



# HIV

**DISCUSSION GUIDE**

WITH SEX WORKERS

## INTRODUCTION



- This discussion guide is an interpersonal communication (IPC) tool we will use to discuss issues related to HIV prevention, treatment, and risk reduction.
- The guide has an illustration on one side showing people in different situations and on the other side has questions for you, as an outreach worker, to ask to stimulate a discussion and participation among participants.
- Under the questions are talking points and facts you can use to guide discussion with the group.

## CREATING A WELCOMING ENVIRONMENT



- Each participant you interact with should be treated with respect and made to feel safe enough to share their concerns if they wish.
- By providing a supportive environment, it is easier to build trust and talk openly.
- It is vital that you reach all sex workers (SW) in a way that is free from judgment and ensures confidentiality.
- Women who engage in sex work or exchange sex for goods may be less likely to be open about their sexual health needs, so extra sensitivity is needed.
- It is ok if you do not know an answer. Your role is to refer SW to further counseling and services from a trained provider.

## TO PREPARE THE GROUP AND YOURSELF AS A FACILITATOR

- The discussion guide may be used with a group of up to 20 SW (no more than 20) with participants sitting in a semi-circle so they may see the picture OR it can be used for one-on-one discussion.
- It is best not to stand in front of the participants like a teacher since the idea is to facilitate discussion and encourage participants to talk about real life experiences and issues. Rather than lecture, consider yourself a facilitator of dialogue and discussion.
- IPC work requires face-to-face exchange of ideas and information so the best way to facilitate with illustrations is to sit in the circle with participants.
- You should lead the discussion by asking questions and not be the main speaker.
- Where possible, the session should take place in a space with privacy and little distractions, like a closed room.
- Participants should be asked to turn off their phones; otherwise, they will not concentrate on the process.
- Explain to participants that this activity is for them to learn about HIV, to think and consider what actions they should take, and to learn what their peers think, as well. Participation is hoped for and should be strongly encouraged.



# HOW TO USE THIS DISCUSSION GUIDE WITH SEX WORKERS



## HOW TO OPERATE THE FLIP CHART

- Show the picture to the participant(s) and start with the general question “What do you see happening in this picture?” to get the discussion started.
- As the participants answer, follow the discussion with questions that promote more discussion and thoughts about HIV-related issues. Ask more questions to stimulate further discussion.
- Ask follow-up questions to encourage the participants to offer more detail about behavior and any issues they may have.
- Try to ask open-ended questions that will not receive a single word answer like “yes” or “no”, such as “Do we see this in our community”

## MANAGING SESSIONS

- Participants need time to discuss pictures; however, they should not begin repeating each other and/or get “stuck” arguing about what they see. As facilitator, you will need to both ensure they get to share while also managing the group.
- Discussing many photos in one session is not recommended unless the participants have time and you will not see the participants for a long time.

## THE KEY MESSAGES



- These are the take-home messages we want the participants to remember.
- Ideally, most key messages come up and are discussed through the participation.
- If they do not, you should mention them.
- Use this section’s information to answer questions or make points that haven’t already come up in the discussion. These are the key points each participant should walk away with.



## GETTING EVERYONE TO PARTICIPATE

- People participate in different ways, some through speaking frequently and some through occasional contribution. Remember not to let anyone dominate the conversation and keep an eye out for the more quiet person who might need extra encouragement to make their contribution; often, just by asking if they have anything to add will enable them to open up to the group.
- Ask others if they agree with the responses given.
- Do not let one or two people talk at a time.
- Ask a question directly to a different person each time.
- You may address an issue by asking the group “ Does anyone else have a different viewpoint?”
- Ask the group if they see these issues and behaviors in their community



## BEING A GOOD LISTENER

- Don’t be judgmental or moralistic about the discussion or what people say.
- Most of the questions have no right or wrong answer, but, rather are designed to promote discussion and participation.
- The idea is to get participants to think about their behavior and choices and learn from and support each other through the discussion



## ARE YOU AT RISK?



### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- What could go wrong for her?



### KEY MESSAGES

- Sex workers are at a higher risk of being infected with HIV due to exposure to multiple sexual partners and inconsistent condom use.
- Sex workers sometimes work in unsafe locations with violent clients.
- It is not easy for some to negotiate condom use because of different circumstances.
- It is important for everyone to have a safety plan when engaging with clients.



