



Empowering communities to be healthy and free of TB and HIV

TB/HIV Care's Experience Setting up PrEP Sites and Engaging Potential Service Users

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health

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**Western Cape
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Session Objectives

Objectives

- Define the scope of activities to prepare for the rollout of PrEP to Sex workers (SWs).
- Build participants' capacity to prepare SW communities for PrEP rollout through sharing information and experience.
- Highlight the lessons learned in preparing SW communities for PrEP implementation



Lessons Learned

- Moral judgement doesn't help in addressing effective responses to KPs
- SWs have internal stigma hence they have fear exposing themselves to further stigma and discrimination
- **Provide:**
 - Core health package (including PrEP & UTT)
 - Psycho-social support (mental health – trauma, rape, harassment)
- Human rights violations documented as platform for advocacy to policy changes



Lessons Learned

- It is important not to narrowly define the project as just for sex workers as many women doing “sex work” do not necessarily define themselves as sex workers.
 - The narrow definition can create a barrier for non-SW defined high risk women from coming into programme.
 - Sex Work in our programme is not a “label” but a behaviour that is appropriately then provided tailored HIV prevention interventions
- Defining programme as a “Wellness” programme has increased our numbers of known HIV positives accessing services and thus allowed us to identify known HIV+s not in care and increase overall HIV linkage to HIV care.

Definition of Key Concepts

- **Pre-Exposure Prophylaxis-** is the use of anti-HIV medication that keeps HIV-negative people from getting HIV.
- **Implementation** can be defined as a specified set of activities designed to put into practice an activity or a program.
- **Programme implementation** is defined as ‘... a specific set of activities aimed at implementing an activity or program. It is a process that involves decisions, actions and corrections in order to deliver a program through a series of activities geared toward a mission and results’ (Fixsen et al., 2005).
- **Pre-implementation assessment** is a process of collecting information that will help identify whether an organization or a community is ready to implement a program.
- **PrEP rollout-** term used to refer to the **introduction** of PrEP.
- A **Sex Worker Community Advisory Group** is an independent body made up of representatives of sex workers and its role is to provide real-world experiences and input that help shape the delivery of health services that address their needs.

Skills Builder

- Group Activity 1
- Your organization has been selected by the National Department of Health in your country to pioneer the process of rolling out PrEP to the key population group that you are working with. Your line Manager has an important meeting with Senior Management and she has requested you to develop a set of activities for PrEP implementation which she will present to them.
- Below is an example of what she expects:

Skills Builder (Cont.)

Goal	Associated activities
<p>Goal 1. Pre-implementation Assessment Objective</p> <p>Seek the target population's input in planning for PrEP implementation.</p> <p>Goal 2</p> <p>Goal 3</p>	<p>Conduct exploratory focus group discussions to identify current knowledge, discuss PrEP rollout, attitudes to PrEP use, facilitators and barriers to PrEP use and introduction and possible risky factors</p>

Brief Overview

- TB/HIV Care (THC) - one of the organizations pioneering the introduction of PrEP among key population groups in South Africa
- Rolling out PrEP through existing health delivery platforms has several advantages:
 - E.g. at most THC sites, basic infrastructure already exists
 - THC has vast experience providing direct service delivery around community based and facility based HIV prevention, treatment, care and support services, in collaboration with the Department of Health in South Africa.
 - vast experience in providing comprehensive HIV prevention services
 - employs a dynamic team of well experienced staff -sensitized to work with target populations.

Process of Implementation

Process can be divided into stages namely:

Stage 1

- **Pre-implementation assessments**
- **Goals of this stage are to:**
- find out if organizations have the capacity to implement PrEP
- identify intended beneficiaries' attitudes and current knowledge about PrEP
- identify potential barriers and facilitators to PrEP implementation.

