REACH Study

Late FGD Guide - v2.0 13 August 2020

Introduction

[Bullet points below to be explained in the facilitator's own words]

- Begin with icebreaker if appropriate
- Remind participants that discussion is confidential, so personal information won't be shared outside of the REACH study
- Remind participants to use pseudonyms during the discussion and identify themselves with their pseudonym
- Purpose of FGD: Learn about participants' experiences with the REACH study and the study products
- Describe that some questions are about experiences with the study overall and both products, while some are specifically about the products they chose in period 3. The interviewer will use pictures to remind the group which product or product(s) we are asking about in each question.
- Affirm that participants are the experts
- Affirm that all answers are valid: no right and wrong
- Invite differing opinions
- Ask participants to speak one at a time so that the audio recorder can capture everything
- Turn audio recorder on and then, ask participants to confirm for audio recorder that they agree to participate in FGD

Section 1. Icebreaker

- **1**. What was it like to participate in the REACH study?
 - Main challenges participating in REACH during COVID
 - ASIDE from COVID:
 - What made it easy or hard to participate (transport, length of visit, staff, other participants)
 - o Thoughts on REACH study procedures (lab work, clinic procedures, counseling, surveys, computer interviews, engagement activities)

Section 2. Product choice and preferences

- 2. What did you think about trying each of the study products first before getting to choose?
 - **KEY PROBE:** Feelings about getting to choose what product to use in Period 3 after trying both
 - Potential differences if participants had been able to choose right away
- **3.** Everyone in the study got to choose between using the ring, the tablets, or not choosing a product. What kinds of things did you think about when making this decision?
 - Explanation of the decision-making process
 - **Key Probe:** What influenced them to choose one of the products versus no product
 - **Key Probe:** What influenced them to choose [chosen product] instead of [product not chosen]
 - If their peers had the same 3 choices, what do they think they would they choose? Why?

Section 3. Adherence Support

During the study you met regularly with the REACH adherence counselor(s) and discussed your drug results at some of those meetings. [Show the drug level results showcard for reference.] We would like to know about your experience getting the drug results throughout the study – when you were using the rings oral the tablets.

- 4. How did you feel about getting your drug results?
 - How helpful (or not) was it to get the drug results? Did it vary by the type of product?
 - Did the drug results reflect how well they were able to use each product?
 - When drug results were not available due to COVID-19, how did that impact adherence
 - How well protected from HIV did you feel, when receiving green results? How about yellow results?
 - **KEY PROBE:** In the future, if we were only able to give drug results to young women twice after they started a new product, which time points do they think they would be the most helpful? Why do they say so?
 - **KEY PROBE:** What was the influence of getting drug results (in prior periods) on their product <u>choice</u>

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- 5. Aside from getting the drug results, how was your experience with the adherence counseling sessions?
 - Participants' opinions on how the adherence counsellors treated them
 - What did they like best about the counseling sessions?
 - Anything they didn't like about the counseling sessions
 - Anything that should be done differently in the future

In this study you have been able to choose from various adherence support strategies such as phone calls, text messaging, and adherence clubs. As a reminder, here is the adherence menu you were offered. [Facilitator to review the menu with participants.] We are interested in learning about what parts of the adherence support were most helpful to you and what can be improved.

- **6.** What adherence support strategies did you try from the adherence menu? What were your experiences of them like?
 - Which ones they stuck with for most of/all of the study, and why
 - What they liked best about these strategies and how they helped support product use
 - Any difference when using rings vs. tablets
 - Which ones they tried, then switched from or discontinued? Why so?
- 7. We would like to understand how the different counseling and adherence support strategies in REACH helped you use the [chosen product] well. We are going to play a game: Everyone is going to get a GREEN card, a YELLOW card, and a RED card. Then, I'm going to show you a series of statement cards with pictures and writing (see appendix A). If you agree with the statement on the card, raise the GREEN card. If you partially agree with the statement, for example, if you think it was only true for one product, or only true in period 1 but not in period 3, you could raise the YELLOW card. If you disagree with the statement, and REACH was not helpful, raise your RED card. Then, after you raise your hands, we'll talk a bit more about the statement.

(Instruction to interviewer —do a practice round first- show and read the statement on the "practice" card. Then proceed and show each card one at a time and read the text out loud, conducting the activity as described in the question.)

Statement Cards

PRACTICE CARD: REACH helped me by providing free Wi-Fi and/or computer access at the study visits

- 1. REACH helped me understand clearly how using the ring or tablets can benefit me
- 2. REACH helped me build confidence in my ability to use the rings or tablets consistently
- 3. REACH taught me skills and strategies that helped me stay adherent
- 4. REACH helped me identify challenges to using rings and tablets and find my own solutions to overcome them
- 5. REACH helped me identify problems with my family, my community, or my friends that made it hard for me to use the rings or tablets, and figure out how to overcome them.
- 6. REACH helped me figure out how to get adherence support from people outside of the study.

<u>Probes for each statement with at least one green response:</u>

- Which support strategies (e.g. counseling, support clubs, text messaging), specifically, provided that type of help?
- How was it different when using the ring vs. tablets?
- How was it different between the crossover and the choice period?
- Please give some examples of how the adherence support helped in this way

<u>Probes for each card with at least one **red** response:</u>

- Can you describe a time the study tried to help and was unsuccessful? Why was it unsuccessful?
- Would that type of support have been helpful? How so?

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- Did participants have that skill/benefit without help from REACH?

Additional probes to use after the exercise:

- Any other ways the adherence support helped them use the ring or the tablets?
- Of all the study components provided in REACH, which one helped the most with adherence?
- **KEY PROBE**: What challenges to using the products were not well addressed in REACH?

Section 4. Study product acceptability and experience with use

Now we want to focus the discussion on the product that you chose for period 3.

