

# Mobilizing Men for dHTS

## Highlights from Zambia's Differentiated Service Delivery Strategic Initiative (DSD SI)

Zambia Case Study

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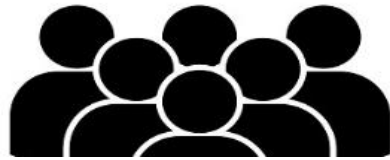


# Challenges with Reaching Men in Zambia

- Poor health seeking behavior
- Some places of work are not flexible in allowing men the free time necessary to visit health centers (any day missed is deducted from their salary)
- Most men are free after working hours but very few facilities offer after-hours health services
- Limited human resources to offer extra health community services to reach men
- Not enough trained personnel to handle men-specific needs
- Self stigma –perception that “only weak men access health services”
- Not wanting to be attended to by female health care workers

# Approach to Reaching Men: DSD SI Model

- Community Health posts
- Community outreach (such as visiting the mines)
- Men's Clinics



Men's Clinics are specialized clinics based at an established health facility, catering to adolescent boys and men only



Preferably operated by male-trained staff with fast tracking of adolescent boys and men for services

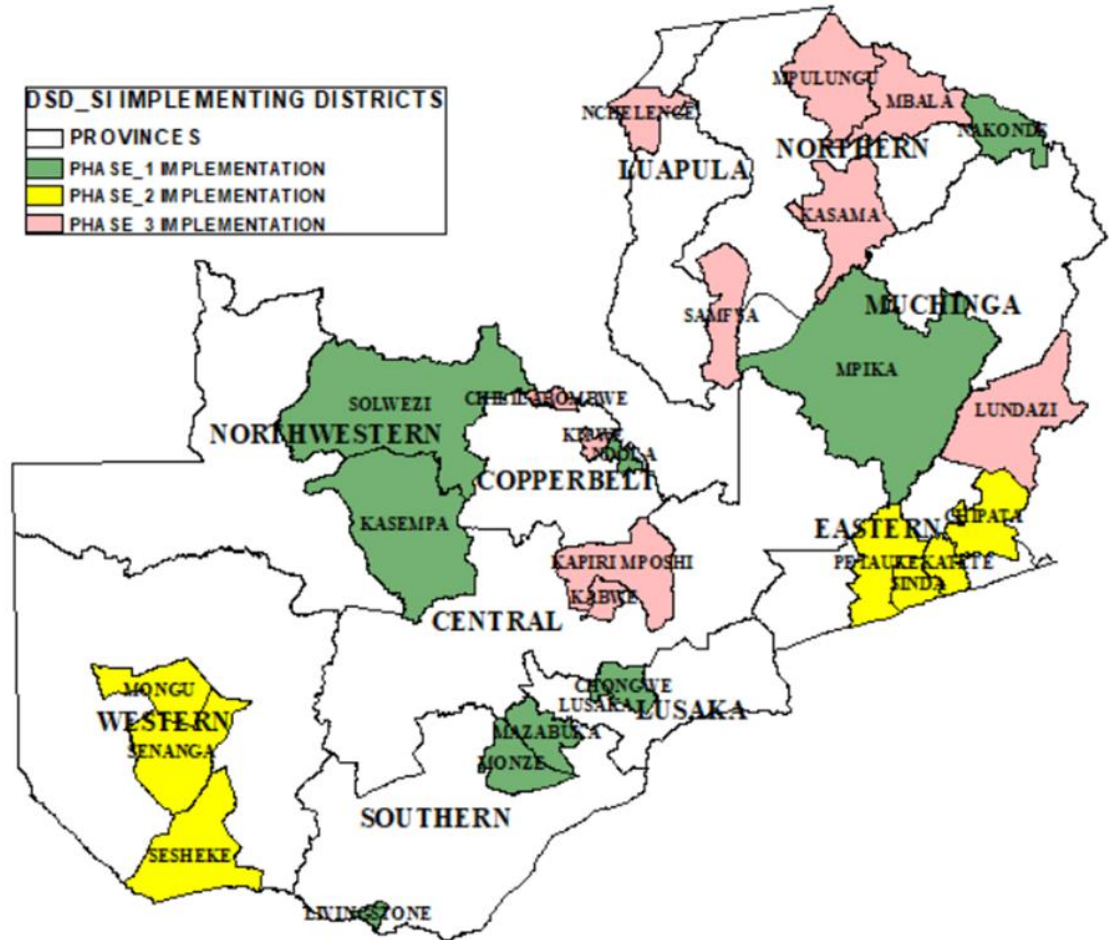


HTS, HIV care and provision of male-specific services such as VMMC, ED, male infertility, prostate cancer screening etc.

# Implementation Coverage

Implementation was done in all the 10 provinces of the country.

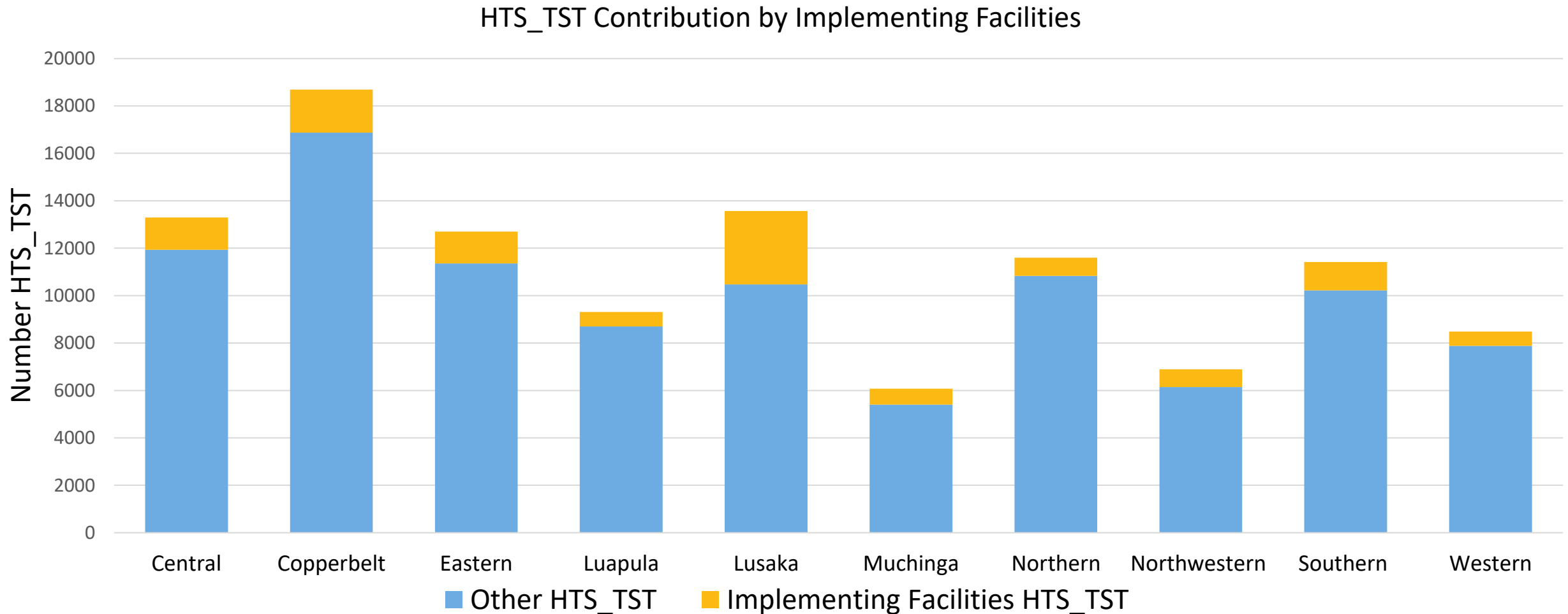
However, this was only in selected districts.



