

demand generation tools showcase + workshop

**BOOST YOUR PROGRAM'S SUCCESS
WITH EVIDENCE-INFORMED
CREATIVE APPROACHES TO
COMMUNICATING ABOUT PrEP**



Demand generation & marketing on MOSAIC

We focus on high-impact activities that are needed to support introduction of **choice of HIV prevention products** across multiple settings.

This includes:

1. Refreshing and updating the **PrEP comms accelerator** to better meet the needs of implementers working to generate demand for PrEP among AGYW
2. Redesigning the AGYW-focused **HIV Prevention User Journey Tool**
3. Developing a **brand positioning strategy** for the PrEP category of products to guide marketing efforts
4. Creating and applying **brand guidelines** to new and existing communications campaigns for PrEP





Meet the PrEP Communications Companion

CREATING THE PrEP COMMUNICATIONS COMPANION

Revamping the PrEP Accelerator into a practical, user-friendly hub for campaign and communications planning, tailored to countries' current needs in driving PrEP demand.

THE TASK AT HAND

The functional need behind this website has evolved. Rather than creating campaigns that can be put together as fast as possible, PrEP programmers need to know how to develop robust, evidence-driven, user-centered and locally relevant campaigns and communication. With that in mind, we have embarked on a project to overhaul this digital resource.



THE GOAL

Ensuring that the site is populated with functional, robust campaign planning and implementation tools and guides, which will:

- **Streamline** content creation.
- **Enhance the effectiveness and reach** of communication materials.
- **Guide** selection of the best approach and channels for your audience.
- **Support** the creation of multi-channel communication materials.
- **Facilitate** knowledge sharing between implementers.
- **Showcase** new tools, approaches and inspiration.



THE APPROACH

2Stories, the demand-generation partner, was brought in to audit the old site. After conducting focus groups with potential users, they presented a recommendations report that outlined the best way forward in three areas: user experience, content, and design.

01 STAKEHOLDER INPUT

Focus groups were conducted, in which participants were asked to navigate the site and provide feedback on first impressions, usability and content.

02 SITE AUDIT

A comprehensive site audit was conducted in order to identify areas for improvement.

03 RECOMMENDATIONS

Based on solutions for the pain points identified in the focus groups as well as the result of the audit, a detailed recommendations report was prepared.

STAKEHOLDER INPUT



Take 5 minutes to peruse the site. Don't think too hard about it – just scroll around and take it all in.

FIRST IMPRESSIONS

- When you opened the site, what was your "first thought"?
- Do you enjoy looking at the site? Is it attractive? Appealing?
- Is the purpose of the site clear?

Notes from sticky notes:

- Overall, the site is very easy to navigate and the information is presented in a clear and concise manner.
- Some of the content might be a bit repetitive, but overall it's a good first impression.
- It could be nice to give a preview of what's in each section -- one liners.
- Overall, great job on the website! It's clear you've put a lot of thought into it and it's a pleasure to look at.
- Some of the content might be a bit repetitive, but overall it's a good first impression.
- It could be nice to give a preview of what's in each section -- one liners.
- Overall, great job on the website! It's clear you've put a lot of thought into it and it's a pleasure to look at.

Nice!

USABILITY

- What do you like most about the site? What do you like least?
- How easy was it to use the website?
- If you could change something about the site, what would it be?
- What is the most useful feature on the site?
- What is a feature you wish this website had?

Notes from sticky notes:

- The site is very easy to navigate and the information is presented in a clear and concise manner.
- Some of the content might be a bit repetitive, but overall it's a good first impression.
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- Overall, great job on the website! It's clear you've put a lot of thought into it and it's a pleasure to look at.

?

Group 1

January, February, March, April

My community is among those preparing to receive shipments of CAB PrEP, but I'm not sure that the young women who need it are familiar with the product. How do I communicate with them to raise awareness of and demand for CAB PrEP?

Group 2

May, June, July, August

It's annual budgeting time, and I know we want to earmark funds to spend on demand generation efforts this year. But I don't know where to start—how to I know what to prioritize?

Group 3

September, October, November, December

We have a lot of compelling creative content to share, but we don't seem to be getting it in front of the right folks. How can we ensure our content finds those who should see it?

CONTENT

- Were you able to find what you were looking for?
- Could you search to find what you were looking for?
- Was the content presented in the right format?
- What content would you like to see more of?
- If you couldn't find what you were looking for on our site, where would you try next?

Notes from sticky notes:

- The site is very easy to navigate and the information is presented in a clear and concise manner.
- Some of the content might be a bit repetitive, but overall it's a good first impression.
- It could be nice to give a preview of what's in each section -- one liners.
- Overall, great job on the website! It's clear you've put a lot of thought into it and it's a pleasure to look at.



KEY FINDINGS

SITE'S PURPOSE ISN'T CLEAR ENOUGH

"Requires some digging and exploring to find out what the purpose/benefit is."

HARD TO NAVIGATE

"It has to become more user-friendly, easier to navigate... we don't want to lose people... there is such valuable information on there and someone navigating away because they are not sure what to do next is heartbreaking."

VOLUME OF INFORMATION IS OVERWHELMING

"Language is very formal.
Copy is also very long
(I think it can be broken up and more blocks/actions added)."

USE DESIGN TO PROVIDE NAVIGATIONAL CUES

It would be great to have more interactive clickable buttons, so that the user is aware that the button is clickable.

WEBSITE NEEDS TO BE SEARCHABLE

"I wish there was a search function."
"It would be nice to have a preview of what's in each section."

DESIGN IS OUTDATED

"I'm struck by how the look and feel is a bit dated."
"It looks basic."

PRIORITY LIST

01

Ensure the website is set up correctly from a technical standpoint and according to **best practice**. Through **simplification of the navigation** and **re-structuring of the sitemap**, users will be able to find what they need.

02

Repackage existing content to transform the Accelerator into a **clear, interactive knowledge hub** that **supports** the creation of **effective demand-creation strategies**. Use content to **inspire implementers** and leave them feeling excited about the job they're about to do.

03

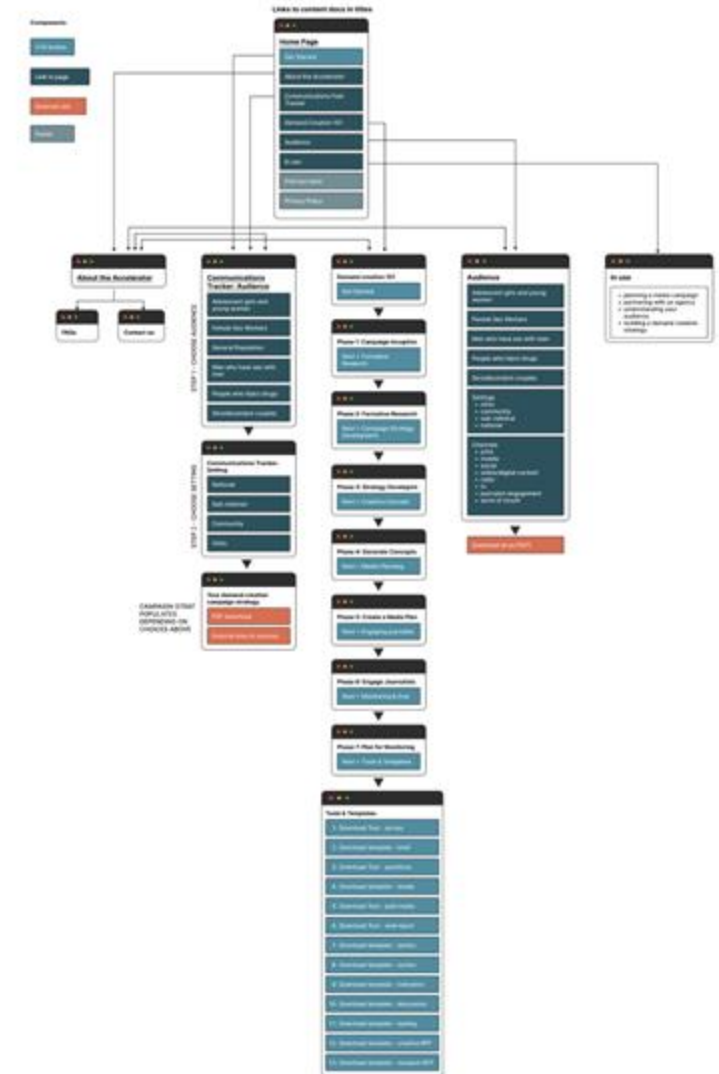
Use design to **simplify and modernize the user experience** by introducing a **cohesive look and feel**, getting rid of visual clutter and **providing visual cues** to help navigate the site.

04

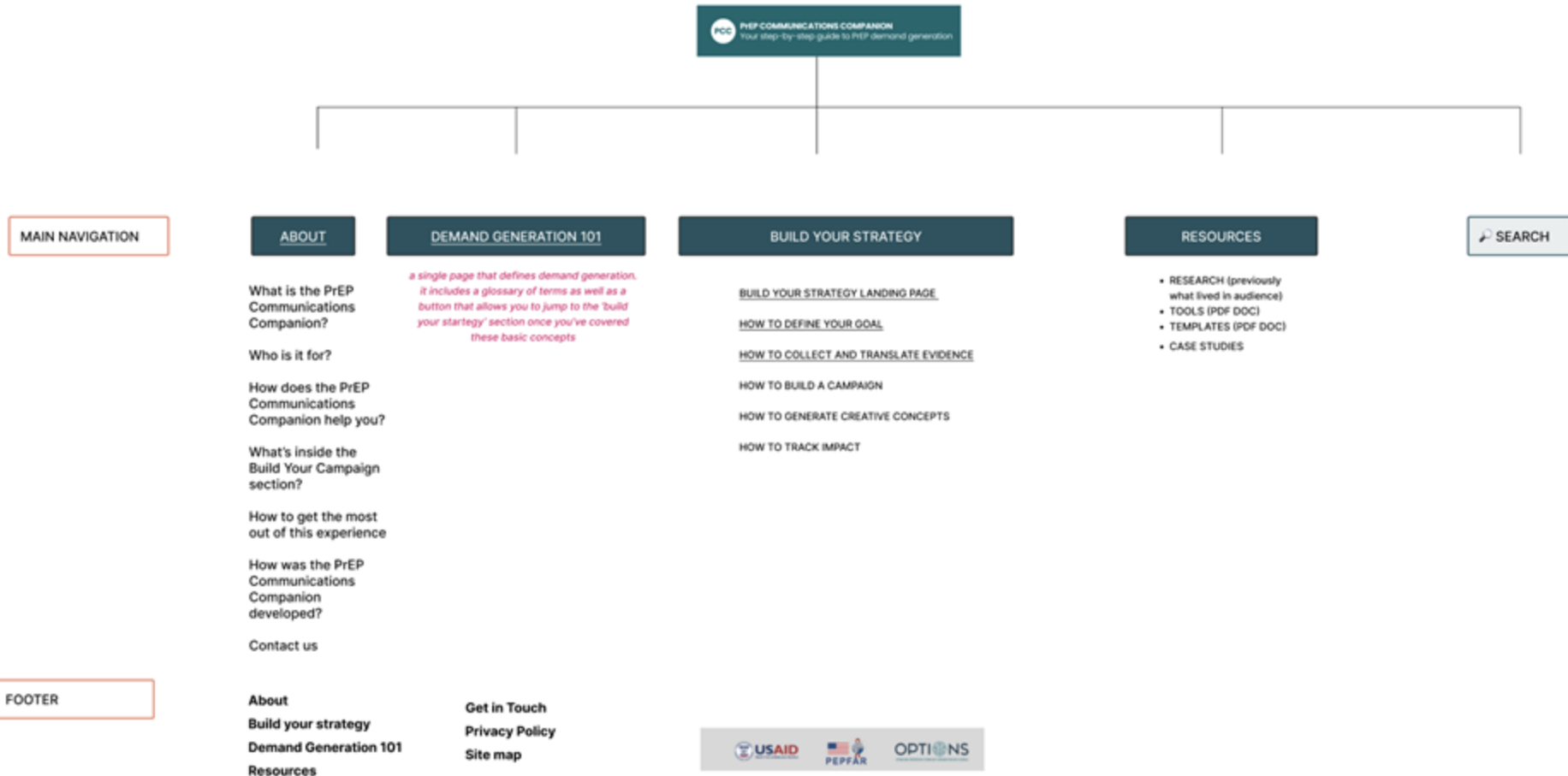
Transform the overall feel and functionality of the site from an “accelerator” to a “**companion**”, whose job it is to **guide and support you as you work through the different aspects of creating an effective demand-generation campaign**.

01 TECHNICAL APPROACH

- **Ensure the CMS is future-proof**, i.e. has the ability to move content blocks, adjust the layout and add new sections. This can be achieved with a visual page builder.
- **Address the navigation.** Recreate a new sitemap to include dropdowns for sub-categories.
- **Introduce search functionality.** This is a content-heavy site and an effective search mechanism could help the user find what they are looking for.
- Design and add a **footer** with key links.

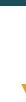


01 TECHNICAL APPROACH



02 CONTENT APPROACH

- **Change the website name** to be more reflective of what the site is and what it offers implementers.
- **Use content to guide the user journey** i.e. specific CTAs, adding taglines and descriptors.
- **Implement a style guide.** Edit content to: Simplify words, trim word bloat, ensure consistency across the site, use action-oriented language and introduce a more neutral tone that's applicable to a broader audience.
- **Surface new resources.** Add a carousel banner to the homepage that highlights the most recent resources and case studies.
- **Add some inspiration.** Ultimately, the Accelerator is a place for implementers to find inspiration and ideas. We want to the new website to show the work that could be created with an effective demand-generation plan.



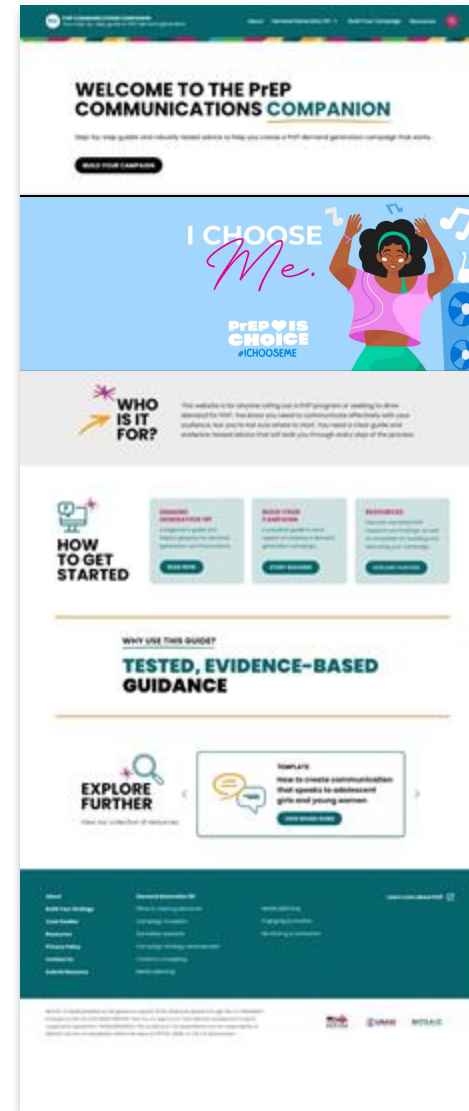
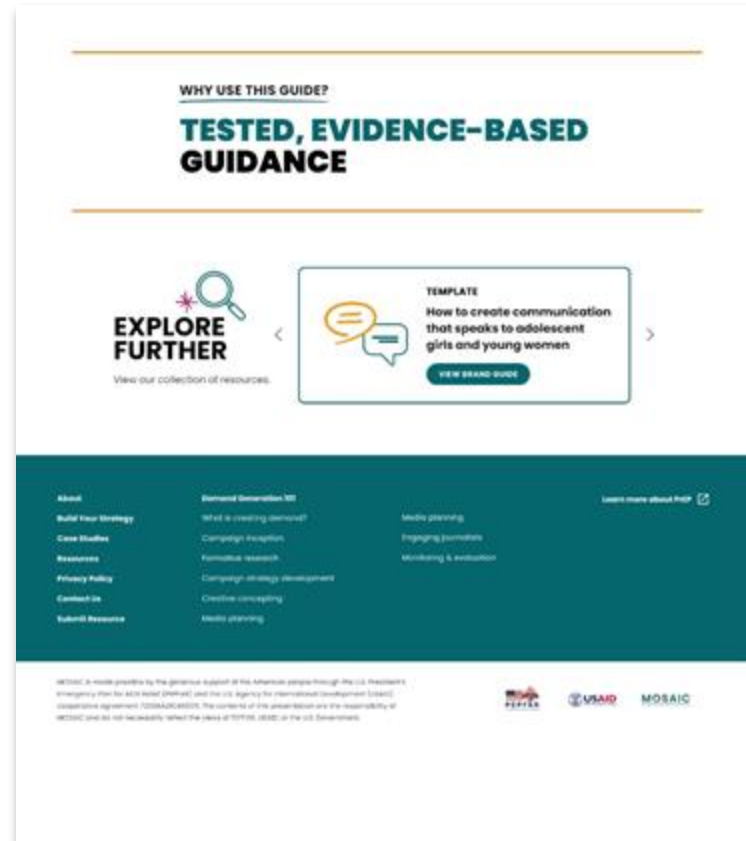
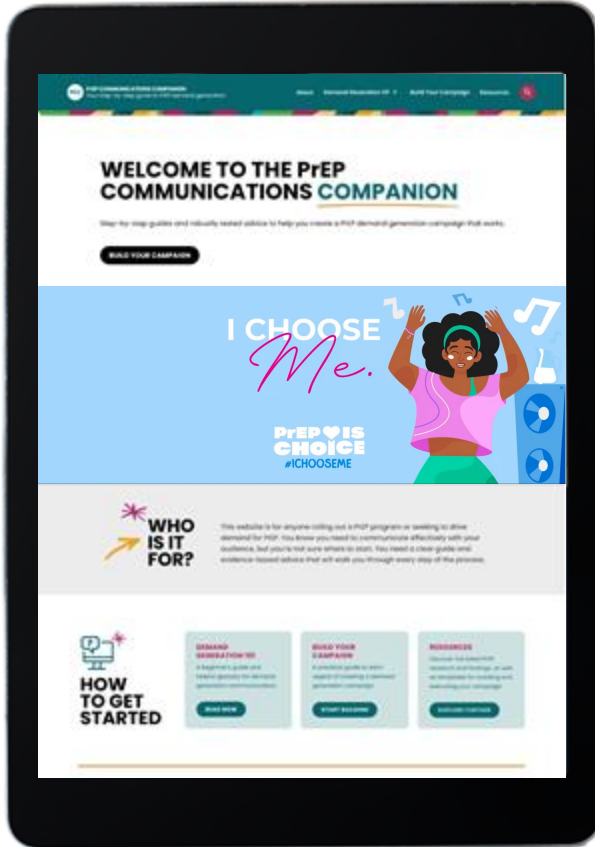
WELCOME TO THE PrEP COMMUNICATIONS COMPANION

Step-by-step guides and robustly tested advice to help you create a PrEP demand generation campaign that works.

