This research identified various barriers impeding access to legal services by key populations in Nigeria from a community perspective.

**BACKGROUND**

- The 2014 Nigerian Integrated Biological and Behavioral Surveillance Survey showed that key populations (KPs) are highly impacted by the HIV epidemic in Nigeria.
- Female sex workers (FSW) had a prevalence of 22.9%; men who have sex with men (MSM): 19.4%; people who inject drugs (PWID): 3.4%.
- Violence against KPs, coupled with a lack of an enabling environment to seek services, can be a potential contributor to poor uptake of HIV and other STI services.
- A 2014 study found prevalence of violence against FSW in Nigeria to be 52.5%. Sexual violence was most common (41.9%), followed by economic violence (37.7%), physical violence (35.7%), and psychological violence (31.9%).
- Data from TIERS Nigeria between December 2015 and November 2016 showed that LGBT persons, a substantial number of whom are considered KPs, are victims of violence such as arbitrary arrest, invasion of privacy, blackmail and extortion and battery and assault.
- In spite of the high prevalence and evidence of extensive sexual networks among KPs, HIV programs in Nigeria have been slow to address KPs in the provision of legal services.
- Heartland Alliance International (HAI) through the Enhancing Key Population Intervention in Nigeria (EKPIN) Project.

**METHODS**

**PROCEDURES/INTERVENTION**

- A quantitative survey was used to collect information on challenges, concerns, and potential solutions regarding peer-led HIV prevention, treatment, care and support programmes. Data on access to legal services is highlighted here.
- 488 KPs (FSW-188, MSM-145, and PWID-155) from Enugu, Nasarawa, Benue and Akwa-Ibom States participated in the questionnaire survey. See figure 1 below.

**CONCLUSIONS**

Identified challenges that affect the provision of legal services as part of HIV-related care and support services vary by population. However, a lack of funding for access to justice services is a major concern for all KPs. Lack of access to justice is a potential barrier to accessing HIV services, and there is a dearth of HIV programs in Nigeria that integrate the provision of legal services to address violations and abuses to KPs. It is recommended that HIV programs for KPs integrate a holistic approach to healthcare that allocates increased funding to improving access to justice for survivors of violence. More research should also be dedicated to further understanding the ways in which human rights violations and lack of access to legal services effects HIV programming.