PROJECT REACH:
Re-Engaging Adolescents and Children with HIV
A facility-based peer supporter programme across sub-Saharan Africa

HIGHLIGHTS FROM THE FRONTLINE
February - November 2017
Facility-based peer support

- 20 Health facilities
- 6 Countries
- 1 Year

Improve adolescent-friendly health services (AFHS) and adolescent orientation
Build peer supporter capacity, agency and resilience
Build and share evidence for a facility-based peer support model

Funded by ViiV Healthcare and MAC AIDS Fund
Re-Engaging Adolescents and Children with HIV

REACH is a peer support model which integrates young people living with HIV (YPLHIV) as peer supporters within health facilities to improve HIV treatment and care services for, and treatment outcomes in, their adolescent peers age 10-19 years.

Launched in 2015, the programme completed a successful pilot. In partnership with the Positive Action for Adolescents Fund (PAAF), PATA developed REACH beyond its pilot phase into an implementation model with embedded regional learning across six sub-Saharan African countries from February 2017.

“As a peer support model, REACH has helped us to gain life skills that are empowering us in many different dimensions instead of just talking about the challenges of HIV all the time.”

The REACH programme was implemented in 20 health facilities (12 existing facilities from the pilot phase and eight new facilities) across six sub-Saharan countries: Cameroon, Ethiopia, Kenya, Malawi, Uganda and Zambia. PAAF supported the implementation of REACH in 15 of these facilities, while the M.A.C AIDS Fund supported five facilities.

The context

YPLHIV face complex challenges related to their developmental stage, which are exacerbated by pressures to adhere to HIV treatment and remain in care, as well as disclosure, stigma, relationship stressors and mental health issues. Client-centred, multi-pronged interventions for YPLHIV must therefore be prioritised.

Differentiated care strategies that support YPLHIV’s retention in care, adherence to antiretroviral therapy (ART), viral suppression, psychosocial well-being and improved health outcomes are crucial not only for individual client benefit, but also to stem onward transmission. The support that these strategies may offer is a critical step towards improving adolescent-friendly health services (AFHS) and creating a flexible, adolescent-oriented environment.

Evidence shows that peer support for AYPLHIV (adolescents and young people living with HIV) is an effective strategy to increase demand for health services and improve retention in care along the HIV continuum. Peer supporters (PS) are well equipped to provide high-quality individualised care, as they are best able to connect with other AYPLHIV given common lived experiences.

In addition, while working as PS young people have opportunities to build skills for future employment and develop advocacy capacity to demand improved services for AYPLHIV.

Facility-based models are also better situated to improve health services, sensitisate health personnel and engage adolescents accessing care, assisting them to navigate the health system and providing safe and supportive facility spaces.
Methodology

Selection:
- 20 facilities selected on application from across PATA network in Cameroon, Ethiopia, Kenya, Malawi, Uganda and Zambia
- Selection informed by adolescent population size, need, and motivation to implement and integrate programme
- MOUs signed with selected facilities and quarterly small grant disbursements made to support stipends for PS, their supervision, and programme activities
- Two PS were recruited per facility against criteria that included: being between the age of 18 and 24, living openly with HIV, adhering successfully to treatment and already being actively involved at facilities as volunteers
- PS signed a contract detailing conditions of service and set out activities to be undertaken

Training and support:
- PS are supported to attend local trainings to improve HIV knowledge and capacity to deliver on YPLHIV programming
- PS are assigned a clinic supervisor with monthly supervision, on the job training
- Remote support and monthly check-ins with PATA and occasional site visits
- Complemented by the distribution of a detailed PATA Peer Support programme handbook for implementation and Children, Adolescents & HIV: A simple toolkit for Community Health Workers and Peer Supporters
- Attendance at PATA Forums and Summits
- PS WhatsApp Community of Practice established for regional linkage and learning
- All PS signed a contract detailing conditions of service and set out activities to be undertaken

Peer Support activities:
- Home visits and community outreach – tracking and tracing those LTFU
- Creative PS engagements – sports, camps, drama and music
- SRHR information, advice and referral
- Facilitation of support groups (differentiated by age, time since disclosure, location etc)
- HIV information and education
- Treatment literacy
- Counselling – adherence and psycho – social support and referral
Range of Peer Support activities offered at six months

- Home visits and community outreach
- Creative peer support methodologies
- SRHR
- Support groups
- HIV education and treatment literacy
- HIV counselling

Facilities offering differentiated support groups

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<th>Type of differentiated support group</th>
<th>Baseline (n=20)</th>
<th>six-months (n=20)</th>
<th>10-months (n=12)</th>
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<td>Age</td>
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Facilities

**Cameroon**
- Baptist Hospital Mutengene
- Nkwen Baptist Health Centre
- Chantal Biya Foundation

**Malawi**
- Tisungane Clinic
- Zalewa Clinic
- Baylor Malawi
- Neno District Hospital
- Rainbow Clinic

**Ethiopia**
- Mekdim Ethiopia National Association Clinic
- ALERT Paediatric ART Clinic

**Kenya**
- Sunshine Smiles Clinic
- FACES – Tungane Youth Centre

**Zambia**
- Chazanga Health Centre
- Chikupi Rural Health Post
- Kafue Estates Clinic

**Uganda**
- Joint Clinical Research Council (JCRC)
- Lira Infectious Disease Clinic
- Baylor Uganda
- Mulago COE ISS Clinic MJAP
- TASO: Gulu

“Today, 1.8 billion adolescents stand at the challenging crossroads between childhood and the adult world. Nine out of ten of these young people live in the developing world and face especially profound challenges, including HIV.”

