

## Training Course in Sexual and Reproductive Health Research 2015 Module: Principles and Practice of Sexually Transmitted Infections Prevention and Care

# STI and HIV Prevention and Care among MSM

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#### **Outline**

- WHO and key populations
- The MSM guidance
- Other relevant WHO guidance
  - The new 2013 ARV guidance
  - PrEP



#### WHO and Key populations

- Normative work
- Global advocacy
- Build and sustain partnerships
- Support implementation



#### Guidelines for the Psychosocally Assisted Pharmacological Teatment of Opioid Dependence

#### WHO's work on key populations

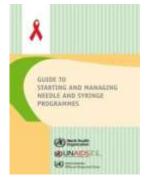
- People who inject drugs (2003-2012)
  - Normative (clinical and programmatic) guidance
  - Guidance to set national targets and measure progress
- Prisons (2005-2011)
  - Normative guidance
- MSM (2011)
  - Normative guidance
- SW (2012)
  - Normative guidance











Guidance to set targets & measure progress



#### Why guidance for MSM & transgender people?

- High vulnerability
  - MSM are 19.3 times more likely to be HIV-infected than the general population
  - Transgender people: estimated HIV prevalence is 19.1%
- Emerging epidemics in developing countries
  - Senegal: ~ 20% of new infections among MSM
  - Latin America: ~50% of all new infections among MSM
- HIV prevalence among MSM in Africa in context of generalised epidemics among heterosexuals
  - Kenya 15%
  - Malawi 21%
  - Namibia 12%
  - South Africa 15%
- High stigma, discrimination, violence impedes access to services
  - More than 75 countries criminalize sex with the same-gender



## Why the guidelines?

- No global technical recommendations had been made to guide health sector response of HIV for MSM and transgender people
- Epidemiology: communities disproportionately affected by HIV
- Demand from civil society, partners engaged in WHO global and regional consultations



#### **Momentum**

 10 June 2011, Political declaration on HIV/AIDS: Intensifying our efforts to eliminate HIV/AIDS

### Advancing human rights to reduce stigma, discrimination and violence related to HIV

77. Commit to intensify national efforts to create enabling legal, social and policy frameworks in each national context in order to eliminate stigma, discrimination and violence related to HIV and promote access to HIV prevention, treatment, care and support and non-discriminatory access to education, health care, employment and social services, provide legal protections for people affected by HIV, including inheritance rights and respect for privacy and confidentiality, and promote and protect all human rights and fundamental freedoms with particular attention to all people vulnerable to and affected by HIV;



#### Purpose and Target audience

#### Purpose

 Recommends a set of interventions for the prevention and treatment of HIV and other STI for MSM and transgender people

#### Target Audience

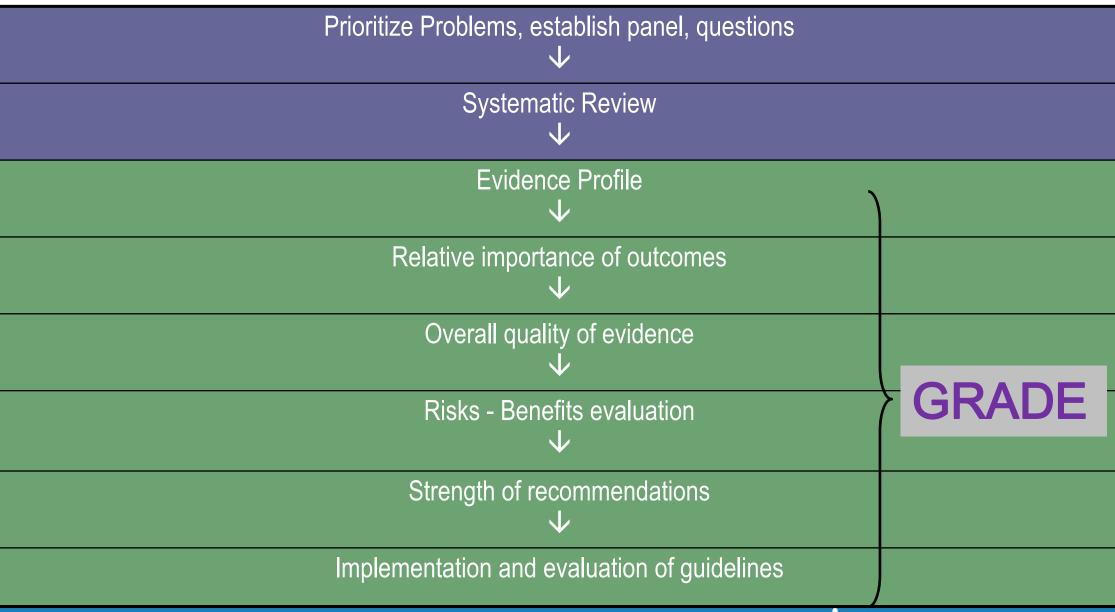
- Lawmakers, policymakers
- Programme managers (HIV & STI)
- Health care providers
- Bi-lateral and multilateral donors
- Affected communities

