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Background

Oral pre-exposure prophylaxis (PrEP) efficacy in preventing HIV is well established. However, adhering to a daily regimen can be challenging, especially for adolescent girls and young women (AGYW) in Africa. With PrEP scale-up ongoing, it is important to understand AGYW's motivations and lived experiences in the uptake and use of PrEP.

Methods

In-depth interviews were conducted with a purposive sample of **91 AGYW** (ages 16-25) in the POWER implementation project offering PrEP from adolescent-friendly, mobile, and family planning clinics, in Johannesburg and Cape Town, South Africa and Kisumu, Kenya. Rapid analysis explored AGYW's PrEP-user journey.

Finding

- AGYW who initiated PrEP early in study displayed high awareness of HIV vulnerability.
- · Community stigma and PrEP misconceptions influenced uptake and early use.
- Disclosure to family and/or partners occurred early for AGYW who persisted with PrEP.
- Unplanned PrEP pauses occurred due to PrEP access problems. Planned PrEP pauses occurred during periods of no sexual activity.
- · Many AGYW who had PrEP interruptions restarted PrEP.
- · PrEP discontinuation was often due to perceived side effects and low social support.

PrEP & Integrating PrEP contraception into lifestyle: Planned Pause integrated services Prevention-Selective reminders and during periods effective adherence Awareness of disclosure and of no sexual adherence HIV vulnerability practice social support activity support Early Use Adherence Uptake (0-3)**PrEP Pause** Restart (>3 months) months) Delayed Uptake and Early PrEP use Side effects, low social Unplanned challenges due to PrEP misconceptions support, PrEP access barriers Pause due to and stigma and AGYW prioritizing PrEP access Discontinuation family and/or partners social approval of problems



PrEP use

Conclusion

AGYW in South Africa and Kenya recognize their HIV vulnerabilities and the benefits of PrEP, however implementing use is impacted by their social relationships and circumstances. Tailored flexible interventions are needed to address young women's diverse PrEP motivations, social contexts and understandings of prevention-effective adherence.