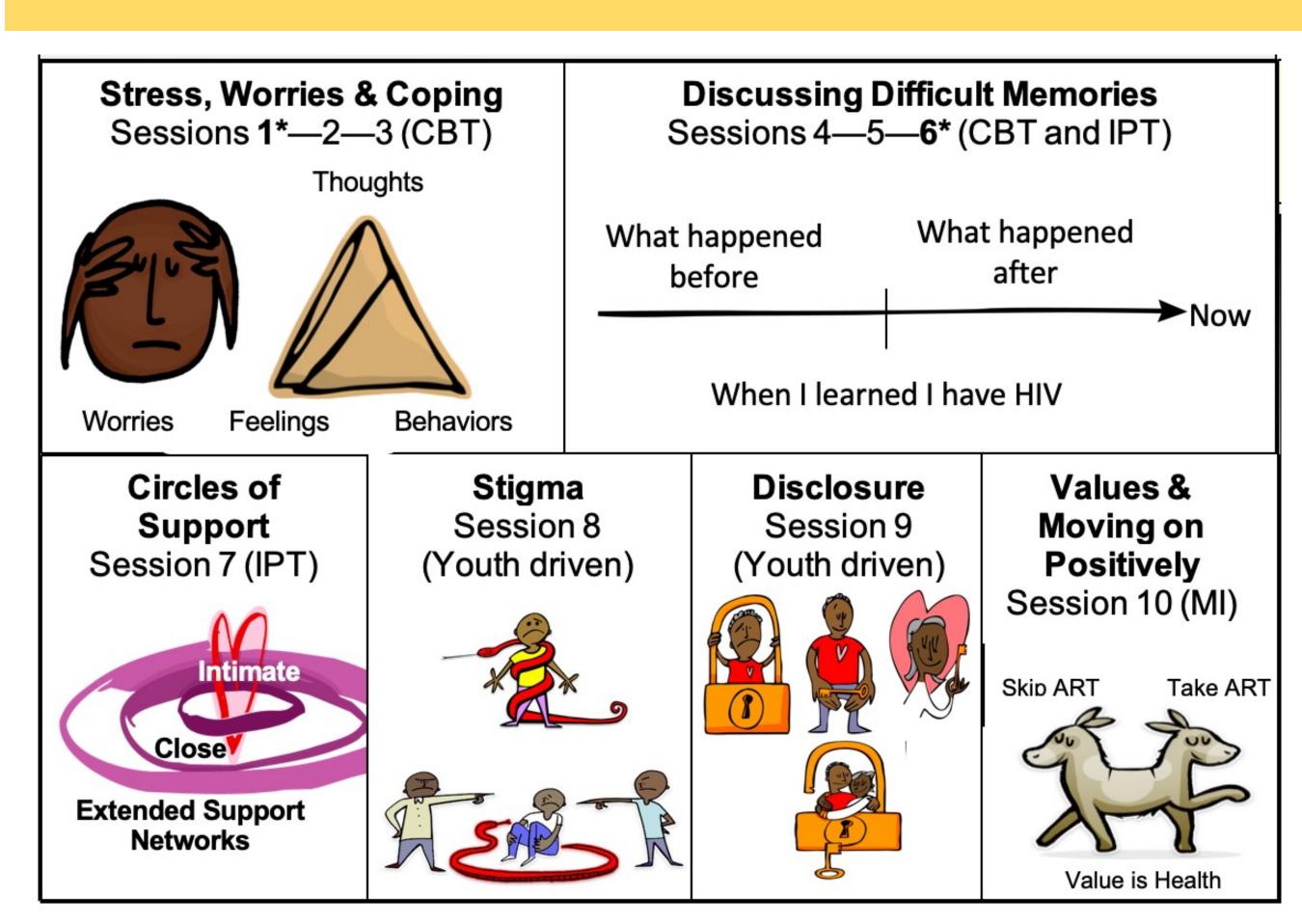
# Peer-led Interventions: Experiences of Delivering a Mental Health Intervention to Adolescents Living with HIV in Tanzania