Stage 2. Preparation stage

Goals are to:

- identify and acquire all the resources needed and includes:
- hiring of additional staff
- development of tools and acquisitions of all needed materials
- training of implementing teams
- preparing implementation sites
- engaging stakeholders and ensuring that current operational relationships maintained -
- Memorandums of Understanding are signed.
- necessary modifications to ensure that PrEP Programme fits the specific needs of intended beneficiaries are made

Stage 2 implement PrEP

- Launch PrEP
- PrEP provision commences

Pre-Implementation Organizational Assessments

- In preparing to rollout PrEP organizational and community assessments were undertaken.

Purpose

- To determine THC and the target communities' readiness to implement PrEP
- **Organizational Assessments (by NDoH) were to determine:**
- TB/HIV Care's capacity to implement PrEP:
- These included assessment of:
 - financial sources
 - staffing
 - organizational commitment
 - administrative systems
 - estimates of potential users
 - facilitators and potential barriers to PrEP uptake

Pre-Implementation Community Assessments

- PrEP is a new intervention and insights on how best to introduce it are needed.
- We conducted a series of informal interviews with:
- Programme champions and individuals well-informed about PrEP who among other things emphasised the need:
 - *For PrEP implementers to have a strong understanding of the intervention and to identify barriers and facilitators to its (PrEP) introduction.*
- Convened a series of meetings with Sex Worker Community Advisory Groups (CAGs) at each THC implementing site.
 - They recommended consultation as an important implementation support strategy. *'We strongly recommend that potential users of PrEP be consulted and engaged in planning for PrEP rollout and this includes seeking their suggestions on ways to raise awareness of and stimulate demand for PrEP services'*

Electronic Literature Search

- Motivated by these informal interviews and the CAG meetings we conducted, electronic literature searches were also carried out to learn more about PrEP implementation.

Literature Sources

- open access publications
- conference reports
- Thesis and Dissertations
- Inability to access publications that were not open access was a major barrier to the information I needed.

Electronic Literature Search (Cont.)

Search Terms

- A list of key words and phrases that described topic of interest were compiled
 - Examples included;
 - PrEP Implementation
 - Perceived barriers and facilitators to PrEP implementation
 - Challenges of implementing PrEP
 - Experiences implementing PrEP
 - Used the key terms to search literature on the internet.
- Common factors were identified in the reviews which we grouped into categories

Interview Guide

- Literature search results gave ideas on how to structure questions for the Interview guide.
- Questions were structured in a way that would also enable us find out if factors identified in our reviews would also be raised during our discussion with participants.
- Between May and Nov. 2016, 6 focus group discussions (FGDs) including 42 female and 6 male SWs were conducted at 6 THCA sites in eThekweni, Pietermaritzburg, uMkhanyakude, Port Elizabeth, Mthatha and Cape Town.

Objectives

- To gather data that would enable us to gain an understanding of :
 - Participants' basic awareness and understanding of PrEP,
 - Attitudes and likelihood of PrEP use,
 - Barriers to and facilitators of use,
 - Possible risky sexual practices that could result from starting PrEP,
 - Preferred models of PrEP delivery

Findings from Focus Group Discussions

Participants' knowledge about PrEP

- Knowledge varied from site to site
- Focus group participants in Cape Town were better informed about PrEP than those at the other 5 THCA sites

Identified information gaps included:

- Limited or no knowledge about PrEP effectiveness
- Side-effects
- Target populations for PrEP
- How to access PrEP
- Duration of treatment
- Confusion between PrEP and PEP

Findings (Cont.)

Motivators for taking PrEP included:

- need to stay HIV negative and
- provision of sex workers- sensitized services by THCA

Barriers of PrEP uptake

- fear of HIV testing,
- potential stigma and unintended disclosure of sex work,
- negative peer influence (resulting from myths and misconceptions) leading to discouragement to use PrEP.

Suggested solutions

- Awareness raising and education which include:
 - the use of social media,
 - peer education,
 - dissemination of educational materials,
 - use of ‘early adopters’ of PrEP as demand generators and programme ambassadors
 - targeted advocacy.
- Information gathered was useful in informing PrEP implementation.

PrEP Implementation Workplans

- Using the findings from pre-implementation assessments
- Guidance from NDoH and drawing extensively upon our experience implementing interventions for key populations
- We developed Comprehensive PrEP implementation workplans for each site.

