



What are the key findings of the study of HIV infection communication processes?

HealthLink project: 'Accelerating Ukraine's Efforts to End HIV'



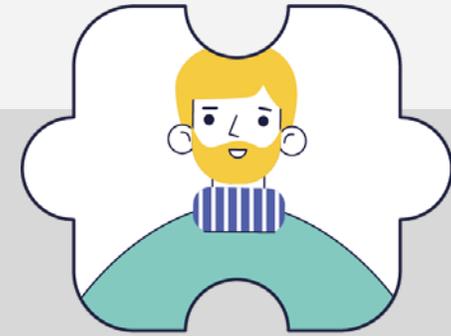
Do you know?

Ukrainian men and women **trust the most HIV -prevention NGOs** as sources of information about HIV. But, at the same time, **know little about the services of those organizations**

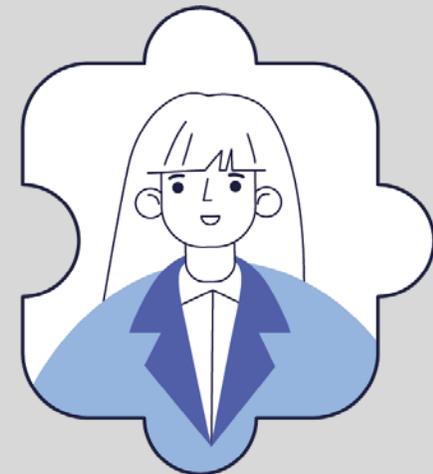
Healthcare workers of any profile **have a high level of trust**. They are considered reliable sources of information, but at the same time, **most of them do not know enough about HIV and still show a stigmatizing attitude** towards PLHIV

Over 30% of the general population do not undergo testing because they are sure they do not have HIV (among those who was not screened)

Often people do not trust the **quality and privacy of free services**



Only **~9% of the general population and ~50% of healthcare professionals** have heard of PrEP



WHO WE ARE?

**A study was developed and conducted
by the European Institute of Public Health Policy
on behalf of HealthLink Project, CO “100% LIFE”**

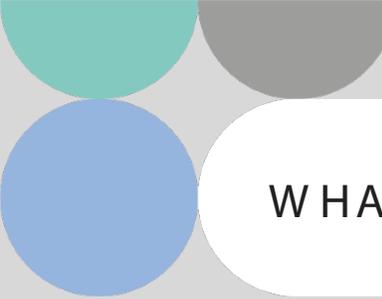
during 20.08.2021-11.02.2022



WHAT WAS OUR GOAL?

To identify the most efficient communication process for influencing behaviors relating to HIV testing and early treatment





WHAT OBJECTIVES DID WE PURSUE?

Objective 1. Assessment of HIV awareness levels

To assess for each target group (TG):



the level of awareness: a) HIV/AIDS in general, b) HIV prevention and treatment, c) the benefits of early treatment, d) awareness and adherence to PrEP



the impact of the level of awareness on the involvement in the cascade of HIV testing and treatment services



the level of adherence to ART

To investigate the reasons for each target group in case of a low awareness and/or mistrust of the available information .

WHAT OBJECTIVES DID WE PURSUE?

Objective 2. Assessment of communication channels, tools and sources of information

For each target group :

- To identify:
 - the most popular sources of information and news
 - specific Internet resources to which they are subscribed or use
 - which channels and communication tools are most used to obtain health-related information
- To evaluate **understanding of health/HIV messages** received through different communication **channels** and from other various information **sources**
- To identify specific **opinion leaders** who are trusted for health-related information
- To investigate what **information, formats, and platforms** are most lacking for them to be aware of and safe in health-related topics
- To test **effective messages** motivating HIV/AIDS prevention and treatment



WHAT EXACTLY DID WE RESEARCH?

01

Study
design

02

Risky behavior
HIV testing
HIV treatment
HIV awareness
PREP awareness and attitudes

03

Efficient
communication process
Key messages testing





WHO WAS INVOLVED?

TG1

~29%

healthcare professionals of:

- public health facilities
- private institutions
- diagnostic centers

family doctors, specialists,
nurses and other medical staff

TG2

~26%

men who have sex with men
(MSM) and their sexual
partners (SP)

TG3

~45%

men aged 30 to 50 and their sexual
partners, and additional sub-groups

- PLHIV who do not belong to key groups and their partners
- HIV+ and HIV- injecting drug users and their sexual partners
- HIV+ and HIV- commercial sex workers and their clients
- HIV+ and HIV- transgender people
- HIV+ and HIV- workers who have an increased risk of HIV - people in uniform
- HIV negative general population and their sexual partners

