

Masibambane • Ladies Chat



Facilitator Guide

Pilot Study Gender-Enhanced Interactive Online Workshop



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Introduction to Facilitator Guide

Overview

This facilitator guide provides the guidance and materials for the *Masibambane* intervention for young women in South Africa.

Masibambane aims to inform young women about and motivate them to consider taking PrEP as an HIV-prevention method. The intervention was developed with young women in KwaZulu-Natal, South Africa, and is based on gender theory and group based social learning approaches. The intervention utilises PrEP information and motivation online activities including Group Chat activities, where women interact with the facilitator and each other on their own time and are not online “live” together, and a Live Group session. All activities use the WhatsApp® digital platform. They can also be implemented on other platforms such as Signal. Choose what is most useful for your group. The Group Chat and Live Group session (hereafter, “the workshop” or “the intervention”) are spread out over six days.

This guide aims to support facilitators to implement the *Masibambane* intervention. Facilitators need to have undergone extensive training with the *Masibambane* approach to deliver this intervention. The guide is divided into 3 sections: (1) the Introduction, which you are reading now, (2) the Instructions for each activity, and (3) Attachments that include the material or descriptions of the online activity tools.

In order to conduct the online activities and workshop you need:

- Online platform (e.g. WhatsApp® or Facebook Messenger®)
- Contact information and digital data bundles for participants in the group (send digital data to participants before the first online activity and confirm with them individually that they have received it)
- A minimum of 4 and a maximum of six participants (18-25 year old women) who have access to your chosen online platform and meet the study eligibility criteria
- Tools listed in the appendix in online format and potentially adapted to your local context and population
- Two facilitators who have successfully completed a 2-3 day training on the *Masibambane* approach and can apply the facilitative and technical aspect of online workshop delivery. One is the main facilitator and the other is a co-facilitator who assists in uploading intervention materials and monitors women’s responses so as to encourage all participants to be engaged.

Online Platform and Tools

This workshop uses an online blended (or “hybrid”) approach. This means that the online delivery mode alternates between Group Chat and Live Group activities. It also means that for the live activities women can meet in pairs (face to face) while logging into the group activities



together (remote online). Hence, while the Group Chat activities are accessed individually and remotely, during the Live Group session participants can meet in face to face as pairs (or threes) and link into your online platform together, or they can choose to continue participating alone in their individual preferred places.


Each workshop will engage with small groups of up to six participants. When choosing your online platform and tools you need to consider the following:


- *Resources needed:* Ensure you use an online platform that is accessible technically and financially to your target group (consider needed download and space of Apps on phones, data needed etc.). During the development of *Masibambane* we worked with an intervention development group of young women, who identified WhatsApp® as the best platform for online engagement. This might be different in your context and you need to assess this with your target group. For instance, if you work with young women with disabilities you will need to adapt the mode of communication to fit the needs of the disability type you are working with.
- *Familiarity:* Ensure you use an online platform that your target group is familiar with (e.g., academic programmes such as Zoom, Teams or University-specific Apps might not be commonly used by the young women you are targeting, and WhatsApp or Facebook messenger (or other platforms) might be more suitable to reach your target audience)
- *Capacity and features:* Ensure that the platform allows you to conduct individual exercises such as SurveyMonkey surveys or video watching before the workshop session
- *Feasibility.* Consider space and needed App technology when choosing how to upload materials (e.g. many people may not have technical capacity to read pdfs)
- *Phone compatibility.* Be sure that the platform works on all kinds of phones and that privacy can be assured if the phone is shared with others.
- *Time:* The intervention is spread over six days. Group Chat activities can be completed over the course of a day, whenever the participants choose, while the online Live Group session activities have time restrictions. Before the intervention you need to identify which day is most suitable for the Live Group online session with your participants. Arrange activities around the Live Group session date.
- *Group name:* Choose a group name that is neutral and safe for your target group. Consider that participants might have partners who access their phones.
- *Privacy:* In addition, provide participants with short instructions prior to beginning any activities. This includes data availability, time and security. Participants should use made-up names to protect their privacy. During the *Masibambane* development we used Informed Consent forms to explain conditions of participation. These were sent to participants individually prior to the intervention. You need to develop something similar prior to implementing this intervention.

Facilitator Instructions

Instructions for each online activity have several components:

- 1) Objectives of the activity
- 2) Time allocation for activities
- 3) List of needed materials
- 4) Instructions for facilitation in regular print
- 5) Suggested wording for facilitators in *italic*
- 6) For ease of use WhatsApp chat messages to be shared with participants during Group Chat activities are highlighted with the WhatsApp sign 
- 7) Spoken instructions during the Live Group session are highlighted with a facilitator emoji 
- 8) Key messages highlighted in **bold** at the end of each activity
- 9) To write in bold on WhatsApp you enter the (*) symbol before each sentence and a (*) symbol at the end of each sentence

The intervention uses online Group Chat activities prior to and after a Live group session and an online 90 minute Live Group meeting session. During the online Group Chat activities, the facilitator will provide sufficient information and support to young women through using positive phrases, smileys and emoji's. Responses should be short and suitable for an online platform. 

Although most of the intervention is scripted here, facilitators also have to respond spontaneously using a gender-enhanced and sex-positive approach. Facilitators should also encourage participants to think about issues from a gender perspective or lens. For instance, when women discuss issues around using PrEP or talking with partners about PrEP, it would be helpful for the facilitator to prompt reflections with questions such as: “*How is this different for women and men (or people of other genders)?*”, or “*Would doing that (e.g., deciding to protect yourself) make you feel that you are not behaving the way a women should?*” Facilitators need to have undergone the *Masibambane* training which focuses among other things on ways to develop these facilitator skills (see training guide). 

Key messages

The facilitator should ensure that 5 key messages are reinforced through all the activities. These key messages were identified by young women in South Africa during the intervention development and include:

1. You have the right to take PrEP to protect your life from HIV.

2. PrEP can protect you because mistakes happen - you could decide to have sex with someone else, your partner could cheat, you could experience sexual violence, or you could find yourself in a compromising situation. People aren't perfect and can make mistakes or give in to a situation and have unprotected sex.
3. PrEP can liberate you as a woman/person, because you don't need to depend on your partner to prevent HIV infection.
4. You have choices, and you have different types of prevention options. There are different ways you can protect yourself from unintended pregnancy and from HIV.
5. You need to remember that stigma is very common. Partners or friends may judge you, but if you take PrEP, it is for your own health, and you can make decisions about whether you want to disclose this information to others.

Agenda

Online Group Chat Activities (before Live Group Session)

Day 1 and 2

Welcoming participants into the group

What are my Choices? – Online individual activity

Day 3

What is PrEP? – Online information and motivation video

Live Group Meeting Session (90-minute online workshop)

Day 4

Welcome and 'warm up' game

Is PrEP for me?

What are sexual rights and gender stereotypes?

Should I disclose that I am using PrEP? If so, how?

What would it mean to take PrEP?

Closure of group interaction

Online Group Chat Activities after Live Group Session

Day 5

Tools to use for partner discussion and disclosure

Day 6

Motivational message for young women

Intervention Activity Instructions

Instructions for Online Group Chat Activities (before Live Group session)

Activity 1: Welcoming participants into the WhatsApp Group (Day 1)

Facilitator Instruction

Facilitator adds all participants to an online WhatsApp Group called *Masibambane – Ladies chat Group X* (Add group number in the space of X). The facilitator enables all participants to be able to write on the group chat. Once all participants have joined the group the facilitator writes:



Welcome everyone, we are looking forward to talk with you about PrEP and how PrEP can empower us women.

Please can you all introduce yourselves and greet each other with your made-up name. This can be any name of your choice. Let us all use our made-up names for this group so you can stay anonymous. We would also like to urge everyone, for privacy purposes, to secure their phones by adding a password to their phone or on WhatsApp

The facilitator waits for participants to greet using their made-up names and responds with an emoji via WhatsApp. Thereafter the facilitator writes:



Great meeting you all. I would like to welcome you once more (Facilitator introduces themselves and the Co-facilitator, using either their real or made up names.) In this group we will do some activities independently through links on WhatsApp. Other activities we will do together during a Live Group WhatsApp workshop meeting in 2 days. We have provided the dates and times in the attached agenda.

