Targeted peer mobilisation and assisted partner notification services in Kenya

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BACKGROUND

The high HIV incidence among gay, bisexual and other men who have sex with men (GBMSM) and transgender women (TGW) in coastal Kenya requires innovative strategies to penetrate in hidden epidemics.

We assessed feasibility, safety and linkage to ART and PrEP services for:
• Peer mobilisation
• HIV self-testing and acute HIV infection screening
• Assisted partner notification services (APNS) among GBMSM and TGW in coastal Kenya.

METHODS

Between Apr-Aug 2019, lay GBMSM and TGW peer educators offered their peers:
• OraQuick HIV self-tests, or
• immediate clinic referral using symptom referral cards for peers with acute HIV infection symptoms

Regardless of the self-test result, referred GBMSM and TGW received clinic-based HIV testing and counselling (HTC) with two rapid HIV antibody tests in series.

If rapid antibody tests were negative or discrepant, GeneXpert HIV-RNA testing was performed.

Participants testing HIV negative were offered:
• PrEP
Participants newly diagnosed with HIV were offered:
• Immediate ART
• Assisted partner notification services
• In-depth interview one month after diagnosis

RESULTS

Provider referral (n=66)
Index referral (n=17)

Number of partners

In 18 in-depth interviews with index participants one month after their HIV diagnosis, no social harm was reported.

CONCLUSIONS

A targeted peer mobilisation approach offering self-tests, screening for acute HIV infection symptoms, and APNS for newly diagnosed GBMSM and TGW appeared feasible and safe. These strategies, especially provider-initiated APNS, may effectively penetrate hidden epidemics and link GBMSM and TGW to ART and PrEP services.

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Targeted peer mobilisation with HIV self-tests and assisted partner notification services for GBMSM and TGW appeared feasible and safe in:
• Identifying undiagnosed HIV infections
• Linkage to ART and PrEP services

Peer Educators
n=27

Mobilisation of GBMSM and TGW
n=785

Oral self-test
n=597

HTC: rapid antibody and RNA testing
n=454

Known HIV positive
n=7 (2%)

 Newly diagnosed, established HIV infection
n=16 (4%)

 Newly diagnosed, early HIV infection
n=1 (0.2%)

ART initiation
n=15 (88%)

PrEP initiation
n=103 (25%)

Assisted partner notification services accepted by index participants
n=28 (70%)*

* Including GBMSM and TGW newly HIV diagnosed through routine HTC or APNS