Synthesis of proceeding and outcomes of the
1st EHPSA Symposium (2015)

Held at the Balmoral Hotel, Durban, South Africa
8th – 9th June 2015

EHPSA programme supported by

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Introduction
This report synthesises the proceedings and outcomes of the first symposium of the Evidence for HIV Prevention in Southern Africa (EHPSA) programme held at the Balmoral Hotel, Durban, South Africa on the 8th and 9th of June 2015. This symposium marked the start of a number of planned regional symposia and other networking events. EHPSA acknowledges the importance of having evidence available, and the skills to use that evidence in difference contexts. An important focus of the EHPSA programme is the search for a better nexus to bring researchers into the policy making environment and to create a platform for networking between researchers and policy makers. The regional sharing is critical to EHPSA as reversing the epidemic will require a concerted regional effort.

The symposium brought together 30 researchers and policy makers from across the eastern and southern African region to discuss the EHPSA-funded research programmes and other aspects of the EHPSA programme.

EHPSA Adolescent Portfolio
Presentations were made on the research programmes in the EHPSA adolescent portfolio:

• Mzantsi Wakho: Social protection for HIV prevention among adolescents (University of Cape Town (UCT) Oxford University (OU)).
• Evaluating a Combination HIV/SRH Health Package for at-risk Young Women: A Demonstration Project (University of North Carolina (UNC) Lilongwe Medical Relief Fund Trust).
• Uptake and acceptability of a combination HIV prevention package among young people in Zambia and South Africa (Adolescents in HPTN 071/PopART Study) (Desmond Tutu TB Centre, Stellenbosch University and London School of Hygiene and Tropical Medicine (LSHTM), Zambart).
• Improved Combination Prevention (including PrEP) in Adolescent Women in Tanzania and South Africa (University of the Witwatersrand Reproductive Health and HIV Institute (RHI))

All the studies are operational research that look at combination methods to improve uptake and adherence of HIV-related healthcare and social interventions (including PrEP) in an adolescent population. Projects are targeted at both HIV-negative and HIV-positive adolescents and have at least one site in South Africa, with other sites in Zambia, Tanzania, and Malawi.

Highlights of the Discussion on Adolescent Portfolio
• Evidence must be relevant to policy makers and must address identified policy gaps.
• Evidence uptake can be increased if there is collaboration between policy makers and researchers at the research design stage.
• Evidence dissemination should be practical, “usable” and be provided timeously. The production of policy briefs is considered essential.
• Policy makers require regular updates of synthesised data with recommendations, but should be able to interrogate the data and ask questions at other stages within reason.
• Recommendations based on objective evidence may not always be implemented due to other factors such as contradicting social norms and cultural beliefs as well as economic factors.
• The EHPSA adolescent portfolio provides an opportunity to update original policies which did not previously consider adolescents as a key target group.
• The issue of ownership of data and confidentiality is particularly relevant to research on adolescents and other vulnerable groups.
• Processes for sharing and dissemination data between researchers and policy makers, amongst research institutions, and within policy making structures need to be explored.

**EHPSA Prisoners Portfolio**

Presentations were made on programmes and research in the EHPSA prisoner portfolio. The single research programme, "Treatment as Prevention (TasP) in correctional facilities in southern Africa", is being undertaken by the Aurum Institute. This programme is intended to have a broader reach: if TasP achieves the anticipated results in correctional facilities, other settings and population groups stand to benefit from the evidence.

**Highlights for the discussion on Prisoners Portfolio**

- There are socio-political complexities of working within the prison environment and with prisoners as a vulnerable group. The key here is gaining public and political support.
- Policies may be in place but not implemented due to a lack of understanding of the public health implications and socio-economic costs of failing to provide treatment.
- Governments are often hesitant about publishing or releasing prisons data, resulting in a lack of evidence informed policy.
- In countries where treatment is being provided in prisons, prisoners are generally not responding optimally because of poor nutrition, inadequate ventilation and other environmental or structural issues.
- There is a notable absence of data on the coverage of adolescents in prison, an area requiring further research.

**EHPSA LGBTI (MSM) Portfolio**

Presentations were made on the research programmes in the EHPSA LGBTI portfolio:

- Understanding the HIV prevention needs of MSM and their partners in Southern Africa - Human Sciences Research Council (HSRC).
- The Burden of Sexually Transmitted Infections among Men who have Sex with Men in Kisumu, Kenya - Nyanza Reproductive Health Service (NRHS).
- Strengthening the design of HIV prevention interventions for men who have sex with men in Tanzania and South Africa - National Institute for Medical Research, Tanzania.
- Improving access to SRH services among MSM - Tanzania and Malawi - University of Malawi-College of Medicine.

