

# **Leveraging HIV Prevention Platforms to Integrate Hepatitis B and C Screening Among Key Populations in Zambia: Insights from the Latu Human Rights Foundation and the Center for Public Health Promotion**

## **Background**

Key populations (KPs) in sub-Saharan Africa are disproportionately affected by both HIV and viral hepatitis (HBV and HCV), yet public health programs often operate these services in silos. Recognizing this gap, the Latu Human Rights Foundation, in collaboration with the Center for Public Health Promotion, piloted an integrated service model delivering HBV/HCV screening through existing HIV prevention platforms targeting KPs, including female sex workers (FSWs), men who have sex with men (MSM), transgender people (TGs), and people who inject drugs (PWID).

## **Methods**

Between October 2023 and March 2025, HBV and HCV screening using rapid diagnostic tests was incorporated into routine service delivery for clients seeking HIV prevention at KP wellness centers in five Zambian districts. Screening was offered during PrEP eligibility assessments and initiation sessions. Data were collected on PrEP eligibility, PrEP initiation, HBV and HCV status, risk behavior, and referral outcomes. Descriptive analysis was conducted to determine uptake patterns and identify linkage-to-care gaps.

## **Results**

A total of 4,823 KP clients were screened, with 93% found PrEP-eligible and 81% initiating either oral or long-acting injectable PrEP. HBV positivity (HBsAg+) was detected in 6.2% (n=300) and HCV seropositivity (anti-HCV+) in 2.1% (n=101). Among clients testing positive for HBV/HCV, 72% were also on PrEP, primarily among those reporting group sex, transactional sex, and injection drug use. Referral to public facilities for confirmatory testing and further management was successful in 78% of HBV/HCV-positive cases. Providers reported high client acceptability and operational feasibility of the integrated model.

## **Conclusion**

HIV prevention platforms, especially those delivering PrEP, present an effective entry point for hepatitis screening and linkage to care for KPs. Integration improved screening coverage, reduced stigma, and leveraged existing infrastructure and client trust. This pilot provides a scalable model for holistic infectious disease prevention in resource-limited settings. Strengthening referral systems and ensuring access to hepatitis treatment will be critical next steps to sustain health outcomes.