



# **HIV/AIDS Prevention**

**Part A: Module A1**  
**Session 3**



# Objectives

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- Describe the major components of HIV/AIDS programs and the factors that make programs effective
- Discuss the interventions targeted at risk reduction and causative factors
- Emphasize importance of STI management, VCT and care and treatment on prevention

# Prevention

- Prevention in the HIV/AIDS context
  - Primary prevention
    - Preventing people who don't have HIV from ever getting it (adults, adolescents, babies, health care workers)
  - Secondary prevention
    - Preventing people with HIV from spreading it
  - There are opportunities for prevention in all care encounters
  - Keep in mind, Nigeria could, in theory, get to the point where there is an AIDS-free generation



# Prevention Interventions

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Mainstays of a successful prevention program:

- Interventions aimed at decreasing the risk of infection
- Interventions that address causative factors, including vulnerability
- Effective management of STIs

# Mainstays of a Successful Prevention Program

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- There must be prevention interventions that address the modes of HIV transmission
  - Unprotected sexual intercourse
  - Mother to child transmission
  - Blood or blood products
- Since unprotected, heterosexual intercourse is the most common mode of transmission in Nigeria, this will be the focus of the prevention discussion

## Mainstays of a Successful Prevention Program, continued

- Ways to reduce heterosexual transmission of HIV:
  - Better recognition of the symptoms of STIs and improved behavior in seeking treatment
  - Better management of STIs
  - Sexual abstinence or delayed onset of sex, especially for adolescents
  - Fewer sexual partners
  - Partner notification
  - Safer sex practices, including consistent, correct use of condoms
  - Supportive social environment to sustain behavioral change
  - Reduced stigma and discrimination against people with HIV
  - Promotion of male circumcision

## Mainstays of a Successful Prevention Program, continued

- Mainstays of successful HIV/AIDS interventions programs:
  - Improved access to VCT
  - Behavior change communication
  - Improved access to condoms to reduce the risk of infection and decrease vulnerability to HIV
  - The effective management of STIs
  - Change in social norms to support behavior change
  - Safe blood transfusion due to widespread testing of donors
  - Rigorous application of universal precautions and PEP in health care settings

# Multisector approach to prevention

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- **Government**
  - Political will is critical in prevention efforts
- **Businesses**
  - Need to realize that HIV affects worker productivity and may lead to increased staff turnover
- **Cultural, religious, community, and local leaders**
  - Play a significant role in reducing (or increasing) stigma
  - Can help to promote (or negate) prevention efforts
- **All of these sectors must form a unified front for optimizing prevention efforts**

# Examples of Risk Reduction Interventions

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- Peer education sessions
- Group discussions with youth
- Community drama
- Social marketing of condoms
- Creating social norm change to support risk reduction

# Interventions Must Address Causative Factors, Including Vulnerability

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- Vulnerability is the result of individual and societal factors that increase the risk of HIV infection
- Examples of vulnerability include:
  - Women and girls who are financially dependent, illiterate, unemployed or who have limited access to health services are more likely to engage in unprotected sex for money
  - Orphaned girls may have to provide favors for teachers or other adult men to stay in school or support their siblings
  - Females may feel pressured to have sex to obtain/maintain a job or be accepted in male-dominated society

## Interventions Must Address Causative Factors, Including Vulnerability, continued

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- Interventions to decrease vulnerability include those that aim to:
  - Change adverse policies, social norms, and harmful cultural practices
  - Create income generation schemes and programs for women as well as orphans and other vulnerable children
  - Prolong education, especially for females

*Behavior change interventions need to take into account the factors that increase vulnerability*

# Don't forget the men!!!

- While it is important to address vulnerable people, men also need to hear prevention talk
- May need to make efforts that don't challenge gender roles, as some men may ignore message
  - Ex: analogy of the masculine trait of protection
    - If a man would protect his loved ones (wife, girlfriend, child) from an attacker, why would he not also want to protect his loved ones from a virus?
      - Perhaps this may lead to VCT, abstinence, faithfulness, or increased condom use if having sex outside of main relationship
      - May lead the man to encourage the wife to undergo PMTCT



# Effective Management of STIs

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- Worldwide, more than 300 million new cases of STIs occur each year
- STIs increase the transmission and acquisition of HIV
- Effective management of STIs can therefore reduce the risk of HIV infection in a high-risk population



# Voluntary Counseling and Testing

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- Counseling and testing is an essential step in the prevention of HIV
  - Counseling is an important component of prevention
  - Counseling identifies individual risk factors and should establish dialogue about reducing risk
  - A randomized control trial in Kenya, Tanzania, and Trinidad showed that VCT significantly reduced high risk sexual behavior among individuals and couples

# Care and Treatment

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**Care and treatment: enhancing the efficacy of prevention by:**

- Restoring dignity to PLHA and thereby reduce the stigma associated with HIV infection
- Reduction of viral load which decreases risk of transmission
- Encourages people to seek VCT services
- Provides additional counseling opportunities for preventing further spread of HIV

## Care and Treatment, continued

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- Reduce the risk of sexual transmission through effective ART
- Encourage people to seek VCT services
- May promote behavior change
- Clinic encounters provide additional opportunities for prevention education and counseling

# Prevention as Part of Care and Treatment

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Targets of opportunity for integrating prevention into care and treatment:

- Clinic waiting room: posters, videos, brochures, peer education and condoms
  - So long as this does not stigmatize the clinic
- Provider-patient interaction: provider should remind clients about prevention of HIV transmission—ABCs
- Home care: visitors to the homes of PLHAs can carry condoms and talk about proper precautions

# Prevention as Part of Care and Treatment

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Targets of opportunity for integrating prevention into care and treatment:

- At each encounter, assess (and document)
  - Patient's understanding of HIV transmission
  - Patient's transmission behaviors since last visit
- Caution patient not to let ARV access lead to increased risk behavior
  - Has been seen in the US

# Conclusion

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- Prevention efforts must be aimed at those who are HIV-negative and those who are HIV+
- Prevention programs need multisector approach
- Interventions must address causative factors, including vulnerability
- Care and treatment provides additional counseling opportunities to prevent further spread of HIV