

PrEP Learning Network Launch Session August 22, 2019







LEARNING NETWORK AND PREP GLOBAL CONTEXT

PREP SCALE-UP IN ZIMBABWE

PREP SCALE-UP IN LESOTHO

PREP SCALE-UP IN SOUTH AFRICA

WRAP-UP AND NEXT STEPS



PrEP Learning Network goals

Create a forum

to facilitate and accelerate sharing of PrEP scale-up experience, as well as implementation tools and resources across low- and middle-income countries (LMICs) within sub-Saharan Africa

Support epidemic

control by helping countries achieve PrEP targets, such that AGYW and other target populations who need PrEP are able to effectively use PrEP and prevent HIV infection



Introducing OPTIONS, EpiC and RISE

Optimizing
Prevention
Technology
Introduction on
Schedule (OPTIONS)

- A multidisciplinary consortium focusing on **expediting and sustaining access to antiretroviral-based HIV prevention products**.
- In recent years, OPTIONS has facilitated learning collaboratives with ministries and organizations interested in and actively rolling out PrEP to ensure learning extended beyond program and geographical boundaries.

Meeting Targets and Maintaining Epidemic Control (EpiC)

- A five-year global project funded by PEPFAR and USAID, dedicated to achieving and maintaining
 HIV epidemic control.
- EpiC provides strategic technical assistance (TA) and direct service delivery (DSD) to break through barriers to 95-95-95 and promote self-reliant management of national HIV programs by improving HIV case-finding, prevention, treatment programming and viral load suppression.

Reaching Impact, Saturation and Epidemic Control (RISE)

- A PEPFAR-funded HIV/AIDS project that will support countries in **achieving and maintaining epidemic control through provision of strategic TA and direct service delivery (DSD)** to improve prevention, HIV case finding and treatment programming.
- RISE will prepare countries and local implementing partners to address barriers in HIV services among at-risk adult men, women and priority and key populations, **optimize national and sub-national systems, and build capacity of local implementing partners**, leveraging data to achieve and maintain epidemic control over the course of 5 years.



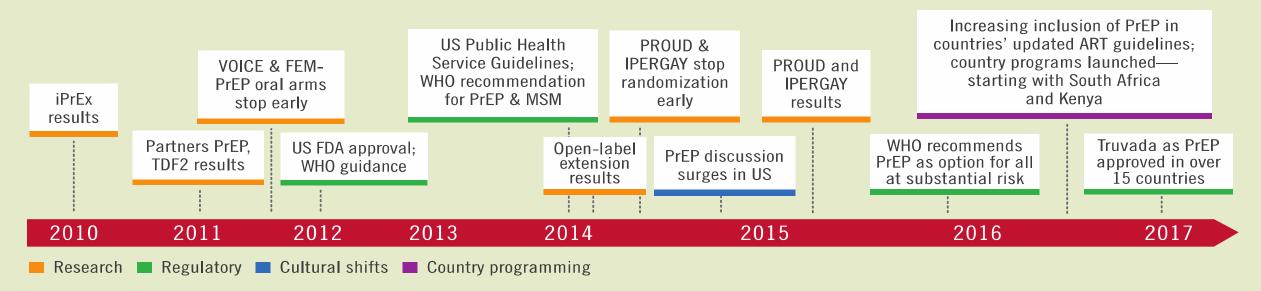
PrEP challenges

- HIV prevention (including PrEP) is critical to achieve epidemic control
- All PEPFAR countries will have PrEP targets in their 2019 COP
- Countries in SSA have faced many PrEP scale-up challenges including:
 - Funding for PrEP tablets and delivery
 - Insufficient facilities and/or providers trained or comfortable delivering PrEP
 - Insufficient demand creation and community awareness/support for PrEP
 - Difficulty identifying individuals at-risk
 - Poor continuation rates
 - Difficulty setting PrEP targets and monitoring PrEP delivery and outcomes
 - Meeting the specific needs of adolescent girls and young women (AGYW) and key populations (KPs)





From Proof-of-Concept to Prevention Phenomenon

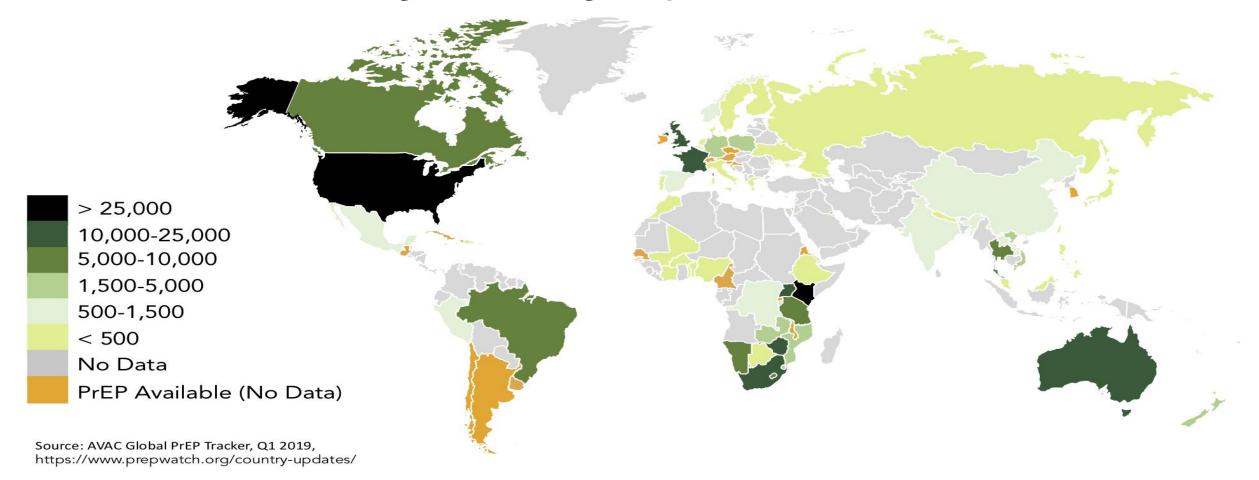


Has the global action on daily oral PrEP been as fast as possible? No. But there has been tremendous activity over the past five years. This timeline can be used to anticipate and speed action on the next generation of ARV-based prevention options. For the latest, visit www.avac.org/infographics.