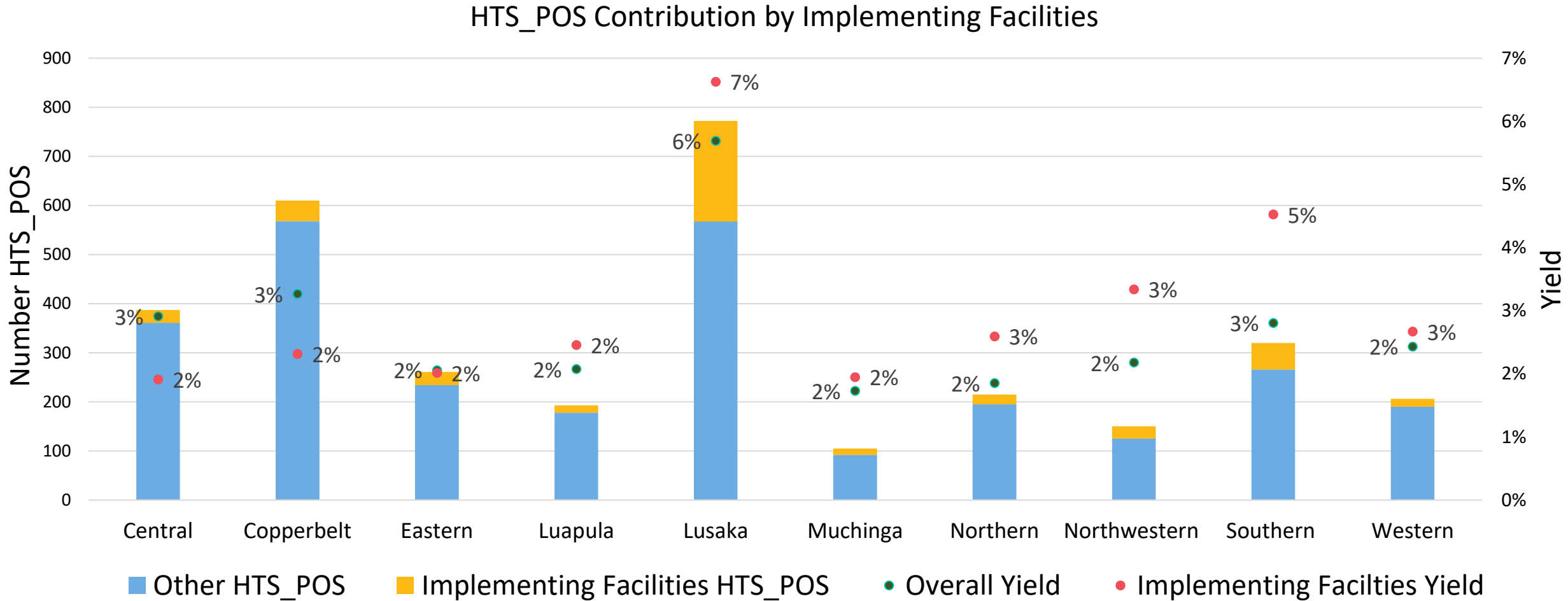
# DSD Strategic Initiative Implementation Highlights

- **286, 217** men sensitized through a digital intervention
- **152** Men's Clinics and **131** Community Posts implemented
- Healthcare worker capacity building for DSD:
  - Trained **237**
  - Mentored **364**
- **10** Provincial DSD Task Force teams established

