

West Africa PrEP Learning Network Session 4

PrEP Delivery Models

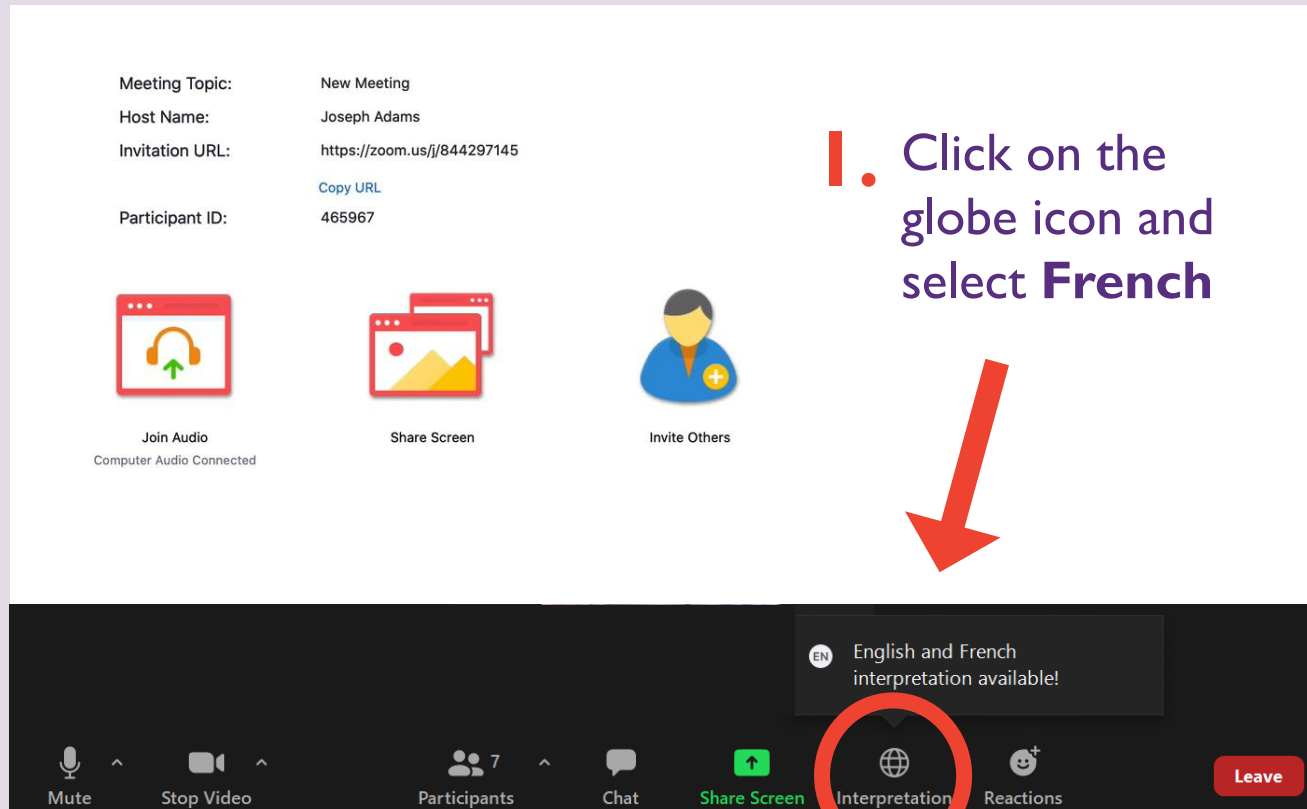
Afton Bloom | FHI 360 | Jhpiego

OCTOBER 2020

CHOICE Collaboration for HIV Prevention Options to Control the Epidemic

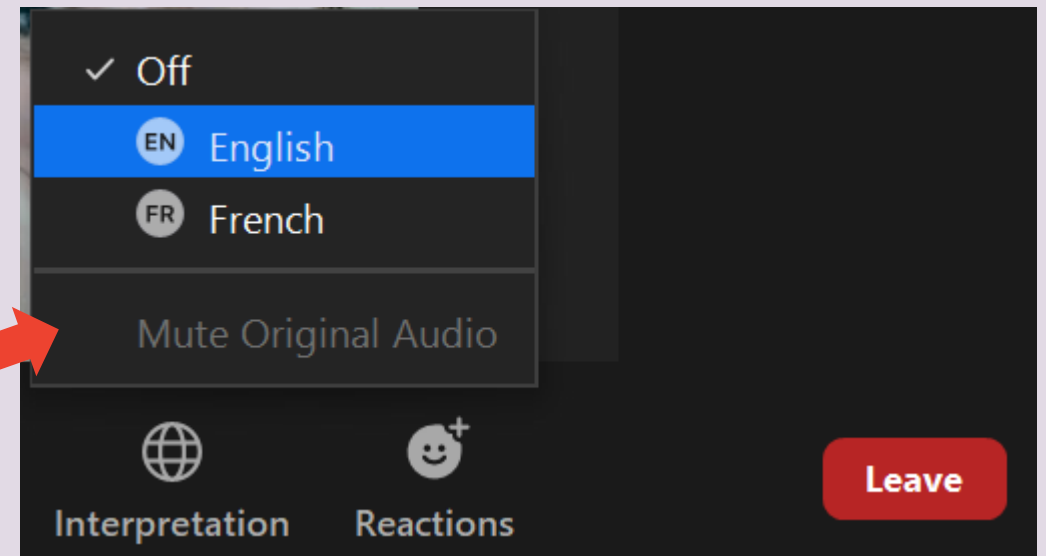


Access French interpretation / Accès à l'interprétation vers le Français



English speakers: leave interpretation feature "Off"

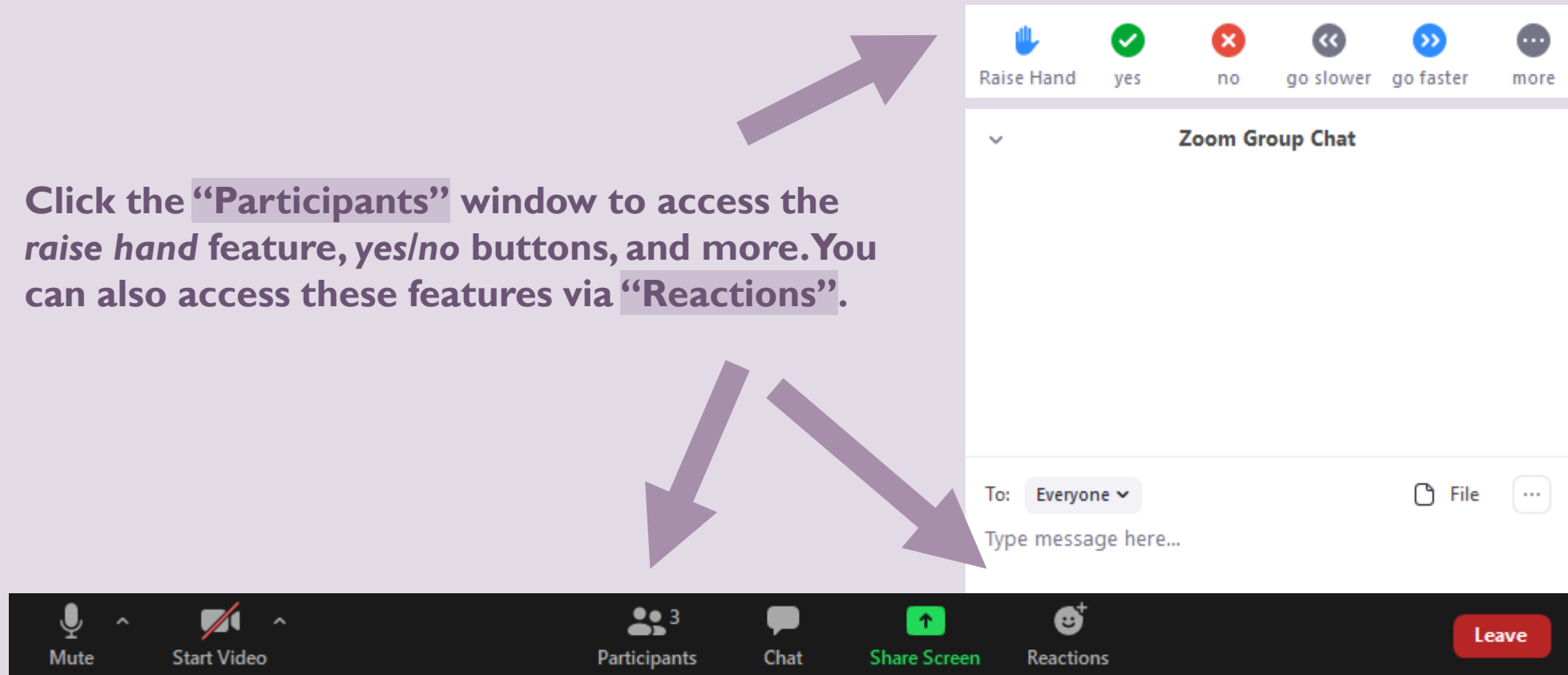
2. Then click "Mute Original Audio"



Please introduce yourself in the chat box!

