

WELCOME!



PREP LEARNING NETWORK REGIONAL WORKSHOP

11-13 NOVEMBER 2019

Blantyre, Malawi

HOSTED BY OPTIONS, EPIC AND RISE



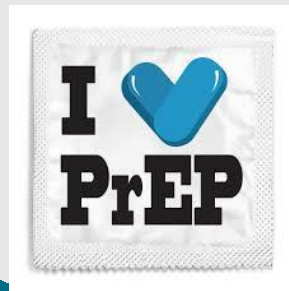


Moving PrEP Forward – where we are and where we need to go

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PrEP – where are we?

Approx 63 countries
implementing!



Why is PrEP Implementation Challenging?

ACCESS: Policies not inclusive of all populations; limited geographic roll-out; insufficient number and variety of facilities providing PrEP; lack of community delivery or refill options (PrEP differentiated models of care)

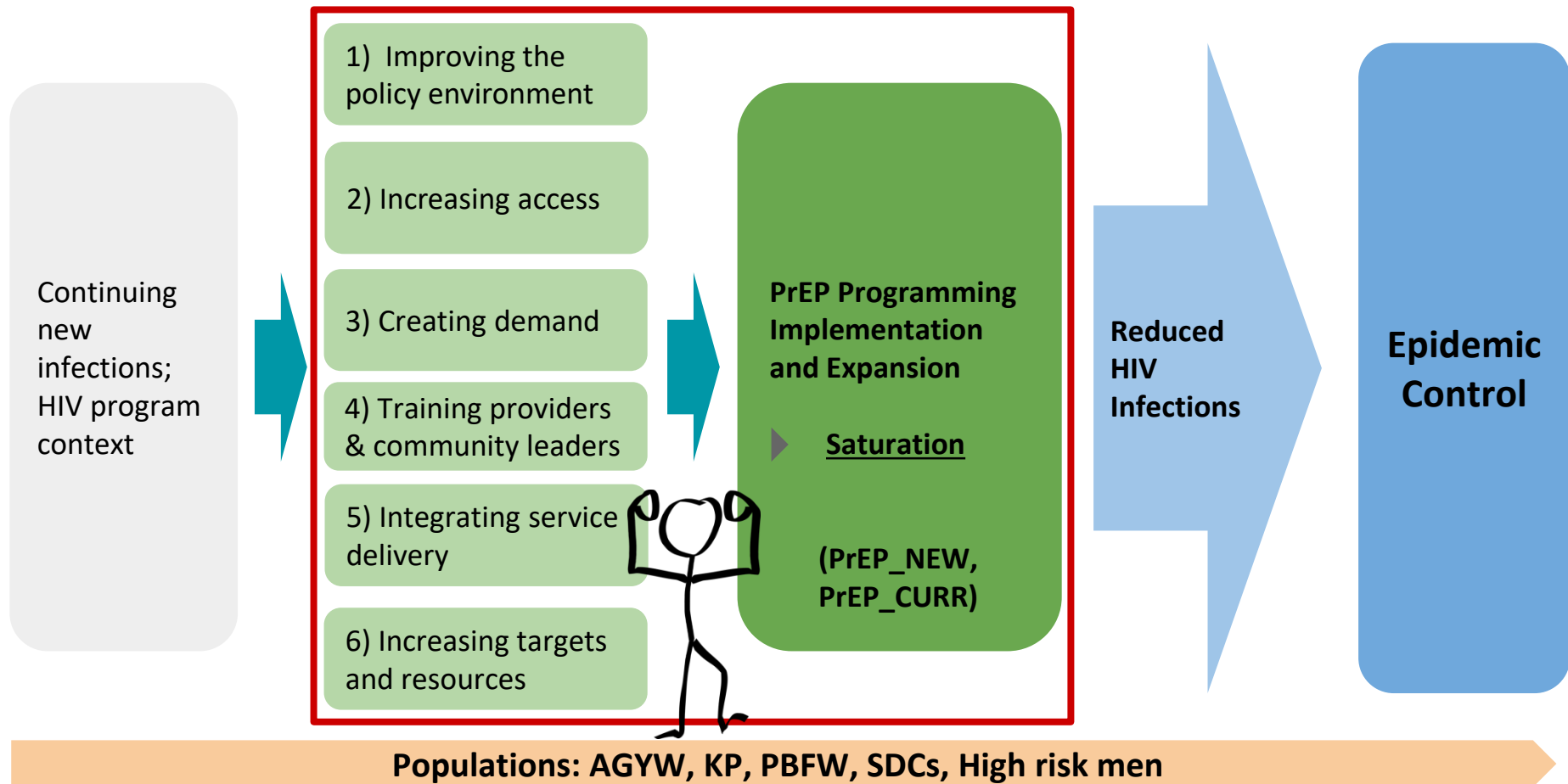
AWARENESS: Knowledge gaps among partner staff (prioritizing 95-95-95), providers (confusing PrEP with PEP), and communities (unaware of PrEP, myths/misconceptions)

