



PrEP Learning Network:

Addressing the Elephant in the Room: Stigma and PrEP rollout

July 23, 2020



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PEPFAR

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OPTIMIZING PREVENTION TECHNOLOGY INTRODUCTION ON SCHEDULE

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**WHAT WORKS FOR STIGMA REDUCTION IN HEALTH FACILITIES:
LESSONS LEARNED**

KENYA'S EXPERIENCE WITH PrEP FOR ALL

SPECIAL PRESENTATION: PrEP PSA FROM SOUTH AFRICA

WHAT'S NEXT WITH THE LEARNING NETWORK



Today's Speakers



Laura Nyblade

Fellow, Health Policy, RTI International

Laura Nyblade is an RTI Fellow and Senior Technical Advisor on Stigma and Discrimination in the division for global health, RTI International and for USAID's Health Policy Plus Project. For the past two decades, Dr. Nyblade has built a portfolio of research and programmatic work on HIV stigma and most recently led work focused on reducing stigma in health facilities through a whole facility approach that engages all levels of health workers.



Elizabeth Irungu

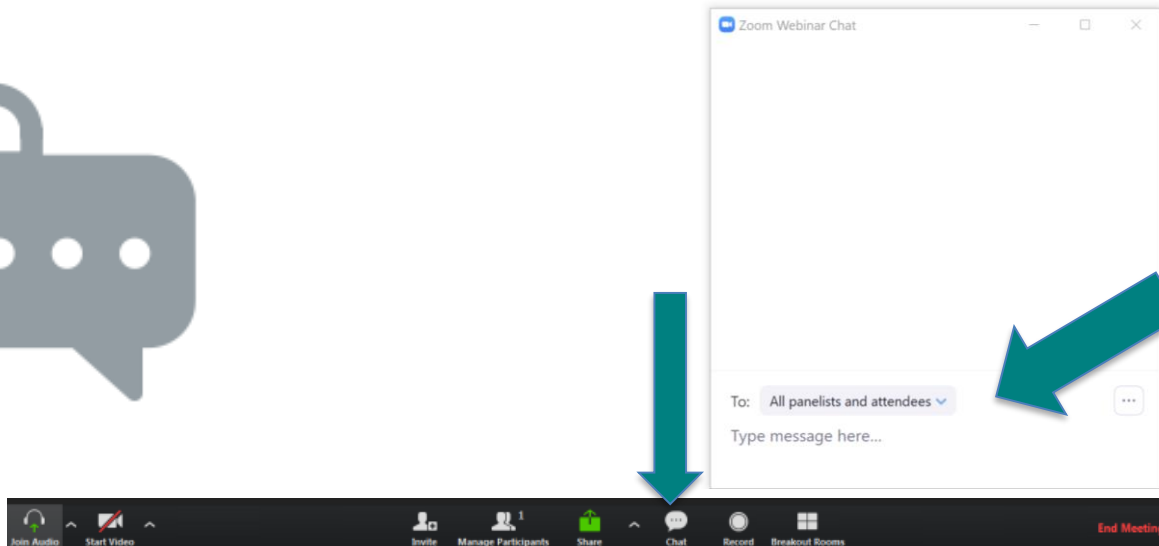
Deputy Site Coordinator, Partners Demonstration Project

Elizabeth Irungu, MBChB, MPH, is faculty at the School of Public Health in Jomo Kenyatta University of Agriculture and Technology in Kenya. She has over ten years' experience conducting HIV prevention research among HIV serodiscordant couples and among women in general. Elizabeth leads the Partners Scale-Up Project, which has been working within the national program to catalyze scale up of oral PrEP in health facilities.



Use the “Chat” feature to ask questions!

There will be dedicated Q&A after the presentations — please feel free to ask questions during this time or type your questions into the chat box at any point during the presentations



Make sure to share your chat with “All panelists and attendees” not just panelists.

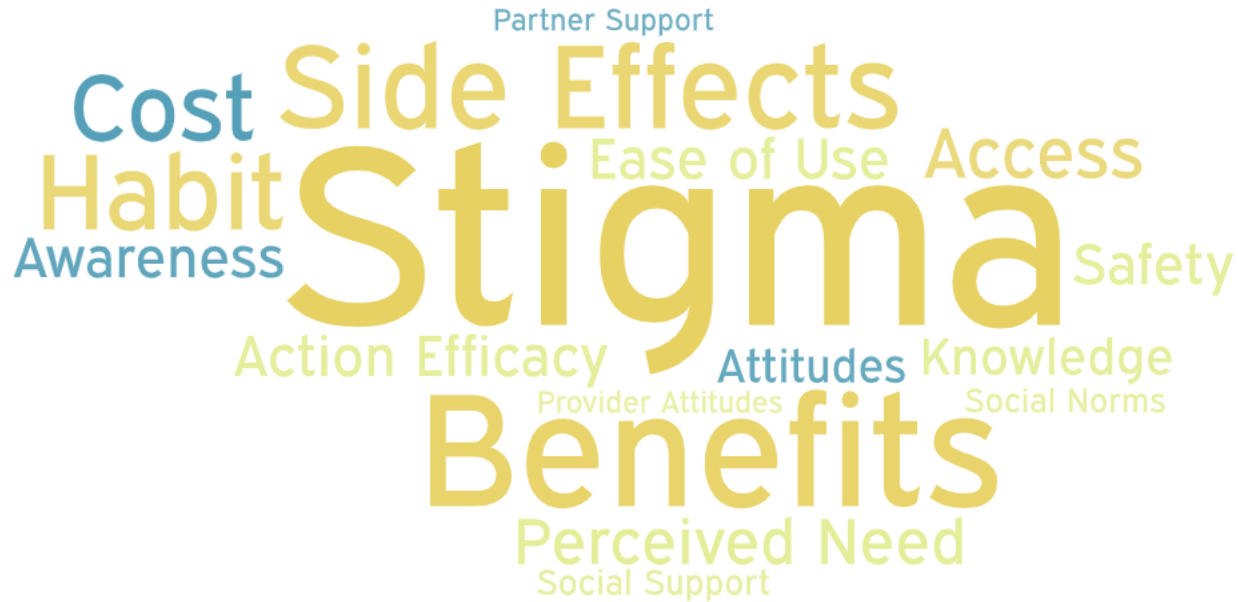


Overview: Stigma and PrEP rollout

Why do we need to consider stigma in PrEP rollout?



Overview: Stigma influences PrEP Use





Overview: Dimensions of stigma

- HIV
- Association (e.g., sex worker, men who have sex with men)
- Behavior (e.g., sexually promiscuous, premarital sex)



Overview: Stigma and PrEP roll out

To increase PrEP use and continuation we need to address stigma.

