

Planning and Responding to the Results of the ECHO Trial: A Checklist for Strategic Communication

May 23, 2019



USAID
FROM THE AMERICAN PEOPLE



JOHNS HOPKINS
Center for Communication
Programs™

Breakthrough
ACTION
FOR SOCIAL & BEHAVIOR CHANGE



Table of Contents

Acknowledgements ii

Introduction 1

About the Checklist..... 1

Scenario Planning 4

Communication Goal and Objectives 7

Identifying Audiences 9

Action Planning..... 10

Resources Available and in Development..... 25

Acknowledgements

We would like to acknowledge the valuable input and guidance of many stakeholders that contributed to this Checklist, including Jen Mason and Rabab Petit at the United States Agency for International Development (USAID), as well as numerous colleagues who participated in interviews and a consultation held in January 2019 to examine the communication and advocacy needs surrounding the release of the Evidence for Contraceptive Options and HIV Outcomes (ECHO) trial results.

This resource is made possible by the support of the American people through the United States Agency for International Development (USAID) under the Breakthrough ACTION Cooperative Agreement #AID-OAA-A-17-00017. Breakthrough ACTION is based at Johns Hopkins Center for Communication Programs (CCP). The contents of this brief are the sole responsibility of Breakthrough ACTION and do not necessarily reflect the views of USAID, the United States Government, or Johns Hopkins University.

Introduction

The Evidence for Contraceptive Options and HIV Outcomes (ECHO) trial was launched in 2015 to test the comparative risk of HIV acquisition among women using one of the following three contraceptive methods: depo-medroxyprogesterone acetate intramuscular (DMPA-IM), also known as Depo-Provera, two-rod levonorgestrel sub-dermal implant (LNG-Implant), branded as Jadelle, and the copper intrauterine device (Copper-IUD). The trial enrolled 7,830 women across Eswatini, Kenya, South Africa, and Zambia, who agreed to be randomized by computer to one of the three methods. Results are anticipated in July 2019 and updated World Health Organization (WHO) guidelines are expected in late-August 2019.

To ensure a coordinated and strategic response at the country level, it is important for governments to take action to prepare for the results prior to their release and communicate the results—and subsequent WHO Guidelines—to relevant stakeholders in a timely fashion.

About the Checklist

This Checklist for Strategic Communication is intended to provide an adaptable, quick-start plan for key communication activities during three key timeframes:

1. Prior to the release of ECHO results (before mid-July 2019)
2. Immediately after the release of ECHO results/interim guidance from WHO (between mid-July and August–September 2019)
3. After the release of WHO Guidelines (After September 2019)

The tool is intended to complement existing efforts by countries that are planning to respond to the ECHO trial results.

Why Should You Use the Checklist?

The ECHO study will provide scientific evidence about women’s contraceptive and HIV prevention choices, evidence that could have significant impact on family planning and HIV policies and programs. To ensure that national policies and programs respect the need for women to have the information, knowledge and ability to make the best choice for their health, governments, with the support of WHO and other partners, are preparing to respond to the results in a timely and strategic manner. Early preparation will help avoid panic, deal with potential alarming headlines in the news, and adequately plan for programmatic and policy changes, if needed. A strong communication response is essential. Regardless of the results, there is a pressing need for additional investment in programs that expand women’s options for contraception and for HIV prevention.

Intended Users

This Checklist for Strategic Communication was developed primarily for national governments to adapt for their country contexts. It is recommended that the adaptation process is conducted in consultation with key national stakeholders, including donors, family planning and HIV implementing organizations, and civil society advocates in order to ensure a transparent, coordinated, and strategic response. For example, it is ideally used by country-based ECHO task teams that were established in many focus countries following the World Health Organization (WHO) consultation in Lusaka, Zambia, in February 2019 and is designed to support the efforts of these groups.

Country Context

The results of the ECHO trial are globally important. However, the results will be more immediately relevant to countries with higher HIV prevalence and with higher use of any of the contraceptives that might be found to increase the risk of HIV acquisition based on the ECHO results.

