

Association between contraceptive use and PrEP uptake and continuation in adolescent girls and young women in Cape Town, South Africa.

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Background

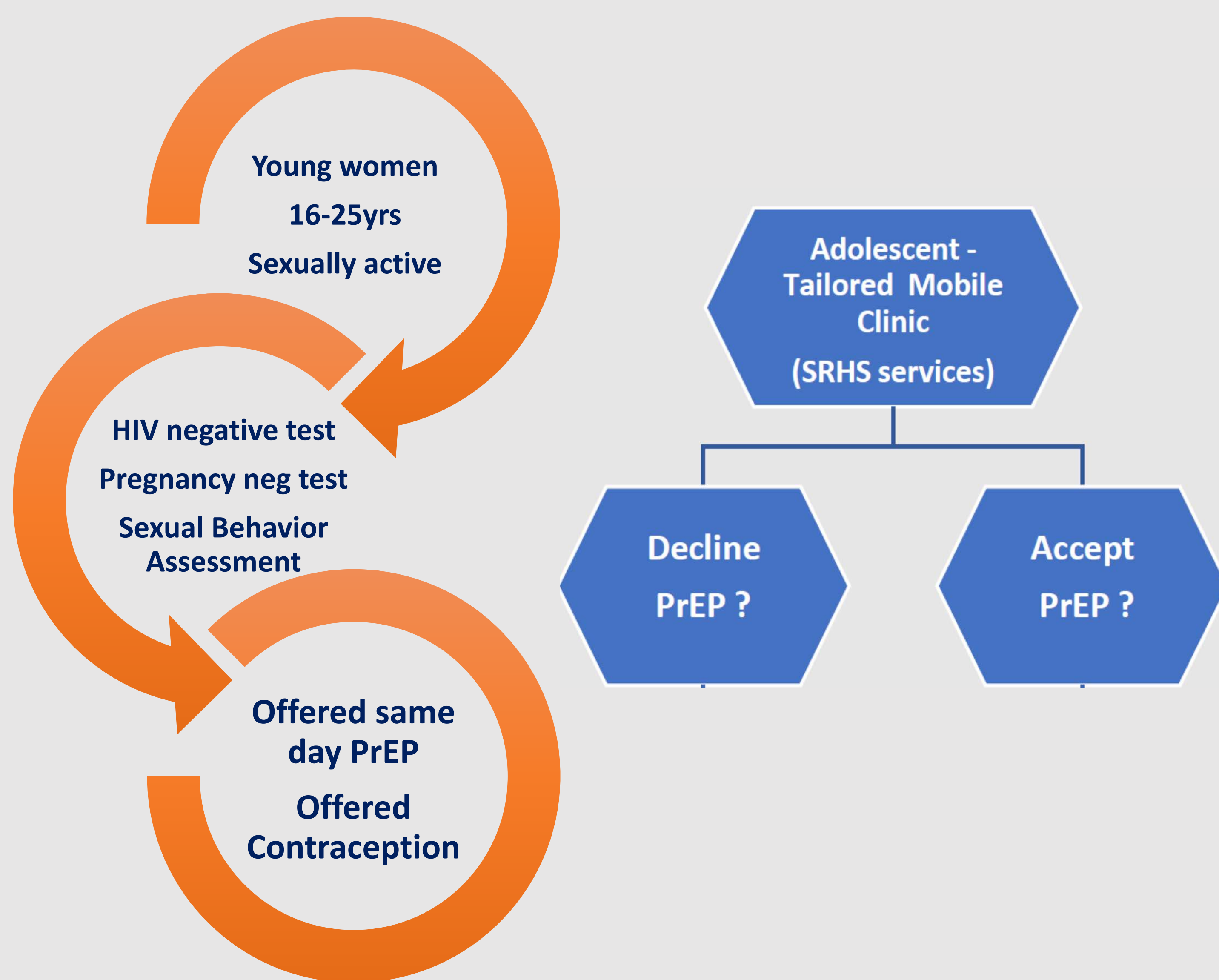
Oral pre-exposure prophylaxis (PrEP) has the potential to diminish HIV acquisition and AIDS-related death among adolescent girls and young women (AGYW), a key population in the HIV epidemic. Many have called for PrEP implementation to be integrated into reproductive health services as both contraception and PrEP offer prevention controlled by women during time periods of need. We hypothesized that contraceptive use was associated with PrEP uptake and continuation in young women accessing sexual and reproductive health services (SRHS) from a mobile clinic.

