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PHILIPPINES DSD-SI PROJECT

AUGUST 2022

Situational Analysis of Virtual HIV Interventions in the Philippines

REPORT

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Situational Analysis of Virtual HIV Interventions in the Philippines

1.0 Summary

The national response to HIV in the Philippines is ripe for investments in scaled virtual HIV interventions that support differentiated service delivery modalities.

This report includes a situational analysis of existing virtual HIV interventions in the Philippines, noteworthy gaps, and recommended interventions to be further explored and potentially adapted by local partners. A future roadmap document will further contextualize the recommendations in this report and provide guidance on their implementation.

This report is financed by Global Fund to Fight AIDS, Tuberculosis, and Malaria (the Global Fund) as part of the Differentiated Service Delivery Strategic Initiative (DSD-SI), which aims to address gaps in testing and treatment for key populations, men, adolescents, and children. Analyses and recommendations in this report will support the Government of Philippines (GoP)'s goal of scaling differentiated service delivery (DSD) models to meet clients' preferences and facilitate a resilient health system.

KEY TERMS

Virtual HIV interventions: Use of virtual platforms to engage clients to support HIV program goals for demand generation, service delivery, and retention.

Virtual platforms: Offline modalities, such as SMS and voice calling, or online platforms, such as social media, messenger applications, other phone or webapps, search/browser advertisements, and electronic data collection and case management, amongst others.

Differentiated Service Delivery (DSD): A client-centered approach that simplifies and adapts HIV services across the cascade, in ways that both serve the needs of clients and reduce unnecessary burdens on the health system.

Photo 1: Manilla skyline. Credit JC Gellidon on Unsplash

2.0 Methods of Data Collection

Several methods were used to collect information for this situational analysis. These included a lite desk review of mobile technology use in the Philippines, a web and social media search to identify existing platforms in the Philippines that support virtual HIV interventions, and an online survey of selected health facilities to assess the status of facility-level virtual HIV interventions. Follow-up discussions were held with local stakeholders at the Pilipinas Shell Foundation, Inc. (PSFI), Department of Health (DoH), World Health Organization (WHO), FHI 360, and other community-based organizations (CBOs) to learn more about the status of virtual HIV interventions in the Philippines. A summary of the methods of data collection is described in the table below.

Table 1: Summary of data collection methods

	Purpose	Data Source	Output
Lite desk review	Insights on mobile technology use in the Philippines to help justify the scale-up of virtual HIV interventions	• Digital 2022 Report by We Are Social • Facebook Insights and Ad Manager • Statistica	• Mobile phone connections vs population • Internet use • Social media use • Regional internet use • Audience size of key populations on Facebook (incomplete)
Web and social media search	Highlight examples of existing formal platforms in the Philippines that support virtual HIV interventions (such as social media pages, organizations, and apps).	• Web/Google search; Google Scholar (Keywords: HIV/AIDS, PLHIV, Support groups, booking/online platforms, LGBTQ) • Social media (Facebook) searches) • Searches in academic literature such as Aids & Behavior journal • Site validation and snowballing to identify additional channels/platforms	• Examples of platforms, characterized by platform type, target audience focus and reach, and purpose
Online guided facility survey	Understand the status of virtual HIV interventions and gaps at the facility-level (among sampled sites in the Philippines)	• Microsoft online survey of HIV treatment hubs (see details in the annex)	• Use of virtual HIV interventions per facility • Facility-level recommendations on virtual interventions to introduce or scale-up
Follow-up country meetings and validation	Validation of desk review and online survey results to address information gaps.	• Country review of findings • Country meeting to discuss evaluation efforts and results	• Contextual understanding of virtual HIV interventions in the Philippines to frame recommendations • Identification of additional platforms and insights

3.0 Mobile Technology Use in the Philippines

Mobile technology use is very high in the Philippines, with more mobile connections than people and about 82% social media use nationally.

3.1 NATIONAL FINDINGS

Photo 2: Market in Cebu, Philippines. Credit Hitoshi Namura on Unsplash

The Philippines has an overall population of 110.1 million with a median age of 24.1 years and 48% residing in urban areas.[1] There is a great opportunity to leverage virtual platforms for HIV services in the Philippines because mobile technology use is high. The number of mobile connections registered in the Philippines is 140% of the total population (which means some people have multiple connections). There is no data on the percent of people in the Philippines who have at least one mobile connection. Internet use is at 68% of the population, which is higher than the global average of 61.8% of the population.[2] Active social media users represent 82% of the population of Philippines. Social media use is higher than internet use because some individuals can have multiple social media profiles on the same device, or a single device and internet connection in a household can allow multiple family members to connect to their own social media profiles. Some youth under the age of 18 create social media accounts with an older birthdate and are listed as adults. Those youth also commonly use their parents or other adult's mobile phone to create and access their social media accounts which inflates the number of social media users versus mobile phone and internet users.[3]

Table 2: Number of users of major social media platforms in the Philippines in 2022 (We Are Social)

