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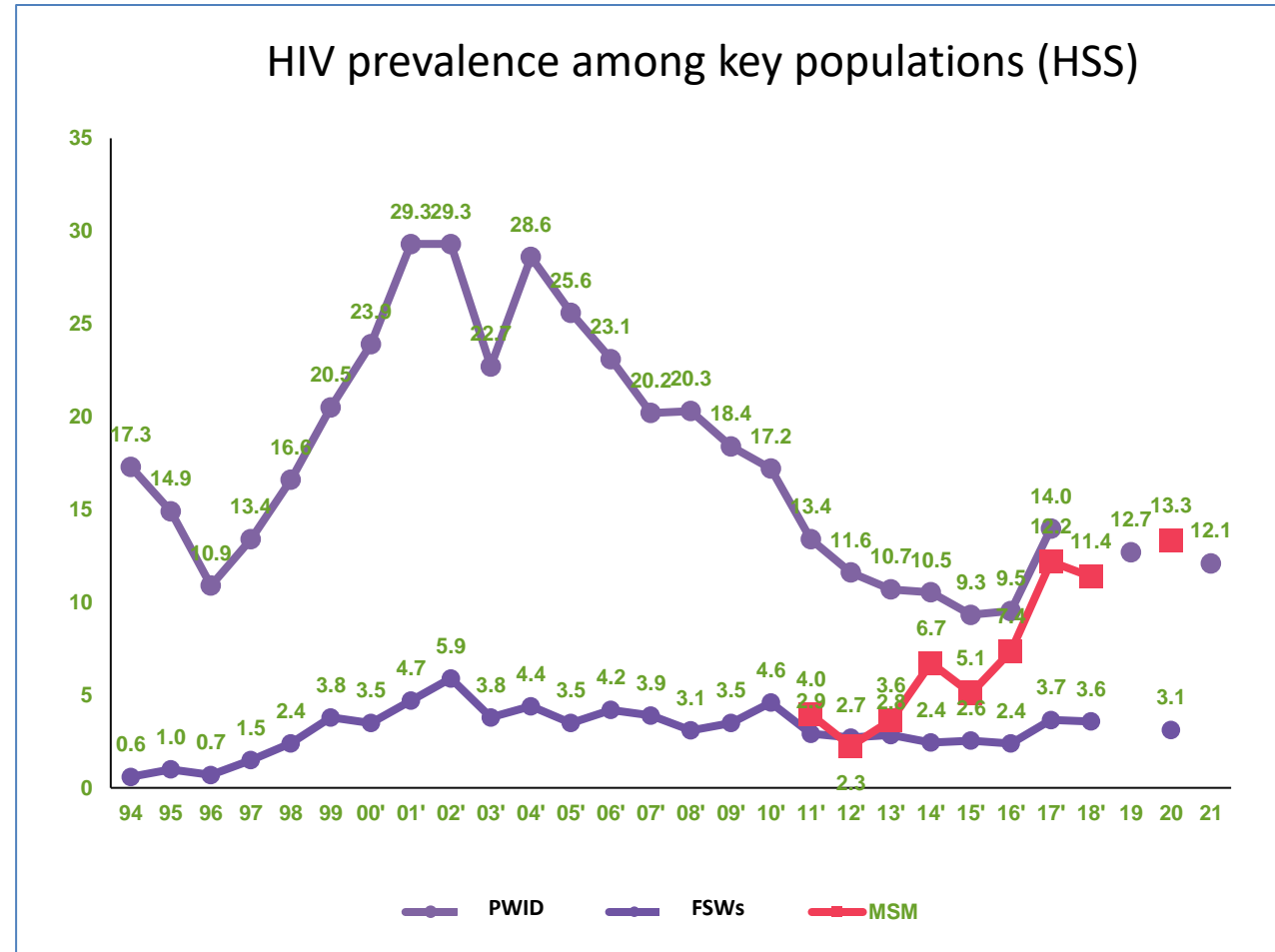
