

LINKAGES LIBERIA

Summary of Achievements

January 2019 – September 2020

With support from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) through the U.S. Agency for International Development (USAID), the Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) project, led by FHI 360, was implemented in Liberia between January 2019 and September 2020. The robust and innovative portfolio of activities was designed to improve outcomes and measure progress along the entire cascade of HIV services for key populations (KPs) — men who have sex with men (MSM), female sex workers (FSWs), and transgender individuals — who face the greatest risk for HIV. The LINKAGES Liberia team successfully demonstrated that strategies such as peer education and navigation, index testing, linkage retention coordinators, training health care providers to reduce stigma and discrimination, and deployment of prevention and response to gender-based violence (GBV) 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 Liberia was dedicated to sustainability and supporting a locally led response to the epidemic. This brief summarizes the achievements of the LINKAGES project in Liberia.

BACKGROUND

At the inception of the LINKAGES project, Liberia had an HIV prevalence of 2.1% among the general population, 9.8% among female sex workers (FSWs), and 19.8% among men who have sex with men (MSM). The LINKAGES Liberia project was designed to support the Liberian Government's efforts to break through barriers to HIV prevention, care, and treatment coverage, especially among KPs, and accelerate progress on UNAIDS 95-95-95 goals. Almost half of the estimated 163,000 FSWs and 74,000 MSM are in Montserrado County. Stigma from health care providers, health facility staff, and the community at large is a major deterrent to KP members' and people living with HIV (PLHIV)'s access to HIV services in Liberia.

From January 2019 to September 2020, the LINKAGES project implemented HIV prevention, care, and treatment programming to reach MSM, FSWs, transgender people, and male clients or spouses/partners of FSWs in five districts of Montserrado County (Figure 1) with high quality, KP-competent services. The project partnered with the National AIDS Commission (NAC) and

Highlights

- Tested 24,945 people (7,200 FSWs, 3,583 MSM, 1,159 transgender individuals); 2,085 newly diagnosed with HIV for a case-finding rate of 8%; 97% initiated on ART
- Led efforts to mitigate violence and stigma including in health facilities
- Collaborated with NACP to launch an intensive index testing optimization strategy, which included task shifting services to 21 newly identified and trained index testing counselors
- Offered index testing and 68% of clients accepted, providing 7,513 eligible contacts, among whom 77% were tested for HIV and 869 individuals were newly diagnosed for a case-finding rate of 18%; 90% initiated on ART
- Introduced several strategic actions to increase treatment initiation and adherence, ultimately achieving a 97% overall ART initiation rate among those newly diagnosed
- Contributed to increase in national VL testing coverage from 1,314 tests (October–December 2019) to 3,057 (April–June 2020); improved VL suppression rate from 66% to 75%
- Created a structure for gender-based violence (GBV) response; within three months 168 cases documented at one FSW civil society organization
- Collaborated with Ministry of Health (MOH), NAC, and NACP to revise two key national documents: the ART guidelines and the HIV testing algorithm and guidelines

the National AIDS and STI Control Program (NACP), nine local civil society organizations (CSOs), and 13 health facilities.

CSOS AND HEALTH FACILITIES COLLABORATING UNDER LINKAGES

Local implementing partners

- Equip Liberia
- Lutheran Church of Liberia (LCL)
- Stop AIDS in Liberia (SAIL)
- Liberian Women Empowerment Network (LIWEN)
- Youth Alliance Liberia (YAL)
- Transgender Network of Liberia (TNOL)
- White Rose Alliance (WRA)
- Lesbian and Gay Association of Liberia (LEGAL)
- Home of Dignity (HOD) Inc.

