

Tehran Positive Club

Curriculum Vitae (CV)

One of the most remarkable achievements in Iran is the establishment of Tehran Positive Club in August 2006. Objectives of the Positive Club are positive prevention, psychosocial support with the aim of empowering and developing the capacities of people living with HIV (PLHIV) for the management and improvement of life skills as well as reduction of stigma and discrimination. In this regard, Tehran Positive Club has helped technically to establishment of other Positive Clubs in Iran.

Tehran Positive Club is beside the Voluntary Counseling and Testing (VCT) center and Iranian Research Center for HIV/AIDS in a referral hospital which is open every day from 8 am to 7 pm. Currently, 753 people (538 men and 215 women) including also referred inmates who living with HIV from one prison are members of this Club and everyday 90-100 people use the facilities of the Club as free of charge.

For better management of the Club, we conducted a comprehensive and innovative model for the Positive Club based on by and for people living with HIV and their families. Based on this practical model, management of the Club is performed by a central council including five people living with HIV who are elected by the Club members. Subsequently, under the supervision of this council, different practical activities are formed regularly. These activities are performed by participation of PLHIV, their families and volunteers and are delivered to PLHIV, affected persons by HIV and people in the community regardless of religious affiliation. Also, the Club just provides the following services for key populations including people who inject drugs, men who have sex with men, sex workers, transgender persons and migrants who are living with HIV as well as especially young people in prisons.

In addition to providing the services for PLHIV, the affected people by HIV in the community and the general population, Tehran Positive Club also just focused on prisoners since three years ago because the public is at risk of HIV, because of links between prison staffs, visitors, discharged prisoners and the community. So, paying particular attention to this issue and planning to reduce HIV transmission in prisons can be useful to control its prevalence in the society.

We just set up our goals based on UNAIDS "90-90-90 Targets", UNAIDS "Getting to Zero" Strategy, "Iranian Fourth Strategic Plan", "Iranian National Protocol" and Active Case Finding (ACF) Strategy in the prisons and the community. Furthermore, we considered Positive Health, Dignity and Prevention (PHDP) as a package of activities that includes improving and maintaining the dignity of the people living with HIV, to support and augment that individual's physical, mental, emotional and sexual health as well as creates an enabling environment that will decrease the likelihood of new HIV infections. The our main activities during almost nine years based on eight major components of PHDP, our settings in the community and the prisons and epidemic status briefly included:

1- Services Delivered to the Prisoners for Providing Equality

Prisoners are at risk of HIV, especially those living with a history of injecting drug use. Due to insufficient supply of needles and syringes for many drug users, sharing is inevitable. By engaging in high risk behaviors, lower condom availability, tattooing, limited access to health care services, having unprotected sexual activities when affected by drugs, poor and homeless people increase their risk of HIV transmission. A considerable proportion of individuals remain unaware about their HIV status in the prisons. HIV testing is one of the main strategies to prevent HIV infection especially in the prisons which most of them are young people.

In agreement with "90-90-90 targets", one of the greatest successes of Tehran Positive Club was participation in HIV programs of the prisons including diagnosis, care and treatment and prevention. We started our work from Great Tehran Prison which is located outside the city of Tehran, with three separate units from October 2013 to June 2014. All prisoners are taken first to "reception and identification unit (quarantine)" and then send to two housing units according to their legal status. An HIV Active Case Findings (ACF) strategy was employed in the quarantine and two units through a provider-initiated HIV testing approach and with respect to its confidentiality and voluntarily so that the prisoners know their HIV status. Three staffs of the prison triangular clinic in close cooperation with educated peer groups trained the prisoners about common routes of HIV transmission in the units. Training sessions were organized for different target groups. Training sessions were taken place and attended by a wide range of audiences, including prisoners, healthcare staff, attorneys and healthcare communicators, security force, official personnel, prison governor and the heads of prison units. Also, training sessions were held for healthcare staff about the HIV Rapid Test. Offered by psychologists to clients, the HIV educational activities were practiced three times per week in the quarantine and units where a half-hour lecture was followed by a halfhour question and answer session. The emphasis was on the routes of HIV transmission and prevention and importance of HIV control in prison for society. In the quarantine, all prisoners were examined for HIV-risk factors and offered HIV testing. In unit one and two, the peer groups were assigned as the healthcare communicators to proceed the ACF strategy. Then, all prisoners with HIV risk factors were referred to the prison triangular clinic for HIV testing and counseling. In the triangular clinic, consultation and testing were performed to diagnose HIV positive patients. Patients were examined by a general practitioner and if necessary, he referred them to an infectious disease specialist for further treatment. Moreover, the general practitioner submitted some orders to the triangular clinic psychologist who was responsible for implementing orders, registration, monitoring of treatment and follow up activities after release. When the test result was positive, then the process of post test consultation including voluntary partner notification and care and treatment and follow ups were initiated. Another great success was the use of directly observed therapy (DOT) for antiretroviral treatment (ART) which was started in the prison. We also provide prevention services in addition to increasing coverage of antiretroviral treatment and promotion of adherence to treatment included safer sex education and condom distribution by holding educational sessions as face to face training and distribution of brochures and pamphlets as well as providing condoms in the prison triangular clinic to be accessible for the inmates and the staffs. Furthermore, we provided harm reduction programs including Methadone Maintenance Treatment (MMT) in the prison.

