

HP+ Jamaica

Positive Health, Dignity, and Prevention (PHDP)

*Webinar Series: Five Ways to Accelerate Progress
Toward the 95-95-95 Goals*

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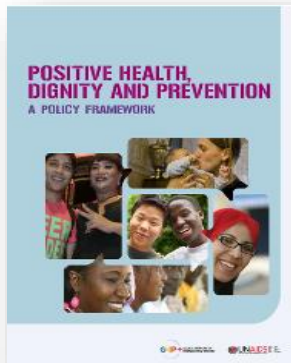


Topics for Today's Webinar

- ✦ Origin of PHDP and the Jamaica Experience
- ✦ PHDP curriculum: A look inside
- ✦ Supporting the response to achieve treatment goals in Jamaica
- ✦ Application of PHDP framework and curriculum in other countries

PHDP Across the Globe:

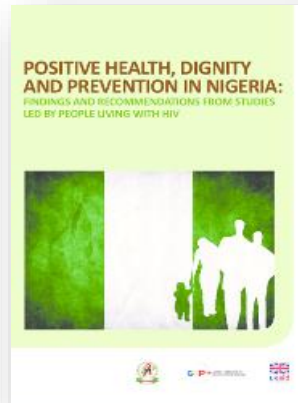
Findings and Recommendations from Studies Led by People Living with HIV



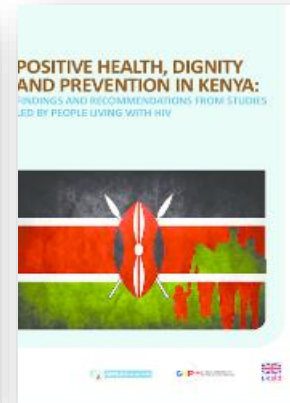
PHDP Policy Framework, 2011



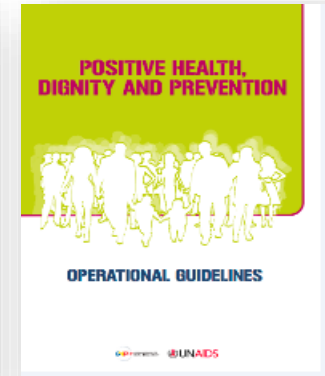
Swaziland, 2012



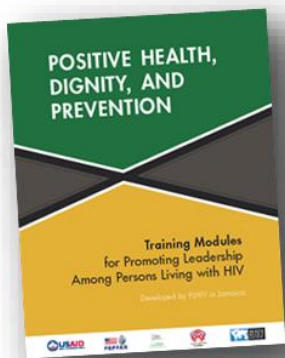
Nigeria, 2012



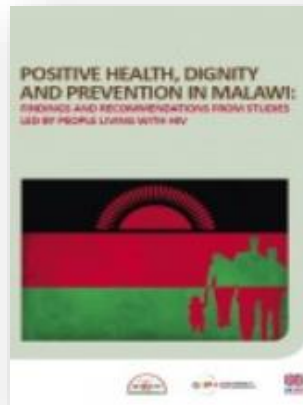
Kenya, 2012



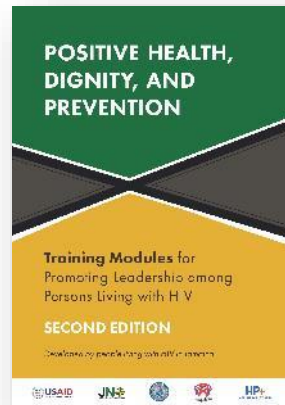
PHDP Operational Guidelines, 2013



Jamaica Curriculum, 2014



Malawi, 2015



Jamaica Curriculum, Second Edition, 2017

Overview

Positive Health, Dignity, and Prevention...

