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|  | **Activities** | **Time** |
| A. | Program Overview & Expectations | 5 minutes |
| B. | Ring 101 | 5-10 minutes |
| C. | Ring Adherence Overview | 10 minutes |
| D. | Adherence Barriers and Strategies Menu | 10 minutes |
|  | Total | 30-35 minutes |

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|  | **Supplemental Materials** |
|  | Adherence Support Menu |
|  | Expectations Handout |
|  | Adherence Goals Worksheet |
|  | Confidence Ruler |
|  | REACH video (optional) |

**ACTIVITY A: Program Overview & Expectations**

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| **STATE** | *Welcome to our first counseling session for the* ***REACH Study.*** *My name is \_\_\_\_\_\_\_\_\_\_\_\_ and I am one of the counselors for this study. Thank you for coming in today. Your attendance at these visits is very important and we appreciate your commitment to this project.*  *In this study, we are doing something different, which is that we are recording all of our counseling sessions with our participants. The purpose is really to ensure that we, the counselors, are consistent in how we do the counseling across all the study sites. The recordings are then reviewed by one of the researchers who specializes in counseling and she speaks with us about how to make the sessions better and, hopefully, more helpful to our participants. So, the focus of the recording is not on what you are saying, but on making sure I am doing the best counseling possible. Is it okay if I turn on the recorder now?*  ***REACH*** *is designed to provide young women with choices in HIV prevention products and to assist them to gain skills that they need to feel confident about using HIV prevention products. In REACH, you will gain experience and practice using 2 different HIV prevention products – a daily tablet which is often called “PrEP” and a vaginal ring. Then, for the last part of the study, you get to choose which product you would like to use.*  *There will be a counseling session at each study visit. The sessions are expected to take 20-35 minutes each. In these sessions we will discuss what is easy for you with using the products and what is difficult for you. We will also talk about strategies for how we can best support you while using your study product, such as providing you reminders, connecting with your peers, or having extra check-in visits. You will be able to choose which strategies you want to use - - and you can change your mind at each visit.*  *I am looking forward to working with you in this study. Before we get started talking about the products, I’d like to review some important guidelines with you about our approach to these sessions.* |
| **DISPLAY** | The Expectations Worksheet |
| **DISCUSS** | Read through the worksheet with the participant.  What should you expect from me?   * Confidentiality * Collaboration with you during our sessions * Focus on your health * Respect for your ideas and opinions * Open to feedback and willingness to adapt to your needs   What do I expect from you?   * Be on time and attend all sessions * Be prepared for each session * Be open and honest * Be committed to your own health and wellness * Be willing to give feedback |
| **ALLOW** | Time to share feedback on the expectations |
| **STATE** | *Thank you for going over those expectations with me. An important component of the REACH study is empowerment.* |
| **ASK** | *Do you know what empowerment means?* |
| **ALLOW** | Participant to respond |
| **STATE** | *Empowerment means your ability to make your own choices, to become stronger, more confident and in control of your life. Empowerment includes self-acceptance, responsibility for your own behaviors, and a willingness to make healthy sexual choices. Throughout these sessions, we will focus on choices and problem-solving. I hope that you can use these skills for HIV prevention but also in other areas of your life. I will be here to assist you in this process - this is not something that you will be doing alone.* |
| **ASK** | *What questions do you have for me?* |
| **ALLOW** | Time to discuss |

**ACTIVITY B: Ring 101**

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| **STATE** | *It looks like you’ll be starting the study by using the ring. Let’s spend some time discussing the ring – and also any rumors you may have heard about it. I’m also going to ask you some questions to make sure you understand the ring. Don’t worry if you don’t know the answer. That is why we are here today. Remember knowledge helps us become more empowered.* |
| **ASK** | *First, what have you heard about the ring for HIV prevention?* |
| **ALLOW** | Participant to respond.  Probe for these issues if participant has trouble responding:  - community rumors  - HIV stigma  - personal experience with vaginal products |
| **STATE** | *Thank you for telling me what you have heard about the ring.* |

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| ***OPTIONAL, if REACH Video is shown during the session*** | |
| ***ASSESS*** | If REACH video should be shown to participant |
| **STATE** | *Now, let’s watch a video that has some information about the ring.* |
| **SHOW** | Video |
| **STATE** | *Let’s review some of the information from the video that we know about the ring. How well does the ring work?* |
| **ALLOW** | Participant to respond. |

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| **STATE** | *The best way to protect yourself from sexually transmitted infections (including HIV) is to use a condom every time you have sex. The ring can also greatly reduce a woman’s chance of getting HIV. Protection is highest when the ring is used all the time. The ring only provides protection during vaginal sex. The ring will not provide protection at all when it isn’t used.* |
| **ASK** | *Is the ring safe?* |
| **ALLOW** | Participant to respond. |
| **STATE** | *The ring is very safe to use. Side effects are rare.* |
| **ASK** | *Why is it important to get tested regularly for HIV before and while using the ring?* |
| **ALLOW** | Participant to respond. |
| **STATE** | *Testing regularly is important to make sure that you are still HIV negative. If you become HIV positive, then you will need to get treatment for HIV infection* |
| **ASK** | *Do you have any other questions about the ring?* |
| **ALLOW** | Time for discussion |

