



NATIONAL PREP PROGRAMMING ROAD MAP

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Why PrEP?

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► **Achieving HIV prevention targets:**

PrEP could help Iran achieve its commitments to global and national goals: 5th National Strategic Plan. In particular, PrEP is seen as a HIV prevention method with high potential to reach men and women, who are experiencing disproportionate and growing HIV rates.

► **Implementing combination prevention:**

PrEP can provide additional choice and empowerment to those target populations who do not use other prevention methods as part of a combination prevention package.

Current PrEP context in Iran

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- PrEP has been used in Iran since 2017 and has not been well developed for various reasons.
- A National PrEP Technical Working Group has been established.
- National implementation guidelines drafted by CDC department of the MOHME are currently functional.
- The development of this method in the PrEP and condom programming is very necessary.

PrEP target groups:

- 1.** MSM men and transgender women or men who have had condom-free sex with at least one random or HIV-infected partner who has not received antiretroviral or viral loading over 200 in the past 6 months.
- 2.** Heterosexual men and women whose sexual partners are infected with HIV and do not take antiretroviral drugs or have a detectable viral load and do not use condoms.
- 3.** Sexual partners of the Female sex-workers who have multiple unprotected contacts.

Methodology for PrEP Programming based on the Comprehensive Condom Programming (CCP)

► The 10-Step Strategic Approach

Step 1. Establish a national PrEP support team

Step 2. Undertake a situation analysis (Using RNA method)

Step 3. Develop a comprehensive and integrated national strategy for PrEP

Step 4. Develop a multi-year operational plan and budget

Step 5. Link the multi-year operational plan with the national commodity security plan

Step 6. Mobilize financial resources

Step 7. Strengthen human resources and institutional capacity

Step 8. Create and sustain demand for PrEP

Step 9. Strengthen advocacy and engage the media

Step 10. Monitor programme implementation routinely, conduct research and evaluate outcomes

I. HIV/AIDS SITUATION

Rapid Needs Assessment (RNA) Tool for PrEP Programming

- Identify and engage key opinion leaders and policy makers in improving PrEP programming,
- Describe the current status of PrEP programming, including the level of policy support and the adequacy and sustainability of PrEP procurement and supply,
- Identify the main sexual and other practices that influence HIV transmission,
- Identify the conditions regarding (knowledge, attitudes, geographical distribution, economic, social and cultural factors) that facilitate and hinder PrEP use, and
- Identify the most pressing needs for improving PrEP programming.

Global AIDS Trends: Where are We?

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World Health Organization

Iran (Islamic Republic of)

HIV Country Profile 2019

WHO/UCN/HSS/19.54

Demographic and socioeconomic data



81.8 million
Total Population (2018)



N/A US\$
GNI per capita, PPP ()



16
Maternal mortality per 100 000 live births (2017)



8.1%
Health expenditure, total (% of GDP) (2016)



75.7 years
Life expectancy at birth (2016)



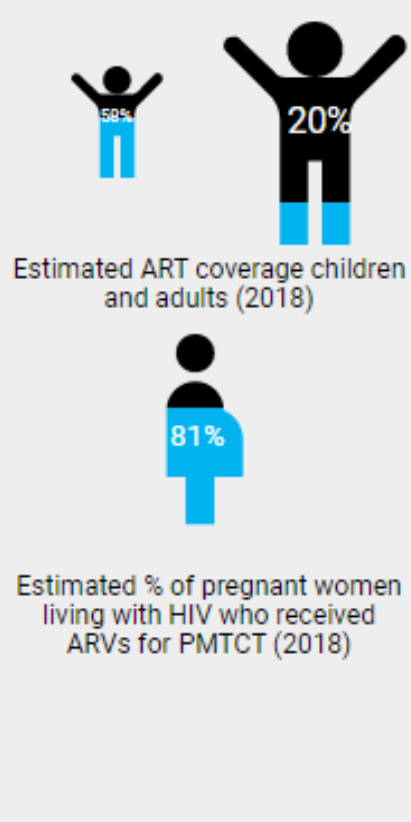
415 US\$
Health expenditure per capita (2016)