Platform	Facebook	YouTube	TikTok	Instagram	LinkedIn	Snapchat	Twitter
Users	84M	57.5M	36M	18.6M	11M	10.6M	10.5M

Facebook is the most popular social media platform in the Philippines with almost 84M users, followed by 57.5M YouTube users, 36M TikTok users, 18.6M Instagram users, and about 11M users on each of LinkedIn, Snapchat, and Twitter (see table 1). According to We Are Social (2022), 100% of the audience "eligible" for Facebook advertising in the Philippines use Facebook. (The "eligible audience" for ads on

[1] "The World Factbook" https://www.cia.gov/the-world-factbook/countries/philippines/#people-and-society

[2] We Are Social. (2022). Digital 2022. https://wearesocial.com/uk/blog/2021/10/social-media-users-pass-the-4-5-billion-mark/

[3] Rappler IQ. (2018, Oct 26). Did you know that some PH cities have more Facebook users than actual population? https://www.rappler.com/newsbreak/iq/215159-list-philippines-cities-more-facebook-users-than-population/

Facebook are users aged 13 years and above.) Among social media platforms, TikTok appears to have the fastest growing userbase with 36M active users in 2022. TikTok is also significantly more popular among women, with 65.3% of TikTok's ad reach among women and only 34.7% among men.

Photo 3: People use their phones at the Samal Ferry Terminal, Philippines. Credit Frank Lloyd de la Cruz on Unsplash

3.2 SUB-NATIONAL FINDINGS

Internet and social media use varies greatly by region and island groups in the Philippines. Available data shown in Table 2 demonstrates higher internet and social media use in the National Capital Region (NCR). No comparable data are available for the total population of states in the Philippines and therefore we are unable to present the percent of Facebook users over the total population by state.

Table 3: Analysis of Facebook users versus total population by state

	NCR	Luzon	Visayas	Mindanao	National
Share of adult population with internet access (Statistica 2021)[4]	84%	65%	62%	47%	63%[5]
Facebook ad reach among users age 13 years and above in 2022 (Facebook Ad Manager)	15.2-17.9M	10.7-12.6M	6.3-7.4M	3.5-4.1M	85-100M

[4] Statistica. (2021). Share of adult population with access to the internet in the Philippines as of September, 2021. https://www.statista.com/statistics/1271380/philippines-internet-access-rate-by-region/

[5] This value of 64% internet use if from 2021 Statistica and is slightly lower than the reported internet use from 2022 We Are Social report.

3.3 AUDIENCE-SPECIFIC FINDINGS

Facebook's Ad Manager can target advertisements towards user profiles by gender, age, and interests related to the types of content they interact with on Facebook. For instance, ads can be targeted to men with interests related to the LGBT community. Targeting men with LGBT-adjacent interests broadens reach to include men who may not openly and who are more discreet due to stigma and discrimination. This approach can allow HIV programs to assess the number of social media profiles in their country, province, or city that match these interests related to key populations.

However, the available targeting options on Facebook's Ad Manager are limited. These estimates often exclude target audience members who do not use their Facebook profile to engage on those topics/interests or these estimates may also include users outside the intended target audience when using interest-based targeted that is too wide. While important sub-populations of KP often have specific interests on social media, these Philippines-specific interests are often not available on Facebook's Ad Manager and limit the ability to narrowly target ads to KP at risk for HIV.

Photo 4. Person holds LGBT pride flag in Marilkina Sports Center, Marikina City, Philippines. Credit Mary Y. on Unsplash

An example of such audiences on Facebook for men who have sex with men and female sex workers are provided in Table 3 below. While these sub-audiences on Facebook do not represent a size estimate of key populations in Philippines, they demonstrate a large audience on Facebook with related interests and may be useful to engage in HIV services.

Table 4: Ad reach to "key population" audiences on Facebook compared to national size estimates

	MSM	FSW	TG	PWID
Facebook audience reach within the Philippines (2022)	**779,600*** *Male, age 18+, who have expressed an interest in or like pages related to "gay love"	**694,600*** *Female, age 18-45, who have expressed an interest in or like pages related to "massage parlor"	**N/A** No relevant search terms available on Facebook	**N/A** No relevant search terms available on Facebook
UNAIDS population size estimation (dates vary)	**680,600** Projected based on 2015 numbers, UNAIDS	**227,400** Projected based on 2015 numbers, UNAIDS	**203,300** Projected based on 2015 numbers, UNAIDS	**10,800** National Statistic Office

4.0 Status of Virtual HIV Interventions

Virtual HIV interventions are commonly used in the Philippines, however implementation across health facilities and community partners is inconsistent.

To understand the status of virtual HIV interventions in the Philippines, a web search was conducted as well as distribution of a new survey among selected health facilities. The web search returned results of various social media groups/pages, websites, and apps used in the Philippines to support demand generation, service linkage, service delivery, and routine client engagement. The new facility survey asked staff working at selected facilities about the types of virtual approaches they use to support demand generation, service linkages, service delivery, and routine client engagement.

