Case study summary

Breaking down barriers: Empowering young people living with HIV in Uganda

In Uganda, just under half of the 1.8 million people living with HIV are young people[1]. This number is growing, as many of those born with HIV are now teenagers and young adults. The number of HIV diagnoses is also increasing amongst young people from key population groups, including sex workers and people who are lesbian, gay, bisexual or transgender. These individuals struggle to access essential health services due to criminalisation and discrimination[2].

A baseline survey[3] conducted through the Link Up programme identified a number of barriers pre-venting young people living with HIV from accessing sexual and reproductive health and rights (SRHR) services. Those who had recently been diagnosed lacked support and were afraid to enrol on antiretroviral therapy. Others who had been living with HIV since childhood were dropping out of care during adolescence.

Low knowledge of HIV prevention was also found, with 31% of those surveyed believing that mosquitoes could transmit HIV. A significant percentage did not know how to use condoms and had had unprotected sex with an HIV-negative partner.

Many were unaware of their rights and how to assert them, limiting their ability to negotiate safer sex in their relationships.

1. Uganda National Youth Policy, 2011
2. GYCA, ATHENA (2014) Voices, visions and priorities: Key issues of young people living with and affected by HIV in Uganda http://www.aidsalliance.org/resources/481-voices-visions-and-priorities
3. Population Council. 2015. "Sexual and reproductive health and rights among young people living with HIV in Uganda: Findings from the Link Up baseline survey" Link Up Research Brief. Washington, DC: Population Council. http://www.popcouncil.org/uploads/pdfs/2015HIV_UgandaPLHIVBrief.pdf

About the International HIV/AIDS Alliance
We are an innovative alliance of nationally based, independent, civil society organisations united by our vision of a world without AIDS.

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Between October 2013 and March 2015, several interventions were implemented through the Link Up project to address these barriers. The aim of the project was to increase access to integrated and quality SRHR and HIV information, commodities and services for young people living with and most affected by HIV.

The project was implemented by a consortium of partners including Community Health Alliance Uganda (CHAU), Marie Stopes International Uganda (MSIU), Uganda Youth Coalition on Adolescent Sexual Reproductive Health and Rightsv and HIV/AIDS (CYRSA-Uganda), the International Community of Women Living with HIV in Eastern Africa (ICWEA), the Ugandan Network of Young People Living with HIV (UNYPA) and the Population Council. CHAU delivers its community and facility-based activities through implementing partners in 13 districts.

Empowering young people

At the heart of this project are peer educators: young people living with HIV who have been trained on a range of SRHR and HIV issues. 649 peer educators were trained through a three-day course where issues relating to growing up, body changes, relationships, sex, sexuality, pregnancy, sexually transmitted infections (STIs), HIV and sexual and gender-based violence were explored. Peer educators also learnt strategies for talking to their peers on SRHR and what to do if they could not answer a question.

Peer educators deployed three main strategies to encourage the young people they met in their communities to visit a health facility: distributing referral slips, distributing vouchers and accompanying individuals on visits to health facilities.

In order to reach young people who do not want to go to health facilities, implementing partners took SRHR and HIV services to places where young people living with HIV already met such as support groups, youth clubs and HIV-related events. Collaborating with local organisations of people living with HIV was key to this as they were able to identify young people, make them aware of the services on offer and give them confidence that those involved had been trained on important issues such as confidentiality and informed consent.

During the project, young people came up with their own ideas of how to attract peers to events. This includes youth camps, which offered young people living with HIV a weekend of fun activities, such as rowing, music, dancing and sports. During the weekend, MSIU set up a tent where young people could drop in, ask questions and receive a service if they wanted.

Training health providers on the specific needs and experiences of young people living with HIV, including why they may or may not be currently accessing services, what kinds of services to offer and, most importantly, how best to offer these services was essential to the project's success. A key part of this training focuses on how to communicate effectively with young people living with HIV, including the importance of listening and giving non-judgemental responses. To challenge the deeply ingrained attitudes of some health providers, young people living with HIV were invited along to provider training sessions to either co-facilitate or share their experiences.

Promoting youth-friendly spaces in health facilities, containing appropriate information, plus games and television if space allows, is an effective strategy for encouraging young people to attend.

Results

Link Up's experience in Uganda demonstrates the success empowered young people living with HIV can have in achieving greater access to SRHR and HIV services for their peers. Building a strong team of peer educators who were visible and proud of their work proved the foundation for service provision in the project.

The role of young people living with HIV in service provision enhances the quality of programming. They speak the same language as their peers, and other young people do not feel intimidated so are able to ask them questions. They also generate ideas about how to make services more attractive and accessible to their peers.

Through this work, young people who are normally hard-to-reach have been brought closer to SRHR and HIV services and many have been referred for antiretroviral therapy enrolment.

Between 2013 and 2015 the project:

- Reached 5980 young people living with HIV with SRHR information, counselling and services in their own communities
- Reached 3794 young people living with HIV with SRHR information, counselling and services in health facilities and through clinical outreach
- Made 224 completed referrals of young people living with HIV to health facilities.

Recommendations

- Ensure peer educators know what they do not know, and know when to refer to others
- Importance of positive and innovative messaging
- Include activities which build a sense of community within young people's clubs
- Provide ongoing mentorship for health providers and find opportunities for joint activities between them and young people living with HIV
- Budget for the cost of peers accompanying young people living with HIV to health services
- Involve young people living with HIV in service provision
- Develop meaningful collaborations with youth organisations and networks

It is important to promote strategies that meaningfully engage young people living with HIV in all their diversity, including young people living with HIV who sell sex, young people who identify as lesbian, gay, bisexual, transgender or intersex and sell sex or use drugs as they may be the best placed to reach others living similar lives with the tailored information and services they need to access their sexual and reproductive health and rights.

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LINKUP

Link Up aims to improve the sexual and reproductive health and rights (SRHR) of one million young people affected by HIV across five countries in Africa and Asia. The project is being implemented by a consortium of partners led by the International HIV/AIDS Alliance.

For more information, visit www.link-up.org

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