




PLAN 4 RING TOOLKIT

PrEP Ring Situation Analysis Tool

INTERVIEW QUESTION BANK





This resource is part of the
PLAN 4 RING TOOLKIT,
a suite of resources and tools designed
to support planning for PrEP ring
introduction and scale-up.

The toolkit contents, listed below, can be downloaded at
www.prepwatch.org/plan4ring-toolkit.



PrEP Ring Language Considerations

PLANNING

- Introduction Framework
 - Situation Analysis Template
 - Guidelines Template
 - Rollout Scenarios Analysis Template
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DELIVERY

- Service Delivery Channel Analysis Template
 - Facility Readiness Assessments
 - Health Care Provider Training Considerations
 - Implementation Study Protocol Template
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PROMOTION

- Demand Creation Design Guide
 - Demand Creation Lessons Learned
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Considerations for Monitoring and Evaluation

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PrEP Ring Situation Analysis Tool

Interview Question Bank

This interview question bank is designed to help you identify the questions you will ask stakeholders in interviews to inform a situation analysis for the dapivirine ring (“PrEP ring” or “the ring”).

Introduction and context

- I1.** Please briefly describe your experience and role with oral pre-exposure prophylaxis (PrEP) introduction and implementation.
- I2.** How much would you say you know about the PrEP ring? What questions do you have?
- I3.** As you think about the rollout and scale-up of oral PrEP or other new products (for example, HIV self-testing, DMPA-SC), what do you think worked well? What has been challenging? What should be done differently for future HIV prevention products?
- I4.** How do you feel the ring could complement other HIV prevention options currently available?

Diverse service delivery channels (G)

- Ga.** The PrEP ring may be an appropriate addition to sexual and reproductive health (SRH)/family planning (FP) services in addition to HIV services. How are HIV, sexually transmitted infection (STI), and SRH/FP services currently integrated? What other products or services have been delivered across both channels (e.g., HIV testing)? What would need to happen to support inclusion of the ring in SRH/FP services?
- Gb.** What would need to happen at the policy or guidance level to support inclusion of the ring in SRH/FP services that already deliver HIV services? And in SRH/FP services that do not currently deliver any HIV services?
- Gc.** Some members of key and priority populations might want to use the ring. Are there existing programs for these populations that could be leveraged to increase access to the ring?

Interview questions for data collection

The following questions are organized along the PrEP Ring Introduction Framework:



Plans, systems, and processes to support service integration across priority delivery channels, including reproductive health/family planning and private sector providers/pharmacies



Planning and Budgeting (P)

Convene a new or existing subcommittee or task team within the HIV prevention or PrEP **technical working group (TWG)**.

P1a. In March 2021, the World Health Organization issued a recommendation that the dapivirine ring (the PrEP ring or the ring) may be offered as an additional prevention choice for women with a higher likelihood of HIV acquisition as part of combination prevention approaches. With this news, how should the discussions about the ring start in your country? What groups (e.g., TWGs) would be important to engage? How do you imagine introducing the ring (e.g., a pilot or demonstration project, a phased rollout)?

P1b. Is there a task force or TWG leading the introduction of the PrEP ring or oral PrEP? Who is in this working group, and does it include relevant stakeholders for integration in FP or maternal and child health (MCH) services? What is the expected timeline for decisions? What are relevant key milestones?

Responses should include details on:

- Plans for a task force or TWG to lead ring introduction
- Timelines and/or milestones for key decisions
- Plans for participation of stakeholders from other relevant areas (e.g., FP, MCH)

Identify **focus populations** for ring use and set **targets** for ring use.

P2a. With the introduction of oral PrEP, some countries identified focus populations and geographies for ring use. Sometimes these are key populations, such as men who have

sex with men, people who inject drugs, transgender people, and sex workers. In other cases, they are country-specific priority populations, such as adolescent girls and young women (AGYW), truck drivers, and people engaged in commercial fishing. How were focus populations identified for oral PrEP? How will this exercise be similar or different for the ring?

P2b. To what extent have decisions about end-user populations been made for the ring? What data already exist for these groups? Have targets been set for ring use?

Responses should include details on:

- Plans for end-user populations for the ring (e.g., population groups, targets set)

Engage **community** stakeholders to inform planning for ring rollout.

P3a. How was the community engaged throughout the planning and implementation process for oral PrEP or other new products (e.g., HIV self-testing, DMPA-SC)? What worked well? What did not work well? What should be done differently for the ring?