Methods

The POWER (Prevention Options for Women Evaluation Research) demonstration project was implemented to determine whether AGYW at risk for HIV are motivated to start PrEP and what the preferable mode of distribution could be. Sexual reproductive health service including HIV testing, hormonal contraception (oral, injectable and implant), and PrEP was offered to all sexually active AGYW ages 16-25 accessing the Tutu Teen Truck, an adolescent-friendly mobile clinic servicing limited-resource high disease-burden community in Cape Town, South Africa.

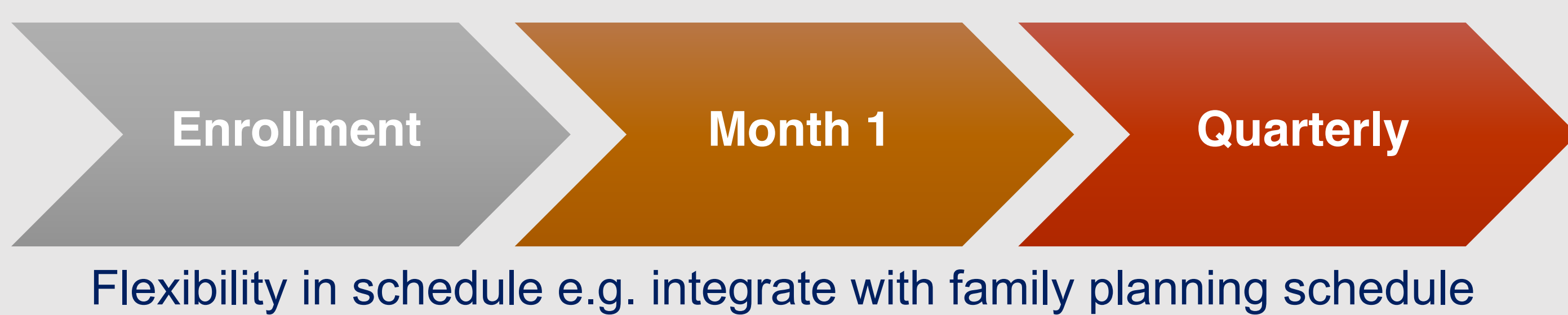


All AGYW visiting the mobile clinic are invited to view a promotional video, education women about the effectiveness of PrEP For HIV prevention.



Chi-squared analysis was performed to explore the potential association between contraceptive use (method other than condoms) in AGYW with their PrEP uptake and continuation.