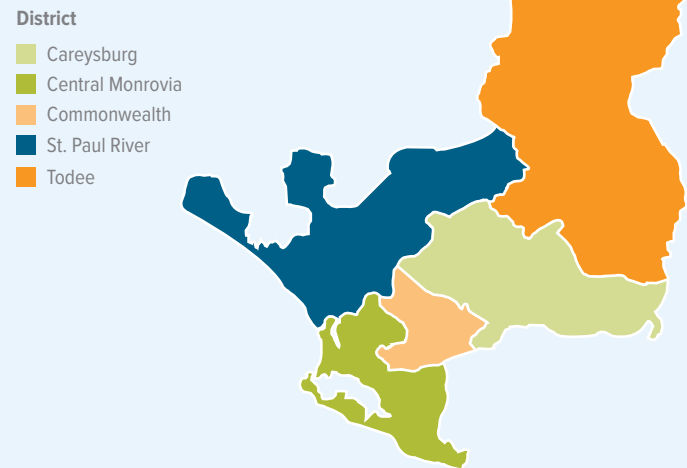
Health facilities

- Duport Road Health Center
- Clara Town Health Center
- Redemption Hospital
- Star of the Sea Health Center
- John F. Kennedy Medical Center
- St. Joseph's Catholic Hospital
- TB Annex Hospital
- Nyehn's Health Center
- Careysburg Clinic
- Home of Dignity (HOD) Health Center
- Sister Barbara-Ann Memorial Health Center
- James N. Davis Jr. Memorial Hospital
- ELWA Hospital

KEY PROGRAMMATIC ELEMENTS

LINKAGES worked to enhance implementation capacity for stigma-free HIV services for KP groups in health facilities and leverage untapped community strengths of the CSOs to partner and collaborate with health facilities to provide high-quality HIV services. Through this collaborative approach, the project delivered a comprehensive package of services across the entire

Figure 1. Montserrado County, Liberia



HIV cascade including prevention interventions, HIV testing, link to and retention in care, initiation on and adherence to antiretroviral therapy (ART), and viral load (VL) monitoring (Table 1).

SERVICE DELIVERY IMPACT

Over the life of the project, LINKAGES Liberia contributed to the national HIV response by testing 24,945 individuals, including 7,200 FSWs, 3,583 MSM, and 1,159 transgender individuals. Of those, 2,085 were newly diagnosed with HIV, an overall case-finding rate of 8%. A total of 2,032 (97%) of those diagnosed were initiated on ART. Trends in testing uptake, HIV case finding, treatment initiation, and viral load improved steadily over time, except from April to June 2020 due to COVID-19 (Figures 2–4).

“We have been implementing HIV projects before under different donors. Mandate was just ending at HIV testing. The coming of LINKAGES has just done something to our organization. We are now taking our beneficiaries through from testing to treatment and making sure that people adhere to the treatment so that they get the healthy benefit of it.”

— REV. DAVIS, PROGRAM MANAGER, LUTHERAN CHURCH OF LIBERIA HIV PROGRAM

Table 1. Package of comprehensive services provided by LINKAGES Liberia

Prevention services	Care and treatment services
<ul style="list-style-type: none"> Peer education, counseling, and risk-reduction planning Condom use promotion; distribution of condoms and lubricant HIV testing Sexually transmitted infection (STI) screening and referral for treatment Tuberculosis (TB) screening and referral for treatment Stigma and discrimination mitigation efforts Violence screening and referrals for appropriate support Violence/crisis response teams Psychosocial counseling 	<ul style="list-style-type: none"> Link to care and treatment Treatment initiation (test-and-treat) and continuation Peer navigation to support treatment initiation and adherence Index testing Support groups for adherence counseling and ongoing psychosocial support Adherence counseling for all recipients of care including intensive adherence counseling every two weeks to one month for those unsuppressed Missed appointment reminders and tracing of clients experiencing interruptions in treatment Viral load testing Undetectable=untransmissible (U=U) messaging to recipients of care Community ART dispensing Multimonth dispensing of ART as a mitigation measure during COVID-19 pandemic

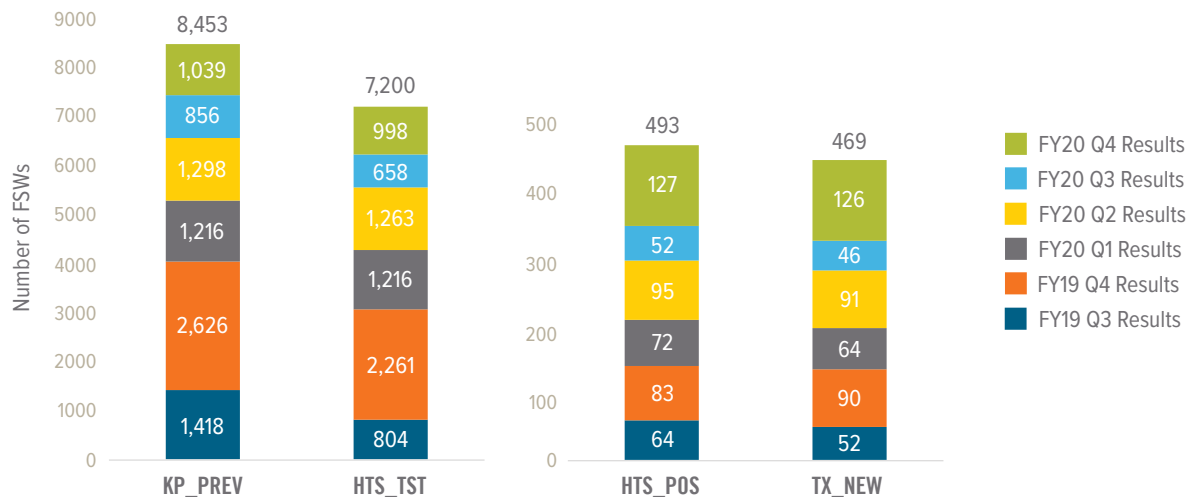
Figure 2. Cumulative performance in reach, testing, case finding, and treatment initiation among FSWs in Liberia FY19 (May–September 6, 2019) and FY20

