

OPTIONS MARKET INTELLIGENCE REPORT: KENYA

Key insights and communications implications for oral PrEP demand creation among female sex workers (FSW) in Kenya

JULY 31, 2018

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METHODOLOGY

The following findings are from a formative market intelligence study conducted in Kenya to inform development of demand creation communications strategies for oral PrEP among female sex workers (FSW) (N=100).

Data were collected through a structured, closed-ended questionnaire that evaluated attitudes, beliefs, and behaviors toward HIV prevention, risk perception, cultural biases, and stigma. Development of the questionnaire was informed from preceding qualitative research among the same population.

Participants were provided a list of answers to choose from for all “multiple answer” questions. Any answers that were not chosen by at least one respondent are noted in the footer of the page as “0%”.

Aside from dichotomous (yes/no), numerical, and categorical questions, all of the questions offered respondents an “other” option to provide their own answers.

Note: Market intelligence data was collected to inform insights for demand creation communications. The results are not considered generalizable.

METHODOLOGY

Quantitative surveys were conducted in ten counties by trained interviewers. A non-research determination was provided for this work from relevant ethics committees.



RESEARCH OBJECTIVE

PRIMARY OBJECTIVE

To uncover FSW attitudes, beliefs, and behaviors regarding HIV prevention, risk perception, cultural biases, stigma, and other factors that would influence the development of communications strategies designed to increase initial interest and uptake of PrEP.

COMMUNICATIONS IMPLICATIONS

This presentation includes “communications implications” that recommend how findings from the market intelligence may strategically shape demand creation approaches.

If working with FSW populations outside of those involved in this research, implications should be validated with subsequent research prior to development and implementation of communications.



SAMPLE DEMOGRAPHICS

SURVEY PROFILE: FSW

(N = 100)

MEAN AGE 29.4

MARITAL STATUS

75% were single

14% were divorced

5% were married

INCOME

90% reported a household income below KES 30,000 (approximately \$300 USD)

CHILDREN

79% reported having children

Of respondents with children, 51% had 2+ children

LANGUAGE

75% spoke English

92% spoke Swahili

72% spoke 3+ languages

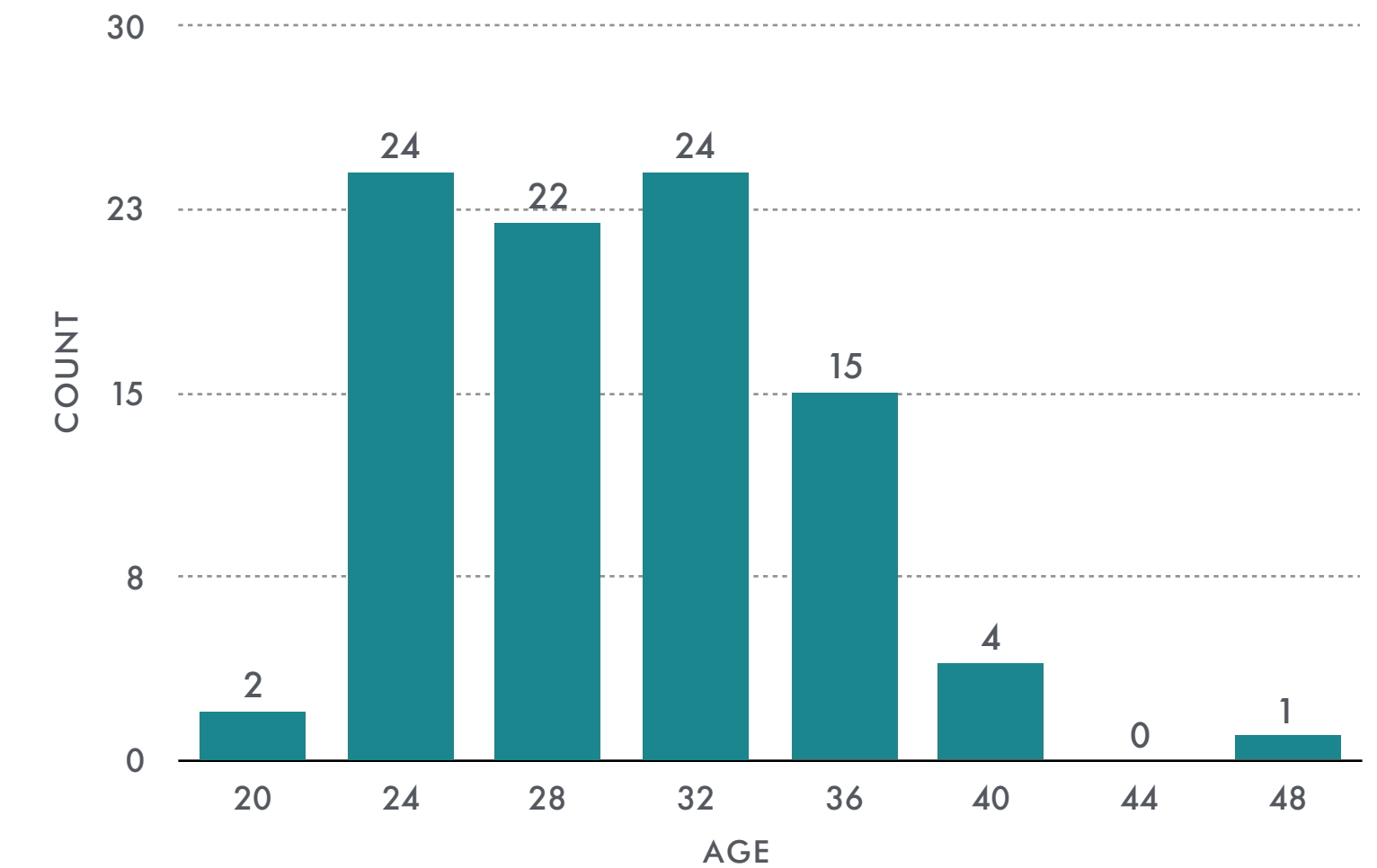
HOME LIFE

51% lived in a flat/apartment and live with an average of 2 people

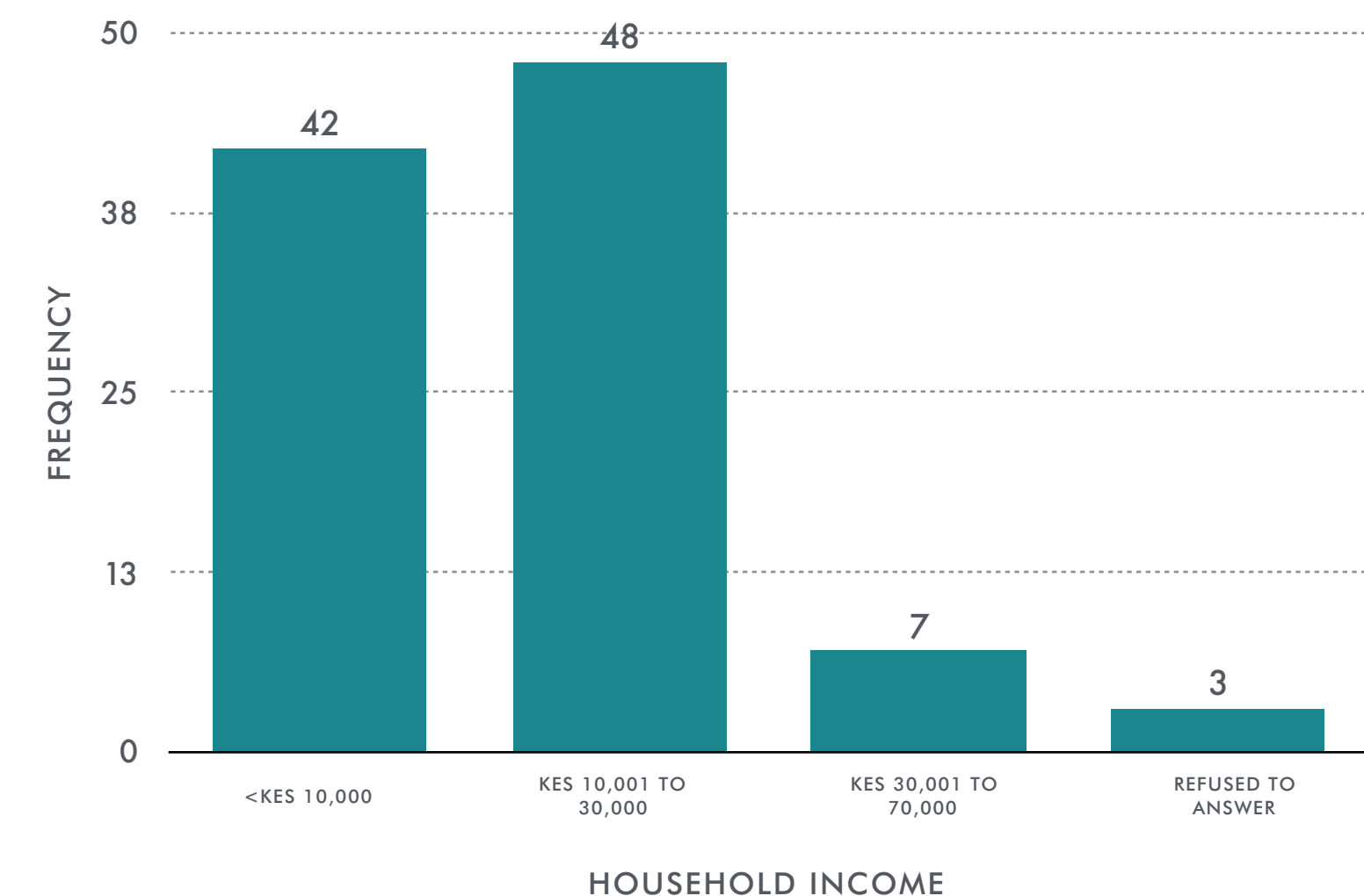
36% lived in a shanty home with an average of 2 people

7% lived in a Manyatta/traditional house with an average of 3 people

DISTRIBUTION OF RESPONDENT AGE: FSW



DISTRIBUTION OF RESPONDENT HOUSEHOLD INCOME: FSW



SURVEY PROFILE: FSW

(N = 100)

EDUCATION

0% were currently in school

78% completed at least primary school,
49% completed at least secondary school,
and 17% completed a college or university degree

CONNECTIVITY

95% of individuals had access to a cell phone
(of these individuals, 100% had their own cell phone)

Of individuals with access to a cell phone,
67% had access to a smartphone

EMPLOYMENT

93% of employed individuals are self employed
and 7% are employed part-time or full-time

88% of unemployed individuals not in school
were seeking work

85% owned a TV set

78% owned a radio

2% owned a computer

3% owned a form of transport



MOTIVATIONS

VALUES

Q5.1 What are some of the things that you currently value in your life? (N=100) [Multiple Answer]

HEALTH

- Being alive (70%)
- Being in good health (55%)

FAMILY

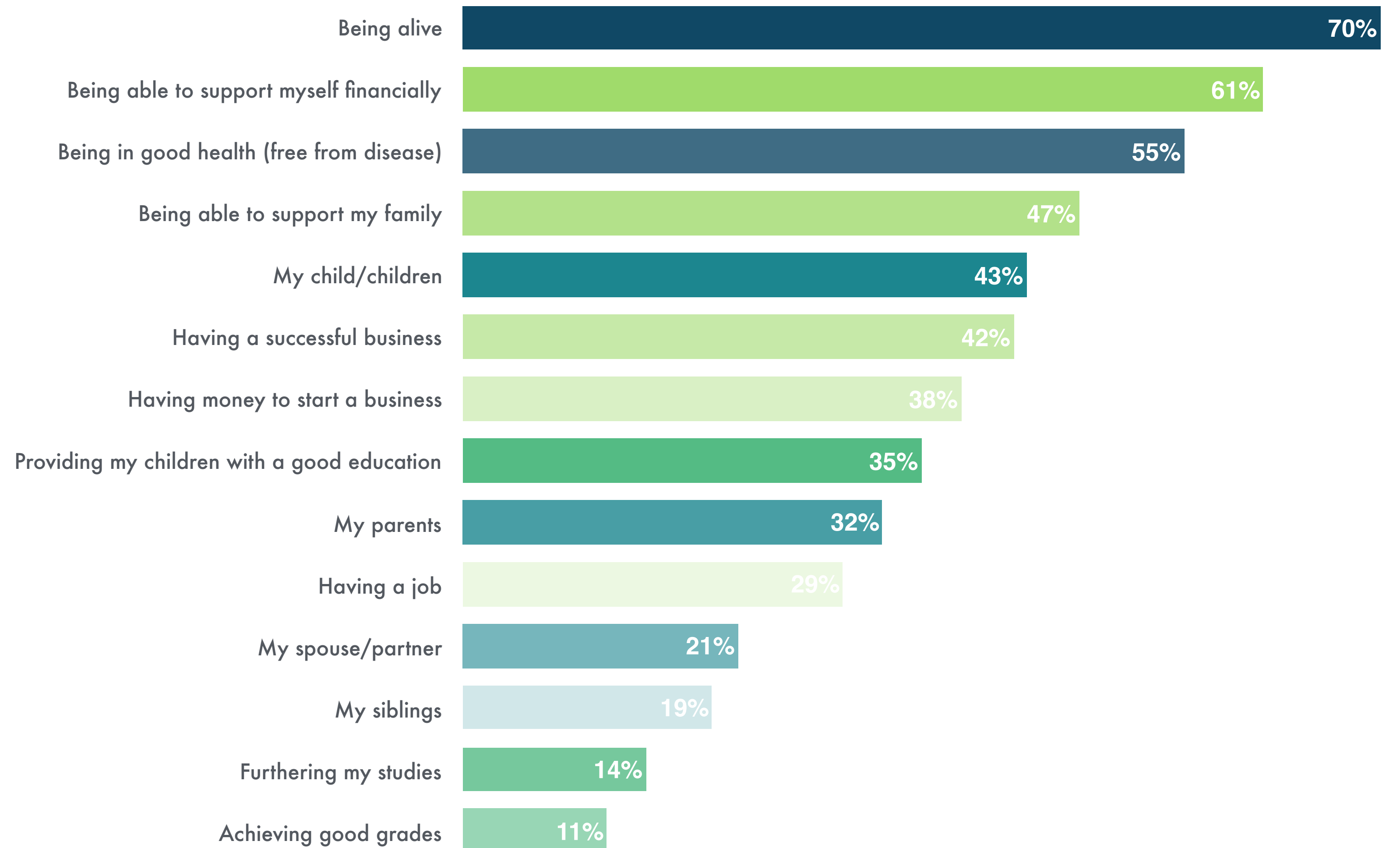
- My child/children (43%)
- My parents (32%)
- My spouse/partner (21%)
- My siblings (19%)

EDUCATION

- Providing my children with a good education (35%)
- Furthering my studies (14%)
- Achieving good grades (11%)

FINANCIAL

- Being able to support myself financially (61%)
- Being able to support my family (47%)
- Having a successful business (42%)
- Having money to start a business (38%)
- Having a job (29%)



Answers not depicted, (<11%) of respondents answered:

None (1%); My religion (1%); Having my own identity (1%); The ability to eat healthily (0%); Respect from the community (0%); My sobriety (0%); My hobbies (0%); My friends (0%); My assets (0%)

ASPIRATIONS

Q5.2 Where do you see yourself in the next 3-5 years? What hopes and dreams do you expect for yourself? (N=100) [Multiple Answer]

HEALTH

- Be in good health (52%)
- To avoid alcohol (17%)

EDUCATION

- Further my studies (17%)
- Complete my studies (13%)

