



PrEP & HIV Prevention Counselling Messages











Flip Chart Introduction

Who can use the flipchart?

The flip chart can be used by facility-based healthcare workers and community health workers with clients:

- Interested in learning more about PrEP
- Initiating PrEP
- Attending follow-up visits
- Interested in stopping PrEP
- Re-starting PrEP

How to use this flip chart?

- The more you use the Flipchart, the more you will become familiar with it
- You will look at the HEALTHCARE WORKER PAGE. The client will look at the CLIENT PAGE which has illustrations to clarify the message you are giving. In the healthcare worker page you have information on the message to share with the client and a small box reproducing the client page.
- This guide covers only the MAIN POINTS for each topic. However, you may want to provide more information, responding to the client's needs.
- Use language that the client can understand.
 Once the flip chart has become familiar, a glance will remind you of the key information you need to provide.
- Pointing to the illustrations as you counsel the client can be very useful.



Oral Pre-Exposure Prophylaxis (PrEP) Counselling Guidelines

Counselling should:

- Be client-centered: the client should be seen as an expert on his or her life, desires and goals, while the counsellor serves as a guide who can assist clients in reaching their goals or setting new goals
- Be sensitive, inclusive, and non-judgmental:
 Recognize that behaviour change is difficult and human beings are not perfect
- Be presented as a personal choice: Counselling should support the client in making a personal choice based on their needs and desires.

- Problem solve and foster motivation: Offer choices and tangible solutions; identify small wins and achievable next steps in reducing risk.
- Be client-driven and based on their needs, resources, and preferences: Counselling should be interactive and tailored to the client's specific needs and lifestyle.
- Be brief: 10-15 minute check-ins about experience with PrEP and sexual health protection plans are most effective; longer (~30 minute) sessions may be necessary at the first PrEP consultation or if specific issues arise.



PrEP Risk Assessment, Eligibility Screening & Initiation Checklist

- If HIV negative or unknown HIV status, obtain verbal consent for HIV risk assessment
- If at risk, discuss HIV prevention methods including benefits, use and limitations of PrEP using this flipchart

Not at risk/not interested in PrEP

- Verbal consent for additional study questions (blue form), collect data
- File risk assessment and blue form in suspension file
- Provide and record other HIV prevention methods/ risk reduction counselling

For clients that want to start PrEP:

- Complete PrEP counselling
- Obtain PrEP client file
- Provide participant information sheet (located in PrEP file) and obtain **WRITTEN** consent
- Enter client in PrEP register page for the current month and assign unique PrEP ID
- Complete all sections of PrEP file, including demographic info, completed counselling topics and first row of clinical data
- INITIATE and provide 30 days of PrEP
- Appoint client for first follow-up visit in 28 days
- Provide client appointment card; record next visit date on the card and in the client file

At risk and interested in PrEP

- Talk client through the process of PrEP eligibility screening and initiation
- Continue with eligibility assessment including HIV test, if not tested on that day
- Indicate eligibility at bottom of form
- Verbal consent for additional study questions (blue form) and collect data.
- If client is not eligible or does not want PrEP -- file risk assessment and blue form in suspension file

How do I protect myself from HIV?

There are many ways to protect yourself from HIV and a combination of different strategies is recommended.

male condom





post-exposure prophylaxis



female condom no penetrative sex partner reduction



male circumcision





pre-exposure prophylaxis





How can I protect myself from HIV?

There are many ways to prevent HIV that you may already know about:

- Consistent use of male or female condoms provides a high degree of protection if used consistently with all partners and at every act of penetrative sex, starting before intercourse and continuing throughout. Condoms also protect against other STIs and pregnancy.
- Non-penetrative sex, including mutual masturbation, is safe.
- Delaying sexual intercourse is a viable choice for some adolescents and young adults who have not yet started to have sexual intercourse.
- Diagnosis and treatment of STIs decreases the risk of HIV infection. A sore or inflammation from an STI may allow infection with HIV.
- Voluntary medical male circumcision decreases the risk of acquiring HIV by about 60% for men whose exposure to HIV is primarily through heterosexual intercourse.

