

# Translating operations research findings into rapid programmatic action: Reflections from the ACCESS study in South Africa

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## BACKGROUND

In September 2015 the World Health Organization (WHO), released its updated recommendations on Test & Treat and oral pre-exposure prophylaxis (PrEP) for HIV. Application of these recommendations were said to have the potential to avert more than 21 million HIV-related deaths and 28 million new infections by 2030 (1).

**WHO Recommendation (30 September 2015):**  
*Treat all people living with HIV, offer antiretrovirals as additional prevention choice for people at “substantial” risk.*

In response to the WHO recommendations on oral PrEP, the South African National Department of Health (NDoH) convened a National PrEP Technical Working Group (TWG), comprised of implementing partners, donors, civil society, researchers and programmers in October 2015 to inform oral PrEP rollout. The TWG was instrumental in the development of the South African National Policy on PrEP and Test and Treat and by June 2016, oral PrEP was launched in South Africa in a phased approach, beginning with sex workers, followed by men who have sex with men (MSM) and adolescent girls and young women (AGYW) (Figure 1)

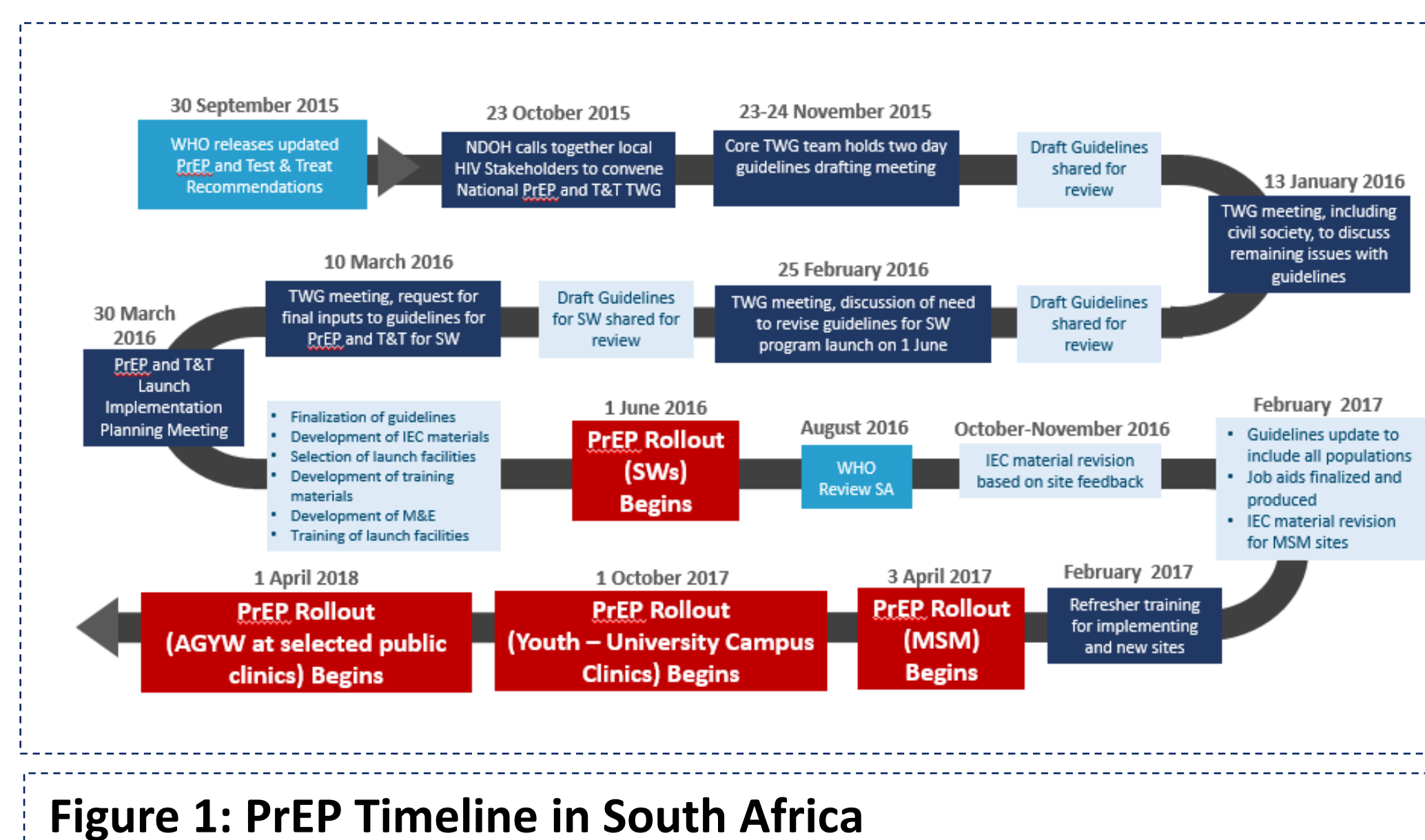


Figure 1: PrEP Timeline in South Africa

The TWG meets regularly and remains a platform for sharing programmatic and research data to inform service delivery. The OPTIONS Consortium (USAID) and the Prevention Market Manager project (BMGF) are part of the TWG through Wits RHI and the Clinton Health Access Initiative respectively.

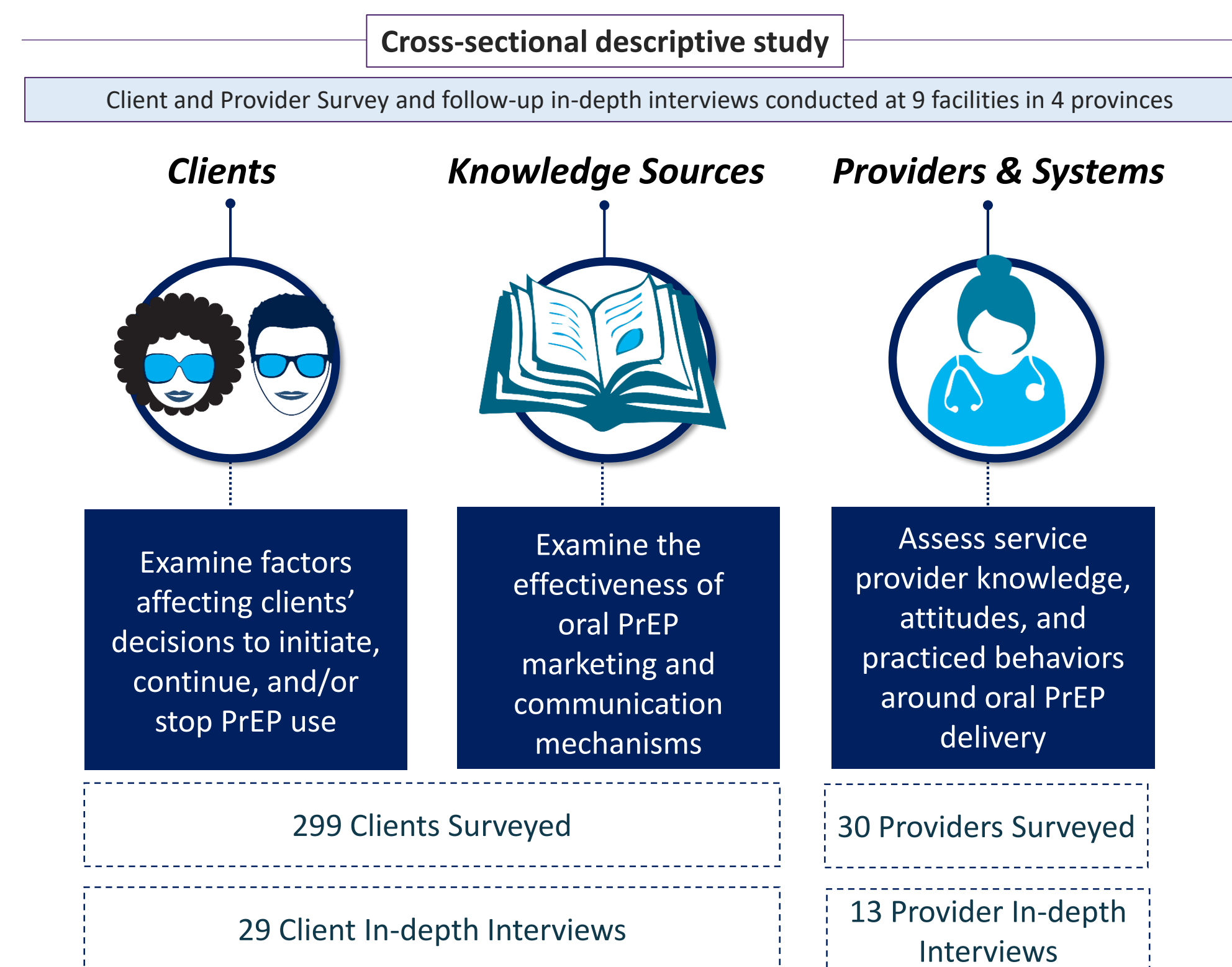
**OPTIONS** stands for *Optimizing Prevention Technology Introduction on Schedule* and is a 5-year USAID-funded technical assistance grant aimed to provide targeted support to expedite and sustain access to ARV-based HIV prevention products in countries and among populations where most needed. Core partners include FHI 360, Wits RHI, AVAC and primary partners include Avenir Health, FSG, LVCT Health, LSHTM, McCann Health, and PZAT