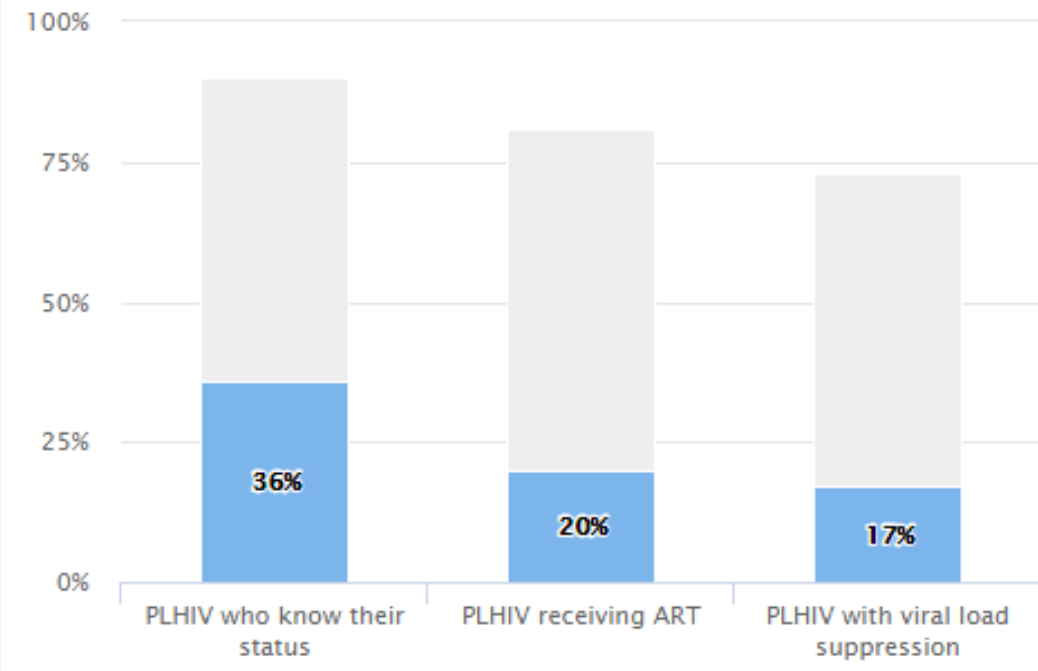
2.2
Total fertility rate (births per woman) (2015-2020)



0.8
Human Development Index Value (2017)



90-90-90 progress towards 2020 targets (2018)



By 2020, 90 percent of people living with HIV know their status, 90 percent of people living with HIV who know their status are receiving treatment and 90 percent of people on treatment have suppressed viral loads.

Health sector cascade (2018)

Global AIDS Trends: Where are We?

Epidemiological HIV data (2018)	Value
Estimated number of people living with HIV	61 000
Estimated number of children aged 0 to 14 living with HIV	880
Estimated number of women (15+) living with HIV	15 000
Estimated adult (15-49) prevalence	0.1%
Estimated number of deaths due to HIV	2 600
Estimated number of people newly infected with HIV	4 400
Estimated incidence rate per 1000 uninfected population	0.05

What is the HIV prevalence? Who is most at risk?

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What is the prevalence of HIV? (Prevalence: Number existing case/year)		
Rank	Group	Prevalence
1	MSM	19% (2004) - 18.8% (2009) among prisoners
2	PWID	15.3% (2008) - 3.1% (2019)
3	FSW	4.5% (2010) - 1.59 (2020)
4	Transgender	0.0% (2009) - 1.9% (2014)
5	Prosoners	3.8% (2002) -1.2% (2014) in male prisoners
	Women at antenatal clinics	0.5%
	General population	<0.1 (<0.1 - 0.2)
	Youth	<0.1 (<0.1 - 0.2)

What is the Level of Sexually Transmitted Infections (STIs)?

- Data on the prevalence of STIs in Iran is very sparse.
- Chlamydia trachomatis in 10.6% of men was reported.
- In a large multi-district study, around 57% of the sample had experienced at least one STIs-associated symptom during the previous year.
- More than 90% of FSW had either had an STI or symptoms of an STI during the 12 months preceding the population-based survey in 1399.

What is Level of Awareness and knowledge of HIV/AIDS and ways to avoid HIV/AIDS?