#### By whom

• broad range of partners WHO, UNDP, UNAIDS, GIZ, PEPFAR, MSMGF, other CSOs



#### Guideline development process





#### **Conceptual framework**

Human rights and inclusive environments

**Good Practice** 

Non-discrimination in healthcare setting

Individual Sexual Behavioral

**Prevention** 

Behavioral interventions and IEC

Substance use,
prevention of blood borne infections,
male circumcision

HIV testing and counselling

**HIV Testing and Counseling** 

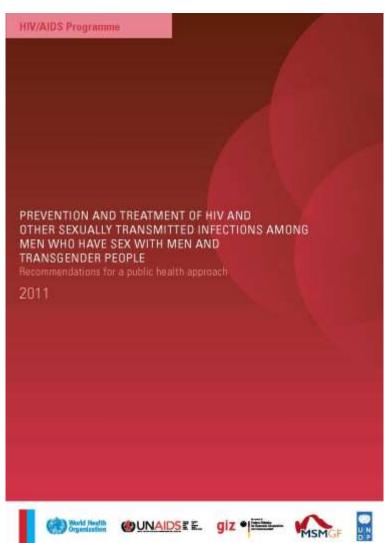
**Treatment and care** 

**HIV** care and treatment

**Prevention and care of other STIs** 



#### Highlights of 21 recommendations



- Good practices
- Technical recommendations





## **Good Practice Recommendations – Why?**

- Persistence of stigma and discrimination regarding sexual and gender diversity in many regions.
- Existence of legal barriers for MSM and transgender people to be recipients of governmental services.
- Necessary to include two recommendations addressing
  - National policy
  - Health sector



#### **Human Rights and inclusive environments**

Legislators and other government authorities should establish anti-discrimination and other protective laws, derived from international human rights standards, in order to eliminate discrimination and violence faced by men who have sex with men and transgender people, so that their vulnerability to infection with HIV and the impacts of HIV and AIDS would be reduced.



#### Access to services without discrimination

Health services should be made inclusive of men who have sex with men and transgender people, based on the principles of medical ethics and the right to health





#### **Prevention of sexual transmission**

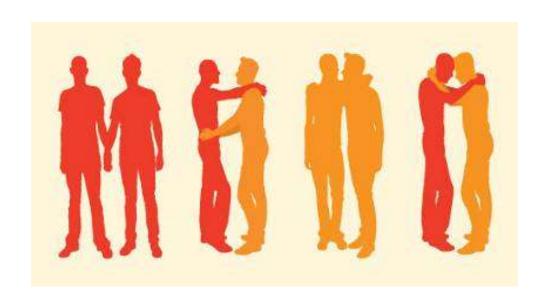
- Using condoms consistently
- Using condoms over sero-sorting
- Water and silicone based lubricants

 Not enough evidence to recommend male circumcision



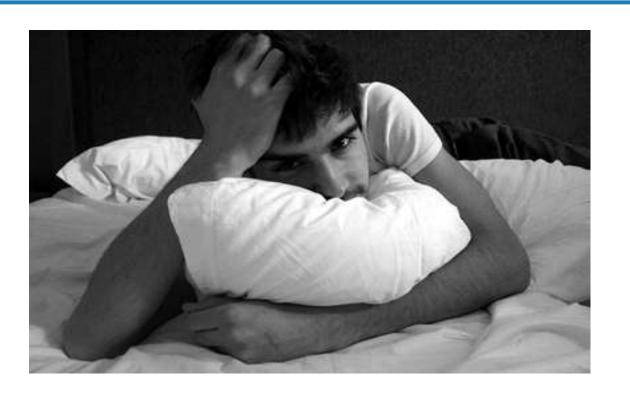
# Behavioural interventions information, education and communication

- Individual-and community level behavioural interventions
- Internet-based targeted information
- Social marketing strategies
- Sex venue-based outreach strategies



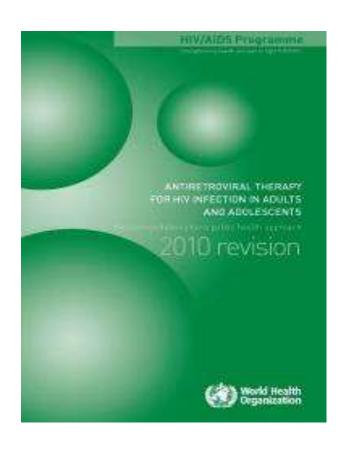


### **HIV** testing and counselling



- HIV testing and counselling
- include community-level programs that are linked to care and treatment

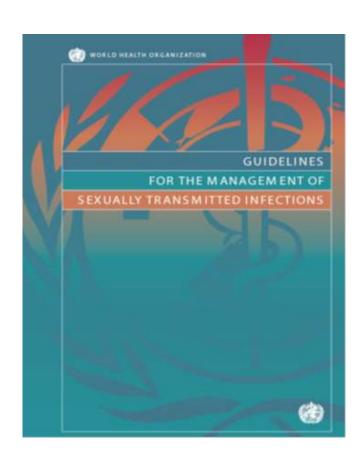
#### HIV treatment and care



- ART to be offered and provided the same as for other populations
- Essential interventions to prevent illness and HIV transmission



#### STI treatment and care



- Syndromic management and treatment
- Periodic testing for asymptomatic STIs



#### Substance use & harm reduction

- MSM and transgender people with harmful alcohol or other substance use should have access to
  - brief psychosocial interventions, involving assessment, specific feedback and advice.
- MSM and transgender people who inject drugs should have access to
  - needle and syringe programs
  - opioid substitution therapy.
- Transgender people who inject substances for gender enhancement should
  - use clean injecting equipment and
  - practice safe injection to reduce the risk of infection with blood borne pathogens such as HIV, hepatitis B and hepatitis C.



## **Next steps**

- Recommendations powerful advocacy tool and framework for policymakers
- Adopt in countries towards inclusive service provision
- WHO to release additional tools:
  - Fact sheets,
  - Young MSM
  - Operational guide
  - Target setting framework
- Capacity building at all levels
- Work with donors







## **Upcoming WHO guidelines on ART**

See: <a href="http://www.who.int/hiv/topics/msm/en/index.html">http://www.who.int/hiv/topics/msm/en/index.html</a>