- ✦ Is an approach developed and led by people living with HIV (PLHIV)
- ✦ Places PLHIV at the center of managing his or her own health and well-being
- ✦ Links HIV treatment, prevention, support, and care issues within a human rights framework
- ✦ Promotes holistic health and wellness, including human rights, legal protection, and a policy environment free of stigma and discrimination



The Jamaica Experience



2014 Curriculum Development

- The 2014 edition was developed while doing training
- Strong partnership among the USAID- and PEPFAR-funded Health Policy Project (HPP) and the Integrated Jamaica HIV/STI/SRH Response which includes the Greater Involvement of Persons with HIV (GIPA) Unit at the National Family Planning Board/Ministry of Health and the Jamaican Network of Seropositives (JN+).
- Additional stakeholders included:
 - PLHIV support groups in rural and urban areas
 - Men who have sex with men and sex workers (key populations)
 - Women living with HIV
 - Members of various faith-based organizations



2017 Curriculum

- 17 participatory learning modules incorporate new international evidence (e.g., WHO treatment guidelines adopted in January 2017)
- Training menu that assists in matching audience with available time and suggested modules
- Has been shared with the Caribbean PLHIV Network and GNP+ and is an actionable and adaptable tool for countries
- Aims to strengthen the capacity of people living with HIV and key populations as leaders and advocates to improve the quality of health services and outcomes for themselves and their peers
- In late 2017, the PHDP framework was developed and now anchors the curriculum into the national integrated HIV strategy

POSITIVE HEALTH, DIGNITY, AND PREVENTION

Training Modules for
Promoting Leadership among
Persons Living with HIV

SECOND EDITION

Developed by people living with HIV in Jamaica





PHDP Curriculum: A Look Inside

PHDP Elements Compared with the Jamaica PHDP Curriculum Modules

| Elements of the PHDP Framework | PHDP Training Modules |
|---|---|
| 1. Empowerment of people living with HIV and networks of people living with HIV | 2. HIV and AIDS Basics 1. The Framework of Positive Health, Dignity, and Prevention (PHDP) 16. Resilient Leadership |
| 2. Health promotion and access | 7. Disclosure of HIV Status 15. Positive Health and Health Prevention 8. Loss and Grief 6. Self-Care 5. Continuum of HIV Care, Treatment, and Prevention 4. Treatment Literacy |
| 3. Prevention of new infections | 10. Combination Prevention |
| 4. Human rights | 13. HIV and Human Rights 9. Stigma and Discrimination 17. Advocacy |
| 5. Sexual and reproductive health and rights | 14. Sexual and Reproductive Health and Rights |
| 6. Gender equality | 12. Gender and Sexual Diversity 11. Gender Expectations and Norms 3. Sexual Health |

Each Module Includes ...

- ✦ Objectives
- ✦ Activities
- ✦ Total time needed for the module and a breakdown by activity
- ✦ Materials
 - Handouts (participant and trainer)
 - PowerPoint presentations
 - Key terminology
 - Other materials (e.g., flipchart paper, markers, etc.)

An Example: Treatment Literacy

✦ **Objective:** By the end of this module, participants should be able to explain the basics of antiretroviral therapy (ART) to enhance adherence to clinical care for themselves and support others.

✦ **Activity Overview**

1. My Personal Path to Treatment
2. Treatment Literacy—Issues and Concerns
3. Key Concepts
4. Disease Progression
5. HIV Life Cycle—How Do ARVs Work?
6. Smart About ART
7. Key Concepts 2—Jeopardy on ART
8. Ecological Model
9. Minding the Gaps—Treatment Cascade
10. Carousel—Essential Action Stations
11. Wrap-Up—Key Messages, Reflections

Treatment Literacy in Action: Example Activities

My Personal Path to Treatment

- ✦ By the end of this activity, participants should be able to:
 - Illustrate, using a flowchart, their personal treatment history from diagnosis to present
 - Reflect on critical steps in their treatment journey