		Total (%)	No education (%)	1 ^o Ed (%)	2 ^o Ed (%)
Comprehensive knowledge of HIV	Youth	57.6 (56.7-58.5)	20.2	24.8	27.1
	FSW 2020	51.5			
	PWID	31.1	14.1	21.8	34.1
	Prisoners	19.7	6.1	12.9	21.5
Ever heard of HIV/AIDS	Youth				
	FSW 2020	89.4			
	PWID	96.9			
	Prisoners	93.2			
Knows how to prevent HIV	Youth	57.6			
	FSW 2020	87.6			
	PWID	90.1			
	Prisoners	84.3			
Knows how people get HIV	FSW	85.9			
	PWID	80.8			
	Prisoners	80.4			
% Perceive they are susceptible to AIDS	Youth				
	FSW	48.5			
	PWID	61.1			
	Prisoners	42.7			

Findings of the Situational analysis of PrEP in Iran

Key Populations for PrEP in Iran

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	Men who have sex with men (MSM)	Female Sex workers (FSW)	Partners of the People Living with HIV (PLHIV)
Key indicators	<ul style="list-style-type: none"> Prevalence: 0.5% (0.3-0.7%)³⁰ Estimated population: 216,011 Prevalence of HIV infection: to 14.8% Condom use: 20% HIV programming for MSM as well as high-risk behavior have increased in recent years via NSPs. 	<ul style="list-style-type: none"> Prevalence: 1.43% (0.96-1.84%)³¹ Estimated population: 322,623 prevalence of HIV among FSWs decreased from 2010 to 2020, from close to 5% to 1.5% Comprehensive knowledge of HIV: 51.5% Condom use with most recent client in commercial sex: 62.9% 	<ul style="list-style-type: none"> Prevalence: Estimated population: 59,000 Condom use with most recent client in commercial sex: 37.2% consistent condom use: 25%
Prioritization	<ul style="list-style-type: none"> PrEP perceived to be cost-effective for MSM MSM is one of the target population to receive PrEP 	<ul style="list-style-type: none"> 5th NSP providing HIV prevention targets to all FSWs 40 active Women Centers providing STI/HIV prevention services for FSWs nationwide 	<ul style="list-style-type: none"> currently being considered for oral PrEP
Questions	<ul style="list-style-type: none"> How can Iran effectively activate channels already reaching MSM to deliver PrEP? 	<ul style="list-style-type: none"> What service delivery platforms are most effective in providing PrEP to the FSW population? 	<ul style="list-style-type: none"> What service delivery platforms are most effective in providing PrEP to the PLHIV?
	<ul style="list-style-type: none"> How will society and health providers address structural stigma to ensure reliable and effective access to PrEP for these populations? Will initial launch of PrEP in these populations stigmatize use of PrEP for other populations? 		

We identified five programmatic elements that are necessary for successful PrEP introduction and implementation

- 1. Introduce PrEP extensively**
- 2. Give potential customers a reason to value PrEP**
- 3. Speak to potential customers**
- 4. Equip potential customers to make an informed choice**
- 5. Right Person, Right Time**

PrEP SUPPLY CHAIN AND COMMODITY SECURITY

The number of estimated population of the PrEP target groups subgroups of 15-49 old years

Subgroups	Estimated population		
	Base value	Lower limit	Upper limit
PLHIV	53,000	39,000	92,086
MSM	117,410	70,446	164,373
FSW	322,623	216,586	419,635
Transgender	24,403	22,101	27,165
Total (in raw)	517,436	348,133	703,259

PrEP needed and required for Iranian targeted subgroups of 15-49 old years based on NSP of HIV/AIDS control (Annually)

Subgroups	Population (95% CI)	Percent of consistently condom use	PrEP package needed (95% CI)	Coverage target	PrEP required (95% CI)
PLHIV partners	53,000 (39,000-92,086)	69.50%	193,980 (142,740-337,035)	90%	174,582 (128,466-303,332)
MSM	117,410 (70,446-164,373)	62.20%	532,572 (319,543-745,596)	6%	31,954 (19,173-44,736)
FSW	322,623 (216,586-419,635)	85.10%	576,850 (387,256-750,307)	15%	86,528 (58,088-112,546)
Transgender	24,403 (22,101-27,165)	62.20%	110,692 (100,250-123,220)	6%	6,642 (6015-7393)
Total (in raw)	523,436 (348,133-703,259)	77.97%	1,383,755 (920,324-1,859,135)	20%	27,6751 (184,065-371,827)
Total (Corrected)	464,264 (306,893-621,535)	77.97%	1,227,328 (811,302-1643,090)	20%	245,466 (162,260-328,618)

