The Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) project was implemented in Côte d’Ivoire in partnership with key population (KP)-led and KP-friendly community-based organizations, government stakeholders, public- and private-sector health facilities, and KP individuals with support from the U.S. Agency for International Development (USAID) and the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). Between March 2016 and September 2019, LINKAGES Côte d’Ivoire implemented a robust and innovative portfolio of activities designed to improve outcomes and measure progress along the entire cascade of HIV services for KPs—men who have sex with men (MSM), female sex workers (FSWs), and transgender individuals—who face the greatest risk of HIV. The FHI 360-led LINKAGES Côte d’Ivoire team successfully demonstrated that strategies such as peer education and navigation, enhanced peer outreach approach (EPOA), index testing, training for health care providers and police officers to reduce stigma and discrimination, and prevention and response to sexual and gender-based violence (SGBV) all help to engage and serve previously unreached KP members and link them to high-quality HIV services. Over the life of the project, LINKAGES Côte d’Ivoire was dedicated to sustainability, to supporting a locally led response to the epidemic and, ultimately, to the country’s journey toward self-reliance. This brief summarizes the achievements of the LINKAGES project in Côte d’Ivoire.

BACKGROUND

In 2018, 63% of people living with HIV (PLHIV) in Côte d’Ivoire knew their status, 55% of them were on antiretroviral therapy (ART), and 44% of those on ART were virally suppressed. The number of people who died from AIDS-related illnesses decreased between 2010 and 2018 from 24,000 to 16,000, and the number of new HIV infections decreased from 25,000 to 17,000 over the same period. While the country is making progress, there is still a large disparity between the HIV prevalence rates of adults in the general population (2.6%) and those of sex workers (12.2%) and MSM (12.3%). From March 2016 until September 2019, the LINKAGES project implemented programming to reach three key KPs—FSWs, MSM, and transgender people—with a comprehensive package of HIV prevention, care, and treatment services (see Table 1). The project partnered with the Government of Côte d’Ivoire (GOCI), the Programme National de Lutte contre le Sida (PNLS), seven clinical partners, three KP-

2. Ibid.
led community-based organizations (CBOs), the private sector, and others to provide services in 26 communes and cities in 23 districts.

The seven clinical partners were ASAPSU (in Abobo), ASAPSU (Yamoussoukro), Espace Confiance (Anyama), SAPHARM (Daloa and Issia), GBH (Abengourou and Bongouanou), Notre Grenier (Bondoukou and Tanda), and RSB Bouaké. The three community partners were Blety (FSWs), Arc-en-Ciel plus (MSM and trans people), and Alternative Côte d’Ivoire (MSM and trans people). All partners referred KP clients to 22 public health facilities/referral sites.

KEY PROGRAMMATIC ELEMENTS

In Côte d’Ivoire, LINKAGES implemented strategies and interventions guided by the project’s cascade framework to (1) accelerate case finding through index testing, HIV self-testing, scale-up of the EPOA, and the use of online and mobile platforms; (2) improve links to treatment through peer navigation; and (3) measure progress across the entire cascade.

The project’s seven clinical partners provided HIV testing and counseling, screening and treatment for sexually transmitted infections (STIs), screening and response for SGBV, case management, and referrals to treatment and other health services. HIV treatment was provided in the seven clinics through co-partnership with the Centers for Disease Control. The three CBO partners provided peer education and outreach, social and behavior change communication, and community-based HIV testing services, including HIVST and index testing.

Table 1. LINKAGES Côte d’Ivoire core package of services for FSWs, MSM, and transgender people

<table>
<thead>
<tr>
<th>Reach, Test, and Prevent</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer education, risk assessment, counseling, risk reduction planning</td>
<td></td>
</tr>
<tr>
<td>Condom use promotion, distribution of condoms and lubricant</td>
<td></td>
</tr>
<tr>
<td>HIV testing and counseling, including index testing and HIV self-testing</td>
<td></td>
</tr>
<tr>
<td>Violence screening, and referral to medical, psychosocial, and legal services</td>
<td></td>
</tr>
<tr>
<td>Syndromic screening and referral for STIs</td>
<td></td>
</tr>
<tr>
<td>Post-exposure prophylaxis services</td>
<td></td>
</tr>
<tr>
<td>Prevention and response to SGBV</td>
<td></td>
</tr>
<tr>
<td>Stigma and discrimination reduction (at community and health settings)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Care and Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Link to care and treatment services, including ART initiation and re-initiation</td>
</tr>
<tr>
<td>Peer navigation to support treatment initiation and adherence</td>
</tr>
<tr>
<td>Treatment and referral for STIs and referral for treatment of other opportunistic infections (OIs)</td>
</tr>
<tr>
<td>Referral for prevention of mother-to-child-transmission services for pregnant FSWs</td>
</tr>
<tr>
<td>Index testing</td>
</tr>
<tr>
<td>Community care and support for PLHIV, through support groups and home visits, for ART adherence</td>
</tr>
<tr>
<td>Undetectable = untransmittable messaging/counseling</td>
</tr>
</tbody>
</table>
**SERVICE DELIVERY IMPACT**

Between April 2016 and September 2019, LINKAGES Côte d’Ivoire diagnosed 12,169 PLHIV and initiated about 72% of them on treatment. (See Figure 2 for cumulative numbers and Figure 3 for a breakdown by key population group.)

