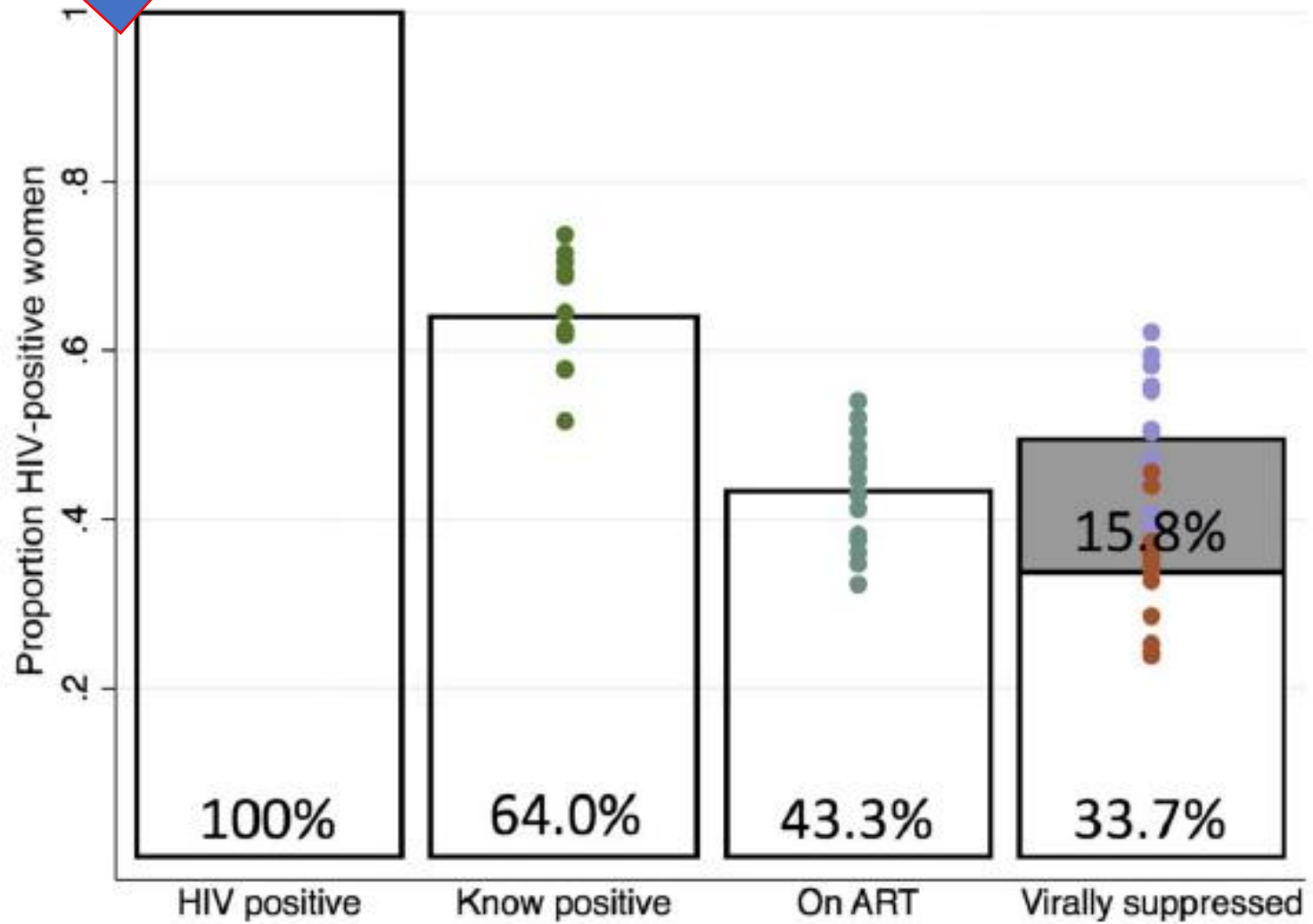
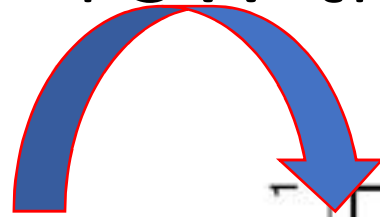


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Perceptions of Oral PrEP in Young FSWs in Harare