**HIV Prevention Market Manager (PMM)** is a Bill and Melinda Gates Foundation-funded grant through which AVAC and CHAI seek to facilitate an efficient and effective rollout of HIV prevention products. The PMM project works with partners across the prevention research to rollout spectrum to expand the portfolio of options and ensure prevention products are available, accessible and used by those who need them most.

At the request of the NDoH, the OPTIONS Consortium, the HIV PMM project, and the NDoH collaborated to carry out operations research under the ACCESS study (Advancing PrEP: Comprehensive and Combined Evaluation of Services for Sex workers and men who have sex with men [MSM]).

## BACKGROUND

### WHAT IS THE ACCESS STUDY?



## METHODS

- When the ACCESS study was being conceptualized, study plans were shared with the TWG and input was provided
- This was followed by sharing of the study protocol and data collection tools and input was provided
- Prior to data collection, the NDoH facilitated buy-in and approvals from clinics through formally drafted letters to the clinic in support of the ACCESS study
- Survey and in-depth interview data were collected from clients (aged 18 and above) at 9 PrEP implementing clinics (6 sex worker clinics, 3 MSM clinics) from September 2017 to January 2018
- After the completion of the survey data collection and prior to the start of the qualitative research phase of the study, preliminary findings from descriptive analysis of survey data were shared with TWG in November 2017
- The TWG provided input on focus areas for the qualitative research phase of the study
- Additional quantitative findings were shared with the TWG in March 2018 and final results in October 2018 in the form of a detailed PowerPoint presentation and a technical brief
- Programmatic action was taken by the NDoH

## CONCLUSIONS

- All too often research findings only reach program implementers at the stage of publication, and at times lose relevance due to the lengthy time periods prior to results dissemination
- Developing a method of how research findings can rapidly be turned into practice is key to ensuring the impact of public health research
- Our methods of engagement with NDoH and TWG proved to be effective, resulting in rapid translation of translating research findings into programmatic action**
- This was achieved by ensuring NDoH was a core research partner and getting input from NDoH and TWG at every step of study planning, implementation, reporting, and translation
- This method of engagement can be applied within any healthcare setting for rapid programme refinement (learn and adapt) and is an **example of good participatory practice being applied to programs**

## RESULTS

Findings	Programmatic Implications	Programmatic Action
Discontinuation was primarily driven by experience of intolerable side effects & management of side effects was not well covered in counselling sessions	Provider training needs to emphasize counseling on management of side effects in order to manage client expectations.	Revision by the NDoH of the national PrEP training clinical and counseling sessions to provide more emphasis on counseling about side effects and how to manage them. This was achieved within three months of receiving these preliminary results.
Information, Education and Communications (IEC) materials influenced initiation and continuation of PrEP	Well-designed, empowering, and concise IEC materials that have been developed with input from potential users can be influential in improving client knowledge and encouraging continued use	Influenced decisions on the use of current IEC materials for future PrEP promotion relevant to PrEP scale-up
13% of clients interviewed had never heard of PrEP	More attention is still needed for PrEP promotion.	Development of myPrEP.co.za website targeted at general public, providers and PrEP users
Providers displayed adequate knowledge but were uncertain about providing PrEP to sero-discordant couples with a virally suppressed partner	Provider knowledge highlights the effectiveness of the National PrEP training; however, this finding points to additional training need	Reinforced eligibility criteria during NDoH PrEP training
Provider attitudes about PrEP are being explored through additional research, and findings will inform providing training		

### Considerations for Future research focus areas that were shared with the TWG:

In-depth understanding of stigma for clients discontinuing and continuation support strategies

### Reflections on effective operations research

#### Working together not apart:

OPTIONS and PMM effectively collaborated, drawing on the collective strengths and relationships built by each program to produce outputs of national relevance to oral PrEP programming

#### Making your voice heard:

Being identified as technical experts and our inclusion on the TWG was paramount to these research findings being put into programmatic action, and that could only be achieved with consistent communication of findings with the TWG



References: (1) <https://www.who.int/mediacentre/news/releases/2015/hiv-treat-all-recommendation/en/>

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