

Secondary Distribution Pilot of Self Testing through Community Interventions OVC and DREAMS (Mozambique)

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BACKGROUND / INTRODUCTION

Mozambique has adopted the UNAIDS goals of 95-95-95 by 2025, which will allow the country to achieve control of the second largest HIV epidemic in the world. One of the persistent challenges to the achievement of this goal is the first 95, PLHIV that know their status. According to the latest population bases survey, only 71.6% of the estimated 2.4 million PLHIV living in the country know their status.

Over the last 2 years, a new strategy for self-testing for reaching hard to test populations has been expanded nationally and is available in all of Mozambique 11 provinces. This approach is orientated to fill the traditional HIV testing gaps, which include key and high risk populations as well as populations that don't frequent health services such as young people and rural areas.



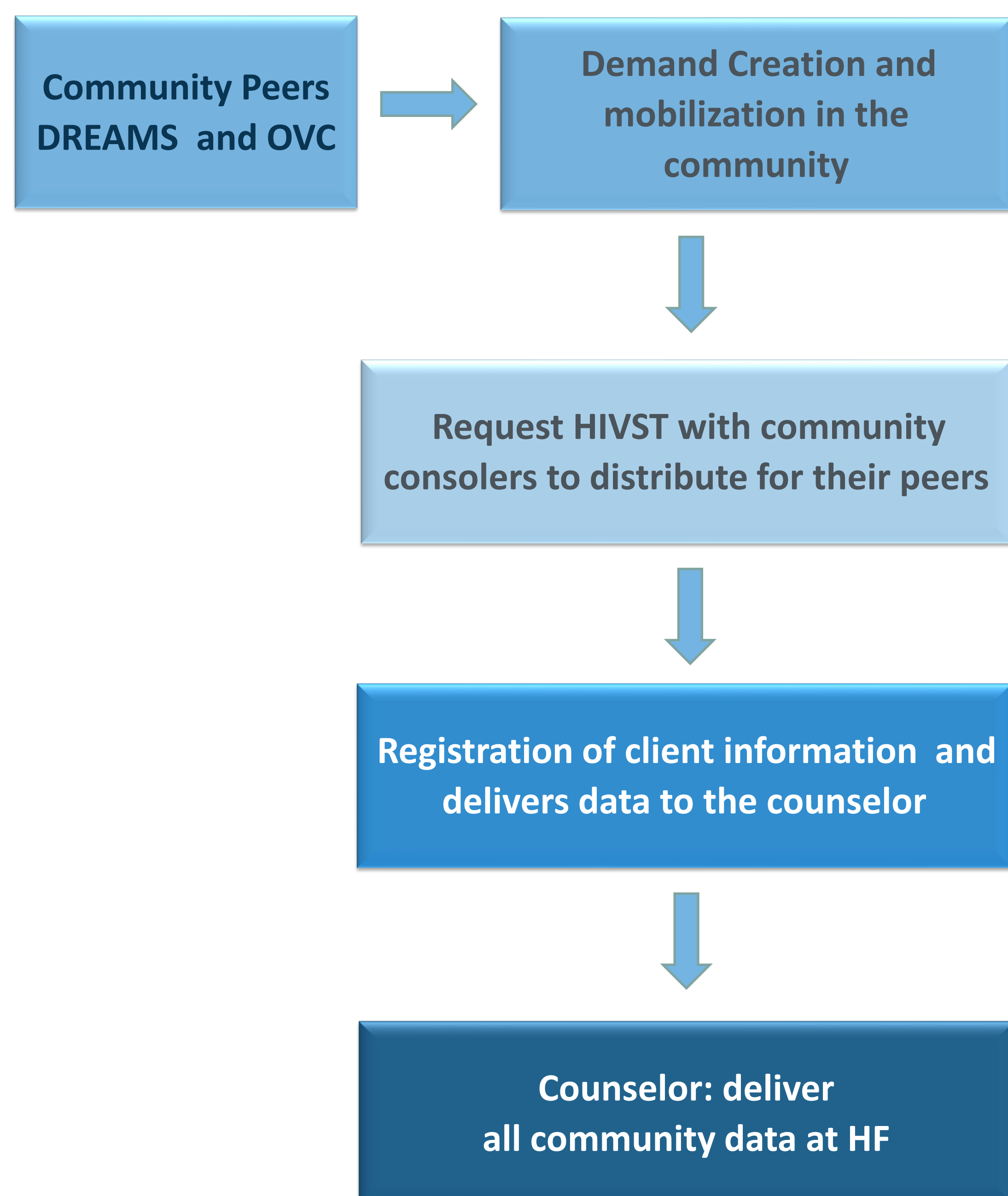
METHODS

Through ANDA (National Association for Self-Sustained Development) and ECHO, the Ministry of Health piloted a secondary distribution of HIVST, carried out by Community Peers from DREAMS and OVC projects, to reach and achieve Adolescents and Young People. The pilot was implemented from August 2022 to May 2023, in Manica Province, which is a relatively rural province in the center of the country.