Click on “More” to access *thumbs up* and *thumbs down*.

Click the “Participants” window to access the *raise hand* feature, *yes/no* buttons, and more. You can also access these features via “Reactions”.



Introduction to CHOICE

CHOICE is a 24-month collaboration funded by USAID in partnership with PEPFAR through two central mechanisms: Meeting Targets and Maintaining Epidemic Control (EpiC) and Reaching Impact, Saturation, and Epidemic Control (RISE).

The goal of this collaboration is to address technical gaps and support national scale-up of antiretroviral-based HIV prevention products in PEPFAR countries through catalytic evidence generation, translation and research utilization.

CHOICE is led by FHI 360 and Jhpiego, in partnership with Afton Bloom, Avenir Health, LVCT Health and PZAT

West Africa Regional PrEP Learning Network



To learn more about the Network visit
<https://www.prepwatch.org/in-practice/west-africa-prep-learning-network/>

To sign-up for updates and information on
upcoming webinars go to
<https://mailchi.mp/prepnetwork/westafrica>

The screenshot shows the PrEPWatch website interface. At the top, there is a dark blue header with the PrEPWatch logo and a search bar. Below the header is a navigation menu with links: About PrEP, PrEP Planning A-Z, In Practice (which is highlighted), Resources, and Next-Gen. The main content area has a teal banner with the text 'In Practice - West Africa Regional PrEP Learning Network'. Below this, the title 'West Africa Regional PrEP Learning Network' is displayed in a large, bold font. The text below the title describes the network's purpose: 'The West Africa Regional PrEP Learning Network, hosted by CHOICE, provides national and sub-national ministries, implementing partners, community-based organizations, and others working with PrEP across West Africa with the tools and resources, best practices and opportunities to learn from others to help advance PrEP rollout and scale-up.' It also states the goal: 'The goal of the Learning Network is to specifically engage the countries of Nigeria, Cote d'Ivoire, Mali, Ghana, Cameroon, Democratic Republic of the Congo, Togo, Liberia, Angola and Burundi to share experience and cover topics that help meet their current PrEP planning and programming needs. This monthly webinar series features presentations from experts in specific content areas, lessons learned and insights shared from implementing partners and government ministries, and new tools or research on specific topics related to PrEP scale-up, ranging from demand creation to continuation.'

Key Topics for this Webinar Series

Oral PrEP Introduction Framework



PLANNING & BUDGETING

National and subnational plans include oral PrEP and guidelines are established to support access to PrEP via priority delivery channels



SUPPLY CHAIN MANAGEMENT

Oral PrEP is regularly available in sufficient quantity to meet projected demand via priority delivery channels



RING DELIVERY PLATFORMS

Oral PrEP is delivered by trained healthcare workers across diverse delivery channels that effectively reach target end users



UPTAKE & EFFECTIVE USE

End users are aware of oral PrEP and have the support, motivation, and ability to seek out, initiate, and effectively use PrEP during periods of HIV risk



MONITORING

Oral PrEP is effectively integrated into national, subnational, program, and facility monitoring systems and ongoing research supports learning

Agenda

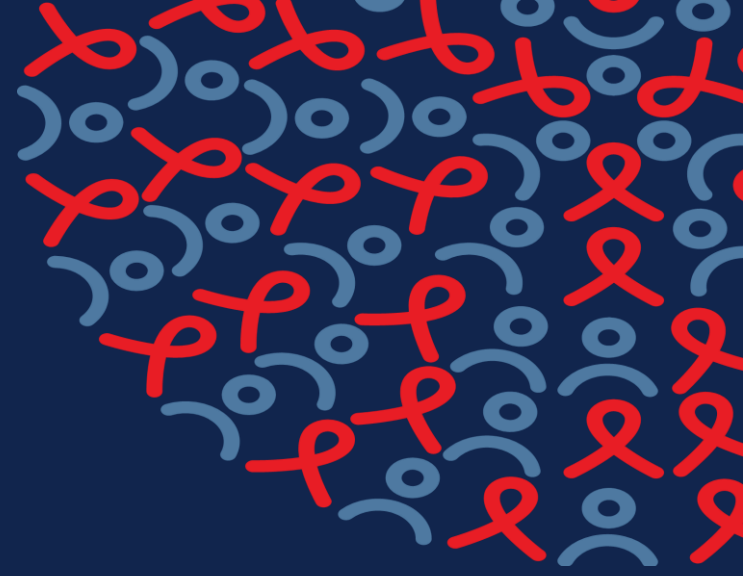
Time	Topic
10 min	Introduction
15 min	Community-based PrEP delivery in Nigeria
10 min	Q&A
15 min	Community-based PrEP delivery in Lesotho
10 min	Q&A
15 min	Community-based PrEP delivery in Botswana
10 min	Q&A
5 min	Wrap-up

Panelists

- Neeraja Bhavaraju, Afton Bloom
- Chidubem Oraelosi, FHI 360, Nigeria
- Chakare Tafadzwa, Jhpiego, Lesotho
- Masego Gilbert, FHI 360, Botswana

POLL

**What service
delivery
methods are
used by your
PrEP program?**



EpiC Nigeria Experience with Community-based PrEP Delivery

October 2020



USAID
FROM THE AMERICAN PEOPLE

EpiC
Meeting Targets and
Maintaining Epidemic Control

Contents



Overview



Factors to consider when developing a community-based delivery model



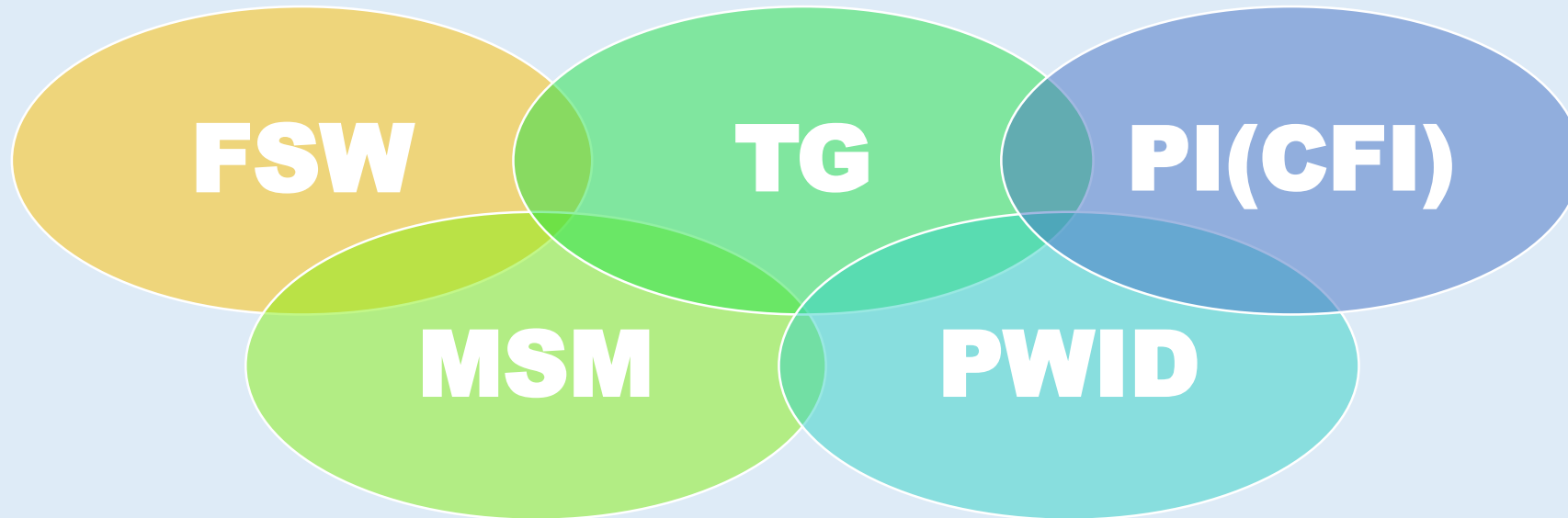
PrEP data



Challenges, opportunities, and scale-up plans

Overview of Service Delivery Model/Approach

- In Nigeria, EpiC currently implements PrEP services for different KPs and their partners