- Mutual monogamy (when neither person has other sexual partners) can be an effective strategy if the relationship is stable and the partner has recently tested HIV-negative or else is HIV-positive, on antiretroviral therapy and has achieved viral suppression.
- Post-exposure prophylaxis (PEP) started within a few hours of exposure (and no later than 72 hours) and continued for 28 days. If the client has used PEP more than once, PrEP may be considered.
- Pre-exposure prophylaxis (PrEP)

Pre means before

Exposure means coming into contact with HIV

Prophylaxis means taking a pill to prevent HIV infection (see next card for more information about PrEP)

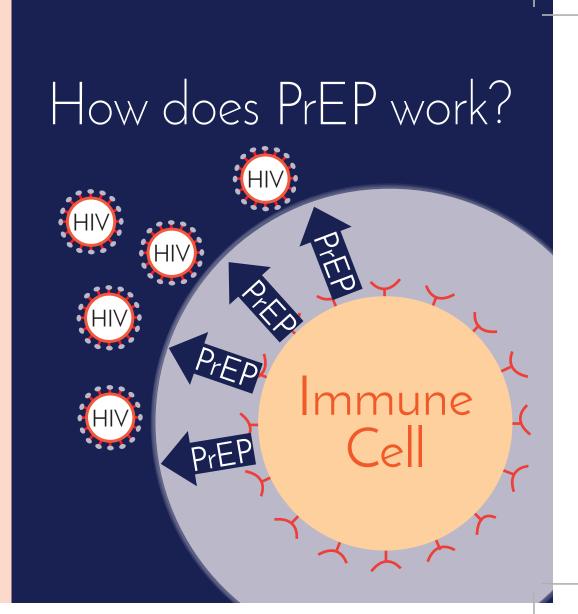
Discussion questions:

- What are you currently doing to protect yourself from HIV?
- Do you have any issues advocating for condom use with your partner? If yes, provide guidance on how to safely negotiate condom use with their partner.

Notes for provider:

- Water-based lubricants should be provided with condoms, especially for men who have sex with men, transgender clients and sex workers.
- Adolescents and young people 16 years and over who are asking about PrEP may have already engaged in intercourse or else are preparing to do so safely. For them, a delay or even a return to abstinence is likely to be unacceptable or not feasible.

HIV Negative PrEP TDF/3TC



How does PrEP work?

- PrEP does not cure HIV, however, it is a new and safe method for HIV-negative people to reduce their risk of becoming infected with HIV.
- It is a pill that has 2 anti-HIV medicines: tenofovir and lamivudine (TDF+3TC). These are the same ARV drugs that are commonly used as part of a drug regimen to treat HIV infection in HIV-positive people.
- HIV-negative people who take PrEP every day can lower their risk of HIV by more than 90%.
- PrEP works by protecting your immune (CD4) cells from being infected with HIV

- HIV Negative PrEP TDF/3TC
- PrEP prevents HIV from replicating inside of your immune cells by stopping an enzyme that HIV needs to make copies of itself called Reverse Transcriptase
- PrEP is an extra HIV prevention option and, where possible, should be used in combination with other prevention methods.
- PrEP does not provide immediate protection—it must be taken daily for 7 days before it offers full protection
- After 7 days, you will be protected as long as you continue to take your pill daily.
- PrEP DOES NOT prevent any other sexually transmitted infections or pregnancy

Discussion questions:

- Do you understand how PrEP works to prevent HIV infection?
- How many days do you have to take PrEP before you are fully protected if you continue taking it daily?
- What other things can you do to protect yourself from HIV infection?

Note for provider:

Assess client understanding that the protection provided by PrEP is not complete, and does not prevent other STIs or unwanted pregnancies, and therefore PrEP should be used as part of a package of HIV prevention services (inclusive of condoms, lubrication, contraception, risk reduction counselling and STI management)

Who can take PrEP?

- ✓ HIV-Negative
- At risk for HIV
- 16 years or older
- Willing to take PrEP daily
- Able to attend follow-up visits

Who can take PrEP?

- PrEP means that an HIV negative person takes 1 pill every day to help prevent becoming infected with HIV.
- If your HIV test is negative, you may be eligible for PrFP
- PrEP should be considered by anyone who is HIV-negative and at risk for HIV infection.
- As part of the PrEP process, the healthcare worker will discuss your HIV risk with you.
- PrEP should not be used by people who already have HIV because they require a combination of at least three medicines for HIV treatment

Discussion questions:

- Have you had an HIV test today?
- Have you recently engaged in any activities that you feel put you at risk for HIV infection?

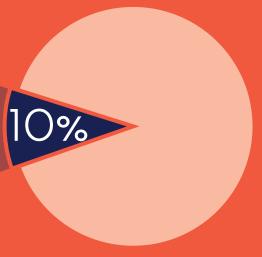


- PrEP is not a treatment for HIV but a pill to prevent you from getting HIV infection.
- If you have had a recent exposure to HIV in the past 72 hours, you should use PEP or POST-exposure prophylaxis for 28 days.
- After completing PEP and a repeat test showing an HIV negative result, you can start PrEP immediately.

Is PrEP safe?

What side effects might I experience?





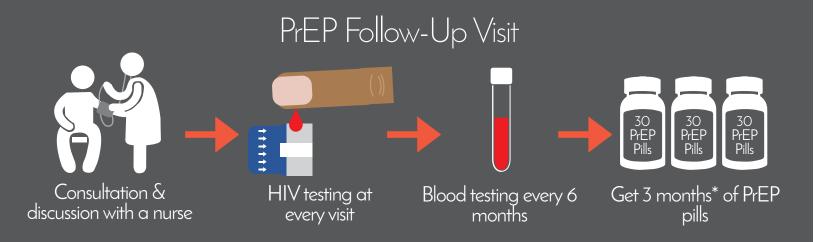
Is PrEP safe?

- Using alcohol or recreational drugs will NOT reduce the effectiveness of PrEP.
 - PrEP is safe to use with all contraceptive methods.
 - •You can use PrEP safely throughout pregnancy and breastfeeding.
- PrEP is safe and 90% effective at preventing HIV infection when taken daily. If you do not take it daily, it will become less effective.
- About 10% of people who start PrEP will have some short-term, mild side-effects, like a headache or nausea, but usually they go away in a few weeks.
- If you experience stomach-related side effects if may be helpful to:
 - Take the pill with food
 - Take the pill at night before bedtime.

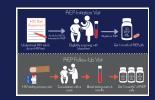
Discussion question:

• Do you have any concerns about taking PrEP?

PrEP Initiation Visit HIV Risk Assessment At risk for HIV & interested in PrEP Understand HIV risk & Eligibility screening with do an HIV test Eligibility screening with blood test Get 1 month of PrEP pills



What is the process for PrEP initiation & follow-up?



- Your understanding of PrEP will begin with a discussion with the healthcare worker about your sexual behaviors to determine your level of risk for HIV infection.
- If you are at risk for HIV and interested in PrEP, you will begin the eligibility screening which includes an HIV test.
- We will also test you for Hepatitis B and take blood to make sure you have a normal kidney function.

- You will need to come back for a follow-up visit one month after starting PrEP, then once again 2 month later and every 3 months after that.
- At each visit, the HCW will do an HIV test, address any remaining questions or concerns you may have and give you a PrEP refill.
- Every 6 months, the HCW will draw blood to test the function of your kidneys again.

