

HIV Testing & Human Rights: Right to Know & Right to Privacy

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90-90-90 Targets Workshop

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BRITISH COLUMBIA
CENTRE *for* EXCELLENCE
in HIV/AIDS



GLOBAL NETWORK OF
PEOPLE LIVING WITH HIV



Human Rights & Testing

- ✓ Right to health
- ✓ Right to privacy
- ✓ Effective public health



Jonathan Mann

Respect for human rights & public health are inextricably linked, not in opposition.

✓ Right to health

- “Highest attainable standard of health”
Intl. Convention on Economic, Social, Cultural Rights
- Right to be progressively realized within available resources—with elements that are of immediate effect
- In context of HIV, access to treatment has been interpreted by HR Council & UNHCR to be an immediately effective duty of states.

Just over half of countries in the world protect the right to health as a judicially enforceable individual right.

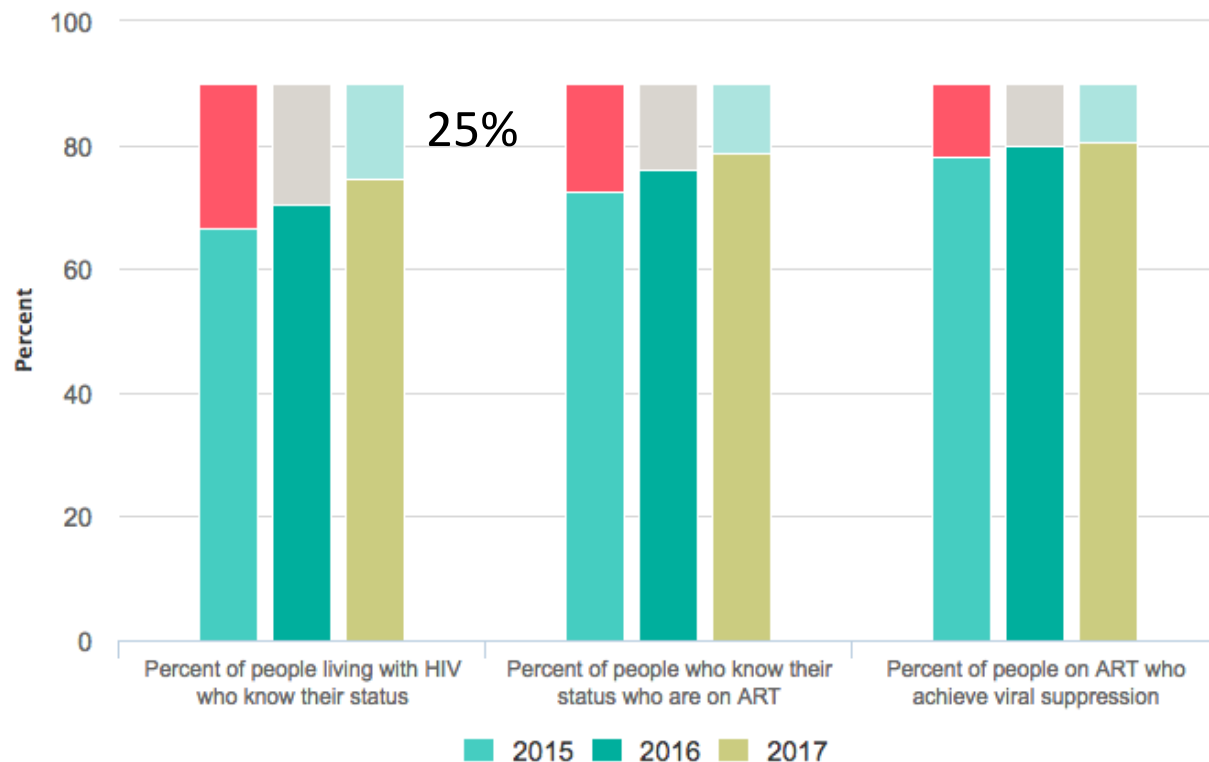
- South Africa: *Minister of Health v. Treatment Action Campaign*
- India: *Sahara House v. Union of India*
- Brazil: Rights to generics



