

# Mobilization strategies for adolescents in Mozambique

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Leveraging DSD Strategies to Optimize HIV Testing and Linkage Services

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#### **Presentation outline**

- Background
- Designing the model
- Description of the model
- Results



## **Background**

#### Mozambique

- Estimated HIV prevalence: 12.5% (IMASIDA 2021)
- Number of PLHIV: 2,101,222 (Spectrum 6.06, 2021)

#### **Nampula Province**

- 23 districts and 246 government health facilities (HF)
- ICAP supports HIV/TB prevention, care and treatment (C&T) services at 62 HF and a referral hospital across 19 districts
- Estimated HIV prevalence: 10% (INSIDA, 2021)
  - An important increase from previous national survey (IMASIDA, 2015 5.7%)
- Estimated number of new HIV infections in 2020: 98,000 (UNAIDS 2020)
  - In women: 61,000
- Estimated number of new HIV infections among adolescents (10-19y) in 2020: 17,000
  - Adolescent girls; 14,000
- Estimated number of new HIV infections among youth (15-24y): 39,000
  - Youth women 28,000



### Stakeholders identification

#### Identify broad stakeholders and roles.

Government	Implementing (clinical) partner	Community partners	Private sector
<ul> <li>MOH</li> <li>Provincial Health Directorate (DPS) and Provincial Health Services (SPS)</li> <li>District health directorate (SDSMAS)</li> <li>Technical Scool</li> </ul>	• ICAP	<ul> <li>Coalizão</li> <li>Pathfinder</li> <li>Action Aid</li> <li>Niwwanane</li> <li>IPAS</li> <li>FDC</li> <li>Ovarelelana</li> <li>ACNUR</li> </ul>	• Universities



## Preparatory steps

- Mapping community and facility partners supporting activities targeting adolescent and young people (AYP)
- Mapping preferred locations and times where AYP congregated
  - WHERE? Congregation areas (public parks), universities and technical schools.
  - WHEN? Friday afternoon and Saturdays
- Meeting with local partners and government to present strategy, define package of services and model of implementation and define roles and responsibilities
- Development of a responsibility assignment matrix
- Procurement of materials to ensure services implementation as well as registers/tools
- Estabilishment of Partnership Agreements with Technical School and Universities
- Submission of formal requests for the Municipal government to allow offering services at public parks



### Model of service delivery

- Allocating of a mobile brigade:
  - The offer of comprehensive HIV prevention, C&T integrated into general health services (e.g. MCH, outpatient consultation, etc...)
  - At universities and technical schools use identified school space and allocate a full team of NHS clinical staff (1 clinical officer, 1 MCH nurse, 1 lay counselor) supported by ICAP
  - At parks, allocate a mobile clinic with a ICAP hired clinical staff (1 clinical officer, 1 MCH nurse, 1 lay counselor)
  - Train community workers from other partners to create demand for HTS and PrEP
  - Added recreational activities, including music, sports and theatre as part of service delivery, including a school competition



MB in Nampula for adolescentes and youth





## Model and package of services provided for AY in Nampula Province at community

#### **ICAP-supported DSD models:**

 Community-based services through mobile units, which can be mobile clinics (MC) or double-cabin vehicles equipped with tents, foldable tables and chairs.

#### Logistics support:

- Transport and sample collection
- Allocate M&E tools and job aids
- Provide materials and consumables

# HIV prevention and C&T services integrated with general health services in all models.

#### Services include:

- Outpatient consultation
- COVID-19 and HIV screening and testing
- Condom distribution
- PrEP initiation and continuation
- STI and TB screening and treatment initiation
- Psychosocial support
- Sample collection (EID, VL and TB)
- Maternal and child health services (ANC, FP, at-risk children consultation, cervical cancer services)
- ART initiation and continuation including multi-month dispensing (3MMD, 6MMD, DDD)



#### **Demand Creation interventions**

- Organized recreational activities including:
  - Concerts
  - Sports competitions
  - Theatre competitions between schools and individuals
- Awarded certificates and small prizes such as phones for winners.
- Worked with AYP influencers to disseminate key messages in the community through talks, community dialogues, and producing radio debates to promote demand for Mobile Brigades and to strengthen HIV and health literacy



Award recognition



ICAP and local OCB organizing awards



## Prevention and C&T services currently dedicated to AY in Nampula Province

#### **Mobile Brigade**

Name	Frequency	Model
Universidade Rovuma	Monthly	Using University space and NHS staff from the fixed closest HF
Universidade Catolica de Moçambique	Monthly	Using University space and NHS staff from the fixed closest HF
IFPLAC	Weekly*	Using University space and ICAP DREAMS nurse from closest HF

#### **Mobile Clinic**

Area	Frequency	Model
Nampula Park	Monthly	Allocate Mobile clinic and HR supported by ICAP



## Results

Table1.HIV prevention and (	C&T cascade among	adolescents at MB/MC			
in Nampula. June 2022/January 2023					
Number AVD ettending NAD	F	720			
Number AYP attending MB  services	М	544			
sei vices	Total	1264			
	F	524			
Number tested for HIV	M	405			
	Total	929			
	F	16			
Number tested positive for HIV	M	12			
·	Total	28			
Yield (%)		3%			
Links d to two atms and (0/)	F	16			
Linked to treatment (%)	M	12			
	F	188			
Number eligible for PrEP	M	150			
	Total	338			
Initiated DuFD(0/)	F	182 (97%)			
Initiated PrEP(%)	M	143 (95%)			



#### **Lessons Learned**

- Designing service delivery models that respond to AYP needs and interests is an important strategy to reach this subpopulation.
- Allows to reach AYP especially boys and young men
- High proportion of boys and young men initiating PrEP
- Involvement of community partners and government is crucial to address gaps in access to HIV prevention, care and treatment at community level. Coordination among partners ensures cost-effective activities – costs are split between partners
- Implementation requires flexibility; service delivery should be contextualized according to the needs of each subpopulation



Young population attending MB





## Thank you!