How to Use the Checklist

1. If it is not in place already, establish an ECHO Task Force or Steering Committee made up of a mix of stakeholders, including those with expertise in policy, communication, and service delivery for family planning and HIV. This Task Force will help ensure collaboration and coordinate actions and messaging in response to the trial results. As noted above, the Task Force is an ideal group to review, adapt, and implement the Checklist.
2. Review the suggested primary and secondary audiences.
3. Review and adapt the goal and objectives and add specific timelines and/or quantification as needed.
4. Review the Action Planning Checklist and adapt it as needed. Edit the recommended actions and suggested audiences by adding, revising, or removing them as needed. The recommended actions are divided into three categories:
 - a. Activities that are considered **critical** in order to have a successful and smooth response to the trial outcomes.
 - b. Activities that are important; if time and resources are limited, these can be **done at a later time**.
 - c. Other activities that may be useful to consider **when time and resources allow**.
5. Add the name of the person or group responsible for each activity, the collaborating partners, resources required, existing resources, and time frame.
6. Ensure the draft and final Checklists are validated by the Task Force to ensure widespread buy-in and a coordinated response.

When to Use the Checklist

The Checklist does not have to be completed all at once. Users can complete it for the period before the release of the ECHO results (before July 2019) as soon as possible. The other two key moments can be completed at a later time, but it is suggested to at least review and draft as soon as possible.

SUPPORTING RESOURCES AND IMPORTANT WEBSITES

These resources can assist users in completing some of the actions:

Results 4 Informed Choice

<https://resultsforinformedchoice.org/>

Includes tools, resources, and data to help stakeholders plan and execute their response. Upload your own materials to help others learn from what you are doing. For the most recent available templates, see: <https://resultsforinformedchoice.org/countryplanning/>

Planning for Outcomes Model

<https://planning4outcomes.ctiexchange.org/>

Assists countries in looking at modeling scenarios on available contraception and maternal and child health indicators.

ECHO Consortium

<http://echo-consortium.com/>

Provides information about the ECHO trial from the coordinating partners.

WHO

<https://www.who.int/reproductivehealth/hc-hiv/en/>

Provides access to ECHO trial information and related documents.

Family Planning 2020 (FP2020)

<http://www.familyplanning2020.org/echo>

Contains information on the ECHO trial.

AVAC

<https://www.avac.org/prevention-option/hormonal-contraceptives-and-hiv>

Contains information on the ECHO trial.

Scenario Planning

Instructions: Complete the Scenario Planning template for your country.

Because the results of the ECHO trial will not be available until mid-July 2019, a critical first step in planning for the results is to consider the possible scenarios that may occur. The results may fall into any of the following scenarios: The results of the ECHO trial are anticipated to be available by mid-July 2019. It is critical for implementation planning, to consider various result scenarios that may occur. The results may fall into any of the following scenarios:

SCENARIO	DESCRIPTION <i>* Note: Results apply to women at high risk of HIV only *</i>
1	<p>There is no difference in HIV acquisition between three methods tested; DMPA-IM, LNG-Implant, or Copper-IUD show no relative increased risk of HIV acquisition to each other. <i>Stakeholders should consider that the trial findings for this scenario may inform a WHO recommendation that the current MEC for all of the methods remains the same (Category 2 for DMPA-IM and Category 1 for Copper IUD and LNG-Implant), or that DMPA-IM is shifted back to a Category 1 for women at high risk of HIV.</i></p>
2	<p>DMPA-IM shows increased risk of HIV acquisition relative to LNG-Implant or Copper IUD <i>Stakeholders should consider that the trial findings for this scenario may inform a WHO recommendation that the current MEC for DMPA-IM (Category 2 for women at high risk of HIV) may stay the same or change.</i></p>
3	<p>LNG-implant shows increased risk of HIV acquisition relative to DMPA-IM or Copper IUD <i>Stakeholders should consider that the trial findings for this scenario may inform a WHO recommendation that the current MEC for LNG-implant (Category 1 for women at high risk of HIV) may stay the same or change.</i></p>
4	<p>Copper IUD shows increased risk of HIV acquisition relative to DMPA-IM or LNG-Implant <i>Stakeholders should consider that the trial findings for this scenario may inform a WHO recommendation that the current MEC for Copper-IUD (Category 1 for women at high risk of HIV) may stay the same or change.</i></p>
5	<p>The results of the ECHO study do not support or reduce existing concerns. There is a need for further analysis and in-depth evaluation of the evidence. <i>Stakeholders should consider that the trial findings for this scenario may inform a WHO recommendation that the current MEC for all of the methods remains the same (Category 2 for DMPA-IM and Category 1 for Copper IUD and LNG-Implant), or that DMPA-IM is shifted back to a Category 1 for women at high risk of HIV.</i></p>

