# Oral PrEP Delivery Platforms: Are family planning clinics an option? 

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## Methods

- An open label prospective study targeting AGYW aged 16 to 25 years
- Oral PrEP information was disseminated using fliers, brochures or one on one talk
- Those interested were referred to a clinician trained on oral PrEP delivery.
- After consenting, they received HIV testing and adherence counseling, were evaluated using a behavior risk assessment and responded to questions on oral PrEP.
- They had the option of either initiating oral PrEP immediately during enrollment (early adopters) or at a later date of their choice (initial PrEP refusers).

To evaluate PrEP uptake and provision at public and private family planning settings in Kisumu.

## Background

- Oral PrEP for HIV prevention is recommended for individuals at high risk of HIV acquisition.
-In Kenya Sero discordant couples have accessed oral PrEP in HIV comprehensive care centers.
- Because Adolescent girls and Young Women (AGYW) represent $21 \%$ of new HIV infections, the Prevention Options for Women Evaluation Research (POWER) study evaluated two Family Planning (FP) clinics as oral PrEP delivery platforms.



## Objectives

## Results

- A total of 379 (213 private, 166 public) AGYW visited the two FP clinics.
- Enrolled 137(36.15 \%), (87/213(40.85 \%) private, $50 / 166(30.12 \%)$ public). The median age was 21.5 .
- The majority $87(63.5 \%)$ were single with one primary sex partner with few $4(2 \%)$ indicating no primary sex partner; A third 44(32.11\%) were married.
- Early PrEP adopters were114/137(83.2\%) with 74(65\%) seen at the private compared to $40(35 \%)$ the public clinic (the private clinic offered PrEP two months earlier than the public).

PrEP uptake


## Conclusion

- The AGYW seeking services in the two clinics showed high risk behavior for HIV acquisition.
- There was high initial acceptance of PrEP.
- Therefore, FP clinics may be an option for oral PrEP delivery for AGYW.



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