# Contribution of Implementing Facilities to HTS Numbers, December 2023



# Contribution of Implementing Facilities to Case Finding, December 2023



Data source: DHIS2 MOH





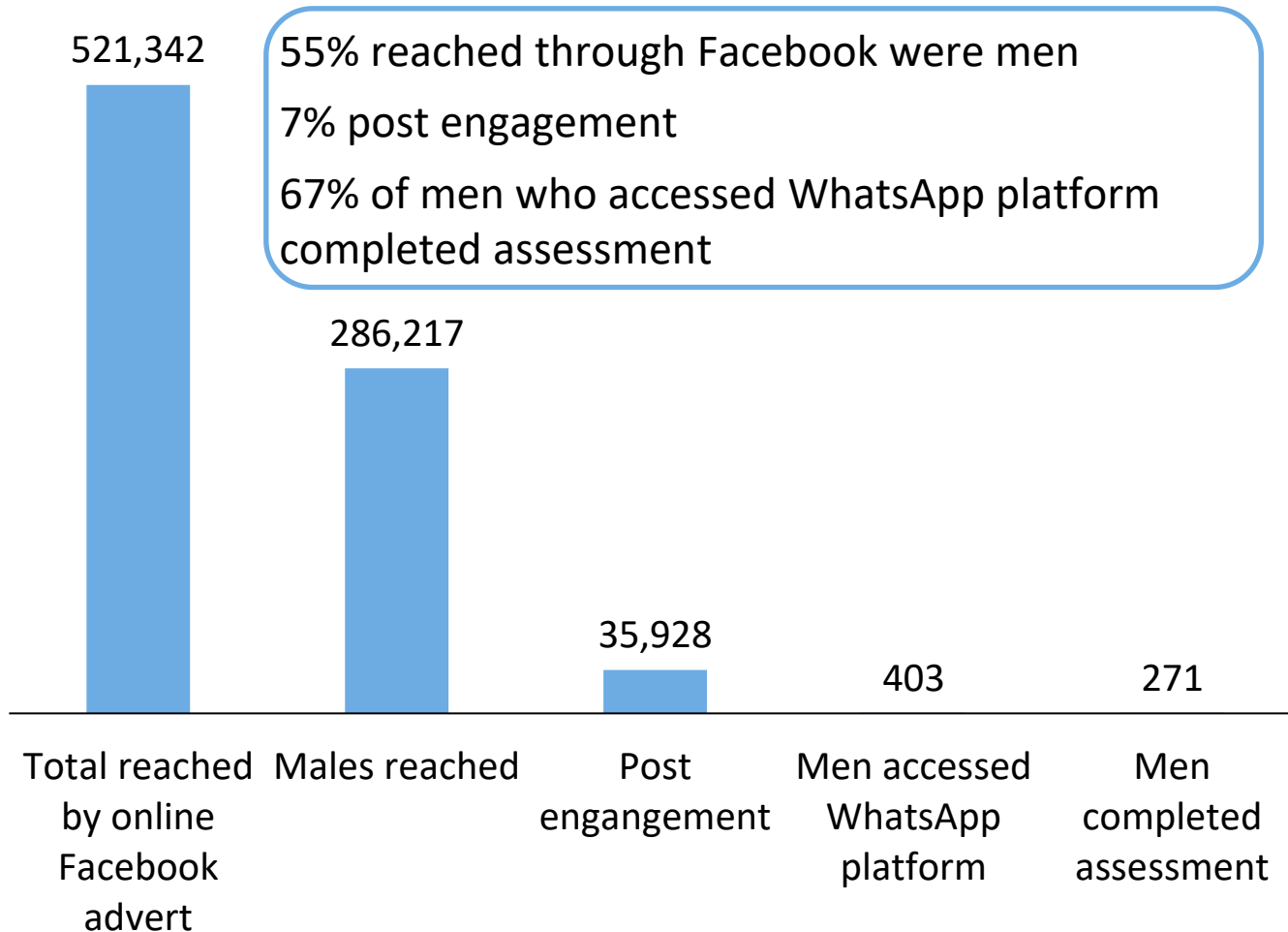
# Virtual Interventions to Reach Men

- A WhatsApp demand creation tool was developed to raise HIV risk awareness among men and facilitate access to HIV services.
- WhatsApp-based interactive self-screening tool for men was implemented using:
  - WhatsApp Business Cloud API
  - Python
  - PostgreSQL
- Access using QR code or link starts a self-assessment 2-way interaction between the client and the system
- Clients need internet connection and smart device for interaction with platform
- Implemented in the 5 provinces