- **8.** Can you share your experience using the product you chose? (Interviewer to adapt phrasing based on mix of product users in the group ring only, tablet only, or both.)
 - General likes and reasons
 - General dislikes and reasons
 - **KEY PROBE:** Comparison to the product(s) not chosen
 - Other experiences using the chosen product:
 - o Feelings when first seeing the chosen product
 - o Anything that changed after first swallowing the tablets or first inserting the ring
 - o For ring users: Once inserted, how the ring felt in her body (every day, during sex or menses, changes in vaginal wetness/dryness)
 - Any challenges bringing the chosen product back to the clinic
- **9.** How did the product(s) you chose fit into your day-to-day life?
 - **KEY PROBE:** Things that make it easier to use the product how did they make it easier?
 - Support from other people (family, partners, friends)
 - Strategies or actions they took to stay adherent
 - Where did they learn the strategies or actions?
 - **KEY PROBE:** Things that make it harder to use the product how did they make it harder?
 - Side effects
 - o Size
 - Any worries about study product use
 - Opposition from other people
 - o How these challenges were handled, and whether approaches to handle challenges were successful
 - Interaction of the product with partying, alcohol use, privacy
 - Effect of the ring on sex positions, frequency of sex, comfortability with sex
 - For ring users: Interaction of ring use with hygiene, menses
 - o Any changes in vaginal practices while using the ring
 - Any changes in how the vagina felt (e.g. tighter or wider, drier or wetter)
- **10.** In your social circle (partners, parents, friends, other family, neighbors, etc.), who knows about your chosen product?
 - **KEY PROBE**: How they found out about the chosen product
 - What they know about it, whether they know it is for HIV prevention
 - When they found out about this product
 - Experiences with disclosure
 - Reasons/motivations for disclosure
 - Others' reactions to disclosure
 - Probe specifically about disclosure, knowledge or reaction of <u>sex partner(s)</u> if not discussed spontaneously
 - **KEY PROBE**: How members of their social circle found out about the <u>other</u> product (the one not chosen)
 - **KEY PROBE:** Any time when study products (ring <u>or</u> tablets) were taken from them, shared or there was pressure to share them

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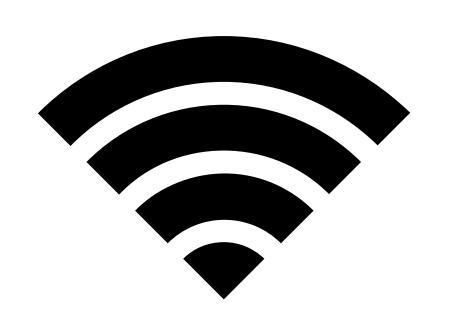
- 11. Are there any people you decided not to tell about either the ring or tablets?
 - **KEY PROBE:** What kept them from disclosing?
 - How participants hide their study product use, at home or with people outside of home
- 12. What did people in the community say about the ring and the tablets in REACH?
 - Attitudes about vaginal insertion of the ring
 - Attitudes about taking tablets known to treat HIV
 - Rumors/misconceptions/mistrust of researchers
 - Participants' reactions and responses to these negative pressure's/community rumors
 - Stories of any participants who experienced social harms from ring or tablet use (e.g. interference with school attendance/performance, issues with personal relationships (e.g. family, friends, partner, community) etc..)
 - Stories of any participants who experienced social benefits from ring or tablet use (e.g. improved communication with family, friends, etc., improved self-esteem, ability to provide support to peers, etc....)

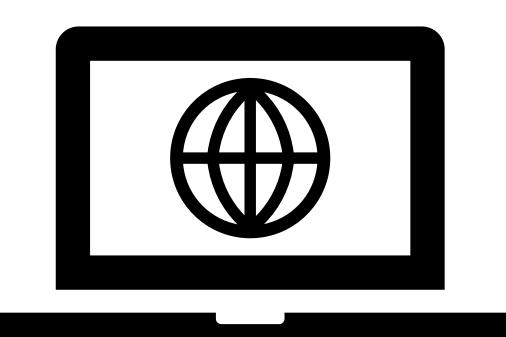
Closing: thank participants for time and responses

- **13**. A recent study found that an injection given in the buttock once every 2 months was highly protective for preventing HIV among men and transgender women. If an injection like this one was found to be highly protective for women, how would it compare to the option of using [chosen product]?
 - **KEY PROBE:** One potential side effect of the injections is that they can be painful, and cause tenderness and soreness where the injection is given. These effects can last for a couple of days. How would experiences of mild to moderate pain, tenderness, or soreness change their opinion of which product they would prefer?
- **14.** When you joined this study, you were asked to choose a contraceptive method (if you weren't already using one). How has that been for you?
 - Feelings about contraceptive product chosen
 - Ease of use of contraceptive product chosen
 - Feelings about being required to use a contraceptive to participate in the REACH study
 - How contraceptive use impacted experiences using the study products
 - Side effects
 - Disclosure of product use
- **15.** Thank you for your time and sharing your experiences and opinions today. Are there any final questions, comments, or opinions you would like to share with the group? (Leave time-space to hear any feedback)

Appendix A: MTN-034/REACH LFGD STATEMENT CARDS

PRACTICE CARD: REACH helped me by providing Wi-Fi and computer access at the study visits





1. REACH helped me understand clearly how using the ring or tablets can benefit me



2. REACH helped me build confidence in my ability to use the rings or tablets consistently



3. REACH taught me skills and strategies that helped me stay adherent







4. REACH helped me identify challenges to using rings and tablets and find my own solutions to overcome them





5. REACH helped me identify problems with my family, my community, or my friends that made it hard for me to use the rings or tablets and figure out how to overcome them.



6. REACH helped me figure out how to get adherence support from people outside of the study.