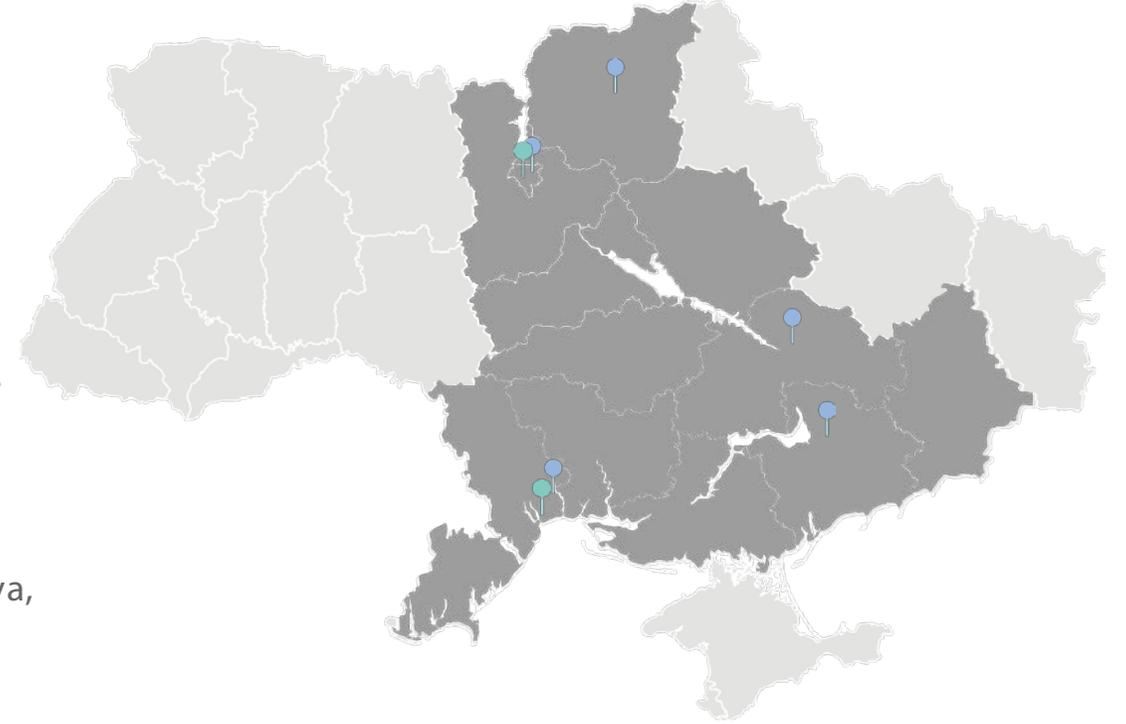
HOW DID WE RESEARCH?

Quantitative component

900 respondents, cross-sectional data collection

- determining the prevalence of the studied parameters and their distribution by respondent groups
- 85.2% of respondents were interviewed face-to-face, 14.8% of respondents were interviewed by telephone

Odesa, Mykolaiv, Kherson, Chernihiv, Cherkasy, Poltava, Zaporizhzhya, Kirovohrad, Donetsk, Dnipropetrovsk, Kyiv regions and Kyiv



Testing key messages

27 respondents

2 focus groups

Kyiv, Odesa

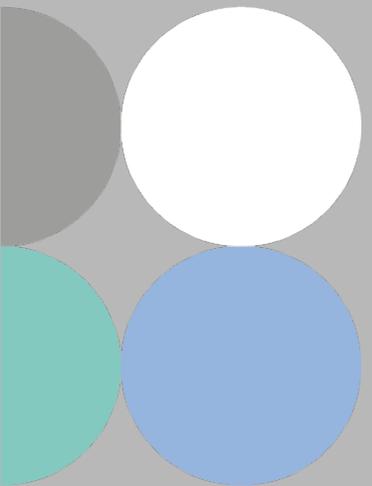
Qualitative component

60 respondents, remote in-depth interviews

- identifying and describing communication, individual, contextual and social factors that shape respondents' vision and behavior regarding HIV prevention and treatment

Dnipropetrovsk region, Kyiv, Zaporizhzhia, Odesa, Chernihiv

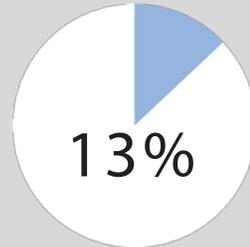
WHAT WE LEARNED?



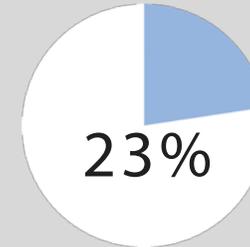
Risky Behavior



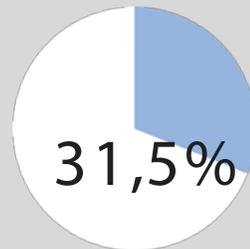
30% of the respondents had a permanent sexual partner



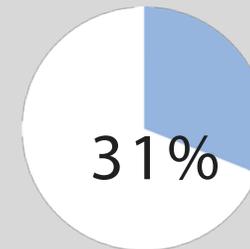
had a regular sexual partner whose **HIV status was unknown** to them



reported they **did not have a regular sexual partner** and occasionally met with different partners. This behavior is typical for MSM, CSW, and transgender people



of respondents had **sexual contacts with a casual partner** during the past 12 months



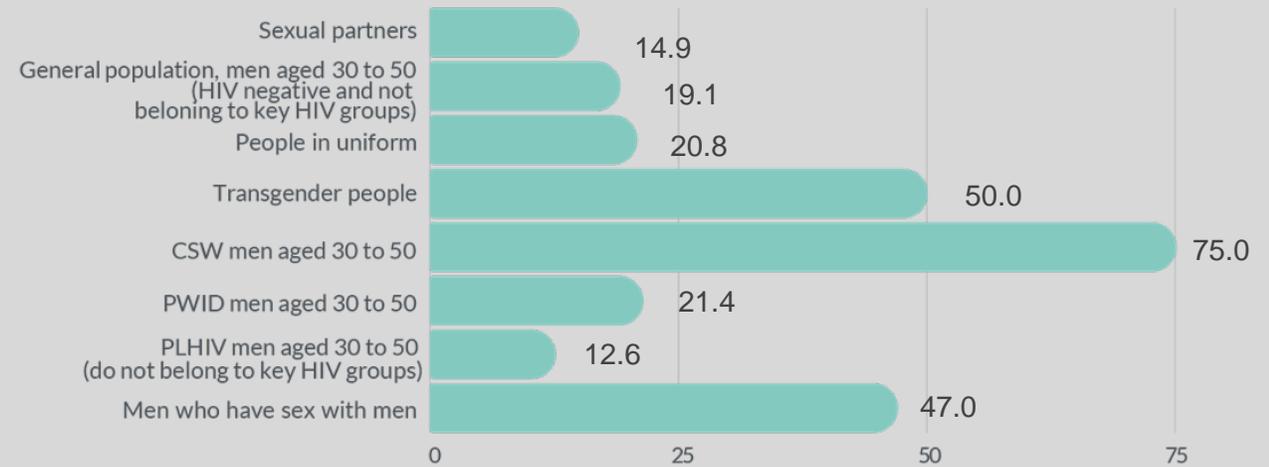
of respondents **did not know the HIV status of their last partner**

