

THE POWER OF KEY-POPULATION-LED HIV PROGRAMMING

Achievements of the LINKAGES project at a glance

Global Impact

Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES), 2014-2021, was the first project funded by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and U.S. Agency for International Development (USAID) dedicated to addressing the HIV epidemic among key populations (KPs)—people who inject drugs, men who have sex with men (MSM), transgender people, and female sex workers (FSW). The project, **implemented in 40 countries**, delivered a comprehensive package of health services for KPs with a focus on speed, scale, and standards. The project also helped KPs mobilize and advocate for changes in laws and the conduct of police, health care workers, and policymakers, and worked with governments and local partners to make KP programs sustainable.

Communities First

A key goal of LINKAGES was to empower local organizations, particularly those led by KPs, to address challenges within their own communities by strengthening their capacity to manage and implement programming. LINKAGES worked with more than **200 local partners** worldwide to plan, deliver, and strengthen services to reduce HIV transmission among KP members and extend the lives of people living with HIV (PLHIV). Of those local partners, **60 were KP led**.

Policy Impact

Globally, discriminatory laws and cultural norms hinder access to HIV services among KPs. LINKAGES **contributed to enabling policy environments in 23 countries**, resulting in immediate improvements in service uptake. In 19 countries, LINKAGES supported the development of or updates to national KP-specific policies, guidelines, or strategies. The project attained government endorsement of community-led service delivery strategies introduced by LINKAGES for national scale-up in 21 countries. LINKAGES strengthened national data systems to make them more inclusive of KP-specific data in 20 countries. Some illustrative examples of LINKAGES' policy contributions include:



Botswana: Contributed data used in the legal case that led to the Botswana High Court's decision to decriminalize homosexuality in June 2019



Haiti: Negotiated the provision of ART at KP-preferred drop-in centers and helped develop national policy support for implementation of PrEP and HIV self-testing among KPs



Malawi: LINKAGES' package of services for KPs adopted by the National AIDS Commission as the standard KP service package and included in the national HIV prevention strategy



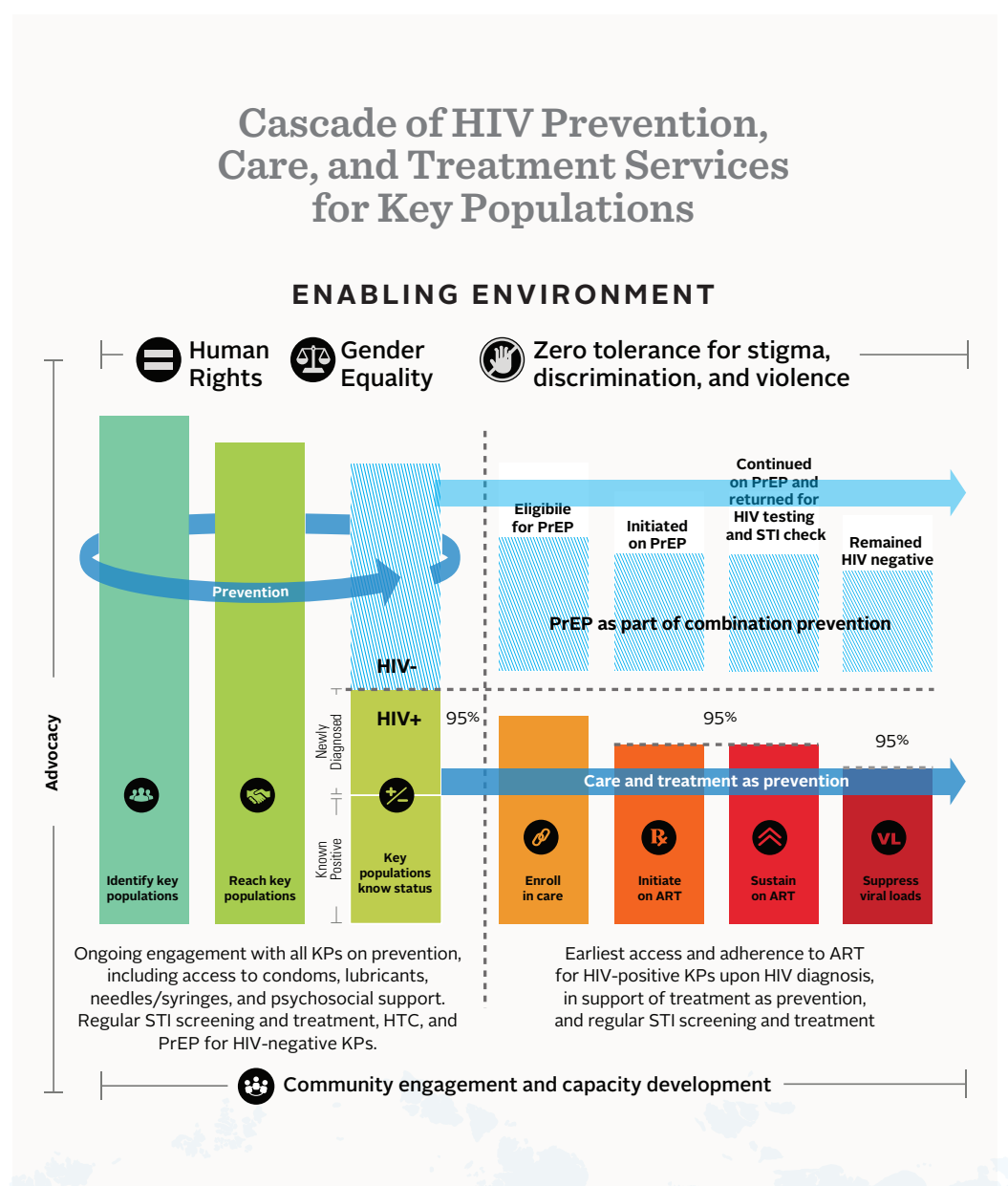
Nepal: Successfully advocated for inclusion of HIV self-testing, pre-exposure prophylaxis (PrEP), community-based antiretroviral therapy (ART), and multi-month dispensing of ART in National HIV Testing and Treatment Guidelines 2020



