Monitoring HIV/STI Services for Key Populations

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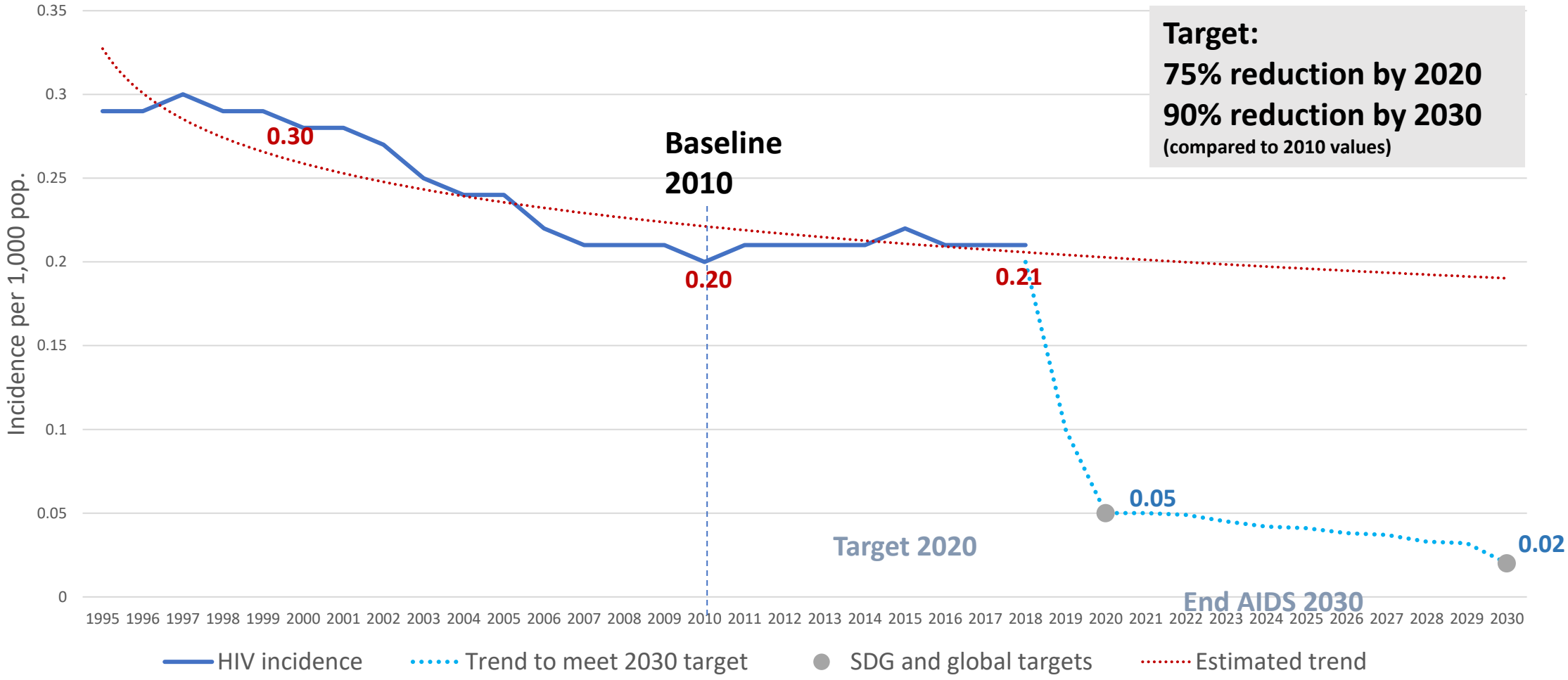
HIV incidence per 1000 population, 2030 forecast and targets for Ending AIDS, in Latin America and the Caribbean, 1995-2030