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What works for reducing stigma in health facilities:

Lessons learned

Laura Nyblade, PhD, Fellow and Senior Technical Advisor, Stigma and Discrimination, Health Policy Plus/RTI International

Acknowledgments

- Respondents, facility staff, and management in Ghana and Tanzania, and Thailand
- Governments of Tanzania, Ghana, and Thailand, including ministries of health and national AIDS programs
- Local implementing partners in the three countries
- Donors, including U.S. Agency for International Development (USAID), U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the Global Fund, National Institutes of Mental Health (NIMH), and Ford Foundation

Definitions and Terminology

Stigma: A Fundamental Determinant of Health and Health Equity

- Stigma undermines three key determinants of health:
 - Access to resources
 - Access to social support
 - Psychological and behavioral responses
- Through exclusion, segregation, discrimination, stress and downward socioeconomic placement

(Hatzenbuehler et al. 2013)

Stigma: A Social Process that Occurs within the Context of Power

1. Distinguishing and Labeling Differences

(person living with HIV, person who injects drugs, gay man, sex worker)

2. Associating Negative Attributes

(irresponsible, immoral, promiscuous, untrustworthy)

3. Separating “Us” from “Them”

(physical and social isolation)

4. Status Loss and Discrimination

(denial of health care, verbal & physical abuse, loss of respect)



The Soup of Stigma Terminology

Types of Stigma

Experienced	Stigma that is enacted through interpersonal acts of discrimination
Perceived	Perception of the prevalence of stigmatizing attitudes in the community or among other groups (e.g., healthcare providers)
Anticipated	Fear of stigma, whether or not it is actually experienced
Internalized (Self)	Acceptance of experienced or perceived stigma as valid, justified

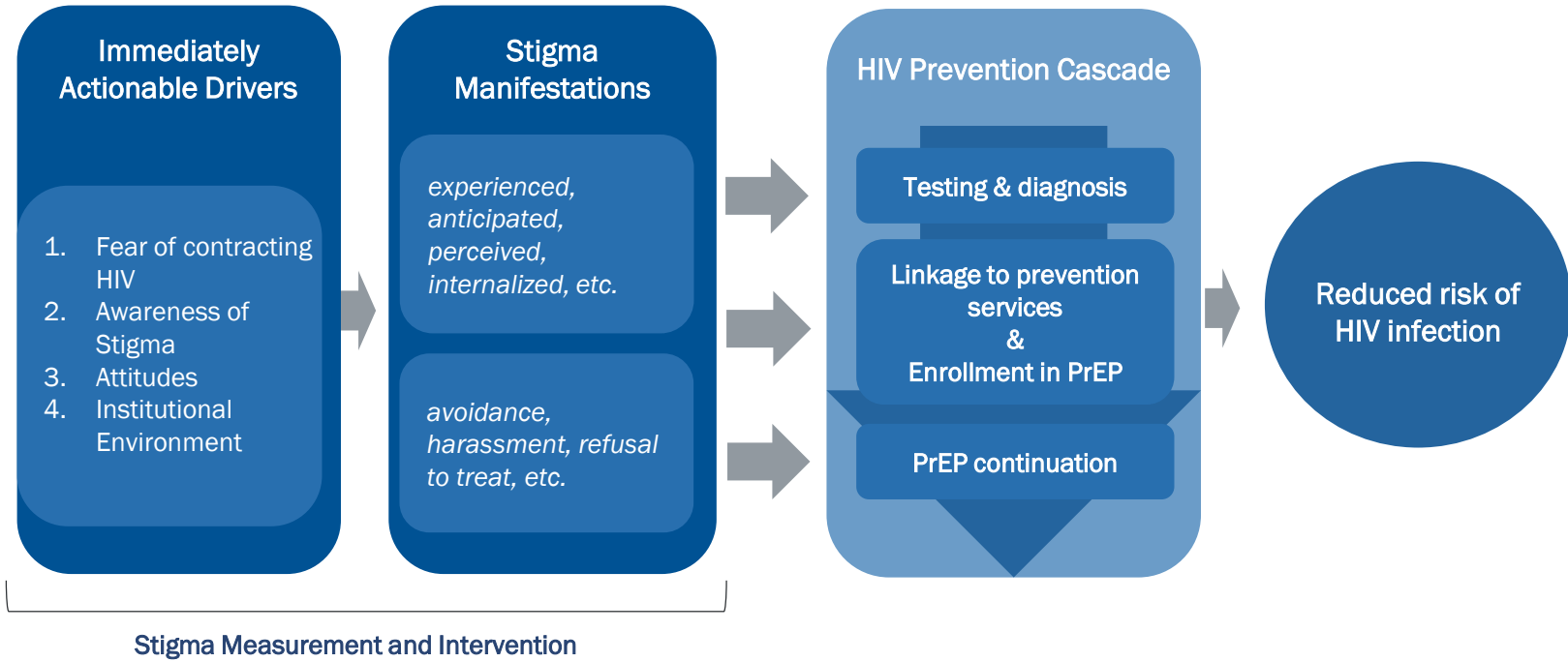
Types of Stigma (Continued)

Secondary	Stigma by association, extended to family or other caregivers of the stigmatized individual
Observed (Vicarious)	Stigma happening to others that is witnessed or heard about
Structural	Laws, policies, and institutional architecture that may be stigmatizing (or, alternatively, protective against stigma)
Intersectional	Convergence of multiple stigmatized identities within a person or group/intersecting of stigmas faced by individuals who are part of multiple marginalized groups

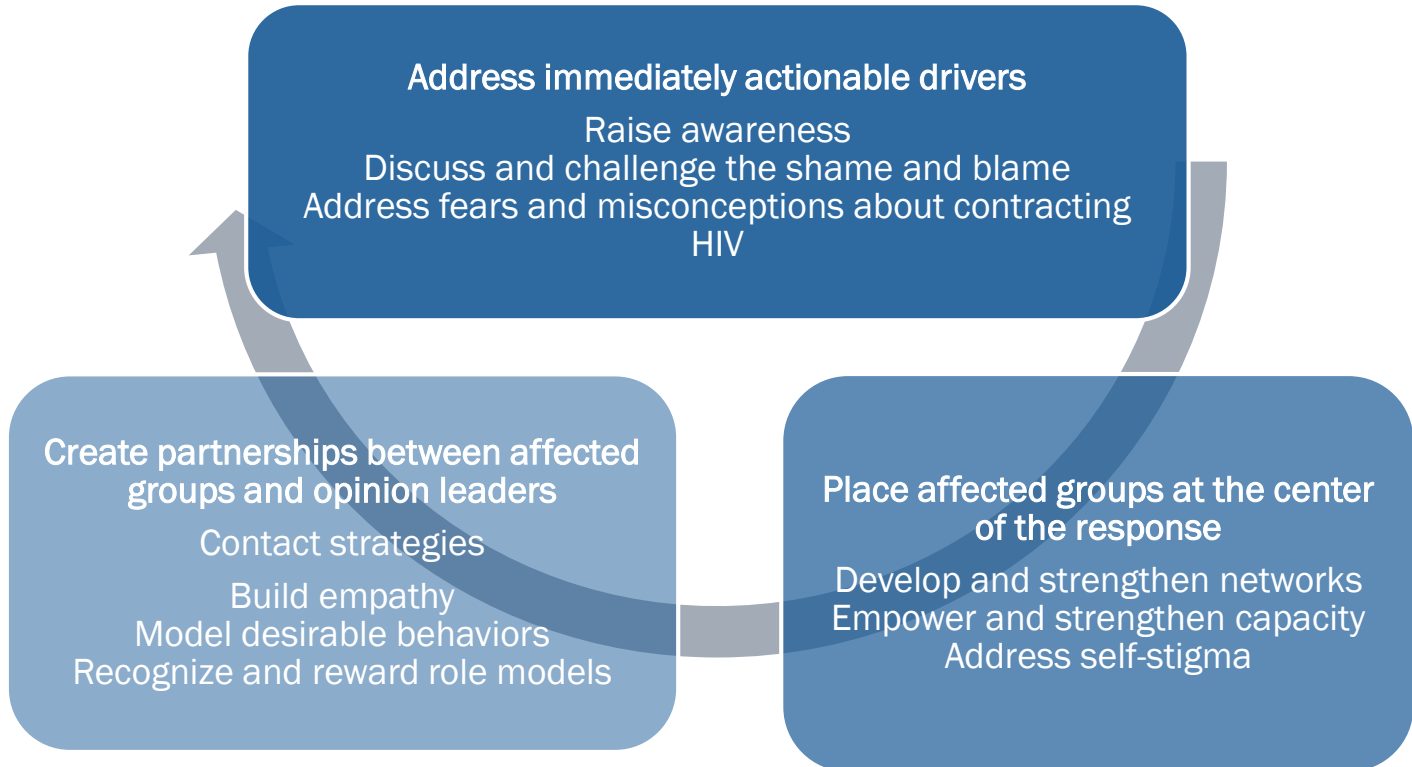
Measurement and Interventions

What We Have Learned: Key Principles for Stigma-Reduction Programming

Why and Where We Intervene to Reduce Stigma and Discrimination



Key Principles for HIV Stigma-Reduction Interventions



A Myriad of Intervention Tools



Training Package for Health Facilities: Health Policy Project

<http://www.healthpolicyproject.com/index.cfm?ID=StigmaPackage>

- Based on field application in 9 countries
- Can be tailored for different audiences and timeframes
- Includes 17 sample workshops and 1 refresher
- Has been adapted and used in many places