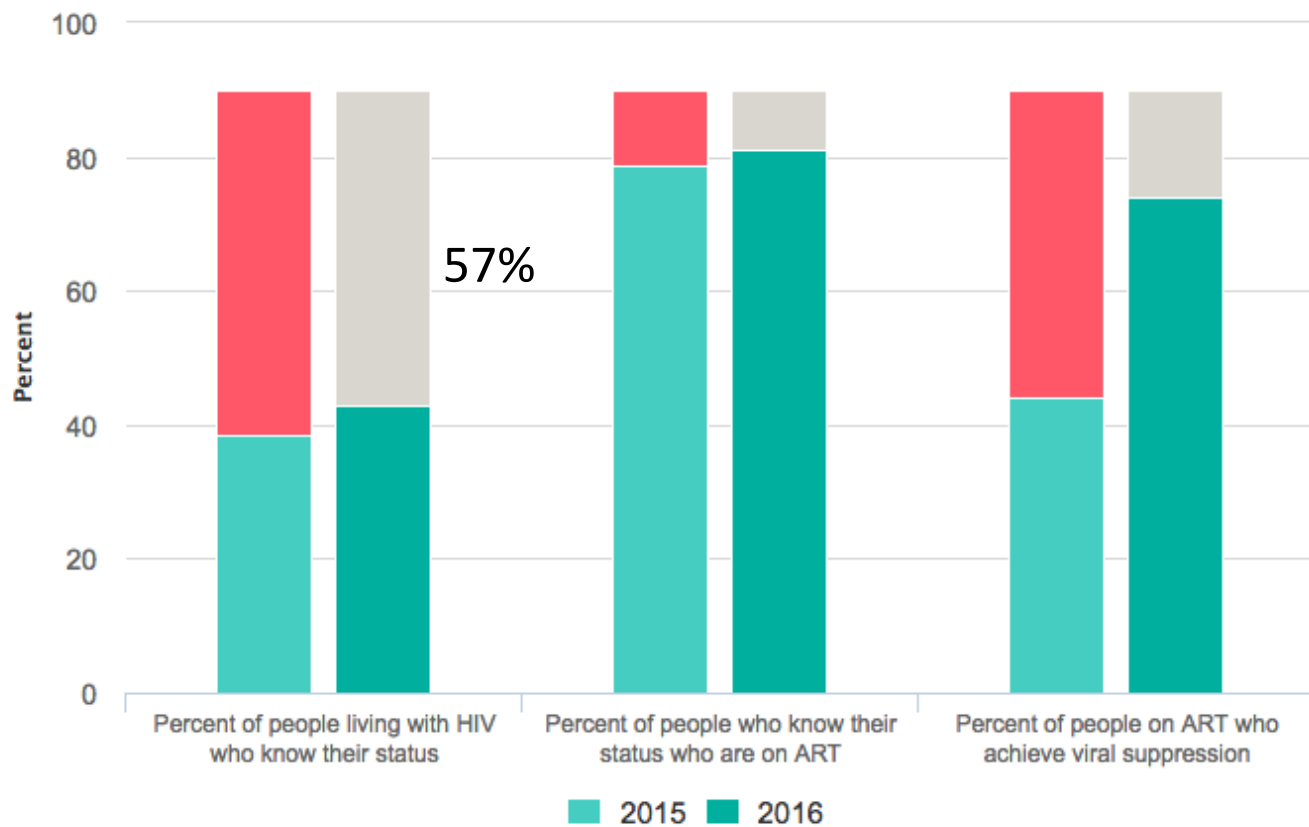
Right to Know is Right to Treatment

- Testing as entry point to treatment
- Can't realize without it

Progress towards 90-90-90 target



Source: UNAIDS special analysis, 2018



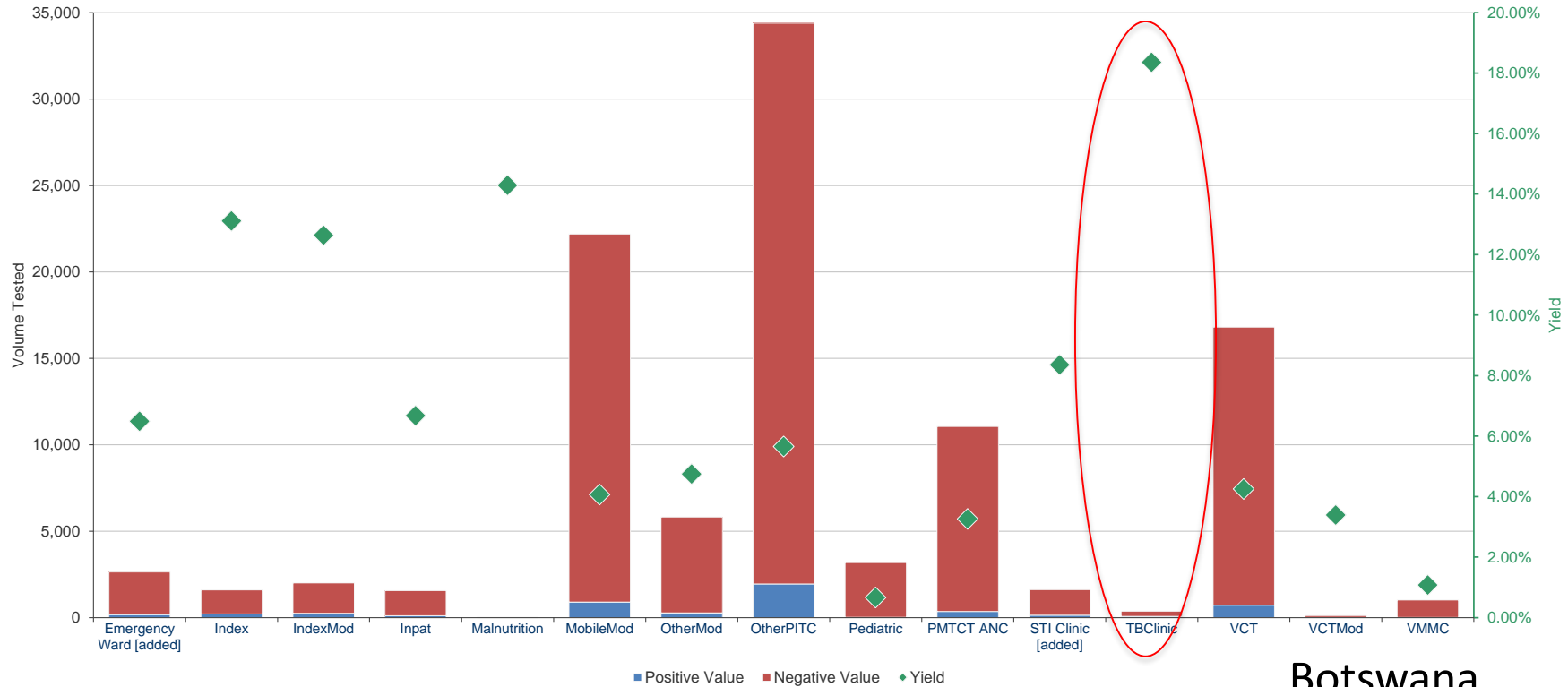
UNAIDS special analysis, 2017

West & Central Africa

What does RtH mean for testing?

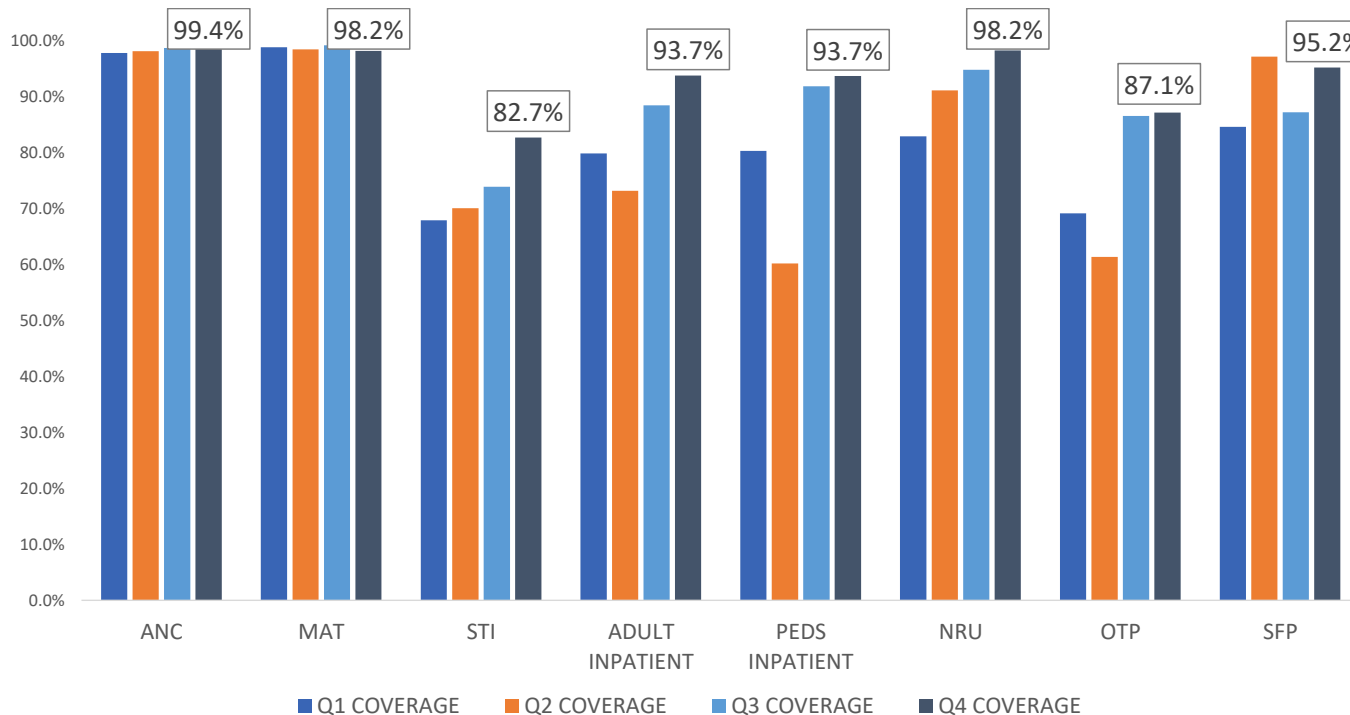
- **Availability:** sufficient quantity of functioning public health and health care facilities, goods and services, as well as programs for all.
- **Accessibility:** accessible to everyone: non-discrimination, physical accessibility, economic accessibility, information accessibility.
- **Acceptability:** cater for the specific needs of diverse population groups and in accordance with international standards of medical ethics.
- **Quality:** scientifically and medically sound; safe, effective.