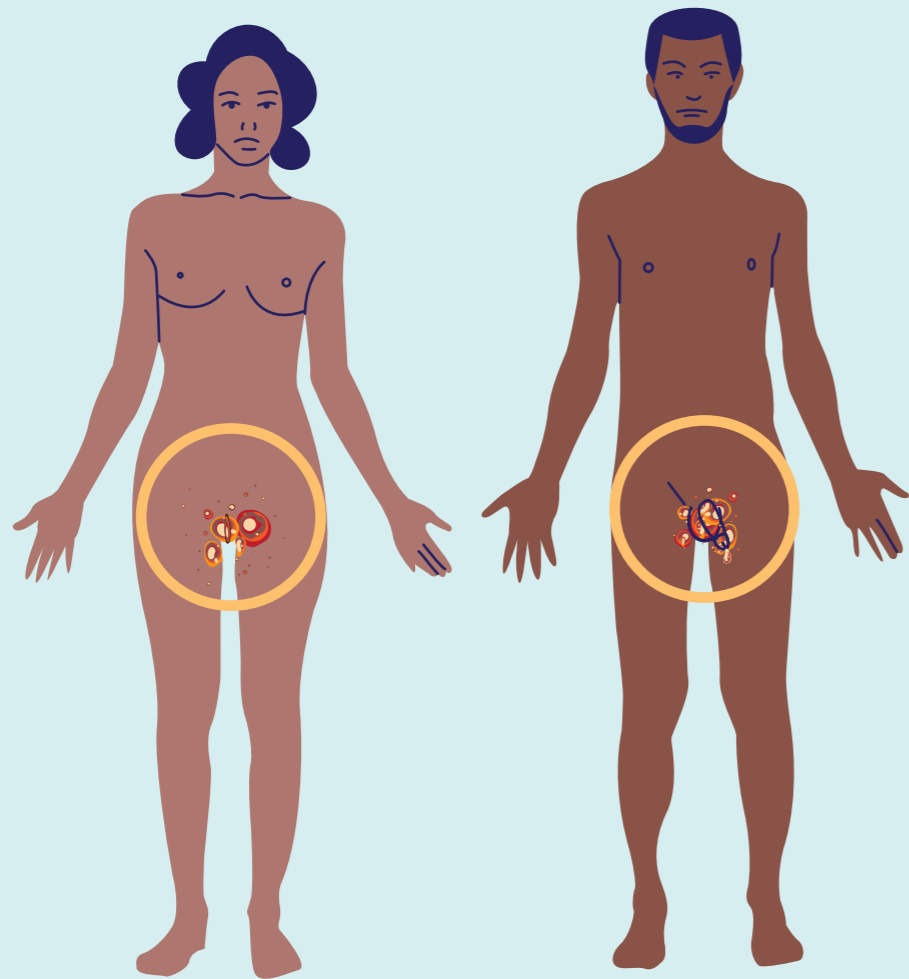
### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- How can we best protect ourselves from infection if we engage in anal sex?

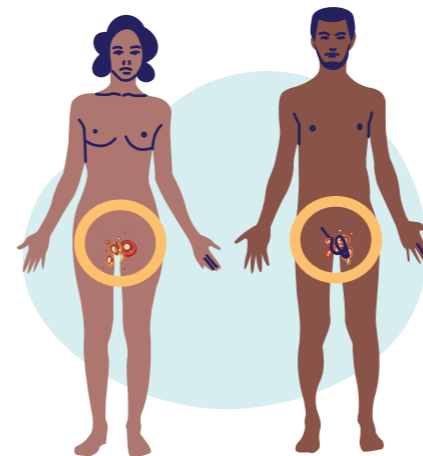


### KEY MESSAGES

- The risk of getting HIV through anal sex is greater than vaginal sex.
- No natural lubrication in the anus.
- Always use a condom and water-based lubricant when engaging in anal sex.
- Do not use oil-based lubricants.



