

# Results of piloting of Peer Driven Intervention – did we reach targeted population?



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## Introduction

Estimated number of injecting drug users (IDU) in Georgia is considered to be 40 000 (1). With increasing numbers of Female Drug Users (FDU), who are presently not reached and/or underserved by prevention and treatment programs, there is a growing need for interventions that target FDUs, bring and retain them into services and communicate important harm reduction information into the community. Our experience has been shown that outreach model is not effective in time for reaching out of IDUs including young injectors and female drug users' population.

In 2010 y Georgian Harm Reduction Network piloted Peer Driven Intervention (PDI) model among IDUs. This intervention were done in 6 cities.

## Aim

- Increase number of covered IDUs who never had contact with HIV/AIDS related services;
- Requite young injectors and female drug users into HIV/AIDS prevention services.

## Method

This model uses chain-referral system. All respondents are offered modest rewards and are eligible to serve. Drug users are invited to educate their peers in the community and recruit them in to a harm reduction services. PDI participants were screened for eligibility and asked to give informed consent when they arrived at the harm reduction centre. Then brief training on recruitment and education in the community were provided by PDI consultant. Respondents who agreed to recruit were provided 3 coupons. "Peer Recruiters" subsequently used these coupons in recruiting IDUs in their networks, which met the inclusion criteria. They were instructed to give coupons only to those IDUs who they have convinced to participate in the intervention. In addition, they were instructed to convey the health information that they received themselves during their own interview and health education session. A key feature of the PDI is that it puts the burden of identifying and recruiting eligible study participants and of conveying credible health information in their

## Method

communities on those with the most up-to-date information about the drug scene—active users—rather than on professional project staff who access active drug scenes from the outside.

The coupon system plays an important role in managing and administering of the PDI, and in the collection of network data for farther analysis. It gives opportunity to track the sample as it develops and to calculate the rewards that respondents earn with their recruitment efforts. The coupon management system uses unique numeric code of coupons, which gives ability to identify coupon referral chain and recruitment vector (see picture below).

An interview guide and eight health education modules were developed in advance. Education modules covered topics such as: "Window" period of HIV, 4 main safe injection methods, 3 reasons of opiate overdose and first aid during overdose, stimulant use and harm, re-infection, hepatitis A/B/C, available HIV/AIDS prevention and other services into your city. The entire session was about 50-70 minutes. When recruiters returned to the project to collect their rewards, they were re-administered the same knowledge test.

Statistical analyses of 7 piloting sites were done separately in Rdsat v.6 and one united data base was created to analyse in SPSS v.16.

## Results

During the 4 months intervention the total sample size of recruited IDUs were 815, while in 2009 the number of newly recruited IDUs consisted of 2168. The age range of covered IDU population was 18-65 (Mean-28.7; STD=XX;). The number of recruited women IDU were 17, while in total year of 2009 their number were 22.

42% of respondents has been completed school, 8% did not completed school and 25% completed university. Unfinished university and students composed - 25% of respondents. Regarding health educational component and the following testing, the average indicator of right answers were 6 out of 8.

Unemployment rate is quite high and equals to 81.6%, while employment rate is 17.7%, pension receives 0.1% and others refused to answer. Vast majority of respondents (65.4%) never have tested on HIV/AIDS. All respondents underwent anti-HIV, HCV and HBV rapid testing. Result of testing see on a chart.

Respondents who shared needles/syringes out of them 18.9% shared with more then one person.

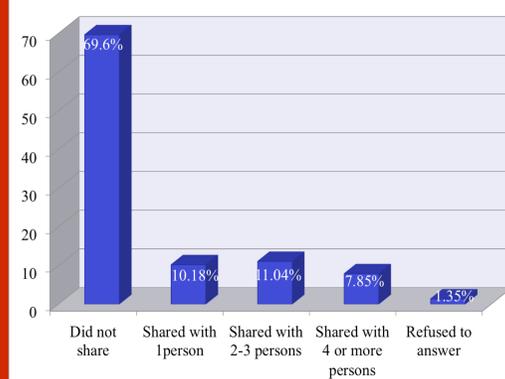
## Conclusions

The PDI was able to recruit significantly more IDUs to receive HIV information and testing rather than traditional outreach. With this intervention it is possible to reach the desired target population in a short period of time as well as implement educational intervention for which drug users themselves are involved.

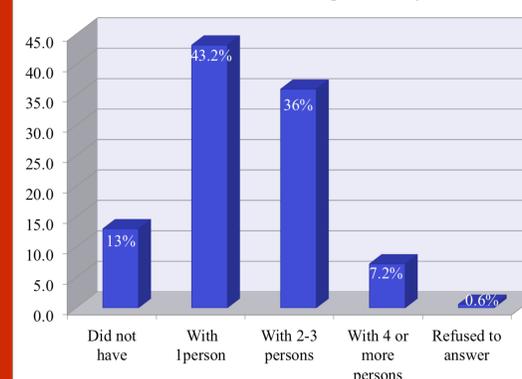
## References

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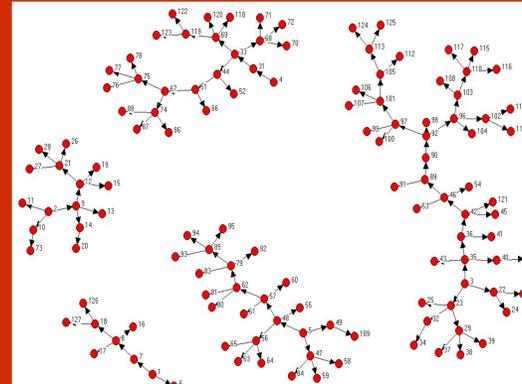
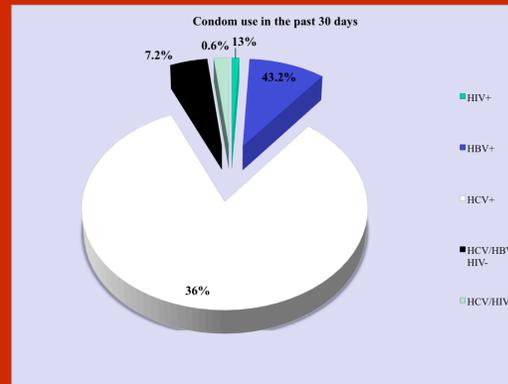
Sharing of needles and syringes in the past 30 days



Sexual behavior in the past 30 days



Condom use in the past 30 days



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