PrEP Implementation Work-Plans (Cont.)

- Eight (9) key components identified for the Workplan were:
 1. Pre-implementation assessments
 2. Preparation of PrEP implementation sites
 3. Programme Adaptation/Modification
 4. Training and Support
 5. Mobilization of Target Group
 6. Community and Stakeholder Engagement
 7. Post Violence Care
 8. Monitoring and Evaluation
 9. Delivery of PrEP Services
 10. Activities under each key component-developed.

Lessons Learned

What Lessons have we learned?



Preparing PrEP Implementation Sites

- Proper planning is needed when setting up PrEP sites as the process might take long and delay PrEP initiation.
- Ensure that the following are in place and meet the required standard:
 - Pharmacy
 - Wellness Room
 - Storeroom
 - Identify an experienced person within the organization e.g. a clinician and pharmacist to assist with setting up the infrastructure.
 - Also seek assistance from relevant DoH
- Other factors that might also delay PrEP initiation include:
 - Delays in signing up of MoU
 - **Absence of nurses with dispensing licences**
 - Need to ensure that a comprehensive HIV prevention package is in place before PrEP initiation

What it takes to be successful

- To effectively prepare sites for PrEP implementation there is need to:
 - understand the major aspects of the program
 - Intensive training on the intervention (PrEP)
 - Deep understanding of PrEP guidelines and policy
 - Understand that PrEP is part of a comprehensive HIV prevention package
- Ensure that resources needed to support implementation are available
 - Financial
 - Human
 - Materials (IEC materials, job aids, tools , SOPs)
- Ensure implementing staff members are trained in and understand SOPs that apply to their roles

Organizational Leadership

- Leadership and guidance are critical to programme success.
- Senior management should be committed to rolling out PrEP.
- We have found it useful to establish a small team of experts to lead the implementation process.
- This consists of :
 - insightful and determined clinicians
 - well experienced community engagement specialists
 - Site managers and Programme Coordinators

Programme champions

- We learnt the importance of identifying programme champions within the organization.
- These are people who are:
 - Passionate about and committed to implementing PrEP
 - Collaborative and open-minded
 - experienced in implementing community-based programmes
 - they mobilize support for the intervention
 - have good understanding of the intervention and willingness to learn
 - able to build capacities in others
 - Consultative and influential
 - Articulate at problem-solving.

Hiring staff

- Where additional staff is needed, **ensure that:**
 - They are qualified and experienced in delivering HIV prevention interventions.
 - They have (in some instances) specific skills or attributes needed e.g.
 - Nurses with dispensing licences
 - Peer outreach workers –familiar with the context of the programme
 - Are willing to work with or are experienced in working with key populations

Training

- Important to ensure everyone involved in implementing PrEP is adequately trained and well supported.
- Includes all clinical and non-clinical staff.
- Send key staff members to NDoH PrEP workshops so that they in turn, will roll out the training to others
- Develop training plan to train site-level staff on PrEP
- Take advantage of NDoH on-site training to build staff capacity
- Ensure all lay counsellors/Peers are trained on PrEP, Behaviour Change Interventions and adherence counselling
- Train selected staff to run adherence support groups
- Develop coaching, mentoring and supervision plan
- Within THC, staff at sites that are now experienced in providing PrEP coach and mentor other at sites preparing to rollout PrEP.

Community and Stakeholder Engagement

- Effective engagement of the target community and relevant stakeholders is critical to ensure buy-in and support of the PrEP Programme.

Who are the Stakeholders?

These include but are not limited to:

- -potential beneficiaries of PrEP
- -stakeholders like NDOH/DoH, and funders
- Other PrEP implementing partners
- It is important to develop strategies to consult and communicate with these stakeholders.

Mobilization of Target Population

- Effective mobilization of potential beneficiaries of PrEP is effective in order to:
 - Garner support for the intervention and stimulate demand.
 - This is achieved through conducting education during peer outreach, support groups and Community Advisory Group meetings
- **Important** to ensure all staff who interact with clients are conveying accurate and precise messages about PrEP
- Supervised role-plays in PrEP messaging is one useful strategy
- Ensure that the community mobilization and education approach is informed by the targeted beneficiaries.