## SEXUALLY TRANSMITTED INFECTIONS (STIS)



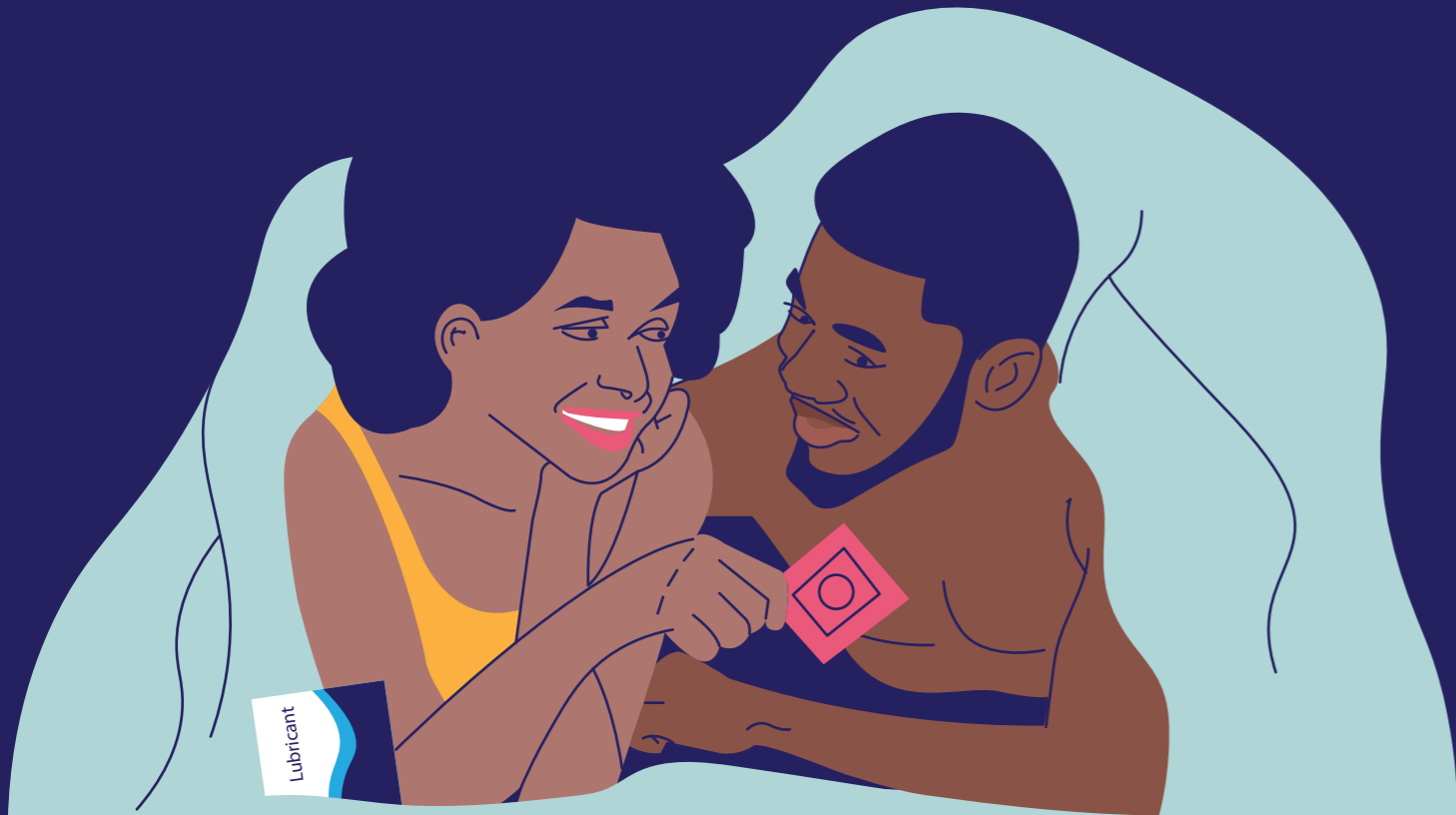
### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- What do you know about STIs?
- How do you know you have an STIs?
- How can we protect ourselves from STIs?
- What are some of the most serious consequences of untreated STIs?



### KEY MESSAGES

- STIs are contracted through sexual contact (vaginal, oral and anal sex).
- STI symptoms include: abnormal discharge, swelling, frequent or burning urination.
- You can have an STI without feeling sick or having any of the symptoms but still you can pass the STI to someone.
- Seek medical treatment before you have sex again.
- Finish all you prescribed medication.
- Go for an STI screening monthly at any facility.
- Always use condoms and lubricants correctly and consistently to avoid getting STIs.



