

**NATIONAL
COMPREHENSIVE PrEP &
CONDOM PROGRAMMING
STRATEGY AND
IMPLEMENTATION PLAN
(Monitoring Plan)
2022-2026**

FINAL REPORT

NATIONAL COMPREHENSIVE PrEP & CONDOM PROGRAMMING STRATEGY AND IMPLEMENTATION PLAN

(Monitoring Plan)

2022-2026

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Acknowledgments: The PrEP and Condom Program Road Map for Key populations was developed through an inclusive and cooperative process that included input and feedback from stakeholders across public health, health care, research, and related fields. Partners throughout the CDC Department of the MOHME and UNAIDS Country Office in I.R. IRAN, as well as input from many stakeholders. The research team thank all those who contributed to making this program.

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IMPLEMENTATION AND RESPONSIBILITIES

The Implementation of the National PrEP and Condom Strategy

The National PrEP and Condom Strategy will be implemented in partnership with several stakeholders ranging from the Government, NGOs, Private Sector, and International Agencies. Public and private partnership principles will be employed in the execution of the strategy to enhance program efficiency and effectiveness.

The Role of the Stakeholders in the Implementation Strategy

The role of MOHME: The Ministry of Health and Medical Education has the overall responsibility for the management and coordination of strategic PrEP and condom activities across all areas of implementation; from forecasting, procurement, standardization of service delivery to monitoring and evaluation.

1. The National level coordinating mechanism(s) will be strengthened to coordinate the multi-sectoral response to condom programming, and this activity will be replicated at the provincial level.
2. Through the PrEP and Condom Technical Group, SIP, and the CDC Department, MOHME will handle all policy and program issues that relate to the PrEP and male condoms, including ensuring availability of the right quantities and quality of PrEP drugs and condoms in the country.
3. The National the PrEP and Condom Technical Group will provide a platform for all partners from the public, civil society, and private sector for in-depth discussions on PrEP and condom programming, provide operational and technical advice that presents issues of policy and strategic nature, to the mentioned technical working groups, for consensus and clearance.
4. Provide multi-sectoral oversight on program implementation, by multi-sectoral partners including line ministries and Research Deputy, to ensure achievement of set targets in the NSP.
5. Participate in mobilizing resources including funds for procurement and distribution of needed PrEP drugs and Condoms to facilitate implementation of combination HIV prevention interventions.

The role of the Iranian Research Center for HIV/AIDS (IRCHA):

1. Provide a platform for sharing outcomes from research and strategy implementation including at the Joint annual AIDS review sessions.
2. Conducting applied research related to the goals of the NSP of the HIV/AIDS and PrEP and Condom Program.

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Deputy Minister of Medicine and Food of MOHME

The Deputy Minister of Medicine and Food of MOHME sets and enforces manufacturing and testing standards in line with WHO/UNFPA/ISO requirements for all PrEP drugs and condoms produced in the country. It will also be facilitated to conduct post-market surveillance to ensure Drug and condom quality at user pick points.

The role of the Social Marketing Organizations

1. Create and promote brands, promote and create demand for the male condoms for the key population with considering sensitivities of the Iranian community. They will ensure the availability of private sector condoms, responding to the generated demand in sub-sectors of the key populations.
2. Maintaining high levels of social marketing condom stocks, at various types of retail outlets for key populations, through consistent distribution at affordable consumer prices.
3. Motivating the private sector's involvement in condom distribution and promotion by providing adequate profits for wholesalers and retailers and establishing partnerships for procurement, distribution, sales, and advertising for key populations.
4. Assisting government in marketing, distribution, and promotion of public sector free condoms, particularly for key populations, as well as building local capacity for social marketing in the country.
5. The government will continue supporting the Social Marketing Organizations initiatives through the provision of technical support, sharing of best practices, and including social marketing organizations in the National Technical Working Group for PrEP and Condom Programming.

Role of the Commercial Sector

The commercial sector, including brand holders, pharmacies, supermarkets, and other commercial outlets, will increase the availability and distribution of condoms and expand coverage in urban and rural areas for key populations. All private sector condoms must be tested for quality. Commercial sector partners will support market analysis and segmentation efforts and adequately provide condoms to cover their market share. This will include installment and replenishment of condom vending machines, promotion of condom uses for key populations as a lifestyle and specifically for the brands. Public, and private sector partnerships should be strengthened.

Other line Ministries

Relevant organizations and ministries also support the strategic condom plan in the framework of the 5th NSP of HIV/AIDS control. The most important related organizations are the Prisons Organization, the Welfare Organization, and the Ministry of the Interior.