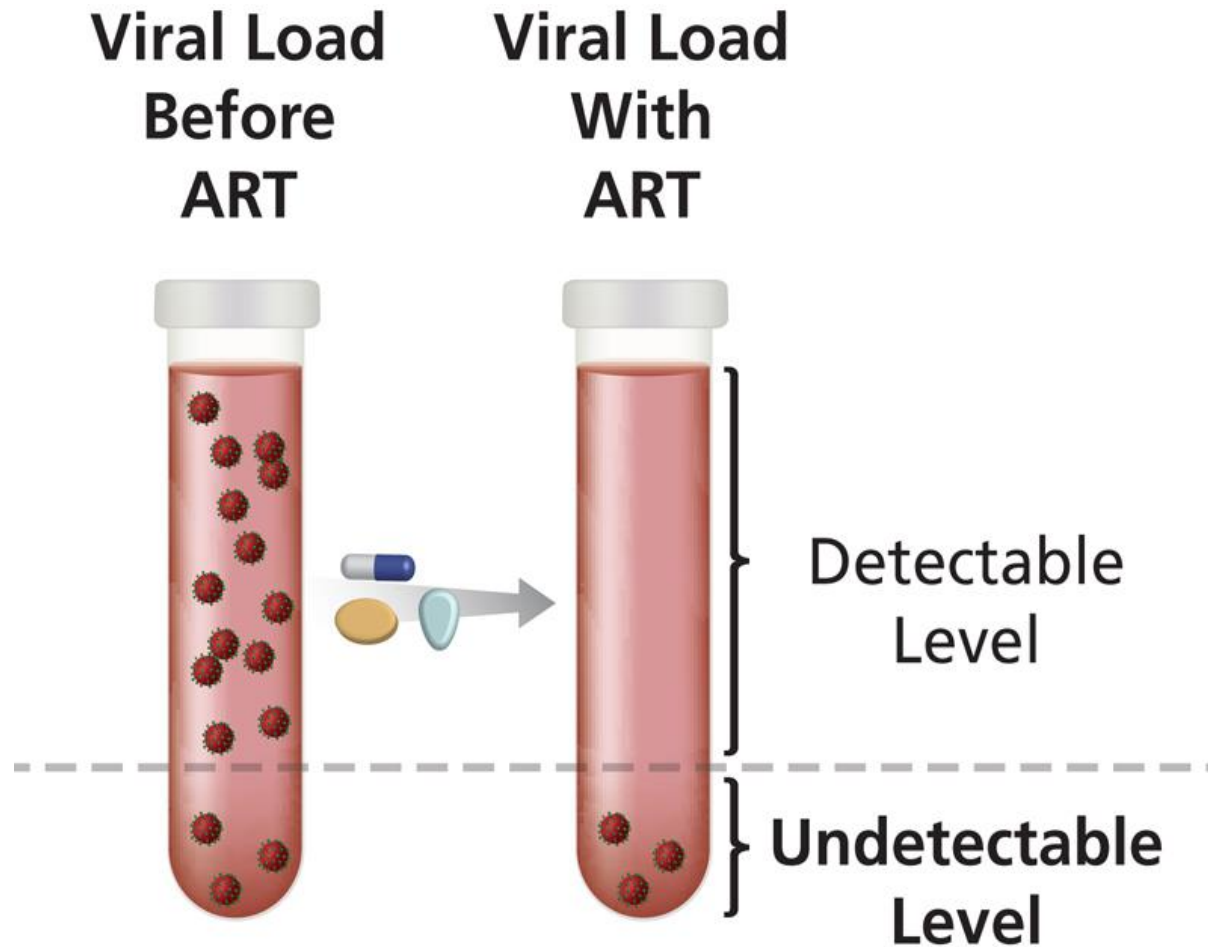
Treatment Literacy—Issues and Concerns

- ✦ By the end of this activity, participants should be able to:
 - Identify common issues or concerns in ART and clinical care
 - Define treatment literacy
 - Identify gaps in treatment literacy

