



Protocol for a Community-Based Study: Evaluating the Efficacy of a Six-Month Peer Navigation Intervention on Antiretroviral Therapy Adherence Among Lake Victoria Fisherfolk in Uganda

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Evaluating

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42

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Abstract

Fisherfolk communities around Lake Victoria, Uganda, bear a high HIV burden and face substantial barriers to consistent antiretroviral therapy (ART) adherence, including high mobility, stigma, and limited healthcare access. While peer navigation has shown promise with other key populations, its efficacy within this specific, mobile context is not well established. This protocol describes a study to evaluate the efficacy of a six-month, community-based peer navigation intervention on ART adherence among fisherfolk living with HIV in Uganda. The primary objective is to compare ART adherence rates between intervention and control groups. Secondary objectives include assessing changes in viral suppression, retention in care, and perceived social support. A two-arm, cluster-randomised controlled trial will be conducted in fishing communities. Clusters of landing sites will be randomly allocated to either the intervention arm or a standard-of-care control arm. Intervention participants will receive support from trained peer navigators over six months. Data will be collected at baseline, six months, and twelve months using structured questionnaires, pill counts, and clinical records for viral load. Analysis will follow intention-to-treat principles. As this is a study protocol, no empirical findings are available. The study is powered to detect a clinically significant difference, hypothesising that the intervention will lead to a 20% or greater improvement in the proportion of participants achieving optimal ART adherence ($\geq 95\%$) compared to the control. The study will generate evidence on the effectiveness of a peer-led model for improving HIV care outcomes within a hard-to-reach, mobile population. Should the intervention prove effective, integration of peer navigation

into standard HIV care packages for fisherfolk communities should be considered. HIV, antiretroviral therapy, adherence, peer navigation, fisherfolk, Uganda, cluster randomised trial. This protocol contributes a detailed methodological framework for evaluating a community-based, peer-led intervention aimed at a high-risk and underserved population in East Africa.

Keywords: *HIV, antiretroviral therapy adherence, peer navigation, community-based participatory research, Uganda, fisherfolk, treatment support*

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