CAPACITY: Many providers and community mobilizers lack the skills and confidence to deliver or talk about PrEP

EFFECTIVE USE: Difficult to take a daily pill; lab tests are a barrier; stigma with taking an ARV or being seen at HIV testing or treatment center

TEST-AND-PREVENT: Many missed opportunities to link high risk negatives from testing to prevention (PrEP, VMMC)

Fitting PrEP in and making it work - Theory of Change



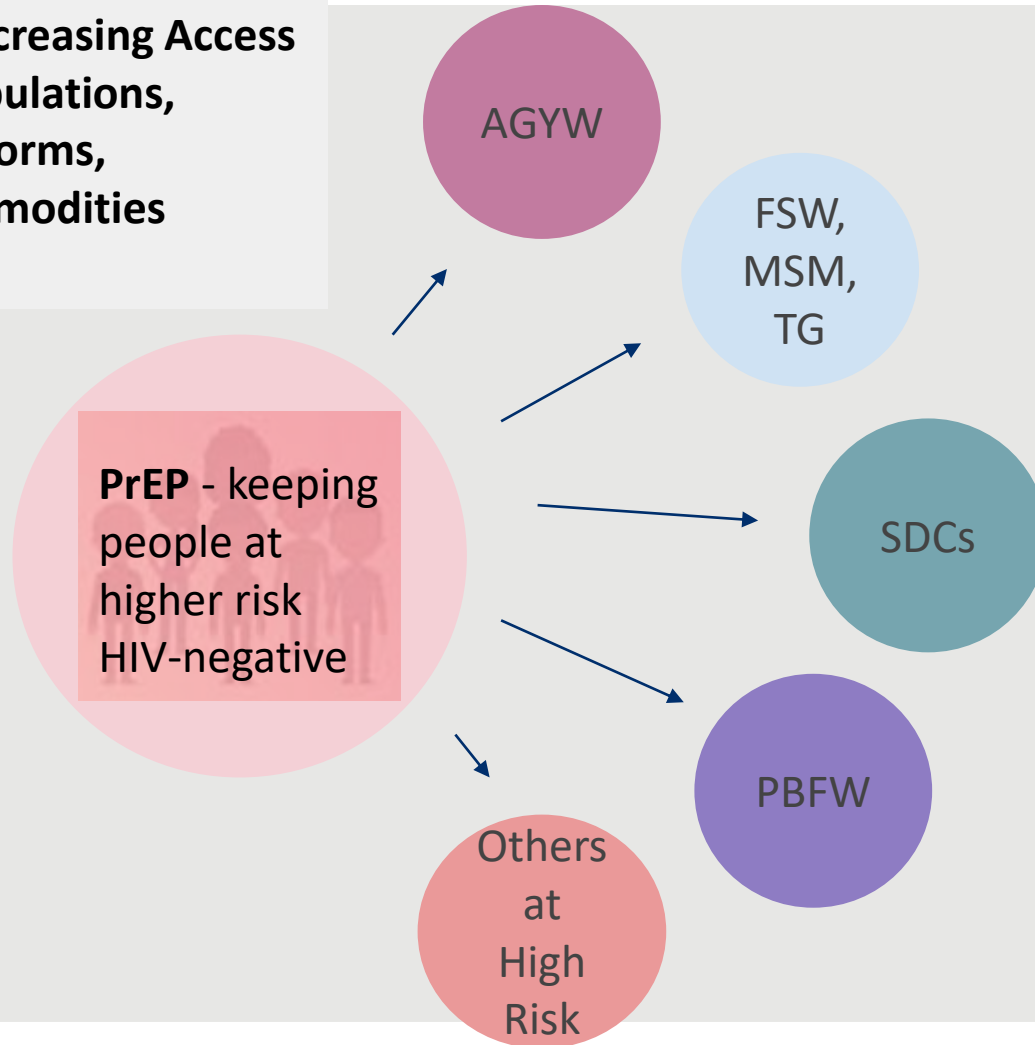
PrEP Saturation: when level of use in a given geographic area results in reducing new infections, taking into account the effect of PrEP on its own and in concert with the wider ART and HIV programming context.