Intervention Examples

Bringing measurement and Key Principles Together to Reduce Stigma in Health Facilities

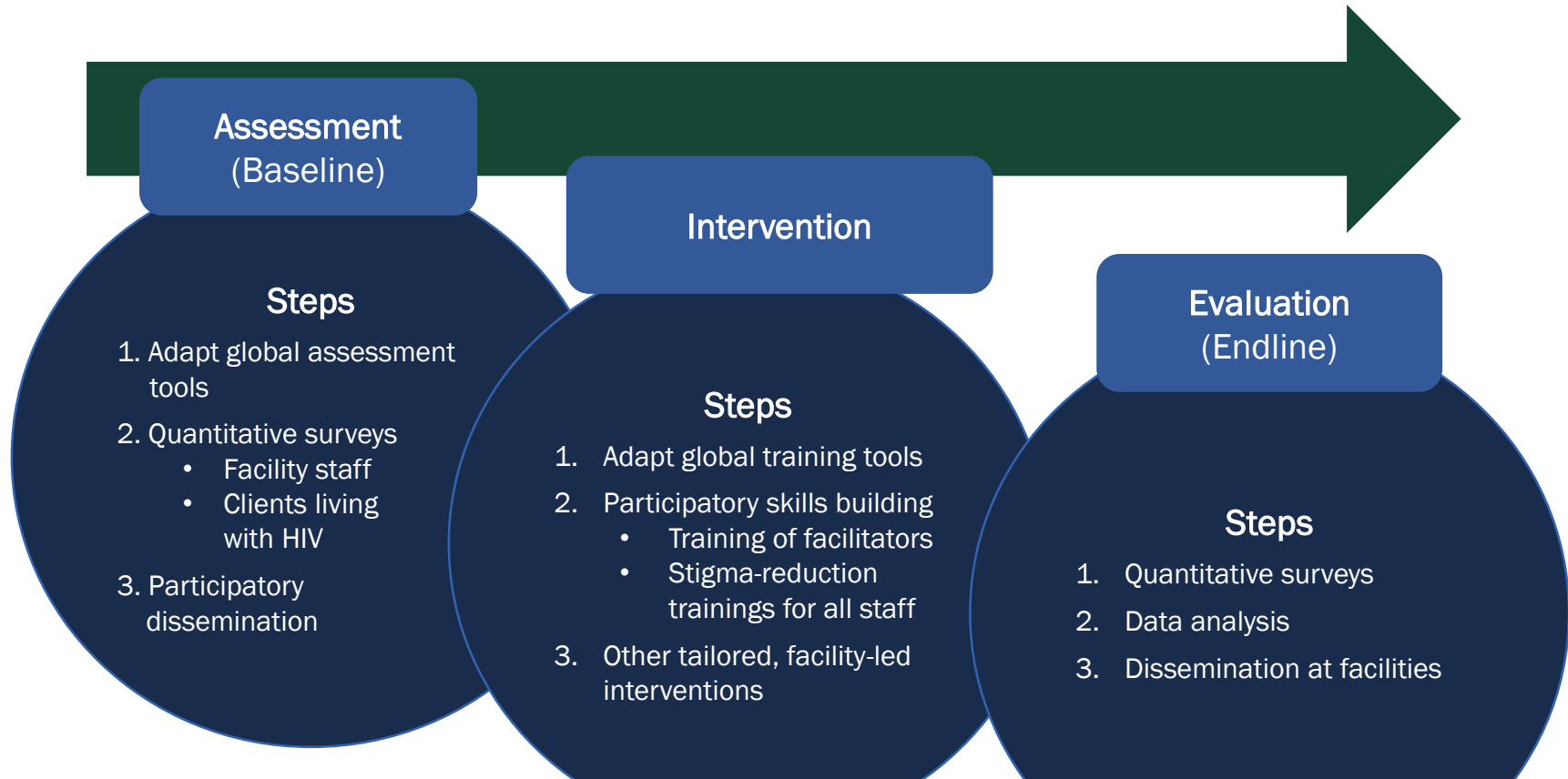


Combating HIV-Related Stigma and Discrimination in Health Facilities

Results from Ghana and Tanzania



The HP+ Total Facility Approach to Stigma Reduction: Three Phases



Participatory Skill Building

- Training of facilitators: Facility staff and clients living with HIV, including youth (Tanzania)
 - Competitive selection of facilitators (Tanzania)
 - Five-day offsite training and five days of mentoring/coaching (led by master trainers)
- Two days onsite, participatory skills building for facility staff (clinical and non-clinical)
 - Mix of levels and departments minimizes disruption of service delivery
 - Timing is flexible, depending on facility schedule
 - Holding the sessions one week apart deepened learning (Tanzania)

Participatory, Facility-Based, Two-Day Staff Training

Topic	Corresponding Exercise
Create awareness of what HIV-related stigma is in concrete terms	Identify stigma and discrimination through pictures; analyze stigma in health facilities
Understand and address fear of contracting HIV in the workplace	Partner work and quality, quantity, route of transmission tool work on non-sexual transmission; role play to review standard precautions
Gender and sexual diversity, stigma and discrimination toward key populations (Ghana)	Sexual diversity education and terminology; learn about and connect stigma to human rights
Understand and address stigma faced by youth seeking HIV and other sexual and reproductive health services (Tanzania)	Use individual reflection, small group work, and plenary discussion to explore stigma experienced by youth, provider comfort/discomfort serving youth, ways to improve service delivery for youth clients
Building empathy and reducing distance (contact strategies)	Listen to first-hand experiences from members of key populations (Ghana), youth (Tanzania), and people living with HIV; discuss experiences in health facilities; self-reflection
Working to create change	Develop realistic strategies and a code of practice and action plan

Final curriculum: 14 participatory exercises (Ghana), 16 exercises (Tanzania)

More Tailored Interventions Designed and Implemented by Facility Staff

- **Local Solutions**
 - Champion teams
 - Public declarations to stigma-free care
 - Banners, posters, **community TV and radio spots**, loudspeaker announcements
 - Codes of conduct
 - Complaint and compliment system
- **Sustainable**
 - Integrated in existing structures and processes
- **Small seed grants** provided for stigma-reduction activities



NIULIZE MIMI ("ASK ME")

Key Elements of the Total Facility Approach

- Evidence-based, building on two decades of work
 - Immediately actionable drivers
 - Adaptation of validated measurement and participatory training tools
- Recognition that all facility staff have a role to play
- Engagement of facility management
- Data-driven
 - Baseline informs intervention and catalyzes action
 - Endline evaluation
- Strengthens stigma-reduction capacity in facilities
 - Participatory approaches to learning and behavior change
 - Participatory stigma-reduction trainings led by staff and clients
 - Facility champion teams