“**This [Health 4 All] is one of the best courses I have ever attended. It allowed me to have another look on key populations, especially MSM. I now know how best I can serve them when they come to the health facility.**”

Dr. Kouadio Amani Garnier  
A government HIV focal point

### Figure 2. Summary of direct service delivery results among key populations, April 2016 to September 2019

- **125,425** Reached  
- **6,978,668** Condoms and **2,474,581** lubricants distributed  
- **109,085** Tested for HIV  
- **12,169** Diagnosed with HIV  
- **8,760** Linked to ART services

### Figure 3. Cumulative performance by KP subgroup, March 2016 to September 2019

<table>
<thead>
<tr>
<th></th>
<th>Number of KP members reached with HIV prevention interventions</th>
<th>Number who received HIV testing services</th>
<th>Number who tested positive</th>
<th>Number (and percentage) successfully linked to ART</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MSM</strong></td>
<td><strong>31,705</strong></td>
<td><strong>93,100</strong></td>
<td><strong>4,176</strong></td>
<td><strong>102 (96%)</strong></td>
</tr>
<tr>
<td><strong>FSWs</strong></td>
<td><strong>24,912</strong></td>
<td><strong>61,344</strong></td>
<td><strong>5,429</strong></td>
<td><strong>3,866 (71%)</strong></td>
</tr>
<tr>
<td><strong>Trans people</strong></td>
<td><strong>12,169</strong></td>
<td><strong>22,248</strong></td>
<td><strong>106</strong></td>
<td><strong>2,458 (72%)</strong></td>
</tr>
<tr>
<td><strong>Other pops</strong></td>
<td></td>
<td><strong>22,248</strong></td>
<td><strong>106</strong></td>
<td><strong>2,108 (86%)</strong></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>125,425</strong></td>
<td><strong>22,248</strong></td>
<td><strong>106</strong></td>
<td><strong>2,108 (86%)</strong></td>
</tr>
</tbody>
</table>

* Clients, partners, and children of FSWs, partners of MSM
Figure 4. Trends in uptake of testing and case finding among MSM in Côte d’Ivoire, FY16–FY19

Figure 5. Trends in uptake of testing and case finding among FSWs in Côte d’Ivoire, FY16–FY19
Figures 4 and 5 show the trends in HIV case finding among MSM and FSWs, respectively. In FY16/17, the average case-finding rate was less than the national HIV prevalence among the general population (2.7%). In response, the team introduced the EPOA in Q3 FY17, resulting in substantial improvement. In the three months after EPOA was introduced, case finding jumped by more than 22% for MSM and more than 21% for FSWs. (See more in the section “Technical Highlights.”)

The percentage of HIV-positive MSM who were newly linked to ART remained above 90% throughout much of the project’s life cycle (Figure 6). LINKAGES Côte d’Ivoire largely credits its peer navigation program for linking peers to treatment, encouraging long-term adherence, and helping to prevent PLHIV from falling through the cracks. While linkage to ART among FSWs (Figure 7) was not as high as among MSM, it was an average of 90.9% from Q2 to Q4 in FY19.

“As part of implementing the LINKAGES project in the health district of Abengourou, we peer educators did HIV counseling and testing and accompanied people living with HIV to health facilities that provided ART services. All HIV-positive peers were put on ARVs. Our community monitoring has helped keep more than 90 percent of patients on ARV treatment and achieve suppressed viral loads.”

Coulibaly Safoura
Peer educator at GBH Abengourou

Figure 6. Trends in linkages to ART among MSM in Côte d’Ivoire, FY16–FY19

Includes MSM diagnosed with HIV in previous quarters enrolled in Q4
TECHNICAL HIGHLIGHTS

The LINKAGES Côte d’Ivoire team adopted a range of technical strategies to improve program performance and meet the differentiated needs of KP members in the country.

ENHANCED PEER OUTREACH APPROACH

As touched upon earlier, the introduction of EPOA was a major success story. EPOA is a peer-led, coupon-based referral network approach used to access hard-to-reach networks of KP individuals to offer HIV prevention, testing, and treatment services in ways that ensure their privacy. The project began implementing EPOA in Q3 FY17, and this effort resulted in a steady climb in case finding: in Q3, EPOA HIV case finding was 5.6% among FSWs and 15.4% among MSM (compared to 1.8% and 5.9%, respectively, with standard testing services) and, through the use of EPOA data in Q3, in Q4 FY17 FSW case-finding results soared to 21.4% and MSM case finding to 22.3%. Based on this success, the project continued implementing EPOA campaigns into FY18/19.

