



PREP TRAINING OF COMMUNITY EDUCATORS WORKING RHEMA CARE CSO IN PORT HARCOURT, RIVERS STATE ON THE 24TH August, 2017

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Date and Venue

The peer educators training was conducted community educators implementing FSW intervention under the SHIPS for MARPs project in SFH. The training was conducted at the Rhema care secretariat in Port Harcourt, Rivers State. The meeting started at about 11:00am

Training team

Alaka Oluwatosin, NHVMAS Assistant Program Officer, was the facilitator for the training.

Agenda

- HIV Prevention: Existing tools
- HIV Prevention: New prevention tools
- Basic facts about Pre Exposure Prophylaxis (PrEP)

Participants

There were 40 participants in this meeting. Participants comprised of Community facilitators implementing FSW intervention in the SHIPS for MARPs project, as well as management and staff of Rhema care.

Pre Test

A Pretest questionnaire was shared before commencement of the training in order to assess their background knowledge on the PrEP.



Existing HIV prevention tools.

This session was facilitated by Mr. Alaka. Participants were shown pictures of different existing prevention tools using NHVMAS research literacy field guide. Participants were able to identify the HIV prevention existing tools and discuss them. Some of the tools identified include; condoms, lubricants, STI management, preventing mother to child transmission, use of safe needles and syringes and blood transfusion safety



HIV Prevention: New Prevention Tools

Mr. Alaka discussed NPTs such as Microbicides, vaccines and treatment as prevention. It was a new learning for a majority of them which made the session quite interactive

Participants were made to understand that a lot of studies are being conducted on microbicides and vaccines. Before long, answers would be gotten.

Basic Facts about PrEP

Participants were encouraged to create community demand for PrEP and integrate PrEP in their community outreach while letting people hear it and begin to ask for it in health centers.

Candidates for PrEP

People at substantial risk of acquiring HIV due to their risky behavior are potential candidates of PrEP. This includes:

a) Men who have sex with men (MSM) who have

- An HIV-positive sexual partner
- Recent bacterial STI
- High number of sex partners
- History of inconsistent/no condom use

b) Heterosexual women and men

- HIV-positive sexual partner
- Recent bacterial STI
- High number of sex partners
- History of inconsistent/no condom use
- Commercial sex work
- High-prevalence area or network

How It works

PrEP is taken only by individuals who are HIV negative as a pill of Truvada a day (combination of Tenofovir and emtricitabine). PrEP stops HIV from taking hold and spreading throughout your body. It is highly effective for preventing HIV if used as prescribed, but it is much less effective when not taken consistently.

Other important talking point about fact about PrEP

- It does not protect against other STIs and pregnancy
- It is used by people who are HIV negative but at substantial risk of HIV
- It offers over 90% protection if used consistently
- It requires you attend hospital every three months to get a HIV test to rule out any HIV infection
- It should be taken same time everyday
- Renal assessment must be conducted to ensure that the kidneys are working normally and are in good shape.

Discontinuing PrEP

Positive HIV result, Acute HIV signs or symptoms, non-adherence to usage, development of renal diseases, lowered risk behavior are all possible reasons for an individual to discontinue PrEP.

Discussion

Question: Since PrEP does not protect against other sexually transmitted infections like the condoms, shouldn't we focus more on condom use than this PrEP matter.

Answer: Condom as a preventive tool for HIV has been in existence for a couple of decades now, however, we still record new HIV infections most of which are acquired through unprotected sexual intercourse. It goes a long way to show that a number of people do not enjoy using condoms. There are many reasons people give for not using condoms, this shows that condoms have its own limitations too and we need to create options for these category of people. We gradually need to work towards achieving our UNADIS vision 2030 which is to eliminate new HIV infections. To Achieve that, we need to turn off the tap of new infections. Take for instance, if you have 100 new infections yearly within your community, but after the introduction of PrEP, only 50-60 new infections are recorded, it means we have reduced the annual pool of new infection/burden with your community by about 40-50%. We can say we are in the process of turning off the tap of new infections, slowly but surely.

Question: Do you think Nigeria would want to give PrEP a thought giving that it for the MARPs which are a marginalized population?

Answer: this issue of PrEP should not be portrayed as a key population thing, otherwise it would not achieve great feat. During the presentation, it was stated categorically that PrEP is for a broader group of persons called "people at substantial". This in addition to the key population might include people in serodiscordant relationships and an heterosexual individual who has multiple sexual partner with inconsistent/ no history of condom use.

