Setting Targets for Tingim Laip 2013, 2014, 2015 Revised July 2013



Background:

□ PNG NHS 2011 – 2015

TL has spent the last two years re-establishing a firm base for the work it is doing with members of key affected populations. This has involved:

Developing a more comprehensive model for interventions (the STEPs Model) that sets out how TL staff and volunteers will work in both HIV prevention and care. This is line with WHO, UNAIDS, APNSW and UNFPA HIV and other STI combination prevention guidelines for sex workers – both good practice and technical recommendations. □ Sharpening TL's focus on key populations in accordance with recent NHS 2011 – 2015 midterm review report and PNG's Comprehensive Condom Programming Policy. This has involved comprehensive mapping and consultation exercises in each project location to guide restructure and refocussing of project activities. □ Developing an M&E framework and toolkit so that volunteers properly record their activities and data collection is aligned with PAC systems so that work in provinces contributes to the overall provincial report. ☐ Improving the quality and intensity of interventions at site level. Based on the recommendations of TL's first independent review in March 2012, TL's primary priority for 2013 was to restructure its work in all project locations to ensure alignment with: ☐ Key recommendations from TL's Independent Review □ UNAIDS, WHO, NSWP and UNFPA good practice and technical recommendations for HIV and STI combination prevention guidelines for sex workers

By June 2013, TL had successfully restructured more than half of its existing work locations (Madang, Lae, Markham, Goroka, Mt. Hagen, Jiwaka and Oro) and commenced work in one new location (Daru). This included a comprehensive mapping and consultation process in each location that had led to: sharper focus on key populations; restructuring of TL workforce to ensure greater participation of key populations; prioritising peer-led interventions; strengthening interventions across the range of prevention to care services presented in TL STEPs model; testing alcohol reduction approaches in select project locations; and strengthening partner linkages.

In 2012, TL developed specific output targets for a range of indicators. In setting the new targets, TL made a series of assumptions so that targets were too ambitious. TL has revised targets to reflect findings of micro-mapping and project restructuring as well as recent guidelines put forward by NACS, AusAID and HHISP around optimal reach and STI and VCT referral rates.

This document presents the revised output targets for TL's work 2013, 2014, 2015. Please note that only national targets are presented here. Detailed break-up of targets for each project location can be provided by the Tingim Laip national office.

Setting targets:

With the improvement of TL's data collection systems as well as intense and detailed micro-mapping
in each project location, TL is now in a better position to set realistic targets for the next three years.
These targets are based on the following:

An analysis of information collected during the micro-mapping and strategies developed fo each project location.
Estimates of increased activity that will come from the appointment of casual paid workers (field officers) in each location
Guidelines on Contact, Outreach and Coverage presented by NACS, AusAID and HHISP in 2013

Assumptions behind targets:

In putting these targets together, we are assuming the following:

risk population, where this is appropriate.

Ш	Volunteer: peer ratio = 1:15
	Field Officer: peer ratio = 1:20
	12 Project Officers supervision of a total of 20 locations in 2013
	Up to 10 active KAP volunteers in each location (with an average of 8)
	Initial output achievement target will be set at 50% of target in accordance with NACS,
	AusAID and HHISP guidelines
	An increase in overall volume of activities of 20% between 2013 and 2014 and 10% between 2014 and 2015
	Improved accuracy of reporting by volunteers, identifying the men reached as mobile men
	with money (migrant workers, traders, land owners) rather than as 'general population' and
	women regularly engaged in transactional sex who do not self-identify as sex workers as at

Target populations:

Based on standardised volunteer recruitment, selection, training and performance monitoring system as well as recent micro-mapping exercises, TL now has detailed strategies for each project location identifying target populations and workforce in each location. With this information, along with NACS, AusAID and HHISP guidelines, TL has been able to determine target populations for each project location as presented in Table 1. These are the number of unique individuals that TL will target through its interventions.

Volunteers

These are individuals from key populations who have been recruited, inducted through the relevant TL processes, equipped with the relevant competencies and engaged in their community/specific project locations to conduct peer-based prevention and care activities. Volunteers form the largest part of the TL workforce. TL expects to recruit up to 150 Volunteers in the 10 provinces where it works. Each Volunteer is required to register from within a defined geographic location an optimal number of up-to 15 peers, engage and work with 15 peers over the full range of HIV services promoted by TL over an 18-month period. In some project locations, volunteers recruited by TL are members of existing KAP networks e.g. Kapul Champions, Friends Frangipani and Igat Hope. Volunteers implement outreach activities and report directly to TL.

