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Building Communities' Understanding on New HIV Prevention Technologies

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OBJECTIVES

To build the capacities of community on MPTs about its critical importance in Africa and for communities to understand that ARV – based prevention methods, treatment as prevention and pre-exposure prophylaxis is crucial as these appears to be the future of HIV prevention.

METHODS

The New HIV Vaccine and Microbicide Advocacy Society (NHVMAS), in partnership with the Interagency Coalition on AIDS and Development (ICAD) and the Southern African AIDS Trust (SAT), with funding support from the Canadian HIV Vaccine Initiative, developed a training toolkit that will enable participants to understand the basics of biomedical HIV prevention research, and to also build their capacity to interpret statistical results and communicate research findings to their immediate communities. The training addressed ARV- based prevention methods, Treatment as Prevention, Pre-exposure Prophylaxis, trial processes, research ethics and the interpretation of various statistics. Finally, participants were expected to learn how to communicate the results of such trials in a way that was meaningful and appropriate for their communities. Multiple learning methods were built into the toolkit. This generic toolkit was pilot tested and adapted using country-specific examples. Subsequently, four trainings were conducted in Nigeria: the trainings were conducted across different populations: media and CSOs working in the HIV field and in different geopolitical zones (North-central, Southwest and Southeast). Qualitative and quantitative tools were used to assess the outcome of the trainings. Statistical evaluation of the pre- and post-workshop test results was undertaken using STATA.

RESULTS

The training reached 102 participants (60.8% were female). The mean pre-workshop test score was 53.2% (CI: 49.4, 57.1). The mean post-workshop test score was 65.5% (CI: 61.4, 69.7). There was a significant difference between the pre and post test scores ($P < 0.0001$). The paired t-test also showed significant difference in knowledge difference immediately post training (52.9 vs 66.7, $p < 0.0001$). The session with the highest rating was that on ethics. All participants (100%) noted that the training provided them with new insights and 98% noted that the workshop was a good use of their time. Most participants commented on the need for more of these workshops for the community.

CONCLUSION

Learning about ARV for treatment, clinical trial processes and the basic statistical jargon used in NPT clinical research is critical for community members. The materials developed by the partnership above appear to be an effective toolkit that can be used for this purpose as it uses appropriate techniques and language to facilitate learning for the target communities.