

# “As long as my mother supports me, then I am okay”: Family influences on oral PrEP use among adolescent girls and young women in Kenya and South Africa

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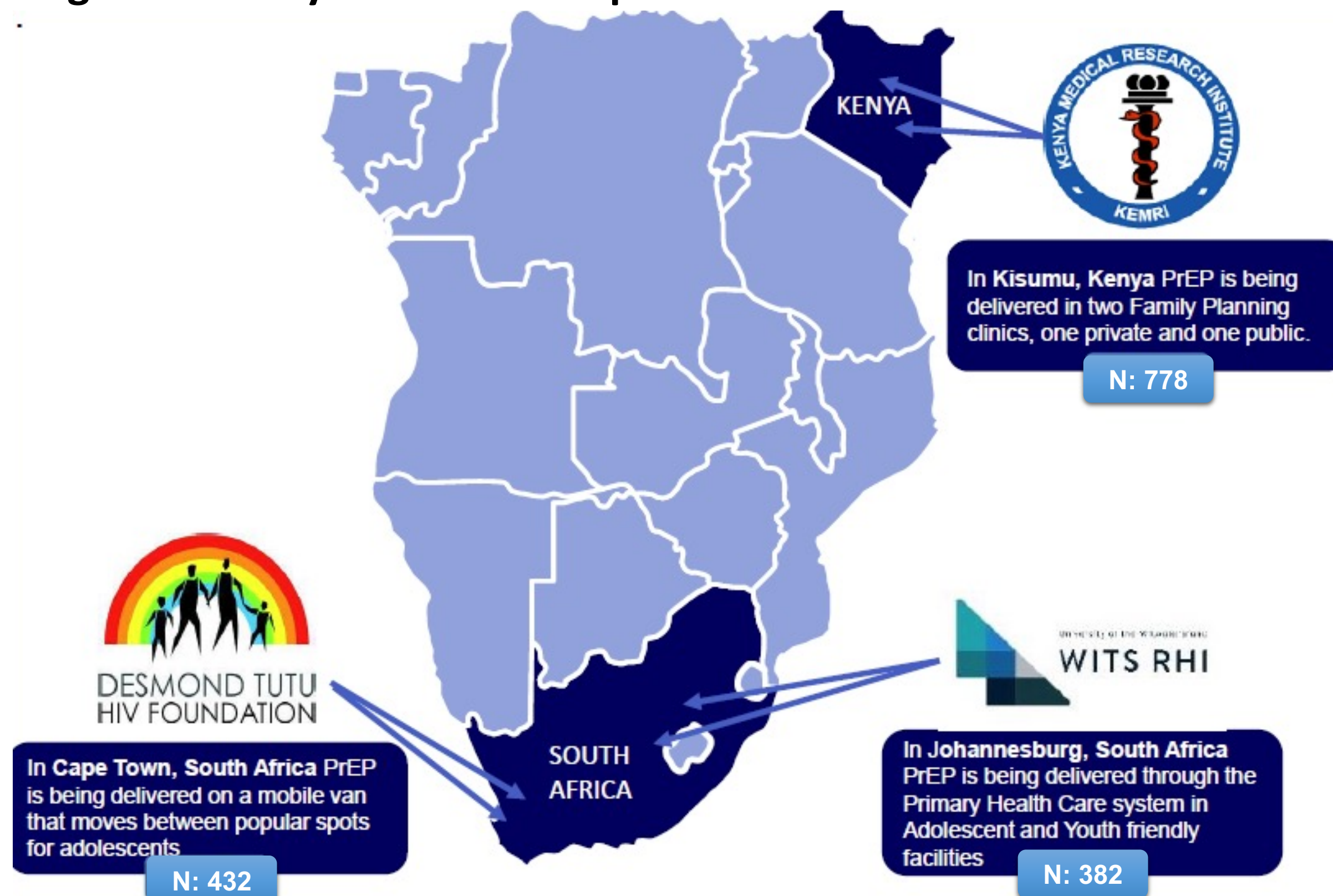
## Background:

- Oral PrEP persistence has been low among adolescent girls and young women (AGYW) in sub-Saharan Africa.
- Efforts to build social support for PrEP have centered around peers and male partners, but family may also play an important role.
- This analysis sought to characterize family influence on PrEP use among AGYW in the POWER Study.

## Methods:

- POWER (Prevention Options for Women Evaluation Research) is a prospective, observational, open-label cohort study to evaluate PrEP delivery approaches for AGYW ages 16-25 in Cape Town and Johannesburg, South Africa and Kisumu, Kenya (Figure 1).
- In-depth interviews were conducted with 30 AGYW who were enrolled in the study for ≥3 months.
- Through rapid analysis of transcripts and interview summaries, we explored PrEP disclosure to family members, their support or opposition, and influence of those reactions on PrEP use.

Figure 1. Study Sites and Sample Size as of 03 June 2019



## Results:

### Participant Characteristics

- Median age was 20.5 years (range 17-25).
- All South African participants were single and most (15/17) lived with parents or other family; In contrast, over half of Kenyan participants (7/13) were married and lived with their husbands.