PrEP budget needed and required for Iranian targeted subgroups of 15-49 old years based on NSP of HIV/AIDS control (Annually)

Subgroups	<u>PrEP</u> budget needed for total population (95% CI)		<u>PrEP</u> budget required for reach the targets (95% CI)	
	In Million USD	In Trillion IRR	In Million USD	In Trillion IRR
PLHIV partners	9.78 (7.19-16.99)	2.27 (1.67-3.94)	8.80 (6.47-15.29)	2.04 (1.50-3.55)
MSM	26.84 (16.10-37.58)	6.23 (3.74-8.72)	1.61 (0.97-2.25)	0.37 (0.22-0.52)
FSW	29.07 (19.52-37.82)	6.75 (4.53-8.77)	4.36 (2.93-5.67)	1.01 (0.68-1.32)
Transgender	5.58 (5.05-6.21)	1.29 (1.17-1.44)	0.33 (0.30-0.37)	0.78 (0.70-0.86)
Total (in raw)	69.74 (46.38-93.70)	16.18 (10.76-21.74)	13.95 (9.28-18.74)	3.24 (2.15-4.35)
Total (Corrected)	61.85 (40.89-82.81)	14.35 (9.49-19.21)	12.37 (8.18-16.56)	2.87 (1.90-3.84)

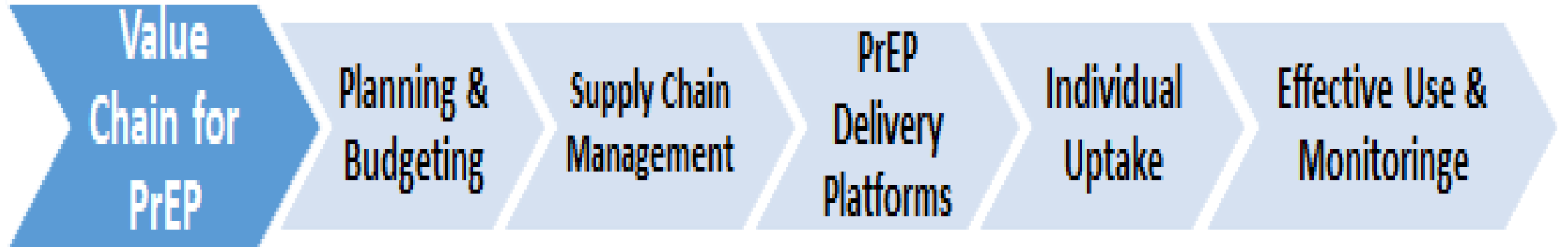
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Value Chain for PrEP



