

PREP FOR AGYW: EXPERIENCES FROM DREAMS PROGRAMS

PrEP Learning Network Webinar Series

Thank you to Annaliese Limb from USAID, Endalkachew Melese Derese from Project HOPE in Namibia, Mwansa Njelesani-Kaira from JSI in Zambia, and Kumbirai Chatora from PSI in Zimbabwe, who presented during the 16th PrEP Learning Network webinar. Speakers were joined by Pragna Patel from PEPFAR PrEP COOP and CDC, as well as other representatives from Project HOPE, JSI, PSI, EpiC and RISE who contributed to the discussion and supported the active Q&A session. In this webinar, we discussed scaling up oral PrEP for adolescent girls and young women (AGYW) and experiences from various DREAMS programs. In case you missed it, you can access the [webinar recording here](#).

Top Questions

Below is a highlight from the Q&A for those seeking more information on the various DREAMS programs. Learn more by listening to the webinar recording, accessing complementary resources, signing up for future webinars, or visiting the [PrEP Virtual Learning Network](#) page.

Project HOPE Namibia- DREAMS Project

1. Were PrEP services integrated within a package that also offered family planning (FP)? If so, could AGYW access both services (including contraceptives) from a single site/provider?

The DREAMS project provides integrated health services. Hence, the same provider offers PrEP services alongside all sexual reproductive health (SRH) services including FP as well as all other primary healthcare services. Challenges include increased workload for providers and nurses.



Join us for the next webinar in the series.

PrEP, Relationship Dynamics, and Intimate Partner Violence: Findings and Tools from the CHARISMA Project

19 November 2020

9:00-10:30 EST

17:00-18:30 EAT

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Top Questions

2. Have you experienced a decrease in stigma since the integration of youth-friendly services?

We have witnessed a decrease in stigma in one of our districts where girls originally were not willing to receive PrEP from the ART clinics. Stigma is one of the challenges we are facing. However, we are conducting PrEP sensitization workshops with teachers and non-DREAMS health care providers as well as educating parents/caregivers and sexual partners of AGYW using existing DREAMS platforms to address the issue. Moreover, DREAMS ambassadors will soon be deployed to help us in destigmatizing PrEP in the community. We are also working to come up with engaging, informative, and appealing PrEP messaging.

Related to stigma, it was noted that in Zambia, DISCOVER-Health has tried to work on the 'why' behind stigma associated with PrEP through the [national campaign](#), and is trying to ensure that PrEP use is 'normalized' and seen as empowering.

3. How was male engagement structured? What messages were disseminated? Are there any job aids to share?

When the DREAMS program first started, Project HOPE did a characterization of sexual partners of AGYW to gain insight on potential partners. From there, Project HOPE recruited, trained, and deployed male champions who recruited men to a three-day male engagement session. These sessions use a [curriculum](#) developed by the Namibian Ministry of Gender Equality, Poverty Eradication and Social Welfare that covers HIV prevention, GBV prevention, and SRH topics. During male engagement sessions, nurses provide PrEP education and HTS and initiate PrEP or ART to eligible clients as needed. Men are referred to the nearest facility for follow-up as needed.

4. Is PrEP provided at safe spaces? Who provides PrEP at the safe spaces and how is quarterly HIV testing carried out?

DREAMS safe spaces are judgment-free, discrimination-free places in schools and communities where in-school and out-of-school AGYW can come together to connect and speak freely with the help of mentors. Safe spaces also serve as a programmatic hub to link girls to additional DREAMS interventions and services including PrEP. In Namibia, DREAMS nurses, who have been hired through a second tier subaward to the Ministry of Health and Social Services, go to the safe spaces monthly for regular service delivery.



Top Questions (continued)

At the safe spaces, the nurses will:

- Use dedicated rooms and spaces to provide services in a confidential manner
- Screen sexually active girls who are 15 to 24 years old for PrEP eligibility using the National Risk Assessment and Clinical Eligibility Screening (RACES) tool
- Assess willingness of AGYW who are at substantial risk for HIV to use PrEP services
- Provide HTS

After a negative HIV rapid test, the nurses will collect and send other specimens for laboratory tests (including creatinine, hepatitis B surface antigen (HBsAg), RPR and pregnancy test at baseline) and start PrEP the same day the girl presents for services. The nurses will take verbal consent and offer the available options to access PrEP services prior to initiation of PrEP. The nurse will follow-up with the client if test results require additional action, confirmation, or treatment.

