



From Key Populations to beyond: using HIV self-testing to increasingly reach vulnerable groups in West-Africa

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► To cite this version:

Joseph Larmarange. From Key Populations to beyond: using HIV self-testing to increasingly reach vulnerable groups in West-Africa. 11th IAS Conference on HIV Science, International AIDS Society, Jul 2021, Berlin, France. ird-04058413

HAL Id: ird-04058413

<https://ird.hal.science/ird-04058413>

Submitted on 4 Apr 2023

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From Key Populations to beyond: using HIVST to increasingly reach vulnerable groups in West-Africa

Joseph Larmarange on behalf of ATLAS Team
HIV Self-Testing, What's next? Symposium @ IAS 2021



The importance of peripheral populations in West Africa

- › Key Populations (FSW, MSM, PWUD) are overwhelmingly infected by HIV
- › In Western & Central Africa (Unaid data 2020), new HIV infections in 2019: 42% among KP and 27% among clients of FSW and sexual partners of KP
- › Peripheral part of KP (e.g. occasional sex workers, hidden MSM...) are difficult to reach by peer educators and have less access to HIV testing
- › Modelling work by Maheu-Giroux *et al.* (JAIDS 2017), in Côte d'Ivoire, between 2005 and 2015, 44% of new HIV infections occurred between a FSW client and a non FSW partner

It is crucial to reach peripheral and vulnerable populations beyond key populations to achieve 95-95-95 targets.

ATLAS project (2019-2022)

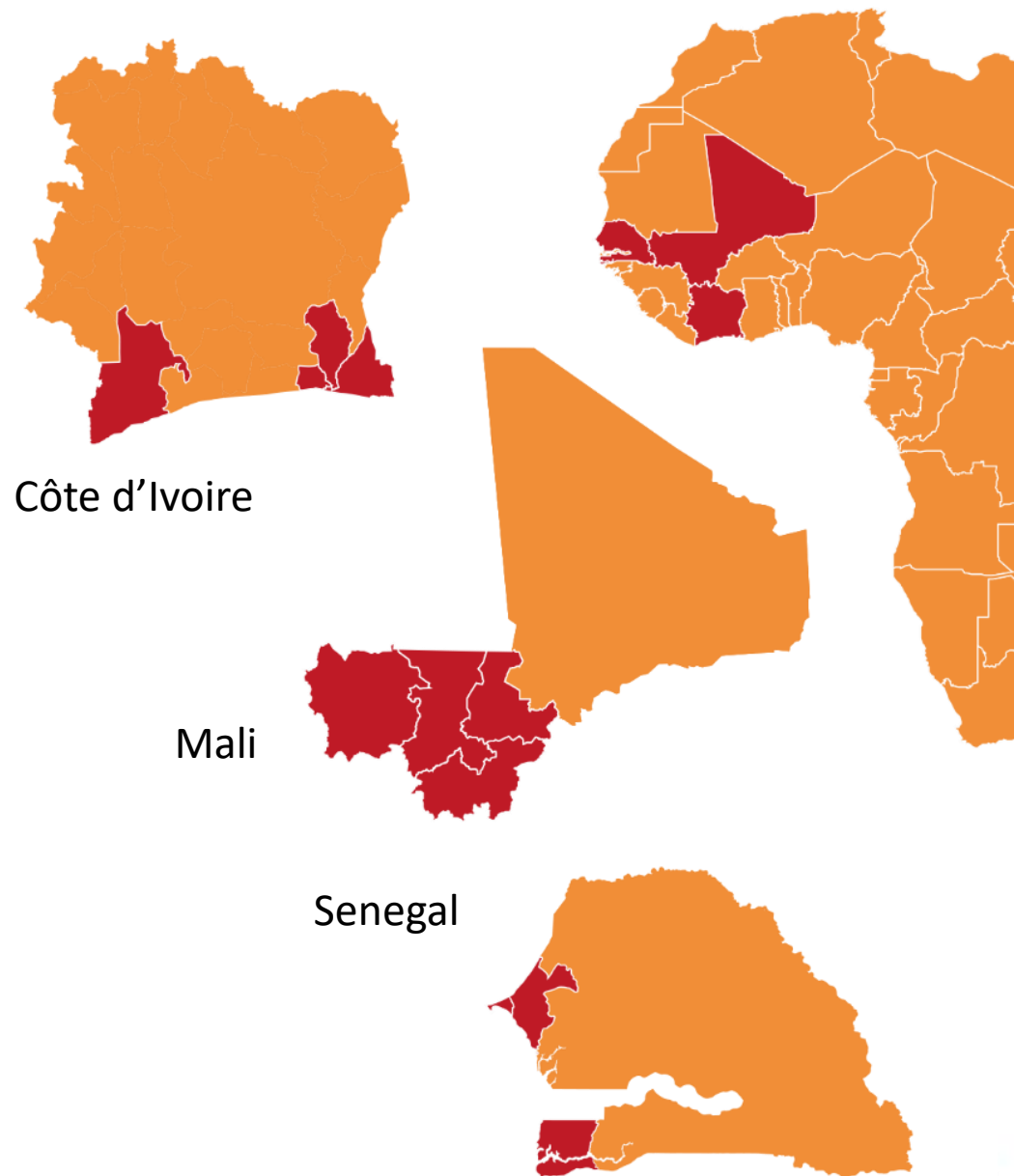
Funded by **Unitaid** (with additional funding of AFD)

