





TEST AND TREAT: INNOVATIVE WAYS FORWARD

AIDS 2018 POST-CONFERENCE WORKSHOP

Indonesia, 8-9 December 2018



Complementary testing and services delivery

Community based testing, YKP experiences

Dr Pande Putu Januraga

Yayasan Kerti Praja/Universitas Udayana



Why do we need alternative strategy for HIV testing

- The coverage for first step of the HIV care cascade among key population is still <50%
- Bali case; analysis of VCT-SIHA data with comparison to the estimated number of MSM still under 10% per semester
- Men who purchase sex????
- No matters how good is the second and third cascade of HIV care, without being able to achieve 90% of first step, we will absolutely fail to control the epidemic



Evidence from Bali

- Community based screening program conducted by Spiritia-YKP
- The HATI Study; prospective cohort implementation study → one of the intervention in the second phase is community based oral fluid testing (OFT)
- Brothel-distributed HIV self-testing by lay workers improves HIV testing rates among men who purchase sex



The Spiritia self-screening

- YKP was the implementing partner
- We don't have permit to present the results
- Coverage is quite low



The HATI study

- Intervention from January to December 2018
- Supervised and unsupervised methods
- Referral system to VCT sites for confirmation test and link to care if positive



Marketing OFT

- Conducted by lay workers who are part of the community
- Network of the lay workers
- Online social media platform: WA, Wechat, BBM, Line,
- Gay specific social network Apps



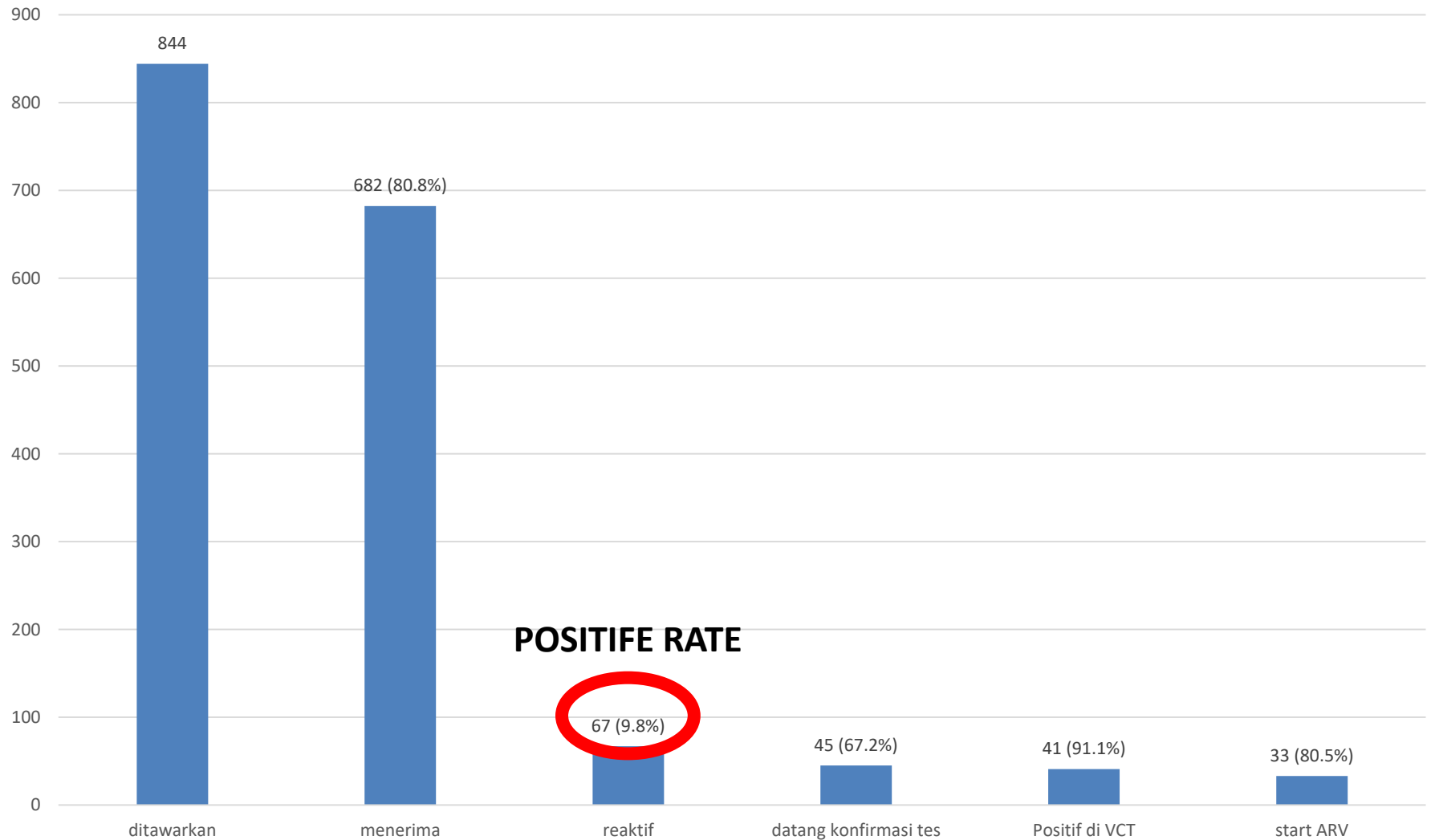
LOKASINYA???





OFT cascade in the HATI study

First week of November 2018





Why interested in OFT?

- No time to visit services during working time
- Perceived stigma and discrimination in services
- OFT provide freedom to manage time for testing
- Reactive results provide enforcement for the client to access VCT services



Barriers for OFT implementation

- Refused OFT → afraid of result, higher trust for VCT result **(but no time to access test)**
- Received OFT & reactive but have not yet come to the VCT services → LTFU
- Unsupervised → returned kit or LTFU



Brothel distributed OFT among men who purchase sex in Bali

Wulandari, L. P. L., Kaldor, J., & Guy, R. (2018). Brothel-distributed HIV self-testing by lay workers improves HIV testing rates among men who purchase sex in Indonesia. In *Australasian Conference HIV & AIDS Program*. Sydney: ASHM. Retrieved from

<https://ashm.eventsair.com/QuickEventWebsitePortal/2018-australasian-hivaids-conference/program/Agenda/AgendaItemDetail?id=e1e9eb20-f989-4edd-bcf2-69ce826e4700>



Results (Wulandari et al, 2018)

- Among the men approached, 292 completed the health survey
- of whom, 189 (64.7%) agreed to have a HIV self-test. 12.7% reported a HIV testing in the past.
- Most men, 186 (98.4%), requested to have assisted HIV self-testing (156 supervised reading, 30 unsupervised), and 3 (1.6%) unassisted.
- of the tests done, 2.1% were reactive.



Results (Wulandari et al, 2018)

- They could test themselves and it was easy
- Would like to receive self-test again in the future
- Will recommend it to their partners and to other men.



Conclusions

- Self-testing has potential to be implemented as an alternative strategy to reach the hard-to-reach groups such as MSM and men who purchase sex
- Better strategy for unsupervised/unassisted test



What next?

- Screening or testing, OFT to blood prick test?
- Female sex workers?
- Financing?
- Marketing?



MATUR SUKSMA