Risky Behavior

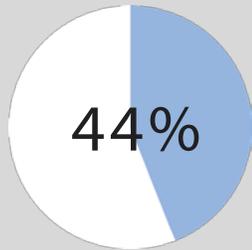
Over the past 12 months,
I had sexual contacts with a casual partner:



Do you know the HIV status
of your last sexual partner? No:



Risky Behavior



of the respondents did not use a condom during the latest sexual encounter



most often such behavior was recorded among GPs and PIU

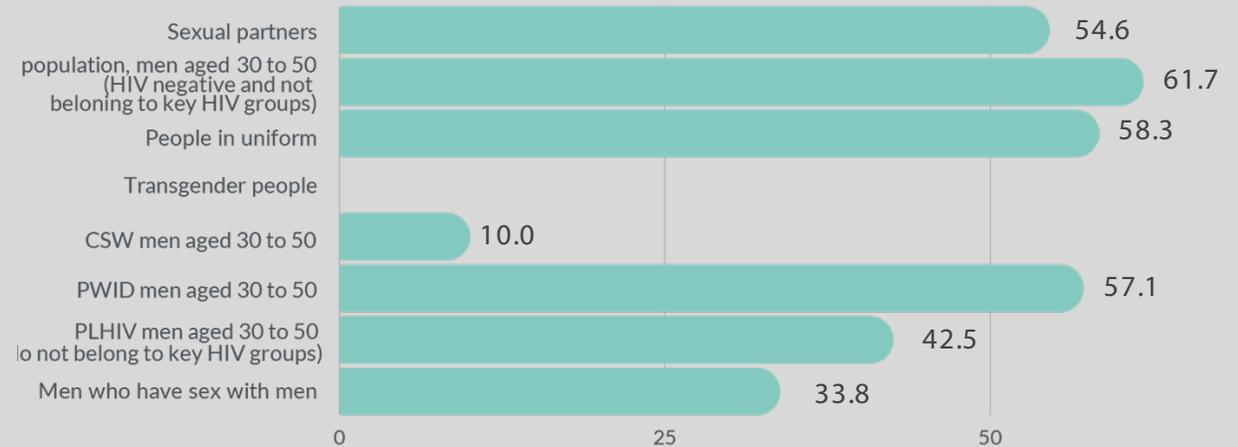


men in the GP group were often unaware of their risks, and some confessed that even when the risk was present, their behavior was not always appropriate



KGs generally recognize increased risk of becoming infected with HIV

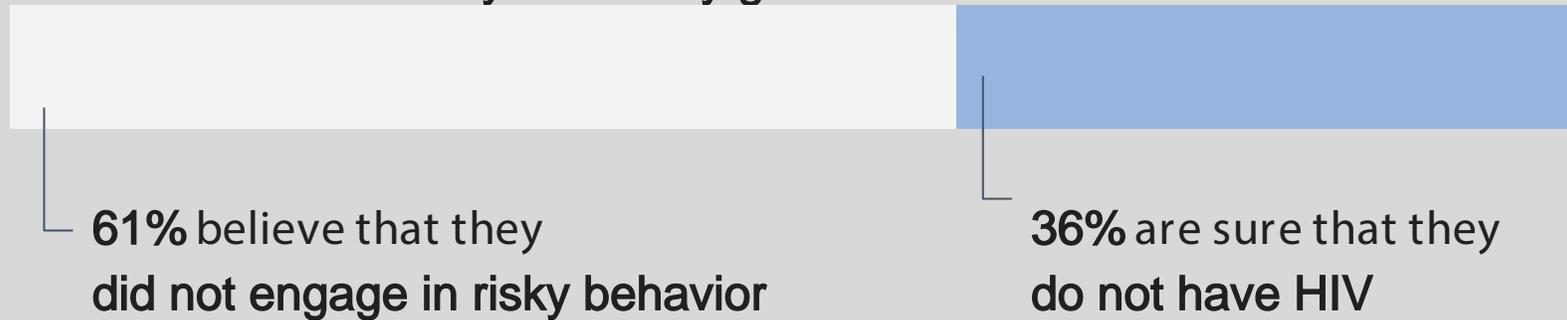
Do you use a condom during your latest sexual encounter? No



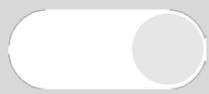
HIV Testing



Why don't they get tested for HIV?



HIV Testing



the most popular centers of HIV testing for all respondent groups are **NGOs, Trust Offices and AIDS Center**



KGs were **most often tested for HIV in NGOs or on NGO's outreach routes** due to convenient location, parallel receipt of other services, and friendly attitude



the reason to have an HIV test for GPs was often **mass events that offered free rapid testing** without queues in a convenient location



family doctors rarely offer HIV testing to patients considering the lack of time and training



almost no one from TG2 and TG3 knew that it is possible to get tested by a family doctor



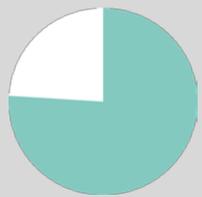
HIV Treatment



>97%
of surveyed PLHIV
are receiving ART

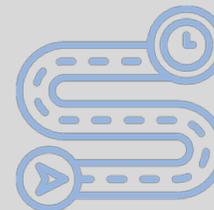


41%
of the respondents
waited for >1 month
before being registered
at the AIDS Center