Different modalities have different yield & volume



Botswana

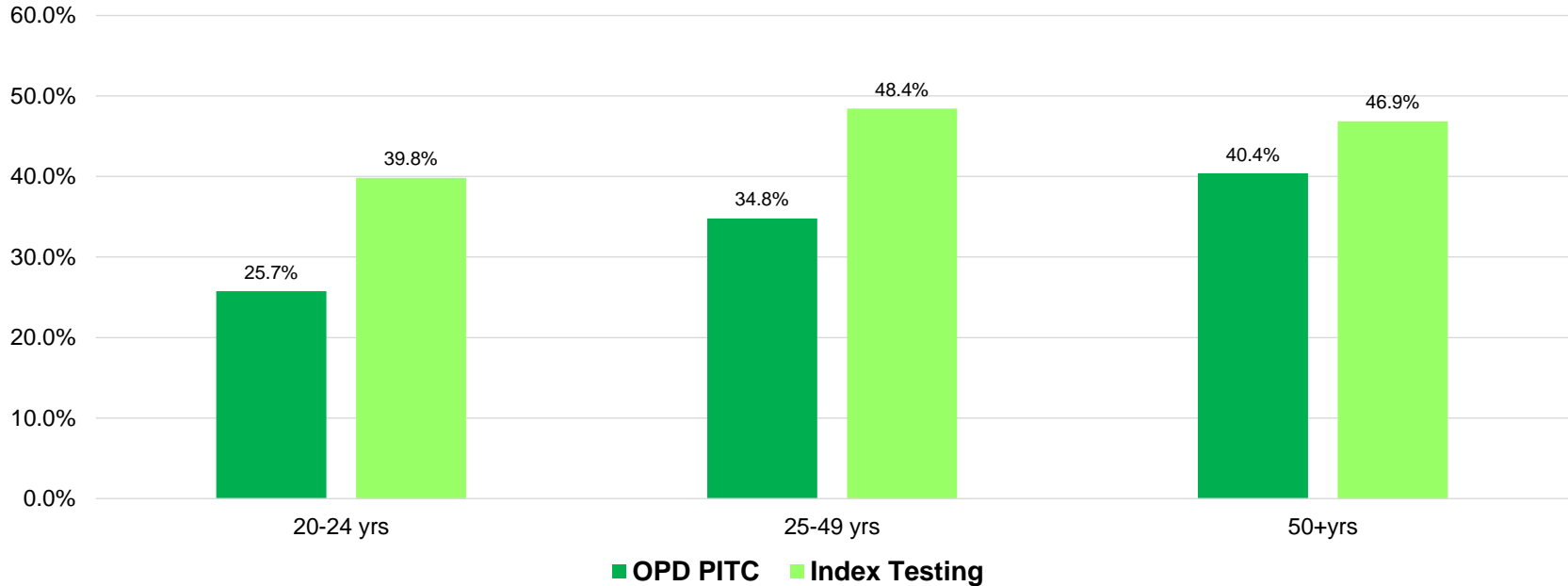
Monitor coverage



PITC in Malawi

Consider populations

Proportions of Male HIV Testing Clients by Age and Testing Modality, FY17

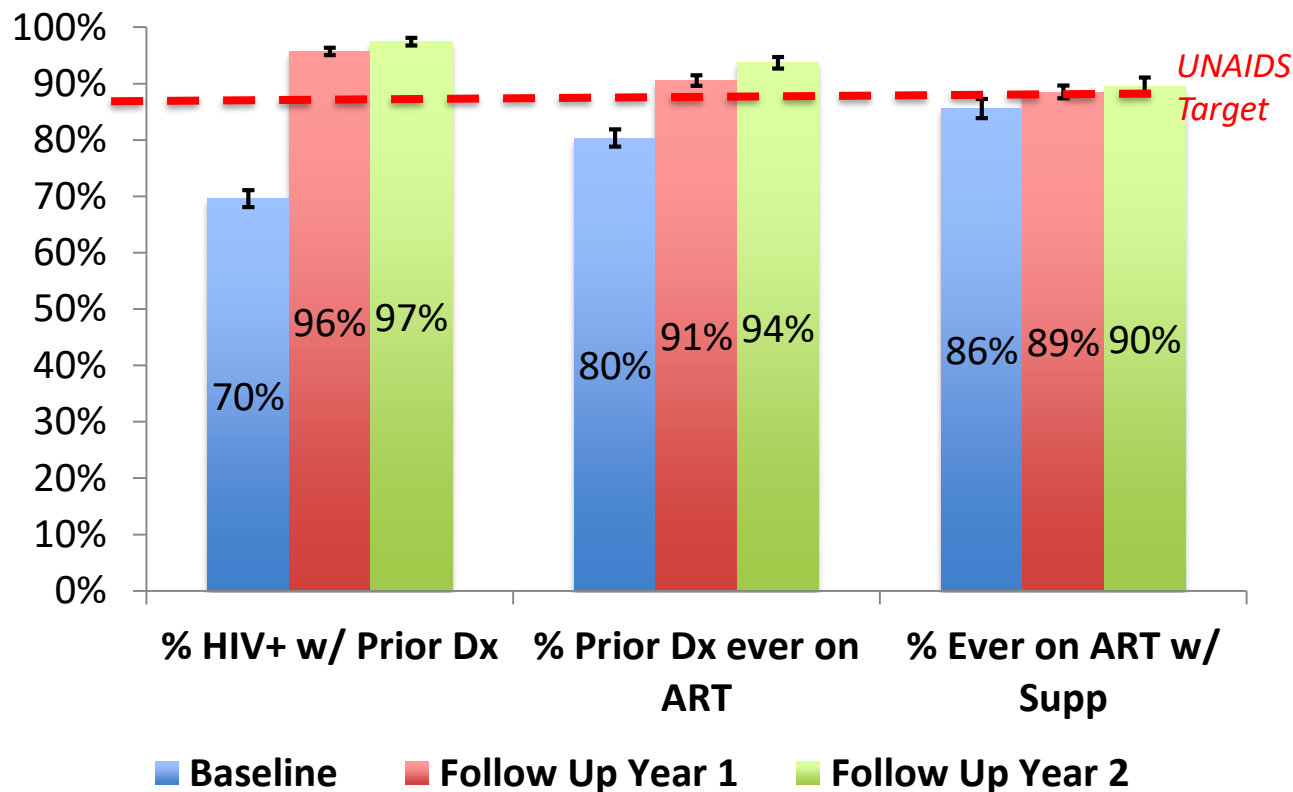


Namibia

Rights presume
universality...



Cascade coverage among prevalent adult stable HIV+



HIV self testing

- 16 countries 2 years ago
- 40 countries at last report
- But many still “have” a policy but it is not implemented



