

## **Understanding Men who have Sex with Men (MSM) using Human Centered design approach in Zimbabwe.**

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**Background:** Like many African countries, Zimbabwe has a paucity of research on men who have sex with men (MSM). PSI Zimbabwe used human centered design (HCD) to understand the lives of MSM and co-create solutions to improve their uptake of HIV services. We explored the MSM journey to accessing services and created distinct archetypes based on barriers and motivators to accessing HIV services.

**Description:** We used HCD techniques involving immersions, co-designing and prototyping solutions with the MSM community. We conducted 18 focus group discussions, 20 one on one interviews, 3 hotspot immersions and 3 observations across two urban areas over a two-week period. A total of 65 men from the MSM community and 5 service providers participated in this exploration. Thematic analysis was used to analyze the data.

**Lessons Learned:** We identified 6 archetypes and a journey map detailing how each archetype accesses services. These archetypes included: The Glass Box - Identifies as gay only within the MSM community for fear of stigma; The Subtle Champion – Is an advocate providing social and health related support to others; The Flag Bearer - Openly gay and unconcerned with societal stigma; The Dual Life - Conforms to heterosexual societal expectations and embraces his sexuality only in safe spaces; and The Conflicted Heart - Fighting the fact that he has just realized his attraction to men. Although the journey was fairly the same across all the archetypes there were some differences in experiences by different archetypes which resulted in archetypes with

more comfort self-identifying as MSM, like the Flag Bearer, being most likely to engage in the care continuum. A gay man relates to HIV when a man he had sex with dies from HIV. He contemplates getting tested but fears social fall out. After testing, the need to disclose his MSM activity and a lack of provider empathy prevent him from returning.

**Conclusions/Next Steps:** MSM archetypes and their journey to uptake of HIV services differ based on their mindsets and behavior. Understanding these archetypes presents an opportunity to tailor make the provision of HIV services and mobilization activities to their unique needs.