PROJECT BOITHATO: MOBILISING THE MSM COMMUNITY IN GERT SIBANDE, MPUMALANGA

Alexander Marr, MPH
University of California, San Francisco
Center for AIDS Prevention Studies
Project Boithato

- Dedicated to building a healthy, strong, and proud community of gay, bisexual, and other MSM in Gert Sibande district.
- Promotes safer sex practices with condoms and water-based lube.
- Promotes MSM-friendly HIV testing and treatment programs.
MSM in Ermelo
“Emerging” Gay Communities in Mpumalanga

• Parker (1999)
• MSM forming explicitly gay-identified communities on the basis of shared sexuality
• Ties to national & international LGBT organizations and movements
Mpumalanga MSM and HIV: Preliminary Needs Assessment

- High background HIV prevalence in province (15.4%, 2008) and GS district especially
- 46.1% Reported Prevalence in 2011
- No MSM population size of HIV prevalence estimates
- No behavioral indicators
- Poor access to lubrication and condoms
- Few HIV prevention programs prior to 2009
- Strengthening ties to national LGBT NGOs since late 2000’s
Targeted Ethnography of MSM communities in MP, 2011

- Used to adapt theoretically-based efficacious models of interventions (Wainberg, 2007)
- Aids in providing a more sensitive understanding of a relatively unknown community
- Mpumalanga MSM Intervention Targets:
  - Individual and Interpersonal barriers to HIV prevention/testing/treatment
  - Community Life
  - Social and Structural barriers to HIV prevention/testing/treatment
- Ethnographic methods:
  - Structured Observation (150 hrs)
  - Key Informant Interviews (40)
  - Focus Group Discussions (10)
  - Community Participatory Mapping
“One day we will come together and unite”

• Gay men were very articulate in FGDs about the need to create a more united and cohesive gay community
• Expressed a strong desire to make their communities more accepting and affirming of gay men

“We need our freedom and our space ... it would be a place where I would be able to walk without having to worry about being attacked ... I would wear whatever I want to wear; I would be expressively free within my own right and who I am.”
-Nelspruit KI
Targeted Ethnography Conclusions

• Multi-level approach is needed
  – Promote individual behavior change, change in community norms
  – Promote change in clinical encounters
  – Accommodate and promote evolving biomedical intervention approaches
  – Promote cohesive, mutually supportive community
  – **Mobilize** and empower MSM as agents of change in their lives, in their communities

• Existing efficacious multi-level prevention models may be adapted for a South African environment
  – Structural challenges of developing country setting
  – Heterosexual context of HIV prevention
  – Presumed high HIV prevalence among MSM
  – Pervasive anti-MSM stigma
ADAPTING MPOWERMENT INTO BOITHATO
MPowerment: HIV prevention for young gay/bisexual men in USA

- Multi-level approach to HIV risk reduction
- Proven effective at reducing HIV risk behavior in behavioral trials (Kegeles et al, 1996)
- Implemented in numerous cities and towns in the USA
- “Infuses” HIV prevention into social and community building activities
- Adaptable to different cultural setting (African-American MSM, Latino MSM)
- Goal: To create a supportive, healthy community – that supports each other NOT only about HIV, but also about other issues – being gay in homophobic society, family relationships, anti-gay stigma violence, intimate relationships

- And to have FUN!
MPowerment Guiding Principles: Developed from Formative Research & Scientific Theories of Behavior Change

- Social Focus
- Empowerment
- Peer Influence
- Diffusion of Innovations
- Multi-Level
- Sex Positive & Affirming of all orientations and cultures--Pride
- Community Building
Core Elements

- Coordinators and Supervisors
- Core Group and Volunteers
- Formal Outreach
- Project Space
- Publicity Campaign
- M-Groups
- Informal Outreach
- Community Advisory Board
From MPowerment to Boithato

• Empowerment approach untested in African MSM settings
• Can empowerment shift HIV testing/treatment attitudes and behaviors?
• Adaptations to meet the challenge of implementing in widely dispersed gay/MSM communities with poor transportation infrastructure
• Evidence-based adaptation of Core Elements of the intervention is needed for optimal implementation
Core Elements

- Coordinators and Supervisors
- Core Group and Volunteers
- Formal Outreach
- Project Space
- Publicity Campaign
- M-Groups
- Informal Outreach
- Community Advisory Board
Core Group