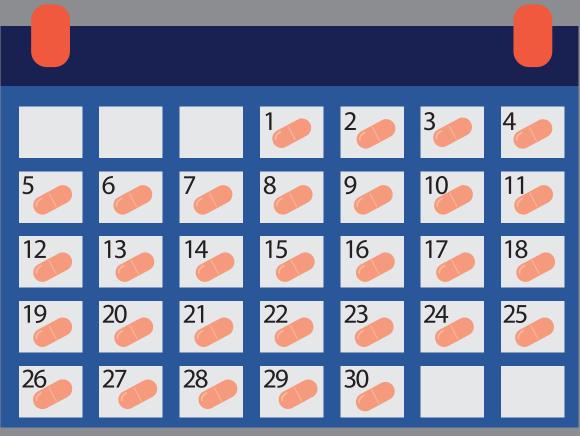
Discussion questions:

- Do you understand when you would need to come back for clinic visits if you start PrEP?
- Do you have any concerns or issues with the required follow-up visit schedule?

Note for provider:

If the client is pregnant, discuss the possibility of aligning their PrEP follow-up visits with their ANC visits.

How do I take PrEP?



How do I take PrEP?



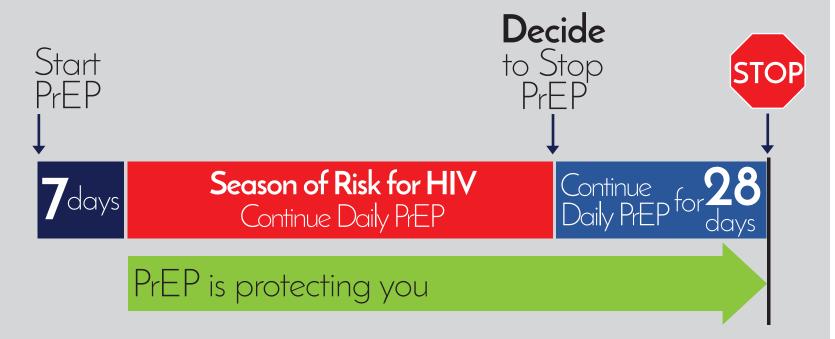
- You must take PrEP every day. If you forget, take it as soon as you remember but do not take more than two pills per day.
- Taking the pill every day ensures the best protection from HIV infection.
- PrEP pills can be taken any time of day, with or without food.

- Additional HIV prevention measures should be taken for seven days after starting PrEP until you have maximum protection.
- PrEP does not interact with alcohol or other drugs.
- Your pills are for you ONLY. Please do not share them with anyone else.
- PrEP should be kept in a cool, dry place, away from children, in a tightly closed container.

Discussion questions:

- Do you expect any disruptions to your normal routine, such as holidays or travel? Let's discuss how you can continue to use PrEP during those periods of disruption
- How might taking PrEP affect your sexual activity?
- Do you see any challenges for you to take the pill every day?

Do I need to take PrEP forever? What if I want to stop PrEP?



Do I need to take PrEP forever?



- People taking PrEP may not take it all their lives –
 PrEP should be used while you are at risk and your risk may vary over time as circumstances change.
- These are what are sometimes called "seasons of risk". You may choose to stop using PrEP at certain times and to start again as your situation changes.
- You are encouraged to continue taking PrEP as long as you are at risk for HIV. If you want to stop PrEP, it is important that you let your HCW know so they can assist.

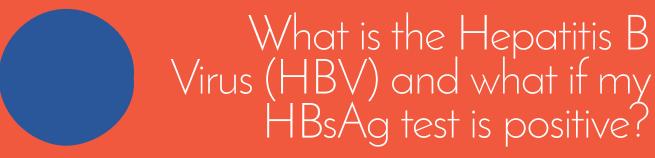
- If you want to stop PrEP, you need to continue to use PrEP for 28 days after your last HIV exposure before you stop taking the pills.
- If you are HBsAg positive, the HCW will monitor your liver function after you stop PrEP (see HBV card for more information).
- If you decide later to restart PrEP, return to the health facility and the HCW will assess your HIV risk again, and make sure you are still healthy and able to restart PrEP

Discussion questions:

- How long do you think you might need to take PrEP?
- What things would you consider when you decide whether or not you will continue taking PrEP?
- Do you understand you need to continue with PrEP for 28 days after your last HIV exposure?

