

# FACTORS INFLUENCING INITIATION, CONTINUATION & DISCONTINUATION OF ORAL PREP AT SELECTED FACILITIES IN SOUTH AFRICA: Findings from the ACCESS Study

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Session: PrEP Work in Progress

I HAVE THE RIGHT TO LIVE HIV FREE  
I HAVE THE DUTY TO HELP STOP THE SPREAD OF HIV

THE ONE GENERATION THAT WILL END HIV

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Supported by the Bill & Melinda Gates Foundation

# CONFLICT OF INTEREST



The author and co-authors of this presentation declare that no conflict of interest exists with regards to the development, conduct or analysis of this research



# ACCESS:

Advancing PrEP:  
Comprehensive and  
Combined Operations  
Research of Services for  
Sex workers and men  
who have sex with men

Collaborative  
effort between  
OPTIONS (Wits  
RHI) and  
Prevention Market  
Manager in  
support of NDoH  
PrEP roll-out



HIV Prevention  
Market Manager

Accelerating Product Introduction  
Informing Product Development  
Reducing Time to Impact



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# Study background and site selection

South Africa: June 2016 PrEP Launch for SW and April 2017 for MSM

June 2017 – PrEP available at 16 facilities in 6 Provinces

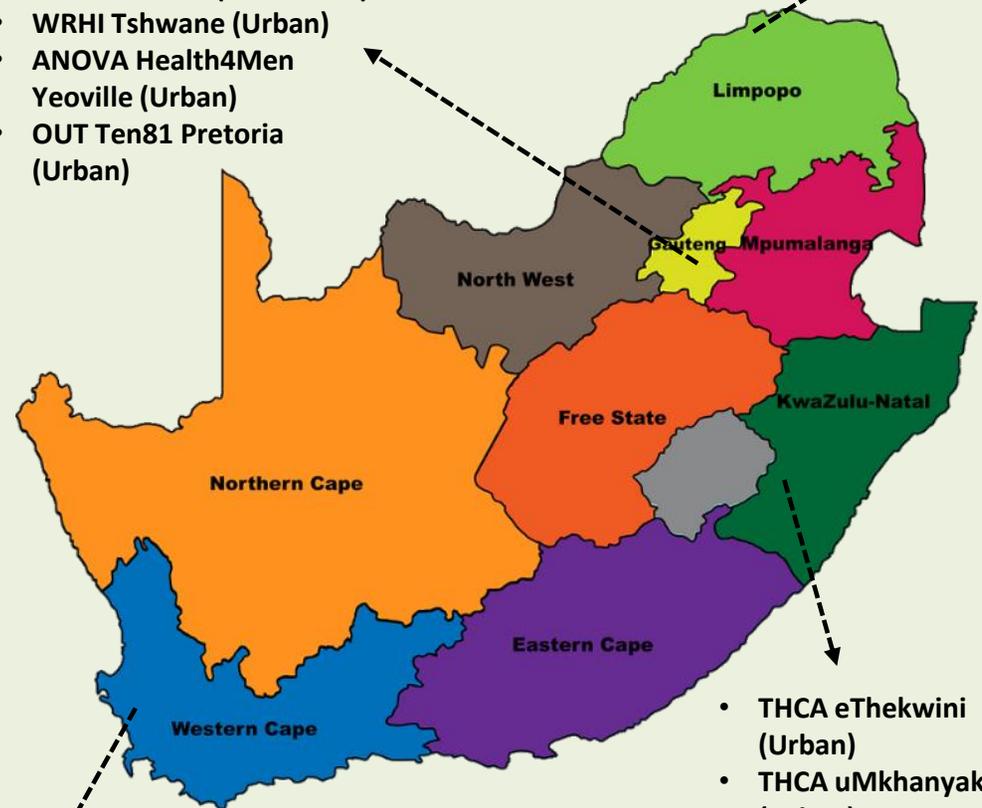
9 facilities selected for operations research

Operations research is needed to learn from national PrEP rollout and improve program implementation

ACCESS was conducted at 9 sites across 4 provinces:

- PHRU Soweto (Peri-urban)
- WRHI Tshwane (Urban)
- ANOVA Health4Men Yeoville (Urban)
- OUT Ten81 Pretoria (Urban)

