## Participant report of ring use in ASPIRE – Zim Site strategy

**Presented by Chenai Rushwaya** 

## Outline

- VOICE experiences and lessons learnt
- Plans for ASPIRE
- Promoting honest reporting of ring use
- Promoting honest reporting of non-use

## **VOICE Experience**

Initial adherence counselling approach	VASP approach
Counselling was guided by pharmacy returned counts and self report of product use	Counselling was focused on participant's experiences in using the product and what made product use easier or harder, regardless of how much she used.
Probing was done for any discrepancies	A neutral counselling Approach was used
Counselling was based on how often participant was able to use product	Adherence plan was based on addressing Adherence related need
Goal was focused on perfect Adherence	Goal was focused on making product use manageable

## Lessons from VOICE

- Participants open up if you address their needs.
- An approach that is centred on perfect adherence results in biased reporting
- Focusing on perfect adherence creates anxiety for participants and they will only report what the researcher expects to hear
- Participants should be respected for their effort.
- Partner involvement should be done from the start

### Plans for ASPIRE COMMUNITY

- Community perceptions of a new product –ARV based vaginal ring – can significantly impact product use
- CAB members were engaged/ consulted right from the start via protocol trainings bi-monthly meetings led by Mrs Ngani.
- Community education very critical to deal with misconceptions, fears and purpose of the study
- Community sensitisation has started with outreach workers.
- Outreach team is taking the sample ring to the community and capturing concerns about the ring.
- Outreach team is giving out fliers that will address the fears of the community with ring use

### Promoting honest reporting of ring

## • We are going to use the Adherence Counselling Education Approach which is client-centred.

- Create a comfortable environment by creating good relationships between participants and research staff.
- Participant education is key. There is need to find out if participants understand the objectives of the study and how they can be achieved.
- Pay special attention to addressing participant needs vs efficiency of the process
- Encourage open dialogue always
- Follow-up with participants after enrolment visit- courtesy call.
- Partner Involvement.

Ise

### continued:

# Promoting honest reporting of ring

### use

- Address all the potential issues/fears that may affect one's willingness to use the study product.
  - 1. Fear of side effects
  - 2. ring sticking in the body
  - 3. ring coming out during sex
  - 4. Partner feeling ring during sex
  - 5. wearing ring during menses
  - 6. difficulty in inserting or removing ring
  - 7. ring uncomfortable during normal daily activities
  - 8. partner not approving ring use
  - 9. community perceptions

### Promoting honest reporting of non-use

- Respect for the participant will be our MOTTO
- Participants shall be respected for their effort even if they report non-use
- Study staff shall always encourage product use without coercion.
- Study staff shall address needs of Participants individually.
- Study Clinic should always have a friendly atmosphere to make participants feel at home

## **Conclusion:**

- In conclusion, i would like to say it is very important to have a good study staff participant relationship. A good relationship promotes honest reporting.
- Respect for the participant shall be our MOTTO

I would like to say THANK YOU!!! to CAB Members, Zim site Staff, MTN, NIH

### THANK YOU!!!!!!!!

## Acknowledgements







University of Zimbabwe, School of Medicine

#### UZ - UCSF Collaborative Research Programme in Women's Health

15 Phillips Avenue Belgravia, Harare, Zimbabwe Telephone: 263-4-706540 Fax: 263-4-704897 Email: <u>crushwaya@gmail.com</u>



University of California, San Francisco, School of Medicine Acknowledgements Zimbabwe MTN 003 Research Participants CAB Members UZ-UCSF Staff MTN Protocol Team MTN is funded by NIAID (SUMIAIO68633), NICHD and NIMH, All of the U.S National Institutes of Health