[Insert workshop agenda with correct dates and time for workshop meeting and make sure everyone can open it]

Also, at the end of our sessions you will be given the opportunity to become a Peer Health Advocate (PHA) to recruit maximum three other young women like us to take part in our WhatsApp group sessions.



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We are very excited to have you!

If participants are responding, the facilitator sends through encouraging or welcoming messages or emojis.



In addition, I would like to lay some ground rules for our online group activities. These are important as they help us to all be respectful and kind to each other.

(Facilitator lists ground rules)

Important Ground rules

- *Use your made-up names so you can stay anonymous*
- *Respect each other's opinions and dignity*
- *We are all learning and that is fine*
- *Respect your and other participants' privacy and confidentiality – when someone shares personal perspectives, stories, or information, please keep that information private and do not share that information outside of this group chat*
- *Although we ask everyone to be respectful and not share personal information outside of this group chat, it is possible that someone might not follow our request and might end up sharing personal information from this group. Therefore, we ask that you have that awareness and share only with this group what you are comfortable with*
- *Please DO feel free to share the general HEALTH information you are learning here with women outside the group, for example about HIV prevention and PrEP*
- *Mute phone unless speaking*

Facilitator checks with participants if there are any additional rules and thanks participants.

We would also like to acknowledge that many people are experiencing difficulty right now in the face of COVID-19. We appreciate your participation during this challenging time. In this group would like to acknowledge and hold care for the real life difficulties woman face both as a result of COVID-19 and due to HIV.

Thanks for your participation today, chat tomorrow.

Activity 2: What are my choices? - Online SurveyMonkey (Day 1 &2)

Objectives:

- To provide the information women need in order to make informed choices about protecting themselves from infection with HIV and other STIs, as well as unintended pregnancy
- To know which methods only prevent pregnancy, which ones only prevent HIV, which ones prevent HIV and other STIS, and which ones prevent pregnancy, HIV, and other STIs
- To enable women to weigh the pros and cons of different prevention methods including how much women need their partner to cooperate

- To enable women to think about which methods they could use in combination to get the protection they want

Materials needed

- Prevention methods in SurveyMonkey survey (Appendix 1a as SurveyMonkey)
- Prevention methods answer table in PDF or picture format for online use – (Appendix 1b as pdf or picture)

Facilitator Instruction for WhatsApp Group Chat



On the next day the facilitator greets participants again:

Hello everyone, how are you today? and waits for response from some participants [Facilitator can encourage participants with smileys or emoji's].

Then facilitator writes (day 1):



As women we might have different needs for prevention. Some of us want to prevent pregnancy, some of us are worried about HIV or Sexually transmitted infections (called STIs), and some of us are concerned about both. There are many new methods that women are not aware of. Therefore, I'd like to think through with you our choices for preventing HIV, STIs and unintended pregnancies with a little fun SurveyMonkey.



The SurveyMonkey includes a list of different methods of protection against STIs, HIV and unintended pregnancies, and asks you to identify which methods protect against what and how much partners need to be involved in using each method. This knowledge will help us to make informed choices on the options available to us.

I would like to emphasize that: Some methods may prevent pregnancy but may not protect against infection with HIV and other STIs, and some methods require partner cooperation or willingness to go along.


Have fun, this is not a competition or test, just a fun way to start engaging with our topic. No one will see your answers and you can fill it in in your own time – tomorrow we will provide you with the answers.

Please note: Once you have completed the survey, adverts will pop up, kindly ignore those notifications, please press submit and return to the WhatsApp group to indicate that you have completed the survey.


Facilitator sends the link to the SurveyMonkey.

Thanks for your participation today, Chat tomorrow.


The next day (day 2) the facilitator asks:

 *How did you feel about our SurveyMonkey yesterday?*

Facilitator encourages responding participants with smileys or emojis and writes:

 *I will now upload the answer sheet that will give us clarity and more knowledge on these prevention methods. Open it and see what methods help us to prevent HIV, STIs and pregnancy.*


Thereafter the facilitator uploads the answer sheet and writes:

 ***I WOULD LIKE TO HIGHLIGHT ONE OF THE KEY MESSAGES WE WANT YOU TO KNOW: YOU HAVE CHOICES – AND YOU HAVE CHOICES ABOUT DIFFERENT METHODS OF PREVENTION.*** *We currently have 2 methods providing effective protection against STIs and 4 methods that provide protection against HIV. What was new to you?*

Facilitator encourages responding participants and discussions with smileys, emoji's and comments.



Thereafter the facilitator writes:


 *Women have choices. If a woman is using DEPO Provera (3-month injection) as a contraceptive, which methods can she choose to protect herself against HIV?*

Facilitator invites discussion (possible answers could be: male condom, female condom, PrEP, HIV testing together with a single partner who does not have other partners, HIV+ partner who is on ART and virally suppressed). Facilitator ensures all participate, thanks group and gives next example:

If a woman and her partner(s) use condoms sometimes but not consistently what can she do to increase her protection against HIV?

Facilitator invites discussion and ensures that participants identify different combination options (see potential answers above). Facilitator ensures that PrEP is identified as an option, and indicates they will talk more about PrEP later on.

Thereafter the facilitator thanks the group and writes:

 *Thanks everyone. Let's chat about what it means to have prevention method choices for us as women?*



Facilitator invites discussion and encourages participants to consider gender (e.g. *How is this different for women, men and transgender people? Do you like having options for how to prevent unintended pregnancy? How does that work for you, i.e., to have those choices?*)

Facilitator thanks participants for the discussion and writes



*Thanks so much for this discussion., **Remember WOMEN HAVE CHOICES ABOUT PREVENTION.** Women's choices are also different; what one prefers is not always a preferred choice for the next person. Also, what works for one woman at a certain time in her life might not work for her at a different time.*

Thanks for your participations today, chat tomorrow.

Activity 3: What is PrEP? (Day 3)

Facilitator Instruction for WhatsApp Group Chat

After the Choice discussion the facilitator writes:



Welcome to day 3, so yesterday we talked about choices. Now that we know our choices, I would like to show you a short video clip about PrEP. Once you have completed watching the video we would love your feedback. Please feel free to let us know what did you like or not like about the video? Did you learn anything new? Do you have any questions? Please share your impressions of the video with us in the chat box.

Facilitator uploads link to PrEP video and encourages shared impressions:

<https://www.youtube.com/watch?v=rHkQq--anmo>

Thereafter the facilitator writes:



*Thanks so much for your feedback. If you have any questions about PrEP please post. PrEP is new to all of us so all questions are good questions. **Here is the second key message that we want you to know: Remember, you can take PrEP to protect yourself from HIV.** We will give you all the current information you need to make that choice.*

Facilitator encourages women, answers questions and reminds participants about time for online group meeting the next day and writes:



Thanks for your participation, tomorrow we will meet at **XXam/pm** (insert correct time). We will start with a reflection on our personal goals and sexual health. When we are talking about sexual health we are referring to an individual's ability to have a satisfying sex life and make sexual choices that meet their needs, including if and when to consider having children, and how to stay safe from STIs, including HIV.



Please for tomorrow identify one of your most important goals and how your goal may impact your choices as a woman around sexual health. For instance, for me having a partner and family is very important, however if my partner does not want to use condoms I might agree to engage in sex without a condom to keep my partner. Facilitator needs to adapt the last sentence, so it is truthful for them.

For our live session tomorrow please don't forget to charge your phones fully so that your battery doesn't die in the middle of the session.


Also have earphones with you for better audio and for privacy try to find a space where you are going to be comfortable to speak freely

Instructions for Online Live Group Session (Day 4)


Activity 4: What are my goals?

