



**USAID**  
FROM THE AMERICAN PEOPLE

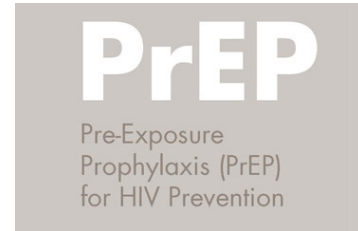


# Early Persistence of HIV Pre-exposure Prophylaxis (PrEP) in African Adolescent Girls and Young Women (AGYW) from Kenya and South Africa

Elzette Rousseau-Jemwa, Linda-Gail Bekker, Elizabeth Bukusi, Sinead Delaney-Moretlwe, Victor Omollo, Danielle Travill, Jennifer Morton, Lara Kidoguchi, Ariane van der Straten, Gabrielle O'Malley, Sarah Roberts, Jessica E Haberer, Rachel Johnson, Connie Celum, Jared Baeten, *for the POWER team.*

# Young Women and PrEP

- Adolescent girls and young women (AGYW) experience 1000 new HIV infections every day
- PrEP allows users to take control of their own health without dependence on sexual partners for HIV prevention
- Oral PrEP delivery in larger-scale ‘real-world’ settings, especially in African AGYW, are not yet well described
- Understanding AGYW patterns of use is critical for scale up of PrEP programmes



## Recommendation

NEW

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*).



**USAID**  
FROM THE AMERICAN PEOPLE



**Objective**

**Where We Work**



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

**Consortium Partners**



UNIVERSITY OF WASHINGTON  
INTERNATIONAL CLINICAL RESEARCH CENTER



DESMOND TUTU  
HIV FOUNDATION



University of Witwatersrand  
WITS RHI



**USAID**  
FROM THE AMERICAN PEOPLE



- HIV negative women
- Ages 16-25 yrs
- Sex in last 3 months
- Up to 3000 YW

# POWER Prevention Options for Women

## PrEP Delivery

### Understanding who takes PrEP:

- Characterize those who initiate vs those who do not
- **Determine persistence, adherence, patterns of use**
- Assess HIV incidence and drug resistance

### Evaluation of PrEP Delivery:

- Test PrEP delivery in a variety of models in various locations
- Assess cost and cost effectiveness

Cape Town:  
Mobile delivery  
services



Johannesburg:  
Youth-friendly clinics

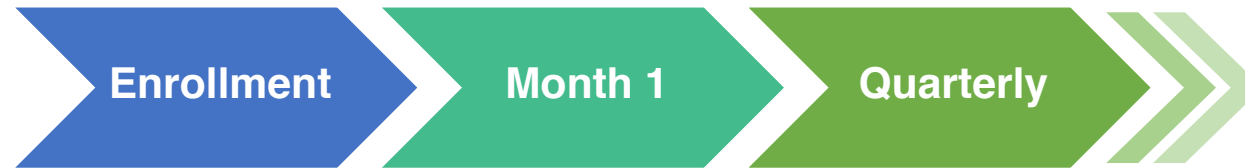


Kisumu:  
Family planning clinics –  
private & public



# POWER and Persistence

- **Visit schedule**



Flexibility in schedule e.g. integrate with family planning schedule

- **Objective:** To determine the persistence and patterns of oral PrEP use in African young women