- NSA Hoedspruit (Rural)
- NSA Musina (Rural)



- ANOVA Health4Men Woodstock (Urban)

- THCA eThekweni (Urban)
- THCA uMkhanyakude (Urban)

# Study Objectives & Methodology

## *Clients*



Examine factors affecting clients' decision to initiate, continue, and/or stop PrEP use

## *Providers & Systems*



Assess service provider knowledge, attitudes, and practiced behaviours around oral PrEP delivery

## *Knowledge Sources*



Examine the effectiveness of oral PrEP marketing and communication mechanisms

Cross-sectional descriptive study

# Client sample selection and size

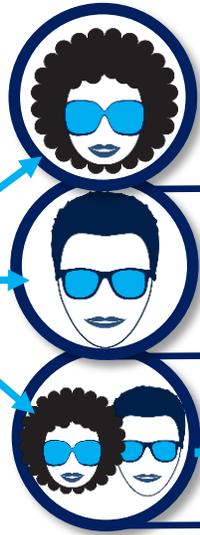


9 SITES

HIV negative individuals accessing services (18 years and above) at fixed or mobile sites

Survey

317 Clients Enrolled  
 After data cleaning  
 299 Effective Sample



156 Female Sex Workers

80 MSM

63 Other

149 Heard of PrEP

77 Heard of PrEP

34 Heard of PrEP

• 57 Current Users  
 • 43 Past Users  
 • 49 Never Users

• 22 Current Users  
 • 31 Past Users  
 • 24 Never Users

• 15 Current Users  
 • 6 Past Users  
 • 13 Never Users

94 Current Users

80 Past Users

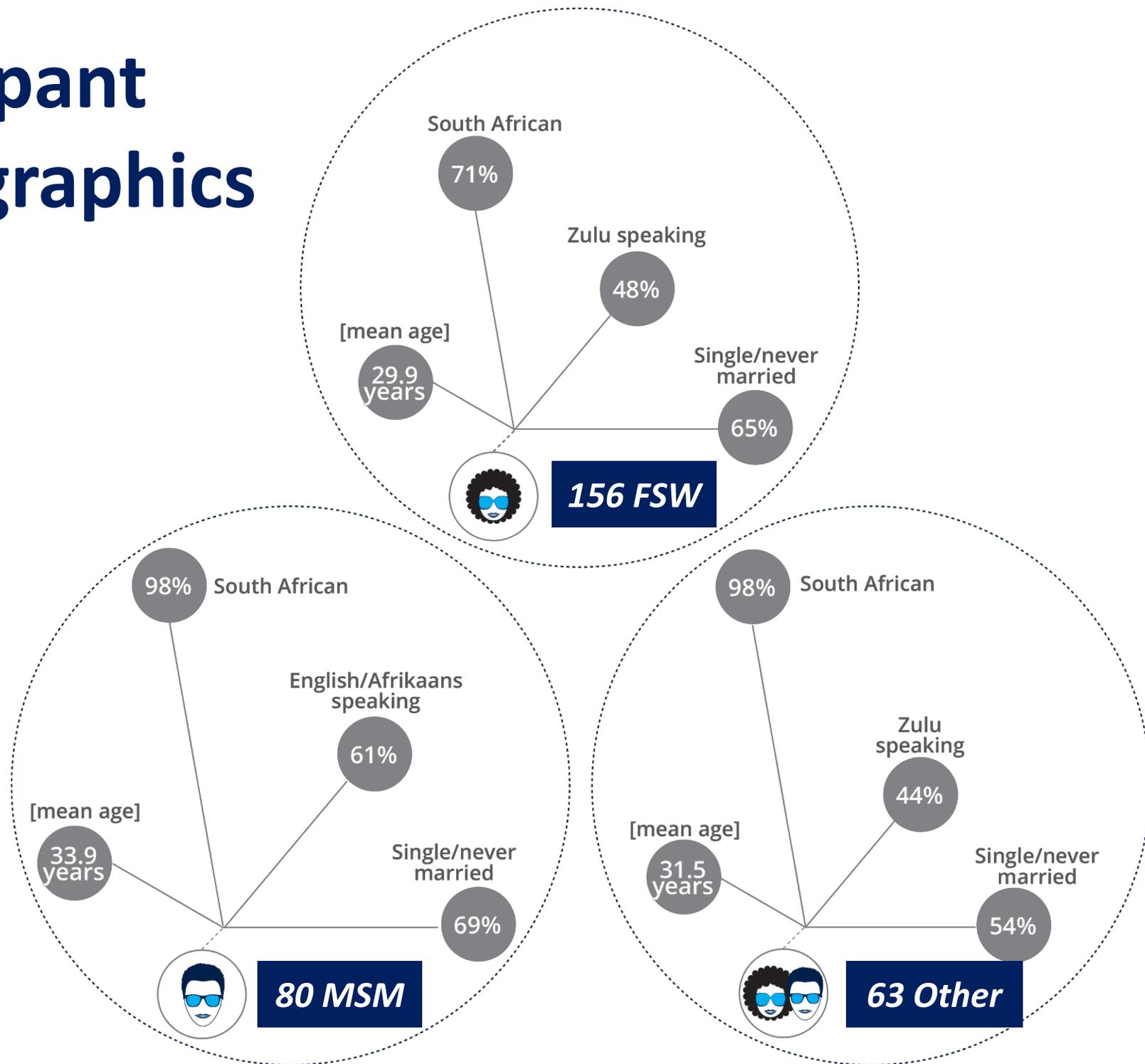
86 Never Users

In-depth Interview

29 Clients Enrolled

- 17 current users
- 3 past users
- 9 never users

# Participant demographics

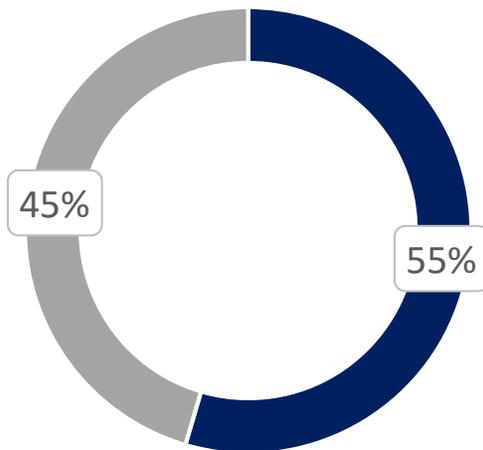


# Missed opportunities to provide PrEP

Clients who have never used PrEP

■ Declined ■ Never Been Offered ■ Starting Today

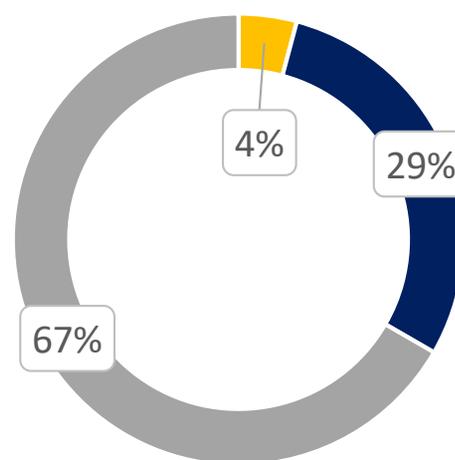
FSW (n=44)



**Reason for decline (n=24):**

- 12 side effects
- 3 Stigma
- 2 Clinic too far
- 1 Family Disapproved
- 1 Monogamous
- 5 Other

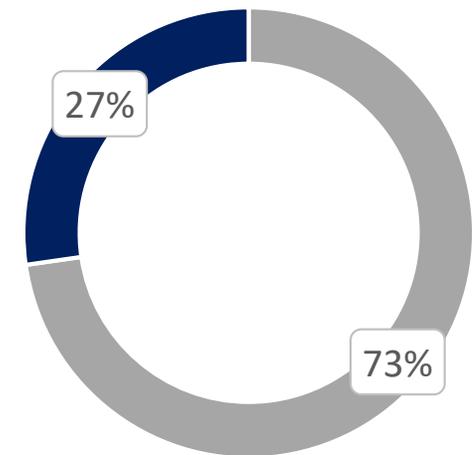
MSM (n= 24)