Facilitator Instruction for Live Session

Facilitator welcomes all participants into the Live Group and says:

 Thanks for joining our online session. it is great to finally meet you in a live session and to hear your voices, please feel free and don't be shy but before I start I would like to make sure you all know how to locate two buttons we need for this session. First, please can you all give me a 'thumbs up' sign, by inserting it on the WhatsApp group chat?

Facilitator checks if participants know how to navigate the technology moving between audio session and WhatsApp group writing.

 Now I would like you all to mute your phones. This will help us to understand each other when we speak and not hear background noise. When you speak please unmute your phone. When you are not talking please mute it. If you want to speak and don't get a turn please raise a hand in our chat box. You can also provide feedback or share thoughts during our session at any time in the chat box. Please check that you know how to mute and unmute and use the chat box. If you know how to do it please send a thumbs up in our chat box.

Facilitator checks if participants know how to mute and unmute their phone and resends ground rules.

Just as a reminder, I've sent you a PDF file containing the ground rules we discussed previously. Now I would like you to introduce yourself again. Remember to use your

made-up name and state your chosen personal goal and how your goal may impact your choices around sexual health.

Facilitator ensures that all participants introduce themselves with their goal and say how they think their goal might impact their choices around sexual health as a woman.



Facilitator prompts participants to think about how goals may influence choices around sexual health positively or negatively and invites them to share their ideas (Participants could say for instance: I sometimes need a bit of extra money so I'm happy when a partner gives me some, but then there is no way I could ask him to use a condom, right!!; My partner is very nice and I really hope he stays with me so I don't want to go against him if he doesn't want to use a condom; I want to study, get a job and this might increase my independence, as I can earn my own money, so I won't have to stay with a partner who doesn't want to use condoms if he has an outside partner).

Facilitator encourages thinking about gender (e.g. *How is this different for women, men and transgender people*). Facilitators need to have undergone the intervention training to develop the facilitative skills for this section.

Facilitator thanks each participant after sharing and encourages the rest of the group to "praise" the participant using emojis in the chat box (Eg. *'Lets all give XX a clap in the chat box'*).

Activity 5: Is PrEP for me?

Objectives:

- To discuss STIs, including HIV, and explore knowledge and personal risk.
- To encourage women to consider if they are at risk by looking at data on HIV among women

Materials Needed:

- HIV statistics as pictures or PDF as online format (Appendix 2&3)

Facilitator Instruction for Live Group Session

Facilitator thanks participants for discussion and says:




Now we are going to talk about increasing our knowledge about potential exposure to HIV.

Did you know that HIV is spreading more rapidly among heterosexual women (women who are sexually attracted to people of the opposite sex) than among any other group in South Africa? HIV rates are particularly high among young women aged 18-24 in KwaZulu-Natal. STIs are on the increase as well.

Now let's look at HIV statistics on the chart uploaded on our WhatsApp group. Please go to our group. I will upload a graph now.


Co-facilitator uploads graph (Appendix 2& 3) and checks in with participants if they see the graph (ask them to show thumbs up sign if they see it)



 The graph shows the number of young women and men in South Africa who were living with HIV in 2018. Look at the graph. One woman (the red figures) represents 10,000 women of our population and one man (the black figures) represents 10,000 of our male population. Young women are 3 times more likely to be infected with HIV than young men.

The difference is particularly striking among 10 to 19-year-olds, with 33,000 adolescent girls becoming HIV-positive in 2018, compared to 4,200 adolescent boys.

In the 2nd graph each figure represents 1% of women. You can see that at age 20, 6% of us are living with HIV, but by age 35, more than 30% of us are living with HIV. That is 1 in 3 of us. In provinces like KwaZulu-Natal this is even higher.

 Now in our discussion you can answer verbally or with emojis. Were you aware of that so many women our age are getting HIV?


Do you think your friends know this?

Facilitator lets participants respond with a quick yes/no or comment, then says:

Why do you think young women like us are at such high risk?

Facilitator encourages women to identify risk such as unprotected sex with a) a partner because they cannot know if he is living with HIV, b) an older partner who is more likely to be infected and how this relates to gender inequality and norms, by prompting:



 "What about a partner who has not tested for HIV recently" "Do you think that increases our risk as women?"

"What about an older partner"? Does that increase our risk as women?"

Facilitator states: *I want to share something with you. In our research conducted prior to this intervention, we found that most of the men we interviewed said that they had sex with other partners, even if they had a main partner. Men spoke of having other partners as very natural and acceptable. But I think that many of us believe that our partner does not have other partners. What are your thoughts about that?*

What other things place us, as women, at such high risk of getting HIV?



Facilitator encourages replies verbally and in writing on chatbox, and can also offer the examples below:

Women also could be at risk through having sex under the influence of alcohol or drugs, drugging or spiking of drinks at a club or rape. The facilitator points out that having multiple partners per se are not a risk but having sex with any of these partners without HIV prevention methods such as condoms or PrEP is a risk factor. At the end the facilitator summarises.



That means that many of us in the group are or will be exposed to HIV as well, even though we might not be aware of the risks at the time.

Let me tell you a story I know about getting HIV or another STI.

Natasha had gone to high school with Derrick and he was her first sex partner. They'd broken up, but always kept in touch. After high school, she left the area for a while. After she came back to the area they got back together. She thought he'd be safe to have sex with him. He had a steady job, was respected among their peers and she felt that she can trust him. She knew she didn't have HIV and was convinced that sex is better without condoms. He didn't look sick, so why worry about condoms?

Recently Natasha discovered that she was HIV positive. She got the virus from Derrick. She had no idea that he was living with HIV and neither did he. He never tested for HIV and he wasn't feeling sick.

Here's another...

Jabu has been with her man for 2 years. She thought they were the real thing and that they are not at risk of HIV. She just found out she's HIV positive. It turns out her man has been having sex with other women and not using condoms with them every single time.

How many of you know a story like these two? Please indicate with a hand up on our WhatsApp group.



Facilitator waits for women to show up hands and then invites 2 women who are comfortable to share a story. Remind them not to use real names and places for anyone in the story to protect everyone's privacy.

Thereafter facilitator thanks women for sharing and says:



Now that we've thought about our risk more please tell me when should we as woman consider using PrEP: once we engage in sexual activity (wanted or unwanted), if we decide to be sexually active, if we have a male partner and don't know if he is infected with HIV or think he may be, or if we have a partner and we think he might sometimes have a side partner ? What about if we, ourselves, have a partner here in Durban and

another one when we go back home and we don't always make sure these partners use a condom every single time? When should we consider using PrEP?

Facilitator encourages all women to share their views and then closes the activity and says:

Remember the key message we talked about earlier - you have the right to take PrEP to protect yourself from HIV. Here is a new key message we want you to remember – PrEP can help you because things happen!

The stories we heard today show that sometimes women decide to have sex with someone else, or their partner cheated. Often women find themselves in a compromising situation. People aren't perfect and can make mistakes or give in to a situation and have unprotected sex.

Your choice to use HIV-prevention methods will benefit you and protect you from HIV and other emotional and mental challenges should you find yourself in a compromising situation.

Activity 6: What are women's sexual rights and how do gender stereotypes interfere with them?

Objectives

- To challenge beliefs that may prevent women from having an enjoyable and safe sex life and to help women to acknowledge that they are sexual beings entitled to enjoy sex and make choices about protecting themselves
- To examine the reluctance and discomfort women may feel over questioning a partner about risk and protection.
- To examine attitudes that reflect gender stereotypes and the belief that women have fewer sexual rights than men
- To develop a list of sexual rights and to challenge gender stereotypes

Materials Needed:

- List of sexual rights - Appendix 4
- Scripted Role Play – Aisha & Precious - Appendix 5

Facilitator Instruction for Live Group Session

Facilitator says:



Now let's think about attitudes. When we are talking about attitudes, we are referring to a set of emotions, beliefs, and behaviours towards someone or something. Sometimes attitudes can prevent us from making healthy choices and not achieve our goals. So, we want to explore some of the attitudes that influence how we and others think about sexuality and sexual decision making.