Field Officers

Field Officers work with specific people from KAPs who cannot easily be reached by volunteer networks. They complement the volunteer work force and wherever possible are members of the target KAP population in the given location and will work with the peers who are of his/her population. Each Field Officer is required to register from within a defined geographic location an optimal number of up-to 20 peers, engage and work with the 20 peers over the full range of HIV services promoted by TL over an 18-month period. TL expects to recruit up to 40 Field Officers in the 10 provinces where its work.

Table 1: Tingim Laip Target Populations in each project location

TINGI	M LAIP			-				TL Ta	rget P	opulat	ions							0 1
			W	/ES			M	IMM			P	LHIV			N	1SM		Condom Distribution Point
REGION	LOCATION	Vols	Peers	Field Officers	Peers	Vols	Peers	Field Officers	Peers	Vols	Peers	Field Officers	Peers	Vols	Peers	Field Officers	Peers	Target
	GOROKA	0	0	1	20	0	0	3	60	0	0	0	0	8	120	0	0	10
HIGHLANDS	MT. HAGEN	16	240	2	40	0	0	2	40	0	0	0	0	0	0	0	0	20
HIGHLANDS	TARI	0	0	2	40	0	0	2	40	0	0	2	40	0	0	0	0	10
	JIWAKA	16	240	2	40	0	0	1	20	8	120	1	20	0	0	0	0	20
	MADANG	16	240	0	0	0	0	2	40	0	0	0	0	0	0	0	0	20
MOMASE	LAE	8	120	0	0	0	0	2	40	8	120	0	0	8	120	0	0	20
	MARKHAM	8	120	1	20	0	0	1	20	0	0	0	0	0	0	0	0	20
	MILNE BAY	8	120	2	40	6	90	1	20	0	0	2	40	0	0	0	0	20
SOUTHERN	ORO	16	240	1	20	0	0	2	40	8	120	1	20	0	0	0	0	20
300 ITILIXIN	DARU	8	120	1	20	0	0	0	0	0	0	0	0	0	0	1	20	10
	NCD/	0	0	4	80	0	0	0	0	0	0	0	0	8	120	1	20	20
		96	1440	16	320	6	90	16	320	24	360	6	120	24	360	2	40	190

Table 2: Total Number of KAPs (unique individuals) to be targeted by TL interventions

Region	SW/ WES	MMM	PLHIV	MSM	Total
Highlands	620	160	180	120	1080
Momase	500	100	120	120	840
Southern	640	150	180	160	1130
Total	1760	410	480	400	3050
%	58%	13%	16%	13%	
		2	2013		
Region	SW/ WES	MMM	PLHIV	MSM	Total
Highlands	310	80	90	60	540
Momase	250	50	60	60	420
Southern	320	75	90	80	565
Total	880	205	240	200	1525
	•	2	014	•	
Region	SW/ WES	MMM	PLHIV	MSM	Total
Highlands	434	112	126	84	756
Momase	350	70	84	84	588
Southern	448	105	126	112	791
Total	1232	287	336	280	2135
		2	2015		
Region	SW/ WES	MMM	PLHIV	MSM	Total
Highlands	496	128	144	96	864
Momase	400	80	96	96	672
Southern	512	120	144	128	904
Total	1408	328	384	320	2440

Specific assumptions for each target calculation:

- p	a.
	teers and Field Officers conduct a range of activities across the continuum of prevention and
care a	ctivities as set out by the TL STEPs model. This includes:
	Peer education and awareness sessions designed to improve healthy decision making and demand for services as well as address community factors that increase risk for HIV
	Referrals to STI, VCT and other relevant service providers designed to increase access
	Condom and lubricant distributions designed to increase availability and use
1. Ta	argets for Outreach and Education Sessions
	treach and education sessions are conducted on the following topic areas:
	HIV and AIDS
	Male and female condom use
	VCT
	STIs
	HIV care and support (positive living)
	Condom negotiation

TL volunteers and Field Officers are expected to reach each of their designated peers with a range of peer education messages each quarter. The aim is to promote repeated layering of messages to promote and support behaviour change.