### Disclosure

- Most AGYW disclosed PrEP to at least one close family member, usually mothers or other female family who they lived with, such as sisters or aunts.
- Many also reported hiding PrEP from other family members. The decision to disclose was based on whom the AGYW trusted or felt closest to:



*I’m not comfortable with people seeing my pills like my close family members like my aunts and all of those people, I’m not comfortable with them knowing about me using the pill because I know they will be judge me.... You know but with her [mother], I don’t hide it because I know that she understands what I’m doing and why I’m doing it. (210093, Johannesburg, Age 20).*

- Of the 8 AGYW who lived with their male partners, only 3 reported disclosing to other (non-spousal) family members.
  - The other 5 AGYW did not report actively hiding PrEP, but may not have disclosed because they had not seen other family members since initiation.

## Support from family, and especially from mothers, is an important facilitator of PrEP use for adolescent girls and young women in Kenya and South Africa.

*[My mother], she is the one who has encouraged me to continue using PrEP. She was the one who used to give me fare to come for PrEP initially. (310028, Kisumu, Age 21)*

*[My mother] said if [my partner] doesn’t accept my decision, I should not even take the tablets to show him, I should keep them inside the house for them to be safe. (210006, Johannesburg, Age 20)*

*I: Okay, and what are the things that have helped you or made it easy to take PrEP?  
R: It’s my family and my phone, and sometimes the TV, because when Generations play[s] then I remember that I should be taking my PrEP. Also my phone has an alarm and my siblings and my family. (110007, Cape Town, Age 18)*

*... I needed a decision from my mother before I could take them so that when I take them I don’t hide them, so that I can be comfortable even if I leave them at home...Because like my mother...when she takes a decision I accept it, even if she said I should not take them, I was not going to take them. (210057, Johannesburg, Age 21)*

*For now, it is my father who knows...He said that I am still a young girl and if using PrEP will make me have a better future, then I should just use it (310044, Kisumu, Age 19)*

## Results (continued):

### Support

- Most AGYW who disclosed reported high levels of emotional, instrumental, and informational support for PrEP, especially from mothers. (Table 1 and quotes in center panel.)

Table 1: Types of Support for PrEP Use by Family Members

Support Type*	Examples
Emotional	Encouragement and motivation
Instrumental	Pill reminders, clinic transport money
Informational	Guidance and advice, such as problem-solving challenges with storage, refills, or partner opposition

\* Heaney, C. A., and B. Israel. 2008. “Social Networks and Social Support.” In Health Education and Health Behavior, edited by K. Glanz, B. K. Rimer, and K. Viswanath, 189–207. San Francisco, CA: Jossey-Bass.

- AGYW believed this support was important for successful PrEP use. In Johannesburg, especially, many said their mother’s approval was required for PrEP initiation or continuation.
- Others who had not disclosed or did not receive active support also used PrEP successfully, feeling that it “was mine” or wasn’t other people’s business.

*R: My mom just asked what are these for (PrEP pills)... But I didn’t give her a straight answer.*

*I: Why?*

*R: I don’t know... I felt like, it’s mine....*

*I: Okay. Do you think at some stage you will be able to explain to her, on what it [PrEP] is all about?*

*R: I don’t see the need.... Its not like I am sick or something like that. (110031, Cape Town, Age 24)*

- Few negative family reactions were reported. Their perceived impact on adherence varied based on whether the participant lived with disapprover, and whether other sources of support existed.
  - Example: An AGYW from Johannesburg lives alone with her child. She reports that she never misses pills, but that she has to hide the pills when her mother and sister come to visit. She says:

*I hide it. A person whom I have informed is my mother, she said you see now, you will get sick, you see they will infect you with this disease, you see.... So I just told myself that I need to leave my mom alone, I told myself that if she asks me if I am continuing, I will say no, because you know how old people can be. (210133, Johannesburg, Age 24)*



## Conclusions:

- Among POWER participants who used PrEP for 3 months or more and agreed to be interviewed, family support for PrEP was widespread and was described as a facilitator of PrEP use.
  - Many POWER participants discontinue PrEP in less than 3 months; the experience of this subsample may not reflect that of the larger cohort, but highlights experiences of those with better persistence.
- Despite cultural norms discouraging parent-child discussions about sex, mothers were often the most active supporters of their daughters’ PrEP use.
- Future interventions should leverage the role of mothers and other family, and encourage their provision of emotional, instrumental, and informational support.

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We thank the participants of the POWER study for their time involved in this study. This poster was made possible by the generous support of the American people through the United States Agency for International Development (USAID) and the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). The contents are the responsibility of the POWER project and do not necessarily reflect the views of USAID, PEPFAR, or the United States Government. The photographs were taken by participants in the 3P PhotoVoice project, a sub-study of the 3P study (1RO1MH107251) and have been included with their permission.