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The role United Nations Agencies

Various United Nations Agencies cooperate with MOHME of Iran in connection with the HIV/AIDS program, and the most important role is played by the UNAIDS, and this project is carried out with the technical and financial support of UNAIDS. Various agencies need to provide their support in full coordination with UNAIDS and the CDC Office of MOHME.

1. These will be guided by the 5th NSP, PrEP and Condom Programming Strategy and National procurement and supply Plan, to inform their contribution towards procurement and supply of both male condoms, PrEP, drugs and provision of support for the implementation of the PrEP and Condom program.
2. United Nations Agencies and development partners will engage with the government to develop a transition plan from external to domestic financing of the PrEP and condom program.
3. Implementing Partners supported by United Nations Agencies, operating at regional and provincial levels will provide support and carry out activities for advocacy, PrEP, and condom promotion, education and distribution at the community levels, in close collaboration with the provincial Health office.

7.2. Prerequisites for implementing a strategic PrEP and condom program

- Implementation of the PrEP and Condom Program should begin with a meeting to officially launch the program. This meeting should involve political, health, and related organizations officials. This may be an event with media coverage and IEC activities.
- A senior officer, such as the Deputy of health, or provincial health official, should lead the meeting. This official should announce the official start of the *PrEP and Condom Program*, citing the benefits of the program and reminding the owners and managers of entertainment establishments of the consequences of not cooperating with the program.
- STI services should be strengthened to support the program by providing treatment, counseling, and education to key populations and their clients. STI clinics may need to be reinforced with additional staff, equipment, and drugs. Clinical training and counseling courses may be needed to upgrade staff skills. Standard medical forms should be introduced to simplify case reporting. Further training in analysis and reporting may also be needed for selected staff.
- The main source of information for monitoring and evaluation will be the information system set up by the PrEP and Condom Technical Group.
- A monitoring committee should be formed at the national and provincial levels. Members should include national and local leaders, public health officials, representatives of related organizations, and health workers. The committee should supervise the implementation of the program, make regular site visits to entertainment establishments, follow up on compliance, organize outreach educational activities. The monitoring committee should meet regularly to review program progress and to address any identified problems. They should report monthly to the provincial governor or another appropriate authority.

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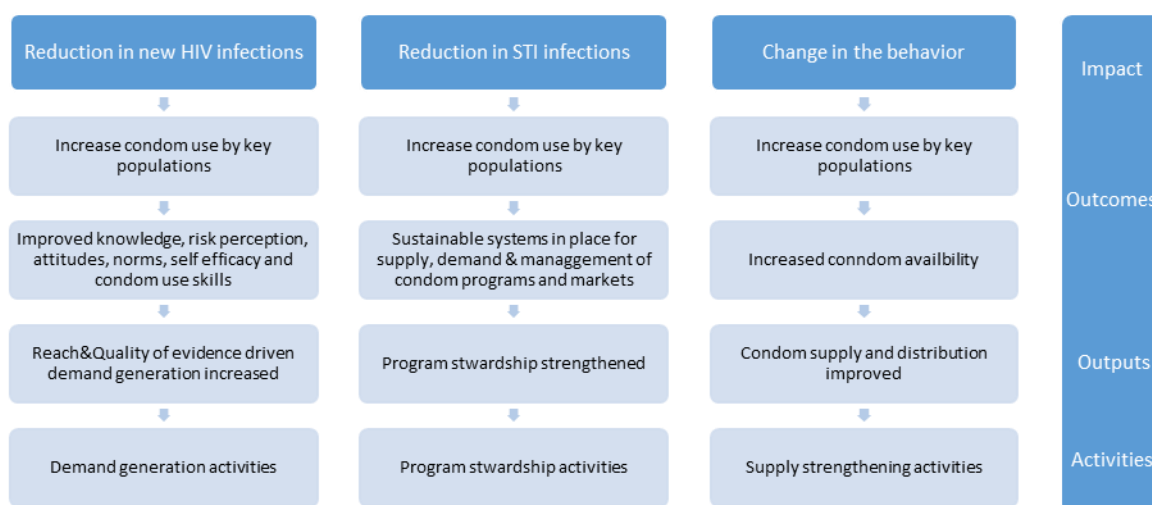
- Investments in condom programming should aim to increase condom use equitably and sustainably among at-risk groups to reduce HIV and STI incidence. Programs should achieve increases inconsistent condom use in high-risk partnerships. While increases in condom availability and motivation to use condoms are important intermediate outcomes, investments should result in increased condom use.
- Evaluation: The goal of the PrEP and Condom Program, is to prevent the sexual transmission of HIV among key populations and their clients, resulting in further prevention of HIV infection in the general population. The objective of the program is to enforce condom use in any sexual intercourse and also use PrEP drugs by the target group. Evaluation of the PrEP and Condom Program focuses on four indicators:
 - condom use;
 - Using PrEP Drugs;
 - incidence of STI among SWs; and
 - behavioral change

Monitoring and Evaluation (M&E)

A strong strategic program is critical for the monitoring for management, and evaluation of PrEP and condom interventions. Data should provide feedback on the impact of interventions on PrEP and condom use and the factors that influence PrEP and condom use.

