

Platforms, processes and perceptions of PrEP delivery through DREAMS in a rural setting in KwaZulu-Natal, South Africa



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1. Background

- Adolescent girls and young women (AGYW) remain at high HIV risk in sub-Saharan Africa (SSA).
- New biomedical HIV prevention interventions including antiretrovirals (ART)-based have the potential to be game-changers.
- Pre-exposure prophylaxis (PrEP) is being rolled-out since 2016 to young female sex workers (FSW) in rural KwaZulu-Natal (KZN), South Africa as part of PEPFAR DREAMS combination prevention roll out.
- PrEP has a potential to be a gamechanger if taken.
- To date, engaging young women has been a challenge and so understanding the real life scale-up in a rural, deprived and hyper-endemic setting such as ours will provide lessons for the future roll out.**

2. Methods

Study site

- Africa Health Research Institute (AHRI) is situated in uMkhanyakude district, KZN, SA
- Site is mostly rural and poor, with high unemployment (67% of those aged >20 unemployed) and an antenatal HIV prevalence of 40%.
- District was selected for DREAMS investment, with few targeted HIV prevention interventions for adolescents and youth prior to DREAMS

Data collection

- Mixed-method process-evaluation approach and conducted participatory community-mapping and quantitative survey of a population-representative sample of (n=2184) AGYW aged 13-22 in 2017-8 in AHRI surveillance area
- Conducted a rapid ethnographic landscaping of four areas (1 semi-urban, 2 rural and 1 deep-rural) to purposively recruit participants:
 - Key informant interviews including DREAMS implementing partners (n=33),
 - Community based group discussions (n=17) and (n=2) natural group discussions,
 - Structured observation data to understand the context and processes through which PrEP is delivered (n=2),
 - In-depth interviews with adolescents and young people (n=58) and stakeholder interviews with local and district municipality, government departments including health and social development (n=9).
- All interviews were recorded, transcribed and analysed using thematic content analysis using Nvivo v12

3. Findings

PrEP delivery in uMkhanyakude

- PrEP is a new HIV prevention method in the area
 - no previous sex worker programme in the district
 - not yet available in the primary care clinics and to the general population
- Program targeted young FSW aged 18-24 years through DREAMS
- Program reached approximately 60 FSW in the district with PrEP
- Peer educators (former and current sex workers) visit 'hot spots' for recruitment
- Mobile unit is used to reach clients and offer counselling and treatment
- Counsellors offer comprehensive counselling, health education and,
- Referral to a professional nurse for assessment, screening and treatment of STIs and TB, offer condoms, contraception and PrEP or initiate on ART if HIV+
- Follow-up blood tests are done regularly

Challenges and Opportunities of PrEP delivery in uMkhanyakude

Challenges	Opportunities
<ul style="list-style-type: none"> Initial reception of programme was difficult – FSW associated stigma 	<ul style="list-style-type: none"> Continuous lobbying for buy-in and mobilization, and multisectoral approach helped buy-in
<ul style="list-style-type: none"> FSW difficult to trace, follow-up and link to care, they are highly-mobile and constantly change their identity 	<ul style="list-style-type: none"> Use of mobile services to reach FSW Use of former and current sex workers for recruitment and follow-up, "they understand the language"
<ul style="list-style-type: none"> FSW feeling of wellness and fatalism "why are you bothered with me because I am not sick?... Just leave me alone I will take treatment when I get HIV" 	<ul style="list-style-type: none"> No reports of serious side effects – minor stomach-ache Trust and relationship built with peer educators encourage adherence

General population AGYW PrEP awareness & uptake (n=2184)

- PrEP awareness & uptake is low in AGYW
 - 2% (44/2184) knew about PrEP
- 39% (861/2184) of AGYW reported ever having sex
- Only 1/861 AGYW who reported having sex used PrEP
- 7.5% (65/861) reported involvement in transactional-sex, which 2/65 (4.6%) were aware of PrEP
- 6% (52/861) self-reported sex-work, which 2/52 (3.9%) were aware of PrEP

Community, young people and providers' perceptions, misinformation and fears towards PrEP