76%
of PLHIV reported they were **strictly adhering**
to the ART regimen and did not miss any
routine infectious disease doctor visits

Prevents the strict adherence to ART regimen:



among the subgroups, the **longest time before registration** was recorded among **PWID**

HIV Awareness among GPs and KGs

GP and KG representatives are rarely interested in information about HIV and rarely communicate on this topic in their social circle

most men from the GP group are not interested in information about HIV because they do not associate themselves with risk groups

GP participants often rated their level of HIV awareness as poor and not everyone wants to know more

among GP in HIV prevention are interested only those who believe that they have certain risks related to their professional activity or lifestyle

GPs did not hear about the "Undetectable = Untransmittable". KGs were more knowledgeable about HIV, but only MSM knew about the "Undetectable = Untransmittable" principle



HIV Awareness among Healthcare Professionals



family doctors are not sufficiently knowledgeable about HIV , so manifestations of a stigmatizing attitude towards PLHIV occurs



all health workers agree that there are not enough information about HIV in the media



HIV/AIDS trainings involve mainly HIV and TB healthcare workers, while other healthcare professionals and primary care physicians have limited access to such training



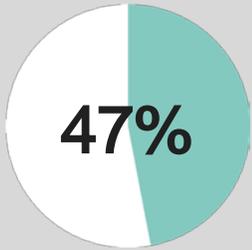
some health workers believe that PLWH consciously transmit HIV to others



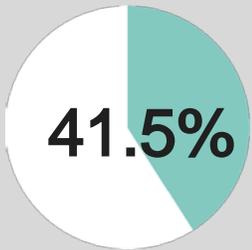
therefore, they do not have information about PrEP, do not feel confident during HIV counseling and testing, do not offer these services, and do not communicate about HIV with patients



Awareness and Attitudes Towards PrEP: TG2 and TG3



of the participants knew about PrEP before this survey



of HIV-negative respondents among those who had a basic idea of PrEP thought about starting PrEP



MSM and CSW were most knowledgeable about PrEP



PWID had the lowest awareness of PrEP among all KGs in all studied regions



GP men did not have information about PrEP

I had heard about the PrEP before:



Awareness and Attitudes Towards PrEP: TG2 and TG3

>97%

of clients currently taking PrEP were quite confident that they **would continue this prevention**



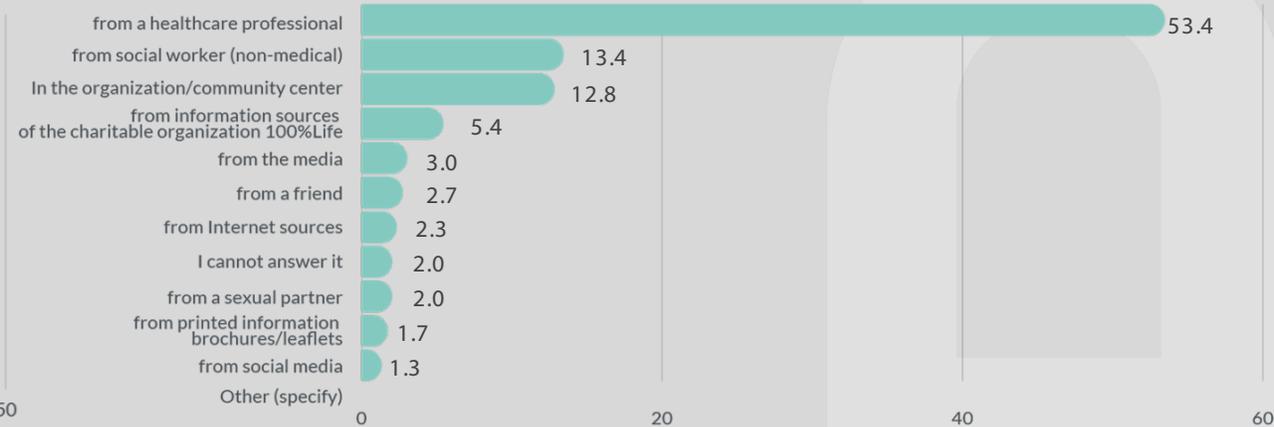
- **the absolute majority of respondents** received information about PrEP from **NGOs and social workers** and believe that healthcare workers, social workers and relevant NGOs are the most reliable source of information about PrEP
- **fear of side effects** was one of the main reasons for refusing to start PrEP
- **the lack of awareness among healthcare professionals** is the barrier to patients' access to PrEP

Awareness and Attitudes Towards PrEP: TG2 and TG3

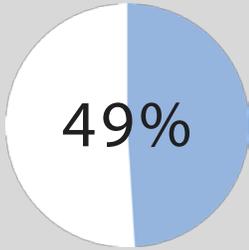
Where did you receive information on PrEP for the first time?



What source of information on PrEP do you consider the most reliable?



Awareness and Attitudes Towards PrEP: TG 1



of the healthcare professionals **have never heard of PrEP**



the level of knowledge about PrEP among a sample of healthcare professionals who heard about PrEP was **at the lower end of the satisfactory score**

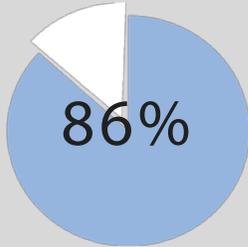


many respondents **haven't yet decided on their attitude about PrEP**, which may be an indirect sign of a low level of awareness

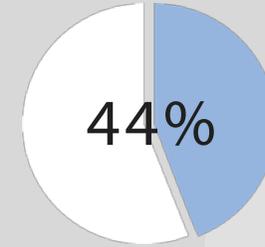
How did you learn about PrEP?



