



**PREP TRAINING OF SOCIETY FOR MAKE WE TALK CBO COALITION IN KASTINA ALA
LGA, BUNUE STATE ON THE 21st June, 2017**

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Date and Venue

The community facilitators training was conducted in Kastina-Ala Local government Area of Benue State. The meeting started at 10:15am.

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 41 participants in this meeting. They comprised of counselor testers, community facilitators and case management officers.

Pre Test

After introduction of the facilitator by Plangnan, the SFH state team leader for the SHiPs for MARPs Project, participants also introduced themselves. A Pre test 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 existing tools and discuss them. Some of the tools identified include; Lubricants, condoms, STI management, , use of safe needles and syringes and blood transfusion safety, preventing mother to child transmission.

HIV Prevention: New Prevention Tools



Using the field guide, 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 with some questions asked.

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 programs while letting people hear it and begin to demand for it.

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, infection with hepatitis A or B, lowered risk behavior are all possible reasons for an individual to discontinue PrEP.

Discussion

Question- Can people who use TRUVADA develop resistance?

Response: *Patients with poor adherence are likely to contract HIV despite PrEP. Resistance can occur if an individual sero-converts in the process of using PrEP. Truvada alone is not effective as treatment for PLHIV. Thus, PrEP could potentially induce drug resistance in patients who contract HIV and don't escalate therapy to ARV promptly after infection*

Question- What is the difference between PrEP and PEP

Response- *PrEP is taken by people who are sustainably exposed to HIV due to their behavior while PEP is taken by someone who has had a onetime exposure to the virus. Also, PrEP must be must be taken daily over a period unlike PEP which must be taken at least 72 hours after exposure and continued for a maximum of 4weeks*

Annex 1: Pre-Post Test Analysis

	SFH Kastina Ala						
S/N	CODE NAME	PRE TEST	PRE TEST (%)	POST TEST	POST TEST (%)	POST- PRE	PRE- POST (%)
1	Ternenge Gideon	2	20	5	50	3	30
2	7068984091	3	30	5	50	2	20
3	8180827225	3	30	5	50	2	20
4	VDK 1894	3	30	3	30	0	0
5	11	3	30	3	30	0	0
6	AER MSUGHTER	4	40	7	70	3	30
7	Toruvia Frank	3	30	8	80	5	50
8	Kashinla Terhemba	4	40	6	60	2	20
9	VKY 008	4	40	8	80	4	40
10	EVE 1414	3	30	5	50	2	20

11	TSEGBA JULIET	2	20	5	50	3	30
12	1993	3	30	7	70	4	40
13	9494	4	40	7	70	3	30
14	7039469561	5	50	7	70	2	20
15	ABERA 2525	3	30	6	60	3	30
16	DOVENT	1	10	4	40	3	30
17	Mduega Joseph	4	40	6	60	2	20
18	Azer Titus	3	30	6	60	3	30
19	Tyoor Ruth	2	20	6	60	4	40
20	Terhemba Rebecca	3	30	6	60	3	30
21	TAR HEMBADOON	4	40	6	60	2	20
22	7080532934	4	40	5	50	1	10
23	TYOYISA USHAHEMBA	2	20	6	60	4	40
24	30	3	30	8	80	5	50
25	33	4	40	6	60	2	20
26	Emmanuel Dooshima	1	10	5	50	4	40
27	Tyaumbi Catherine	3	30	7	70	4	40
28	Apebo Charity	2	20	7	70	5	50
29	Aker	3	30	5	50	2	20
30	Edie	4	40	8	80	4	40
31	Dou sefa	1	10	5	50	4	40
32	Hange Kenger Esther	3	30	6	60	3	30
33	Tyoakosu Bemdoo	2	20	6	60	4	40
34	Madonna	4	40	7	70	3	30
35	Henry 007	3	30	6	60	3	30
36	Ornguze	3	30	7	70	4	40
	TOTAL	108	1080	215	2150	107	1070
	AVERAGE	3	30	5.97	59.72	2.97	29.72
	SD	0.96	9.56	1.25	12.53	1.23	12.30

ANNEX 2

EVALUATION FORM FOR PrEP AWARENESS TRAINING.

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= 41					No response
	Very Good	Good	Fair	Poor	Very Poor	
1 – HIV prevention: Existing tools	26 (64.4%)	15 (36.6%)	-	-	-	
2 – HIV prevention: New prevention tools	23 (56.1%)	17 (41.5%)	-	-	-	1 (2.4%)
3– PrEP presentation	17 (41.5%)	23 (56.1%)	-	-	-	1 (2.4%)

Please indicate your agreement with the following statements:	Please circle one N= 41					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	No response
This Workshop provided me with HIV prevention existing tools	25 (61%)	15 (36.6%)	-	1(2.4%)	-	
This Workshop provided me with new insights about New prevention tools	25 (61%)	15 (36.6%)	-	-	-	1(2.4%)
This Workshop provided me with new insights about PrEP	27 (65.9%)	13 (31.7%)	1(2.4%)	-	-	-
Participating in this Workshop was a good use of my time	24 (58.5%)	17 (41.5%)	-	-	-	-
I will be able to apply the content of this Workshop to my everyday work	28 (68.1%)	12 (29.3%)	-	-	-	1(2.4%)
Overall, the facilitation style was effective	20 (48.9%)	21 (51.2%)	-	-	-	-
There was adequate time allocated for informal discussions among workshop participants	15 (36.6%)	21 (51.2%)	3 (7.3%)	-	-	2 (4.9%)
The Workshop was well-organized.	21 (51.2%)	19 (46.3%)	1 (2.4%)	-	-	-

2. What Changes would you recommend to make this workshop better?

- Creation of more training sessions
- Feeding should be taken into consideration
- The workshop can be better if you spend 2 day with us to help assimilation
- More time should be provide next time.
- A session that discusses updates of the prevention efforts should be organized routinely.
- Everybody should be giving the opportunity to participate.
- Provision of more tools
- There should be control of noise making.
- A sample of PrEP should be shown to us.
- Microphone should be used.
- Even though the facilitator performed creditably well, the workshop should not be facilitated by one person next time
- There should be at least light refreshment next time.

3. Any other comment?

- The workshop was excellent
- Good job by the organization
- This training is a good one and brings more insights about PrEP and HIV.