**Activity C: Ring Adherence Overview**

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| **STATE** | *Now let’s talk a little about adherence to ring. When I say adherence, I mean using the ring as it were prescribed. For the ring, the best adherence would be leaving the ring in your vagina all the time and replacing it each month when you are back in the clinic.* |
| **ASK** | *What thoughts do you have about keeping the ring in your vagina all the time?*  *What may get in the way of adhering to the ring?* |
| **DISCUSS** | Some common barriers to good adherence. Consider some of following (but don’t need to review them all):   * Barriers to return for study visits (e.g., money or time) * Disruption in routine (for example, travel away from home) * Forgetting/no dose available * Job commitments * Lack of privacy * Medication side effects * Negative reactions (family, friends, partner) * Partying/drugs/alcohol * School Commitments (classes or exams) * Side effects * Stigma/fear of stigma   Other  But also remind participant that many people don’t report barriers to adherence at all. |
| **STATE** | *Thank you for discussing with me some of the barriers that may exist to using the ring.* |

**ACTIVITY D: Problem Solving Adherence Barriers**

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| **SHOW** | Confidence Ruler Handout |
| **STATE** | *As you think about what we’ve discussed so far today, on a scale of 0 to 12, where 0 is not confident at all and 12 is extremely confident, how confident are you that you will be able to keep the ring in your vagina all the time?* |
| **ALLOW** | Participant to show you on the ruler where their confidence falls |
| **ASK** | *Why is it a \_\_\_\_\_\_\_ and not a 0 or 1? Why else is it a \_\_\_\_\_ and not a 0 or 1?* |
| **ALLOW** | Time for discussion |
| **STATE** | *Thank you for sharing your level of confidence with me. The last thing that we are going to work on today is an adherence plan. You and I just discussed some of the things that might get in the way of using the ring as prescribed. Let’s try to come up with a solution for each one. This will be your plan to follow. We have talked about adherence meaning using the ring as directed. However, adherence also includes anticipating issues that may not be directly related to using a ring - but can have a great influence on being able use the product. For example, if you miss your study appointment, you may not be able to get your new ring for the month. So then you are unable to be adherent.* |
| **SHOW** | My Adherence Goals Worksheet |
| **INTRODUCE** | *Let’s consider some goals that you may have for adherence, identify possible problems to reaching those goals, then choose some support options that may help you overcome adherence challenges.* |
| **STATE** | *First, let’s set some goals for adherence. For example, a goal for coming in for all of your appointments can be “I want to make it to all my scheduled appointments!”* |
| **ALLOW** | Participant to complete handout and identify as many goals as desired. Not all boxes need to be completed. |
| **REVIEW** | Worksheet goals with participant. Help her identify problems that may arise that interfere with these goals.  If participant has trouble setting goals, here are some sample probes:   1. Getting to study visits    * How often are your appointments? How do you plan to get to your appointments? Who reminds you to go? 2. Communicating with study team    * Think about your next study visit. What questions do you want to ask about the ring? About side effects? About sexual behavior? 3. Keeping the ring in all the time    * When might you want to take it out? How can you clean the ring and re-insert it? 4. Communicating with partners about the ring  * What if your partner doesn’t want the ring to stay in your vagina during sex?   *Note: If additional barriers to stated goals are reported during this discussion, counselors should document on the Adherence Counseling CRF as appropriate.* |
| **STATE** | *Thank you for completing this worksheet. We will keep this worksheet in your file so that we can review your goals at each session.* |
| **STATE** | *As I mentioned earlier, this study offers you opportunities to make choices. Those choices include what adherence strategies you would like to use. I’m going to show you a menu of ways to support adherence that we can offer you at this clinic. I’d like you to choose which options on the menu you would like to “order”. We will review your choices at each visit just to ensure the strategy (ies) are still helpful. You can choose something now but are free to change your mind at any time.* |
| **HANDOUT** | Adherence Menu |
| **DISCUSS** | Read through each option on the menu. Answer questions the participant might have about each one.   * **Daily Text Message**   Once a day, we will send you an automated text message to help remind you to use your study product. You will choose from several message options.   * **Weekly Check-In**    + **Via Text Message –** once per week, you will receive an automated text message asking if you are OK. You will be expected to respond “OK” or “not OK”. If you don’t respond within 24 hours, a second message will be sent. If you respond “not OK”, a study team member will call you.   + **Via Phone Call –** once per week, you will receive a phone call from a study team member asking if you are OK. Based on your personal preference, they will leave a voice message or not. * **Peer Buddy**   We will connect you with another participant who is also interested in having an adherence buddy. We will help you and your “buddy” develop a plan to support each other’s adherence.   * **Adherence Support Groups**   + **In-person groups –** we will arrange support groups for participants who would like to meet regularly to discuss the study, the study products, as well as other issues going on in their lives. A study team member will facilitate the group.   + **Online groups –** we will arrange secure, online support groups via apps, such as WhatsApp, on which participants can communicate with each other to discuss the study, the study products, as well as other issues going on in their lives. A study team member will facilitate the online group. * **Additional Counseling Visits**   We will provide you with additional in-person counseling visits to discuss adherence in between regularly scheduled study visits.   * **Something Else**   Can you think of another way that we can support you to use the study products as prescribed? Please let us know. |
| **ASK** | Participant to choose her adherence options from the menu |
| **STATE** | *This is a great start! Now, each time we meet we will review your adherence goals and discuss any problems you’ve had. Remember, we will offer you the menu of support options at every visit. You can keep the same options or make a different choice.* |
| **ALLOW** | Time for discussion |

**Wrap-Up**

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| **STATE** | |  | | --- | | *It was a pleasure meeting you and getting to know you. I will try to be your main counselor during the study, however you may end up seeing another counselor if I’m not available when you can come for a visit. You can always contact me through the clinic if you have questions or need to talk. I look forward to spending more time with you over the course of the REACH study ”* | |
| **REVIEW** | Next scheduled appointment time |