

Co-developing and testing a peer supporter-delivered screening tool to identify violence and related risks among young women living with HIV in Lusaka, Zambia

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Background

- Young women living with HIV (YWHIV) are likelier to experience overlapping risks to their wellbeing, including violence and poor mental health.
- Better screening approaches are needed.** Understanding how to ask YWHIV about their lives and potential risks is critical to tailoring health services to meet their needs.
- Youth peer supporters may be an important entry point.** While task-shifting approaches to peer supporters may help to effectively reach YWHIV in non-stigmatizing ways and integrate screening into HIV care, there is limited evidence on how youth peer supporters can implement screening.
- We tested an approach to improving screening in Lusaka, Zambia.** Through the Screen & Support project—a collaboration among University of Cape Town, Paediatric-Adolescent Treatment Africa (PATA), and community-based Kabangwe Creative Initiative Association (KCIA)—we aimed to co-develop and test a screening tool to be administered to YWHIV by peer supporters.

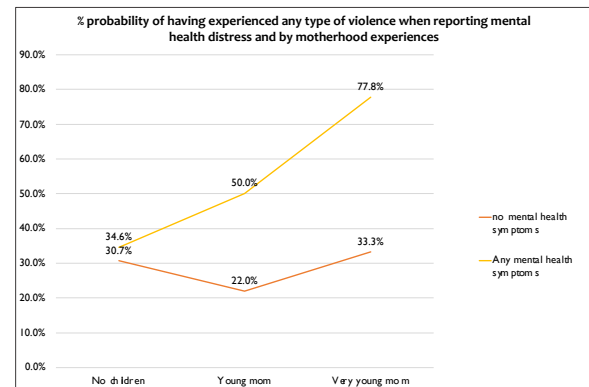


Methods

- Following a community mapping exercise and a series of community dialogues, we worked with a team of peer supporters to co-develop a screening tool for use with YWHIV. Questions were adapted from the *Violence Against Children and Youth Survey (VACS)*, previously used with youth in Zambia, and other related questionnaires.
- Peer supporters and research team members discussed item relevance, meaning, applicability, and translations to strengthen the pilot version of the tool.
- After the tool was finalized, peers recruited YWHIV from health facilities and community networks to undergo screening. Screening was conducted in participants' homes, the KCIA offices, and other neutral locations, based on participant preference.

Findings

- Between December 2022-April 2023, peer supporters recruited and screened n=194 YWHIV. While data analysis is still underway, we have identified several emerging trends.
- Recent experiences of **violence, poor mental health, suicidal ideation, substance use, school dropout, and ART adherence challenges** were considered “**flags**,” which peer supporters used to engage YWHIV further (n=24 individuals identified with flags, 12.4% of the sample).
- Mental health symptoms were the most common flag (8%) followed by ART adherence challenges (6%) and recent experiences of violence (4%).
- The test-version of the screening tool identified factors among YWHIV responses that linked to multiple risks:
 - YWHIV who reported early motherhood and mental health symptoms were likelier to report other flags. They were also likelier to disclose childhood histories of violence and abuse not identified by our tool.
 - Very young mothers, who had their first child before age 18, reported much higher rates of mental health symptoms.



Conclusions

Asking about early motherhood and mental health symptoms may be critical entry points for starting conversations with YWHIV and supporting them with both acute and longer-term psychosocial problems. Our multi-disciplinary team are currently developing online training modules with PATA to expand opportunities for peer supporters in other settings to acquire violence-responsive and related approaches.

Key implementation considerations for adapting this process to various contexts include:

