

Continued Use of PrEP among Sex Workers in Six Sites in South Africa

Cara O'Connor

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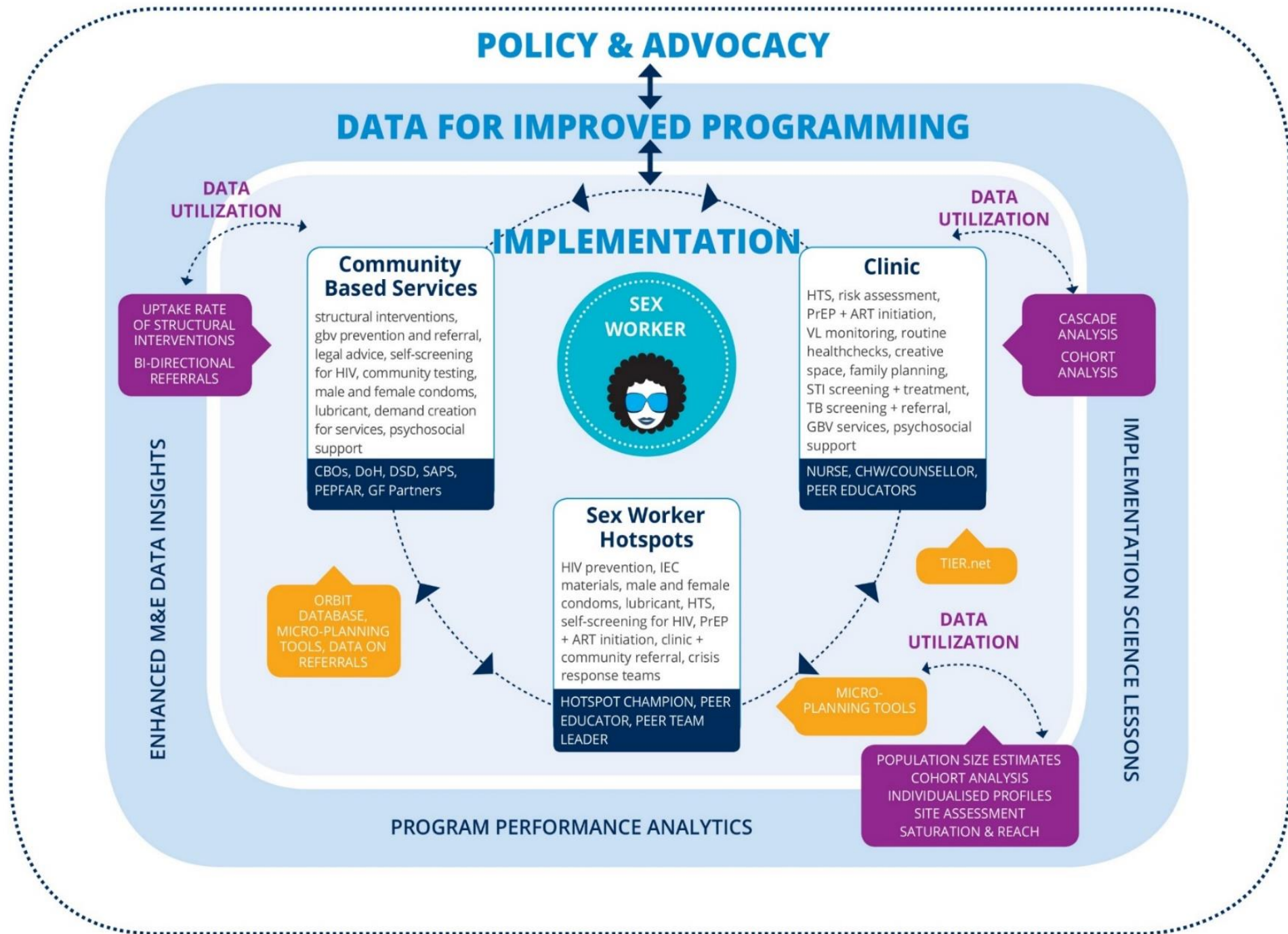


University of the Witwatersrand
WITS RHI

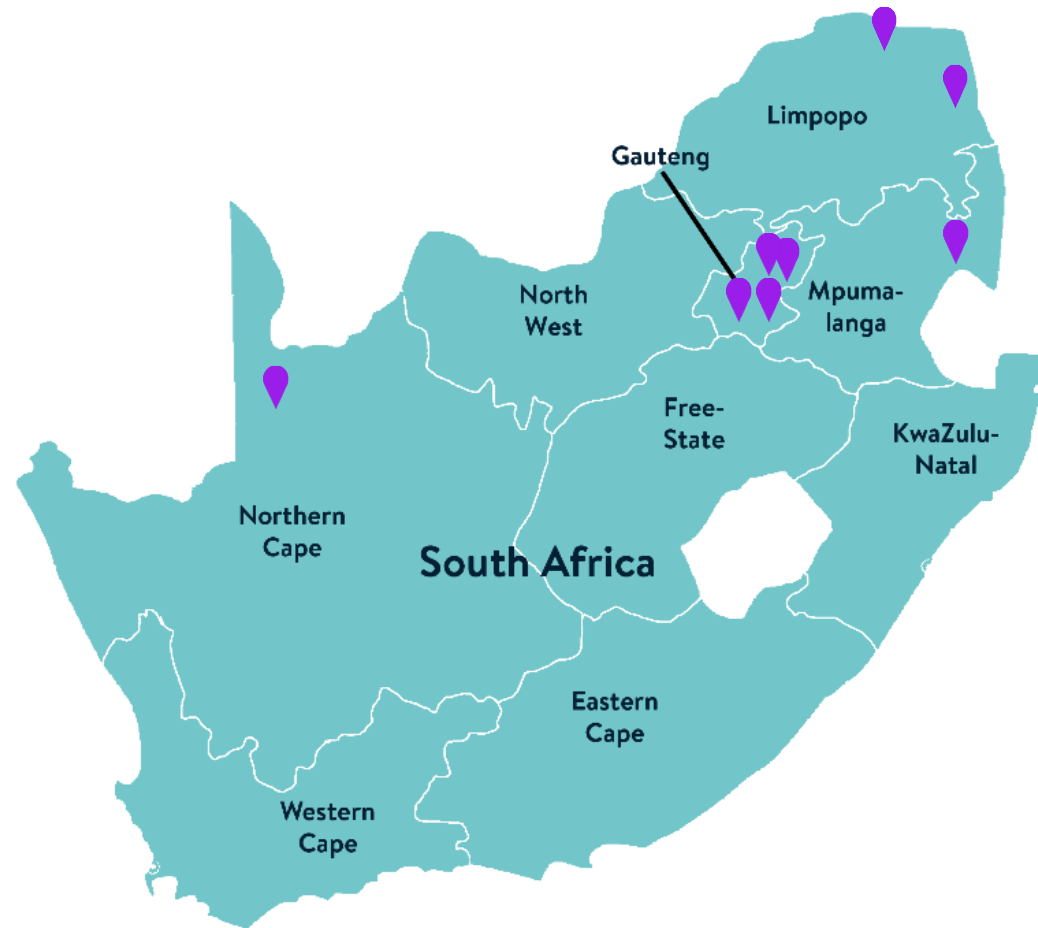
Background



- The sex worker program at Wits RHI has provided health services to sex workers in inner city Johannesburg since 1996.
- This year, the programme has reached more than 36,000 sex workers across four provinces.
- PrEP rolled out to high risk populations in 2016 following WHO 2015 recommendations.



PrEP Sites in the Sex Worker Programme



SW and Male Client Project Population

- The Project serves Female, Male, and Transgender Sex Workers and their Male Clients
- Vulnerable to HIV due to:
 - High client volume (>10 clients/day): 58%
 - Substance use and violence: 58%
 - Inconsistent condom use: 44%
 - Young age (≤ 24 years) and/or new in sex work (<6 months)

Individual Female Sex Worker Risk and Vulnerability Assessments in Hillbrow, South Africa (Bothma et al)
- All SW who test negative for HIV are offered PrEP.
- PrEP is available in both mobile clinic and at fixed sites.