- PrEP services are offered at community and facility levels


PrEP Delivery Models in the Community

A



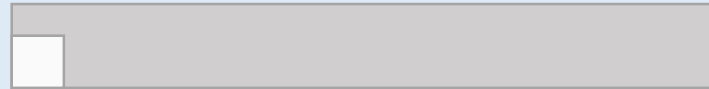
 KP Hotspots, other community settings


 cART team, outreach workers


 53%


 Peer navigator follow up

B

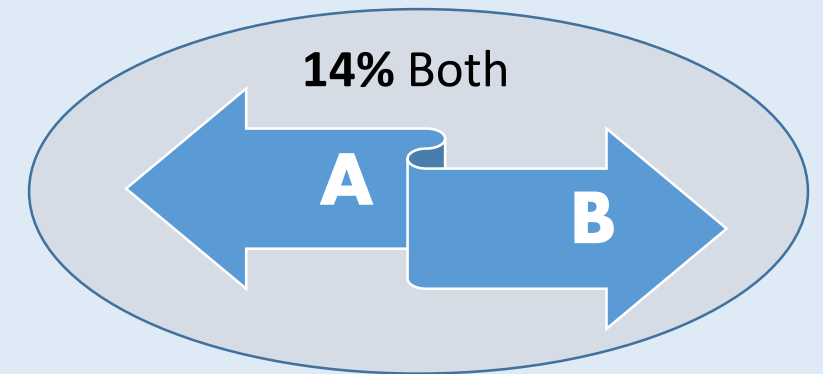


 OSS, DIC, ART Clinics

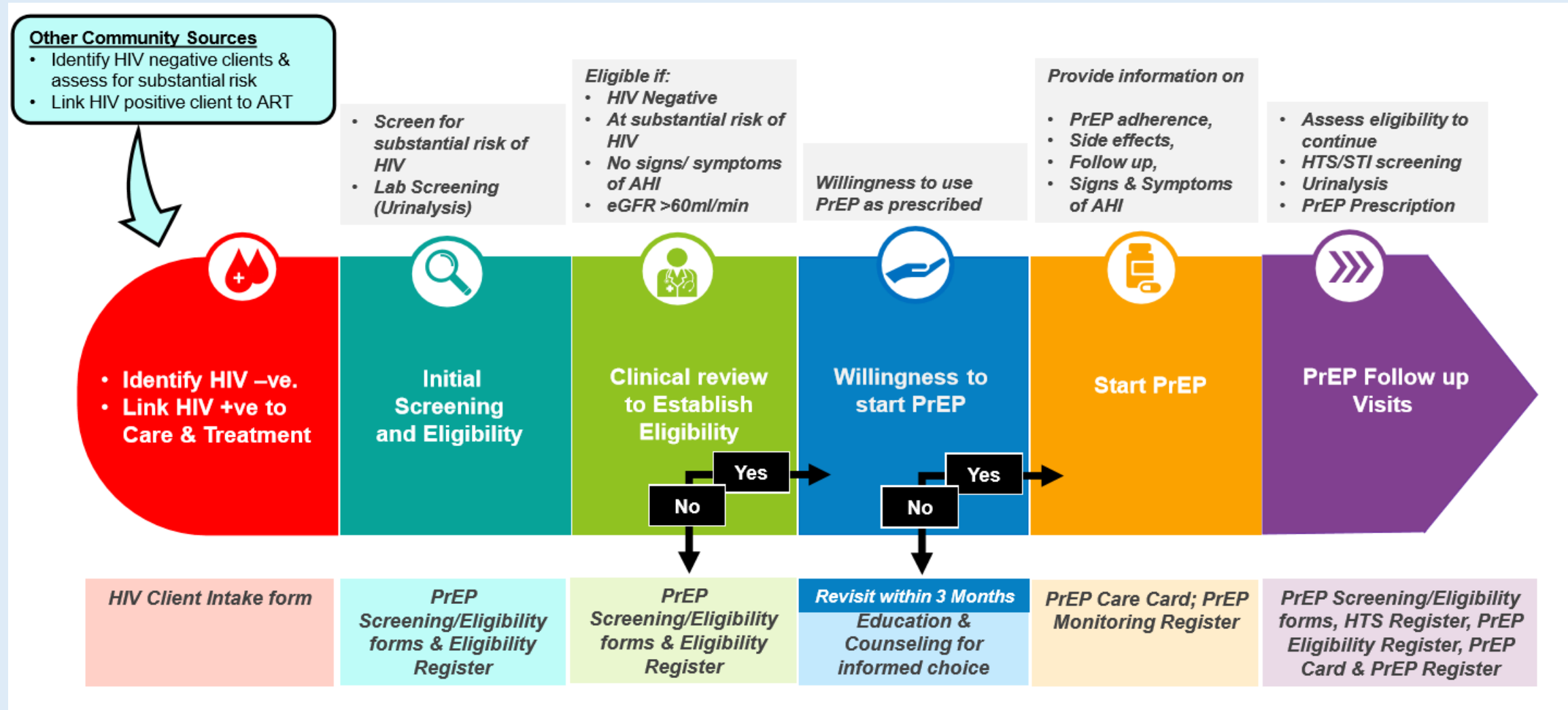
 Facility clinician, other facility staff

 32%

 Peer navigator Follow up



PrEP Service and Documentation Flow



Considerations for Community-Based Models

1

Availability of HR
(outreach
workers, cART
team)

