

Improving HIV Index-contacts testing (ICT) through Intimate Partner Violence (IPV)-Risk assessment questionnaire and ICT national App at selected health facilities in Haiti: challenges, mitigation and implications for the National AIDS Control Program

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BACKGROUND

The UNAIDS developed a set of goals to help ending AIDS globally, which include the delivery of HIV testing services (HTS) to 95% of people infected with HIV.

95% of people tested have known HIV positive status

95% of HIV positive people initiated on ART

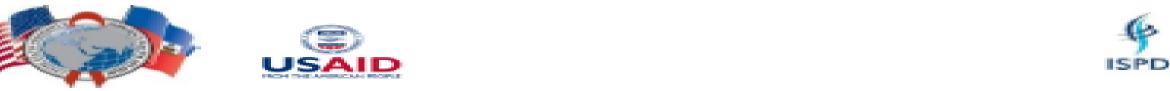
95% of ART patients virally suppressed

DESCRIPTION

Following a literature review we adapted an IPV-risk assessment questionnaire (Fig.2) that uses an introductory script and standardized questions and it integrated as part the Of elicitation process of ICT. The questionnaire written in Haitian Creole was administered to all index-patients/clients.

The findings helped address the expressed regarding concerns potential domestic violence related ICT procedures. We then to index-patients/clients on advised the most appropriate contacts' tracing options to prevent potential adverse events directly related to index testing.

Fig.2:IPV-risk assessment tool



Keksyonè pou evalye risk Vyolans sibi nan men patnè seksyèl [IPV*/GBV* Screening Tool]

Keksyonè sa se yon zouti ki la pou ede prestatè yo evalyè risk vyolans ke pasyan yo ta rive sibi anba patnè seksyèl yo epi dokimante repons yo pou viktim yo kapab resevwa bon jan asistans/referans ak sipò nan respè konfidansyalite. Genyen kèk nan kèksyon yo ki ka choke w, wa ekskize nou. Ou pare? Mèsi pou konfyans ou epi kolaborasyon w!

KEKSYON	WI/NON	KÒMANTÈ
Eske ou genyen patnè seksyèl [moun wap fè bagay/sèks]?		
Eske ou viv nan menm kay ak patnè seksyèl [moun wap fè		
bagay/sèks] ou?		
Eske ou santi ou an danje lè w avèk patnè seksyèl ou? Si wi,		
poukisa ?		
Eske sa rive ke patnè seksyèl ou leve men sou/frape ou		
oswa fè w menas?		
Eske sa rive deja ke ou santi w toumante paske ou anvi fè		
patnè seksyèl ou a mal tankou : blese li, frape li, touye li		
menm ?		
Si wi, poukisa?		
Eske sa konn rive ke ou santi ou pè patnè seksyèl ou? Si wi,		
poukisa?		
Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou		
maltrete w tankou: bay w kalòt; bay w kout pye; peze kou		
w; bourade w; mode w; blese w; rale kouto/zam sou ou?		
Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou		
imilye w ; joure w; meprise w; pa ba w valè devan lòt		
fose w fè sèks oswa fè kèk Pratik seksyèl ke ou pa vie ?		
Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou		
menase fè pitit ou oswa fanmi w mal si ou pa dako fè sa li		
vle?		
Eske ou konn anvi fè tèt ou mal lakòz jan patnè seksyèl ou		
trete w ? Si wi, poukisa?		
	Eske ou genyen patnè seksyèl [moun wap fè bagay/sèks]? Eske ou viv nan menm kay ak patnè seksyèl [moun wap fè bagay/sèks] ou? Eske ou santi ou an danje lè w avèk patnè seksyèl ou? Si wi, poukisa ? Eske sa rive ke patnè seksyèl ou leve men sou/frape ou oswa fè w menas? Eske sa rive deja ke ou santi w toumante paske ou anvi fè patnè seksyèl ou a mal tankou : blese li, frape li, touye li menm ? Si wi, poukisa? Eske sa konn rive ke ou santi ou pè patnè seksyèl ou? Si wi, poukisa? Eske sa konn rive ke ou santi ou pè patnè seksyèl ou? Si wi, poukisa? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou maltrete w tankou: bay w kalòt; bay w kout pye; peze kou w; bourade w; mede w; blese w; rale kouto/zam sou ou? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou imilye w ; joure w; meprise w; pa ba w valè devan lòt moun; anpeche w pale ak lòt gason/fanm? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou fose w fè sèks oswa fè kèk Pratik seksyèl ke ou pa vle ? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou fose w fè sèks oswa fè kèk Pratik seksyèl ke ou pa vle ? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou fose w fè sèks oswa fè kèk Pratik seksyèl ke ou pa vle ? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou fose w fè sèks oswa fè kèk Pratik seksyèl ke ou pa vle ? Eske sa konn rive ke aktyèl oswa ansyen patnè seksyèl ou menase fè pitit ou oswa fanmi w mal si ou pa dako fè sa li vle?	Eske ou genyen patnè seksyèl [moun wap fè bagay/sèks]?