“HIV incidence remains highest among 15–24 year olds, with approximately 40% of horizontal transmission occurring within this age group. As access to highly active antiretroviral therapy (HAART) improves globally, the population of vertically infected adolescents is expected to grow.”
Impact

“I am grateful to be part of the REACH project because being HIV positive, I had so many questions about my future. The project has helped me overcome my fears about self-stigma, personal fears and low self-esteem. I am very happy to be a part of this life changing project which aims to improve the health of my fellow peers. The facility staff have also been very supportive in helping us deliver peer-to-peer adolescent friendly services at Chikupi health facility.”
- Chikupi Clinic, Zambia

IMPROVED ACCESS TO TREATMENT

• Higher viral suppression rates of those under 25 years at REACH facilities, compared with other populations at the same facilities and national average
• Increasing number of facilities introduced separate spaces, times or dedicated staff
• Number of support groups for the adolescent population increased three-fold with a 50% increase in the use of creative methodologies such as sports, drama and entertainment – creating safe spaces for YPLHIV to meet and engage
Impact

Improve adolescent-friendly health services (AFHS) and adolescent orientation

- Development of quality improvement plans on AFHS
- Establishment of differentiated support groups
- Integration of creative methodologies to support peer engagement and establishment of safe spaces
- Expanded peer-led psychosocial support
- Improved engagement of young people in service delivery with improved sensitisation and motivation of health providers to involve YPLHIV

Build peer supporter capacity, agency and resilience

- Forty PS integrated to deliver services across 20 health facilities
- Locally sourced training provided to 40 peer supporters, complemented by a clinic supervisor and guided by a PATA handbook and toolkit
- Linkage to youth structures and national networks of YPLHIV and advocacy activities
- Simple platforms, such as WhatsApp groups, enabled engaging and productive spaces for dialogue, advice-sharing and information gathering between PS
- Skills building at local meetings, PATA forums and summits
- Health provider awards

Build and share evidence for a facility-based peer support model

A diverse and rich range of evidence has been built and shared in the form of:
- peer reviewed publications
- conference presentations
- social media updates
- participation on global advocacy working groups and platforms, including an AIDSfonds interview and Spark: a programme devised to ignite change

CAPACITY BUILDING:
At the PATA 2017 gala dinner and awards evening Blessings Banda from WeCare Malawi was acknowledged for his support of PATA’s work. Pictured is Blessings, receiving his award from Grace Ngulube, who serves on the Youth Advisory Panel (YAP) for PATA.
Reflections

Peer supporters

“As an individual, I have gained a lot of information and skills on how I can work with adolescents that are living with HIV and I have gained leadership skills, counselling skills and public speaking skills.” - Baylor Malawi, Malawi

“PATA has changed my life, I have a strong passion for working with young people, I acquired HIV because I was naïve and only wish someone had educated me much sooner. PATA has helped to boost my confidence while working with young people. I now know HIV is not a death sentence and feel more motivated to help those who are living with HIV, live a healthy and productive life but also to educate those who are still negative on preventive measures through behavioural change communication.” - Lira Infectious Disease Clinic, Uganda

Clients

“The PATA peer support group has helped me a lot. One of the areas where I feel this is in my adherence to treatment. Before, I did not understand how the drugs worked with my body but now I know every reason as to why good adherence is important. The Peer Supporter has also helped me to realise the best part of my personal perceptions, especially when some people will try to discriminate against me because of my status.” - Rainbow Clinic, Malawi

“The programme came at the right time when most of us young people needed knowledge on HIV/AIDS and Sexual and Reproductive Health. The project has given me a sense of belonging with my fellow young people and also a platform where we can express ourselves.” - Chazanga Health Centre, Zambia

“PATA has helped me to meet new friends at the clinic whenever we have support groups meetings. It has also helped me learn a lot from my peers. I would want activities to continue always.” - FACES - Tungane Youth Centre, Kenya

Sharing on Whatsapp
Next steps

• Utilising lessons learnt to translate into a set of minimum standards and tools for a sustainable facility-based PS model that supports implementation and scale-up and meets the needs of health facilities and A/YPLHIV in low-resource settings

• Explore how such tools and checklists can be made more accessible through mobile technology, offering additional and improved access to m-Training and m-Supervision

• Through the READY+ programme, PATA will be hosting a Continental Youth Summit (CYS) in 2018, that will target PS and health providers across various regional projects

• Undertaking a deeper enquiry or situational analysis on differing facility-situated support group interventions across the PATA network of associated health facilities to define the range of peer-led/facility-situated group interventions and related content areas, methodologies, frequency, attendance, time frames and client satisfaction ratings

“We know where the gaps are so we can speak up and advocate for these. We can also help to make sure our health facilities are well-staffed and well-resourced, allowing us to serve children, adolescents and young people well.”

- Kelvin Makura, Y+, READY+, P2Z, Zimbabwe

PATA 2017
Continental Summit