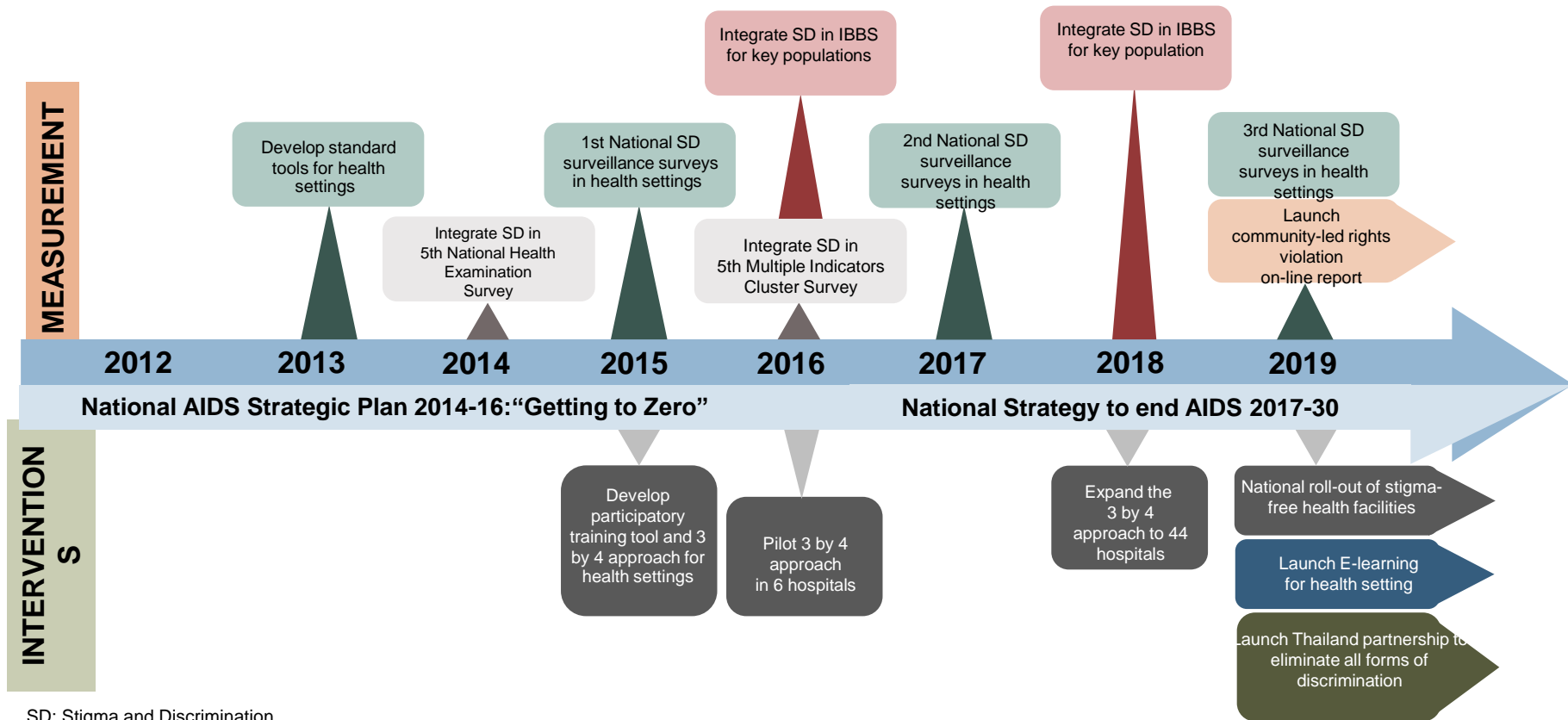


Thailand: An Example of National Scale-up

“3 By 4” and National Framework for Measuring HIV Stigma and Discrimination

With grateful acknowledgment of the Bureau of AIDS, TB, and STIs,
Department of Disease Control, Ministry of Public Health, Thailand

Timeline of implementation of HIV related stigma measurement and interventions in Thailand



SD: Stigma and Discrimination

IBBS: Integrated Biological and Behavioral Survey

Thailand's 3 by 4 Approach for Stigma-free Health Facilities

4 ACTIONABLE DRIVERS

1. Awareness
2. Fear of infection
3. Opinion, attitudes, judgement, stereotyping, blame
4. Environment in health facility

3 LEVELS OF INTERVENTIONS

1. Individual
2. System and Structure
3. Linkages (beyond health facilities)

Hospital Administration Committee

Working Group/Champion Team

Assess • Advocate • Implement & Monitor

Individual learning activities

- Participatory training
- Small group learning tailored to facility
- E-learning on SD
- Other educational activities

System improvement activities

- Baseline, post-intervention survey
- Policy & service guidance setup
- Develop action plan
- Change service flow, practices
- Integrate with hospital system on quality improvement

Linkage activities

- Consultation
 - Referral
 - Meetings
 - Engagement
 - Listening to voices of clients
- Provincial rights protections networks and mechanisms
- PLHA network
• Key population communities

Thailand's National Framework for Measuring HIV Stigma and Discrimination

POPULATION (FREQUENCY)	OBJECTIVES	METHOD OF MEASUREMENT
General Population (every 5 years)	Attitudes towards PLHIV	Integrated in the existing household survey
Key Populations (every 2 years)	Experience of S&D	Integrated in the IBBS
Health Facility Staff (every 2 years)	Assess key drivers and enacted stigma	Survey in sentinel sites (6–8 provinces)
PLHIV (every 2 years)	Experience of S&D in a healthcare setting	Survey in sentinel sites (6–8 provinces)
Event Based Monitoring System (ongoing)	Monitor events relating to violence, abuse, and rights violation towards KAP, people living with or affected with HIV	To be determined

Conclusion

Action is Possible

- **Measure: standardized and validated tools exist**
 - Make S&D reduction a key goal in national strategies
 - Integrate S&D indicators into national HIV M&E frameworks
 - Expand and standardize measurement of S&D
- **Make S&D-reduction part of all HIV programs: intervention and programmatic tools are available**
- **Make stigma reduction an explicit component of delivering high-quality health services by:**
 - **Integrating S&D-reduction into quality-improvement processes**
 - Incorporation into medical training—pre and in-service (for all staff)
 - Licensing and accreditation for individuals & facilities
 - Performance assessment & supervision
 - Reporting and redress mechanisms
- **Leverage synergies for stigma reduction**
 - Combine stigma reduction across stigmatized conditions and groups



Action to reduce facility stigma is possible!