FAMILY

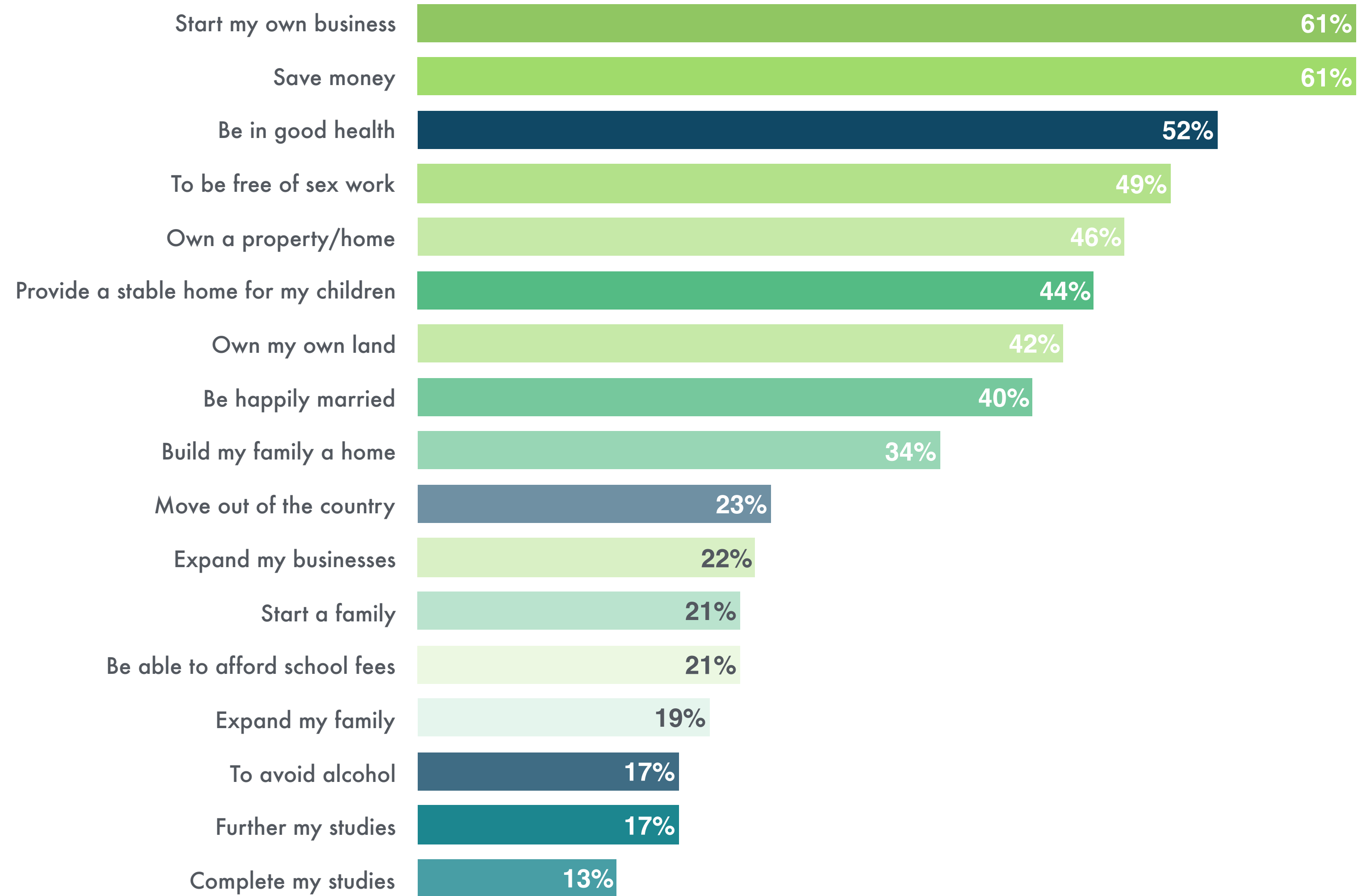
- Provide a stable home for my children (44%)
- Be happily married (40%)
- Build my family a home (34%)
- Start a family (21%)
- Expand my family (19%)

FINANCIAL

- Start my own business (61%)
- Save money (61%)
- To be free of sex work (49%)
- Own a property/home (46%)
- Own my own land (42%)
- Expand my business (22%)
- Be able to afford school fees (21%)

OTHER

- Move out of the country (23%)



Answers not depicted, (<13%) of respondents answered:
To avoid drugs (8%); None (0%)

PROBLEMS

Q5.4 Tell me some of the problems you are currently experiencing in life? (N=100) [Multiple Answer]

SEXUAL RELATIONSHIPS

- Condom bursts (33%)
- Transactional sex (sex in exchange for money, gifts, etc.) (27%)
- My sexual partner refusing to use condoms (23%)
- Not knowing my sexual partner's HIV status (20%)
- Unexpected pregnancy (12%)

HEALTH

- Being at risk of contracting STIs and STDs (45%)
- Being at risk of contracting HIV (31%)

FINANCIAL

- Not earning much money (28%)
- Spending my savings (24%)
- Not being able to save (22%)
- Being paid my salary late (11%)
- Not being able to move out of my parents' home (11%)

FAMILY

- Being a single parent (24%)
- Not being able to meet my family's needs (18%)

BUSINESS

- The increased unemployment rate in the country (28%)
- Lack of capital to start a business (25%)
- Not being able to secure a job in my line of studies (17%)
- Losing current customers (17%)
- My business declining because of the economy (13%)
- Not having finances for education / studies (11%)

OCCUPATIONAL HAZARDS

- Customers refusing to pay (50%)
- Spending a lot of time in the cold, not fully dressed (34%)
- Having to choose between money and health (sex without condoms pays more) (30%)
- Being raped by a customer (23%)
- Police raids (23%)
- Not being able to continue sex work when I am old and undesirable (10%)

OTHER

- Being arrested (29%)
- Police corruption (theft, bribes, etc.) (13%)



Answers not depicted, (<10%) of respondents answered:

Spending money on medication because of outbreaks (cholera, malaria, etc.) (8%); Losing weight because of stress (8%); Having an ill parent (8%); Being lured in by gang members (8%); Abusing alcohol (7%); Not completing school (6%); Dying (6%); Government corruption (5%); Stock not being delivered after payment (4%); Paying rent for a shop irrespective of how my business is doing (4%); Infecting someone with HIV (3%); Loved one dying (2%); Abusing drugs (2%); Pressure of raising children (1%); Physical abuse from customers (1%); None (1%); Afraid for the wellbeing of children (1%)



MOTIVATIONS

COMMUNICATIONS IMPLICATIONS

COMMUNICATIONS IMPLICATIONS

PROTECTING WHAT MATTERS MOST—HER LIFE

Of the FSW surveyed, their life was of highest value to them, followed by the ability to support themselves and their family. Positioning PrEP as a foundational element to achieving such desires could be an effective message to engage the audience.

A DOSE OF STABILITY

The majority of challenges FSW are facing are specific to the hardships of sex work, with 49% focused on being free of it. Their top aspirations are being able to start their own business, saving money and being in good health. They seek stability in a life where they put themselves at risk every day. PrEP can help FSW by eliminating the daunting risk of HIV.



HEALTH AND PREVENTION

PERCEPTION OF HIV RISK

Q10.8 Do you know your HIV status? (N=100)

90% ARE AWARE OF THEIR HIV STATUS

Q10.9 When was the last time you went for an HIV test? (N=100)

55% GOT TESTED WITHIN THE LAST 1-3 MONTHS

Q10.10 How often are you typically tested for HIV? (N=100)

73% GET TESTED AT LEAST ONCE EVERY 6 MONTHS

Answers not depicted:
4-6 months ago (27%); 7-12 months ago (8%); More than 12 months ago (7%); never (3%)

Answers not depicted:
Irregular tests are done (14%); every 7-12 months (4%); about once a year (5%); every couple of years (4%)

HEALTH CONCERNS: PERSONAL

Q6.2 Why do you say that you are concerned about your health right now? (n=94)*
[Multiple Answer]

**Asked only if respondents stated that they were concerned about their health (94% of respondents).*

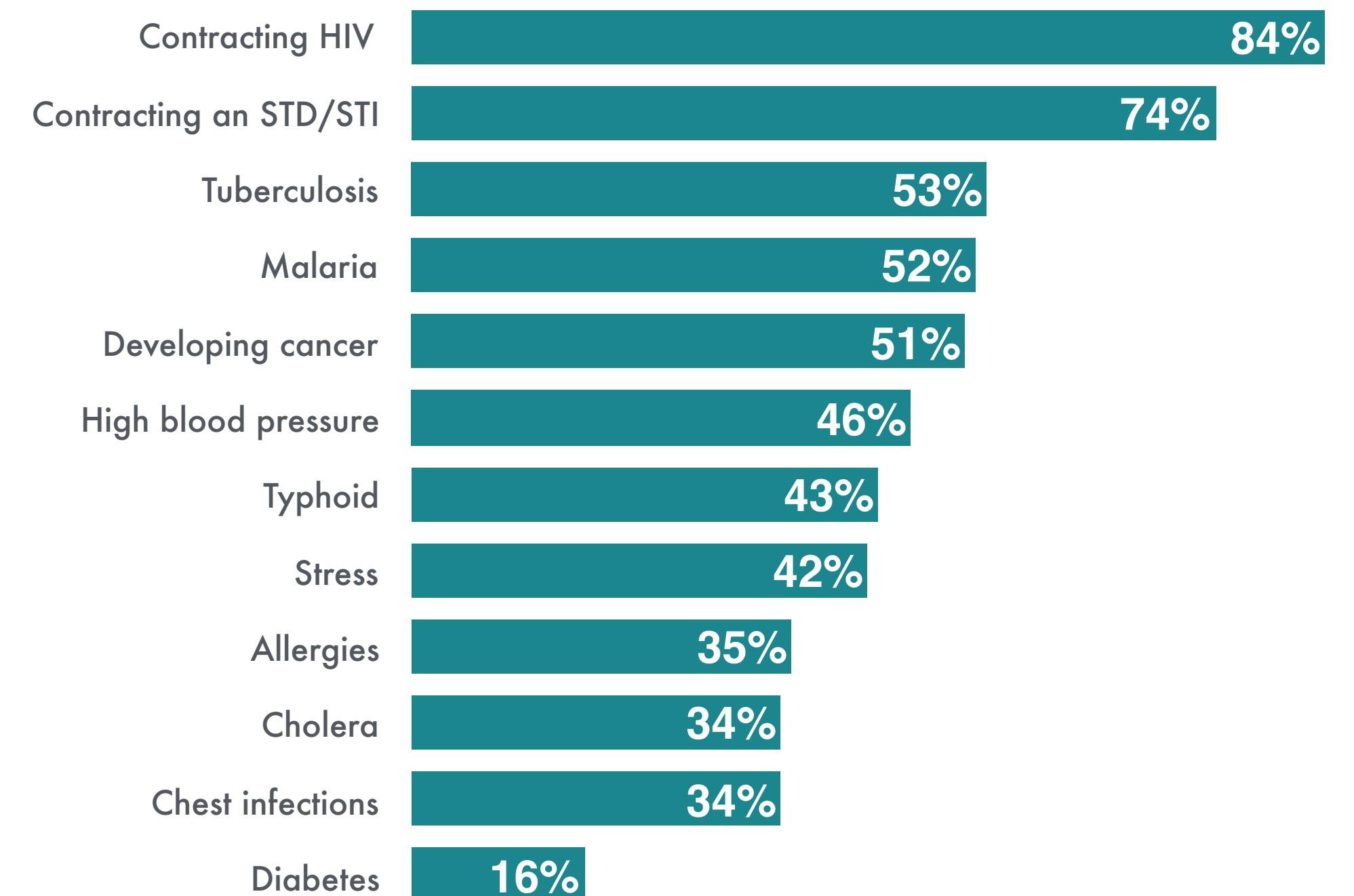


Answers not depicted, (<11%) of respondents answered:

I have had cholera/concerned about contracting cholera (8%); I get sick often (1%); I have had food poisoning (1%); I experience stomach cramps; (0%); I am a drug user (0%); I feel concerned because my partner has HIV (0%)

HEALTH CONCERNS: PEERS

Q6.5 What health concerns do you hear from people you associate with on a daily basis? (N=100)
[Multiple Answer]

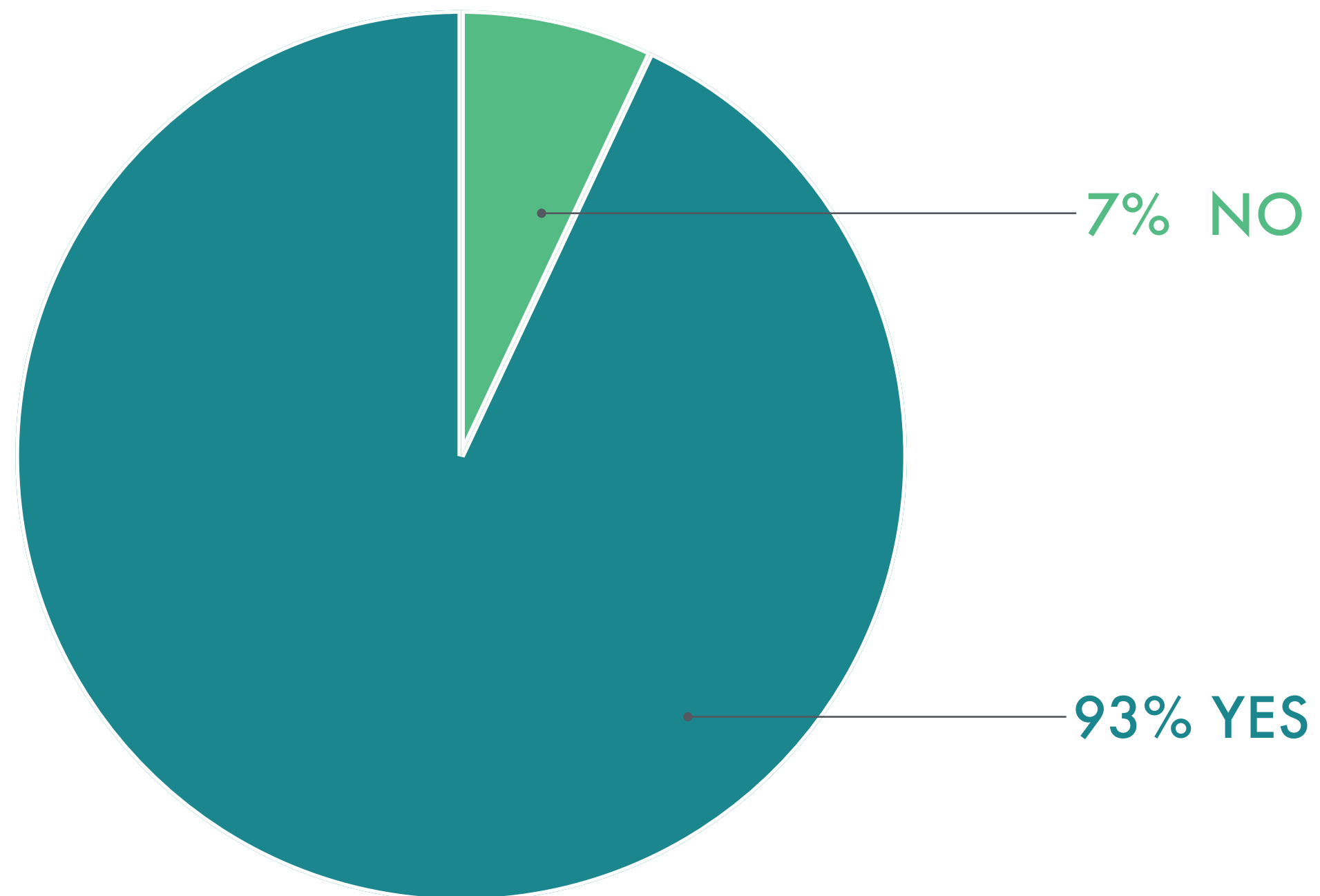


ANSWERS NOT DEPICTED, (<16%) OF RESPONDENTS ANSWERED:

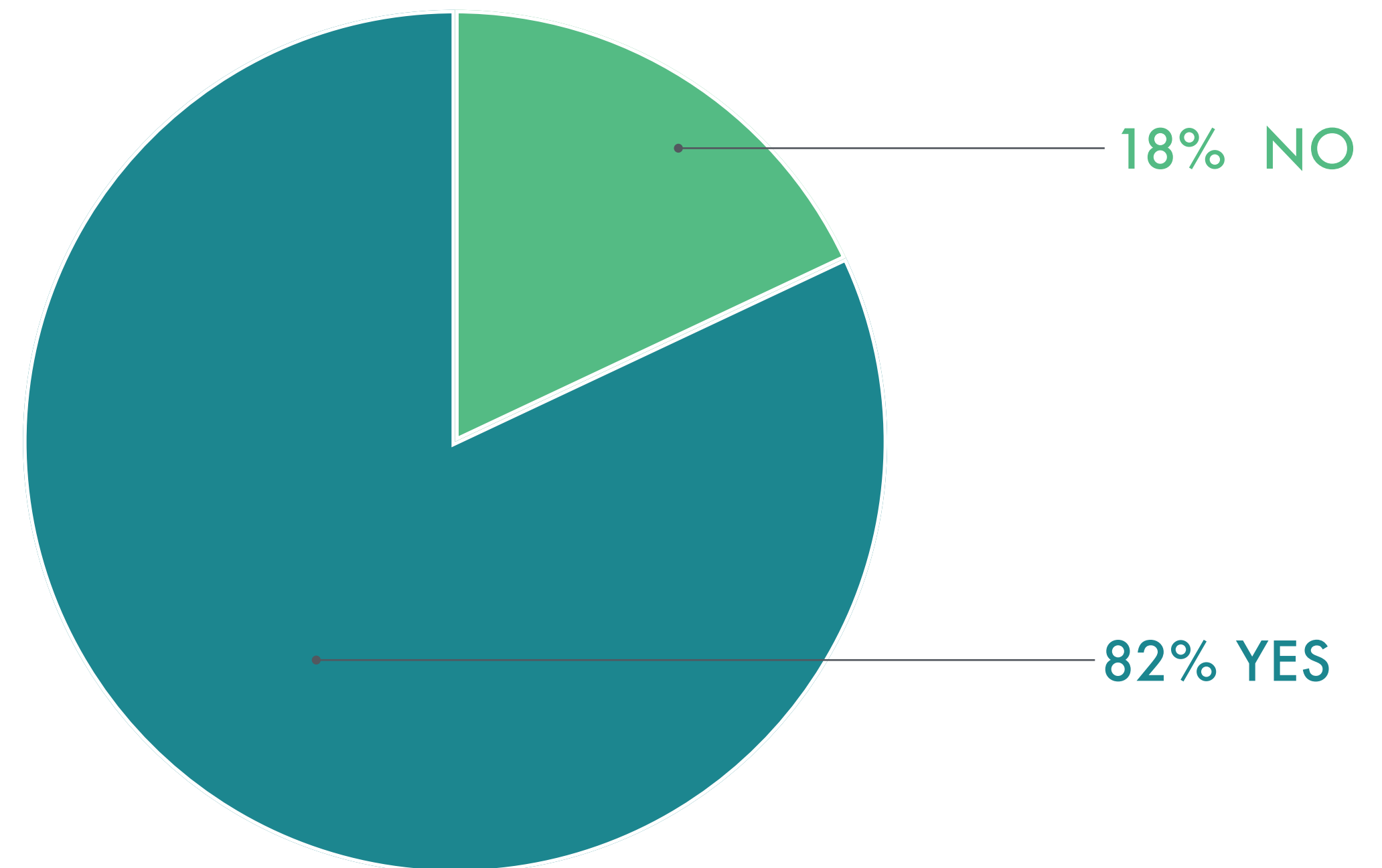
Weight gain (9%); Cysts (8%); Ebola (6%); Stomach cramps (1%); None (1%); Meningitis (1%); Hepatitis (1%); Elephantiasis (1%); Asthma (1%); Weight loss (0%); Ulcers (0%); Skin infections (0%); Nausea (0%); Kidney failure (0%); Joint pain (0%); Headaches & Migraines (0%); Fevers (0%); Diarrhea (0%); Depression (0%)

PERCEIVED RISK

Q10.4 Do you feel the people you engage with daily are at risk of contracting HIV? (N=100)

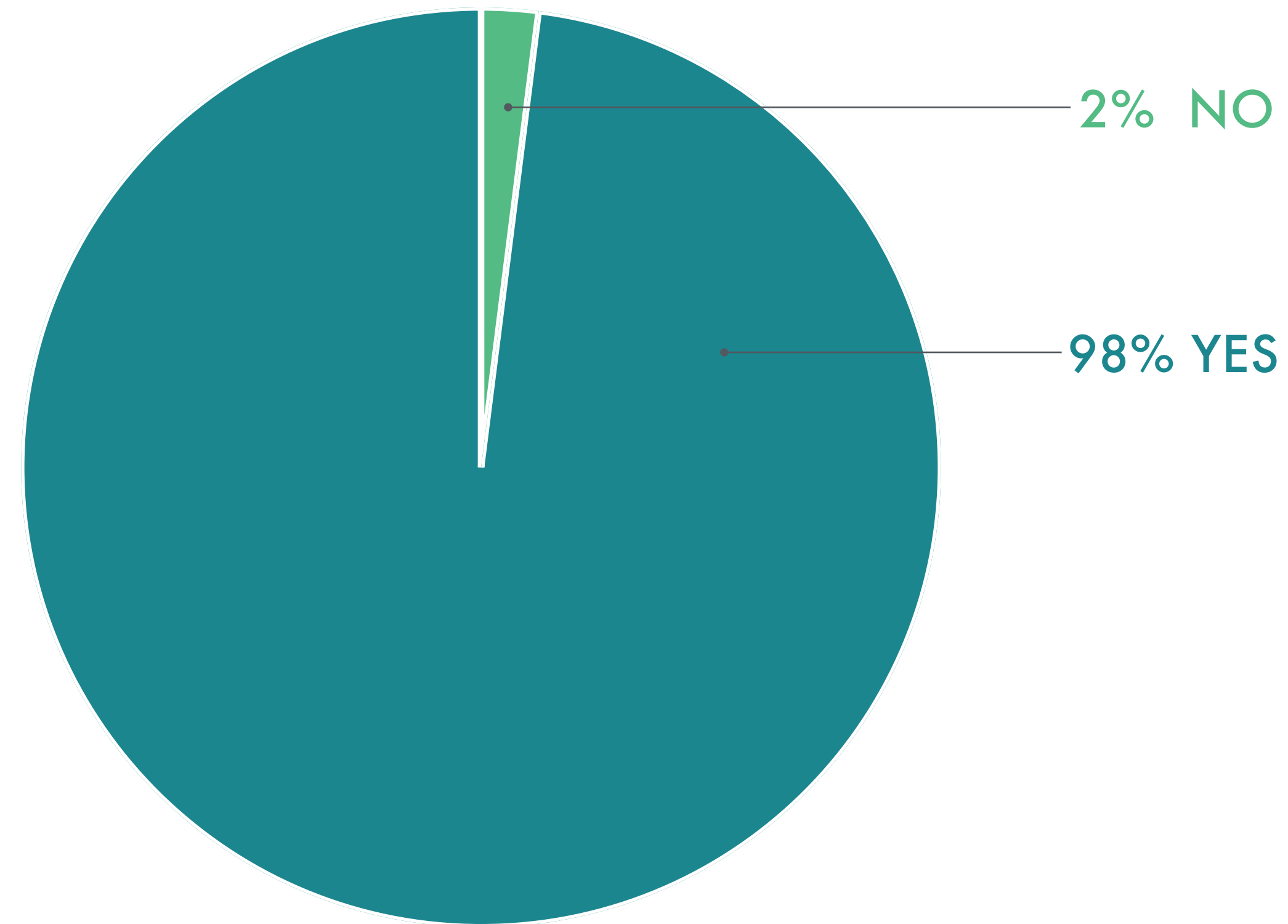


Q10.6 Do you personally feel at risk of contracting HIV? (N=100)



SOCIAL ACCEPTABILITY OF DISCUSSING HIV

Q10.2 Do you and your friends ever talk about the risk of contracting HIV? (N=100)



REASONS FOR NOT BEING "AT RISK": SELF

SEXUAL RISK FACTORS

- I always use condoms when having sex with my partner (72%)
- I know my partner's HIV status (28%)
- I am not currently sexually active (17%)

SHARPS

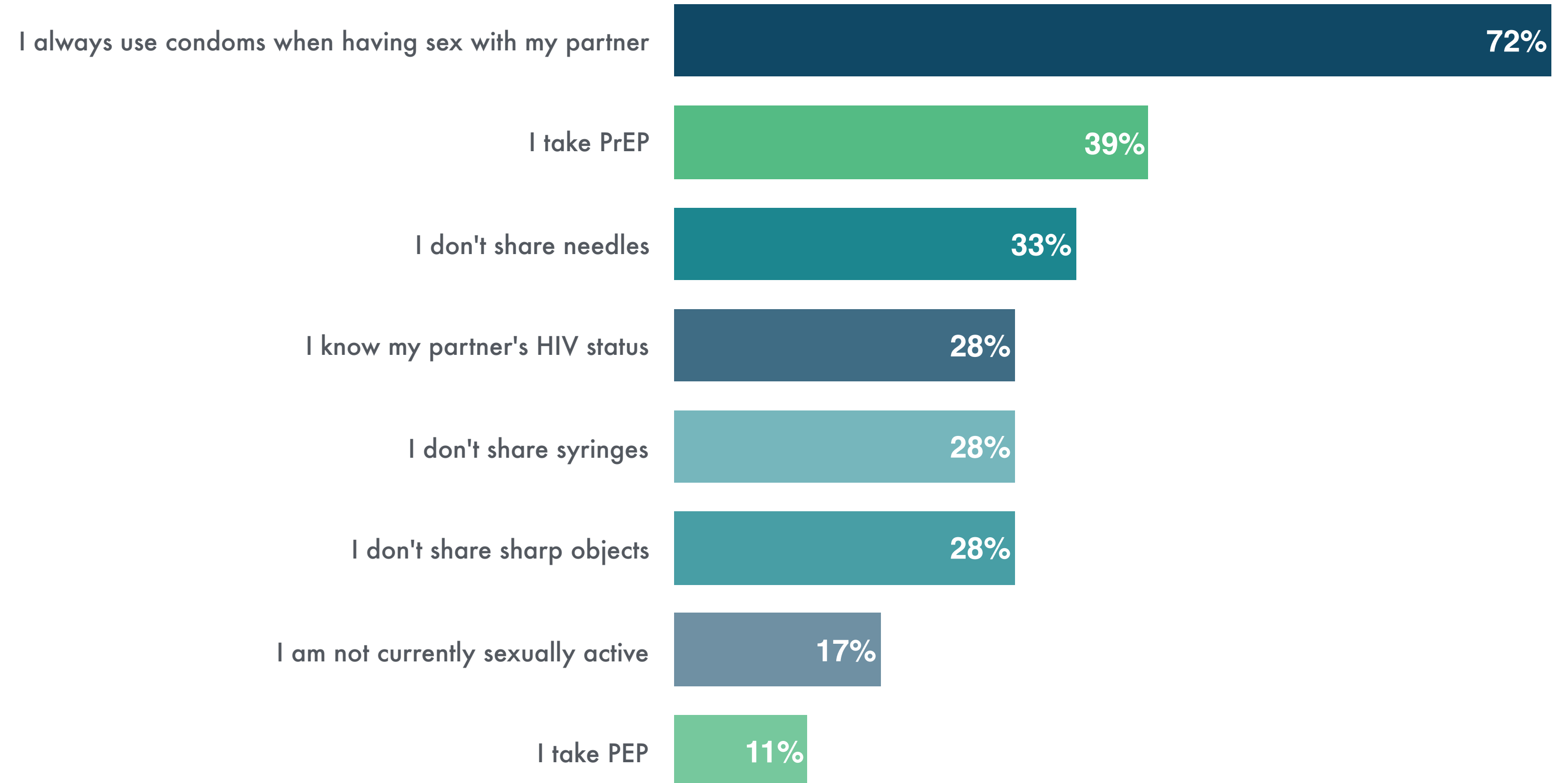
- I don't share needles (33%)
- I don't share sharp objects (28%)
- I don't share syringes (28%)

HEALTH PRECAUTIONS

- I take PrEP (39%)
- I take PEP (11%)

Q10.7 Why do you say that you are not at risk of contracting HIV? (n=82) [Multiple Answer]*

** Asked only if respondent stated that they did not feel at risk in response to Q10.6 "Do you personally feel at risk of contracting HIV?"*



Answers not depicted, (<11%) of respondents answered:

I use sterilized needles (6%); I am already infected with HIV (6%); I have never had sex (0%); I only have one sexual partner (0%)

REASONS FOR BEING "AT RISK": PEERS

CONDOM USAGE

- They do not use condoms (55%)
- They are having sex without condoms for (more) money (60%)
- They develop bonds with their customers and forego using condoms (53%)
- They are falling pregnant at a young age (12%)

SEXUAL RELATIONSHIPS

- They have multiple sexual partners (71%)
- They share the same sexual partners (62%)
- They are not abstaining from sex (36%)

KNOWLEDGE OF STATUS

- They have sex with someone whose status they do not know (62%)
- They do not get tested prior to sexual intercourse (45%)

