



# INTEGRATED MOST AT RISK POPULATIONS HIV PREVENTION PROGRAM (IMHIPP)

In Nigeria's fight against HIV, extremely marginalized communities face unique health challenges that require a tailored human rights-based response. Men who have sex with men (MSM), female sex workers (FSW), and people who inject drugs (PWID) are considered key populations (KP) because they are at particularly high risk of HIV infection. The rates of HIV amongst KP (22.9%, 14.4%, and 3.4%, respectively) are significantly higher than that of the general population (1.4%).<sup>1,2</sup> Although KP account for nearly 32% of new HIV infections in Nigeria, they receive little attention from healthcare providers and social service agencies.<sup>3</sup>

In 2009, Heartland Alliance International (HAI) with support from USAID launched a large-scale effort to bring high quality and stigma-free HIV prevention services to some of Nigeria's KP. Through HAI's Integrated Most At Risk Populations HIV Prevention Program (IMHIPP), HAI provides comprehensive services in 25 clinics across seven states in Nigeria.

## WORKING AT THE INTERSECTION OF HEALTH AND HUMAN RIGHTS

KP in Nigeria are often extremely difficult to reach for critical testing, care, and treatment services. Significant barriers contribute to KP's increased vulnerability to HIV/AIDS including stigma, discrimination, police harassment, and insufficient community-based capacity. To overcome barriers to care, IMHIPP established One Stop Shop (OSS) health centers that provide wrap around services to KP in a stigma-free environment. Services include:

- HIV and STI testing
- Screening for TB and other illnesses such as malaria and cervical cancer
- Mental health and psychosocial support
- Harm reduction
- Technical and institutional capacity strengthening
- Prevention and response to gender based violence
- Legal representation and sensitization of law enforcement

## PROVIDING MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Due to the unique challenges and stigma faced by KP in Nigeria, individuals who receive care through IMHIPP frequently need mental health and psychosocial support to be successful with their medical treatment. IMHIPP engages professional psychologists to work directly with participants through one-on-one sessions in community clinics. Psychologists also promote support groups, providing an important opportunity for community building amongst affected groups.

## PROMOTING GENDER EQUITY AND ACCESS TO JUSTICE

In Nigeria, KP are disproportionately impacted by societal discrimination, gender-based violence, and police harassment. When KP are arrested on arbitrary grounds and placed in a discriminatory legal system, HAI is on the frontlines responding to their urgent needs. In 2009, HAI began training KP community members to provide legal support and serve as paralegals in their communities.

## BUILDING LEADERS AND ORGANIZATIONS

When IMHIPP launched in 2009, sex worker organizations or networks did not exist. HAI believes the most responsible and comprehensive response to human rights abuses must include and engage with the individuals who are affected by the abuses themselves. IMHIPP was designed to engage KP representatives, build their capacity, and greenhouse KP-led organizations. IMHIPP builds their capacity to bring services to their peers, and to grow their own autonomous organizations.

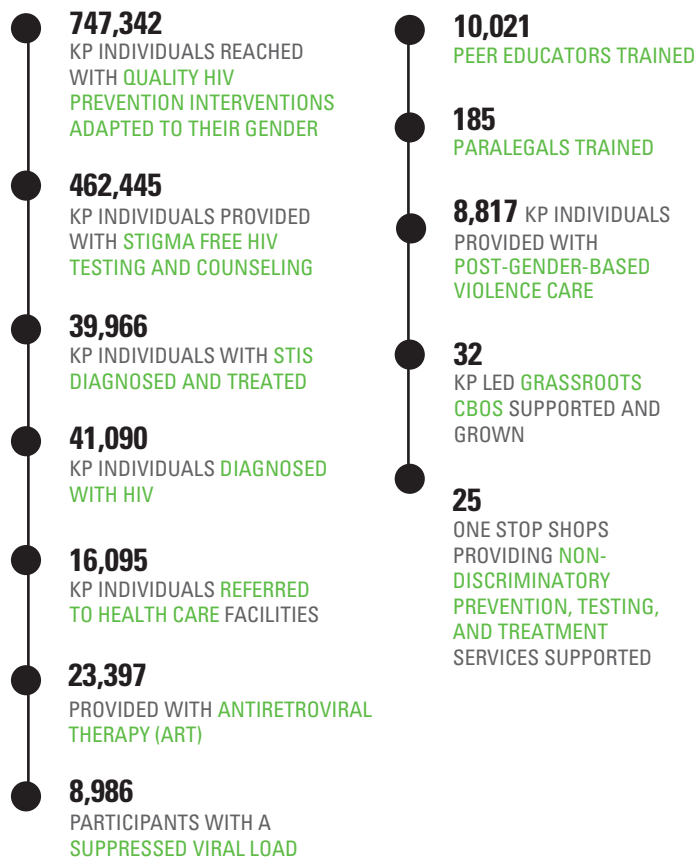
## UNITED NATIONS PROGRAMME ON HIV/AIDS (UNAIDS)

### 95-95-95 TARGETS TO END THE AIDS EPIDEMIC BY 2020

- 95% of people living with HIV will know their status.
- 95% people who know their status are on antiretroviral therapy.
- 95% of people on antiretroviral therapy achieve viral suppression.



## SINCE 2009, HAI BY THE NUMBERS



## SINCE 2009, HAI HAS MENTORED



**Undetectable = Untransmittable (U=U)** states that when people living with HIV are on antiretroviral therapy and maintain an undetectable viral load, they cannot transmit the virus during sex. **In 2018, 85% of IMHIPP participants achieved an undetectable viral load.**

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