Figure 3. Cumulative performance in reach, testing, case finding, and treatment initiation among transgender people in Liberia FY19 (May–September 6, 2019) and FY20

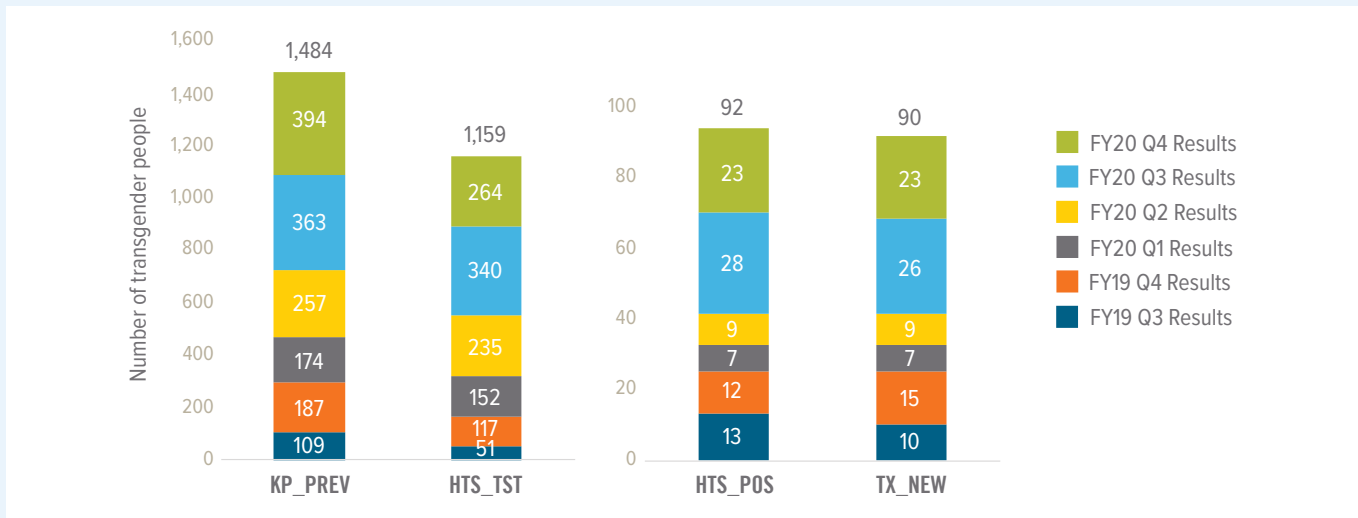
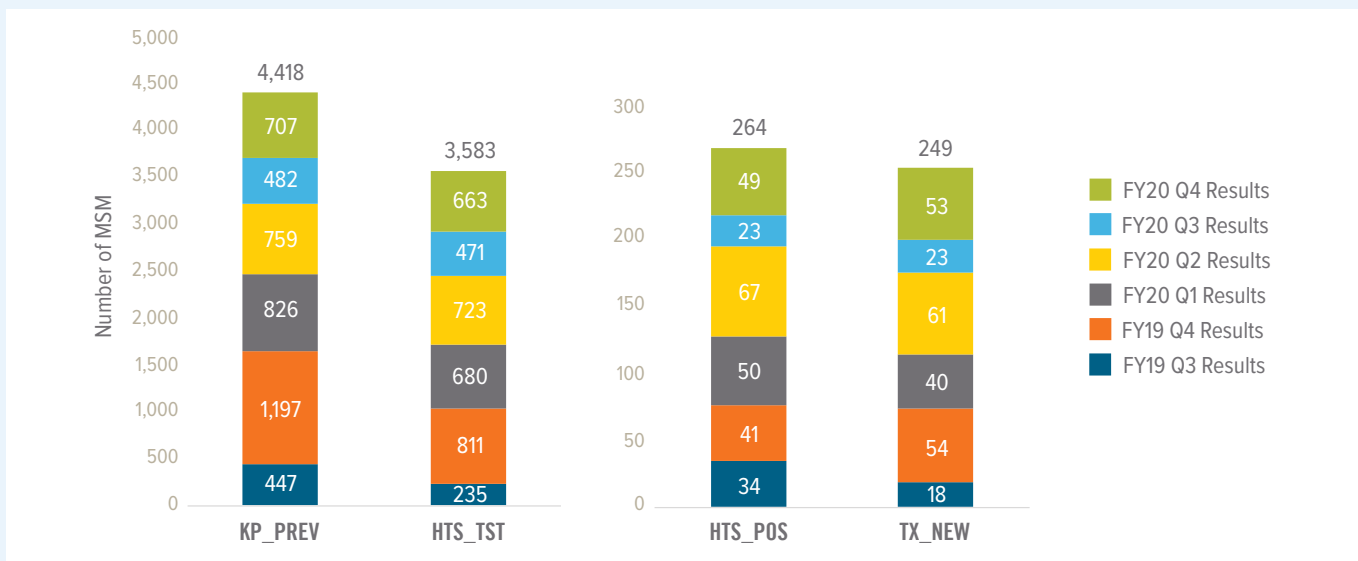