## CONDOM AND LUBRICANT USE



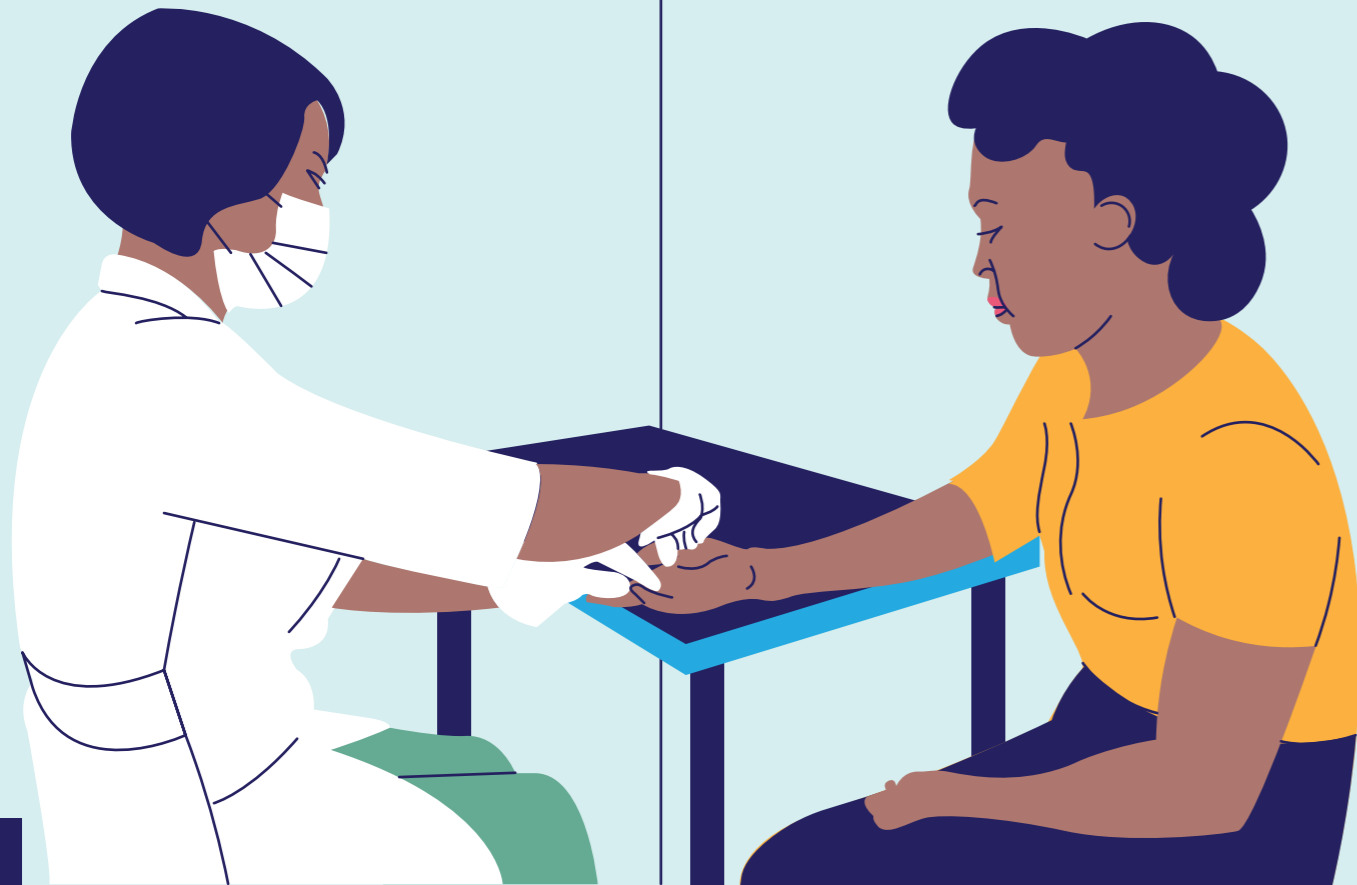
### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- Why is it important to use a condom with your regular client?
- What skills do we use to convince clients / make sure consistence condom and lubricant usage?



### KEY MESSAGES

- Condoms (used together with water-based lubricant) reduce the chances of contracting STIs, un-intended pregnancies and HIV.
- Consistence and correct condom use with every sexual partner is important to prevent any new infection.
- Always negotiate condom use with your client before engaging in sexual activity.
- Use different negotiation skills to negotiate condom use even if they offer more money for not using a condom.
- You should use both female and male condoms with lubricants as they are available for your options.



## HIV TESTING SERVICES (HTS)



### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- Why is it important to know about your HIV status?
- What are some of the barriers for sex workers accessing HIV testing services?
- What do you think a negative or positive result will mean to you?