Note for provider:

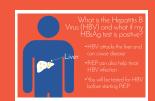
PrEP counselling creates an opportunity for PrEP users and their counsellors to recognize situations that may involve exposure to HIV, or "seasons of risk" and to use appropriate and effective prevention strategies, including PrEP.





- HBV attacks the liver and can cause disease
- PrEP can also help treat
 HBV infection
- You will be tested for HBV before starting PrEP

What is the Hepatitis B Virus (HBV) and what if my HBsAg test is positive?



- Hepatitis B is a virus that attacks the liver and can cause disease.
- The virus is transmitted through blood and other bodily fluids in the same way that HIV is transmitted.
- Before you start PrEP, the HCW will test you for Hepatitis B Virus.
- If you test positive for Hepatitis B, you can still start PrEP. The PrEP drugs (TDF/3TC) can also treat Hepatitis B virus but they cannot cure a Hepatitis B infection.

- If you are Hepatitis B positive and stop taking PrEP, your liver infection may get worse.
- Therefore, it is important for you to have additional lab tests while on PrEP and after stopping to monitor your liver to make sure your liver infection does not get worse.

Discussion questions if client is HBV-positive:

- Do you understand that PrEP works to help treat Hepatitis B and also prevent HIV?
- If you decide to stop taking PrEP do you understand that it is important you speak with a nurse before you stop?

My partner is HIV-positive.

How can I use PrEP?







My partner is HIV-positive. How can I use PrEP?



- PrEP can be a useful strategy for sero-discordant couples to ensure the partner living without HIV remains HIV-negative.
- You can take PrEP while your HIV-positive partner is not on ART and we recommend you continue PrEP use for at least 6-months after your partner starts ART.
- After the first 6 months on ART, your partner should have a viral load test done. If the viral load is suppressed, you can stop PrEP if you are confident your partner is adherent to his/her ART and will remain virally suppressed.

- There are two main ways to safely a baby with a partner who has HIV or an unknown HIV status:
 - 1. ART for the HIV-positive partner, and checking to make sure his/her viral load is suppressed.
 - 2. Taking PrEP if HIV-positive partner is not virally suppressed on ART or partner has an unknown HIV status
- These two **safe conception** methods can be used together -- PrEP for the uninfected partner and ART for the partner living with HIV.

Discussion questions if client is in a sero-discordant relationship:

- Is your partner on ART? If yes, are you confident that he/she is taking their ART pills daily?
- Does your partner share his/her viral load results with you? Is he/she virally suppressed?
- Do you wish to have a baby with your partner?

Notes for provider:

- Offer to counsel the client about HIV risk reduction and PrEP use with their partner.
- If female client is HIV-negative and interested in having a baby with their HIV-positive partner, discuss safe conception method with them, which may include PrEP use.

Can I use PrEP while pregnant or breastfeeding?









PrEP is safe to use

Can I use PrEP while pregnant or breastfeeding?

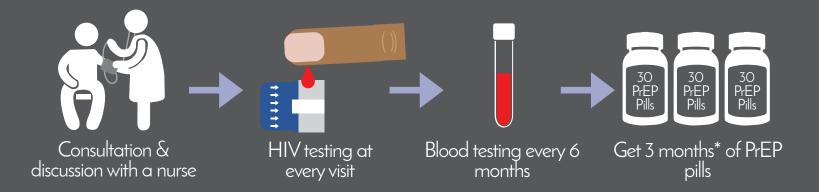


- HIV infection can occur at high rates during pregnancy and breastfeeding. The risk of passing HIV infection onto a baby is higher if the mother becomes infected while she is pregnant or breastfeeding.
- For HIV-negative females that want to have a baby with an HIV-positive partner, PrEP can be used while trying to conceive and throughout pregnancy and breastfeeding.
- The existing safety data support the use of PrEP in pregnant and breastfeeding women who are at continuing substantial risk of HIV infection.