It would appear that released HIV positive patients are at their highest risk for giving up HIV treatment throughout the early stages of their release. As a consequence, accessing to medical care is important for released HIV positive patients. So, we just followed all PLHIV after

discharging at least three times in the Great Tehran Prison to refer and connect them to care and treatment services in Tehran Positive Club or the VCT centers in Tehran. Most importantly, we introduced them to the Positive Club and the VCT centers and emphasized them to being adherent to their treatment.

We faced some challenges: firstly, the rapid transferring of patients between different units of the prison makes screening, admission, diagnosis, testing and treatment so difficult. Secondly, some prisoners with high-risk behaviors related to HIV and positive rapid diagnostic test were released from the prison before the confirmatory tests (ELIZA, Western blot) completed and since the main index for being HIV positive approved by the Ministry of Health is the result of Western blot test, we had some serious problems to follow-up these patients outside the prison and finally, providing condoms for the prisoners and PLHIV caused challenges. Despite the challenges, we just followed up the patients seriously and doing condom promotion.

Right now, we expanded ACF approach to 15 prisons (Men's and Women's prisons) in nine provinces in Iran by rearrangement the same prison staffs and training and using peer groups in the prisons. By this strategy, we diagnose HIV status of the prisoners and then connect prisoners living with HIV to care and treatment services within or outside the prisons.

2-Measuring Indicators in the Prison

The most important results which reflect the effects of the wide interventions in the prison during eight months were:

A total of 6900 prisoners were evaluated in the units by using the ACF strategy. Three thousands four hundred forty five individuals had HIV related behaviors. Among 3445 prisoners, the mean age was 30.7 years. Also the minimum and maximum ages were 16 and 73 years, respectively.

From 3445 prison inmates, 23 persons (0.7%) declined to provide HIV testing, so an HIV rapid test was performed for 3422 prisoners among which 100 persons had a positive test, the results were supported by the confirmatory tests. So, the total number of detected HIV positive patients was 100. As a result, 100 patients from 6900 people in the prison can indicate the HIV prevalence for 1.45%. While prior to our interventions, only for 199 people within 22 months, HIV tests were done.

Giving group information about HIV transmission and prevention, before and after HIV testing were performed for 3345 prisoners and for 100 prisoners living with HIV, counselling before HIV testing as a group and after the test as individual was conducted. A total of 438 HIV educational sessions with averages 95 prisoners per session was performed.

Based on the Iranian national protocol, PLHIV with CD4 count less than 500 received antiretroviral treatment in the prison. As a result of our interventions, coverage of antiretroviral treatment increased to 55/4% in the prison which this amount was significantly more than the country (the treatment coverage based on the number of estimated and registered cases is about 10 percent and 20 percent, respectively).

We delivered antiretroviral treatment (ART) via Directly Observed Therapy (DOT) among PLHIV in the Great Tehran Prison. The mean of adherence to the treatment was 93.3% that it can be considered acceptable. This was more than the society showed (almost 60% in a study

in Tehran). So, by implementation of DOT for ART, prisoners living with HIV can achieve a high level of adherence.

