



# A Mixed Methods Study Assessing Readiness for Oral PrEP in a Rural Area of KwaZulu-Natal, South Africa

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## Background

**Research Question:** How will current awareness of and attitudes toward PrEP in a rural district of KwaZulu-Natal affect a future rollout to adolescent girls and young women (AGYW)?

### Oral PrEP in AGYW

- The WHO currently recommends oral PrEP to groups at substantial risk for HIV
- Multiple RCTs of PrEP in AGYW populations have shown low rates of adherence, especially in AGYW under 21, pointing to the need for broader support
- Open label trials have shown higher levels of adherence to oral PrEP in AGYW in SSA, showing that a larger rollout to this group is possible and even feasible

### Study Setting

- uMkhanyakude is a HIV hyperendemic, poor, rural area in KwaZulu Natal.
- Antenatal HIV prevalence is 40%. HIV incidence for AGYW (15-24) is >5% per annum

### Local PrEP Efforts

- PrEP was provided to female sex workers (FSWs) through a community organization with funding from the PEPFAR-led DREAMS Partnership from 2016-2018. No other local coordinated efforts to disseminate the drug have been made

## Objectives

Using a mixed methods study nested in a DREAMS programme evaluation in this area, we:

- Estimate the current awareness of PrEP in the general population
- Assess current attitudes to PrEP and sexual/reproductive health services (SRHS) generally among possible gatekeepers
- Identify possible barriers and facilitators to a PrEP rollout to non-FSW, AGYW

## Methods

### Quantitative

- The Africa Health Research Institute (AHRI) has developed the largest population-based HIV incidence cohorts in the world with a surveillance site in the study area
- We added a DREAMS-specific module to demographic surveys of this cohort, allowing us to measure PrEP awareness and uptake at the population level
- Demographic surveillance was conducted from January to November 2017

### Qualitative

- We draw on a purposive sample of 52 potential gatekeepers, spanning the local departments of education and health, DREAMS stakeholders, and non-profit workers facilitating local PrEP provision to FSWs
- In-depth interviews were conducted from May to November 2017
- Interviews addressed beliefs about the HIV epidemic, awareness of PrEP and other HIV prevention tools, and attitudes toward theoretical PrEP provision for AGYW
- Interviews were transcribed, translated from Zulu, and iteratively coded