Methods

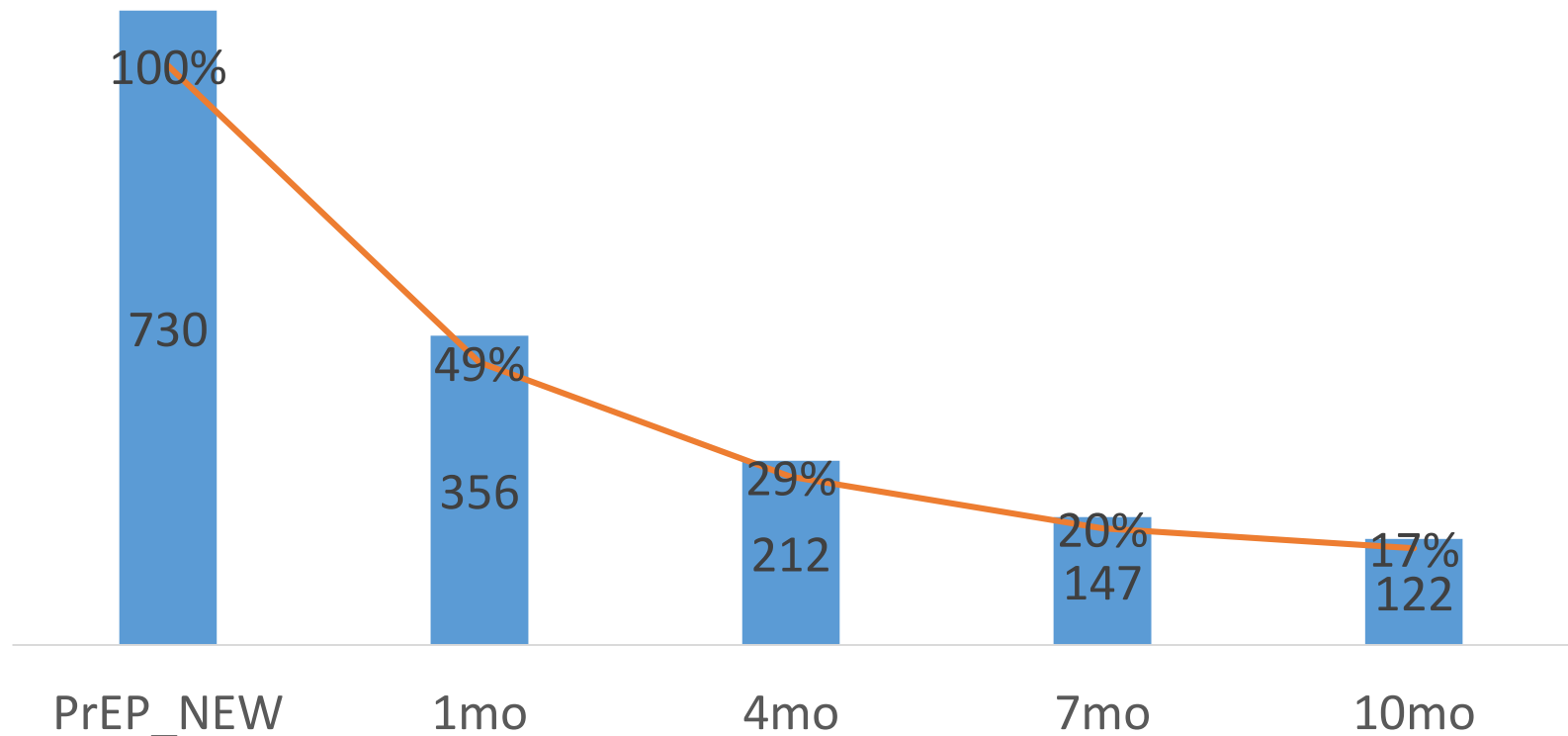
- Purpose: To determine what proportion of sex workers who initiate on PrEP continue to use PrEP at various time points up to 10 months from initiation.
- Retrospective review of routine program data.
- Six sex worker service sites providing PrEP were included in the data analysis, all sites for which we had complete data set:
 - Esselen Street Clinic, Johannesburg;
 - Sediba Hope Clinic, Tshwane;
 - Ekurhuleni DREAMS outreach team
 - Pomona Road, Ekurhuleni
 - Musina, Limpopo;
 - Hoedspruit, Limpopo.
- Included those who initiated PrEP in the first year of the program (June 2016-May 2017)