**Global measurement and intervention tools are easily adaptable
across diverse contexts**

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WHAT'S NEXT WITH THE LEARNING NETWORK

Kenya's Experience with PrEP for All

Elizabeth Irungu, MBChB, MPH

Partners Scale Up Project

PrEP Learning Network Webinar

July 23, 2020



BILL & MELINDA
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UNIVERSITY OF WASHINGTON
INTERNATIONAL CLINICAL RESEARCH CENTER



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SCALE UP PROJECT

PrEP works

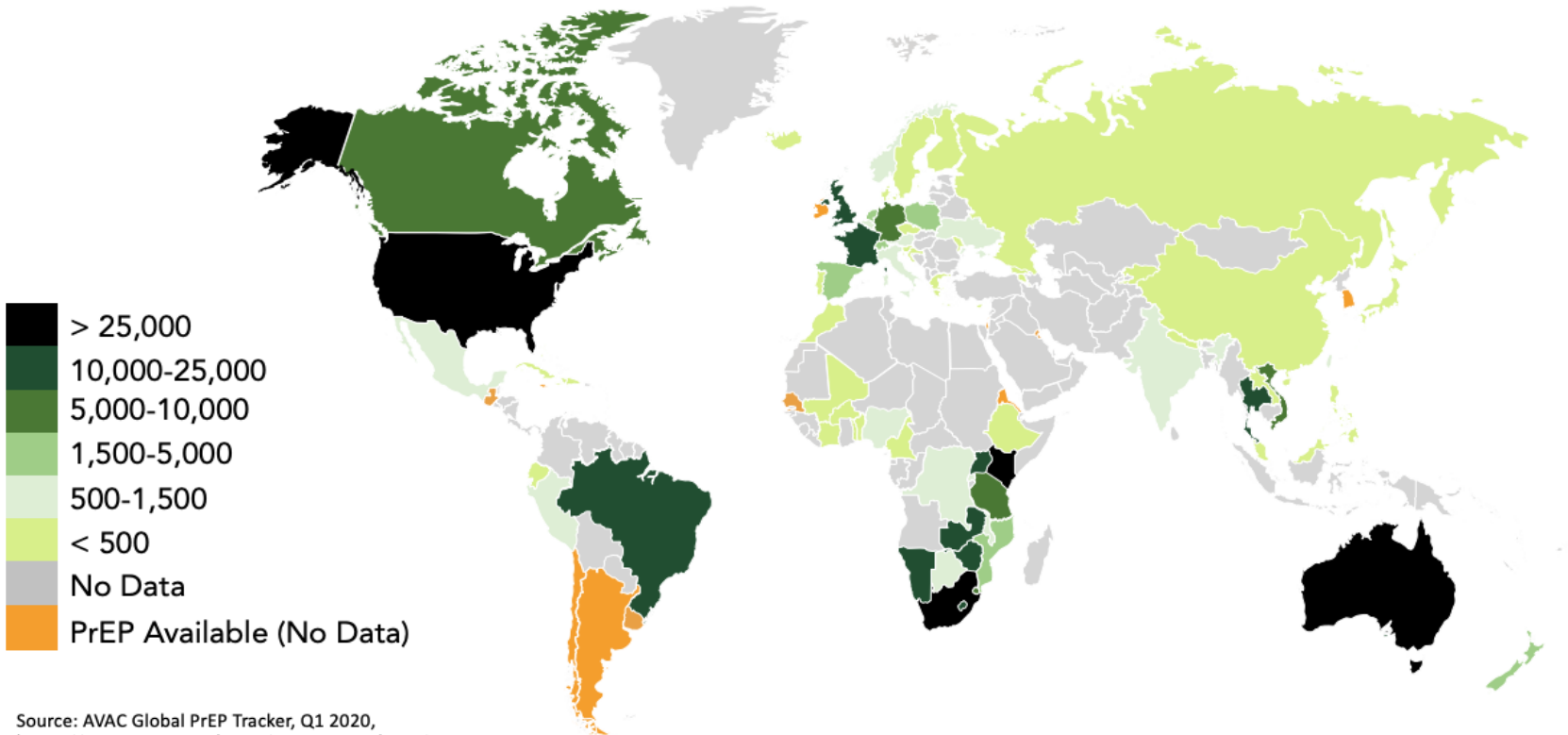


- PrEP reduces risk of acquiring HIV infection by over 90% when adhered to
- PrEP works among people
 - Of all ages
 - Of all gender types
 - At risk of acquiring HIV by different modes
 - Vaginal, Penile, Rectal, Injecting drugs