Findings of the web search and survey were categorized into the following domains:

- **Reach:** Virtual approaches to generate demand for health services and reach new audiences
- **Link and deliver:** Virtual approaches to support clients to find and access services available to them and provide health services to clients remotely (focused HIV testing and self-testing service linkage and delivery)
- **Engage:** Virtual approaches to follow-up and re-engage clients over time (focused on ART and PrEP care)
- **Improve:** Approaches to collect and use data to improve performance of virtual health interventions

Photo 5. Man drives jeepney in Cagayan de Oro, Philippines. Credit Rainier Ridao on Unsplash

4.1 REACH

Virtual approaches to generate demand for health services and reach new audiences are quite well developed in the Philippines. The results below include facility-based virtual demand generation interventions and other examples of virtual demand degeneration platforms in Philippines identified through a web search.

Key findings of facility-based survey of online demand creation approaches:

- **Maintaining a social media and online presence:** Around 80% of facilities have an official social media page and this is the main method of reaching audience online. Furthermore, some facilities employ simple ways to make their presence known to clients online, such as having their facility listed on Google Maps (40%) or having a dedicated website for the facility (31%).

- **Reach new audiences**: About 50% of facilities employ community outreach workers to support demand creation for services, however very few use more advanced methods of online marketing that are more effective at breaking into new and previously unreached audiences such as paid online/social media ads (9% of facilities) and social media influencer promotions[6] (28% of facilities).

- **Technology to facilitate outreach:** Chatbots are used to facilitate client engagement in 30% of facilities and online appointment booking platforms are used by 40% of facilities).

See full results of the facility-based survey in Table 5.

Photo 6. National Museum of Natural History, Manila, Philippines. Credit Eryka Rose Raton on Unsplash

[6] **Social Media influencer promotion/marketing** uses external content creators or influencers to advocate and engage with a certain campaign. An influencer is a popular social media user that can have several hundred to several million followers. They drive conversation and engagement around a particular topic, discussion, or niche area.

Examples of online demand creation platforms:

- **Awra Safely** is a sex-positive online HIV awareness campaign implemented by Pilipinas Shell Foundation, Inc focussing on HIV prevention, testing and treatment. Their Facebook page has over 11,000 followers and over 10,000 likes. The campaign promotes HIV services provided by public, private & nonprofit organizations. See more here.

- **HASH (HIV & AIDS Support House)** is a nonprofit that provides psychosocial support to MSM/TG who have been diagnosed with HIV. Their Twitter has over 11,000 followers and provides information on HIV prevention, screening, and treatment services. See more here.

- **HIVepicenter Philippines** is a Facebook page maintained by National HIV/AIDS & STI Surveillance and Strategic Information Unit. Their page has around 7,400 followers and shares HIV information to wider audience. See more here.

- **LHIVE Free:** A campaign launched in 2018 by the DOH and Integrative Competitive Intelligence Asia (ICI Asia). Using modern means to disseminate information about HIV and AIDS, as well as to promote safer sex, LHIVE FREE aims to make conversations among youth about HIV. The campaign included a call for advocates and influencers called LHIVE Free Redvocates. An associated Facebook page has over 4,700 followers and was last active in 2019. Learn more here.

- **LoveYourself Inc.** is the Facebook page of the CBO, LoveYourself, which targets youth and LGBTQ-MSM. The page has over 90,000 followers and has HIV awareness, education and counselling campaigns. They engage key populations through fun virtual events, activities, and interactions. The LoveYourself Facebook page includes a chatbot allowing clients to sign up for HIV self-test kits. See more here.

- **NSAP (Network to Stop AIDS-Philippines):** is Facebook page of the organization network- NSAP, which consists of NGOs and CBOs that engage in the national HIV and AIDS response. The page has over 1,600 followers. See more here.

- **Online Beshies:** An online intervention supported by the Global Fund and implemented by the Pilipinas Shell Foundation, Inc. that capacitated community HIV outreach workers to use virtual platforms to reach and engage clients through Facebook groups and dating applications like Grindr to support their uptake of HIV services. See more here.

- **Pinoy Plus Advocacy Pilipinas Inc** is a Facebook page of the organization, Pinoy Plus Advocacy Pilipinas, which focuses on PLHIV. Their page has over 2,600 followers and provides information on HIV treatment and support services for PLHIV. See more here.

- **PNAC (Philippines National Aids Council)** is the profile page of PNAC, a DoH agency created under Philippines HIV & AIDS Policy, to recommend policies on HIV/AIDS to the president. Their page has 5,100 followers. See more here.

- **SaferNow Philippines:** A social media campaign on safe sex and HIV prevention, focusing on PrEP implemented by LoveYourself, Inc. Their Facebook page has over 7,700 followers. See more here.

- **SHC (Social Hygiene Clinics)** have various Facebook pages offering HIV primary care services to newly diagnosed PLHIV in different cities in Philippines. Number of followers vary between 100-5,000 followers for each page. For instance, Manilla SHC hub's Facebook page has around 3,700 followers. See more here.

