CONTROLLING THE HIV EPIDEMIC WITH ANTIRETROVIRALS

Avoiding the Cost of Inaction

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Stigma as Possible Barrier to PrEP Acceptance in Nigeria: Lessons Learned from the Formative Study on PrEP Acceptability

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Background
A Formative Study was conducted to explore the acceptability of antiretroviral use as pre-exposure prophylaxis (PrEP) for HIV prevention in Nigeria.

The objectives were to identify:
• A target group for PrEP study
• Effective public health messaging strategies
• Community concerns/possible logistic challenges
• How to address those challenges.
Study Design and Methods

- Design: Qualitative explorative study
- Methods:
  - Open-ended Interviews
  - Telephone Interviews
  - Focus Group Discussions
  - Consultative Stakeholder Meetings
  - Online Survey
Map Showing Study Locations
Study Participants

- Representatives of government
- Partners in HIV Program and Research
- People who may receive PrEP (Sero-discordant Couples, MSMs, IDUs, SWs)
- Community Representatives
# Data Table

<table>
<thead>
<tr>
<th>Data Collection</th>
<th>Sample Sizes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Interviews</td>
<td>101</td>
</tr>
<tr>
<td>Telephone Interviews</td>
<td>113</td>
</tr>
<tr>
<td>Focus Groups</td>
<td>12</td>
</tr>
<tr>
<td>Consultative Stakeholder Meetings</td>
<td>3</td>
</tr>
<tr>
<td>Online Survey Responses</td>
<td>65</td>
</tr>
</tbody>
</table>
Data Analysis

- Individual responses corresponding to each study objective were summarized and assigned to descriptive categories.

- Data were inductively content analyzed to identify themes and broader concepts.
Results

• Findings indicate wide acceptance of PrEP as an addition to the HIV prevention package in Nigeria. However, stigma was a concern

• Stigma through breach of confidentiality from: the physical layout of PrEP clinics, organization of PrEP services, professionalism of staff; & low public education
Breaches of Confidentiality

- Location & Organization of PrEP Clinics:
  - Type of clinics: hospital-based Vs Mobile clinics
  - Location of clinics: Integrated Vs Stand-alone
  - Organization of clinic: Every days Vs “Special days” arrangement
  - PrEP delivery: Integrated Services Vs segregated

- Low public PrEP education: confusing the use of ARV for PrEP, as ARV for treatment
Breaches of Confidentiality Cont.

- Professionalism of Staff:
  - Health workers shouting out the names of clients during clinic visits (risking disclosure)
  - Health workers’ arbitrarily revealing clients status to others (breaching confidentiality)
  - Fear of harsh attitude of healthcare workers to clients (a form of stigma)
Recommendations

- Integrate PrEP into daily general health services (doctor consultations & drug dispensing)
- Train & re-train health care providers on confidentiality
- Identify sources of stigma in the communities & create awareness
- Develop a robust public education strategy using community advocacies and both print & electronic media
Conclusion

• If these recommendations are implemented, the PrEP Demonstration Project in Nigeria could be effectively utilized.
Appreciation

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• All Study Participants

• NACA & PrEP Formative Study Team
THANK YOU FOR LISTENING