Coordinated by **Solthis & IRD**

>**170** distribution sites

>**1400** agents trained for distributing HIVST

>**260 000** HIVST kits distributed since mid 2019



Côte d'Ivoire

Mali

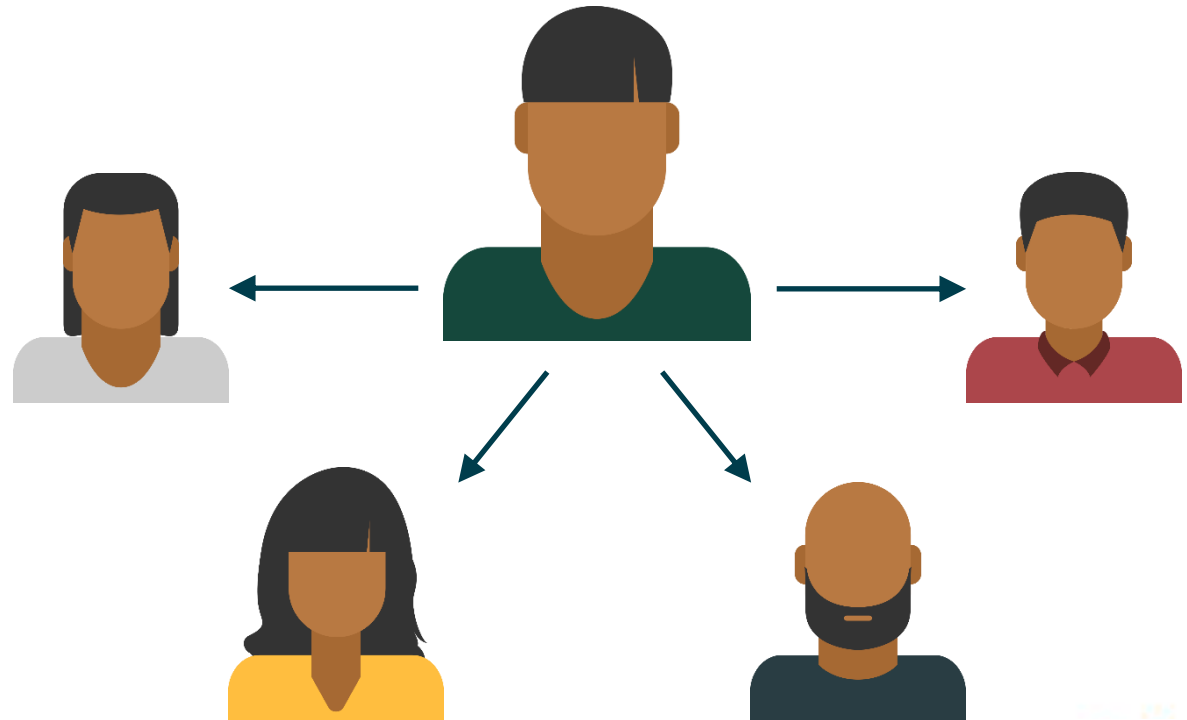
Senegal

ATLAS self-testing distribution models

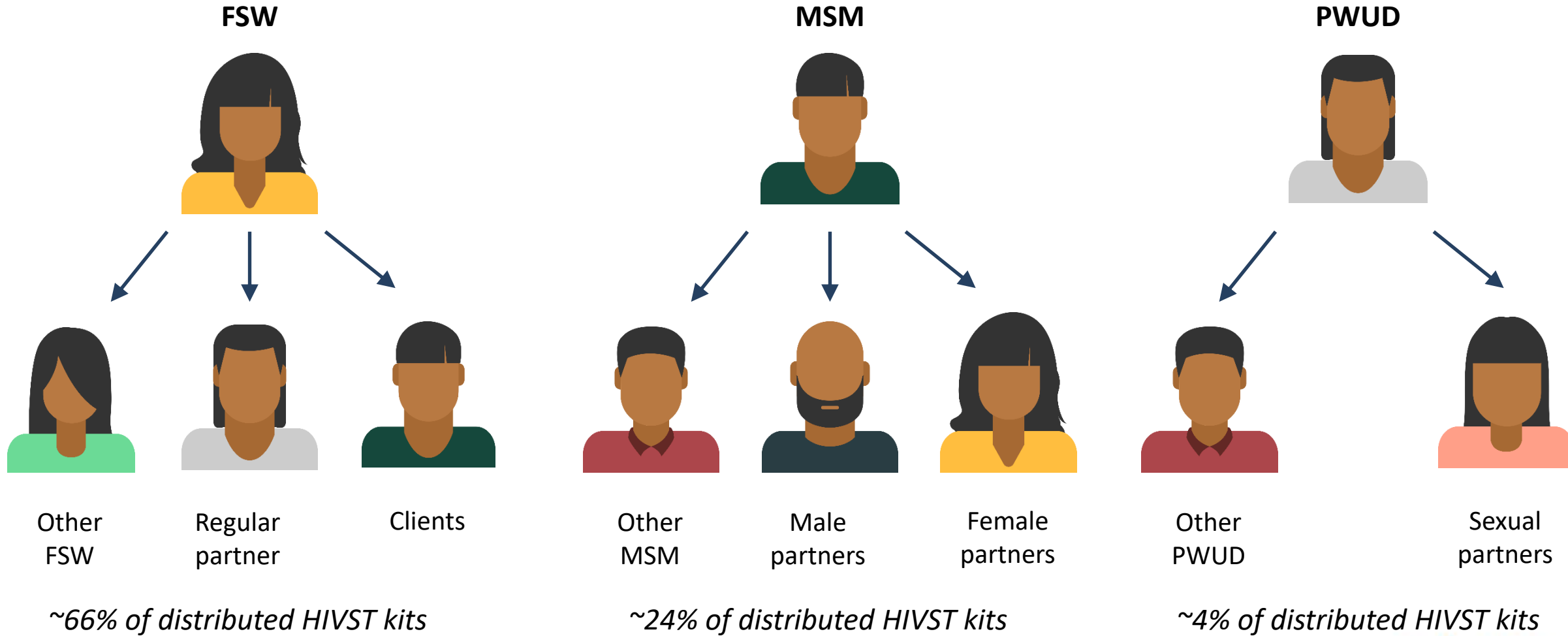
Primary distribution
for personal use



Secondary distribution
to be redistributed to
partners and relatives



