

## **Breaking the Cycle of Transmission:**

# A human-centred approach for improving pathways to HIV testing and linkage to treatment among young men in South Africa

### **OVERVIEW**

Testing and Treatment for Men (TTM) is a three-year, \$5 million project funded by the Bill and Melinda Gates Foundation and implemented by Population Services International in collaboration with research partner Ipsos and design partner Matchboxology.

The project aims to increase uptake of HIV testing services (HTS) by young South African men at high risk of acquiring HIV and initiation on antiretroviral therapy (ART) for those already living with the virus.

The project seeks to answer three overarching questions:

1. What are the barriers and drivers for high-risk young men in South Africa testing for HIV and seeking treatment if positive?
2. How can we use ethnographic research, journey mapping, segmentation, and human-centered design approaches to improve uptake of HIV testing and treatment among this demographic?
3. How can we make the results of this work a widely used "public good" that informs programming across a wide array of funders and implementers?

### **THE CHALLENGE: INCREASING UPTAKE OF HIV SERVICES BY YOUNG MEN IN SOUTH AFRICA**

While ART coverage has grown substantially in South Africa in recent years, HIV incidence rates have not declined as expected, with especially high rates of infection among adolescent girls and young women. Research suggests that these young women are primarily acquiring HIV from male sexual partners who are five to ten years older.

Despite efforts to increase testing throughout the population, many young men do not know their status, and many who do know they are positive do not link to treatment. New approaches are required to close

these critical gaps, both to improve the health and well-being of young men and to prevent new infections in their sexual partners.

### **UNDERSTANDING THE NEEDS OF STAKEHOLDERS**

The project will begin by engaging a wide range of South African stakeholders, including South African government (at national, provincial and district levels), funders, NGO and CBO implementing partners, representatives of normative bodies such as the World Health Organization and UNAIDS, and civil society organizations.

The aim is to understand what evidence and resources would help these stakeholders in shaping policy and programs, so that PSI and its partners ask the right questions and design the research in a way that will deliver concrete, actionable insights and solutions that measurably improve results.

PSI will regularly involve this broad set of stakeholders, with a smaller Community Advisory Group actively engaged throughout the process.

### **APPLYING NEW TOOLS TO UNDERSTANDING AND REACHING YOUNG MEN**

Over the last decade, pharmaceutical companies and other private sector companies have been refining tools that provide deeper insights into consumers and consumer behaviors, with a goal of driving improved sales and consistent use of products. These tools use ethnographic observation techniques to learn more about what is shaping consumer behavior, and then apply these learnings to map a consumer's journey from first awareness of a product or service to using it consistently.

These insights also lead to more sophisticated segmentation of target populations, moving beyond simple disaggregation by age/sex/geography to



segmentation based on shared psychological characteristics. This psychographic segmentation yields new insights into the messages and product characteristics most likely to increase uptake and allows for more targeted marketing campaigns.

While public health organizations like PSI have been seeking consumer insights for many years, these tools deepen our ability to understand consumers of healthcare services, including HIV testing and linkage to treatment.

Research partner Ipsos will conduct a series of studies of high-risk young men as well as HIV service providers, using ethnographic observation, qualitative interviews and quantitative surveys to conduct journey mapping and segmentation. The research will seek to frame young men's journey through the healthcare system, as well as the norms, beliefs, needs, hopes, fears, risk perceptions, behavioural drivers, and other factors influencing uptake of testing and treatment, in order to design human-centred interventions that reflect the realities and preferences of different segments within this population and thereby reach them more effectively.

The insights from this research will inform an iterative design phase led by Matchboxology, which will yield a small set of pilot-able interventions. PSI will competitively select local implementing partners to conduct these pilots, and will design an evaluation to measure performance on key indicators.

