

Global Men and HIV Technical Working Group (MENHT) Webinar Series - Episode #6: Men and PrEP Part 2

Welcome

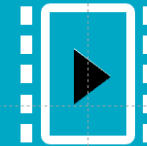
Date: 13 April 2023

Time: 14h00 – 15h30 CET

HOUSEKEEPING



You'll get
the **slides**
via email




You will get **all the
slides** after the
meeting



Let us all **engage**
and have a good
meeting

Languages: English, French, Portuguese and Spanish

1. In your meeting/webinar controls, click **Interpretation** 
2. Click the language that you would like to hear

Global Men and HIV Technical Working Group (MENHT)

March 24, 2021



Global HIV data shows that Men living with HIV are less likely than women to know their status, less likely to initiate ART, less likely to remain engaged in care, and less likely also to be virally suppressed

Launch of the Men and HIV Global Technical Working Group (MENHT)

Draft Agenda

1. Welcome, introductions and terms of reference for MENHT – Wole Ameyan, **WHO**
2. Policy brief on Men's testing and upcoming work – Muhammad Jamil and Syed Afsar, **WHO**
3. Enhancing VMMC uptake among men – call for case studies. Stephanie Davis, **Consultant, WHO**
4. IAS 2021 updates – Anna Grimsrud, **IAS, Switzerland**
5. Upcoming events and webinars – Lycias Zembe, **UNAIDS**
6. Updates from members (work and events) - ALL
7. Closing and next steps – Lycias Zembe, **UNAIDS**



24 march 2021

14:00 - 15:30



MENHT Virtual Launch - Zoom Link
Meeting ID: 947 2670 5428 | Passcode: 126825





- To **coordinate** activities related to improving outcomes for men across HIV cascade and support advocacy efforts with global partners and key stakeholders
- To **support development** of operational **guidance** for improving HIV services for men including identifying interventions and review of technical documents
- Identify, collect and **share best practices**, case example and tools for reaching men
- For **dissemination** of **guidance**, briefs and **lessons learned** and support scale up of effective interventions including providing technical assistance



About MENHT

A standing body of stakeholders and partners to support global and country engagement and galvanize action to mitigate the men gap



Global HIV data shows that Men living with HIV are less likely to know their HIV status, initiate antiretroviral therapy, remain engaged in care and be virally suppressed compared to women

The Global Men and HIV Technical Working Group (MENHT) Webinar Series - Episode #3

Draft Agenda

- 14h00 - 14h05: Welcome and introductions – Lycias Zembe, UNAIDS
- 14h05 - 14h10: Opening remarks - Rachel Baggaley, WHO
- 14h10 - 14h25: Understanding who really disengage from care: tracing outcomes and characteristics of men lost-to-follow-up at 20 health facilities in Malawi - Kathryn Dovel, University of California Los Angeles, UCLA
- 14h25 - 14h40: Undetectable = Untransmittable (U=U) messaging increased uptake of HIV testing among South African men: results from a behavioural RCT in Cape Town - Dr. Philip Smith, The Desmond Tutu Health Foundation (DTHF), South Africa
- 14h40 - 15h25: Questions and Answers - All - Facilitated by Afsar Syed Mohammed, ILO
- 15h25 - 15h30: Closing and next webinars – Wole Ameyan, WHO



02 March 2022



14:00 - 15:30



MENHT Webinar Series Episode #3 - Zoom Link
Meeting ID: 856 7648 7173 | Passcode: 918662