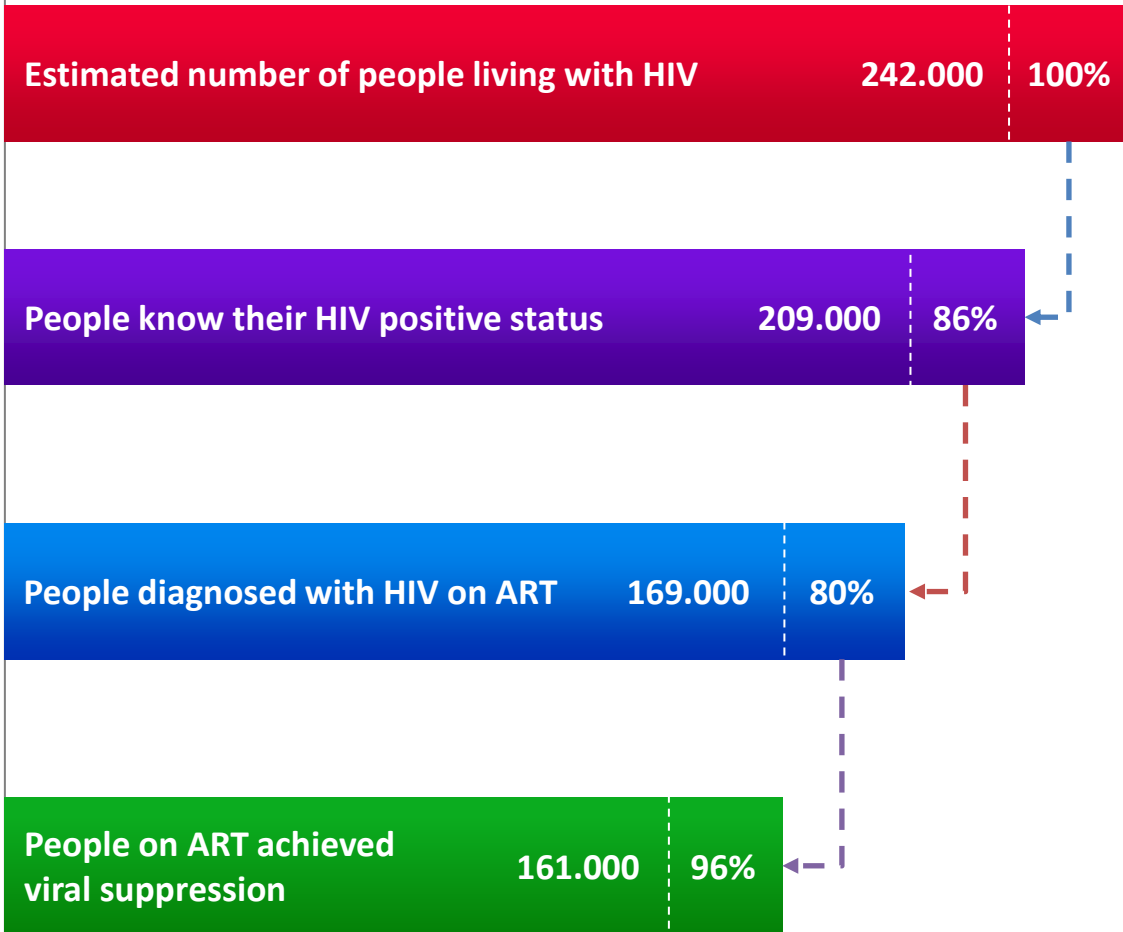
# Web-based HIV self-testing distribution and linkage: from pilot to nationwide scale-up