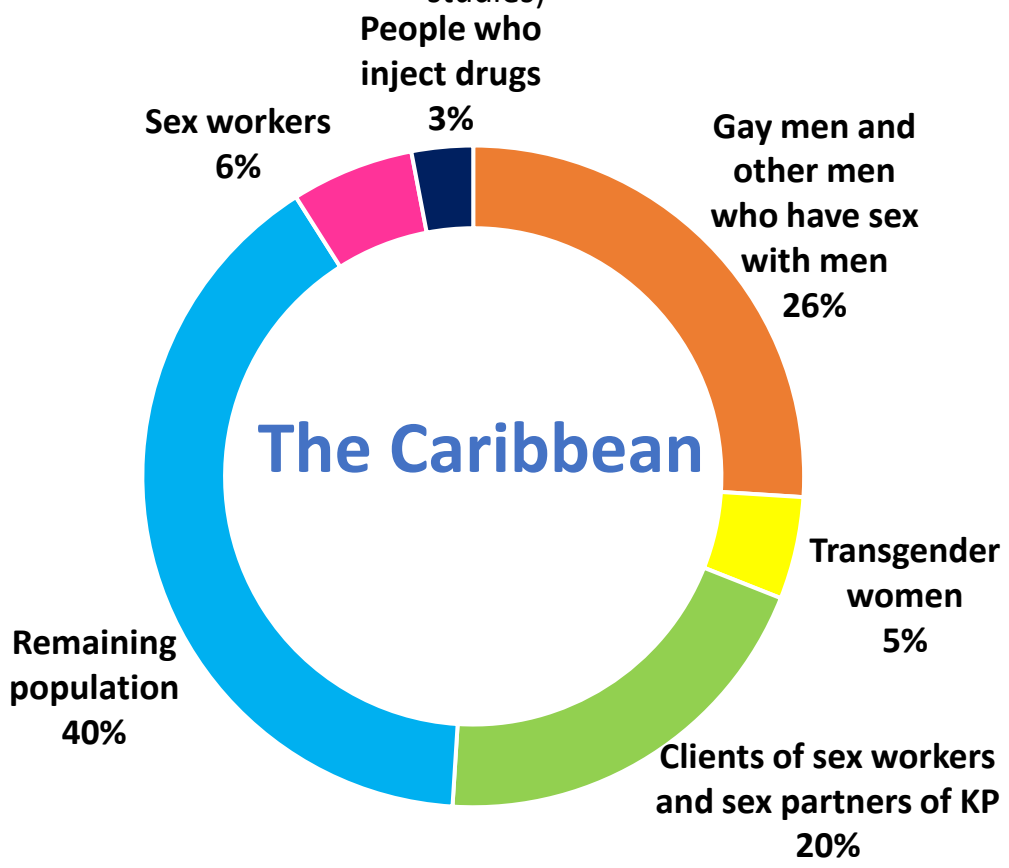


Source: PAHO. Developed from UNAIDS Spectrum HIV estimates 2020.

Why Focus on Key Populations

Account for most new HIV infections in The Caribbean

New HIV infections according to population groups. **The Caribbean, 2019** (UNAIDS. Modes of Transmission studies)



Face barriers to access to health services and suffer stigma and discrimination.

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What is considered “Key Population?

People with a key role in the HIV epidemic, due to specific practices that pose an increased risk of HIV infection and legal and social contexts that accentuate their social vulnerability and access to services

- "Identity" and "sexual orientation" is **DIFFERENT** from "sexual practice".
- For monitoring: The interest is in defining the key population by PRATICE- BASED rather than by AUTO-IDENTIFICATION (gender or sexual orientation).