Figure 4. Cumulative program performance in reach, testing, case finding, and treatment initiation among MSM in Liberia FY19 (May–September 6, 2019) and FY20



TECHNICAL HIGHLIGHTS

In addition to delivering a core package of HIV prevention, care, and treatment services, the LINKAGES Liberia team introduced new technical strategies to strengthen program performance and modernize KP programming in the country. Some of the project's most important technical contributions include enhancing community outreach services for KP groups, introducing index testing, standardizing implementation

of test and treat and introducing other ART linkage and retention strategies, improving VL testing, and efforts to mitigate violence and stigma including in health facilities.

CAPACITY BUILDING FOR COMMUNITY OUTREACH SERVICES FOR KP GROUPS

The LINKAGES Liberia team worked closely with its local CSO partners not only to build their financial and organizational capacity but also their technical capacity to carry out peer outreach activities and collaborate effectively with the project-supported health facilities

to manage KP clients. The CSOs learned how to conduct mapping and size estimation for different groups of KPs, and developed the leadership skills of peer outreach workers through engagement in microplanning and management of the project. The project established a strong peer outreach workforce comprising peer educators to provide comprehensive prevention services and referrals; peer navigators to support linkage to treatment, promote viral load testing, and offer psychosocial support; and field officers to help with coordination of peer outreach services. LINKAGES also conducted safety and security training for CSO partners as part of outreach strengthening activities. The training enlightened CSOs to identify security risks to the outreach workforce, analyze the risks, and develop security plans to mitigate the threats.

ACCELERATION OF INDEX TESTING

Index testing services introduced in Liberia in collaboration with NACP made a significant contribution to HIV case finding in project-supported facilities and catchment areas. LINKAGES began index testing services in Liberia in October 2019, and an assessment was conducted with all facilities and CSOs in April 2020 to understand the extent to which index testing quality standards were met and identify areas for improvement. Based on the results, EpiC and NACP launched an intensive index testing optimization strategy, which included task shifting index testing services to 21 newly identified and trained index testing counselors. The project also introduced