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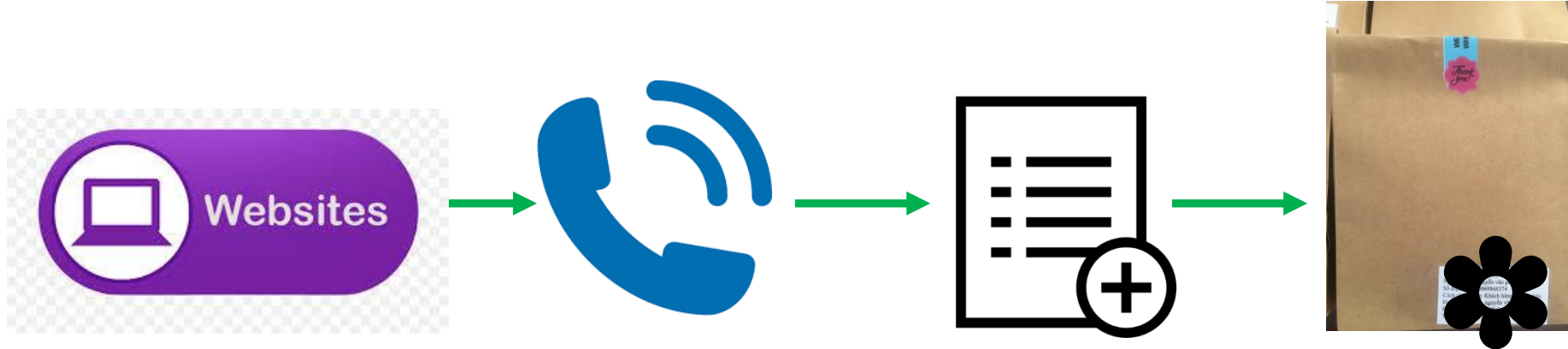
# Background