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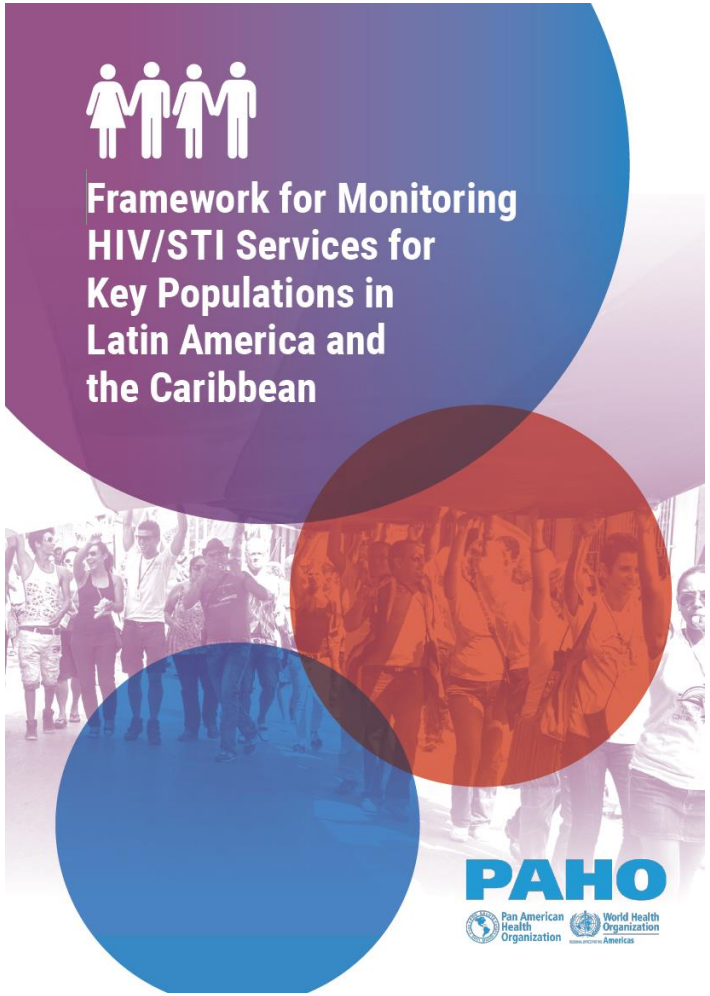
PAHO “Monitoring Framework”

- Operationalizing variables for key population groups
- Definition of essential HIV and STI-related services to be offered to KP.
- Cascades of prevention and care.
- PrEP cascade
- Indicators for monitoring HIV/STI services



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How to operationalize the key population variables

1. Which sex was assigned to you at birth: male, female, intersex, other?
2. In the last 12 months, who have you had sexual relations with? (Mark all that apply)
3. In the last 12 months, have you exchanged sex for money?
4. In the last 12 months, have you shared a needle and/or syringe to inject substances?
5. Do you consider yourself to be a…? (Read all options)

Source: Adapted from PEPFAR. 2019

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HIV/STI proxy services of the Basic Package for HIV Negative Key Population Groups

Services based on human rights, inclusive and free of stigma and discrimination

HIV testing: Knows HIV- status	Linkage to HIV/STI prevention services	Retention in HIV/STI prevention services* at 12 months	Sustained HIV free at 12 months
• HIV testing • Condoms & lubricants • Syphilis screening • Linkage service from peers • HBV screening • nPEP	• Risk assessment and PrEP eligibility • Confirmatory test for active syphilis and treatment • Clinical assessment for STI • Ng screening • HBV vaccination	• Risk assessment • PrEP • HIV testing • Syphilis testing • Clinical assessment for STI • Screening Ng	• HIV testing

***Follow up**: every 3 months PrEP users; non-PrEP users: every 6 months (FSW)-12 months (HSH)

All the services included here are WHO GRADE recommendations

Note: Specific services for drug injectors, trans women, etc. are not included ...

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Assessment of Substantial risk for HIV infection

Substantial risk for HIV infection if, in the last 6 months:

- Vaginal/anal sex without condom with more than one partner
- STI
- Previous use or requested PEP or PrEP
- Sexual partner: HIV positive (not undetectable) or with a HIV risk factor.
- Shared needles/syringes.