2

Proximity to
referral facilities
and other
community
structures

3

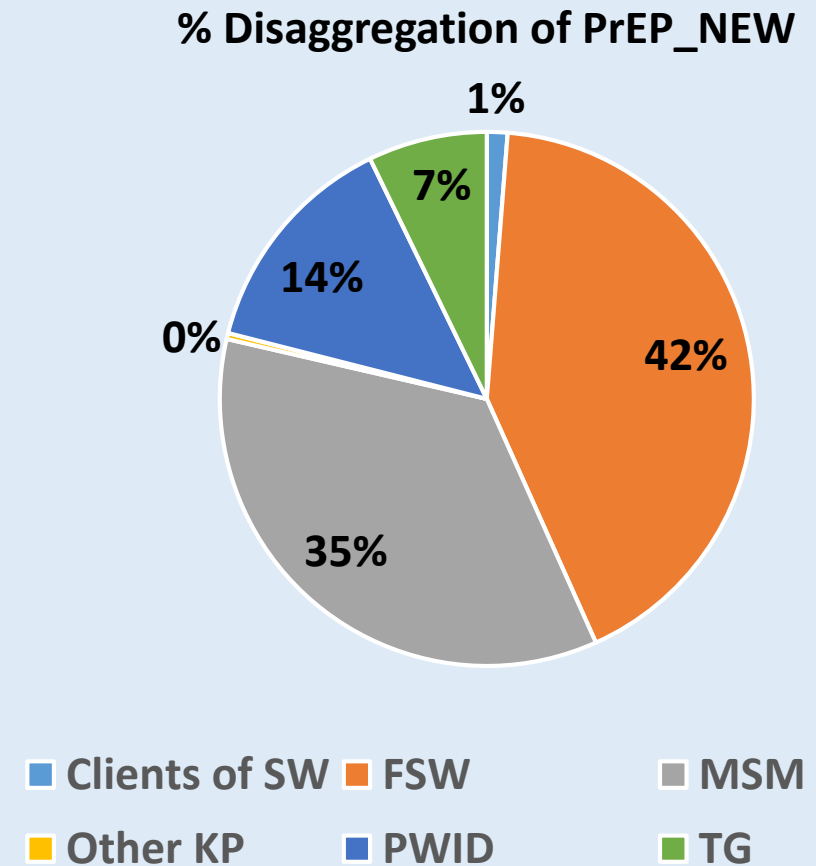
Beneficiaries'
preferences

4

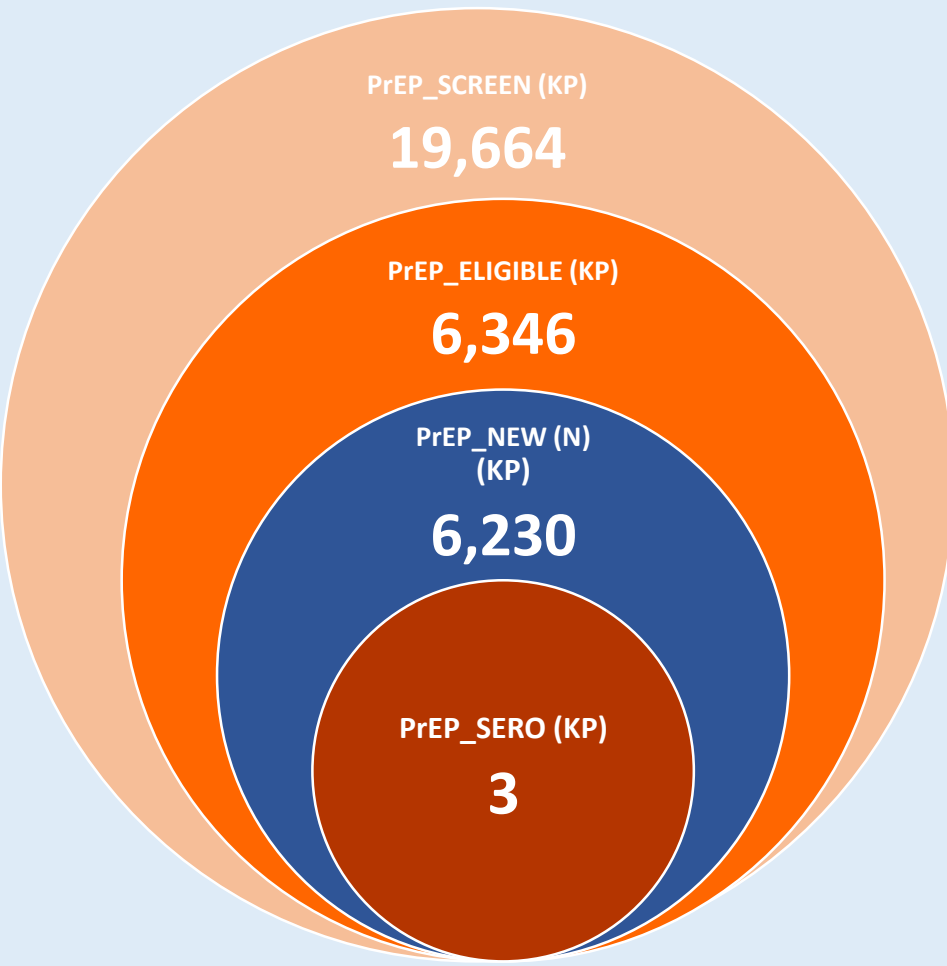
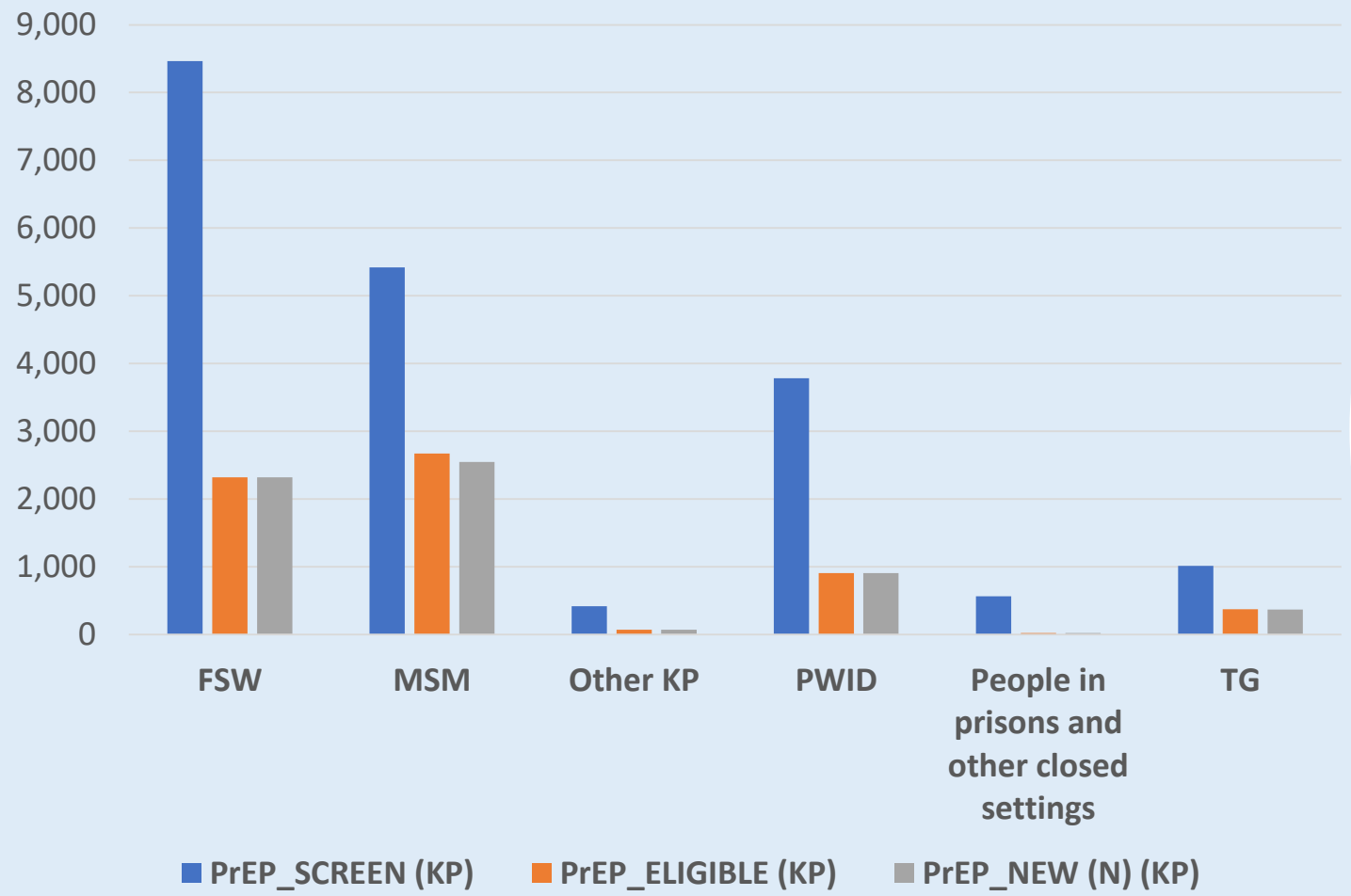
Client
follow-up

Number of KPs initiated on PrEP (Jan – August 2020)

KP group	PrEP_NEW
FSW	2,319
MSM	2,545
Other KP	68
PWID	907
People in prisons and other closed settings	22
TG	369
Total	6,230



PrEP Cascade Across Groups (Jan – August 2020)



Challenges

- Commodity stock out
- Poor or incessant condoms and lubs supply
- Low MMD
- Mobility of KPs
- Fear of stigma & discrimination
- Poor adherence with follow up lab monitoring

Opportunities



Urinalysis



**Leverage on
SNT**



**PrEP and ART
integration**



**Social Media
Assisted Reach
Out Platforms**



**Innovative local
solutions like
the Enrollment
video guide**



**Local educational
interactive
website
SWEETEX,
SAFEX**

Plans for expansion of this model



**Provision of serum chemistry
machines to improve clinical
laboratory monitoring**



**Scale-up social media assisted reach
out techniques (SMART)**



**Advocacy for improved commodity
supply especially condoms/lube and
drugs**

Social Web Interactive Platform (SWIPE)

- **Purpose:** To improve PrEP/ART client follow up using technology
- Utilizes **QR code** (abbreviated from **Quick Response code**)
- QR codes and instructions for use embedded on the Oral PrEP pill container caps
- Scanning the QR code allows you to chat with/call an online PrEP Counsellor
- To be rolled out before the end of Q1



Introducing Scan to Chat (s2c)





EpiC is a global cooperative agreement dedicated to achieving and maintaining HIV epidemic control. It is led by FHI 360 with core partners Right to Care, Palladium, Population Services International (PSI), and Gobee Group.