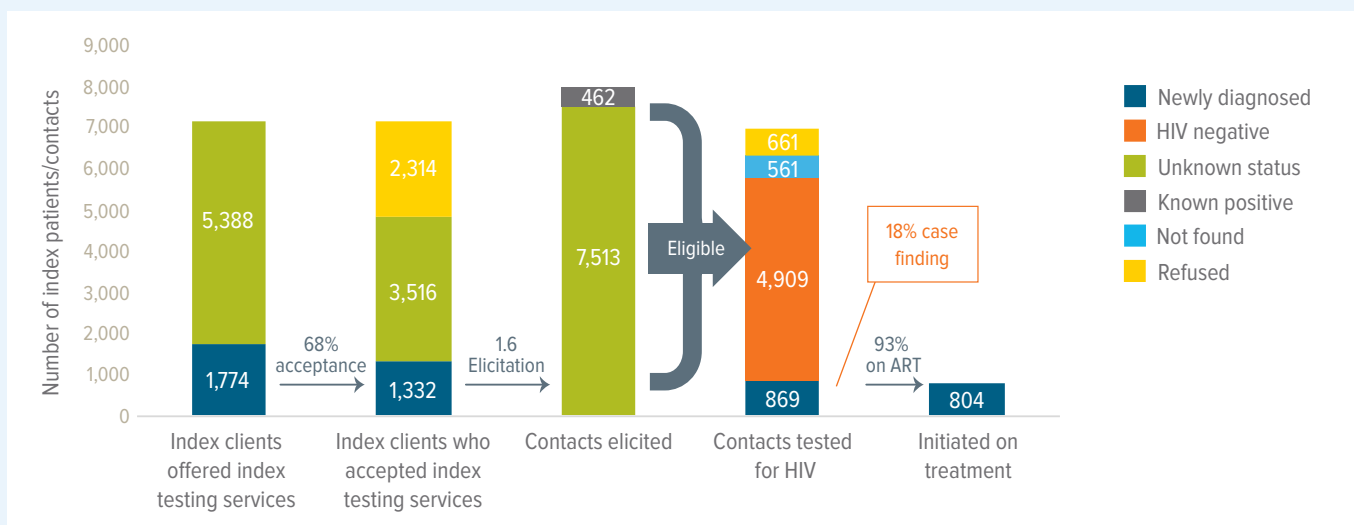
standardized tools, such as a national index testing register; conducted a series of trainings and mentored 39 clinical staff to strengthen quality of index testing services; and trained peer outreach workers to sensitize other peers on index testing. All index clients were assessed for intimate partner violence and provided appropriate counseling and support when violence was disclosed. In cases of violence, clients and providers determined together whether and how to proceed with partner notification. Overall, 68% of clients offered index testing services accepted them. They provided 7,513 eligible contacts, among whom 77% were tested for HIV. A total of 869 individuals were newly diagnosed for a case-finding rate of 18%, and 90% of them were initiated on treatment (Figure 5).

IMPROVEMENTS IN TREATMENT INITIATION AND RETENTION

At the start of the project, the test-and-treat strategy (as recommended by the World Health Organization and endorsed in Liberia's national guidelines) was not yet widely understood and implemented in health facilities, and many clients who did initiate treatment were not retained in care. The project undertook several strategic actions to increase treatment initiation and adherence, ultimately achieving a 97% overall ART initiation rate among those newly diagnosed, including:

- Operationalized same-day treatment initiation; conducted special engagement sessions with the leadership of the facilities to build capacity in the guidelines and secure their buy-in for implementation.

Figure 5. Life-of-project index testing results, FY19–FY20



- Supported health facilities and CSO partners to properly track and retain people on treatment, recruited dedicated clinical personnel as linkage retention coordinators for each of the 13 supported facilities. These staff coordinated linking to treatment, traced those lost to follow-up to bring them back to care, and navigated KP groups' access without hindrance to HIV services at the facilities.
- Established nine KP support groups (five for FSWs, three for MSM, one for trans people) to focus on ART adherence as well as educating and empowering members to take charge of their health needs and manage risk.