We used a Results Framework that reflects the PrEP and Condom Program Pathway. Figure 7.1 provides the structure for a Results Framework in which activities (grouped by broad intervention areas: program stewardship, demand, and supply) lead to outputs, which lead to lower-level outcomes (factors that influence PrEP and condom use), which in turn lead to higher-level outcomes (changes in and PrEP condom use in key populations) and health impact.

Figure 7.1. National Condom Strategy- Model Results Framework



The categories, indicators, and recommended data collection tools are presented in Table 1.

Table 1. The categories, indicators, and recommended data collection tools

Higher level outcomes		
Category	Indicators	Data Collection Tools
Condom Use	- Percentage of key populations who use a condom at the last high risk sex, separately	DHS Bio-behavioral Surveys (BBS) for KPs Other quantitative population-based surveys (It is critical for programs to collect these data more frequently than every five years.)
Increased PrEP uptake	- Percentage of key populations engaged in high risk sex reporting consistent condom use - Percentage of adults who use PrEP	
Lower level outcomes		
Program Stewardship	The monitoring objective at this category is to measure the effectiveness and sustainability of program stewardship efforts (leadership & coordination; planning & forecasting; favorable policy environment). Sustained execution of the national condom strategy with active participation of all actors in the condom ecosystem is the most basic measure of the effectiveness of program stewardship. Effective program stewardship should also lead to greater sustainability as measured by the decreasing dependence on non-domestic funding for PrEP and	<ul style="list-style-type: none"> • Programmatic reports • Verification by existence of plans, policies, regulations • Other document review • Stakeholder survey to assess perceived value of stewardship

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	<p>condom programming and decreasing commodity subsidy in the condom market.</p> <p>The following indicators measuring the components of program stewardship are considered at the output level:</p> <p><u>Leadership & Coordination:</u></p> <ul style="list-style-type: none"> • Presence of an active technical working group coordinating PrEP and condom programming separately with supporting initiatives linked to the NSP • % of stakeholders who value participation in coordination mechanisms and contribute actively • Condom needs estimates and targets updated in the past 12 months, reflecting latest data on use and supply levels; forecasting adjusted as needed <p><u>Program Analytics:</u></p> <ul style="list-style-type: none"> • Existence of a nation-level strategic information plan supported by stakeholders with data collated and reviewed on a regular basis • Total market analysis conducted in last 3 years and regularly updated with relevant data • Identified studies supporting program management are conducted and inform programmatic decisions <p><u>Policies & Regulation:</u></p> <ul style="list-style-type: none"> • Policies in place that enable programs to reach priority populations • Presence of government regulatory, and quality assurance policies that create an even playing field for all sectors, and are not excessively inhibitive 	
Demand	<p>Programs will track factors associated with condom use, HIV-related knowledge, risk perception, attitudes, social norms, self-efficacy and condom use skills. Data will be disaggregated by priority audience, which will likely include age, geography, wealth, etc.</p> <p>Sample indicators:</p> <ul style="list-style-type: none"> - Percentage of adults who know that HIV can be prevented by using condoms - % of target population who feel confident negotiating condom use with a partner - % of target population who perceive themselves to be at risk of HIV - % of target population who have comprehensive knowledge of HIV prevention <p>The monitoring objective in this category is to measure changes in factors that are associated with condom use in a particular group (ideally also measuring whether changes are attributable to condom program interventions)</p> <ul style="list-style-type: none"> - Increased adherence for PrEP - Increased awareness about PrEP 	<p>Factors associated with condom use in a particular context can be identified through the studies outlined under 'Condom Use' above and through qualitative methods</p>

<p>Supply</p>	<p>In this category, M&E will aim to measure both physical availability and the target audience’s perceptions of availability.</p> <p>Sample indicators:</p> <ul style="list-style-type: none"> • Perceived availability: % of target population that report condoms are available “where and when I need them” • Coverage: % of appropriate outlets (i.e., delivery points across sectors) that carry condoms (does not need to be 100%, but should be high enough to remove access as a barrier to condom use; where users and non-users of condoms perceive the same level of availability, consider whether coverage may already be sufficient) • Coverage: Proportion of health facilities stocked out of condoms • Coverage: The proportion of target areas meeting established coverage standards (e.g., x number of condom-selling outlets per X number of households) • Distribution: Total number of condoms distributed in the past 12 months (often tracked at output level) 	<p>Perceived Availability</p> <ul style="list-style-type: none"> • Tools cited in Condom Use section above. <p>Coverage</p> <ul style="list-style-type: none"> • Outlet surveys, retail audits • Program records (data reported from public, social marketing and private sectors should be aggregated)
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Annex 1: Condom Program Operational Plan