pandan konsèy avan tès VIH; pandan nap ofri PCPI a; dyalòg ak kontak seksyèl pasyan endèks yo; dyalòg ak sikològ oswa travayè sosyal la; konsiltasyon jeneral; elatriye. Kliyan/pasyan gen dwa refize patisipe nan evalyasyon an, lè sa prestatè dwe respekte desizyon an epi bay kliyan/pasyan tout lòt sèvis ke li bezwen.

Haiti, women predominantly In attend clinics and thus are more likely to be informed of their HIV status. There is no policy/legal requirement making HIV disclosure to sex partners mandatory, which makes index contacts testing (ICT) totally voluntary.



Fig.3: ICT procedures' training jointly with the MoH/PNLS

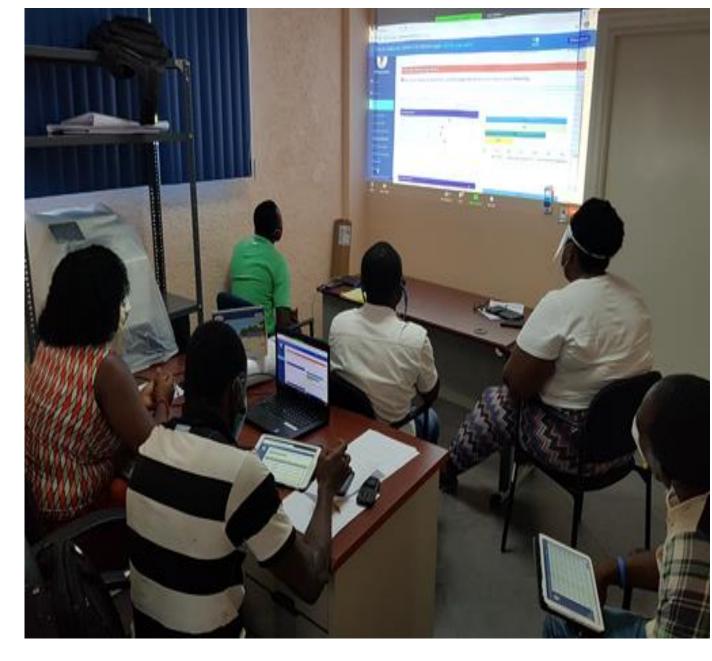


Photo credit: ISPD/BRIDGE Team

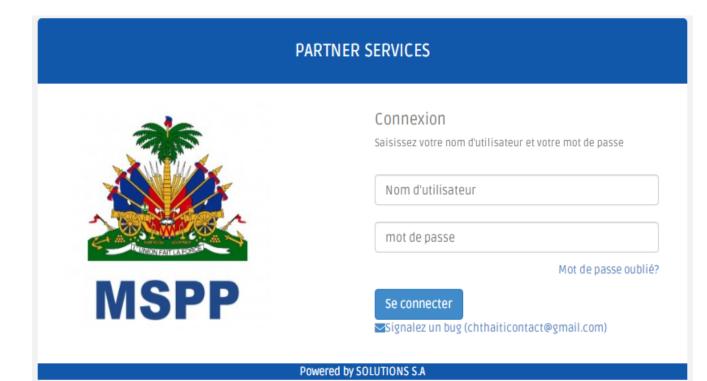
*IPV = Intimate Partner Violence

*GBV = Gender-Based Violence

Source : https://www.health.ny.gov/diseases/aids/providers/regulations/domesticviolence/guide.htm

Version Septembre 2020

Fig.4:Haitian ICT National Application



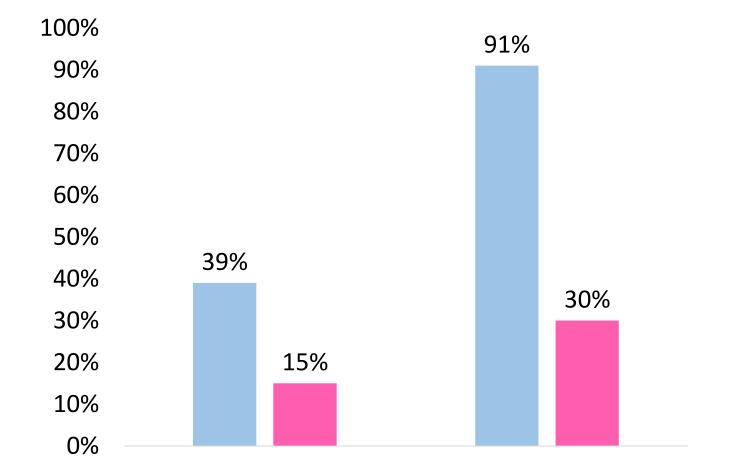
LESSONS LEARNED

During the FY20 quarters (Q2 and Q4), the proportion of contacts tested for HIV among those listed index-patients was low by (Graph.1). For the period, a total

CONCLUSION

When comparing the periods FY20 Q2 to Q4 versus FY21 Q1 to Q2, we observed that the Contacts HIV seropositivity yield has significantly increased (n=15% to 30%) as well as the percentage of contacts with known HIV status (n= 39% to 91%) (**Graph.2**).

Graph.2:Improvement of ICT performance following the key interventions