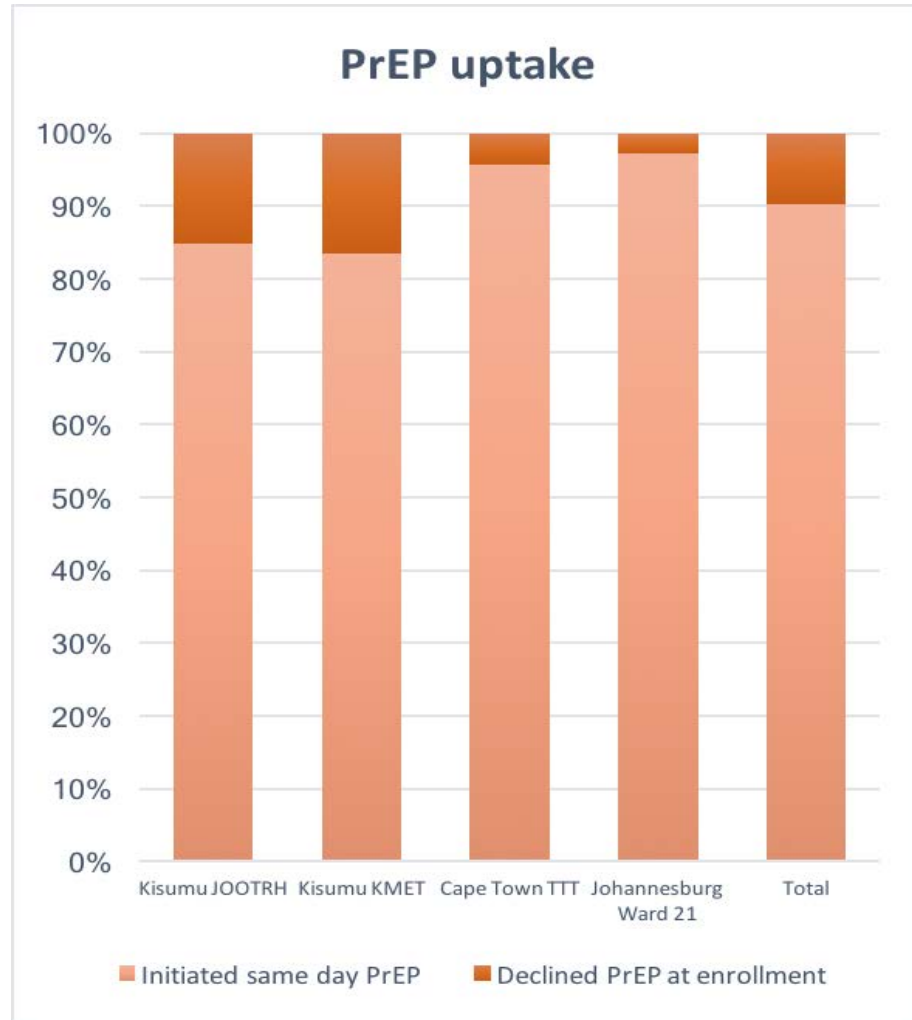
- Persistence is calculated based on pharmacy records.
- Persistence is defined as uninterrupted PrEP use, based on PrEP dispensing at months with a visit or having previously dispensed supply of >30 days of PrEP at months without a visit.



**USAID**  
FROM THE AMERICAN PEOPLE



# Results: Oral PrEP Uptake



- Between June 2017 – August 2018, 1049 adolescent girls and young women enrolled in POWER
- High uptake across sites
- **89%** initiated PrEP on the same day