Note that other study outcome scenarios are possible. For example, it is also possible that if associations are observed, they may be only in specific sub-populations and more than one method may show an increased HIV acquisition risk.

Programmatic considerations

Until the evidence from this study has been reviewed by WHO, there is no change in the MEC for contraceptive use (currently category 2 for DMPA-IM; category 1 for LNG-Implant and Copper-IUD) for women at high risk of HIV.¹ WHO is expected to issue updated Guidelines and MEC recommendations for women who are at high risk of HIV in/or around August 2019 on the basis of this review.

Any outcome of the trial reinforces the need to continue strengthening integrated FP/HIV services, with a focus on integrated counseling, HIV prevention and improved contraceptive method mix. Women should have easy access to high quality services that address both their FP and HIV needs.

The Scenario Planning template can be used to think through each study outcome possibility outlined above, and assess impact on relevant policies and programs using the following considerations:

Contraceptive Choice

- How to ensure that a range of contraceptives continue to be made available to all women along with client-tailored counselling that is informed by the study findings and WHO MEC Guidelines. Note that the current and any revised WHO MEC Guidance is for women at high risk of HIV. Any method that potentially shows increased risk can still be an excellent choice for many women.
- How to respond both programmatically and logistically to possible changes in demand based on the study findings. Women may choose to discontinue use of some methods and may wish to initiate others. Steps need to be taken to ensure that women who choose not to use any method that shows an increased risk have access to alternative methods.
- How to expand the national contraceptive method mix to ensure that women have options, including short-acting, long-acting and permanent methods.
- How to ensure access to a range of contraceptives and family planning counseling continues to be available for women living with HIV who are not directly affected by the findings of this study.

HIV Prevention

- How to scale up HIV prevention services with appropriate counseling for women at high risk of HIV. Women who seek family planning and HIV testing services should receive HIV risk screening

¹ (<https://apps.who.int/iris/bitstream/handle/10665/254662/WHO-RHR-17.04-eng.pdf;jsessionid=1BC4407A86710427C894341CA07C3ACD?sequence=1>)

and prevention information and be advised that dual method use (condoms plus an effective contraceptive method) is the best option to prevent both sexually transmitted infection (STI)/HIV acquisition and unintended pregnancy.

- How to make counseling and access to oral pre-exposure prophylaxis (PrEP) services available to women at high risk of HIV. Because contraceptives protect against pregnancy, but not STIs/HIV, condoms and PrEP should be part of a comprehensive approach for women at risk of HIV or other STIs. Women at high risk for HIV should also be advised to use other HIV-prevention measures, such as HIV testing and antiretroviral therapy (ARV) initiation for HIV positive partners where appropriate.
- How to scale up HIV prevention technologies with appropriate counseling for women at high risk of HIV.
- How to support health workers in identifying women at high risk of HIV in ways that are rights-focused and avoid stigma.

Provider Preparedness and Capacity and Client Centered Counseling

- How to update national counseling guidelines and tools to align with any new, or continued, WHO MEC Guidelines.
- How to ensure that women at high risk of HIV receive high-quality client-centered FP/HIV counseling. Women should be appropriately informed of the study results and supported in their decision on how to best protect themselves against HIV and avoid unintended pregnancies.
- How to ensure that health workers have the capacity to offer such high-quality counseling and HIV risk screening and have a supportive environment to do so.

SUPPORTING TEMPLATE

Scenario Planning¹

<https://resultsforinformedchoice.org/countryplanning/>

Communication Goal and Objectives

Instructions: Review and adapt the following goal and objectives.