P3b. Who are the key community stakeholders and groups who should be engaged in initial ring planning and rollout? How can they be motivated? How would key and priority populations themselves be engaged? What are effective ways to authentically integrate their needs and perspectives into planning?

Responses should include details on:

- Key lessons on community engagement from oral PrEP rollout (e.g., effective ways to authentically engage community members and hear their perspectives)
- Plans for engaging community stakeholders on PrEP ring introduction

Develop impact, cost, and/or cost-effectiveness **analyses** to inform ring planning.

P4. When oral PrEP was introduced, were any impact, cost, or cost-effectiveness analyses conducted or discussions held? What analyses have already been conducted or will be conducted for the PrEP ring to inform planning? Which delivery channels will the analyses focus on (e.g., existing HIV services, FP, MCH, etc.)?

Responses should include details on:

- Existing analyses for oral PrEP and/or HIV prevention
- Plans for cost-effectiveness analyses for PrEP ring rollout

Include the ring in national HIV prevention and other relevant **plans** (e.g., FP).

P5a. Thinking back to oral PrEP planning and rollout, what policies or plans needed to change to support introduction of oral PrEP (e.g., national HIV strategies, standard treatment guidelines)? What would now need to change to include the PrEP ring and other upcoming new HIV prevention products?

P5b. How can the ring be integrated with broader SRH and other programming, especially for women and AGYW?

Responses should include details on:

- Key HIV prevention strategies/plans that will need to incorporate the PrEP ring; how these strategies/plans currently incorporate oral PrEP
- Other strategies/plans that could include the PrEP ring (e.g., plans for SRH, adolescent health, or self-care)

Develop **implementation plan and budget** to guide initial ring introduction and scale-up.

P6a. Was a national implementation plan or budget created for oral PrEP (at the national/subnational level)? If so, what was the process for developing them? What worked well? What did not work well? What should be done differently for the PrEP ring?

P6b. To what extent has a timeline and plan for introduction of the PrEP ring already been developed? Will this be easily integrated into the plan for oral PrEP? Is budgeting for the PrEP ring expected to fall within the budget for oral PrEP or other HIV prevention methods?

Responses should include details on:

- Plans/timelines for introduction and scale-up of the PrEP ring
- Integration of the PrEP ring in HIV prevention budgets and donor requests
- Source of financial resources to support PrEP ring procurement and introduction activities



Supply Chain Management (S)

Register the ring and include the ring on the national essential medicines list.

S1a. What is the process to register new products in [country] and to include the product on the national essential medicines list?

S1b. What is the current situation and timeline for the regulatory approval of the PrEP ring?

S1c. In which channels do you anticipate the PrEP ring will be approved for delivery by regulatory health authorities? How would the ring need to be scheduled or classified to enable delivery in pharmacies and through other nonclinical channels (e.g., community-based delivery)?

Responses should include details on:

- Current situation/timeline for regulatory approval of the PrEP ring
- Considerations for inclusion of the ring on national essential medicines lists and other key procurement and supply chain systems
- Considerations of how scheduling and/or classification of the ring upon approval may enable or inhibit delivery of the ring through nonclinical channels (e.g., pharmacies, community-based settings)

Update **supply chain guidelines and logistics systems** to include the ring.

S2. How were supply chain guidelines and logistics systems updated to include oral PrEP? What worked well? What did not work well? What should be done differently for the PrEP ring?

Responses should include details on:

- Existing systems, processes, and lessons learned from oral PrEP introduction
- Expected differences for the PrEP ring as a new product form that has not been previously procured
- What is needed to include the PrEP ring in supply chain systems for other delivery channels (e.g., FP, MCH, private sector)

Conduct **forecasting** and/or **quantification** exercises to guide **procurement** of the ring.

S3. Do you anticipate any challenges related to demand forecasting and quantification if the PrEP ring were adopted? Who oversees these processes?

Responses should include details on:

- Plans for PrEP ring demand forecasting and quantification
- Key stakeholders engaged in demand forecasting and quantification
- Expected challenges and/or unknowns

Establish **procurement, commodity monitoring, and distribution systems** to avoid stock-outs.

S4. To what extent will procurement, commodity monitoring, and distribution systems for the PrEP ring differ from those used for oral PrEP? How? To what extent will these activities be a barrier to effective introduction of the ring? Who oversees these processes?