(Measured in MER = PrEP_NEW & PrEP_CURR)

1) Improving the policy environment for PrEP

- Ensure PrEP policy and guidelines are in place - through TWGs, MoH partnerships/collaboration
- Ensure these follow WHO guidelines for inclusive, non-stigmatizing approaches
- Work with implementing partners, other funding partners, and MoHs/DoHs to **fully implement guidelines**

2) Increasing Access - Populations, Platforms, Commodities



- PrEP services should meet people where they are

- Information and linkage to services must be available at all service delivery points (primary care, index testing, STI services, ANC, family planning, ART, VMMC)

- Drugs and other commodity procurement must be integrated into standard channels

3) Creating demand for PrEP across populations and contexts

- Include diversified platforms/communications strategies
 - General to create awareness
 - Targeted to reach those at highest risk (KP, AGYW, SDCs, high risk men, pregnant and breastfeeding women)
- Draw from central mechanism expertise to support demand creation activities and support local partners/development of strategies and materials



4) Training providers and community leaders

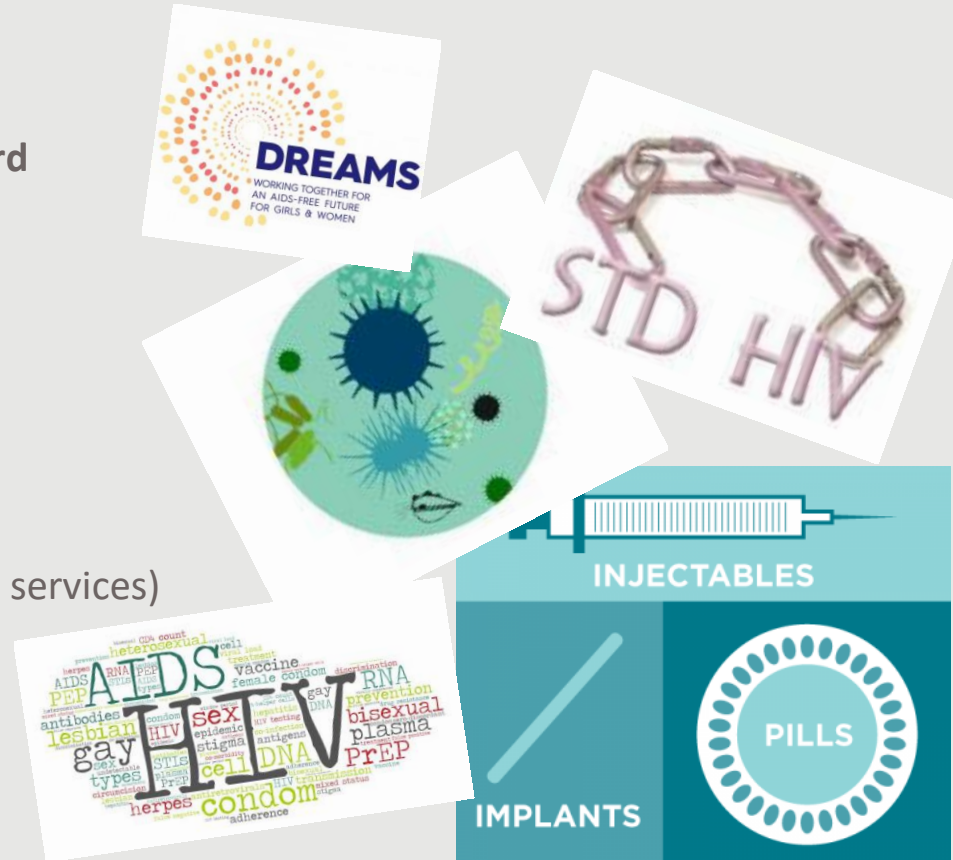
- Ensure strong initial trainings through TOT, based on WHO standards and guidelines
- Support medium-term follow up in clinics to ensure training of all providers
 - All should know at least what PrEP is
- Ensure there is plan for longer term training to account for turnover, staff fatigue, etc

Let's talk
about PrEP!