Month/Cohort		Sex			Age					HIV negative offered PrEP (Y/N)		Negative initiated on PrEP (TOT)		At 1 month: Report on events between starting PrEP & 1 month						2	At 3 months: Report on events between 1 month and 3 months					
Date started ddmm	Client's Name, Surname, folder number and ID number	Adult Male	Adult Female	Transgender	0 - 15	16 - 18	19 - 24	25 - 34	35+			Continue PrEP	Restart PrEP	(Disc)ontinue PrEP	Outcome RIP LTF TFO	HIV Test neg -	HIV Test +		Continue PrEP	Restart PrEP	(Disc)ontinue PrEP	Outcome RIP LTF TFO	HIV Test neg -	HIV Test +		
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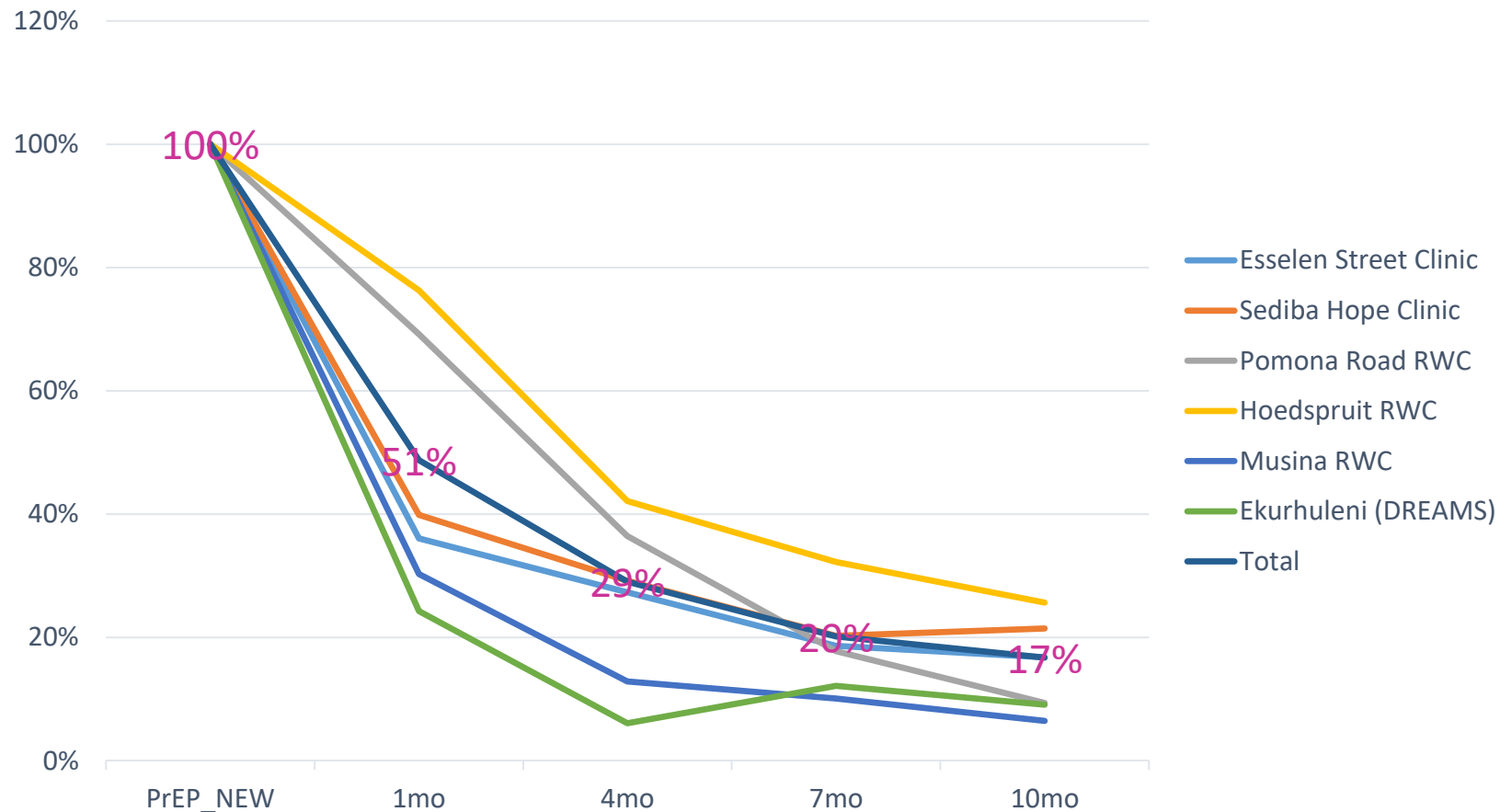
Continued use of PrEP

