

STI Vaccines and Diagnostics Landscape Analysis Project (SVDP)

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Latu Human Rights Foundation

Presenter: Henry Sakala, ED, Latu

PRESENTATION OUTLINE

- 1. Background
- 2. Project Objectives
- 3. Program updates
- 4. Project successes
- 5. Methodology
- 6. Analysis
- 7. Challenges
- 8. Way Forward
- 9 Conclusion

BACKGROUND

- Zambia faces significant challenges related to STI prevention and control especially among key populations whose access to the services remains concerning.
- Latu Human Rights Foundation is championing for equitable access to HIV and Sexual Reproductive the rights for marginalised populations including MSM, PWID, Sex workers.
- The project was funded by AVAC and implemented in Kabwe and Ndola districts and collected data on STI services in Eight (8) public clinics in Zambia, a country in Southern Africa.

PROJECT OBJECTIVES

A. Overall Objective:

To conduct a landscape analysis of STI advocacy needs and capacity in current and future prevention advocacy programs.

B. Specific Objectives:

- 1. To create an understanding of the community needs and perceptions around STI advocacy in Lusaka Kabwe and Ndola Districts of Zambia.
- 2. Identify gaps in knowledge, attitudes, and practices related to STI prevention and advocacy.
- 3. To assess opportunities related to local STI vaccine and diagnostic research and development in Kabwe and Ndola Districts.
- 4. To document insights on ongoing projects, challenges, and potential collaborations among the local research institutions, pharmaceutical companies, and healthcare professionals.
- 5. Identify best practices and innovative approaches in STI prevention advocacy.

PROGRAM UPDATES

- Development of project methodology
- 2. Development of data collecting tools
- 3. Circulation of self-administering online surveys
- 4. Regional stakeholder mapping
- 5. Granted accesses to national supply chain online system

Project Successes

- Able to reach KP CSOs Key populations through their networks
- Engaged Provincial Health leadership to allow for facility level data collection
- 3. Conduct focus group discussion in 3 distrcits

METHODOLOGY

A mixed methods approach was used with quantitative and qualitative key informant interview questionnaires administered online to the key population community member.

1. Quantitative indicators were collected through the online administered client level questionnaires. The data were collected using google forms and stored on a secure server.

2. Qualitative interviews were conducted at health facilities. Each data collection team had one facilitator and one transcriber.

Distribution of respondents by age and gender

Age category	Female	Male	Total
18- 24 yrs	17	8	25
25- 34 yrs	38	21	59
45- 54	9	3	12
TOTALS	64	32	96

Distribution of respondents by population type

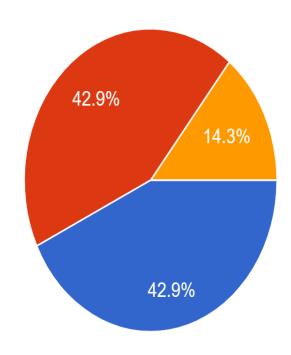
Population type	Proportion of respondents
Female sex workers (FSW)	63%
Men who have sex with men (MSM)	31%
Transgender people (TG)	6%
TOTAL	100%

ANALYSIS

1. Descriptive statistics and cross-tabulation tables were created for the key quantitative indicators.

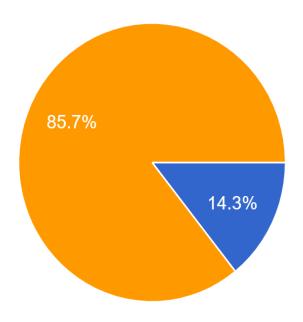
2. Qualitative transcripts were reviewed by members of the research team for thematic analysis. Themes were derived from the objectives that the qualitative data were intended to answer.

Awareness of STI advocacy efforts for KPs (n=96)



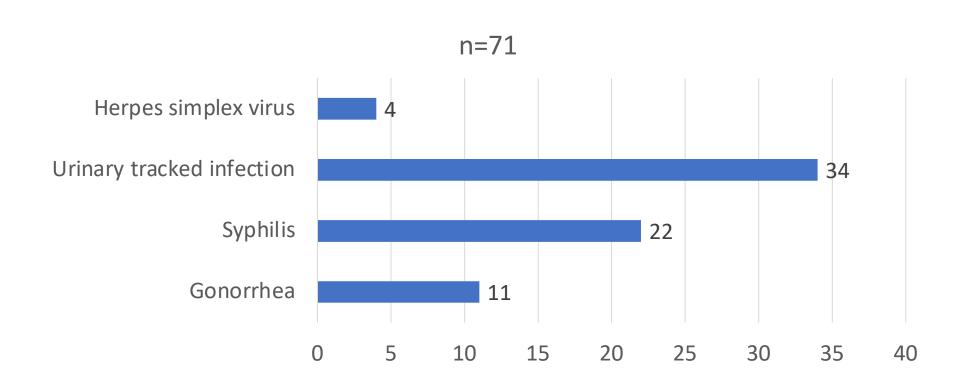
- Very aware
- Somewhat aware
- Not very aware
- Not aware at all

Factors influencing STI testing



- Access to LGBTQI-friendly healthcare services
- Privacy and confidentiality concerns
- Knowledge about the importance of testing
- Fear of discrimination or stigma
- Lack of awareness of testing options

STI DIAGNOSIS



CHALLENGES

Challenges

- 1. Key populations face security risks hence hesitation in responding to surveys
- 2. Lack of STI screening kits and drugs in Health Care Facilities



Way forwards

Way forwards

- 1. Engaging KEY POPULATIONS through their networks with CSOs
- 2. Work with MoH in securing STI screening and test kits in Heath Care Facilities



CONCLUSION

- There is vast awareness of STI knowledge in the study community
- Lack of medication in health facilities prevent KP from seeking services early
- Key population civil society organisations pay a key role in information dissemination about STI to their community members
- Stigma and lack of KP awareness among health Care workers hinders KPs from accessing services.
- There is need to invest more in STI commodities at public health facilities

THANK YOU

Contact

Henry Muzuwandile Sakala

Email: muzuwandile@gmail.com

Phone: +260 97 7357703