- **SHIP (Sustained Health Initiatives of Philippines)** is a Facebook page of the nonprofit, SHIPS, which offers quality, affordable HIV and primary care directly to the communities that need it most. Their page has over 3,100 followers and has 3,000 likes. See more here.

- **The Project Red Ribbon** is a private Facebook group of HIV advocates, supporters, and PLHIV community members. The group has around 3,000 members. See more here.

- **The Red Whistle** is a Facebook page of the CBO, The Red Whistle, which targets PLHIV and people of diverse sexual orientation and gender identity. Their page has over 28,000 followers and 26,000 likes. The page offers a collaborative platform for individuals to come together and to create new visuals and mediums used as awareness campaign materials. See more here.

- **TLF Share Collective** is a Facebook page of the organization *tlfshare,* which is working on sexual health, human rights, and empowerment of gay and bisexual men, other MSM, and transgender people. The page has over 5,800 followers and 5,200 likes. The page is supported by peer educators, trainers, and advocates, who are committed to the prevention of STIs, including HIV among Filipino MSM. See more here.

Photo 7. Railway station in Mandaluyong, Philippines. Credit: Gino on Unsplash.

4.2 LINK & DELIVER (FOCUSED ON HIV TESTING AND SELF-TESTING)

Virtual approaches to support clients to find and access services and deliver services to them are available in the Philippines, however not comprehensively. The results below include facility-based virtual linkage and delivery approaches and other examples identified through a web search. These results are primarily focused on virtual approaches to support access to HIV testing and HIV self-testing[7-8].

Key findings of facility-based survey of virtual linkage and delivery approaches:

- **Booking for HTS and delivering HIV self-test kits:** 55% of the facilities use online appointment booking platform for HIV testing (and a few for HIV self-testing). Expansion of the appointment booking model and adding facility pick-up or home-delivery options would be particularly valuable for increasing access to HIV self-testing among clients who prefer not to travel to facilities or wait in queues (only 8% of facilities offer home delivery of HIV self-test kits).

- **Virtual mechanisms to support HIV self-test kit administration and follow-up:** While a higher number of facilities offer virtual consultation options, such as by audio or video (61% of facilities) and online booking for these services (48%), this could be expanded to video support to clients to assist them to use and interpret results of HIV self-testing (only 7% of facilities). Virtual interventions to support HIV self-testing can be supplemented with virtual mechanisms to follow-up with clients who had accessed HIV self-testing to support linkage to confirmatory testing and ART (31% of facilities do this).

See full results of the facility-based survey in the annex, Table 6 and Table 7

Photo 8: El Nido, Palawn, Philippines. Credit: John Mayer on Unsplash

[7] No question was asked in the facility-based survey on approaches to home deliver other commodities such as ART, PrEP, condoms, and lube

[8] At the time of writing this report, HIV self-testing was not formally approved in the Philippines, and therefore only a small number of facilities in the Philippines offer HIV self-testing as part of demonstration pilots or research activities.

Examples of virtual service linkage and delivery platforms

- **Acuity Scheduling (SHIP):** SHIP foundation, which operates SHIP clinics, uses Acuity appointment-scheduling assistant to manage their appointments for HIV services such as HIV screening, PrEP, ART and other HIV care services. See more here. They also use Facebook scheduling, see more here.

- **Doctor Anywhere (DA):** DA is a health-tech startup in SE-Asia for making healthcare simple, accessible, and efficient for all. This app allows users to see a licensed doctor online anytime and anywhere. It also delivers medication in three hours within Meto Manilla region. See more here.

- **Love On wheels:** Love on wheels project launched by WHO, Project Red Ribbon, and UNAIDS to home deliver HIV services and care using e-bikes. See more here.

- **LoveYourself Inc.** has a Facebook page which includes a chatbot allowing clients to sign up for HIV self-test kits. See more here.

- **Community Based Monitoring and Reporting (CBMR) App:** This application is an online-based data management system of Human Rights violations. The app was used by PLHIV Response Center and the Community Access to Redress and Empowerment (CARE) center to collect and analyze the HR violations data for timely provision of appropriate services for the affected clients. A pilot version of this app was developed & launched under Global Fund's Accelerating Community Engagement & Response (ACER) on HIV and AIDS prevention project. See more here.

- **QuickRes (FHI 360):** The EpiC Philippines project (implemented by FHI 360) uses the QuickRes webapp to support online appointment booking for HIV services such as HIV testing, HIV self-testing, PrEP, ART. QuickRes is a global deployment of the Online Reservation and Case Management App that can be scaled to include additional facilities and partners in the Philippines. See more here.

- **Safe Spaces:** A condom distribution network operated by LoveYourself with Facebook page with over 2,500 followers, which shows available pick-up locations for condoms and lubricant in community distribution points and depots. See more here.

- **Self Care:** A program launched by LoveYourself in partnership with PSFI) has a Facebook page with almost 9,000 followers and offers virtual assistance via Messenger to guide clients towards accessing a kit, delivery options, how to use the kits, reporting the result and linkage to follow-up services (e.g., PrEP, or confirmatory testing, and ART) . See more here.