- 51% of people who initiated PrEP from June 2016 through May 2017 (N=730) did not continue after 1 month.
- At 10 months, 17% were on PrEP (continued or restarted).

Continued Use of PrEP in WRHI Sex Worker Program (Cohort Initiating June 2016-May 2017)



Continued use of PrEP by site

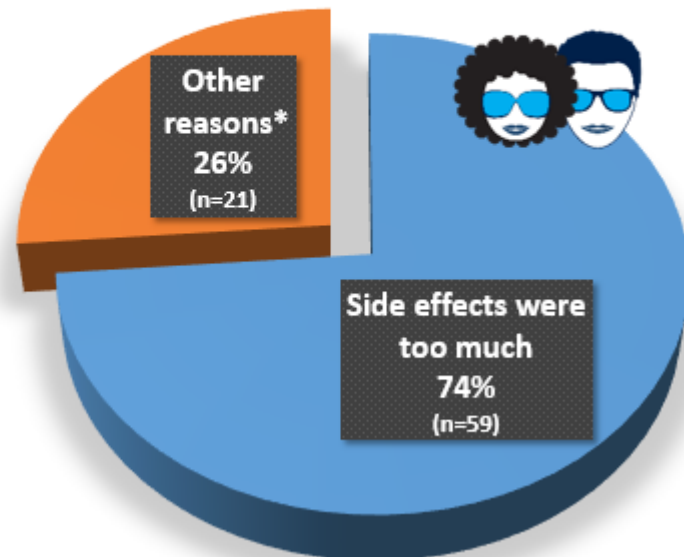


Reasons for Discontinuation

- Reasons for discontinuation are not routinely collected in register

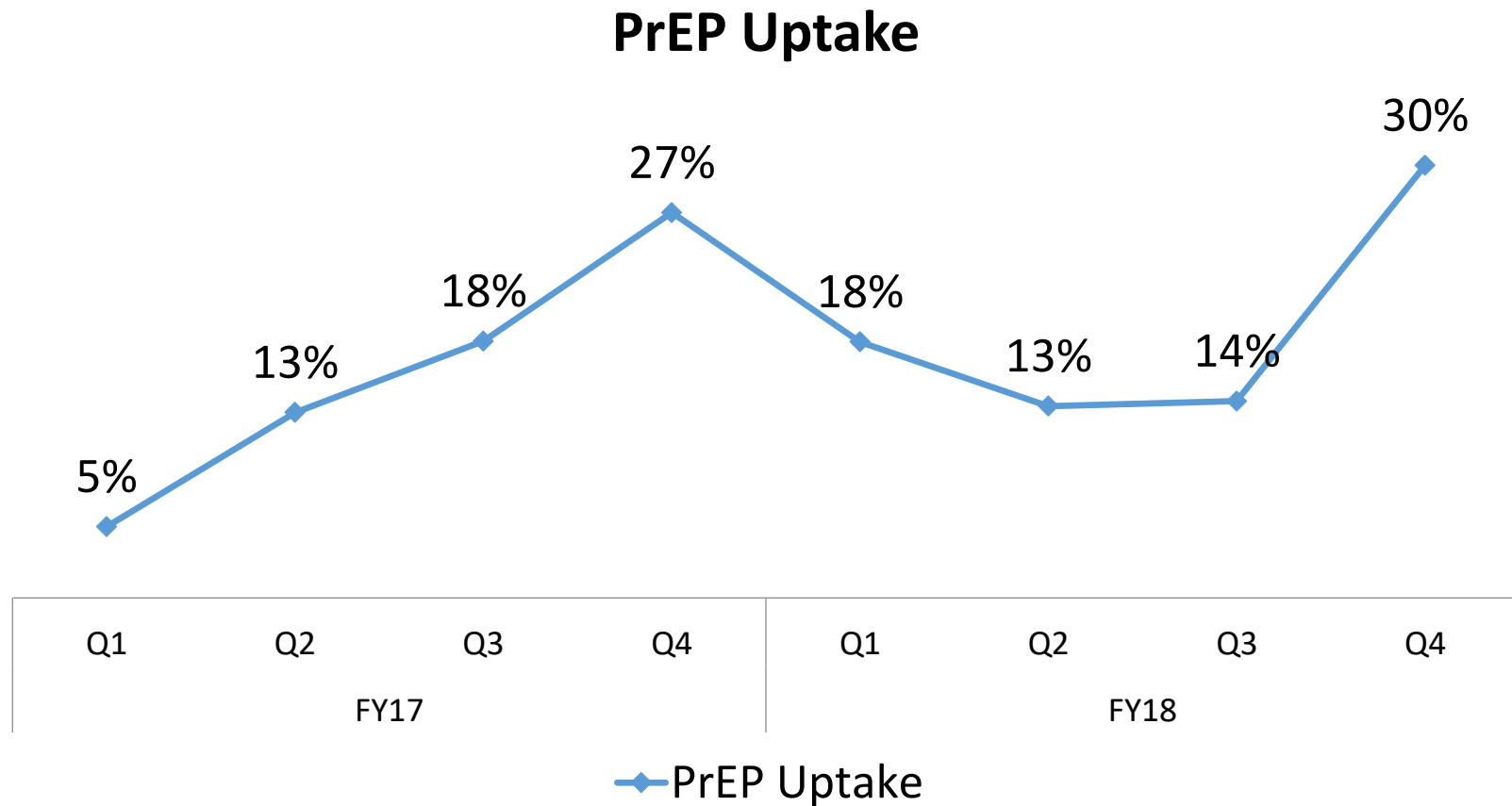
Factors influencing initiation, continuation & discontinuation of oral PrEP at selected facilities in South Africa (D Pillay et al)

