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*OPTIONS refers to PrEP as the product category (inclusive of all formulations of ARV-based HIV prevention), and refers to specific products by formulation designation and/or name (e.g. oral PrEP/TDF-FTC, topical PrEP/dapivirine ring, injectable PrEP/cabotegravir, etc.).

BACKGROUND

- HIV prevalence is four times higher among adolescent girls and young women (AGYW) compared to their male counterparts
- Health care providers knowledge, attitudes, and practices (KAP) can determine the success of oral PrEP delivery to AGYW
- We expected providers KAP towards PrEP delivery to target populations with a focus on AGYW

METHODS

- Study Design: Cross-sectional, descriptive, quantitative survey
- Sampling: Health care providers in PrEP facilities
- Data Collection: Purpose – Health care providers in PrEP facilities
- Study Sites: 16 Health facilities across Kenya
- Data Collection and Analysis: Self-administered questionnaire, STATA 15 analysis

RESULTS

Participants Demographics

290 Health providers were enrolled in the study: 40% (n=115) were men and 60% (n=175) women. These included doctors and clinical officers (clinicians), treatment adherence/retention counsellors, nurses, laboratory technicians, and community-based health workers.

Oral PrEP Knowledge

269 Providers reported to be familiar with PrEP and correctly answered most of the PrEP knowledge questions recording a mean score of 88.4% ±10.0%. Only 44% (n=119) of these providers had received some formal PrEP training with the others reporting getting information from non-formal sources such as their friends, colleagues and social media.

Additional training required by those who had received formal training was especially on monitoring and evaluation, clinical monitoring, and the risk of drug resistance among PrEP users.

Oral PrEP Perception

Most providers believed that PrEP should be provided to AGYW although there was a higher preference forYW (n=255, 88%) compared to AG (n=210, 72%). Some providers were however uncertain about providing PrEP to AGYW who have considerably older partners (n=263, 91%), are married (n=256, 88%), or have an STI (n=147, 51%).

RESULTS (continued)

Oral PrEP Attitudes

We assessed oral PrEP attitudes among providers who were familiar with PrEP (n=269):
- More than 60% of the providers agreed/strongly agreed that AGYW should tell their partners if they are using PrEP; 62% (n=167) for AG and 67% (n=181) forYW
- When asked whether they felt that sexually active unmarried AGYW should abstain from sex rather than take PrEP, more respondents agreed/strongly agreed to this statement for AG (n=133, 49%) compared toYW (102, 38%)
- Some providers agreed/strongly agreed that PrEP provision promoted sexual promiscuity for those who were not married especially for AG (n=119, 44%) compared toYW (102, 38%)
- Providers felt that providing PrEP to AGYW would result in negative reactions from the community especially for adolescent girls (n=129, 49% for AG vs. n=96, 36% forYW)

Oral PrEP Service Delivery Experiences

Respondents experienced barriers to PrEP uptake that they reported to be more drug-related (lack of trust in drug effectiveness and side effects) and originating from reactions by people around PrEP users such as their sexual partners and peers or family members. Barriers to giving PrEP to adolescents that were identified included lack of AGYW-friendly environment in the facilities, unwillingness by AGYW to go to the facilities and lack of health providers giving PrEP to adolescents that were identified included lack of AGYW-friendly environment in the facilities, unwillingness by AGYW to go to the facilities and lack of health providers who have received training to work with adolescents.

CONCLUSION

- Health care providers attitudes toward AGYW could potentially hinder PrEP provision - Providers require support on values clarification to address potential attitude-based barriers
- Providers involved in PrEP should receive regular training to improve and refresh their PrEP knowledge; for those involved in PrEP provision to AGYW particular attention should be placed in sensitization on HIV risk factors among AGYW eligible of PrEP
- The next phase of the study will employ qualitative interviews to explore health providers’ experiences with PrEP provision especially in providing support to AGYW PrEP uptake and use.

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