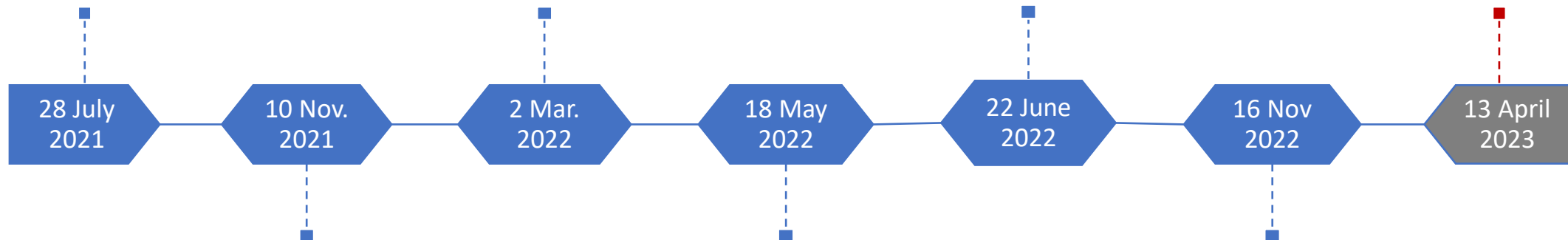
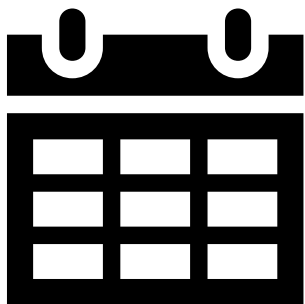
What has happened in the webinar series to date

- Why men and HIV - What the data and research says about men and HIV
- Putting men in global policies and guidelines services
- Breaking the Cycle of Transmission- Improving uptake of testing, prevention, and treatment among men in South Africa
- From VMMC only to men's health - South African Integrated National Men's Health Strategy

- Understanding who really disengages from care: Tracing outcomes and characteristics of men lost-to-follow-up at 20 health facilities in Malawi
- Undetectable = untransmittable (U=U) messaging increased uptake of HIV testing among South African men: results from a behavioral RCT in Cape Town

- HIV self-testing at workplaces: approaches to implementation and sustainable financing
 - ✓ Panel discussion with Kenya, Zimbabwe, India

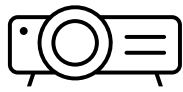
- Men and PrEP part 2
- - 13 April 2023



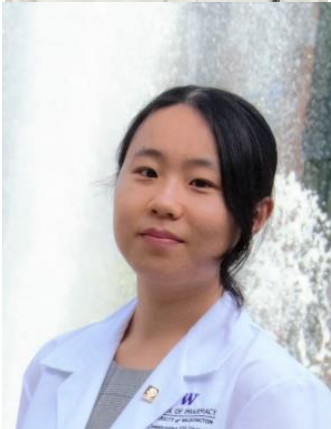
- Missing men or missed opportunities: men's frequent attendance to health facilities and what this means for HIV programs
- Men's experiences of trauma (as children and as adults) and its effects on men themselves (e.g., mental health) and their partners (e.g., HIV and violence risk.)
- HIV prevalence, population sizes, and HIV prevention among men who paid for sex in sub-Saharan Africa (2000-2020): a meta-analysis of 87 population-based surveys

- Addressing fear of social and sexual death
- Barriers and facilitators of male engagement in Community Client-Led Antiretroviral therapy Delivery groups
- VALOR - How we built a social media-driven campaign that cares about Nigerian men
- Male engagement in HIV testing, treatment, and prevention in Eastern and Southern Africa: A framework for action

- Men and PrEP – part 1
- Updated WHO guidelines on PrEP (emphasis on men)
- Results and lessons from research and piloting on PrEP for heterosexual men in South
- PrEP in Guatemala. A community initiative targeting MSM, Guatemala
- HIV Prevention Indexing: Finding men living with HIV and men at high HIV risk through their AGYW sexual partners on PrEP, Zambia
- Demand generation and adaptations for Men and PrEP, Philippines