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## BACKGROUND



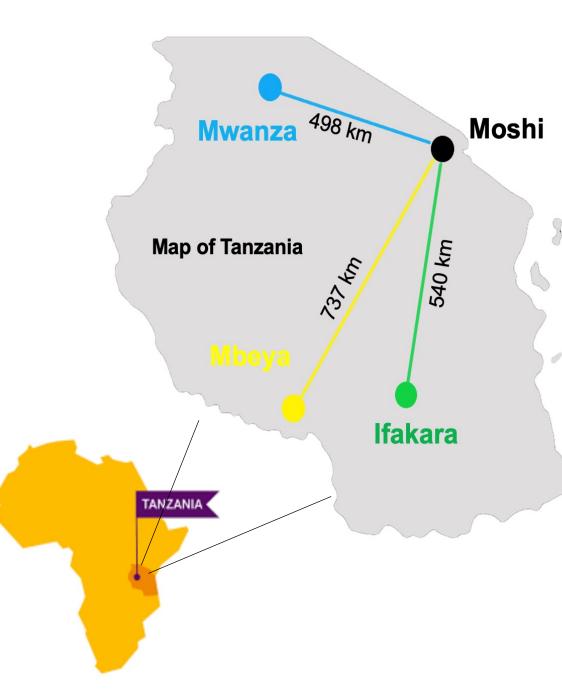
**Figure 1:** SYV Session Content. Cognitive Behavioral Therapy (CBT); Interpersonal Psychotherapy (IPT); Motivational Interviewing (MI)

- Mental health disorders are common and associated with worse HIV outcomes<sup>1</sup>
- Due to few mental health professionals in low income countries, peer-led interventions may be an effective implementation strategy to task-share mental health care delivery<sup>2</sup>
- Sauti Ya Vijana (SYV) is a group-based, peer-led mental health intervention created with youth living with HIV to address their mental health and life challenges (See Figure 1).
- This study aims to explore the peer group leader (PGL) experience delivering SYV



## METHODOLOGY

- Sample: Twenty-five PGLs aged 23-29 years old living with HIV who received training to deliver the SYV intervention
- Location: Four Sites in Tanzania (See Figure 2)
- Structure and Content of the IDI Guide
- Framework: CFIR
- Domains included: Identity, motivations, experience, training, impact, sustainability, and recommendations
- **Data Collection:** In-depth interviews were conducted in Swahili, audio recorded, and translated to English by a qualitative researcher at each site
- Analysis:
  - NVivo 12 software
  - Rapid qualitative analysis: Microsoft Excel
  - Approach: Deductive analysis with minor inductive analysis when emerging themes



**Figure 2**: Location and distance of SYV study sites from Moshi, Tanzania

"Because the youth who came, the ones we finished the pilot program with, they arrived and left in a different state. But after the training, they were able to open up and become free. So, they left with joy, and some of them even expressed a desire for the project to continue or for them to return."

"There are some challenges those youths are experiencing, and I am also experiencing the same thing, so by helping them I am also helping myself to become a better person"

Statements from SYV peer group leaders

### PRELIMINARY RESULTS

- Coded interviews (n=17 of 25); (9 women; 8 men)
- Themes: Youth empowerment, increased confidence, shared benefit with youth, collaboration with colleagues, financial stability
- Nine PGL reported a shared benefit when applying content from SYV to their own lives
- A key motivator was witnessing youth behavior positively change over the course of SYV
- Eleven PGL described meaningful connections with both participants and fellow group leaders
- Request for increased site supervision to further assist PGL in supporting youth with complex challenges
- PGL suggested increasing the enrollment of youths per wave
- Ten PGL communicated that increasing the salary would serve as a valuable incentive

## CONCLUSIONS

- A peer-led, group-based delivery model was a feasible and acceptable implementation strategy to deliver a mental health intervention
- SYV positively impacted the lives of PGLs
- Ongoing training, debriefing time for PGL across sites, and in-person supervision would strengthen the SYV intervention

#### **NEXT STEPS**

- Continue analysis of the remaining 8 transcripts
- Compare and discuss coding results with Tanzanian research assistants
- Create a guide to help new SYV leaders take on the PGL role utilizing feedback from the in-depth interviews

<sup>&</sup>lt;sup>1</sup> Mellins, C. A., & Malee, K. M. (2013). Understanding the mental health of youth living with perinatal HIV infection: Lessons learned and current challenges. *Journal of the International AIDS Society, 16*(1), 18593. https://doi.org/10.7448/IAS.16.1.18593

<sup>2</sup> Cluver, L. D., Sherr, L., Toska, E., Zhou, S., Mellins, C.-A., Omigbodun, O., Li, X., Bojo, S., Thurman, T., Ameyan, W., Desmond, C., Willis, N., Laurenzi, C., Nombewu, A., Tomlinson, M., & Myeketsi, N. (2022). From surviving to thriving: Integrating mental health care into HIV, community, and family services for adolescents living with HIV. *The Lancet Child & Adolescent Health, 6*(8), 582–592. https://doi.org/10.1016/S2352-4642(22)00101-8