Oral PrEP Initiations – 7 Years In

PrEP Initiations by Country, April 2019





PEPFAR PrEP Implementation

OPTIONS Learning Network August 2019

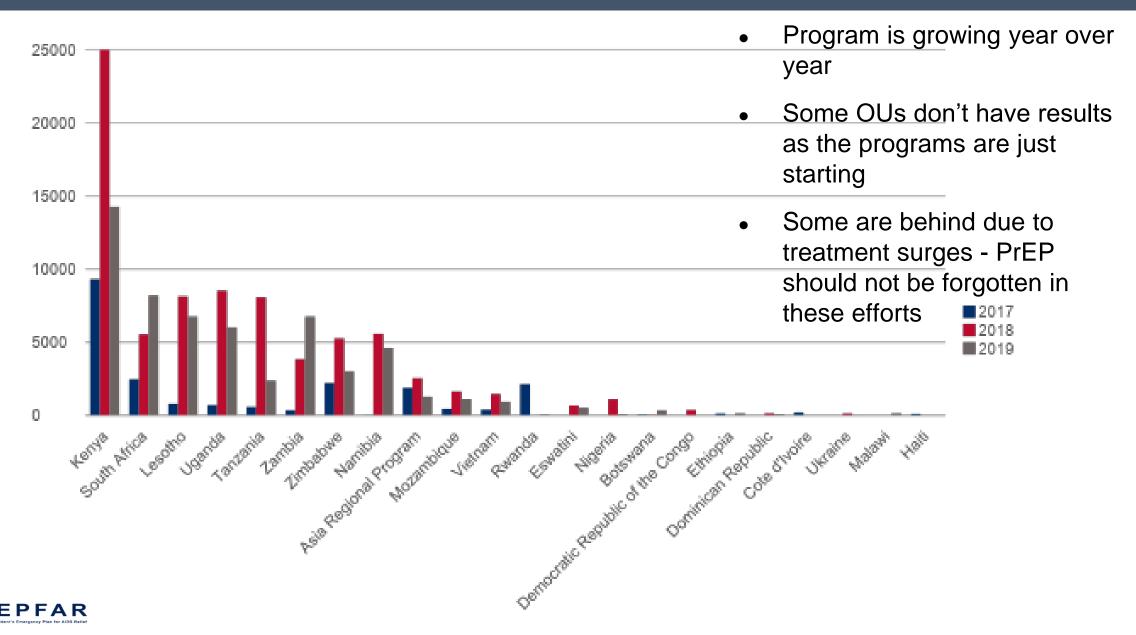
PrEP is a rapidly expanding intervention

- In more than 20 PEPFAR countries and counting
- By March 2019 USAID had initiated 29,700 people on PrEP in COP18
- Challenges continue to include:
 - Restrictive policies in some settings
 - Lack of implementation of policies
 - Allocating resources for PrEP
 - Demand creation and general awareness of PrEP
 - Provider training