Panelist



Webinar outline

- 1 Welcome and introductions – **Lyncias Zembe, UNAIDS**
- 2 Updated WHO guidelines related to Men and PrEP - session for guidelines clarifications - **Robin Schaefer, WHO, Switzerland**
- 3 Feasibility of community-based PrEP delivery model among bar patrons in rural South Africa - **Sheela Sheno, Yale University School of Medicine, USA**
- 4 Reaching men with pharmacy-based HIV PrEP delivery in Kenya - **Alexandra Kuo, University of Washington, USA and Victor Omollo, Kenya Medical Research Institute, Kenya**
- 5 SEARCH study insights on Men and PrEP/PEP in Rural East Africa - **James Ayieko, Kenya Medical Research Institute, KEMRI, Kenya**
- 6 Questions and discussions – **All**
- 7 Closing remarks – **Wole Ameyan, WHO**

Scaling PrEP successes and challenges

- Pre-exposure prophylaxis (PrEP) is a highly effective HIV prevention method recommended by WHO and is one of the HIV Prevention Pillars of the 2025 HIV Prevention Road Map.
- Scaling up PrEP has been successful in some parts of the world, but there have also been challenges.

Successes

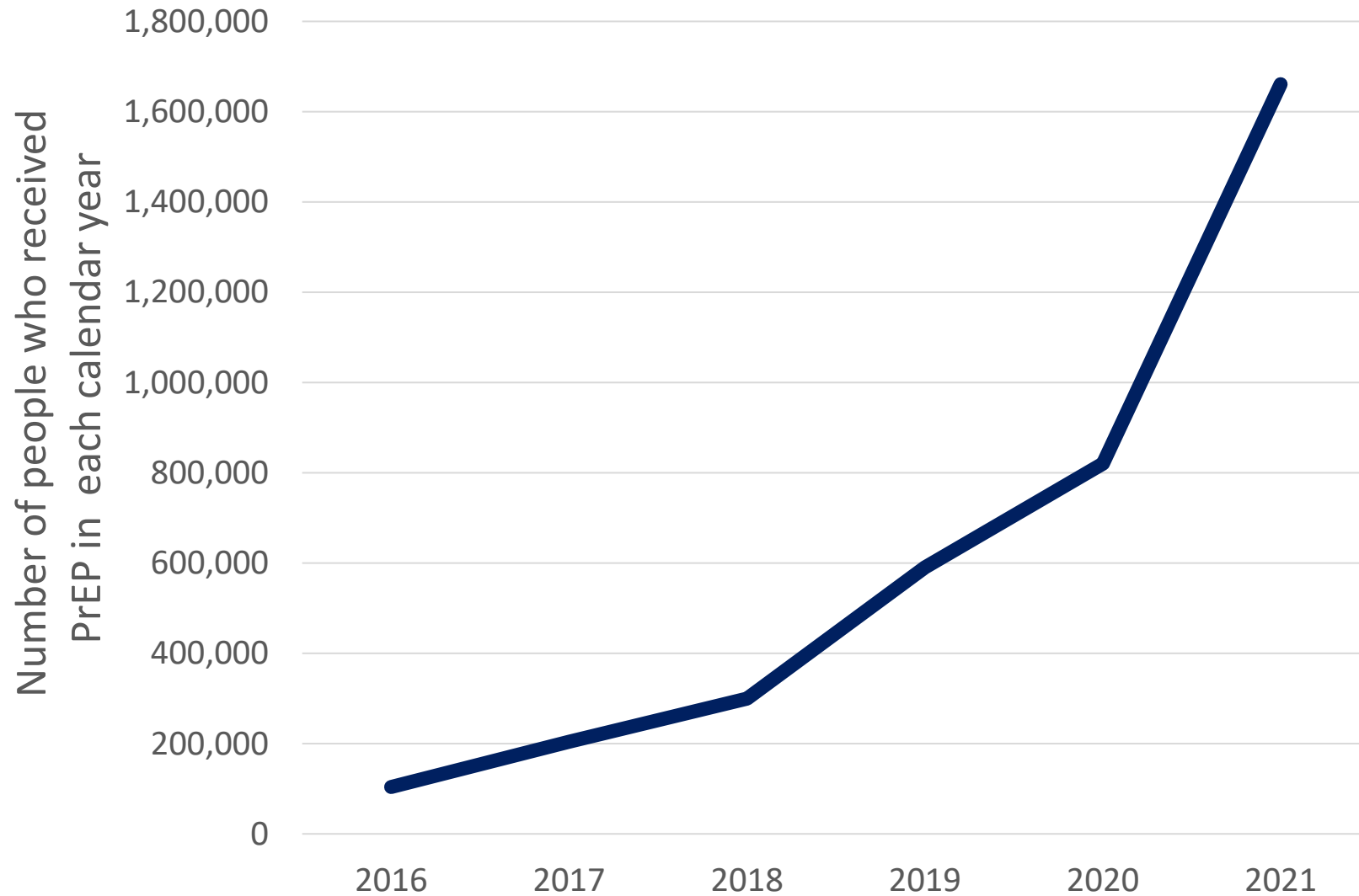
1. Increased access to PrEP: In many countries, access to PrEP has expanded through national programs and initiatives, making it more widely available to those who need it.
2. Decreased HIV incidence: Studies have shown that scaling up PrEP can significantly reduce the number of new HIV infections in populations at high risk.
3. Increased awareness and uptake: As more people become aware of PrEP and its benefits, uptake of the medication has increased in many areas.