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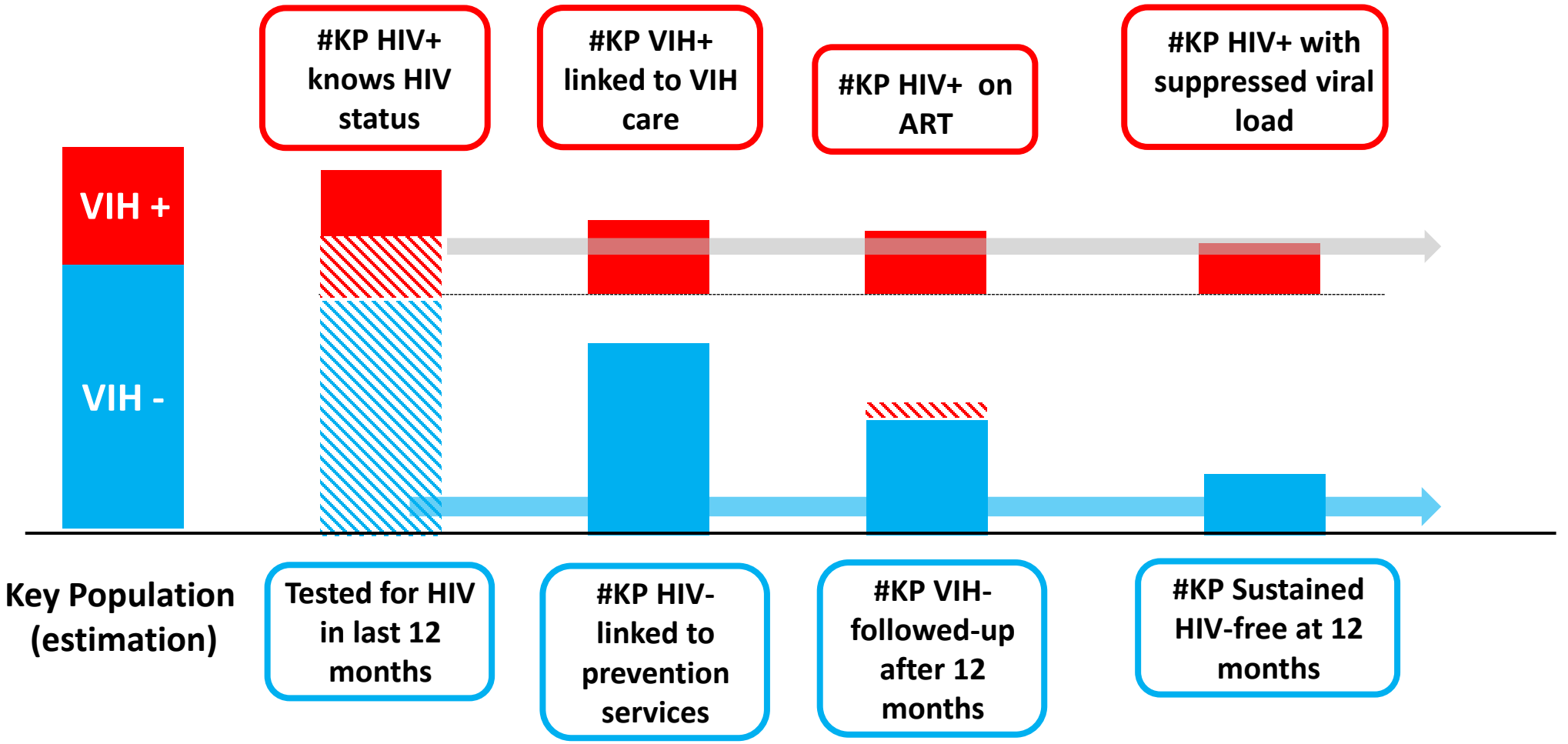
PAHO Monitoring Framework



