

Our Guys!

"Yaba Guy Che": *for the guys*

Formative research to co-develop an intervention to increase men's HIV service use in Zambia

Outline

- Background and methods
- Summary results from:
 - Qualitative
 - Crowdsourcing
 - Time location sampling survey
- Intervention design and Next steps

Background

- Men less likely than women to access HIV services, including HIV testing
 - 52.0% of men tested in last 12 months compared to 64.1% of women (DHS, 2018)
- Men less likely than women to know their HIV positive status, initiate ART at later stages of infection experience higher levels of morbidity and mortality
- Without knowledge of their HIV status:
 - HIV positive men more likely to transmit HIV to sexual partners
 - HIV negative men have limited access to prevention services



Co-develop a **multi-component intervention** to reach men with HIV services, from HIV testing to linkage to prevention and care services

Study location

- Kanyama, Lusaka
- Study population: men aged 20-35; women aged 18-35 and stakeholders
- Crowdsourcing all individuals aged 18+

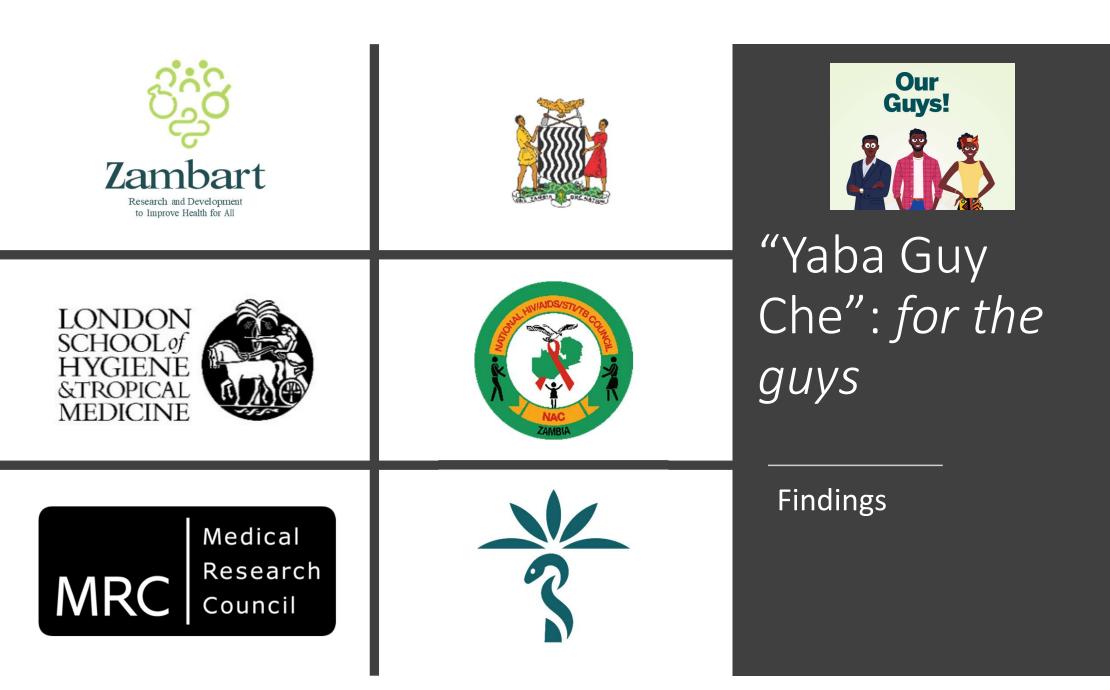
Methods

- Focus Group Discussions
- Mobile phone-based chat groups
- In Depth Interviews
- Crowdsourcing
- Time Location Sampling Survey
- Intervention Development workshops









Perceptions related to men's HIV testing uptake

- The general perception is that few men have tested
 - Men lack accurate information about other men's testing behaviors
- Lack of accurate HIV information perpetuates stigma & fear of testing

