

What is this series about?

This video series looks closely at several demonstration project sites in Kenya where LVCT Health is offering oral PrEP. Each video consists of a short case study of thematic challenges that emerged in the course of offering PrEP. PrEP-users share their experiences and program staff and providers describe tactics they developed such as responsive counseling, peer support and high-impact engagement with the community to overcome those barriers and support PrEP use among those who need it.

Purpose, Audience and Methodology

Purpose: To use the voices and stories of providers and PrEP users to capture and share the experiences and lessons learned from programs introducing oral PrEP.

Audience: Program implementers in Kenya and other settings. Policymakers in Kenya and other countries (ministries of health, etc.). Providers, support groups for people using PrEP, advocates, donors in the HIV prevention space. Additionally, as new products move through the pipeline, the videos will serve as reference for the future introduction of HIV prevention products.

Methodology: Unscripted interviews with PrEP users and providers at LVCT Health IPCP demonstration project sites in Nairobi, Homa Bay and Kisumu.

Video Specifics

Getting Women in the Door

Issue: Women find it difficult to come to a clinic for oral PrEP services because of stigma. Additionally, taking medicine for prevention is not a common practice.

Key Findings: Testing in the community, reaching women where they access family planning or other services, and peer to peer encouragement increased the number of women accessing oral PrEP

Making Oral PrEP Services Work For Women

Issue: Women are more likely to start and continue oral PrEP if clinics offer an accommodating and welcoming experience.

Key Findings: Integrated services, sensitized staff, adjusted clinic hours, support groups and hotline numbers encouraged women to take up and stay on PrEP.

Month One

Issue: Women who begin oral PrEP often do not continue after the first month due to side effects, stigma, and the burden of a daily pill.

Key Findings: Programs can minimize drop off during month one with continuous communication, easy access to staff and support groups.

Stigma and Pill Taking

Issue: Stigma, travel and work make daily pill taking complicated for many women.

Key Findings: LVCT Health helped women develop pill taking strategies that worked for individuals' unique situations.

Messaging and Myths

Issue: Myths and confusing messaging surround oral PrEP.

Key Findings: Delivering accurate messages consistently will be necessary for women to accept oral PrEP.

Influencers

Issue: Men often have the power to decide if a woman uses oral PrEP.

Key Findings: Programs trying to reach women need to actively engage men who act as "gatekeepers" for women considering starting PrEP.

For more information and to view the videos visit www.prepwatch.org/providing-oral-prep