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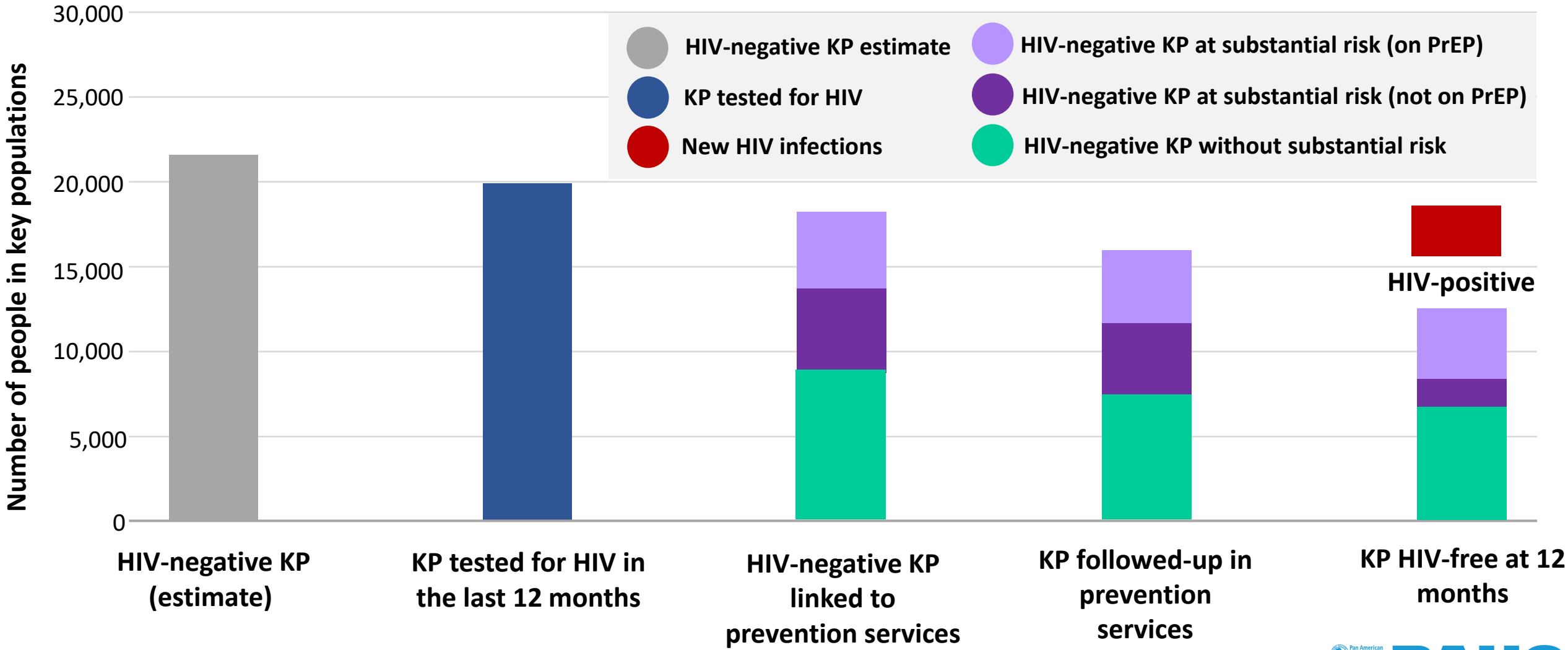
Example of the HIV Prevention cascade for Services Offering PrEP



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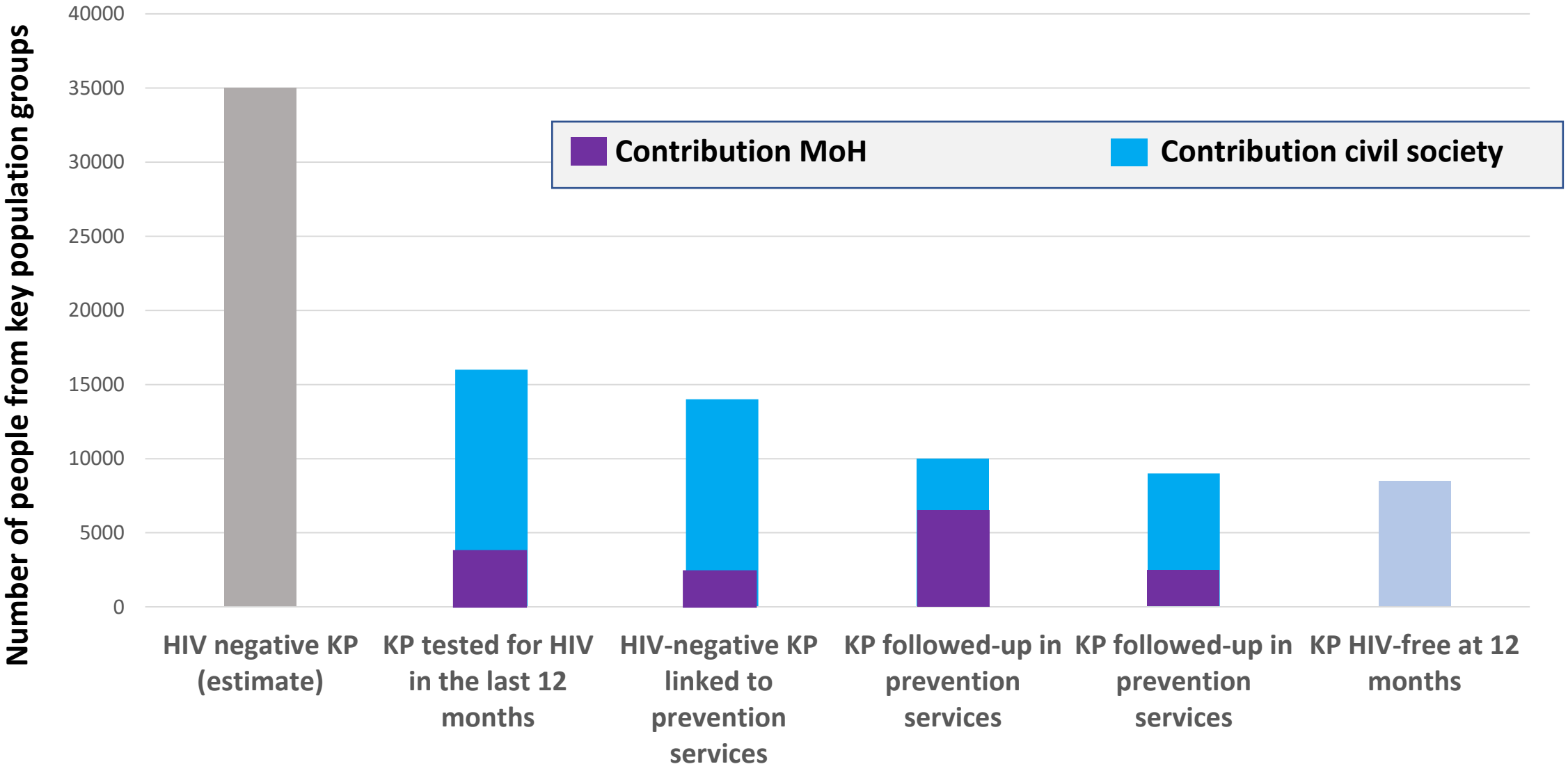
Example of the HIV Prevention cascade disaggregated by provider



