

Training of GLOcare Initiative Peer Educators on HIV Prevention Tools with Emphasis on PrEP

25th April, 2017

Contents

);	ate and Venue	3
	NHVMAS Training team	3
	Agenda	3
	Participants	3
	Introduction	3
	Existing HIV prevention tools	3
	Post Exposure Prophylaxis	3
	STI Management:	3
	Prevention of Mother to Child Transmission	4
	Male Medical circumcision	4
	Use of clean needles and instruments	4
	Behaviour Change:	4
	Lubricants:	4
	New Prevention Tools	4
	Vaccine	4
	Microbicide:	4
	Treatment as prevention	4
	Facts about PrEP	4
	Candidates for PrEP	4
	How It works	4
	Other important talking point about fact about PrEP	5
	Discontinuing PrEP	5
	Discussions	5
	ANNEX 1	6
	EVALUATION FORM FOR PREP AWARENESS PROGRAMME/TRAINING (AKWA IBOM)	6
	ANNEX 2	8
	PRE-POST ANALYSIS	8

Date and Venue

On the 25th of April, 2017, NHVMAS staff, Oluwatosin, traveled from Uyo to Eket to leveraged on GLOcare's review meeting with her peer educators to sensitize participants on HIV prevention tools, with emphasis on PrEP. The training was carried out at the GLOcare office, in Eket, Akwa Ibom.

NHVMAS Training team

The members of the training team:

1. Alaka Oluwatosin

Agenda

- 1. Introduction of self
- 2. Existing HIV prevention tools
- 3. New HIV prevention tools
- 4. Basic facts about PrEP

Participants

20 participants and 2 coordinators were present at the training.

Introduction

The meeting started at 11:30 am. All participants introduced themselves, after which Mr.



Oluwatosin then gave a brief overview of the purpose of the training to prepare the minds of the peer educators on what to expect

Existing HIV prevention tools

This session was facilitated by Oluwatosin. He showed participants pictures of different existing prevention tools. Participants were required to pick anyone of the tools and discuss about it. Some highlight on the discussion of HIV existing tools include:

Post Exposure Prophylaxis

- It requires taking ARV for 4weeks
- It is taken when there has been a one-time exposure of an individual to the virus. E.g rape, health worker occupational hazard,
- Must be used within 72 hours after exposure or contact
- Use 24h ours after exposure- Best
- Use 48 hours after exposure- Better
- Use 72 hours after exposure: Good

STI Management:

STI creates "holes" in the penis/vagina through thereby creating microscopic openings and increasing vulnerability. It is very important that it is treated properly to reduce the risk of HIV.

Prevention of Mother to Child Transmission

- It involves HIV positive mothers being placed of ART treatment during pregnancy and labour.
- The new baby is given PEP for 4weeks to prevent him/her from acquiring the infection

Male Medical circumcision

• A great percentage of men in Nigeria are circumcised. This reduces the chances of males contracting HIV.

Use of clean needles and instruments

- Do not share unsterilized sharp objects
- It also exposes one to other diseases like hepatitis.

Behaviour Change:

- Delay sexual debut (the earlier one starts, the more likely he/she is to have multiple sexual partners.
- Reduce sex partners to the barest minimum
- Correct and consistent use of condom

Lubricants:

- Does not protect against HIV infection
- Reduces friction during sexual intercourse
- It is very helpful during anal sex to lubricate the rectum and for vagina sex to prevent dry sex
- For men who do not like to use condom, drop a little quantity of lubricant inside the condom before wearing it. It works magic.

New Prevention Tools



The participants were informed that there were ongoing studies on microbicides and HIV vaccines.

Vaccine: A vaccine is a substance that is use to provide immunity against an infection. HIV vaccine is used to protect an individual from coming down with the virus.

Microbicide: A microbicide is a substance, that can be applied rectally or vaginally which has the ability to protect against STIs and HIV.

Treatment as prevention: Some say it is using one stone to kill two birds. It is a situation whereby a person living with HIV is placed on ART treatment not only to keep them healthy and inhibit its progression to AIDS, but to significantly reduce the risk of transmitting the virus to an uninfected partner by about 96%. It works by suppressing the viral load so much so that it becomes undetectable.