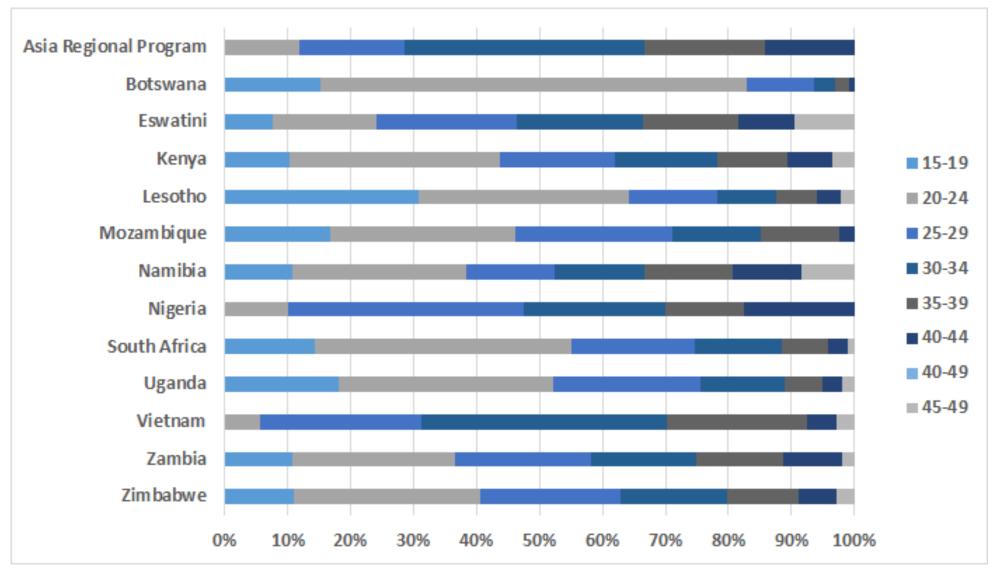




PEPFAR PrEP Results 2017-2019

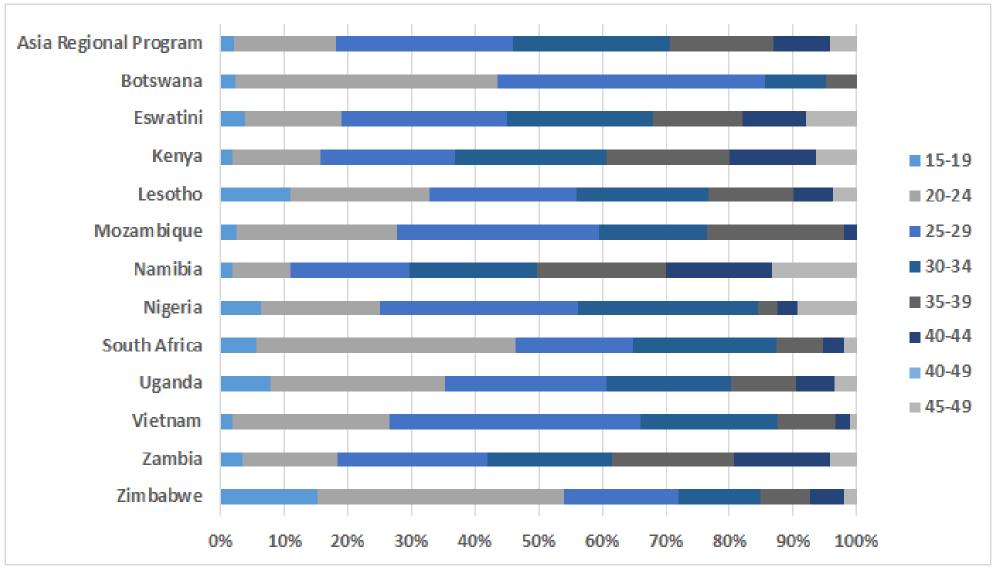


PrEP_NEW Q2 results, Women, by Age/sex and OU



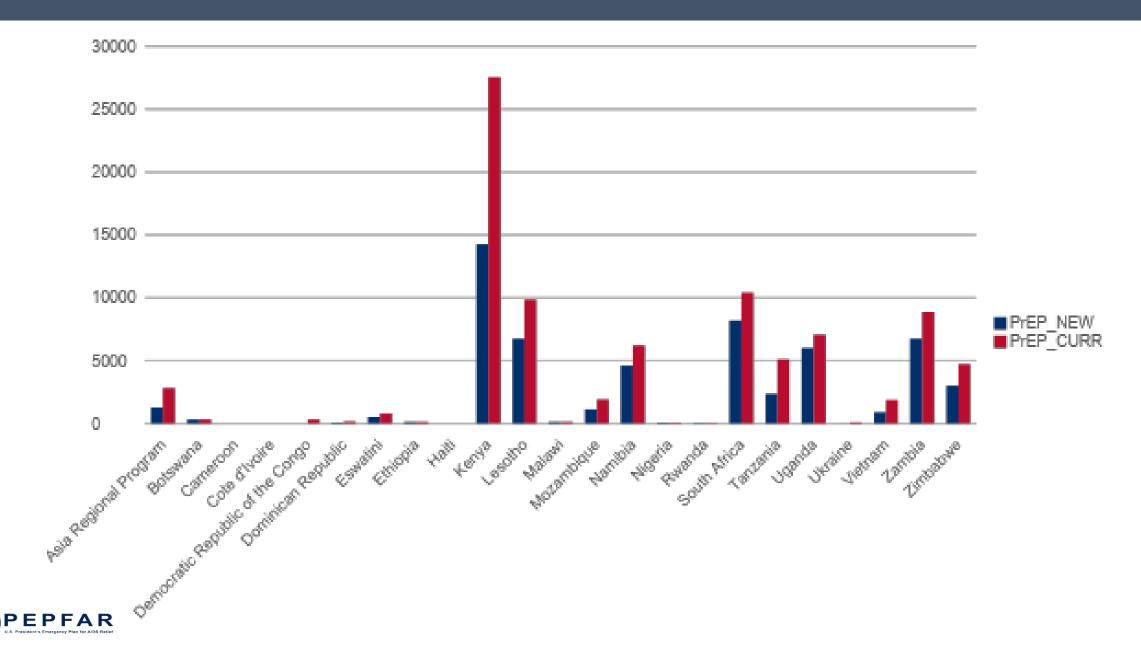


PrEP_NEW Q2 results, Men, by Age/sex and OU





PEPFAR FY19 Q2 PrEP_NEW and PrEP_CURR results



Thank you!



Today's discussion: PrEP scale-up

Today's speakers

Definate Nhamo

Pangaea Zimbabwe AIDS Trust
(PZAT)
Zimbabwe

Tafadzwa Chakare

Jhpiego Lesotho

Ben Brown

Anova Health Institute
South Africa

PrEP Scale-Up Experiences of Three Country Partners:

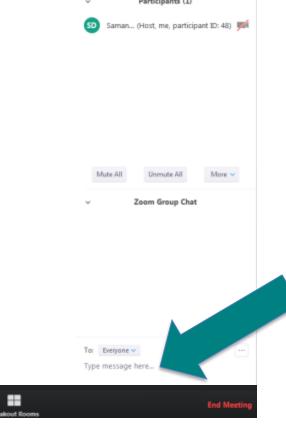
- PrEP initiation and rollout trends
- What has been working well?
- What has been challenging?
- What key breakthroughs or insights learned during rollout can you share with other implementing partners?



Use the "Chat" feature to ask questions!

There is dedicated Q&A at the end of each presentation—please feel free to ask questions during this time or type your questions into the chat box at any point during the presentations





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PrEP Learning Network

Definate Nhamo Senior Program Manager Pangaea Zimbabwe AIDS Trust (PZAT) August 22, 2019





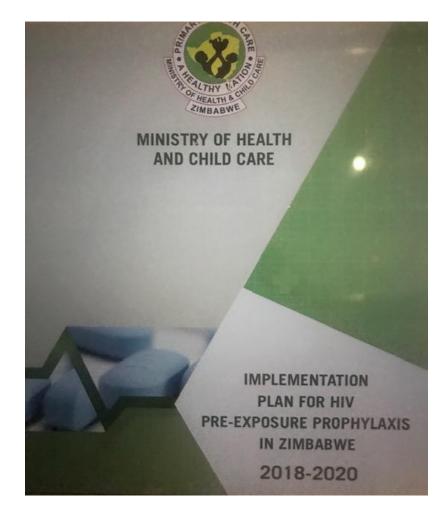






PrEP Program in Zimbabwe

- PrEP delivery started with small demonstration studies (like DREAMS) in 2016
- National rollout started in 2017
- PrEP delivery coordinated through the PrEP TWG
- PrEPTWG convened by MoHCC
- PZAT secretariat
- PrEPTWG members include: The Mission, implementing partners, researchers, advocates, AGYW reps, KP reps
- TWG meets quarterly for updates, planning, developing strategic documents like PrEP implementation plan
- PrEP implementation plan was launched in July 2018