4.3 ENGAGE (FOCUSED ON ART AND PREP CARE)

Virtual approaches to follow-up and re-engage clients over time are employed in the Philippines, however not comprehensively and some specific simple approaches are lacking. The results below include facility-based virtual engagement approaches and other examples identified through a web search. These results are primarily focused on virtual approaches to support engagement of clients on ART or PrEP, including virtual case management[9].

Key findings of facility-based survey of virtual engagement approaches:

- **Virtual case management for ART and PrEP users:** Although 69% facilities use virtual case management approaches, very few facilities' case managers (27%) use electronic client management platforms to track their ART and PrEP clients which would assist them to organize their cohort, track their engagement in services, and triage their cohort by those clients requiring immediate or more intensive support[10].

- **Automated client notifications:** While 61% facilities have online appointment booking for ART and PrEP refills and 48% of facilities use online booking platforms for VL testing/STI testing, few facilities leverage automated notifications. For instance, 39% of facilities send clients virtual notifications when their viral load results are ready and 5% of facilities use virtual notifications like SMS to keep clients engaged in their ART or PrEP care.

See full results of the facility-based survey in the annex, Table 8

Examples of virtual engagement platforms:

- **Connect For Life** is an initiative by SHIP to improve treatment adherence among PLHIV and at-risk populations. The platform has features such as appointment reminders/SMS notifications, pill reminders, symptom reporting and health tips. See more here .

- **PLHIV support groups on social media:** The Positive Action Foundation Philippines Incorporated (PAFPI) Facebook page has around 4,000 followers. They organize online HIV counselling sessions for PLHIV. See more here.

- **PLHIV Response Center (PRC):** is an initiative led by Pinoy Plus (supported by the Global Fund) that serves as a coordinating mechanism to link PLHIV to HIV Service Providers, support groups, and responds to various needs of PLHIV. Their Facebook page has over 12,600 followers. See more here.

- **QuickRes:** a webapp used by the EpiC Philippines project, which include virtual case management functions that are not currently used. See more here.

[9] Virtual case management is like traditional HIV case management, except that it leverages virtual channels to engage clients in care (such as voice calling, video calling, SMS, and messenger chats) and leverages the efficiencies of digital self-care and electronic case management systems.

[10] Most facilities implementing virtual case management approaches do not leverage a special software, and notification and coordination with clients rely heavily on the case management team and their existing paper or electronic service delivery records and case managers reach out to clients on phone or WhatsApp.

4.4 IMPROVE

Virtual approaches to monitor and improve virtual HIV interventions are inconsistently employed in the Philippines. The results below include facility-based virtual approaches, however no specific examples were identified through web search.

Key findings of facility-based survey of approaches to monitor and improve virtual HIV interventions:

- **Online booking for HIV services:** Online booking platforms can be used to monitor the results of online marketing approaches and other forms of virtual client support. Online booking is a well employed approach among sampled facilities in the Philippines however these existing platforms should be explored further. For instance, 61% of facilities offer online booking for ART or PrEP refills, 55% of facilities use online booking for HIV testing, and 41% of facilities use online booking for general clinic services.

- **Virtual client feedback on HIV services:** Only 27% of the facilities collect client feedback and complaints on service assess using an online or electronic survey. No additional information is known about the efficiency of these existing client feedback systems for collecting high volume and quality feedback from clients and the efficiency of using results to improve service quality and resolve complaints.

See full results of the facility-based survey in the annex, Table 5, Table 6, Table 7, and Table 8

Additional survey analysis by region and facility type are included in the annex, see Table 9, Table 10, and Table 11

