

Acceptability of broadly neutralizing antibodies (bNAbs) for HIV prevention: A qualitative investigation among Adolescent Girls and Young Women (AGYW) in India

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BACKGROUND

Broadly neutralizing monoclonal antibodies (bNAbs) have fuelled optimism for a new HIV prevention product. We conducted a qualitative study among a vulnerable and potential end-user population – adolescent girls and young women (AGYW) – to understand their preferences for product attributes and contextual/behavioral factors that might influence the uptake of bNAbs.

RESULTS

Participants' (n=46) mean age was 21 years; the majority had completed higher-secondary education, and two-thirds were single. None had heard of bNAbs prior to this study; however, once explained, many expressed interest in using it. While most AGYW considered bNAbs as appropriate for sex workers, they also felt it could benefit at-risk AGYW from contracting HIV.

Preferred attributes of bNAbs: Key preferred product attributes included high efficacy (>90%), low cost, no side-effects and quarterly administration of intramuscular injections (on the arm) preferably by a healthcare provider. Most preferred government hospitals for administration of bNAbs due to trust in their services and it would be free there. However, given the restrictions on mobility of AGYW, some preferred obtaining bNAbs from nearby NGOs and clinics.

Concerns about using bNAbs: Some AGYW expressed concerns about administering bNAbs injection during pregnancy and early infancy, fearing that it could harm the fetus and infant. Most single women feared that their character would be questioned for seeking HIV prevention products. To avoid negative consequences, most single AGYW opined that they would not disclose their decision to take bNAbs to their family/partners. However, married women wanted to inform their husbands to avoid relationship discord and "encourage them to take it also." (FGD-1, Mumbai)

CONCLUSIONS

To facilitate uptake of bNAbs among AGYW, as part of combination HIV prevention, it is essential to provide comprehensive and accurate information about efficacy, safety (especially for fetus/infants), and mode and site of administration. At the social-structural level, engagement with the families of AGYW and communities is essential to challenge existing social norms on women's sexual life and reduce HIV-related stigma, which in turn can facilitate uptake of bNAbs among at-risk AGYW.

METHODS

In 2021, an exploratory qualitative study (6 focus groups and 9 in-depth interviews) was conducted among AGYW in three Indian metro cities. Data were explored using framework analysis, guided by the Theoretical Framework of Acceptability.

Table 1: Illustrative quotations

Delivery site: Reason for preferring a government hospital to receive bNAbs

"It should only be through the Government, because the government's medicine comes with a 'stamp' on it..." (FGD-2, Delhi)

Cost: Affordability as a concern

"To be affordable for everyone, it should be 100 Rupees" (FGD-2, Chennai)

Efficacy: High expectations?

"There is always a chance of 1% failure, but it must be 99% effective." (FGD-2, Mumbai)

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