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MTN 2020 Annual Meeting (9-12 February 2020)
Crystal Gateway Marriott
Outline

- South Africa in context
- Current prevention approaches for SGM
- Community we serve
- DESIRE implementation update
- Early lessons from the study
South Africa – Rainbow Nation
Rainbow People – Proudly SA!
Background

- SA has complex and diverse history regarding human rights of LGBTI people.

- Legal and social status of between 400,000–over 2 million LGBTI SAs has been influenced by combination of
  - traditional SA norms, colonialism, and the lingering effects of apartheid and the human rights movement that contributed to its abolition.

- Given the transformative principles related to post apartheid SA the constitution was revised also relating to LGBTI people.
  - SA first in world to outlaw discrimination based on sexual orientation in 1996
  - SA was the fifth country in the world, and the first—and to date, only in Africa, to legalise same-sex marriage in 2006.
True Colours

“I see your true colours shining through...

So don’t be afraid to let them show, your true colours are beautiful like a rainbow.....”
Rainbow People – PROUD ly SA !
History

• LGBTI people enjoy constitutional and statutory protections from discrimination in employment, provision of goods and services and many other areas.

• However, just as post apartheid constitutional laws alone have not changed all peoples ingrained behaviour with regards to racism ....

• LGBTI South Africans continue to face challenges, including homophobic violence stigma, shame, criminalization, provider bias and........ high rates of HIV/AIDS infection
Oral PrEP programmes in SA

- Oral PrEP works for prevention of HIV but it may not be accessible, available or desired among certain population segments.

Table 1. SA progress towards achieving NSP targets for oral PrEP rollout [1]

<table>
<thead>
<tr>
<th>Year/s</th>
<th>2017/18</th>
<th>2018/19</th>
<th>2019/20</th>
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<tbody>
<tr>
<td>AGYW Target</td>
<td>4110</td>
<td>12332</td>
<td>24663</td>
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<tr>
<td>Progress to date</td>
<td>69</td>
<td>8149</td>
<td>7565</td>
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<tr>
<td>% Progress to date</td>
<td>2%</td>
<td>66%</td>
<td>31%</td>
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<tr>
<td>MSM Target</td>
<td>818</td>
<td>1844</td>
<td>3383</td>
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<tr>
<td>Progress to date</td>
<td>1211</td>
<td>1484</td>
<td>530</td>
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<tr>
<td>% Progress to date</td>
<td>148%</td>
<td>80%</td>
<td>16%</td>
</tr>
<tr>
<td>SW Target</td>
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<tr>
<td>Progress to date</td>
<td>2413</td>
<td>3781</td>
<td>1454</td>
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<tr>
<td>% Progress to date</td>
<td>128%</td>
<td>104%</td>
<td>23%</td>
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</table>
Prevention in SGM communities

• Beyond efficacy considerations, users may also select products based on Behavioral Congruence, Different protection windows, Youth Friendliness, Ease of Use, Autonomy, Access

• Maleable in willingness to test and adopt new behaviours and test new interventions

• SGM who practice RAI may benefit most from rectal microbicide products - Important to include cis and transgender people
Where are we and what do we do?

We are here!
Wits RHI Transgender Programme

- 2016-2018 conducted the TRANSFORM study at our CRS
- October 2018 - Wits RHI recipient of a five-year USAID award to advance HIV response amongst the trans population and expand on work done within the trans communities.
- Supported by the SA NDOH and provincial and district partners.
- Trans clinics in four health districts: Cape Town, Buffalo City, Nelson Mandela Bay and Johannesburg.
Outcomes to date across all clinics:

- **HIV prevention services** (education, condoms and lubricants, counselling) to 4,500
- **HIV counselling and testing** to 1,861 transgender people.
- ART to 242 transgender people.
- **PrEP** to 470 transgender people.
Wits RHI Trans Agents and CRS staff
WOULD YOU LIKE TO VOLUNTEER?
If Yes, please call us!!!
Tel No: 011 358 5424
Ask for Motsamai, Hlalifi, Sylvia, or Lizzy

HOW TO FIND US:

We are here
Wits RHI
Research Centre
No. 7 Esselen Street
Hillbrow

BE A PART OF THE FIGHT AGAINST HIV!

COME LEARN MORE ABOUT DESIRE
Development and Evaluation of ART-saving Interventions for Racial Disparities
Wits RHI CRS MSM/TGW Lounge
DESIRE Implementation Summary

• Goal: 30 participants
• Site Activation: 18 Oct 2019
• Date of first enrolment: 7 Nov 2019
• Number pre-screened: 35 (10 ineligible due to HIV+; of those 5 TGW and 5 MSM)
• Number screened: 21
• Number enrolled: 17 - only 1 is on oral PrEP
Participant Characteristics

- Age: range 19-28 years, mean 22 years
- Black, Male at birth
- Challenges identifying TGM
- STIs at Baseline
  - Pharyngeal GC/CT positive
  - Anal warts
  - Anorectal CT
  - Syphilis
- Anoscopy
- Gratitude for POC STI testing and treatment
- Preferences vary
MTN-035/DESIRE events
Wits RHI RC Engagement Activities
Motivations for Enrolment

• Seek understanding of complexities associated with use of HIV prevention interventions designed with MSM in mind – behavioural congruence
• Passionate about identifying better health options for MSM
• Strong advocates for MSM HIV prevention related care
• Learn about potential future modalities of HIV prevention options
• Learn about the study placebo products and how they will inform the pipeline of options for MSM
What are Participants’ Current Challenges

- Provider skills in management of MSM/TGW specific health issues and STI diagnoses/management
- Stigma, violence, abuse and discrimination persist in communities
- Access to feminizing hormone replacement therapy
Hormone Replacement Therapy

- NDOH approved HRT for gender dysphoria to their essential medicines list on the 5th of December 2019, a first for South Africa.
  - 25 years later- is step forward in ensuring public health system responds to healthcare needs of transgender and gender diverse South Africans.

- TG clinics will be able to provide HRT in three of the four districts and are in the process of negotiating HRT for the clinics in Buffalo City Metropolitan district.

- Although HRT is approved by NDoH, district is awaiting governance meetings to provide a process plan for HRT roll out in BCM.
Conclusion

• As past PrEP and microbicide studies have shown, drug efficacy translates to drug effectiveness when drug based intervention is used as intended.

• DESIRE factors in products designed as vehicles to potentially deliver drugs via mechanisms that may be a good behavioural fit with the intended end-users.

• Understanding participants’ acceptability and experiences with non-gel delivery vehicles (e.g., douche, insert, suppository) is essential for future product development.
Acknowledgements

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• MTN leadership
• DESIRE Protocol management team
• FHI360
• DESIRE Participants
• Wits RHI staff
• Wits RHI CABs and stakeholders

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