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## Minimum prevention package intervention; A workable strategy for achieving behaviour change amongst vulnerable population and most at risk population (MARPS) in Benue state

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TIV has assumed an epidemiological stage in Nigeria and Benue states, in particular, having a prevalence of 4.1% and 12.7% IV has assumed an epidemiological stage in Nigeria and Bende states, in pure states, in pure states of respectively. A greater population is still faced with a challenge of remaining negative by maintaining and adapting to positive respectively. A greater population is still faced with a challenge of remaining negative by maintaining and adapting to positive behaviour. With sex accounting for 80% of new infections, the youth population of reproductive age are the most hit, yet is known to engage in risky behaviors that predispose them to risk of HIV infection. Prevalence of HIV among this youthful population between the ages 20-24, 25-29 and 30-34 years is the highest, reflecting a prevalence of 4.6%, 5.4% and 5.7% respectively. This is alarming and calls for strategic intervention. Jireh Doo Foundation (JDF) with support from ENCAP, embarked on a project in 3 LGA of Benue state; Ado, Makurdi and Vandeikya targeted at reaching 11,400 vulnerable and most at risk population; in and out of school youth (ISY and OSY), Uniform Service Personnel (USP), sex workers and un-married young males and females. The capacity of 120 peer educators was built and using the minimum prevention package intervention (MPPI) reached 14,629 peers with HIV prevention messages that have influenced positive behaviour change among the target population. As both individual and structural factors posing behaviour change challenges have been addressed headlong, through the use of peer education activities, advocacy and community mobilization, community dialogue and local media. The advocacy efforts were targeted at community gate keepers resulting in increased community support. Each of the 120 PE formed cohorts of 10-15 peers reaching them with 3 strategies, resulting in behaviour change, attitude and life skills development. The HIV prevention intervention targeted at the vulnerable population and MARPS revealed the impact of the MPPI on communities as structural issues such as religious and traditional belief systems that inhibit behaviour change were identified by community leaders and addressed headlong. Through participatory advocacy consistently over time, community leaders and members provided support for interventions such as provision of town halls, church buildings and schools for HIV activities. This is a clear indication that there are community resources that can be utilized for HIV prevention activities if well harnessed. Local media such as community theatres and troupes can be used to effectively reinforce HIV prevention messages at all levels. Reducing the incidence and prevalence of HIV in our communities to its barest minimum is achievable, with the use of conventional and unconventional approaches. The MPPI is a unique and pragmatic approach that is potent enough to reverse the rising trend of HIV in communities. This strategy can be used in HIV prevention programs for different target populations in the work place, community, among ISY and OSY, USP & MARPS to achieve sustainable behaviour and attitudinal change.

## **Biography**

George Sesugh Songu, a graduate from Benue State University, with vast experience in development work. At present, he is working primarily for Jireh Doo Foundation as the Programme Manager of Jireh Doo Foundation, a top flight Non-Governmental Organization (NGO) in Benue and Nasarawa States of North Central Nigeria, working on HIV and health, child development, single parents, governance and policy programs. He worked as a social worker and served in various capacities over a period of 7 years in the development field.

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