SHARPS

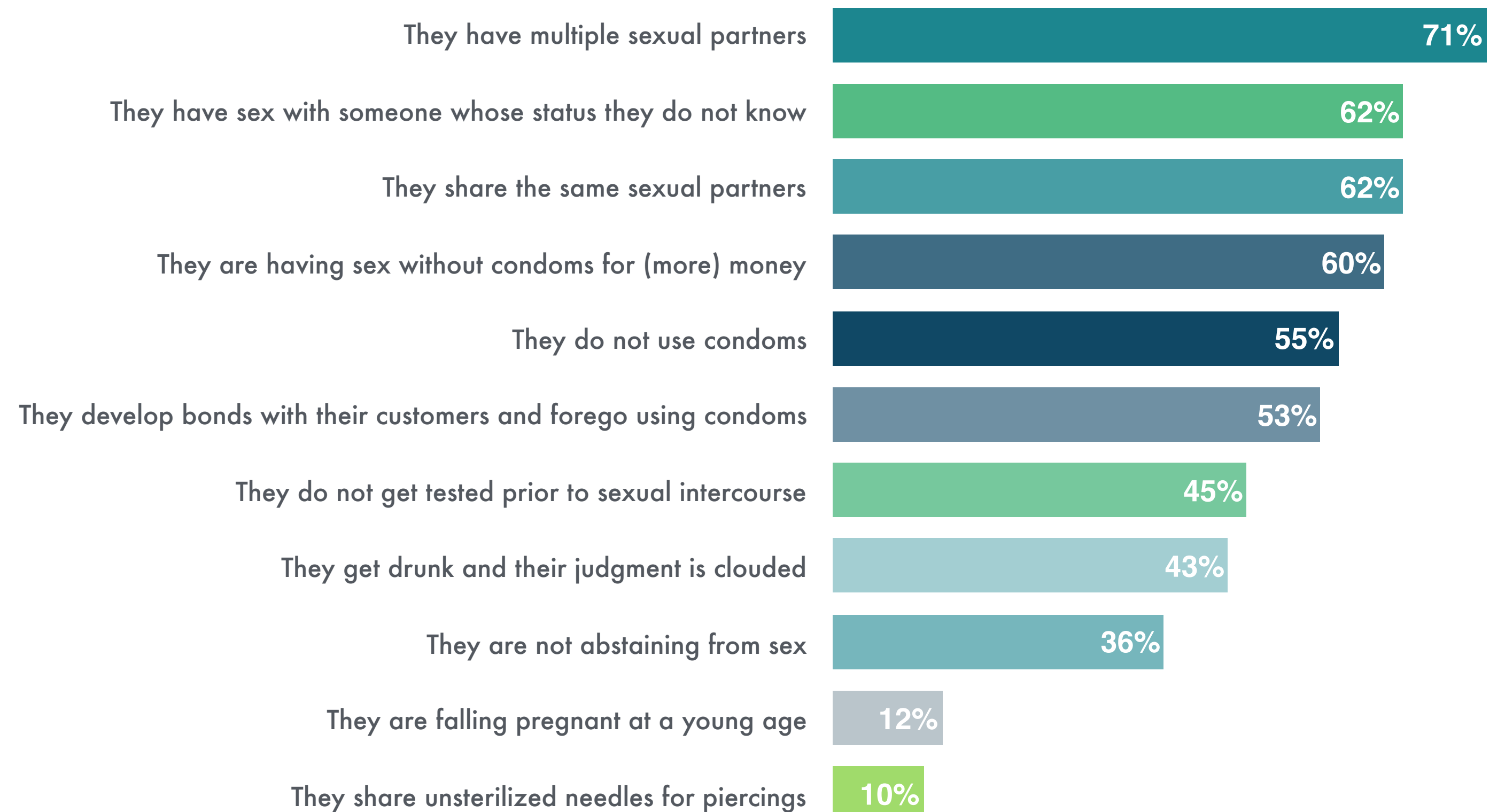
- They share unsterilized needles for piercings (10%)

SOCIAL

- They get drunk and their judgement is clouded (43%)

Q10.5 Why do you feel that the people you engage with daily are at risk of contracting HIV? (n=92) [Multiple Answer]

** Asked only if participants responded yes to Q10.4 "Do you feel the people you engage with daily are at risk of contracting HIV?"*

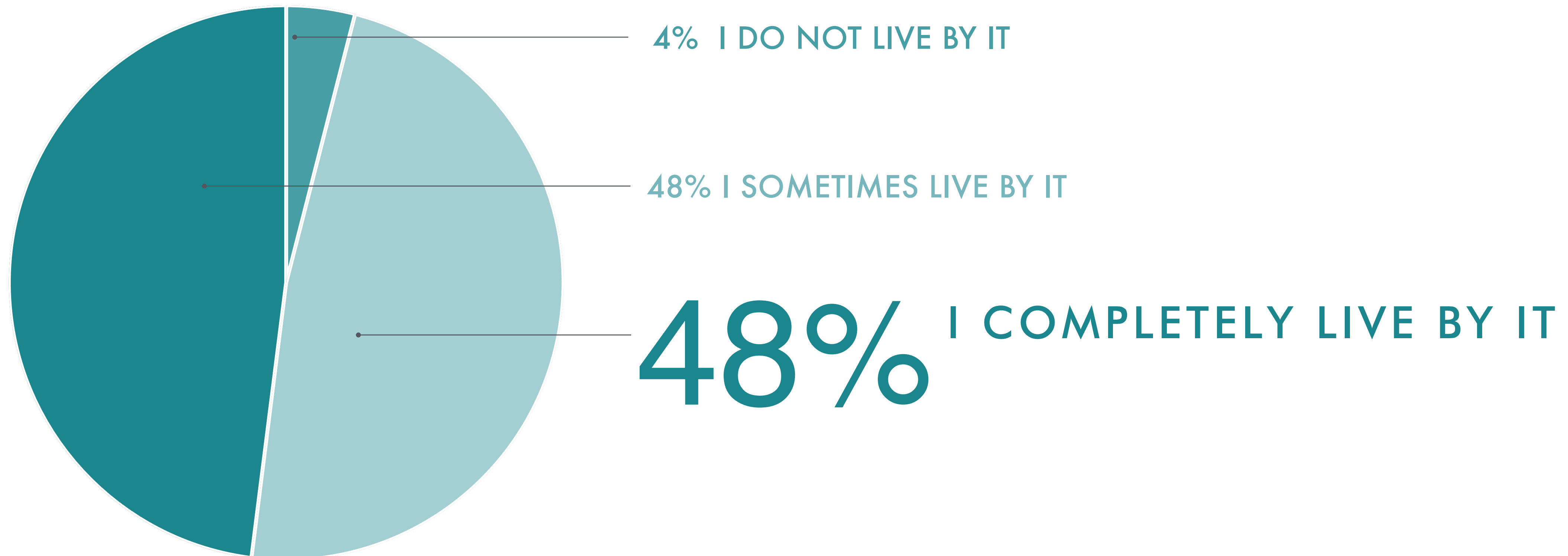


Answers not depicted, (<10%) of respondents answered:

They share sharp objects with an HIV positive person without knowing their status (9%); They get into fights which may expose them to infected blood (8%); They donate blood (7%); They believe in myths (7%); They do not use preventative measures (1%); Lack of knowledge on preventative measures (0%); Their judgement is clouded when they inject drugs (0%); They do not use PrEP (0%); They share needles when injecting drugs (0%); They are influenced by their environment (0%)

CONCEPT OF PREVENTION

Q6.3 How strongly do you live by the concept of prevention is better than cure i.e., you take preventative measures to avoid certain scenarios?

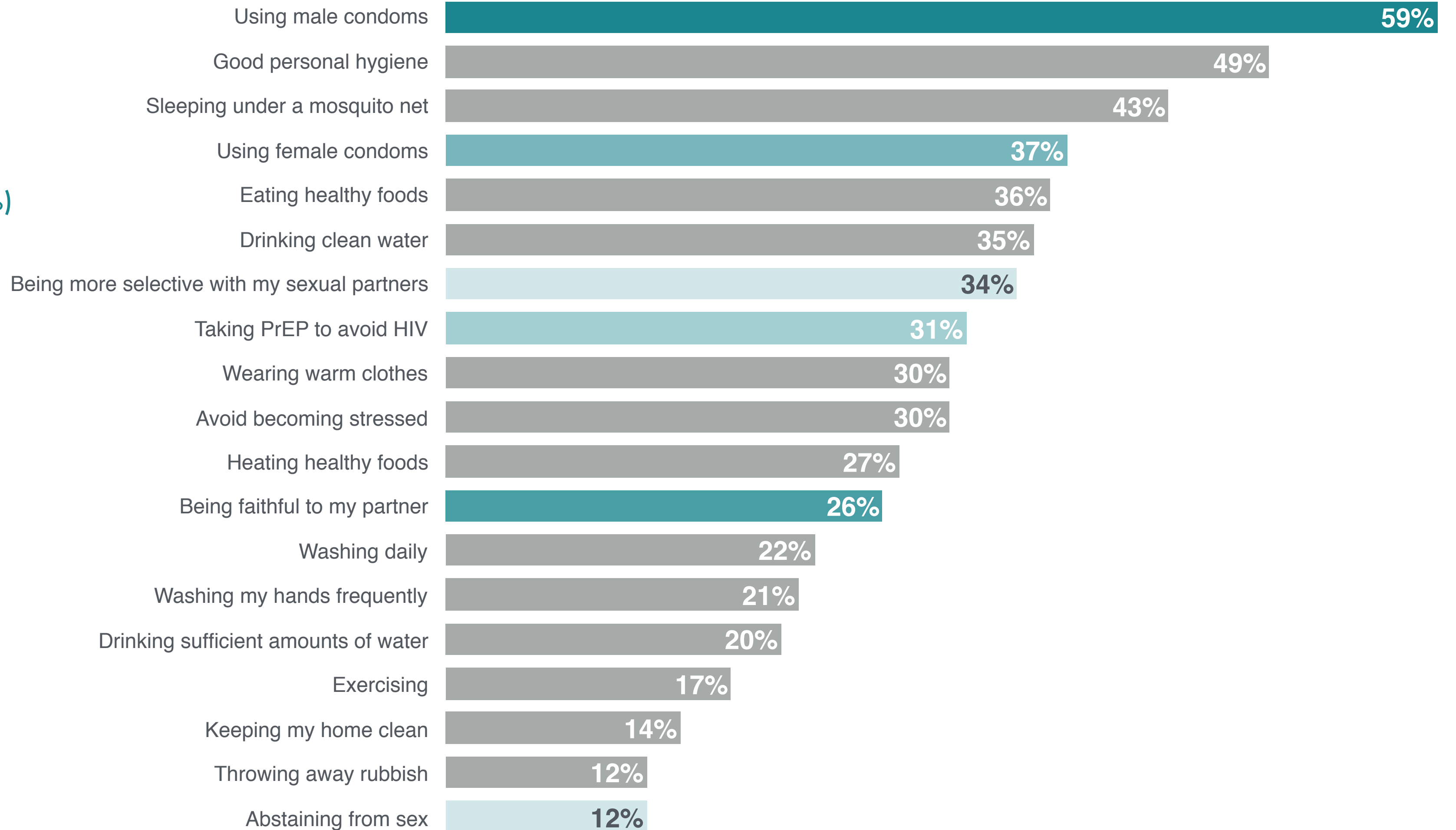


PREVENTATIVE BEHAVIORS

Q6.4 Which of these do you practice in your life as preventative measures? (N=100) [Multiple Answer]

SEXUAL HEALTH

- Using male condoms (59%)
- Being faithful to my partner (26%)
- Using female condoms (37%)
- Taking PrEP to avoid HIV (31%)
- Being more selective with my sexual partners (34%)
- Abstaining from sex (12%)

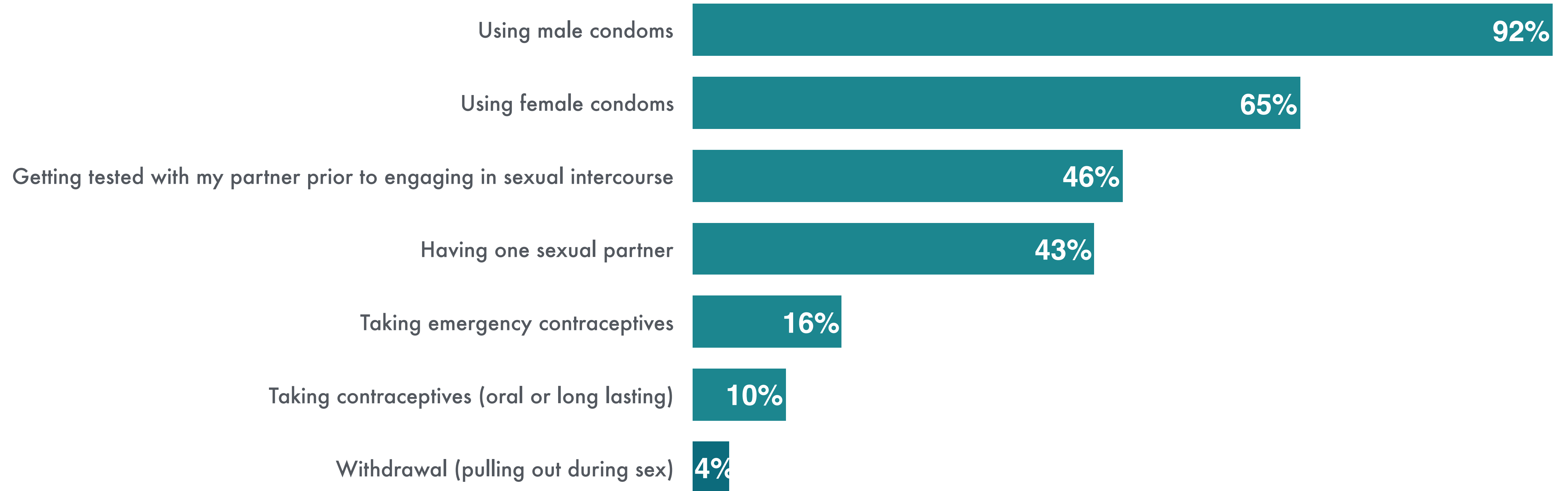


Answers not depicted (<12%) of respondents answered:

Wearing safety gear (7%); Staying away from unventilated areas (7%); Religious practices (6%); Flushing the toilet (6%); Eating foods with little or no chemicals (non-GMO) (3%); Planting more trees (2%); Traditional/cultural practices (1%); Do not engage in risky sexual behavior (1%); Taking PEP to avoid HIV (0%); Live responsibly (0%); Getting vaccinated (0%); Using protection in general (0%); Use lubrication (0%); Taking ARV's on time (0%); Taking medication on time (0%); Only have one sexual partner (0%); Knowing my partner's HIV status (0%); Going for regular checkups (0%); Avoid sharing syringes (0%); Avoid drugs (0%); Avoid consuming alcohol (0%); Avoid bad company (0%)

DEFINITION OF SAFE SEX

Q10.12 What does safe sex mean to you?
(n=100) [Multiple Answer]