For instance, most men think they have sexual rights, but what about us women or those who have different gender identities? Please think about:

- *Have we been taught about our sexual rights?*
- *Do we always have control over our own bodies?*
- *Do we have the right to feel good about sex and have sexual experiences that please us?*

These questions are examples of sexual rights.

Now I would like to discuss this further with you and develop a list of women's sexual rights. Let's go on our WhatsApp group and can we all please type in one or two sexual rights that you think you have.

Facilitator gives women 2 minutes to make a list of sexual rights on the WhatsApp group.



Thanks so much for these great ideas! You have identified some important rights (reflect on comments that might not be rights if applicable). Now I would like to add and share with you a comprehensive list of rights. I will upload this on WhatsApp and you can view this.

Facilitator uploads list of rights on WhatsApp and lets participants read it for 2 minutes and then asks:



Are there any rights that we have not discussed yet? Do you have any questions about sexual rights? Perhaps some of them seem unclear or a bit strange?

Facilitator lets 2 women share their ideas and then says:



Now, I would like us to explore these rights further through a scripted role-play.

The play is called "Aisha and Precious." I will upload the script on our WhatsApp group (upload Appendix 5). Can I get two volunteers to play the roles of two friends?

Facilitator uploads the role play on WhatsApp, identifies with the group the two volunteers and says:



The role-play is about two friends, Aisha and Precious, who are having a discussion about women and sex. The role play begins at this point. As we're listening to this role-play, let us hear how Aisha and Precious differ in their opinions.

Are you ready to begin? When I call action, begin...Action!

Facilitator hands over to the two volunteers and after the play invites participants to give an applaud (verbally or in chatbox_ to the 'actors'. Thereafter the facilitator asks:



What did you think about Aisha's and Precious' behaviour in that scene?

Do you think Aisha expressed attitudes society traditionally expects of women and men?

What about Precious?

What difference could their attitudes make when choosing to use PrEP and having a healthy sexual relationship?

Facilitator encourages sharing and analysis of gender stereotypic behaviours.



Now let's make a list of some of the typical ideas of how men and women are supposed to act and relate sexually. These are types of gender stereotypes.

Facilitator encourages sharing of gender stereotype ideas (these can include examples as in the box below). Participants can share verbally and type in the chatbox. Co-facilitator ensures that all ideas are written down in the chatbox and facilitator highlights any participants ideas that are only written in the chatbox. Again, for this activity the facilitator training is crucial particularly for dealing with situation in which women agree to gender stereotypes.

EXAMPLES INCLUDE THE FOLLOWING:

- WOMEN WHO KNOW MORE ABOUT SEX THAN MEN ARE NOT "GOOD GIRLS."
- MEN ARE THE ASSERTIVE AND WOMEN ARE PASSIVE.
- ALL WOMEN WANT IS TO HAVE ROMANCE AND TO BE SWEEPED OFF THEIR FEET.
- ALL WOMEN WANT IS A PARTNER WHO PROVIDES FOR THEM AND BRINGS IN THE MONEY
- A WOMAN SHOULD PUT HER MAN'S SEXUAL NEEDS FIRST.
- WOMEN WHO PLAN FOR A SEXUAL ENCOUNTER ARE PROMISCUOUS - NOT THE KIND OF WOMAN A SELF-RESPECTING MAN WOULD CHOOSE.
- PROTECTION AGAINST PREGNANCY IS A WOMAN'S RESPONSIBILITY AND SHE SHOULD TAKE CARE OF IT ON HER OWN.
- MEN SHOULD INITIATE SEX, AND WOMEN SHOULD LIMIT HOW FAR IT GOES AND HOW OFTEN IT OCCURS.
- A MAN'S SEXUAL PLEASURE IS MORE IMPORTANT THAN A WOMAN'S.
- MOST MEN CANNOT CONTROL THEIR URGE FOR SEX AND FOR HAVING MORE THAN ONE PARTNER.

Facilitator thanks participants for sharing and says:



If we believe some of these points of view, will it make it easier or harder for us to choose PrEP if we think it could be an option for ourselves?

Facilitator encourages sharing and linkage between gender stereotypes and norms and decision making around sexual health. If the group does not respond the facilitator prompts above stereotypes: How likely is a woman to protect herself she believes her man's sexual pleasure is more important than hers. After the discussion the facilitator says:



So, you can see that what we have been taught about or experienced in our roles as women, which may be categorized as gender stereotypes, may discourage us from doing what we need to do to stay healthy. These stereotypes may prevent us from taking actions to protect our own health and being comfortable enjoying sex.

Once we are aware of how these ideas influence our behaviours, we are better able to make choices. We have a choice about what we believe. We can believe that we have sexual rights. I want to remind you of the key messages we hope you will take away from this workshop.

- a. One is **Remember you have the right to choose PrEP to protect your life**
- b. Another key message we have discussed is that **Prep can help you because things happen! Sexual partners may not always be faithful, you may experience violence or you could find yourself in 'compromising situations'.**

- c. **The third key message is that you have choices – you have different types of prevention options, that includes PrEP.**
- d. **A new message we want to introduce is that** PrEP can liberate you as a woman/person because you don't need to rely on your partner for HIV prevention.

Now I would like to give you a 10min break. Don't disconnect I will put some music on for 10min, so we can all have a health break. See you back in 10min.

Break for 10 min

Activity 7: Should I disclose that I'm using PrEP? If so, how?

Objectives:

- To examine reasons for deciding to disclose or not to disclose PrEP use to a partner
- To provide tips on how to disclose
- To provide tips on how to keep PrEP use private (not disclose)
- To develop skills for disclosing using a role-play, and to stimulate discussion of the best ways to disclose.

Materials Needed:

- Role Play Sibongile and Thulani (*appendix 6*)

Facilitator Instruction for Live Group Session

Facilitator says:



Welcome back. Now let's think about this. Women have different feelings when it comes to disclosing PrEP use to a partner – a regular partner or a casual partner. Some women may use PrEP to make their own sexual decisions while others may not want to disclose use, fearing a negative reaction from their partner or partners, or because they think that it's their decision alone. Other women would not want to use PrEP without telling their regular partner. Deciding to use PrEP is an example of a sexual right.

How do you feel about telling a partner that you've decided to use PrEP? Is it your right to keep PrEP use a secret or do you think it's only fair to tell your partner that you are doing something to prevent HIV? (no discussion – continue)

Today we want to talk about what a woman can do if she decides she does not want to disclose to her partner that she is taking PrEP. Then we will discuss strategies women can use when they decide they do want to do disclose PrEP use to their partner.

Let's start with how a woman can keep her PrEP use a secret. Some women in our Focus Groups advised putting PrEP pills into a vitamin or other container so no one would know what they were.

What else could she do to keep people from finding out?

Facilitator encourages responses and co-facilitator lists them on the WhatsApp group. Then facilitator says:



Thanks so much for sharing. Some of you may feel that you want to discuss PrEP use with your partner. How do you think such a woman/person should disclose to her partner?

Facilitator encourages participants to list potential strategies and approaches – which can include the list in the box below and other tips. Co-facilitator lists approaches with short sentences on WhatsApp.

1. Be clear on your goal or goals, including what you'll do if he does not agree.
2. Decide when and where to discuss the topic of HIV prevention.
3. Say something positive about your partner and the relationship.
4. State your needs and feelings.
5. Introduce your partner to information about PrEP
6. State what you want from your partner.
7. State benefits to your partner.
8. Listen to your partner. Be respectful of his views.
9. Feed back to your partner what he is expressing.
10. Suggest that the two of you solve the problem together.
11. Don't engage in a fight/argument and if things get out of hand rather suggest to talk about it another time
12. Return to discussion later, if necessary.

Facilitator thanks participants and says



In the next exercise, we'll be discussing tips on how to disclose and then conduct a role play between a couple, which I am uploading on WhatsApp. I will need two volunteers again. Let's listen to it and then discuss what happened and how things could be different. Who would like to volunteer?

Facilitator identifies volunteers while co-facilitator uploads role play and then says:



Ok we are good to start. Let's go (participants play role play).

After the role play facilitator says.