3-Services Related to Preventing New Infections

- Reinforcement of Consultation and Voluntary Testing: Holding trainings and workshops on the issue of "HIV/AIDS Awareness and Transmission and Prevention" and "How to Refer People with High Risk Behaviors to Voluntary Counseling and Testing (VCT) Centers" in line with "90-90-90 targets" for trained peer educators at the Positive Club, in order to aware populations at higher risk of HIV exposure about HIV/AIDS transmission and prevention at Harm Reduction Camps, Narcotics Anonymous (NA) groups, Methadone Maintenance Treatment (MMT) centers, Dropin center (DIC), prisons, Congress 60 group, families of addicts meetings, special counseling centers for vulnerable women and men, centers that work in conjunction with street children, shelters, some parks and hangouts, garrison of soldiers and municipality health home followed by referring of people with high risk behaviors to VCT centers. This activity was one of the greatest successes for the Positive Club according to VCT centers' reports about number of the referred people. Finally, the people were connected to VCT centers and could have access to HIV testing, care and treatment.
- As one of the biggest successes, holding educational workshops particularly for young people on "Know Your Epidemic", "HIV Transmission and Prevention", "Role of Antiretroviral Treatment (ART) in HIV Prevention", "Role of Antiretroviral Treatment in Prevention of Disease Progression and Other Infections", "Questions and Answers" sessions about antiretroviral therapy and adherence to treatment, "Long Term Effects of ART", "Treatment as Prevention", "Importance of Adherence to Treatment for PLHIV and the Community", "Side Effects of Antiretroviral Medications and Ways to Reduce the Side Effects", "Effects of Stimulant Drugs on High Risk Behaviors and HIV Transmission", "Coping Skills", "Importance of HIV Disclosure for Prevention", "Introducing Harm Reduction Programs", "Introducing Psychosocial Package of Welfare Organization and Aid Committee in Iran" and "Introducing VCT Centers, Positive Clubs and Their Activities in Iran".
- In agreement with "90-90-90 targets", holding educational sessions on "How to refer people with high risk behaviors to VCT centers" for old members and NA leaders.
- Increase adherence to antiretroviral treatment: ART plays a substantial role in the prevention of HIV transmission. So, in compatible with "90-90-90 targets" the Club with coordination the VCT center has held educational sessions about "Importance of Adherence to Treatment for PLHIV, Family and the Community" and "Ways of Removing Barriers to Adherence". Also, the Club provides individual consultation for PLHIV who initiate ART through the Club's expert psychologist. Most importantly, the peer groups observe status of adherence to treatment of the members and report it to the Club's psychologist for appropriate interventions if the adherence is low.
- Providing services for serodiscordant couples included: To encourage the disclosure
 of HIV for spouse or sex partner, to encourage the consistent and correct use of
 condoms, encouragement HIV negative to do HIV test at least every 6 months and to
 encourage to start ART and adhere to it.
- Services related to "Prevention of Mother to Child Transmission (PMTCT)": Holding educational sessions on "PMTCT" for women living with HIV or affected by HIV, training sessions about HIV transmission and prevention in special centers for vulnerable women for primary prevention of HIV, individual counseling sessions for

women living with HIV who had a history of unwanted pregnancy, holding education classes about the transmission of HIV through breastfeeding for women living with HIV and provision of free formula milk for babies whose mothers did not act in order to prepare the milk.

- Services related to Social Marketing: The Positive Club delivered the services by providing free education and health care packages including condoms, educational books or pamphlets about HIV-related issues to their members.
- Attending in TV and radio programs especially about "HIV Transmission and Prevention" for awareness of the public.
- Preparing essays about different aspects of HIV/AIDS especially about "HIV Transmission and Prevention" to notify the public and publishing in "Health Family", "Sepid" and "Hidden Harm Newsletter" which are public magazines in Iran.
- Preparing, publishing books included "Applied Guidance of HIV/AIDS", "Tips on HIV/AIDS", "AIDS for Everyone", "Key Facts for a Better Living with HIV", "Side Effects of Antiretroviral Drugs", "Applied Manual in Nutrition for PLHIV", "Psychosocial Problems of PLHIV" and distributing them among the PLHIV, the affected people, key populations, volunteers, schools, universities and subways in the society.
- Preparing, publishing pamphlets, posters and banners regarding the issue of HIV/AIDS included: "Ways to Prevent HIV Infection", "Education for Using Condom", "Correct Use of Condom", "Adherence to Antiretroviral Treatment", "Sports and HIV", "Positive View to a Positive Life", "World AIDS Day Posters", "Introducing Positive Club Hotline for HIV Consultation", "Protect the Goal", "Introducing the Goals and Activities of Tehran Positive Club" and distributing them among the PLHIV, the affected people, key populations, volunteers, schools, universities and public places.
- Two telecommunication (Hotline) counseling in the Club: Providing telephonic counseling services by the educated PLHIV for the public every day from 8am to 7pm.