There have not been any major challenges related to community-based PrEP service delivery to date and the schedule for repeat lab tests is as follows:

- Provision of HTS in the safe spaces at month 1, month 3 and every three months thereafter
- Collect and send specimen for creatinine test every 6 months

5. Why would a girl choose to have her follow-up visit at a location other than the safe space where she initiated PrEP?

Most safe spaces are in schools, from which girls were recruited. When schools are closed, the team arranges for AGYW to receive PrEP services from youth-friendly rooms at DREAMS-supported health facilities or other spaces in the community. The goal is to provide services in areas where girls feel comfortable.

6. Is the eligibility tool used to review a client's eligibility to continue PrEP, or is there another tool for that purpose?

We are using the RACES tool as a guide to determine whether to continue PrEP or not. This is the same tool used at initiation. The RACES tool helps to identify and address changes and sources of risk. The tool is flexible enough to accommodate the preference and desire of the girl (i.e. a girl who considers herself at risk can continue to take PrEP even if the provider could not identify the conventional risk factors included in the tool).



Top Questions (continued)

7. Since taking daily oral PrEP is a challenge for some, do the guidelines allow girls to take event-driven PrEP (ED-PrEP) for AGYW?

The current WHO guidelines recommend ED-PrEP for men whose HIV risk is only through sex with other men. According to WHO, this regimen is not appropriate for any other population. Namibia currently does not have ED-PrEP in the national guidelines.

8. In the PrEP cascade, how is 'at substantial risk' of HIV defined? Are all HIV-negative, sexually active AGYW considered 'at substantial risk'?

Risk is defined at the country level and is different according to each age band. Just being sexually active at the age of 15 would make an AGYW at risk. Yet for a 24-year-old, other criteria might be considered, e.g. condom use and number of partners. Experience of violence, orphanhood, being out of school, etc. might all be considered in defining risk, as well as HIV prevalence in the area.

In the Namibian context, AGYW at substantial risk for HIV include the following:

- HIV-negative AGYW in serodiscordant relationships with a partner who is not confirmed as virologically suppressed (i.e. partner has VL > 40 copies/ml)
- All HIV-negative AGYW in serodiscordant relationships (regardless of VL of the partner) who want to conceive
- Pregnant or breastfeeding HIV-negative AGYW in serodiscordant relationships
- Those with partner(s) of unknown HIV status
- Those with recent/recurrent STIs
- Those with multiple and/or concurrent sexual partners
- Those with a history of inconsistent or no condom use
- Recurrent PEP users
- Those with a history of sex whilst under the influence of alcohol or recreational drugs
- Injection drug users
- Those in abusive relationships
- Those who strongly feel at substantial risk of HIV infection

9. What is PrEP uptake like for AGYW under 15?

As per the national guidelines, PrEP is not indicated for clients under the age of 15 years. However, we had a few exceptional cases when we decided to put them on PrEP.



Top Questions (continued)

DISCOVER-Health, Zambia

10. Being the sole partner mandated to rollout PrEP in DREAMS, do you also offer other DREAMS interventions alongside PrEP?

DISCOVER-Health layers PrEP on top of the other interventions provided by DREAMS implementers. There are different types of partners that work within DREAMS programs to provide different services and interventions. DISCOVER-Health provides a specific service within DREAMS programs as a clinical partner providing PrEP services.

11. How do you manage your data and layering of services for DREAMS?

DISCOVER-Health developed a PrEP management information system in 2018, which allows for tracking a client through the service delivery continuum. We try to marry this with the DREAMS DHIS. We have regular monthly meetings with DISCOVER-Health staff and the DREAMS DHIS team to go through the data. The key is having regular meetings at both headquarters and site level with the two partners.

12. How can parents be involved to support PrEP continuation for AGYW?

It is important to engage parents. We must engage the people and communities around AGYW to destigmatize PrEP and show that PrEP is not just about targeting the girls but the communities as a whole. DISCOVER-Health engages parents via existing DREAMS structures, such as DREAMS parent engagement meetings.

