INTRODUCTION

WOMEN’S RISK OF HIV

- Inequitable gender norms and intimate partner violence (IPV) increase risk.  

PRE-EXPOSURE PROPHYLAXIS (PrEP) & MICROBIDES

- Designed to give women a tool that could be used with and without male partner (MP) support.
- MPs remain important according to women.  
- Product use can impact relationships along a continuum from improving communication to increasing risk of social harms (SH), including IPV, resulting from perceived threats to male power.

INTERVENTION NEEDS

- Effectively identify, measure, and address the ways gender norms and relationship power differentials affect women’s ability to safely and consistently use microbicides.
- Improve women’s agency to use PrEP and microbicides consistently and safely.

METHODS

The CHARISMA (Community Health clinic model for Agency in Relationships and Safer Microbicide Adherence) pilot was designed through:

1. identification of evidence-based clinic and community-based interventions,
2. secondary analysis of data from prior trials and literature on male partner influence and IPV,
3. primary data collection (309 surveys, 25 cognitive interviews, 42 in-depth interviews) with microbicide naive women, former microbicide users who did and did not experience SH during use, and their MPs, and participatory workshops and stakeholder review.

And continues to be refined through:

5. ongoing monitoring of the pilot in the context of the HOPE vaginal ring open-label extension study in Johannesburg, South Africa.

RESULTS

SOCIAL-BENEFITS AND HARMS TOOL

The 42-item tablet-administered SBHT drew from 6 validated scales and measures relationship status across 5 factors (see Table 1). Administered at enrollment and 3 and 6 month follow-up visits, it guides counsellors in the provision of 1 of 3 counselling modules. It also assess change over time.

Table 1: SBHT characteristics

<table>
<thead>
<tr>
<th>FACTORS</th>
<th>ITEMS</th>
<th>EXAMPLE ITEMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Traditional Values</td>
<td>13</td>
<td>I think a woman cannot refuse to have sex with her husband.</td>
</tr>
<tr>
<td>Partner Support</td>
<td>10</td>
<td>My partner is as committed as I am to our relationship.</td>
</tr>
<tr>
<td>Partner Abuse &amp; Control</td>
<td>9</td>
<td>I feel fear, violence, threats, or the like could be used to control me.</td>
</tr>
<tr>
<td>Partner Resistance</td>
<td>5</td>
<td>If asked, my partner would not allow me to participate.</td>
</tr>
<tr>
<td>HIV Prevention Readiness</td>
<td>5</td>
<td>Using an HIV prevention product is the right thing to do.</td>
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</table>

CLINIC-BASED COUNSELLING FOR WOMEN

- Based on Safe + Sound – a nurse-led IPV empowerment counseling intervention developed for urban South Africa.
- Adapted to include:
  - a five-day training for clinic providers,
  - Provision of introductory counselling at enrollment on healthy relationships, followed by 1 of 3 targeted modules: 1) relationship communication and conflict-resolution, 2) ring disclosure and negotiation, and 3) responding to IPV,
  - booster counselling at month one and follow-up at month three and six,
  - a supportive referral network, and
  - a staff support system to address vicarious trauma, burnout, and compassion fatigue.

DISCUSSION

Initial results are promising:

- Women have utilized counselling to improve existing relationships or to leave violent ones.
- Men have questioned their roles in violence and HIV prevention, including support for microbicides.

Implementation has refined the intervention:

- Reducing CAT workshops to two-days to address participant fatigue and retention,
- Creating flexibility within the clinic counselling and referral schedule to minimize participant burden,
- And utilizing technology (i.e. whatsapp) to more directly link community- and clinic-based activities.

The next stage of research will involve a multi-arm study designed to tease out questions of impact - on HIV prevention uptake and adherence and reduction of IPV - by intervention dose.

REFERENCES

5. Lippman, S.A., Maman, S., MacPhail, C., et al. (2013) Reducing CAT workshops to two-days to address participant fatigue and retention.