Goal

All women have comprehensive, clear, and up-to-date information about contraceptives and any risk of HIV identified through the ECHO trial; feel empowered to make an informed choice; and have access to a range of contraceptive methods.

Objectives

Before the release of ECHO trial results

- Form the ECHO Task Force by May 2019 to guide collaboration and decision-making.
- Complete the Action Planning Checklist by June 2019 to prepare for ECHO trial results and the actions to take immediately following their release.
- Finalize scenario planning by outlining key decisions and messages for each possible trial scenario no later than the end of June 2019.
- Inform key stakeholders about the ECHO trial and its implications for family planning programs by June 2019.

After ECHO trial results are released and before WHO guidelines are released

- Brief journalists with accurate information within one week following the release of ECHO trial results.
- Update key stakeholders about the ECHO trial results and their implications for family planning within two months.
- Complete the Action Planning Checklist within two months of the trial results and outline the actions to take (with assistance from WHO statements).

After WHO guidelines are released

- Update national guidelines for family planning providers within six months of the release of WHO guidelines.
- Disseminate tools and resources to providers and women to support informed choice within three months of updating national guidelines.
- Increase the number of trained providers who have the capacity to convey information accurately and effectively to their clients within five months of updating national guidelines.
- Increase the number of women who receive accurate information from a health provider about hormonal contraception and HIV within 12 months of the release of WHO guidelines.

SUPPORTING TEMPLATE

Goals and Objectives²

<https://resultsforinformedchoice.org/countryplanning/>

Identifying Audiences

Understanding your audience is critical to designing and implementing a successful Strategic Communication approach. This ensures that the focus of a country's efforts is on the key individuals and groups that need to be informed. The primary and secondary audiences that are important for ensuring a comprehensive response to the ECHO trial results are suggested below. These are broad audiences and will need to be more narrowly defined based on specific country context.

Instructions: *Review the audience segments and adjust them based on the country context.*

Primary audiences

- Policy decision makers
- Implementing partners and civil society working on family planning and HIV
- Sexually-active women and girls considering or currently using progestogen-only injectable contraceptives who are at high risk for HIV
- Family planning providers (facility-based)
- Community health workers

Secondary audiences

- District officers working in sub-national government offices
- Professional associations for providers
- Male partners
- Faith-based and community leaders
- Journalists and other media influencers

Action Planning

Instructions: *Work with stakeholders to complete the Action Planning Checklist and guide implementation of the activities.*

The Action Planning checklist helps countries: 1) think through the activities that might need to take place to prepare for the results and 2) take action after the results are released. Some countries may choose to do all the activities, while others may pick and choose those that make the most sense in their country contexts.

The components of the checklist are explained below:

Action

These include activities and materials, divided into three categories to help countries determine their priorities when there are limited resources and/or limited time:

1. Actions that are considered **critical** in responding to the ECHO trial.
2. Actions that, given time and resources, would be **important** to consider.
3. Other actions that may be useful in **planning or in the long term**.

Intended Audience

Identify the group of people that the activity is designed to reach. Recommended audiences are included for each action, but they can be adapted or changed.

Person/Group Responsible

List the person who will take leadership of this action, coordinate with others also working on it, and ensure that the action is completed.

Collaborating Partners

Determine who can help you with this work. Is there an organization specializing in what needs to be done? Are there other people or groups that can assist with the work or with sharing information?

Resources Required

Define the money or materials that will need to be in place to accomplish the activity. How will you get these resources?

Existing Resources

Think about what you can use that already exists. Are there materials that could be adapted? Are there meetings that are already planned and that can be used for a different purpose? Some of the resources that are available on a global level are included in this Checklist. New resources are being developed all

the time and will be posted to <https://resultsforinformedchoice.org/countryplanning/>. You should also consider what local resources are available.

Time Frame

Define when each activity will be completed. Be as specific as possible.



Depending on the results of the ECHO trial, some of the activities that should take place after the release of the ECHO trial or after the release of WHO guidelines may not be relevant. Each country must assess their specific situation, the trial results, and WHO guidance or guidelines to determine what actions are relevant and important to complete.