ANNEX 1

EVALUATION FORM FOR PREP AWARENESS TRAINING OF RHEM-CARE COMMUNITY FACILITATORS

1. Please provide us with some feedback about the training.

Please indicate your overall satisfaction with the <u>content</u> of each of the modules:	Please circle one N=37					No response
	Very Good	Good	Fair	Poor	Very Poor	
1 – HIV prevention: Existing tools	17 (45.9%)	17 (45.9%)	-	-	-	3 (8.1%)
2 – HIV prevention: New prevention tools	21 (56.8%)	12 (32.4%)	-	-	-	4 (10.8%)
3– PrEP presentation	17 (45.9%)	16 (43.2%)	-	-	-	4 (10.8%)

2. Please provide us with some feedback on your experience of the Workshop:

Please indicate your agreement with the following statements:	Please circle one N=37					No response
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
This workshop provided me with insights about HIV prevention existing tools	17 (45.9%)	15 (40.5%)	5 (13.5%)	-	-	-
This workshop provided me with new insights about new prevention tools	24 (64.9%)	13 (35.1%)		-	-	-
This workshop provided me with new insights about PrEP	14 (37.3%)	16 (43.2%)	5 (13.5%)	-	-	2 (5.4%)
Participating in this Workshop was a good use of my time	20 (54.1%)	17 (45.9%)		-	-	-
I will be able to apply the content of this Workshop to my everyday work	19 (51.45)	17 (45.9%)	1 (2.7%)	-	-	-
Overall, the facilitation style was effective	17 (45.9%)	15 (40.5%)	1 (2.7%)	-	-	4 (10.8%)
There was adequate time allocated for informal discussions among workshop participants	15 (40.5%)	16 (43.2%)	6 (16.2%)	-	-	-
The Workshop was well-organized.	20 (54.1%)	15 (40.5%)	2 (5.4%)	-	-	-

3. What changes would you recommend to make this Workshop better?

- A lot of efforts need to be put in place to ensure access to PrEP.
- Workshop should be conducted once every month.
- More training like this should be made available for CFs
- We need more time to ask questions and to apply our knowledge.
- Provide tools and other materials
- Models should be made available for more explanations/clarification.
- Provide participants with resource materials
- More time needed for simulative activities.
- This workshop should provide participants with PrEP
- There should be some handouts or leaflet to aid participants.
- Existing prevention tools should be made available.

4. Any other comments?

- Nice teaching
- Good work
- Looking forward to the microbicide

ANNEX 2: PRE-POST TEST ANALYSIS

S/N	CODE NAME	Pre Test	Pre Test (%)	Post Test	Post Test (%)	Gender
1	1993	2	20	-	0	F
2	Jay B	9	90	10	100	F
3	Samuel Agban	3	30	2	20	F
4	Chidebem Achilike	3	30	5	50	F
5	Joy	4	40	6	60	F
6	Tee	4	40	6	60	F
7	Ere Sosoye	2	20	6	60	F
8	Fidelis	4	40	5	50	M
9	Cotterell	3	30	5	50	F
10	Peace Ese	4	40	5	50	F
11	Franky	3	30	4	40	M
12	Precious	3	30	5	50	M
14	Ogoke Gift	4	40	7	70	F
14	Chiamaka Benjamin	4	40	7	70	F
15	Nkechi J Chiogor	3	30	7	70	F
16	Onyeche Cordelia	4	40	6	60	F
17	2468	3	30	8	80	F
18	1851980	2	20	4	40	M
19	2385	5	50	8	80	F
20	22	6	60	10	100	F
21	2998	4	40	5	50	F
22	Uche Philip	4	40	5	50	M
23	Chibuike Ireoegbu	4	40	7	70	M
24	Kasy Onuorah	5	50	6	60	F
25	2471	3	30	5	50	M
26	Amarikwa Rose	5	50	7	70	F
27	Believe Jury	4	40	7	70	F
28	Omokhua Juliet	4	40	6	60	F
29	RO	3	30	8	80	F
30	Christian Nwediem	4	40	7	70	M
31	Ogbonna Gift	5	50	6	60	F
	TOTAL	120	1200	185	1850	
	AVERAGE	3.87	38.71	6.17	61.67	
	SD	1.34	13.35	1.68	16.83	