BUILD YOUR CAMPAIGN



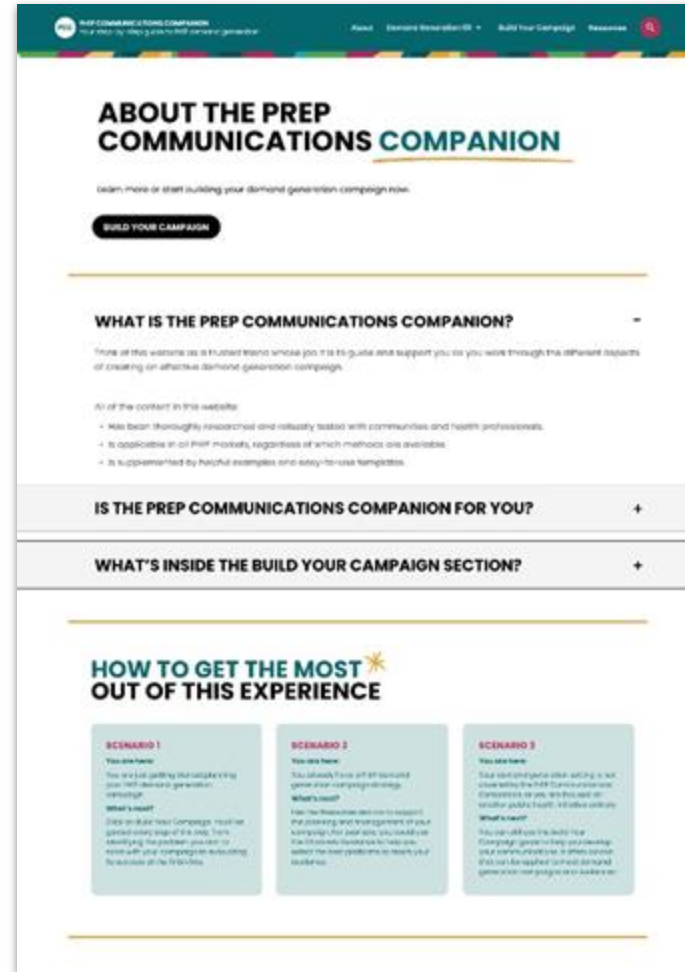
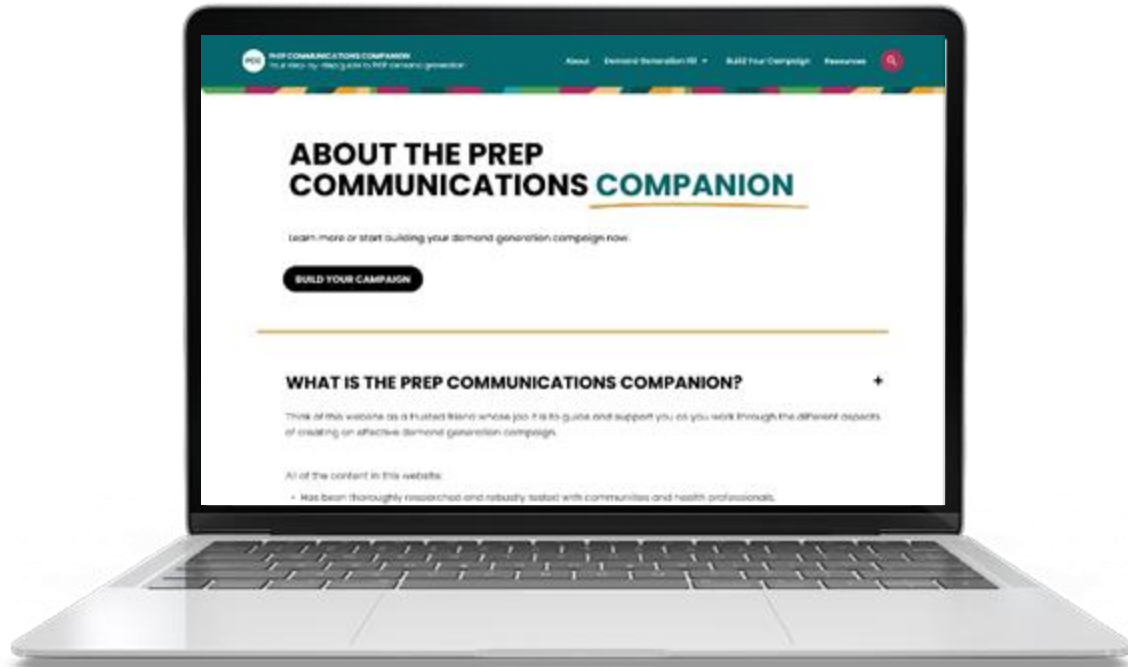
03 DESIGN APPROACH



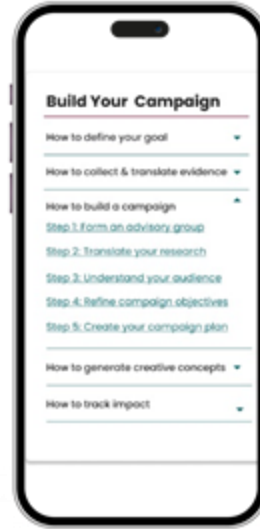
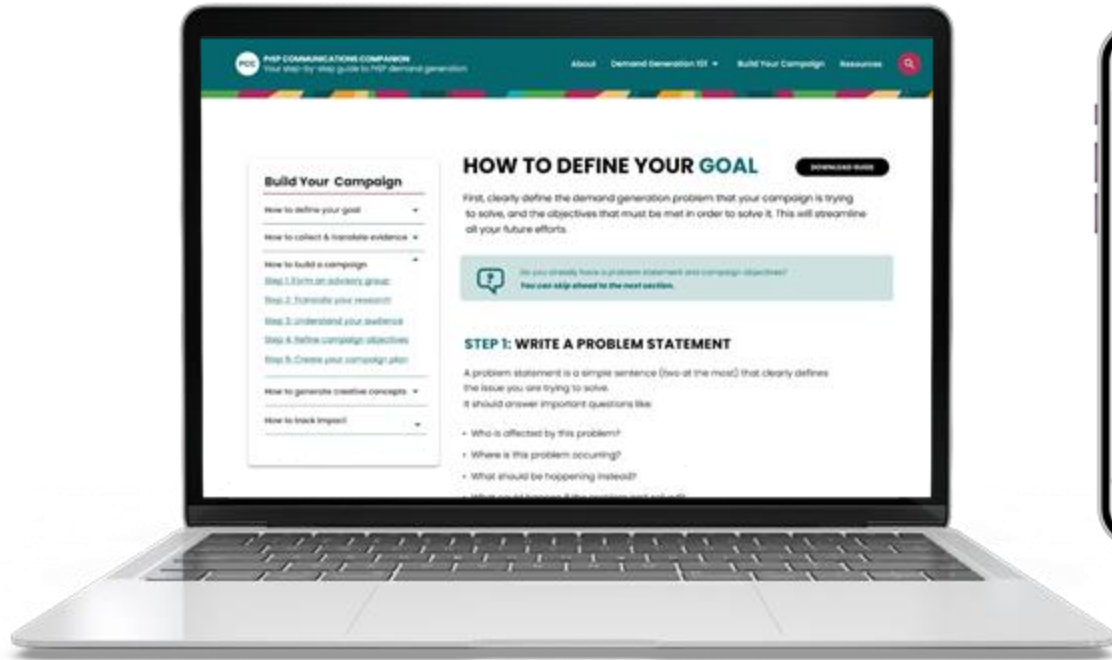
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03 DESIGN APPROACH

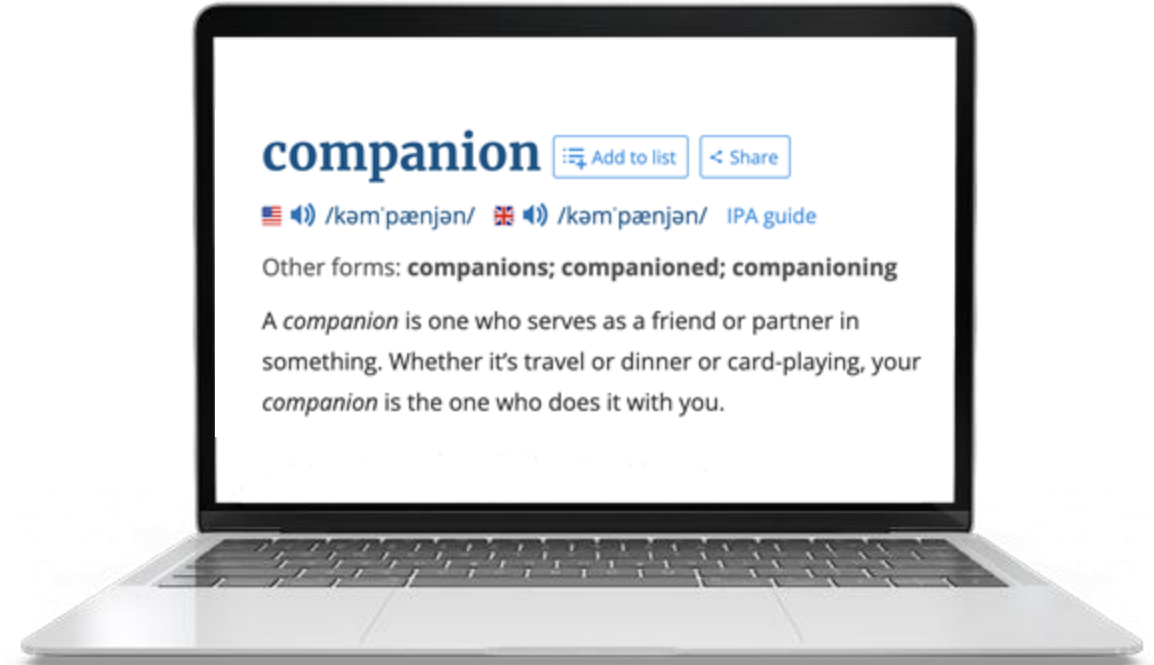


03 DESIGN APPROACH



04 FROM ACCELERATOR TO COMPANION

- The original tool was designed to serve the need to rapidly develop communication as PrEP was being introduced into markets for the first time. **That need has since evolved.**
- Today, the focus is on **helping PrEP programmers develop robust, evidence-driven campaigns that really work, ensuring any resources invested pay off in trackable behavior change.**
- Through providing step-by-step guidance, templates, examples and downloadable resources, **our vision is for the website to serve as a partner in the demand generation process**, helping to make what can be quite a daunting task feel more manageable.



THANK YOU





HIV Prevention User Journey Tool

PLACEHOLDER FOR JOURNEY TOOL CONTENT



PrEP category positioning strategy

What is branding?

A brand is not what you say about yourself—it's what others say about you.

A brand ideally **lives in the consumer's heart and soul.**

Brands can help demand generation programs **better connect with intended audiences.**





Why is branding important for PrEP?

- We need demand for PrEP.
- Strategic, evidence-informed branding keeps the **audience at the center.**
- We need to **do something differently** to reach young people.
- We need to be ready for **PrEP choice.**

Branding starts with **positioning**.



What do we want young women's **hearts to feel**,
and **minds to think**, about PrEP?

Positioning requires focus and a commitment to a specific target audience.

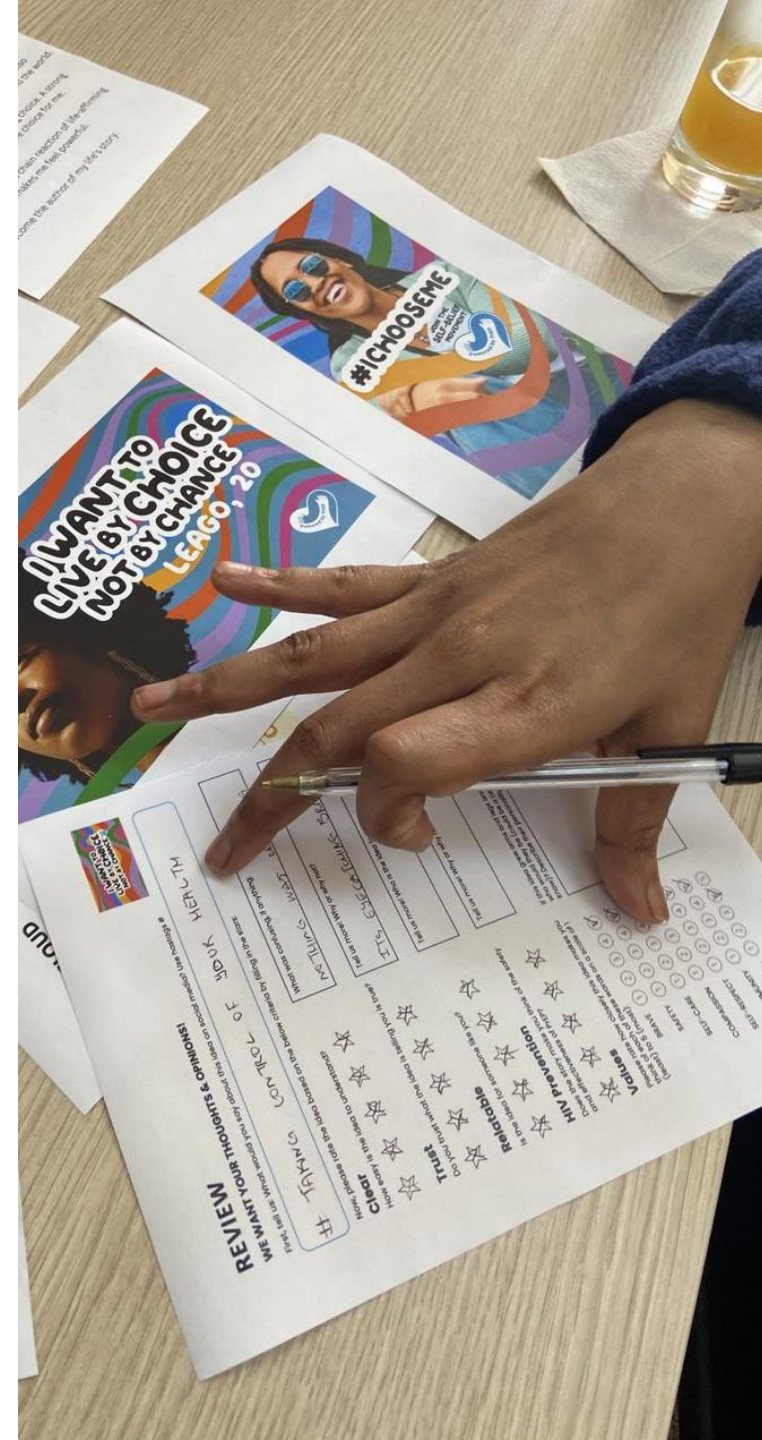
The value of PrEP is different for different audiences.

Our understanding of adolescent girls and young women is grounded in insights from previous research and pushed further by our **youth advisors**.



Our approach to building brand positioning:

- Prioritized **young women's voices and perspectives** every step of the way.
- Applied a **gender transformative lens**.
- Obtained critical feedback from **Ministry of Health** representatives.
- Had **HIV prevention and choice** in mind, not just a single product.



PHASE 1
LEARN

PHASE 2
BUILD

PHASE 3
ITERATE

PHASE 4
VALIDATE



Strong women understand the need for kindness, compassion, and taking care of ourselves first so that we can stand strong for our families, in our communities, and in the world.

PrEP is an affirmation that soft is strong.

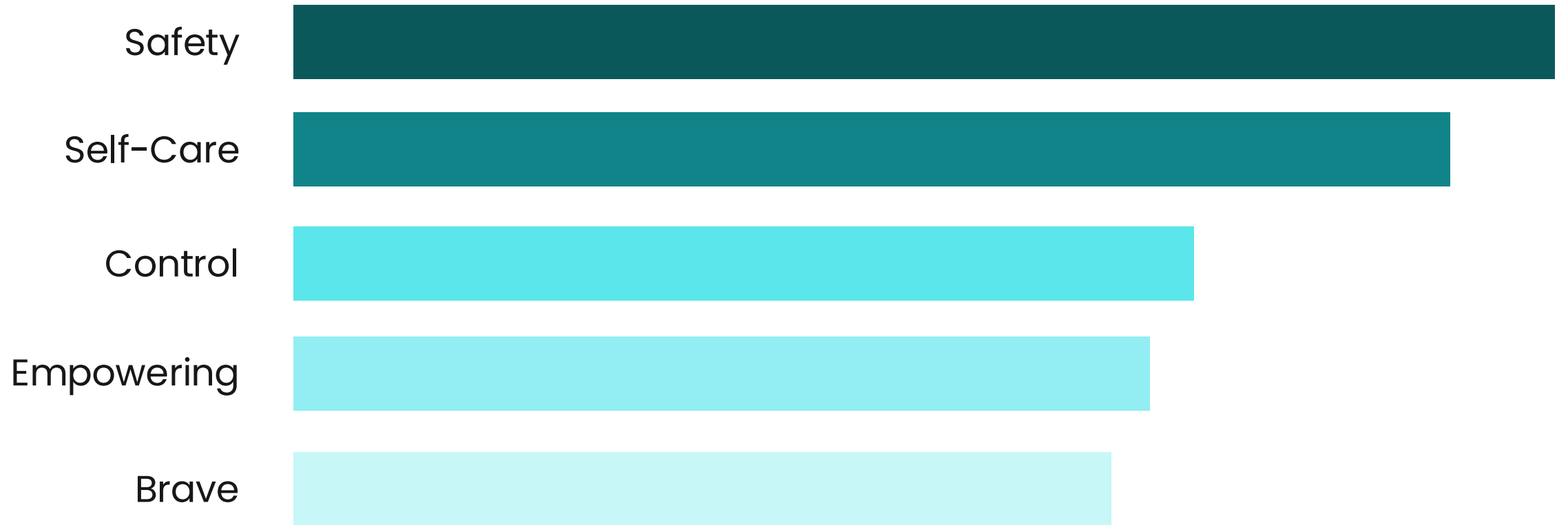
PrEP is an affirmation of this strength – being strong requires being soft to yourself.

We developed three distinct creative interpretations of the positioning for testing.

We took our ideas to discussion groups with **121 young women from Kenya, Zimbabwe, and South Africa.**

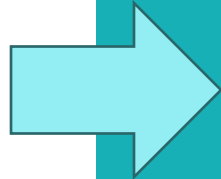


Participants validated the association of PrEP with **safety, self-care, and control.**



PrEP is an affirmation that being strong requires being soft to yourself.

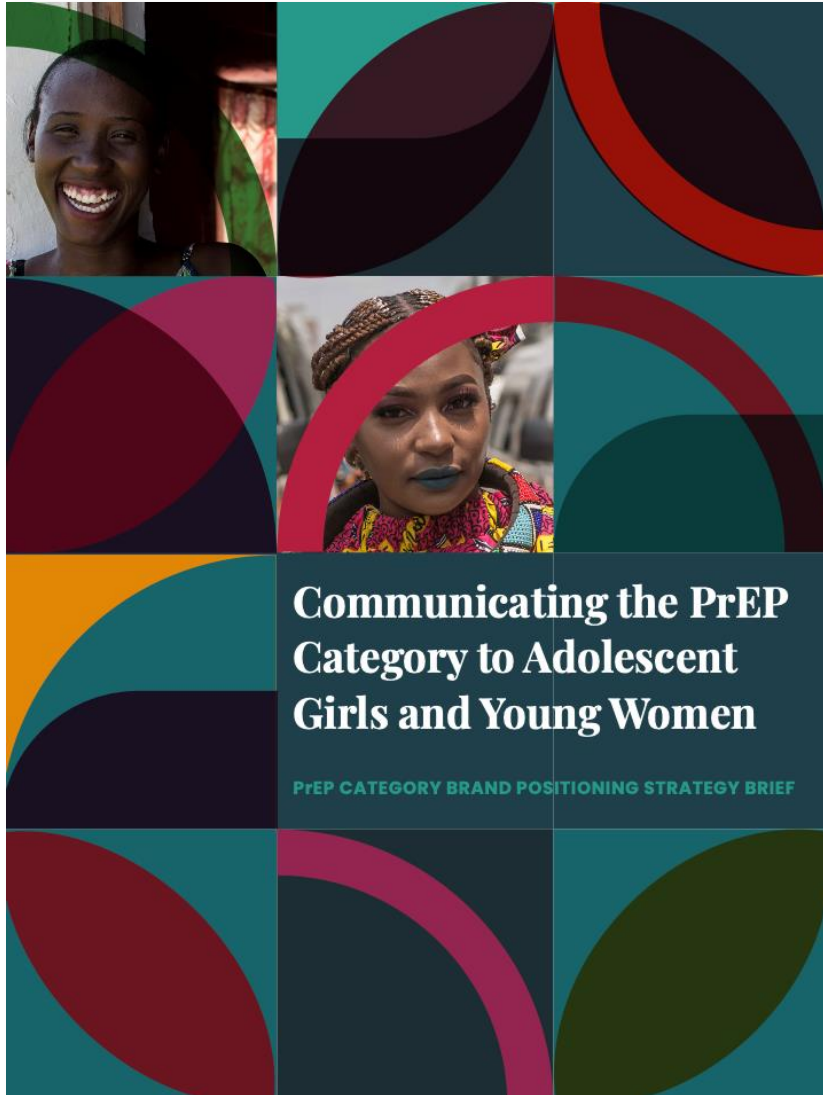
PrEP is an affirmation that soft is strong.