**Reason for decline (n=7):**

- 2 Side Effects
- 1 Clinic too far,
- 1 Monogamous
- 3 Other

Other (n=11)



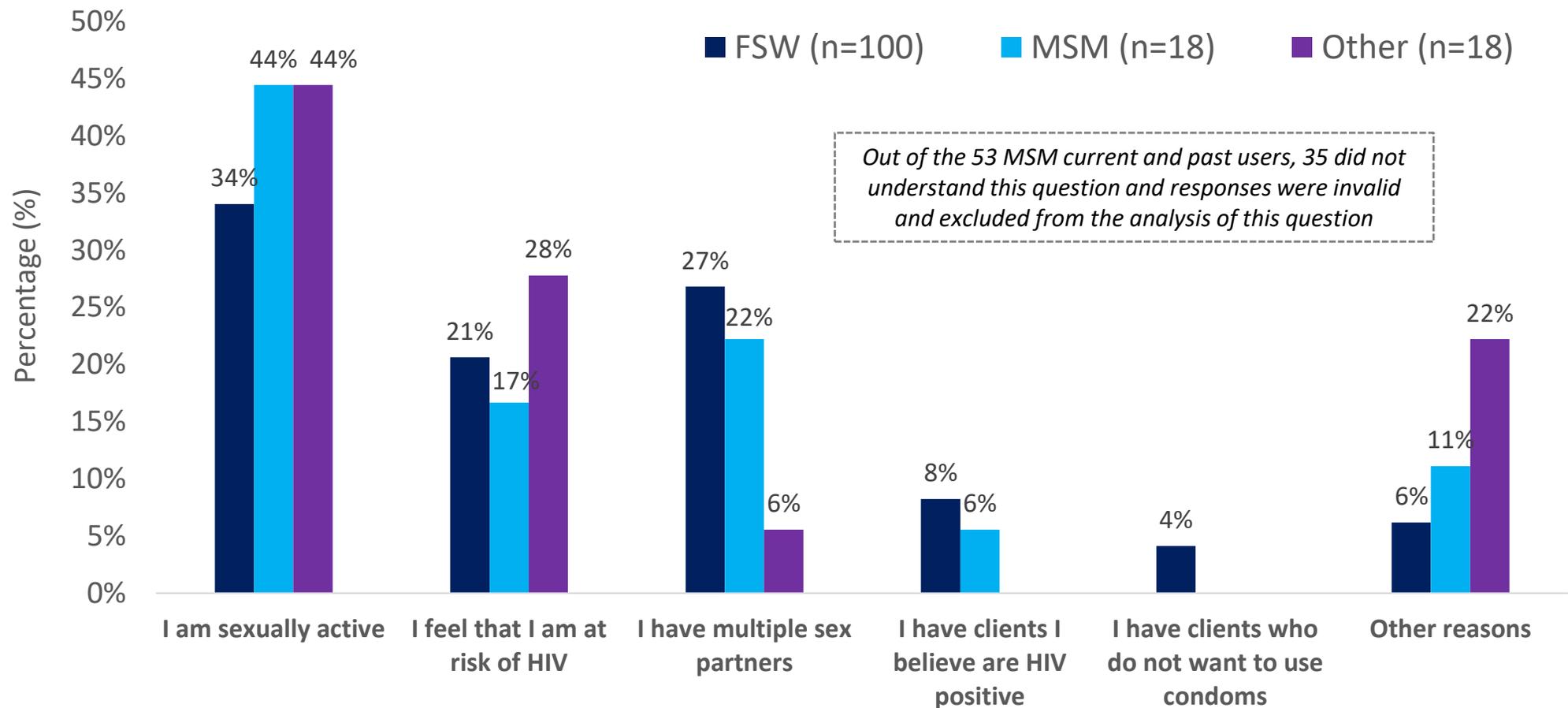
**Reason for decline (n=3):**

- 1 I don't like pills
- 1 I am undecided
- 1 Has one faithful sexual partner

**Missed Opportunity:** Out of 78 clients, 44 (56%) had never been offered PrEP of which 23 (52%) perceived themselves at risk of HIV; 91% (n=21) had tested for HIV