# Methods

- The pilot was started in Can Tho city in Nov 2020 and expanded to Nghe An and Hanoi in April 2021.
- Clients are encouraged to create a website account to request HIVST.
- Clients choose how test kits are delivered (courier/peer educator) or opt for self-pick-up.
- Reporting of self-test result is encouraged, but not required.
- Following distribution, staff or peers supported clients to access further testing, PrEP or ART.
- User demographic information and risk behaviors were collected at account registration and via voluntary client-satisfaction survey.
- Data were automatically stored and compiled in the web-system. Linkage was documented by staff and peers in the same system.

# Procedure for test kits delivery



Client sign-up for an account and request for test kits ± commodities

Check client information and counselling

Client confirmed

Packaging

Test kits and prevention commodities are free of charge

Delivery of test kit + prevention commodities

Courier  
VND 15.000  
(\$0.66)



PE delivery  
VND 15,000 (\$0.66)



HIVST  
Self-picked-up



# Procedure for post-test linkages

Follow-up clients, provide counselling



Support for linkages



Recording and reporting on services linkages



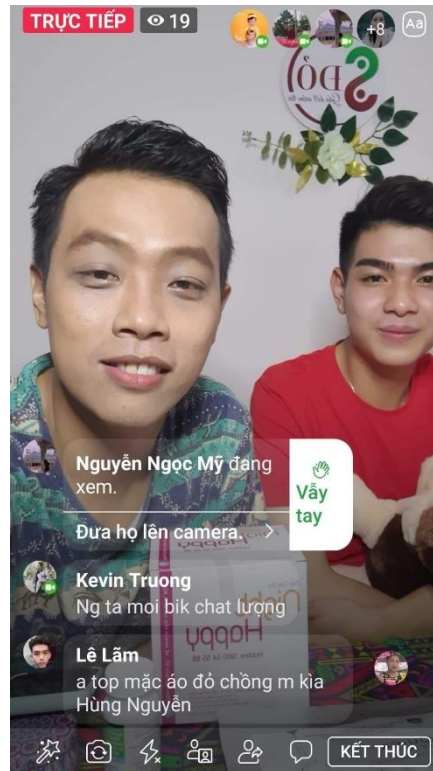
# Web-based HIVST distribution service promotion



Website launching event



Poster



Livestream by MSM



Group communication



# Client characteristics

| Client characteristics | Female |      | Male |      | Total |      |
|------------------------|--------|------|------|------|-------|------|
|                        | n      | %    | n    | %    | N     | %    |
| Sex at birth           | 443    | 9.9  | 4011 | 90.1 | 4454  |      |
| Age group              |        |      |      |      |       |      |
| 15-24                  | 208    | 47.0 | 1860 | 46.4 | 2068  | 46.4 |
| 25-34                  | 176    | 39.7 | 1806 | 45.0 | 1982  | 44.5 |
| >=35                   | 58     | 13.1 | 316  | 7.9  | 374   | 8.4  |
| not reported           | 1      | 0.2  | 29   | 0.7  | 30    | 0.7  |
| HIV testing before     |        |      |      |      |       |      |
| Never                  | 257    | 58.0 | 1850 | 46.1 | 2107  | 47.3 |
| 3 to 12 mon            | 143    | 32.3 | 1539 | 38.4 | 1682  | 37.8 |
| > 12 mon               | 41     | 9.3  | 609  | 15.2 | 650   | 14.6 |
| not reported           | 2      | 0.5  | 13   | 0.3  | 15    | 0.3  |

