# PROVISION OF LOCATION-BASED SEXUAL REPRODUCTIVE HEALTH AND RIGHT EMPOWERMENT AND OTHER SERVICES FOR ADOLESCENT GIRLS AND YOUNG WOMEN OF THE PWUD COMMUNITY IN LAGOS STATE

#### **Authors:**

Edem D,12 Awosika H,1 Onabanjo A,1

- <sup>1</sup> Mistletoes Community Health & Right Initiative, (MCHARI) Nigeria.
- <sup>2</sup> Drug Harm Reduction Advocacy Network (DHRAN).

#### **Background:**

In the Nigerian Women Who Use and Inject Drugs (WWUID) community, HIV prevalence is especially high. Inconsistent condom use, multiple sexual partners, alcohol/drug use before sex, frequently forced sex, and high levels of sexually transmitted infections are among the causes. Discrimination from public health staff not trained to handle WWUID patients is another factor. Unsafe abortions and post-sexual violence care are among the many dangers they face by their lack of sexual education and empowerment.

#### **Description of model of care:**

With the support of Heartland Alliance LTD/GTE (HALG) and the provision of the ViiV: Positive Action grant, MCHARI, a peer and female led, community-based organization, began bunk-based community interventions that incorporate SRHR messaging with location-based HIV testing, Harm Reduction, Gender-Based Violence Advocacy and other services. All program participants also received an SRH hygiene starter-pack to encourage sexual and reproductive health, including items like sanitary pads, Dettol, condoms, etc., as well as a safe injecting kit with new needles and other essentials. Transport stipends and refreshments were also added incentives to the participants.

### **Effectiveness:**

By bringing the medical treatment to them in the bunks, the peer to peer approach; training and testing staff that are community members and can deal with inherent difficulties, community members felt encouraged to take advantage of services offered. From the program's inception in October 2023 till February 2024, more than 400 WWUIDS were reached. Five new positive cases were discovered and 10 GBV cases reported. Participants also took advantage of the Family Planning methods and CCS on offer as well as Harm Reduction, MHPSS, and safe-space enrolment.

## **Conclusion and next steps:**

Community feedback of the program was positive with participants touting its positive impacts. If funding needs are met, our next steps include extending our Local Government Areas (LGAs) of implementation and introducing access to rehabilitation centers and Medication Assisted Treatment. Also, with the help of my drug harm reduction network, DHRAN, spread the strategies and tactics, utilized for nation-wide adoption.

## **Disclosure of Interest Statement:**

Author has nothing to disclose.