Challenges

1. Stigma and discrimination: Stigma and discrimination around HIV and sexual health can prevent people from accessing PrEP and other prevention methods.
2. Limited funding: Scaling up PrEP requires funding for medication, testing, and ongoing support. Limited funding can be a barrier to implementation.
3. Health system capacity: Scaling up PrEP requires strong health systems and trained healthcare providers to support medication adherence and provide ongoing care.

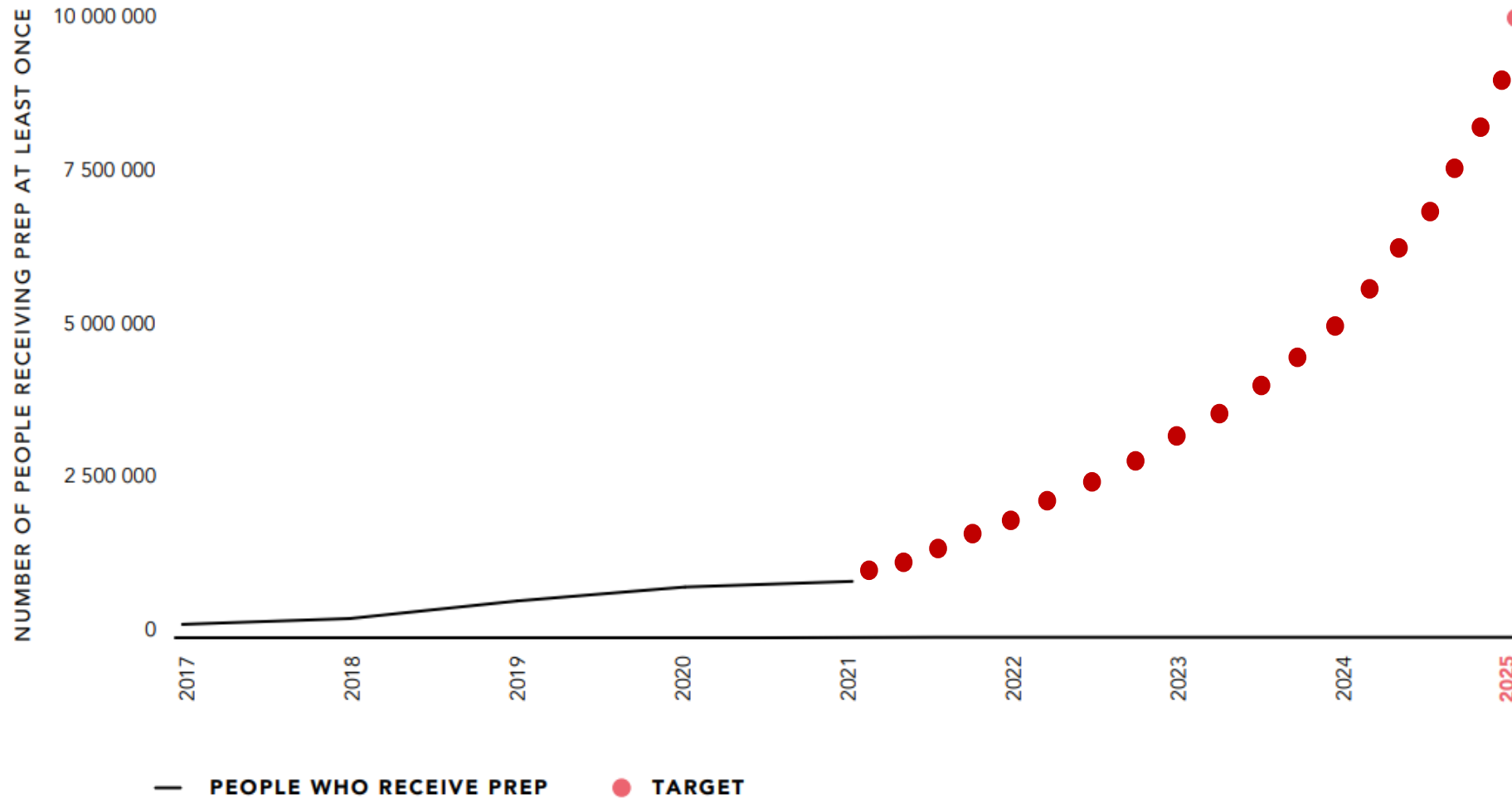
- Overall, while there have been successes in scaling up PrEP, there are still significant challenges that need to be addressed to ensure equitable access to this highly effective HIV prevention method.