ACTIONS TO TAKE BEFORE THE RELEASE OF ECHO TRIAL RESULTS

Before July 2019

Critical Actions

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Undertake scenario planning for possible ECHO findings, including programmatic implications and alternative methods for women at high risk	n/a				Scenario Planning Template ¹	
	Establish communication goals and objectives	n/a				Goals and Objectives Template ²	
	Appoint media spokesperson(s) and prepare them for the trial results	n/a					
	Present background on the ECHO trial at existing platforms such as family planning and HIV technical working groups, including holding joint meetings with civil society organizations	Family planning and HIV implementing partners and civil society organizations				ECHO Fact Sheet ⁴ ECHO PowerPoint presentation ⁵	
Materials to Develop or Adapt							
	Brief on ECHO key facts translated into local languages as needed	Family planning and HIV implementing partners, civil society, and professional associations				ECHO Fact Sheet ⁴	

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
	PowerPoint presentation on ECHO key facts translated into local languages	Family planning and implementing partners, civil society, professional associations				ECHO PowerPoint presentation ⁵	
	Media talking points about the ECHO trial and the impact it has for the country (for each scenario)	General public				WHO messages (coming soon) ⁶	

Action Planning Checklist: Actions Important to Consider

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Map partners and champions to build commitment among stakeholders to play an active role and to serve as counter-voices	n/a					
	Conduct outreach to national professional associations to sensitize them on the ECHO trial, share results, and disseminate the results through their networks	Professional associations					

Other Actions to Consider

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Identify and select spokespeople and influencers (for example, young leaders and users of contraceptives)	n/a					
	Identify how women prefer to receive information and who their trusted sources of information are	n/a				How-to Guide for Channel Mix ²	

ACTIONS TO TAKE IMMEDIATELY AFTER THE RELEASE OF ECHO TRIAL RESULTS

From July to August 2019

Critical Actions

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Conduct one-on-one meetings with key ministry staff to brief them on the results	Policymakers					
	Develop a communication strategy, building on scenario planning, including a clear and comprehensive dissemination plan for messages and information	n/a				Global Strategic Communication Framework ⁸	
	Prepare media spokesperson(s) with updated messaging	n/a				WHO messages (coming soon) ⁶	
	Hold a press briefing for journalists	Media					
	Review existing family planning guidelines and consider recommendations for updates, including integration of HIV risk assessment (pending WHO guidelines)	n/a				HIV risk assessment tool (coming September 2019) ⁹	
	Hold sub-national meetings to plan dissemination at district-level.	District-level health officers					
Materials to Develop or Adapt							

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
	Develop or adapt country-specific policy briefs on the trial results and their implications	Policymakers				WHO messages (coming soon) ⁶	
	Adapt and translate information briefs for providers with facts on the ECHO trial, the results, and, when available, the WHO guidelines	Providers					

Actions Important to Consider

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Conduct outreach to national professional associations to sensitize them on the ECHO trial, share results, and disseminate them through their networks	Professional associations					
	Activate national-level advocate networks to provide information on the trial and monitor information	n/a					
	Develop a draft training plan for providers and master trainers on the outcome of the ECHO trial (pending WHO guidelines)	Government trainers, district officers					
Materials to Develop or Adapt							
	Adapt global advocacy briefs to country-specific contexts to promote	Policymakers					

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
	increased investment in an expanded method mix						

ACTIONS TO TAKE AFTER THE RELEASE OF WHO GUIDELINES

After September 2019

Critical Actions

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Update and finalize existing family planning guidelines	n/a					
	Update national communication strategy for family planning (if applicable)	n/a					
	Train master trainers and providers (if applicable)	Providers, community health workers				Training package (available end of 2019) ¹⁰	
	Integrate new messaging into existing pre- and in-service trainings (if applicable)	Providers, community health workers				Training package (available end of 2019) ¹⁰ WHO messages (coming soon) ⁶	
	Adapt and translate low-literacy materials for community health workers (if applicable)	Community health workers					
	Adapt counseling tools and job aids based on the country context (if applicable)	Providers and community health workers				Available materials available and new ones coming in 2020 ¹¹	
Materials to Develop or Adapt							
	Adapt existing materials for clients/women, including simple, easy-to-read brochures or pamphlets that clearly explain the trial results and what they mean for a woman (if applicable)	Women				Available materials and new ones coming in 2020 ¹¹	