Q&A

**Please add
questions to the
chat.**

Providing Community PrEP Services

Experiences from TSEPO Project,
Lesotho

Tafadzwa Chakare
MBChB, M.Phil

Johns Hopkins University Affiliate



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FROM THE AMERICAN PEOPLE

jhpiego
Saving lives. Improving health.
Transforming futures.

Background

- Lesotho has a 2.2 million population
- 25.6% adult (15-59 years) HIV prevalence (LePHIA 2017)
- Making significant progress towards 90-90-90
- An estimated 29.4% of all HIV infected women and 32.4% of HIV all HIV infected men are not virally suppressed
- Estimated annual incidence of 1.1% among adults 15-59 years
- Incidence was highest in men aged 35-49 years (2.65%) and in older adolescent girls and young women aged 15-24 years (1.49%).
- Estimated 10 000 new HIV infections in 2017

Rationale for Community PrEP

- Many young, healthy individuals at substantial risk of HIV infection are not attracted to conventional health facilities
 - Services often viewed as unfriendly to adolescents, young people and key populations
- Challenges accessing transport to health facilities
- Inability to go to health facilities early in the morning as is often required to be served
- “Facility staff only provide PrEP to discordant couples”

Project Goal and Objectives

- To reduce new HIV infections for those considered at substantial risk of HIV in 3 districts- Maseru, Berea and Leribe
- To offer a comprehensive minimum package of PrEP services with a focus on the community
- Ensure strong linkage to care and treatment services for HIV positive clients

Minimum package of PrEP services:

- Health education
- HIV Testing Services
- Assessment, initiation and follow-up for oral PrEP
- Condom and lubricant distribution
- Family planning counseling and community FP initiation (OCs, implants, injectables)
- Risk reduction counseling
- TB symptom screening
- STI symptom screening
- Referral for care and treatment for HIV positive clients
- Referral for DREAMS services

Community-Based PrEP Beneficiaries

- Designed to provide equitable access to HIV prevention services by high risk groups
 - AGYW
 - MSM
 - FSW
 - Other individuals at substantial risk



Community-Based PrEP Model

- Model involves Prep initiation and follow-up at
 - Fixed community 'resource centers'
 - Tertiary institutions
 - Workplaces
 - Other community sites



PrEP Resource Centers are OPEN

You can find us at the following locations:

- 1 Fokothi:** In the 'Makamo building next to Life high School and Lerotholi Polytechnic
- 2 Roma:** In the new complex next to Vodacom
- 3 TY:** On 1 way street at Nthane estate opposite Jet
- 4 Maputsoe:** On Sir Seretse Khama road on the way to the border next to Naleli funeral parlour