OPTIMIZATION OF VIRAL LOAD TESTING

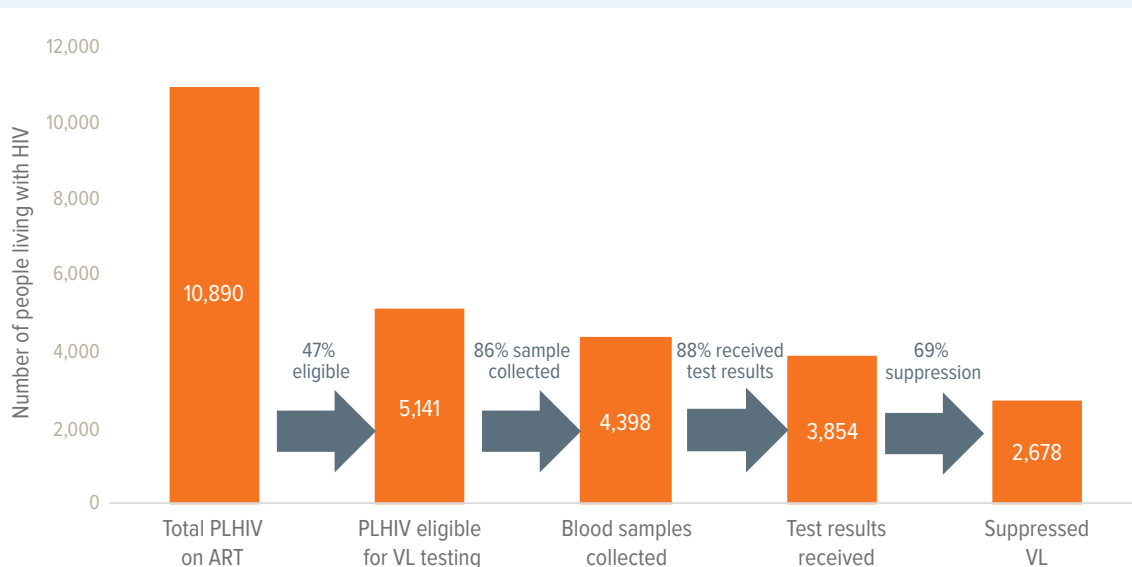
By 2019, the national VL testing coverage rate was below 35%, and the viral suppression rate among those tested was only 61%. These data are for all PLHIV since no baseline data existed for KPs. To improve VL monitoring, LINKAGES Liberia introduced a VL coverage acceleration plan across the 17 ART facilities supported by the project and where 70% of the country's PLHIV receive ART services. A hub-and-spoke system to link facilities to the 20 GeneXpert machines available in the country for processing VL samples was designed to better distribute testing volume according to laboratory capacity. In addition, volunteers from a network of PLHIV with physician and nursing assistance qualification were selected and equipped to facilitate pre-clinic health talks

and adherence counseling with VL-focused information, education, and communication (IEC) materials; conduct VL sample collection and transport to VL laboratories for processing; return results for quick clinical decision-making; and track and provide intensive support to PLHIV with non-suppressed VL through home visits and phone calls. Within one year the uptake of VL testing for Liberia doubled. The national VL testing coverage increased from 1,314 tests in the quarter preceding the intervention (October–December 2019) to 3,057 in the following quarter (April–June 2020). The increase in testing coverage also corresponded with an improved VL suppression rate during the same time frame, from 66% to 75%. The complete cascade of VL for the entire period of LINKAGES implementation is presented in Figure 6.

EFFORTS TO PREVENT AND RESPOND TO VIOLENCE

Efforts to reduce violence and stigma against KP members and provide appropriate support for those affected by violence was a key component of the LINKAGES Liberia project. At the beginning of implementation, no structures for GBV response existed and data on GBV was negligible. The project worked to raise awareness among KPs and community stakeholders so they could recognize violence in their own lives and understand the right of KP individuals to live free from violence; established nine community-led peer crisis response teams at nine different hot spots; created peer support groups; and facilitated community

Figure 6. Viral load testing cascade, FY19–FY20



monitoring to respond to various issues affecting KPs including stigma experienced in health facilities. In the three months after establishing GBV response at one FSW CSO, 168 GBV cases were documented. The reports included 102 (three MSM, 99 FSWs) cases of physical violence, 40 cases of emotional abuse (19 MSM, 21 FSWs), 22 cases of economic abuse, and four cases of sexual violence. In addition to receiving appropriate violence response services, all those who reported GBV also received prevention services, including HIV prevention messages, referral for HIV testing, STI screening and referral, condom and lubricant provision, and referral for TB screening. This structure has continued to be scaled up under the EpiC project and serves more people each quarter.

ACTIVITIES TO MITIGATE STIGMA AND ENHANCE PROVISION OF KP-FRIENDLY SERVICES IN HEALTH FACILITIES

At facility level, LINKAGES Liberia recruited and trained dedicated clinical staff as linkage retention coordinators to help KP clients access and navigate services at supported health facilities. Peer outreach leaders from the CSOs worked closely with the linkage retention coordinators to ensure KP members reached in the communities were effectively linked to health facilities. The team also provided “whole site” facility sensitization for 278 staff members including clinical, administrative, security, and others on creating a welcoming environment for KP groups. The project trained 65 health care workers (physicians, nurses, midwives, and physician assistants) on provision of high-quality, stigma-free HIV services to KPs in Liberia using the LINKAGES project [Health4All curriculum](#).