Resources and Gaps for PrEP

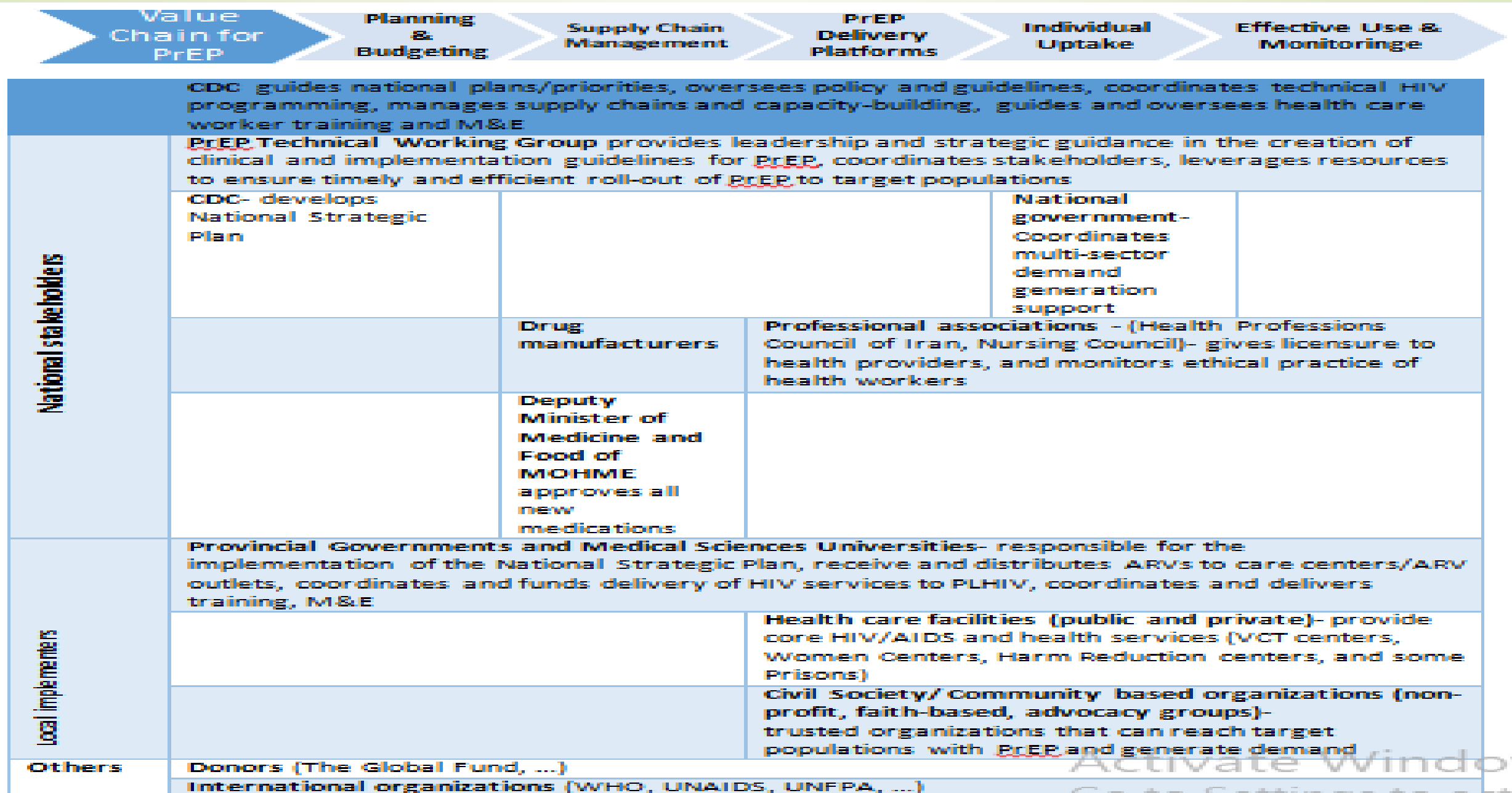
Value Chain for PrEP	Expected Strengths	Emerging Key Considerations
Planning & Budgeting	<ul style="list-style-type: none"> PrEP rollout initiated as part of HIV prevention strategy PrEP introduction plans underway for MSM, FSW, and PLHIV CDC department supportive of PrEP as part of combination prevention PrEP is seen in the Fifth NSP 	<ul style="list-style-type: none"> There is need for more evidence before providing PrEP to target groups via campaigns Participation of end users and civil society groups in planning activities could expand
Supply Chain Management	<ul style="list-style-type: none"> Tovada have been approved for prevention by CDC Established ARV procurement system Infrastructure for domestic manufacturing? 	<ul style="list-style-type: none"> Tovada not approved for ages <18 or pregnant women Concerns about providing free medicine to all target groups if welcomed
PrEP Delivery Platforms	<ul style="list-style-type: none"> Clinical guidelines developed; training curriculum underway? CDC implementing new distribution models Strong existing channels for target groups via VCT centers and Women Centers 	<ul style="list-style-type: none"> New channels may be needed for PWID Increased burden on healthcare system as uptake increases; could strain limited delivery capacity
Individual Uptake	<ul style="list-style-type: none"> Developed clinical guideline could also enable PrEP roll-out Strong uptake expected in MSM and FSW 	<ul style="list-style-type: none"> The 5th NSP suggest low compliance among PLHIV to ARV drug treatment Stigma associated with HIV and HIV medication Some user preference for injectable products
Effective Use & Monitoring	<ul style="list-style-type: none"> Call for harmonized, effective M&E in the Fifth NSP could be prioritized in current PrEP road map Lessons from previous projects can inform strategies for effective use in key populations 	<ul style="list-style-type: none"> Inconsistent adherence/ effective use amongst key populations No patient single identifier system M&E infrastructure improvements needed System capacity for initial and ongoing HIV and other testing