The projects in this portfolio focus on improving access to sexual and reproductive health (SRH) services, design of HIV prevention interventions, and the burden of sexually transmitted infections (STI).

**Highlights from the discussion on LGBTI (MSM) Portfolio**

- The most obvious obstacle facing researchers in the portfolio is the potential tension that may arise between policy recommendations and existing legal frameworks and/or social norms.
- In countries where the existing legal framework does provide an opportunity to revise policies to include MSM, this inclusion is often met by opposition from government, church and civil society.
• Where legal frameworks criminalise MSM, any potential for evidence uptake is extremely limited and there are numerous obstacles to conducting research.
• Sampling and access to respondents are recognised as difficult issues to address.

**World Bank Portfolio on Population Level Evaluations (EHPSA)**

Presentations were made on the World Bank evaluations:
• Incentivised demand creation strategies to promote voluntary medical male circumcision (VMMC) in Malawi.
• Strategies to enhance linkage and adherence to ART and retention in care in South Africa.
• Demand-side incentives to enhance HIV prevention among young women and girls in Swaziland.
• Technical support to strengthen National HIV programme implementation roll-out in Swaziland.

**Highlights from the discussion on World Bank evaluations**
• These evaluations aim to produce policy briefs that will be of assistance to policy makers. National seminars for verification and conferences to share information will be hosted, as well as web-based seminars.
• An evaluation of the impact and costs of providing incentives for VMMC will provide policy makers with evidence of effectiveness as well as other issues relevant to the scaling-up the VMMC programme (e.g. costs, methodologies, working with women’s groups, etc.).
• The evaluation of strategies to promote adherence aims to produce a number of lessons which may be transferred to other countries and programmes.
• The evaluations of the demand-side incentives (i.e. conditional cash transfers) for girls raised a number of issues around methodology and long-term sustainability. The focus of this evaluation is to assess the effectiveness of providing incentives to prevent girls from engaging in transactional sex and, in doing so, allow girls to stay in school.

**EHPSA Policy collaboration**
EHPSA has a match-making role to play between researchers and policy makers. Key enablers and inhibitors to policy collaboration were identified by workshop participants.

**Inhibitors**
• Lack of clarity and agreement on the use and ownership of data;
• Absence of reciprocal relationships and trust between researchers and policy makers;
• Poor alignment between research and policy priorities;
• Lack of acceptance by policy makers or society due to legal framework, contradicting social norms and/or lack of political will; and
• Lack of capacity and willingness to convert evidence to policy.

**Enablers**
• Policy makers having clarity on the research questions they want answered;
• Policy makers being involved in coordinating research activities and researchers responding appropriately to policy demands;
• The involvement of key policy makers in research processes from the outset;
• Strategies to strengthen policy makers’ and researchers’ capacity for evidence uptake
• Alignment of research with policy priorities
The EHPSA Fellowship Scheme aims at promoting policy uptake by bringing policy makers and researchers together, with the aim of building long term relationships. The EHPSA model looks to link senior academics with policy makers in this way: a policy maker will identify a topic and invite a researcher to work in country for a flexible period of time. The main aim is relationship building. EHPSA will not fund salaries or fees, but will provide some top-up funding for travel and other expenses. It is hoped that researchers will recognise the value of engaging directly in the policy making environment, as well as being having access to data. Host organisations, such as government institutions or civil society organisations, will be expected to provide some funding as well as to develop the ToR, provide desk space and other resources to carry out the research.

**Research topics not addressed by EHPSA**

During the symposium, three areas were identified for further primary research:
- Transactional sex;
- Male participation in reproductive and sexual health; and
- Adolescent adherence.

**EHPSA Communication and dissemination**

As a regional programme, the sharing of information is important. EHPSA communication ethos is based on one-on-one discussions with researchers on how best to summarise and communicate the research projects. EHPSA recognises that researchers will want to publish results and EHPSA will only publish what is provided with the permission of the researchers. Researchers in turn will be required to make information available on a regular and routine basis. It was noted that symposia are an integral part of EHPSA and technical fora or symposia will be organised on a regular basis to allow for more in-depth consideration of the different methodologies.