



Project PREVIH

**"HIV/AIDS infection on men who have sex with men (MSM) and commercial sex workers (CSW):
Prevalence, determinants, prevention interventions and health service access"**

Main Results; interventions and future challenges

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European Civil Society Forum –December 4th, 2012



- 4 year national project, coordinated by GAT and supervised by the National Institute of Tropical Medicine

- Up to 2009 – no data on MSM and CSW

- Primary aim: collect data regarding HIV infection on MSM and CSW, and associate it with behavioral data and health determinants in order to design more effective prevention, testing and linkage to care interventions.

- First major action research project that involved community, academia and government;

- Acceptance of the study by the community was possible thanks to guarantees of linkage to care, regardless of administrative status (The Portuguese law ensures access to treatment to undocumented migrants);

- 2010 – Data collection – Baseline study

- After the baseline data analysis, we aimed to develop pilot projects to address the identified needs.

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Partnerships and consultants

22 CBO/NGO spread throughout the country

All regional health administrations (5)

10 Public Early HIV detection centers

6 Hospitals

Other public health structures (specialized HIV/STI services)

Over 20 different experts from diverse areas as scientific consultants (epidemiology, public health, psychology...)

2 consultative/community councils, equivalent to Community Advisory Boards (one MSM, one CSW)

- Composed by members of organizations/projects that work with these populations and community members.

CSW Consultative council composed of 7 CSW and 22 Organizational representatives

MSM Consultative council composed of 14 individual members and organizational representatives, the majority of which are MSM

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Community involvement – numbers (baseline)

31 MSM interviewers – trained peers and NGO/CBO members

60 CSW Inquirers – NGO/CBO members (peer involvement on the second round of data collection, currently being implemented)

1 046 MSM interviewed (baseline)

1 040 CSW interviewed (baseline)

6 SW peer educators trained and cooperating with other NGO outreach teams; 9 more in training at the moment

25 MSM peer educators trained to disseminate risk reduction information on their social networks; more training sessions scheduled for December/January

Overall involvement of public structures and NGO/CBO staff from 41 organizations throughout the country, and over 50 community members.

8 community based testing sites (on the second round of data collection): VCT methodologies developed and implemented (needs based, as pilot projects)

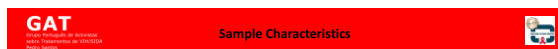
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Commercial Sex Worker Survey (SW) (Main Findings) n=1040

(Baseline study – 2010)



Sample Characteristics

- 1040 Total Sample
- Gender: 82% female, 10,2% male; 7,8% transgender
- Age range: 50% under 35 years old
- Nationality – Portuguese – 565 (54,4%); Foreigner 450 (43,4%)
- Country of Origin (n=446):
 - Brazil - 65%;
 - Eastern Europe 8,7%;
 - Portuguese speaking african countries – 7,9%;
 - Other african countries – 13,9%
- Educational level (n=1029): Aprox 70% reported a low educational level (high school or lower)
- Employment Status aside from sex work (n=897): Unemployed – 72,2%; employed – 24,3%
- Monthly Income (n=995) – under 500€ - 25,5%; 500-1000€ - 35,5%; 1000-2000€ - 23,4%; +2000€ - 15,8%

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GAT **Condom use with last client and last non client partner**

		Female		Male		Transgender	
		n	%	n	%	n	%
Condom use with last client (n=1020)	Sim	823	98,3	85	82,5	80	100
	Não	14	1,7	18	17,5	0	0,0
Condom use with last non client partner (n=843)	Sim	240	35,2	52	54,2	48	72,7
	Não	441	64,8	44	45,8	18	27,3

Frequency of condom use with clients over the last 30 days

	Frequency of condom use with clients over the last 30 days		
	Female (n=833)	Male (n=102)	Transgender (n=81)
	%	%	%
Always	91,0	73,6	81,5
Sometimes	8,3	22,5	18,5
Rarely/Never	0,7	3,9	0,0

GAT **Substance consumption (last year and last 30 days)**

	No último ano			No último mês		
	Feminino	Masculino	Transgénero	Feminino	Masculino	Transgénero
	%	%	%	%	%	%
Álcool	39,9	64,2	61,7	35,8	59,4	56,8
Cocaína	14,0	33,0	22,2	11,7	29,2	18,5
Cannabis	10,3	37,7	24,7	8,0	30,7	17,3
Medicamentos	13,5	15,1	13,6	10,6	9,4	6,6
Heroína	7,2	15,1	4,9	6,3	14,2	3,7
Metadona	5,0	4,7	2,5	4,7	3,8	1,2
Ecstasy	0,8	12,2	3,7	0,2	2,6	2,5
Anfetaminas	0,4	3,8	0,0	0,1	2,8	0,0
LSD	0,1	1,9	0,0	0,1	0,9	0,0
Cogumelos alucinógenos	0,0	1,9	0,0	0,1	1,9	0,0
Outras substâncias	0,5	1,9	4,9	0,4	0,9	3,7