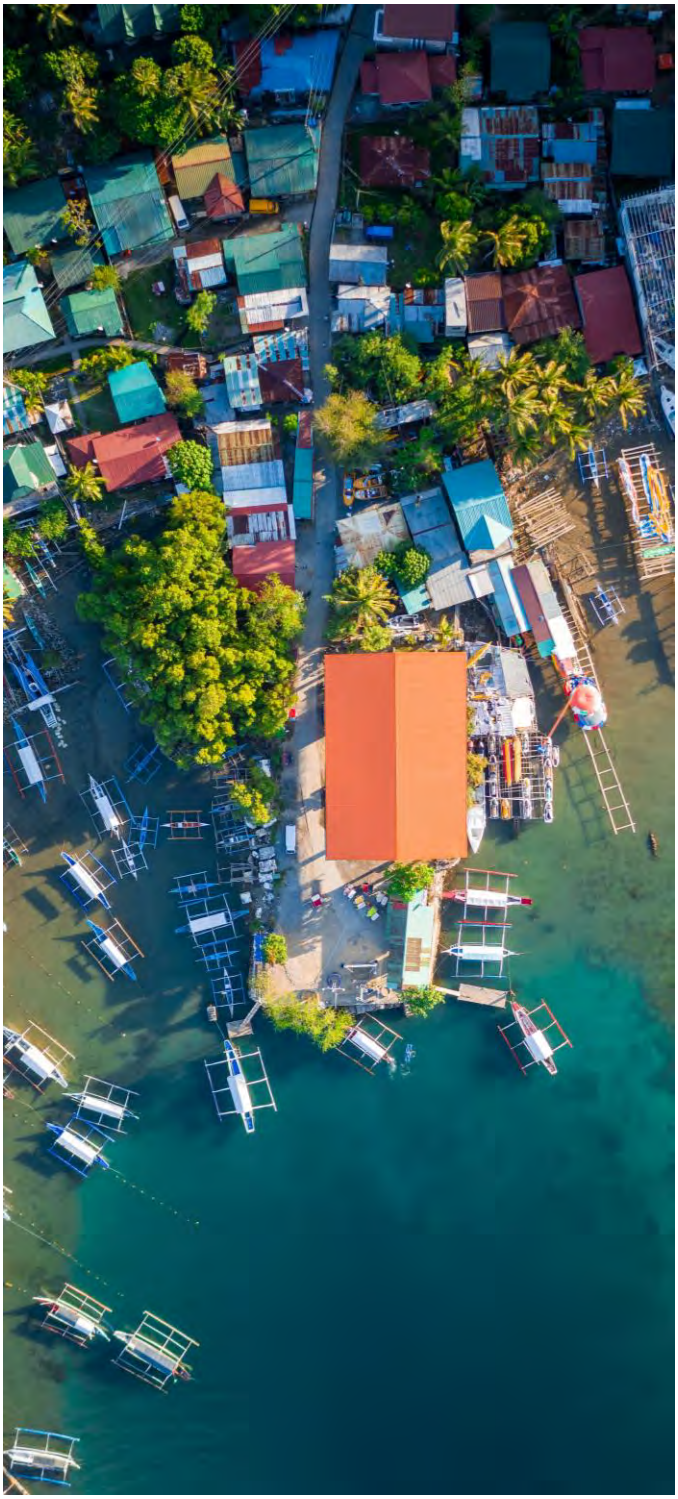

Photo 9. Puerto Galera, Mindoro Oriental, Philippines. Credit Jules Bss on Unsplash

5.0 Key Recommendations

In the Philippines, virtual HIV interventions can address critical bottlenecks in HIV programs, including mitigating the impact of COVID-19 on traditional in-person outreach and facility-based service delivery. Virtual, decentralized, and differentiated approaches allow clients to connect to and access services by phone, at home, and in community locations. Based on information above and our analysis of in-facility survey results we recommend scaling virtual HIV interventions to a broader range of facilities given high mobile and internet usage in the Philippines that allow these interventions to reach and engage target audiences. The following recommendations are based on data collected on the facility-based survey and through web search, however, do not offer a plan on how to operationalize recommendations (which will be provided in a forthcoming roadmap). These recommendations should be adapted for implementation by stakeholders involved in the HIV response in the Philippines, including the Department of Health, PSFI, and other local implementing partners. While the Philippines DSD-SI project has scope to support the adaptation of these recommendations in a forthcoming roadmap activity, and provide light capacity development to local partners on these approaches, technical assistance for implementation of the approaches are not currently part of the scope of the DSD-SI project.

5.1 VIRTUAL HIV INTERVENTIONS TO SCALE:

- **Scale existing appointment booking systems** to additional facilities where none are currently used and train facility staff on their use (such as by scaling use of QuickRes at additional sites). In an open-ended question asking facility staff of the most important virtual HIV intervention to implement in the future, the most common approach mentioned was use of an appointment booking system (15% of facilities). (See Table 12)

- **Create and maintain minimum standards for the online presence of HIV service facilities** in the Philippines, such as inclusion of facilities on Google Maps and a Facebook page that allow target audiences to find available nearby HIV services sites and contact them for more information. In an open-ended question asking facility staff of the most important virtual HIV intervention to implement in the future, the second most common approach mentioned was use of a website and social media page (14% of facilities). (See Table 12)

- **Scale the use of virtual consultations** that will limit client flow at facilities and allow some clients to receive consultation-based services remotely and not require them to physically attend the facility. This should be accompanied by standards for how facilities should offer and facilitate virtual consultations and manage these virtual services at the same time as in-person services. In an open-ended question asking facility staff of the most important virtual HIV intervention to implement in the future, the third most common approach mentioned was use of virtual consultations (11% of facilities). (See Table 12).

- **Increase investments in online marketing and outreach** through training existing facility staff with approaches to manage their facility's social media presence and support clients reached online. Additional support to CSOs should strengthen their online outreach to reach new target audiences, including by implementing and using social media mapping that will allow them to tap into hidden online networks of key populations and support their linkage to nearby HIV service facilities.

5.2 VIRTUAL HIV INTERVENTIONS TO EXPLORE:

Photo 10. Maligcong, Btonc, Mountain Province, Philippines. Credit: Michael Rivera on Unsplash

- **Review existing social media campaign content** across facilities and partners to consider the need for revamped content that better connects with target audiences' beliefs, attitudes, and motivations and to coordinate messaging and content and address common misconceptions[11].