5) Integrating service delivery to leverage expansion opportunities for PrEP

- Offer STI services with PrEP as a standard
- Integrate PrEP into other platforms
 - ANC
 - Treatment
 - VMMC (demand creation)
 - DREAMS (also link partners to PrEP services)
 - Family Planning



6) Increasing PrEP resources and targets/programming

- Motivate for resources to support expanded programming and increased targets
 - Budget code for PrEP
 - Protected, increased funding
- **Continue to increase PrEP_NEW and PrEP_CURR targets to reach saturation**
- **Ensure consistent monitoring of programs through custom data collection and reporting**

THANKS!!!!

PrEP for All

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Country Director, Partners Scale Up Project

PrEP Learning Network Regional Workshop, Lilongwe,
Malawi

November 12, 2019



BILL & MELINDA
GATES foundation



PrEP works



- PrEP reduces risk of acquiring HIV infection by over 90% when adhered to
- PrEP works among people
 - Of all ages
 - Of all gender types
 - At risk of acquiring HIV by different modes
 - Vaginal, Penile, Rectal, Injecting drugs

PrEP is safe



PrEP is safe in pregnancy



- PrEP is safe for women who are pregnant and for those who desire pregnancy.
 - Does not affect birth outcomes or infant growth
- In studies, periconception adherence to PrEP was high, emphasizing that PrEP is an option for safer conception in women with HIV+ partners

PrEP is empowering



PrEP is a Risk-Reducing Solution

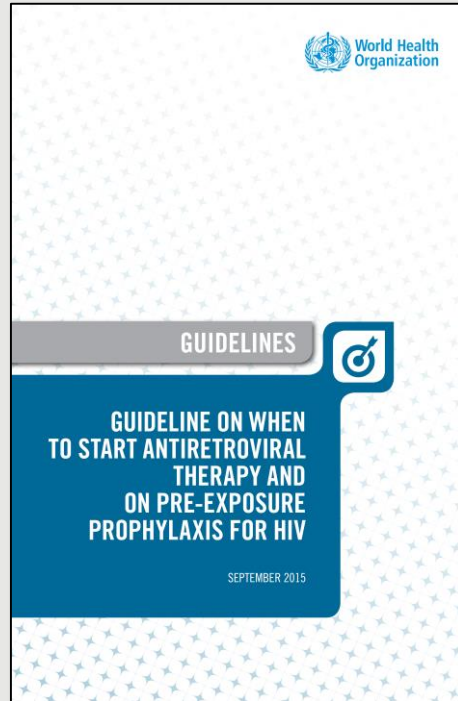
- People seeking PrEP are those with increased risky sexual behavior
 - Greatest benefits for those who are already not using condoms
 - Risk can be even lower when combining PrEP with condoms and other prevention methods
- Brings people at highest risk in contact health providers
 - Counselling
 - STI treatment



Resistance is rare

- In clinical trials development of resistance to PrEP was rare, likely because those who acquired HIV were largely not using PrEP at all.
- The exception was those with acute infection started on PrEP
- In scale up very few documented cases globally with breakthrough infection
 - From resistant virus
 - A very rare occurrence

PrEP is recommended



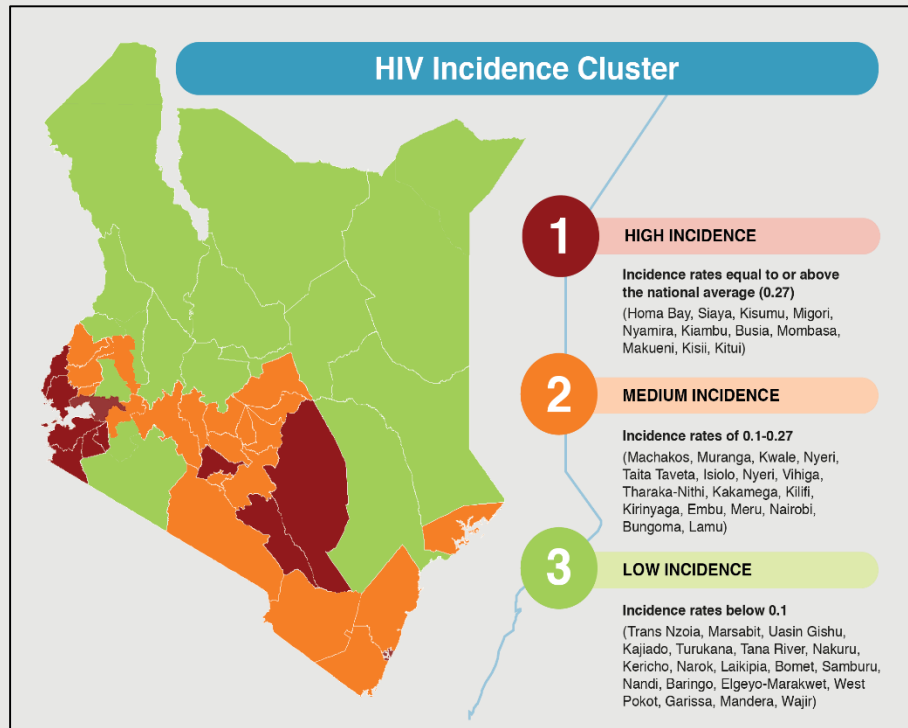
Guidelines “..the use of daily oral pre-exposure prophylaxis is recommended as an additional prevention choice for people at substantial risk of HIV infection as part of combination prevention approaches..”