### BRINGING HUMAN-CENTRED DESIGN TO HIV INTERVENTIONS

The project will begin by engaging a wide range of South African stakeholders, including South African government (at national, provincial and district levels), funders, NGO and CBO implementing partners, representatives of norm

The commercial sector has also been embracing new ways to design products and services that more deeply engage the consumer. These "human-centred" design approaches set aside assumptions about customers and start fresh, putting representatives of the target population at the heart of the design process.

Using insights derived from research, participants rapidly brainstorm and prototype solutions, placing each iteration – however rough and unfinished – in front of target consumers. This "fail fast" technique

allows product and service designers to move quickly through ideas that won't work to arrive at ones that will.

Long focused on bringing market-based approaches to public health, PSI is applying human-centred design to the challenge of increasing contraceptive use among adolescent girls and young women in Ethiopia, Nigeria and Tanzania, as well as increasing demand for medical male circumcision in Zambia and Zimbabwe.

Under this project, PSI and its partners will apply these approaches to the problem of low demand for HIV testing and linkage to ART among young men.

### COLLABORATION WITH THE HIV PREVENTION MARKET MANAGER PROJECT

This project is closely linked to the HIV Prevention Market Manager (PMM) project, also funded by the Bill and Melinda Gates Foundation and implemented by AVAC. The PMM project in South Africa aims to increase uptake and effective use of HIV prevention among adolescent girls and young women. The two projects share a joint South Africa Project Director and will collaborate on research design as well as sharing of knowledge, data and learnings.

### SHARING FINDINGS AND RECOMMENDATIONS FOR MAXIMUM IMPACT

In its final phase the project will support implementing partners in the development of concrete strategies and tools that reflect insights from the research and pilots. Matchboxology will conduct design workshops for interested organizations, and then provide follow-up support as needed. The project will also aim to disseminate results via conferences, publications, and other media.

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## BREAKING THE CYCLE OF TRANSMISSION:

# A human-centred approach for increasing uptake and effective use of HIV prevention among adolescent girls and young women in South Africa

### OVERVIEW

The HIV Prevention Market Manager (PMM) project is starting a two-year collaborative research project to provide in-depth understanding of the HIV prevention needs, wants, challenges and opportunities among adolescent girls and young women in South Africa, especially those at high risk of acquiring HIV.

Funded by the Bill & Melinda Gates Foundation, PMM is leading the research in partnership with behavioural research firm Final Mile, user-centred design firm Upstream Innovation and market research group Ask Afrika, with the Surgo Foundation providing strategic guidance.

The research team will work closely with the National Department of Health in South Africa, as well as leading South African programme implementers, researchers, community and civil society organisations working with young women to ensure coordination of activities and integration of findings

### RESEARCH OBJECTIVES

- Improve understanding of factors that impact uptake and effective use of HIV prevention options amongst adolescent girls and young women, with a specific focus on those at highest risk. These factors may include lifestyle, perceptions of risk, motivators and drivers. The research should shed light on enablers and barriers to uptake and adherence of HIV prevention products and services.
- Work with young women as co-creators and partners to understand different segments of the population and identify what prevention products, services and approaches may be most desirable for different adolescent girls and young women.
- Generate product-agnostic information that is

able to change high-risk behaviours and provide guidance on the types of products and programs that would most likely succeed.

- Map preferred prevention product characteristics for various segments of the at-risk population.
- Demonstrate how the project methodology can lead to solutions and interventions that can successfully improve uptake and adherence to HIV prevention products.
- Produce outputs that are actionable and sustainable for a range of implementation partners and the South Africa Government to use in their programs independently.

### METHODOLOGY

The project integrates several different research techniques, including ethnographic research, journey mapping, human-centred design, and discrete choice experiments. This ensures a comprehensive approach and addresses the research hypotheses from a variety of angles to get as complete an understanding as possible. Each research step informs the next step with findings.