✓ **Right to privacy**

- **Universal declaration of human rights**
- **Intl. Convention on Civil & Political Rights**
- **Part of the right to health under general comment 14 (acceptability)**

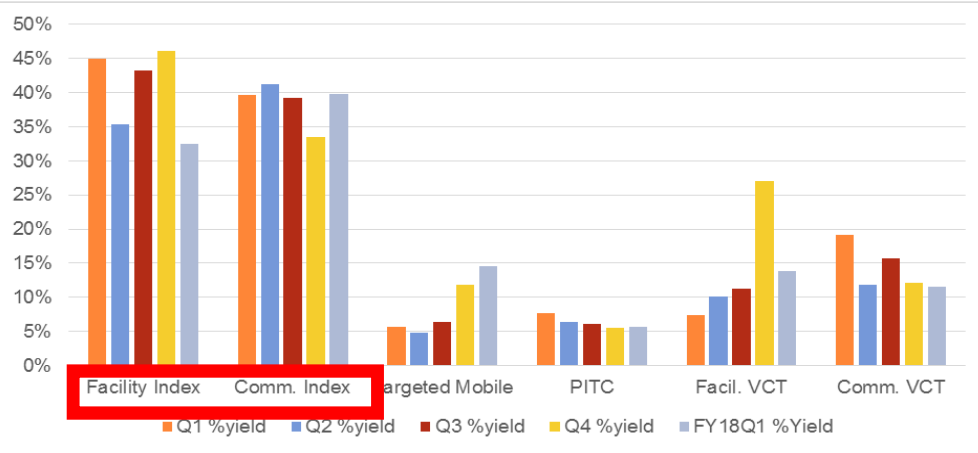
Stigma is still real

Index texting / partner notification

High Yield

All together: High yield in Index Testing—High volumes with PITC

% Yield by Modality



FY18 Q1 Modality: contribution to positives (**yield**)

