



ASLM South Sudan Program

PRESENTATION

3rd, march 2022

Campaign description

NEPWU conducted campaign on Viral load testing targeting people living with HIV across 7 (seven) facilities in Juba, South Sudan. Engagement meetings were conducted targeting Young people, pregnant and lactating mothers and Women living with HIV to understand the importance of testing their viral load.

Young people: 75% of south Sudanese are young people which means they provided the larger portions compared to the other groups. At the same time young people accounted for 84% of the total populations reached during the campaign. This has been common with Facebook and radio talk shows.

The campaign also prioritized young people because they are more at risk of having high viral load compared to the other populations. They continue to have problem of adherence to treatment due to high level of self-stigma and risky behaviours. Therefore, the campaign provided a snapshot on how to maintain a low viral load and benefit of it. Large numbers of young people shared their knowledge on viral load with our programme officer and the liaison officer during engagement meetings and the radio talk shows.



Engagement meeting conducted in Kator PHCC to educate men on importance of Viral testing. An estimation of 3284 young were reached through the campaign. This was especially through Radio talk show, Facebook and Engagement meetings

One of the example of key message passed to young people

Keeping your viral load low means long life

Women living with HIV (WLHIV) the other target groups are the women living with HIV. The women are mostly engaged through the engagement meetings. Women living with HIV reached accounted for 5% of the target populations reached. Due to stigma and discrimination, most women are afraid to come out and speak since they also fear breaking up with their partners.



This Picture is taken from Kator PHCC for a group of women living with HIV. During the meeting women were able to share their experiences and knowledge about Viral load.

Key messages such as:

Undetectable viral load means the HIV virus cannot be transmitted to HIV negative person

A total of 151 women living with HIV were reached during the campaign.

Mothers Living with HIV (MLHIV)

It is important that pregnant and lactating women are educated on how to maintain a low viral load and its benefits. Most mothers are not aware about their viral load which is too risky for their unborn babies and also babies who breastfed them. Through the campaign conducted, pregnant and lactating women learnt about the usefulness of keeping undetectable viral load to protect their babies from contracting HIV.

Only 3% of the population reached accounted for mothers living with HIV



The audience were engaged through three different ways:

1. Engagement meetings. Several meetings were conducted in 7 (seven) facilities within the capital Juba where pregnant and lactating women, young people and other women were reached with messages on viral load. The engagement meeting had been one of the successful method as clients were able to share their knowledge of viral load and continuously asked questions to facilitators to understand more about viral load



Around 356 people living with HIV are reached through engagement meeting out of which there are 151 women living with HIV, 113 young people and 92 pregnant and lactating women during the Engagement meetings key message such as What is viral load? Why do people come for viral load testing? Were discussed

2. Facebook posting. Several Facebook post were made during the campaign but due to low knowledge of using Facebook and WhatsApp by majority of the PLHIV led to fewer of them to access the messages. through Facebook we document 491 reactions this includes likes, comments and shares. Most of the reactions were noticed among young people



This is one of the picture posted on Facebook that drew the attention of several people to react to it. One of our health care worker demonstrating message on Viral load testing



Another Facebook post was about one of the PLHIV submitting her blood sample for viral load testing. This also drew the attention of many people to react.

3. Radio talk show. We also used radio to reach people living with HIV within Juba and other parts of the country though we encountered a lot of challenges through radio talk show, larger population were able to be reached with messages on Viral load. An estimated 2790 people received the message through Radio talk shows, the major challenge was that the network of the radio was not effectively supporting the conversation due to network breakdown.



NEPWU liaison officer and other two members from the MOH talk about Viral load in South Sudan Radio in Juba.

Campaign outcomes

- ❖ Most clients did not have knowledge on viral load but after attending the engagement meetings, they are knowledgeable of why they test, why they should adhere to treatment
- ❖ Some of the clients during the engagement were not aware about their HIV status, because they were put on treatment without their consent, during the meeting the client counseled knew about
- ❖ Clients with high viral load improved on adherence
- ❖ Clients with high viral load understood the meaning of viral load
- ❖ Clients with high viral load understood the important of routine viral load testing
- ❖ Clients discovered the reason why their viral load was high though they were on treatment for some time
- ❖ Clients understood the benefit of having suppressed viral load

What worked well

- The sessions were interactive, clients were asking a lot of questions
- The session was conducted in a language they understand better
- Clients were able to ask question on viral load and answers were provided to them
- NEPWU facilitators shared their experience about their viral during the engagement meetings, which encourage the clients to adhere to their treatment
- Clients with high viral load accepted to adhere to treatment after attending meeting hence

What are the lessons learnt?

- The session targeted few clients with high viral load and other were asking why they left out which was because of budgeted limited
- Most clients have low knowledge on viral which need routine meeting
- Most clients did not have enough information about viral load when they were initiated on treatment so the viral load awareness campaign should continue

Challenges	Action taken
Poor mobilization of members to attend engagement meetings due to lack of motivations	The liaison officer was instructed to begin mobilization at least week before to give the members enough time to prepare for the engagement meetings with full support from the facility staffs
Low knowledge of most people about Viral testing	Detailed explanation had been given with translations in to local language to allow members understand
Tight schedules with giant radio stations that contributed to access of low quality ratio station	We mostly continue having the radio talk with South Sudan Broadcasting services (SSBC) though with lots of challenges
Lack of motivation to staffs who are directly involved in the implementation (Program officer & M&E Officer)	All the staffs who participated in the implementation of this programme were supported by other projects
Low access to social media especially among the elderly	We accelerate the posting to multiple pages to allow more people to have access.
Expensive radio stations	The budget for radio talk show isn't enough to support programme in quality radios like the Eye radio that charge \$ 500 per hour.
High level of stigma and discrimination that led to poor attendance during engagement meetings	<p>Our field staffs continued to visits family of PLHIV for counselling and awareness with support from other projects to reduce high level of stigma among PLHIV.</p> <p>Recently we also conducted stigma index survey to stakeholders and opinion leaders to give them findings of the study on stigma that has seriously contributed to low level of HIV service intake in South Sudan.</p>
Low coverage of the programme where far states have not benefited from the programme	We used our field community volunteers to educate on high viral at state level were the programme is not reaching.
Unwillingness of other people to share their stories on viral load	We respect the life and ideas of every PLHIV, for anyone who wished not to give their testimonies, we don't forced them.