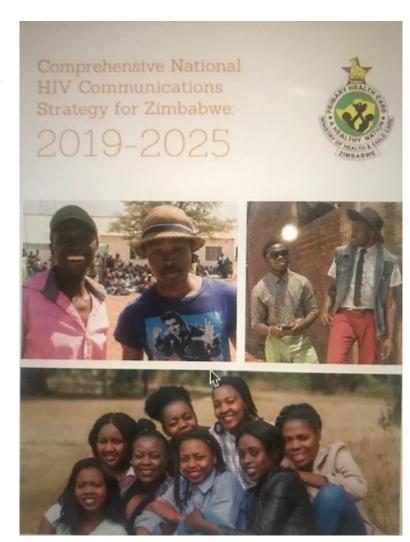
PrEP in numbers

- ~ II 800 people ever initiated on PrEP as of May 2019
- ~ 37% AGYW
- ~ 74 facilities delivering PrEP
- ~ 5/10 of the provinces currently providing PrEP
- ~ 350 providers trained in PrEP delivery
- Average duration on PrEP for people initiated ~ 4 months



PrEP Successes

- High continuation rates at smaller, specialized sites for example the SHAZ! Hub (youth drop in centre)
- High numbers being initiated on PrEP
- Multi-sectoral approach
- MoHCC coordinating through the TWG
- Phased approach to scale up by geography and populations
- Costed the PrEP program
- Key findings: Provision of PrEP to KPs like AGYW is feasible and affordable
- Though initiation costs are lower, PrEP costs increase with low continuation rates
- Zimbabwe has a national communication strategy on HIV care, treatment and prevention (planned launch date – September 2019)





Drug financing

PrEP drugs mainly funded by PEPFAR and Global Fund

Implementation

- Understanding how the different target groups cycle on and off PrEP
- Understanding how long the different target groups are on PrEP
- Understanding PrEP differentiated models to improve efficiencies



Key lessons learned

- Developing and using strong M&E tools (RAST, facility readiness assessment)
- Define who should be prioritized by geography and target population
- Have a strong demand generation program
- Develop an implementation plan to drive PrEP implementation
- Invest in PrEP literacy to improve community support
- Invest in a baseline (In Zimbabwe community dialogues) to develop appropriate implementation strategies
- Understand what providers know, gaps to be addressed in training
- Strong follow up needed to attain high continuation rates



Thank you!

Definate Nhamo dnhamo@pzat.org

Senior Programs Manager
Pangaea Zimbabwe AIDS Trust (PZAT)









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Early PrEP Implementation Experience- Jhpiego Lesotho