Target number of outreach sessions by topic for each KAP peer/ quarter

☐ Gender based violence mitigation and response

☐ Alcohol harm reduction

☐ SRH and Relationships

Key Outreach Message	Freq/quarter
HIV and AIDS	3
Male condom use	1
Female condom use	1
VCT	1
STIs	1
HIV Care & Support	3
Condom negotiation	1
Alcohol harm reduction	1
GBV Reduction	1
SRH & Relationships	1

Target for Total No. of Education Sessions to be conducted

Topics to	# of	No of pee	er outreach	sessions b	y type	TOTAL	
be covered	times	and	KAP group	per quarte	r	PER	TOTAL
in the	per	SW/WES	ммм	PLHIV	MSM	QUARTER	PER YEAR
Outreach	KAP						
HIV and AIDS	3	5,280	1,230	1,440	1,200	9,150	36,600
Male condom	1	1,760	4 10	480	400	3,050	12,200
Female	1	1,760	4 10	480	400	3,050	12,200
VCT	1	1,760	4 10		400	2,570	10,280
STI	1	1,760	4 10	480	400	3,050	12,200
HIV Care &	3	-	-	1,440	1	1,440	5,760
Condom	1	1,760	4 10	480	400	3,050	12,200
Alcohol Harm	1	1,760	4 10	480	400	3,050	12,200
FSV Reduction	1	1,760	4 10	480	400	3,050	12,200
SRH&	1	1,760	4 10	480	400	3,050	12,200
Total	14	19,360	4,510	6,240	4,400	34,510	138,040
			2	0 13			
HIV and AIDS	3	2,640	6 15	720	600	4,575	18,300
Male condom	1	880	205	240	200	1,525	6,100
Female	1	880	205	240	200	1,525	6,100
VCT	1	880	205		200	1,285	5,140
STI	1	880	205	240	200	1,525	6,100
HIV Care &	3			720		720	2,880
Condom	1	880	205	240	200	1,525	6,100
Alcohol Harm	1	880	205	240	200	1,525	6,100
FSV Reduction	1	880	205	240	200	1,525	6,100
SRH&	1	880	205	240	200	1,525	6,100
Total		9,680	2,255	3,120	2,200	17,255	69,020
			2	0 14			
HIV and AIDS	3	3,696	861	1,008	840	6,405	25,620
Male condom	1	1,232	287	336	280	2,135	8,540
Female	1	1,232	287	336	280	2,135	8,540
VCT	1	1,232	287		280	1,799	7,196
STI	1	1,232	287	336	280	2,135	8,540
HIV Care &	3			1,008		1,008	4,032
Condom	1	1,232	287	336	280	2,135	8,540
Alcohol Harm	1	1,232	287	336	280	2,135	8,540
FSV Reduction	1	1,232	287	336	280	2,135	8,540
SRH&	1	1,232	287	336	280	2,135	8,540
Total		13,552	3,157	4,368	3,080	24,157	96,628
			2	0 15			
HIV and AIDS	3	4,224	984	1,152	960	7,320	29280
Male condom	1	1,408	328	384	320	2,440	9760
Female	1	1,408	328	384	320	2,440	9760
VCT	1	1,408	328		320	2,056	8224
STI	1	1,408	328	384	320	2,440	9760
HIV Care &	3			1,152		1,152	4608
Condom	1	1,408	328	384	320	2,440	9760
Alcohol Harm	1	1,408	328	384	320	2,440	9760
FSV Reduction	1	1,408	328	384	320	2,440	9760
SRH&	1	1,408	328	384	320	2,440	9760
Total		15,488	3,608	4,992	3,520	27,608	110 ,4 3 2

2. Targets for Condoms Demonstrations

Condom demonstrations are conducted through two approaches:

- ☐ Peer to peer by volunteers and field officers
- ☐ Condom distribution points identified by TL umbrella/ sign

2.1 Targets for Condom Demonstrations done by Volunteers and Field Officers

Each volunteer will perform at least one male condom and one female condom demonstration per quarter for each of the peers they have.

For example, if a volunteer has 15 sex workers as her peers, the volunteer should have done at least 15 male and 15 female condom demonstrations for her peers by the end of the quarter.

The target for the number of male and female condom demonstrations in each location is determined by the target number of peers in each location. For the 3,050 unique target KAPs each quarter, TL expects at least a total of 6100 condom demonstrations, of which 3,050 are male and 3,050 are female condoms demonstrations.

