





Adolescent girls' PrEP uptake from a community-based mobile clinic: early lessons from the POWER demonstration project

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Importance of PrEP for Young Women



- Adolescent girls and young women experience 1000 new HIV infections every day
- World Health Organization (2015) recommends PrEP offered to all populations at 'substantial risk' of HIV infection
- PrEP delivery in larger-scale 'real-world' settings, especially in African AGYW, are not yet well described





Recommendation



Oral PrEP containing TDF should be offered as an additional prevention choice for people at substantial risk of HIV infection as part of combination HIV prevention approaches (strong recommendation, high-quality evidence).









Prevention Options for Women Evaluation Research





Develop cost-effective and scalable models for implementation of ARVbased HIV prevention products for young women in Cape Town and Johannesburg (South Africa) and Kisumu (Kenya).

Consortium Partners













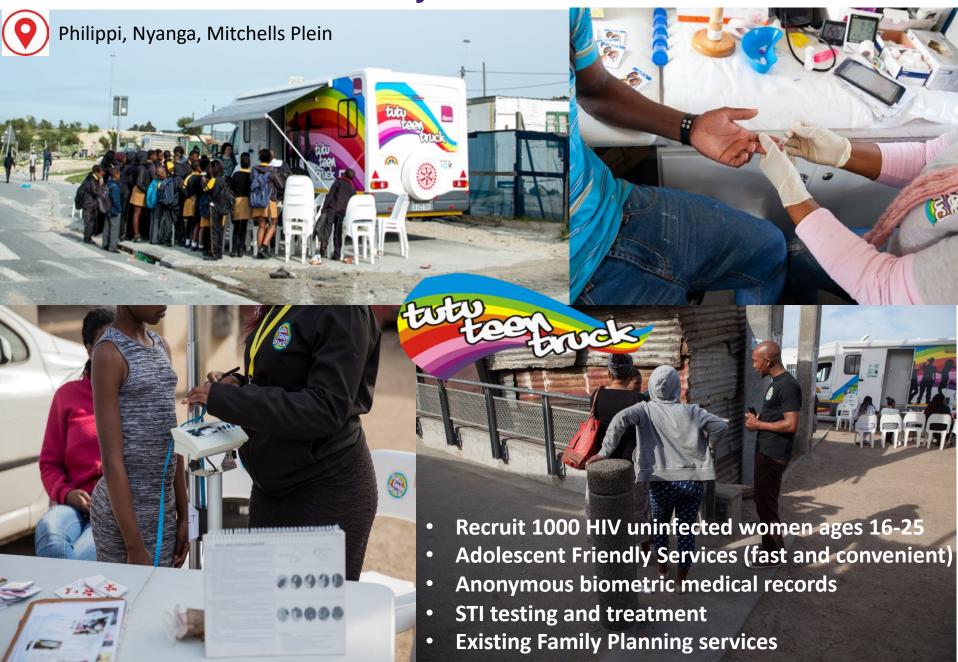








PrEP delivery from mobile clinic



PrEP uptake

952 eligible young women 27% total initiated PrEP same day

270 enrolled on POWER (95% initiated PrEP

June 2017 – July 2018 Heterosexual, sex in past 3 month 66% between 18-22 years

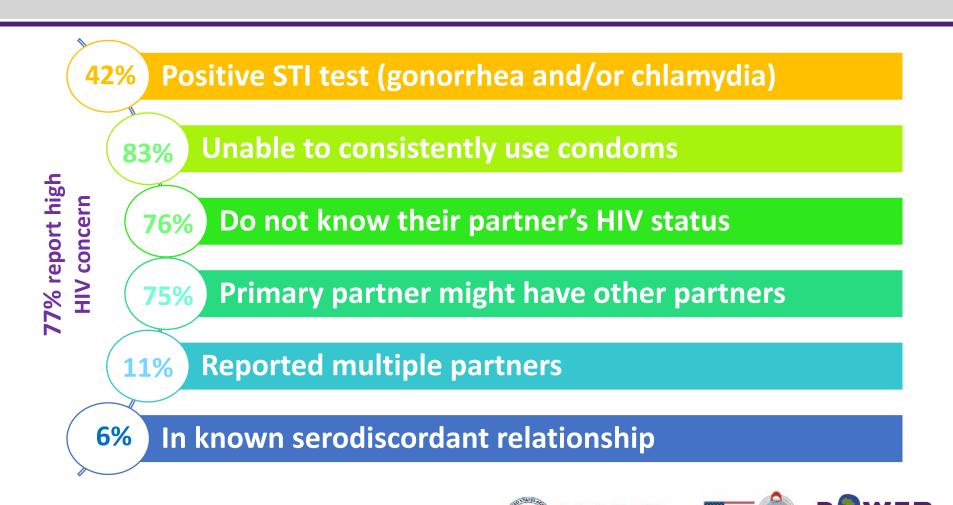








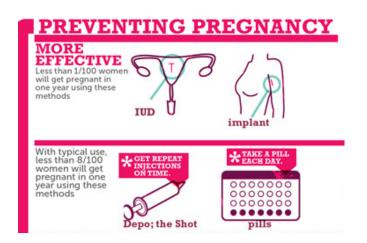
POWER Cohort characterized



Early outcomes

- 41% came for PrEP refills at month 1 follow-up
- 18% of young women who stopped PrEP resumed within 3 months





- 33% were on contraception at enrollment
- additional 32% started contraception with PrEP







Conclusion

- PrEP uptake was associated with high HIV risk
- PrEP initiation was associated with contraception uptake and continuation, supporting integration of PrEP delivery within sexual and reproductive health services.
- PrEP delivery to adolescent girls and young women through a mobile clinic is feasible
- Additional research is needed to understand PrEP persistence and effective support strategies for adolescent girls and young women







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