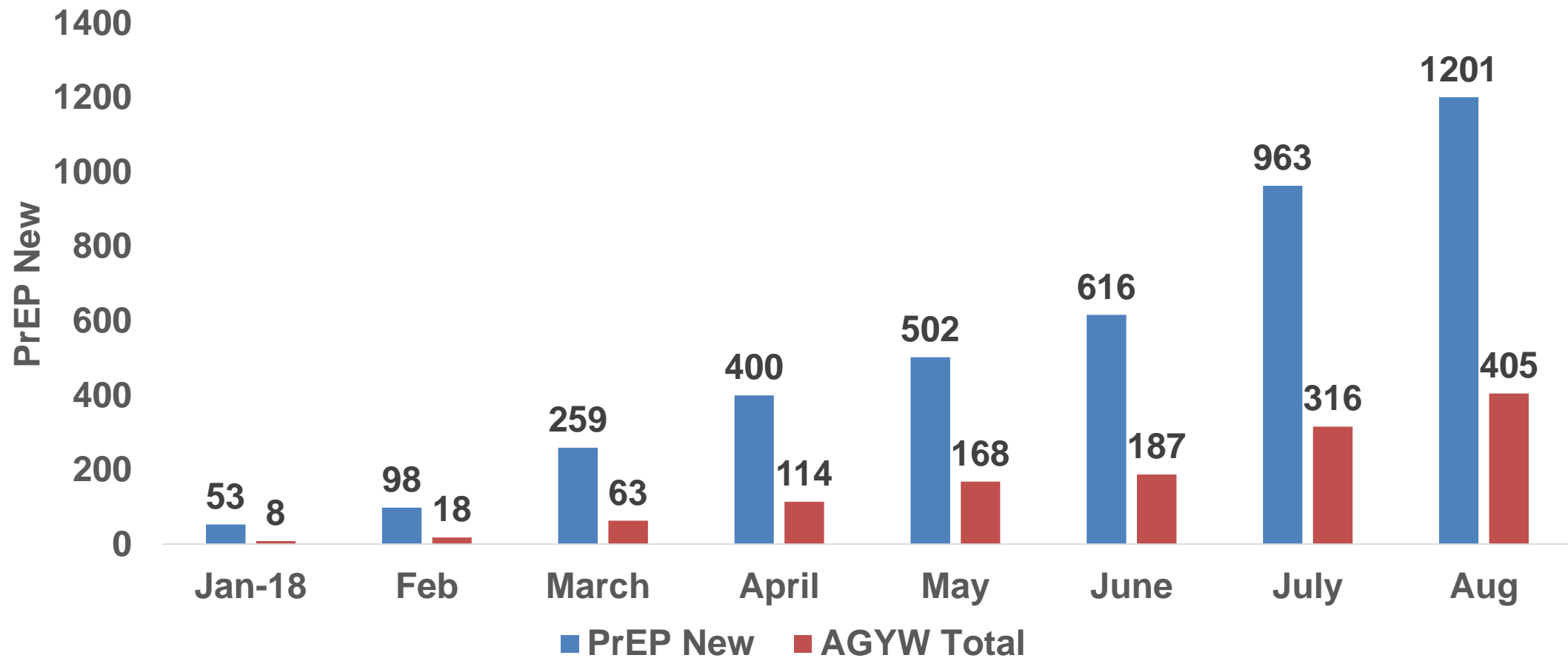
WhatsApp icon +266 5934 6315

Demand Creation

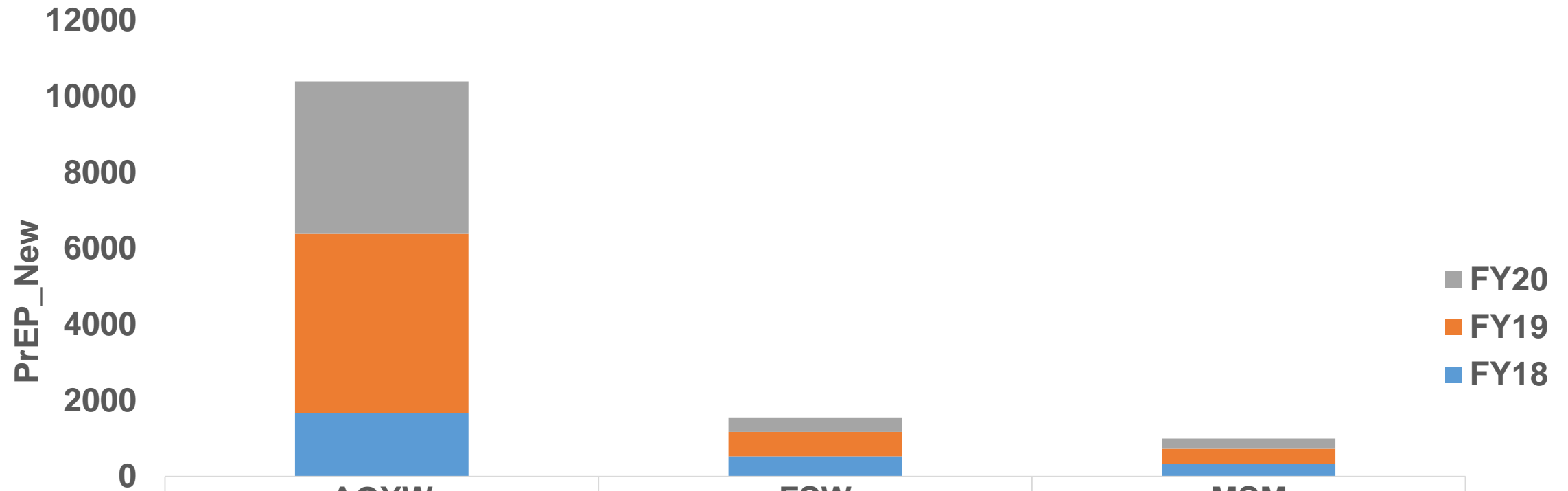




Rapid Scale-up Achieved

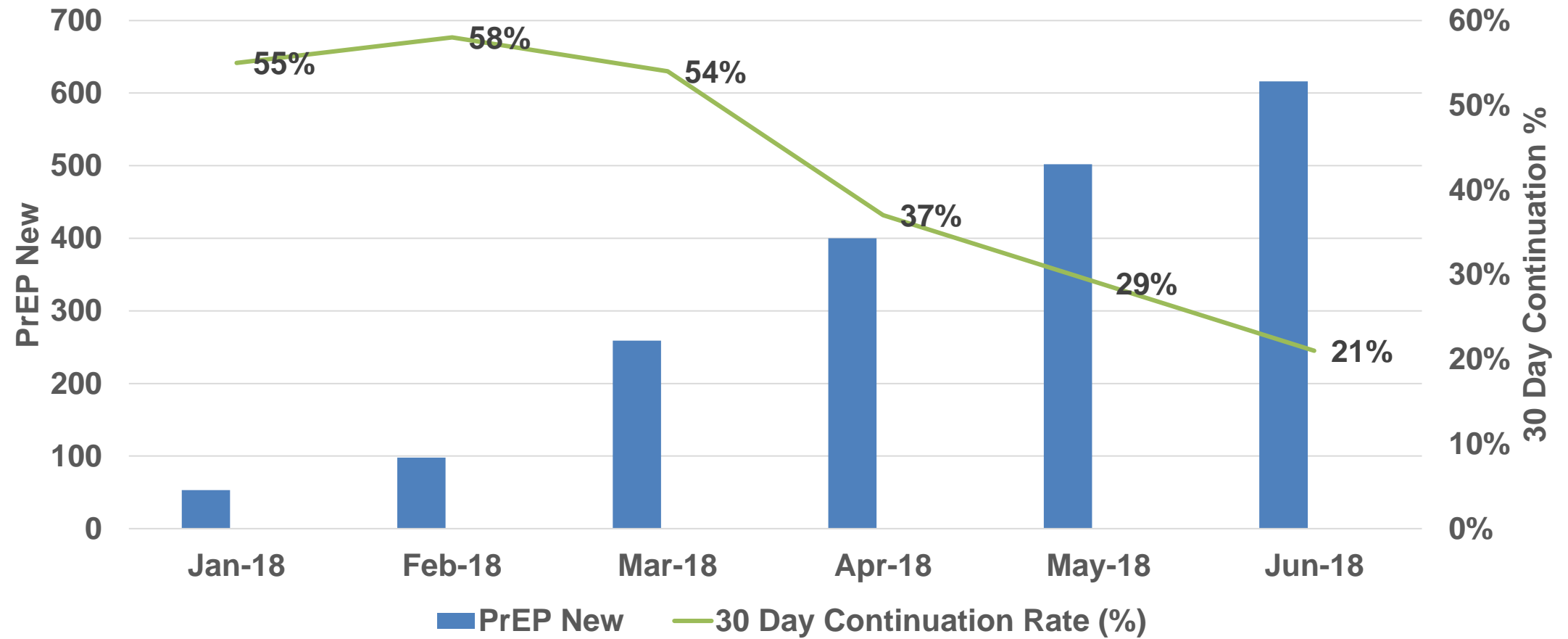


New PrEP Enrollments (Jan18-Jun20)



	AGYW	FSW	MSM
FY20	4013	384	271
FY19	4719	641	408
FY18	1664	530	322

Declining Early Continuation Rates



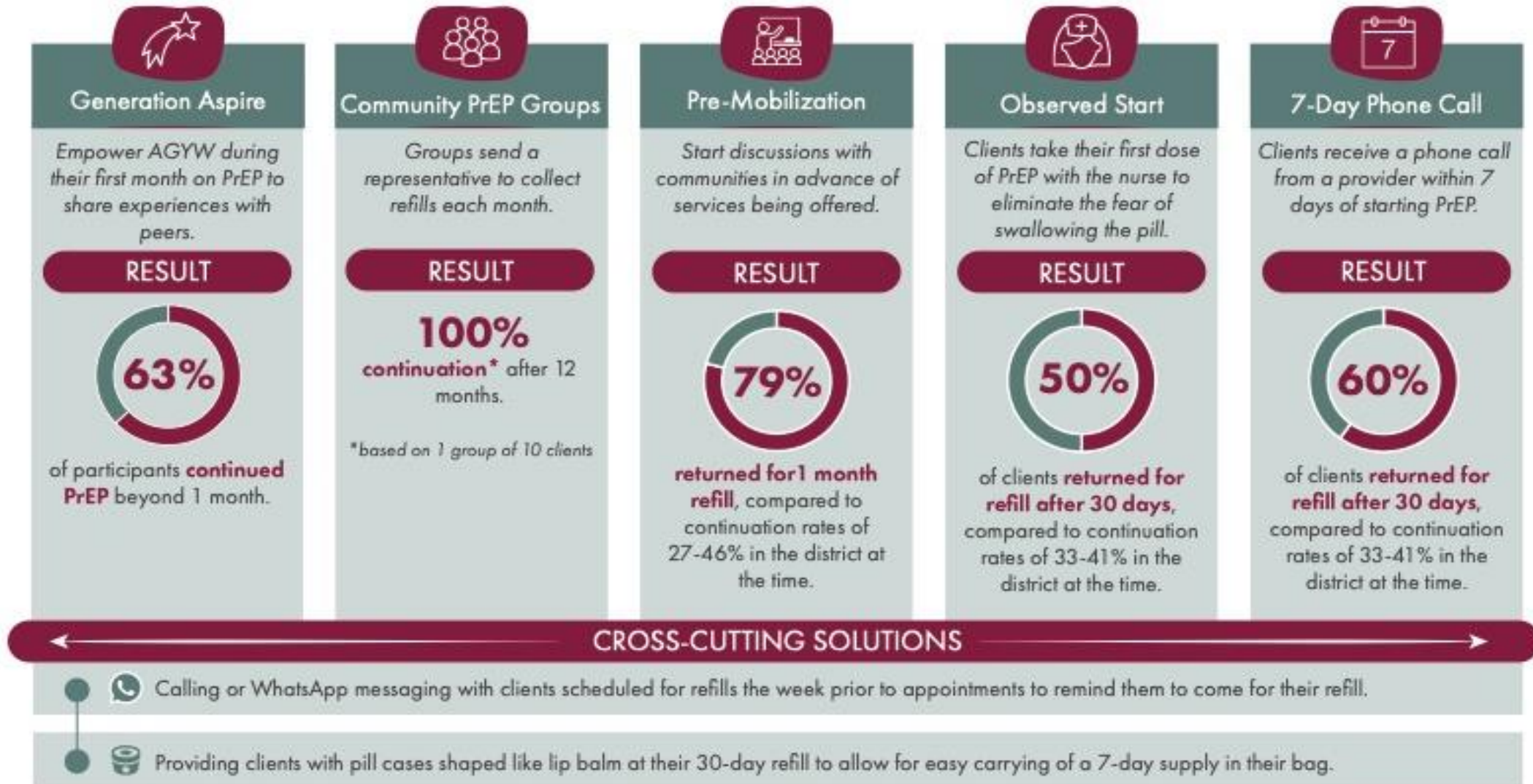
PrEP Users and Service Providers Engaged to Redesign Approaches

Multiple Parallel Interventions

- Weekly continuation tracking
- Generation Aspire
- Observed start
- Premobilization
- Week 1 phone call
- Community PrEP Groups
- Destigmatized packaging
- Engagement of village health workers



PrEP Continuation Innovations



Challenges

Health System

- Shifting mindsets from ART to PrEP
 - LTFU
 - Adherence measurement
- Drug resistance concerns
- Lack of a dedicated PrEP stakeholder platform
- Supply chain system
- Lab sample handling
- Failure to fully integrate SRH services
- Sustainable convenience

Community

- Demand creation and matching supply to demand
- Behavior change concerns
- Parental and partner influence
- ARV stigma