Note for provider:

The choice to continue or discontinue PrEP when a woman becomes pregnant should be made by the woman herself, following discussion of the risks and benefits with her healthcare provider.

PrEP Follow-Up Visit



PrEP Follow-Up Visit Checklist for Provider

- Ask client about the experience with PrEP and if they have any questions or concerns
- \blacksquare Inquire about side effects & treat symptomatically, if present
- If Grade 3/4, discontinue PrEP, engage a medical officer, complete an ADR form (can be found in the back of the PrEP file) and explain to the client why they must stop PrEP
- Discuss family planning methods being used by the client, address any unmet need & encourage consistent condom use
- Discuss any lifestyle changes that may affect their level of HIV risk and suitability of PrEP use
- Ask about adherence in the past 7 days & work with client to address any adherence challenges if present
- Screen for STIs, test and treat as needed
- Perform an HIV test -- if non-reactive, continue with PrEP follow-up visit -- if reactive, link to ART
- Every 6 months while on PrEP, take blood sample for serum creatinine test
- ξ Complete the client follow-up form in the PrEP client file
- Complete the PrEP register

Discussion with Client

- $\stackrel{\slash}{=}$ \square Give refill & assign a next visit date --> 2 months after **first** follow-up visit and every 3 months thereafter
 - Add next visit to the Client Appointment Card

What are your experiences so far with PrEP?

PEP

Discussion Prompts for Follow-Up Visits

Pill-taking experience:

- How has it been for you to take PrEP?
- What side-effects have you had, if any?
- What helps you remember to take your pill?
- What challenges do you experience in taking the pills?
- What are your concerns about missing PrEP pills?
- What keeps you motivated to take the PrEP pills?
- What might help make taking PrEP even easier?

Discussing PrEP with others:

- Have you discussed your PrEP use with others? Why
 or why not? With whom have you discussed it?
- Since your last visit have you had any social experiences, positive or negative, that you think are related to taking PrEP?

Behavior and activity:

- Has PrEP changed your social and sexual behavior?If so, how?
- What are your thoughts about condoms?
- What about sexual partners: Are you having different kinds of conversations with sexual partners?
- Have you increased or decreased the number of sexual acts and/or the number of partners?
- Has taking PrEP changed what else you do to protect yourself from getting HIV and STIs?
- Has PrEP made you feel safer about sex?
- Has PrEP made it easier for you to take charge of your health?

Confirm clear plan for staying HIV/STI-negative:

 What other ideas or plans, if any, do you have for staying HIV- and STI-negative?

How can I remember to take my PrEP each day?



How can I remember to take my PrEP each day?



- In order for PrEP to work, you need to take your pills daily.
- If you miss a pill, take it as soon as you remember, and continue to take daily as before.
- Here are some methods to remind you to take the pill every day, for example:
 - Take the pill at the same time every day;
 - Incorporate it into your daily activities, like part of your morning routine or when a favorite TV or radio show comes on;
 - Set a phone alarm;
 - Encourage partners, family members or friends to remind you;
 - Use daily pill boxes
- Deciding to tell someone about your PrEP use is a completely personal decision. Some people find it helpful to tell friends or family for support and to provide reminders to take the pill daily.

