Integrating GBV screening into HIV counselling and testing for young women accessing PrEP in South Africa and Tanzania

What do we know:
- GBV could affect PrEP uptake, adherence and early discontinuation
- GBV screening into HCT enables identification of those at high HIV risk, who may also have greater potential for non-adherence due to GBV

Acceptability
- Good thing, felt relief, reassuring, led to reflection on IPV
- Friendly, non-judgmental staff, respecting privacy & decisions
- Familiarity with staff

Feasibility
- Initial discomfort & emotional toll, but regular debriefings helped not “taking cases back home”
- Low referral uptake (6%)
- Safety plan needed adaptation

30% screened positive for GBV (physical and emotional)

You can listen to the webinar: http://strive.lshtm.ac.uk/resources/integrating-violence-screening-for-young-women-accessing-prep

So what?
- Acceptable if adolescent friendly
- Referral needs and preferences
- GBV into adherence counselling