GAT **Self reported serostatus (n=921)**

	Total		Female		Male		Transgender	
	n	%	n	%	n	%	n	%
Positive	66	7,2	50	6,6	4	4,8	12	15,4
Negative	762	82,7	630	83,0	76	90,5	56	71,8
Unknown	93	10,1	79	10,4	4	4,8	10	12,8

HIV rapid test results (n=213)

	Total		Female		Male		Transgender	
	n	%	n	%	n	%	n	%
Reactive	19	8,9	14	8,0	3	10,7	2	22,2
Non reactive	194	91,1	162	92,0	25	89,3	7	77,8

Linkage to care ensured, but no feedback from hospitals on the baseline study. Report system was implemented for the second round of data collection (ongoing).

GAT **Reactive rapid tests**

- 82,6% of the 213 participants that were tested were female (n=176), 13,1 (n=28) were male and 4,2 (n=9) were transgender.
- 11 reactive tests on migrants (10,5% prevalence)
- 8 reactive tests among african migrants, 7 were women (8,1% prevalence on migrant women, 14,9% on african women)
- Portuguese female sex workers had also 7 reactive tests (8,0% prevalence)
- 33,3% of the people with a reactive result reported inconsistent condom use with clients over the last 30 days (sometimes using condom);
- 5 of the people with reactive results report never using condoms with non client partners; 3 report using it sometimes (n=11);
- With regard to drug consumption, 11/12 people with reactive test results (those that answered the drug survey) reported heroin (3/12) and/or cocaine (10/12) consumption at a given point in their lives.

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Men who have Sex with Men (MSM)
Main findings
(n=1046)

(Baseline study – 2010)

GAT **Data overview**

- 10% of the sample were non nationals (higher than the portuguese migrant prevalence);
- Data is similar to other international surveys;
- Diverse sample in terms of socio demographic data, with a greater focus on 25-35 yr old, well literate and employed MSM.
- Very low adhesion to testing in public centers and no new diagnosis in public centers;
- Drug use over the last 12 months: over 70% report alcohol, approximately 20% cannabis; approximately 10% report cocaine use and approximately 5% report consuming ecstasy.



Prevalences



Self reported serostatus (n=1038).

	n	%
Positive	94	9,1
Negative	766	73,8
Unknown	178	17,1

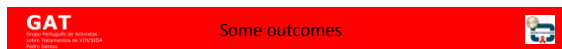
HIV rapid test result(n=76).

	n	%
Reactive	7	9,2
Non reactive	69	90,8

CheckpointLX's data confirms high prevalences on MSM (1115 tests, 5,3% reactive)

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Some outcomes



- First large scale survey in Portugal (in MSM and CSW) – High prevalences justify continuous monitoring and evidence based interventions;
- Information and prevention material distributed to over than 2000 people;
- More people know their serostatus and have information on where and how to get tested, and treated;
- Peer educators integrated in the teams may work as a primary catalyst to further community involvement (CSW);
- High acceptability of peers in intervention teams (CSW);
- First steps taken for the creation of a sex worker association;
- MSM Sexual Health back on the activist's, researchers' and policy makers' agenda;
- Community testing network under development foreseen for 2013, with an initial group of 14 screening points throughout the country (10 NGO's);
- Pilot screening project with Dried Blood Samples set to start in December (hepatitis B, hepatitis C and syphilis screening in NGO's);

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What we believe is still urgent:



- Increase knowledge about HIV and STI transmission and prevention;
- Increase number of people aware of their serostatus (for HIV and other STI);
- Increase availability of rapid tests and ensure linkage to care, both in formal and informal settings;
- Increase NGO intervention capacity, by continuous training and monitorization and the development of efficient strategies to promote prevention, early testing and linkage to care;
- Promote national networks and continuous and adequate data collection.

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Next steps



- The project is re-evaluating the data in a second round of data collection.
- The fact that outreach HIV screening initiatives during 3 months were effective, reinforces the need to have HIV and probably STI and hepatitis screening outside of the formal healthcare.
- Part of these reactive tests occurred in migrant SW, which have greater access barriers to standard healthcare system that community based services can overcome.
- The need to ensure linkage to care, allowing people with reactive tests to be immediately referred to a hospital for confirmation and to start treatment if necessary is also a concern. PREVIH ensures this with time limited protocols (as a research project), but more permanent solutions must be developed in order to ensure equal access to all.
- In 28th and 29th March 2013, PREVIH will host the "II International Conference on HIV among hidden groups, namely MSM and CSW". We invite all of you to attend, and will be giving more detailed information during the current month.

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Thank you

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