Key Questions for PrEP Roll-out

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Value Chain for <u>PrEP</u>	Key Questions for <u>PrEP</u> Roll-out
Planning & Budgeting	<ul style="list-style-type: none"> • For which segments of the target populations will it be cost-effective and/or most impactful to deliver <u>PrEP</u>? • What are the incremental costs of <u>PrEP</u> delivery? • What sources of funding will be available for <u>PrEP</u>? How will the scale-up for FSW, MSM, and PLHIV after implementation phase?
Supply Chain Management	<ul style="list-style-type: none"> • Will generic oral <u>PrEP</u> options be branded and packaged substantially differently from treatment medications (e.g., to be smaller, come in more discrete packaging)? • How will <u>PrEP</u> be integrated into existing procurement and distribution mechanisms?
<u>PrEP</u> Delivery Platforms	<ul style="list-style-type: none"> • To what extent do existing channels reach target populations? How might these channels need to be modified? What new channels will be needed (e.g., for PLHIV)? • What can be learned from the FSW rollout to inform broader healthcare worker engagement?
Individual Uptake	<ul style="list-style-type: none"> • How will CDC effectively identify those at significant risk? • How might initial rollout plans (e.g., to sex workers, MSM) stigmatize <u>PrEP</u> for other needed populations? • How will stigma and community buy-in be addressed for <u>PrEP</u>? • What are the most effective demand generation strategies to reach target populations? • Is there enough laboratory capacity to support effective <u>PrEP</u> initiation?
Effective Use & Monitoring	<ul style="list-style-type: none"> • Call for harmonized, effective M&E in the Fifth NSP could be prioritized in current <u>PrEP</u> road map • Lessons from previous projects can inform strategies for effective use in key populations

Key Stakeholders for PrEP



GOALS AND RELATED OBJECTIVES, STRATEGIES, AND INDICATORS OF PROGRESS

VISION

- Iran will be a place where new HIV infections are prevented among key populations and their partners, every person have access to PrEP and lives free from stigma and discrimination.
- This vision includes all key populations and their partners, regardless of age, sex, gender identity, sexual orientation, ethnicity, religion, disability, geographic location, or socioeconomic circumstance

Goal 1: Prevent New HIV Infections through the Use of Target Populations of PrEP

► SUMMARY OF OBJECTIVES

- 1. To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026.**
- 2. To increase adherence and continued use of PrEP, from a 2020 baseline of almost zero percent by 2026.**

Outcomes, Indicators and Targets

Outcome	Indicator	Baseline (2020)	Target 2026
Increased <u>PrEP</u> uptake among all target populations by 2026	Percentage of adults who use <u>PrEP</u>	MSM: 2% FSW: 0% TG: 0% PLHIV partners: 0%	MSM: 10% FSW: 25% TG: 25% PLHIV partners: 90%
Increased adherence for <u>PrEP</u> among all target populations by 2026	Percentage of adults who reported always using <u>PrEP</u> in the last month	MSM: 0% FSW: 0% TG: 0% PLHIV partners: 0%	MSM: 80% FSW: 80% TG: 80% PLHIV partners: 80%
Increased awareness about <u>PrEP</u> among all target populations by 2026	The proportion of target populations having comprehensive awareness about <u>PrEP</u>	MSM: 0% FSW: 0% TG: 0% PLHIV partners: 0%	MSM: 80% FSW: 80% TG: 80% PLHIV partners: 80%

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

► Strategies

2.1.1 Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

- Coordination and Program Governance
- Advocacy and education to create the political will to engage policymakers
- Strengthen the national PrEP performance monitoring
- Effective Quantification and Forecasting
- Implement the PrEP distribution plan
- Using novel methods to improve PrEP supply chain

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

► Strategies

2.1.2 Demand creation using culturally competent and linguistically appropriate approaches for PrEP and remove barriers to access and begin using

- More investment in demand-generation activities to ensure that the target populations have the knowledge and attitudes to use PrEP correctly and consistently. (Strengthening Advocacy)
- Highly targeted interpersonal communication leads to changes in social behaviors associated with PrEP use by target populations

Objective 2: To increase adherence and continued use of PrEP, from a 2020 baseline of almost zero percent by 2026

► Strategies

2.2.1 Increasing the providers' knowledge, attitudes, practices, and behaviors with regards to oral PrEP delivery.

- Build capacity of service providers for PrEP quality service provision

2.2.2 Scale-up uptake, adherence, and retention of oral PrEP for target populations for effective use and monitoring

- Measures to increase the use of PrEP in the conditions in which access is provided
- Strengthen social marketing brand management and sustainability

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.1.:** Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

Priority 1.1.1.: Coordination and Program Governance

- Establishment of the PrEP coordination structures (Establishment of a PrEP Technical Group under the SIP Committee at MOHME), to develop and implement program management action plans and targets and hold regular monitoring and evaluation.
- Integrating PrEP programming in the health network of the MOHME and related organizations including Welfare Organization, Prisons Organization, Ministry of Interior, and so on.
- Strengthen coordination of key stakeholders from government, City Council, and commercial private sector to address programming gaps at national and provincial levels.