PrEP Learning Network

Tafadzwa Chakare

August 22, 2019

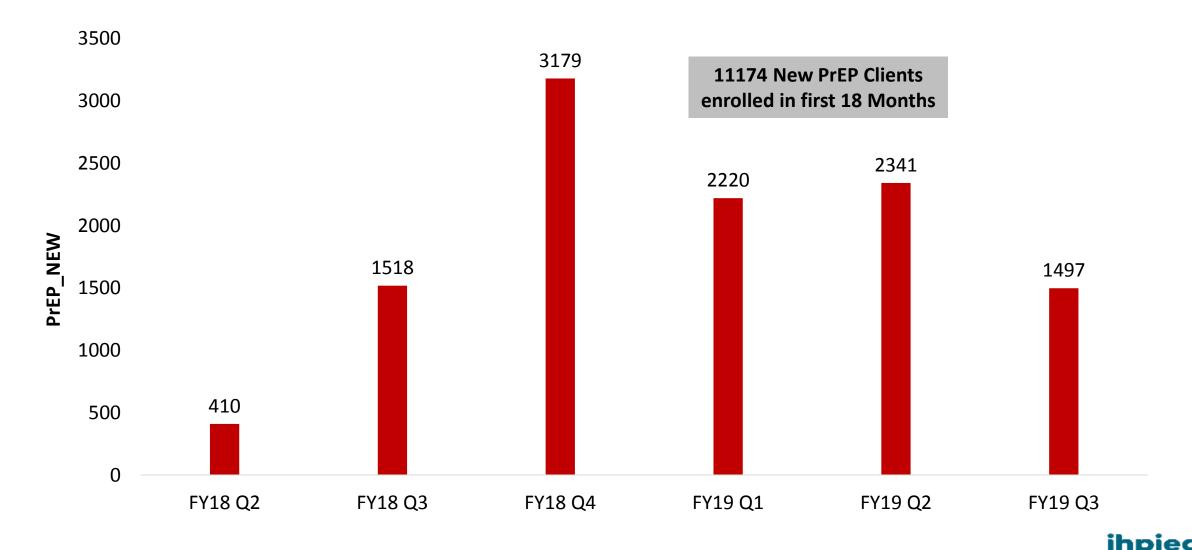




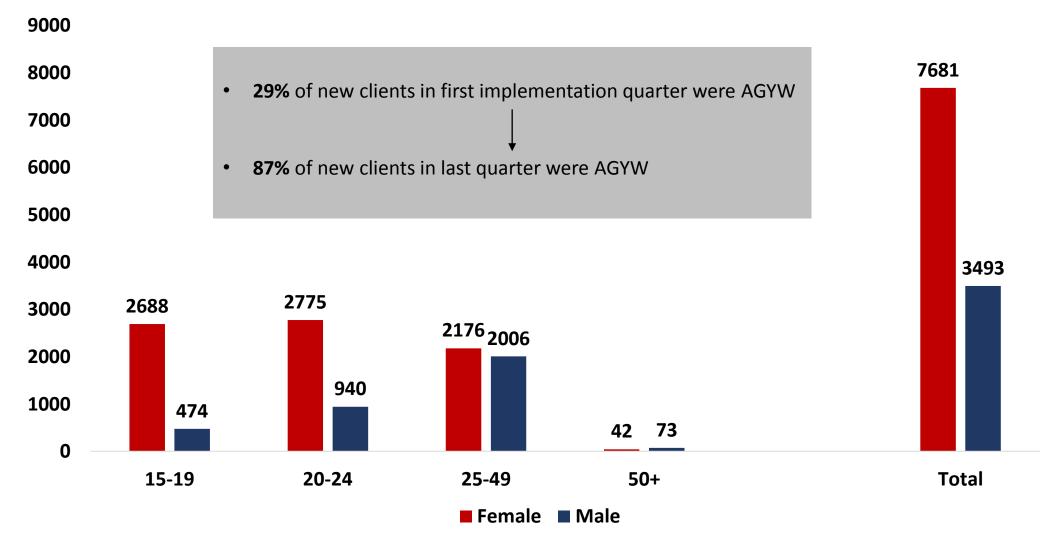




Initiated PrEP by FY/Q

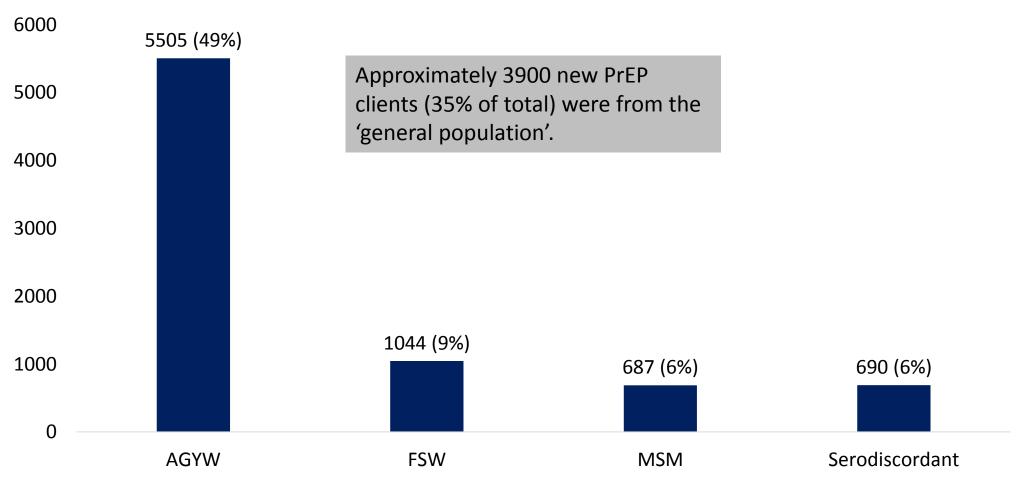


Enrollment by Sex, Age (Jan 2018- June 2019)



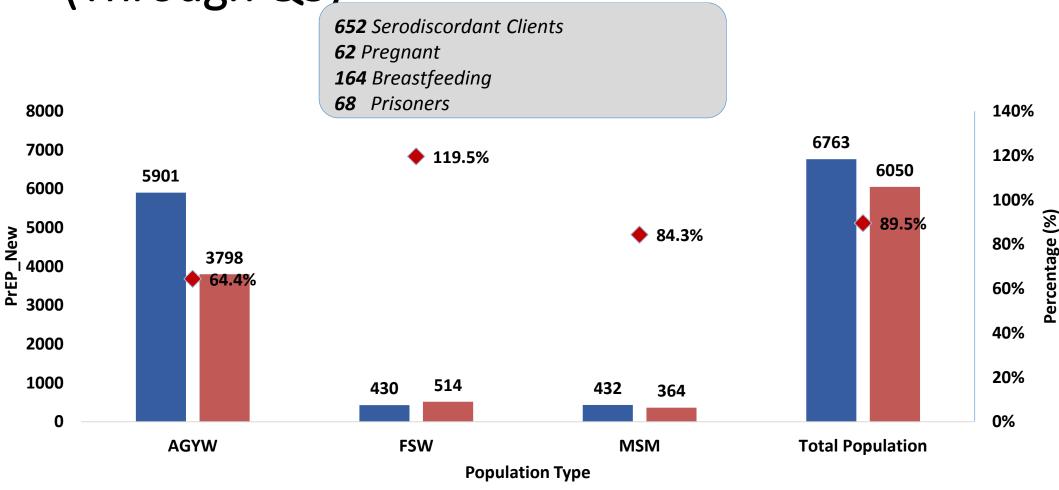


Enrollment by Population Group (Jan 2018- June 2019)





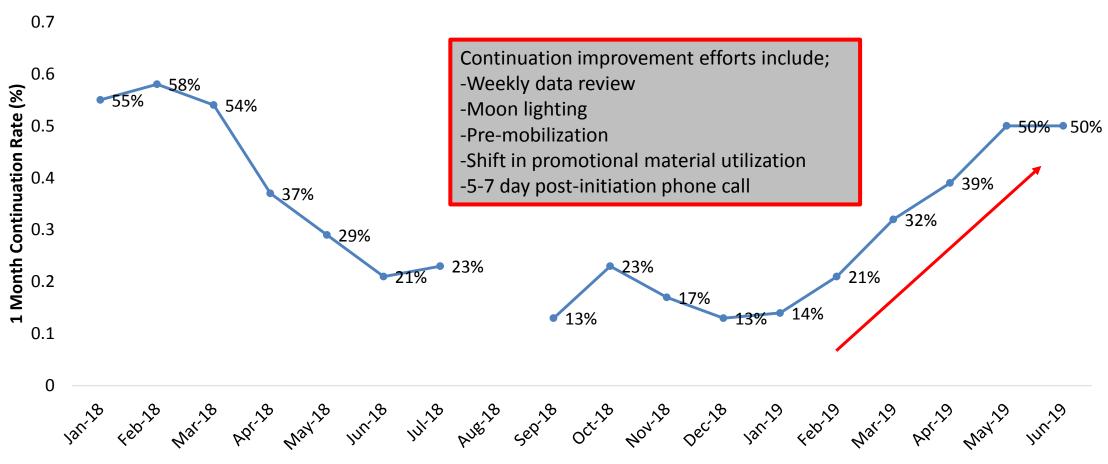
PrEP_New FY19 Performance vs Target (Through Q3)