### KEY MESSAGES

- It is important to know your HIV status so you can take care of yourself according to your status.
- You should also encourage your partner(s) to know their HIV status.
- HIV Counselling helps you prepare for the HIV results.
- There are different approaches to HIV testing like HIV self-testing and couples testing.
- HIV self-testing is convenient and confidential for those who would prefer to not go to a health facility.
- Knowing your HIV status links you to HIV treatment and/or all preventive packages.





### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- What do you know about HIV Self-testing?
- Can you do HIV self-testing when you are on HIV treatment



### KEY MESSAGES

- HIV self-testing is an oral fluid based HIV test you can do with or without assistance of a health care provider, as you can follow the simple instructions.
- It only takes about 20 minutes to get results.
- It gives you privacy, confidentiality and it is convenient.
- If you screen HIV positive, go to nearest facility for HIV confirmatory test.
- If you are HIV negative, access HIV preventative packages (PrEP, Condoms).
- It is not recommended for people in HIV treatment because it might give a false negative result.



## PRE-EXPOSURE PROPHYLAXIS (PREP)



### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- What do you know about PrEP?
- Who is PrEP meant for?
- How effective is PrEP for preventing of HIV?



### KEY MESSAGES

- Pre-exposure prophylaxis (PrEP) is a daily pill that can help a HIV negative person stay negative.
- It is for all people who are HIV negative and are at high risk for being infected by HIV.
- It is initiated by a nurse and is taken daily during the time of being at risk of getting HIV.
- You can start and stop PrEP as needed.
- PrEP become effective after 7 days of starting and if you decide to stop, you should talk with your nurse and you will have to take it for 28 days after the last sex exposure.
- PrEP does not protect against STIs or pregnancy.
- It should be used in combination with other prevention/family planning options as needed.



## ART - ANTIRETROVIRAL THERAPY



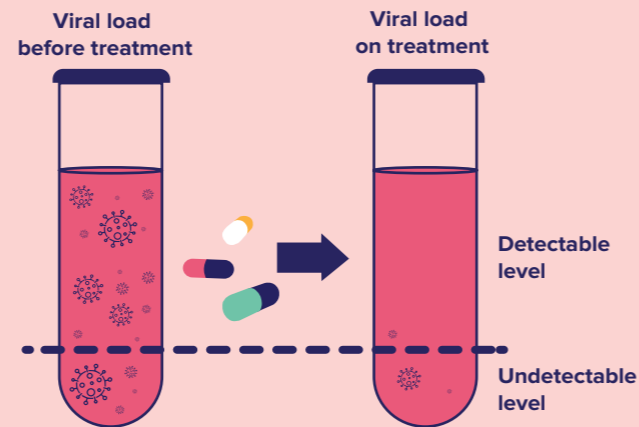
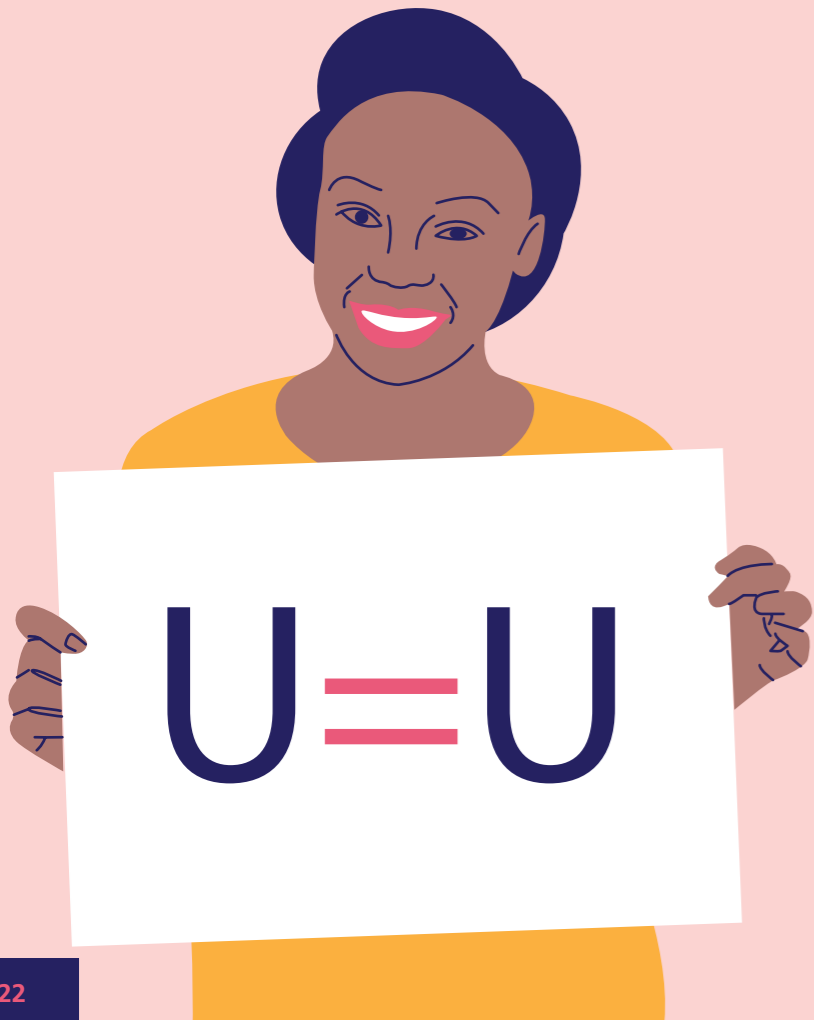
### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- Why is it important to take your HIV treatment as prescribed by the healthcare worker?
- What can you do to make sure you remember taking your HIV treatment?