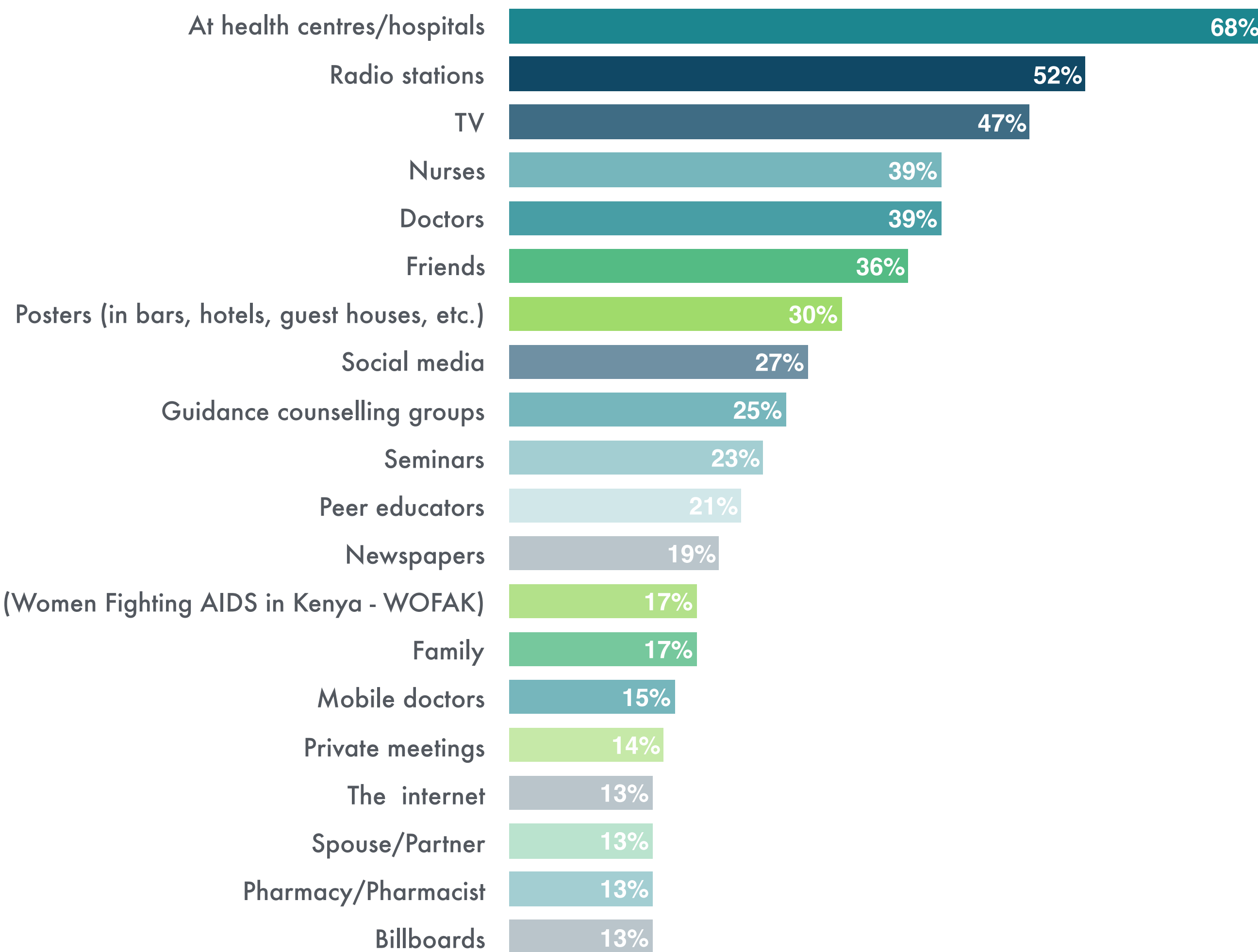
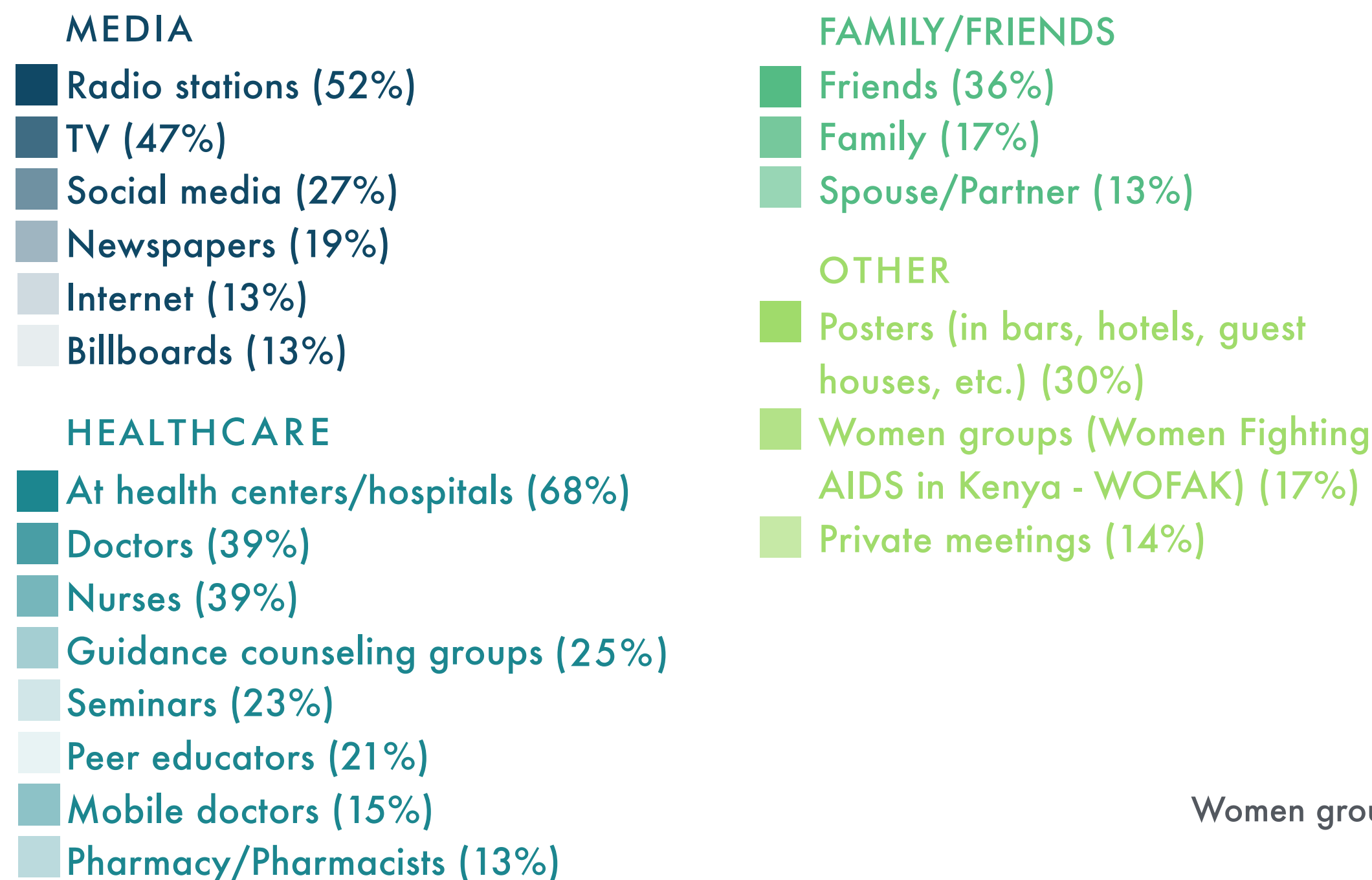


Answers not depicted, (<4%) of respondents answered:
Taking PEP and PrEP (1%); Using lubrication (0%); Abstaining (0%)

SOURCES OF SEXUAL HEALTH INFORMATION

Q10.1

Where do you and the people you engage with daily get information about healthy sexual practices and the prevention of HIV transmission? (N=100) [Multiple Answer]



Answers not depicted, (<13%) of respondents answered:

Community talks (11%); Door to door campaigns (9%); Community business organizations / NGO's e.g. Galck (9%); Talks at schools and campuses (8%); Leaflets (8%); Social gatherings with the youth (7%); Churches (7%); Chama groups (money saving groups) (5%); Religious leaders (4%); Roadshows (3%); Instant messenger APPS (WhatsApp) (3%); At crusade meetings (2%); Support groups (0%); LVCT Health (0%)



HEALTH AND PREVENTION

COMMUNICATIONS IMPLICATIONS

COMMUNICATIONS IMPLICATIONS

HELP HER TAKE BACK CONTROL OF HER SEXUAL HEALTH

Given that many FSW feel that they do not always have control over their sexual health, it is understandable that they are not fully convinced that prevention is better than cure. Educating the audience on how PrEP can help them take back control by protecting themselves from HIV may help shift this attitude.

PrEP: A HIGHER STANDARD OF PROTECTION

92% of FSW equate the concept of “safe sex” with condoms. 58% are still concerned with contracting HIV. This data reveals an opportunity to communicate that the combined use of condoms and PrEP are far more effective an HIV prevention strategy because PrEP provides an additional layer of protection.

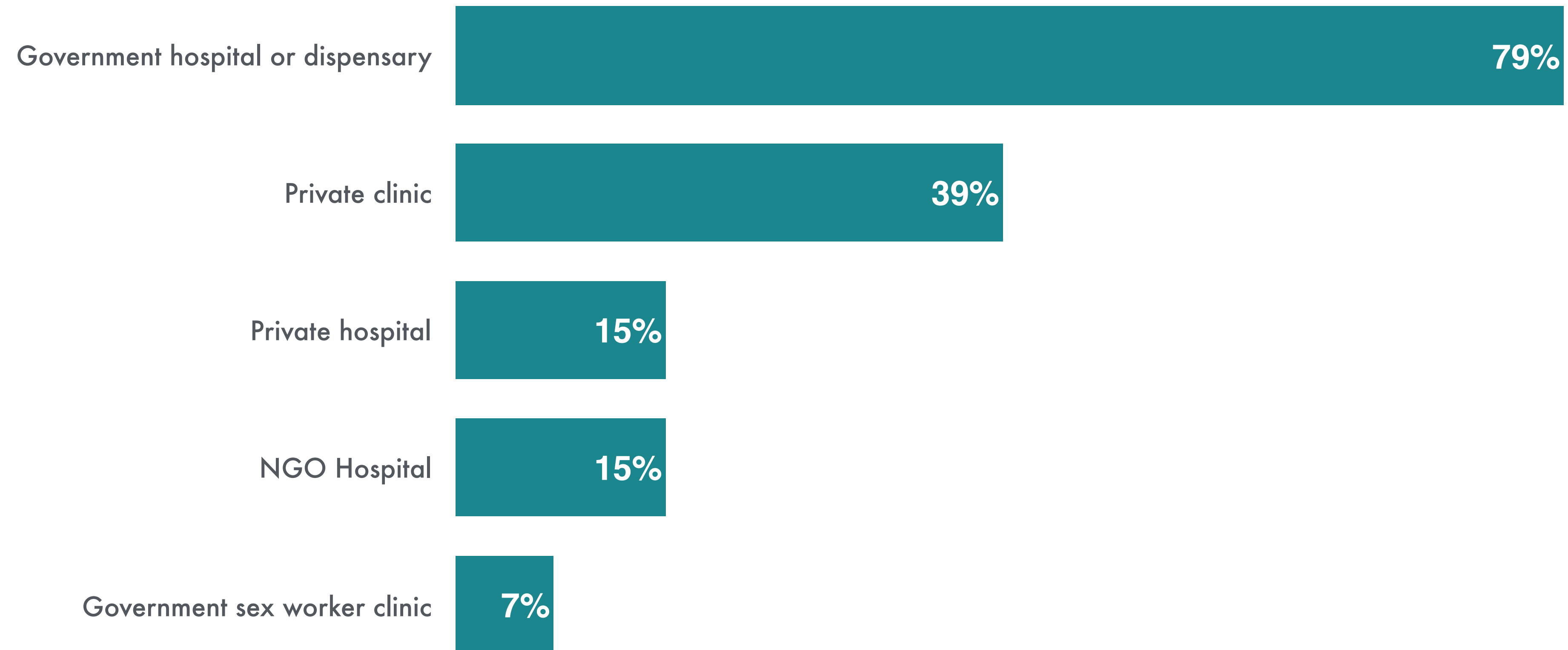


HEALTHCARE

SOURCES OF HEALTHCARE

Q7.1

Where do you usually go for healthcare services? (N=100) *[Multiple Answer]*



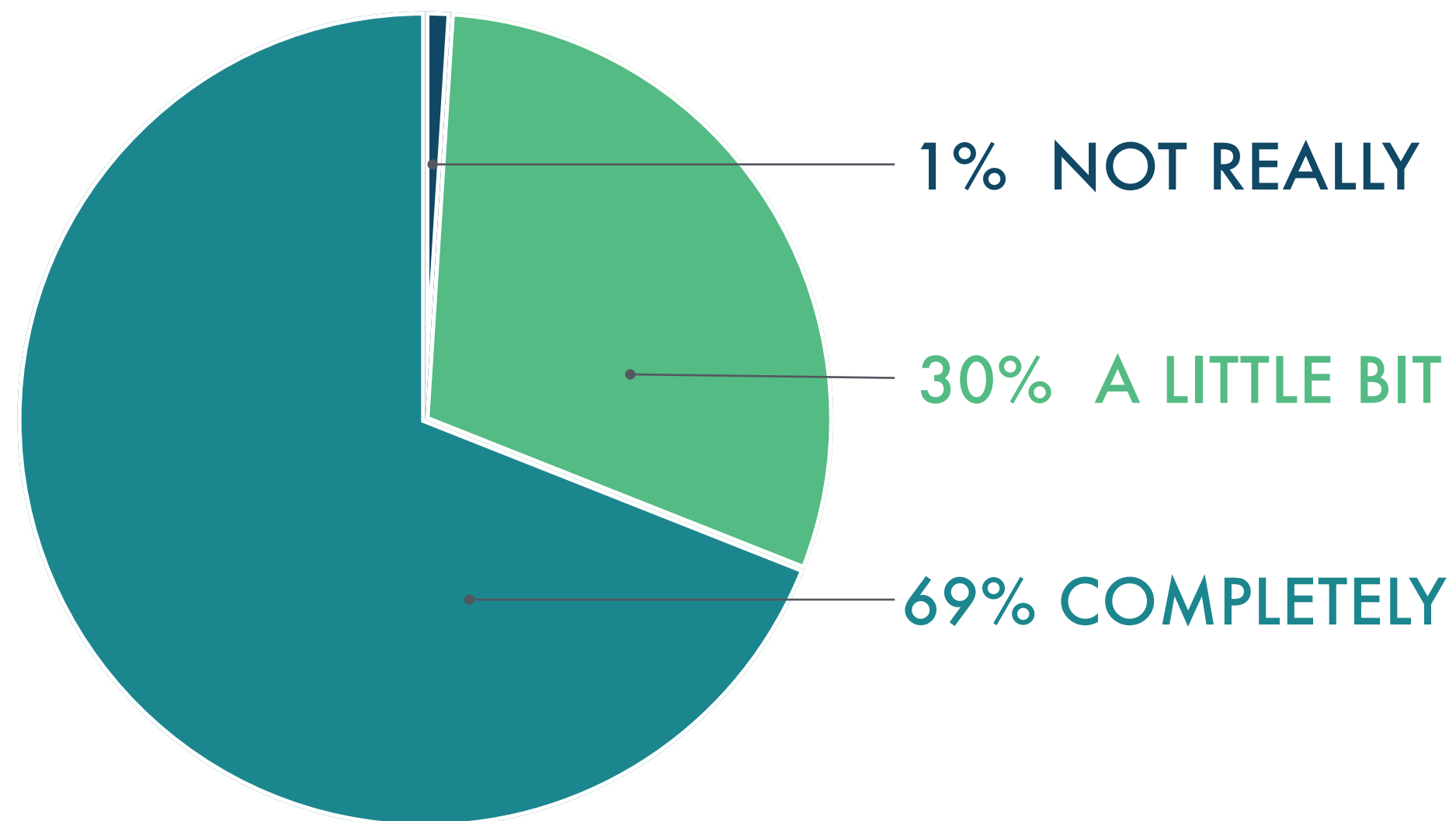
Answers not depicted, (<7%) of respondents answered:

Private health care centre (4%); Mission hospital (3%); Drop-in centre or shelter (3%); None (1%); Mobile clinic (1%)

PERCEPTIONS OF HEALTHCARE SOURCES

Q7.15 Do you trust the health services at the healthcare center you visit to give you safe and quality care? (n=99) [Multiple choice]

