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GAIA's Pilot Study on Door-to-Door HIV Testing Demonstrates Effectiveness in Reaching Hard-to-Find Groups Such as Men and Youth, a Critical Factor in Achieving 90-90-90 Targets in Rural HIV Hotspots

--Findings published in *Public Health Action*, a peer-reviewed journal of health solutions for the poor--

--GAIA aims to scale up Door-to-Door HIV testing to fortify 90-90-90 efforts --

July 17, 2017 (San Rafael, CA) – The Global AIDS Interfaith Alliance (GAIA) has published a study in the peer-reviewed journal *Public Health Action* on its Door-to-Door HIV testing program, designed to reach populations with lower rates of HIV testing in a remote and high-prevalence area, as well as reduce stigma associated with testing. GAIA's Door-to-Door (DtD) program – which included partnering with the Ministry of Health's District Health Office, holding stakeholder sensitization meetings, and then going household by household to test family members over the age of two for HIV – was effective in reaching men and youth specifically, according to study results. The pilot was conducted in Mulanje district, a rural southern region in Malawi, one of the poorest countries on the planet and an HIV hotspot, where 21% of the adult population is HIV-positive and poverty limits people's ability to travel to fixed facilities for health services.

HIV testing is a key component of achieving the UNAIDS strategy to end the AIDS epidemic, known as the 90-90-90 HIV targets, in which 90% of people living with HIV (PLHIV) know their status; 90% of those are on antiretroviral medication; and 90% of those are virally suppressed, or no longer infectious. "A particular concern in achieving these targets by the 2020 deadline is remote and rural HIV hotspot areas, such as southern Malawi where GAIA works, and where people live far off the healthcare grid with limited access to healthcare," says Todd Schafer, GAIA CEO. "As a result, GAIA is working to increase rates of testing and, therefore, rates of HIV status awareness, especially among the hardest-to-reach." Malawi is more than two-thirds of the way toward achieving these targets due to work done so far, but high-prevalence rural areas and high-risk populations like men and young people lag behind in taking the first step: testing.

In Malawi, rates of testing among men lag behind those of women – 18% fewer men have ever been tested for HIV – placing men at higher risk of remaining undiagnosed and transmitting the infection. Men access the health care system less often than women. This fact, along with cultural norms that associate strength and ability to provide for one's family with masculinity, and the perception that hospitals and clinics are 'female spaces,' create barriers to HIV prevention and care that put males at higher risk and make them harder to reach with HIV testing services.

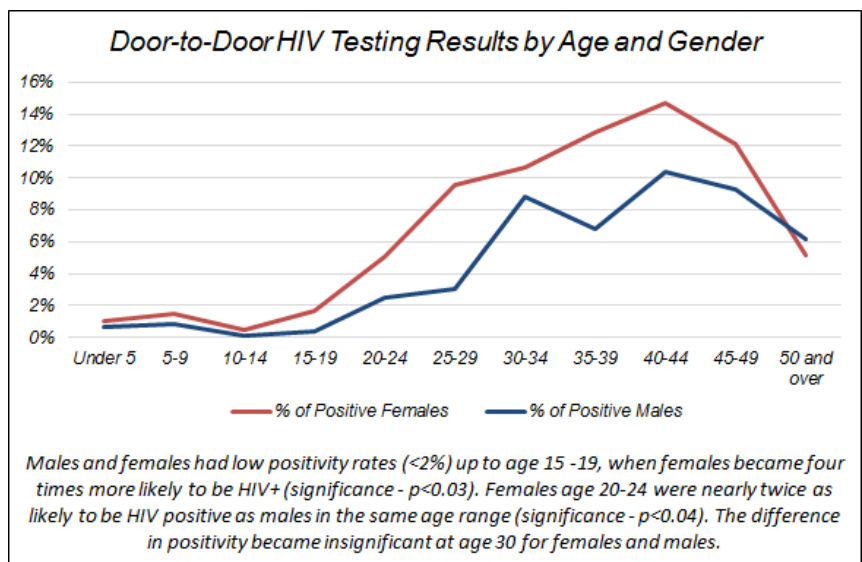
In the current study, 77% of males were receiving an HIV test for the first time, compared with 59% of females. “We believe that these men may not have been tested otherwise. The community-based and confidential nature of door-to-door testing makes it a promising method for reaching men, who are so critical to ending the epidemic,” notes Elizabeth Geoffroy, GAIA Monitoring and Evaluation Manager and lead study author. “Likewise, the approach helps reduce stigma, which is still a major concern. By offering testing on a community-wide basis and making it a routine part of healthcare, we can normalize and de-stigmatize HIV testing.”

According to an accompanying editorial entitled “HIV testing: the ‘front door’ to the UNAIDS 90-90-90 target,” community HIV testing approaches, like DtD, are known to “reach hard-to-find groups such as men and young individuals, with the added advantage of earlier HIV diagnosis.” The editorial continues, “poor HIV testing uptake would make it difficult to achieve the 73% (90% of 90% of 90%) target of all HIV-positive individuals being virally suppressed by 2020, and systemic factors that affect one step of the cascade are likely to affect the other steps [other two 90s] as well.”

Based on the success of the pilot study, GAIA currently is fundraising to implement a DtD campaign across the entire Mulanje district (<http://www.thegaia.org/get-involved/donate/>). Such a campaign would strongly support and complement the efforts of a broad coalition to achieve 90-90-90 in Mulanje, and make it among the first HIV hotspots in sub-Saharan Africa to achieve the targets. Coalition partners include The Elizabeth Taylor AIDS Foundation, Grassroot Soccer, PEPFAR, and others. “Along with coalition partners, GAIA’s work confirms that achieving 90-90-90 is possible in even the most challenging settings, but the window of opportunity is not indefinite,” says Schafer. “We must act now to achieve the targets by 2020, prevent a reemergence of HIV and realize the AIDS-free future that is within our reach.”

Key Study Results

Ninety percent (13,783/15,391) of people eligible for testing accepted. Forty-one percent (n=5,693) of those tested were male and 56% were under age 20. Four percent of the study group tested HIV-positive (n=524), with half as many males as females testing positive (OR 0.49, 95%CI 0.40-0.60, P<0.001). The rate of HIV-positive results was higher among those age 20 and older (6% for men and 8% for women). Two-thirds were receiving an HIV test for the first time; males were half as likely as females to have been previously tested (OR 0.43, 95%CI 0.40-0.47, P<0.001).



About GAIA

GAIA is a secular 501(c)(3) organization founded in 2000 in response to the global HIV/AIDS epidemic. Its mission is to develop and implement innovative and caring healthcare programs in resource-deprived regions in Africa, especially those most affected by HIV/AIDS, tuberculosis, and malaria. To ensure the broadest possible impact, we rigorously test initiatives and promote the replication of successful models. GAIA programs aim to achieve UNAIDS 90-90-90 HIV treatment targets in rural, remote Malawi by 2020 -- 90% of people living with HIV know their status; 90% of those are on treatment; and 90% of those are virally suppressed, or noninfectious -- a “treatment as prevention” strategy to end the AIDS epidemic by 2030. For more information visit www.thegaia.org.

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Links to article and editorial:

[Going door-to-door to reach men and young people with HIV testing services to achieve 90-90-90 treatment targets, Public Health Action, June 2017](#)

[Editorial: HIV testing: the ‘front door’ to the UNAIDS 90-90-90 target, Public Health Action, June 2017](#)