Responses should include details on:

- Plans for procurement, commodity monitoring, and distribution for the PrEP ring
- Relevant stakeholders involved
- Potential barriers and/or challenges to distributing the PrEP ring to non-HIV channels



PrEP Ring Delivery Platforms (D)

Issue standard **clinical guidelines** for delivery and use of the ring.

D1a. How were clinical guidelines for the delivery and use of oral PrEP developed and disseminated? Do you think this process would be the same for the PrEP ring?

D1b. Who will issue clinical guidelines for public and private health care workers? Who influences these decisions?

Responses should include details on:

- Current state of and lessons learned from clinical guidelines for oral PrEP
- Plans/timelines for clinical guidelines for the PrEP ring

Dedicate resources to conduct regular **HIV tests, initiate ring use, and support refills.**

D2a. Like oral PrEP services, provision of the PrEP ring will require resources for conducting regular HIV tests, initiation visits, and follow-up visits. Where are the resources for oral PrEP implementation coming from? Do you think the sources of support would be the same for the ring?

D2b. To what extent do health care facilities that reach end-user populations have the capacity to include the ring in their current service offerings? What are potential barriers?

D2c. To what extent will sufficient funding be available to build the needed health care capacity? Why? What specific challenges do you anticipate? What opportunities do you see that could overcome these barriers or facilitate progress?

Responses should include details on:

- Lessons learned from oral PrEP rollout
- Potential opportunities/barriers for the introduction of the PrEP ring
- Required resources for successful ring rollout
- Considerations for other channels (e.g., access to HIV tests)

Develop materials and conduct trainings for **health care workers** on the ring.

D3a. How were trainings and job aids developed for health care providers for oral PrEP? How were the trainings conducted and the materials disseminated (e.g., on-site, virtually)? What worked well? What did not work well? What should be done differently for the PrEP ring?

D3b. The ring is designed to be self-inserted by users, perhaps after an initial demonstration. How can we make the ring more accessible to people for self-administration? For example, how would the ring need to be classified to be made available in community settings or pharmacies without a clinician?

D3c. To what extent is there a plan for training health care workers (HCWs) to deliver the ring? Are health care workers aware, able, and willing to dispense the ring when it becomes available? What can we learn from how health care workers were trained for oral PrEP?

D3d. Are tools available to help potential clients and health care workers understand who should use the ring and/or other HIV prevention methods?

Responses should include details on:

- Materials and models for provider training on oral PrEP and plans to integrate the PrEP ring
- Opportunities to train other health care providers on the PrEP ring
- Plans to engage and train health care providers on vaginally inserted methods and how to communicate and support decision-making about multiple methods
- Considerations for training health care providers in non-HIV channels

Establish **referral systems** to link clients from other channels to sites dispensing the ring.

D4a. Where is oral PrEP currently provided? Please tell me about any referral systems that are in place for places where oral PrEP is not offered. How could these referral systems include the PrEP ring?

D4b. Is oral PrEP provided in the private sector? If so, who provides it? Do you think this would be the same for the PrEP ring?

D4c. What are some of the challenges experienced with delivering HIV services in these other service channels? What aspects of the HIV services delivered in these other service channels were beneficial to that service?

Responses should include details on:

- Existing referral systems for oral PrEP (e.g., from non-HIV channels such as FP services and/or from HIV testing services)

Integrate support for **partner communication** and intimate partner violence.

D5. When speaking with clients about HIV, do health care workers currently ask about experiences of gender-based violence, including intimate partner violence (IPV)? How are

potential oral PrEP users supported to speak with their partners about PrEP? What do you think will need to be done differently for the ring?

Responses should include details on:

- Existing screening and supportive services for oral PrEP users experiencing IPV and potential to extend services to PrEP ring users
- Opportunities to integrate considerations for vaginally inserted methods into existing IPV support



Uptake & Effective Use (U)

Develop and implement **demand creation strategies** that include ring promotion.

U1a. What does demand creation for oral PrEP, currently entail? Is there a national plan? What has worked well? What is not working well? What should be done differently for the PrEP ring? What challenges do you anticipate in generating demand for the ring? How would you recommend overcoming these challenges? What existing demand creation programs or platforms do you feel would be well suited to promote the ring?

U1b. What is the current awareness about oral PrEP in [country]? To what extent has a clear and informative communications plan for oral PrEP education and awareness been developed? What organizations are expected to implement demand creation strategies for the ring?