The number of people on PrEP has been showing increase since 2016



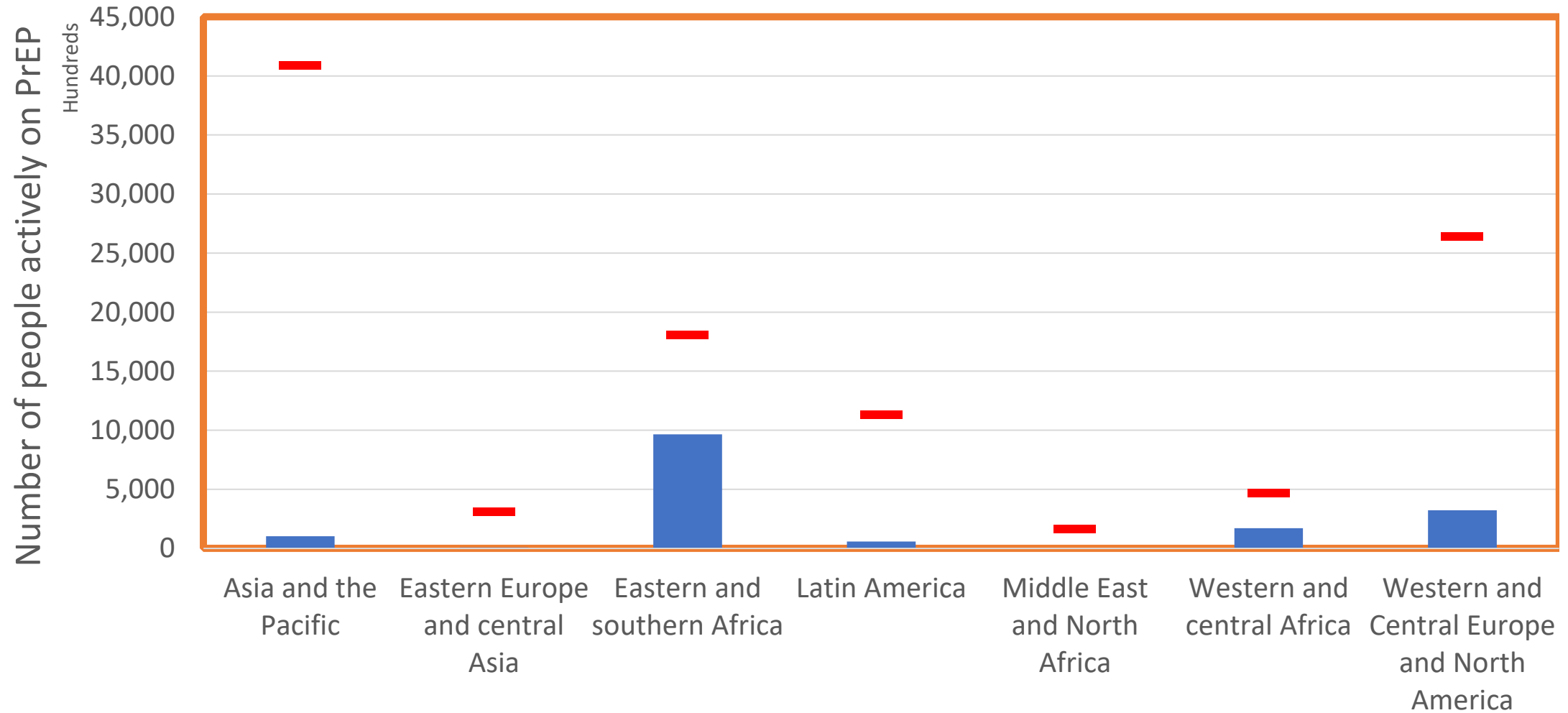
- It has been more than a decade after the first efficacy evidence for oral HIV pre-exposure prophylaxis (PrEP) was reported
- The rate of increase is too slow to achieve desired scale for impact

