

DEVELOPING A PREVENTION WITH POSITIVES (PWP) PACKAGE FOR KEY POPULATIONS IN CAPE TOWN, JOHANNESBURG AND DURBAN, SOUTH AFRICA

Allanise Cloete; Leickness C. Simbayi; Yogandra Naidoo; Jacqueline Mthembu; Vuyelwa Mehlomakhulu; Fiona Guerra; Thiyane Duda and Jeremiah Chikovore
Provincial Research Day (Lentegeur Conference Centre) on 04 October, 2013
"Quality of Care. The Patient Centred Experience"



HUMAN SCIENCES RESEARCH COUNCIL

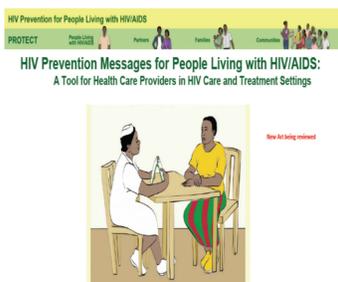
BACKGROUND

The US Centers for Disease Control and Prevention (CDC) developed a prevention with positives (PwP) package for people living with HIV (PLHIV) in the general population. The **overall aim** of the project is to culturally adapt the PwP package to fit to the specific HIV prevention needs of key populations (KPs). In this project KPs includes men who have sex with men (**MSM**), sex workers (**SWs**) and persons who use drugs (**PWUDs**) including persons who inject drugs (**PWIDs**). The **main objective of phase one** of our project is to *market test* and culturally adapt the PwP package for health care providers (i.e. nurses and lay counsellors) to their clients (i.e., MSM, SWs, PWUDs including PWIDs) in Cape Town, Durban and Johannesburg, South Africa. We were tasked with adaptation of only the group education flipchart and the clinic poster.

A BRIEF DESCRIPTION OF THE PwP PACKAGE

- The PwP package that we adapted is entitled HIV Prevention for People Living with HIV/AIDS: Tools for Health Care Providers in HIV Care and Treatment Settings and was adapted from Partnership for Health.

Flipchart with key messages for HIV prevention



- This flipchart will be used in clinic or community settings for group information sessions
- To be delivered by a lay care provider (i.e., lay counselor, peer educator, outreach worker)

Clinic Poster



- This poster highlights the key PwP messages and is for public display in the waiting area of the clinic.

PROJECT STRATEGY AND METHODOLOGY

- Partnerships with HIV prevention services that work with KPs and representatives of provincial and local departments of health in the three study cities were established
- Key informant (KI) interviews were conducted at each health care facility - one lay/adherence counselor and one professional nurse (n=20)
- FGDs (n=6) were held with:
 - MSM, SWs
 - PWUDs
 - All participants were older than 18yrs
 - Both males and females FGD participants
- KIs and FGDs focused on challenges experienced by:
 - KPs when accessing public health care services and;
 - Health care practitioners' experiences of counseling, treating and caring for KPs
- Elicited general opinions and views regarding the cultural relevance of the images, text and HIV prevention messages used in the PwP package

KEY RESULTS

- FG participants felt that the images used in the clinic poster should be more representative of all cultural groups in South Africa.
- In addition to this, according to KI interviews, images of KPs on the clinic poster in the waiting room of the clinic might make clients feel more comfortable to disclose risk taking behaviours.
- However FG participants mentioned that regardless of this, health care practitioners still do not have the capacity to deal with the specific health care needs of KPs.
- The majority of health care practitioners interviewed did not undergo sensitization training for working with KPs, such as MSM.
- In addition to this, health care practitioners also did not receive any training to engage KPs on behaviour change strategies.
- Overall behaviour change is delivered within a framework of imposing moral and societal codes of 'good behaviour'.
- With regards to HIV prevention messages, assumptions are made that vaginal sex is the norm, and there is no mention of other types of sex, hence this information is not necessarily relevant to KPs, such as MSM.

CONCLUSIONS

- Our findings suggest that traditional PwP messages are not necessarily relevant to KPs or HIV messaging may not speak to the specific socio-demographics of KPs.
- Moreover interviews with health care practitioners reveal that they are not well versed

Inclusive of Key Populations in terms of HIV prevention messaging

How can we protect ourselves, our sex partner(s), and peers?

Ask the audience:

How can we protect ourselves, our sex partner(s) and peers?

Wait for response.

Explain to the audience:

- Consistent & correct use of condoms
 - Condoms keep the sex fluids away from the partner's body e.g. semen, vaginal fluid and blood.
 - Always be prepared and check condom expiry date
- Test regularly with your sex partner(s).
- If you cannot be faithful, use condoms and lube (especially if you have anal sex) consistently and correctly to help reduce other sexually transmitted diseases and HIV.
- Men who do not have HIV may want to consider getting circumcised (having the foreskin of the penis removed). Talk to your provider if you are considering this.
- Even circumcised men should always use condoms



Chapter 4: Protecting your sex partner(s) and peers from HIV

Next question: How do you use a male condom?

IMPLICATION FOR POLICY, ACTIVISM, AND/OR SERVICE DELIVERY

- As HIV prevention interventions for PLHIV progress and scale-up, countries are encouraged to expand the materials, messages, and intervention strategies to include KPs living with HIV.
- Hence within this context, the full partnership of HIV prevention services for KPs is integral to the success of the implementation of a PwP package for KPs.