Ecological Model

- ✦ By the end of this activity, participants should be able to:
 - Identify the role of multidisciplinary care
 - Identify the role of peer support

How ARTs work



Another Example: Disclosure

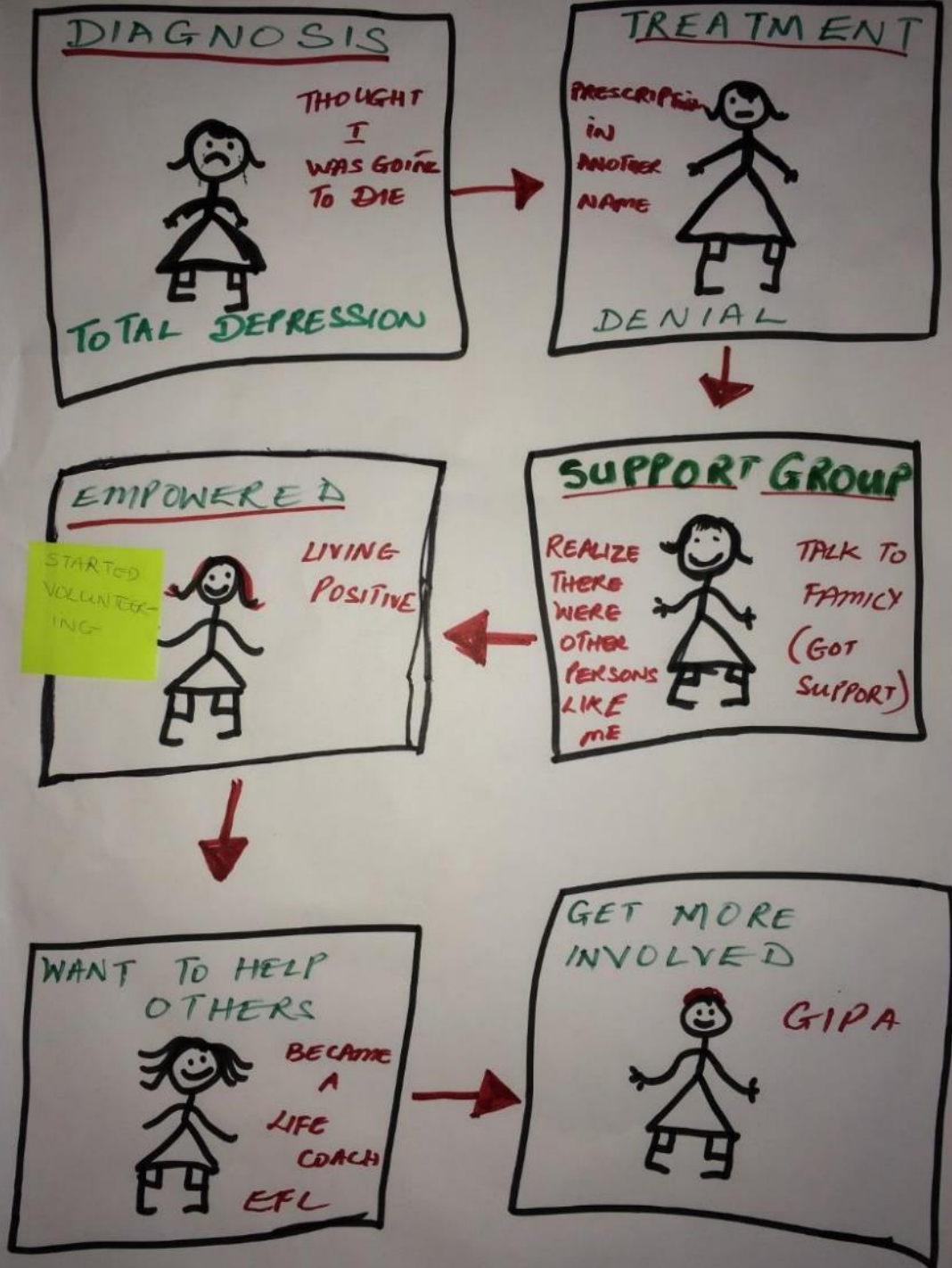
- ✦ **Objective:** By the end of this module, participants should be able to:
 - Define disclosure
 - Define voluntary and involuntary disclosure
 - Describe the differences between nondisclosure, partial disclosure, and full disclosure
 - Discuss factors involved in disclosing one's HIV status
 - Discuss factors involved in serodiscordant (mixed-status) relationships
 - Discuss some information needed to assess whether or not to disclose
 - List some tips on how to disclose in different contexts
 - Understand the importance of disclosing when necessary