Suriname: LINKAGES' Health4All training adopted by the Ministry of Health and rolled out nationally to address stigma and discrimination against KPs in health facilities

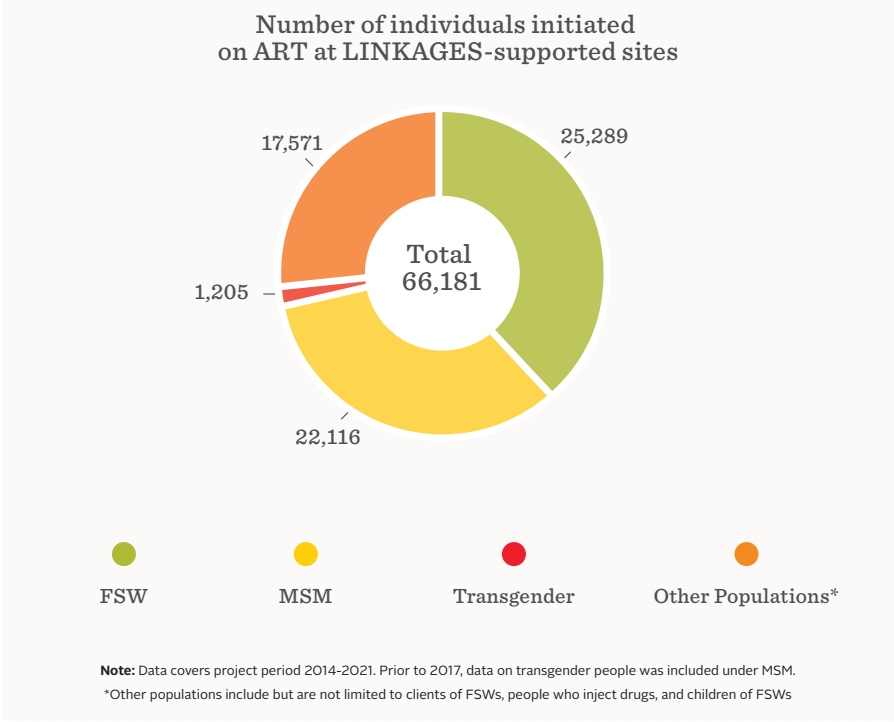
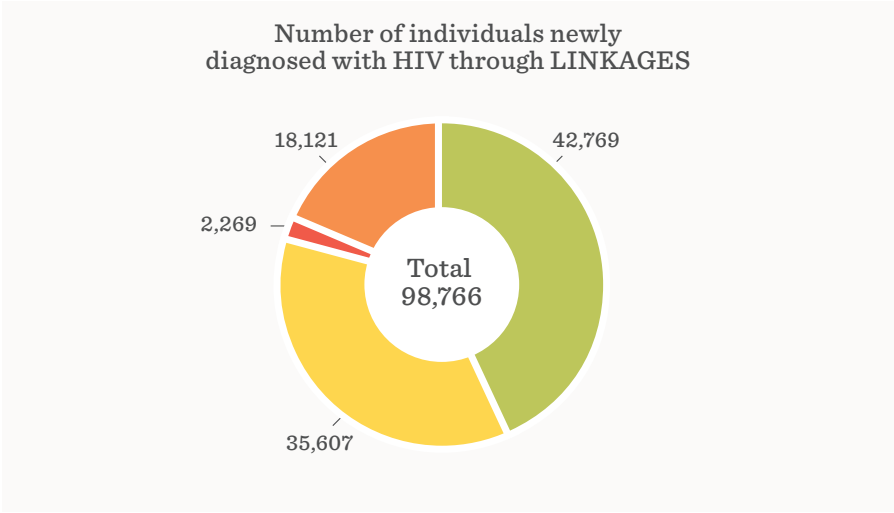
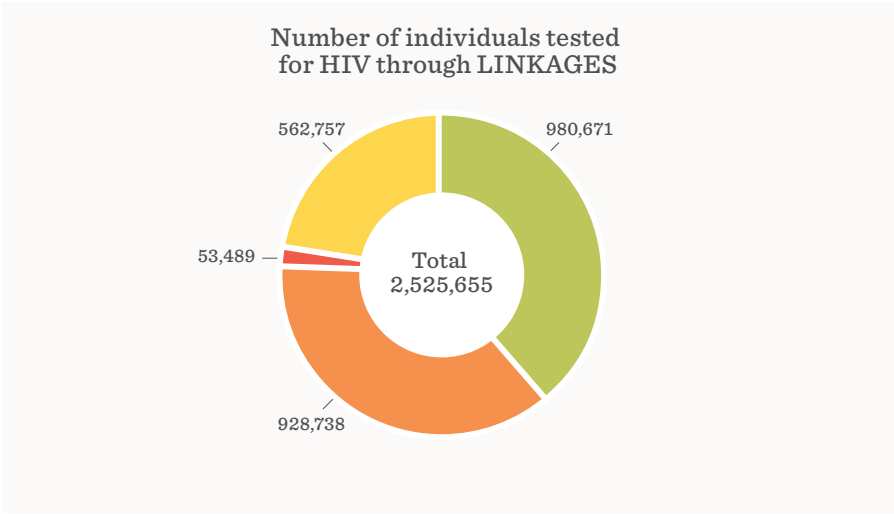