Responses should include details on:

- Lessons learned from oral PrEP rollout
- Existing campaigns, materials, etc., developed for oral PrEP that could include the PrEP ring
- Plans for demand creation for the PrEP ring or other SRH products that can be relevant for creation of materials for the ring (e.g., moon cup, diaphragm, internal condom, etc.)

Address social norms/stigma to build **community and partner acceptance** of PrEP.

U2a. To what extent do end-user populations currently understand and demand oral PrEP? How may stigma or social norms affect the introduction of the PrEP ring? What do you expect key partner or community concerns will be?

U2b. What were the most effective ways to address social norms/stigma to build community and partner acceptance of oral PrEP? How can community stakeholders be engaged in addressing social norms/stigma to build awareness, support, and acceptance for PrEP ring introduction? How may these strategies need to be adapted for the ring?

Responses should include details on:

- Key areas of concern for stigma/social norms
- Lessons learned from oral PrEP rollout or other SRH products
- Effective methods to address stigma/social norms for the PrEP ring

Develop **information and tools for clients** to guide product choice and support ring use.

U3a. Where do focus populations get information about HIV prevention? How is this different for each focus population? Is information about oral PrEP or other prevention methods available to help clients choose prevention options that work for them? How were these materials created and disseminated?

U3b. To what extent can existing information, education, and communication materials for oral PrEP include the PrEP ring? How may they be improved to address potential barriers or social norms that may affect acceptance and ring use? Which stakeholders will be responsible for developing a plan and/or executing programming to support effective use?

Responses should include details on:

- Existing information and tools for clients developed for oral PrEP that could include the PrEP ring
- Plan/timelines to adapt materials for PrEP ring introduction
- Need to create materials and/or approaches to support end-user choice among options

Support **effective use and continuation** for ring users.

U4a. How are people supported after they start taking oral PrEP? What does support for adherence or continuation look like?

U4b. What can we learn from oral PrEP adherence and continuation in order to improve uptake and use of the PrEP ring? How may this vary by population? What data already exist? What

potential barriers may arise, and what opportunities do you see to overcome these barriers or facilitate progress?

Responses should include details on:

- Lessons learned from oral PrEP adherence and continuation
- Key opportunities/challenges for the PrEP ring

Develop and communicate plans for sanitary **disposal** of used rings.

U5a. The PrEP ring can be disposed of by placing it back in its packaging or by wrapping it in tissue and placing it in a bin, out of reach of children. Some users may decide to bring used PrEP rings back to where the ring was provided for disposal. Do you anticipate any challenges with disposal either at either home or places of ring provision?

U5b. To what extent have communication plans for disposal of the PrEP ring been developed? Who will issue guidelines for sanitary disposal of used rings? What is the current situation? What is the timeline?

Responses should include details on:

- Plans/timelines for communication on PrEP ring disposal



Monitoring

Establish **monitoring tools** to support data collection and analysis on ring use.

M1a. How has or will oral PrEP be integrated into existing health monitoring systems? What monitoring systems and tools (e.g., at the national, subnational, and facility levels) would need to be adapted to include the PrEP ring and other new HIV prevention options?

M1b. Are the monitoring tools different across HIV and SRH/FP services? To what extent may challenges arise to integrating the PrEP ring into existing health monitoring systems? What considerations need to be addressed? Who will need to be involved?

Responses should include details on:

- Current systems and indicators for monitoring oral PrEP delivery at the facility, regional, and national levels
- Opportunities to include the PrEP ring in monitoring tools alongside oral PrEP
- Opportunities/barriers to integrating the PrEP ring into monitoring systems for FP and other non-HIV services and/or to linking private sector delivery to public sector monitoring systems

Establish systems for **pharmacovigilance** and to monitor drug resistance.

M2. What pharmacovigilance systems exist for oral PrEP? How was this set up? Would you expect the process to be the same for new prevention products? Who is responsible for this?

Responses should include details on:

- Current plans for pharmacovigilance for oral PrEP and plans to integrate the PrEP ring
- Considerations for pharmacovigilance if the PrEP ring is approved for use without a prescription (e.g., need to create a hotline, including information with the PrEP ring package)

Conduct **implementation science** research to inform policy and program.

M3. Often countries conduct implementation science research to understand how to adjust policy and scale-up. Was this done for oral PrEP? Would you expect this to be done for new products such as the PrEP ring?

Responses should include details on:

- Plans for demonstration projects and/or key implementation science questions for initial, phased rollout of the PrEP ring
- Plans for ongoing implementation science research to inform scale-up of the PrEP ring in future years