Criteria	No. per quarter	No. per Year	No. Unique Individuals
No. of Male Condom demonstrations per KAP per quarter	1	4	3,050
No. of Female Condom demonstrations per KAP per quarter	1	4	3,050

Peer to peer condom demonstration targets

Demonstrations	# of times		eer condon	TOTAL PER	TOTAL		
	per KAP per quarter	SW / WES	MMM	PLHIV	MSM	QUARTER	PER YEAR
Male condoms	1	1,760	410	480	400	3,050	12,200
Female condoms	1	1,760	410	480	400	3,050	12,200
Total	2	3,520	820	960	800	6,100	#####
			2013				
Male condoms	1	880	205	240	200	1,525	6,100
Female condoms	1	880	205	240	200	1.525	6.100
Total		1,760	410	480	400	3,050	12,200
	_		2014	•		•	•
Male condoms	1	1,232	287	336	280	2,135	8540
Female condoms	1	1,232	287	336	280	2,135	8540
Total		2,464	574	672	560	4,270	17,080
	-		2015				
Male condoms	1	1,408	328	384	320	2,440	9,760
Female condoms	1	1,408	328	384	320	2,440	9,760
Total		2,816	656	768	640	4,880	19,520

2.2 Targets for Condom Demonstrations done by TL Condom Distributors

TL Condom Distributors are another strategic location where KAPs can receive condom demonstrations. TL Condom Distributors are strategically located in TL mapped environments of risk. Buai sellers, 'kaibar operator' and other vendors are selected to distribute condoms. Vendors receive training so that they can provide basic information about HIV, STIs and VCT and conduct condom demonstrations when needed. As this is a service provided as part of an existing business,

TL will not impose condom demonstration targets for this group of project stakeholders. They will be encouraged to conduct condom demonstrations when and as the need arises and to record these on their reports.

3. Targets for Condoms Distrib	butions
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Ma	lle and female condoms shall be distributed through a variety of approaches
	Volunteers and Field Officers
	Condom Distribution Points – identified by TL umbrella or sign
	Condom Refill Points – unmanned condom supplies in hotels, guesthouses

3.1 Targets for Condoms to be distributed through Peer-to-Peer (by Volunteers and Field Officers)

Based on extensive consultation, TL is aiming to distribute 14 male condoms per week and 2 female condoms per week to each TL peer. The standard recommendation was that a sexually active individual would need on average 2 male condoms per day or 14 male condoms per week and 2 female condoms per week. This is the criteria TL has used to establish target for the total number of condoms to be distributed to the 3,050 unique expects to reach every quarter.

Criteria	Per week	Per quarter	Per Year	No. Unique Individuals
No. of Male Condoms to be distributed to each KAP	14	168	672	3,050
No. of Female Condoms to be distributed to each KAP	2	24	96	3,050

The total number of male and female condoms to be distributed in each location is determined by the total number of KAPs to be reached in each location. For the 3,050 unique KAPs TL targets, TL expects to distribute 2,049,600 male condoms per year and 292,800 female condoms per year through peer networks.

Distributions	# of times per KAP per	No of peer condom distributions by condom type and KAP group per quarter				TOTAL PER	TOTAL PER
	quarter	SW / WES	MMM	PLHIV	MSM	QUARTER	YEAR
Male condoms	168	295,680	68,880	80,640	67,200	512,400	2,049,600
Female condoms	24	42,240	9,840	11,520	9,600	73,200	292,800
Total	192	337,920	78,720	92,160	76,800	585,600	2,342,400
			2013				
Male condoms	168	147,840	34,440	40,320	33,600	256,200	1,024,800
Female condoms	24	21,120	4,920	5,760	4,800	36,600	146,400
Total		168,960	39,360	46,080	38,400	292,800	1,171,200
	-		2014				
Male condoms	168	206,976	48,216	56,448	47,040	358,680	1,434,720
Female condoms	24	29,568	6,888	8,064	6,720	51,240	204,960
Total		236,544	55,104	64,512	53,760	409,920	1,639,680
-			2015				
Male condoms	168	236,544	55,104	64,512	53,760	409,920	1639680
Female condoms	24	33,792	7,872	9,216	7,680	58,560	234240
Total		270.336	62.976	73,728	61,440	468,480	1.873.920

3.2 Condom distribution targets for TL Distribution Points and Condom Refill Points

TL will also distribute condoms through select Distribution Points and Refill Points. These are strategically located in TL mapped environment of risk targeted by the project. In each location 10 Distribution Points will be established (identified by umbrella or sign) as well as 10 Refill Points. TL will monitor consumption and replenish condom supplies at these distribution points on a weekly basis.

Distribution Points are established with existing buai sellers, kai bar operators and other vendors in the environments of risk. They are strategically located in the environments of risk where sex is known to be negotiated or exchanged. They can be identified easily by TL umbrella and/ or other signage. Vendors are trained by TL to provide basic information about HIV, STIs and correct condom use.

Condom Refill Points are provided in guesthouses, nightclubs and lodges where condoms are provided through dispensers, in guestrooms or other anonymous vending mechanisms.