Facts about 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
- b) Female sex workers
- c) People who inject drugs

How It works

PrEP is taken only by individuals who are HIV negative as a pill

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

Discontinuing PrEP

Positive HIV result, non-adherence to usage, development of renal diseases, infection with hepatitis A or B, lowered risk behavior are all possible reasons for an individual to discontinue PrEP.

Discussions

Question: "why are uncircumcised men more likely to acquire HIV?"

 Answer: The foreskin of an uncircumcised penis harbors several bacteria which has the ability to create small microscopic openings on the skin of the penis which can increase vulnerability of the man to HIV infection.

Question: "What if a pregnant woman was raped, would she be able to assess PrEP?"

Answer: That instance is an example of a one time exposure to the virus, so PEP is what health professionals administer which would be taken for 4weeks. Once the exposure in NOT an ongoing or sustained one due to behavior or practices, PEP is administered and not PrEP

Ouestion "If one starts PrEP. can he or she stop using condoms?"

Answer: Condoms are the only tool that protects against both HIV and certain other sexually transmitted infections (STIs) while preventing pregnancy when used correctly and consistently. For people who do not use condoms every time they have sex, PrEP can provide effective protection against only HIV. Using condoms correctly and consistently while taking PrEP will provide the maximal protection against HIV and STIs. The choice to use either of the two is a personal decision that should be made upon information acquisition.

ANNEX 1

EVALUATION FORM FOR PREP AWARENESS PROGRAMME/TRAINING (AKWA IBOM)

1. Please provide us with some feedback about Workshop module.

Please indicate your overall satisfaction with the <u>content</u> of each of the modules:	Please circle one (N=20)				
	Very Good	Good	Fair	Poor	Very Poor
1 – HIV prevention: Existing tools	13 (65%)	7 (35%)	-	-	-
2 – HIV prevention: New prevention tools	9 (45%)	11 (55%)	-	-	-
3– PrEP presentation	14 (70%)	6 (30%)	1	-	1

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

Please indicate your agreement	Please circle one (N=20)					
with the following statements:	Strongly Agree	Agree	Neutra l	Disagree	Strongly Disagree	No Response
This Workshop provided me with HIV prevention existing tools	10 (50%)	10 (50%)	-	-	-	1
This Workshop provided me with new insights about New prevention tools	9 (45%)	11 (55%)	-	-	-	-
This Workshop provided me with new insights about PrEP	11 (55%)	9 (45%)	-	-	-	-
Participating in this Workshop was a good use of my time	14 (70%)	6 (30%)	-	-	-	-
I will be able to apply the content of this Workshop to my everyday work	15 (75%)	5 (25%)	-	-	-	-
Overall, the facilitation style was effective	8 (40%)	11 (55%)	-	-	-	1 (5%)
There was adequate time allocated for informal discussions among workshop participants	13 (65%)	7 (35%)	-	-	-	1
The Workshop was well-organized.	15 (75%)	4 (20%)	-	-	-	1 (5%)

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

- Workshop money, refreshment, polo
- As female sex workers, we need toiletries like pad, roll on, perfume, etc
- Going around town by educating people who are not aware including those in the village.
- With refreshment, exercise books, pen, polo and transportation

- we all should join hands together to make sure that this message is preached, spread and circulated to the world within our reach
- We need enough chairs and AC to make the workshop better

4. Any other comments?

- I will tell my peers to know that there is another way to protect themselves from HIV.
- This is a nice job done by this organisation

ANNEX 2

PRE-POST ANALYSIS

S/N	CODE NAME	Post Test	Pre Test	Post Test- Pre Test
1	No toke	6	3	3
2	sam	5	2	3
3	Etetuk	9	3	6
4	Godstime	4	5	-1
5	Thomas	9	3	6
6	Joy Benjamin	4	4	0
7	Esther	4	3	1
8	Salome	3	4	-1
9	Sarah Johnson	4	4	0
10	Patience Imeh	7	3	4
11	Hannah Umoh	4	4	0
12	Glory Daniel	6	3	3
13	Goodness Chima	3	3	0
14	Happiness Udoh	2	2	0
15	Grace Stephen	4	4	0
16	Mercy Udoh Tem	6	2	4
17	Cassandra Samuel	5	4	1
18	Edidiong Solomon	5	4	1
19	Mary Elijah	7	3	4
20	Enebong	8	4	4
21	Utibe Umoh	4	-	4
	TOTAL	109	67	42
	AVERAGE	5.19	3.35	2
	SD	1.94	0.81	1.90