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
	Update information briefs with facts on the ECHO trial, the results, and WHO guidelines (if applicable)	Providers					
	Adapt a standardized HIV risk assessment tool for women to assess their individual risk (should be made available in printed and digital formats)	Women				HIV risk assessment tool (coming September 2019) ²	
	Adapt counseling tools and job aids (if applicable)	Providers and community health workers					

Actions Important to Consider

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Adapt add-on training module and materials for different groups of health workers (if applicable)	Providers and community health workers					
	Integrate ECHO information into existing work and trainings with community influencers such as community health workers, traditional birth attendants, parenting groups, and religious groups to	Community health workers and religious leaders					

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
	disseminate information to women (if applicable)						
	Integrate key messages into existing radio/TV call-in shows and serial drama storylines, especially modeling provider-client dialogue and couple communication	Women, male partners				WHO messages (coming soon) ⁶	
	Integrate messages into existing e-learning materials for providers such as training and counseling videos or create new provider training materials as needed	Providers and community health workers				WHO messages (coming soon) ⁶	
	Hold community dialogues in forums where women, men, and adolescents gather	Women, male partners					
	Leverage social media channels to explain ECHO trial results and why it matters (if applicable)	Women, male partners, other key influencers					

Other Actions to Consider

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
Activity							
	Integrate key messages into existing family planning mobile health and web-based platforms (if applicable)	Women, male partners				WHO messages (coming soon) ⁶	

✓	Action	Target Audience	Person/Group Responsible	Collaborating Partners	Resources Required	Existing Resources	Time Frame
	Monitor media reports to counter misinformation and ensure accurate reporting focusing on known opposition (if applicable)	n/a					

Resources Available and in Development

1. **Scenario Planning Template**

<https://resultsforinformedchoice.org/country-planning/>

Provides a guide for ECHO scenario planning

2. **Goals and Objectives Template**

<https://resultsforinformedchoice.org/country-planning/>

Adaptable Word version of the goals and objectives

3. **Task Force Terms of Reference Template**

<https://resultsforinformedchoice.org/country-planning/>

Can be adapted for use based on the context and specific national Task Force

4. **Action Planning Checklist Template**

<https://resultsforinformedchoice.org/country-planning/>

Adaptable Word version of the Checklist

5. **ECHO Fact Sheet**

<https://resultsforinformedchoice.org/material/echo-study-fact-sheet/>

Gives an overview of the ECHO Trial

6. **ECHO PowerPoint Presentation**

<https://resultsforinformedchoice.org/material/the-evidence-for-contraceptive-options-and-hiv-outcomes-echo-trial/>

Gives an overview of the ECHO Trial

7. **WHO messages (coming soon)**

Will be released around the time of the ECHO trial results. Can be adapted into different contexts and for different purposes (e.g., for media, for providers, for women).

8. **How-to Guide for Assessing Appropriate Channels**
<https://www.thecompassforsbc.org/how-to-guides/how-develop-channel-mix-plan>
Helps to determine types of communication channels that best reach the priority audience to deliver the messages

9. **Global Strategic Communication Framework for Hormonal Contraceptive Methods and Potential HIV Risks**
<https://resultsforinformedchoice.org/material/strategic-communication-framework-for-hormonal-contraceptive-methods-and-potential-hiv-related-risks/>
Will be updated after the release of the ECHO trial results. Provides messages and guidance for developing a communication strategy for this topic

10. **HIV risk assessment tool (coming September 2019)**
<https://resultsforinformedchoice.org>
Assists family planning providers in counseling their clients on their risk for HIV

11. **Provider counseling training package (coming at the end of 2019)**
<https://resultsforinformedchoice.org>
Assists countries in developing training for their providers based on the outcomes of the ECHO trial

12. **Client materials and provider job aides (Some currently available, others coming in 2020)**
<https://resultsforinformedchoice.org>
Developed for women and providers and can be adapted for different countries