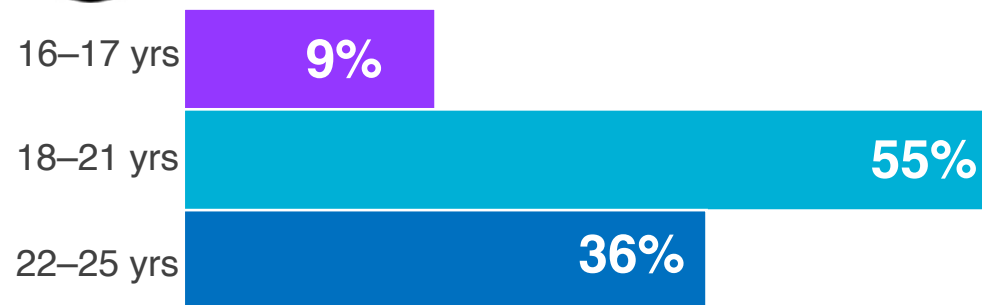


**USAID**  
FROM THE AMERICAN PEOPLE



# Results: Participant Demographics

## AGE YW Age



## Marital Status

81% single,  
with partner

16%  
married

2% single,  
no partner

## Lives with

25%  
other family

42%  
parent

19%  
sex partner

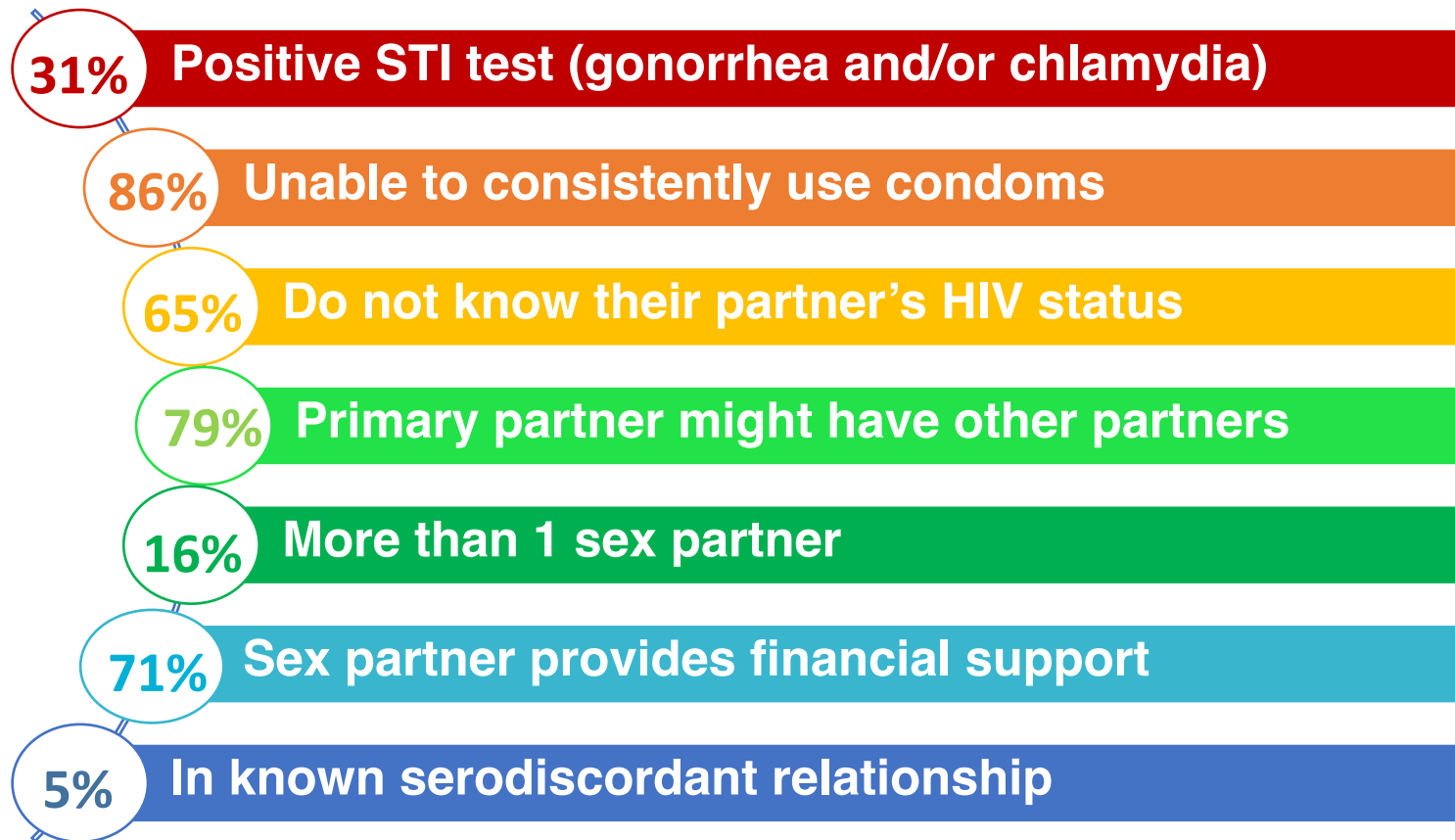


**USAID**  
FROM THE AMERICAN PEOPLE



# Results: Participant Behavioural Data

[June 2017 – Aug 2018; N = 1049]