PSI, Zimbabwe

13. What are the characteristics of the girls in your DREAMS program? Are they in school?

Most girls in this DREAMS program who are receiving PrEP are out of school and not married.

Some are single mothers who had early marriages. PSI is specifically targeting those girls who are out of school.

14. Do you know if AGYW are cycling on and off PrEP? What factors contribute to AGYW stopping and restarting PrEP?

We will be conducting longitudinal data analyses of electronic medical records to determine exactly how many girls are stopping and restarting PrEP, for how long, and why. We have found that some girls who live in bordering towns will restart PrEP once their husbands return from travel to South Africa.



Top Questions (continued)

15. What does "V" stand for in V campaign?

The [V campaign](#) was developed using human-centered design in South Africa and is being adapted for Zimbabwe. The V guide and materials were created based on formative research and were designed in conjunction with young women in South Africa. V is a brand identity that young girls identify with. It signifies "peace" like the gesture that most young girls like to use. V also signifies "very strong" to encourage young girls and make them feel confident especially when it comes to using PrEP.

16. How is the community mentor training package structured?

This training package is specifically for health care providers. DREAMS Ambassadors are trained on how to integrate youth-friendliness into clinics and are then asked to be mystery clients in these clinics. The DREAMS Ambassadors and Youth Advisory Board will then conduct mentor training with the providers using a designed curriculum (still in development).

17. How are DREAMS Ambassadors trained?

The onboarding training curriculum covers all DREAMS service interventions and includes a [facilitation guide](#). The training curriculum and facilitation guide focus on menstrual health integration into SRH services, reproductive health, PrEP, and contraception. There are refresher courses every quarter. There is also confidence and self-esteem training for the girls as ambassadors for the communities. This training curriculum and facilitation guide are different from the standard DREAMS curriculum.

See additional resources on the next page.



Additional Resources

For more further information on DREAMS programs and resources for AGYW programs, please see the following resources:

- [PEPFAR DREAMS Initiative](#): Learn more about the DREAMS Approach and Impact.
- [USAID DREAMS Programs](#): Learn more about USAID DREAMS programs.
- [USAID: Youth As Key Partners In Controlling The HIV/AIDS Epidemic](#): Learn more about HIV infection among youth and the USAID-funded projects and youth-related activities to control HIV infection among youth.
- [PrEP Package for Clinical Providers](#): Click here for a training curriculum and tools developed by ICAP at Columbia University to support PrEP implementation and equip healthcare providers with the skills to provide PrEP to appropriate candidates.
- [WHO PrEP Implementation Tool](#): Click here for a series of modules to support the implementation of PrEP among a range of populations in different settings.
 - [Adolescents](#): This module addresses the unique aspects and considerations for delivering HIV prevention to adolescents and young adults (15-24 years).
- [V Campaign](#): Learn more about the V Campaign highlighted in the PSI, Zimbabwe presentation.
- [OPTIONS HIV Prevention Ambassador Training Package](#): The OPTIONS Consortium developed and field tested an Ambassador Training Package to support AGYW in playing a meaningful role in the rollout of oral PrEP. Stay tuned for the virtual Training of Trainers for this curriculum that is currently in development.
- [YouthPower Soft Skills for Cross-Sectoral Youth Outcomes](#): Read about which soft skills can help youth's longterm life outcomes.
- [Zambia Ending AIDS Campaign Materials](#): As referenced in the Zambia presentation, this campaign was designed to build awareness of PrEP across all populations and destigmatize PrEP use.

We hope you join us again on [November 19th](#)! Our next webinar will focus on the USAID- and PEPFAR-funded CHARISMA project. Learn more about the project's randomized controlled trial of women using oral PrEP in South Africa to assess the effectiveness of the CHARISMA empowerment counseling intervention on improving PrEP adherence and relationship dynamics such as partner communication and support, PrEP disclosure, and IPV reduction. Join us for this webinar to hear the results of the trial and learn more about the upcoming release of the CHARISMA intervention toolkit. Visit the [PrEP Virtual Learning Network](#) for more information on previous or upcoming sessions.