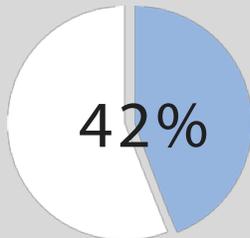
Awareness and Attitudes Towards PrEP: TG 1



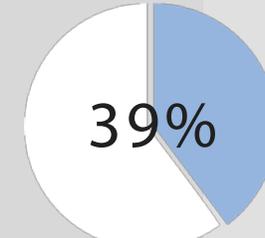
agree that PrEP is a new and **progressive HIV prevention tool** that should be implemented as soon as possible for widespread use



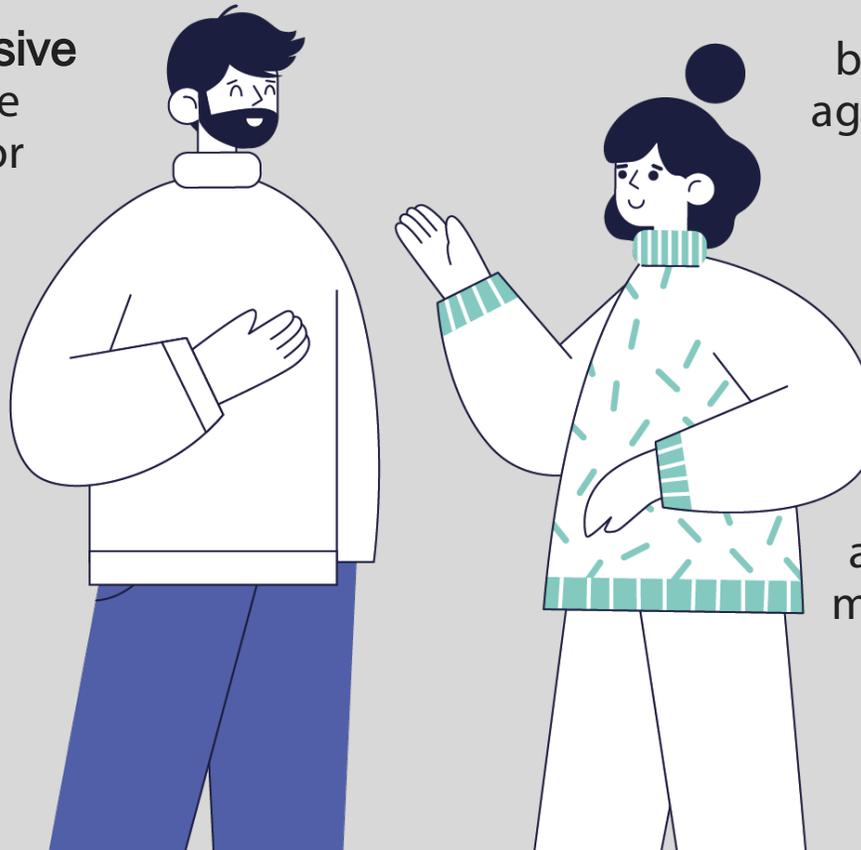
believe that there is a **stigma** against patients who take PrEP



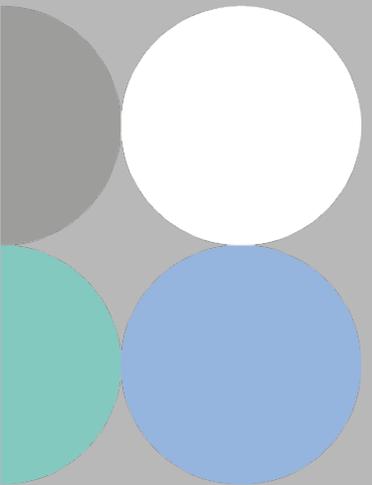
believe that currently there is **no sufficient evidence** for the use of PrEP in Ukraine on a large scale



are thinking that using PrEP may lead to an **increase** in the spread of **STIs**



HOW TO BETTER OUR COMMUNICATIONS?



Sources of Information

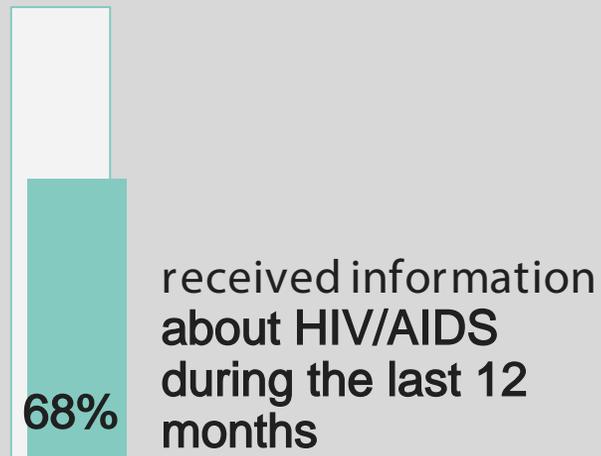


the highest level of trust among respondents have **UNAIDS, local HIV service organizations and CO "100% LIFE"**

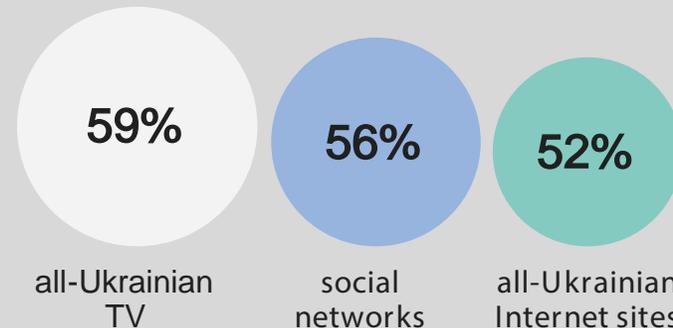


healthcare workers **prefer official sources of information on HIV infection**, such as websites of the Ministry of Health, PHC, and also **seek advice from HIV specialists**