Thanks so much for this play, lets give our actors an applause (verbally or in chatbox). You are no longer Sibongile & Thulani and are back to being [name] and [name]. Now how did it feel to play Sibongile?

Facilitator lets participant respond.



Thanks, how did it feel to play Thulani?

Facilitator lets participant respond.

Facilitator then says:



How does everyone else feel about the role play and its outcome?

What could Sibongile do differently?

Facilitator encourages sharing and pays particular attention to gender issues and stigma around women’s sexual activity. Facilitator also checks that “you-messaging” style (you don’t care about protection, you should trust me, you are angry) in the role play is identified as potentially confrontational and that talking about personal feelings and needs rather than identifying what partner thinks might be a less confrontational way. Rather use “I statements” e.g. “I care about protection for both of us”, “I am still trustworthy if I am taking PrEP” and “I want to discuss things with you freely and not cause anger”.



Facilitator also encourages participants to think about what would help women to disclose (e.g. information sheet or video for men).

Facilitator thanks participants and reads out key messages two times to the participants and says:



*Thanks for the discussion. So our discussion today is relevant to each of the key messages we are talking about. **You have the right to take PrEP to protect yourself from HIV. The decision about disclosure is yours. Also PrEP can liberate you as a woman/person, because you don’t need to depend on your partner to prevent HIV infection.***

If you decide to disclose to your partner think about when and how you want to disclose and what material might help you to do so. We will send an information letter for a partner after our online session as an example of one strategy you can use to disclose and you can let us know what you think about it.

*Now we want to share with you the last key message we have for you: **Remember stigma is very common, partners or friends may judge you, but you take PrEP for your own health and you can make decisions about telling partners and others (you have a choice to disclose or not disclose use of PrEP).***

Activity 8: What would it mean to take PrEP?

Objective

- To increase women's ability to counter concerns about PrEP and stigma and other things that might make taking PrEP difficult

- To encourage women to think about how they, themselves, could incorporate PrEP into their lives

Materials Needed:

- Advice Letters “Ladies House” (Appendix 7)

Facilitator Instruction for Live Group Session

Facilitator says



Now I am coming to our last exercise for today. Many of you are probably familiar with the online platform “Ladies House”, where women give advice to other women about issues in their lives.

I want you to play the role of the adviser and make recommendations to website users who are having issues that may involve PrEP.

We will review three different letters that my co-facilitator will upload on the WhatsApp Group now. I want each of you (or in your pairs) to review one of these letters and provide advice to the writer.

Facilitator allocates to each pair one letter (identified via numbers) while co-facilitator is uploading the letters with their numbers on the WhatsApp group. Facilitator then says:



Please read the letter with your friend and write a response on a piece of paper. Feel free to just write bullet points. Remember the information you learned about PrEP and disclosing to a partner. You have five minutes to come up with a reply.

Facilitator waits for 5 minutes then says:



Ok, now let’s hear what you would write back.

Facilitator lets each pair share their response, reflects on the points in the box below, thanks and encourages participants (and lets rest of the group provide an ‘applause’ verbally or in chatbox. If issues around abuse arise, let women know that information about abuse will come after the group session and provide information about support services.

Discuss how each response fits with the information that was presented on different pregnancy and STI protection methods. Use the following points to help process this activity

- HIV is a serious risk for young women
- An effective method to protect a woman from HIV is PrEP
- Male and female condoms can provide protection against unintended pregnancy, HIV and STIs, but some people do not use them or do not use them consistently to prevent HIV
- PrEP and mutual HIV/STI testing can provide an alternative when condom use is not sufficient or rejected

- PrEP can be used with any contraceptive such as hormonal injections or condoms

If not raised as a discussion point, encourage women to pair taking the PrEP pill with a daily activity – for example, drinking two glasses of water in the morning or using lip balm. Encourage women to become agents of change by educating others in the community about PrEP, clarifying misconceptions, and countering beliefs that stigmatize PrEP use.

Facilitator says:



*Thank you so much for all this great input and idea sharing. Moving forward, always **remember you can make your own choices, ... and you have different types of preventions options.***

Activity 9: Closure of group interaction

Facilitator says [only to groups who can become peer health advocates]



Before we close our live session, we would like to remind you that you have the opportunity to become a Peer Health Advocate and recruit up to 3 other young women like us to undergo the WhatsApp sessions with us. If you are interested please feel free to inbox me privately for more info. You will receive R100 for every woman who is eligible and joins the sessions. We will give you the study flyer and referral coupons for recruitment.

Thereafter facilitator says:



Good job everyone! You can give each other a round of applause (verbally or in chatbox).

Now we come to the closure of our group session. We will still provide you with more information and space to ask questions after the workshop. We will also share some information about abuse and partner disclosure and links to more information about PrEP ..



In closing could you please each share your highlight of today's session in one sentence.

Facilitator asks participant share a closing sentence identifying their highlight.

Thanks so much everyone – see you on WhatsApp tomorrow!



Facilitator lets participants to say good bye and closes the call.

Instructions for Online Group Chat Activities (after the Live Group Session)

Activity 10: What tools can I use for disclosing to a partner? (Day 5)

Facilitator Instruction for Online Chat

On the next day the facilitator greets participants again: *“Hello everyone, thanks again for participating in the session yesterday”* and waits for response from some participants [Facilitator can encourage participants with smileys or emoji’s].

Then facilitator writes:



Yesterday I promised you I would share more material about disclosure and abuse and a link for information about PrEP. Please find attached an example letter to a partner. It includes information about PrEP but also about why it is difficult for women to disclose PrEP use. There is also an interesting video that you could watch with your partner.

Facilitator uploads letter to partner (Appendix 8 either as picture or PDF depending on participants’ phone access), and explains that she is giving participants 30min to go through the letter. After 30 minutes, if no feedback comes yet, the facilitator writes:



What do you think about the letter and the video included in it?

Facilitator invites responses and encourages participants with smileys and emojis. If there are not responses facilitator can ask: *Would you use this with your partner?*

Thereafter the facilitator writes



I also promised you we would share some information about different types of abuse and how to deal with abuse. Please see attached information sheet. For help you can call the GBV hotline number: 087 158 3000 or visit any of the PrEP clinics we share with you. We hope this is useful.

Facilitator uploads information about abuse (Appendix 9) and gives participants encouragement and answers on related questions.

Activity 11: Thank you and closing the WhatsApp group (Day 6)

Facilitator writes:



Now I would like to thank you all for your participation. We have come to the end. It was great to get to know you. Do you have something you would like to clarify or ask before we close? For more information about PrEP you can use the following link:

<https://www.myprep.co.za/>

In Durban you can also get PrEP for free at a number of places (facilitator needs to update table below to current and local situation, facilitator inserts information from table below)

| Facility name | Address | Phone number |
|--------------------------------------|-----------------------------------------------------------------------------|---------------|
| Addington Gateway Clinic | Erskine Terrace, South Beach, Durban, 4000 | 033 846 6000 |
| Lancers Road Municipal Clinic | 90 Lancers Rd, Greyville, Berea, 4001 | 031 307 7574 |
| Commercial City clinic | Shop 14 Commercial City, 40 Dr AB Xuma St, Central, Durban, 4001 | 031 305-5016 |
| TB/HIV, eThekwini | Sutton Square Unit 3, 306, 310 Mathews Meyiwa Rd, Windermere, Berea, Durban | 031 303 7635. |
| Umlazi G Clinic | Nyala Road, Umlazi G, eThekwini, 4066 | 031 907 6219 |
| Umlazi D Clinic | D 1438 - 1439, Umlazi D, Umlazi, 4066 | 031 907 4777 |
| Savannah Park Clinic | 10 Grassland Ave, Savannah Park, Durban, 4001 | 031 907 6219 |
| Elangeni college, Mpumalanga | 280 Shezi main road, Mpumalanga | 031 771 0148 |
| Anova Men's Health Clinic | 125 Convention house, Corner Florence Nzama Street & Bram Fischer Road, Du | |
| Campus Clinic DUT Steve Biko | 41/43 M L Sultan Rd, Greyville, Durban, 4001 | 031 373 2000 |
| Cato Manor TVET | 70 Sydney Rd, Durban, 4027 | 031 268 444 |
| Sea Cow Lake Clinic | 47 Triumph Rd, Sea Cow Lake, Durban North, 4051 | 031 573 2993 |

For more information about contraceptives

<https://www.westerncape.gov.za/service/contraception-family-planning>



In closing I would like you all to share one final sentence letting me know why you think women should consider taking PrEP

Facilitator lets women each write a sentence and encourages them with smileys and emoji's then writes.