COVID-19 MITIGATION MEASURES

The LINKAGES Liberia team worked swiftly to introduce differentiated service delivery strategies to minimize disruptions to services in the wake of the COVID-19 pandemic. For example, the project provided mentorship to clinical staff in the health facilities to provide multimonth ARV (antiretroviral) drug dispensing to stable clients to avoid unnecessary clinic visits and potential exposure to COVID-19. The project also supported clinical staff and CSO community outreach workers to do home delivery of treatment and preventive commodities, and to conduct home- and community-based VL testing. Facilities and CSOs were also supported with trainings on preventive measures for COVID-19 and procurement of basic personal protective materials.

ABOVE-SITE ACHIEVEMENTS

In addition to expanding access to high-quality services among KPs, the LINKAGES Liberia team worked closely with government partners to develop evidence-based policies and guidelines inclusive of KPs. The team also provided technical assistance (TA) to its local partners, not only to improve program performance but also to develop their organizational capacity.

Key contributions of the LINKAGES Liberia project to the policy environment include:

- Engagement of government departments (e.g., NACP, Montserrado County Health Office/Team [MCHT]) in KP programming including through engagement of an HIV Technical Advisor seated within the NACP to provide technical assistance on KP programming, data management, and other aspects of the national HIV program.
- Collaboration with the Ministry of Health (MOH), NAC, and NACP to revise two key national documents on HIV: (1) the national ART guidelines; and (2) the HIV testing algorithm and guidelines to include partner referral.
- Support for NACP to convene the first virtual national HIV coordination meeting (National HIV Conference) with 40 attendees, including focal persons from high-volume ART clinics, and representatives from MOH, implementing partners, United Nations organizations, and Global Fund partners.

Key contributions of the LINKAGES Liberia project to local partner capacity development include:

- Oriented 37 participants from six implementing partners and representatives from the MOH, MCHT, NAC, and NACP on grant management.
- Established partnerships between CSOs and health facilities to provide comprehensive services to KPs.
- Generated KP hot spot mapping and size estimation to inform KP programming within Montserrado County. Trained 22 program staff—managers, coordinators, and monitoring and evaluation (M&E) officers—from six implementing partners on hot spot mapping and LINKAGES' M&E system (data collection tools, databases, data quality checks, and analysis of KP indicators).



“We thank USAID for funding the LINKAGES project. This project is a real partner that builds our genuine capacity. The way the team follows up on us on deliverables, it clearly demonstrates that these people are in serious business and they move us to doing our job smarter. When we reach out to them, we receive excellent guidance. LINKAGES has prepared the health facility staff so well that we now receive services without stigma and discrimination.”

— TRANSGENDER PEER OUTREACH WORKER

FUTURE DIRECTIONS

Despite a challenging operating environment in which KP individuals face high levels of stigma, as well as disruptions from the COVID-19 pandemic, the LINKAGES Liberia project made great progress toward expanding access to comprehensive, KP-friendly HIV services. The achievements were possible thanks to the supportive collaboration of government partners, including NACP, NAC, and the Montserrado County Health Team; CSO partners; and the health facilities. Together, they demonstrated commitment to the project and its role in contributing to the national HIV response. USAID and PEPFAR approved the continuation of LINKAGES’ work in Liberia through the Meeting Targets and Maintaining Epidemic Control (EpiC) project, also led by FHI 360, effective October 1, 2020. Under EpiC, the project will continue to improve the design and delivery of services that meet the needs of KPs in Liberia. Critical issues the project will continue to address include stigma toward PLHIV, HIV case finding, retention in care, VL testing, capacity development of local CSO partners, and nonavailability of STI drugs.



USAID and PEPFAR team visit to the LINKAGES office: representatives from USAID, NACP, procurement and supply management (USAID), and FHI 360.

Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES)

is a global cooperative agreement funded by USAID through PEPFAR. Led by FHI 360 with partners Pact, IntraHealth International, and the University of North Carolina at Chapel Hill, LINKAGES has worked in more than 30 countries since 2014 to reduce HIV transmission among key populations — sex workers, men who have sex with men, transgender people, and people who inject drugs — and to improve their enrollment and retention in care.

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