TRUST

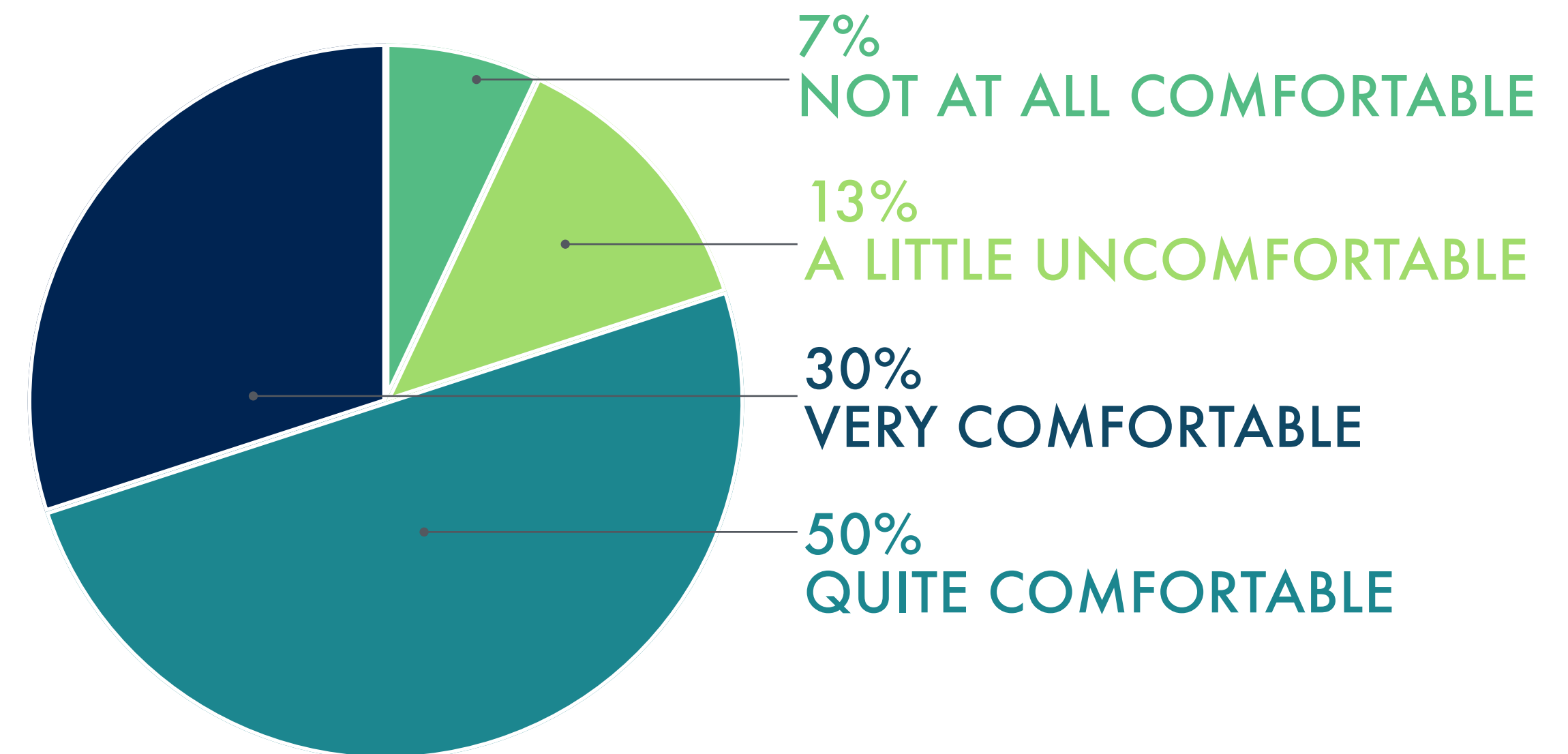


Answers not depicted, (0%) of respondents answered:

Not at all

Q7.7 How comfortable (at ease) do you feel visiting the healthcare center? (n=99) [Multiple choice]

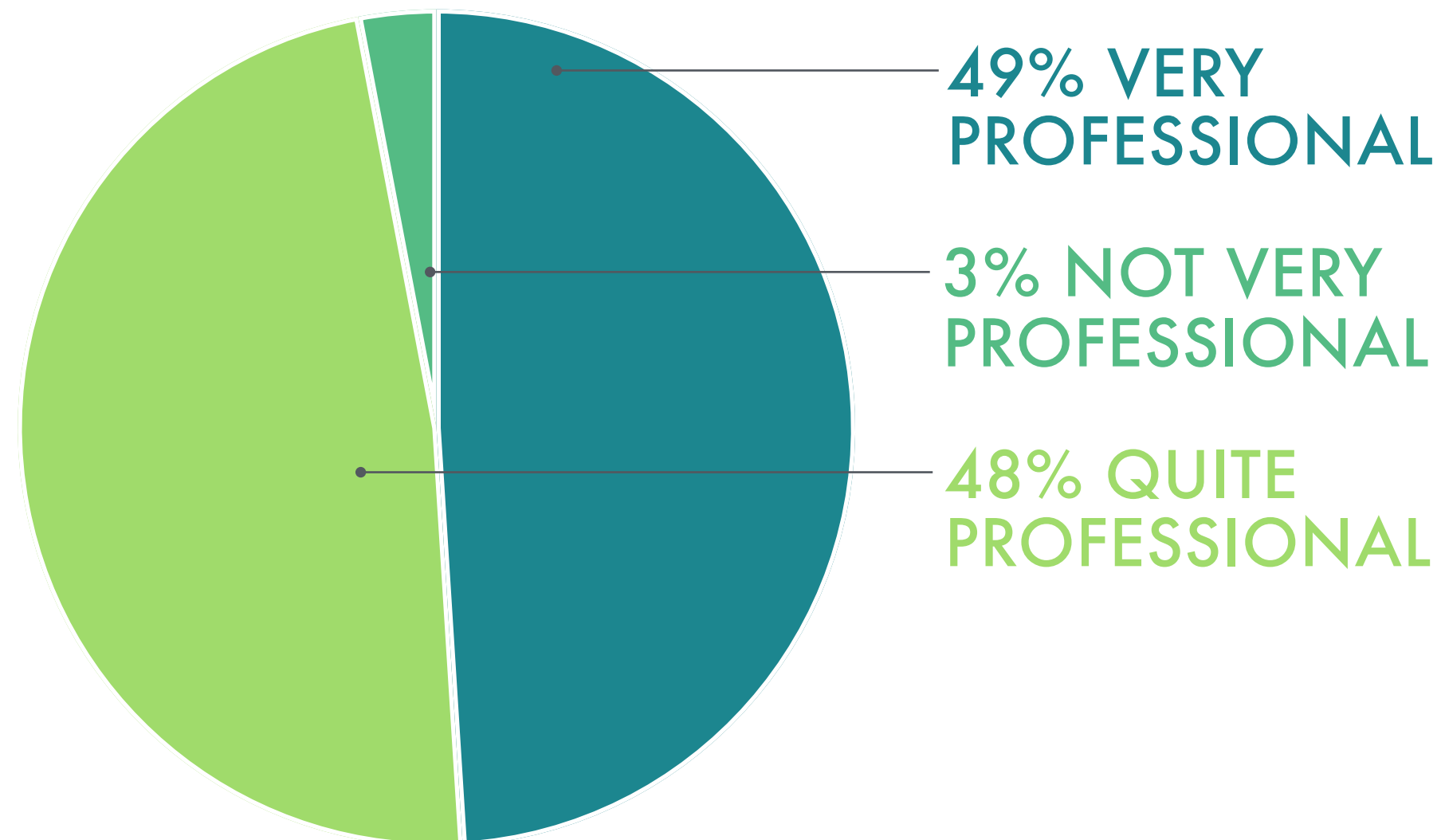
COMFORT



PERCEPTIONS OF HEALTHCARE PROVIDERS

Q7.14 Would you describe the doctors and nurses and other staff at the healthcare center that you go to as being...? (n=99) [*Multiple choice*]

PROFESSIONALISM

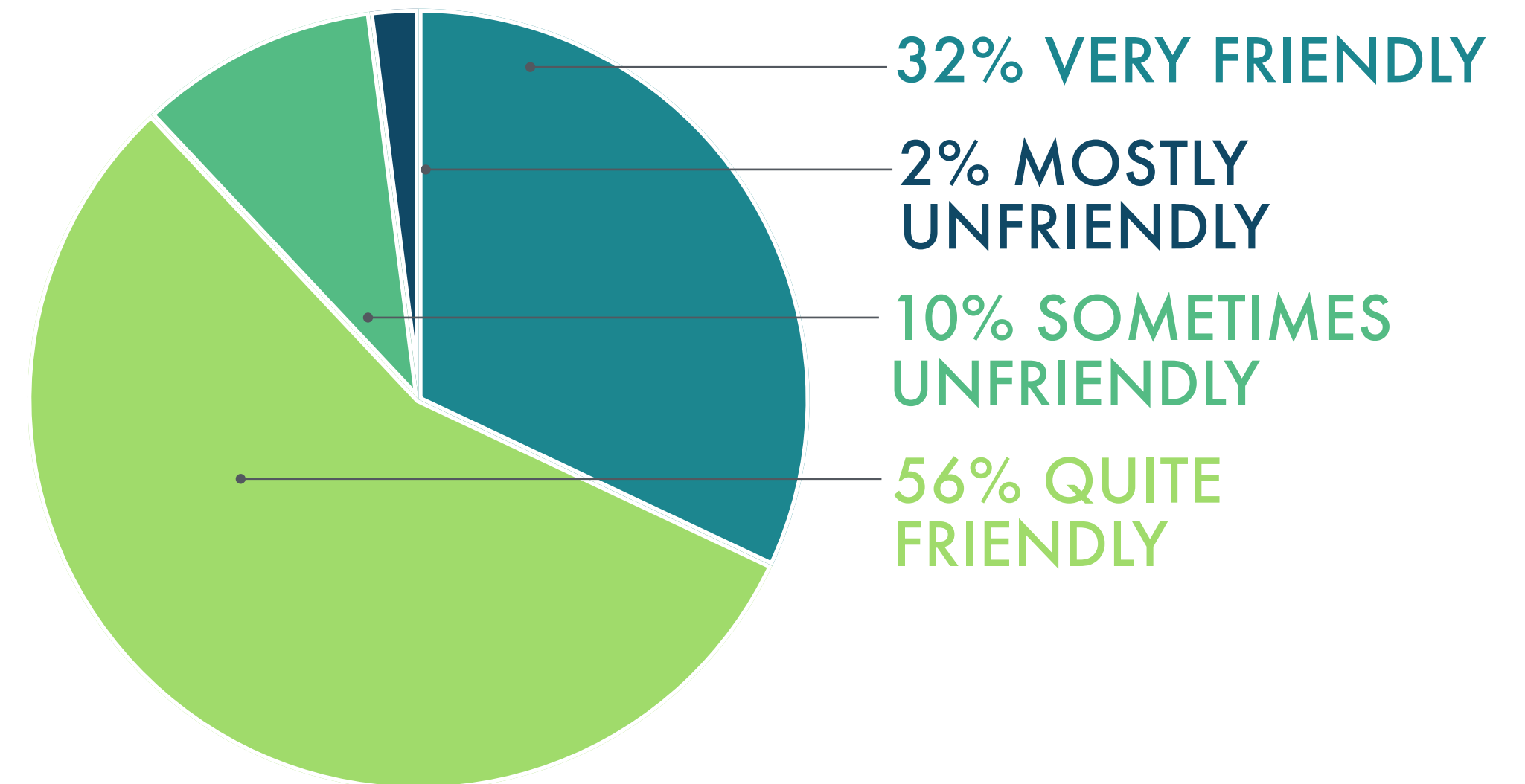


Answers not depicted, (0%) of respondents answered:

Not at all professional

Q7.13 Would you describe the doctors and nurses and other staff at the healthcare center that you go to as being...? (n=99) [*Multiple choice*]

FRIENDLINESS





STIGMA AND VICTIMIZATION

STIGMA AND VICTIMIZATION

Q9.3 Do you personally experience victimization or stigmatization by people in your own circle? (N=100)

68%

PERSONALLY EXPERIENCE
STIGMATIZATION OR
VICTIMIZATION

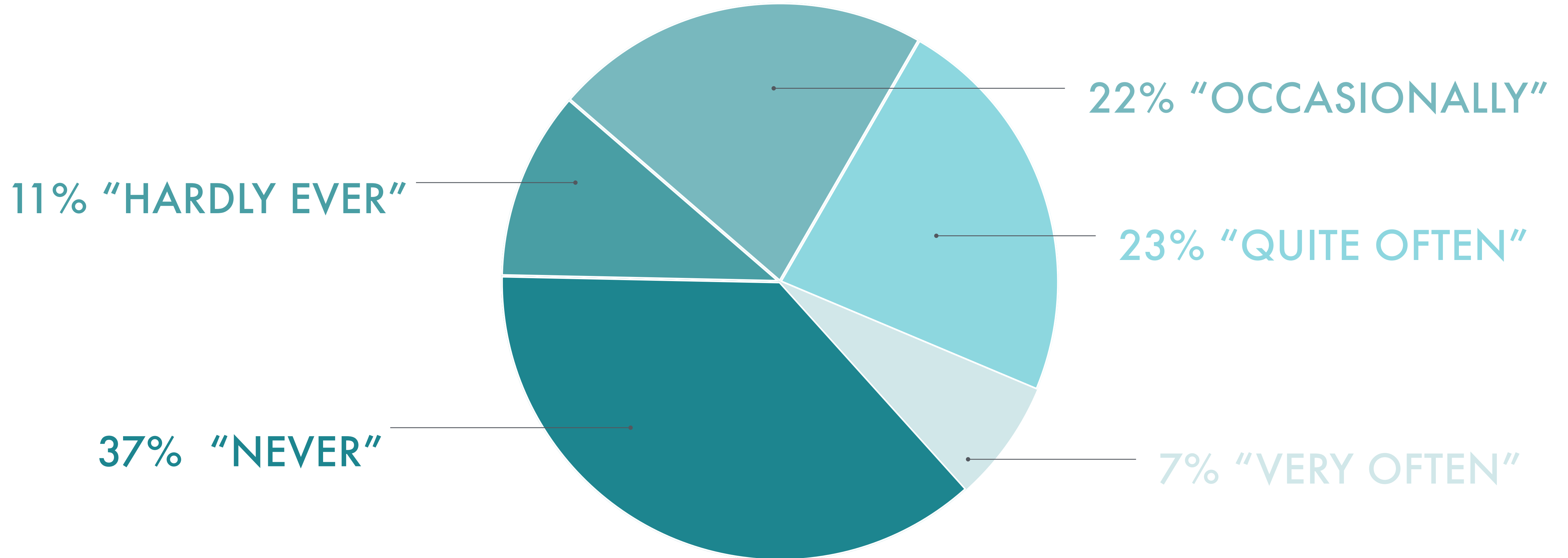
Q9.1 Are any of the people you engage with daily victimized or stigmatized in any way? (N=100)

73%

PERCEIVE THAT THEIR PEERS EXPERIENCE
STIGMATIZATION OR VICTIMIZATION

SEXUAL PRESSURE

Q9.5 Do you ever feel pressure to have sexual intercourse against your will? (N = 100)





STIGMA AND VICTIMIZATION

COMMUNICATIONS IMPLICATIONS

COMMUNICATIONS IMPLICATIONS

SENSITIVE TO STIGMA

A majority of FSW either experienced or perceived other FSW to experience stigma, indicating a high susceptibility to judgement. Communications about PrEP for FSW should take care not to reinforce stigma or otherness, but rather support, lift up, and instill positivity.

A SENSE OF CONTROL

Over half (52%) of the FSW surveyed feel pressured to have sex against their wills. Communications can address maintaining safety and control through PrEP, even in the midst of challenges that come with sex work.



PrEP PERCEPTIONS

PrEP QUESTION SEQUENCE

Before answering questions regarding PrEP, participants were shown the following:

Pre-Exposure Prophylaxis (PrEP) Information Sheet

What is PrEP?

PrEP is a **daily pill** that helps HIV negative people **stay HIV negative**. PrEP reduces your chances of HIV infection by over 90%. If taken correctly as prescribed, PrEP keeps you safe and protected from HIV infection. PrEP is not a vaccine.

Is PrEP for you?

If you are at risk for HIV infection, PrEP is a good option for staying protected. Taking PrEP is a good choice for you if:

- Your **partner is HIV** positive or their HIV status is unknown
- You have **multiple sexual partners**
- You get **STIs often**
- You experience frequent **condom bursts**
- You frequently use **post-exposure prophylaxis**
- You **use alcohol and drugs**, and **have unprotected sex**
- You **inconsistently use condoms** or are unable to negotiate condom use during intercourse with persons of unknown HIV status
- You **inject drugs and share needles** and syringes
- You are in a **sero-discordant relationship** and trying to conceive

How does PrEP work?

