

Linking Men to Post HIV Testing Services in Zambia

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Outline

- HIV overview in Zambia
- Strategies for improving case finding in men
- Achievements
- Challenges
- Next steps



HIV Overview in Zambia 95-95-95

Population	1st 95 (%)	2nd 95 (%)	3rd 95 (%)
Adults 15+	89	98	96
Women	90	99	98
Men	87	99	97

ZAMPHIA 2021



Gap & Intervention

Gap

□The first 95 for men lags behind both the adults 15+ and the women

Prioritizing and Targeting Men

□Aim to increase number of men aged 15-49 accessing HIV services through establishment of Men's Clinic and Community Posts

DSD Strategies to Reach Men

- □Policies and strategies to reach men 15-44yrs with HIV services
- □ National scale-up of DS Developed D models targeting men to improve the delivery of HIV services across the cascade.
- □ Develop Virtual Intervention to create demand for men
- □Intensify Advanced HIV Disease screening and management



Strategies for Improving Case Finding in Men to Close the Gaps in Zambia

Establishment of Community HIV
Care and Treatment posts where
men can easily access basic
health services

Establishment of Men's Clinics in the health facilities to offer male friendly health services

Increase the number of men 15- 49 years accessing HIV services

Intensified Advanced HIV Disease (AHD) screening and management among men.

Develop a robust monitoring and evaluation (M&E) program



Process of
Reaching Men in
Zambia through
the Men's Clinic
approach



A specialized
Clinic within an
established
health facility,
catering for
adolescent boys
and men only



operated by trained male staff with incorporation the fast tracking of adolescent boys and men for service provision



Platform for differentiated service delivery:

- HIV Testing
- Test & Start
- Routine Monitoring of HIV Care
- Provision of male specific services such as VMMC, ED, Male infertility, Prostate cancer screening etc.









Reaching and Linking Men in the Community via Community Health Posts



An easily accessible site in the **community** for decentralized service delivery e.g., markets, bus stations, church grounds, fishing camps



Operated by trusted local staff trained in customer care and in the core values of the model



Platform for differentiated service delivery:

- HIV Testing
- Test & Start
- Routine Monitoring of HIV Care
- Referrals to certified parent facility

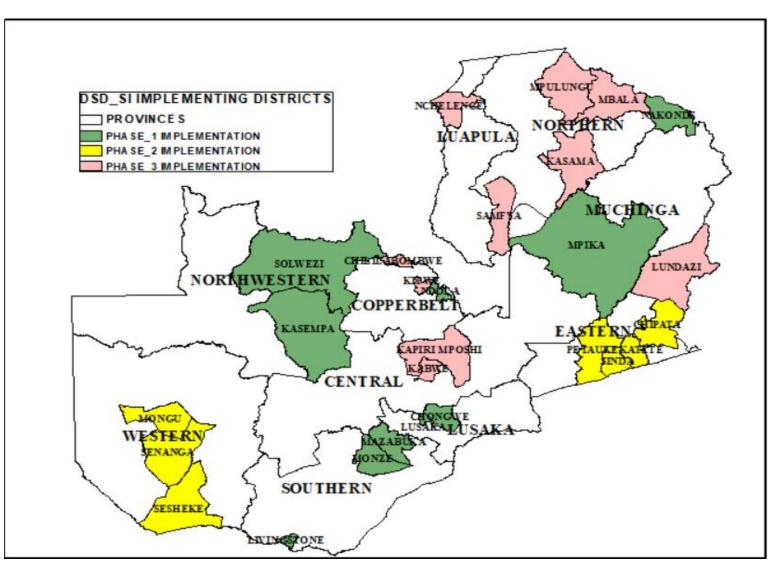
ICOP Global NETWORK

Districts Implementing DSD SI Models in the Zambia, Dec 2023

- 10 Implementing Provinces
- 30 implementing Districts
- 27/27 Target Districts

Phased approach_ Men's Clinic implementation

- Phase 1: Lusaka, Southern, Muchinga and Northwestern (Following trainings in November 2021, implementation began in January 2022)
- Phase 2: Western, Copperbelt and Eastern(Following trainings in March-April 2022, implementation began in May 2022)
- Phase 3: Central, Northern, Luapula (Following trainings in May 2022, implementation began in July 2022)





^{*}There are flag ship sites that have implemented men's clinic since 2018 in Lusaka Province*

Improved DSD reports in national EMR

Reaching Men: Achievements at the end of project 2023 **286, 217** Men sensitized through a digital intervention

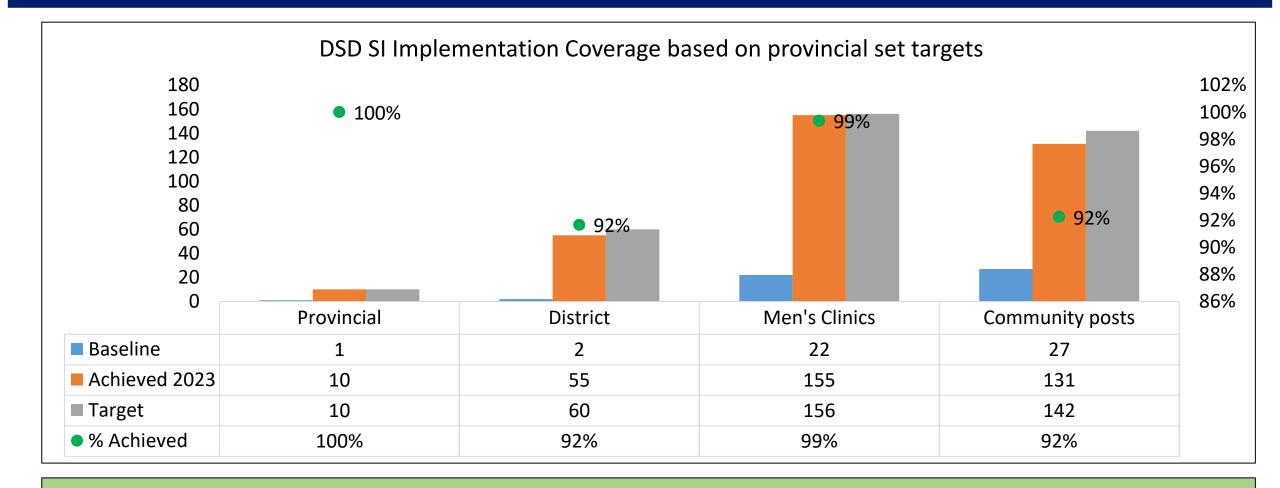
155 /156 99% Men's Clinics and 131/14292% Community Posts implemented

Capacity Building Program with training for 237 and mentoring for **364**

Established 10 Provincial DSD Task force teams



Implementation Highlights DSD Models Scale up



- 60 districts, 156 men's clinics and 142 CPs have been targeted by the province in 2023 as compared to 58 districts, 132 Men's clinics and 133 CPs in 2022.
- 55 districts, 155 men's clinics and 131 CPs have been achieved by the province in 2023 as compared to 43 districts, 64 Men's clinics and 67 CPs in 2022...

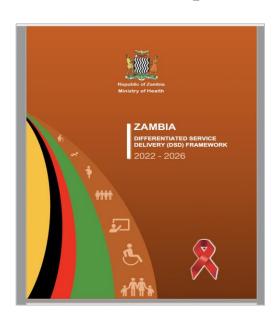
Post Project Performance

Men clinic: increased from 155 in 2023 to 182 in Q1, 2024 (increased by 18%)

Community post: increased from 131 in 2023 to 137 Q1,2024 increased by 4%)

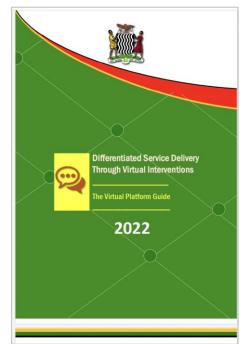


Implementation Policy Guidance 2023



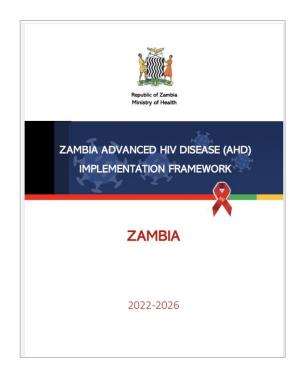
DSD framework Key components:

- dHTS models
- dART model for ROC established on care RoC at risk of HIV
- Scaleup Plan



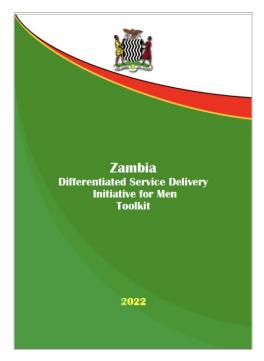
DSD virtual platform guide Key components:

- Development processes
- Implementation process
- Self assessmentMessages



AHD implementation framework

- AHD Implementation Plan
- Supply chain and Commodity management
- Monitoring and

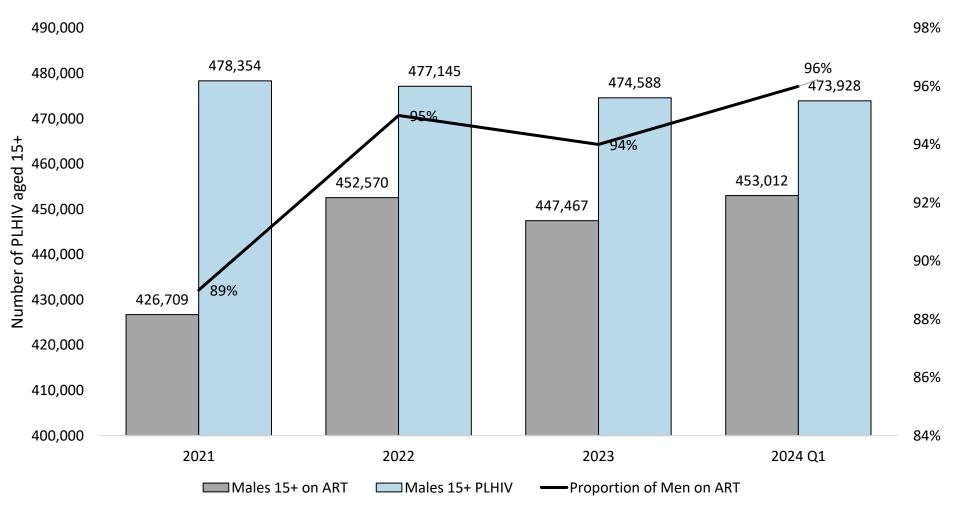


DSD initiative for men toolkit

- Introduction to DSD for men
- Men's Clinic models
- Community post model
- M&E
- Demand creation



Men 15+ Tx_curr contribution against estimated PLHIV Trends





Challenges

- High costs of setting up and maintaining community posts, limits linkages for men that test in the community.
- Limited human resource capacity to offer testing and treatment after hours.
- Self perception of being judged or labeled as "weak.
- Difficulty taking time off work or away from family responsibilities
- Low coverage among the AYP and 25-34 compared to the 35+

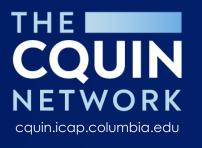


Next Steps

- Increase coverage of men's models. There is increased linkage in sites with men's clinics
- Continue monthly updates on implementation through subnational DSD taskforce
- Evaluation of impact of men's models







Thank You!

