AHISA COVID Survey

SURVEY INSTRUCTIONS.

Thank you for agreeing to complete a survey of how your AHISA team and partner sites have been impacted by the COVID-19 pandemic! The purposes of this survey are:

To assess what AHISA teams adolescent HIV prevention and treatment programming (clinical and/or support services") is being impacted by the COVID-19 pandemic

To assess how AHISA teams' adolescent HIV prevention and treatment research is being impacted by the COVID-19 pandemic

To compile information regarding what teams are learning and how they are adjusting during the COVID-19 pandemic.

We ask that each AHISA team complete one survey by February 10, 2021. An electronic copy of the survey has been provided to all AHISA team members to facilitate conversations with key local stakeholders needed to accurately complete the survey. An online survey link was provided to the AHISA team PI (or another designated team member) for completion of a single survey on behalf of each AHISA team.

Because we know that some AHISA teams are involved in many projects, we are asking you to answer the survey specifically about:

Two clinical or support services*

Two research projects*

The two chosen services and projects should be selected by the team as representing:

Clinical services and research projects that you think represent the best examples of effective responses to the disruptions threatened by the COVID-19 pandemic

Clinical services and research projects that you think have been most negatively affected by the COVID-19 pandemic

*One clinical or support service and one research project can be discussed if a single example represents BOTH what was most negatively affected and the best example of an effective response. e.g. a study that was completely shut down due to COVID then implemented a creative solution to restart and make up for lost enrollment time.

This information will be used to compile a summary of experiences and "lessons learned" which will be both disseminated back to the AHISA teams in aggregate and written up for potential publication in a peer-reviewed journal.

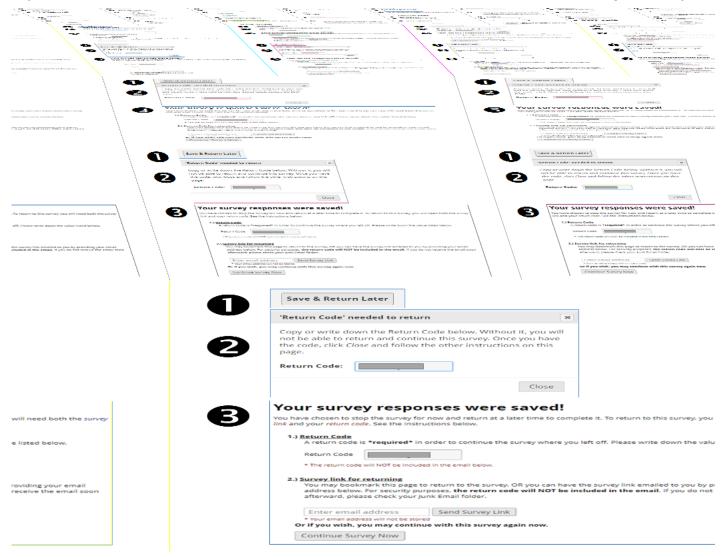
For this survey, please consider Adolescent HIV Prevention and Treatment services broadly, including HIV testing, PrEP, STD treatment, sexual and reproductive health, linkage to care and/or monitoring, HIV treatment, viral suppression monitoring, retention-support services and/or monitoring, adolescent transition of care services and/or monitoring, HIV support groups, HIV-related services, other forms of psychosocial support. Similarly, research in any of these areas is relevant to the purposes of this survey.

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It should take between 30 minutes and 1 hour to complete the on-line survey after your team agrees regarding the best examples to share. We thank you very much in advance for your time and for sharing your experiences!

If you must save and return to the survey at a later time please see the steps below.

PLEASE NOTE: you will need the RETURN CODE to continue your survey. If you select to have the survey link emailed to you the return code is NOT included in the email. Please make sure to write it down before closing the survey.



SECTION 1.

SITE & SITE CONTACT INFORMATION.