The below services are also provided to the members in the following of the comprehensive activities:

4-Services Related to Making Friendly Environments

- The PLHIV council runs the Positive Club
- Select of staffs with positive view regarding the issue of HIV/AIDS
- Welcome and doing the members reception along with tea and coffee
- Making safe and friendly environments for PLHIV, the affected people and the key populations
- Keep confidentiality and privacy of the members especially about the key populations
- Installation feedback box and addressing the members comments

5- Sexual and Reproductive Health and Rights

• Holding educational sessions on "Sexual and Reproductive Health" within the Club included: "Reproductive Health", "Male and Female Sexual Healthcare", "Education

- and the Necessity of Post Exposure Prophylaxis", "Prevention of Sexually Transmitted Infections", "Insistence Skills for Using Condom" and "Pregnancy Hygiene".
- Follow up HIV status of PLHIVs' spouses and constantly encouragement the spouse to do the HIV test and use condom

6-Health Promotion and Access

- Referring the new PLHIV from the adjacent VCT center to the Positive Club with cooperation of psychologist of the VCT center for delivering the Positive Club services and vice versa.
- Services related to medical tests: The Positive Club based on physician order, refers the members to the VCT center for doing CD4 count as free of charge as well as requests discount for viral load from HIV laboratory.
- Educational sessions on "Opportunistic Infections and Co-infections" such as "Tuberculosis" and "Hepatitis", "Drug Interactions", "HIV and Aging", "Self Care", and "Important and Common Cancers (particularly cervical and breast cancers) " for the members.
- Providing dental services costs for the Positive Club members
- Referring PLHIV to VCT centers for receiving vaccination services
- Services related to correction of life style including educational sessions such as teaching "Life Skills" focusing on "Thinking and Ideology", "Problem Solving", "Healing the Inner Child", "Fundamental Changes and Reinforcement as an Adult", "Family Management", "Household Management", "Social Relationship", "Harmful Effects of Drugs", "Ways to Reduce Stress", "HIV and Nutrition " and "HIV and Sports".
- In person counseling for the members is held to ensure their social, familial and personal welfare.
- Providing Narrative Therapy: In this treatment for preserving and guiding life goals, PLHIV say his/her life story and then he/she rewrites the story with help of an expert psychologist.
- Providing "Faradarmani" (Extra care) Treatment: Faradarmani, an Iranian complementary and alternative medicine, is based on theory of "Consciousness Bond". It seems that this treatment improves the quality of life, wellbeing and some physical and mental illnesses.
- Providing athletic, recreational and entertainments activities within the Club or outside the Club including classes such as: Ping Pong, Soccer, Volleyball, Swimming, Chess, Darts, Mountain Climbing, Aerobics, Resistance Exercises, Mindfulness Base Stress Reduction (MBSR), Meditation and Yoga, Recreative Camps, watching Movies within the Club or Cinemas and Music for men and women.
- Organizing sport competitions on "Ping Pong", Darts", "Soccer and "Chess" by participation men and women members, adjacent Positive Clubs in Tehran, Varamin and Qom Positive Clubs and medical students of Tehran University and giving awards to top three.

- Holding group therapy sessions with a psychologist for the PLHIV or the affected people every two weeks.
- Psychiatrists visits of the PLHIV and the affected people for counseling, psychological support and medical treatment once a week. The Club pays part of the cost of psychiatric medications of the members.

