

PORTUGUESE COMMUNITY BASED SCREENING NETWORK

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OBJECTIVES

To implement a national NGO community based network program to provide screening for HIV and other sexually transmitted infections, aimed at People who use drugs, Sex workers, migrants from high prevalence countries and MSM, as part of a global approach considering monitoring and linkage to appropriate care.

METHODS

An initial 3 day training program is proposed to all partners, consisting of:

- Day 1: Information about HIV, HCV and other STI;
- Day 2: Testing and counselling model;
- Day 3: Practical application, data collection and reporting.

Standardized data collection tools, reporting forms and referral procedures are provided.

After the training, a minimum of one monthly supervision session is ensured, as well as laboratorial protocol validation and oversight, and scientific supervision and support for data analysis.

Support in developing communication and outreach strategies is also available.

Non health professionals and peers/mediators can enroll in the training program, despite the fact that peers/mediators are still not performing tests.

We intend to pilot and evaluate peer testing in different settings over the course of the next year.

PARTNER NETWORK

Currently 7 NGO's in 8 sites comprise the network, with 5 additional partners being contacted. The objective is to cover all of Portugal's main areas. Currently the main area covered is the great Lisbon area.



RESULTS

From January to August 2014, over 2,500 HIV tests were performed, with a reactive rate of over 3% overall, as seen on the table below.

Scaling-up of testing numbers has been very difficult due to financial constraints, with CheckpointLX center, in Lisbon, representing the vast majority of tests (75%). This has also compromised the number of other tests performed so far, despite the fact that HCV, HBV and syphilis rapid tests are also available, but applied only through risk criteria.

From October onward, more testing projects will start on the field with government funding, which will represent an additional 200 tests per month over the next year (minimum).

Main groups tested are MSM (59%) and migrants (18%). Scaling up of testing among PUD is foreseen to start in October, and among sex workers for January 2015.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Total
Tested for HIV	304	255	309	286	337	322	383	332	2528
# of HIV positives	12	11	12	8	9	12	9	10	83
HIV positivity rate	3,95%	4,37%	3,88%	2,81%	2,75%	3,79%	2,35%	3,01%	3,31%
# Linked (2nd appointment)	9	11	11	7	8	8	9	9	72 (87%)

Linkage to care is a priority and despite the high linkage rate (87%), there is still room for improvement. We intend to expand medical feedback mechanism in order to obtain anonymous CD4 cell count and viral load reports from Hospitals, after informed consent from participants.

Offering escort for the first and second appointments is key to the high percentage of linkage values, as it contributes to overcome access barriers among the targeted groups.

CONCLUSIONS

This initiative successfully challenged the traditional disconnection of community based HIV, STIs and viral hepatitis screening services provided to key populations. Data shows that these programs are critical settings to detect HIV infection and that it is possible to have a high rate of linkage to the healthcare system.

PROMOTED BY:

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Grupo Português de Activistas
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Pedro Santos

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