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Indicators for monitoring HIV services for HIV Negative Key Population Groups

Key Population

Not tested in past year

Tested in past year

KP by serological status (estimation)

and % KP tested in past year

Result HIV-

% with HIV – test result in past 12 months

Linked to prevention services

and % KP linked to care

Followed-up after 12 months

& % KP followed-up after 12 months

Sustained HIV-free at 12 m.

and % KP HIV-free at 12 months

Continues in care

INPUTS

Ratio condoms distributed for KP/Σ of KP

Ratio lubricant distributed for KP/Σ of KP

and % sites with staff training for S&D every 2 years.

% KP reporting S&D in health services

% KP HIV- assessed for HIV risk

% HIV- KP with substantial risk/HIV- KP assessed for HIV risk

% KP screened for syphilis /year → % KP with syphilis treated/year

% KP screened for Ng/year

% eligible KP that initiated PrEP in the last year → % of users who continue on PrEP for 3 consecutive months/year

KP receiving PEP

% KP screened for HVB last year

% KP vaccinated for HVB last year

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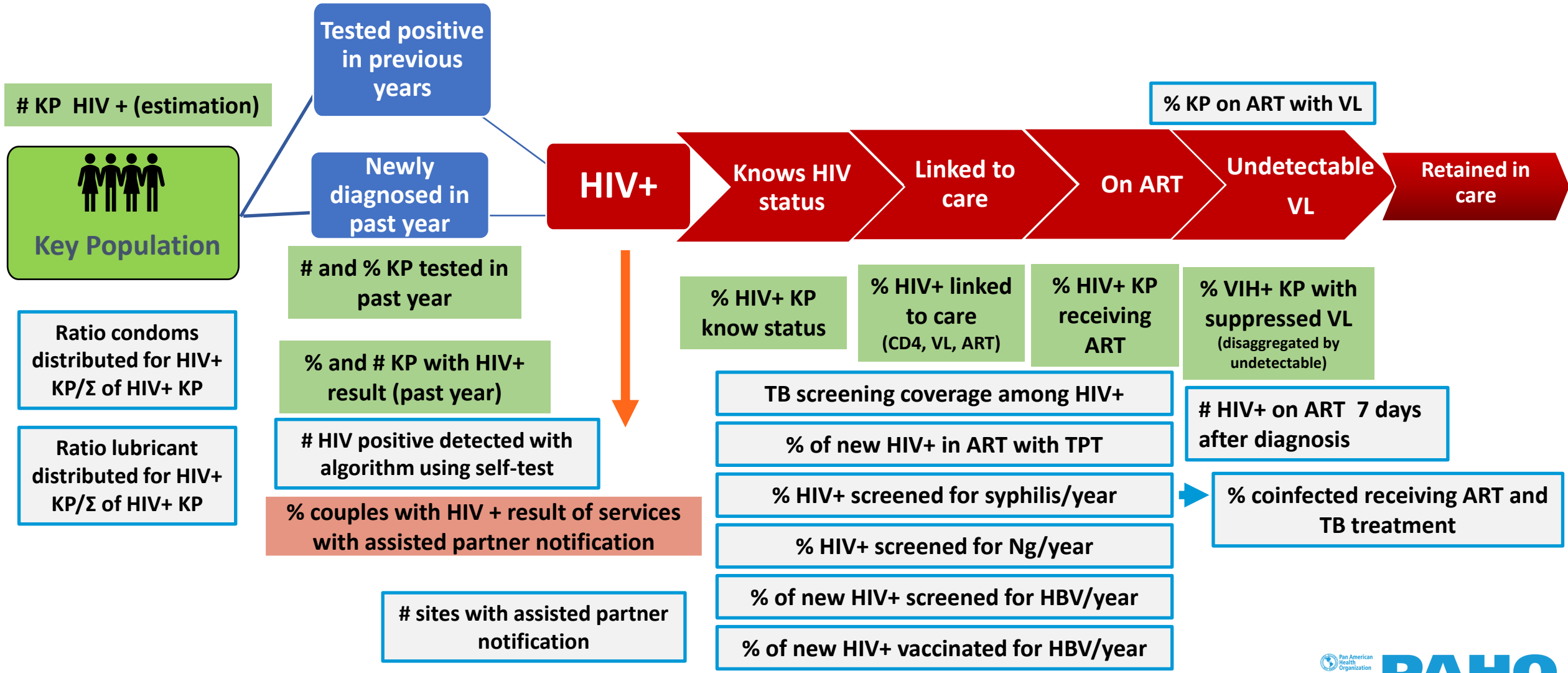
Indicators for monitoring key HIV/STI services VIH/ITS for HIV Positive Key Population Groups



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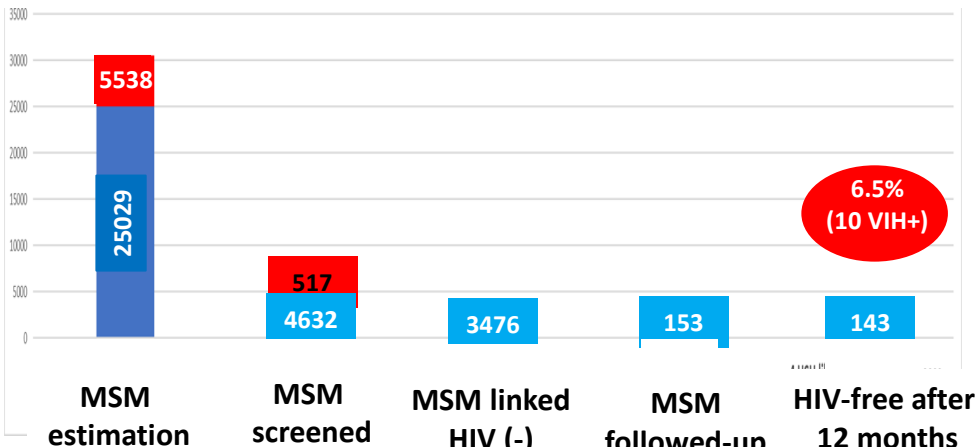
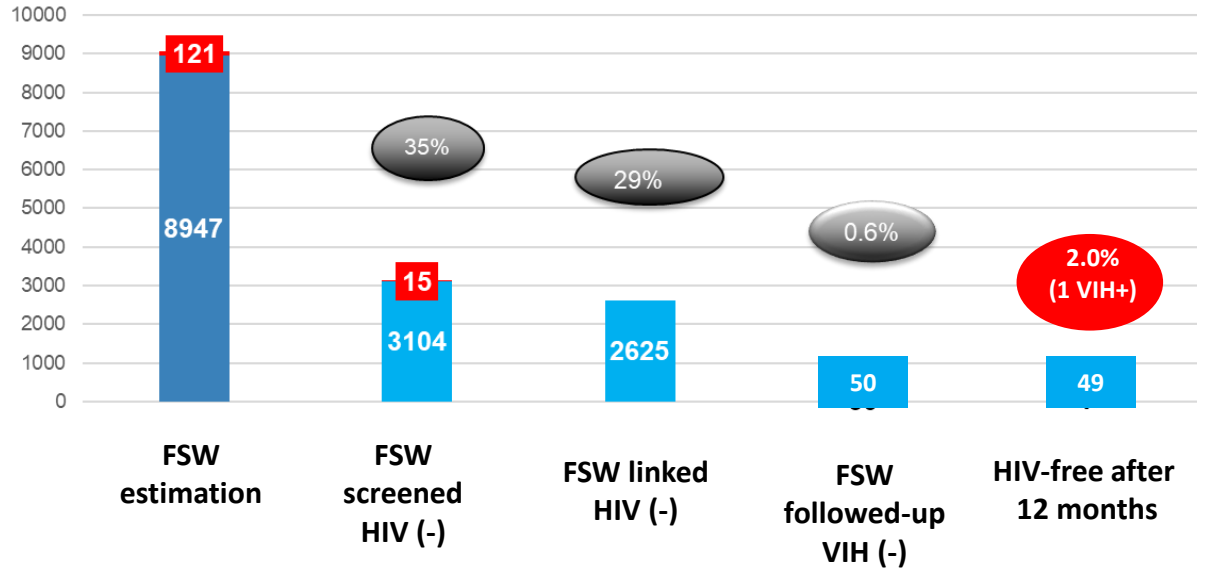
Prevention Cascades per Key Population Group, country example