Thanks so much everyone. **Remember you have choices, you have the right to choose to protect your body and you can find ways to manage your choice to disclose or not to disclose.**



1. You have the right to take PrEP to protect your life from HIV.

2. *PrEP can help you, because things happen -- you could decide to have sex with someone else, your partner could cheat; you could experience sexual violence; or you could find yourself in a compromising situation (people aren't perfect and can make mistakes or give in to a situation and have unprotected sex).*
3. *PrEP can liberate you as a woman/person, because you don't depend on your partner to prevent HIV infection.*
4. *You have choices, and you have different types of prevention options.*
5. *You need to remember there will always be stigma. Partners or friends may judge you, but you take PrEP for your own health and you can make decisions about disclosure*

Have a wonderful day.

Facilitator gives participants the opportunity to share their last goodbye notes and then switches write access off for participants. Hence participants can see for a few more days the information uploaded on the group, but not write any more notes. After a month delete group.

Appendices





Appendix 1a: Prevention Methods Question Table for SurveyMonkey





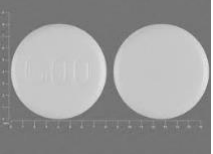
The table below has to be programmed as a SurveyMonkey




Prevention and Contraception Methods

| | Does this method prevent (if used correctly and consistently) | | | | Do you have to use/take this method.. | | | | | Do you need partner cooperation for this method? | | |
|------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------|-----------|--------|-----------------------------------------------|-----------|-------------|------------------|--------|--------------------------------------------------|----|--------|
| | HIV | Other Sexually Transmitted Infections (STIs) | Pregnancy | Unsure | Every time you have sex (before or after sex) | Every day | Every month | Every 2/3 months | Unsure | Yes | NO | Unsure |
| Male Condom | | | | | | | | | | | | |
| Female Condom | | | | | | | | | | | | |
| Spermicides (foam, cream/gels, suppository tablet) (contain N-9) | | | | | | | | | | | | |
| The Pill | | | | | | | | | | | | |
| Ring (Nuva Ring) | | | | | | | | | | | | |
| Depo Provera | | | | | | | | | | | | |
| Implanon NXT | | | | | | | | | | | | |
| Patch (Ortho Evra) | | | | | | | | | | | | |
| Emergency Contraception (EC, Plan B, Morning after pill) | | | | | | | | | | | | |
| Early Withdrawal (pulling out) | | | | | | | | | | | | |
| Post-exposure Prophylaxis (PEP) | | | | | | | | | | | | |
| Pre-exposure prophylaxis (PrEP) | | | | | | | | | | | | |
| Treatment as Prevention (the HIV+ person takes ART and achieves viral suppression) | | | | | | | | | | | | |
| Mutual Testing -- both partners test for HIV and STIs | | | | | | | | | | | | |

Appendix 1b: Prevention Methods Answer Table (Fact Sheet)

| Methods | Effectiveness for Pregnancy and Disease Prevention (assuming it is used always and correctly) | Comments |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Male Condom</p>  | <p>Good for both pregnancy and disease prevention</p> | <p>Requires partner cooperation. May interrupt sex. Most male condoms are made from latex. Polyurethane condom is available (but more expensive for those with latex allergy)</p> |
| <p>Female Condom</p>  | <p>Good for both pregnancy and disease prevention.</p> | <p>Requires partner willingness to have sex with it. Is visible outside the vagina. May enhance sexual pleasure of woman and man.</p> |
| <p>Spermicides (foam, cream/gels, suppository tablets) (contain N-9)</p>  | <p>Fair to poor for prevention of pregnancy. Does NOT protect against HIV and other STIs and MAY INCREASE THE RISK OF HIV INFECTION.</p> | <p>Requires no partner cooperation. Some require applicator or waiting time. Must be applied within 1 hour of intercourse. Available over the counter.</p> |
| <p>The Contraceptive (pregnancy prevention) Pill</p>  | <p>No protection against disease. Excellent for preventing pregnancy.</p> | <p>Requires no partner cooperation. Needs to be taken every day. May raise risk of HIV infection.</p> |

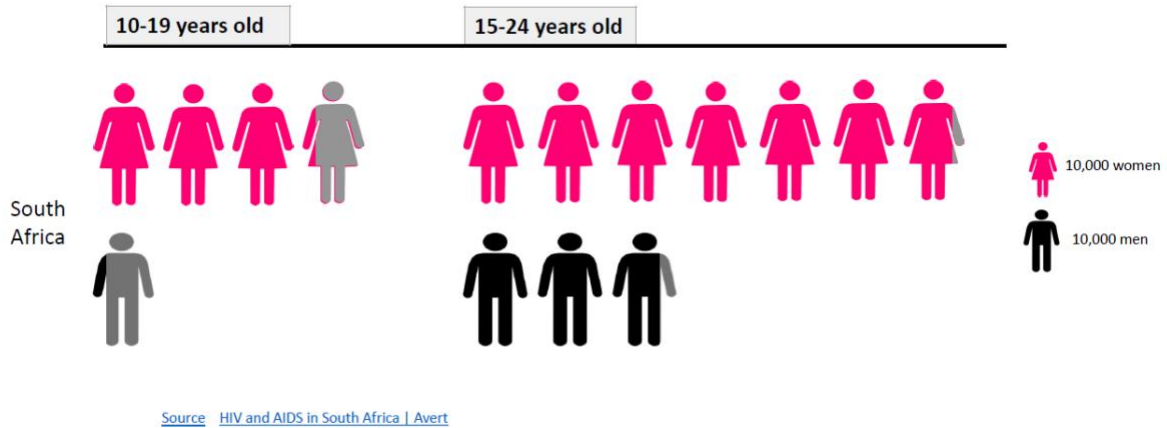
| Methods | Effectiveness for Pregnancy and Disease Prevention (assuming it is used always and correctly) | Comments |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Ring (Nuva Ring)  | No protection against disease. Excellent for preventing pregnancy. | Requires no partner cooperation. Inserted in the vagina once a month. May raise risk of HIV infection. |
| Injectables (Depo Provera or Nur-Isterate)  | No protection against disease. Excellent for preventing pregnancy. | Requires no partner cooperation. Injection is needed every 3 months. |
| Implanon NXT  | No protection against disease. Excellent for preventing pregnancy. | Requires no partner cooperation. Implant can be removed anytime before or can be replaced every 3 years. May raise risk of HIV infection. |
| Patch (Ortho Evra)  | No protection against disease. Excellent for preventing pregnancy. | Requires no partner cooperation. Patch is applied to skin every week for 3 weeks in a month. May raise risk of HIV infection. |
| Emergency Contraception (EC, Plan B, Morning after pill)  | No protection against disease. Good for preventing pregnancy in emergency situations. EC is a good pregnancy prevention back-up for those using the male or female condom in the case of slippage or breakage, or in the case of unanticipated sex where no contraception was used, or rape | Requires no partner cooperation. Is a high dose of birth control pills that prevents pregnancy. |

| Methods | Effectiveness for Pregnancy and Disease Prevention (assuming it is used always and correctly) | Comments |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Early Withdrawal (pulling out)</p> | <p>Some effectiveness for preventing pregnancy. May provide slight protection against bacterial STIs and HIV, but provides NO protection against herpes, syphilis, or HPV.</p> | <p>Depends completely on partner cooperation and cannot be counted on. There is a risk of pregnancy or HIV infection from pre-ejaculate, which may leak out before ejaculation.</p> |
| <p>Post-exposure Prophylaxis (PEP)</p>  | <p>No protection against pregnancy. Effective against HIV if taken within 72 hours of unprotected sex and for 28 days. No protection from other STIs.</p> | <p>Requires no partner cooperation.</p> |
| <p>Pre-exposure prophylaxis (PrEP)</p>  | <p>No protection against pregnancy. Provides good protection against HIV if taken daily. No protection from other STIs.</p> | <p>Requires no partner cooperation.</p> |
| <p>Treatment as Prevention (known HIV+ person takes ART and achieves viral suppression)</p>  | <p>No protection against pregnancy. Provides good protection against HIV if infected partner is virally suppressed. No protection from other STIs.</p> | <p>Requires infected partner to consistently and correctly follow ARV treatment regimen.</p> |
| <p>Mutual Testing (both partners get tested) for HIV and STIs</p> | <p>Does not prevent pregnancy. Testing and treatment can be effective at preventing future STIs.</p> | <p>Requires partner cooperation. This method is not effective unless the couple are in a monogamous relationship.</p> |

Appendix 2: HIV statistics young women and men compared

Why is PrEP important for young women?