Thailand: Secured government authorization for lay health providers to conduct HIV testing, increased domestic financing of KP-led services, and inclusion of PrEP in the national health insurance scheme



Progress Through the Cascade

The LINKAGES project enhanced the HIV prevention and care cascade by increasing reach to KP individuals most at risk of acquiring or transmitting HIV, promoting routine HIV testing and counseling, and actively enrolling those with HIV into care and support interventions that enable them to remain in care.



Lessons And Learning

LINKAGES **prioritized generating evidence**, sharing learnings, and empowering country programs through knowledge. In support of this goal, the project published:

56

peer-reviewed publications

+

35

global technical resources to strengthen country programming

Technical Strategies

LINKAGES enhanced HIV outcomes among KPs through community-led, people-centered, data-driven solutions. These innovative strategies shaped programming around the needs of and realities faced by KPs, instead of attempting to fit KPs into traditional HIV programming.

By strengthening **strategic information systems**, LINKAGES enabled country programs to use data to design, strengthen, and monitor HIV interventions. In many countries, the project provided national programs with quality KP-specific data for the first time.

Using social network testing strategies, such as index testing and the **enhanced peer outreach approach**, the project engaged previously unreached KPs in HIV programming and substantially increased case finding.

LINKAGES launched a portfolio of **Going Online** activities in more than 30 countries, using online and mobile platforms to accelerate meeting HIV education, prevention, testing, and treatment objectives. The project pioneered the use of social media influencers to spread HIV education messages, and introduced an online reservation app (ORA), which empowers clients to find and book appointments for HIV services on their own smartphone.

PrEP became an HIV prevention option for KPs in some countries for the first time through LINKAGES. The project advocated for inclusion of PrEP in national HIV programs and introduced new strategies to promote PrEP uptake by KPs, such as community-based distribution and online outreach to those in high-risk networks to connect them to testing and prevention services.

LINKAGES implemented **differentiated ART models** to increase access to treatment among KPs. In several countries, LINKAGES supported KP-led drop-in centers to receive the necessary government accreditation to become community ART sites and expand their clinical service offerings.

Peer navigation empowered peers and elevated their roles as part of a case management team to assist PLHIV in enrolling in and accessing care and treatment services and supporting clients to overcome barriers to treatment initiation and adherence.

LINKAGES developed and operationalized practical guidance on the integration of **violence prevention and response** activities into HIV programs for KPs, establishing community-led crisis response teams and training over 4,000 members of law enforcement to protect and promote KP members' human rights. This led to more holistic HIV programming and contributed to an enabling environment for service uptake.

Through trainings with health care workers in the project's **Health4All** curriculum and the use of an electronic client feedback system called **LINK**, LINKAGES demonstrated that it is possible to reduce the perpetration of stigma and discrimination against KP individuals by health care providers, even in settings where KPs are criminalized.

What's Next

Despite the progress made in KP programming, KP members and their sexual partners still accounted for 65% of HIV infections worldwide in 2020¹. Without ongoing dedicated interventions tailored specifically for KPs, the risk of onward transmission within these populations will keep epidemic control out of reach. The LINKAGES project was a bold step in addressing the needs of KPs, but the work is not over. Building on LINKAGES' successes, the **Meeting Targets and Maintaining Epidemic Control (EpiC) project**—also funded by PEPFAR through USAID—is investing in new strategies to address the complex and dynamic challenges of the epidemic among MSM, sex workers, transgender people, people who use drugs, people in prisons, and other priority populations. The EpiC project is currently working in 33 countries.

1. Joint United Nations Programme on HIV/AIDS (UNAIDS). Confronting inequalities: lessons for pandemic responses from 40 years of AIDS. Geneva: UNAIDS; 2021. Available from: https://www.unaids.org/sites/default/files/media_asset/2021-global-aids-update_en.pdf.