

# MODELS OF HOPE



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## BACKGROUND:

Adherence is essential to a good ART treatment outcome. Factors that affect adherence revolve around the quality of ART services, including client waiting time, provider-client relationship, stigma, and health provider workload.

In Ghana, staff attrition at the Komfo Anokye Teaching Hospital (KATH) ART center had resulted in suspending the enrollment of new clients for ART services. In June 2005, the USAID funded SHARP project, led by the Academy for Educational Development (AED), supported the training and recruitment of HIV+ Peer Counselors (HPC) to support ART service delivery at KATH.

## DESCRIPTION:

At the time of the intervention, KATH had 1,200 clients on ART. Out of 30 PLWHA trained in ART adherence counseling, 12 were selected as volunteer peer counselors and then integrated into the hospital setting to support service delivery. The intervention was evaluated after nine months by conducting interviews with 12 health facility staff, 260 clients, and 10 peer counselors.

*"When I tested HIV positive, I lost all hope and I planned to kill myself. Even when I was brought to KATH, I did not believe the drugs could save me until one of the peer counselors shared her own experience with me. That helped me change my mind about ending my life and after taking her counsel, I now feel very good".*

*-ART Client*

*"(New clients who observe the interaction between the peer counselors and the staff know that) we do not stigmatize HIV patients at this place."*

*-KATH health staff member*



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*“(The peer counselor)...  
helped de-stigmatize  
HIV and I can now  
move around freely.”*

**-ART Client**

*“They have helped  
extremely to reduce the  
counseling workload  
on me, so I can do  
something else.”*

**~KATH health staff  
member**

*“Because they are  
also positive; they  
do not discriminate,  
they mingle well  
with the staff and  
help in running the  
clinic; they explain  
issues of  
discrimination to us  
and give us hope.”*

**-ART Client**

## **KEY FINDINGS:**

1. Using ART clients as peer counselors improves the quality of ART services:
  - Clients are highly satisfied with the counseling and psychosocial support services offered by peer counselors.
  - The physical presence of the peer counselors helps to reduce HIV/AIDS-related stigma in the health facility setting.
  - Volunteer peer counselors help to reduce the workload of health facility staff, enabling them to provide better quality services to clients.
  - Peer counselors serve as role models, increasing clients' self-efficacy and positive attitudes towards ART adherence, and giving them hope that they can lead longer and healthier lives.
2. Volunteer peer counselors report high job satisfaction and higher self-efficacy in living with HIV/AIDS.

## **RECOMMENDATIONS:**

1. Programs in resource limited countries should use the HIV+ peer counselors to complement their health facility staff in ART service delivery.
2. Programs using volunteer peer counselors should engage health facility staff, the peer counselors themselves, and the clients in identifying appropriate volunteer incentives (e.g. transportation, additional training, free medications or health insurance, modest allowances, etc.).

## **FINDINGS:**

### **a. High client satisfaction**

Most ART clients rated the various services they received from the peer counselors as excellent or very good (Figure 1); the services that clients most frequently mentioned were psychosocial

*"The clients now know that the drugs really work after seeing the peer counselor."*

*-KATH health staff member*

*"They have compassion since they are part of us. Waiting time is reduced."*

*-ART Client*

*"The presence of the peer counselors augments the counseling messages of the nurse counselors."*

*-KATH health staff member*

*"(We) know that if one adheres to treatment, one can live long and healthy."*

*-ART Client*

counseling, adherence counseling, and clerical support related to retrieving client records and files.

Ninety-five percent (95%) reported that they would like the peer counselors to continue providing their services.

### **b. Reduced stigma in hospital setting**

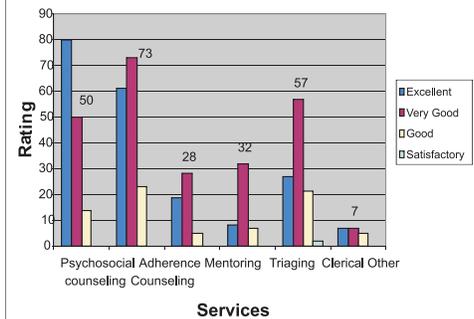
Both health facility staff and clients reported that the presence of the HIV+ peer counselors had a beneficial effect on stigma.

The overwhelming majority of clients (90%) said stigma has reduced in the clinic since the peer counselors began their work:

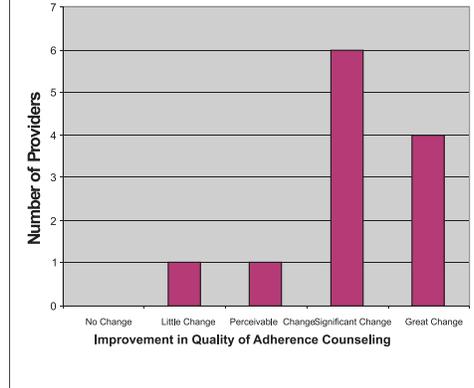
### **c. Reduced Workload/ improved quality of services by health facility staff**

The majority (9 of 12) of health facility staff, described their work prior to the peer counselors' presence as "hectic" or "very hectic", and

Client Rating of Services Received from Peer Educators



Provider Perception of Improvement in Quality of Adherence Counseling due to Peer Counselors





*“Because they are also positive; they do not discriminate, they mingle well with the staff and help in running the clinic; they explain issues of discrimination to us and give us hope.”*

*-ART Client*

reported that their workload has reduced and the quality of their counseling services has improved as a result of the support provided to the clinic by the volunteers. Most of the health facility staff perceive that the quality of adherence counseling has improved significantly (Fig.2).

**d. Peer counselors increase self-efficacy of clients by providing positive role models for adherence**

Both health facility staff and clients observed that the presence of peer counselors provided a positive role model that improves clients' attitudes to ART:

*“(They) make us realize that one can live healthily with HIV/AIDS.”*

*“They give hope and strength.”*

*“They give encouragement.”*

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