regards to that reality, the In National AIDS Control Program acronym: PNLS) along (French collaboratively with its partners ICT national adapted the guidelines from WHO's SOP on ICT (**Fig.1**). However, fear of stigma/discrimination and possible intimate partner violence (IPV) remain a major barrier to effective ICT.

Fig.1: ICT National guidelines



REPUBLIQUE D'HAÏTI Ministère de la Santé Publique et de la Population Programme National de Lutte Contre les IST/ VIH/SIDA

Procédures Opérationnelles Standardisées Pour la Prise en Charge des Contacts des Patients Index en Haïti

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providers Furthermore, and community health workers (CHWs) training (**Fig.3**) received and assistance weekly technical to ensure the implementation of the national ICT App (Fig.4), which allows timely monitoring/tracking of contacts eligible for tracing and HIV testing notably those unaware of their status.

Additionally, our weekly review of ICT data has helped monitor progress on ICT App and address challenges timely.

of 164 contacts knew their status among 423 listed (39%) with a positivity rate of 15% (n=25/164).

Following the implementation of **IPV-risk** the assessment questionnaire combined with the use of ICT national App, in the FY21_Q1 and Q2, the proportion for HIV of contacts tested significantly increased to reach 91% (n=368/403) for this all period including a HIV-positivity rate of 30% (n=111/368).

Furthermore, we had no reported IPV cases related to ICT.

