



MODERNIZING HIV PROGRAMMING IN THE ERA OF FACEBOOK AND INSTAGRAM

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CONTENTS

- Historical highlights of HIV programming in Cambodia
- The increasing focus on “going online” for HIV prevention
- Understanding online demographics
- Crafting and implementing online outreach
- Challenges
- Conclusion



CAMBODIA 1.0 (1990 – 2000)

1991

First reported HIV case

1.7%

Prevalence among
general population (15-
49 years old) in 1998

CAMBODIA 1.0 (1990 – 2000)

**Antiretroviral Therapy
(ART)** not available





CAMBODIA 1.0 (1990 – 2000)

Nationwide awareness campaigns of the
100% Condom Use Program

CAMBODIA 2.0 (2001 – 2011)

0.8%

Prevalence among general
population (15–49 years old)
in 2010



Cambodia received the
award in 2010 for
national leadership
in achieving **GOAL 6**.

CAMBODIA 2.0 (2001 – 2011)



85%

ART coverage (of patients with
CD4 count at $<350 \text{ cc/mm}^3$)

CAMBODIA 2.0 (2001 – 2011)

78%

HIV testing among
pregnant women
in 2011, compared
to **28% in 2008**



64%

HIV+ pregnant
women receiving
ARV in 2011,
compared to **27%
in 2008**

CAMBODIA 2.0 (2001 – 2011)

Increasing programming focus
on **Most-At-Risk Populations**

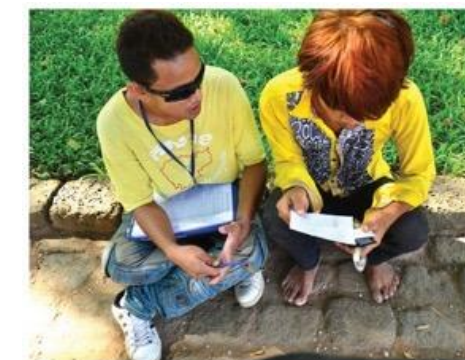
Men who have sex with men (**MSM**)

Female entertainment workers (**EW**)

Transgender women (**TG**)

People who use drugs (**PWUD**)

People who inject drugs (**PWID**)



CAMBODIA 3.0 (2012 – 2020)



2.3%

Prevalence among MSM
(2014)

0.6%

Prevalence among
general population
(2016)



15.2%

Prevalence among
PWID (2017)



3.2%

Prevalence among
EW (2016)



5.9%

Prevalence among
TG (2016)



5.7%

Prevalence among
PWUD (2017)

CAMBODIA 3.0 (2012 – 2020)

87%

- Undiagnosed people know their HIV status

98%

- People knowing their status are on ART

75%

- HIV+ people on ART are virally suppressed

2017

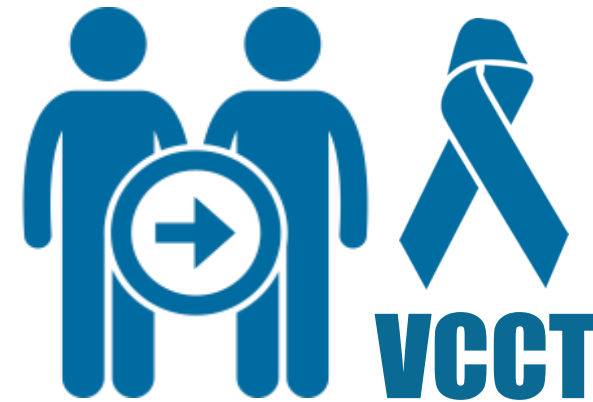
Cambodia was recognized of achieving the 90-90-90 targets during an HIV/AIDS conference in Paris, France.

CAMBODIA 3.0 (2012 – 2020)



Nationwide rollout of **community-based rapid finger prick testing** by lay counselors from within the communities

CAMBODIA 3.0 (2012 – 2020)



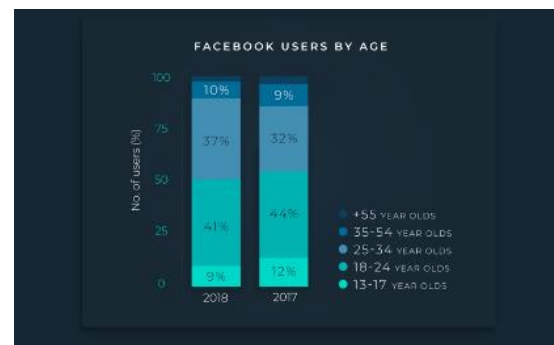
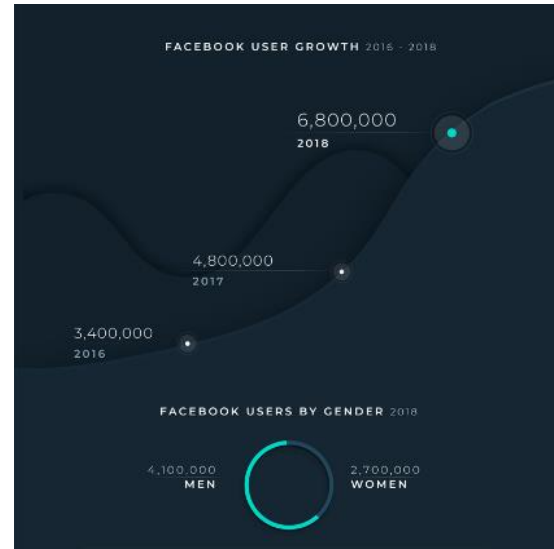
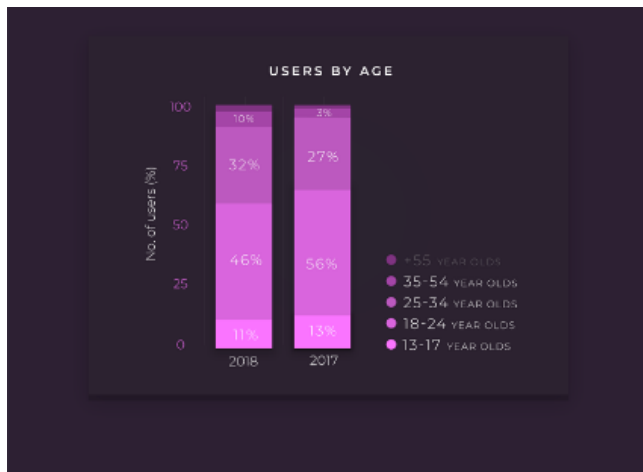
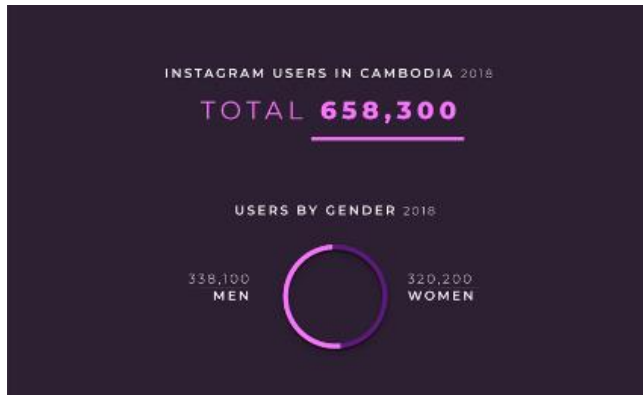
TEST & TREAT

