

News Brief

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Gender Analysis for Microbicide Introduction Kicks Off in Kenya

On September 25-26, FHI 360 staff attended a high-level technical consultation, co-funded by USAID and the Gates Foundation, with 30 Kenyan stakeholders in Naivasha. Called ARV-Based HIV Prevention: State of the Science and Considerations for Implementation, the consultation focused on the current evidence, recent work done, and service delivery channels and end users for microbicides and other ARVs. FHI 360 had an opportunity to present the vision for the gender analysis in Kenya and obtain feedback from participants on implementation plans. Overall, consultation participants were very supportive of a gender analysis being done in advance of microbicide introduction.

The purpose of the gender analysis is to systematically examine gender norms and inequalities between men, women, and sexual minorities to answer two key questions: (1) How will gender relations affect women's access to and use of a microbicide product?; and (2) How will the introduction of a microbicide product affect the relative status of women and men?

"It's so important for a gender analysis to be part of preparations for the eventual introduction of a microbicide product. We have to consider in advance the gender-based obstacles that some women may face to accessing and adhering to a microbicide product once one is available. Otherwise, the technology will fall short of its potential to protect women from HIV," said Rose Wilcher, Technical Advisor, FHI 360 Research Utilization.

Study Results To Be Widely Shared in Three Peer-Reviewed Journals

Results from a randomized trial assessing compliance with abstinence messaging among 300 Jamaican women with a curable STI will soon be widely shared via three separate publications. In August, AIDS Behavior published the results from the qualitative data collected as part of this study. Two additional articles, one on the main study findings and another on intravaginal cleansing habits, will be published in Sexually Transmitted Diseases and West Indian Medical Journal. respectively.

Funded by an Interagency
Agreement with CDC through the
PTA, the study assigned patients
to abstinence-only or abstinenceplus-condoms messaging. During
the week following treatment,
researchers used prostate-specific
antigen (PSA) evaluation to
compare the levels of unprotected
intercourse between the two
groups.

The main study finding was that there was no statistical evidence supporting a particular counseling message to avoid unprotected sex during the treatment period for curable STIs or other reproductive tract infections. Additional analysis also suggests that women with recent condom experience may benefit more from a message to use abstinence plus condoms while women without this experience may benefit from an abstinence-only message. Ultimately, providers should weigh condom history when determining the most appropriate counseling message for an individual patient.

To download the *AIDS Behavior* article, visit http://www.springerlink....62w5gj3 527/fulltext.pdf.



Stakeholder Engagement Toolkit — A New Resource for HIV Researchers

Clinical trials do not take place in isolation. Local, national and international environments may influence a trial's operations and outcomes. Because a successful trial must engage a wide range of stakeholders, FHI 360's PTA program collaborated with AVAC to create the Stakeholder Engagement Toolkit for HIV Prevention Trials. This 200-page toolkit offers research teams a guide for building support for and understanding of the research process among stakeholders — before, during and after a trial. Adding to existing resources, the toolkit provides practical insights and step-by-step processes for soliciting feedback and addressing concerns and potential trial disruptions, while preparing for research results and next steps. It draws from interviews with global experts and visits to HIV-prevention research sites throughout the U.S. and sub-Saharan Africa, and it includes case studies from recent trials. Launched at the AIDS 2012 Conference, the toolkit is already being used by research teams in the field and continues to be promoted through training presentations. To download the Stakeholder Engagement Toolkit for HIV Prevention Trials, visit www.fhi360.org/HIVstakeholder.

Satellite Session Introduces New PTA Resource

More than 50 people participated in a satellite session on communication in HIV prevention trials at the AIDS 2012 Conference in Washington, DC, on July 23. The session was organized by the PTA, with support from PEPFAR, to introduce and promote the use of a CD-ROM version of the *Communications Handbook for HIV Prevention Trials*, which has been used by more than 1,700 people in 33 countries to date.

Session participants welcomed the new CD-ROM, which includes the handbook's tools and templates in formats that are easy to adapt. They discussed how this new resource could be used to improve communication in clinical trials, drawing on many of their own experiences to illustrate the benefits of investing in communication strategies and the risks of failing to do so. Participant David Hughes, network community coordinator for the International Maternal Pediatric Adolescent AIDS Clinical Trials (IMPAACT) Group Operations Center, said the session had exceeded his expectations: "The interaction and case studies made the topic very relevant, and I walked away with new ideas that I believe are very applicable in my own work." Published by PTA/FHI 360 and AVAC, the *Communications Handbook* CD-ROM may be obtained by writing to publications @fhi360.org.

South Africa Mobile Services Unit (MSU) Project Transitions Ownership to Provincial Governments

On September 19, FHI 360 South Africa held a meeting to share the results of its five-year Mobile Services Unit Project and begin transitioning four mini-vans, converted into mobile clinics, to three Provincial Departments of Health.

Introduced by FHI 360/SA in 2008, the Mobile Services Unit (MSU) project was launched to provide integrated Reproductive Health (RH) and HIV services to four remote and underserved provinces: Eastern Cape (OR Tambo District); KwaZulu Natal (Amajuba District); Limpopo (Greater Sekhukhune District); and Mpumalanga (Gert Sibande & Ehlanzeni Districts).

During 2008-2009, FHI 360/SA converted Toyota mini-vans in such a way that each provided space for counseling, testing and client examination. The MSU's traveled great distances to provide services and education to those in underserved areas, with more than 30,000 reached in the final two years.

The primary objective of the project was to ensure that RH/HIV health services were available to citizens with the greatest need for them within a short distance from their households. Based on requests from the district health offices, this objective was expanded over time to include a range of comprehensive Primary Care Services -HIV/STI prevention and education, TB screening, STI treatment, cervical cancer education, and treatment for minor acute and chronic ailments. In partnership with the Government of South Africa and PEPFAR funding from USAID/SA, the project worked directly with the district health offices to determine locations. select visitation dates, and inform the community of the services available. A final report summarizing the project was prepared by FHI 360/SA and shared with meeting attendees, including USAID/South Africa and national DoH representatives.