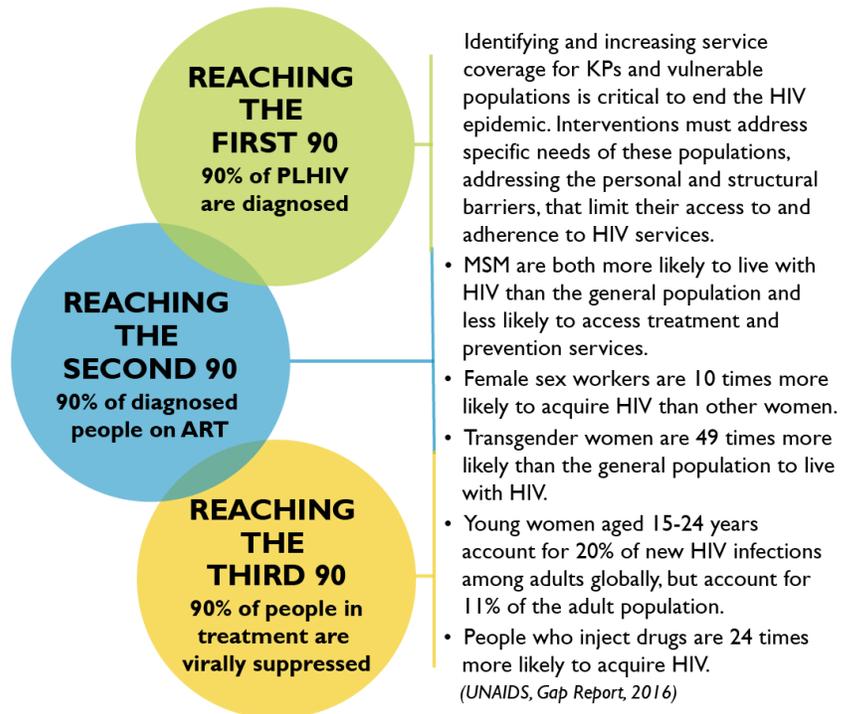


Key populations (KP) bear disproportionate burdens of HIV infection. Globally, new infections among KPs and their sexual partners account for 36% of all new HIV infections.<sup>1</sup> Achieving 90-90-90 treatment targets will require a renewed and focused approach to identify most at-risk and vulnerable populations and respond to their specific needs. Evidence suggests that KPs— notably men who have sex with men (MSM), people who inject drugs, sex workers, and transgender persons—are underserved and face violence, criminalization, ineffective policies that don't protect their rights, and stigma and discrimination, including in health care settings. This reality prevents KPs from accessing needed HIV prevention and care services, leading to low service

coverage, an important driver of ongoing HIV transmission in many resource limited settings. Young women and girls are also increasingly at risk of acquiring HIV. Acquisition of HIV is often associated with the incidence of unintended pregnancies, transactional sex, and gender-based violence.

## I-TECH Capacity

I-TECH draws from its extensive experience in training and education to understand and engage with KPs and other vulnerable populations in the design and implementation of innovative training techniques and novel testing, care, and treatment programs that value and are tailored to varied needs. Faculty at the UW's Department of Global Health are involved in multiple research and program efforts to improve and deliver HIV prevention interventions to young women, with expanding efforts to improve PrEP access and delivery to young women at risk for HIV. I-TECH, through the **DREAMS Initiative**, provides multicomponent programs to decrease HIV incidence in adolescent girls and young women. I-TECH applies high yield targeted testing approaches, such as assisted partner notification, to identify KPs, reach their sexual partner(s) and family members, and link them and their partner(s) to care and treatment services. I-TECH recognizes that reducing stigma and discrimination toward vulnerable groups in health care settings is critical and can have a positive impact on enrollment and retention in care, as well as viral suppression of HIV in communities most burdened by HIV infection. Training programs for health care workers (HCWs) are designed to improve HCW knowledge of and ability to deliver quality and specific care to KPs, improve communication between client and HCW, and provide a safe forum where HCWs can confront and address their own biases and beliefs about the key populations they serve.



<sup>1</sup> UNAIDS, Gap Report, 2016.

# I-TECH Case Studies

## Improving HIV Care for Key Populations in Caribbean Region: Preceptorship Program



This novel preceptorship program is aimed at building providers' capacity to provide nonjudgmental, high-quality comprehensive HIV care to key populations. In the region, this includes gay and bisexual men, other MSM, transgender women and sex workers. The two-day intensive training occurs in a simulated clinic setting, using targeted role-play scenarios developed in collaboration with representatives from the MSM, transgender, and sex worker communities. "Patients" are portrayed by skilled patient-trainers recruited from the local KP communities under the supervision of an experienced clinical facilitator. Trainees participate in 8 to 12 different clinical scenarios featuring patients who are transgender, MSM, and/or doing sex work. Through this role play, and in collaboration with an experienced clinical or nurse facilitator, healthcare workers practice taking a comprehensive sexual history and performing a proper ano-genital examination with appropriate site-specific STI screening. They practice individual risk assessment and risk reduction counseling. The health care worker is afforded the opportunity to have a frank and open discussion with the key population member—the patient-trainer—about the obstacles that influence his/her care, including layered stigma.<sup>2</sup> The program is currently training clinicians and nurses from HIV care and treatment sites in Jamaica, Trinidad, Suriname and Barbados.

**I-TECH Namibia** is in the planning stages with the Ministry of Health and Social Services, CDC, and other stakeholders for implementation of activities focused on reducing risk and preventing HIV among adolescent girls and young women (AGYW). The **DREAMS** approach is a core package of layered, evidence-informed interventions that go beyond health, addressing the drivers and contextual factors that directly or indirectly increase girls' and young women's HIV risk or contribute to their vulnerability. The core package of interventions aim to empower AGYW and reduce their risk for HIV and violence, reduce risk of sexual partners, strengthen families economically as well as in their ability to parent positively, and mobilize communities for change. I-TECH supported implementation will occur in selected constituencies in two regions of Namibia—Khomas and Zambezi. **I-TECH Zimbabwe** is evaluating a project to offer HIV testing to male partners of women enrolled in the DREAMS program, an effort aimed at reducing new HIV infections in adolescent girls and young women in 10 countries and linking men to services.



<sup>2</sup> Brown A, Bailey A, Palmer Q, Tureski K, Rogers SJ, Cushnie A, MIH, Adelaja A, Layered Stigma among Health Facility and Social Services Staff toward Most-at-Risk Populations in Jamaica, FHI 360, April 2012.



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