CAMBODIA 3.0 (2012 – 2020)

The background of the slide is a vibrant, futuristic cityscape. At the top, a large, flowing rainbow arches across the frame. Below it, a dense, colorful city with various buildings and structures is visible. In the foreground, a character with a large, muscular build and a red shirt is seen from behind, looking out over the city. The city is filled with various elements, including a large, glowing yellow light, a large, glowing red light, and a large, glowing blue light. The overall scene is bright and colorful, with a strong emphasis on the rainbow and the city's lights.

Going online for outreach

THE INCREASING FOCUS ON “GOING ONLINE” FOR HIV PREVENTION



- Existing conventional face-to-face outreach has not been notably successful in reaching new individuals within and outside of program coverage.
- More and more people, especially sexually active individuals of reproductive age, are going online to socialize, obtain information, seek relationships, and look for sex.

More information about social media usage per Peek in Cambodia, click here: <http://geeksincambodia.com/cambodias-2018-social-media-digital-statistics/>.

THE INCREASING FOCUS ON “GOING ONLINE” FOR HIV PREVENTION



Understanding the demographics and their online behaviors



Crafting online outreach via social media (including dating apps)

THE INCREASING FOCUS ON “GOING ONLINE” FOR HIV PREVENTION

LINKAGES’ Principle of “Going Online”



Harnessing online platforms to expand access to previously unreachable individuals facing high risks.



Leveraging efficiencies of virtual communication and automated systems to bring the right services to the right people.



Providing person-centered support and more options for accessing HIV info and engaging in services.

UNDERSTANDING ONLINE DEMOGRAPHICS



The ICT stocktaking is used to collect feedback from KPs that use online platforms through a series of questions about technology and platform use, HIV and sexual health services, and HIV risks.



This exercise maps the density of location-based dating app users across urban areas and at specific days/times.




This mapping exercise finds and lists online locations or hotspots where KPs can be reached, including Facebook groups and pages, WhatsApp group chats, and other websites and forums.





The meetings aim to engage online KPs and social media influencers in small-group discussions to gather information on online content consumption habits and social media use behaviors among targeted populations.

UNDERSTANDING ONLINE DEMOGRAPHICS

Individuals could take the ICT stocktaking survey in Cambodia via Survey Monkey and answer a set of questions about their social media use and consumption, as well as their experience with accessing HIV/AIDS and related health information and services.


 ការវាយតម្លៃការប្រើប្រាស់ប្រព័ន្ធបច្ចេកវិទ្យាទាក់ទងនឹងសុខភាពផ្លូវភេទនៅកម្ពុជា


1 | ព័ត៌មានទូទៅ និង ការប្រើប្រាស់បច្ចេកវិទ្យា |  


ការស្ទង់មតិនេះត្រូវបានអនុវត្តដោយមជ្ឈមណ្ឌលជាតិប្រយុទ្ធនឹងជំងឺអេដស៍ លើស្បែក និង កាមរោគ ខ្មែរស្វែងរកសុខាភិបាល។

សូមស្វាគមន៍! តើអ្នកកំពុងរស់នៅក្នុងប្រទេសកម្ពុជាមែនទេ? តើអ្នកចាប់អារម្មណ៍នឹងការប្រើប្រាស់បច្ចេកវិទ្យាដើម្បីទទួលបានព័ត៌មានផ្លូវភេទ ភាពផ្លូវភេទដោយសេរីការសម្ភាសន៍នឹងសេវាផ្សេងៗដែរឬទេ? ប្រសិនបើអ្នកមានការចាប់អារម្មណ៍ យើងខ្ញុំចង់បានការផ្តល់មតិយោបល់ពីអ្នក។ ការផ្តល់មតិយោបល់របស់អ្នកនឹងជួយអោយកម្មវិធីសុខភាពផ្លូវភេទក្នុងប្រទេសកម្ពុជា ធ្វើការប្រជាជនជាមួយនឹងព័ត៌មាន និងសេវាធានាដែលពួកគេចង់បាន តាមរយៈបច្ចេកវិទ្យាសង្គម។

Prizes include:

 ក្រោយពីបានបញ្ចប់ការផ្តល់មតិយោបល់ អ្នកនឹងមានឱកាសឈ្នះរង្វាន់ជាច្រើន រួមមាន កូនធុងបាត់ប្រើប្រាស់ម៉ាក JBL (JBL speaker) និង ថ្នាំថ្លុយសម្រាប់ទូរស័ព្ទ (power bank)

 ការចូលរួមនេះត្រូវការពេលវេលាប្រហែល១០នាទីប៉ុណ្ណោះ

 រាល់ចម្លើយរបស់អ្នកគឺទុកជាអាជីវកម្មនិងត្រូវបានរក្សាការសម្ងាត់។

 យើងចាប់ផ្តើមជាមួយនឹងសំណួរដំបូង។

* 1. តើអ្នកចាត់ខ្លួនឯងជាអ្នកអ្វី?