# Sex and Risk: A driver for PrEP uptake

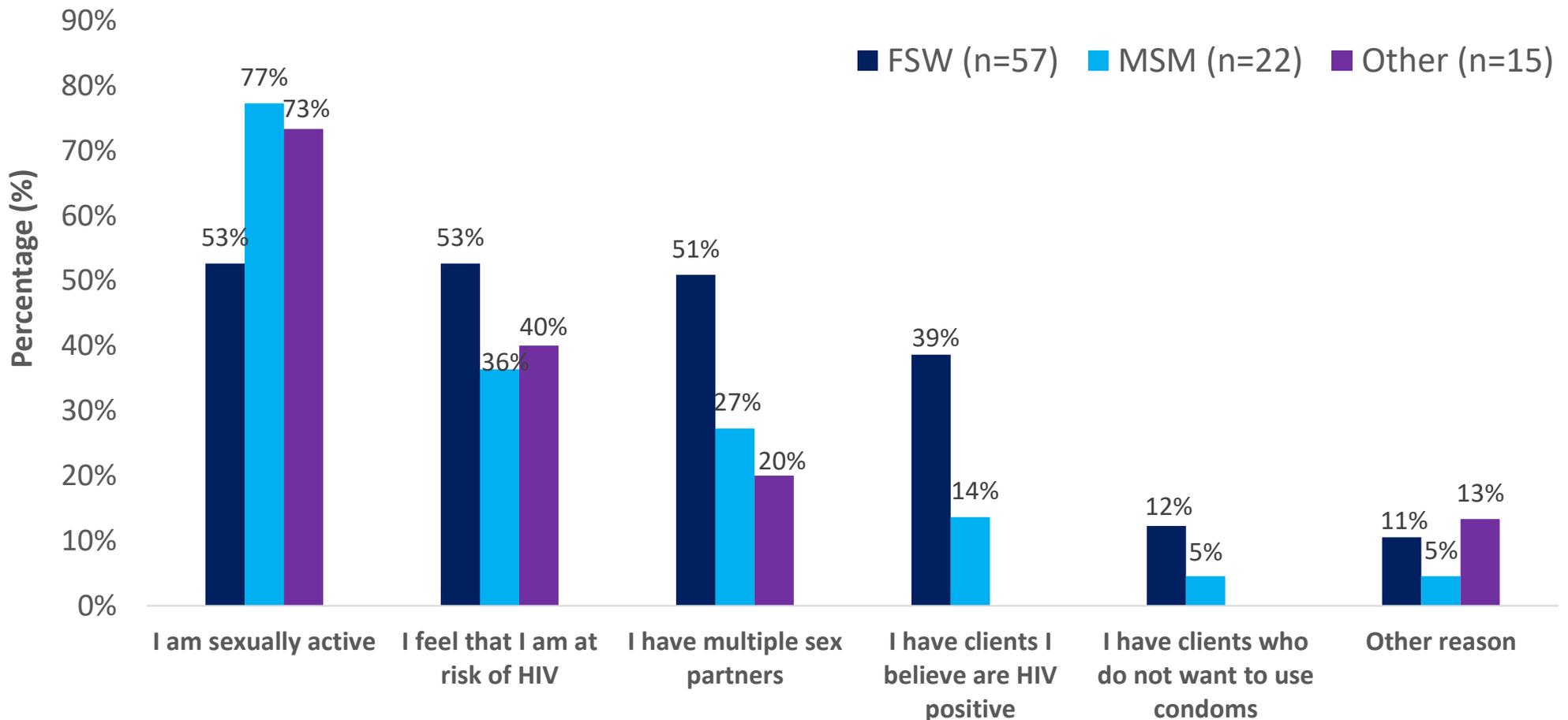
## Reasons for Initiation amongst Current and Past Users of PrEP