Description of priorities	Key annual outputs				
	2022	2023	2024	2025	2026
Objective 1: To establish Functional Capacity for Condom Program Management for key populations in 50% of the related organizations by 2026					
Strategy 1: Strengthening Leadership and Coordination structures at all levels					
1.1.1: Coordination and Program Governance	Creating Condom Technical Group	Condom Technical Group's 2-yr Priority Action Plan (2023/24) detailing program outputs, outcome targets and partner accountability framework developed	Condom mid-term review report compiled defining revised targets	The condom program review report is reviewed and approved by the SIP	The condom program review report in place
			Annual stakeholder validated Comprehensive Condom Programming review report in place	Condom Technical Group's 2-yr Priority Action Plan (2025/26) detailing program outputs, outcome targets and partner accountability framework developed	
		comprehensive condom programming integrated in 10% of the related organizations	comprehensive condom programming integrated in 20% of the related organizations	comprehensive condom programming integrated in 30% of the related organizations	comprehensive condom programming integrated in 50% of the related organizations
	Minimum functional capacity for provincial Condom Programming defined	10% of provinces especially those covering hotspots supported to establish minimum capacity for	20% of provinces especially those covering hotspots supported to establish minimum capacity for	30% of provinces especially those covering hotspots supported to establish minimum capacity for	50% of provinces especially those covering hotspots supported to establish minimum capacity for

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		Condom Programming	Condom Programming	Condom Programming	Condom Programming
1.1.2: Strengthen Policies and Regulations	5 th NSP 2019/2023 features condom as a priority primary prevention intervention for key populations			Health sector budget earmarks funds for procurement of free to user condoms for the most key populations	Stakeholder agreed new generation National Condom Programming strategy in place
	highest level policy-makers within Gol agreed, MoH endorsed National Condom Programming in place				NSP for HIV control 2025/2029 features condom as a priority primary prevention intervention
	National Condom needs assessment conducted				
Strategy 2: Facilitate National Condom Program Support System for the key population (In the context of the SIP Committee)					
1.2.1: Deepen advocacy for the national condom program for key populations		Condom programming advocacy action plan developed		MOHME build partnerships through networking with all public and private sector stakeholders to support condom planning	
	The use of the Total Market Approach for condom programming has been approved by the MOHME				
	Media capacity engagement drafted (with considering sensitivities)	Capacity of 200 activists from the governmental media houses in condom promotion and education for key	Capacity of 200 activists from the governmental media houses in condom promotion and education for key		

		populations built	populations built		
1.2.2: Strengthen capacity for related organizations	Condom Programming Partner Accountability Framework drafted	Strategy for capacity building of the various condom programming players at national and provincial level and standardized training materials in place	Condom program players in 50% of the provinces oriented	Condom program players in all of the provinces oriented	
	At least one NGO contracted to run a condom programming campaign for key populations	Designated and functional condom focal points at 20% of the provinces	Designated and functional condom focal points at 50% of the provinces	Designated and functional condom focal points at 80% of the provinces	Designated and functional condom focal points at 100% of the provinces
	Condom reporting tool for HIV Implementing Partners and non-health sector partners drafted	At least 150 players oriented with developed tools & 10% of provinces mentored and supported to run a province-led condom program	30% of provinces mentored and supported to run a condom program	40% of provinces mentored and supported to run a condom program	50% of provinces mentored and supported to run a condom program
1.2.3: Strengthen the national condom performance monitoring	10 NGOs and Civil Society Organizations contracted to run a condom programming campaign		Annual condom program review meetings at the national and provincial levels to evaluate the annual performance of the condom program held		
		Training for province focal point persons in 20% provinces	Training for province focal point persons in 50% provinces		
		Condom sentinel sites established for		Condom sentinel sites established for	

