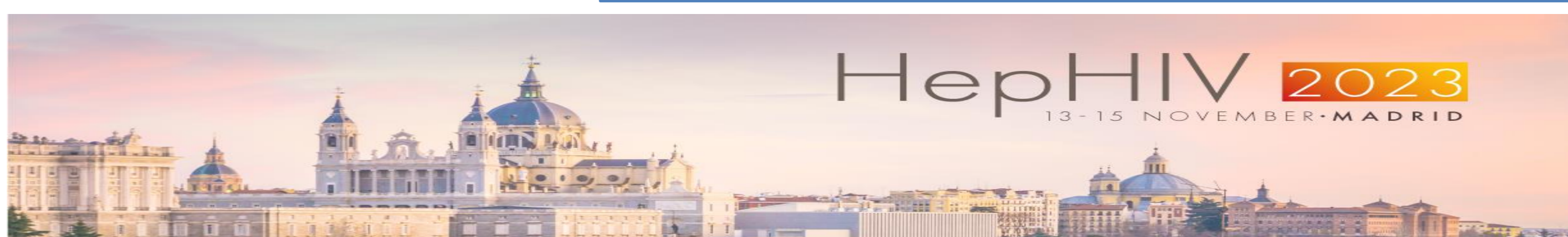


# COMMUNITY BASED ORGANIZATION'S BEST PRACTICES FOR HIV COMPREHENSIVE PREVENTION



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## OBJECTIVES

The UNAIDS Political Declaration on HIV and AIDS challenged countries to commit to increasing the proportion of HIV services delivered by communities, ensuring that, by 2025, community-led organizations deliver 30 percent of testing and treatment services, emphasizing HIV testing, linkage to treatment, adherence and retention support, and treatment literacy. This study examines the effectiveness of an innovative care model designed by Apoyo Positivo, a community-based organization in Spain.

## METHODS

Established in 1993, A+ operates five community centers across Spain (CASA), providing sexual health services, psychosocial care, and social entrepreneurship initiatives. The organization uniquely adopts a holistic approach to foster a sense of community, encouraging individuals to seek care comfortably. The Torremolinos center, founded in 2019 with the assistance of the FOCUS Program, embodies this comprehensive strategy. We conducted a descriptive cross-sectional study on the cohort of users at the CASA Torremolinos community center (Apoyo Positivo) from 2018 to 2022. We analyzed the prevalence of "point-of-care" serological tests in capillary blood, including ELISA 4th generation tests for HIV, AgHBs for HBV, anti-HCV antibodies for hepatitis C, and treponemal antibodies for syphilis, as well as the resulting positivity rates. Additionally, we described the cases assisted in our community resource related to sexual health counseling, harm reduction counseling, Tasp counseling, Prep counseling sessions, and Prep linkage to care.

## RESULTS

A total of 118 combined diagnoses, mainly of HIV and syphilis. More than 4,500 sexual health counseling and drug use harm reduction sessions; 74% of eligible individuals were linked to biomedical HIV prevention.



	2018	2019	2020	2021	2022	Total
<b>Testing services</b>						
HIV AB Tests, n (Δ)	275	404 (+47%)	482(19%)	539(+12%)	588(+9%)	2,288
HIV+ AB Tests, n (%)	8 (2.91%)	10 (2.48%)	15(3.11%)	12(2.23%)	9(1.53%)	54(2.36%)
HBsAg Tests, n (Δ)	82	176 (+115%)	237(+35%)	169(-29%)	274(+62%)	938
HBsAg+ Tests+, n (%)	0 (0,00%)	1 (0.57%)	1(0.42%)	0(00%)	1(0.36%)	3(0.30%)
HCV Ab Tests, n (Δ)	129	247 (+92%)	450(+82%)	475(+6%)	573(+21%)	1,874
HCV+ AB Tests, n (%)	1(0.78%)	0 (0.00%)	2(0.44%)	0(00%)	1(0.17%)	4(0.21%)
Syphilis tests, n (Δ)	214	347(+62%)	381(+10%)	439(+15%)	501(+14%)	1,882
Syphilis tests, n (%)	5 (2.34%)	8 (2.30%)	8(2.10%)	15(3.42%)	21(+4.19%)	57(3.03%)
<b>Comprehensive prevention services</b>						
Sexual Health counselling sessions, n (Δ)	596	654(+10)	704(+8)	874(+24%)	1,680 (+92%)	4,508
Harm reduction counselling sessions, n (Δ)	87	142(+63%)	183(+29%)	197(+8%)	242(+23%)	851
TasP counselling sessions, n (Δ)	18	29(+61%)	36(+24%)	25(-31%)	43(+72%)	151
Prep counselling sessions, n (Δ)	-	31	167(+439%)	390(+134%)	258(-34%)	846
Prep Linkage to care, n (%)	-	31(100%)	146(87%)	285 (73%)	167(65%)	629(74%)

## CONCLUSION

Apoyo Positivo's holistic model for HIV prevention has proved successful in promoting and performing HIV testing, linking to treatment when necessary, promoting adherence and retention support, and treatment literacy. Recommendations include strengthening partnerships with community-based organizations and promoting their approach to maximize prevention tool utilization and sustain efforts to halt the HIV epidemic. Adapting to changing demographics, behaviors, and systemic obstacles is critical, underlining the need for continued funding and collaboration with healthcare institutions.