Disclosure Handouts

- ✦ Assessing Whether or Not to Disclose: Guiding Questions Worksheet
- ✦ Tools for Disclosure: Disclosure considerations...
 - When interviewed by the media
 - When dealing with the community
 - When disclosing to family members
 - When disclosing to partners (including serodiscordant couples or when the status of the other is unknown)



PHDP: Supporting the Response to Achieve Treatment Goals in Jamaica

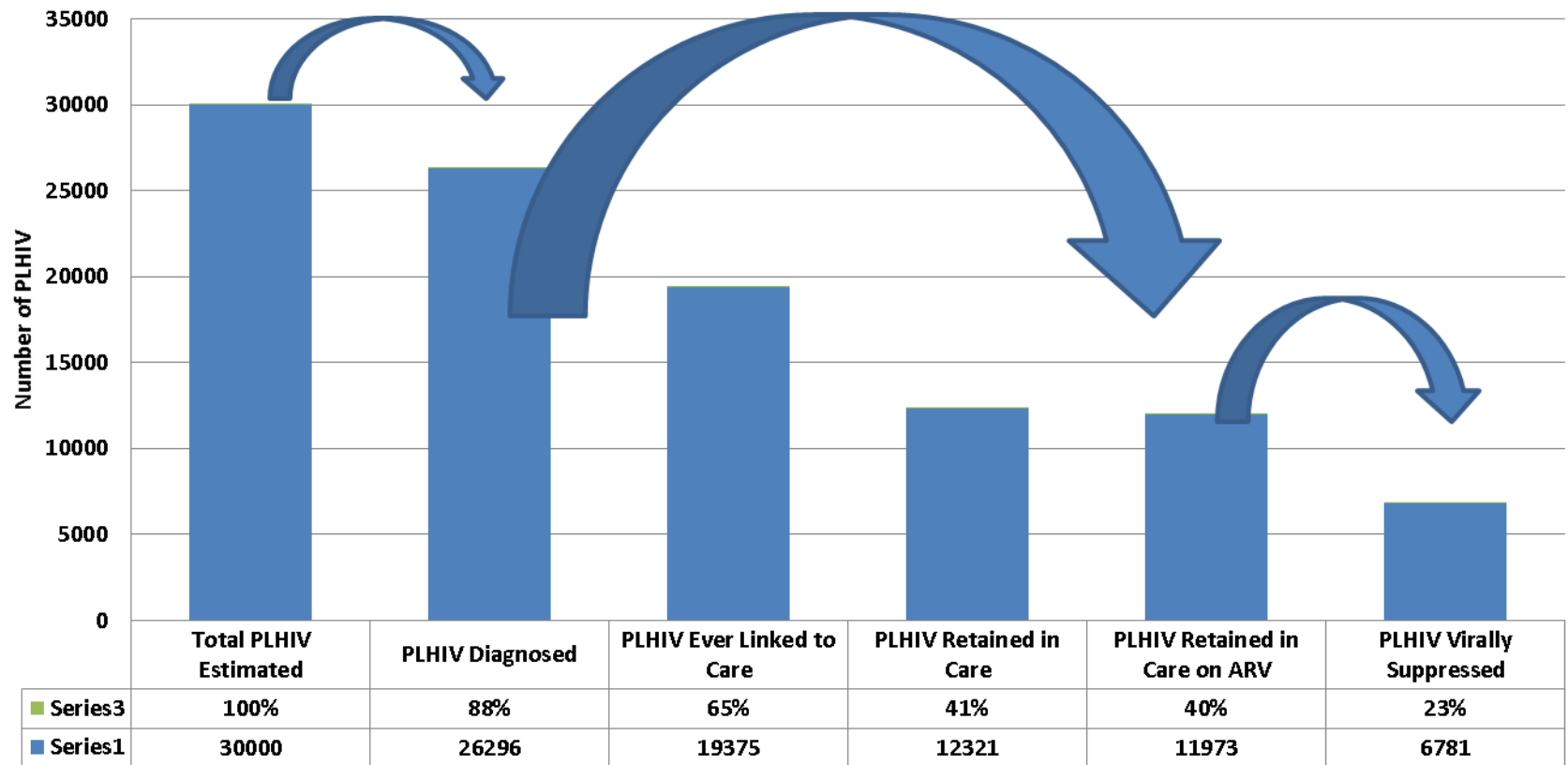


The 2017 PHDP curriculum updates reflect new evidence and align with the Jamaican government's ART guidelines. This means...

1. Scaling up the response by expanding training to include healthcare providers (modules used: PHDP Overview, Disclosure, Treatment Literacy, and Gender and Sexual Diversity)
2. Supporting the Ministry of Health in deploying graduates and community leaders (called community facilitators) as part of HIV treatment teams at nine PEPFAR high-ART sites
3. Building community leadership

The PHDP supports the national HIV response!

National Treatment Cascade as of November 2017



PHDP is Now Part of the National Response

Framework developed to support the PHDP as a national strategy:

- Mainstreaming of PHDP
- Use of curriculum throughout treatment and community sites
- Strengthen leadership and management
- Monitoring and evaluation of PHDP
- Quality improvement
- Strengthen PLHIV and key partners in PHDP to facilitate increase in number of people on treatment

Success/Progress to Date

- ✦ More than 50% of PEPFAR priority treatment sites now have PLHIV deployed as community facilitators (lay providers) as part of the PHDP framework in 2017
- ✦ **90** PLHIV and key population community leaders are PHDP graduates covering 4 cohorts
- ✦ **296** health facility and community support staff trained in key modules