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		key populations in 50 hotspot urban centers		key populations in 50 more hotspot urban centers	
Strategy 3: Strengthen Supply Chain and Commodity Security					
1.3.1: Effective Quantification and Forecasting	Annual MOHME interdepartmental forecasting and quantification conducted	Annual MOHME interdepartmental forecasting and quantification conducted	Annual MOHME interdepartmental forecasting and quantification conducted	Annual MOHME interdepartmental forecasting and quantification conducted	Annual MOHME interdepartmental forecasting and quantification conducted
	10 national level partners trained on the use of the condom quantification methodology	Build capacity for quantification at province and health facility levels in 10% provinces	Build capacity for quantification at province and health facility levels in 20% provinces	Build capacity for quantification at province and health facility levels in 40% provinces	Build capacity for quantification at province and health facility levels in 50% provinces
		The "Quantification and Procurement Planning" unit for quantification in the provinces and at the national level facilities established.			
1.3.2: Increase condom storage capacity and improve storage efficiency	At least one post market surveillance exercise in the national level drafted and conducted	At least one relevant Drug management staff member in each province has been trained to regularly monitor post-market condoms			
		At least one post market surveillance Exercises conducted and reports delivered to the National Condom Technical Group	At least one post market surveillance Exercises conducted and reports delivered to the National Condom Technical Group	At least one post market surveillance Exercises conducted and reports delivered to the National Condom Technical Group	At least one post market surveillance Exercises conducted and reports delivered to the National Condom Technical Group
	Regular and continuous	Regular and continuous	Regular and continuous	Regular and continuous	Regular and continuous

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	"Instant Checks" of condom quality, storage and warehousing at national and regional level	"Instant Checks" of condom quality, storage and warehousing at national and regional level	"Instant Checks" of condom quality, storage and warehousing at national and regional level	"Instant Checks" of condom quality, storage and warehousing at national and regional level	"Instant Checks" of condom quality, storage and warehousing at national and regional level
1.3.3: Implement the condom distribution plan	Advocacy for special handling of the condom in implementation of the One Warehouse One Health Facility Policy conducted	Reviewed National Condom Distribution Plan aligned to the One Warehouse One Health Facility policy in place	conduct an assessment of social marketing on condom availability for key populations in hard to reach areas	The final impact analysis of condom programs such as social marketing of condoms was done through new routes and additional costs.	National Condom Distribution Plan revised
	At least one innovation exploiting new outlets on condom distribution with the private sector developed and implemented	Coverage of new outlet targeted condom distribution innovations expanded to 10% of provinces	Coverage of new outlet targeted condom distribution innovations expanded to 30% of provinces	Coverage of new outlet targeted condom distribution innovations expanded to 50% of provinces	Coverage of new outlet targeted condom distribution innovations expanded to 60% of provinces
	2% of key populations were covered by condoms through new outlets.	5% of key populations were covered by condoms through new outlets.	10% of key populations were covered by condoms through new outlets.	20% of key populations were covered by condoms through new outlets.	30% of key populations were covered by condoms through new outlets.
1.3.4: Creating variety in types of condoms to create the right of choose in customers	Condom distribution program control drafted.	At least one national and provincial condom distribution program control exercise has been performed.	At least one national and provincial condom distribution program control exercise has been performed.	At least one national and provincial condom distribution program control exercise has been performed.	At least one national and provincial condom distribution program control exercise has been performed.
	In 10% of public and private distribution outlets, condoms are purposefully distributed with the participation of NGOs.	In 30% of public and private distribution outlets, condoms are purposefully distributed with the participation of NGOs.	In 45% of public and private distribution outlets, condoms are purposefully distributed with the participation of NGOs.	In 60% of public and private distribution outlets, condoms are purposefully distributed with the participation of NGOs.	In 80% of public and private distribution outlets, condoms are purposefully distributed with the participation of NGOs.

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1.3.5: Creating the Condom Logistics Management Information System (CLMIS)	CLMIS was Set up with appropriate indicators	Launch the CLIMS dashboard linked the custom health software available			
	CLMIS rolled out in 10% provinces	CLMIS rolled out in 30% provinces	CLMIS rolled out in 50% provinces	CLMIS rolled out in 80% provinces	CLMIS rolled out in 100% provinces
		capacity building in 10 % provinces for providers on the use of CLMIS	capacity building in 30 % provinces for providers on the use of CLMIS	capacity building in 50 % provinces for providers on the use of CLMIS	capacity building in 70 % provinces for providers on the use of CLMIS
Objective 2: To Increase Condom Use at last high risk sex for each of the key groups to 25% from a 2020 baseline by 2026					
Strategy 1: Increase Demand for Condoms in Key Populations and Remove Barriers to Access and Use					
2.1.1: More investment in demand-generation activities to ensure that the key populations have the knowledge, skills and ability to use condoms correctly and consistently. (Strengthening Advocacy)	National Condom Program defines targeted beneficiaries	A condom market segmentation study was conducted for key populations	Condom Distribution Programs (CDP) conducted		Second condom market segmentation study was conducted for key populations
	Various outlets employed to get free and discounted condoms to key populations	Stakeholder partner agreed market segmentation for free, social marketing and private sector in place to cover more key populations		Assessment on performance of the condom market following the support of commercial sector conducted	
		National mapping of community socio-economic coalitions, networks, groups and recreation facilities to exploit for condom program for key populations conducted			
2.1.2 Investing in communication	National Condom-Related	CRCG featuring key message concepts			