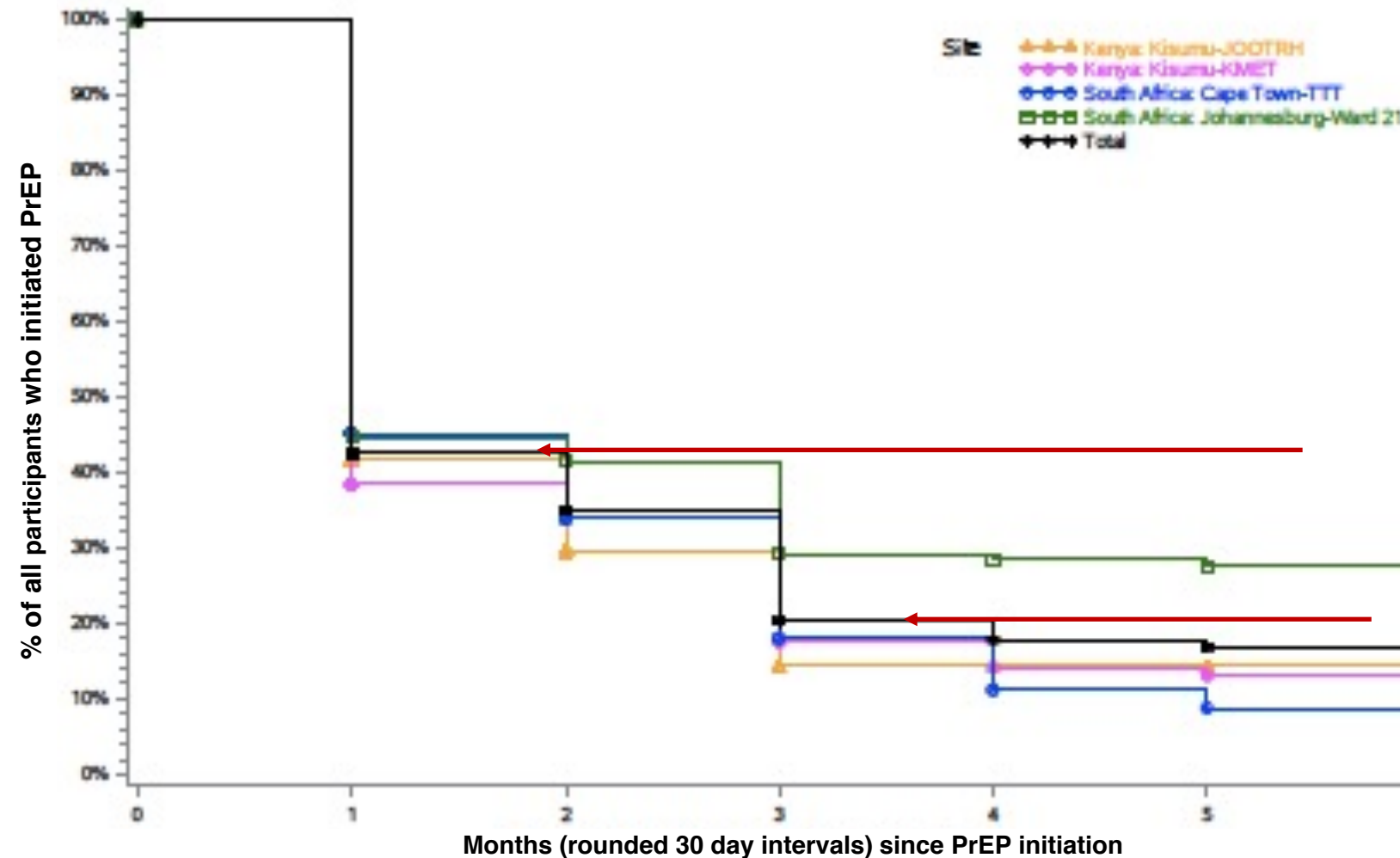
**USAID**  
FROM THE AMERICAN PEOPLE





# PrEP persistence among all participants who initiated PrEP

PrEP persistence among all participants who initiated PrEP, by site

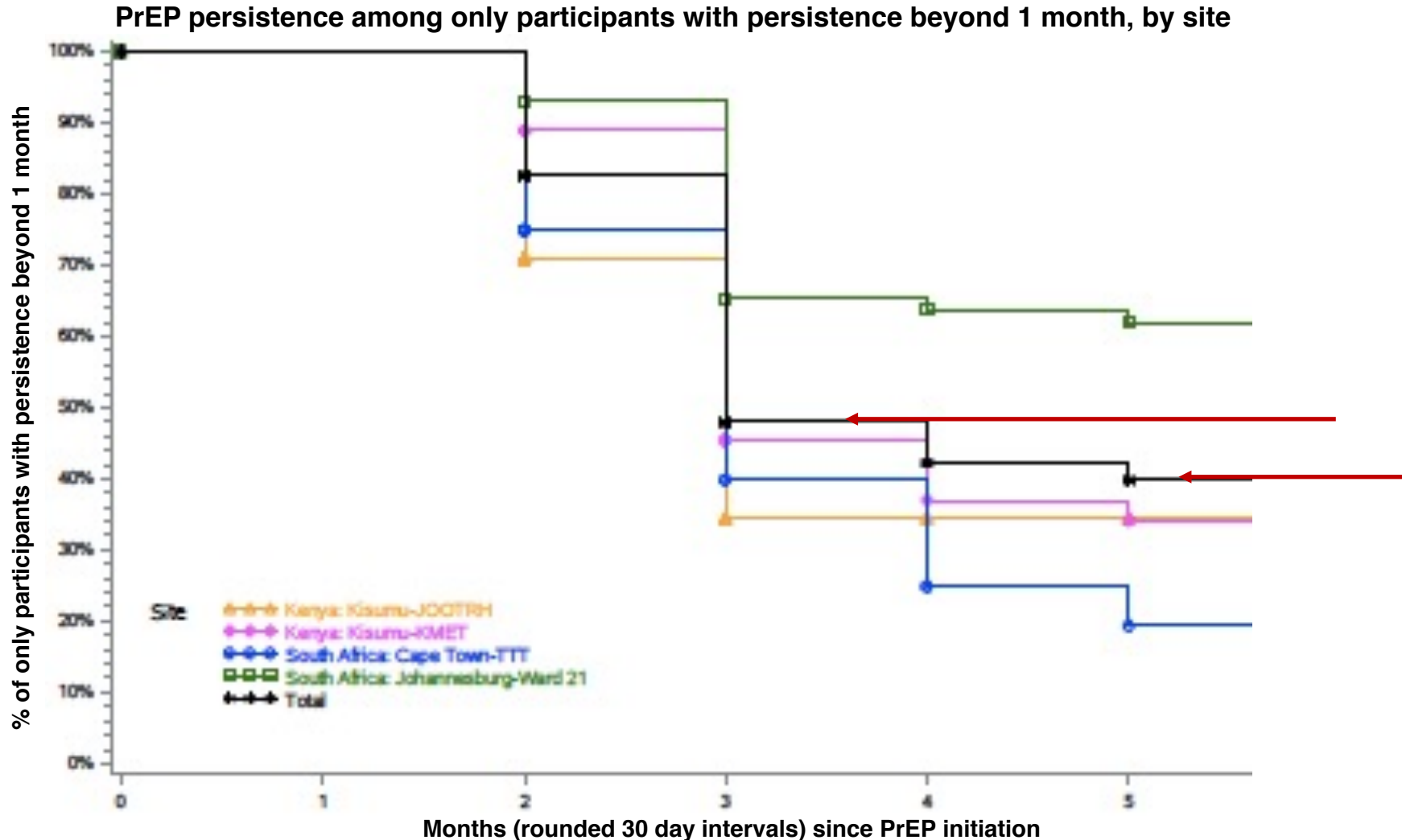


**Considerable drop-off in first month of PrEP initiation**

**43% persistence at month 1**

**20% persistence at month 3**

# PrEP persistence among only participants beyond 1 month

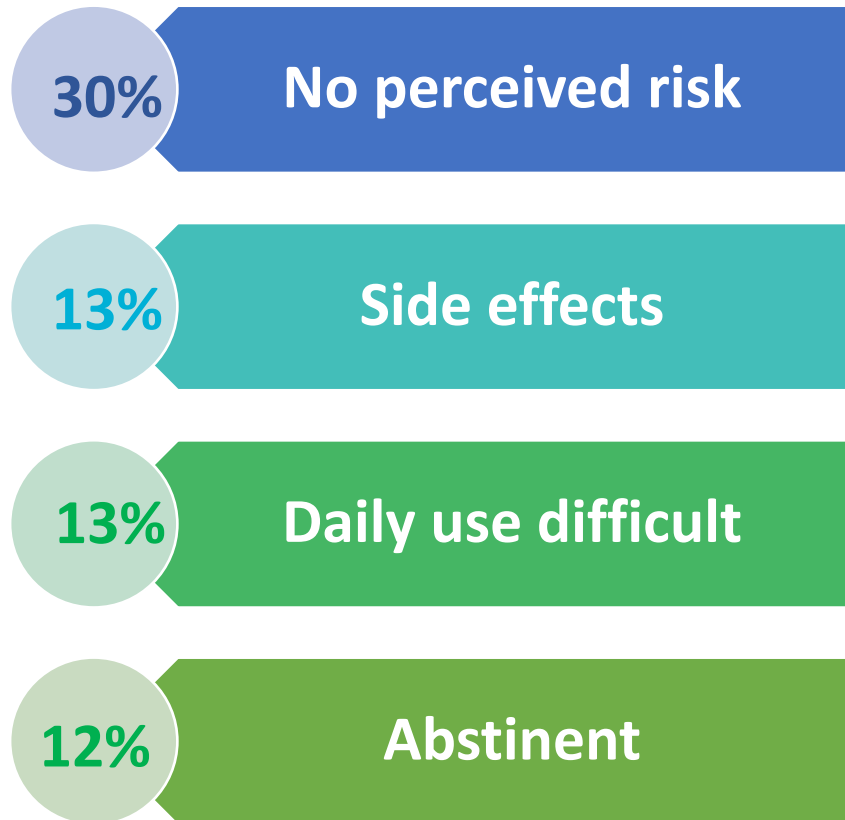


**Persistence better in participants taking PrEP beyond month 1**

**48% persistence at month 3**

**40% persistence at month 5**

# Reasons for declining PrEP at follow-up visits



## Other

- Stigma – do not want others to know
- Partner upset/rejects PrEP use