■ Target ■ Achieved ◆ %



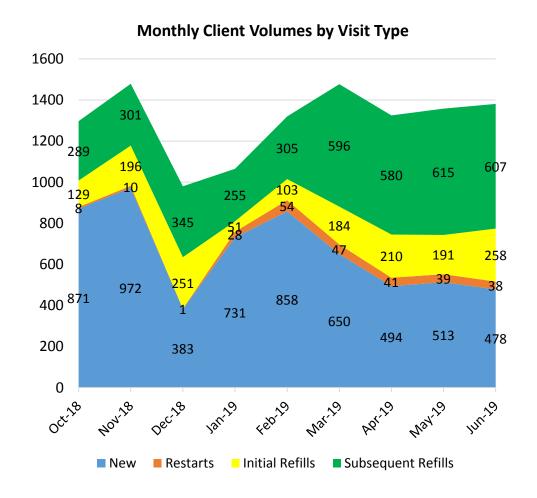
One month continuation Trend

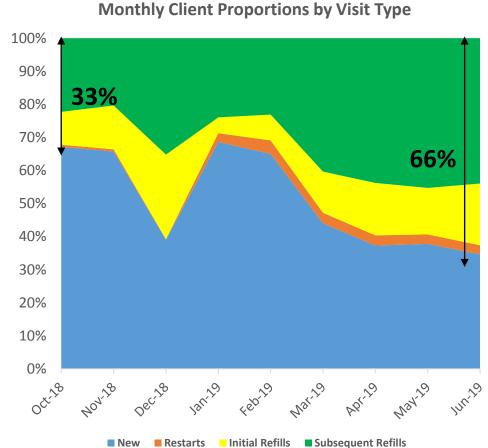


Client Initiation Cohort



Proportion of Refill Visits up from 33% to 66% during FY19







Successes

- Proactive community demand creation
- User engagement- Human Centered Design to overcome accessibility and continuation challenges
- Established AGYW PrEP users club to reduce early discontinuation-Generation Aspire







Challenges

- Negative community and health provider attitudes
- Drug shortages
 - National Supply chain
 - Global TDF/3TC concern
- Lack of SRH integration
- ARV stigma
- Evolving PrEP myths;
 - "PrEP increases infection risk"
 - PrEP makes you gain weight- "appetite pill"
- Balancing service convenience and sustainability



Way Forward

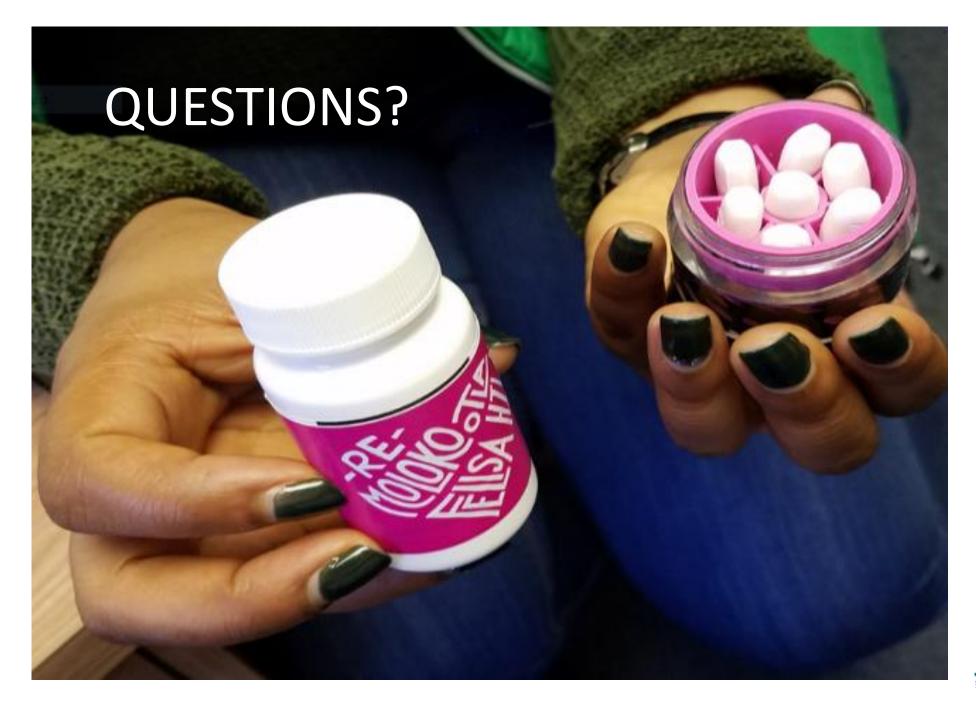
- Possible transition to TDF/FTC
- Ready for 2+1+1?
- Community engagement through village health workers
- Innovative PrEP packaging to reduce stigma
- Advocate for increased PrEP/SRH integration to target
 - Pregnant women
 - Breastfeeding women
 - Contraceptive users
- Finalize data analysis for 'Optimizing PrEP in Lesotho' Study



PrEP for AGYW- Early Insights

- Parental engagement versus adolescent friendliness... finding the balance
- Blood taking may be a barrier
- Initial small scale FP integration suggests user concerns with coadministration of oral options and no continuation benefits
- Instant mobilization and initiation boosts enrollment but likely to result in early discontinuation
- Group support (including social media) is valuable for new AGYW PrEP users







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Prep Scale Up for MSM in South Africa: LINKAGES FY19 Progress and Lessons Learned

PrEP Learning Network Webinar Ben Brown and Dawie Nel 22 August 2019







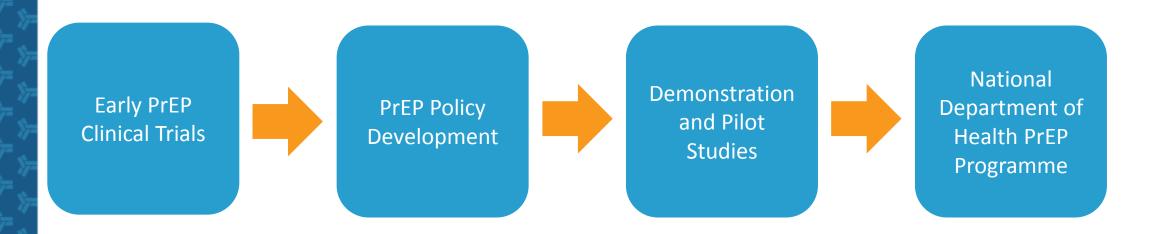






From Research to Scale Up: PrEP in South Africa

History of PrEP Roll Out in South Africa



History of early clinical trials across key and vulnerable populations

Rapid development of the SAHCS PrEP guidelines following iPrEX results in 2012 provided important ground work for population specific demonstration projects and implementation science studies.