**Sex and Risk:** Irrespective of key population type the primary reason for initiating PrEP was being sexually active

# Sex and Risk: A driver to continue on PrEP

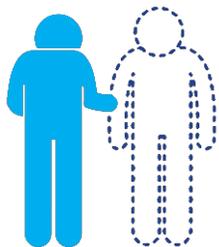
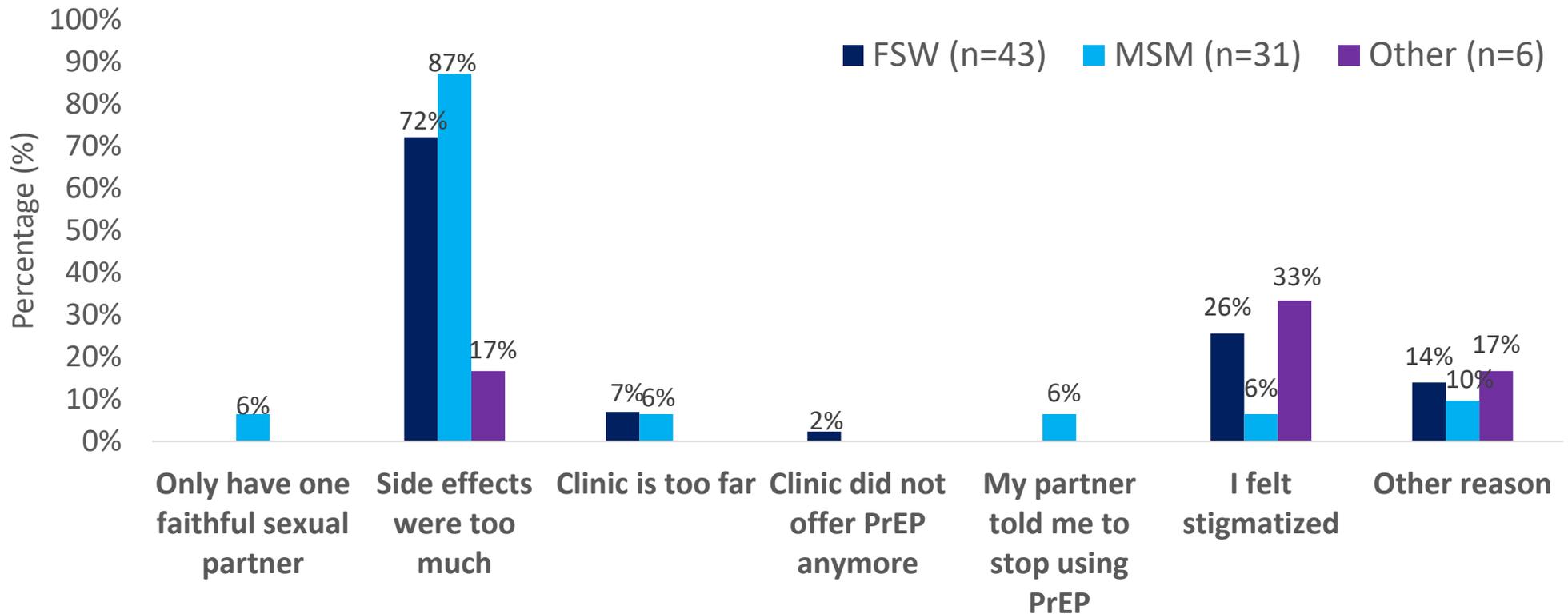
## Reasons for Continuation amongst Current Users of PrEP



**Sex and Risk:** Risk perceived from sexual activity remains as a prominent reason to continue on PrEP, irrespective of key population