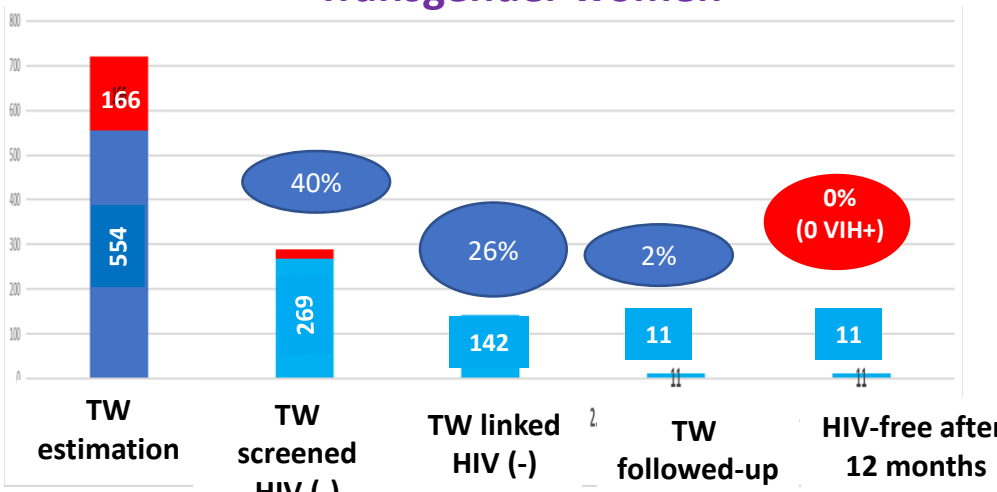
MSM



Female sex workers



Transgender women



Source: Developed by PRONASIDA, Ministry of Health, Paraguay

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Monitoring of HIV testing services

- Countries are implementing various HIV testing strategies
- It is important to monitor these efforts, evaluate for improvement or changes, and establish yearly targets for screening and positivity.

Example of disaggregation of screening targets and positivity per strategy for MSM in 2021			
HIV screening strategy	**Estimated people reached**	**Estimated positivity rate**	**HIV positive diagnosed**
PrEP New initiators	1,730	8%	138
Assist. part. Notif.	2,623	13%	341
Self-testing	2,235*	5%*	112
Current strategies	6,500	8%	520
TOTAL	**13,088**	**8.5%**	**1,111**

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Take away messages

Routine information systems can and should be used for measuring coverage and quality of services for KP.

Disaggregated analysis can support information on contribution of civil society to KP services.

The PAHO framework is a tool supporting the monitoring of service delivery models and

of quality and results of services (PrEP, self testing APN…)

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