- ✦ Over **470** additional persons trained in various PHDP modules
- ✦ Graduates occupy other spaces in the response—e.g., Jamaica Country Coordinating Mechanism, JN+ Board



Present and Future Application of PHDP Framework and Curriculum

Application in Jamaica: Community Facilitators Deployment

+ The Situation:

- 85% of JN+ members reported being on treatment
- 55% did not know the name of their medication or their CD4 count
- 70% did not know their viral load
- When asked for an explanation, the response was either that the doctor did not tell them, they did not understand what the doctor said, or they did not ask

+ The Response:

- Community facilitators have contributed to a comprehensive program for improving adherence and retention in care for PLHIV
- Includes PLHIV who have completed the PHDP program and are empowered and willing to offer peer support to those who require it

Application and Use in Jamaica and Beyond

- ✦ **The PHDP framework** applies to everyone and integrates PLHIV into the national response. Lessons from Jamaica are applicable to any adaptation or adoption.
- ✦ **The curriculum** is a tool and mechanism to operationalize the PHDP framework (approach). The curriculum...
 - Can be used in any group or one-on-one setting (e.g., support groups, specific group gatherings, under a tree, and in homes, clinics, and hospitals)
 - Can be used as a whole or via selected modules
 - Training menus match modules with audience
 - Is adaptable for adolescents living with HIV
 - Is appropriate for countries moving to “test and start”
 - Is adaptable for low-literacy environments
 - Builds capacity of Health Care Providers



Feedback from Jamaica Mission



Thank You

Any Questions?

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HEALTH POLICY PLUS

Better Policy for Better Health



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