3. For more information about EPOA, please see LINKAGES Enhanced Peer Outreach Approach Implementation Guide.

![A site supervisor and peer educator from Arc-en-Ciel shows materials used to counsel MSM and trans peers. Photo: Moustafa Cheaiteli for FHI 360](image)
PEER NAVIGATION AND PEER EDUCATION

The project recognized the crucial role that peer educators and peer navigators play in reaching KP members and their sexual partners with prevention services, increasing demand for HIV testing, distributing condoms and lubricants, making referrals, accompanying peers to medical appointments, educating them about ART, and supporting them with long-term adherence. In response, the LINKAGES Côte d’Ivoire team trained 210 peer educators (166 FSWs, 44 MSM) and 46 peer navigators (33 FSWs and 13 MSM) to provide HIV services and support. Ultimately, the Ministry of Health (MOH)/PNLS certified all the peer educators and peer navigators to perform HIV testing in the community and refer those who tested HIV positive to ART services.

INDEX TESTING

Index testing is a focused HIV testing approach in which the family members (including children) and sexual and injecting partners of people diagnosed with HIV are offered testing. The LINKAGES Côte d’Ivoire team implemented index testing among both FSWs and MSM beginning in Q4 FY18. The majority of KP members accepted index testing, and each individual provided an average of three contacts. About 93% of contacts eligible for HIV testing accepted testing, and the case-finding rate among them was 16.6% (Figure 8).

TACKLING STIGMA AND DISCRIMINATION IN HEALTH CARE FACILITIES

Unfortunately, some health care providers hold stigmatizing, prejudicial, and discriminatory attitudes toward KPs. These negative attitudes create barriers that can deter KP members from accessing quality health care services. LINKAGES Côte d’Ivoire, in

Figure 8. Index testing cascade for all populations Q3 and Q4 FY19

Peer outreach workers in Adobo, Côte d’Ivoire. 
Photo: Moustafa Cheaiteli for FHI 360

“With LINKAGES, we were treated for STIs, tested for HIV, and given care and support. Our health has improved through the decrease in viral load.”

Valérie Kouassi
Peer navigator at SAPHARM/Daloa
In addition to reaching more KP members, especially hard-to-reach populations, with HIV prevention, care, and treatment services, LINKAGES Côte d’Ivoire contributed to sustainable improvements by effecting change at the policy level. For example, LINKAGES’ innovations such as peer navigation and the EPOA were adopted nationally and are currently used by all partners working in HIV prevention, care, and treatment among KPs in the country. LINKAGES Côte d’Ivoire also provided technical and financial support to the Ministry of Health/PNLS to develop evidence-based policies and other key guidance documents that improve the policy and health care environment for KPs, including:

- The National Strategic Plan 2016-2020
- Guidelines for condom and lubricant distribution (including to KP members)
- Guidelines for implementing HIV self-testing
- National STI treatment guidelines
- A manual describing interventions for FSWs and MSM
- National data collection tools
- National PrEP implementation guide and training module for PrEP providers

Through the LINKAGES project, I was trained in finger-prick HIV testing, peer navigation, and counseling, which helped me to better plan activities with FSWs who test positive. I organize support groups among HIV-positive FSWs, conduct home visits, and welcome FSWs to the RSB health center to better support them."

Lydie Dago
Peer navigator at RSB Bouaké
STRENGTHENING OF LOCAL PARTNER CAPACITY

Through ongoing technical assistance, training, on-site coaching, and supportive supervision for its local implementing partners, LINKAGES Côte d’Ivoire not only improved the program’s performance but also strengthened partners’ ability to implement program strategies with fidelity. Notably, with support from LINKAGES, two local partners have developed their organizational capacity sufficiently to be qualified to receive direct funding from the U.S. Government (USG).

LEGACY AND FUTURE DIRECTIONS

LINKAGES Côte d’Ivoire not only introduced innovations to increase case finding and links to treatment among KP individuals and their networks, but it also helped create a safer and more inclusive environment for KPs by training health care providers and law enforcement officers to treat FSWs, MSM, and trans people with dignity and to provide high-quality, KP-specific services. Moreover, the project contributed to sustainable change: the Côte d’Ivoire government adopted LINKAGES’ successful peer navigation and EPOA and, with the project’s technical assistance, updated key policy documents and national guidelines related to HIV prevention, care, and treatment among KP individuals. The project also built the capacity of two local CBOs to the level that they have been selected by PEPFAR to directly receive USG funding.

USAID and PEPFAR approved the continuation of LINKAGES’ work in Côte d’Ivoire through the Meeting Targets and Maintaining Epidemic Control (EpiC) project, also led by FHI 360, which started October 1, 2019. Under EpiC, the project will (1) rapidly introduce new and proven innovations and then quickly bring them to scale; (2) provide support customized to the needs of Côte d’Ivoire and its target populations; (3) provide targeted, results-based technical assistance that tracks progress and outcomes daily, weekly, and quarterly and enables adaptive management; and (4) support the country’s continued journey to self-reliance.

This report is made possible by the generous support of the American people through USAID and PEPFAR through the terms of cooperative agreement #AID-OAA-A-14-00045. The contents are the responsibility of the LINKAGES project and do not necessarily reflect the views of USAID, PEPFAR, or the United States Government.