PrEP is empowering

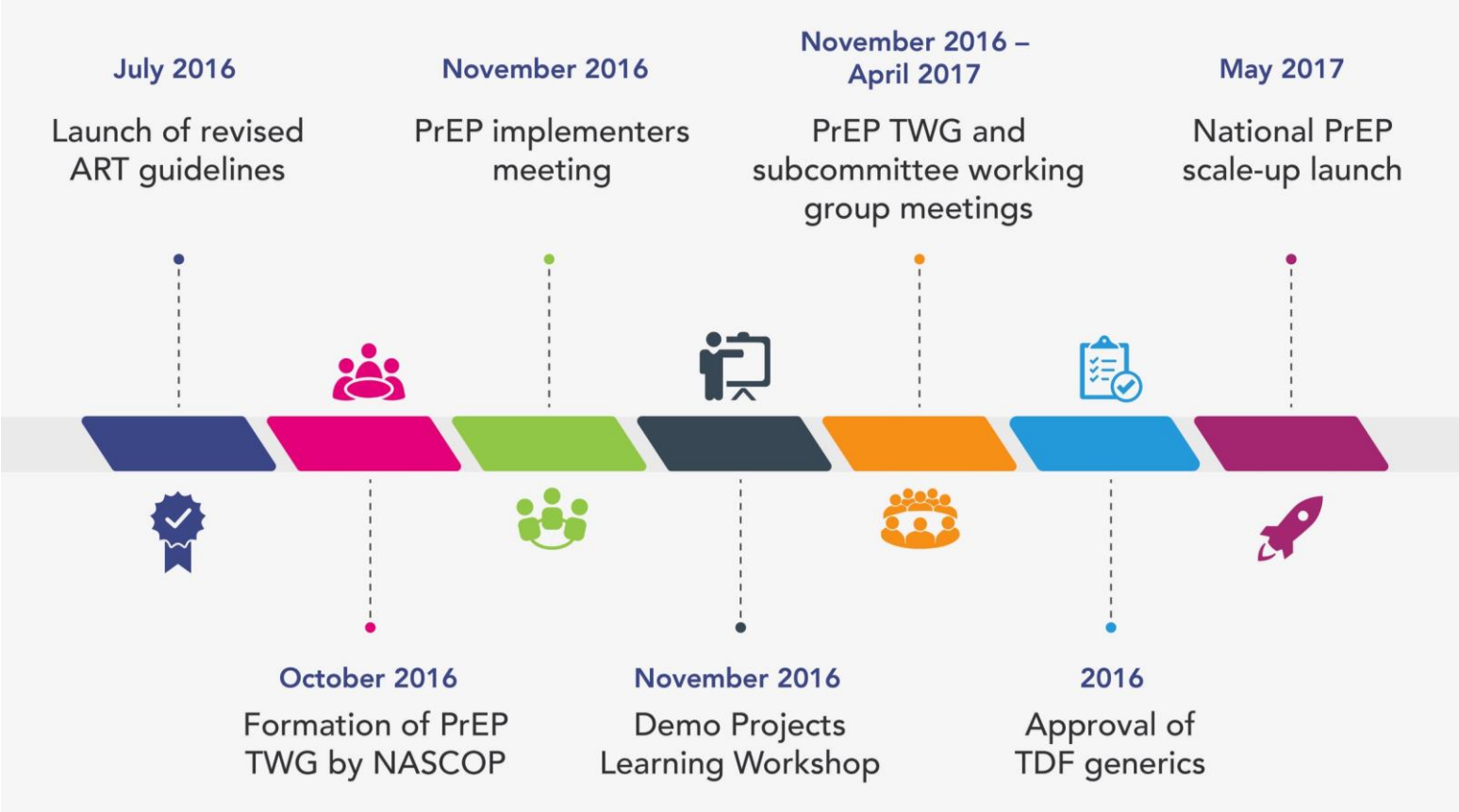


Countries with PrEP programs, April 2020



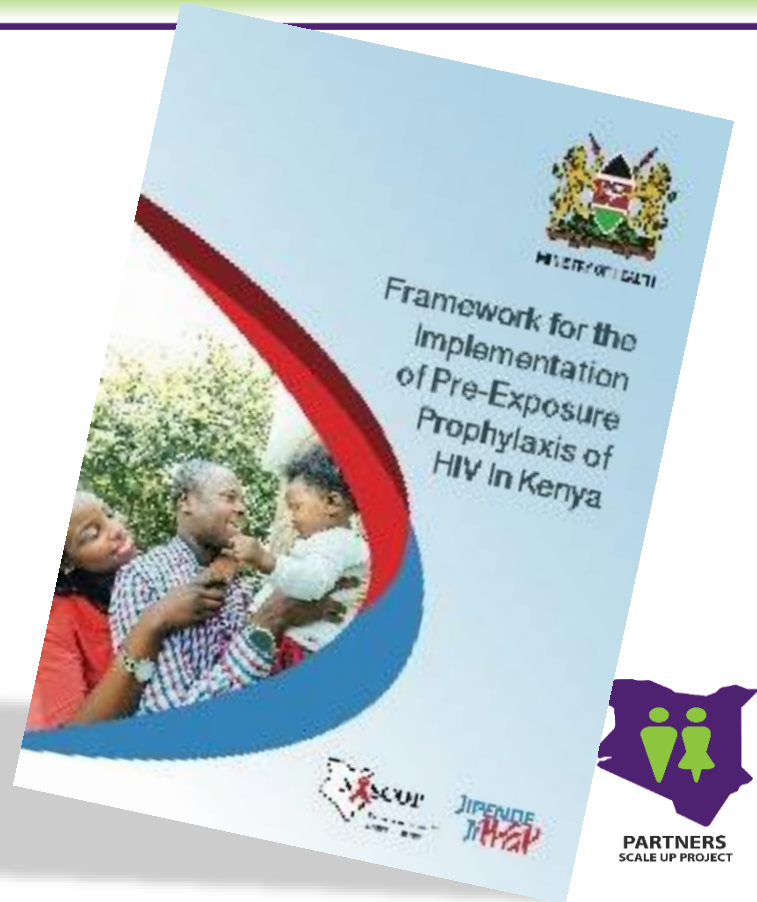
Source: AVAC Global PrEP Tracker, Q1 2020,
<https://www.prepwatch.org/country-updates/>

PrEP Journey in Kenya – led by NASCOP



Kenyan Program

- Overseen by the national TWG with various sub-committees
 - Including service delivery and communication sub-committees
- PrEP recommended for all HIV negative individuals at substantial HIV risk
- No specific population was called out
 - To reduce stigma associated with delivery to specific populations
 - Anyone could seek services from any service delivery point where it is available



JiPende JiPrEP! - the campaign identity



The poster features the Ministry of Health logo at the top center. On the left, the text 'JIPENDE JiPrEP' is written in blue and red. In the center, a red ribbon is intertwined with a white heart. To the right, the slogan 'Love. Prevent. Live.' is written in large blue letters, with 'Protect yourself from HIV' in red below it. At the bottom, there is a list of prevention options and a call to action.

Ministry of Health

**JIPENDE
JiPrEP**

**Love.
Prevent.
Live.**

**Protect
yourself from
HIV**

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**

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

If you feel you're at an ongoing risk of acquiring HIV and would like to know more about PrEP, please visit your health care provider.

- Nation wide campaign targeted at general population
- To be aware of PrEP
 - To self-assess for risk
 - To seek services



Demand creation – media engagement

Inquirer.net
Kenya combats HIV/AIDS with new pill and self-testing kit

STAR
Anti-HIV pill saved my marriage: New drug cuts infection risk by 96%

Daily Nation
State to roll out free HIV testing kits in July

Daily Nation
State launches HIV drug and testing kits

NTV
Kenya launches HIV/AIDS drug, self-testing kit

Daily Nation
Mixed reactions to HIV self-testing kit

Daily Nation
Why PrEP tool is a game-changer in fight against spread of HIV

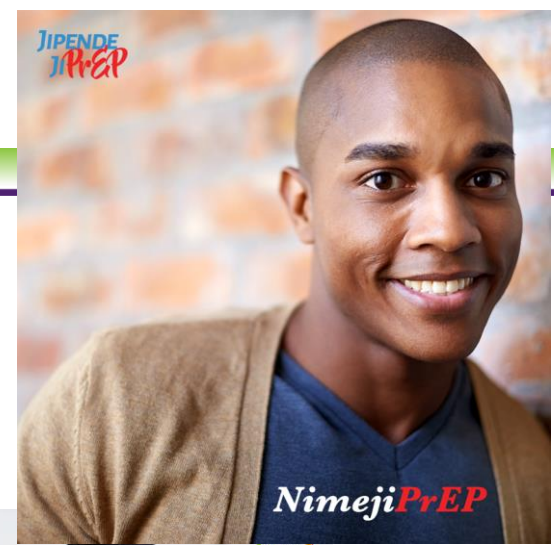
STAR
Gov't launches drugs to lower HIV contraction cases

Daily Nation
Individuals at substantial, on-going risk of contracting HIV and AIDS will now be able to access Pre-Exposure Prophylaxis (PrEP)