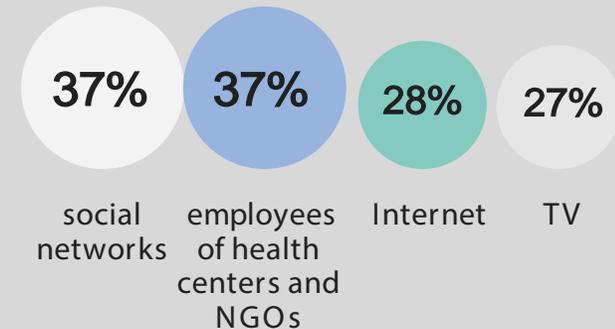
CHANNELS OF INFORMATION



most often respondents **learn about news in Ukraine and the world from:**



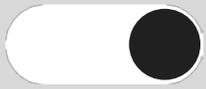
information about HIV/AIDS was most often received from:



Channels of Information



in all groups of respondents, the information received from healthcare professionals is trusted the most

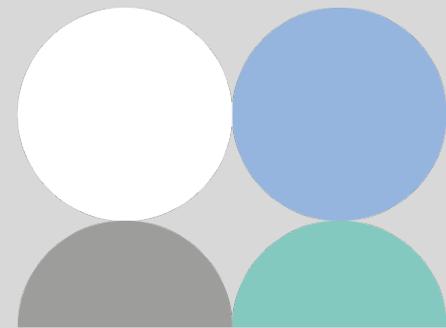
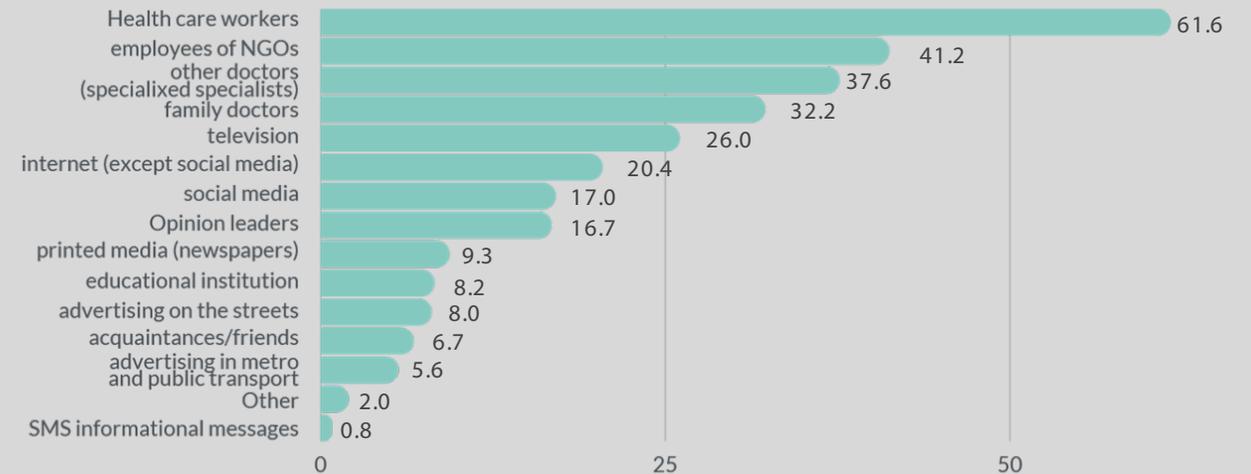


MSM have the greatest trust in physicians in terms of HIV, as well as social workers with whom they communicate



PWID do not trust the Internet or bloggers

Sources of information that cause the most trust regarding HIV



Channels of Information

RESPONDENTS NOTED THAT:

- to communicate effectively, **all possible channels have to be used**, messages have to aim at **different TAs**, and information campaigns should not be limited to large settlements
- to draw the public attention to HIV, a **constant information background has to be created** so that the topic is constantly presented publicly— not only on **December 1**

COMMUNICATION FORMAT



of respondents prefer to receive information on HIV while **having a personal meeting with a consultant**



considered more convenient to obtain consultation in the **free HIV/AIDS hotline**



prefer reading **printed information materials**

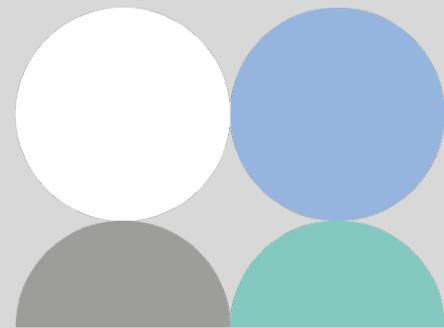


Channels of Information



the respondents mentioned **health facilities, AIDS centers, and NGOs** as the most convenient places to receive HIV counseling or printed materials

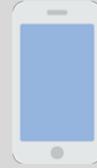
A convenient place to get counseling or take printed materials about HIV or other STIs



Means of Communication



99% of respondents have access to the Internet

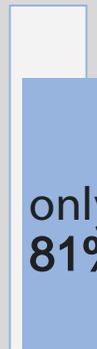


90% have a smartphone



>92% of respondents use social networks for information and communication

BUT:



only 81% of PWID have access to the Internet



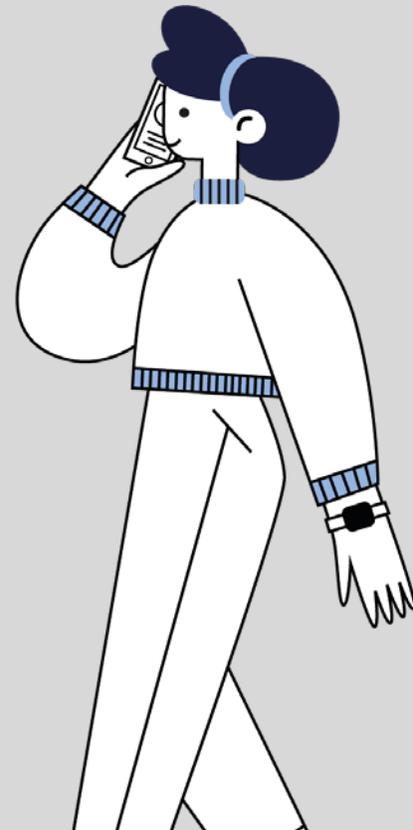
57% of them have smartphones



62% are users of social networks

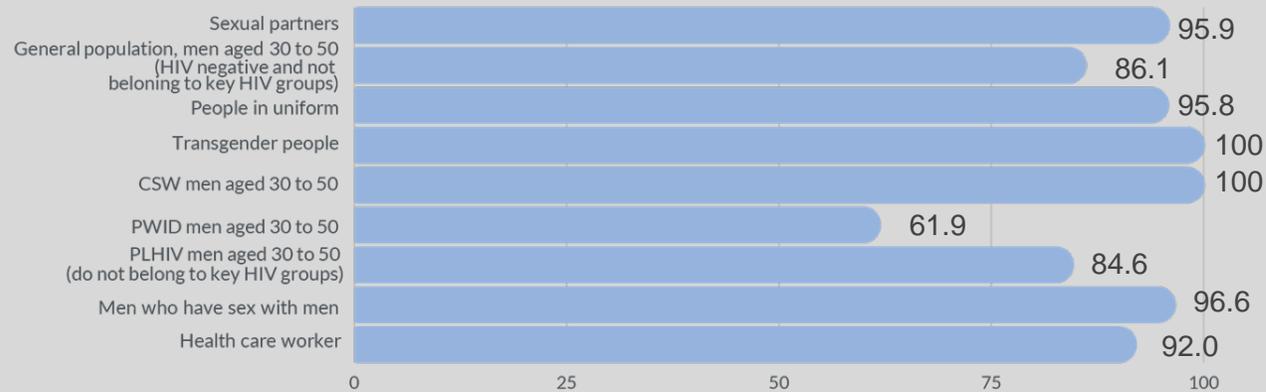
Means of Communication

Do you personally have a smartphone?

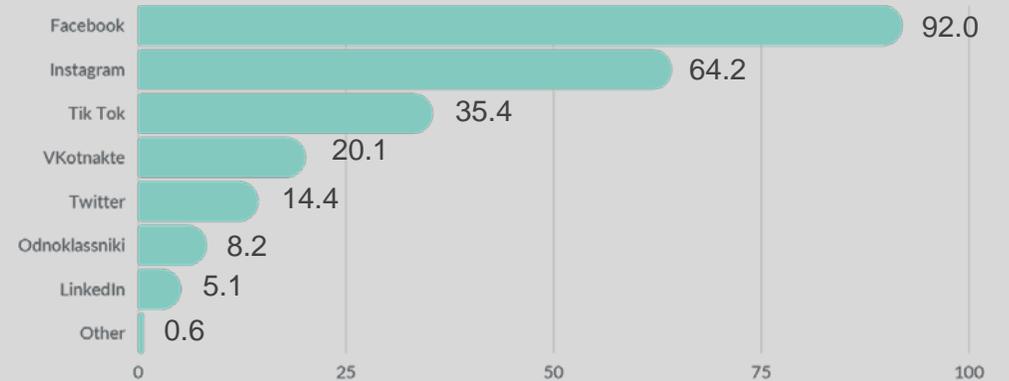


Means of Communication

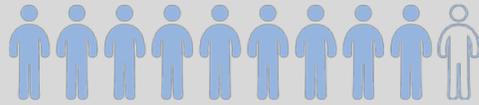
Are you using any social network?



I use a social network...