# Side Effects: A major reason for stopping PrEP

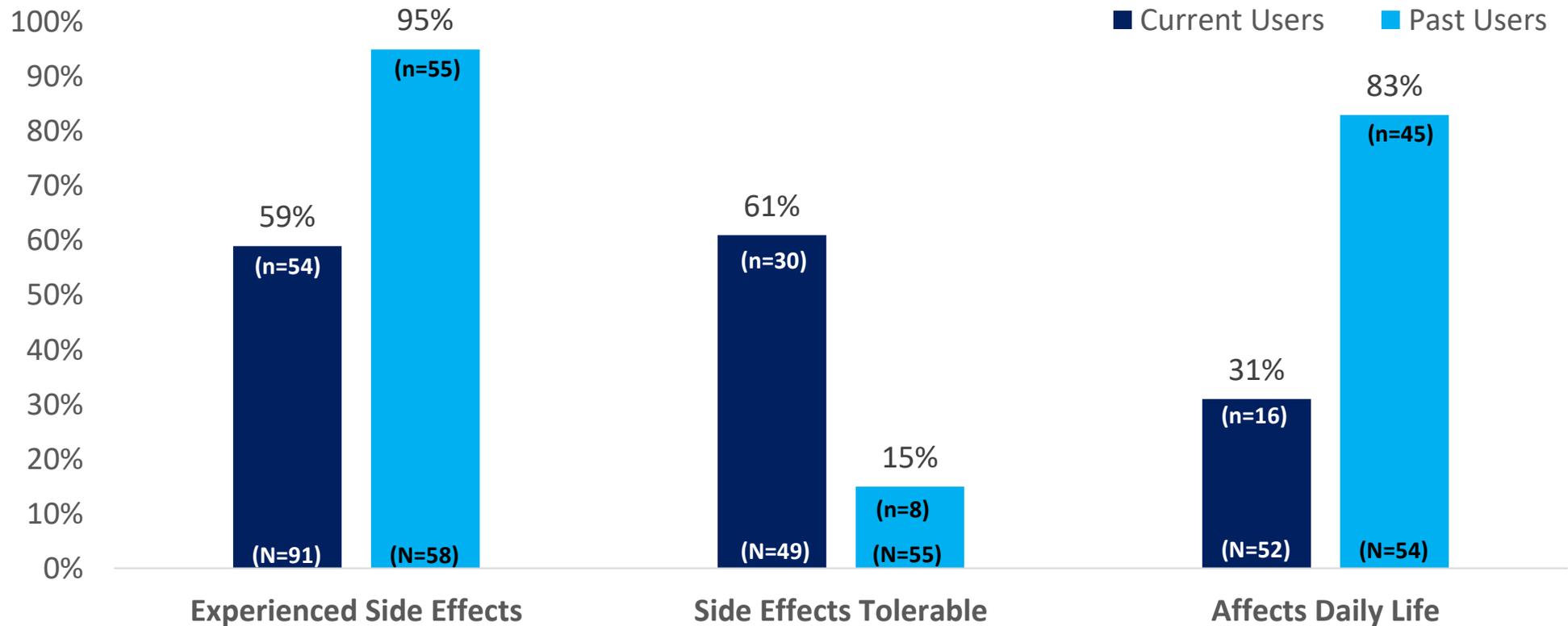
Reasons for Discontinuation of PrEP among Past Users of PrEP



Side effects were primarily identified as **gastro-intestinal upsets, such as nausea and vomiting in FSW, and dizziness, nausea, and headaches in MSM.**