ATLAS Strategy for key populations



Secondary distribution is feasible for KP

MSM, Mali (in-depth qualitative interview)

“Because of the self-test, I found out I was infected... Then I tested my fiancée [girlfriend] with it, but she got a non-reactive test.”

See E-Poster PEC320 by Odette Ky-Zerbo *et al.* @ IAS 2021
<https://theprogramme.ias2021.org/Abstract/Abstract/972>

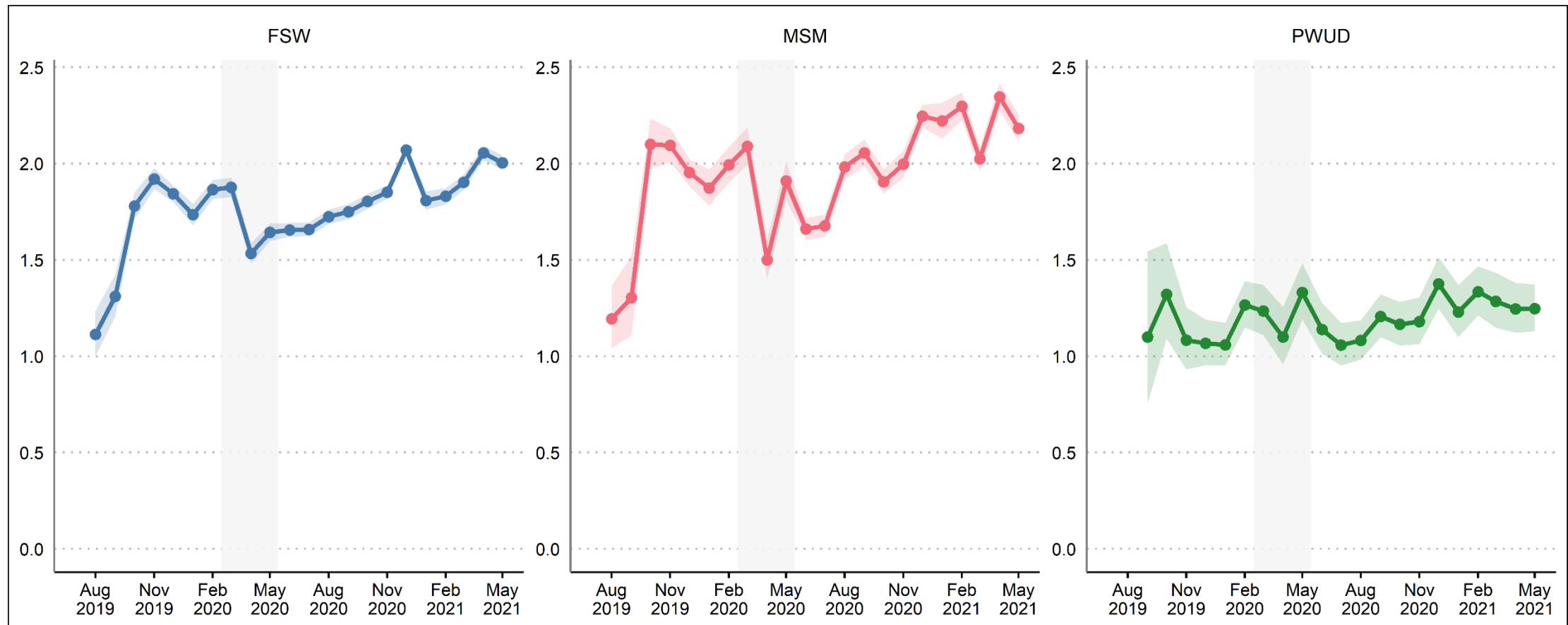
FSW, Mali (in-depth qualitative interview)

