	366		1	25	391 (67%)
Male		159	18	17	195 (33%)
Education level					
Never been to school	10				10 (2%)
Primary	192	58	8	20	278 (47%)
Secondary	157	96	11	22	286 (49%)
Tertiary	7	5			12 (2%)
Marital status					
Divorced	2				2 (<1%)
Married	15	3		1	19 (3%)
Separated	5	2		2	9 (2%)
Single	342	154	19	39	554 (95%)

Results -1/3

SNS Tree by KP type and Age



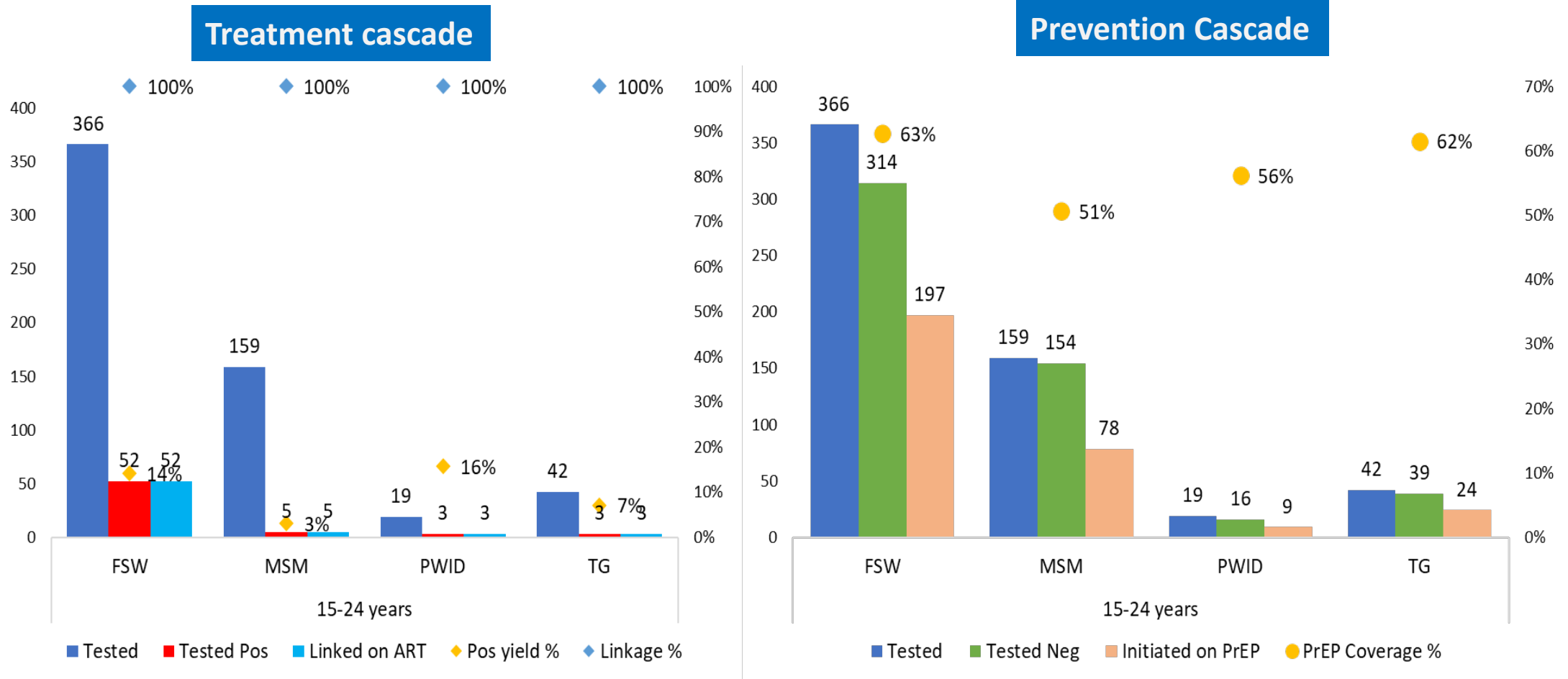
- Social network members are not necessarily AYPs
- FSW and MSM networks tend to be mixed
- PWID network members usually belong to either MSM or FSW Typology

From October 2021 to December 2022

- 207 KP AYP (15-24years) recruiters distributed 409 coupons
- 133 FSW distributed 257 coupons and 80 (31%) were redeemed
- 60 MSM distributed 119 coupons and 29 (24%) were redeemed
- 7 PWID distributed 13 coupons and 7 (54%) were redeemed
- 7 TG distributed 20 coupons and 6 (30%) were redeemed

Results -1/3

KP AYP (15-24yrs) – HIV testing, PrEP initiation and ART linkage through SNS



October 2021 – December 2022

Lesson Learnt

- SNS helped identify KPs who had not accessed HIV testing through traditional testing
- FSW recruiters had minimal challenges in inviting network members to access health services, with high redemption of coupons
- A low proportion (about half) of the coupons distributed among MSM and TG were redeemed

This may be due to the stigma and discrimination faced by these KPs in Zambia

Conclusion

- SNS optimizes Status Neutral Testing
- HIV positivity is high among AYP-KPs in Zambia; FSW and TGs have high positivity yields
- There is need for structured prevention interventions targeting PWID
- While KPs continue to face access barriers to health services, community safe spaces provide an opportunity for AYP-KPs to access HIV services.

Thank you!