- Prefers condoms
- Pill burden / size of pill
- Parents disagree with PrEP use
- Stopped due to pregnancy
- Taking a break



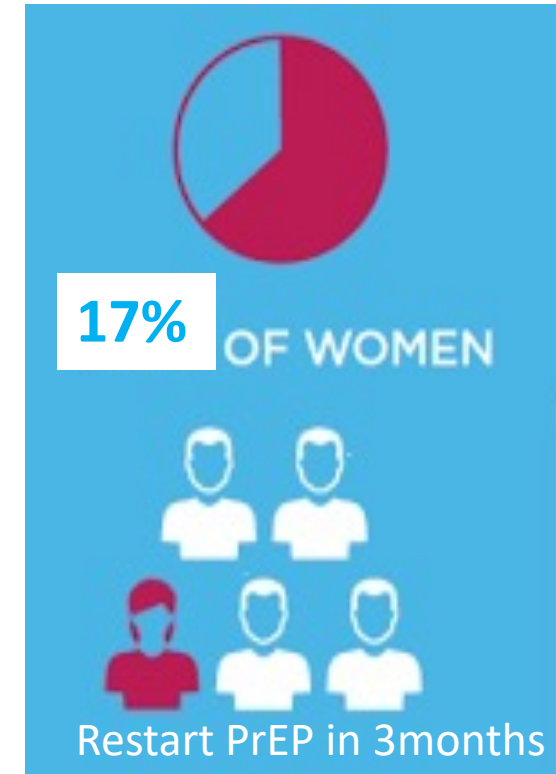
**USAID**  
FROM THE AMERICAN PEOPLE



# Persistence: patterns of PrEP use

## PrEP restarts after first persistence failure

Country	Site	N (%) who restarted within 3 months (~90 days)
Kenya	Kisumu - JOOTRH	12/114 (11%)
	Kisumu - KMET	20/109 (18%)
South Africa	Cape Town - TTT	23/130 (18%)
	Johannesburg - Ward 21	26/118 (22%)
<b>Total</b>		<b>81/471 (17%)</b>



**USAID**  
FROM THE AMERICAN PEOPLE



# Key Findings

- ❖ About half of those starting PrEP discontinued within 1 month
- ❖ Persistence better in young women taking PrEP beyond month 1
- ❖ About 1 in 5 young women restarted PrEP within 3 months



**USAID**  
FROM THE AMERICAN PEOPLE



# Conclusion

- ❖ Routine measures of persistence, such as those for ART challenging to apply to PrEP – continued development of better measures needed to fully comprehend persistence
- ❖ How well PrEP persistence aligns with the need or desire for PrEP unclear and enhanced counseling on prevention-effective adherence may be needed
- ❖ Further research into reasons for oral PrEP discontinuation and resumption is needed for AGYW populations



**USAID**  
FROM THE AMERICAN PEOPLE



# Acknowledgements

## Participants and communities Site study teams

The POWER Project is funded by USAID, made possible by PEPFAR, under Cooperative Agreement AID-OAA-A-15-0034.