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leads to changes in social behaviors associated with condom use by key populations	Communication Guide (CRCG) guidelines on HIV endorsed as a guide for Condom Program	cleared by government for all partners developed			
	Targeted condom promotion campaigns in partnership with NGOs reaching 10% of key populations	Targeted condom promotion campaigns in partnership with NGOs reaching 15% of key populations	Targeted condom promotion campaigns in partnership with NGOs reaching 20% of key populations	Targeted condom promotion campaigns in partnership with NGOs reaching 25% of key populations	Targeted condom promotion campaigns in partnership with NGOs reaching 30% of key populations
		Cultural, religious and other community gatekeepers sensitized on condoms in 10% provinces.	Cultural, religious and other community gatekeepers sensitized on condoms in 20% provinces.	Cultural, religious and other community gatekeepers sensitized on condoms in 30% provinces.	Cultural, religious and other community gatekeepers sensitized on condoms in 50% provinces.
		Formative survey on the uptake of condoms by the target key populations conducted	Condom use at last high risk increase by 15%		Condom use survey conducted among priority target beneficiaries
2.1.3: Build capacity of service providers for male condom quality service provision	Condom training service provider mapping tool developed	trainings for condom distributors (all sectors) conducted in 30% provinces	trainings for condom distributors (all sectors) conducted in 50% provinces	trainings for condom distributors (all sectors) conducted in 70% provinces	trainings for condom distributors (all sectors) conducted in 100% provinces
	10% of trained condom distributors equipped with demonstration tools and job aids	30% of trained condom distributors equipped with demonstration tools and job aids	50% of trained condom distributors equipped with demonstration tools and job aids	70% of trained condom distributors equipped with demonstration tools and job aids	100% of trained condom distributors equipped with demonstration tools and job aids
Objective 3: To increase access and availability of free male condoms for each of key populations through public channels to 50% from a 2020 baseline by 2026					
Strategy 1: Increasing Access to Male Condoms					
3.1.1 Strategically expand condom distribution through the public, social marketing organization/N	At least 5 local NGOs and CBOs trained on condom demand generation for key populations	At least 10 local NGOs and CBOs trained on condom demand generation for key populations	At least 15 local NGOs and CBOs trained on condom demand generation for key populations	At least 20 local NGOs and CBOs trained on condom demand generation for key populations	At least 30 local NGOs and CBOs trained on condom demand generation for key populations

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GO, and commercial sectors	At least 20 new condom providing service delivery points were set up nationwide.	At least 40 new condom providing service delivery points were set up nationwide.	At least 80 new condom providing service delivery points were set up nationwide.	At least 150 new condom providing service delivery points were set up nationwide.	At least 200 new condom providing service delivery points were set up nationwide.
Strategy 2: Improving Utilization of Male Condoms					
3.2.1 Measures to increase the use of condoms in the conditions in which access is provided	Condom quality improvement strategies were designed for key populations.	Quarterly condom post-market surveillance was done	Coordination with condom manufacturers was done to package public sector condoms in a way that would be more appealing to users.		
Strategy 3: Grow the Market Size					
3.3.1 Strengthen social marketing brand management and sustainability	At least 2 social marketing firms sustain business in the country	Condom social marketing priority plan for key populations and resource mobilization proposal presented to government and partners	Condom-related social marketing organizations support at least 2 social media brands from partners/ government		
	At least 4 Social marketing brands on the market	At least 2 social market brands adopted hybrid models and developed cost-effective alternative distribution channels for key populations with poor social and economic status		At least 2 Social marketing brands transitioned to full recovery	
	Socially marketed brands market for key populations share at 10%	Socially marketed brands market for key populations share at 15%	Socially marketed brands market for key populations share at 20%	Socially marketed brands market for key populations share at 25%	Socially marketed brands market for key populations share at 30%
3.3.2 Achieve the right size of free condom market	Targeted HIV programming for key populations utilized to	Condom market segmentation study conducted		Condom market audit conducted to assess	