Countries with PrEP programs

Global estimate ~ 400,000



Prioritization



Kenya's epidemic is concentrated in several counties and the PrEP program has placed efforts in those counties

PrEP is an intervention for all persons at risk of acquiring HIV

- for multiple populations – couples, AGYW, MSM, FSW, fisherfolk, etc.

Client Encounter Form

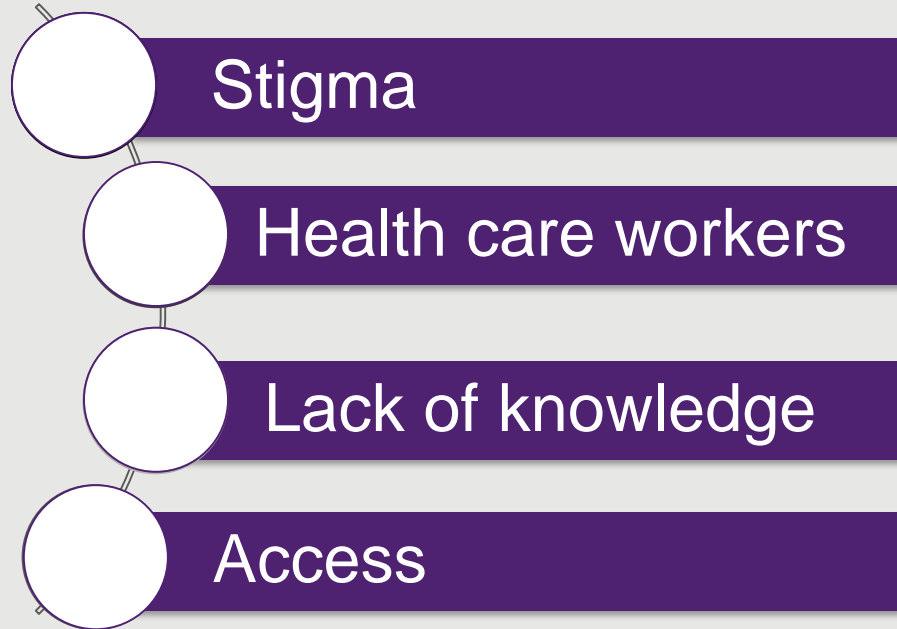
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Behaviour risk assessment

Mark all that apply:

- ☐ Sex partner(s) is HIV+ and (mark all that apply):
 - ☐ Not on ART
 - ☐ On ART <6 months
 - ☐ Suspected poor adherence to ART
 - ☐ Detectable HIV viral load
 - ☐ Couple is trying to conceive
- ☐ Sex partner(s) high risk & HIV status is unknown
- ☐ Has sex with >1 partner
- ☐ Ongoing IPV/GBV
- ☐ Transactional sex
- ☐ Recent STI (past 6 months)
- ☐ Recurrent use of post-exposure prophylaxis (PEP)
- ☐ Recurrent sex under influence of alcohol/recreational drugs
- ☐ Inconsistent or no condom use
- ☐ Injection drug use with shared needles and/or syringes

Barriers to PrEP Use



PrEP awareness is needed





JIPENDE
JiPREP

A **PREP**
A DAY KEEPS
HIV AWAY



ARE YOU HIV NEGATIVE AND AT RISK OF HIV INFECTION?
HERE'S HOW TO STAY PROTECTED

There's a new additional HIV prevention option for HIV negative people.
It's called Pre-exposure prophylaxis, or PrEP.

