Interventions for improving the uptake of HIV testing among men who have sex with men in sub-Saharan Africa: A systematic review

Poster number

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This study highlights the impact of human immunodeficiency virus self-testing (HIVST) in boosting HIV testing rates and early detection among men who have sex with men (MSM). The effectiveness and cost-effectiveness of HIVST, especially when distributed through peer networks and supported by key opinion leaders (KOLs). Successful initiatives like mobile apps and peer-led efforts effectively promote HIVST and reduce stigma.

BACKGROUND

- As of 2023, nearly two-thirds of approximately 25.7 million people were living with HIV (PLHIV) in mer sub-Saharan Africa (SSA)
- Prevention efforts, including HIV testing, awareness campaigns, and condom distribution, have been implemented to address the demanding burden of HIV
- However, challenges such as medication adherence, stigma, and discrimination limit equitable access to healthcare services among men who have sex with men (MSM)
- Therefore, it is imperative to address the alarming disparities in HIV testing uptake and barriers to equitable access to care among MSM in SSA
- This systematic review is aimed at improving HIV testing uptake among MSM in SSA

METHODS

- The systematic review was registered with the International Prospective Register of Systematic Reviews (PROSPERO) (ID: CRD42022346821)
- It was conducted using the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines
- The Population, Intervention, Comparison, Outcome and Study (PICOS) design framework guided the selection and eligibility criteria