☐ ប្រុស










☐ ស្រី

☐ មេទទឹង


☐  | សូមមិនប្រាប់


☐ ផ្សេង


4. តើអ្នកប្រើប្រាស់បណ្តាញសង្គមក្នុងគោលបំណងអ្វី? សូមជ្រើសរើសចម្លើយទាំងអស់ដែលត្រូវនឹងអ្នក


	 រកចិត្តភក្តិ	 ទំនាក់ទំនងក្នុងសង្គម	 ល្វែងរកនៃតួលេខ	 ល្វែងរកនៃតួលេខ	 ទំនាក់ទំនងការងារ	 ទទួលព័ត៌មានផ្សេងៗ
 Facebook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 Twitter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 Instagram	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 Snapchat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 TikTok	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


* 5. តើអ្នកផ្ញើនិងទទួលអ្វីខ្លះនៅលើកម្មវិធីផ្ញើសារទាំងនោះ? សូមជ្រើសរើសចម្លើយទាំងអស់ដែលត្រូវនឹងអ្នក

☐  សារជាអក្សរ


☐  សារជាសំឡេង

☐  សារជាប្រភព

☐  សារជាប្រភពមានចលនា (GIF)

☐  សារជាសំឡេង

☐  តំណភ្ជាប់ទៅកាន់គេហទំព័រខាងក្រៅ

* 6. តើអ្នកប្រើប្រាស់ទម្រង់គណនី (ប្រវត្តិ - Profile) ហ្វេសប៊ុកប្រភេទណា? 

☐ ទម្រង់គណនីដែលបង្ហាញអត្តសញ្ញាណពិត (ឈ្មោះពិត ឬ ឈ្មោះពិត)

☐ ទម្រង់គណនីដែលបង្ហាញអត្តសញ្ញាណក្លែងក្លាយ (ឈ្មោះកំរិត និង ឆ្មោះ)

☐ មិនមានគណនីហ្វេសប៊ុក

* 7. តើអ្នកតែងជួប ឬ ធ្លាប់ជួបនៃតួរូបភាពរបស់អ្នក ដោយវិធីណា? សូមជ្រើសរើសចម្លើយមួយ

☐ រកតាមអនឡាញតែប៉ុណ្ណោះ

☐ ទៅរកតាមកន្លែងកំសាន្តតែប៉ុណ្ណោះ

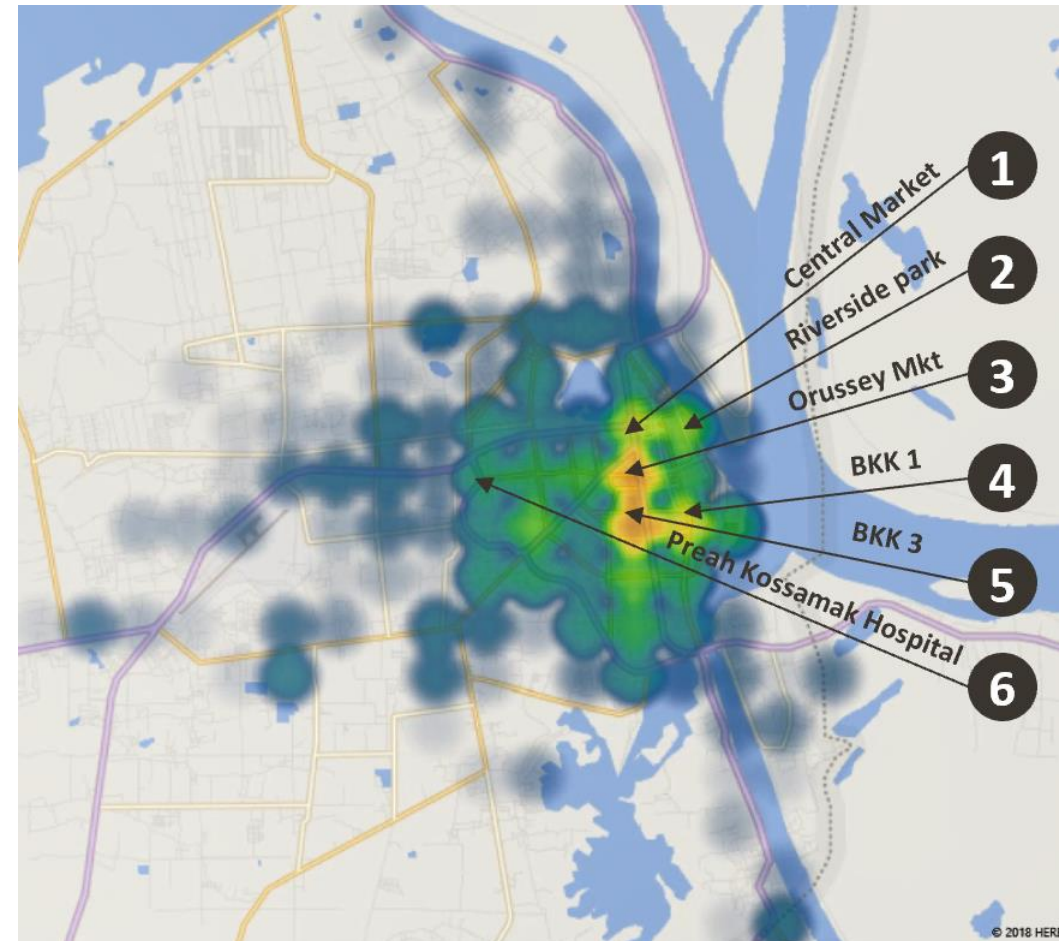
☐ រកតាមទូរស័ព្ទតែប៉ុណ្ណោះ

☐ មិនល្វែងរកនៃតួរូបភាព

☐ រកតាមទូរស័ព្ទតែប៉ុណ្ណោះ (ឧ.តាមការ ហ្វេសប៊ុក KTV)

UNDERSTANDING ONLINE DEMOGRAPHICS

LINKAGES' Density mapping of online MSM dating app users in Phnom Penh looked at the different days/times and locations that users are most online on specific apps, which would allow better understanding for outreach workers to schedule when and where would be best to use those apps for online outreach. No individual data, including identities of users, were collected.



CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Global LINKAGES Going Online Framework

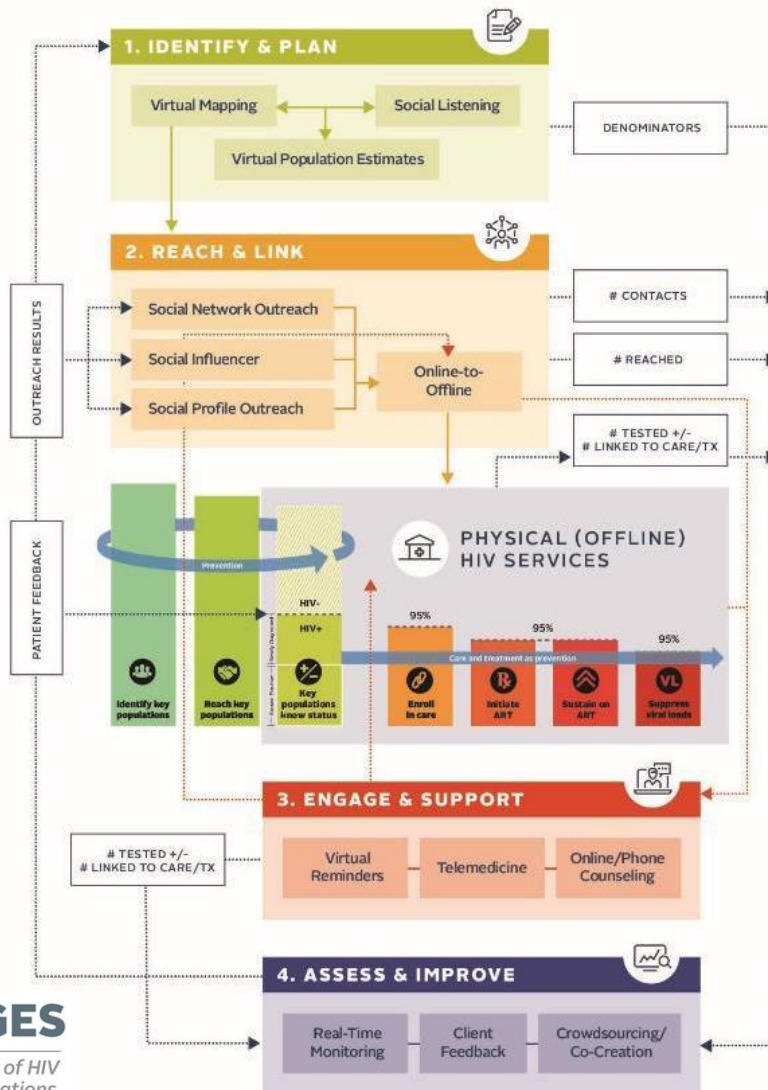
4-part process: identify and plan, reach and link, engage and support, and assess and improve

Outreach approaches: online outreach workers, online ads and influencers

Linkage methods: meet offline, e-referral, or online appointment booking

New service options: private, labs, self testing (in addition to NGO and public)

Data and client feedback for rapid quality improvement



CRAFTING AND IMPLEMENTING ONLINE OUTREACH

LINKAGES' new approaches for client journey



Step 1. Outreach Approaches

Use online outreach approaches to reach new segments of at-risk populations



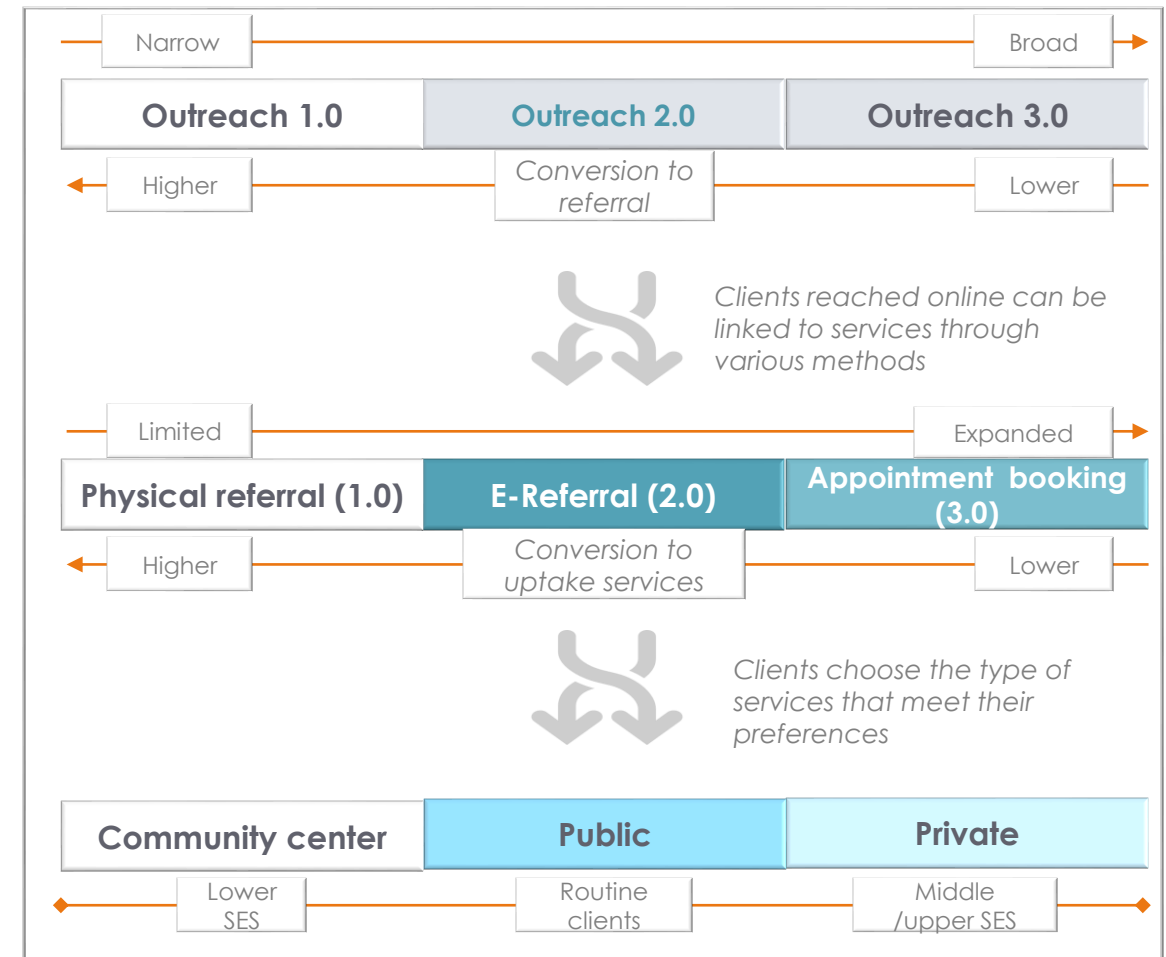
Step 2. Linkage Modality

Develop referral mechanisms that meet people's preferences for accessing services on their own for more privacy and convenience