"I think you should start first by advising the community to **say they should not be laughing at people who are HIV positive** and encourage them to not fear accessing HIV testing or getting HIV drugs...you can invite a group of guys and counsel them; teach them"_ Women 18-24 years

 Gender constructs around HIV e.g., belief that women can handle disease / HIV better than men

Community and individual level barriers

• Negative community narratives and misconceptions about HIV

"I think what is needed is to do a lot of counseling for men because a lot of them just believe that **once they find me with HIV then I will die** so if there are people who can tell them that they will not die and they may live for a long time, it would be easier"_ Man 20-24 years

- Limited knowledge of other prevention tools men only mentioned condoms
- Household gender norms e.g., "childcare is for mothers" perpetuates feminization of health care and services
- Gender power relations make it difficult for couples to discuss HIV testing
- Fear of stigma and gossip among friends discourages testing/seeking treatment, misinformation among friends and normalization of poor-health seeking behaviours among men

Service delivery factors

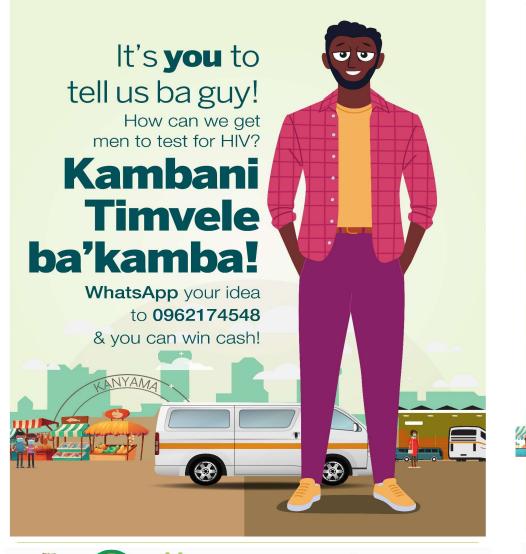
- Delivery and organization of HIV services
 - Community HIV testing and HIVST
 - Provider initiated testing during VMMC
 - Location, convenience and privacy considerations
- Provider age or gender older male facilitator most preferred
 - Speaks to gender relations and power dynamics between men and women
- Isolated HIV testing/treatment departments within health facilities
- Health facilities seen as "women's spaces"

Findings from *peer support* chat groups

- Participants were able to share personal problems and get support from others
- PEP and PrEP were new topics for many
- Anonymity and privacy features of the application encourage interaction

PrEP conversations

@Geezo	And what do the tearm PREP means
@Dash	Pre-exposure prophylaxis (or PrEP) is medicine taken to
	prevent getting HIV.
@Geezo	@all How does PrEP work to Reduce HIV Infection?
@Brown	@all so can prep be taken by people who have the
	virus????????????????????????????????????
@Kaliz	@all How would you know if PrEP is right for a person?
@Brown	@all so what is the best protection between prep and
@Jomo	Educate us more about the use of this drugs prEP myself I
	don't much about it.



Kambani Timvele!

Ninjila bwanji yetinga sebenzese kutandiza bamuna bonse kuti baende ku HIV testing?

WhatsApp your idea & you can win cash!

1st Prize **K2,000** 2nd Prize **K1,500** 3rd Prize **K1,000**

How to enter?

1. Tell us your name & phone number 2. Tell us your idea (video or voice note) 3. Submit via WhatsApp 0962174548

Who can enter?

Anyone can enter, Men and Women, individuals or groups, aged 18 years and older, who live in Kanyama.



















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Identify and target places where **men are found** (Bolabet etc)

Using experienced and mature males as counsellors

Facilitate for testing to be done in areas where **men are not known**

Use platforms that drive and influence men's behavior.