RESULTS

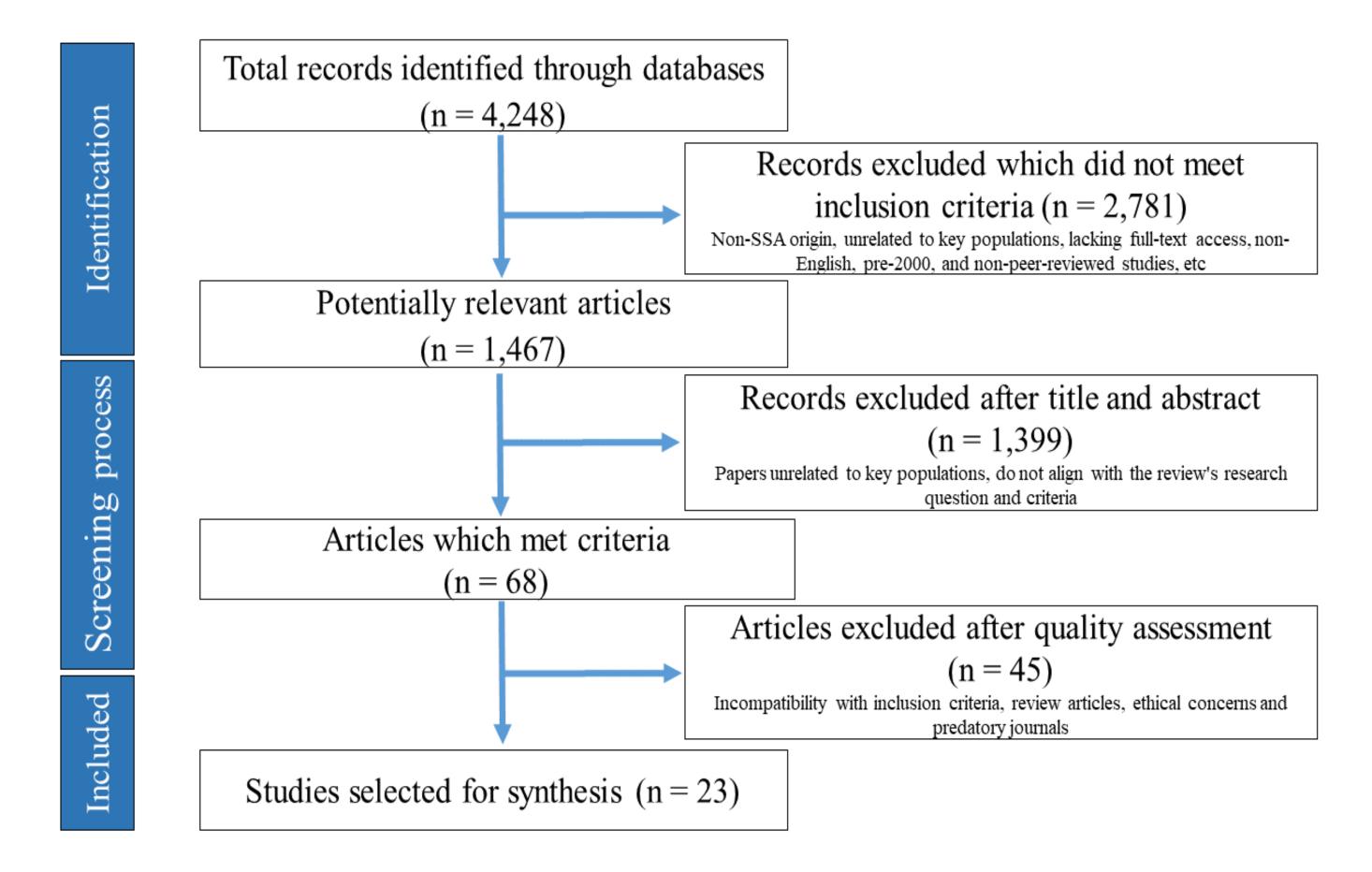


Figure 1. PRISMA flow diagram employed in this study

Characteristics of included studies

- This review included data from 23 studies conducted in 10 countries within the SSA region
- The 23 articles comprised 12 qualitative studies, two mixed-methods studies, and eight quantitative studies
- Studies were grouped into observational or intervention studies
- Observational studies were those without interventions, e.g. cross-sectional or descriptive studies. Intervention studies were those where an intervention was implemented
- The studies featured participants with the age range of 16 to 60 years
- These studies also had varying samples ranging from n = 20 to n = 391

Table 1: Characteristics of the eligible studies

First author, yes	ar Country	Study titles	Age	Study	Sample	Study design/approach
				period	size	
1. Skovdal et	al. Zimbabwe	Temporal discrepancies in "rapid" HIV	Not stated	April and	28 rapid	Qualitative and interview
2023		testing: explaining misdiagnoses at the		August	HIV	guides
		point-of-care in Zimbabwe		2018	testers	
2. <u>Sekoni</u> et	al. Nigeria	Operationalizing the distribution of oral	17 – 59 years	2017	20 MSMs	A hybrid methodology
2022		HIV self-testing kits to MSM in a highly				incorporating in-depth
		homophobic environment: the Nigerian				interviews and focus group
		experience				discussions
3. Inghels et	al. Côte	Preferences and access to community-	>18 years	25 April	518	Respondent-driven
2022	d'Ivoire	based HIV testing sites among MSM in		2018 to 1	MSMs	sampling (RDS) survey
		Côte d'Ivoire		February		
				2019		
4. <u>Dirisu</u> et	al. Nigeria	'I will welcome this one 101%, I will so	16 – 24 years	November	23 MSMs	In-depth-interviews with
2020		embrace it': a qualitative exploration of		2016		MSM and two focus group
		the feasibility and acceptability of HIVST				discussions with key
		among MSM in Lagos, Nigeria				opinion leaders

RESULTS CONTINUED

Table 2: Innovative interventions implemented to improve HIV testing among men who have sex with

First author, year	Objective of the study	Country	Type of HIV testing intervention	Place	Did the intervention improve uptake of HIV testing (HIV testing outcomes)
1. Skovdal et al. 2023	Explore the temporal Z discrepancies in "rapid" HIV testing and explain misdiagnoses at the point of care in Zimbabwe.	Zimbabwe	Point-of-care	Community-based	Yes
2. Sekoni et al. 2022	Operationalize the distribution of oral HIV self-testing kits to MSM in a highly homophobic environment, focusing on the Nigerian experience.	Nigeria	HIV Self-testing	Target individual and group-based	Yes
3. Inghels et al. 2022	Understanding the preferences and access to community-based HIV testing sites among MSM in Côte d'Ivoire	Côte d'Ivoire	Community-based testing	Community-based	Yes
4. Dirisu et al. 2020	Explore the feasibility and acceptability of HIV self-testing among MSM in Lagos, Nigeria.	Nigeria	Self-testing	Group-based	Yes

Table 3: Challenges and successes in the implementation of the HIV testing interventions among men who have sex with men

First author, year	Type of HIV testing intervention	Challenges of the Innovative Interventions	Successes of the innovative intervention
1. Skovdal et al. 2023	Point-of-care	Participants faced risks associated with revealing their HIV status or same-sex relationships.	Provides novel insights into the
2. Sekoni et al. 2022	HIV Self-testing	generalizability; the small pilot size	Role of KOLs in advocating and facilitating HIVST within the MSM community, emphasizing their potential as reliable resources for promoting testing.
3. Inghels et al. 2022	Community-based testing	The use of seeds from MSM non- governmental organizations in the survey may introduce selection bias, and similar	respondent-driven sampling (RDS), conducting both peer recruitment and interviews by phone, encompassing
4. Dirisu et al. 2020	Self-testing	Cost and knowledge about the use of self-test kits could affect their uptake.	

CONCLUSIONS

- Improving HIV testing services for MSM in SSA is critical in the global HIV/AIDS fight
- This study highlights the transformative impact of HIVST in boosting HIV testing rates and early detection among MSM
- The effectiveness and cost-effectiveness of HIVST, especially when distributed through peer networks and supported by KOLs
- Successful initiatives like mobile apps and peer-led efforts effectively promote HIVST and reduce stigma.
- Community-based testing, offering diverse options and proactive outreach, proves pivotal
- Interventions must prioritize reducing healthcare access barriers and consider the specific needs of MSM living with HIV to counter discrimination's impact on mental health

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