

HIV SELF-TESTING: AN INNOVATIVE APPROACH TO INCREASE UPTAKE OF HIV TESTING AMONG UNREACHED GROUPS

Background

2.3 million people in India are living with HIV. A disproportionate burden of HIV is found among key populations. These populations are often hard to reach with traditional HIV testing methods due to a variety of systemic barriers

Key Populations

Men Who Have Sex With Men

- Transgender Women
- Female Sex Workers
- People Who Inject Drugs
- Sex partners or needle-sharing partners, and families of key populations
- At-risk young vulnerable individuals

Action

- HIV self-testing was launched for the first time in India through ACCELERATE's integrated online platform, Safe Zindagi (SZ, safezindagi.in), a one-stop shop where clients can learn, order and upload HIV selftests free of cost
- HIV self-tests allow people to collect their own blood or saliva samples and test for HIV. It delivers results in 20 minutes and can be done anywhere as per the user's convenience
- ACCELERATE delivers HIV self-test kits to any location or a designated pick-up-point led by the community
- Safe Zindagi's virtual counselors are also available to provide virtual support to clients for performing the HIV self test, uploading the results and linking to treatment or prevention services based on HIVST report

Web-based HIV self-testing platforms can reach populations who remain unreached by existing HIV testing approaches

Virtual counselors help support kit completion, result validation, confirmatory testing and life-saving antiretroviral therapy (ART) initiation

A comprehensive communication campaign in local languages with importance on testing, reporting, and linkage can strengthen the HIV self-testing process **4,222** self-tests were distributed through Safe Zindagi

> 6% case detection rate through HIV ST

>90%

of clients reported their self-test results on SZ

> 73% positivity cases were first-time testers

>80%

of positive clients were linked to treatment

25 higher HIV prevalence than in the general population













INDEX TESTING STRATEGIES

Background

- 2.3 million people in India are living with HIV- the country with the second highest number of people living with HIV
- Only about 78% of people living with HIV in India know their status
- India is committed to achieving the 95-95-95 UNAIDS targets, including the first 95% defined as people living with HIV who know their status

Relevant Population

- Men Who Have Sex With Men
- Transgender Women
- Female Sex Workers
- People Who Inject Drugs
- Orphans and Vulnerable Children
- Sex or needle-sharing partners, biological children, and families of key populations

Significance

Index testing helped identify 9,547 new cases between Sep 2019 and Sep 2022. The costs to find a new HIV-positive person was comparable to other generalized epidemics with high-prevelance like Africa. Index-testing is a critical cost-efficient approach to identifying undiagnosed HIV-infected cases in India

Action

- To complement the ongoing efforts of India's national HIV program and meet the UNAIDS target, ACCELERATE implements index testing across across 107 high-load ICTC and ART centers and multiple community sites across 10 districts of Maharashtra, Telangana and Andhra Pradesh
- Index testing is a methodology in which there is a voluntary case-finding approach that focuses on eliciting sexual and/or needlesharing partners & biological children of consenting people living with HIV and offers them HIV testing services
- A two-pronged index testing approach improves access and uptake of HIV testing services among vulnerable populations

Overall Program Outcomes in MH, TL and AP PEPFAR-cluster districts (Oct 2019 to Sep 2022)



contacts

completed an

HIV test



9,547

new HIV-

positive cases

identified







people initiated life-saving ART treatment













SOCIAL NETWORK TESTING STRATEGIES

Background

- India has experienced an overall decline in HIV infections. However, key populations (KPs) still experience a high burden of HIV and lag in progress towards the key UNAIDS targets for testing and treatment
- Need for multiple, innovative approaches to reach KPs including sub-groups of vulnerable populations for HIV prevention, testing, and treatment services and to understand gaps in services
- KPs are often more hidden and less likely to selfrefer or engage in HIV services - however, there are often strong peer or social ties within KP networks
- Innovative testing strategies are key to achieving the first 95 UNAIDS goals and linking PLHIV with care and treatment services

Relevant Population

Key populations in four districts in MH/TS

- · Men who have sex with men
- Transgender persons
- Female sex workers
- People who inject drugs



Action

- Peer or social networks were leveraged to reach those not sufficiently engaged in HIV services and to identify gaps in service utilization and current risk behaviours
- Steps in social network testing:
 - 1.KP members (3-9) were selected by program staff to start the referral process – known as seeds. Seeds are well-known, influential members of their KP groups
 - 2. Seeds completed a **brief survey on risk behaviours and HIV-related service** utilization, an **onsite rapid HIV screening test** (regardless of known HIV status), and pre- and post-test counselling (wave 0)
 - 3. Seeds were given **two referral coupons** each to give to peers within their KP group
 - 4. These **peers returned to complete the survey and rapid testing** (wave 1)
 - 5. These peers also received **2 referral coupons** each, and this process continued until the desired target of about 500 KPs for each KP typology/district
 - 6. All clients were provided **appropriate referrals** given their HIV status and other needs – such as referral to confirmatory testing and initiation/re-initiation of ART or referral to TIs for prevention services

Significance

Social network testing goes deep into KP networks to identify and link those not engaged in prevention and treatment services. Data also indicate high levels of risk behavior that facilitate HIV acquisition/transmission underscoring the need for more engagement of these sub-groups and support for these vulnerable populations to access HIV services

5,596 KPs recruited (Oct 21 - Sep 22)

- 474 (8%) confirmed HIV-positive cases
- 1,722 (30%) never tested for HIV
- **3,810 (67%)** linked to prevention and harm reduction services
- **1,651 (29%)** reported unprotected sex in the last 6 months
- **45** reported sharing needles among those injecting in the last 6 months