“I also have a client who I go to in his flat [...] I gave him three [HIVST] kits, because he showed me clearly that he has another partner, so I told him that there is no problem, so he wanted that one to be tested with the self-test too.”

Qualitative survey among HIVST users
Detailed results to be presented
by Odette Ky-Zerbo @ ICASA 2021

Increase of secondary distribution over time

Mean number of HIVST kits distributed per primary contact (outreach activities targeting KP)



More information: Kra Kouassi et al. "Introducing and implementing HIV self-testing in Côte d'Ivoire, Mali and Senegal: what can we learn from ATLAS project activity reports in the context of the COVID-19 crisis?" *Frontiers in Public Health* (<https://www.frontiersin.org/articles/10.3389/fpubh.2021.653565>)

Field adaptation

Direct distribution to secondary targets

- Following suggestions from peer educators, they have been invited to distribute HIVST kits directly to secondary targets when relevant (for example a sexual partner of KP seen on site)
- Other strategies have been developed, e.g. HIVST kits left at the reception of a brother/“love hotel” to be redistributed to the clients

In the context of sanitary measures (Covid-19)

- Relocation of activities
- Use of social networks (Facebook, WhatsApp...)
- Integration of hygiene measures...



available at
<https://atlas.solthis.org/>

Profile of HIVST users

- › Phone survey conducted between March & June 2021
- › Survey flyers distributed with HIVST kits, inviting people to call anonymously a toll free phone number
- › 2615 participants
- › Despite some recruitment biases, 1/3 received their HIVST kit through secondary distribution (friend, sexual partner, relative...)
- › 41% were first-time testers (first HIV test in their lifetime)
- › 50% perceived themselves as not exposed at all to HIV risk
- › MSM-based channel:
 - › 1/10 of participants were female
 - › 45% of males did not report any male sexual partner (“hidden MSM”)
- › FSW-based channel:
 - › 1/2 of participants were male

Phone survey among HIVST users
Detailed results to be presented
by Arsène K Kouassi @ ICASA 2021

Scale-up is sustainable

Observed Costs (2019-2020) → Full scale-up costs (2023)
(unit costs per distributed HIVST kit – community-based distribution)

	Côte d'Ivoire	Mali	Sénégal
FSW	\$13 → \$8	\$16 → \$10	\$17 → \$12
MSM	\$15 → \$8	\$28 → \$16	\$27 → \$22
PWUD	\$16 → \$13		\$144 → \$48

[illegible]

More information:
d'Elbée et al., May 2021,
Frontiers in Public Health
[https://doi.org/
10.3389/fpubh.2021.653612](https://doi.org/10.3389/fpubh.2021.653612)

See also E-Poster PED500 by Marc d'Elbée *et al.* @ IAS 2021
<https://theprogramme.ias2021.org/Abstract/Abstract/476>

To conclude...

HIV self-testing and secondary distribution is feasible and sustainable among key populations in West Africa.

Our results show that HIV self-testing is an opportunity to reach, beyond key populations, vulnerable groups who never tested before.

PARTNERS

Consortium



Funding



Technical partner



Implementation partners

Côte d'Ivoire

Ministère de la Santé et de l'Hygiène Publique
PNLS



Alliance CI
Aprosam
Arc en Ciel
Ariel Glaser
Blety
Eloé
Espace Confiance
Heartland Alliance
Orasur
Ruban Rouge

Mali

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