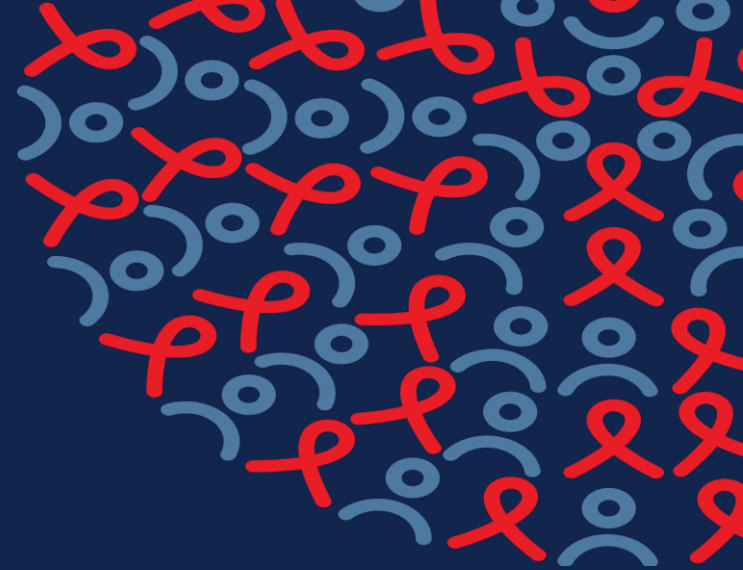
Q&A

**Please add
questions to the
chat.**

Community-Based PrEP Service Delivery

Botswana EpiC Project

Dr Masego Gilbert



USAID
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EpiC
Meeting Targets and
Maintaining Epidemic Control

Background

- PrEP is traditionally offered in clinical/ facility-based settings in SRH/STI stand-alone clinics
- These settings have some challenges:
 - While they identify high-risk clients, they leave out a lot who are not attending these clinics
 - Overcrowding and long waiting periods do not motivate healthy clients, even though they have unmet HIV prevention and need to seek services
 - Access is a challenge, including transport costs, distance, and times of operation

Community PrEP Service Delivery

WHERE

- Drop in centres
- Mobile clinic / outreaches
- Home based

WHO

- Nurses
- Lay counsellors
- Peer Navigators

HOW

- In person visits
- Digital/ Telemedicine
 - Telephone calls
 - WhatsApp groups

WHEN

- Moonlighting (after hours)
- Weekends
- Weekdays

WHAT

- Screening for eligibility
- HIV testing
- Initiation on PrEP
- Adherence support

Differentiated PrEP Delivery Demand Creation and Enrolment

Step 1: Identifying high risk KPs and Raising awareness

- Mobilization is done virtually, and clients are referred to the static clinic or appointments made for enrolment at home or in the community by POW/ VOWS HIV Testing

Step 2 –PrEP Enrolment

- Conducted by lay counsellors
- Home-based HIV testing, Drop-in Centre, outreach or facility
- Screening for eligibility/ substantial risk and IPV
- Referral to Nurse for enrolment



Differentiated PrEP Delivery Continuation Support

Nurses track clients who are due for refills and HIV testing through phone calls and followed-up with home visits

- Offer home-based testing and refill
- Home-based refills with 3-month MMD
- STI & TB screening and treatment and referral



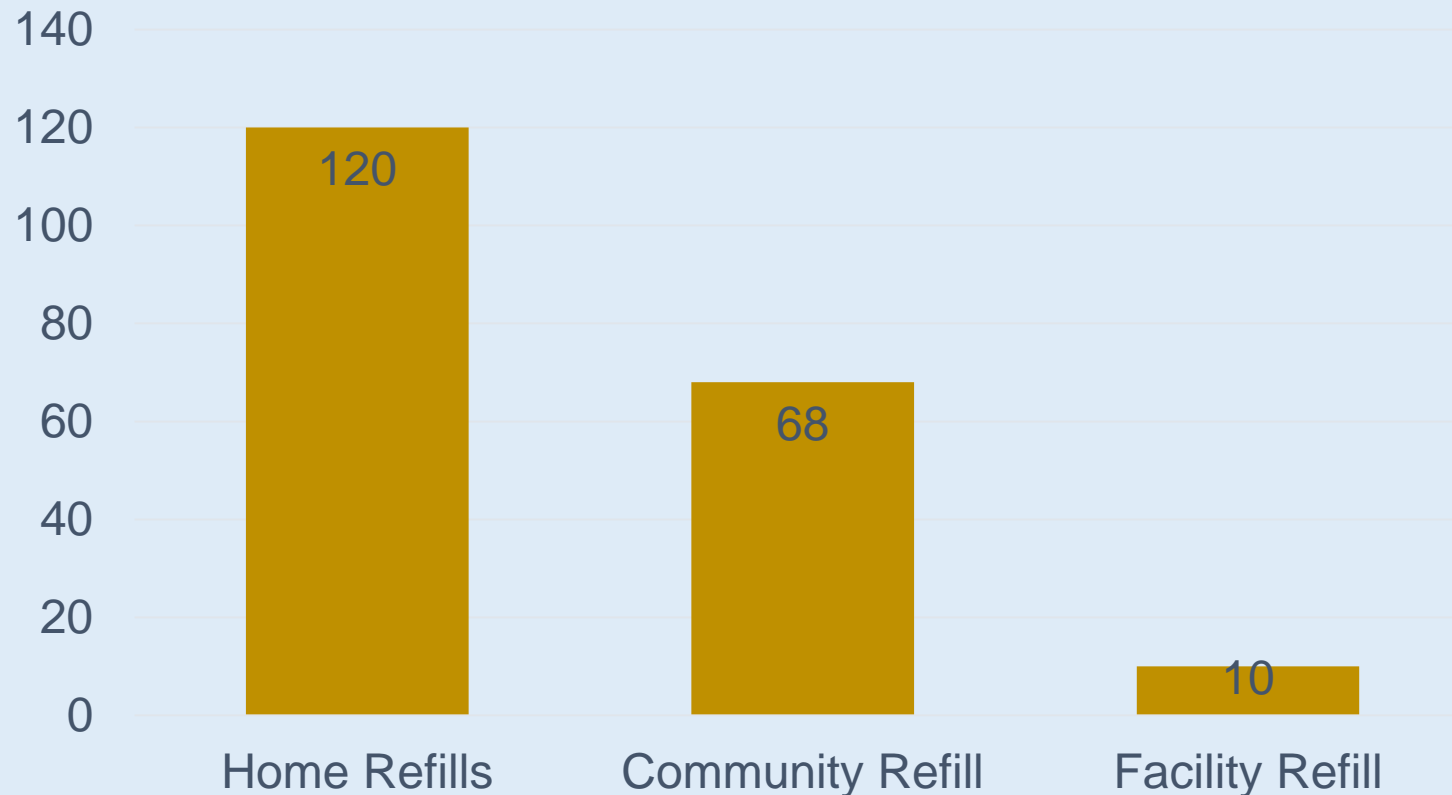
Differentiated PrEP Delivery Peer Navigation Support

- Beneficiaries provided with nurses and peer navigators' (PNs) phone numbers
- Online support through WhatsApp groups and phone calls by PNs
- Frequent check-ins by PNs for those newly put on PrEP