- **Review existing facility appointment booking systems to identify gaps** that will better engage clients in care, such as to support follow-up care, collection and use of client feedback, automated SMS reminders to clients (such as by using QuickRes). This may also include an audit on the availability of any online directories of clinic information to ensure the accuracy and completeness of these directories and to ensure they are easy to find online.

- **Review the availability and use of updated data security protocols** for facilities and staff implementing virtual client support and use of electronic data collection tools. This was mentioned as a concern among some EpiC Philippines program staff and in a recent publication[12].

- **Collect additional data on the HIV services sought by online target audiences (including those previously unreached)** and consider offering these desired services on online appointment booking sites used by HIV service facilities (this may include HIV self-testing, and refills of ART and PrEP).

- **Review existing guidelines on HIV testing and treatment** to identify gaps and how they can be strengthened to describe how facilities and providers can offer DSD HIV services that meet the preferences of online target audiences (such as HIV self-testing) and delivery of health consultations and support virtually (such as for virtual case management).

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[11] de Lind van Wijngaarden, J. W., Ching, A. D., Settle, E., van Griensven, F., Cruz, R. C., & Newman, P. A. (2018). "I am not promiscuous enough!": Exploring the low uptake of HIV testing by gay men and other men who have sex with men in Metro Manila, Philippines. PloS one, 13(7), e0200256. https://doi.org/10.1371/journal.pone.0200256

[12] Quilantang, M., Bermudez, A., & Operario, D. (2020). Reimagining the Future of HIV Service Implementation in the Philippines Based on Lessons from COVID-19. AIDS and behavior, 24(11), 3003–3005. https://doi.org/10.1007/s10461-020-02934-x

Annex

1. FACILITY SURVEY RESULTS FOR VIRTUAL INTERVENTIONS

Note on survey methods: Facility-level information on DSD approaches and primary care services currently being implemented were obtained through an online survey using Microsoft Forms. All 179 facilities offering both HIV testing and treatment services were targeted for the survey and 62 participated. Facility coordinators were invited to a virtual meeting and were given an orientation on DSD before answering the online survey during the meeting. This approach was decided upon after consultation with selected stakeholders who suggested that respondents may need a prior orientation before answering the questionnaire.

Table 5: Percent of facilities using virtual approaches for outreach and marketing

#	Virtual approaches	% of facilities
1	Facility/site has an official page on social media (like Facebook, Twitter, etc.)	79%
2	Facility has community outreach workers to reach new audiences online through individual chats (on social media or dating apps)	47%
3	Facility/site has an online appointment booking platform for clients to use	43%
4	Facility/site listed on Google Maps	40%
5	Facility/site has a website	31%
6	Facility uses automated Chatbots to respond to client questions/concerns on Viber/WhatsApp/Telegram/other messaging app	30%
7	Facility uses social media influencers post on social media to promote clinic services	28%
8	Facility/site pays for online or social media ads	9%
9	None of the above	11%
10	Facility/uses any 'other' approaches	0%

Table 6: Percent of facilities using virtual approaches to support your HIV testing efforts

#	Virtual approaches	% of facilities
1	Facility uses online appointment booking platforms for HIV testing or HIV self-testing	55%
2	Facility uses follow-up calls with clients after they access an HIV self-test, to support linkage to confirmation testing	31%
3	Facility uses automated Chatbots to respond to client questions/concerns on Viber/WhatsApp/Telegram/other messaging app	30%
4	Facility sends online or virtual notifications to clients when their HIV test results are ready (such as when sending blood sample to lab for testing)	28%
5	Facility has online portal for clients to refer other people for HIV testing (such as for contact tracing, partner notification, or normal client referrals)	19%
6	Facilities deliver HIV self-test kits at clients' home	8%
7	Facility has virtual channel to assist clients to administer the HIV self-test and understand the result (video or audio call)	7%
8	Facility uses 'other' approaches	3%
9	None	31%

Table 7: Percent of facilities using virtual approaches to facilitate the providers support to clients

#	Virtual approaches	% of facilities
1	Facility provides virtual consultations between provider and patient (audio or video)	61%
2	Facility uses a virtual method for provider to prescribe/order medications for clients	56%
3	Facility provides online appointment booking for virtual consultations with the providers	48%
4	Facility does virtual screening, review of symptoms, and diagnosis between provider and patient (video)	39%
5	Facility uses 'other' methods	7%
6	None	21%

Table 8: Percent of facilities using virtual approaches to keep clients engaged and provide follow-up care

#	Virtual approaches:	% of facilities
1	Case managers or peer navigators use virtual channels to keep in touch with clients in long term care such as clients on ART or PrEP (virtual case management)	69%
2	Facility has online appointment booking for ART or PrEP refills	61%
3	Facility has online appointment booking for diagnostic services for clients on ART or PrEP (such as viral load testing or HIV/STI testing)	48%
4	Facility sends online or virtual notification to clients when their viral load test results are ready (such as when sending blood sample to lab for testing)	39%
5	Facility holds PLHIV support group meetings virtually	36%
6	Case mangers or peer navigators use an electronic client management software to keep track of the clients within their ART or PrEP cohort.	27%
7	Facility collects client feedback and complaints on service access using online or electronic survey tool	27%
8	Facility sends automated virtual notifications to clients in ART or PrEP care	5%
9	Facility uses 'other' methods	5%
10	None	11%