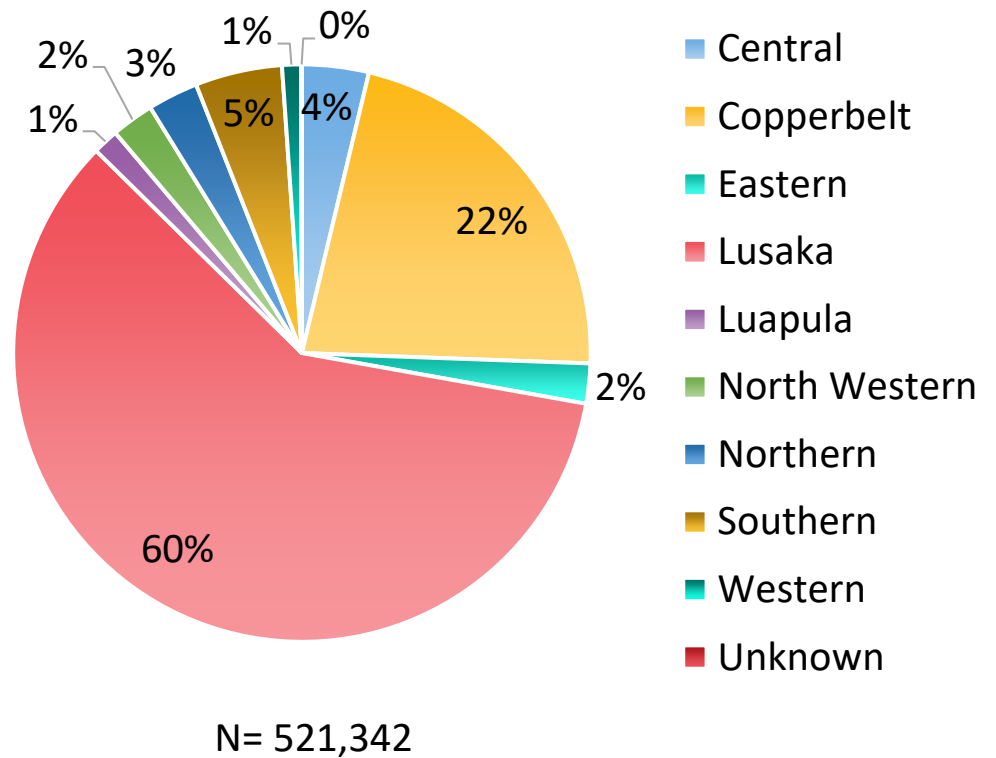


# Virtual Interventions Results February 2023 to March 2024

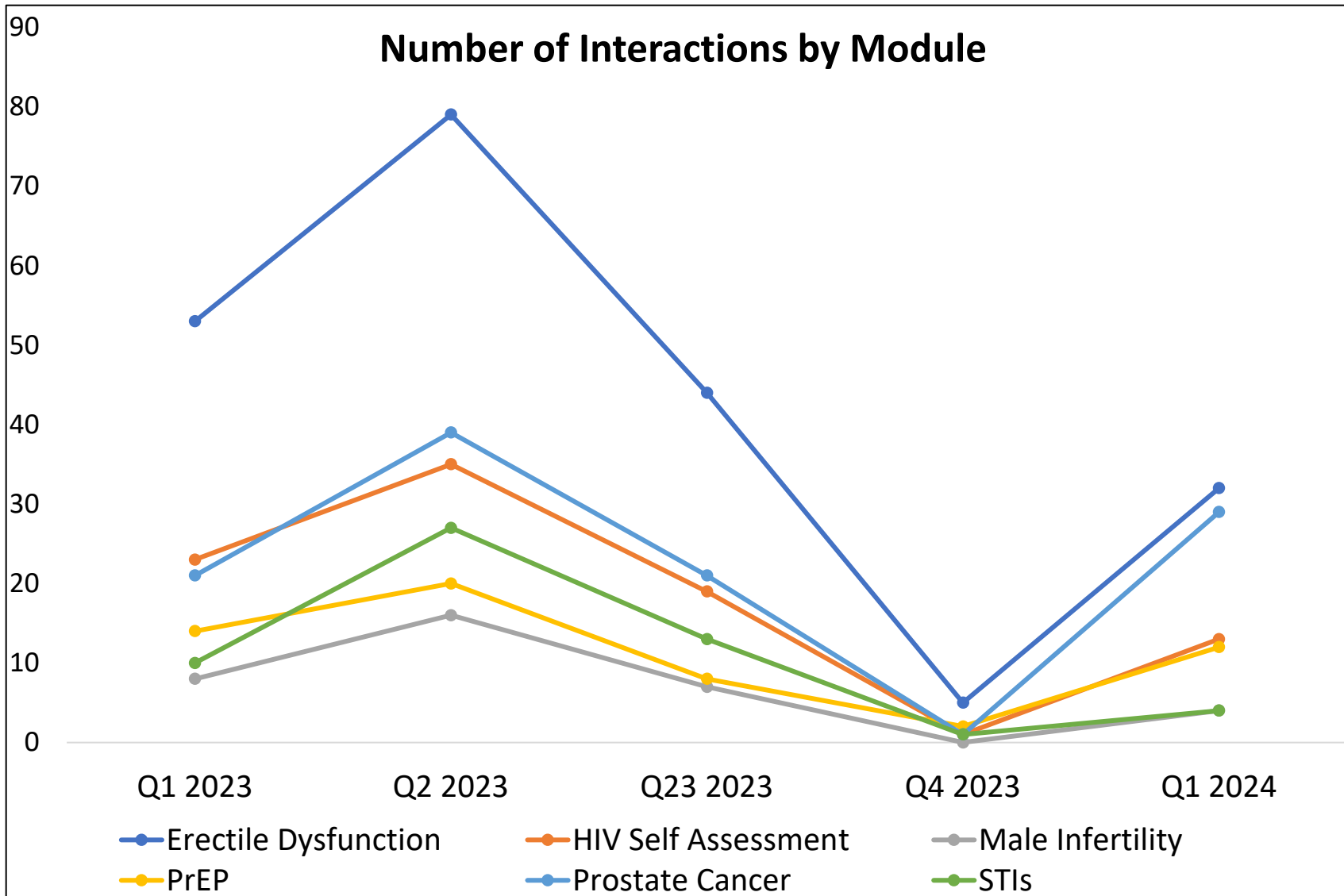
## Digital Intervention Platform Numbers



## Individuals Reached by Facebook Adverts by Province



# Overall WhatsApp Usage Trend by Module (Q1 2023- Q1 2024)



- Since implementation started in February 2023, 403 men have been reached with 561 interactions.
- Only 271 (67%) interactions have been completed.
- The Erectile Dysfunction module has been used the most with 213 (38%) interactions.
- The least used is the Male Infertility module with only 35 (6%) interactions.

## Best Practices

- Involvement of implementing partner (IP) staff during technical supportive supervision improved coordination at provincial and district levels
- Continuous engagement of provincial IP to scale up the Men's Clinics beyond targeted districts.
- Rolled out the digital platform in all provinces and sent out online adverts through Facebook to improve coverage.

# Challenges

- Implementation of digital interventions is done at a cost from some service providers, which could make sustainability difficult.
- Inadequate support from some IP in certain provinces due to competing priorities from funders.

# Lessons Learned

- Investment in adverts and the use of MOH social media would help reach the intended target.
- Community engagement was instrumental in establishment and maintenance of the Community Posts.
- Including DSD activities in the MOH Global Fund grant application is key to improving DSD implementation at facility level. This has been done in the GC7 application.
- High-level engagement with funding agencies improved support from IPs for implementation and capacity building of healthcare workers.



# Thank You!

