Project Brief: Hub and Spoke Planning Grant

Full Title of Study/ Programme	Implementation Experiment to facilitate the creation of an appropriate and receptive environment for effective use of existing and new HIV prevention products to maximize their impact as they become available for AGYW in Gauteng province, South Africa
Technical Focus Area/ Key Words	HIV prevention, adolescent girls, young women, PrEP, SRH, HIV Prevention, South Africa
Rationale	The HIV epidemic in South Africa has evolved from a state of emergency with high mortality, to one showing the benefits of a huge expansion of treatment services and wide coverage. The epidemic is not homogenous, disproportionately affecting Adolescent Girls and Young Women (AGYW) and key populations such as sex workers and men who have sex with men. Annually, over a third of all new HIV infections in South Africa occur in youth (age 15-29), with young women three times more likely to be infected than their male counterparts. HIV transmission vulnerability and dynamics vary depending on age and sex so effective prevention and treatment interventions need to be age and sex responsive. Oral PrEP has been made available in South Africa since 2016 targeting priority populations, more recently including AGYW. National guidelines highlight the need for a comprehensive package of SRHR services for AGYW and data from ongoing PrEP programs show that AGYW have multiple service needs, a high proportion being in school or college. Existing data highlight significant challenges to SRHR service access and to daily pill taking; these are yet to be overcome. New longer acting HIV prevention options may result in better uptake and continuation and overcome some barriers to effective use. In addition to individual client level barriers to optimal uptake, these programs also highlight the need to strengthen: 1) the service delivery platform; 2) strategies for demand creation ("attract, engage and enable"), 3) the provision of youth friendly services and the delivery of a full SRHR package within which HIV biomedical prevention technologies could be delivered. Oral PrEP scale- up is currently underway nationally but slowed down significantly due to the COVID-19 pandemic. However; the emergence of COVID-19 pandemic pushed programs to adapt rapidly by strengthening linkages with private and NGO service providers, using online and decentralized approaches as well as the use of digital innovations, remote support systems and self-care to ensure a quick rebound in oral PrEP uptake. The evidence-base on these innovations is sparse and will be strengthened through this proposed research. Furthermore, the recent European Medical

	Association (EMA) approval of newer PrEP modalities such as the Dapivirine intravaginal ring (DPV) and the encouraging clinical trial results on injectable long acting Cabotegravir (LA CAB) which is in advanced stages of the introductory and trial pipeline present opportunities for expanded choice and reach
Primary Objectives	• Objective 1: To determine the acceptability and beneficiary preferences and pathways of existing and new HIV prevention and SRH service delivery models by analyzing routine monitoring, evaluation data and existing research on all aspects of various service delivery models. Specifically: a) examine the acceptability of current demand and uptake pathways for existing SRHR products including HIV testing and prevention; b) examine current demand creations strategies and identify client patterns and preferences of interacting with demand creation content that lead to uptake and continuation • Objective 2: Determine best practices in SRH delivery and COVID-responsive programming to further leverage for innovations. • Objective 3: Examine the acceptability of proposed health service innovations with potential end users and implementers • Objective 4: Conduct a stakeholder consultation during the design phase to ensure the development of a joint implementation plan. This will ensure that the mechanisms and activities identified for implementation have been agreed to upfront through a joint process thereby leading to better buy-in and approval from government. • Objective 5: Design, develop and pilot test the range of additional spoke and UPIs, digital and decentralized, self-care options. • Objective 6: Identify data needs and M&E systems for evaluation.
Primary Endpoint/ Outcome	Whilst leveraging and complementing existing innovative HIV prevention programs in the chosen urban area, the aim of the planning grant is to develop an informed implementation plan which outlines the steps for the delivery of an effective and efficient PrEP delivery model and pilot test it as part of a future PrEP implementation experiment in Gauteng.
Secondary Endpoint/ Outcome	Not applicable.
Study Design	The grant will gather evidence on the most feasible, acceptable, and effective implementation strategies for demonstrating integration of SRH services with HIV prevention; particularly PrEP. Outstanding questions on acceptability, feasibility, cost, and uptake remain and until such questions are addressed, access to SRHR and social services for adolescents and young people will remain a gap in a time where the growing incidence of HIV remain a concern. Further,

	as technologies such as DPV and LA CAB will be new interventions in the SRH service landscape, there is a lack of locally relevant public health evidence regarding acceptability, demand, uptake, barriers and facilitators of use, as well as the most effective service delivery models to introduce and sustain public delivery of these interventions. This study will therefore gather evidence (through analysis of research and routine monitoring data from current prevention interventions and new information gathered through a set of client surveys) to answer outstanding questions. Key questions to be answered - the planning grant will establish baseline data levels and inform the design of the delivery models and evaluation methods: • Client preferences for different HIV prevention products (as well as contraception, prevention of GBV, STI diagnostic and treatment) in real life settings to inform positioning of new products within existing combination prevention • Current coverage and patterns of health service delivery • Determine feasibility and acceptability of proposed service delivery models for an expanded HIV prevention method mix • Adaptations to demand creation strategies and information channels and tactics to address gaps in "attract, engage and enable" implementation strategies • Development of new digital innovations and adaptation of existing digital tools to incorporate additional HIV prevention methods Development of enhanced monitoring systems to ensure the measurement of uptake and other collateral benefits to PrEP implementation incl. data for modelling
Study population	Within the chosen urban areas, clients (AGYW and ABYM) at facilities receiving PrEP, healthcare providers, PrEP implementing partners and other key stakeholders
Study/ Programme sites	GaRankuwa, Tshwane, Gauteng Province. Primary Healthcare Clinic/s in that area are still to be confirmed through a stakeholder consultation process
Study/ Programme duration	6 months - 15 October 2020 to 15 April 2021
Progress Update	Stakeholder consultation process to kick off in November 2020, ethics approval to be submitted by 07 January 2021
Investigators and Project Contacts	Principal Investigator - Prof Saiqa Mullick (smullick@wrhi.ac.za) Co-Investigator – Ms. Vusile Butler (vbutler@wrhi.ac.za)
Donor	Bill and Melinda Gates Foundation (BMGF)
Briefing Owner and date of Briefing	Vusile Butler 16 October 2020