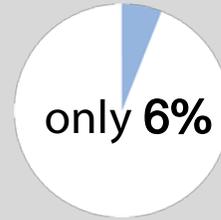
Means of Communication



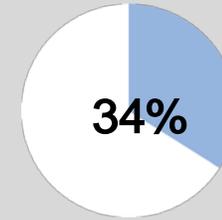
90%
of respondents use
messaging



the most popular **Viber,**
Facebook and **Telegram**

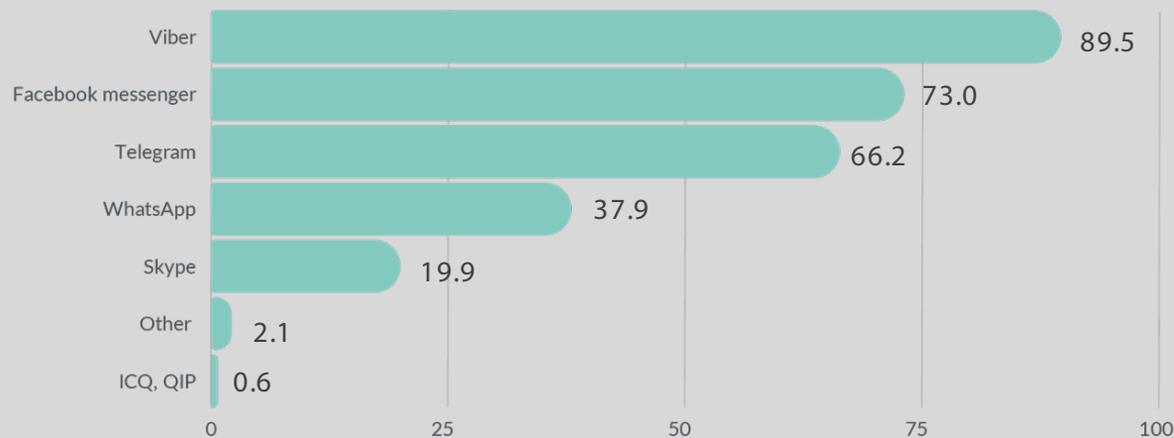


only **6%**
of study participants use
online gambling

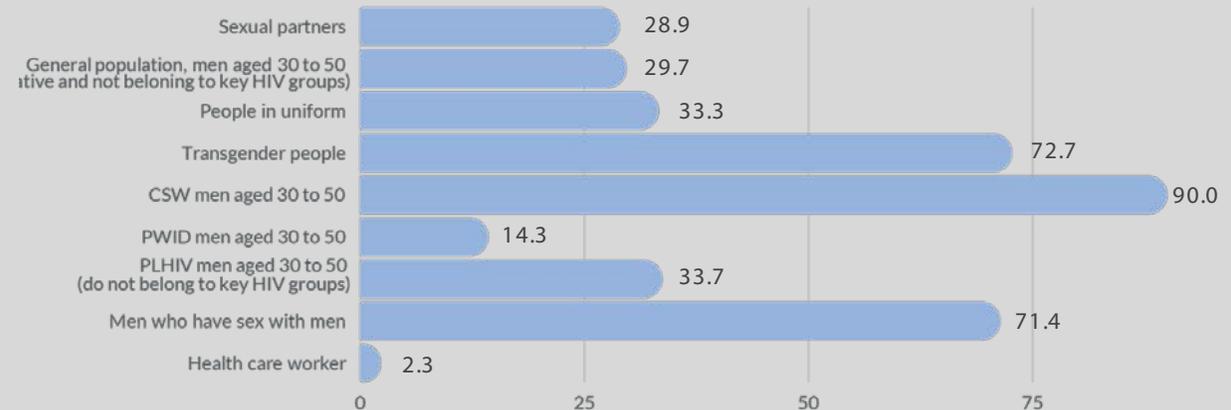


34%
use porn sites, and half of
these users pay attention
to advertising

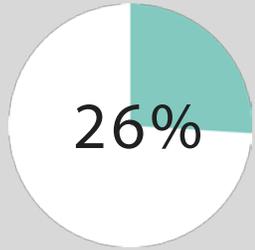
I use the messenger, %



Do you use porn sites?, %



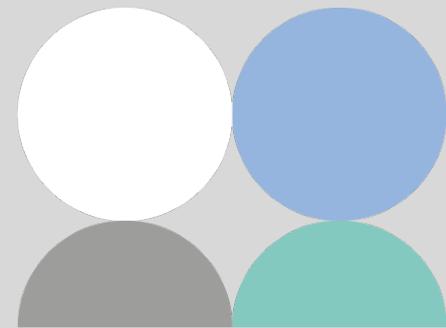
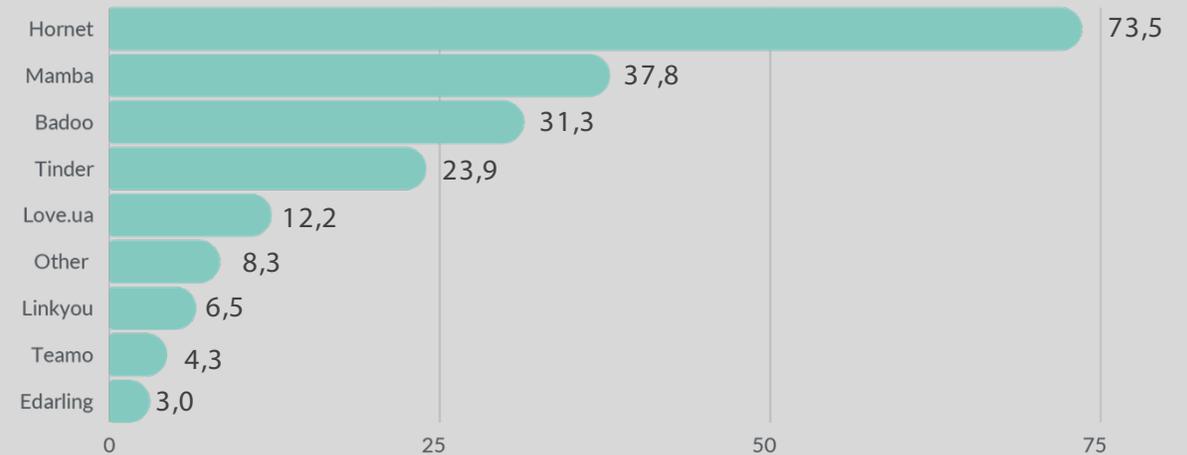
Means of Communication



of respondents used **dating websites** for their needs

- most often, dating websites are used by the **CSW s, MSM, and transgender people**
- the most popular websites among all the respondents included **HORNET, MAMBA, and BADOO**
- **HORNET** was the most popular dating website among **MSM and transgender people**, and **MAMBA** among **PLHIV and CSW s**

I use the dating website, %



Key Messages Testing



most often, the participants' comments related to the fact that **the messages could be long, contained unknown abbreviations, brackets, and what they called "chemical formulas" (U=U)**



thus, it turned out that the **PWID and GP participants—and some MSM—knew nothing about PrEP**



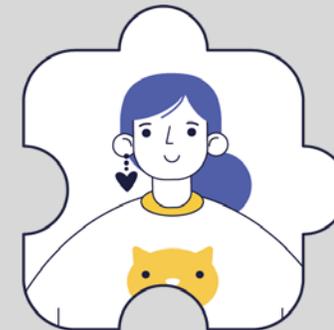
some reports – such as “Test Your Love” – have been criticized for possible **“ambiguous interpretations”**



moreover, **half of MSM didn't understand what ART was**



participants recommended **not to use abbreviations**, especially those unknown to ordinary people and even KGs





Thanks for your attention!