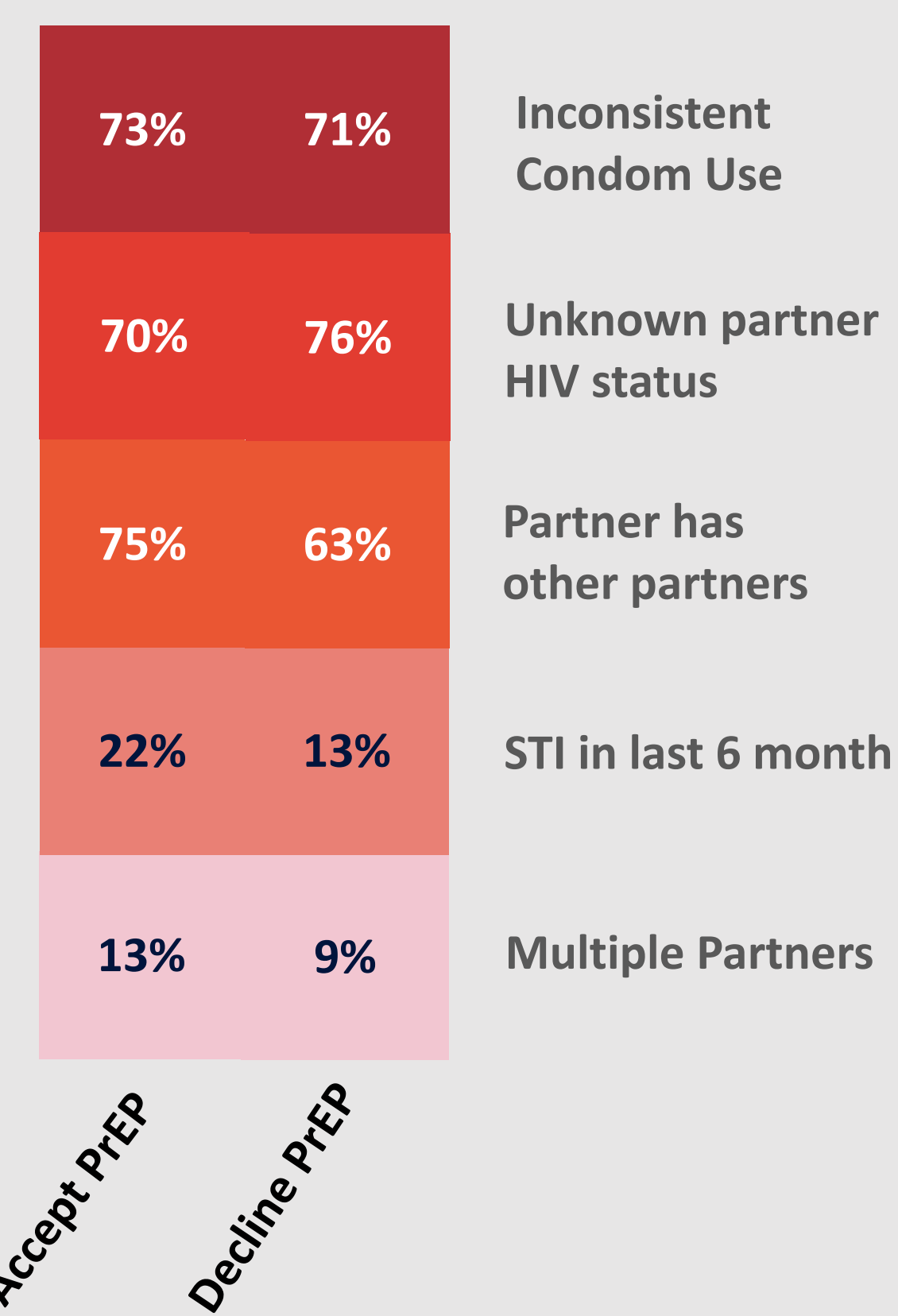
PrEP visit schedule



Results

From June 2017 - October 2018, 1096 AGYW accessed SRHS in which PrEP was offered to all and 31% (n=341) initiated PrEP on the same day.