Delivery of PrEP Services

- **To ensure effective delivery of PrEP services**
 - Listen carefully to the voices of both potential and current PrEP users
 - Conduct focus group discussions and enlist feedback from CAG
 - Seeking the target population's ideas and opinions leads to the provision of a client-informed service.
- **Remember**, PrEP should be offered as part of a comprehensive package of services that include;
 - HIV testing services, sexually transmitted infections, TB, sexual reproductive health screening services; behaviour change interventions, condom and lube distribution and demonstration.
 - A strategy to link PrEP clients to support and adherence groups and other services they require should be developed.

LISTENING IS POWERFUL

While PrEP protects against HIV infection, I now know that it does not protect against pregnancy and other sexually transmitted infections, so I will still continue to use condoms.

For me the benefits of taking PrEP are more than the risks

It is important to raise awareness about PrEP so that those interested in it will not be discouraged by myths and misinformation

We need more information on PrEP. Knowledge is power

Taking PrEP removes the fear and anxiety of getting infected with HIV during sex

We also have a responsibility of educating our peers about the importance of knowing one's HIV status and the benefits of PrEP.

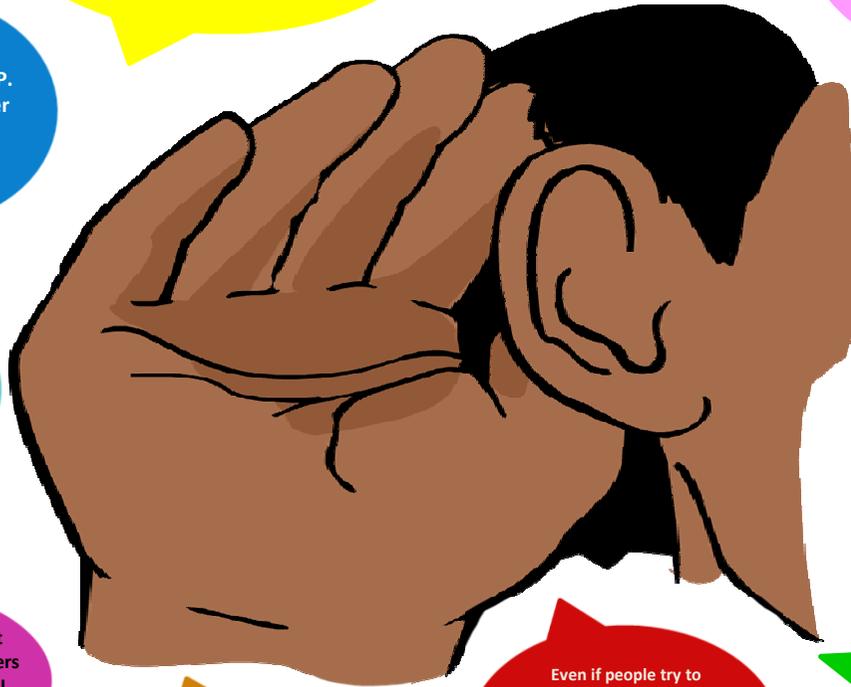
I think those will use PrEP should help create demand for this prevention method.

I am not forced to make it known to my family members or my sexual partner that I am using PrEP.

PrEP will give me greater control over my risk to HIV, rather than relying on my partner or clients to use condoms.

Even if people try to discourage me from using PrEP, I won't pay attention. I value my life since I only have one life to live.

PrEP is my right and it is also my responsibility to make sure that I take it daily.



Monitoring and Evaluation

- Develop a system to collect information and measure the effects of the PrEP programme
- Put in place a system to continuously get feedback from the target community e.g.:
 - Regular Community Advisory Group meetings.
 - Focus group discussions with both potential and current PrEP users

Don't underestimate the power of qualitative data:

- Use it to strengthen the PrEP Programme
- Qualitative data provides the missing element in statistical information.

Acknowledgements

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