

# **HIV PEER COUNSELLORS: INNOVATION IN THE PAPUA NEW GUINEA HIV RESPONSE**

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## **Background/Purpose:**

The Papua New Guinea (PNG) health system faces numerous challenges including; a lack of trained health-care workers, poor health infrastructure and low HIV health literacy rates within the population. Other barriers for the delivery of successful Antiretroviral Therapy (ART) programs include interruptions to supply, regular ART stockouts and high rates of loss to follow up. These complex issues need to be addressed if the HIV epidemic in PNG is to be curtailed and managed.

## **Approach:**

Training health professionals in HIV management is essential but drawing upon other human resources, particularly in poor resource settings, is an important part of delivering HIV related services in PNG. Through a project based within Igat Hope Incorporated a program building peer capacity has been instigated to enhance and support the health workforce response to HIV by engaging People living with HIV (PLHIV) as paid staff in clinical settings. Igat Hope now employs 48 peer counsellors and educators in this role; located in seven provinces throughout the country.

## **Outcomes/Impact:**

Needs assessments revealed a wide-range of health literacy, skills, experience and training across peers. Responsive training to requested needs was provided and for some this was the first opportunity to receive formal training either as individuals or as a collective. Identified needs included: developing peer position descriptions, communication and support skills strategies, disclosure strategies and skills for enhancing adherence or to prevent loss to follow-up. Further training needs particularly to supporting adolescents and families with children were identified.

## **Innovation and Significance:**

Building the capacity of peer workers is an important strategy to managing HIV yet there has been minimal co-ordinated investment in supporting and understanding the training needs of peer workers who may be the primary support for PLHIV beyond the health setting. Further investment in train-the-trainer models is suggested.

## **Disclosure of Interest Statement (example):**

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