Men tend to enjoy socializing, watching sports, and engaging in activities that help them develop their businesses



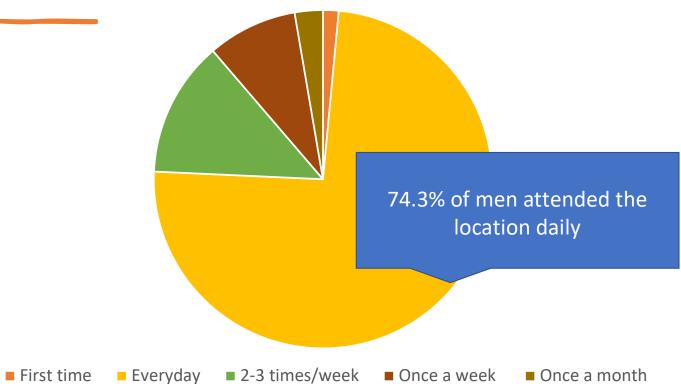
Time Location Sampling Survey

Aim: to determine whether the method is **feasible** with men and to measure knowledge of HIV status among the men reached

- Rather than select households random selection of places where population of interest are found
- Time location sampling survey with ~250 men aged 20-35 years
 - Socio-demographics
 - HIV testing history, access to HIV services and sexual behaviours

How often did men come to the location of recruitment?

N=339 men recruited from 16 venues



Perceptions regarding men's HIV testing

- Most men (77%) agreed: *People in Kanyama think it is important for men to test for HIV*
 - 85% agreed that their **peers** think it is important to test for HIV
- How many men your age in Kanyama have ever tested for HIV?
 - 46.3% selected "Few (less than half) of men my age"
- Almost all (93%) had ever HIV tested
 - 57% had tested for HIV in the last 12 months

Preferences for HIV testing

• Where should testing be delivered?

Kantemba; Bar; Barbershop; Mobile van; Tent; Church; Betting Shops; Market; Car

wash / Garage

✓ 95% responded yes to mobile van

 \checkmark 97% responded yes to a tent in the community

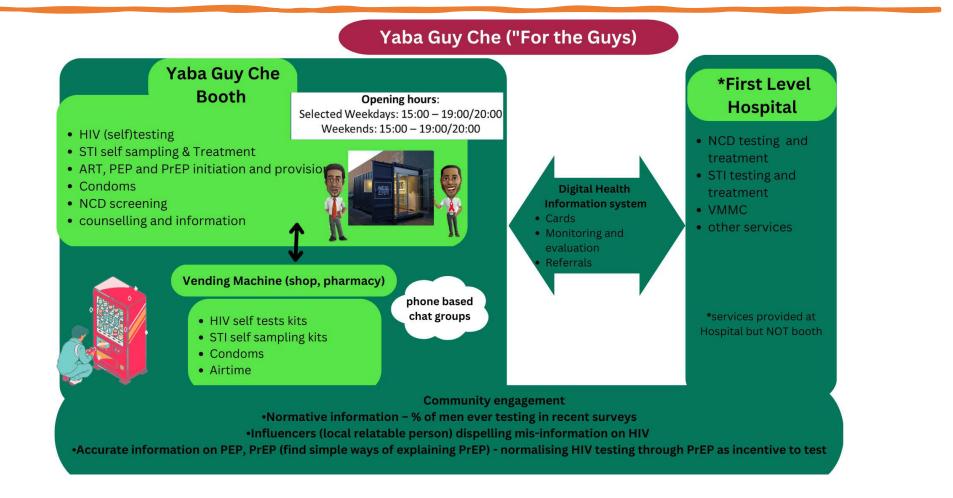
 \checkmark 77% responded yes to the market

Other options – fewer than 50% of men responded yes

Intervention design

- Addresses barriers to HIV services at individual, interpersonal, community and health facility level
- Aim overall design a multi-component intervention that could address key barriers to HIV services
- Bring together evidence from FGD, chat groups, TLS and workshops

Next Steps





For more information, please contact:

Bernadette Hensen <u>bhensen@itg.be</u>

Mwelwa Phiri <u>Mwelwa@zambart.org.zm</u>



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Study Team Mwelwa Phiri Chisanga Mwansa Steve Belemu Loyd Kalekanya Charles Banda Lucheka Sigande Helen Ayles Musonda Simwinga Bernadette Hensen With thanks to our funders and the study participants!

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