Facility Index: 0.11% (**33%**)

Comm. Index: 7% (**40%**)

Targeted Mobile: 3% (**15%**)

PITC: 89% (**5%**)

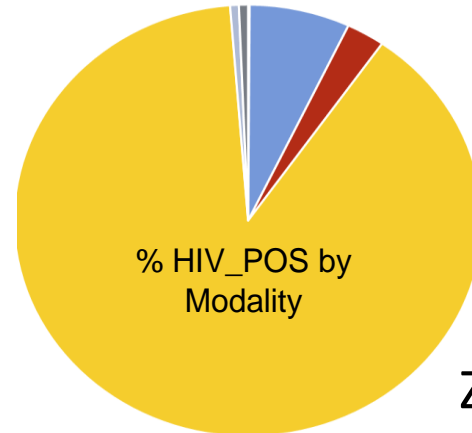
Facility VCT: 0.6% (**14%**)

Comm. VCT: 0.6% (**12%**)

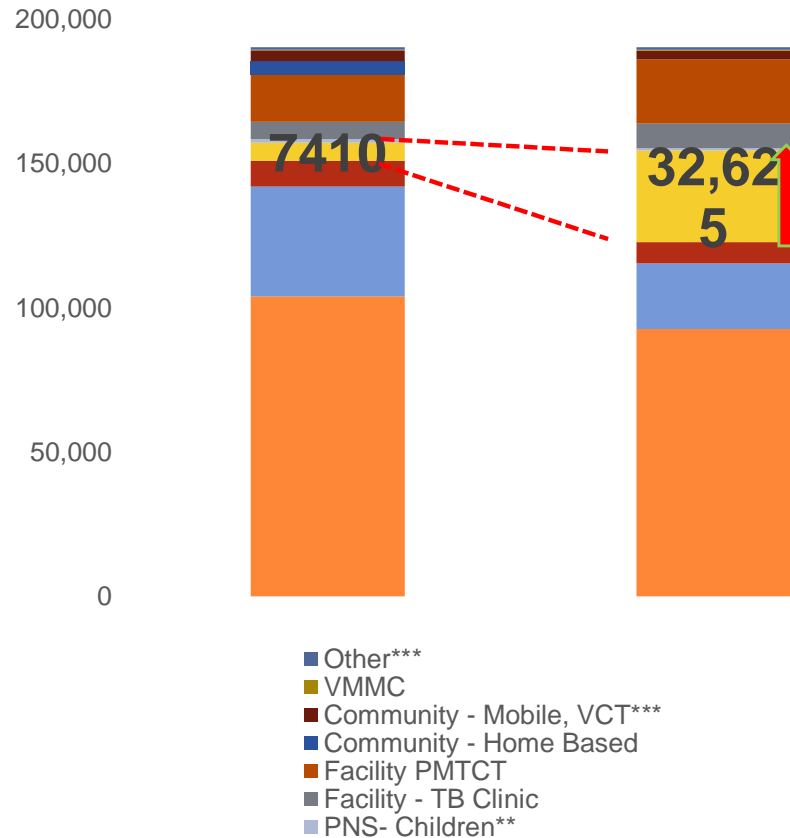
We need all of the modalities in the:

- Right place
- Right time
- Right sub-population

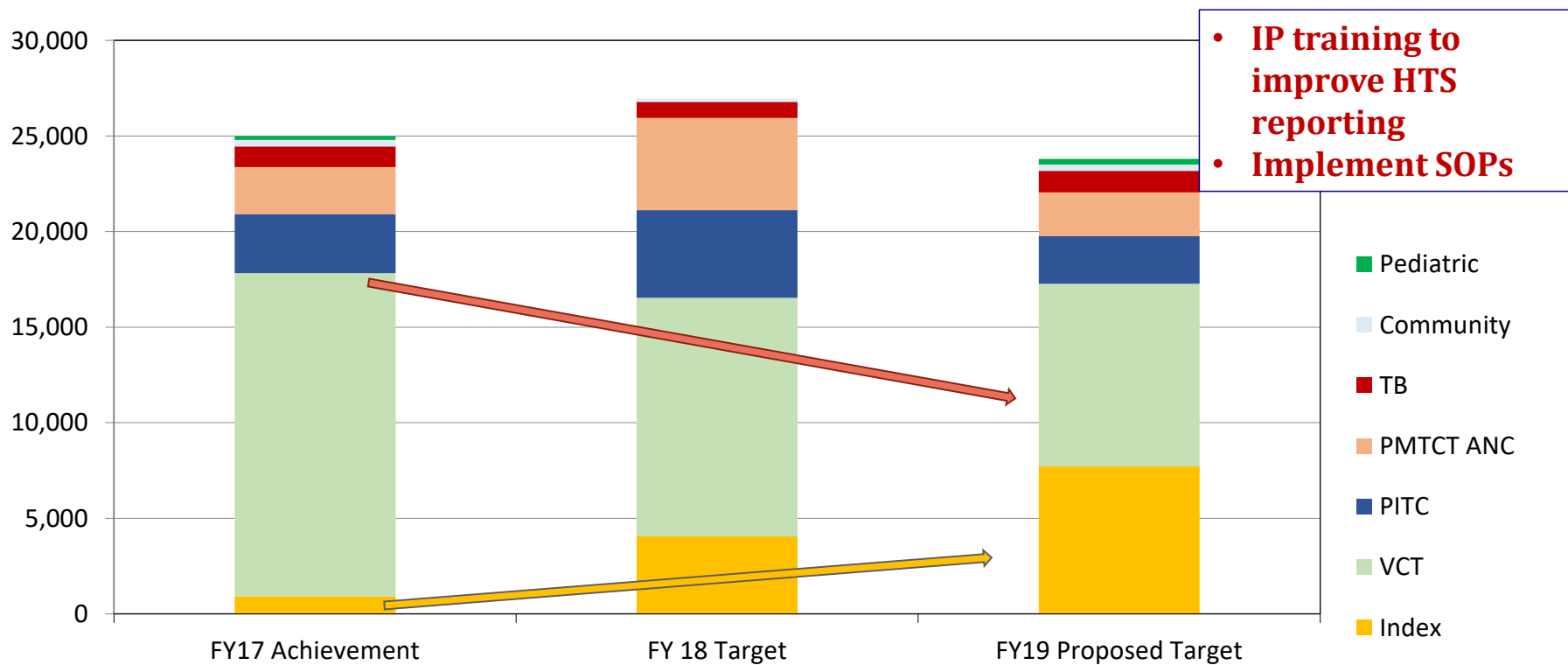
- Facility Index
- Comm. Index
- Targeted Mobile
- PITC
- Facil. VCT
- Comm. VCT

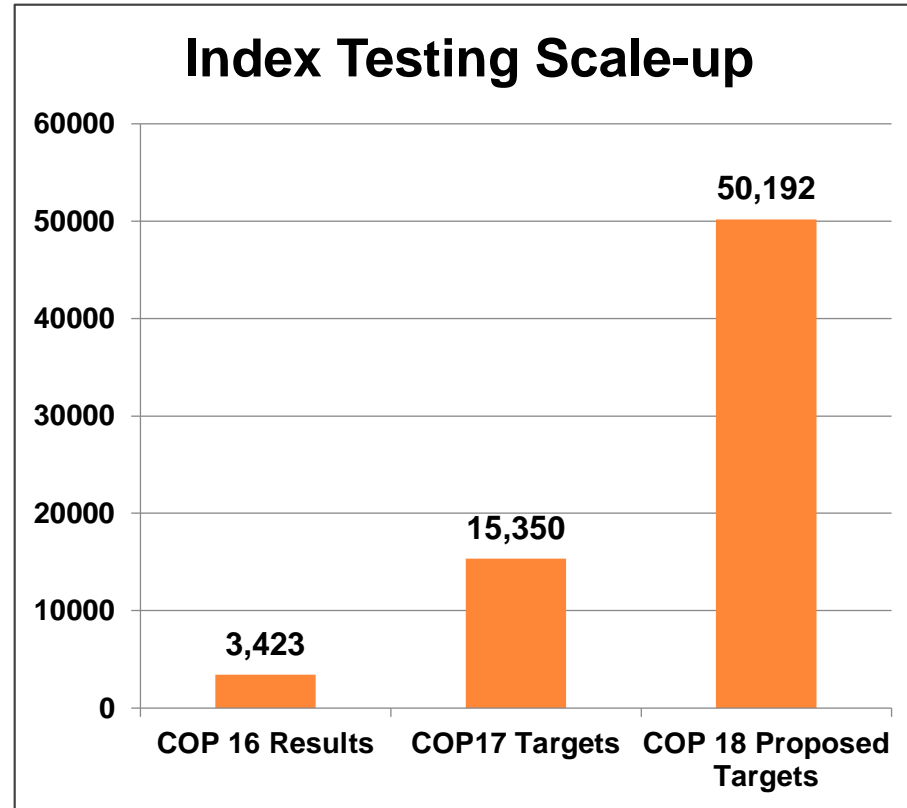


Zimbabwe









Kenya





Ukraine

HTS_Pos				
Modality	COP16 Results	COP17 Targets	COP18 Targets	Trend
PITC	8,036	13,067	24,092	
HTS_Index	978	5,468	9,224	
HTS_Other	1,469	2,199	6,174	
MC	82	-	69	
HTS_VCT	3,169	5,847	641	
HTS_Mobile	1,756	8,515	2,381	