PrEP is a way for young women to prioritize their physical health and mental well-being, to live a life uninterrupted by HIV.

PrEP affirms that self-love is strength.

MOSAIC's brand positioning strategy brief



We used everything we learned to produce our brand **positioning strategy brief.**

The brief is a comprehensive guide for PrEP demand generation implementers.

It includes practical guidance for developing communication materials that align with the positioning.

How can the PrEP category positioning for AGYW be applied?

Revising or developing demand generation or communication strategies

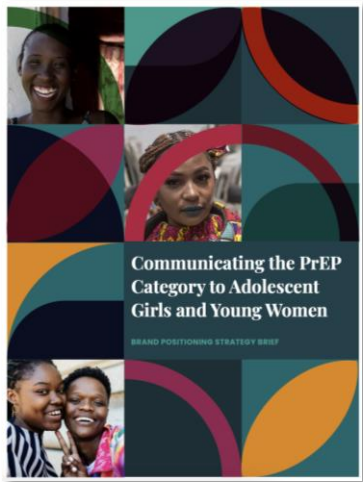
- Integrating new forms of PrEP into existing HIV prevention strategies

Informing demand generation campaigns

- As background to inform creative agency and/or MoH briefings
- Updating existing or developing new PrEP campaigns

Revising existing creative materials

- Critique existing materials and identify necessary revisions
- Guide elements to pretest with intended audience(s)



The positioning strategy was used to create brand guidelines for **PrEPisChoice**.

This document guides the development of creative assets and campaign materials.





PrEPisChoice brand guidelines

<https://shorturl.at/xGetn>

Introducing...

PrEP **♥** IS
CHOICE



<https://shorturl.at/xGetn>

PrEP CATEGORY BRAND GUIDELINES

How to create communication
that speaks to adolescent girls
and young women

PrEP  IS
CHOICE

<https://shorturl.at/xGetn>



PrEP CATEGORY BRAND STORY*

The story you see here is from our brand positioning, you will see elements of that story throughout these guidelines. Brand positioning is intended to be pulled through into brand guidelines.

This is not a story about HIV.

THIS IS A STORY ABOUT YOUNG WOMEN IN AFRICA.

Every day is a balancing act of juggling different needs with limited resources. But instead of relinquishing their power, they are giving main character energy. They have a strong sense of self and are determined to live a healthy life.

*PrEP Category Brand Story from “Communicating the PrEP Category to Adolescent Girls and Young Women: Brand Positioning Strategy Brief”, MOSAIC Project, October 2023. www.prepwatch.org/resources/communicating-the-prep-category-to-adolescent-girls-and-young-women/

Brand elements



AA *A* BB *B* CC *C*

Brand Guidelines

THE DESIGN SYSTEM HIERARCHY

When the time comes to bring all these elements together, we must ensure the elements are well integrated but the message remains clear. Let's see this demonstrated in a standard 1:1 ratio social media post:



GUIDELINES

- Branding must be clear and unobstructed.
- The colors should stick closely to our color palette.
- Background should be a flat color from our color palette or a minimalist photographic backdrop.
- Refrain from overly complicated and busy layouts, textures, and patterns.
- The headline should be bold and confident.
- Avoid competing elements; the headline and image should overlap to feel inextricably linked.

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PHOTOGRAPHY

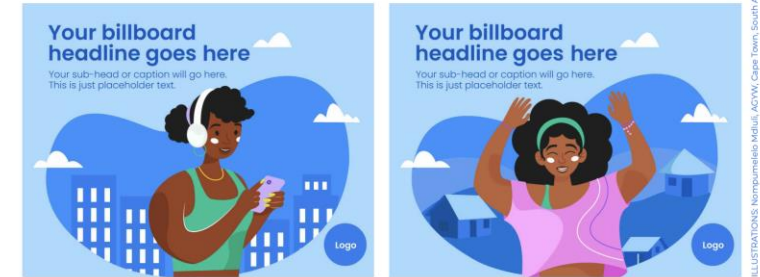
Photography should be used to showcase and celebrate our audience. Our audience responds well to expressive faces and seeing people like themselves and to whom they can relate. Faces should be highlighted with strong personality on display and a feeling of warmth and personal interaction. Casting should also be inclusive and reflect the diversity of our markets.



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ILLUSTRATION

If photography is not available, illustration is a great alternative to still represent our audience and showcase personality. It also allows us to amplify our color palette, provide more versatility across layouts, and communicate greater details. The illustrative style should be clean and contemporary with a very stylized look.



ILLUSTRATIONS: Nompumelele Mdauli, AGYW, Cape Town, South Africa

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PrEP CATEGORY CAMPAIGN MESSAGE

I CHOOSE ME

This message is written from a young woman's point of view. It is a positive affirmation that confirms her as a self-assured, confident, powerful, strong, brave, and self-respecting individual. She knows her worth and understands that she has the ability to take control of her health. She recognizes that self-love is strength.

HOW DOES THIS MESSAGE LINK WITH PrEP?

"I Choose Me is a call to action to prioritize myself and my health. It is a movement that focuses on doing what's right for me and my life before considering what's right for everyone else. It inspires me to listen to my heart, stand up for myself, and recognize my inner strength. Strength that tells me I have the right to choose. Choosing an HIV prevention method that works for me, my life. Because when I take care of myself first, I can also stand strong in my inner circle, community, and the world. Choosing PrEP is a life-affirming choice. It is an effective and safe choice for me. It sets in motion a chain reaction of life-affirming choices that make me feel powerful. I become the author of my life's story."

PHOTOGRAPH: Nompumelele Mdauli for PrEP 360

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SPEAK TO AGYW IN THEIR OWN LANGUAGE

To resonate more strongly, make language more familiar to young women.

Action:

♥ Listen to how AGYW speak to each other, what slang they use, and how they express themselves. e.g. Use familiar slang when talking about PrEP. "Taking PrEP is giving main character energy."

♥ When doing national campaigns, identify and use all dominant languages, not just English. For sub-national or local campaigns, use the dominant language of the area. e.g. "If you want me to listen, speak to me in my home language."

"As jy wil hê ek moet luister, praat met my in my moedertaal." (Afrikaans)
 "Uba ufuna ndimamele, thetha ngolwimi kwam." (isiXhosa)



- "I AM MY OWN MOTIVATIONAL SPEAKER." I am my own cheerleader. I am in charge of my health.
- "IT SLAPS DIFFERENT." An amalgamation of "it slaps" (it's amazing/very good) and "it's like different" (it's a greater impact).
- "CALL YOURSELF TO A MEETING AND DISCUSS THINGS. THE MEETING WENT WELL. I HAVE TO STAND UP FOR MYSELF. I HAVE TO DO THINGS FOR MYSELF." I have a choice. I am making decisions for my health and mental well-being.
- "COPY-PASTE WHAT SHE SAID." I agree with what my friend said.
- "THEY ARE NOT PAYING MY SCHOOL FEES. THEIR OPINIONS ARE NOT MY BUSINESS." That person doesn't have my best interests at heart, so I won't let them sway my decision.

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The brand guidelines can be **applied to existing marketing and communications materials** to refresh them and make them as resonant with young women as possible.

They can also be **adapted to local contexts** by translating the brand tagline and key messages, commissioning bespoke photography, and/or updating the language to align with cultural norms and expectations.



**KE BATLA HO PHELA
KA KHETHO, ESENG
KA MONYETLA .**


-Pontso 'Mote , 23

Ho sebelisa PrEP ke khetho ea ka. E etsa ke ikutloe ke tsireletsehile. PrEP e fana ka mofuta e fapaneng ea ho itsireletsa khahlanong le HIV. Khetha mofuta o usebeletsang kajeno.

U batla ho ithuta haholo ka PrEP? Bua le mooki kapa le Mamatli Chabela ho 5888071 ho khetha mofuta o u sebeletsang

PrEP IS CHOICE
#ICHOOSEME


USAID MOSAIC CATALYST



KHETHA
yourself

Join our squad for the ultimate PrEP KHETHA-THON!

PrEP IS CHOICE
#ICHOOSEME



I CHOOSE
Me

Did you know there are now three HIV-prevention options to choose from? Oral PrEP, PrEP ring and CAB PrEP injection. I choose me, and that is why **I choose the PrEP that works for me.**

Want to know what your choices are? Text #ASKPrEPAnything on +263 71 573 2062.

PrEP IS CHOICE
#ICHOOSEME

USAID MOSAIC PZ

Billboards



Digital banners and posters



**STEP INTO
YOUR
POWER.**

**PrEP  IS
CHOICE**
#ICHOOSEME

A digital banner featuring a young Black woman with braids, smiling warmly. The background is a vibrant pink. The text is in white and yellow, with a heart icon in the logo.



Main
**CHARACTER
ENERGY**

**PrEP  IS
CHOICE**
#ICHOOSEME

A digital banner featuring a young Black woman laughing joyfully. The background is a solid blue. The text is in white and yellow, with a heart icon in the logo.



I LIVE BY
choice
NOT BY CHANCE.

PrEP gives me a way to put myself first. When I take PrEP, I take control of my health. This makes me feel safe, and that matters!

Want to know what your choices are? Text #AskPrEPAnything on +263 71 573 2062.

**PrEP  IS
CHOICE**
#ICHOOSEME

This illustration is courtesy of Nonqumkulu Ndlovu, ACPW, Cape Town, South Africa. Appearance in this material does not indicate a person's health status.

A digital poster with a blue background. It features a stylized illustration of a young Black woman in a patterned sweater and purple skirt, jumping joyfully. The text is in white, yellow, and pink. A speech bubble contains contact information. The logo at the bottom includes a heart icon. A small vertical text credit is on the right side.

I CHOOSE *Me.*

All the info you need to choose the HIV prevention option that works for you



PrEP ♥ **IS CHOICE**
#ICHOOSEME

SOME FREQUENTLY ASKED QUESTIONS

What is PrEP?

PrEP means Pre-Exposure Prophylaxis. It's a medication that reduces the chance of getting HIV for HIV-negative people.

Is PrEP Safe?

PrEP has been shown to be very safe. PrEP is also safe with alcohol and drugs, as well as contraceptives and other medicine.

How does PrEP differ from PEP?

While PrEP is taken before exposure to HIV, PEP, or post-exposure prophylaxis, is an HIV prevention strategy that uses a course of antiretroviral drugs to reduce the chances of getting HIV after exposure to HIV.

Can you get HIV from taking PrEP?

No. The medications in PrEP work to prevent HIV from establishing infection inside the body.

What happens if you miss a dosage?

You are protected if you take your pills, wear your ring consistently, and get your injections on time. Talk to your provider if you have difficulty. They can help you develop strategies for remembering your medication that work for your lifestyle.



PrEP prevents HIV if used correctly and consistently as part of combination prevention.*

What about STIs and pregnancy?

Condoms and contraception can be used together with PrEP.

Get the straight-up PrEP facts



*Combination prevention includes: STI treatment, HIV testing, PrEP, post-exposure prophylaxis (PEP), condoms, voluntary medical male circumcision (VMMC), and treatment for HIV-positive partners.

This photograph is courtesy of Getty Images. Appearance in a photograph in this material does not indicate a person's health status.

Self-love is a vibe!
PrEP gives me more ways
to put myself first.



PrEP GIVES ME A WAY TO
PUT MYSELF FIRST AND
STAY HEALTHY.



Did you know there are now **three HIV-prevention options**
to choose from? Oral PrEP, PrEP ring and CAB PrEP injection.



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#ICHOOSEME

This photograph is courtesy of Getty Images. Appearance in a photograph in this material does not indicate a person's health status.

STEP INTO YOUR POWER

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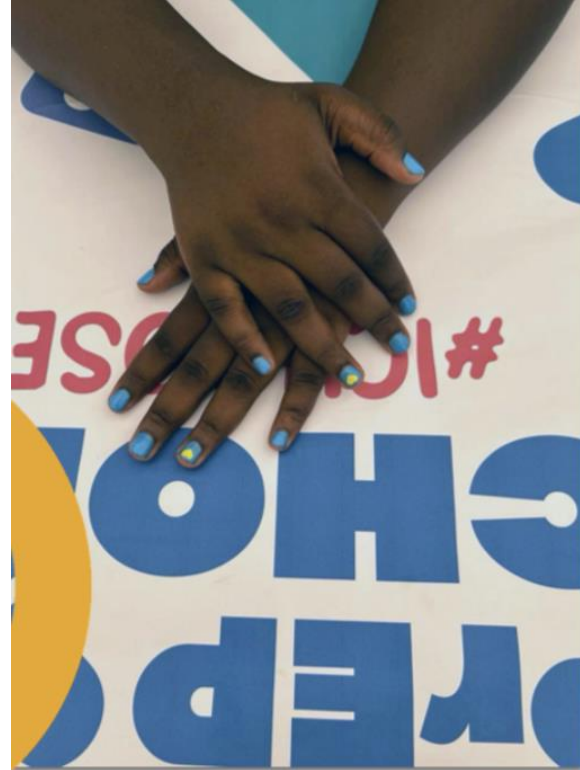


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PrEP ❤️ **IS**
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#ICHOOSEME

This photograph is courtesy of Getty Images. Appearance in a photograph in this material does not indicate a person's health status.

MOSAIC's South Africa team brought the **PrEPisChoice** brand to life at a soft launch event at CATALYST sites in March 2024.



This is an example of the type of creative materials developed using the guidance and assets included in the brand guidelines.

Now, let's practice developing our own materials!

Headline

**I WANT TO LIVE BY
CHOICE, NOT BY
CHANCE.**

- Leago, 18

Body copy

PrEP gives me a way to put myself first. When I take PrEP, I take control of my health. This makes me feel safe, and that matters more to me than what you think. I am the boss of me.

CTA



Scan the QR code to hear more young women's first-hand experiences with PrEP on the "I choose me" podcast.

Wordmark
+ hashtag

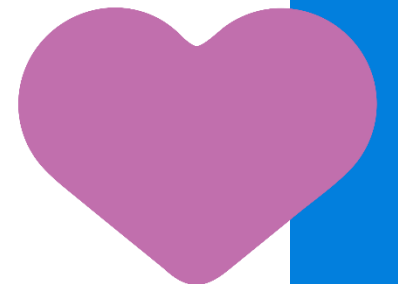
**PrEP IS
CHOICE**
#ICHOOSEME



PrEPisChoice practice session

Getting started

- ✓ You can create a fantastic poster in PowerPoint (do not use Microsoft Word)
- ✓ Make sure you have the correct fonts installed on your computer or laptop: Montserrat, **Autumn Wind** and Black Marker Soft
- ✓ Use the eyedropper to select the correct colours (We'll show you how!)
- ✓ Use great quality photography that aligns to our primary colours. Check out <https://unsplash.com/> for free photographs (Remember to credit Unsplash and the photographer)



Icons:



Set up your page

Make sure the slide is blank – no preset text boxes or placeholders. What size should your poster be? A3? Let's set the size.

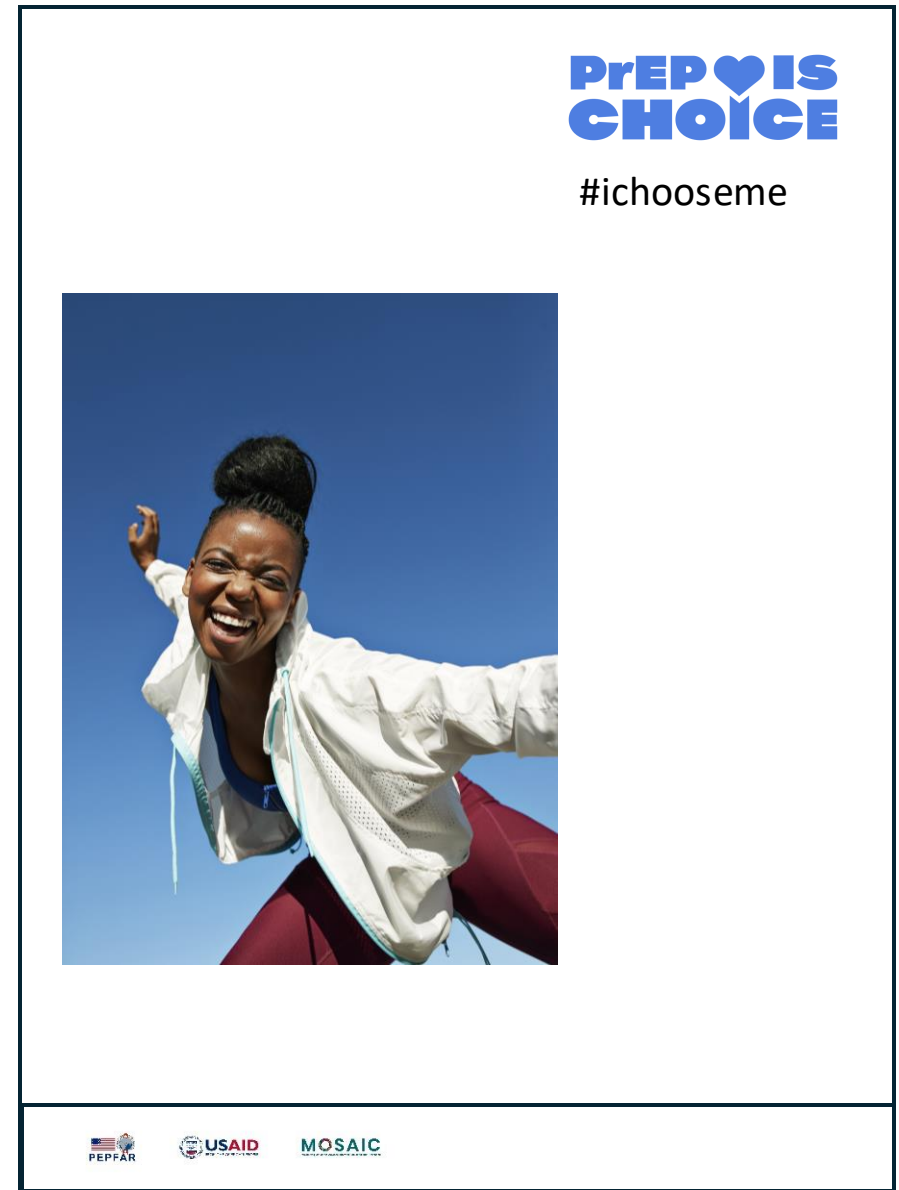
Start by adding your photograph – one is enough! If you don't have a photograph, you can also use a background colour and some of our icons. Once you have your photo in place, it becomes easier to add everything else, like text boxes and watermarks/logos.



Keep adding elements!

Add a white rectangular shape to the bottom of your page. This is where you can add your logos.

Next, let's place our PrEPisChoice watermark with our hashtag right underneath it. Starting to look like something!



We're getting there...

Next up, what is our heading? Refer to the brand guidelines section on messaging for inspiration.

Don't be afraid to place your heading in AGYW's words! Make it real by adding a name to the heading phrase.



PrEP IS CHOICE
#ichooseme

Choosing PrEP means putting myself first!
Ann, 20

PEPFAR USAID MOSAIC

The graphic features a woman with her hair in a bun, wearing a white lab coat over a blue top, smiling broadly with her arms outstretched against a clear blue sky. The text is overlaid on the right side of the image. At the bottom, there are logos for PEPFAR, USAID, and MOSAIC.

Body body body

Then, it's time to add body copy. This can get tricky because often, everyone wants you to add everything—but try to keep it brief!

Your call to action is next, and very important. What is the *one thing* you want your clients to do after seeing this poster?



“Choosing PrEP means putting myself first!”
Ann, 20

Ask your healthcare provider about PrEP for HIV prevention.

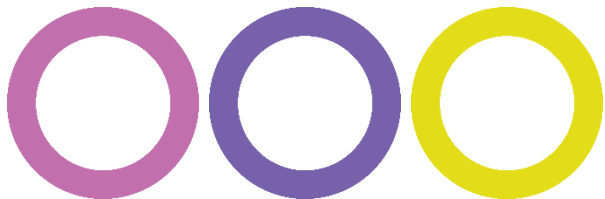
PrEP IS CHOICE
#ichooseme

The poster features a woman with her hair in a bun, wearing a white lab coat over a blue top, smiling broadly with her arms outstretched against a clear blue sky. The text is white and positioned in the upper right and lower left areas of the poster. At the bottom, there are logos for PEPFAR, USAID, and MOSAIC.