# Client characteristics

| Client characteristics | Female |      | Male |      | Total |      |
|------------------------|--------|------|------|------|-------|------|
|                        | n      | %    | n    | %    | N     | %    |
| Key population         | 438    |      | 4016 |      | 4454  |      |
| MSM*                   |        |      | 3430 | 85.4 | 3430  | 77.0 |
| FSW                    | 177    | 40.4 | 50   | 1.2  | 227   | 5.1  |
| PWID                   | 9      | 2.0  | 20   | 0.5  | 29    | 0.7  |
| Transgender            | 7      | 1.6  | 55   | 1.4  | 62    | 1.4  |
| ATS users*             | 16     | 3.7  | 32   | 0.8  | 48    | 1.1  |
| other                  | 229    | 52.3 | 429  | 10.7 | 658   | 14.8 |

\*MSM include 11 MSM who were also PWID

\*\*ATS users includes FSW (6), PWID (5);

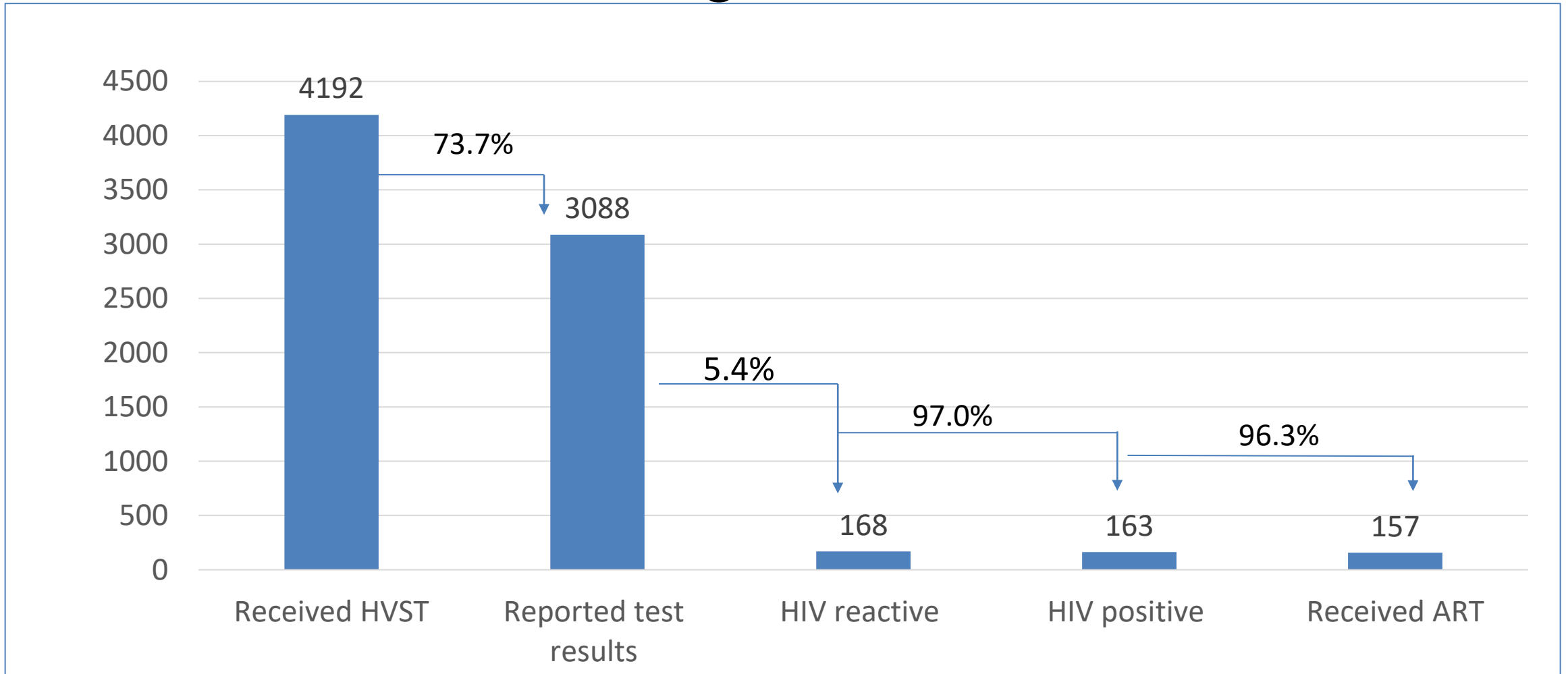


# Client characteristics

| HIV risk factors (past 12 months) | Female (443) |      | Male (4011) |      | Total (4454) |      |
|-----------------------------------|--------------|------|-------------|------|--------------|------|
|                                   | n            | %    | n           | %    | n            | %    |
| Having more than one sex partner  | 306          | 69.1 | 2759        | 68.8 | 3065         | 68.8 |
| Diagnosed or treated with STI     | 106          | 23.9 | 231         | 5.8  | 337          | 7.6  |
| Not or rarely used condom         | 111          | 25.1 | 521         | 13.0 | 632          | 14.2 |
| Having sex with PLHIV             | 85           | 19.2 | 368         | 9.2  | 453          | 10.2 |