\* Multiple responses allowed

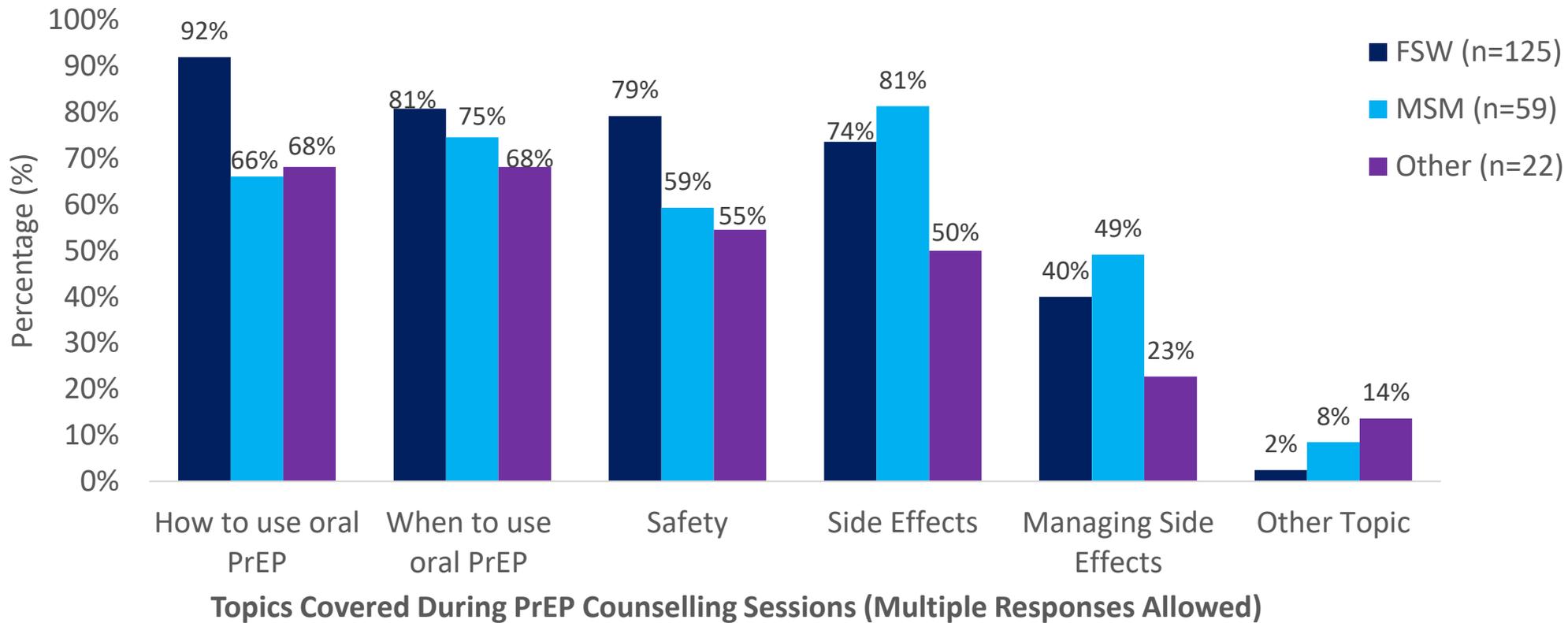
# Side effects affects daily life of past users



**Tolerating Side Effects:** There could be distinct differences between current and past users in the way in which they tolerate side effects

# Management of side effects not well covered in counselling sessions

Client recall of topics covered in counselling with provider



# Summing it all up...



## Missed Opportunities to offer PrEP

- **Lack of uptake** of PrEP in this sample can be attributed to clients not being offered PrEP along with concerns over side effects
- This highlights missed opportunities to offer PrEP to clients who perceive HIV risk



## Knowing your risk drives PrEP initiation & Continuation

- **Initiation** is largely driven by perceiving risk associated with sexual activity



## Side effects influence discontinuation

- Clients who continue on PrEP appear to tolerate side effects differently from those that discontinue
- Counselling appears to cover the possibility of side effects but to a lesser degree the management of side effects

# Where to from here...



## Offering PrEP to those at risk

- Enable providers to identify clients at risk of HIV through client-centred counselling
- In South Africa, revision of clinical and counselling training underway



## Counselling on managing side effects

- Provide **more focused counselling to set expectations for side effects** and equip users with **methods to manage them.**
- Clinical and counselling training revision will stress importance of counselling on both side effects as well as side effect management



## Understanding provider perceptions

- Analyse provider in-depth interview
- Convene workshop with providers

# Acknowledgments

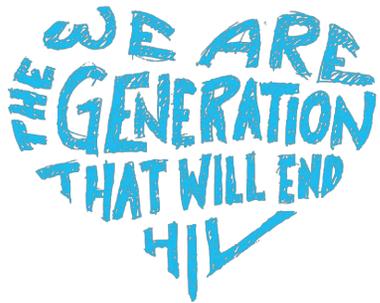
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## OPTIONS Consortium Partners



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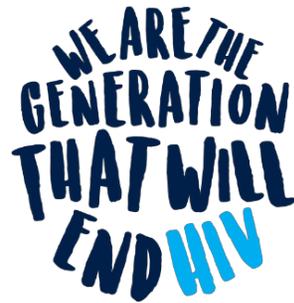
# Thank you for your attention



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THE GENERATION  
THAT WILL END  
HIV



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I HAVE THE DUTY TO HELP STOP THE SPREAD OF HIV



WE ARE THE  
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THINA  
SIYISIZUKULWANE  
ESIZOQEDA  
I-HIV



NGINELUNGELO LOKUPHILA NGAPHANDLE KWE-KWE-HIV  
KUNGUMSEBENZI WAM UKULEKELEKI EKUNOANWENT NOKUBHEBHEKHA

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