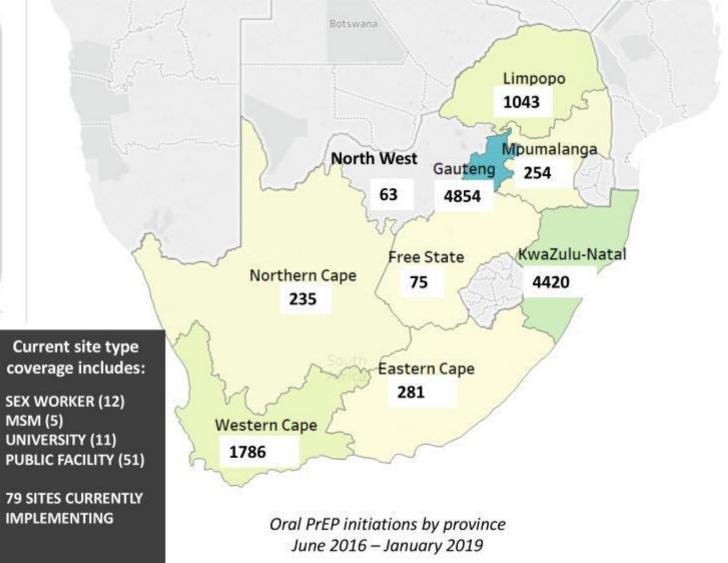
Utilized centralized and standardized trainings and communication materials but site and project specific implementation strategies

Followed by formal NDOH policy development and PrEP site scale up, contingent on donor supported funding.

Current Oral PrEP Initiations: Geographic Distribution June 2016 - January 2019



13 011 Took place at **82 SITES** across South Africa



Current provincial coverage includes:

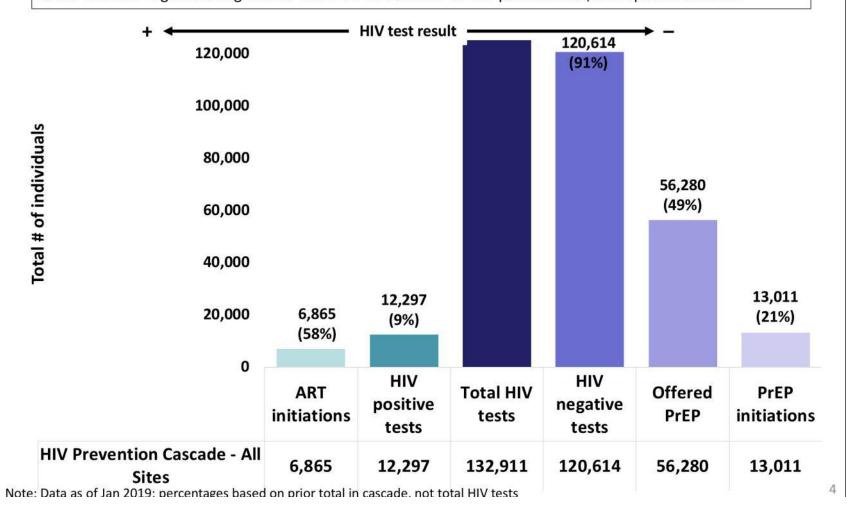
GAUTENG (20) FREE STATE (2) **EASTERN CAPE (9) KWAZULU-NATAL** (31)LIMPOPO (4) MPUMALANGA (0) NORTH West (2) WESTERN CAPE (11)

MSM (5) **UNIVERSITY (11) PUBLIC FACILITY (51)**

IMPLEMENTING

Oral PrEP Implementation Prevention cascade | all sites

Across all oral PrEP implementing sites, **oral PrEP uptake** is **21%** of those who were offered PrEP, with **49%** of those who test negative being offered oral PrEP. Of the **9%** of all HIV positive tests, ART uptake was **58%**.

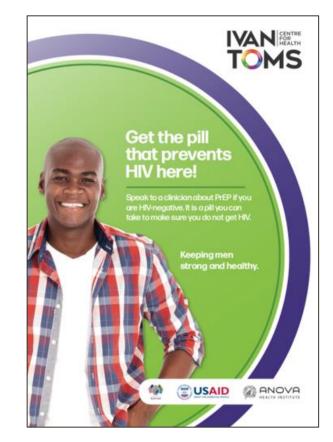


LINKAGES MSM PrEP Scale Up

Current Progress: LINKAGES PrEP

- LINKAGES supported the expansion of existing PrEP services with an important focus on community-based service delivery
- Facility-based and mobile PrEP have been expanded in the Cape Metro Region and 7 regions in JHB, after initial regulatory delays.







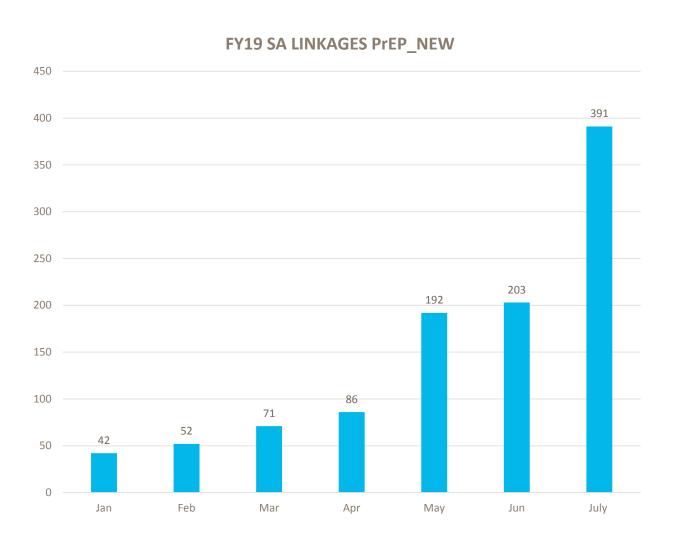






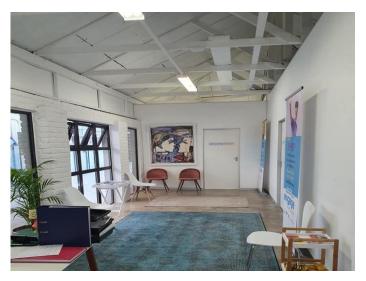
Current Progress: LINKAGES PrEP

- PrEP at LINKAGES
 implementing sites has seen consistent monthly growth since Jan 19.
- Significant growth seen in Q2 following launch of EMH JHB services and expansion of mobile PrEP in Cape Town.