If an HIV negative person is exposed to any sexual fluids from an HIV-positive person, PrEP can help to keep the virus from causing a lasting infection by preventing it from establishing itself in your body. It is more effective when used with condoms, safer sex practices, and other HIV prevention methods. There are a few things to know:

- As long as there is a risk of HIV infection PrEP should be taken daily.
- PrEP greatly reduces your risk of HIV infection, but does not eliminate the risk nor prevent STIs or unintended pregnancies.
- Condoms can give you additional protection against HIV and other sexually transmitted infections (STIs), even while you take PrEP.

What are the side effects?

Most people taking PrEP do not have any serious side effects. Some people get headaches, nausea, vomiting, rash, abdominal discomfort and loss of appetite, but they go away after a few weeks.

*Call **1190** for free from a Safaricom line or WhatsApp 0700121121 for further information about PrEP, sexual reproductive health and HIV*

PERCEPTIONS OF PrEP EFFICACY

Q11.4 How well do you believe PrEP would work in preventing HIV transmission? (N=100)

61%

ARE SURE THAT IT WOULD WORK

Answers not depicted:

Unsure that it would work (34%); It would not work (5%)

Q11.10 How likely would you be to use PrEP yourself? (N=100)

76%

WOULD USE PREP*

I DEFINITELY WOULD USE IT (41%)*
I PROBABLY WOULD USE IT (35%)*

Answers not depicted:

I definitely would not use it (8%); I am UNSURE if I would use it (3%); I probably would not use it (1%)

CONCERNS ABOUT PrEP

Q11.7 What are your fears or worries about PrEP? (N=100) [Multiple Answer]

UNPROTECTED SEX

- It will increase the rate of STIs and STDs (47%)
- People using it and having unprotected sex (39%)
- It will increase the rate of unwanted pregnancies (34%)

ADHERENCE

- People will forget to take it (44%)
- Having to use it for the rest of your life (38%)

EFFICACY

- There is still a 10% chance of contracting HIV (43%)
- There is no proof that it works (25%)
- Having to use PrEP in conjunction with a condom is concerning (25%)

SIDE EFFECTS

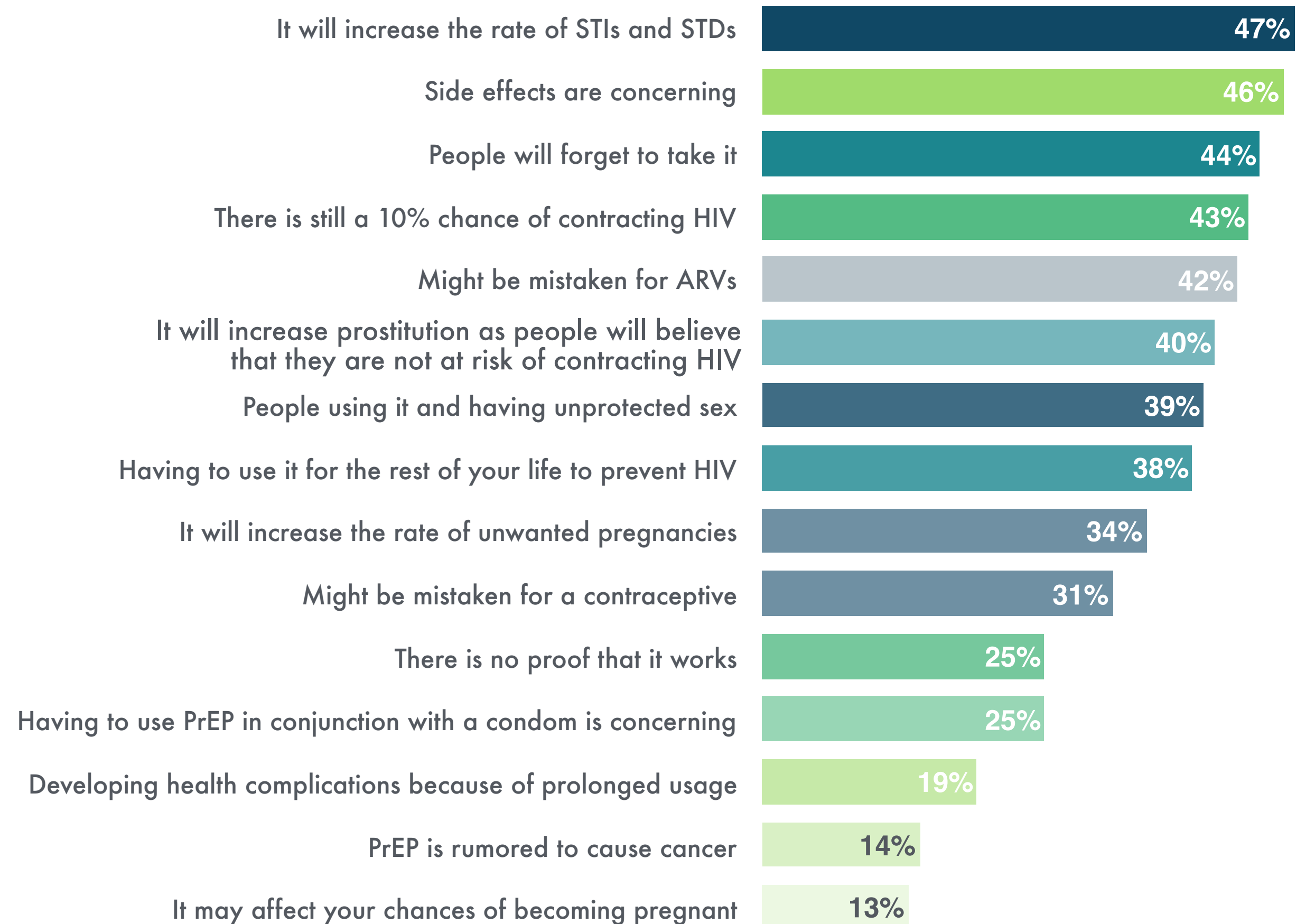
- Side effects are concerning (46%)
- Developing health complications because of prolonged usage (19%)
- PrEP is rumored to cause cancer (14%)
- It may affect your chances of becoming pregnant (13%)

STIGMA

- Might be mistaken for ARVs (42%)
- Might be mistaken for a contraceptive (31%)

COMMERCIAL SEX

- It will increase prostitution as people will believe that they are not at risk of contracting HIV (40%)



Answers not depicted, (<13%) of respondents answered:

Lack of support from family members (8%); Fear of inter-partner violence (6%); PrEP is rumored to cause kidney failure (5%); There is no awareness on PrEP (0%); None (0%); It will not help if you are already infected with HIV (0%); It might not be easily accessible (0%); It might be expensive (0%); Do not always eat regularly and it might affect the way PrEP works (0%); Developing resistance to other medication (0%); Being mistaken for a sex worker (0%); Being judged for using PrEP (0%)

BARRIERS TO PrEP ADHERENCE

Q11.8 What are some of the reasons that may cause someone not to take PrEP every day? (N=100) [Multiple Answer]

AWARENESS

- Not knowing how it works (53%)
- Forgetting to take it (50%)
- Not being aware of it (47%)
- Too drunk to remember to take it (39%)

STIGMA

- Mistaken for ARVs (44%)
- Youth will not be able to purchase it and will be fearful to ask their parents to purchase it for them (12%)

CONVENIENCE

- Not used to taking medication daily (36%)
- Difficult to walk around with medication daily (26%)

NOT NECESSARY

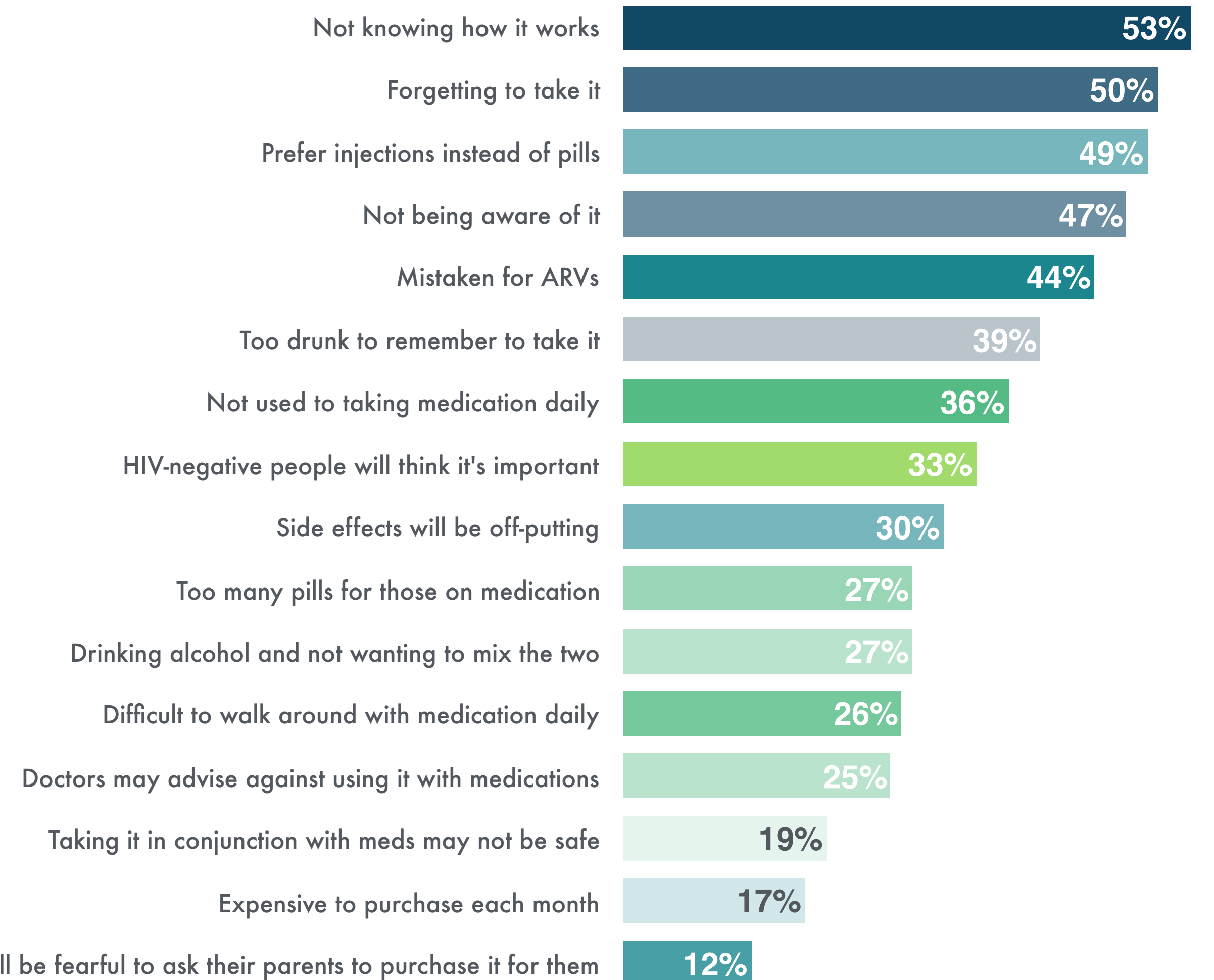
- HIV-negative people will not think it's important (33%)

COMBINING

- Too many pills for those on medication (27%)
- Drinking alcohol and not wanting to mix the two (27%)
- Doctors may not advise using it with medications (25%)
- Taking in conjunction with meds may not be safe (19%)

OTHER

- Prefer injections instead of pills (49%)
- Side effects will be off-putting (30%)
- Expensive to purchase each month (17%)



Answers not depicted, (<12%) of respondents answered:

Not being sexually active (9%); None (3%); No regular food to eat (having to take pill after meals) (1%); No proper shelter (1%); Preferred other methods of prevention (0%); Peer pressure (0%); Myths and misconceptions (0%); Lack of support from friends (0%); Lack of support from family members (0%); It is not easily available (0%); It is not 100% effective (0%); Ignorance (0%); If it does not work (0%); Fear that the drug comes from a Western country (0%); Due to drug abuse (0%); Because of stigmas attached to it (0%)

PROBLEMS PrEP CAN SOLVE

Q11.6 What problems do you think PrEP would solve in the lives of people you engage with daily?
(N=100) [Multiple Answer]

POPULATION BENEFIT

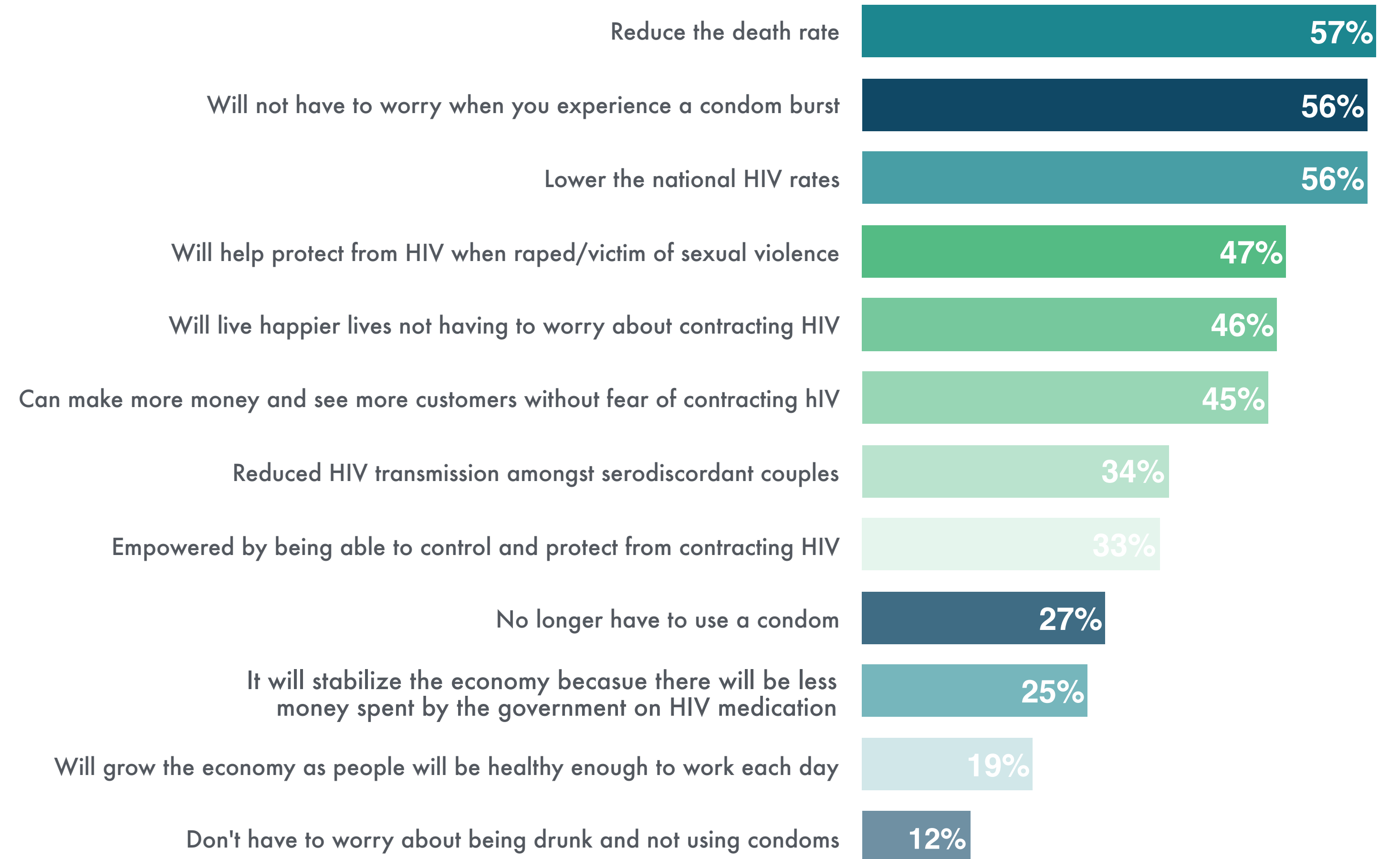
- Reduce death rate (57%)
- Lower national HIV rates (56%)
- Will stabilize the economy because there will be less money spent by the government on HIV medication (25%)
- Will grow economy as people will be healthy enough to work each day (19%)