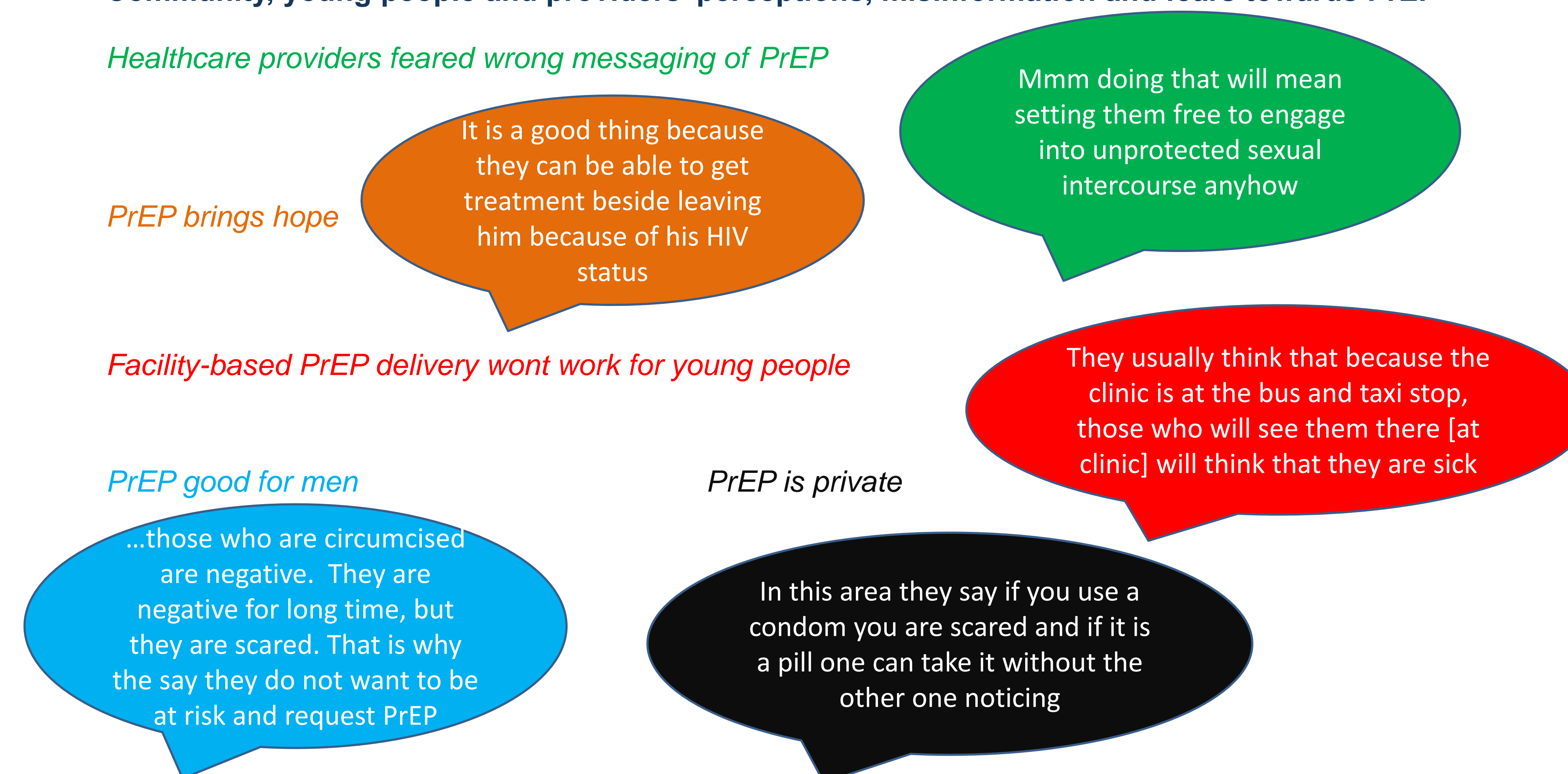
Healthcare providers feared wrong messaging of PrEP

PrEP brings hope

Facility-based PrEP delivery wont work for young people

PrEP good for men

PrEP is private



4. Conclusion

- Targeting of FSW and unavailability of PrEP in the public-sector contributed to early challenges in setting-up the programme in this rural setting.
- Awareness and uptake of PrEP is low, even amongst self-identifying sex-workers.
- Population-based approaches to PrEP-delivery and buy-in from key-stakeholders is key to successful roll-out and correcting messaging or perceptions associated with PrEP