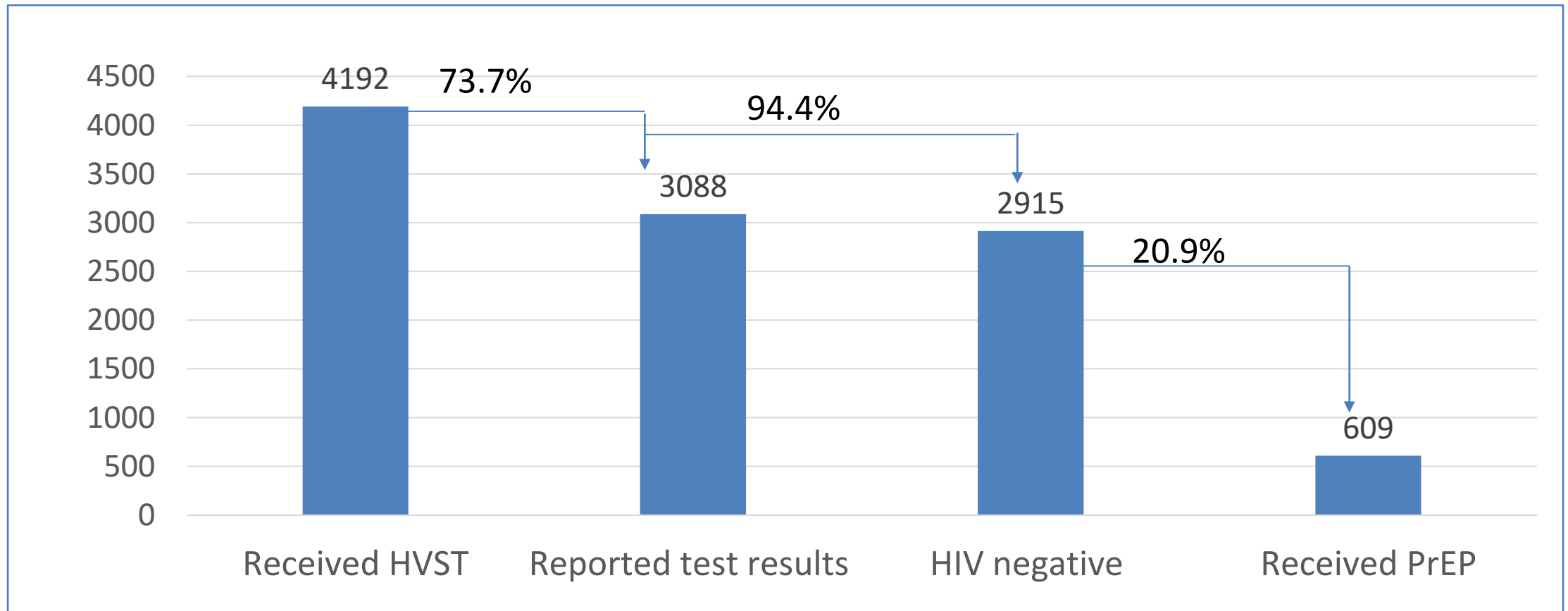
# Results

## HIVST distribution and linkage to ART



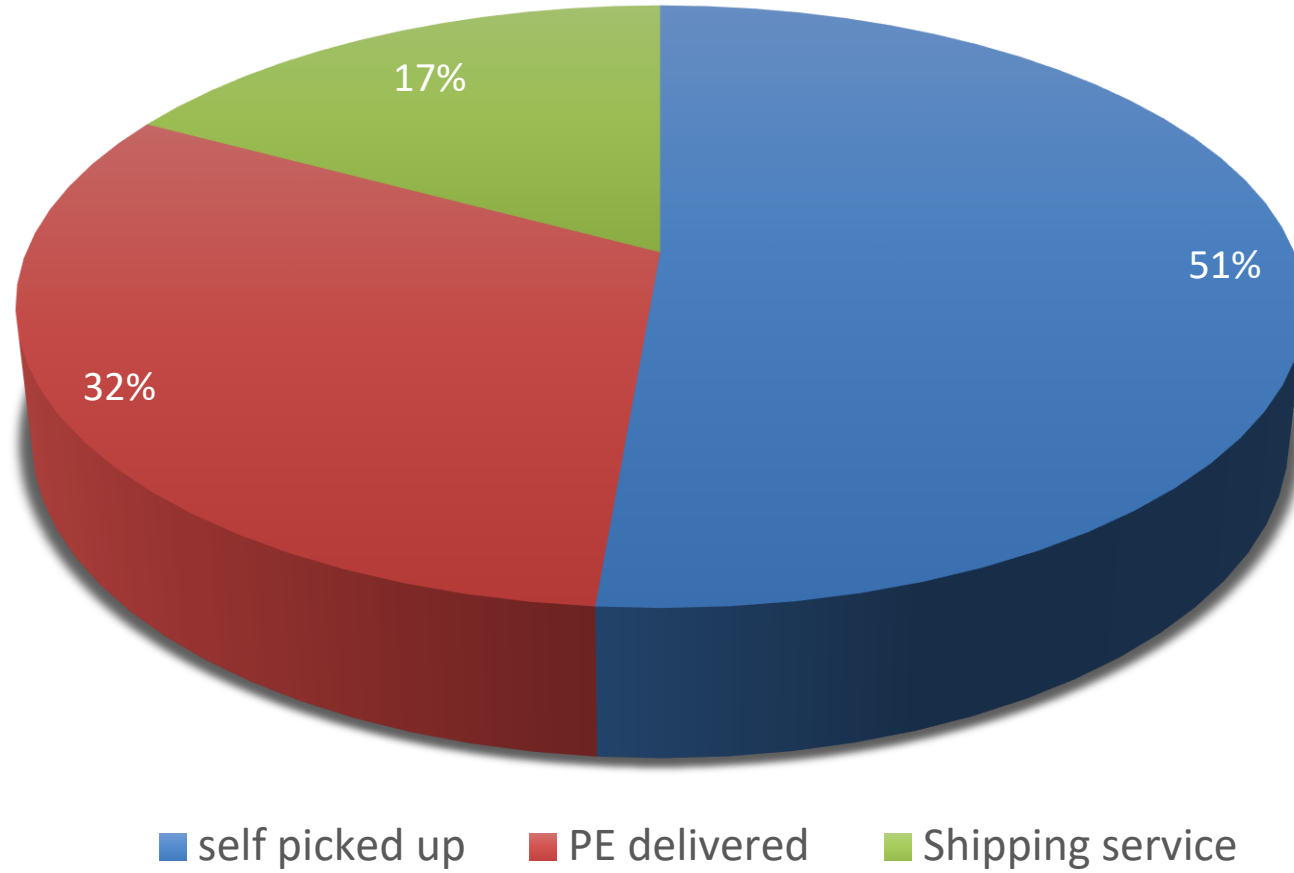
# Results (continued)