Community Refills to Support PrEP Continuation

PrEP Refills Modalities
April – August 2020

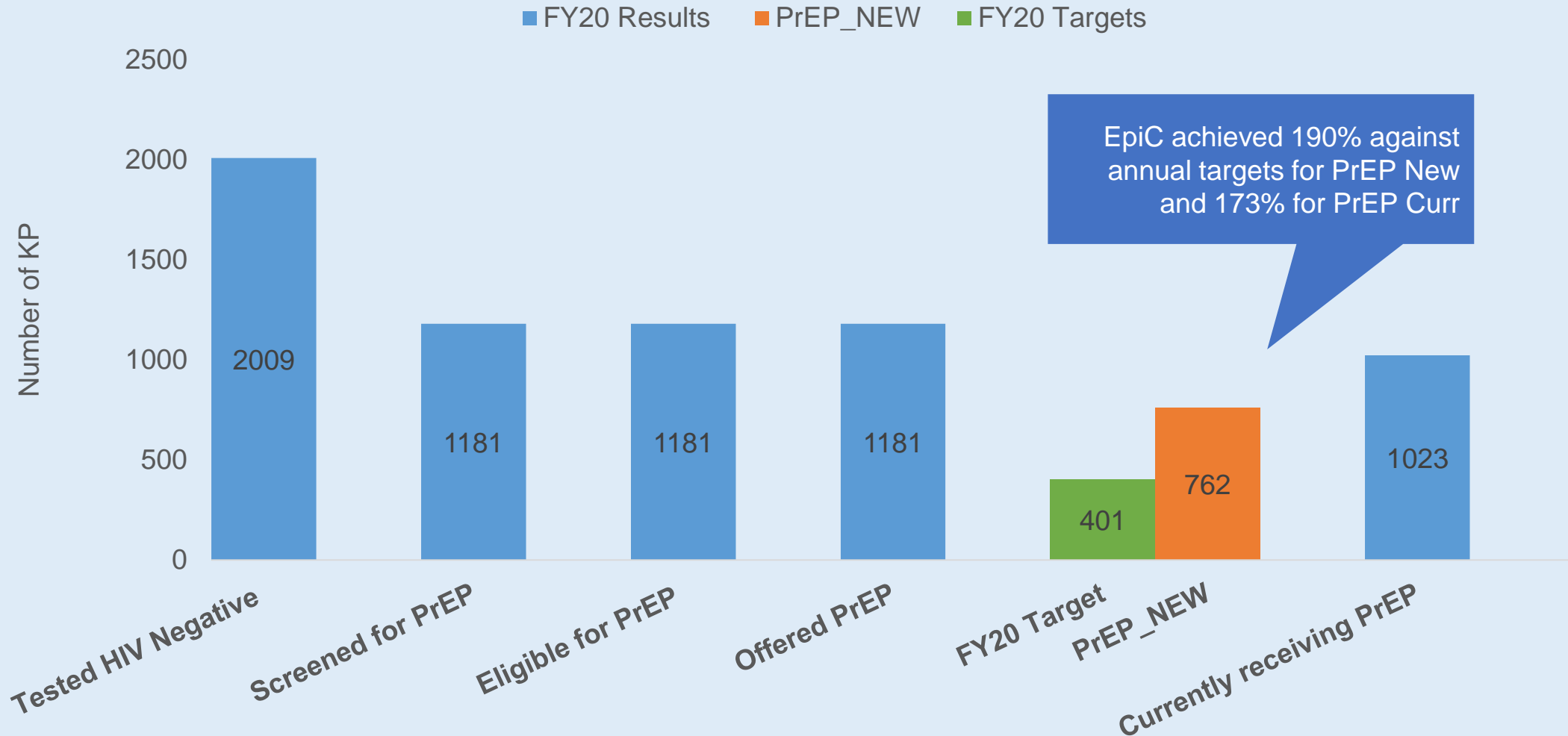


- **95%** of refills done through community (home deliveries and community pick-ups)
- Only 5% of refills done through facility modality

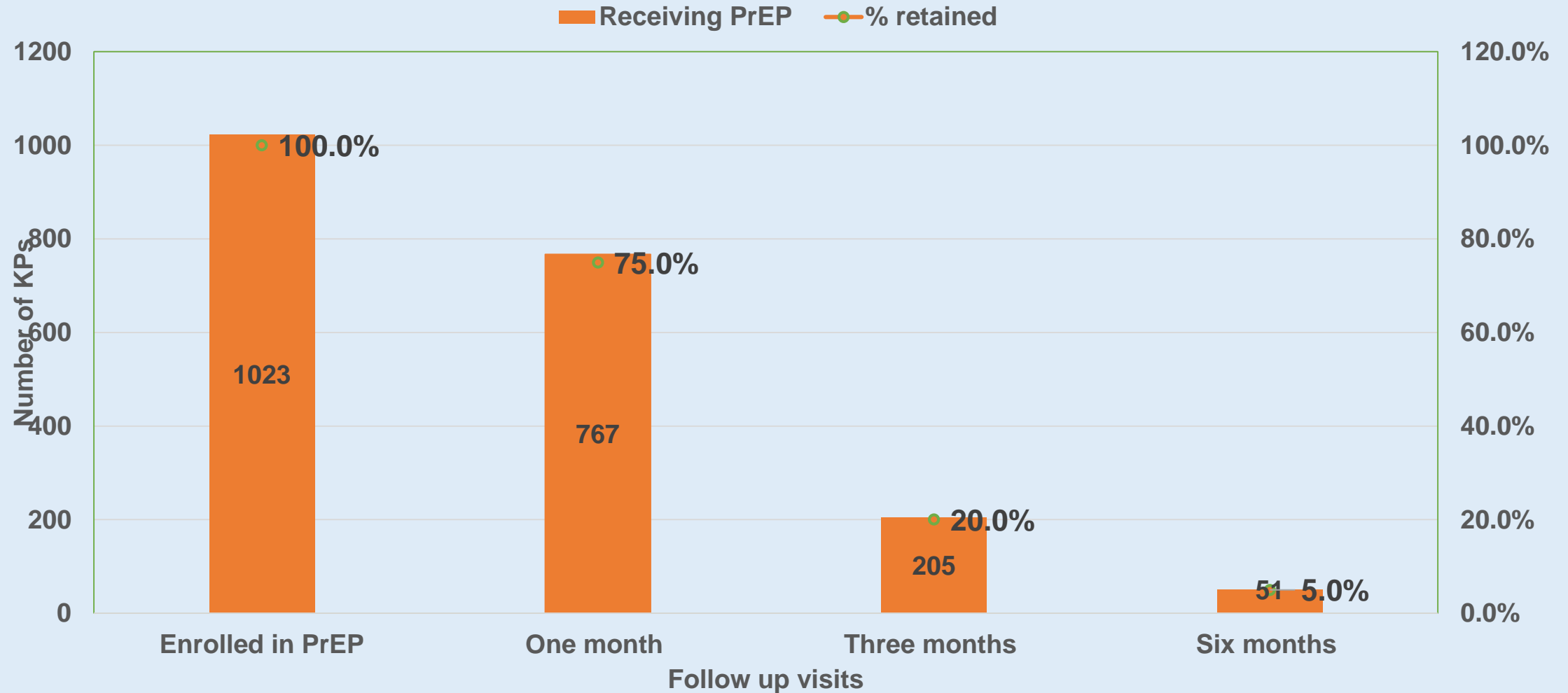
Factors to Consider for Community Approach

- Privacy and confidentiality for beneficiaries especially KP-Status of beneficiaries
- GBV/IPV screening for all beneficiaries
- Flexible hours of operation and constant reminders of the appointments
- Text or phone call reminders
- Online support via phone

Cumulative PrEP & Negative Cascade in Botswana FSW and MSM FY20



Overall PrEP Continuation Cascade in Botswana FSW and MSM FY20Q4



Challenges

- Only 59% of HIV negative KPs are screened and offered PrEP.
 - Capacitate POWs and lay counsellors to provide health education and awareness for PrEP and to improve uptake and acceptability among KPs
 - Integrate PrEP screening at all service points (FP, STI screening, HTS)
- Low continuation rates on PrEP
 - Most PrEP users discontinue on their own
 - Need a systematic way of documenting reasons for discontinuation
 - Some reasons include relocation to districts outside implementation and side effects (nausea and vomiting in first month, weight gain long term)

Opportunities and Conclusions

1. Coupling PrEP refills with home-based testing can improve PrEP continuation for KPs reduce the burden of clinic visits (transport costs, time from work, long queues)
2. Community refills help decongest facilities, especially in the context of COVID-19
3. Always consider “client-centeredness”; this model is not for everyone-issues of confidentiality, screening for IPV is key
4. EpiC is currently implementing decentralized drug distribution model through post-office delivery; another model that should be considered for PrEP users



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Q&A

**Please add
questions to the
chat.**

Upcoming Sessions

Oct
21

Nov
18

Up next:
PrEP Demand Creation

Upcoming Sessions

- December 9: **PrEP Costing & Target Setting**

West Africa Regional Learning Network:
Sign up to receive updates and invitations to webinars.

Sign-up here:

<https://mailchi.mp/prepnetwork/westafrica>

Visit PrEPWatch for Additional Resources

- Webinars will be **recorded** and loaded onto PrEPWatch for you to access at a later date
- You can find the **Plan 4 PrEP Toolkit** on PrEPWatch, in both English and French (<https://www.prepwatch.org/prep-planning/plan4prep-toolkit/>)
- Information on **upcoming webinars** can also be found on PrEPWatch
- Sign up for our **WARLN mailing list** to receive updates and invitations to webinars



<https://www.prepwatch.org/in-practice/west-africa-prep-learning-network/>



Thank you!