Community FSW Peer Model on HIV Prevention to Reach Epidemic Control and Sustainability in Tanzania

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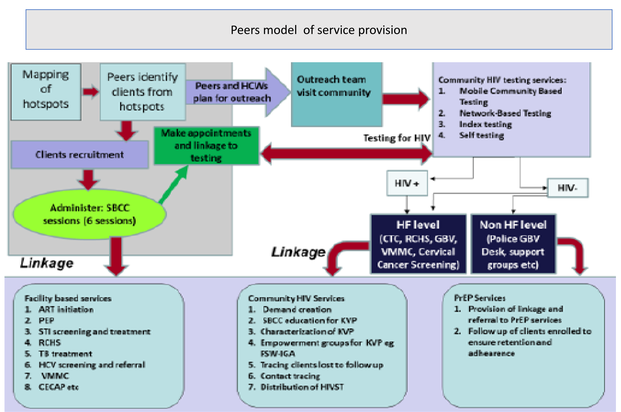
BACKGROUND

- The use of peers is a sustainable way to deliver HIV services and reaching marginalized group in the community.

FSWs like other KVPs have limited access to health services due to stigma and discrimination, increasing their vulnerability to HIV infections. There is evidence for community interventions to improve access to HIV services and linkage to care. Amref through the Global Fund support implemented a community peer model among FSWs in 9 regions to support access and utilization of HIV prevention services.

METHODS

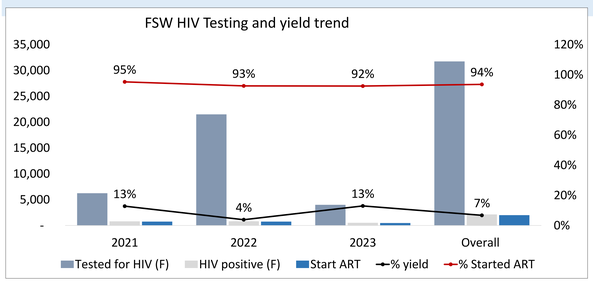
- Peers identified and recruited based on diverse characteristics including age, geographical location, HIV disclosure, hotspots and nearby Health facility.
- Peers trained and mapping of hot spots followed including generating map ques to support navigation
- We provided interventions through community mobilization for HIV testing, referral and linkage to prevention and care through peers support.
- Peers conducted weekly community, brothers, door to door SBC sessions, condom provision and linkage to PrEP and income generating support (IGA) through psychosocial support groups.
- Tracking of members who did not complete all 12 sessions done on weekly basis and follow up planned as per FWSs prefferences.



From Jan 2021-Dec 2023, 36,934 FWS peers reached, defined package of services sessions (12 sessions in 3 visits as part of combination Prevention Interventions from nine regions in 37 councils.

RESULTS

- A total of 36,934 completed defined package of services through peer support and 17,139 received SBC sessions.
- A total of 31,736 (103) of the targets were tested for HIV,
- **Identified 2,140 living with HIV (7%) positivity rate)**
- 99% linked to ART & 94% initiated on ART services within our coverage. 6% could not initiate on ART timely.
- A total of 161 psychosocial support groups formed through peer supervision,
- 134 received funds directly from the GF support & 11 groups own sources through revolving funds.
- 1321 referred for PrEP, 1083 screened for eligibility, 830 were eligible and 601 were initiated on PrEP





FWS Testing Cascade & Defined Package of Services Completed together with SBC

Year	Quarters	Tested for HIV (F)	HIV positive (F)	% yield	Start ART	% Started ART	reached DPS (F)	Received SBCC Service
2021	Q2	1,930	300	16%	280	93%	2,067	864
	Q3	2,186	303	14%	290	96%	2,273	1,014
	Q4	2,129	196	9%	191	97%	2,334	1,220
	Total 2021	**6,245**	**799**	**13%**	**761**	**95%**	**6,674**	**3,098**
2022	Q5	3,197	219	7%	200	91%	3,756	1,727
	Q6	8,046	282	4%	270	96%	7,827	3,573
	Q7	5,406	118	2%	110	93%	6,321	4,475
	Q8	4,849	204	4%	182	89%	7,324	918
	Total 2022	**21,498**	**823**	**4%**	**762**	**93%**	**25,228**	**10,693**
2023	Q9	1,491	180	12%	159	88%	2,273	1,021
	Q10	1,376	218	16%	204	94%	1,635	1,297
	Q11	575	72	13%	68	94%	488	520
	Q12	551	48	9%	48	100%	636	510
	Total 2023	**3,993**	**518**	**13%**	**479**	**92%**	**5,032**	**3,348**
	Grand Total	**31,736**	**2,140**	**7%**	**2,002**	**94%**	**36,934**	**17,139**

CONCLUSIONS

- A broad defined package of services (combination prevention) interventions for FSWs is effective reaching the epidemic control among these populations and the general community.
- Use of peers to deliver the SBC services is sustainable and ensuring reaching FSWs within their localities
- Use of combination of behavioral, biological and structural interventions together addresses the needs of FSWs holistically making it more client centered approach.

ADDITIONAL KEY INFORMATION

This program was part of Global Fund support through Amref as PR2 which was a community HIV prevention programs.

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