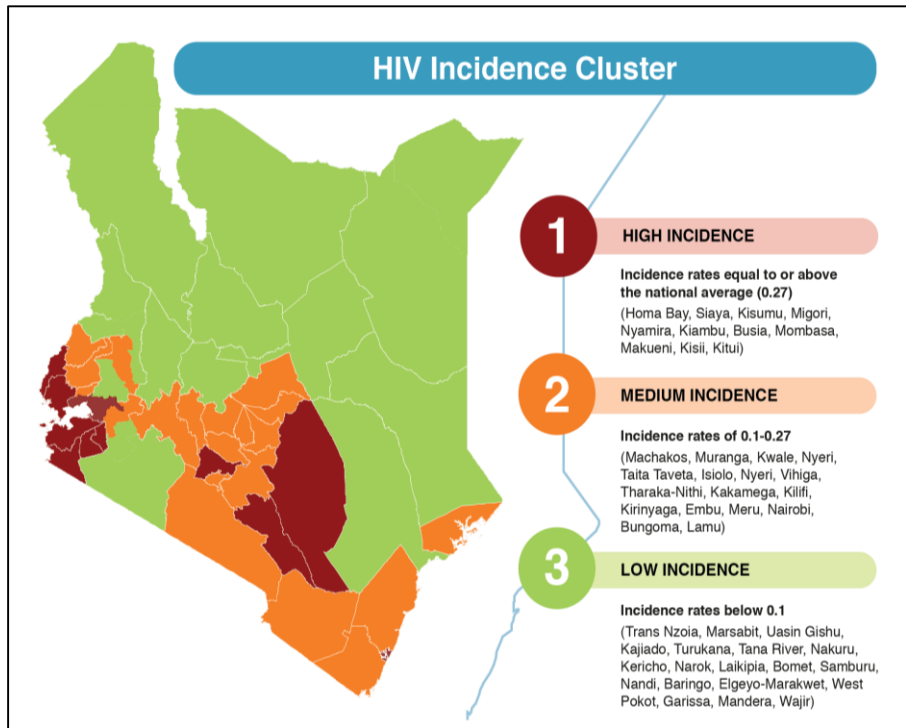


**PARTNERS
SCALE UP PROJECT**

Creating PrEP awareness



Kenya - Prioritization



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

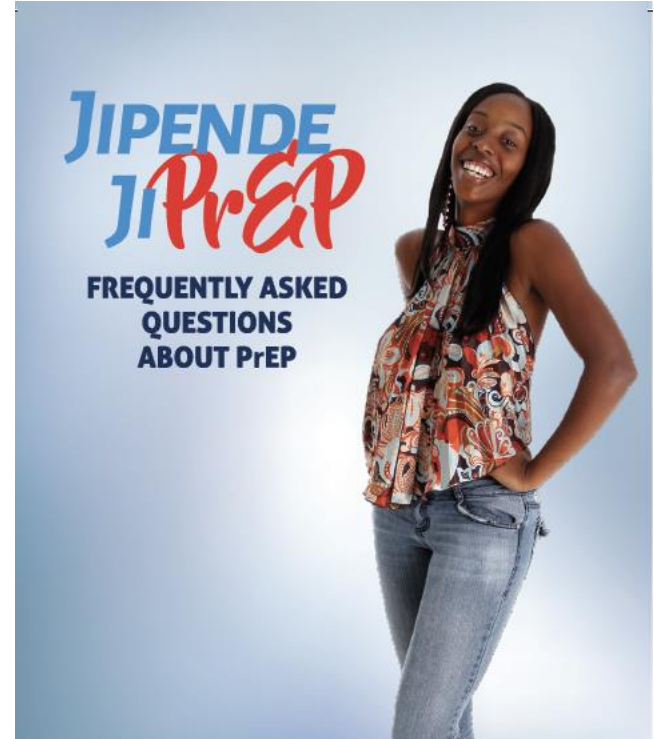
PrEP is an intervention for all persons at risk of acquiring HIV

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



For specific people at risk..


- Awareness tools targeting various audiences were developed and disseminated
- Including posters, FAQs, other visibility materials such as banners and t-shirts
- Mainly led by partners







Creating PrEP awareness

IS YOUR PARTNER'S HIV STATUS DIFFERENT FROM YOURS?

PrEP IS A NEW HIV PREVENTION METHOD

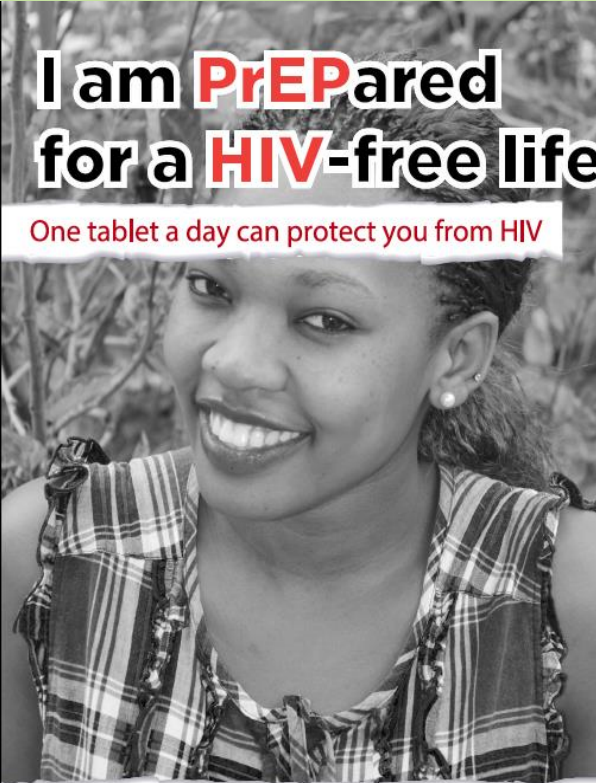


Ask the health care provider for more information or call 0727961803






NASCOP    

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/lvcp-project
Phone number: 0722203610, 0733 333268

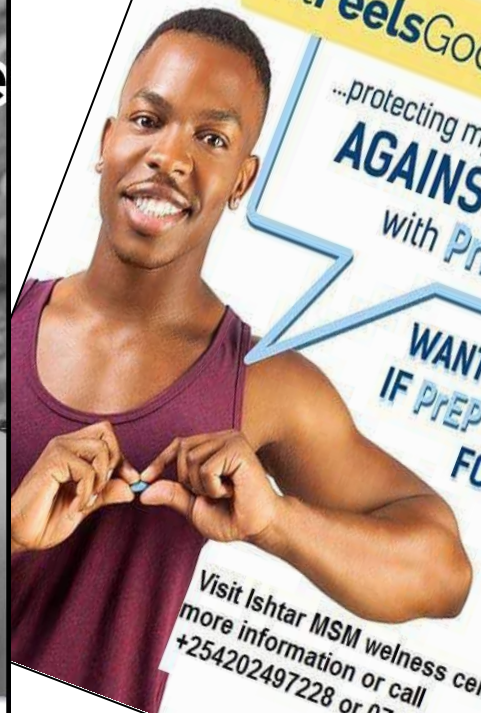
ACKNOWLEDGEMENTS: DONALD, DITLAL, DANIELLE, MARGARET, PENELOPE, PROFESSIONALS IN PROGRESS, SECURITY PERSONNEL EMPLOYMENT GROUP


#ItFeelsGood

...protecting myself **AGAINST HIV** with PrEP

WANT TO KNOW IF PrEP IS RIGHT FOR YOU?

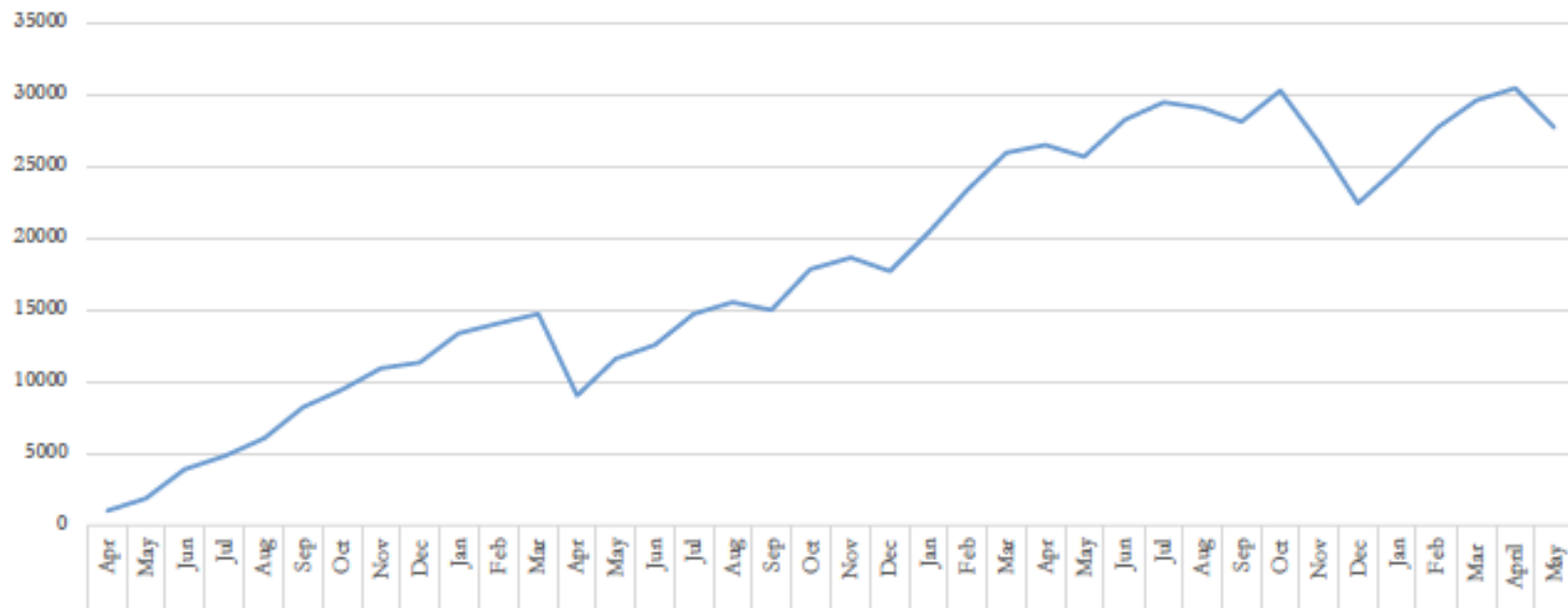
Visit Ishtar MSM wellness centre for more information or call +254202497228 or 0713797157