Step 3. Service Facility Types

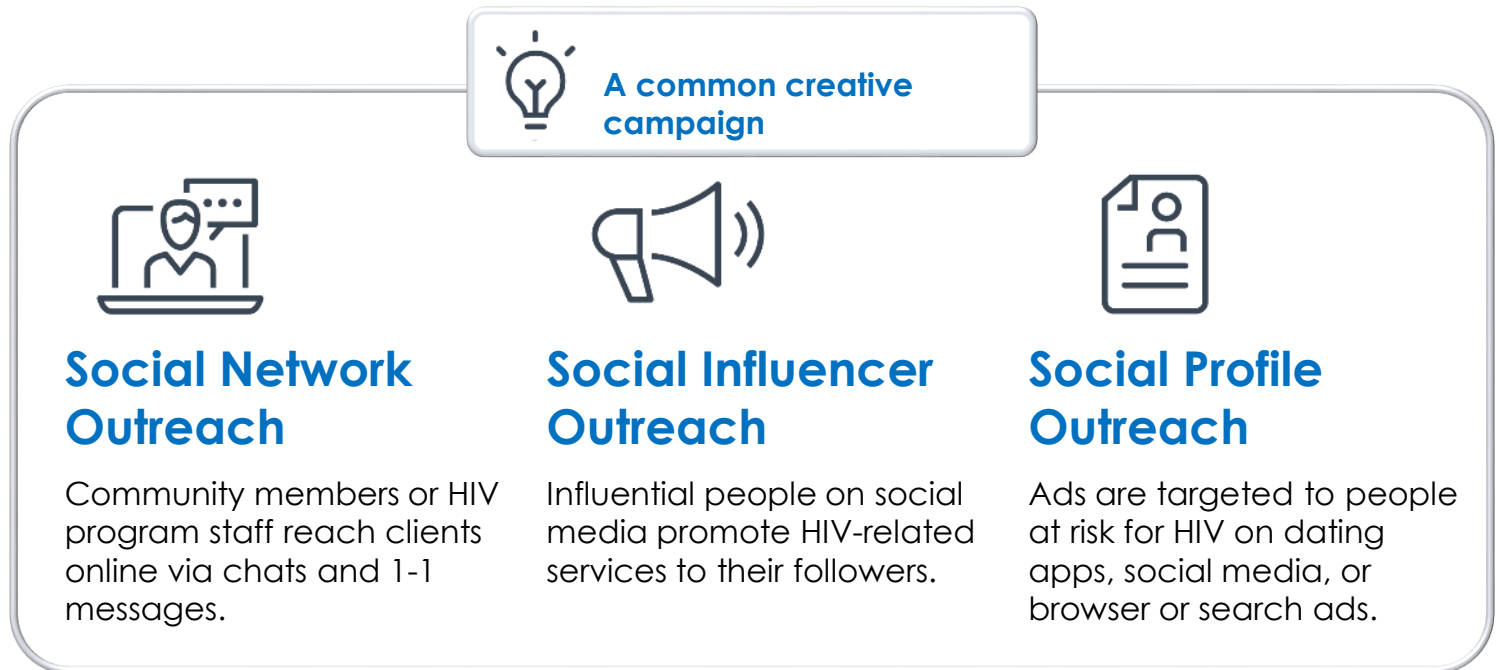
Partner with new providers that are preferential to your target audiences so you can maximize uptake of services