Spice it up

Finally, let's add in some icons for color and visual appeal. You may also consider adding a QR code, a whatsapp number, or website URL.

Last but not least, check alignment!



“Choosing PrEP means putting myself first!”

Ann, 20

Ask your healthcare provider about PrEP for HIV prevention.

PrEP IS CHOICE

#ichooseme



Eh voilÁ!

Tweak your design, gather feedback, and create variations as needed.

Keep it simple and stay within the guidance in the brand guidelines for best results.

A woman with her hair in a bun, wearing a white lab coat over a blue top, is smiling broadly with her arms outstretched. The background is a clear blue sky with a yellow crescent moon on the left. A pink heart shape is partially visible on the right side of the image.

“Choosing PrEP means putting myself first!”
Ann, 20

Ask your healthcare provider about PrEP for HIV prevention.

PrEP IS CHOICE
#ichooseme

PEPFAR USAID MOSAIC

Cbishopp@fhi360.org

COMMUNITY-FACING TOOLS:
**HIV Prevention
Ambassador
Training & the
PEP Resource
Package**

PREP LEARNING NETWORK
NAIROBI, KENYA
9-12 SEPTEMBER 2024



Session Overview

HIV PREVENTION AMBASSADOR TRAINING

Overview
Ambassador experience
Related tools
HPAT immersion

PEP RESOURCE PACKAGE

Origin story
Development
Current status & next steps

What is the HIV Prevention Ambassador Training (HPAT)?

GOAL:

Prepare members of PrEP end-user communities to *become leaders in PrEP rollout* and support their peers in the uptake and successful use of PrEP

APPROACH:

Interactive activities, discussion, action planning, and a resource toolkit for each ambassador

AUDIENCE:

- *Adolescent girls and young women (AGYW), 3rd edition:* intended for young people assigned female at birth of any gender identity and trans AGYW
- *Diverse version, 2nd edition:* intended for gay, bisexual and other men who have sex with men, trans people, sex workers, pregnant and breastfeeding people, people who inject drugs, and serodifferent couples



The latest versions of the training contain complete information about oral PrEP, the PrEP ring, and CAB PrEP.

These updates were made by teams that included members of the training's intended audiences alongside other experts.



What's in the package?

PART 1: FACILITATOR PREPARATION

Instructions for implementing the training, selecting and supporting ambassadors, and tips for tailoring and conducting the training with your participant group

Facilitation Tips

TIP 1

Read the training manual in advance to make sure you have the knowledge you need to facilitate the sessions.

The training manual includes comprehensive information about PrEP methods and a thorough introduction to gender, sexual and reproductive health and rights, and HIV. No one is an expert in every area, so do not worry if the topic is new to you. Just make sure you read the session's **Essential Knowledge** well in advance, so you have time to build your knowledge of and confidence with the subject.

Use the space provided to summarise the key points in your own words. This will help you understand and remember the information. You should also try to identify ways you can make the information more specific to your context, such as changing words so they are more relevant to your participants or coming up with local examples. If you do not feel confident in your knowledge or want to add more detail relevant to the population you are working with, do some more reading (start with the **Useful Resources**) or reach out to a colleague for help.

TIP 2

Reflect on your values, attitudes, and beliefs and how they might affect your work.

This training deals with many sensitive and personal topics, including gender, sexuality, sex, sex work, stigma, relationships, and violence. Everybody has their own attitudes and beliefs about these topics. As a facilitator, it is your role to create a nonjudgmental space and allow participants to make their own choices, even if they are different from what you believe. If participants are worried about being judged, they may not want to contribute to discussions. Practicing regular reflection may increase your awareness of the way your values, attitudes, and beliefs influence your opinions and actions. This can help you make sure you are not influencing others with how you think and feel.

TIP 3

Create a participatory learning environment.

Guide participants to use their own knowledge and experiences to explore the issues covered and practise their skills. Facilitating is different from teaching. Teachers lead by sharing what they know with others. Effective facilitators empower participants to lead and learn from each other. One way to do this is to keep track of participant questions and concerns, and make sure to answer as many as possible throughout the training.

TIP 4

Make it a conversation.

Because many ways that people learn about their bodies are depersonalised and do not connect well to their lived experiences, we recommend you facilitate sessions as a direct conversation. This will help participants connect to the material and give them the chance to learn and practise communicating directly about their bodies with their peers.

TIP 5

Create a safe space so participants feel comfortable participating openly and honestly.

In a safe space, participants can trust they will not be judged, rejected, or stigmatised. This helps them feel comfortable being themselves and sharing their thoughts and feelings openly.

What's in the package? PART 2: TRAINING SESSIONS

The sessions themselves, broken up by Foundational Knowledge, PrEP Method Knowledge & Sessions, and Ambassador Skills

298 Ambassador Skills | 3. Peer Support Skills

3 Peer Support Skills

ESSENTIAL KNOWLEDGE

What is peer support?
Peer support refers to Ambassadors providing information to their peers. It is not Ambassadors' role, as peers, to have professional training can cause more harm than good. The role of an Ambassador is to provide a safe space for their peers to express their feelings and needs, and explore what they and their peers may have similar experiences, their peer Ambassadors than with professional counsellors. As their personal issues and challenges, so Ambassadors their peers need more support, it is also important for them to learn about local, stigma-free counselling and support services. This session gives participants the chance to practice skills to challenge, Validate, Enhance safety and Support) or who choose to learn in this session to connect peers who discuss HIV and other important resources.

Confidentiality
Ambassadors cannot do their jobs unless they have trust that their confidentiality will be protected. Protecting the confidential aspects of an Ambassador's role. Protecting a person's confidentiality is not as simple as Ambassadors because they are working in the same existing relationships with the people they are supporting. break the confidentiality of their peers unintentionally.

- An Ambassador is feeling burdened by something they do not use the peer's name, but they are supporting.
- A peer tells an Ambassador they want to use their partner finding out. The Ambassador reassures.
- An Ambassador sees a peer they want to follow up on. They refer to a personal conversation without revealing the peer's name.

Durham (NC): HIV 300, 3003

128 PrEP Methods and Combination Prevention

1 PrEP Methods and Combination Prevention

What is PrEP
In recent years, there has been important progress in expanding methods using medications called antiretrovirals (ARVs) for people who are known as PrEP — in this manual, we will use the term 'PrEP' to refer to HIV prevention methods that use ARVs to protect a person from HIV. PrEP stands for *pre-exposure prophylaxis*. This means:

Pre	Exposure	Medication
Before	Coming into contact with HIV	Medication to

ARVs are a type of medication that stops HIV from making copies of itself in the body. ARVs are used in pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP), and ART — see **PrEP, PEP, and ART — what's the difference?**

PrEP, PEP, and ART — what's the difference?
It is important that Ambassadors understand the differences between when each can be taken and whom they are for, so they can explain them. Sometimes the same ARVs are used for PrEP, PEP, and ART. Ambassadors should understand that PrEP, PEP, and ART must not be interchanged. It is also important to be able to explain that unlike PEP and ART, PrEP is for people who do not have HIV. The ARVs used in PrEP work by preventing the virus from entering the body. The currently available PrEP methods are oral PrEP (the dapivirine vaginal ring), and the long-acting injectable cabotegravir (CAB-PRIV) or CAB-LA.

PEP (post-exposure prophylaxis) is for people who do not have HIV but have been exposed to HIV. The ARVs used in PEP work by stopping the virus from entering the body. If taken on time (within 72 hours of being exposed to HIV), PEP can prevent HIV. When these cells die (which they do naturally), so does the virus. The World Health Organization (WHO) recommends two doses of PEP. They are taken once or twice a day, depending on which drugs are used.

187 PrEP Methods Session 12: Making a Choice

2 Making a Choice

SESSION OVERVIEW

This session can be completed before or after completing pre-exposure prophylaxis (PrEP) methods sessions 2-5 for each method, depending on your context and your participants. (See facilitation suggestions in **Using this Training Manual, Part 1: Choose what sessions to include.**)

Participants will explore how they as Ambassadors can help peers make informed decisions about what HIV prevention methods are best suited for them and how their choice of methods can change over time as their lifestyles and preferences change.

By the end of this session, participants should be able to:

- Understand and compare the advantages and disadvantages of various methods for HIV prevention
- Understand key factors of a person's lifestyle and preferences that will influence informed decision-making about HIV prevention
- Understand how PrEP adds to the available HIV prevention options
- Know how to develop a combination prevention strategy with a peer

MATERIALS
The worksheets and tools used in this session can be found in the **HIV Prevention Ambassador Toolkit**. They are also included at the end of the session for your reference.

Tool 10 Making a Choice — What Matters Most to Me?
Worksheet 1 Character Profile

EXPLORE Activity
Either reuse or remake the HIV Prevention Cards from **PrEP Methods Session 1**. Make sure you have an open space large enough for seven people to stand side-by-side and move forward and backward a few steps.

PREPARATION

HIV Prevention Ambassador Training Package - Ghana Version - 2nd Edition

What's in the package? PART 3: AMBASSADOR TOOLKIT

A toolkit of resources and worksheets for ambassadors to use while working in communities

Making a Choice — What Matters Most to Me?

TOOL 10

People are all different, and they need to be able to choose which HIV prevention method best suits them. Here are some factors that influence a person's choice about which HIV prevention method to use.

Effectiveness: How effective is this method? How important to me is effectiveness compared to other factors? Based on the evidence, how can I get maximum protection? What if I want to use the method in combination with another one? Is it still effective if I am using gender-affirming hormones?

Mode of use: Do I want something that is medication-based? Do I want something on-demand or something that provides continuous prevention? Do I need something that can be used after sex? What am I comfortable putting in my body — a pill, vaginal ring, or an injection?

Partner issues: Does my sexual partner have a preference about what I use? Does their opinion matter to me? What will they feel about me using this method? Do their feelings matter, or do they need to know?

Personal commitment: Can I stick to the method easily? How much effort does it require to keep using this method? Can I cycle on and off of it easily?

Condom use: Am I able to use condoms consistently and correctly each and every time I have sex? Do I have access to a water-

HIV prevention needs: Why do I need HIV prevention now? Have I already been exposed to HIV? Do I know my partner's HIV status? If my partner is living with HIV, are they taking their ART regularly? Am I breastfeeding or planning a pregnancy? Do I inject drugs? Will it prevent HIV during the exposures that I might have?

Accessibility: Does it require use of a product (for example, PrEP method or condom)? If so, what is available and easy to access? What about the cost or affordability? Am I able to see a health care provider?

Tips for Using CAB PrEP

TOOL 13C

- Set a reminder to attend your clinic visit one month after your first injection, and then every two months.**
 - a. Reminders could be on your phone, diary, or a note in a place where you look often, such as on a mirror.
 - b. You can also use your phone to keep notes about things you want to tell or ask your health care provider.
 - c. The visual below can help you understand the CAB PrEP follow-up visits.
- Work with your health care provider to manage side effects.**
 - a. Your health care provider may have tips to help you minimize side effects from your CAB PrEP injection. For example, you may be able to use pain-reducing medicine before an injection, or ice the area after an injection, to reduce pain or swelling.
 - b. Write down any side effects you have after your CAB PrEP injection so that you remember to ask about them at your next visit. If the side effects are worrying or distressing, please contact your health care provider immediately.
- Join or start a CAB PrEP support group with friends.**
 - a. You're not the only one using CAB PrEP. Connect with other
- Work with your health care provider to schedule all your health needs.**
 - a. You can work with your health care provider to minimize your visits to the clinic by scheduling your contraception services and refills, child immunisation days, and CAB PrEP injections at the same time. Talk to your provider about how you can do this!
- Plan ahead for your CAB PrEP visits.**
 - a. A few days before your CAB PrEP visit, make sure you have a plan for how to get there. You may need to identify public transport that you can take or work with a friend who has a vehicle or any other form of transport that you use.
 - b. Confirming your public transport plan before your visit can help you avoid being late for a dose of CAB PrEP.

Don't forget to plan for your clinic visits.

Getting your CAB PrEP injection every two months will keep you protected from HIV.

Removing Barriers to PrEP

WORKSHEET 4

What would make it easier for your peers to find out about PrEP?

What would make it easier for your peers to get PrEP?

What would make it easier for your peers to take PrEP correctly and continue taking it?

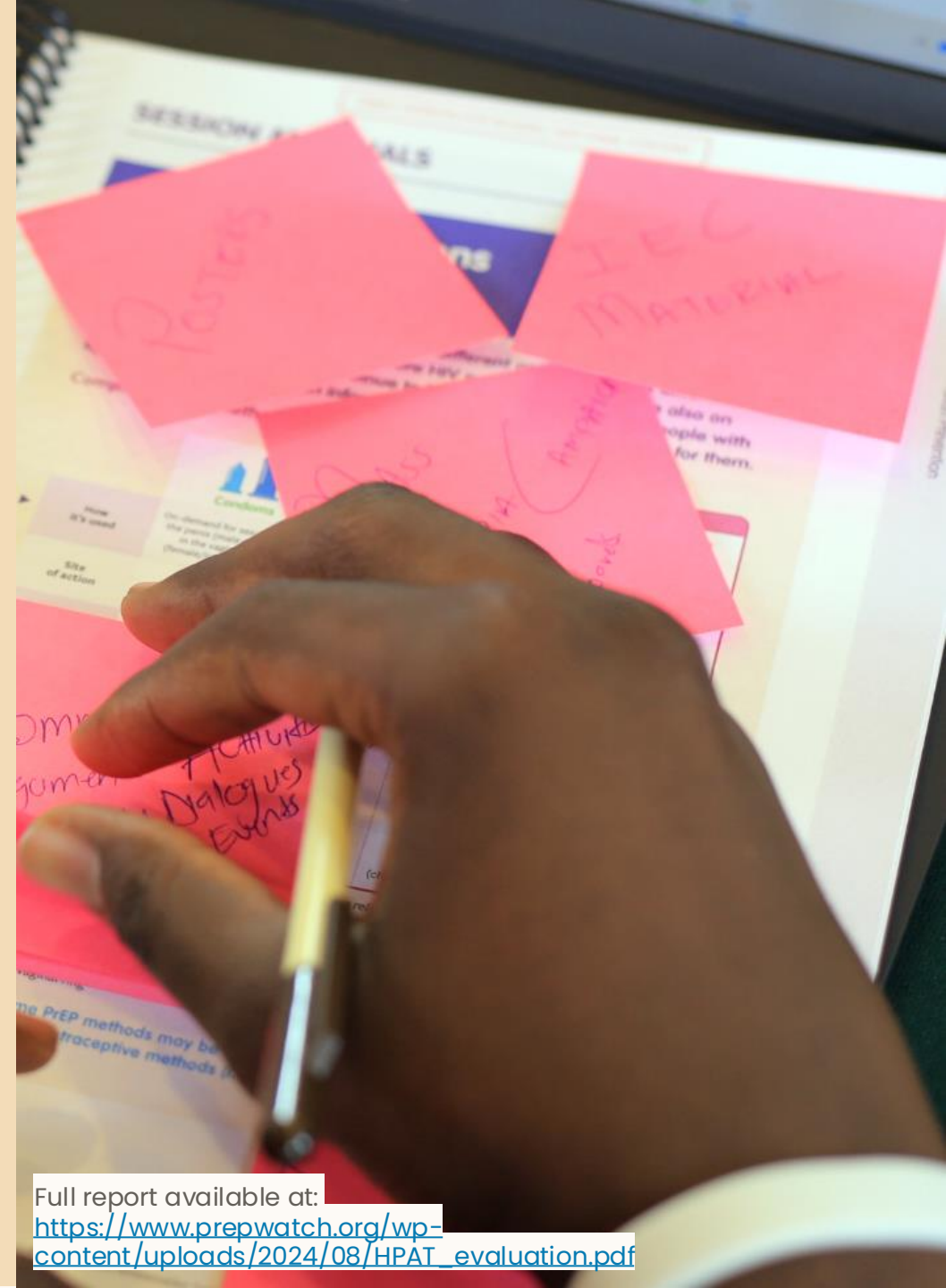
What would make it easier for your peers to use PrEP?

What would make it easier for your peers to talk to the people in their lives about using PrEP?

Background

- In **October 2022**, LVCT Health trained a **cadre of DREAMS Champions** using the 3rd edition of the HPAT for AGYW
- In 2023, we engaged these **Champions (Ambassadors)** to assess how the HPAT has impacted their work, and understand their needs and challenges
- We interviewed **6 cisgender young women ages 21-26** who had been working as **DREAMS Ambassadors for about 8 months.**

The following slides highlight a few things they shared about their experience.



Most ambassadors reported helping their peers continue or restart PrEP

“

[I] used the toolkit by counseling my peers and when they see the stories of other girls in the toolkit using PrEP and see how they adhere for it to work, they felt motivated.

”

***All ambassadors
noted feeling
empowered by
the training***

“

***It helped build
confidence because with
the right information,
you're able to answer
most of the questions.
And also, you're able to
mobilize the people and
actually refer them and
also know your roles
specifically.***

”

“*I usually make sure that I have enough sleep. And sometimes I listen to myself when I need to go out for a walk. I love nature. I love listening to birds. Sometimes, when I need someone to talk to, I actually look for our counsellors. And I usually make sure that I also listen to a lot of music.*”

“*Since these girls can really call you anytime, sometimes if it's eight you switch off the phone, and tomorrow get back at work.*”

Ambassador comments showed an understanding of burnout and reflected their efforts to prevent it.

Ambassadors shared that access to new HIV prevention methods could improve PrEP uptake and use and make their jobs easier.

“

...[New] prevention methods **like an injectable** to be made available because it can be a better option for most of the AGYW who think that **oral PrEP is a big burden for them.**

There is a type of PrEP called the ring PrEP, so many girls want that and it's not available. They **prefer to have the ring more than the oral PrEP** because maybe someone's not at home and needs the pill or is just tired of taking the meds. Also, stigma because most of the people don't know the difference between PrEP and ARVs. **I don't know if those rings can be available this year, I know they've been studied, they can really improve the uptake.**

”

Conclusions & Recommendations

- Ambassador comments supported previous favorable findings about the training.
 - Ambassadors report that the **training was practical** and gave them important knowledge and skills.
 - **Ambassadors are enthusiastic** about their roles and **provide individual support** to large numbers of their peers while **raising awareness** about PrEP in their communities.

The HIV Prevention Ambassador Training is a useful tool and training more Ambassadors may improve PrEP uptake and use in communities.



What related tools and resources are available?