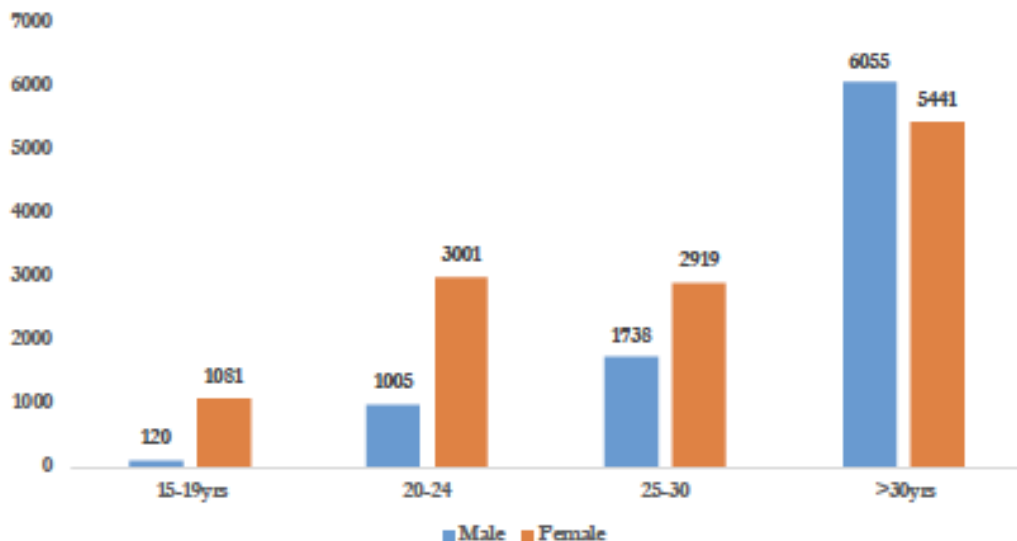
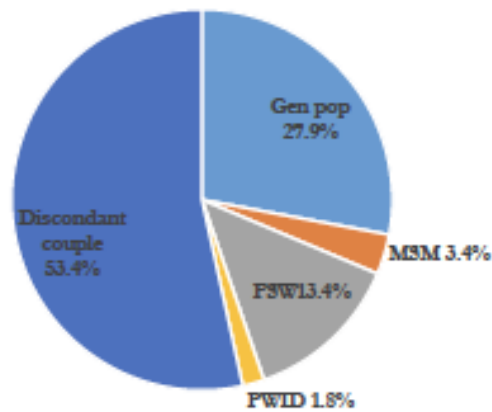
 **ISHTAR** MSM WELLNESS CENTRE
ISHTAR MSM WELLNESS CENTRE PROJECT

Commodity Consumption Trends

TDF/FTC Consumption 2017 -2020



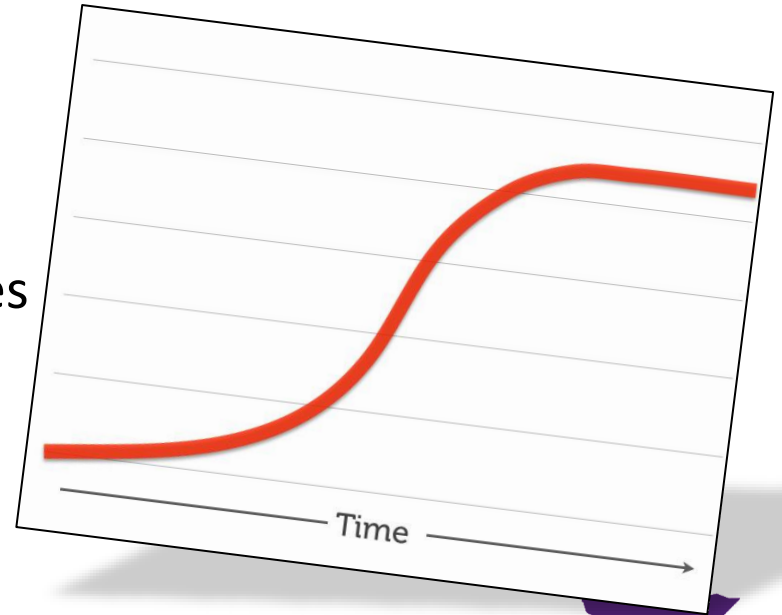
Clients on PrEP by age and population type; April 2020



- Discordant couples account for half of PrEP clients
- The age group greater than 30 years has the highest number of clients on PrEP
- Females constitute 58.2% of PrEP users

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
 - Training – use existing training structures
- 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
- Mary Mugambi – PrEP & HTS Program Manager, NASCOP
- Kenyan PrEP Technical Working Group

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WHAT'S NEXT WITH THE LEARNING NETWORK



A Special Video Presentation

WE ARE
THE GENERATION
THAT WILL END
HIV

Elmari Briedenhann

Wits RHI

PrEP4Youth Video series

***PrEP: I Choose Protection, I
Choose Control, I Choose My
Future. No Apologies.***





Q&A



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Upcoming Sessions: Register Today!



Visit <https://www.prepwatch.org/virtual-learning-network> for up-to-date information.



Visit PrEPWatch for additional resources

- Webinars are **recorded** and will be accessible on PrEPWatch within a week post-presentation date
- Additional, complementary **resources** will also be shared on PrEPWatch—including related research articles and tools
- Registration for **upcoming webinars** is also located on PrEPWatch



Virtual Learning Network

The PrEP Learning Network, hosted by OPTIONS, EpiC and RISE, provides national and sub-national ministries, implementing partners, community-based organizations (CBOs), and others working with PrEP around the world with the tools and resources, best practices, and opportunities to learn from others to help to advance PrEP scale-up.

Its 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.

The following pages include links to register for upcoming PrEP Learning Network webinars, watch previously recorded webinars and access complementary resources, research and tools on webinar topics.

Upcoming Webinars

• PrEP Delivery in the Context of COVID-19

Thursday, April 23, 9:00am EDT | 15:00 CAT | 16:00 EAT

In this webinar, an overview of PEPFAR's PrEP guidance in the context of COVID-19 will be provided, including key considerations for program implementation. PrEP implementers from several African countries will discuss how they have adapted PrEP service delivery to accommodate social distancing, lockdowns, and ensure the safety of health care workers, clients and the community. Experiences, innovations, and challenges will be shared. We encourage all who are currently implementing PrEP to attend and take the opportunity to ask questions and share experiences on best approaches during this challenging time.

[Register here.](#)

• PrEP Learning Network: Going Online for Service Delivery

Thursday, May 28, 2020, 9:00am EDT | 15:00 CAT | 16:00 EAT

[Register here.](#)

Previous Webinars

• Addressing Intimate Partner Violence in PrEP Services

Thursday, March 26

www.prepwatch.org/virtual-learning-network/

TWITTER: @PrEP_LN

Exit Poll





Thank You!



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