### KEY MESSAGES

- Anti-retroviral therapy (ART) is a combination of ARVs used by HIV positive clients.
- Once you start ART, it should be taken for life.
- If taken daily as prescribed the medicine is effective in suppressing HIV, keeping the client healthy and reducing the risk of HIV transmission to a partner. This is known as undetectable (virus) which is untransmittable (U=U) and will be discussed below.
- Remember there is no cure for HIV but ART is the treatment to keep you healthy.
- You should start your ART as soon as possible to keep health, don't wait until the virus destroys your body cells.
- Get a HIV treatment supporter to remind and encourage you as you continue talking your HIV treatment.
- It is also important to set a time reminder to make sure you do not forget taking your treatment daily.

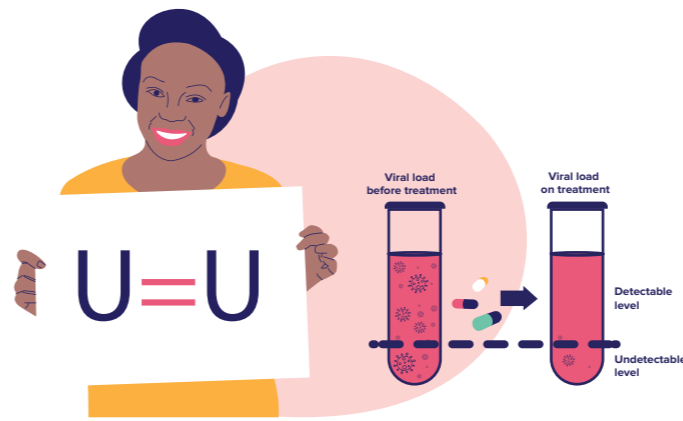


# UNDETECTABLE EQUALS UNTRANSMITTABLE U=U



## KEY MESSAGES

- Studies have shown that a person living with HIV (PLHIV) who has undetectable viral load does not transmit HIV to their sexual partners.
- U=U means if you take your treatment correctly you get to a point where the virus is undetectable and therefore untransmittable to other people.
- Undetectable viral load is when someone is on ART and the virus in their body is so low that standard blood tests cannot detect it.
- This does not mean the virus is no longer in the body, once you stop ART, it starts to multiply again.
- It is important to check your viral load and know your results.
- Viral load should be checked by health care provider at six months after starting treatment.
- Having an undetectable viral load prevents HIV transmission but does not protect against other sexually transmitted infections (STIs) or unintended pregnancy. Use a condom to prevent them.
- Tell your partners and others who live with HIV on



## YOUR QUESTIONS TO PARTICIPANTS?

- Have you heard about U=U?
- What do you think it means if the HIV virus is undetectable?
- What does it mean the HIV virus is untransmittable?
- Do you think people should know their HIV viral load results?



## PREVENTION FROM MOTHER TO CHILD TRANSMISSION (PMTCT)



### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- What is PMTCT?
- Why is it important to go for antenatal services and checking your HIV status?
- If we test positive for HIV, what can we do to lower our chances of passing HIV to our babies?
- What are the benefits for mothers and babies to go for PMTCT?
- Why is it important for the mothers to take their ART?