CRAFTING AND IMPLEMENTING ONLINE OUTREACH

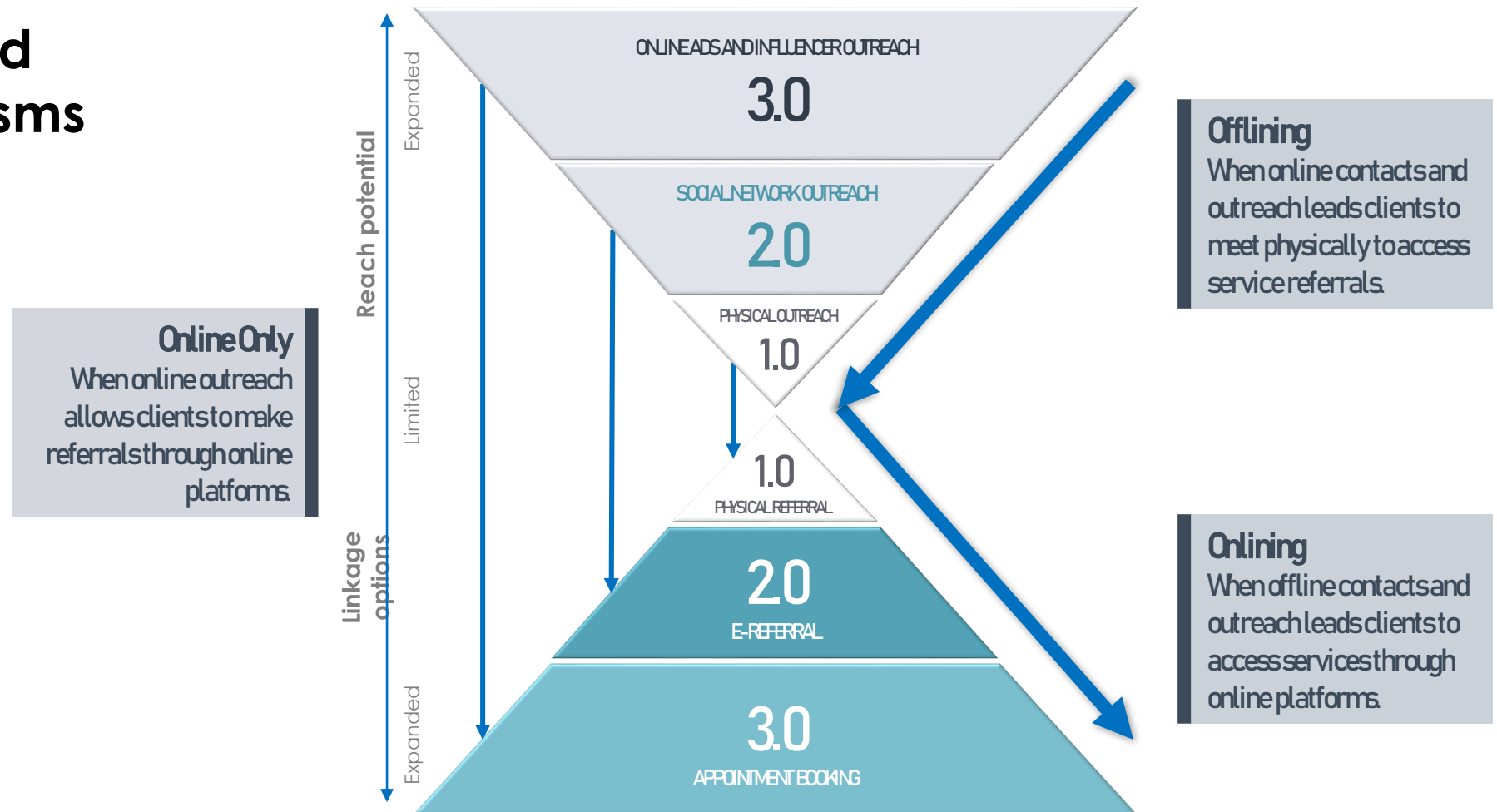
Step 1: Methods of online outreach

Online outreach: The use of online and virtual platforms to reach people who are at risk to HIV, link them to offline HIV services, and to promote and support healthy behaviors over time



CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Step 2: Reach and referral mechanisms

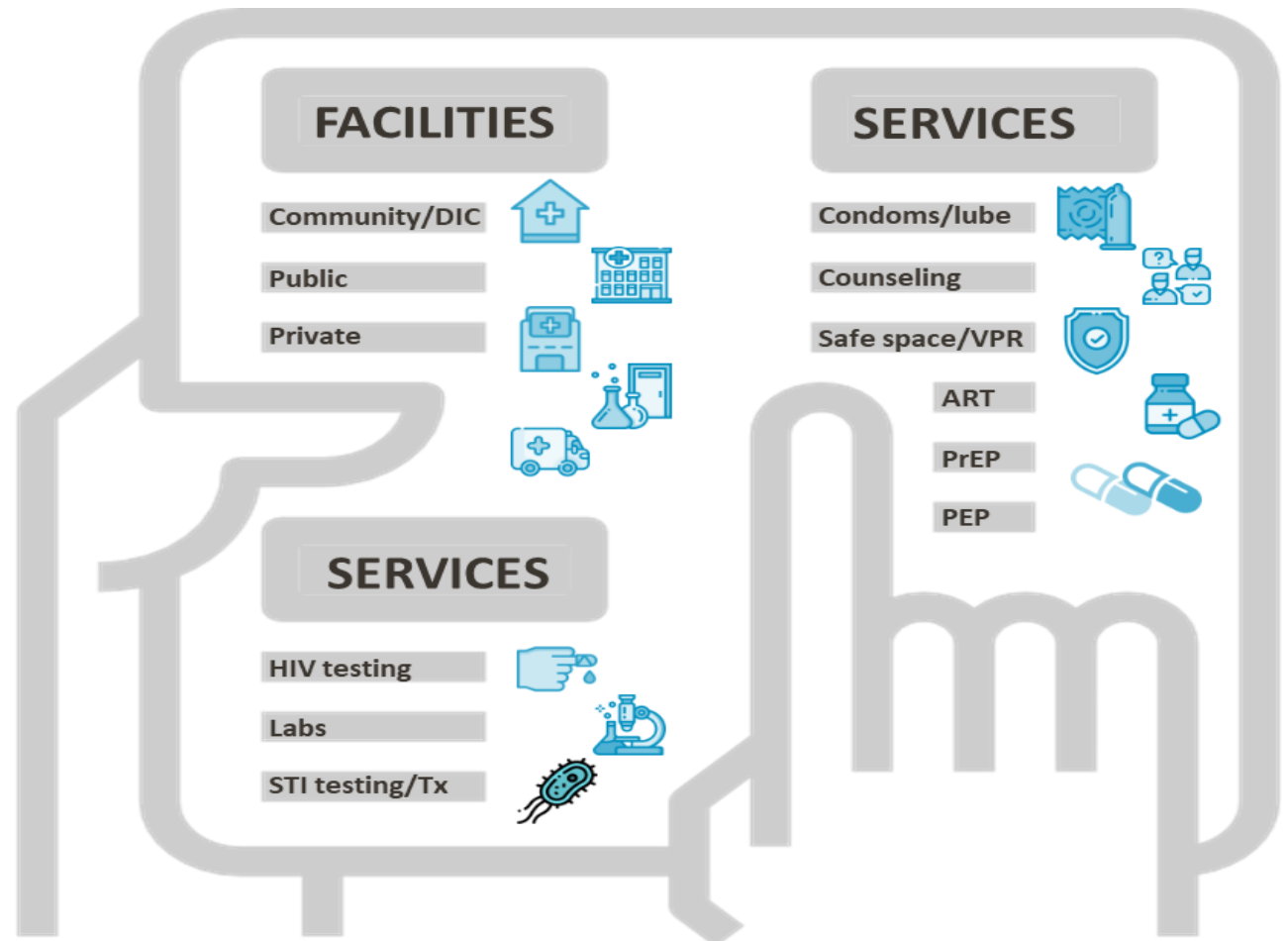


CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Step 3: Service and facility types

Include the right services and facilities for clients:

1. Assess audience preferences
2. Identify appropriate services and facilities
3. Make new partnerships



CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Key “Going Online” strategies in reaching targeted audiences

- Diversification of reach channels
- Diversification of sources of content and information
- Development and dissemination of contextualized content
- Implementation of differentiated outreach modalities
- Maintenance of clients' feedback
- Streamlining of online/offline outreach integration

CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Creative branding and identity for social media campaigns



Welcome! It is so quick and easy to make a reservation to get tested. Just follow the steps below.

Risk Assessment

1. WELCOME 2. LAST TEST 3. HIV STATUS 4. TREATMENT HISTORY 5. GENDER 6. SEX AT BIRTH 7. SEX WITH 8. RISK

Welcome

Hi there! Meet your virtual counselor. You can speak to Doctor Rajesh who can help you assess your sexual health needs. Would you like to take this assessment?

☐ I understand the privacy and data use policy as described below.

OK, LET'S START

* Note: The data collected in this app is for program purposes and will not be used to determine this app requests your location data, risk data, or testing data, it will only be used to guide our recommendation, to give you the best possible clinic options and to understand overall reach of this system of confidentiality and anonymity of your data.