7- Empowerment

- Job Creation and Income Generation Activities:
 - In the job creation section, the Club sent PLHIV to the Technical and Vocational Training School based on their interests in order to participate at workshops regarding vocational and professional skills. The PLHIV sold their products in different exhibitions and social events. In addition, the members act as instructor to teach vocational and professional skills which they already have learned in the training centers outside the Club to new members.
 - According our research in Iran, one of fundamental problems among PLHIV is unemployment. PLHIV also have human right to have an actual job. Therefore, we established "Book Binding" and "Wood Carving" in the Positive Club. In the present, ten PLHIV are working in the occupations and delivering services to the public. At the beginning, we had some challenges to set up the two jobs training since some educators just refused to train PLHIV due to irrational fear among the public during educational classes related to the jobs. Fortunately, we overcame the problems through HIV training of the educators.
 - In coordination with Tehran Municipality and Welfare organization, the Club has introduced a large number of the members to the municipality and organization to employ them for service works.
- Holding training sessions of Computer, English Language, Music, Calligraphy and Cell Phone Repair classes inside the Club.
- Holding training sessions of artistic works like "Patineh", "Wood Carving" and making "Leather Hand Bag" for the members.
- Holding training sessions of "Creative Photography" for the members.
- Organizing two photography competitions with the subjects "Tree" and "Wind" between Positive Clubs' members across the country and giving awards to top three.
- Organizing an essay competition with the topic "PLHIV Reflections" for Positive Club members across the country. Gifts were given to the top three essay writers.
- Encouragement and facilitating continuing education of the members by providing school supplies such as stationery, books, clothing and shoes.
- Services related to marriage consultation included individual consultation and holding educational sessions of "Successful Marriage" for the members.
- Services related to children and adolescents living with HIV included holding a creativity contest (Painting and Manual Works) and birthdays party, preparing package includes stationery, clothing and shoes for children living with HIV
- Notifying PLHIV and their families about recent applied researches results by holding Knowledge Transfer and Exchange (KTE) classes

- Education of five talented peer groups to assist the researchers who are working in HIV/AIDS field such as proposal writing, data collection, help to interpreting results and preparing final reports.
- Encourage advocacy groups with PLHIV: This advocacy groups attracted financial support from municipalities and public organizations to help the Club.
- Introducing PLHIV to Iranian Center for Disease Control and Prevention (CDC) for attending in national technical groups and meetings at policy level
- Introducing PLHIV for attending in national or international meetings and workshops. For instance, MENA-Rosa for women living with HIV and MENAHRA which is the network on injecting drugs harm reduction in the MENA.

8- Cultural, Social and Economic Support

- Educational sessions for worker and psychologists with topic "HIV and Social Protection Programs"
- Holding birthday gatherings of the Club members every two month, traditional festivals and national/religious celebrations in the Club
- Celebrating Valentine's Day: for the first time in Iran, the Club celebrated Valentine's
 Day to present love and friendship among its members and to encourage young
 PLHIV to start families. The couples were requested to share their success
 experiences with other. More details are available on:
 http://www.unplus.org/unplus/archives/673
- Provision monthly peer visit sessions for people living with or affected by HIV for mental, social and financial support.
- The Club offers married couples who met in the Club special gifts.
- Introducing PLHIV and their families for receiving health insurance and providing the insurance costs
- HIV Anonymous (HA) sessions (once a week): during these sessions, PLHIV get to talk about their feelings and personal, familial, financial and social problems and subsequently share their solutions.
- Holding different exhibitions related to artistic works which were made by the members including manual works, painting and wood carving for the public visit. Furthermore, the members talked with the visitors about different aspects of HIV/AIDS especially HIV transmission routes and prevention during the exhibitions.
- Creating the Booths: to inform people about HIV/AIDS as well as social and economic supports, every year during the World AIDS Day the Club sets up booths in Tehran University and Ministry of Health and Medical Education.

9- Human Rights

According to our study on "Evaluation of Stigma Index in Iran" (available at: http://thritajournal.com/?page=article&article_id=11801) and in line with the strategy "Getting to Zero", some services related to reduction of stigma and discrimination among PLHIV, families and the community in the Club were considered and published as an article. More details are available on:

- http://garj.org/garjss/6/2012/1/1/a-new-social-modeling-approach-for-reduction-of-hiv-related-stigma-and-discrimination
- Active participation of PLHIV, their families and key populations in the management of the Club
- Active participation of the educated peer groups in various television and radio programs as well as writing essays related to HIV/AIDS issues for newspapers.
- Training sessions for the members about "Rights of PLHIV for Access to Public Health Services"
- Training sessions for health care workers and army in the society with the subjects:
 "Modes of HIV Transmission and Prevention", "Needs of PLHIV and Their
 Families", "Stigma and Discrimination and Its Negative Consequences Particularly
 for HIV Prevention in the Community" and "Introduction of VCT centers and
 Positive Clubs and Their Activities"
- Training sessions for the prisoners, peer groups, attorneys, military forces and health care workers in the prison about "Stigma and Discrimination and Its Consequences Especially on Adherence to Treatment" and "Keep Patient's Secrets"
- Emphasis on reporting items related to the stigma and discrimination experienced by PLHIV (especially women living with HIV) and their families to the Positive Club and then reflected into higher levels of policy making.