TAKEN DAILY,
PREP IS AN ADDITIONAL
PREVENTION
OPTION

If you feel you're at an ongoing risk of acquiring HIV and would like
please visit your health care provider.

- ✓ Condoms
- ✓ HIV testing services
- ✓ Post-exposure prophylaxis
- ✓ Healthy lifestyles
- ✓ Treatment for STIs
- ✓ Voluntary Medical
- ✓ ART for partners

I am **PrEP**ared for a **HIV**-free life

One tablet a day can protect you from HIV



Email: prep@lvcthealth.org, Website: www.lvcthealth.org/lpcp-project

Phone number: 0722203610, 0733 333268



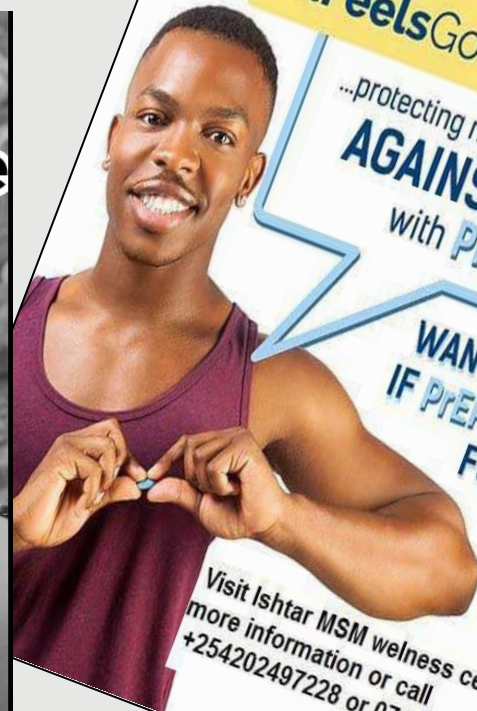
ACKNOWLEDGEMENTS: KOSOVA, DUBAI, UTAH, DAKOTA, MINNESOTA, PROFESSIONALS IN PRIDE KENYA, MINORITY PEOPLES ORGANIZATION GROUP

#ItFeelsGood

...protecting myself

AGAINST HIV
with **PrEP**

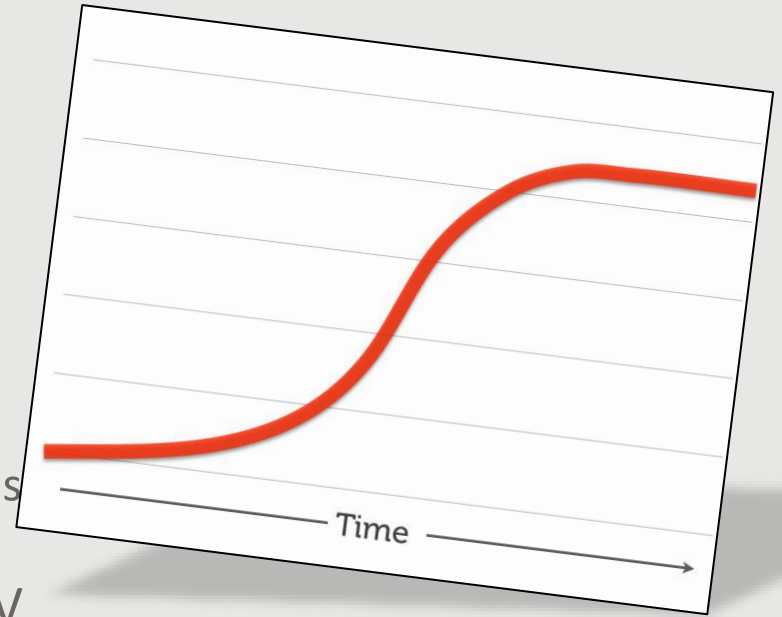
**WANT TO KNOW
IF PrEP IS RIGHT
FOR YOU?**



Visit Ishtar MSM wellness centre for
more information or call
+254202497228 or 0713797157

Early lessons

- National and county government involvement and buy-in is key
 - Create harmony and guidance for all players
- Fitting within an existing program facilitates implementation
 - Commodities
 - Training – use existing training structures
- PrEP champions are game changers
- PrEP services availed to all at risk of HIV



PrEP is for all at risk

PrEP is a powerful, effective, safe and empowering tool for all persons at risk. Let's avail it.



Photo credit: <https://www.dw.com>

Acknowledgements

- PrEP users from whom we continue to learn
- Researchers and funders
- Kenyan PrEP TWG