FSW treatment cascade in Zimbabwe



HIV prevention cascade metrics

1. Create Demand
2. Guarantee Supply
3. Capability to adhere

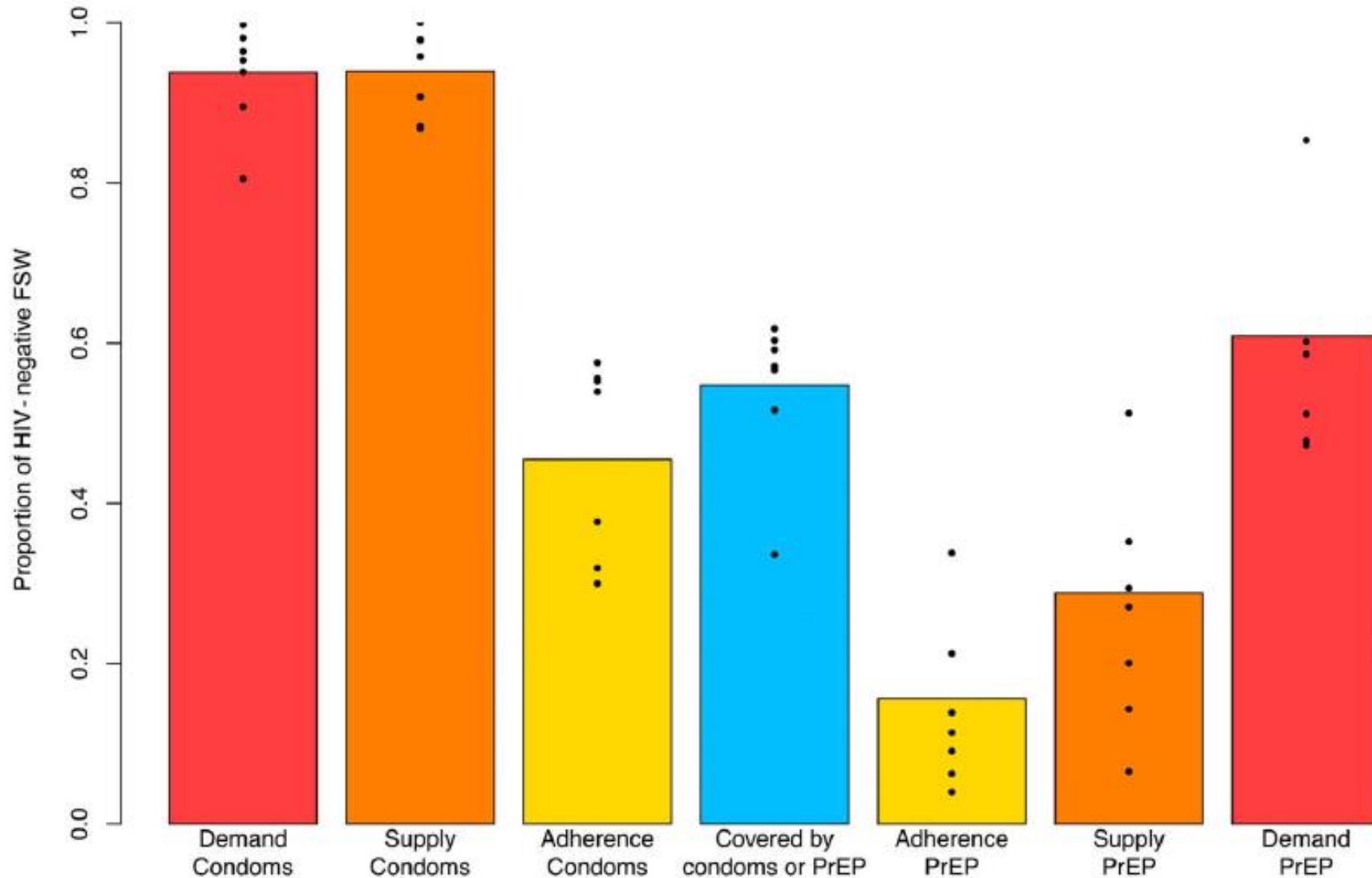
Who Should Administer PrEP

- PrEP should be administered by medical doctors and nurses trained in ARV management.

Table 16: Medicines Recommended for Oral PrEP

	Drug	Dosage	Duration
Preferred Regimen	Tenofovir (TDF (300mg) plus Emtricitabine (FTC) (200mg)	Fixed dose combination one tablet once a day	Period of substantial risk
Alternative Regimens	TDF (300mg) plus 3TC (300mg)	Fixed dose combination one tablet once a day	Period of substantive risk

Prevention cascade for FSWs (2016)



Objectives

1. Evaluate knowledge levels of oral PrEP
2. Determine likelihood of its use by FSWs
3. Identify barriers to PrEP use

Methods

- Cross-sectional study design
- Peri-urban Harare
- Partnered with a local PVO during VCT outreach programs
- HIV negative FSWs
- Consented and enrolled
- Relative Importance Index (RII) computed for assessment

Results (N = 131)

Variable	Outcome
Age, median (IQR)	25 (21 - 31)
Marital status, n(%)	
Single	102 (78)
Married	14 (10)
Divorced	15 (11)
Years in practice, median (IQR)	2 (1 - 4)



HIV
acquisition
risk

Variable	Outcome, n(%)
Number of daily partners, median (IQR)	5 (3 - 6)
Any unprotected sex in the last 3 months	
YES	63 (48)
NO	68 (52)
If YES, was this with a casual partner	
Always	43 (68)
Sometimes	10 (16)
Never	10 (16)
Use of condom with the last 3 partners	
Always	112 (86)
Sometimes	13 (10)
Never	6 (4)

Demand!

- 71 (54%) had ever heard about PrEP
- 46 (35%) actually had sufficient knowledge about PrEP

- Where did you hear about PrEP?
 - Non-governmental organizations (59%)
 - Friends/colleagues (35%)
 - Local clinics (6%)

Likelihood to use PrEP

Variable	Frequency, n(%)
Likelihood of PrEP use if it caused mild side effects	
Sometimes	50 (38)
Always	81 (62)
Condom use if FSW were to start taking PrEP	
Never	6 (5)
Sometimes	24 (18)
Always	101 (77)
Likelihood of PrEP use if it had to be paid for	
Never	3 (2)
Sometimes	41 (32)
Always	87 (66)

Relationship between RII scores of KLBs

Variables	Knowledge	Likelihood	Barriers
Knowledge RII	1.0000		
Likelihood RII	0.2115 (p = 0.0153)	1.0000	
Barriers RII (Stigma, cost, side effects)	-0.0530 (p = 0.5476)	-0.2329 (p = 0.0074)	1.0000

Conclusion

- Risky sexual behaviours persist
- FSWs are willing to use PrEP
- Cost, side effect profile will affect PrEP uptake
- Awareness campaigns through clinics needs to be ramped up



Questions?