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EDCTP2 CAREER DEVELOPMENT FELLOWSHIP

Project title: Peer-led HIV self-testing to improve HIV testing and linkage to HIV care among men in two fishing communities in rural Uganda: a pilot intervention (PEST4MEN)

Funder: European and Developing Countries Clinical Trials Partnership (EDCTP2), supported by the European

Grant No.: TMA2019CDF-2729

Category: Career Development Fellowship

Project period: May 1, 2021 – April 30, 2023

Principal Investigator: Dr Joseph KB Matovu

Project Summary

Across sub-Saharan Africa, efforts to reach men with HIV testing services and to link them to HIV care, if HIV-positive, have been hampered by men's reluctance to utilize facility-based services. In this study, we are implementing a community-based, peer-led HIV self-testing (HIVST) model to assess uptake of HIV testing, as well as linkage to and retention in HIV care among men living in two fishing communities located in two high HIV prevalence island districts of Buvuma and Kalangala in Lake Victoria. The selection of two fishing communities will enable us to compare different approaches for peer-leader selection in order to identify which approaches serve best in a typical fishing community setting. The overall goal of the study is to assess the feasibility and acceptability of a peer-led HIV self-testing intervention in improving HIV testing uptake, linkage to and retention in HIV care among highly mobile men living in the selected fishing communities. Specifically, the study aims to:

- a) Compare approaches for peer-leader selection in two different fishing communities in order to identify suitable peer-leader selection approaches for typical fishing communities;
- b) Assess uptake of peer-led HIV self-testing among men living in the two fishing communities; and
- c) Assess the effects of a peer-led HIVST model on HIV linkage and retention in HIV care among previously undiagnosed HIV-infected men.

Progress to-date

The study received ethical approval and clearance in December 2021 and January 2022, respectively. Project implementation began towards the end of March 2022 with community-entry meetings conducted in each district to introduce the project to key stakeholders but also gain buy-in for the project. The meetings were successfully conducted and the project was deemed welcome to the fishing communities by the stakeholders in each district. Having gained buy-in from the stakeholders, we then conducted a formative study to document men's perceptions about HIV self-testing in general and peer-led HIVST in particular and also identified existing social network groups in each district. Our project uses a social network-based approach in which we identify men from each social network and train them as "peer-leaders" who can then distribute HIV self-test kits to members within their networks. This is different from other community-based HIV self-test kits distribution approaches where a community distributor moves from house to house distributing HIV self-test kits to people in their respective households. In our case, a trained distributor, selected by social network members themselves in a community meeting, is given the responsibility to distribute kits to selected members within that network. The selected distributor is then trained in how to do the HIV self-test kits distribution as well as answer questions from his social network



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regarding the HIV self-testing processes and the resultant outcomes. The principle behind this approach is that it is easier to reach men with HIV testing and other HIV services in social settings and groups, using fellow men, than wait for them at the health facilities.

For the formative study, six focus group discussions (three in each district) were conducted with men selected from respective social networks. Preliminary analyses suggest that a peer-led HIVST program is acceptable, and men think that this approach will help them to test for HIV on their own without the need to go to a health facility. Approximately ten social network groups were identified from each district and a total of 24 peer-leaders (13 from Buvuma and 11 from Kalangala) have been selected. The selected peer-leaders have been trained in HIV self-testing processes, how to distribute HIV self-test kits, basic counselling skills, referral to existing health services, how to read and interpret results, and how to complete study-related forms to track those who will receive the kits. The trained peer-leaders have been asked to nominate up to 20 members from their social networks who will be screened for study eligibility, and once found eligible, they will be administered a baseline interview and their kits sent to the peer-leader for eventual pick-up. A total of 480 social network members have been nominated to receive HIV self-test kits from the two districts (260 in Buvuma and 220 in Kalangala). To be enrolled into the study (and to qualify to receive a kit), a social network member will have to be HIV-negative or with unknown HIV status at the time of enrolment; not tested for HIV in the last three months preceding the study; be nominated by a trained peer-leader, and aged 15+ years.