Factors influencing discontinuation of PrEP

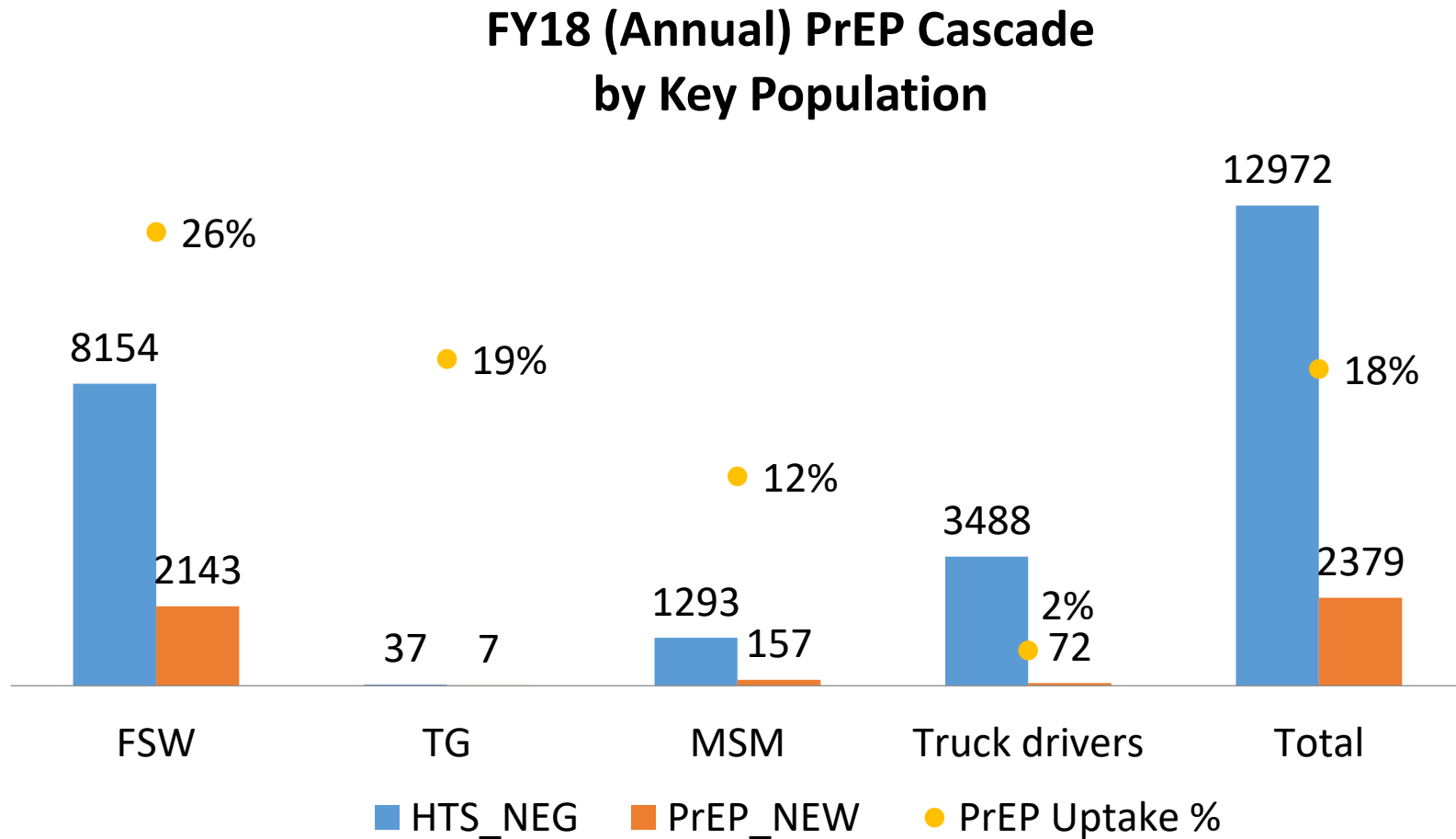


* Other reasons included: feeling stigmatized (19%), challenges with accessing PrEP (10%), concerns with pill taking/adherence (4%), having one faithful sexual partner (3%), partner said to stop using it (3%), pregnancy (3%), other (4%)

2018 - Uptake of PrEP among HIV negative individuals in the SWMC Project



2018 - PrEP Cascade by Key Population



Limitations

- Population – While this analysis reflects what happened with sex workers in our project. This may not be generalizable to larger population.
- Data sources – M&E registers do not include in-depth information on patient demographics, reasons for discontinuation.

Recommendations

- PrEP will be used at times of risk, cycle on and off
- Improve PrEP messaging and pre-initiation counselling



- Mitigate side effects



- Intensify tracking and tracing of LTFU



Recommendations

- Reasons for discontinuation?
- Does PrEP continuation vary by age group, key population, mobile/fixed services?
- How many people restart PrEP? When and why?
- Risk profile of those who initiate PrEP?
- PrEP uptake and continuation among transgender women? WRHI Key Populations Project 2019.

Thank you!

Thank you to:

Co-Authors: Rutendo Bothma,¹
Erica Penfold,¹ Thandeka Khoza,²
Naomi Hill,¹ WD Francois Venter¹

¹Wits Reproduction Health and HIV
Research Institute (Wits RHI)

²Northstar Alliance

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