### KEY MESSAGES

- PMTCT is prevention of transmitting of HIV from the mother to her baby.
- This include taking ART during pregnancy for HIV positive mothers to make sure they are not transmitting the virus to the baby.
- For HIV negative mothers, PrEP should be taken during pregnancy and breastfeeding to prevent getting HIV.
- Mothers should consistently visit a health facility during pregnancy.
- Mothers should also use condom and lubricants when pregnant.
- Your baby's health is your responsibility.
- For HIV positive mothers, the baby will be tested within six week after birth. If the baby is positive, he/she will start HIV treatment.
- Babies who test negative, but their mothers are positive, will be on treatment for seven days post birth.



## PMTCT FOLLOW-UP VISITS



### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- Why is it important that mother and baby go for regular follow ups after birth?
- What are the benefits of family planning for us?
- Should the mother breastfeed her baby?
- What other options, instead of breastfeeding, are available?



### KEY MESSAGES

- Take your child for follow-ups for growth monitoring and for immunization.
- Exclusively breastfeed your baby for six months before introducing appropriate complementary foods.
- Consult your healthcare provider for other breastfeeding options.
- Enroll for family planning to prevent unintended pregnancy.
- Openly discuss your lifestyle with your healthcare provider for advice.
- Remember for HIV negative mothers, PrEP should be taken during pregnancy and breastfeeding to prevent getting HIV.
- Mothers who are HIV positive should start taking ART immediately when diagnosed.



# FAMILY PLANNING AND ITS BENEFITS



## KEY MESSAGES



All women, including: young women, women with HIV, and women with disabilities can all benefit.

### Benefits to woman (including adolescents):

- Allows choice about if, when, and how many children to have.
- Regains her strength after childbirth.
- More time for baby and to care for the family.
- Prevents unwanted/unplanned pregnancy with partners or clients.

### Benefits to baby:

- Born healthy and strong.
- Breastfeeds for a longer period and grows well.

### Benefits to family:

- More resources for food, clothing, housing, and education.

### This to keep in mind as you decide family planning:

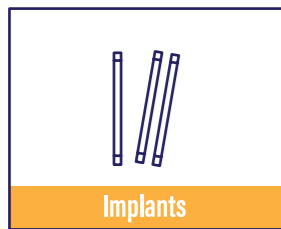
Mothers and babies are healthier if women and girls:

- Wait until they are 18 and above to get pregnant.
- Wait 2 years after a birth before trying to get pregnant again.
- Wait 6 months after a miscarriage or abortion to get pregnant.
- Have their children before age 35.
- Know their HIV status so they can start treatment soonest to prevent infecting their babies.
- Young women who delay getting pregnant are more likely to finish school.

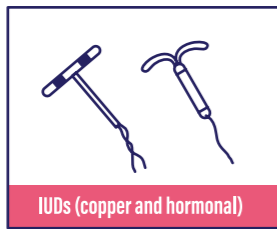
Consult a health care provider for more information and options.

## YOUR QUESTIONS TO PARTICIPANTS?

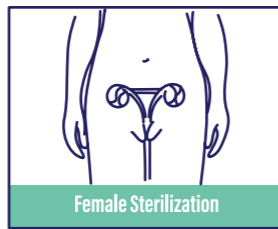
- What do you see from these photo?
- Why is family planning important?
- What are the benefits of family planning to women?
- What are the benefits to the baby?
- Why is it important for FSW to know and use family planning?



Implants



IUDs (copper and hormonal)

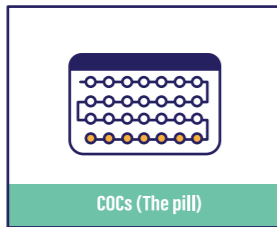


Female Sterilization

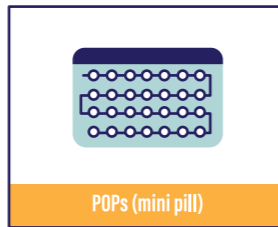
- Most effective methods
- No need to remember anything



Injectables



COCs (The pill)

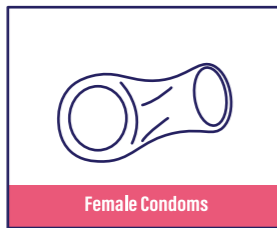


POPs (mini pill)

- Must get injections on time or remember to take a pill each day



Male Condoms



Female Condoms

- Only methods that protect against both pregnancy and STIs/HIV.
- Are effective ONLY if used correctly and consistently every time you have sex.