NO NEED FOR CONDOM

- Will not have to worry when you experience condom burst (56%)
- No longer have to use a condom (27%)
- Don't have to worry about being drunk and not using a condom (12%)

PROTECT FROM HIV

- Will help protect from HIV when raped/victim of sexual violence (47%)
- Will live happier lives not having to worry about contracting HIV (46%)
- Can make more money and see more customers without a fear of contracting HIV (45%)
- Reduced HIV transmission among serodiscordant couples (34%)
- Empowered by being able to control sexual health and protect from contracting HIV (33%)

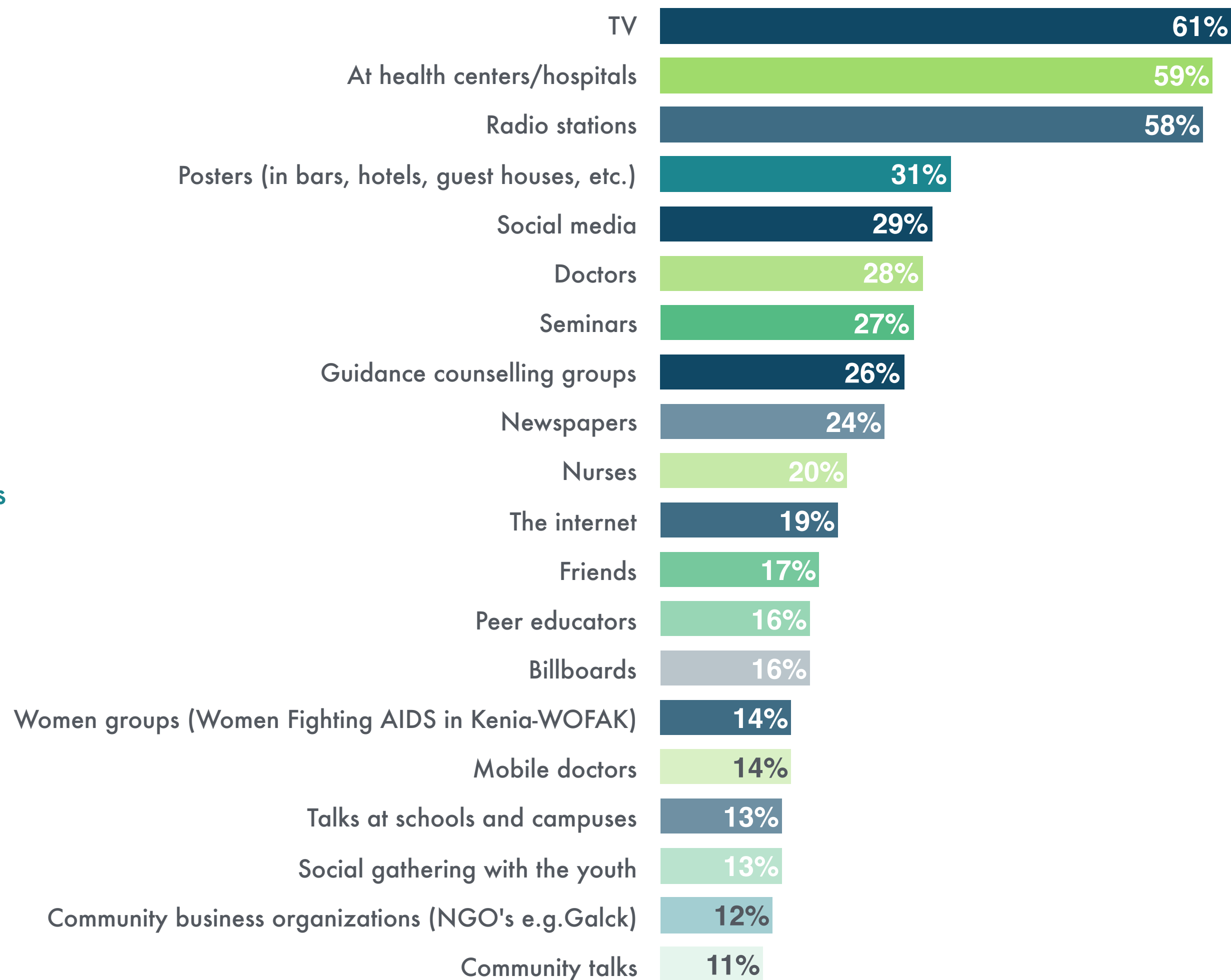
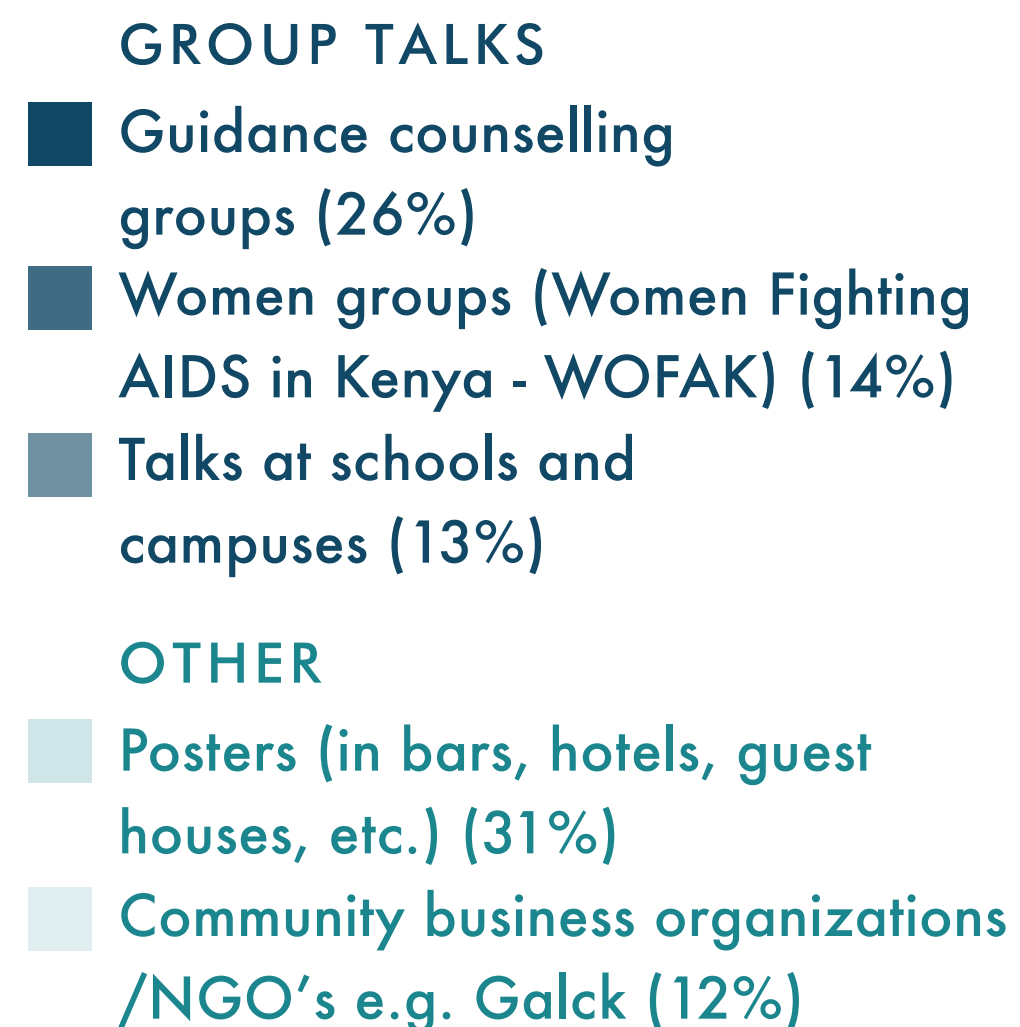
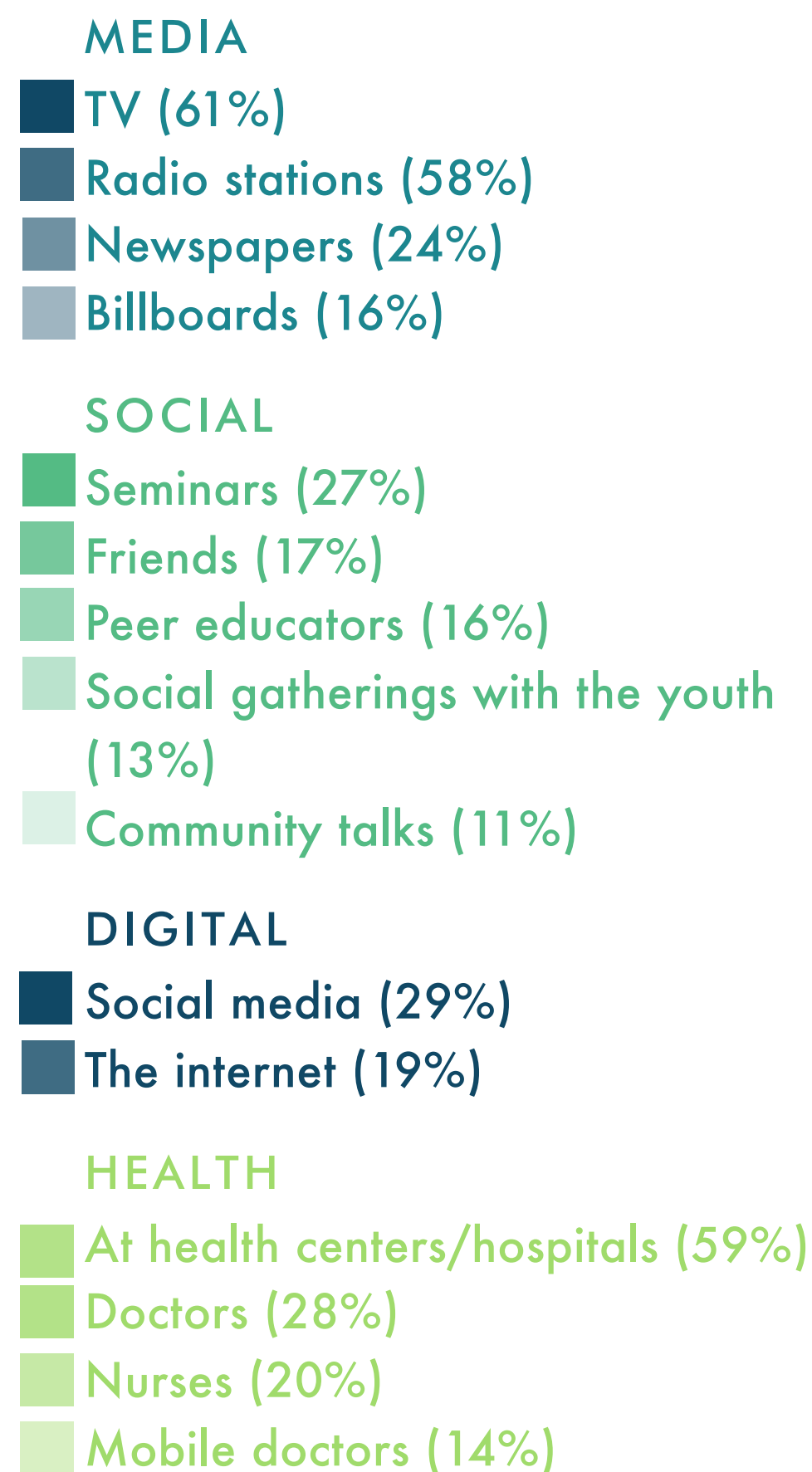


Answers not depicted, (<12%) of respondents answered:

None (2%); We can demonstrate our shared commitment to our health (one person on ARV's and the other on PrEP) which will strengthen our relationship (0%); People will be proud of their status (0%); My partner and I can live normally again (0%); Improves the health of people (0%); Immunity will be increased (0%); Brings hope of living (0%)

COMMUNICATION

Q11.12 How do you think PrEP should be communicated to people like yourself in Kenya? (N=100) [Multiple Answer]



Answers not depicted, (<11%) of respondents answered:

Roadshows (10%); Spouse / Partner (9%); Private meetings (9%); Leaflets (8%); Pharmacy / Pharmacists (7%); Family (6%); Religious leaders (5%); Instant messenger APPS (WhatsApp) (3%); Door to door campaigns (3%); At crusade meetings (3%); Churches (2%); Sex worker hot spots (1%); None (0%)



PrEP PERCEPTIONS

COMMUNICATIONS IMPLICATIONS

COMMUNICATIONS IMPLICATIONS

INCREASE KNOWLEDGE AND UNDERSTANDING OF PREP

Though 76% of FSW surveyed are likely to take PrEP, many reported possible challenges in taking it correctly. 53% reported potentially not taking it every day because of lack of understanding how it works and 50% reported potentially forgetting to take PrEP.

PrEP OFFERS A SENSE OF SECURITY

FSW responded that PrEP removes worry about condom bursts (56%) and will protect them in the event of sexual abuse (47%). With these concerns top of mind among FSW, it is recommended to reinforce the role of security that PrEP can provide.



SUMMARY OF IMPLICATIONS

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MOTIVATIONS

PROTECTING WHAT MATTERS MOST—HER LIFE

Of the FSW surveyed, their life was of highest value to them, followed by the ability to support themselves and their family. Positioning PrEP as a foundational element to achieving such desires could be an effective message to engage the audience.

A DOSE OF STABILITY

The majority of the challenges FSW are facing are specific to the hardships of sex work, with 49% focused on being free of it. Noting their top aspirations are being able to start their own business, saving money and to be in good health, they seek stability in a life where they put themselves at risk every day. PrEP can help them with this by eliminating the very daunting risk of HIV.

HEALTH AND PREVENTION

HELP HER TAKE BACK CONTROL OF HER SEXUAL HEALTH

Given that many FSW feel that they do not always have control over their sexual health, it is understandable that they are not fully convinced that prevention is better than cure. Educating the audience on how PrEP can help them take back control by protecting themselves from HIV may help shift this attitude.

PrEP: A HIGHER STANDARD OF PROTECTION

92% of FSW equate the concept of “safe sex” with condoms. 58% are still concerned with contracting HIV. This data reveals an opportunity to communicate that the combined use of condoms and PrEP are far more effective an HIV prevention strategy because PrEP provides an additional layer of protection.

SUMMARY OF IMPLICATIONS

STIGMA AND VICTIMIZATION

SENSITIVE TO STIGMA

A majority of FSW either experienced or perceived other FSW to experience stigma, indicating a high susceptibility to judgement. Communications about PrEP for FSW should take care not to reinforce stigma or otherness, but rather support, lift up, and instill positivity.

A SENSE OF CONTROL

Over half (52%) of the FSW surveyed feel pressured to have sex against their wills. Communications can address maintaining safety and control through PrEP, even in the midst of challenges that come with sex work.

PREP PERCEPTIONS

INCREASE KNOWLEDGE AND UNDERSTANDING OF PREP

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These findings were developed using data collection led by the OPTIONS consortium. This market research is not intended to be generalizable. For information about PrEP demand creation activities, please visit PrEPWatch.org



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