PrEP Implementation Considerations

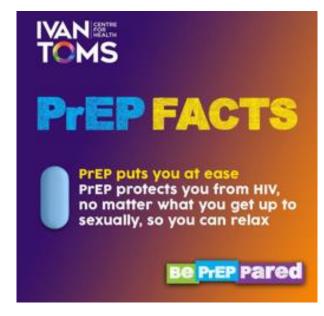
- PrEP integrated into existing facilities vs. mobile deployments
 - Pros and Cons
 - Difference by population
 - Data and Client Management
- Utilization of social networks and EPOA for PrEP
 - Time, volume, costs
- Case Management for All PrEP Clients
 - PrEP initiation vs. Retention





 De-medicalize PrEP. Make it as simple as popping a daily vitamin pill. Clients need to understand PrEP.





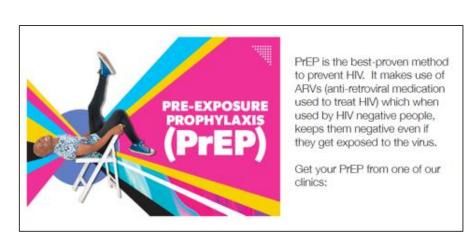


 Make PrEP pleasurable. Consider linking Lifestyle approach linked with pleasure as a stimulus.





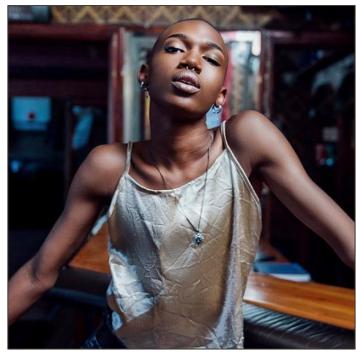
 Avoid PrEP stigma. Population specific approaches can harm large scale role out, as can comparisons to other prevention strategies.





 Remember the "why". Clients may be realistically pursuing PrEP because other options may not be working or right for them.







Lessons for New or Early PrEP Sites

- **Consider Scale Early.** So consider scale even from day one of your pilot project and consider how rapidly you can expand while maintaining quality. Not a large influx so need scale to achieve targets. PrEP can easily be integrated into existing services.
- Communicate Realistically. Messaging materials, don't shy away from the realities of using PrEP, do not under sell it, address stigma from day 1. Broader messages for general population, most important education is during initiation.
- **PrEP may be once-off for some.** Maybe you will only see your PrEP client once. That is okay, not all PrEP users will take PrEP long-term. Your follow up data will not be perfect. We are still learning about PrEP retention.
- **Programmes must reflect real life.** We can't control everything. Provide PrEP in a way that works for clients life, do not expect clients to confirm to your programme. Programmes can not adapt research practices, must fit into standard clinical procedures.
- **Potential PrEP users are everywhere.** Prep awareness may be low, PrEP should be offered to all as standard (meaningfully). Are we reaching those in need? Do they understand their need?

Thank you!

Ben Brown

Anova Health Institute bbrown@anovahealth.co.za

Dawie Nel

Engage Men's Health neld@engagemenshealth.org.za



Q&A









Upcoming sessions: Save the date!



Up next: Identifying PrEP continuation challenges and approaches to support success

Speakers:

- Daniel Were, Jhpiego/Jilinde
- Gwendoline Chapwanya,PZAT/SHAZ!HUB
- Jason Reed (Jhpiego) and Jessica Rodrigues (AVAC)

Coming soon:

Using mass media to increase PrEP awareness and uptake

Implementing partners from three different organizations will share recent behavior change strategies including human-centered design and mass media approaches.

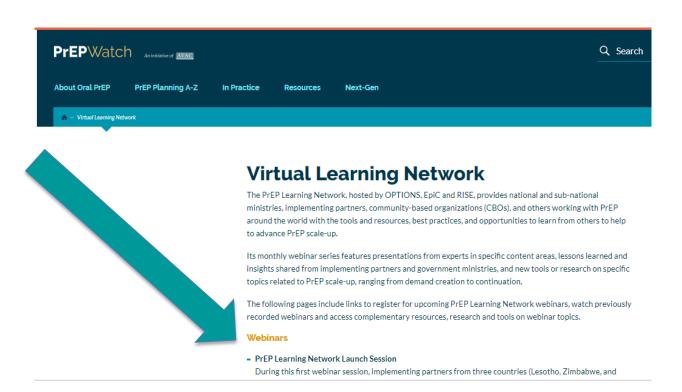
Upcoming Sessions

- October 10th: Demand Creation— Interpersonal Communication
- October 24^{th:} Provider Training and Values Clarification
- November I 4th: Target Setting and Costing:
- January 23rd: Continuation and Effective Use Interventions
- February 27th: PrEP for Pregnant and Breastfeeding Women
- March 26th: PrEP Integration with STI/FP/MCH services
- April 23rd:Topics to be determined
- May 28th: Topics to be determined



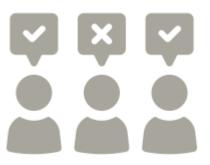
Go to PrEPWatch for additional resources

- Webinars will be recorded and loaded onto PrEPWatch for you to access at a later date
- Additional resources that are complementary will also be included on PrEPWatch—including related research articles, tools and more to dive deeper into specific topics
- Registration for upcoming webinars can also be found on PrEPWatch



Poll:

What did you think of today's session?





Thank you!





