Encouraging female sex workers to self-test for HIV in Uganda

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Highlights

Evidence impact

- Evaluation findings that direct provision of HIVST kits through peer educator groups led to effective uptake of testing amongst female sex workers (FSWs) informed Uganda's Ministry of Health's Addendum to the HIV Testing Services Policy and Implementation Guidelines, published in 2018.
- The WHO issued a recommendation supporting HIVST, appearing in the annexes of the supplement to its Consolidated Guidelines on HIV Testing Services released in December 2016. The recommendation cited this 3ie research, amongst other studies.

Factors that contributed to impact

- Uganda's Ministry of Health has communicated regularly with 3ie and the researchers since the start of 3ie's HIVST research programme, ensuring the study responded to the evidence demands of stakeholders, such as the National AIDS and STI Control Programme.
- Timely reporting and release of evaluation findings allowed the ministry to consider them whilst drafting the addendum to the guidelines.
- The research team conducted media engagements during the workshops that gave the study widespread coverage.
- Engagement with researchers of multilateral organisations in contexts like conferences and workshops organised by 3ie ensured uptake of evaluation findings.

Impact evaluation details

Title: Direct provision versus facility collection of HIV tests: impacts of self-testi...

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Status : Completed April 2018



Context

HIV testing is considered the important first stage of HIV treatment, care and prevention. In Sub-Saharan Africa, female sex workers (FSWs) are at particular risk of HIV and have the highest prevalence. However, they face numerous barriers to HIV testing, including stigma, discrimination, transport costs and other logistical hurdles.

HIV self-testing (HIVST) has been identified as a solution to these barriers. Many studies have demonstrated acceptability and accuracy of HIVST among the general population, but very few have considered how they could be delivered to and taken up by FSWs. Not enough evidence was available to determine whether HIVST increased the number of FSWs who knew their HIV status.

Given this knowledge gap, in 2016, 3ie supported researchers from Harvard University; the University of California, San Francisco; the University of Heidelberg; and multilateral organisations explored the effects of HIVST delivery models amongst FSWs in Kampala, Uganda.

In cluster randomised controlled trials, participating FSWs received one of three types of services: direct peer provision of an oral HIVST kit; peer provision of a coupon exchangeable for oral HIVST kits in 10 designated healthcare facilities; or standard care.

Evidence

The findings demonstrated that providing oral self-test kits was effective in increasing HIV testing amongst FSWs and that it was a more effective approach than either of the other delivery models. The study also showed that HIVST could be a viable approach in leading FSW to take pre-exposure prophylaxis (medicine to prevent HIV) regularly.

Evidence impacts

HIVST for female sex workers gets health ministry's backing

In 2018, Uganda's Ministry of Health released an addendum to its national HIV Testing Services Policy, which recommended the direct provision of HIVSTs to FSWs. This decision was based on the compelling evidence from this 3ie evaluation, early engagement by the researchers with decision makers, and promising evidence from 3ie studies conducted elsewhere as part of the same evidence programme.

6 6[Ministry of Health] officials were involved in the project throughout. The dissemination plan was effective. The final workshop was covered in media the next day. Uganda was ready to adapt HIVST before these trials and that motivated them to use it. And as the study came out, [the direct provision approach] has been used because of the positive results.'

Katrina Ortblad lead principal investigator Harvard University

WHO observing the need of HIVST for female sex workers

The World Health Organization (WHO) guidelines on HIV testing strongly recommend offering HIVST as an approach to HIV testing services, citing evidence from various sources, including the research conducted by 3ie. The recommendation appears in the organisation's <u>Consolidated guidelines on HIV testing services</u> released in December 2019. These update the previous <u>guidelines on HIV Self-testing and Partner Notification released in 2016, and the numerous annexures to the 2016 guidelines</u>. The updated guidelines note that HIVST has emerged as an effective tool to expand testing among people at risk of HIV who may not otherwise test and those at ongoing risk who need to test frequently.

Suggested citation

International Initiative for Impact Evaluation (3ie), 2020. *Encouraging female sex workers to selftest for HIV in Uganda* **[online summary], Evidence Impact Summaries. New Delhi: 3ie.**

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<u>Preparation meets opportunity: how 3ie's stakeholder engagement paid off on HIV self-testing</u> This blog highlights how Uganda's government engaged with the evidence from 3ie's HIV self-testing evidence programme.

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Last updated on 13th November 2020