Botswana

Concerns with Index/PN

- ✓ Coercion
- ✓ Intimate partner violence
- ✓ Key populations disclosure
- ✓ Perception—just one case is enough







What is coercion?

2011 interview study of counselors: “some participants stated that after all attempts to encourage voluntary disclosure failed; they occasionally 'threatened' their patients to make them notify their partners.”

- *".... if I try other measures and don't succeed, I will tell you that if you don't do it I will do it for you. When you do that many will not want you to be the one to do it. They will rather prefer to do it themselves....."* (Female counsellor, 48 years old)

Njosing, Barnabas N., et al. "" If the patients decide not to tell what can we do?"-TB/HIV counsellors' dilemma on partner notification for HIV." *BMC international health and human rights* 11.1 (2011): 6

- Incentives by what we measure

HTS_Pos				
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Botswana

Refusal rates

Refusal rate	Refusal Rate
Brown, Lillian B., et al. "HIV partner notification is effective and feasible in sub-Saharan Africa: opportunities for HIV treatment and prevention." <i>Journal of acquired immune deficiency syndromes</i> 56.5 (2012): 437	11%
Kamanga, G., et al. "Maximizing HIV partner notification opportunities for index patients and their sexual partners in Malawi." <i>Malawi Medical Journal</i> 27.4 (2015): 140-144.	10%
Fu, Xiaojing, et al. "Partner notification in cooperation with community-based organizations among HIV-positive men who have sex with men in two Chinese cities." <i>International journal of STD & AIDS</i> 27.10 (2016): 821-831.	12.1%
Kahabuka, Catherine, et al. "Addressing the first 90: a highly effective partner notification approach reaches previously undiagnosed sexual partners in Tanzania." <i>AIDS and Behavior</i> 21.8 (2017): 2551-2560.	3.9%

Intimate partner violence

Studies	Screened positive for IPV
Henley, Catherine, et al. "Scale-up and case-finding effectiveness of an HIV partner services program in Cameroon: an innovative HIV prevention intervention for developing countries." <i>Sexually transmitted diseases</i> 40.12 (2013): 909.	7%
Goyette, Marielle S., et al. "Brief Report: HIV Assisted Partner Services Among Those With and Without a History of Intimate Partner Violence in Kenya." <i>JAIDS Journal of Acquired Immune Deficiency Syndromes</i> 78.1 (2018): 16-19.	7%

Several qualitative studies have failed to find any IPV resulting from PN

Do our screening tools work?

Kenya



Prevalence Data on Different Forms of Violence against Women:

Lifetime Physical and/or Sexual Intimate Partner Violence : 39 % ⁽¹⁾

Physical and/or Sexual Intimate Partner Violence in the last 12 months : 26 % ⁽²⁾

Lifetime Non-Partner Sexual Violence : **Official National Statistics Not Available**

Child Marriage : 23 % ⁽³⁾

Female Genital Mutilation/Cutting : 21 % ⁽⁴⁾

“all of the included IPV screening tools need additional reliability and validity testing. For example, test retest reliability of the HITS, the WAST, and the PVS has not been studied. No studies reported the internal reliability of the PVS. One study documented the discriminant validity of the WAST, but further validation in other populations would be helpful.... screening tools had sensitivities and specificities that varied widely. For example, the sensitivities of the PVS ranged from 35% to 71%. A reported sensitivity of 35% is concerning because maximum sensitivity should be the goal for IPV screening tools.”

Rabin, Rebecca F., et al. "Intimate partner violence screening tools: a systematic review." *American journal of preventive medicine* 36.5 (2009): 439-445.

Key Populations: most receive services through public sector and never disclose

- Mozambique: KP “reached” 44,183
- Adult population: 17.2 million
- Total reached: 0.2%

Perception—just one case

Rights-Based Interventions: prevent violations + respond when (not if) they occur

- Clear legal and policy environment
- Human rights training
- Creation of rights violation reporting
- Legal support services
- Refusal rates as a measure of respect for right to refuse