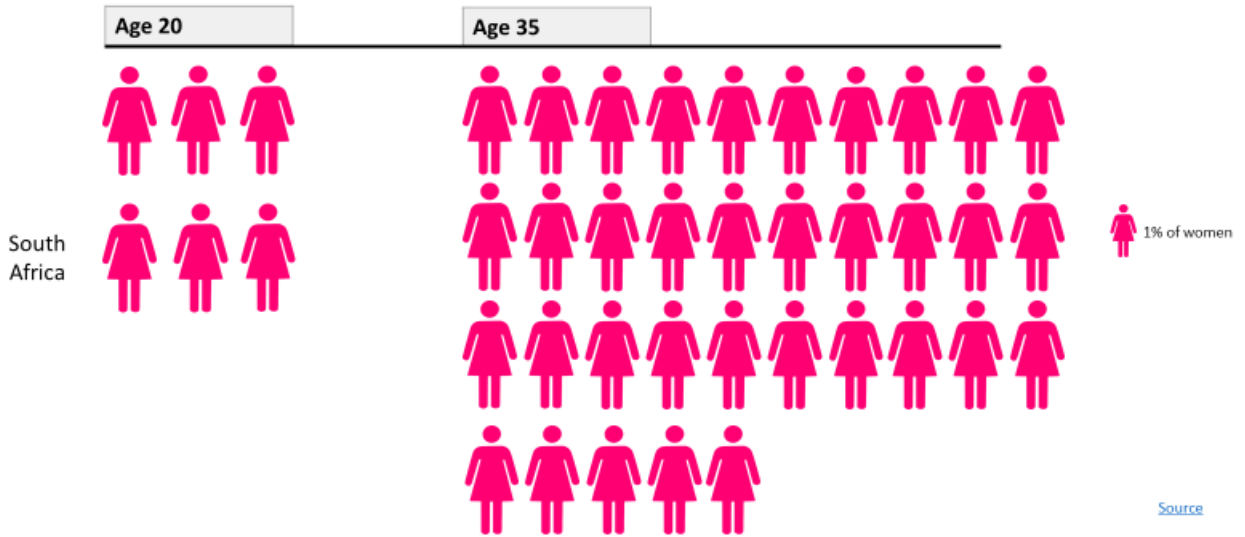
Young women are 3 times more likely to acquire HIV than their male counterparts



Appendix 3: HIV statistics women over time

As a woman in South Africa, what is my risk of HIV infection over time?

At age 20, 6% of women are living with HIV
By age 35, more than 30% are living with HIV (35%)



Your Sexual Rights

1. You have the right to your own body, if when and how you are touched
2. You have the right to feel good about sex and have sexual experiences that please you
3. You have the right to your own feelings, opinions, and convictions about sex, whether or not they are acceptable to others
4. You have the right to say “no” to sex and the right to say “yes”
5. You have the right to negotiate your sexual experiences so that they are safe and pleasurable for you and your partner
6. You have the right to reject any sexual? treatment or criticism that makes you feel bad
7. You have the right to expect that your sexual partner respects your body, thoughts, feelings, and physical/emotional health
8. You have the right not to take responsibility for someone else’s sexual or relationship problems
9. You have the right to be the final judge of how you feel without having to justify yourself
10. You have the right to respect your body, safety, thoughts, feelings and emotional health
11. You have the right to decide if and when to have kids
12. You have the right to leave a relationship if it is not good for you
13. You have the right to use HIV prevention methods such as PEP and PrEP
14. You have the right to choose the contraceptive methods that work best for you

Miller S, **Exner** TM, Williams SP, Ehrhardt AA: A gender specific intervention for at-risk women. *AIDS Care* 2000; 12:603-612.

“Aisha and Precious”

(Aisha and Precious are hanging out on social media)

Precious: I did an online workshop the other day about a new method for preventing HIV. There’s a once a day pill you can take to prevent HIV – no condoms needed!

Aisha: I wouldn’t want a partner to know that I’m taking it. It wouldn’t work for me.

Precious: Why wouldn’t it? I think, women have the right to protect themselves so they can have a worry-free sex life.

Aisha: Sex is really for him –. And I don’t think that a woman in a relationship should use a method to protect herself without her partner knowing about it. Hey, I told him when I decided to get on the contraceptive injection.

Precious: I care about our relationship and sex matters to me as well as my partner. And I think we women need to take care of ourselves.

Aisha: Keeping a man means making some sacrifices. Men can’t help it if they cannot control their sex drive. I need to satisfy him. and not bother him with talk about preventing pregnancy and HIV all the time. PrEP sounds interesting, but what if he finds out?

Precious: Yes, I understand, but it’s really up to us women to decide if we want to tell our partner about PrEP. And men can control their sex drive. Good sex is about both partners’ satisfaction.

Aisha: I think that using PrEP would show that I don’t trust him – or suggest that I am having other partners or enjoy sex too much.

Precious: Women have a right to sexual pleasure and feeling free from worry about pregnancy and HIV. Sex can also be more spontaneous when using PrEP because you don’t have to worry about condoms. It’s kind of like getting the injection to protect against pregnancy.

Aisha: Hey, that’s a different way to look at it – Let me think about it.

Appendix 6: Role Play Sbongile and Thulani

Sbongile: Hey, I want to talk to you about something. It's because I love and trust you that I want to have this conversation.

Thulani: Yeah? About what?

Sbongile: About using PrEP to prevent HIV. By taking one pill daily, it prevents HIV better than condoms.

Thulani: I don't want to hear it. There's nothing to talk about.

Sbongile: Please let me finish. I've told you I don't want to risk getting HIV. I've explained to you why it is so important to me. I care for you and I want to keep our relationship. I want you to care about my concerns, too.

Thulani: You want me to do what you tell me. A real man shouldn't have to.

Sbongile: I'm not trying to push you around, just let you know what I want to do to prevent getting HIV. I don't want any children of ours to get it either. I want to make sure I'm protected until we've tested together and we have a plan for using condoms with any outside partners.

Thulani: You are supposed to respect me.

Sbongile: I do respect you, that is why I discuss my intentions with you. It's just that 1 in 3 South African women are HIV+ by the time they turn 24, and I don't want that to include me. I've tried lots of different ways to please you, and you've said you liked it. I don't know what more I can do.

Thulani: You could stop bothering me about using PrEP.

Sbongile: It really hurts me that you don't care about protection. It seems like a small thing to do and it would be important for both of us, since we don't always use condoms.

Thulani: I can't believe you turned out to be such a Nag bag/*Isicefe*. Should I even trust you?

Sbongile: Thulani, calling me names won't help anything. You should trust me, and I want to trust you. I'm not trying to insult you and I realize that you are angry.

Thulani: I'm not angry! If only you would just drop it.

Sbongile: Well, it seems like we can't see eye-to-eye on this because I can't just drop it.

Thulani: Well, I guess there's nothing more to say about this.