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.1.:** Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

Priority 1.1.2.: Advocacy and education to create political will to engage policymakers

- Implement a PrEP-related incentive program for providers and customers to positively influence the attitudes and perceptions of stakeholders as well as various policymakers about PrEP
- Develop and implement campaigns to increase awareness and commitment between the government and experts at all levels to reduce barriers to PrEP planning and increase PrEP access and use
- Build partnerships through networking and engagement with all public and private sector stakeholders, NGOs, community , and other sectors of society to support PrEP planning.
- Provide evidence-based information and modeling on the importance of PrEP to influence health policymakers and planners.

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.1.:** Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

Priority 1.1.3.: Strengthen the national PrEP performance monitoring

- Establish a national framework for PrEP monitoring and evaluation, including strategies related to the HIV prevention program and within the framework of the Fifth NSP, with annual national and provincial goals.
- Strengthen the capacity of MOHME to manage, monitor and evaluate the national PrEP program, including human resource training and the institutionalization of data management tools.
- Holding annual PrEP program review meetings at the national and provincial levels to evaluate the annual performance of the PrEP program and how to achieve the goals and determine the policy for the coming years.

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.1.:** Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

Priority 1.1.4.: Effective Quantification and Forecasting

- To estimate the need for PrEP for target populations across the country.
- Establish and support the " Quantification and Procurement Planning" unit for quantification in the provinces and at the national level facilities.
- Improve PrEP information management system, for reliable forecasting and measurement, by training relevant teams in relevant organizations on the use of designated tools at national and sub-national levels.

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.1.:** Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

Priority 1.1.5.: Implement the PrEP distribution plan

- Searching for alternative PrEP provision outlets for free drugs to target populations is essential in areas or areas where groups of target populations have less access to PrEP drugs.
- Increase the number, coverage, monitoring and completion of free PrEP outlets in the public sector and at strategic points to ensure greater access to target populations.
- Expand PrEP beyond traditional government channels (public PrEP Provision outlets) to non-traditional channels such as private clinics, private and public hospitals, pharmacies, telehealth.

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.1.:** Improve supply chain management to provide and distribute oral PrEP in sufficient quantity to meet projected demand by appropriate delivery platform

Priority 1.1.6.: Using novel clinical approaches to improve PrEP supply chain

- Using emerging alternatives to daily oral PrEP prescription such as “on-demand” PrEP, which has been shown to have at least comparable effectiveness to daily oral PrEP.
- Increased STI testing frequency and linkage to PrEP
- Frequent PrEP Screening and Repeat PrEP Offering: PrEP assessment and offering must be a sustained process for those at the highest risk for HIV infection
- Streamlining clinical procedures: Minimize repeat clinic visits, Same-day PrEP initiation
- Using Peer Navigators for PrEP initiation
- Create seamless pathways for entry to PrEP care from existing public health touchpoints (e.g., STI or family health clinics)
- Generic oral PrEP options should be branded and packaged substantially differently from treatment medications (e.g., to be smaller, come in more discrete packaging)

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.2.:** Demand creation using culturally competent and linguistically appropriate approaches for PrEP and remove barriers to access and begin use

Priority 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. (Strengthening Advocacy)

- Increase the targeted capacity of the public sector and create demand for access to all target populations that for various reasons, such as geographical access and other barriers, do not have access to PrEP services in the public sector
- Supporting social marketing organizations to improve targeting, expand coverage and create PrEP demand in target populations
- Setting Up and Strengthening Social Marketing of PrEP for target populations
- Make the outlet PrEP friendly
- Ensure that PrEP drugs are always available

Objective 1: To achieve high scale of PrEP coverage for all target groups from a 2020 baseline of almost zero percent by 2026

- **Strategy 1.2.:** Demand creation using culturally competent and linguistically appropriate approaches for PrEP and remove barriers to access and begin use