### GEOGRAPHIC AND POPULATION FOCUS

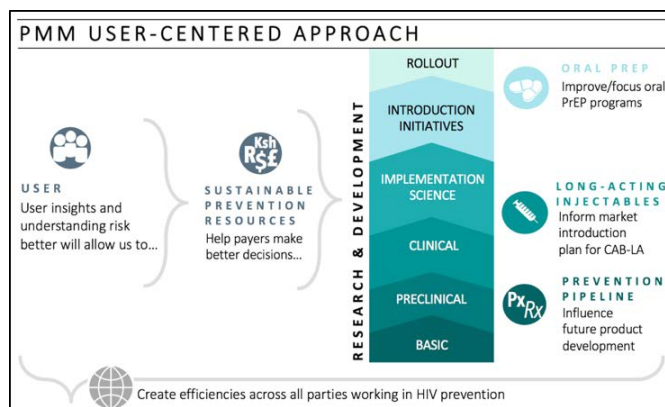
The research is proposed to focus on districts within two provinces in South Africa: KwaZulu-Natal and Mpumalanga. The selection of sites will be guided by HIV prevalence, overall size of population, size of population of adolescent girls and young women at high risk, and urban/rural split, as well as the government's understanding of needs and the communities themselves. The target population is young women 15-24 years of age. In the qualitative research phase influencers of young women will be included.

Research Phase	Priority Question	Outcomes
1. Immersion Phase	How do we define and identify adolescent girls and young women at greatest risk of HIV?	<ul style="list-style-type: none"> <li>Literature review</li> <li>Interviews with stakeholders, including researchers, implementers, policy makers, donors, civil society groups, government representatives and providers. Interviews aim to capture stakeholders' needs, expectations and knowledge.</li> <li>Understand the government's and implementers' needs in order to ensure that all research findings, insights and associated content developed is actionable.</li> </ul>
2. Qualitative Research Phase	How do we reach them?	<ul style="list-style-type: none"> <li>Map the pathways to individual decisions and behaviours made by adolescent girls and young women.</li> <li>Identify key prevention drivers.</li> <li>Identify uniform behaviours, attitudes and motivators among adolescent girls and young women to serve as inputs into quantitative research.</li> </ul>
3. Quantitative Research Phase		<ul style="list-style-type: none"> <li>Define comprehensive segments by behavioural attributes.</li> <li>Develop segment profiles based on behavioural drivers of adoption and adherence and possible preferences for prevention product characteristics.</li> </ul>
4. Discrete Choice Modelling (DCM)	What is the right package to deliver?	<ul style="list-style-type: none"> <li>Map effective products by segment.</li> <li>Provide information that includes desirability and preference for prevention products, and characteristics of products that contribute towards adoption and adherence.</li> </ul>
5. Human Centered Design	How do we support them to adopt and sustain?	<ul style="list-style-type: none"> <li>Ideation phase will consist of two co-creation design work streams: prevention behaviours and ideas leading to risk reduction behaviours, such as influencing risk perception, and on generating ideas towards increasing adoption and adherence of prevention products.</li> <li>Solution process will select one concept for the purpose of small-scale prototyping with the goal of quickly iterating in the field and assessing effectiveness. The concept will be tested in a number of clinic settings.</li> </ul>

## HIV PREVENTION MARKET MANAGER APPROACH

Funded by the Bill & Melinda Gates Foundation and implemented by AVAC in partnership with Clinton Health Access Initiative, the PMM Project seeks to facilitate the efficient and effective development and rollout of HIV prevention interventions. The PMM works with a range of partners to expand the portfolio of options, and to ensure these options are available, accessible and used by those who need them most. Findings from this research project will inform related PMM project objectives.

This research project is closely linked to the Testing & Treatment for Men (TTM) project, also funded by the Bill and Melinda Gates Foundation and implemented by PSI. The project aims to increase uptake of HIV testing by young men at high risk of acquiring HIV and linkage to treatment for those who test positive. The two projects share a joint South Africa Project Director and will collaborate on research design as well as sharing of knowledge, data and learnings.




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