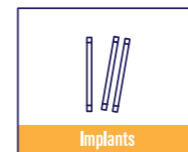
### REMEMBER

Emergency contraceptive pills (ECPs) can be taken to prevent pregnancy up to 5 days after unprotected sex. ECPs are not a replacement for regular methods. Keep some on hand—just in case.

LAM is a temporary option for breastfeeding women.

SDM is a fertility awareness method; it requires regular cycles and avoiding sex or using condoms on fertile days.

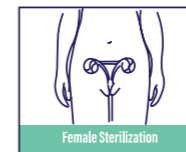
## CHOOSING A FAMILY PLANNING METHOD



Implants

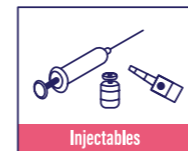


IUDs (copper and hormonal)

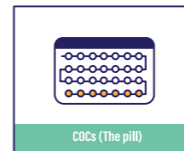


Female Sterilization

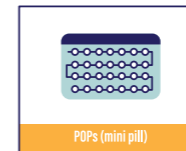
- Most effective methods
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Injectables



COCs (The pill)



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LAM is a temporary option for breastfeeding women.

SDM is a fertility awareness method; it requires regular cycles and avoiding sex or using condoms on fertile days.

### YOUR QUESTIONS TO PARTICIPANTS?

- What do you see from this picture?
- Which family planning methods do you know?
- Have you used any family planning methods before?



More protection



Good protection from pregnancy; and, if partner cooperates, HIV and other STIs



Good protection from pregnancy and HIV; but, no protection from other STIs



Less protection

## HOW BEST TO AVOID PREGNANCY, HIV, AND OTHER STIS

More protection



Good protection from pregnancy; and, if partner cooperates, HIV and other STIs



Good protection from pregnancy and HIV; but, no protection from other STIs



Less protection

### YOUR QUESTIONS TO PARTICIPANTS?

- Which family planning methods do you think are best for FSW?
- How can you prevent STIs and HIV when using family planning contraceptives?



## ALCOHOL AND DRUG USE AND RISKY SEXUAL BEHAVIOR



### YOUR QUESTIONS TO PARTICIPANTS?

- What is happening in this picture?
- How does alcohol and drugs put sex workers at risk of HIV?
- Why do we use alcohol and drugs when working?
- What can we do to ensure our health and safety?



### KEY MESSAGES

- Drugs and alcohol make sex workers have confidence or energy.
- Alcohol and drugs use clouds judgment or cause and people can make unsafe decisions and engage in risky sexual behavior.
- Alcohol and drugs use increases the risk of violence.
- Avoid isolated places to have sex and make sure your network of friends know where you are going with a client.
- Share with your network the names of aggressive clients.
- Intimate partner violence survivors are more likely to experience higher rates of health problems and perceive their overall health as poor.



## VIOLENCE PREVENTION AND RESPONSE



### KEY MESSAGES



Violence is:

- A human rights violation and should stop.
- Increases HIV risk.
- Decreases testing uptake and disclosure.
- Decreases adherence to ART.
- Any form of violence that is directed at an individual based on biological sex, gender identity (e.g., transgender), or behaviors that are [perceived as] not in line with social expectations of what it means to be a man or woman, boy or girl.
- It includes physical, sexual, and psychological abuse; threats; coercion; arbitrary deprivation of liberty; and economic deprivation, whether occurring in public or private life.
- Some people experience violence from their partners, and is known as intimate partner violence.
- It is important to report any form of violence to an Outreach Worker, or health care worker, or at SWAGAA or at the police DCS unit. You can also SMS "SWAGAA" to 8500 or call a helpline at 951.
- If you know people that are experiencing violence please encourage and support them to report.
- If you are HIV negative and experiencing violence with your partner, please use PrEP to protect from getting HIV.

### YOUR QUESTIONS TO PARTICIPANTS?

- What do you see from this picture?
- What do you understand by violence or GBV?
- Do you think people seek help when experiencing violence?

## ACKNOWLEDGEMENTS

This document was initially adapted from C-Change(Communication for Change MSM and SW Picture codes), Windhoek, Namibia. It was later modified for use by the Eswatini KP program under the Ministry of Health, through support from Health Communication Capacity Collaboration (HC3) and has been further modified and supported by Family Health International (FHI) 360 through support from the USAID. Special thanks to the committee who worked on the adaptation and Rock of Hope for coordinating. The final design layout and artwork of this material was through the generosity of the Coordinating Assembly of Non-Governmental Organizations (CANGO) through Global Fund support.

