

BACKGROUND

Adolescent girls and young women (AGYW) in sub-Saharan Africa are disproportionately affected by HIV, but daily oral PrEP use remains a significant challenge for AGYW.

The aim of this analysis was to explore motivations for starting, stopping and restarting oral PrEP in South African and Zimbabwean adolescent girls and young women.

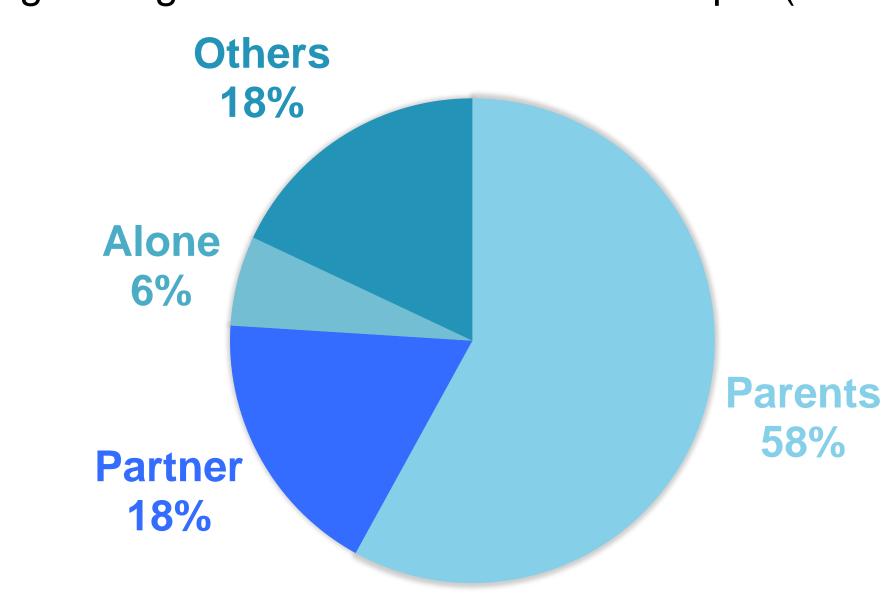
Motivations for starting, stopping and restarting oral PrEP: Experiences of adolescent girls and young women in the HPTN 082 trial

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Living arrangements of AGWY in the sample (n=67)



METHODS

- HPTN 082: Open-label trial to evaluate uptake and adherence to oral PrEP, 2016-18
- 426 AGYW from Cape Town, Johannesburg, Harare
- 16-25 years, HIV negative, sexually active, and PrEP-eligible
- Randomised to standard support (adherence counselling, weekly SMS reminders, monthly in-person adherence clubs) or standard support plus drug level feedback (TFV-DP levels on DBS at Week 4 and 8)

QUALITATIVE SUBSTUDY

- N=67 qualitative interviews, 2017-18
- Purposive sampling to include adherers, non-adherers, decliners, special cases (adherence based on PrEP drug levels at week 4)
- Interviews were audio-recorded, transcribed and translated into English
- Inductive coding and a thematic approach to analysis was used

Key finding: HIV risk perception frequently motivated adolescent girls and young women to start oral PrEP. Social factors such as stigma and interpersonal support were central in decisions to stop and restart PrEP.

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RESULTS	
THEME	SUPPORTING QUOTE
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HIV risk perception often motivated PrEP start but was less central in AGYW motivations to stop and restart PrEP

"I have been dating one guy and I think he may give me problems. So let me join [the study]. The way I view it, it's for my own safety." (Berenice, 24, Johannesburg).

HIV and PrEP-related stigma (experienced and anticipated) from friends, partners, family, community often motivated skipping doses or pausing PrEP. Beliefs that PrEP is used by sex workers, 'promiscuous' individuals, sick people, those living with HIV; or that PrEP will cause HIV, weight gain or infertility all influenced PrEP interruptions

"So, when he [husband] saw me taking pills he forbid it... he just asked me, that what I have to do with the pills. Then he started to say that 'Maybe you will be doing what, you will be prostituting in Zimbabwe.' Then I just stopped taking the pills." (Tendai, 24, Harare).

Product characteristics – anticipated side effects often motivated a delay in PrEP start, and experienced side effects were often linked to a practice of skipping doses. The challenge of a daily regimen and the large pill size often motivated skipping doses

"Yeah, they used to keep me worried, that I will have a headache, I will be this and that, but at the end of the day I said let me test and try them maybe it's not going to be that bad." (Rita, 24, Johannesburg)

Interpersonal influence – peers important in introducing and motivating PrEP uptake. Information and encouragement from clinic staff frequently motivated PrEP restart. AGYW received motivation to restart from peers at retention events. Zimbabwean participants were often motivated to restart after encouragement from a maternal figure

"I stopped taking PrEP because he [husband] had said that if I continued taking them it meant that our marriage would be over. That is when I told my grandmother what was happening and then they took him and explained to him. When he had understood that is when I started taking PrEP again." (Iris, 20, Harare).

CONCLUSIONS

- AGYW are able to assess their risk and accept PrEP but experience barriers to use because of drug characteristics and social pressures
- PrEP counselling should focus on guidance to users to stop and restart safely given intermittent use; users need to be aware of the risks of resistance if they restart while HIV infected.
- Peers are an important source of positive support and influence; strategies that leverage peer support are likely to be beneficial for oral PrEP adherence
- Education and demand creation materials need to include messages for individuals that influence AGYW PrEP use including parents and female social support figures

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