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	distribute free condoms			effectiveness and efficiency	
		Channels and targets for distribution of condoms to reach key populations developed and agreed with partners			
3.3.3 Creating a favorable environment for the growth of the commercial sector in the condom market	Private sector condom partners engaged on the 5 th NSP platform	conduct an assessment of the private condom sector brands		Public condom campaign programs promote free, socially marketed and private sector condoms for key populations	
		Targets for private sector partners for condom distribution for key populations in designated markets set and agreed	Private sector condom messaging promoting condom as a lifestyle for key populations discussed and cleared by government	Private sector condom messaging promoting condom as a lifestyle for key populations discussed and cleared by government	Private sector condom messaging promoting condom as a lifestyle for key populations discussed and cleared by government
	Private sector condom dispenser coverage for key populations in designated market segment at 1%	Private sector condom dispenser coverage for key populations in designated market segment at 5%	Private sector condom dispenser coverage for key populations in designated market segment at 10%	Private sector condom dispenser coverage for key populations in designated market segment at 20%	Private sector condom dispenser coverage for key populations in designated market segment at 40%

Annex 2: PrEP Program Operational Plan

Description of priorities	Key annual outputs				
	2022	2023	2024	2025	2026
Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026					
Strategy 1: Improve supply chain management to provide and distributed oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform					
1.1.1: Coordination and Program Governance	Creating PrEP Technical Group	PrEP Technical Group's 2-yr Priority Action Plan (2023/24) detailing program outputs, outcome targets and partner accountability framework developed	PrEP mid-term review report compiled defining revised targets	The PrEP program review report is reviewed and approved by the SIP	The PrEP program review report in place
	Minimum functional capacity for provincial PrEP Programming defined	10% of provinces especially those covering hotspots supported to establish minimum capacity for PrEP Programming	20% of provinces especially those covering hotspots supported to establish minimum capacity for PrEP Programming	30% of provinces especially those covering hotspots supported to establish minimum capacity for PrEP Programming	50% of provinces especially those covering hotspots supported to establish minimum capacity for PrEP Programming
1.1.2: Advocacy and education to create political will to engage policymakers	5 th NSP 2019/2023 features PrEP as a priority primary prevention intervention for key populations			The Health sector budget earmarks funds for procurement of free to user PrEP for the most key populations	Stakeholder agreed on new generation National PrEP Programming strategy in place
	highest level policy-makers within Gol agreed, MoH endorsed National PrEP Programming in place				NSP for HIV control 2025/2029 features PrEP as a priority primary prevention intervention
	National PrEP needs assessment conducted				

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1.1.3: Strengthen the national PrEP performance monitoring	10 NGOs and Civil Society Organizations contracted to run a PrEP programming campaign		Annual PrEP program review meetings at the national and provincial levels to evaluate the annual performance of the PrEP program held.		
		Training for province focal point persons in 20% of provinces	Training for province focal point persons in 50% of provinces		
		PrEP sentinel sites established for key populations in 50 hotspot urban centers		PrEP sentinel sites established for key populations in 50 more hotspot urban centers	
1.1.4: Effective Quantification and Forecasting	Annual MOHME forecasting and quantification conducted	Annual MOHME forecasting and quantification conducted	Annual MOHME forecasting and quantification conducted	Annual MOHME forecasting and quantification conducted	Annual MOHME forecasting and quantification conducted
	10 national-level partners trained on the use of the PrEP quantification methodology	Build capacity for quantification at province and health facility levels in 10% of provinces	Build capacity for quantification at province and health facility levels in 20% of provinces	Build capacity for quantification at province and health facility levels in 40% of provinces	Build capacity for quantification at province and health facility levels in 50% of provinces
		The "Quantification and Procurement Planning" unit for quantification in the provinces and at the national level facilities established.			
1.1.5: Implement the PrEP distribution plan	Advocacy for special handling of the PrEP conducted		conduct an assessment of social marketing on PrEP	The final impact analysis of PrEP programs such as social	National PrEP Distribution Plan revised