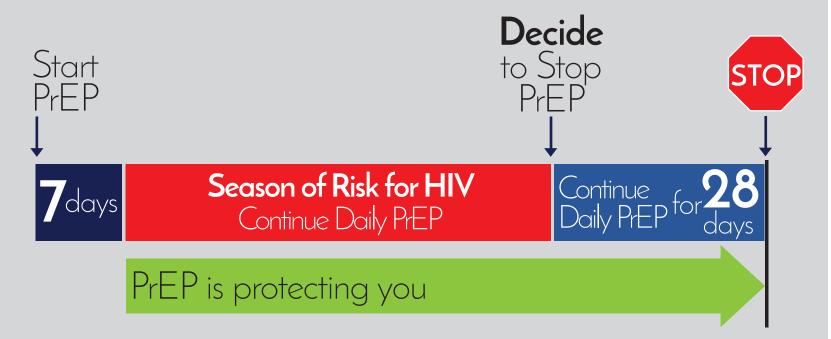
Discussion questions:

- Discuss with the client whether and how they would like to discuss PrEP with their partner, friends or family and how to overcome any potential barriers to gaining their support.
- What are your challenges with taking the pill every day?
- What do you think would make it easier for you remember to take them?

Notes for provider:

- If client is having challenges with adherence, do not reprimand them. Be supportive and work with them to figure out a way to make taking their pills easier, so they receive maximum protection. Re-emphasize that PrEP is less effective when not taken daily.
- Identify barriers to effective use and develop realistic strategies with the client to address barriers
- People who have abusive or controlling partners may find it more difficult to take care of their sexual health and to adhere to PrEP. Ask about the client's relationships, and for clients experiencing abuse, provide counseling and a referral when necessary.

Do I need to take PrEP forever? What if I want to stop PrEP?



Do I need to take PrEP forever? What if I want to stop PrEP?



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- These are what are sometimes called "seasons of risk". You may choose to stop using PrEP at certain periods of your life and to start again as your situation changes.
- You are encouraged to continue taking PrEP as long as you are at risk for HIV. If you want to stop PrEP, it is important that you let your HCW know so they can assist.

Discussion questions:

- Do you understand you need to continue with PrEP for 28 days after your last HIV exposure?
- What other HIV prevention methods will you use if you are still at risk for HIV but decide to stop using PrEP?

- If you want to stop PrEP, you need to continue to use PrEP for 28 days after your last HIV exposure before you stop taking the pills.
- If you are HBsAg positive, the HCW will monitor your liver function after you stop PrEP (see HBV card for more information).
- If you decide later to restart PrEP, return to the health facility and the HCW will assess your HIV risk again, and make sure you are still healthy and able to restart PrEP.

Note for provider:

PrEP counselling creates an opportunity for PrEP users and their counsellors to recognize situations that may involve exposure to HIV, or "seasons of risk" and to use appropriate and effective prevention strategies, including PrEP.

Can I transfer to another health facility and still get PrEP?



Can I transfer to another health facility and still get PrEP?

- At this time, you can only access PrEP from health facilities that are also PrEP demonstration sites.
- Although not every facility is offering PrEP, there are a number of demonstration sites and we can transfer you to one of those sites if it is more convenient for you.



Notes for provider:

If a client requests to transfer to another PrEP site, determine the most convenient site for the client from the below list and complete a National Referral Form to send with the client

The other facilities offering PrEP in Swaziland are:

Hhohho Region:

- Horo Clinic
- Hhukwini Clinic
- Lobamba Clinic
- Mbabane PHU
- Ntfonjeni Clinic
- Ndzingeni Clinic
- Ndvwabangeni Clinic
- Siphocosini Clinic

Shiswelweni Region:

- Dwaleni Clinic
- FTM Clinic
- Gege Clinic
- Layumisa Clinic
- Maaubheleni Clinic
- Mahlandle Clinic
- Mashobeni Clinic
- •NHL Fixed Testing Site •Zombodze Clinic
- Nhlanaano PHU
- •SOS Clinic
- Tfokotani Clinic

Manzini Region:

- Luyengo Clinic
- KSII PHU
- PSI/New Start Clinic