High acceptance of PrEP among AGYW seeking contraception at retail pharmacies in Kenya (ID: 1106)

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Background

- Retail pharmacies increase PrEP delivery options \(^1,^2,^3\)
- AGYW in Kenya access contraception at pharmacies \(^1\)
- Providing PrEP in this setting is a ‘high-yield’ strategy
- We evaluated characteristics of Kenyan AGYW seeking contraception and PrEP acceptance in pharmacies

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1 J.Pintye 2023 ; 2 KF Ortblad 2020

*Study site in Kisumu*
• **Design:** 2-armed cluster RCT

• **Setting:** 20 pharmacies in Kisumu, Kenya

• **Pharmacy eligibility**
  - Private counseling space
  - Full range of contraceptives

• **Population:** Up-to 1900 AGYW without HIV seeking contraception at pharmacies
Remote physician oversight; available for medical consultation as needed

Research Assistant determines eligibility & enrolls

AGYW purchases contraception at retail pharmacy

HIV testing
- Rapid HIV testing in consultation room

HIV+
Referral to confirmatory testing and HIV care

HIV-

Nurse-Navigator Consultation
Counsel on relationship climate, mental health, and discreet PrEP use; address concerns re: FP and/or PrEP; offer psychosocial support; make referrals to social services as needed

PrEP offer
- Conduct risk assessment, discuss adherence, potential PrEP side effects per national guidelines

Decline PrEP

AGYW self-select daily oral PrEP or DPV-VR

Accept PrEP

PrEP dispensing
Dispense 30-day supply of selected PrEP method (pills or DPV-VR)

Standard-of-care pharmacy-based PrEP delivery (control arm)

Nurse-Navigator Enhanced pharmacy-based PrEP delivery (intervention arm)

Schedule 1-month follow-up visit
• AGYW purchasing contraceptives offered PrEP
• Self-selected PrEP pills or dapivirine vaginal ring (DPV-VR)
• AGYW provided with a one-month supply
• We summarized enrollment characteristics, incl.:
  – PrEP Knowledge (previously heard of PrEP)
  – PrEP Acceptance (dispensed pills or DPV-VR)
  – PrEP Choice ( pills or DPV-VR)
Demographic characteristics (n=1139)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>% or Median (IQR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age, years</td>
<td>21 (19-23)</td>
</tr>
<tr>
<td>Unmarried</td>
<td>83%</td>
</tr>
<tr>
<td>Currently in school</td>
<td>41%</td>
</tr>
<tr>
<td>Reported prior pregnancy</td>
<td>48%</td>
</tr>
<tr>
<td>Depression symptoms</td>
<td>5%</td>
</tr>
<tr>
<td>Partner provide financial support</td>
<td>83%</td>
</tr>
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</table>
Behavioral characteristics (n=1139)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>% or Median (IQR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reported Condomless sex last 6 months</td>
<td>86%</td>
</tr>
<tr>
<td>Reported ≥1 sexual partner</td>
<td>20%</td>
</tr>
<tr>
<td>Reported transactional sex last 6 months</td>
<td>9%</td>
</tr>
<tr>
<td>Perceived moderate to high HIV risk</td>
<td>27%</td>
</tr>
<tr>
<td>Ever experienced intimate partner violence</td>
<td>13%</td>
</tr>
<tr>
<td>Accessing Emergency Contraception</td>
<td>50%</td>
</tr>
<tr>
<td>Had sex while intoxicated with alcohol or drugs</td>
<td>9%</td>
</tr>
</tbody>
</table>
## PrEP knowledge and acceptance (n=1139)

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>% or Median (IQR)</th>
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</thead>
<tbody>
<tr>
<td>Previously heard of oral PrEP</td>
<td>80%</td>
</tr>
<tr>
<td>Previously heard of DPV-VR</td>
<td>8%</td>
</tr>
<tr>
<td>Accepted PrEP</td>
<td>85%</td>
</tr>
<tr>
<td>Know anyone taking PrEP</td>
<td>28%</td>
</tr>
</tbody>
</table>
PrEP choice (n=967)

- Oral pills: 77%
- DPV-VR: 23%

Reasons for selecting oral PrEP pills:
- Familiarity with pills (31%)
- Ease of use (31%)
- Fear/pain (26%)

Research for selecting DPV-VR:
- Avoidance of pill burden (14%)
- Private/someone won’t know (7%)
- Easy to adhere (7%)
Discussion

• AGYW seeking contraception at retail pharmacies in Kenya frequently have characteristics indicating high risk of HIV acquisition.

• High acceptance of daily oral PrEP and DPV-VR among AGYW seeking contraception at retail pharmacies.

• Availability of PrEP options in retail pharmacies would likely benefit AGYW.
Acknowledgements

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• Kisumu County MoH
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