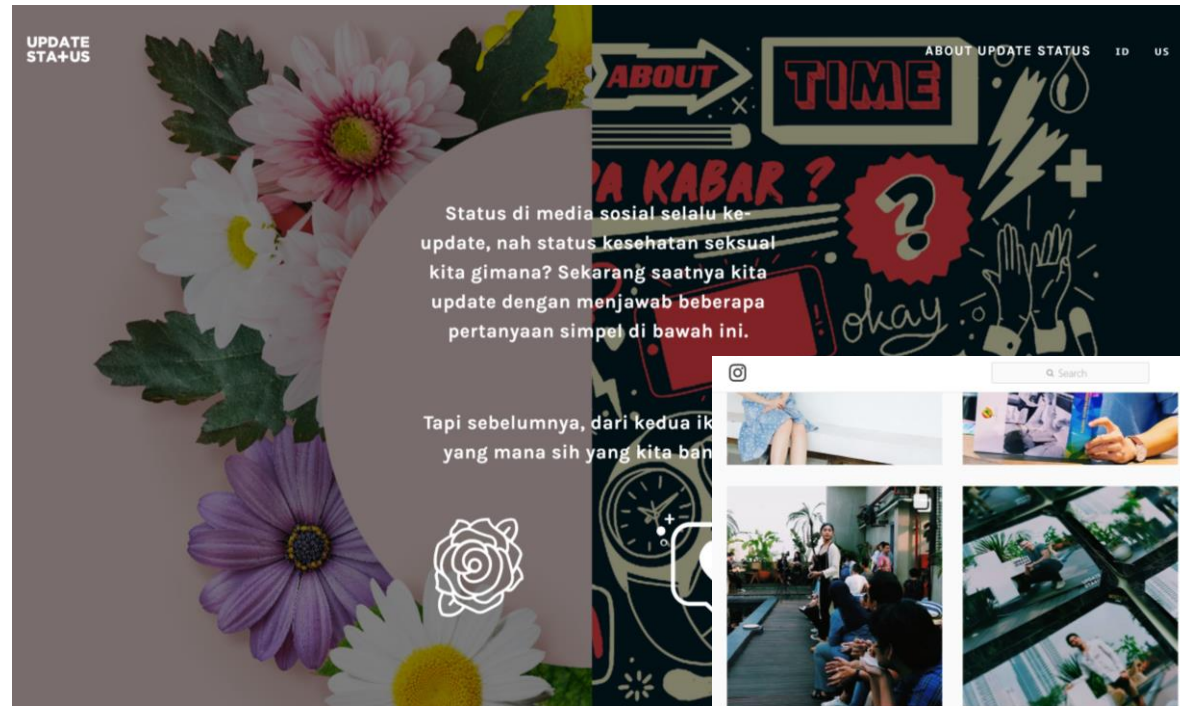
About Yes4Me



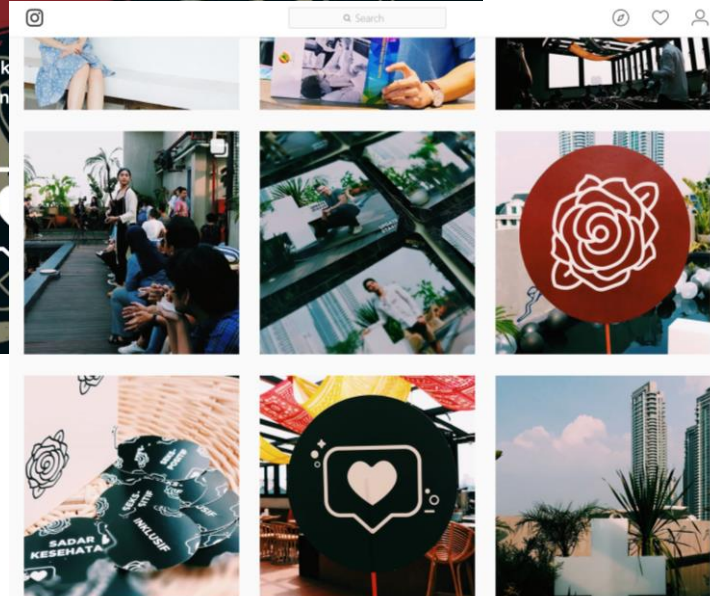
Estimate your current risk for HIV and book an appointment for advanced HIV testing at one of 60 private lab locations at a discounted rate at Yes4Me.net

Promote Yes4Me to your followers and friends

@Yes4Me_Official | Book HIV test at yes4me.net



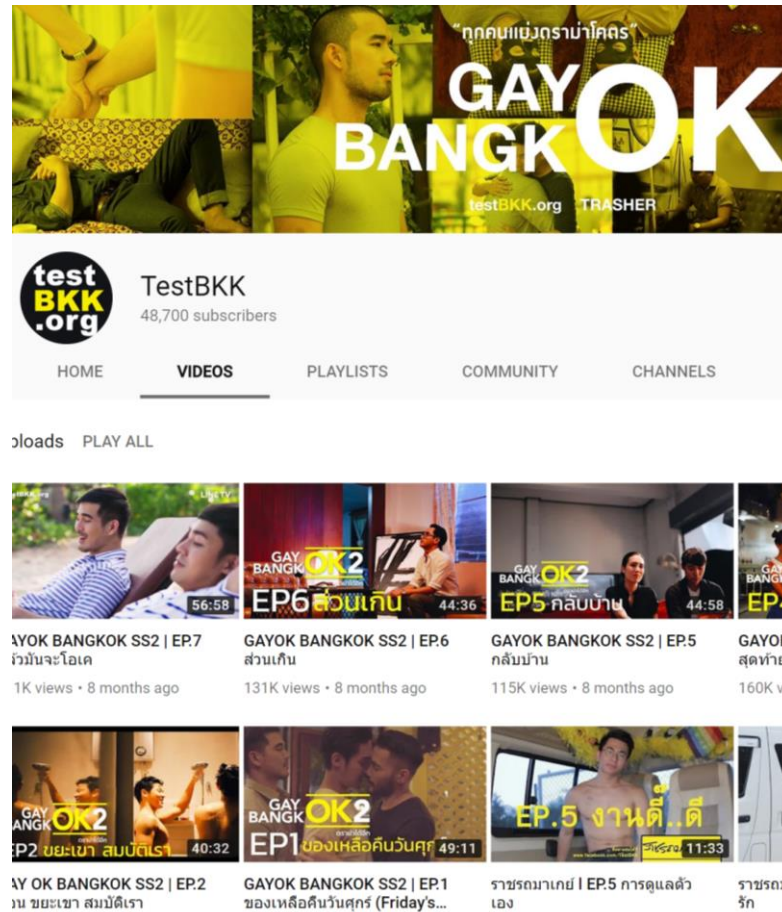
Website: www.updatestatus.id
Instagram: [updatestatus.id](https://www.instagram.com/updatestatus.id)
Facebook: www.facebook.com/updatestatus.id



Website: www.yes4me.net
Instagram: [yes4me_official](https://www.instagram.com/yes4me_official)
Facebook: www.facebook.com/Yes4Me.net

CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Creative content for campaigns and online posting



QUAND TU COMPRENDS QU'UNE PERSONNE NE
CONNAÎT PAS SA SITUATION DE
SANTÉ ET QU'IL TE REPOND
VAGUEMENT SUR SON STATUS SÉROLOGIQUE



If you want to learn more about testBKK, go here: <https://www.testbkk.org/en>.