Sbongile: Thulani, it really hurts that we have to leave things like this. But I've made up my mind that this is important. You won't give in and I won't give in. I have a right to protect myself from HIV.

Thulani: Maybe we shouldn't be together! It's your choice. You'll regret it!

Appendix 7: Letters to "Ladies House"

Letter 1:

Dear Ladies

My partner and I don't always use condoms, and I've learned that almost 1 in 3 women gets HIV by the time they're 24. I've heard about PrEP, but don't think I can take a pill every day or go back to the clinic every 3 months. What can I do?

Fondly,

Mnax Charisse

Letter 2:

Dear Ladies,

I know that many women who live in this community are at risk for HIV, and I don't want to be one of them. I've heard about a once-a-day pill called PrEP that prevents HIV, but also learned that it is anti-retroviral medicine. I'm afraid of someone discovering I'm taking PrEP and then thinking that I have HIV. Any advice?

Very Sincerely,

Mnax Nelida

Letter 3:

Dear Ladies,

My partner and I don't really use condoms – he objects to them, and says there is no need if I trust him, and has threatened to leave if I don't stop asking about condom use. I heard about PrEP, but am concerned that if I took PrEP and he found out that he would think I wasn't trustworthy – or worse. What should I do?

Thanks,

Mnax Madeline

Appendix 8: PrEP Brief for partners

Dear partner,

I recently attended a workshop for young women about how to prevent HIV, STIs and pregnancy. I want to share what I learned with you.

We have now arrived in the 21st century, where prevention of HIV has become possible. This is great news for all of us. Unlike the generation before us, we have tools to prevent HIV infection. A new 'tool' has arrived in South Africa and is called **PrEP**, which stands for Pre (before) Exposure (coming into contact with HIV) Prophylaxis (medicine to prevent infection).

What is PrEP? PrEP is a pill for HIV-negative people that is taken daily. It has 2 anti-HIV medicines to prevent HIV. Researchers have shown that HIV-negative people who take PrEP every day can lower their risk of HIV by more than 90%. That's better than condoms or any other prevention method we have now. **PrEP** is for everyone who wants to protect themselves from HIV.

Why do we need to take PrEP? Unfortunately, HIV is widespread in South Africa and many people are at risk of infection—in particular, young women like me. There are other ways to prevent HIV, but they have some disadvantages. We all know that using condoms every time and with every partner is another way to prevent HIV, but sometimes things happen. We make mistakes, we may have had too much to drink so we are not in control. And sometimes women are exposed to violence, and are obviously not in control. With PrEP we can always be sure that we are protected and do not become infected with HIV.

Why am I giving you this letter? Many young women and men consider using PrEP, but they don't know whether to tell their partner. A lot of people don't really understand PrEP and may have false beliefs about PrEP:

- It is FALSE that PrEP is the same as ARVs for HIV treatment (HIV-medication)
- It is FALSE that using PrEP means a partner is planning to cheat or have an affair
- It is FALSE that using PrEP means you don't trust your partner
- It is FALSE that PrEP has serious or harmful side effects

Also, many women think their partner will no longer trust them or be verbally abusive -- or even violent -- if they tell them they want to use PrEP. This makes PrEP disclosure very difficult. Here is a little video that shows how difficult or easy disclosure can be

<https://www.youtube.com/watch?v= QwXO1ChVPc>

I am thinking about taking PrEP. I think PrEP is a good choice for me. It will give me an extra layer of protection for any potential situation including those that are out of my control.

I don't want to keep it a secret from you, I value that we talk about things openly in our relationship. I think PrEP as a prevention method is something important for young men and women to consider. I would love to have your support and hope you understand the benefit to you too. I am giving you this letter so we can start discussing PrEP use, what PrEP is all about and what it means for you and me.

I look forward to have a discussion and hear your thoughts about this.

Yours always

PHYSICAL ABUSE

Hit, slap, shove, push, bite, kick, choke, scratch, punch, hair pulling, etc.

SEXUAL ABUSE

Force you to have sex against your will

Force you to engage in sexual acts you do not enjoy

Force you to have sex with other people

Force you to have sex with animals

Force you to have sex with objects

Force you to watch sexual images against your will

EMOTIONAL ABUSE

Constant criticism

Insult you or call you derogatory names

Humiliate you in front of others

Put you down all the time

Damaging one's relationships with others including children

PSYCHOLOGICAL ABUSE

Causing fear or intimidation (threaten to hurt your children, your pets, your friends or family members; threaten to damage your property; threaten to destroy your reputation)

Forcing isolation from friends, family, school, or work (prevent you from seeing your family and friends; prevent you from going where you want and when you want)

Use intimidation or manipulation to control you or your children

Become jealous without reason (wants to know where you are every minute)

ECONOMIC ABUSE

Deny you access to family and personal assets, bank accounts, credit cards, the car

Control all your finances and make you account for what you spend

Take any money you receive.

SEXUAL HARASSMENT

Unwelcome physical contact (e.g., touching, pinching, kissing hugging, fondling)

Unwelcome verbal contact (e.g., sexual comments, stories, or jokes; sexual advances; comments on your private life, appearance, age etc.; repeated and unwelcome social invitations for dates or physical intimacy; insults based on the sex of the person; condescending remarks; job-related threats or rewards to solicit sexual favours; sending sexually explicit messages)

Unwelcome non-verbal contact (e.g., leering; display of sexually explicit material; sexual gestures; Whistling)

TIPS ON DEALING WITH ABUSE

- Recognize that you are in an abusive relationship. Talking to friends or family about what is happening will often help you to recognise this.
- Make your mental and physical health a priority. Stop worrying about pleasing the person abusing you. Take care of your needs. Do something that will help you think positive and affirm who you are.
- Establish boundaries with the abuser. Firmly tell the abusive person that they may no longer yell at you, call you names, insult you, and so on. Then, tell them what will happen if they choose to engage in this behavior. For instance, tell them that if they call you names or insult you, the conversation will be over and you will leave the room. The key is to follow through on your boundaries. Do not communicate boundaries that you have no intention of keeping.
- Stop blaming yourself. If you have been in an abusive relationship for any amount of time, you may believe that there is something wrong with you. But you are not the problem. Stop blaming yourself for something you have no control over.
- Realize that you cannot "fix" the abusive person. Despite your best efforts, you will never be able to change an abusive person by doing something different or by being different. The only thing you can control is your response.
- Do not engage with an abusive person. In other words, if an abuser tries to start an argument with you, begins insulting you, demands things from you or rages with jealousy, do not try to make explanations, soothe their feelings or make apologies for things you did not do. Simply walk away from the situation if you can. Engaging with an abuser usually sets you up for more abuse and heartache. No matter how hard you try, you will not be able to make things right in their eyes.
- Build a support network. Stop being silent about the abuse you are experiencing. Talk to a trusted friend, family member or even a social worker/counselor about what you are experiencing. Take time away from the abusive person as much as possible and spend time with people who love and support you. Work on an exit plan. If your partner, friend, or family member has no intention of changing or working on their poor choices, you need to consider to exit the abusive relationship. Depending on your situation, you may need to take steps to end the relationship. Each situation is different;

so discuss your thoughts and ideas with a trusted friend, family member or counselor.

- Have a plan for what you would do if your partner became abusive. If you have to leave, what would you take with you? Where would you go? If you have children how will you protect them, will you take them with you?
- Know when to leave, and make a decision to leave an abusive relationship - early in the sequence.
- Protect yourself – your physical safety comes first
- Obtain outside support at the first sign of abuse

What are your ideas?

Facilitator Guide

Pilot Study Gender-Enhanced Interactive Online Workshop^{1,2,3}

Jill Hanass-Hancock, Nonhlonipho Bhengu, Theresa Exner, Slindile Maguthwa, Abigail Harrison, Silindile Khumalo, Lori Miller, Susie Hoffman

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² The facilitator guide for the Masibambane – Ladies Chat study, may be used for inspiration or non-profit purposes, with acknowledgements of the authors.

³ The guide uses a publicly available video sponsored by HPTN <https://www.youtube.com/watch?v=rHkQq--anmo>