Table 9: Key facility best practices and gaps for using of virtual approaches by region (excludes regions with fewer than 5 facility respondents)

	Best Practices	Gaps
NCR Region	• All facilities provide home delivery via courier service for ART Refills. • 89% of facilities' case managers use virtual channels to keep track of and engage clients. • 78% facilities have a social media page.	• 33% facilities have online appointment booking platform for HIV testing & self-testing • 50% facilities use any virtual approach for HIV testing efforts. • 67% facilities think that they need virtual HIV interventions such as online appointment booking for HIV testing/ART Refill, sending automated client notifications etc.
Central Luzon	• All facilities are listed on social media or on google maps. • 90% facilities use some kind of online platforms to keep client engaged and provide follow-up care.	• All facilities think that there's a need of online//virtual counselling services, telehealth & tele-consult services.

	• 75% facilities use online booking management platform for HIV testing efforts.	
Central Visayas	• 75% facilities use online marketing and outreach approaches such as using their social media page or are listed on google maps. • 75% facilities deliver ART refills at home using courier service. • 63% facilities use virtual channels to keep ART/PrEP client engaged.	• 50% facilities have an online appointment booking platform for HIV testing/self-testing, and for providing support to clients. • 75% facilities think that there's a need of virtual HIV interventions such as online booking for ART, online outreach, and marketing etc.
Western Visayas	• All facilities use online outreach or marketing approaches, such as a social media page or listing on google maps. • All facilities offer home delivery of ART refills via courier service. • All facilities use virtual approaches to keep clients engaged. • 67% facilities use online appointment booking platform for HIV testing/self-testing efforts. • 67% facilities use virtual approaches to facilitate provider's support to patients.	• 84% facilities think that they need virtual HIV interventions such as telehealth consultation, telemedicine, online appointment booking platforms etc.
Calabarzon	• All facilities use online outreach or marketing approaches such as official social media page or are listed on google maps. • 90% facilities use virtual approaches to keep clients engaged. • 73% facilities use virtual approaches to support HIV testing/self-testing efforts & to facilitate provider support	• 73% facilities think that there's a need of virtual HIV interventions such as online appointment scheduling for HIV testing & ART Refills, follow-up with clients, tele consult etc.

Table 10: Key facility strengths and weaknesses of using of virtual approaches by type of facility (includes all facility respondents)

	Best Practices	Gaps
TREATMENT HUB (OUTPATIENT & INPATIENT CARE)	• 85% facilities use online outreach and marketing approaches. • 87% facilities use virtual approaches to keep clients engaged and provide follow up care.	• 68% facilities use virtual approaches to support HIV testing efforts. • 77% facilities use online booking to facilitate provider's support to patients.
PRIMARY HIV CARE CLINIC (OUTPATIENT HIV CARE)	• All facilities use online outreach and marking approaches.	• All facilities think that there's a need of online//virtual counselling services, telehealth & tele-consult services.

Table 11: Coverage of key facility-based virtual HIV interventions by region and by facility type

	Online Outreach & Marketing	Online Booking Platforms	Virtual Case Management	Online Client Feedback
NCR REGION	78%	33%	89%	53%
Central Luzon	100%	75%	58%	17%
Central Visayas	75%	50%	63%	13%
Western Visayas	100%	67%	100%	33%
Calabarzon	100%	55%	73%	27%
Treatment hub	85%	40%	60%	23%
Primary HIV care clinic	100%	59%	91%	36%

Table 12: What kind of virtual HIV interventions do you think will be most important for your facility/site to implement in the future? (Open-ended responses were coded and analyzed in the following categories)

	Response options:	% of facilities
1	Online/Virtual appointment	15%
2	Social media and online website	14%
3	Online consultations and counselling	11%
4	Online platform for ART refill	4%
5	Virtual seminars	4%
6	Online scheduling and virtual notifications	4%

Table 13: Characteristics of Surveyed facilities

Facility Type	
Treatment Hub	45 (73%)
Primary Care Clinic	17 (7%)
Ownership type	
Government	51 (82%)
Private*	11 (18%)
Region	
III- Central Luzon	13 (21%)
NCR- National Capital Region	12 (19%)
IV- Calabarzon	9 (15%)
VI- Western Visayas	5 (8%)
VII- Central Visayas	5 (8%)
I- Ilocos Region	4 (6%)
MIMAROPA	4 (6%)
XI- Davao Region	3 (5%)
V- Bicol Region	2 (3%)
X-Northern Mindanao	2 (3%)
CAR- Cordillera Administrative Region	1 (2%)
IX- Zamboanga Peninsula	1 (2%)
XIII- Caraga	1 (2%)