HPAT Training of Trainers:

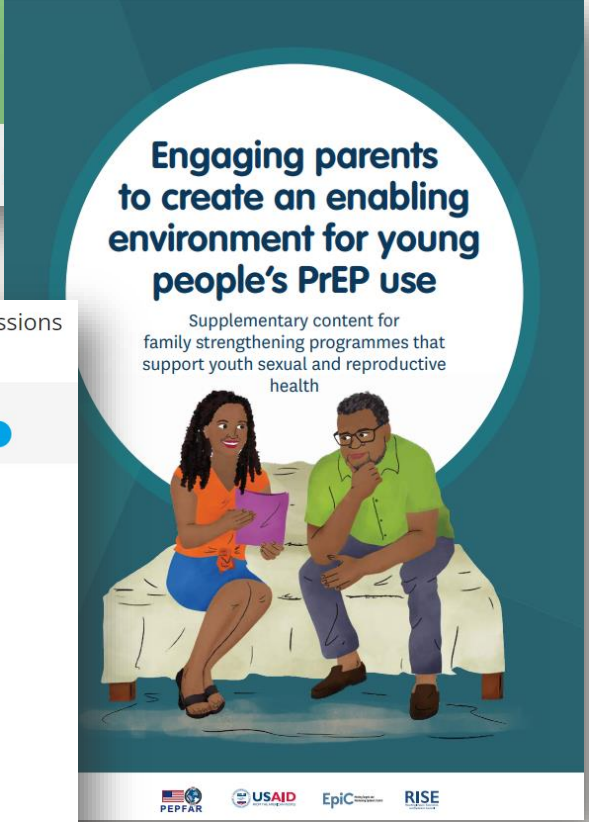
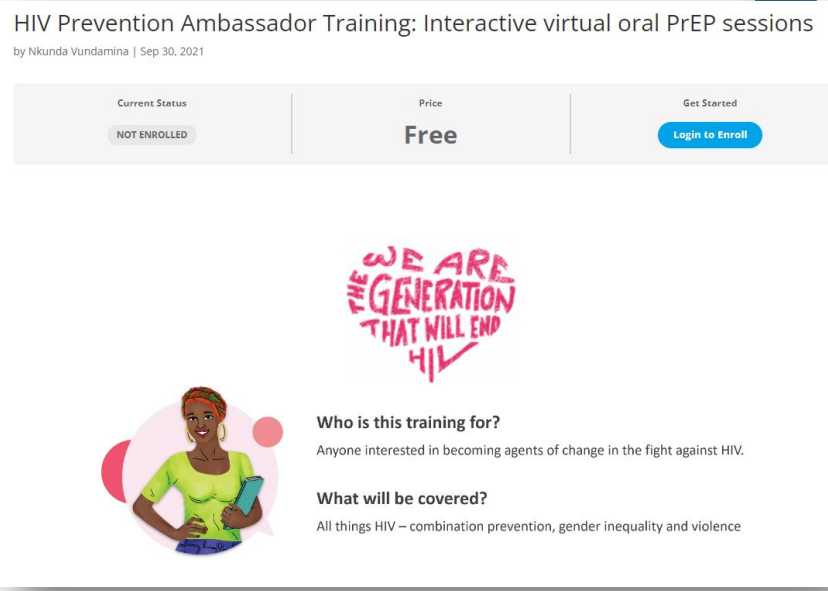
A full training plan and materials to conduct a virtual 'training of trainers' workshop for facilitators of the HPAT.

Virtual HPAT PrEP Module:

A free, interactive online module to introduce AGYW to oral PrEP. Will be updated in early 2025 to include the PrEP ring and CAB PrEP.

PrEP Parent Modules:

A sister training designed for HIV programs who wish to introduce parents to PrEP as part of efforts to support young people's PrEP use. Currently includes oral PrEP and the PrEP ring.





Questions?



Activity: COMBINATION PREVENTION

Activity: IT'S OK WITH ME..



Activity: IT'S OK WITH ME..



A peer is experiencing violence and asks if they can stay at your house.

Activity: IT'S OK WITH ME..



A peer wants to use PrEP and asks you to talk to her partner for her.

Activity: IT'S OK WITH ME..



A peer wants to use post-exposure prophylaxis (PEP) but is worried about keeping it at her house. She asks if she can store her pills at your house.

Activity: IT'S OK WITH ME..

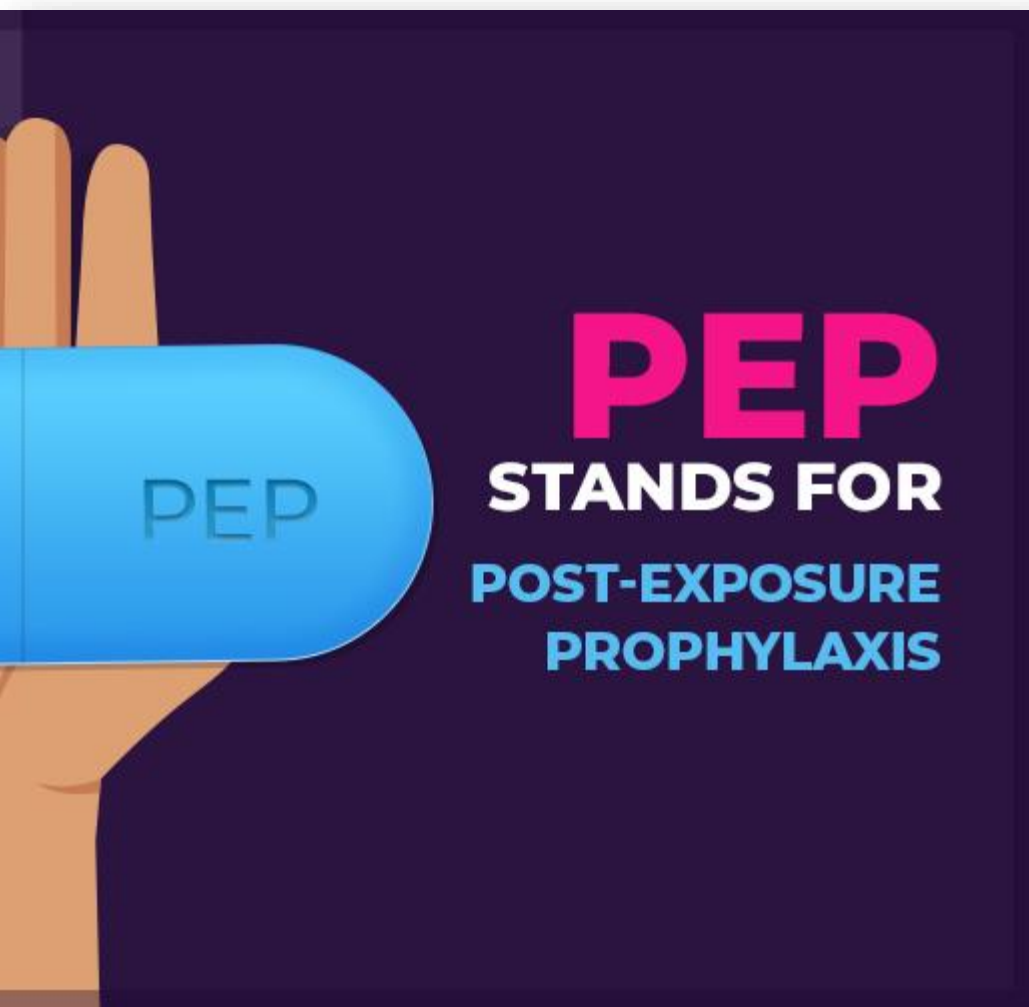


A young person needs to go to the clinic to be assessed for PEP. She asks to borrow money from you to go to the clinic.

OVERVIEW: PEP Resource Package

PREP LEARNING NETWORK
NAIROBI, KENYA
9-12 SEPTEMBER 2024





PEP Resource Package

ORIGIN STORY

The **USAID Mission in Uganda** identified a **gap in uptake and completion of Post-Exposure Prophylaxis (PEP)** and the PEP-to-PrEP transition among adolescent girls and young women (AGYW). They envision a **role for DREAMS Mentors and other AGYW peer educators** in PEP uptake.

USAID HQ reached out to **the MOSAIC team** to help address this challenge!

MOSAIC's VISION

Using a **human-centered design and co-creation process**, develop a **set of tools that will improve PEP uptake and completion**, and the PEP-to-PrEP transition, alongside the people who will use these tools, **with AGYW guiding the way!**

Engaging AGYW throughout the process...



Before the start: informal lunchtime conversations with Ugandan DREAMS mentors and SRH/HIV prevention advocates *and* consultations with the NGS



Every step of the way: NGS members and other young people from multiple countries form much of the core development team

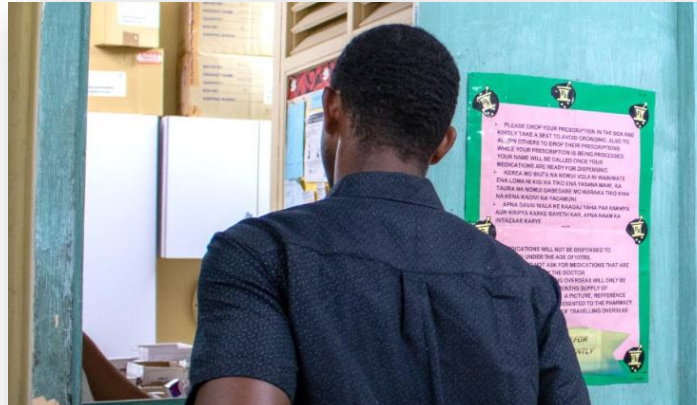


At key intervals: we held workshops with DREAMS mentors prior to developing tools, and a validation session with mentors is planned for November 2024

...and engaging with experts, key stakeholders, and other end users



Key stakeholders and other end users in Uganda: focus group discussions were held with providers, village health team members, and district health officers in Uganda



WHO updates guidelines to enhance access to HIV post-exposure prophylaxis

22 July 2024 | Departmental update | Reading time: 1 min (310 words)

World Health Organization: we shared plans and consulted with the WHO to make sure our vision aligns with global guidance



Collaboration with topic experts: we consulted with topic experts from EpiC, the Jhpiego SBC Activity in Uganda, and the USAID Mission – Uganda and HQ – to leverage a variety of expertise

POST-EXPOSURE PROPHYLAXIS (PEP) RESOURCE PACKAGE: OVERVIEW

The PEP Resource Package is a collection of resources from multiple sources to support the engagement of policymakers, clinicians, programmers, and peer educators in PEP uptake, completion, and the PEP-to-PrEP transition among adolescent girls and young women (AGYW). Because the barriers to PEP uptake and use are complex and frequently related to experiences of gender-based violence, overcoming them in a trauma-informed way requires a collaborative approach. Implementation of this package should be led by district HIV focal points in collaboration with District Health Officers, health care workers, young people, implementing and development partners, community influencers, and other key stakeholders as needed.

This slide outlines resources, their suggested audiences, and minimum requirements for utilizing each resource. The following slide outlines all components of ideal conditions for implementation of this package along the PEP value chain.

Based on these efforts and a desk review, we developed a resource package of new and existing tools to improve PEP uptake, completion, and the PEP-to-PrEP transition among AGYW, with AGYW at the center.

SYNTHESIS OF PEP POLICIES IN MOSAIC COUNTRIES

Primary audience: Policymakers and program planners

A brief synthesizing the PEP policy landscape across 8 countries, how to address barriers to PEP policy and implementation, and providing recommendations to increase PEP uptake as part of HIV prevention. Prior to implementing this package, at a minimum, policies should not require HIV testing or known HIV status of exposure sources or police reports to access PEP, and supply chains should be adequate to ensure PEP availability prior to implementing this package.

SUPPORTING PEP USE TRAINING

Primary audience: Peer educators
Secondary audience: Village Health Team Members

A training on PEP basics, how to support AGYW to access and complete PEP, and transition to PrEP when desired, using a weekly check-in approach. Before starting this training, all participants should have completed trainings on first-line support (LIVES), available PrEP methods, and peer support skills. [MOSAIC's HIV Prevention Ambassador Training for AGYW](#) can be used to train mentors on these topics.

SUPPORTIVE SUPERVISION TOOL

Primary audience: Supervisors of peer educators or implementing partner peer education programmers

A supportive supervision tool for providing additional support to peer educators who are working with PEP users. All peer educators who support PEP users should receive enhanced supervision.

SUPPORTIVE SUPERVISION TRAINING

Primary audience: Supervisors of peer educators or implementing partner peer education programmers

Supervisors of peer educators should complete foundational training on providing supportive supervision prior to utilizing this package. If there is no programmatic training available in your setting, we recommend referencing [this Support Supervision Module from USAID](#) with modifications to fit your context.

PROVIDER PEP CLINICAL TRAINING

Primary audience: PEP providers

All providers should have completed basic clinical training on PEP, GBV response, and youth-friendly services before providing PEP to young people. If there is no national or programmatic training available in your setting, we recommend referencing [this South Africa PEP Training](#) with modifications to fit your context.

PEP PROVIDER FLIPCHART

Primary audience: PEP providers

A table-top tool to support providers as they counsel clients about PEP. All providers should complete training on PEP, youth-friendly services, and GBV response before using this tool.

PEP PROVIDER JOB AIDS

Primary audience: PEP providers

Job aids to support PEP provision and the PEP-to-PrEP transition may be useful for providers. Examples of successful job aids include [this tool produced by MOSAIC Eswatini](#), and [this algorithm](#) and [this counseling aid](#) produced by the South Africa National Department of Health.

HEALTH FACILITY QUALITY ASSURANCE TOOL

Primary audience: Health care providers, facilities, and program planners

All health care facilities that may receive PEP clients as part of collaborations with peer educators should be prepared to provide high-quality gender-based violence and PEP services prior to implementing the package. If no quality assurance tools are available in your setting, we recommend utilizing this [Gender-Based Violence Quality Assurance Tool](#) developed by Jhpiego.

PEP FREQUENTLY ASKED QUESTIONS TOOL

Primary audience: Peer educators & their clients
Secondary audience: Community members

A visual educational tool for use when sharing information about PEP one-on-one or in a community setting. To be introduced to mentors during the Supporting PEP Use training.

Items in bold italics are the minimum requirements that should be in place prior to implementing this package and its components.



Training: Supporting PEP Use

A TRAINING FOR PEER EDUCATORS & VILLAGE HEALTH TEAM MEMBERS
DAY 1
VERSION 1.0

DD MONTH YYYY
LOCATION



The Weekly Check-In Framework

Start of PEP use	Week 1	Week 2	Week 3	Week 4
<ul style="list-style-type: none"> First-line support (LIVES), if needed PEP information, including benefits 	<ul style="list-style-type: none"> Adherence check-in Referral follow-up 	<ul style="list-style-type: none"> Adherence check-in PrEP sensitization 	<ul style="list-style-type: none"> Adherence check-in Support for PrEP decisions (if desired) Referral follow-up Additional support using LIVES and/or referral to other GBV response services, including MHPSS, as needed 	<ul style="list-style-type: none"> HIV test support PrEP access support Plan for support to use PrEP (if desired) Shift to referral resources and outside support

PEP USE SUPPORT TRAINING: An interactive training for DREAMS mentors, other peer educators, or village health team members to support PEP uptake, completion, and the PEP-to-PrEP transition using a weekly check-in framework.

PrEP use support

What is the difference between PEP, PrEP, and ART?

- **PEP**, or post-exposure prophylaxis, is a prevention method to be taken by HIV-negative persons within 72 hours after possible exposure to HIV. PEP is taken daily for 28 days. You may not need to take PEP if you are using an effective PrEP method.
- **PrEP**, or pre-exposure prophylaxis, is a prevention method used by HIV-negative persons before HIV exposure to prevent HIV.
- **ART**, or antiretroviral therapy, is a treatment method taken by people living with HIV to reduce their viral load.

When should I consider taking PEP?

- After having sex without a condom with a person whose HIV status is unknown, or someone who is living with HIV and has a detectable viral load
- After having sex where the condom slipped off, or broke
- If you have been sexually assaulted
- If you use drugs and shared needles or other related items
- If you may have been exposed to while working with blood or other bodily fluids that may contain HIV

What is PEP?

PEP contains antiretroviral medications (ARVs) that stop the virus from copying itself after a recent exposure. If the cells cannot make copies, they will die and HIV will be prevented.

Who should take PEP?

PEP should be taken by **HIV-negative persons who may have been exposed to bodily fluids** like blood, vaginal and rectal fluids, and semen of a person who is living with HIV or has an unknown HIV status.

Where can I get PEP?

You should reach out to your health care provider to be prescribed PEP.

How long do I have to take PEP?

PEP should be taken **daily, at the same time, for 28 days**. After the 28 days, consider transitioning to PrEP with your health care provider.

When should I start PEP?

PEP must be started within **2 - 72 hours** of possible exposure to HIV. The sooner PEP is started, the better!

Do I need to have any tests?

Yes, you will need to take a rapid HIV test before being prescribed a full 28-day course of PEP to make sure you are not living with HIV. PEP users should return to the health facility for another HIV test after 6 weeks and again at 6 months after completing PEP.

Are there side effects to taking PEP?

Some people who take PEP may experience side effects, including nausea, vomiting, diarrhea, tiredness, and feeling unwell. If you experience fever, night sweats, and a rash, health care providers will test for HIV, as these may be early signs of HIV infection.

If you experience any side effects, contact your health care provider.



Do I need a police report to receive PEP?

No, you do not need a police report or a letter from a community leader to receive PEP from your health care provider.

What if I find out I am living with HIV?

If an HIV test states that you are living with HIV, your provider will tell you about ART and get you started on a treatment method.

Will PEP prevent other sexually transmitted infections (STIs) or pregnancy?

No, PEP does not prevent other STIs or pregnancy. If you want to prevent other STIs or pregnancy, you should reach out to a health care provider.

Can I take PEP if I am pregnant, trying to get pregnant, or breastfeeding?

Yes. PEP can be taken.



PEP FAQ TOOL: An educational pamphlet answering frequently asked questions about PEP for use in educating peers, PEP users, and the community.

HIGHLIGHT: New tools for DREAMS mentors and other peer educators



Post Exposure Prophylaxis (PEP) Provider Flipchart

A table-top tool for providing PEP

Version 1.0



ACTION GUIDE: Clinical Assessment & Providing First Aid



Once your client agrees, you can begin the assessment.

Begin with broad, open questions before getting into details.

Can you tell me about what brought you in to see me today?

Do you mind telling me more about _____?

Once your client warms up, and you have a better idea of their circumstances, you can start to ask more specific questions.

Relevant youth-friendly techniques:

- Ask non-threatening questions
- Make no assumptions

Relevant principles of violence prevention & response:

- Respecting the right to self-determination
- Do no harm

PROVIDER FLIPCHART: A step-by-step provider tool to support trauma informed, youth friendly, competent PEP provision in the clinic.

Overview: Peer support quality self-assessment

The below template checklist is intended for use by peer educators as they reflect on the support that they have provided to their peers and near-peers as they take up or use PEP. Interested peer educators may choose to co-lead and potential areas for supervision can be identified further through this tool to reflect their own confidentiality of...

Template: Peer support quality self-assessment

Did you...	Yes	No	N/A	Notes and action items
Provide support physically safe place?				
Provide support emotionally safe place?				
Explain any important points on confidentiality? mandatory reporting requirements to people younger than 18?				
Listen actively to understand their situation?				
Reassure them that their feelings are normal and that they are valuable?				

Overview: Individual support checklist

The below template checklist is intended for use by peer educator supervisors during one-on-one check-ins with peer educators. Supervisors should modify this tool to reflect their local context and programming in partnership with peer educators. One-on-one check-ins should be held ideally every week and at least once every two weeks for peer educators who are working with PEP users. Remember to follow your program's confidentiality guidelines when discussing particular cases with peer educators.

Template: Individual support checklist

Does the peer educator ...	Individual peer educator support: well-being			Notes and action items
	Yes	No	N/A	
Have a clear understanding of their role – including duties and boundaries?				
Have the needed resources to support other young people? For example, transport or communication stipends.				
Have a support person from the project to reach out to when needed?				
Have a manageable number of peers and near-peers they are supporting?				
Have regular practices that support taking breaks and attending to their needs?				
Have any personal situations that are impacting their work?				
Have a success or learning to share?				
Need a break from working with PEP users or their other duties as peer educator?				

SUPPORTIVE SUPERVISION TOOL: A guide for providing supportive supervision to DREAMS mentors or other peer educators as they work with PEP users.

HIGHLIGHT: New tools for providers and programmers

Final steps

Tool Validation

Validation sessions with key stakeholders, DREAMS mentors and other end users in November 2024

Brief field test

Field test with DREAMS mentors and partners to determine feasibility in January–March 2025

Make the package public

Finalize a publicly available version of the package – targeted for April 2025

Ongoing work

Support for countries to adopt the package; potential to develop version 2.0 to reflect newest WHO guidelines



Thank you!



ACKNOWLEDGMENTS

Morgan Garcia, Shyla Napier, and Lilian Tutegereize, FHI 360

Marie Merci Niyibeshaho and Nelius Ruiru, LVCT Health

We thank all the adolescents and young people and all the unique individuals who contributed to making this training their own!



MOSAIC is made possible by the generous support of the American people through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID) cooperative agreement 7200AA21CA00011. The contents of this presentation are the responsibility of MOSAIC and do not necessarily reflect the views of PEPFAR, USAID, or the U.S. Government.