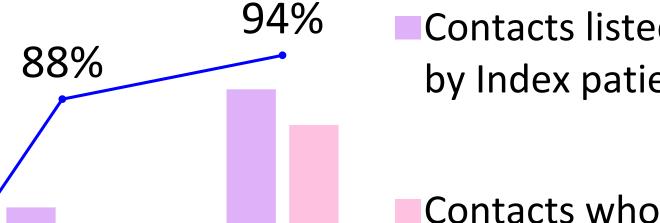
FY20_Q2 to FY20_Q4 FY21_Q1 and FY21_Q2 Percentage of Contacts tested for HIV among those listed by index-patients Contacts HIV Seropositivity Yield

The adapted IPV-risk-assessment questionnaire along with training on ICT procedures and technical assistance to effectively implement the ICT national App have contributed to improve ICT at the selected facilities and led to an increase in HIV positivity rate among contacts with known HIV status while no domestic violence was reported; such strategy may help the National AIDS Control Program of the Ministry of Health improve HTS nationally.

ACKNOWLEDGMENT

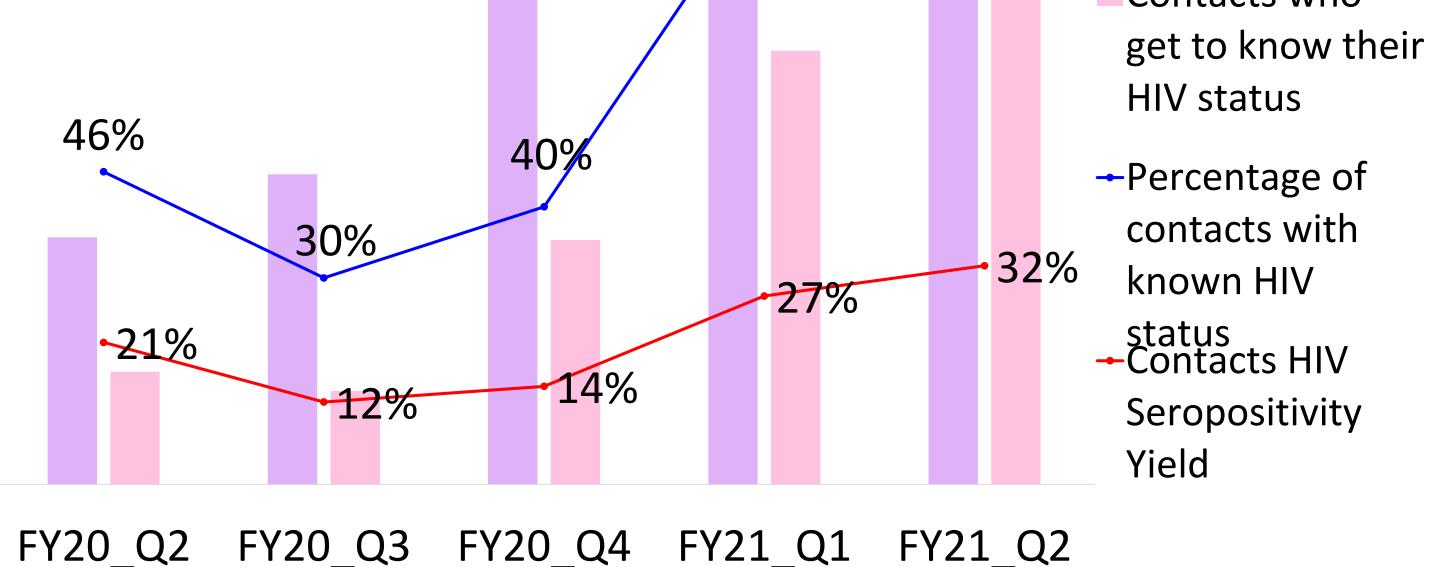
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Graph.1:Increased proportion of contacts who get to know their HIV status versus Contacts listed by Index-patients



Contacts listed by Index patients

We present here the outcomes of intervention aiming at an increasing ICT contribution to overall HIV testing services (HTS) and positivity rate at selected health facilities in Haiti.



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