3 Average number of HIV risk factors reported in AGYW lives

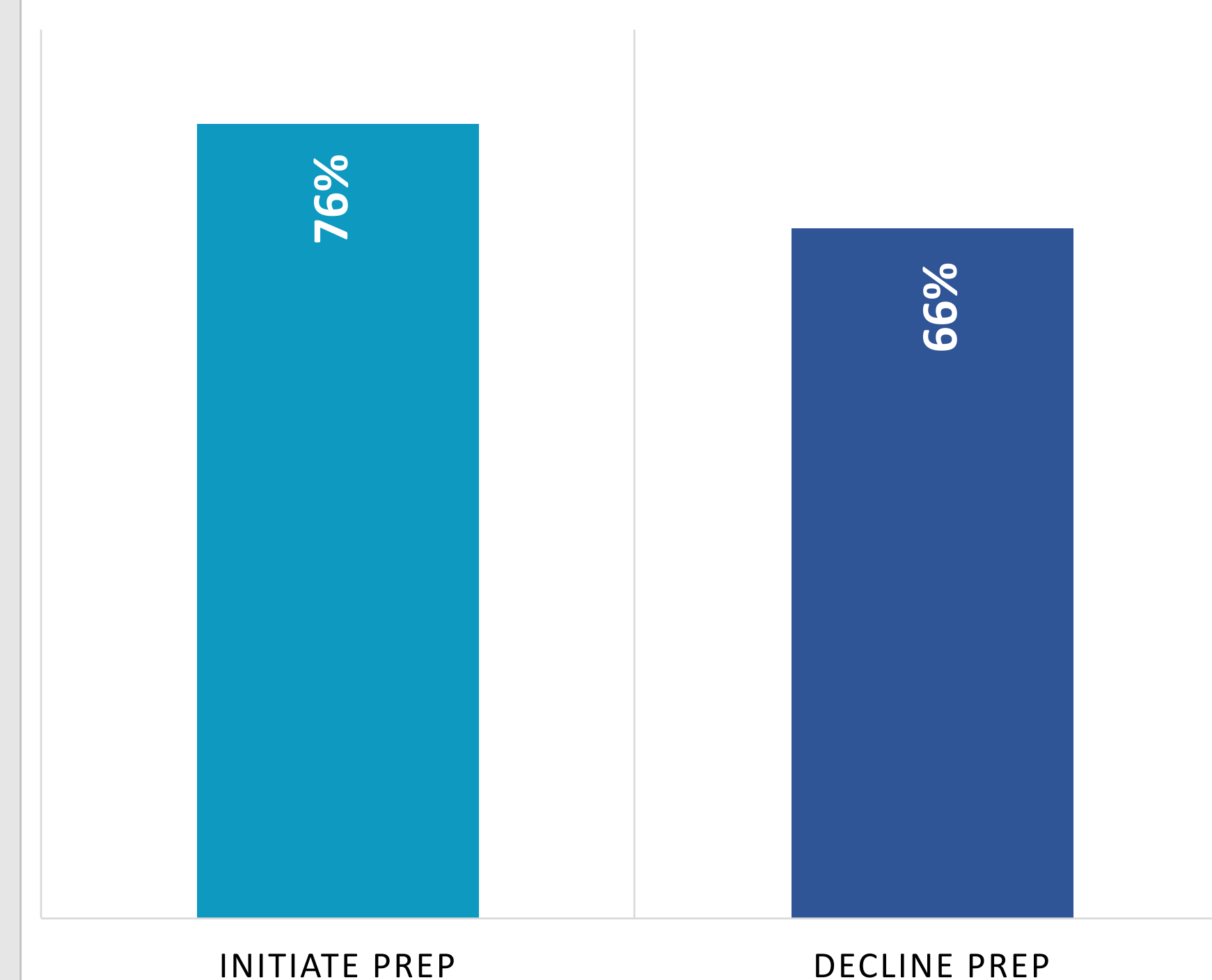


31% eligible YW starting PrEP

19 median age of sample

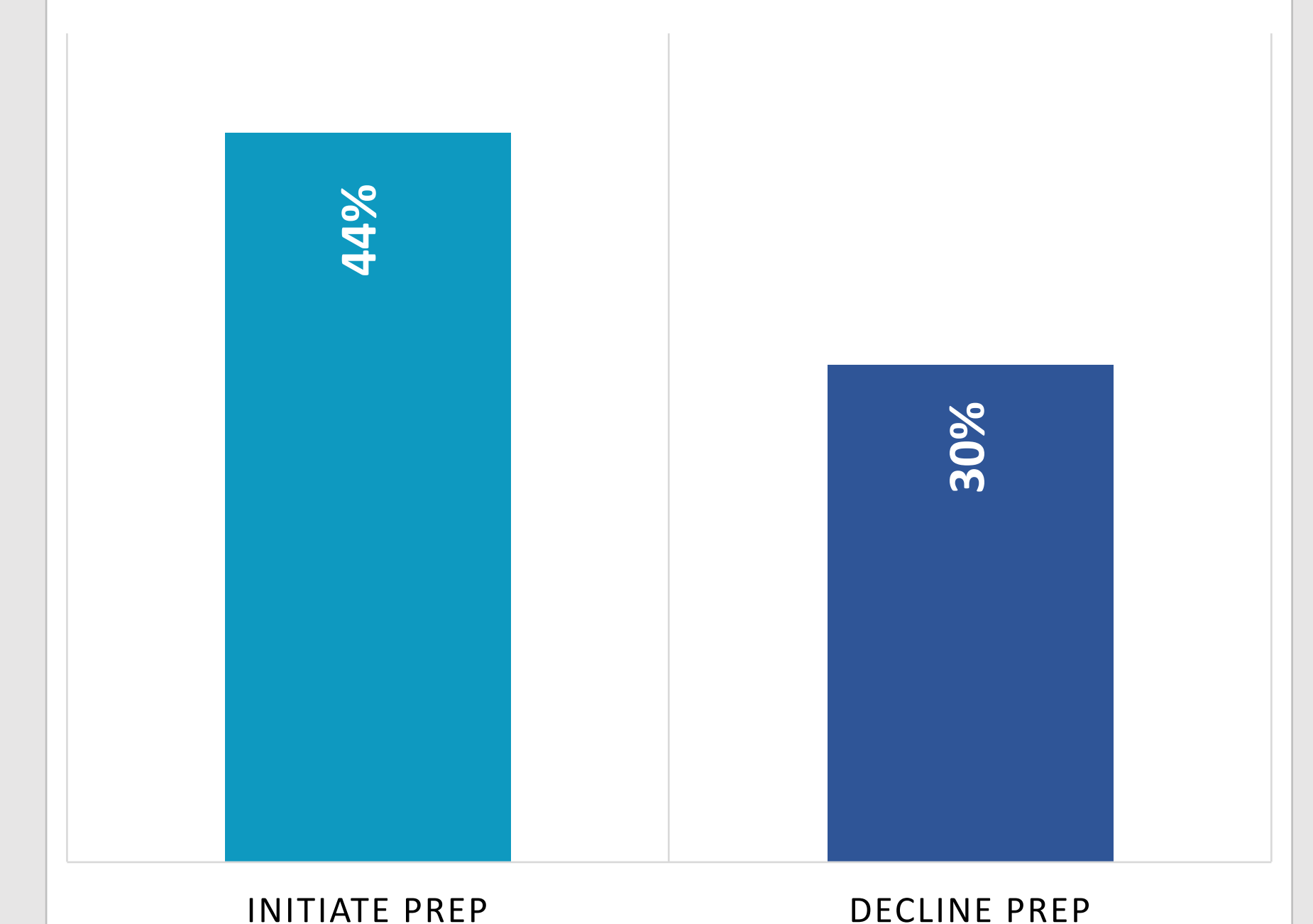
16 mean age of sexual debut

AGYW ON CONTRACEPTION



Young women using contraception were more likely to initiate PrEP on the same day (p=0.001)

SAME-DAY CONTRACEPTION INITIATION



PrEP initiation was significantly associated with contraception initiation on the same day (p=0.003)

Trend towards higher contraception use among AGYW who ever came back for PrEP refill (p=0.10)

Conclusion

- Contraception and PrEP initiation and continuation were correlated in this group of young African women.
- While young women's contraception use facilitated PrEP initiation and continuation, PrEP initiation also encouraged young women to initiate contraception use.
- These findings support the integration of SRHS with the provision of PrEP for African AGYW.
- PrEP and hormonal contraception delivery to adolescent girls and young women through a mobile clinic is feasible