Country represented by your AHISA team:	 ○ Botswana ○ Ghana ○ Kenya ○ Malawi ○ Nigeria ○ Rwanda ○ South Africa ○ Tanzania ○ Uganda ○ Zambia ○ Zimbabwe ○ Other 	
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SITE CONTACT:	
Please select the best way(s) to contact you and include your contact information.	
☐ Email ☐ Whatsapp ☐ Skype ☐ Other	



SECTION 2. Part 1. Identification & Details of Clinical Service Examples

Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment clinical service your team has identified as the best example of effective responses to the disruptions threatened by the COVID-19 pandemic. Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment clinical service your team has identified as the most negatively affected by the COVID-19 pandemic.

Is the adolescent-focused HIV prevention and/or treatment clinical service that was most negatively affected by the

COVID-19 pandemic THE SAME as the best example of an effective response?
Clinical Service Example #1 Title:
Clinical Service Example #2 Title:
Clinical Service Example #1. Description. Please include the location of the service (e.g. nationwide, multi-site but not national, single referral center, community-based), the nature of the service (e.g. testing, treatment, support group).
Clinical Service Example #2. Description. Please include the location of the service (e.g. nationwide, multi-site but not national, single referral center, community-based), the nature of the service (e.g. testing, treatment, support group).
Who or what directed the change?
Who or what directed the change?
Please describe in as much detail as possible what was changed to effectively adapt to potential negative impacts of the COVID-19 pandemic. Please include a description of what populations were most affected. Please describe changes that occurred at the policy-level, the facility-level, the patient-level, and the community-level if relevant.
Please describe in as much detail as possible what negative impacts were experienced as a result of the COVID-19 pandemic. Please include a description of what changed and what populations were most affected.
Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment clinical service your team has identified as the best example of effective responses to the disruptions threatened by the COVID-19 pandemic.
Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment clinical service your team has identified as the most negatively affected by the COVID-19 pandemic.
For negatively impacted service response example: [service2_title]
For negatively impacted service response example: [service1_title]
For effective service response example: [service1_title]

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SECTION 2. Part 2. Identification & Details of Research Project Examples

Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment research your team has identified as the best example of effective responses to the disruptions threatened by the COVID-19 pandemic. Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment research your team has identified as the most negatively affected by the COVID-19 pandemic.

Is the adolescent-focused HIV prevention and/or treatment research that was most negatively affected by the COVID-19 pandemic THE SAME as the best example of an effective response?
Research Example #1 Title:
Research Example #2 Title:
Research Example #1. Description. Please include the location of the research (e.g. nationwide, multi-site but not national, single referral center, community-based), the nature of the research including the topic(s) being addressed (e.g. testing, treatment, support group), and the study design (e.g. clinical trial, prospective cohort).
Research Example #2. Description. Please include the location of the research (e.g. nationwide, multi-site but not national, single referral center, community-based), the nature of the research including the topic(s) being addressed (e.g. testing, treatment, support group), and the study design (e.g. clinical trial, prospective cohort).
Who or what directed the change?
Who or what directed the change?
Please describe in as much detail as possible what was changed to effectively adapt to potential negative impacts of the COVID-19 pandemic. Please include a description of what populations were most affected. Please describe changes that occurred at the policy-level, the facility-level, the patient-level, and the community-level if relevant.
Please describe in as much detail as possible what negative impacts were experienced as a result of the COVID-19 pandemic. Please include a description of what changed and what populations were most affected.
Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment research your team has identified as the best example of effective responses to the disruptions threatened by the COVID-19 pandemic.
Please provide a title and brief description of the adolescent-focused HIV prevention and/or treatment research your team has identified as the most negatively affected by the COVID-19 pandemic.
For effective research response example: [research1_title]

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For negatively impacted research response example: [research1_title]

For negatively impacted research response example: [research2_title]

Section 3. Open-Ended Assessments of Impact

Please describe what you think are the three most important impacts of the COVID-19 pandemic on clinical services for adolescents at your site(s):	
IMPORTANT IMPACT #1. IMPORTANT IMPACT #2. IMPORTANT IMPACT #3.	
Please describe what you think are the three most important impacts of the COVID-19 pandemic on adolescent-focused research at your site(s):	
RESEARCH IMPACT #1. RESEARCH IMPACT #2. RESEARCH IMPACT #3.	

Please describe the 3 most important things your team(s) has/have adjusted or changed due to the COVID-19 pandemic.

CHANGE #1. CHANGE #2. CHANGE #3.