Priority 1.2.2.: Highly targeted interpersonal communication leads to changes in social behaviors associated with PrEP use by target populations

- Prepare and implement a PrEP-Related Communication guide (PRCG) for various stakeholder groups, standardize, localize, and regularly review the concepts of PrEP advertising messaging for target populations among public, civil, and private sector actors.
- Conducting awareness and PrEP education campaigns for target populations with the aim of marketing PrEP for ensuring fair information coverage.
- Strengthen community participation in PrEP campaigns for target populations.
- Sensitizing society to the promotion and use of PrEP by target populations to cultural and social experts.
- Discover innovative mechanisms for promoting PrEP in target populations, including the use of media technology platforms to provide information and access to PrEP

Objective 2: To increase adherence and continued use of PrEP, from a 2020 baseline of almost zero percent by 2026

- **Strategy 2.1.:** Increasing the providers' knowledge, attitudes, practices, and behaviors with regards to oral PrEP delivery

Priority 2.1.1.: Build capacity of service providers for PrEP quality service provision

- Educational interventions targeted to primary care providers, including training to increase PrEP knowledge and to alleviate concerns regarding PrEP safety.
- Organizing national and regional symposia to share experiences related to PrEP advertising for target populations by experts and community scientists
- Use of novel ways to enhance PrEP education of the providers and appropriate training aids for skills training in PrEP use by service providers
- Development of standardized and evidence-based “toolkits” for PrEP promotion and their use to make it easier for PrEP outlets to sustain high quality interventions with target populations
- Adherence to 5 key steps of service delivery by employees to target populations, including the following:
 - ✓ Step 1: Make the outlet PrEP friendly
 - ✓ Step 2: Ensure that PrEP drugs are always available
 - ✓ Step 3: Counsel clients about PrEP
 - ✓ Step 4: Reach out to the community
 - ✓ Step 5: Check progress

Objective 2: To increase adherence and continued use of PrEP, from a 2020 baseline of almost zero percent by 2026

- **Strategy 2.2.:** Scale-up uptake, adherence, and retention of oral PrEP for target populations for effective use and monitoring

Priority 2.2.1.: Measures to increase the use of PrEP in the conditions in which access is provided

- Correct and consistent use of PrEP drugs shall be fostered by providing a regular, continuous supply of drugs.
- Demonstrations on the correct use of PrEP drugs shall be performed during service delivery outlets, considering flexible PrEP regimens (e.g., on-demand PrEP, long-acting PrEP)

Objective 2: To increase adherence and continued use of PrEP, from a 2020 baseline of almost zero percent by 2026

- **Strategy 2.2.:** Scale-up uptake, adherence, and retention of oral PrEP for target populations for effective use and monitoring

Priority 2.2.2.: Strengthen social marketing brand management and sustainability

- Supporting social marketing organizations to develop tailored business programs for target populations and social conditions in Iran.
- Provide facilities and support to social marketing organizations to introduce drugs to private and public sector.

PrEP Program Operational Plan

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Description of priorities	Key annual outputs				
	2022	2023	2024	2025	2026
Objective 1: To achieve high scale of <u>PrEP</u> 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 <u>PrEP</u> in sufficient quantity to meet projected demand by appropriate delivery platform					
1.1.1: Coordination and Program Governance	Creating <u>PrEP</u> Technical Group	<u>PrEP</u> Technical Group's 2-yr Priority Action Plan (2023/24) detailing program outputs, outcome targets and partner accountability framework developed	<u>PrEP</u> mid-term review report compiled defining revised targets	The <u>PrEP</u> program review report is reviewed and approved by the SIP	The <u>PrEP</u> program review report in place
	Minimum functional capacity for provincial <u>PrEP</u> Programming defined	10% of provinces especially those covering hotspots supported to establish minimum capacity for <u>PrEP</u> Programming	20% of provinces especially those covering hotspots supported to establish minimum capacity for <u>PrEP</u> Programming	30% of provinces especially those covering hotspots supported to establish minimum capacity for <u>PrEP</u> Programming	50% of provinces especially those covering hotspots supported to establish minimum capacity for <u>PrEP</u> Programming
1.1.2: Advocacy and education	5 th NSP 2019/2023			The Health sector budget	Stakeholder agreed on new

National PrEP Strategy- Model Results Framework

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