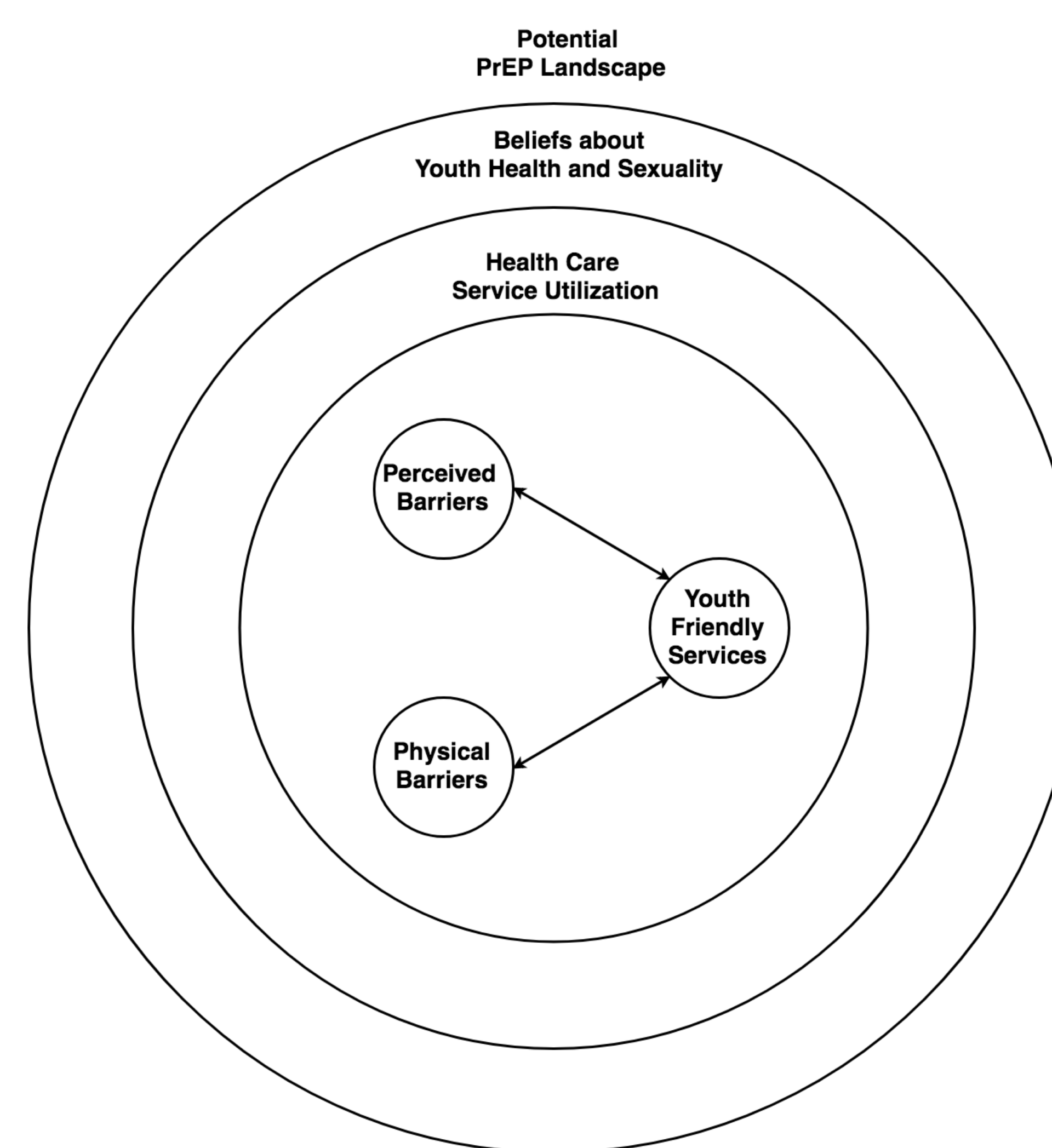
## Results

Characteristics	%	
<b>Gender</b>	Female	<b>73.1</b>
	Male	<b>26.9</b>
<b>Age</b>	Median (Mean, Min-Max)	<b>34 (38.7, 15-100)</b>
<b>Contraceptive Use (Women Only, N= 5527)</b>	Yes (in past 12 months)	39.3
	No (in past 12 months)	59.1

**Table 1: Sample Characteristics (N = 7569)**

	Male	Female	Total
<b>Yes</b>	24	101	126
	<b>1.18%</b>	<b>1.83%</b>	<b>1.66%</b>
<b>No</b>	1,999	5,397	7,402
	<b>98.28%</b>	<b>97.65%</b>	<b>97.79%</b>
<b>Prefer not to answer</b>	11	29	41
	<b>0.54%</b>	<b>0.52%</b>	<b>0.54%</b>

**Table 2: “Have you heard of PrEP?” (N = 7569)**



**Diagram 1: Conceptual Grouping of Emerging Codes**

### Barriers to PrEP Use in AGYW

- Guardianship:** Many interviewed see youth as unable to determine their health needs and see themselves as responsible for making sure youth do the “right” thing
- Health Resource Constraints:** Health care workers (HCWs), especially, see the DoH as lacking the resources to handle a PrEP rollout and believe youth avoid clinics because of delays in service provision
- “Scolding Nurses”:** Many interviewed believe that AGYW avoid seeking SRHS because of fears that they will be shamed by providers

### Facilitators to PrEP Use in AGYW

- Abstract Enthusiasm:** Community leaders saw a need for PrEP, especially among AGYW, and were not aware of current rollouts to FSWs
- Youth Friendly Services Movement:** DoH officials recognize that adolescents perceive clinics as stigmatizing and inefficient and have begun training HCWs to provide fast, tolerant services.
- Peer Support:** PrEP initiation among FSWs benefitted from using former sex workers as frontline recruiters and educators

## Conclusions

- PrEP could be a critical tool for HIV negative AGYW, but **low population awareness** presents a major barrier. The disparate rates of knowledge between potential users and community leaders will likely heighten a **gatekeeping dynamic** during an initial PrEP rollout.
- Community leaders largely approved of PrEP in the abstract but may not be ready to support a rollout to AGYW, especially given that many believed PrEP could make young women more sexually promiscuous, creating a tension between their desires to **protect youth** from HIV and their fear of **unleashing sex and sexuality**.
- Given this tension, it may be helpful to market PrEP using narratives of protection that focus on decreasing HIV rates instead of narratives of female empowerment with a more implicit sexual connotation.
- Further support should be given for establishing **youth friendly services** in clinics. Their existence may help address stated barriers to PrEP and encourage adherence after PrEP initiation.