Please describe any lessons that your team has learned that you think may be helpful for other teams in the AHISA network.

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Section 4.

In the following section, please select the box next to the best answer to indicate if each of the following has been experienced at your site or sites as a result of the COVID-19 pandemic. For this section, please consider services and research in the country or region represented by your AHISA team overall, not exclusively those given as examples in Sections 1 and 2.

For answers indicating a change due to the COVID-19 pandemic, please provide as much detail as possible in the space provided.

Have there have been periods of time when certain adolescent HIV prevention and treatment services were unavailable due to the COVID-19 pandemic?
If yes, which services were unavailable?
If yes, what were the approximate date(s) and/or duration of service disruption(s):
Since the beginning of the COVID-19 pandemic, access to adolescent sexual and reproductive health services has:
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, adolescent access to PrEP has:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, adolescent HIV testing has:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, adolescent HIV incidence has:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, adolescent sexually-transmitted infections (other than HIV) incidence has:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, adolescent linkage to HIV care has:
Please provide additional detail here:

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Since the beginning of the COVID-19 pandemic, the number of patients missing scheduled clinical visits has:
If applicable, please give us your top-3 reasons for this change in patients missing clinical visits

If applicable, how have these changes in patient missed clinical visits impacted patient safety?: ———
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, have any ART tracer drugs experienced stockouts?
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, the duration between prescription refills has:
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, the scheduled duration between routine monitoring visits has:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, rates of HIV treatment adherence have:
If applicable, please give us your top-3 reasons for this change in treatment adherence rates
Since the beginning of the COVID-19 pandemic, availability of adolescent HIV-related laboratory monitoring has:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, rates of adolescent HIV virologic suppression have:
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, the need for adolescent psychosocial support service has:
Please provide additional detail here:

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Since the beginning of the COVID-19 pandemic, the availability of adolescent psychosocial support services has:
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, peer-to-peer support for adolescents has: (select all that apply)
 □ maintained old models □ added an electronic support system □ transitioned completely to an electronic support system □ been interrupted □ been increased
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, adolescent mental health emergencies have:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, adolescent pregnancy rates have:
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, programmatic funding related to adolescent HIV prevention and treatment has:
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, how many of your clinical staff have been diagnosed with definite or probable SARS-CoV-2 infection?
Clinical staff roles of those diagnosed with SARS-CoV-2 (check all that apply)
Since the beginning of the COVID-19 pandemic, please indicate how many of your adolescent patients were diagnosed with definite or probable SARS-CoV-2 () infections:

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Since the beginning of the COVID-19 pandemic, have there been times when study recruitment was halted due to the COVID-19 pandemic?
Please provide details of study recruitment stoppage(s)
If yes, what were the approximate dates and/or length of recruitment stoppage(s):
Since the beginning of the COVID-19 pandemic, have there been times when study follow-up was halted due to the COVID-19 pandemic?
Please provide details of study follow-up stoppage(s)
If yes, what were the approximate dates and/or length of follow-up stoppage(s):
Since the beginning of the COVID-19 pandemic, has the enrollment rate(s) for your studies:
Please provide additional detail here:
Based on our clinical experience and/or available data, since the beginning of the COVID-19 pandemic, the number of patients missing scheduled study visits has:
If applicable, please give us your top-3 reasons for this change in missed study visits
If applicable, how have these changes in missed study visits impacted patient safety?:
Since the beginning of the COVID-19 pandemic, were protocol modifications/new IRB approvals needed due to COVID-19 related procedural changes?
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, were any research activities changed from in-person to remote formats?
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, have you needed to apply for supplemental funding to complete previously funded research due to pandemic-related cost increases?
Please provide additional detail here:

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Has your study funding been threatened by the COVID-19 pandemic?
Please provide additional detail here:
Since the beginning of the COVID-19 pandemic, how many of your research staff have been diagnosed with definite or probable SARS-CoV-2 infection?
Research staff roles of those diagnosed with SARS-CoV-2 (check all that apply)
Since the beginning of the COVID-19 pandemic, please indicate how many of your research study patients were diagnosed with definite or probable SARS-CoV-2 () infections:

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