## HIVST distribution and linkage to PrEP



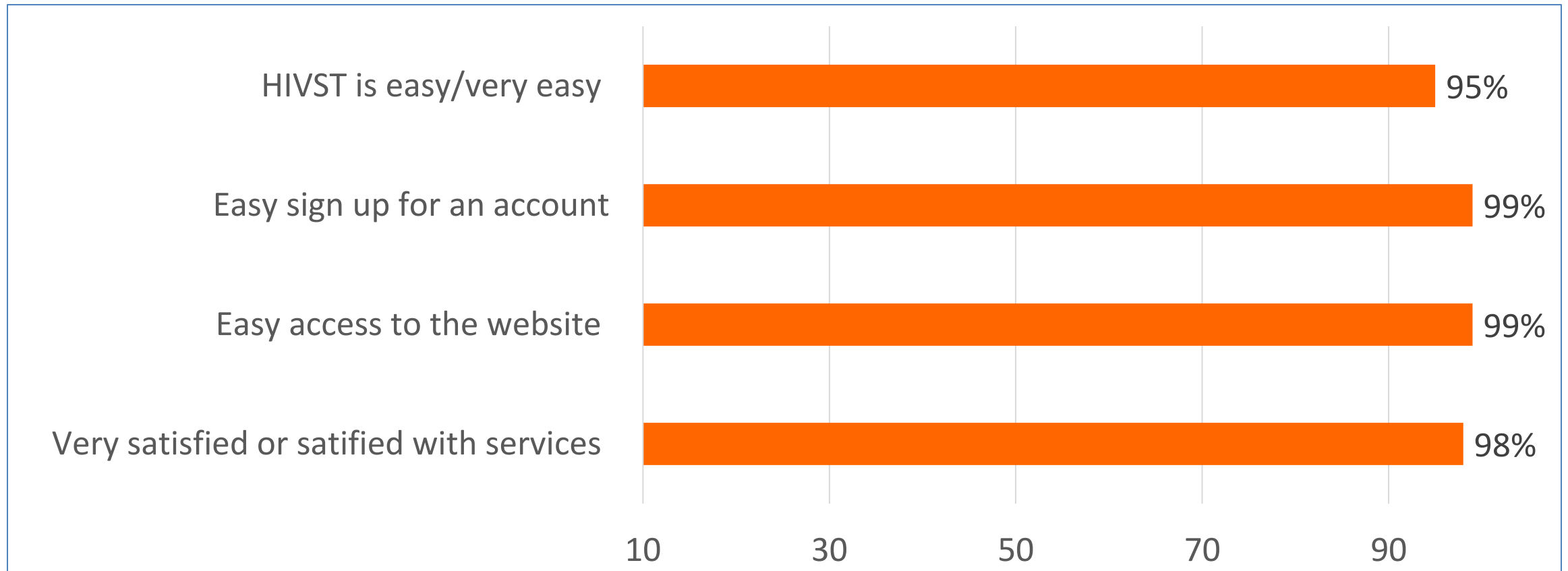
# Results (continued)

## HIVST distribution by delivery approach



# Results (continued)

## Client satisfaction survey



# Clients' feedbacks from satisfaction survey

THANK YOU!!!  
Excellent!  
Great counsellor!  
Friendly and enthusiastic  
peer educators!

This model should be expanded and informed more people to access HIVST so that people who avoid HIV testing could feel less anxious and more positive about HIVST. Thank you for creating this most favorable approach for HIV testing

Thank you for talking to me the whole evening and help me to overcome this difficult time

You should do better communication activities so that more people know and can access HIVST via this website such as leaflets, social media

Further simplify, less text and shorten survey

Great approach for HIV testing. Would like to have it widely expanded to LGBT communities

You should expand this to all provinces and should not focused in selected provinces

Great service!  
Convenience, easy, and confidential!  
I will introduce to my friends

Support for shipping cost

I am scared of going to health facilities to get HIV test. Luckily, I know this service. It is very convenient, very helpful. Thanks to the service. I am not afraid of HIV testing anymore. This service is also very quick, and counselor is very enthusiastic

I want to be a supporter for this programme

# Conclusion

- Web-based HIVST distribution is feasible and highly acceptable by key populations
- Reached young and unreached KPs
- Effective in case finding (positive rate 5.4%) and linkage to ART (100%) and PrEP (21%)
- High satisfaction rate among services users
- MOH planned to scale-up this innovation to more provinces in 2022.
- HCVST to be included in this web-based distribution later this year (and syphilis self test later once it become available)



# Acknowledgment

- Viet Nam Authority for HIV/AIDS Control, MOH
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