Assumptions:

Ш	Condom distribution point distributes 36 male condoms/ day and 3 female condoms / day
	Due to their location and promotion amongst KAPs, the majority (80%) of condoms will be
	distributed to TL target populations
	Condom refill points are more passive and client dependent: 18 male condoms/day and 1

Condom refill points are more passive and client dependent: 18 male condoms/ day and 1 female condom/ day collected

Criteria	Per quarter	Per Year
No. of Male Condoms to be distributed per Umbrella Point	3,000	12,000
No. of Female Condoms to be distributed per Umbrella Point	300	1,200
No. of Male Condoms to be distributed per Condom Refill Point	1500	6000
No. of Female Condoms to be distributed per per Condom Refill Point	150	600

Target for condom distribution through TL distribution points and condom refill points

Distributions	# of condoms distributed per quarter	TOTAL PER QUARTER	TOTAL PER YEAR	
Male condoms	3000	570,000	2,280,000	
Female condoms	300	57,000	228,000	
Total	3300	627,000	2,508,000	
2013				
Male condoms	1500	285,000	1,140,000	
Female condoms	150	28,500	114,000	
Total	1650	313,500	1,254,000	
2014				
Male condoms	2100	399,000	1,596,000	
Female condoms	210	39,900	159,600	
Total	2310	438,900	1,755,600	
2015				
Male condoms	2400	456,000	1,824,000	
Female condoms	240	45,600	182,400	
Total	2640	501,600	2,006,400	

3. Target for Referrals

TL has set targets for:

The total number of people from KAPs (unique individuals) to be referred for the key HIV services
promoted by TL

The total number of referrals for each HIV service to be made

TL volunteers conduct both accompanied and unaccompanied referrals to the providers of HIV services. These are reported in their monthly reports irrespective of whether the client referred reached the health facility or not. For the purpose of efficiency, consistency and to strengthen uptake of services, TL will only count referrals if the referred client reached the service provider.

To strengthen the referral mechanism and pathway to services, TL introduced and is operating a referral card system in its areas of operation. All KAPs who express the need for referral are provided with the referral card which they present to the referral facility upon arrival. TL staff collect their submitted cards from each facility at the end of every month. The cards submitted at the health facilities are used to measure, assess and produce reports on TL referral performance against referral targets.

The five main HIV services TL includes in its referral pathways are: STI clinics, VCT clinics, HIV care & support, GBV and SRH services. Target referral rates for each service are presented in the table below.

HIV services people from KAPs are referred for

- 1. STI
- 2. VCT
- 3. HIV care & support
- 4. GBV
- 5. SRH

Frequency each person from KAP is to be referred for the service

HIV service	Per quarter	Per Year
STI	3	12
VCT	1	3
HIV care & Support	1	3
GBV	1	3
SRH	1	3

Target Referrals for eacherson from KAP and referral type

Topics to be	# of	No of refe	rrals by ty	e and KAP	group	TOTAL	
covered in the	times		per quarter			PER TOT	TOTAL
Outreach	per KAP	SW/WES	MMM	PLHIV	MSM	QUARTER	PER YEAR
	per						
STI	3	5,280	1,230	1,440	1,200	9,150	36,600
VCT	1	1,760	4 10	-	400	2,570	10,280
HIV Care and	1	-	-	480	-	480	1,920
GBV	1	1,760	4 10	480	400	3,050	12,200
SRH	1	1,760	4 10	480	400	3,050	12,200
Total	7	10,560	2,460	2,880	2,400	18,300	73,200
			2 0 13				
STI	3	2,640	6 15	720	600	4,575	18,300
VCT	1	880	205		200	1,285	5,140
HIV Care and	1	-	-	240	-	240	960
GBV	1	880	205	240	200	1,525	6,100
SRH	1	880	205	240	200	1,525	6,100
Total		5,280	1,230	1,440	1,200	9,150	36,600
			2 0 14				
STI	3	3,696	861	1,008	840	6,405	25,620
VCT	1	1,232	287		280	1,799	7,196
HIV Care and	1	-	-	336	-	336	1,344
GBV	1	1,232	287	336	280	2,135	8,540
SRH	1	1,232	287	336	280	2,135	8,540
Total		7,392	1,722	2 ,0 16	1,680	12 ,8 10	51,240
	•		2 0 1	5			
STI	3	4,224	984	1,152	960	7,320	29280
VCT	1	1,408	328	-	320	2,056	8224
HIV Care and	1	-	-	384	-	384	1536
GBV	1	1,408	328	384	320	2,440	9760
SRH	1	1,408	328	384	320	2,440	9760
Total		8,448	1,968	2,304	1,920	14,640	58,560