- 18 men from 6 towns in Gert Sibande
- Stipends for travel to weekly meetings at Ermelo project space
- Contracts, service term limits
- M-Group requirement
M-Groups

- Biggest “dose” of HIV prevention/testing/treatment skills building
- Address personal, interpersonal, social/structural barriers to HIV prevention, treatment & care
- 10-12 men
- Emphasize interactive learning
- South Africa role play adaptations:
  - Hooking up on Mixit
  - Alcohol and condom use
  - Trust and pressure to engage in unprotected sex
  - Disclosure of HIV+ status to partner
  - Power disparities/financial dependency between partners
  - Confronting stigma in a clinical environment
  - Sexual coercion and accessing PEP
- Mobile M-Groups to be conducted around GS local municipalities
Publicity

- Publicity materials tailored to socially conservative community
- Few MSM-only venues to display overtly gay publicity materials
- Messaging emphasizes pride, solidarity, and safer sex
- Communication through social media, word of mouth
- www.facebook.com/Boithato
- Evolving strategy
Assessment: Mpumalanga Men’s Study

- **Aim 1:** Estimate MSM population size and provide baseline data on HIV prevalence and associated social and behavioral risk factors for HIV infection among the MSM population in two Mpumalanga district municipalities;

- **Aim 2:** Test the efficacy of Project Boithato program in increasing
  - (1) consistent condom and water-based lubrication use with male partners; and
  - (2) regular use of clinical HIV services, i.e. regular testing among HIV-negative MSM, and regular monitoring of HIV disease among HIV-positive MSM, at least once every 6 months;

- **Aim 3:** Test whether Project Boithato increases perceived social cohesion dimension of empowerment within the MSM population.
Conclusions

• MPowerment model is appropriate to adapt and evaluate in South African MSM environment
• Context-specific personal, interpersonal, structural, and social/environmental intervention targets identified for sexual behavior change and health seeking behavior
• Implementation has been extensively adapted to encourage consistent condom use and regular uptake of HIV testing/care
• Outreach strategies to make extensive use of social media to disseminate intervention over large distances in a conservative community
• Dedicated project space in Ermelo to be supplemented with mobile M-groups
Next Steps

• 24 months of implementation
• 12- and 18- month follow up assessments through Mpumalanga Men’s Study
• Expansion of community based HIV testing services in both Gert Sibande and Elhanzeni
• Continuation of Anova Health4Men health care worker sensitization in MP clinics
Finally, about that logo.....

- Design was conceived and approved by Core Group
- MSM is historically a term of convenience for epidemiology
- Gert Sibande community has emphatically chosen “MSM” as a way of identifying their community to include all men who have sex with other men, not just out, gay-identified men
- Identity formation before our eyes!
Acknowledgements

Anova Health Institute
Johannesburg/Health4Men
Dr. James McIntyre
Helen Struthers
Nkulzi Mlotshwa
Mpho Silima
Nkosinathi Zuma
Kabelo Maleke
Nosipho Makhakhe
Jennifer Bowman
Steve Letsike
USAID/PEPFAR

Center for AIDS Prevention Studies
UCSF (USA)
Dr. Timothy Lane
Dr. Susan Kegeles
Dr. Starley Shade
Dr. Sheri Lippman
Thomas Osmand
Zach Isdahl

Rollins School of Public Health
Emory University (USA)
Dr. Kristin Dunkle

HIV Center for Clinical and Behavioral Studies,
Columbia University (USA)
Dr. Theo Sandfort
Dr. Joanne Mantell

Community Stakeholders
Bafana Mhlanga
Jacob Makhathini

Special thanks to our participants, and the gay communities and MSM of Mpumalanga who have supported our work in Ermelo, Piet Retief, Standerton, Volksrust, Nelspruit, Kabokweni, White River, and Chochocho

The Mpumalanga Men’s Study is supported by a grant from the US National Institute of Allergy and Infectious Diseases (NIAID) to UCSF, USA: R01AI089292. (PI: Lane, T)

Project Boithato is supported by a cooperative Agreement between UCSF and the Centers for Disease Control and Prevention (CDC) through the President’s Emergency Plan for AIDS Relief (PEPFAR), U2GGH000251