

Incentivised HIV-
testing - the
experience of the
"Men on the Side
of the Road"
project -

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What prompted HIV Incentive testing with MSR?

“ It was found that unemployed black males within this target group only 30% had gone for a test and knew their status, mostly because they were already ill.

“ This prompted the fact that within this target group prevention was definitely not working.

“ This prompted the assumption that if so few knew their status are the aids statisticians correct in their numbers when most of the test data come from women!

The Team

“ MSR

“ Desmond Tutu HIV
centre

“ Broccoli Project

The detractors

“ Everyone Else! Including W/Cape provincial government representatives at the time.(Health Department)

“ Quote: “People need to test on their own, we cant treat them like animals”

The Process

“ MSR would organise a maximum 40 people a day for testing through the TUTU mobile tester.

“ Broccoli project would use biometrics to provide the incentive and track the testers

“ Desmond TUTU HIV project at UCT would provide the counselling and referrals to clinics as per their normal model as well as look at general health and TB

Results and Data

“ All results and data on individuals who tested were only accessible by Desmond Tutu HIV Foundation while everyone else was given broad statistical data only.

What was groundbreaking about the approach?

- “ 1. Targeted group of men only!
- “ 2. Biometrics used for HIV testing
- “ 3. Incentive given to all who tested
- “ 4. Data on every individual (who tested)

The Results

“ 1. 100% of unemployed black males tested ie: everyone who was asked to test for an incentive did test.

“ 2. The demand for testing far exceeded the supply (more on this later!)/ The story of Nyanga

“ 3. The tipping point incentive was R50 as a food voucher from Pick n Pay.

Results (cont)

- “ 4. 67% of unemployed black males went for their first test through the program
- “ 5. The HIV positive rate was 28%-35% in some areas in the Western Cape (more on this later).
- “ 6. No one objected to the biometrics
- “ 7. 500 men tested overall

**Implications:
“Everyone can and
should test”**

“ 1. It is possible to test most people in South Africa through a basic incentive program OR when people get marriage licences, or even drivers licences. Where there is a will there is a way.

**“Prevention is not
Working”**

**“ 2. The results show that
prevention is not
working” most men were
just too lazy to test!**

**“There is no
stigma”**

**“ 3. The results show that
the stigma so often
talked about is humbug
and has caused and
continues to cause
problems with HIV
testing**

**“Demand will
exceed supply,”**

“ The demand for testing far exceeded the supply. The story of Nyanga. What this shows is that if everyone did test the hospital, clinic system and cost of drugs is unsustainable. This is a paradox as the system would just break down on cost alone.

“The stats do lie”

“The size of the problem is probably a lot higher than that based on the testing mostly of women. Statistics are often flawed as they are based on skewed data.”

**“Biometrics is
vital”**

**“ To run a successful
incentive based program
biometrics is vital
because then there is no
duplication and people
can be tracked. In many
other testing programs
there is no tracking
which often leads to
duplication and skewed
statistical results.**

Costs

“ The average cost of the incentive was R50 and given as a voucher with a retailer.

“ 50 million people testing once a year is (2,5 billion) and tracking them all.

“ The cost of treating 10 million + people at R1,000 pm for 20 years is (12000000000 that's trillions) which is completely unsustainable

The paradox!

“ If everyone did test (which is possible) and we had to treat everyone then we would as a country be technically bankrupt but at least we would know!