Photo Credit: MOSAIC Consortium, iTAP Media, Morgan Garcia



ROOM 1: Community-facing tools to build end-user power in the PrEP space

MINISTRY OF HEALTH

Training: Supporting PEP Use

A TRAINING FOR PEER EDUCATORS & VILLAGE HEALTH TEAM MEMBERS
DAY 1
VERSION 1.0

DD MONTH YYYY
LOCATION

PEPFAR

PEP Resource Package

ACTION GUIDE: Clinical Assessment & Providing First Aid

Once your client agrees, you can begin the assessment.

Begin with broad, open questions before moving into details.

Relevant youth-friendly techniques:

- Ask non-threatening questions
- Make no assumptions

Relevant principles of violence prevention & response:

- Respecting the right to self-determination
- Do no harm

What is the difference between PEP, PrEP, and ART?

- PEP, or post-exposure prophylaxis, is a prevention method to be taken by HIV-negative persons within 72 hours after possible exposure to HIV. PEP is taken daily for 28 days. You may not need to take PEP if you are using an effective PrEP method.
- PrEP, or pre-exposure prophylaxis, is a prevention method used by HIV-negative persons before HIV exposure to prevent HIV.
- ART, or antiretroviral therapy, is a treatment method taken by people living with HIV to reduce their viral load.

When should I consider taking PEP?

- After having sex without a condom with a person whose HIV status is unknown, or someone who is living with HIV and has a detectable viral load
- After having sex where the condom slipped off, or broke
- If you have been sexually assaulted
- If you use drugs and shared needles or other related items
- If you may have been exposed to HIV while working with blood or other bodily fluids that may contain HIV

If you have additional questions about PEP, please contact your DREAMS mentor or a health care provider.

QR CODE?

PEP
Post Exposure Prophylaxis

Do you need an emergency prevention method within 72 hours of a possible HIV exposure?

FREQUENTLY ASKED QUESTIONS ABOUT PEP

PEPFAR **USAID** **MOSAIC**

MINISTRY OF HEALTH

Let's talk about PEP

Post Exposure Prophylaxis

Do you need an emergency prevention method within 72 hours of a possible HIV exposure?

FREQUENTLY ASKED QUESTIONS ABOUT PEP

PEPFAR **USAID** **MOSAIC**

working with PEP users or their other duties as peer educator?

HIV Prevention Ambassador Trainers' Workshop: MENTORS' ACTIVITY GUIDE

PEPFAR **USAID** **EpiC** **RISE**

HIV Prevention Ambassador Training Package

Diverse Version
2ND EDITION

PEPFAR **USAID**

HIV Prevention Ambassador Training Suite

HIV Prevention Ambassador Training Package

for Adolescent Girls and Young Women
3RD EDITION

PEPFAR **USAID** **MOSAIC**

Engaging parents to create an enabling environment for young people's PrEP use

Supplementary content for family strengthening programmes that support youth sexual and reproductive health

PEPFAR **USAID** **EpiC** **RISE**

HIV Prevention Ambassador Training: Interactive

by Nkunda Vundamini | Sep 30, 2021

Current Status: NOT ENROLLED | Price: Free

WE ARE THE GENERATION THAT WILL END HIV

Who is this training for?
Anyone interested in becoming agents of change in the fight against HIV.

What will be covered?
All things HIV – combination prevention, gender inequality and violence



PrEP-it overview

SEPTEMBER 2024





INTRODUCTION TO PREP-IT

What is PrEP-it?

- PrEP Implementation planning, monitoring, and evaluation Tool
- Developed in 2019 and funded by USAID through the HP+, OPTIONS, EATAP-II, and MOSAIC projects

www.PrEPitWeb.org

- PrEP-it is a decision-making and analysis tool with interrelated modules:

Target
setting

Cost
forecasting

Estimating
impact

ARV
forecasting



Welcome to PrEP-it

PrEP Implementation planning, monitoring and evaluation Tool

A platform to assist with PrEP program planning, monitoring, and evaluation



PrEP-it

Access the full, standard version of PrEP-it.

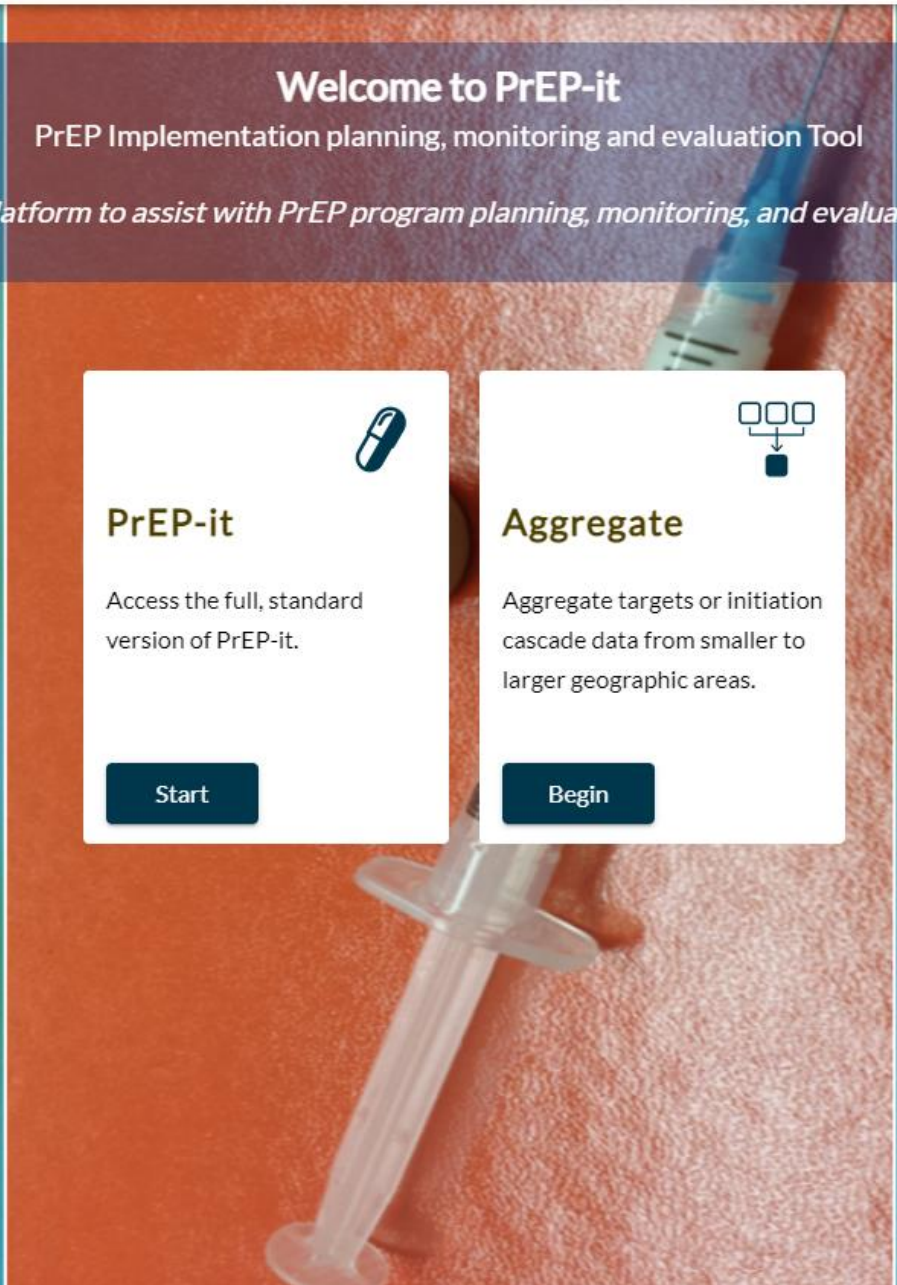
Start



Aggregate

Aggregate targets or initiation cascade data from smaller to larger geographic areas.

Begin

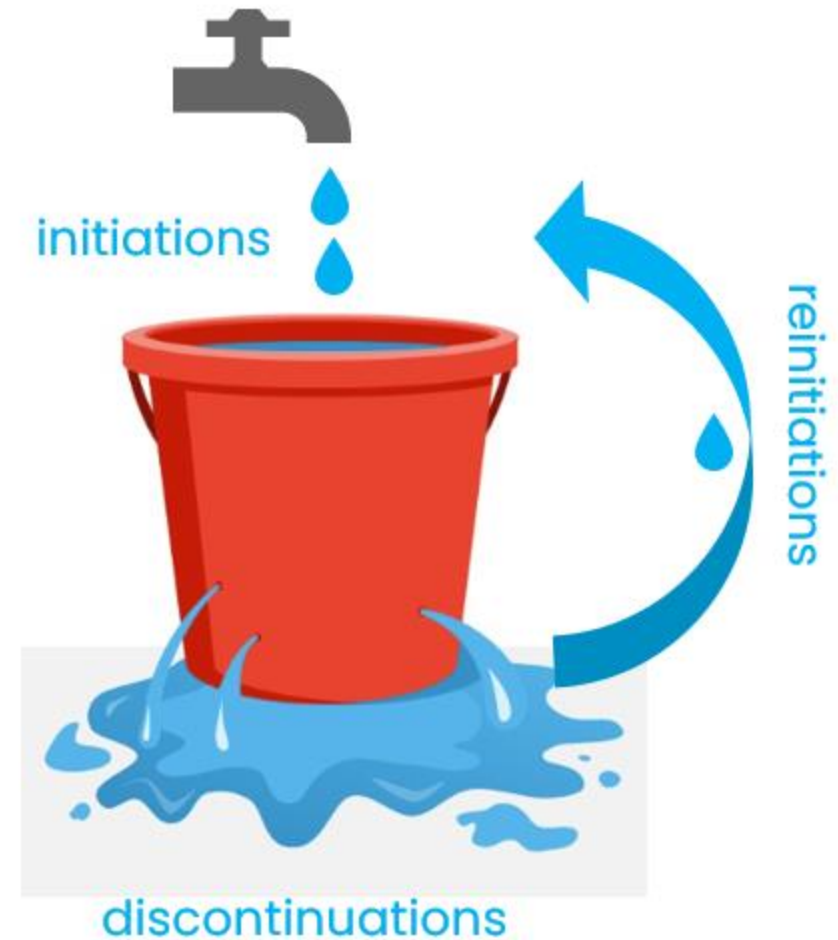


Core PrEP-it functions

- Tool can be applied at the national, sub-national, donor, implementer or site level
- Tool can be applied to multiple PrEP methods simultaneously
- Target-setting by population group
 - Based on population coverage or direct entry of initiations
 - Annual and monthly initiation targets, accounting for continuation and scale up
 - Disaggregate targets by age, sex, and subnational location
- Cost forecasting and analysis
 - Costs by visit type – account for different continuation rates and visit schedules by population
 - Cost per HIV infection averted
- PrEP product need forecasting

Coverage calculations in PrEP-it

- Coverage in PrEP-it is conceptualized as the % of potential users that are actively using PrEP at any given time
- Coverage in any given month is a function of:
 - The size of the specified population
 - The rate of initiations (can vary over time and by PrEP method)
 - The rate of discontinuations (can vary by population and PrEP method)
 - The rate of reinitiations (can vary by population and PrEP method)



Coming in 2025: PrEP-it SHIPP

Objectives:

- Incorporate the SHIPP tool population size and HIV incidence estimates into PrEP-it for target-setting.
- As far as possible, automate the process for the user.

This will assist users to:

- Define priority populations and districts based on HIV incidence in population-district combinations
- Automatically select population-district combinations that meet pre-defined HIV incidence thresholds based on UNAIDS Global AIDS Targets
- Automatically generate the size of the population indicated for PrEP for different HIV incidence thresholds

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X
1	Geography			Risk categories in % of total F15-19				Population sizes by behaviour (F15-19)					Estimated new HIV infections					Estimated HIV incidence rates					Incidence	
2	Country	area_id	area_name	No sex	Regular partner	Non-regular	YWKPs	No sex	Regular partner	Non-regular	YWKPs	All F15-19	F15-19LHIV	No sex	Regular partner	Non-regular	YWKPs	All F15-19	No sex	Regular partner	Non-regular	YWKPs	All F15-19	category
156	Botswana	BWA_3_01ci	Boteti	66.9	4.1	27.9	1.2	2526	153	1041	37	3854	98	0	1	14	3	19	0	0.78	1.34	9.21	0.49	Moderate
157	Botswana	BWA_3_02sw	Bobirwa	75.4	2.4	21.0	1.2	2867	92	787	36	3924	142	0	1	19	5	25	0	1.39	2.40	14.38	0.67	Moderate
158	Botswana	BWA_3_03fy	Selibe-Phikwe	70.9	4.3	23.6	1.2	1843	112	607	25	2661	73	0	1	11	3	15	0	1.06	1.83	11.61	0.59	Moderate
159	Botswana	BWA_3_04br	Mahalapye	74.6	2.7	21.6	1.2	4524	160	1287	57	6288	259	0	2	33	8	43	0	1.47	2.53	14.72	0.72	Moderate
160	Botswana	BWA_3_05qx	Palapye	75.4	2.3	21.1	1.2	3548	110	980	45	4842	159	0	1	22	6	30	0	1.31	2.26	13.84	0.64	Moderate
161	Botswana	BWA_3_06kn	Serowe	72.7	3.6	22.6	1.2	3287	160	1007	43	4663	166	0	2	22	6	29	0	1.25	2.16	13.08	0.65	Moderate
162	Botswana	BWA_3_07cw	Tutume	77.0	2.8	19.1	1.2	3737	136	904	45	5089	266	0	2	22	7	30	0	1.39	2.40	14.82	0.63	Moderate



**PREP-IT WORKSHOPS AND
ONGOING SUPPORT**

What do countries use PrEP–it for?

Setting National PrEP Targets

PrEP–it is used by countries to establish national targets for PrEP usage. These targets are typically set for specific time periods and are based on epidemiological data, population needs, and programmatic goals.

Quantifying Resource Needs

PrEP–it assists countries in quantifying the resources required to meet their national PrEP targets. This includes estimating the amount of PrEP products, diagnostics, financial, and other resources needed to implement the program effectively.

Data-Driven Decision-Making

PrEP–it relies on data inputs and modeling to support decision-making. Countries use it to make evidence-based decisions regarding the allocation of resources, prioritization of populations, and program implementation strategies.

Alignment with Global Fund and PEPFAR Requirements

Many countries rely on funding from organizations like the Global Fund and PEPFAR for their HIV prevention programs. PrEP–it helps countries align their PrEP targets and plans with the requirements and priorities of these funding agencies, increasing their chances of securing financial support.

Optimizing HIV Prevention Strategies

PrEP–it aids countries in optimizing their HIV prevention strategies by allowing them to assess the cost-effectiveness of different allocation scenarios and to make adjustments accordingly.

Improving Data Quality

To use PrEP–it effectively, countries often work on improving the quality and accuracy of their program data. This leads to better monitoring and evaluation of PrEP programs.

Monitoring Progress

Countries use PrEP–it to monitor progress toward their PrEP targets over time. By comparing actual results to established targets, they can identify gaps and adjust their strategies as needed.

Adapting to Changing Epidemiological Trends

PrEP–it allows countries to adapt their PrEP programs in response to changing epidemiological trends and emerging challenges in the HIV epidemic.



Use of PrEP-it in MOSAIC



The Global Fund in the Philippines received support from the MOSAIC Avenir team on how to use PrEP-it to establish targets aligned with Global Fund indicators.

The Mali team used PrEP-it for setting targets for their Global Fund funding request.

The Senegal team used PrEP-it to set targets for their Global Fund funding request.

Ghana used PrEP-it for national PrEP target-setting following participation in a UNAIDS/MOSAIC workshop.

PrEP-it was used to support quantification of PrEP commodities for targets set by the DRC in their funding submission to the Global Fund.

The MOSAIC team supported Zambia to set its first national PrEP targets using PrEP-it.

Uganda's Ministry of Health used PrEP-it to set epidemiologically and cost-relevant PrEP targets for specific years.

Counties in Kenya used PrEP-it 2.0 to set their oral PrEP targets for specific years.

USAID Mission staff in Tanzania used PrEP-it for COP (Country Operational Plan) planning.

The Malawi Ministry of Health used PrEP-it to supplement national PEPFAR and Global Fund PrEP target-setting, planning, and quantification.

Mozambique used PrEP-it for national PrEP target-setting and supporting future trainings.

PEPFAR Eswatini used PrEP-it to set targets for COP 23 and their Global Fund application.

Jhpiego Lesotho used PrEP-it to set targets for their community-based PrEP delivery program (KHANYA) for specific fiscal years.

MOSAIC-supported policy or programmatic change using PrEP-it

PrEP-it workshop attendees

PrEP-it workshops

Collaboration between UNAIDS and USAID MOSAIC project

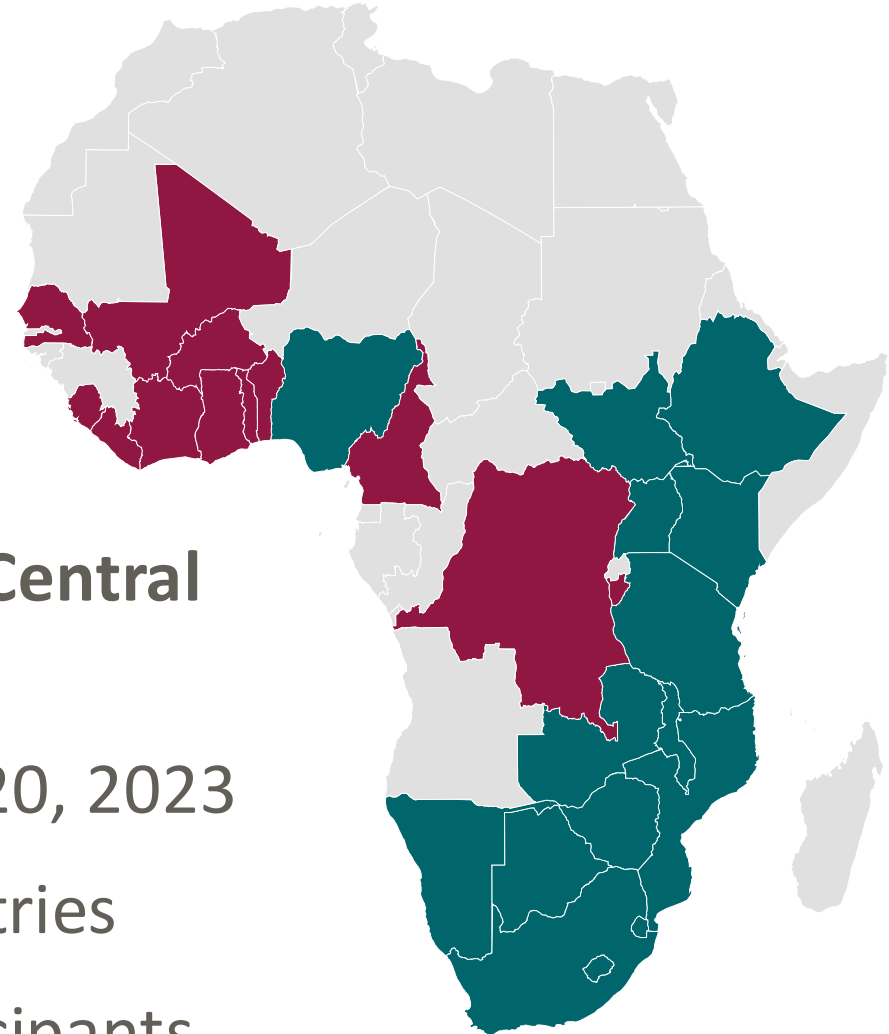
- Participants learned how to use the tool, shared experiences, and set draft PrEP targets

East and Southern Africa

- Aug 22 – Sept 1, 2022
- 2 1-week workshops
- 15 countries
- 103 participants

West and Central Africa

- Jan 16 -20, 2023
- 12 countries
- 93 participants



PrEP-it support site via Mighty Networks

The **PrEP-it Community of Practice** is a platform for shared learning, progress, and collaboration on the use of PrEP-it

<https://prep-it-community-of-practice.mn.co/>

- Create a profile
- Explore PrEP-it topics
- Ask and answer questions
- Engage in discussions
- Access additional resources

Additional PrEP-it resources

- The tool contains built-in Help functions and additional resources
- Brief intro video:
https://www.youtube.com/watch?v=ew_Yq0Rs_II
- For questions, email PrEPitHelp@AvenirHealth.org
- Supporting materials can be found at:
<https://www.prepwatch.org/resource/prep-it>
 - *Online training videos coming soon!*



KEY CONCEPTS FOR PREP TARGET SETTING

Why do we set targets?

So we can
plan our
program

To apply for
funding

We want to
ensure our
program will
have the
desired
impact on HIV

We need to
know how
many human
resources we
will need

We need to be
able to
measure our
progress
towards a
goal

We need to
know what it
will cost

We need to
know how
much
commodities
to procure

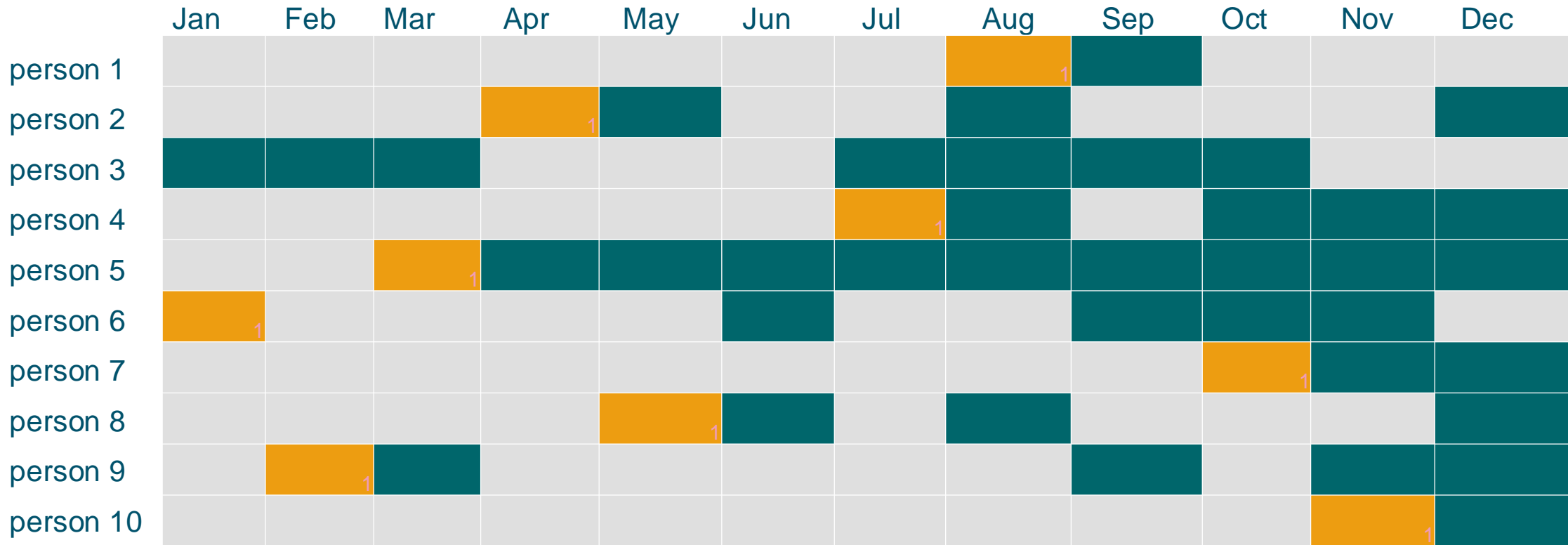
Target-setting for ART and male circumcision (VMMC)



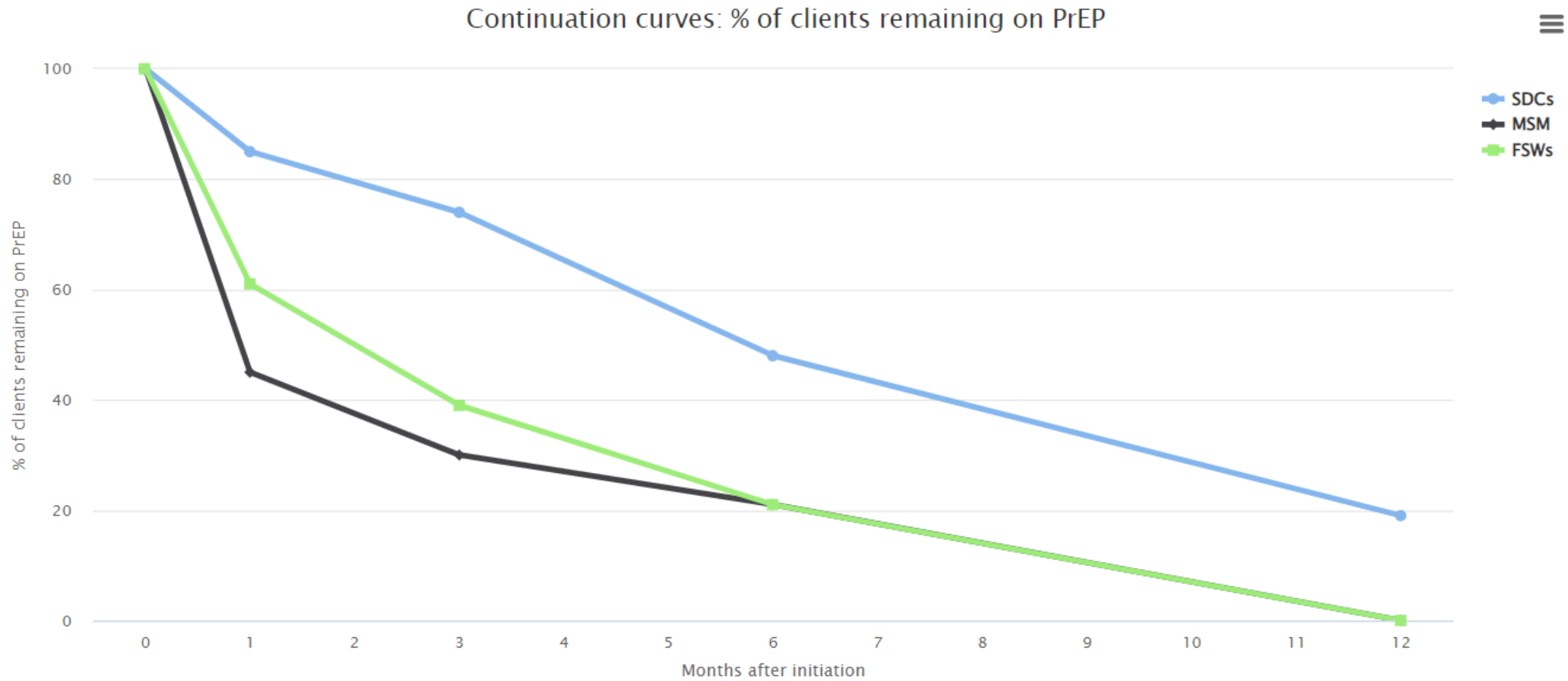
Defining the size of the population in need

- ART – everyone with HIV
- VMMC – all uncircumcised adult males in priority countries [within specified age group]
- PrEP – all “at substantial risk” of HIV...?

PrEP use is dynamic and can be discontinuous



Continuation rates




Conceptualizing targets for PrEP

- Global AIDS Targets: expressed as “person-years” of PrEP
- PEPFAR: targets for PrEP_NEW and PrEP_CT (formerly PrEP_CURR)
- Ministry of Health: how to define targets for an implementation plan?

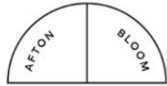


Targets for program planners

- Number of new PrEP users
 - Coverage of each priority population (over time or at a given point in time)
 - Total amount of product use throughout the planning period (“person-years” of PrEP)
- 

ACKNOWLEDGMENTS

Slides prepared by Katharine Kripke, Nicole Bellows, and Kate Galloway.



MOSAIC is made possible by the generous support of the American people through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID) cooperative agreement 7200AA21CA00011. The contents of this presentation are the responsibility of MOSAIC and do not necessarily reflect the views of PEPFAR, USAID, or the U.S. Government.

Photo Credit: MOSAIC Consortium



Product introduction analysis, and policy, and monitoring and evaluation templates

TECHNICAL TOOLS ORIENTATION
AFRICA REGIONAL PREP WORKSHOP DAY 4
SEPTEMBER 12, 2024





Session Overview

Template Guidelines for Oral Pre-Exposure Prophylaxis, PrEP Ring, and CAB PrEP (15 minutes)

New PrEP Product Implementation Plan Template (15 minutes)

Monitoring and Evaluation Tools (30 mins)



1

TEMPLATE GUIDELINES

Aim

The intent of MOSAIC's **template guidelines for PrEP** is to provide adaptable guidelines to support the development and adoption of national guidelines that align with WHO PrEP recommendations and guidance, including those for oral PrEP, the PrEP ring, and CAB PrEP.

Available in English, French, and Spanish.

Template Guidelines for Oral Pre-Exposure Prophylaxis, PrEP Ring, and CAB PrEP

Updated on October 2024

The intent of this document is to provide adaptable guidelines to support the development and adoption of national guidelines that align with World Health Organization (WHO) pre-exposure prophylaxis (PrEP) recommendations and guidance, including those for tenofovir disoproxil fumarate (TDF)-based oral PrEP, the monthly dapivirine vaginal ring (“PrEP ring” or “the ring”), and injectable cabotegravir (CAB PrEP). The document includes prompts for national-level consideration during the guideline adaptation process. Areas specifically requiring national updates are indicated in **red font**; sections for additional consideration by policymakers, shown in green boxes, are informed by regulatory bodies, available product information, and country-level insights. Once a decision has been made about the considerations in green boxes, text can be added, and the green boxes can be removed.

The content of this document was sourced largely from:

- [Provider Module for Oral and Long-acting PrEP](#) from WHO (July 2024)
- [Australian Product Information for Apretude](#) (August 2022)
- [Updated Differentiated and Simplified Pre-exposure Prophylaxis for HIV Prevention](#) from WHO (July 2022)
- [Guidelines on Long-Acting Injectable Cabotegravir for HIV Prevention](#) from WHO (July 2022)
- [Consolidated Guidelines on HIV Viral Hepatitis and STI Prevention, Diagnosis, Treatment, and Care for Key Populations](#) from WHO (July 2022)
- [United States Food and Drug Administration Apretude Label](#) (December 2021)
- [Consolidated Guidelines on HIV Prevention, Testing, Treatment, Service Delivery and Monitoring: Recommendations for a Public Health Approach](#) from WHO (July 2021)
- [Summary of Product Characteristics for PrEP Ring](#) from the European Medicines Agency (April 2021)
- [Updated Recommendations on HIV Prevention, Infant Diagnosis, Antiretroviral Initiation and Monitoring Guidelines](#) from WHO (March 2021)

How to use the template guidelines

- Areas specifically requiring national updates are indicated in **red font**

Approved Drugs for Oral PrEP

In **[country]**, either tenofovir TDF 300 mg/FTC 200 mg or TDF 300 mg/lamivudine (3TC) 300 mg can be used for oral PrEP. The current preferred drug for oral PrEP is **[TDF/FTC or TDF/3TC]**.

- Sections for additional consideration by policymakers, shown in **green boxes**, are informed by regulatory bodies, available product information, and country-level insights. Once a decision has been made about the considerations in green boxes, text can be added, and the green boxes can be removed

For consideration: The process for switching between PrEP methods will depend on the methods being used. When advising clients on switching between PrEP methods, providers should use their best clinical judgement, considering the time to effectiveness/waning effectiveness of each PrEP method after discontinuation, coverage of previous and future potential exposures to HIV, and client preferences.



Intended audience

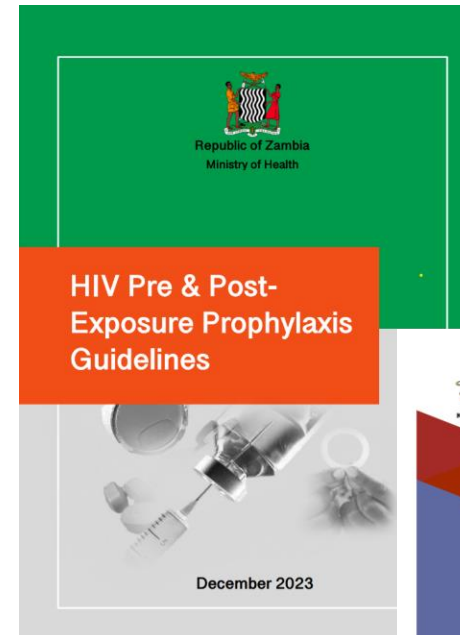
It's an adaptable template that can be used by **policymakers, technical working groups, and relevant stakeholders** involved in national guideline development or adaptation.

MOSAIC Countries

- Eswatini, Kenya, Lesotho, South Africa, Uganda, Zambia, Nigeria, Zimbabwe

Non-MOSAIC countries

- Côte d'Ivoire, Ghana, Liberia, Malawi, Sudan



Breaking News! Key Updates

The template guidelines are updated as new evidence on PrEP emerges or as guidance changes. Recent changes include:

- Addition of **new evidence on safety of CAB PrEP during pregnancy**
- Shifts in terminology around **dosing regimens for oral PrEP**
- New emphasis on **rapid PEP provision**
- Inclusion of **guidance on switching** between PrEP methods



The **third edition** of the template guidelines is now available.

Oral PrEP dosing regimens

Version 2

- Using event-driven PrEP (ED PrEP) or 2+1+1 terminology
- Distinction made around type of dosing option

Examples:

There are two dosing regimens for TDF-based oral PrEP that vary based on individual characteristics, type of exposure, and circumstances

*Oral PrEP may be offered as a **daily regimen** to prevent HIV acquisition during all potential exposures for all populations. It may also be offered for **single or infrequent event use** for all potential sexual exposures for people assigned male at birth not taking exogenous estradiol-based hormones.*

Version 3 Update

- Using daily or single or infrequent event use terminology, **no longer using ED-PrEP language**
- Distinction made based on client characteristics

Source: WHO. Implementation tool for pre-exposure prophylaxis of HIV infection: provider module for oral and long-acting PrEP [Internet]. Geneva: WHO; 2024. Available from:

<https://www.who.int/publications/i/item/9789240097230>

CAB PrEP during pregnancy

Version 2

- Data are limited but suggest CAB PrEP may be safe during pregnancy

Version 3 Update

- CAB PrEP is well tolerated in pregnant women
- Consistent maternal and pregnancy outcomes across study participants and real-world background rates
- Pharmacokinetics suggest concentrations decrease over time in pregnancy but remain above protective levels

Sources:

1. Delaney-Moretlwe S, Voldal E, Saidi F, Stranix-Chibanda L, Bhondai-Mhuri M, et al. Initial evaluation of injectable cabotegravir safety during pregnancy in the HPTN 084 open-label extension. [abstract] 25th International AIDS Conference. 2024 July 22-26; Munich, Germany. Available from: <https://programme.aids2024.org/Abstract/Abstract/?abstractid=12420>
2. Marzinke M, Voldal E, Hanscom B, Guo X, Piwowar-Manning E, et al. Evaluation of long-acting cabotegravir pharmacokinetics during pregnancy: a sub-study analysis of the HPTN 084 open label extension study. [abstract]. 25th International AIDS Conference. 2024 July 22-26; Munich, Germany. Available from: <https://programme.aids2024.org/Abstract/Abstract/?abstractid=12032>

Rapid PEP provision

Version 2

- If a client reports an exposure to HIV within the past 72 hours, screen for PEP indication instead of PrEP and provide PEP according to national guidelines.

Version 3 Update

- Additional text: PEP should be offered as early as possible, ideally within 24 hours but not later than 72 hours.

Sources: WHO. Guidelines for HIV post-exposure prophylaxis [Internet]. Geneva: WHO; 2024. Available from: <https://www.who.int/publications/i/item/9789240095137#:~:text=PEP%20is%20most%20effective%20when,28%2Dday%20prescription%20for%20PEP.>

Guidance on switching

Version 2

- Language for consideration on the process of switching without suggested instructions for switching between PrEP methods

Version 3

- Details on considerations for before switching between methods and a table outlining instructions for switching between methods

From	To	Instructions
Oral PrEP	PrEP ring	<i>PrEP ring takes approximately 24 hours to become maximally effective</i> Insert PrEP ring and continue to take oral PrEP for seven days after last exposure or at least 24 hours after ring insertion, whichever is longer.
	CAB PrEP	<i>CAB PrEP takes approximately seven days to become maximally effective</i> For clients using a daily regimen: Administer CAB PrEP initiation injection 1 and continue taking oral PrEP for seven days. For clients using single or infrequent event regimen: Administer CAB PrEP initiation injection 1 and continue taking a tablet daily for two days after last exposure. Client can use additional HIV prevention methods (e.g. condoms) or restart single or infrequent regimen if they have additional sexual exposure

2

IMPLEMENTATION PLAN TEMPLATE

Aim

The intent of [this document](#) is to provide a template that countries can adapt to outline their approach in rolling out new PrEP products.

This template is designed to be **adaptable**, enabling the incorporation of pertinent contents that align with country-specific requirements.

New PrEP product implementation plan template

INTRODUCTION TO THE TEMPLATE:

The intent of this document is to provide an adaptable template that can be utilized by national governments, their ministries, and relevant stakeholders involved in rolling out new pre-exposure prophylaxis (PrEP) products as they come into market through a programmatic approach. This implementation plan template contains vital components of the value chain and outlines considerations for countries wishing to layer on these new PrEP products in existing PrEP programs. Please note that countries wishing to introduce new PrEP products through pilot or demonstration studies will require a different approach, including development of a research protocol. An example of an introduction study with associated materials, including the research protocol, can be found [here](#).

This template is designed to be adaptable, enabling the incorporation of pertinent content that aligns with country-specific requirements. The document incorporates prompts that guide national-level consideration during the adaptation of the template. Suggestions on what to include in specific sections are provided within brackets in each section, and blue boxes provide considerations or information that countries may choose to incorporate. Once relevant text has been included in the respective subcategories, the text within the brackets and blue boxes can be removed.

This document was developed by MOSAIC (Maximizing Options to Advance Informed Choice for HIV Prevention) in close collaboration with the U.S. Agency for International Development (USAID). It is made possible by the generous support of the American people through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and USAID. The contents are the responsibility of the MOSAIC project and do not necessarily reflect the views of PEPFAR, USAID, or the U.S. Government. MOSAIC is a global cooperative agreement (Cooperative Agreement 7200AA21CA00011) led by FHI 360, with core partners LVCT Health, Pangaia Zimbabwe AIDS Trust, Wits Reproductive Health and HIV Institute, Jhpiego, and AVAC.



How to use the implementation plan template

- The document incorporates **prompts that guide national-level consideration** during the adaptation of the template.
- Suggestions on what to include in specific sections are **provided within brackets** in each section, and blue boxes provide considerations or information that countries may choose to incorporate.
- It contains vital components of the value chain and outlines considerations for countries wishing to layer on these new PrEP products in existing PrEP programs.

IMPLEMENTATION FRAMEWORK

[This section outlines the vision, goal, objectives and expected activities needed to introduce new PrEP products within existing PrEP programs. This introductory section can be adapted as needed to include or exclude any elements as needed. Describe these objectives and outline how they will be implemented at national and sub-national levels. Describe how various components of the new PrEP product introduction will be implemented e.g. policy updates, human resources, service delivery, supply chain management, monitoring and evaluation, pharmacovigilance and resistance monitoring, demand generation, and financing.]

Vision:

[Target population] at increased likelihood of exposure to HIV have choices to prevent HIV infection.

Goal:

[Country] has set a national goal to achieve *[insert national goal]* by *[end date of national goal]*. The goal of this framework is to provide guidance and strategic direction to achieve these results and thus accelerate the impact of combination HIV prevention strategy.

Implementation objectives:

[These should be focused and prioritized approaches that are informed by evidence from evaluation of programmatic gaps affecting achievement of national or sub-national goals. These could be identified through data triangulation, situational analyses, or other assessments.]

Illustrative examples include:

- To increase awareness of *[insert PrEP method]* among *[insert population]* in need of HIV prevention services, with a focus on *[insert age bands or other subcategory of interest]*.