Although global PrEP scale-up shows increase over time since 2016, the pace is too slow achieve targets and harness potential impact



- In 2021, more than 1.6 million people worldwide were receiving oral preexposure prophylaxis (PrEP).
- People who used PrEP at least once during the reporting year increased approximately two-fold, from 820 000 in 2020 to 1.6 million in 2021.
- The increased use of PrEP in 2021 occurred despite the COVID-19 pandemic, and it represents a continuation of the increased use of PrEP since 2016, although it remains well short of the 2025 target of 10 million people

ESA now leading global progress towards PrEP targets: Greatest need and gaps are in concentrated epidemics in LMICs



Scaling PrEP among men

- Scaling up pre-exposure prophylaxis (PrEP) among men is a critical step in reducing new HIV infections.

Successes

1. Increased awareness and uptake: As more men become aware of PrEP and its benefits, uptake of the medication has increased in many areas.
2. Improved access to PrEP: National programs and initiatives have expanded access to PrEP, making it more widely available to men who need it.
3. Better adherence: Evidence suggests that men who take PrEP regularly have a significantly reduced risk of acquiring HIV.

Challenges

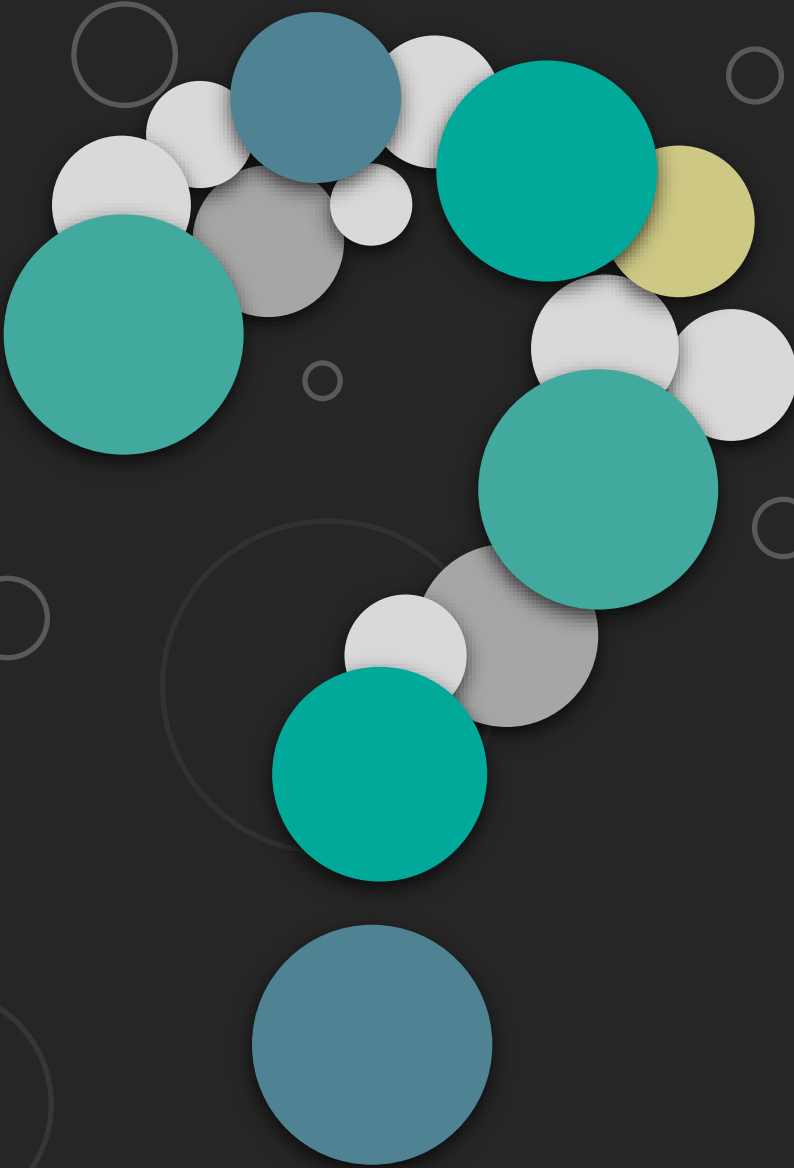
1. Stigma and discrimination: Stigma around HIV and homosexuality can prevent men from accessing PrEP and other prevention methods.
2. Limited healthcare provider training: Healthcare providers may not have the necessary knowledge and skills to provide effective PrEP services.
3. Cost: PrEP can be expensive and may not be covered by insurance or available through public health programs in all areas.

- Overall, while there have been successes in scaling up PrEP among men, there are still significant challenges that need to be addressed to ensure equitable access to this highly effective HIV prevention method

Some recent advances on PrEP scale up among men