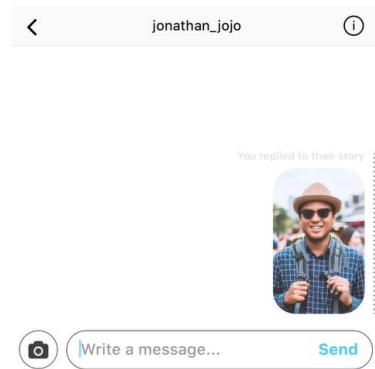
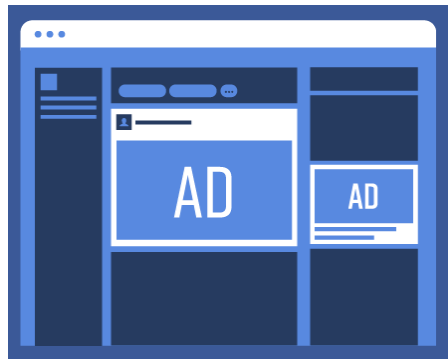
CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Engagement with influencers



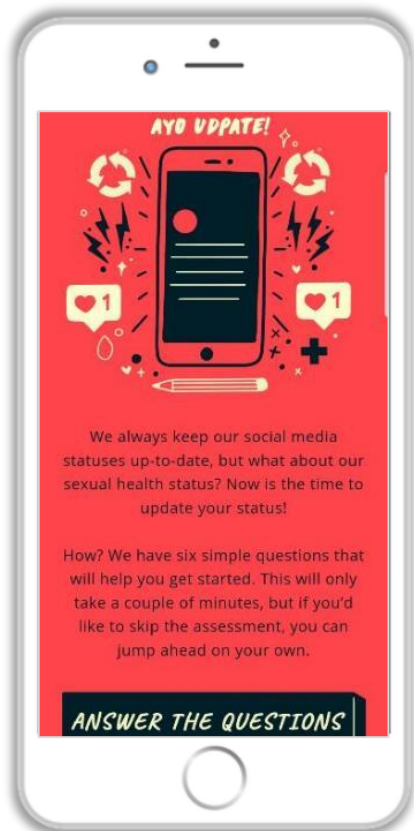
CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Getting the words out: Targeted advertising and online interaction

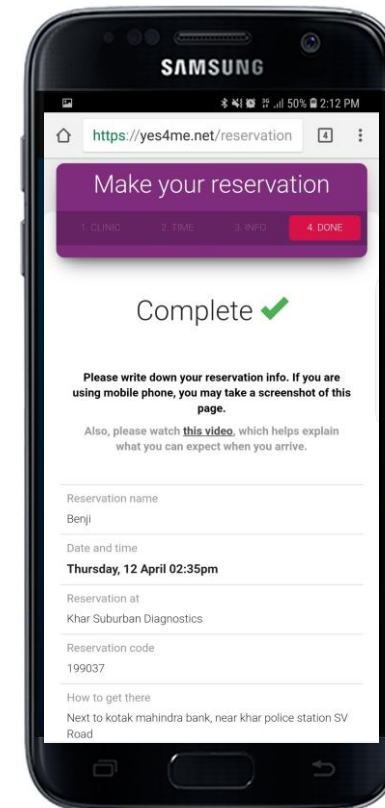


CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Online services: Risk self-assessment and appointment booking for HIV testing



Individuals can assess their risks of HIV infection at their own time and comfort through a well-designed website that contains simple instructions and a risk questionnaire that can be taken in just a few minutes.



At the end of the questionnaire, a risk result is provided, along with an option to book an appointment for HIV testing at participating testing facilities via the same website.

CRAFTING AND IMPLEMENTING ONLINE OUTREACH

Online-to-offline service: HIV self-testing in Cambodia



KHMERTEST
PROTECTING PEOPLE

This is an innovative pilot by the National Center for HIV/AIDS, Dermatology and STDs (NCHADS), with technical assistance from LINKAGES, in expanding HIV testing options to people. With HIV self-testing, clients can take the HIV test on their own, at their own time and in the comfort of their own place. Two types of HIV tests are available (oral or finger-prick). The pilot also makes use of delivery service Nham24 as one of the several ways clients can get the test kits.



Go to www.khmertest.org for more info.

CONFIDENTIALITY, PRIVACY, CYBERSECURITY

- Obtain informed consent from KP clients
- Avoid collecting identifying information
- Aggregate and summarize data to avoid the identification of individuals
- Secure access to sensitive data and program data (including virtual mapping data)
- Inform clients about platform security risks and how to stay safe
- Remain aware of platforms' terms of use and vulnerabilities



The video above is accessible via APCOM's YouTube channel at: https://www.youtube.com/watch?v=AqXleFJ8_fQ



KEY CHALLENGES

- Limited ICT proficiency (and understanding of risks that come with online presence) among field staff
- Online outreach as a relatively new systematized approach to HIV prevention, thus requiring some getting used to as well as re-adjustment of the existing approaches and systems to accommodate this new approach
- Relatively small (but slowly expanding) “influencer” industry, especially when it comes to social media personalities with knowledge and/or willingness to learn and engage with the topics of HIV/AIDS, sexual health and LGBT
- Mechanisms to track the effectiveness of online posts, in terms of getting people to take an HIV test as well as changing their behaviors towards testing and sexual health



CONCLUSION

- Adapt to stay relevant.
- Go where the target audiences go.
- Make service access appealing and convenient.
- It's not and "either/or" but a "both/and" approach to HIV prevention.
- It's almost always a work-in-progress.