Intended audience

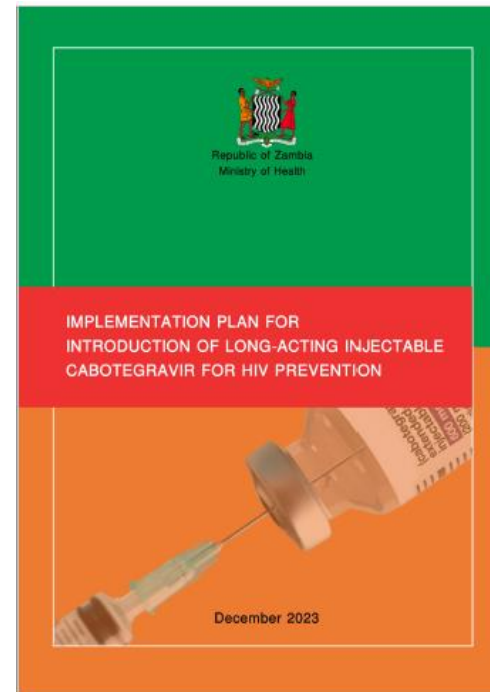
It's an adaptable template can be utilized by **national governments, their ministries,** and **relevant stakeholders** involved in rolling out new PrEP products



Countries that have adapted this tool:

- Zambia – [CAB LA Implementation Plan for Zambia](#)
- Shared with Zimbabwe, Uganda, Eswatini, Namibia, Nigeria and across MOSAIC
- Also shared with EpiC, GF

Please note that countries wishing to introduce new PrEP products through pilot or demonstration studies will require a different approach, including development of a research protocol.



Template Contents

Background

Situation Analysis

Implementation
Framework

Budgeting and
financing

Appendices (e.g.
Implementation Plan
timelines/Gantt



Template Contents

- The HIV epidemic in [**insert country**]
- HIV prevention in [**insert country**]
- Global prevention guidance
- PrEP product overview
- PrEP product summary of key evidence

Background



Template Content: Situation Analysis

Situation Analysis

- Policymakers & relevant stakeholders supporting policy development could consider conducting a Value Chain Situation Analysis (VCSA) as a way of:
 - ✓ Assessing the existing situation of PrEP programming in the country and
 - ✓ Establishing a common understanding of what is needed to effectively introduce the new product(s).
 - ✓ Identifying opportunities and gaps that should inform planning for introduction and scale up of these products
- *[Insert the methodology for the PrEP value chain situation analysis here (if conducted), and what the strengths and barriers were across the value chain.]*

Supporting Templates

[PrEP ring interview guides](#)

[VCSA templates,](#)

[Interview question bank,](#)

[CAB PrEP overview guide](#)

Template Contents: Implementation framework

Implementation Framework

This section outlines the vision, goal, objectives and expected activities needed to introduce new PrEP products within existing PrEP programs. Here, countries/teams are at liberty to expand objectives further by describing how the implementation will be done at the national and sub-national levels.

Topic area	Resources
Rollout plans and targets	<i>Consider use of PrEP-it</i>
Policy environment	<i>Guideline Development [MOSAIC Clinical Guideline Template]</i>
Human resources	<i>Cadre of HCW/SPs; Provider training, Monitoring & Supervision</i>
Service delivery	<i>Service delivery model; Site readiness; Counseling components; Packages of services offered with PrEP; Integration with other services; Key & priority populations</i> <i>Possible tools that could help - HIV Prevention Ambassador Training Package and Toolkit, the HIV Prevention User Journey Tool, and the choice counselling provider training</i>
Supply chain management	<i>Product profile; other commodities associated with PrEP implementation; Product registration; Commodity forecasting/procurement processes & Inventory management</i> <i>Possible tools - PrEP-it; for forecasting</i>
Monitoring and evaluation	<i>Indicators for PrEP, M&E training</i>
Pharmacovigilance and Resistance Monitoring	
Demand generation	<i>Development of a robust communication strategy is encouraged</i> <i>Tools that could be leveraged - PrEP Communications Accelerator and the PrEP Category Positioning Strategy</i>

Template Contents: Budgeting and financing

Budgeting and financing

[Describe funding for PrEP overall and funding sources for the new PrEP products and associated materials. Costs will be based on the country plan for rollout and the targets.

Costs should include both site-level costs, which can easily be estimated [PrEP-it](#) using targets have been set using that tool, and above-site level costs.]

Template Contents: Appendices



[Include any additional documents or data that will be used for PrEP implementation, such as job aids, demand creation materials, etc.]

Appendix 1. Implementation Plan Timeline

	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Policy environment												
Activity 1												
Activity 2												
Activity 3												
Human Resources for Health												
Activity 1												
Activity 2												
Activity 3												
Service Delivery												




Discussion



Reflect on the process of using these tools - are there any successes or lessons learned to share?

Who is involved in policy change discussions? Are there key stakeholders that could be included that have not been before or should be considered with new product introduction?

What is the frequency of policy adaptation in country? Are there strategies that have worked when policies need changing sooner than their scheduled updates, given new product introduction?



ACKNOWLEDGMENTS

Thank you to Philip Imohi and Katie Williams from FHI 360 for the creation of this deck.



MOSAIC is made possible by the generous support of the American people through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID) cooperative agreement 7200AA21CA00011. The contents of this presentation are the responsibility of MOSAIC and do not necessarily reflect the views of PEPFAR, USAID, or the U.S. Government.

Photo Credit: MOSAIC Consortium, iTAP Media, Morgan Garcia



Data collection tools for PrEP M&E

COMPANION TOOLS FOR MOSAIC'S PROPOSED PREP INDICATORS



Preface



M&E Working
Group convened
2020 – 2023



Proposed indicators
(PrEP Dispensed,
PrEP Visits, PYP)



Sample data
collection tools for
proposed indicators



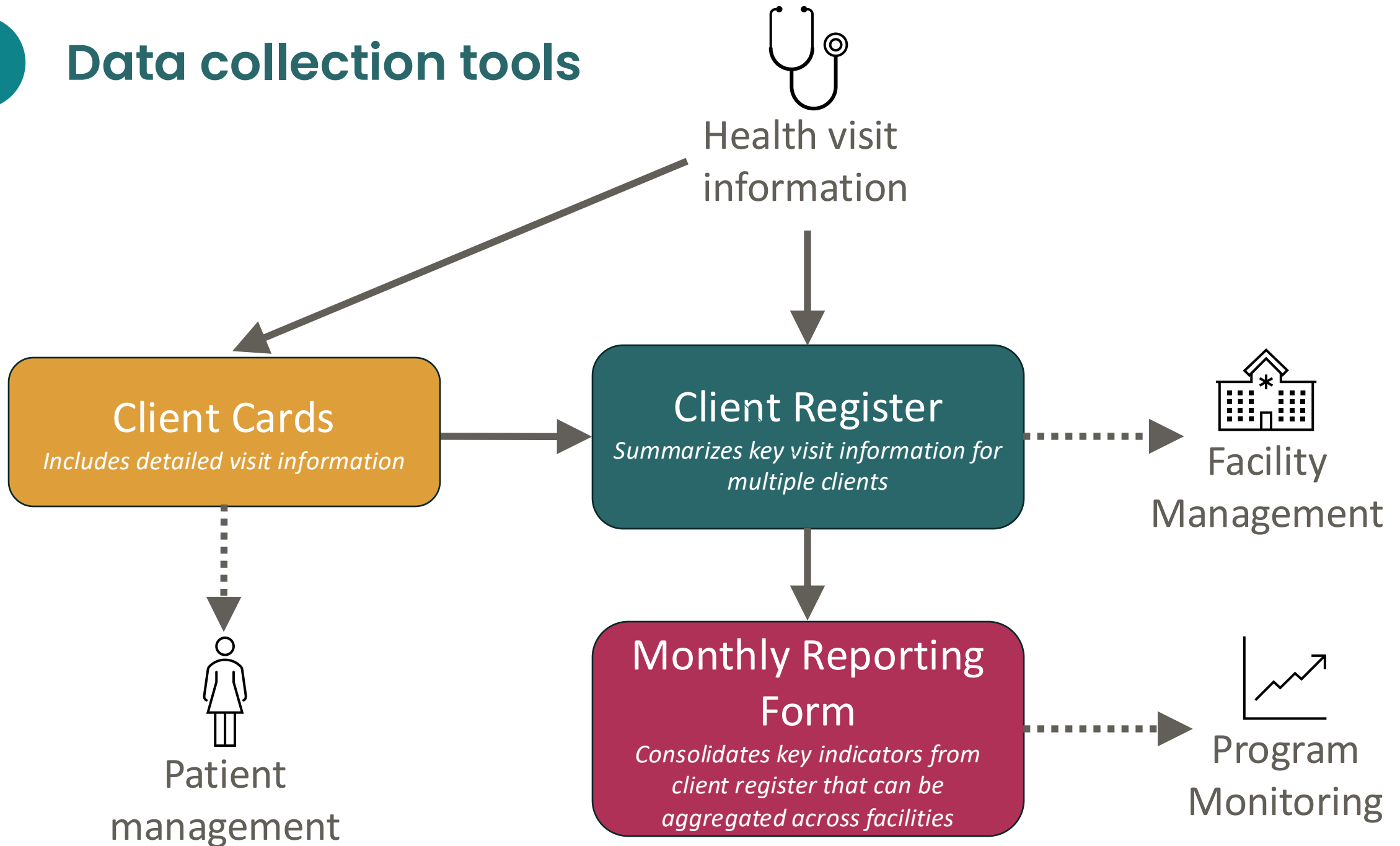


Outline

1. Data collection tools
2. Driving principles
3. Client register
4. Monthly summary form



Data collection tools



Data collection tools

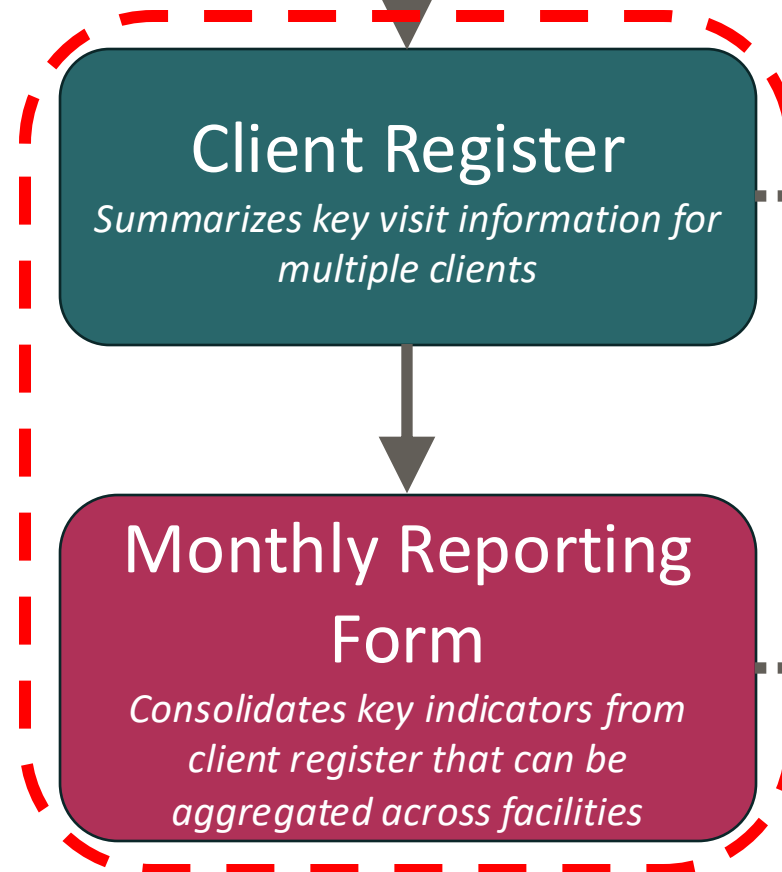


Health visit information

Client Cards
Includes detailed visit information

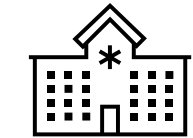


Patient management



Client Register
Summarizes key visit information for multiple clients

Monthly Reporting Form
Consolidates key indicators from client register that can be aggregated across facilities



Facility Management



Program Monitoring



Driving principles

The tools were designed to...

- Collect PrEP Visits and PrEP Dispensed
- Track multiple PrEP methods
- Simplify data collection
- Uphold client privacy
- Adapt to context-specific needs



1

CLIENT REGISTER

Client register: format

Longitudinal format

	Visit 1	Visit 2	...
Client A			
Client B			
Client C			
...			

Visit-based format

Client visit 1			
Client visit 2			
Client visit 3			
...			

Client register: format

Longitudinal format

- Each row represents a unique client
- Multiple client visits per row
- Difficult to locate clients in register
- Difficult to aggregate over time periods
- Most common format

Visit-based format

- Each row represents a unique client *visit*
- Rows are chronological with one visit per row
- No need to locate client's last visit
- Easy to aggregate over time periods

Client register: format

To simplify data collection...

Register has visit-based structure

Pre-Exposure Prophylaxis (PrEP) Client Register

Facility Name :										Month:		Year								
Date	Client ID Number	Age (years)	Sex			Key populations client? (Y/N)	If Key Population, note Population Category See codes below	PrEP Visit Categorization					PrEP Visit Details		PrEP Product and Volume			Visit Outcomes		
			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> Other			<input type="checkbox"/> Y	<input type="checkbox"/> N	Visit Type (mark the type that applies)					HIV Test Date	HIV Test Result: (R/NR/Inc)	PrEP Method Prescribed and/or Dispensed See codes below	ED PrEP (Y/N)	# Months Prescribed 1, 2, 3, 4, ...	# Months Dispensed (if available) 1, 2, 3, 4, ...
								Initiation Initiation : first time EVER on ANY form of PrEP	New Method Initiation: First time EVER on this method	Refill	Restart	No PrEP Provided								
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
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Key Population Category: 1 = Prefer not to Answer / 2 = PWID / 3 = MSM / 4 = TG / 5 = F5W / 6 = Person in Prison or other closed settings / 7 = Other (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

PrEP Method Offered / Current: 1a = Oral PrEP (1a = TDF/FTC; 1b = TDF/3TC; 1c = TDF) / 2 = PrEP ring / 3 = CAB PrEP (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

Stopped PrEP reasons: 1 = Tested HIV+ / 2 = No longer at substantial risk / 3 = side effects / 4 = other reason (specify) (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

Client register: data fields

To simplify data collection...


Data fields represent the **minimum** data required to report on PrEP programs

Pre-Exposure Prophylaxis (PrEP) Client Register

Facility Name :											Month:		Year					
Date	Client ID Number	Population Information				PrEP Visit Categorization					PrEP Visit Details		PrEP Product and Volume			Visit Outcomes		
		Age (years)	Sex			Key populations client? (Y/N)	Visit Type (mark the type that applies)					HIV Test Date	HIV Test Result: (R/NR/Inc)	PrEP Method Prescribed and/or Dispensed (See codes below)	ED PrEP (Y/N)	# Months Prescribed (1, 2, 3, 4, ...)	# Months Dispensed (if available) (1, 2, 3, 4, ...)	Client Stopped PrEP (See reason codes below)
			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> Other	<input type="checkbox"/> Y	<input type="checkbox"/> N	Initiation	Return									
								Initiation : first time EVER on ANY form of PrEP	New Method Initiation: First time EVER on this method	Refill	Restart	No PrEP Provided						
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Client register: optional data fields

- Optional data fields not included in the template:
 - Other services accessed at visit
 - HIV test type
 - Creatinine testing
 - STI test results
- 

Client register: coding system

Pre-Exposure Prophylaxis (PrEP) Client Register

Facility Name :							Month:	Year											
Population Information							PrEP Visit Categorization			PrEP Visit Details		PrEP Product and Volume		Visit Outcomes					
Date	Client ID Number	Age (years)	Sex			Key populations client? (Y/N)	Visit Type (mark the type that applies)					HIV Test Date	HIV Test Result: (R/NR/Inc)	PrEP Method Prescribed and/or Dispensed See codes below	ED PrEP (Y/N)	# Months Prescribed 1, 2, 3, 4, ...	# Months Dispensed (if available) 1, 2, 3, 4, ...	Client Stopped PrEP See reason codes below	If Client Tested Positive for HIV, was Client Referred for Treatment? (Y / N)
							Initiation		Return										
			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> Other	<input type="checkbox"/> Y <input type="checkbox"/> N													
			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> Other	<input type="checkbox"/> Y <input type="checkbox"/> N													
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Total this Page																			
Total by PrEP Method (Column T)	Total Oral PrEP																		
	Total PrEP ring																		
	Total CAB PrEP																		

Key Population Category: 1 = Prefer not to Answer / 2 = PWID / 3 = MSM / 4 = TG / 5 = FSW / 6 = Person in Prison or other closed settings / 8 = Other (NOTE THESE ARE JUST EXAMPLE CATEGORIES = CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

PrEP Method Offered / Current: 1 = Oral PrEP (1a = TDF/FTC; 1b = TDF/3TC; 1c = TDF) / 2 = PrEP ring / 3 = CAB PrEP / 4 = / 5 =

Stopped PrEP reasons: 1 = Tested HIV+ / 2 = No longer at substantial risk / 3 = side effects / 4 = other reason (specify) (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

Client register: client privacy

To uphold client privacy...

Client ID numbers are used instead of client names and other personal identifiers

Pre-Exposure Prophylaxis (PrEP) Client Register

Facility Name :		Month:		Year																
Population Information						PrEP Visit Categorization				PrEP Visit Details		PrEP Product and Volume			Visit Outcomes					
Date	Client ID Number	Age (years)	Sex			Key populations client? (Y/N)	If Key Population, note Population Category See codes below	Visit Type (mark the type that applies)					HIV Test Date	HIV Test Result: (R/NR/Inc)	PrEP Method Prescribed and/or Dispensed See codes below	ED PrEP (Y/N)	# Months Prescribed 1, 2, 3, 4, ...	# Months Dispensed (if available) 1, 2, 3, 4, ...	Client Stopped PrEP See reason codes below	If Client Tested Positive for HIV, was Client Referred for Treatment? (Y / N)
			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> Other			<input type="checkbox"/> Y	<input type="checkbox"/> N	Initiation	Return									
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Key Population Category : 1 = Prefer not to Answer / 2 = PWID / 3 = MSM / 4 = TG / 5 = FSW / 6 = Person in Prison or other closed settings / 7 = Other (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

PrEP Method Offered / Current : 1 = Oral PrEP (1a = TDF/FTC ; 1b = TDF/3TC; 1c = TDF) / 2 = PrEP ring / 3 = CAB PrEP (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

Stopped PrEP reasons: 1 = Tested HIV+ / 2 = No longer at substantial risk / 3 = side effects / 4 = other reason (specify) (NOTE THESE ARE JUST EXAMPLE CATEGORIES - CATEGORIES CAN BE ADDED/REMOVED/EDITED TO MEET COUNTRY NEEDS)

Client register: proposed indicators

To collect PrEP Visits and PrEP Dispensed...

Summary section gives snapshot of these indicators

Pre-Exposure Prophylaxis (PrEP) Client Register

Facility Name :											Month:		Year							
Date	Client ID Number	Population Information					PrEP Visit Categorization					PrEP Visit Details		PrEP Product and Volume			Visit Outcomes			
		Age (years)	Sex			Key populations client? (Y/N)	If Key Population, note Population Category See codes below	Visit Type (mark the type that applies)					HIV Test Date	HIV Test Result: (R/NR/Inc)	PrEP Method Prescribed and/or Dispensed See codes below	ED PrEP (Y/N)	# Months Prescribed 1, 2, 3, 4, ...	# Months Dispensed (if available) 1, 2, 3, 4, ...	Client Stopped PrEP See reason codes below	If Client Tested Positive for HIV, was Client Referred for Treatment? (Y / N)
			M	F	Other			Initiation	Return			No PrEP Provided								
						Initiation : first time EVER on ANY form of PrEP	New Method Initiation: First time EVER on this method	Refill	Restart											
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MONTHLY SUMMARY FORM



Monthly summary form: demo

(open in separate window)



MEET THE TEAM



JESSICA WILLIAMSON
RESEARCH ANALYST
Avenir Health



KATHARINE KRIPKE
SENIOR HEALTH POLICY
ANALYST
Avenir Health



JOHN DAVIS
GLOBAL HEALTH ASSOCIATE
Avenir Health



ACKNOWLEDGMENTS



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