Impact of HIV-PrEP for female-sex-workers on community-wide awareness, uptake and perceptions in a rural area KwaZulu-Natal, South Africa

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Background

- Despite availability of HIV prevention, young people in South Africa remain at highest risk of HIV acquisition [Chimbindi et al 2018, Baisley et al 2018]

- Pre-exposure prophylaxis (PrEP) was rolled out to female-sex-workers between 2016 and 2018

- We use an HIV-prevention cascade framework to understand how implementation impacted at a population-level, demand for, access to and community members’ attitudes towards PrEP
Study setting

- DREAMS site
- Predominantly rural
- High HIV prevalence ~24% (15-49y)
- High unemployment rates >80%
- Few targeted HIV prevention interventions prior to DREAMS
Study Design

• Mixed-method process evaluation
  • participatory community mapping (2017) & quantitative survey (2017-18)

• Community-mapping of 4 purposively sampled communities (1 semi-urban, 2 rural, 1 deep-rural)
  • Key in-depth interviews with implementing partners (n=33) & young people (n=58)
  • Community based group discussions (n=19)
  • Stakeholder interviews (n=9)

• Enrolled a representative cohort of n=2184 AGYW aged 13-22 years

• Collected data on uptake of HIV prevention, including eligibility, awareness and uptake of PrEP.

• Data collected electronically and self-filled
# Quant findings: Characteristics of nested cohort baseline (N=2184)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N</th>
<th>% (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age group</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13-17</td>
<td>1148</td>
<td>52.6 (50.5-54.7)</td>
</tr>
<tr>
<td>18-22</td>
<td>1036</td>
<td>47.4 (45.3-49.5)</td>
</tr>
<tr>
<td><strong>Location</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>1388</td>
<td>64.1 (62.1-66.1)</td>
</tr>
<tr>
<td>Peri-urban</td>
<td>660</td>
<td>30.5 (28.6-32.5)</td>
</tr>
<tr>
<td>Urban</td>
<td>117</td>
<td>5.4 (4.5-6.4)</td>
</tr>
<tr>
<td><strong>Currently in school (Yes)</strong></td>
<td>1644</td>
<td>75.3 (73.4-77.0)</td>
</tr>
<tr>
<td><strong>Socio-economic status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>727</td>
<td>35.1 (33.0-37.1)</td>
</tr>
<tr>
<td>Middle</td>
<td>747</td>
<td>36.0 (34.0-38.1)</td>
</tr>
<tr>
<td>High</td>
<td>600</td>
<td>28.9 (27.0-30.9)</td>
</tr>
<tr>
<td><strong>Ever migrated in the past years (Yes)</strong></td>
<td>403</td>
<td>18.5 (16.9-20.1)</td>
</tr>
<tr>
<td><strong>Food insecurity (Yes)</strong></td>
<td>682</td>
<td>31.2 (29.3-33.2)</td>
</tr>
</tbody>
</table>
PrEP awareness for AGYW (N=2184)

• PrEP awareness increased from 2.0% (95% CI: 1.5-2.7%) in 2017 to 9.0% (95% CI: 7.3-9.8%) in 2018 ($p<0.001$)

• 965/2184 (44.2%) AGYW reported being sexually active

• 13.4% (95% CI: 11.4-15.7%) AGYW reported transactional sex*

• 10.6% (95% CI: 8.8-12.7%) AGYW reported sex for money*

• *n=194 AGWY were PrEP-eligible
HIV prevention cascade for PREP-eligible AGYW (n=194)

- PrEP-eligible - transactional sex or sex-work: 100%
- Knows HIV status: 85.6%
- PrEP-eligible aware of PrEP: 11.4%
- PrEP-eligible on PrEP: 5.3%
Qual findings: Community and young people’s awareness of PrEP

• Interview respondents were generally unaware of PrEP

• Some young people it was their first time to hear about PrEP and could not attach meaning to it

“I don’t know what it means even in Zulu”

• Most community members were not aware of PrEP, often confusing it with post-exposure prophylaxis (PEP)
Community and young people’s demand/benefit of PrEP

• PrEP was seen as a possible alternative to condoms,
  “eating sweets in a wrapping paper” and
  “killing your babies”

Because
  “…it will be in their system”
Community and young people’s demand/benefit of PrEP

- PrEP was imagined would benefit young people, discordant couples and those with long-distance partners.

- PrEP was thought to be more beneficial to boys or young men who were believed to “love sex more than women.”

“I think it is a good thing because...those who are in relationships with older people who are infected, they can be able to get treatment beside leaving him because of his HIV status.”
Community and young people’s demand/benefit of PrEP

• Teachers and healthcare providers were more ambivalent about PrEP

“Mmm doing that will mean setting them free to engage into unprotected sexual intercourse anyhow”
Conclusion

• PrEP awareness increased and was generally acceptable

• Uptake was low amongst eligible AGYW who reported FSW activity

• Targeted nature of public-sector PrEP may have affected reach and may affect future roll-out of PrEP to the wider population

• Community-based approaches to PrEP education and provision, including engagement of youth and key stakeholders, may help improve demand for, access to, and optimise the PrEP cascade
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• I have no conflict of interest and nothing to disclose

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