The program participants for the two projects were as follows:

1. DREAMS: AGYW and their sexual partners.
2. OVC: Adolescents 15-17 years old and their caregivers.

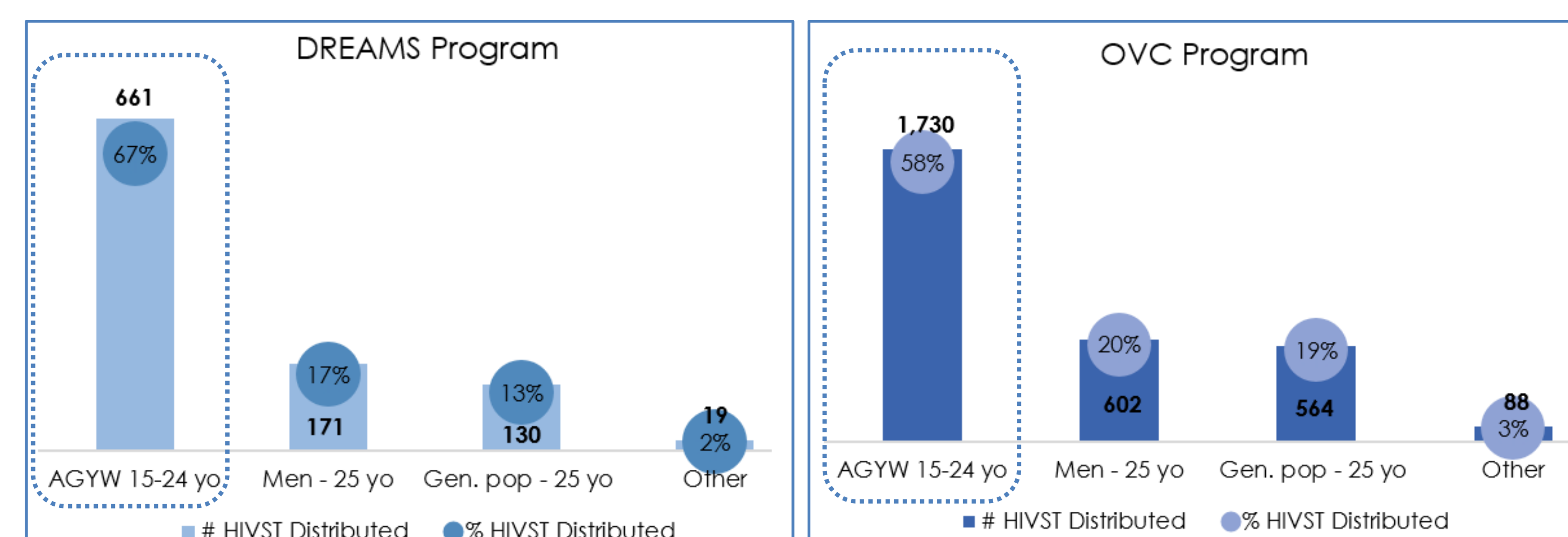
The strategy of the pilot is described in the diagram below:



RESULTS

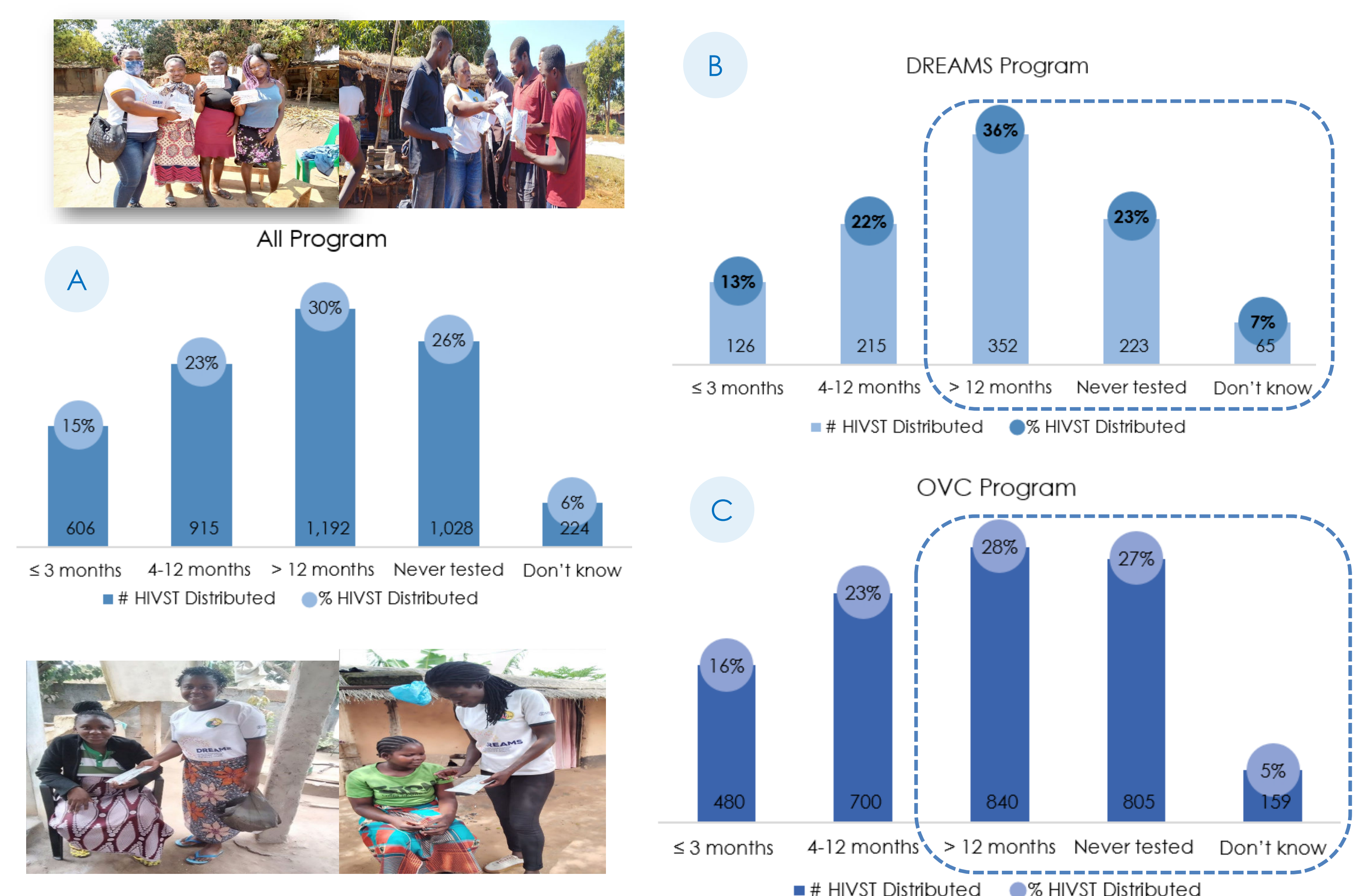
In both of the approaches, OVC and DREAMS, the distribution of HIVST using community peers allowed to reach adolescents and young people, which are population with high-risk and vulnerable (by around 67% for DREAMS and 58% in OVC) as showed in figure 1.

Figure 1: HIVST kits distributed by program and population group



As demonstrated in figure 2-A, most of participants had been tested for more than 12 months 30% in all program (by around 36% for DREAMS and 28% for OVC, figure 2-B and C respectively), important to highlight: 23% for DREAMS and 27% for OVC had never been tested for HIV in their life.

Figure 2: HIVST kits distributed by program and age group



DISCUSSION

To further reach the priority population in access to HIV diagnosis, the OVC and DREAMS programs must guarantee the distribution of HIVST to all eligible users through awareness raising in public places and door-to-door offering (Even in households that are not part of the OVC and DREAMS program).

RECOMMENDATIONS AND LESSONS LEARNED

In addition to the OVC and DREAMS target group, the HIVST should also be extended to other eligible groups that can be identified at the time of creating demand.

The promotion of the HIVST strategy in communities, using local media, radios and public spaces helped in the dissemination of information and facilitated the work of community actors.