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			availability for key populations in hard to reach areas	marketing of PrEP was done through new routes and additional costs.	
	At least one innovation exploiting new outlets on PrEP distribution with the private sector developed and implemented	Coverage of new outlet targeted PrEP distribution innovations expanded to 10% of provinces	Coverage of new outlet targeted PrEP distribution innovations expanded to 30% of provinces	Coverage of new outlet targeted PrEP distribution innovations expanded to 50% of provinces	Coverage of new outlet targeted PrEP distribution innovations expanded to 60% of provinces
	2% of key populations were covered by PrEP through new outlets.	5% of key populations were covered by PrEP through new outlets.	10% of key populations were covered by PrEP through new outlets.	20% of key populations were covered by PrEP through new outlets.	30% of key populations were covered by PrEP through new outlets.
1.1.6: Using novel clinical approaches to improve PrEP supply chain	PrEP novel clinical methodologies drafted.	At least one national and provincial PrEP novel clinical methodologies exercise has been performed.	At least one national and provincial PrEP novel clinical methodologies exercise has been performed.	At least one national and provincial PrEP novel clinical methodologies exercise has been performed.	At least one national and provincial PrEP novel clinical methodologies exercise has been performed.
	In 10% of public and private provision outlets, PrEP is purposefully distributed with the participation of NGOs.	In 30% of public and private distribution outlets, PrEP is purposefully distributed with the participation of NGOs.	In 45% of public and private distribution outlets, PrEP is purposefully distributed with the participation of NGOs.	In 60% of public and private distribution outlets, PrEP is purposefully distributed with the participation of NGOs.	In 80% of public and private distribution outlets, PrEP is purposefully distributed with the participation of NGOs.
Strategy 2: Demand creation using culturally competent and linguistically appropriate approaches for PrEP and remove barriers to access and begin use					
1.2.1: More investment in demand-generation activities to ensure that the target populations have the knowledge and attitudes to use PrEP correctly and consistently.		PrEP programming advocacy action plan developed		MOHME build partnerships through networking with all public and private sector stakeholders to support PrEP planning	
	The use of the Total Market Approach for PrEP programming				

(Strengthening Advocacy)	has been approved by the MOHME				
	Media capacity engagement drafted	The Capacity of 50 activists from the governmental media houses in PrEP promotion and education for key populations built	Capacity of 50 activists from the governmental media houses in PrEP promotion and education for key populations built		
1.2.2 Highly targeted interpersonal communication leads to changes in social behaviors associated with PrEP use by target populations	National PrEP-Related Communication Guide (PRCG) guidelines on HIV endorsed as a guide for PrEP Program	PRCG featuring key message concepts cleared by the government for all partners developed			
	Targeted PrEP promotion campaigns in partnership with NGOs reaching 10% of key populations	Targeted PrEP promotion campaigns in partnership with NGOs reaching 15% of key populations	Targeted PrEP promotion campaigns in partnership with NGOs reaching 20% of key populations	Targeted PrEP promotion campaigns in partnership with NGOs reaching 25% of key populations	Targeted PrEP promotion campaigns in partnership with NGOs reaching 30% of key populations
		Cultural, religious and other community gatekeepers sensitized on PrEP in 10% of provinces.	Cultural, religious and other community gatekeepers sensitized on PrEP in 20% of provinces.	Cultural, religious and other community gatekeepers sensitized on PrEP in 30% of provinces.	Cultural, religious and other community gatekeepers sensitized on PrEP in 50% of provinces.
		Formative survey on the uptake of PrEP by the target key populations conducted	PrEP use increase by 15%		PrEP use survey conducted among priority target beneficiaries
Objective 2: To increase adherence and continued use of PrEP, from a 2020 baseline of almost zero percent by 2026					
Strategy 1: Increasing the providers' knowledge, attitudes, practices, and behaviors with regards to oral PrEP delivery.					
2.1.1: Build capacity of service providers for PrEP quality	PrEP training service provider mapping tool developed	Trainings for PrEP providers (all sectors) conducted in 30% of provinces	trainings for PrEP Providers (all sectors) conducted in 50% provinces	trainings for PrEP Providers (all sectors) conducted in 70% provinces	trainings for PrEP Providers (all sectors) conducted in 100% provinces

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service provision	10% of trained PrEP Providers equipped with demonstration tools and job aids	30% of trained PrEP Providers equipped with demonstration tools and job aids	50% of trained PrEP Providers equipped with demonstration tools and job aids	70% of trained PrEP Providers equipped with demonstration tools and job aids	100% of trained PrEP Providers equipped with demonstration tools and job aids
Strategy 2: Scale-up uptake, adherence, and retention of oral PrEP for target populations for effective use and monitoring					
2.2.1 Measures to increase the use of PrEP in the conditions in which access is provided	PrEP quality improvement strategies were designed for key populations.	Quarterly PrEP post-market surveillance was done	Coordination with PrEP manufacturers was done to package PrEP in a way that would be more appealing to users.		
2.2.2 Strengthen social marketing brand management and sustainability	At least 2 social marketing firms sustain business in the country	PrEP social marketing priority plan for key populations and resource mobilization proposal presented to government and partners	PrEP-related social marketing organizations support at least 2 social media items from partners/ government		
	Socially marketed brands market for key populations share at 10%	Socially marketed brands market for key populations share at 15%	Socially marketed brands market for key populations share at 20%	Socially marketed brands market for key populations share at 25%	Socially marketed brands market for key populations share at 30%