- There have been several recent advances in scaling up pre-exposure prophylaxis (PrEP) among men, including:
 - **Implementation of national PrEP programs:** Many countries have established national PrEP programs, making the medication more widely available to men who need it.
 - **Expansion of PrEP delivery options:** New delivery options, such as telemedicine and self-testing, have been implemented to increase access to PrEP among men who may face barriers to in-person care.
 - **Increased use of long-acting PrEP:** Long-acting PrEP formulations, such as injectable cabotegravir, have been approved in some countries and may improve adherence and reduce the burden of daily pill-taking.
 - **Community-led PrEP initiatives:** Community-led initiatives, such as peer-led PrEP education and support groups, have been successful in increasing PrEP uptake and adherence among men who may face stigma or discrimination.
 - **Integration with sexual health services:** Integration of PrEP services with sexual health services, such as STI testing and treatment, has been shown to increase PrEP uptake among men.
- Overall, these recent advances in scaling up PrEP among men demonstrate ongoing efforts to increase access and uptake of this highly effective HIV prevention method.
- However, continued efforts are needed to address remaining barriers to equitable PrEP access and to ensure that all men who could benefit from PrEP are able to access and use it effectively.

QUESTIONS



Discussion Questions

1. What are some of the barriers that men face when accessing PrEP in your community or country, and how do you think they can be addressed?
2. In your opinion, what are some effective ways to engage men in discussions about PrEP and HIV prevention, and how can we work to overcome stigma and discrimination related to these issues?
3. How do you think we can ensure that PrEP programs are designed and implemented in a way that is sensitive to the diverse needs and experiences of men, including those from marginalized communities?

