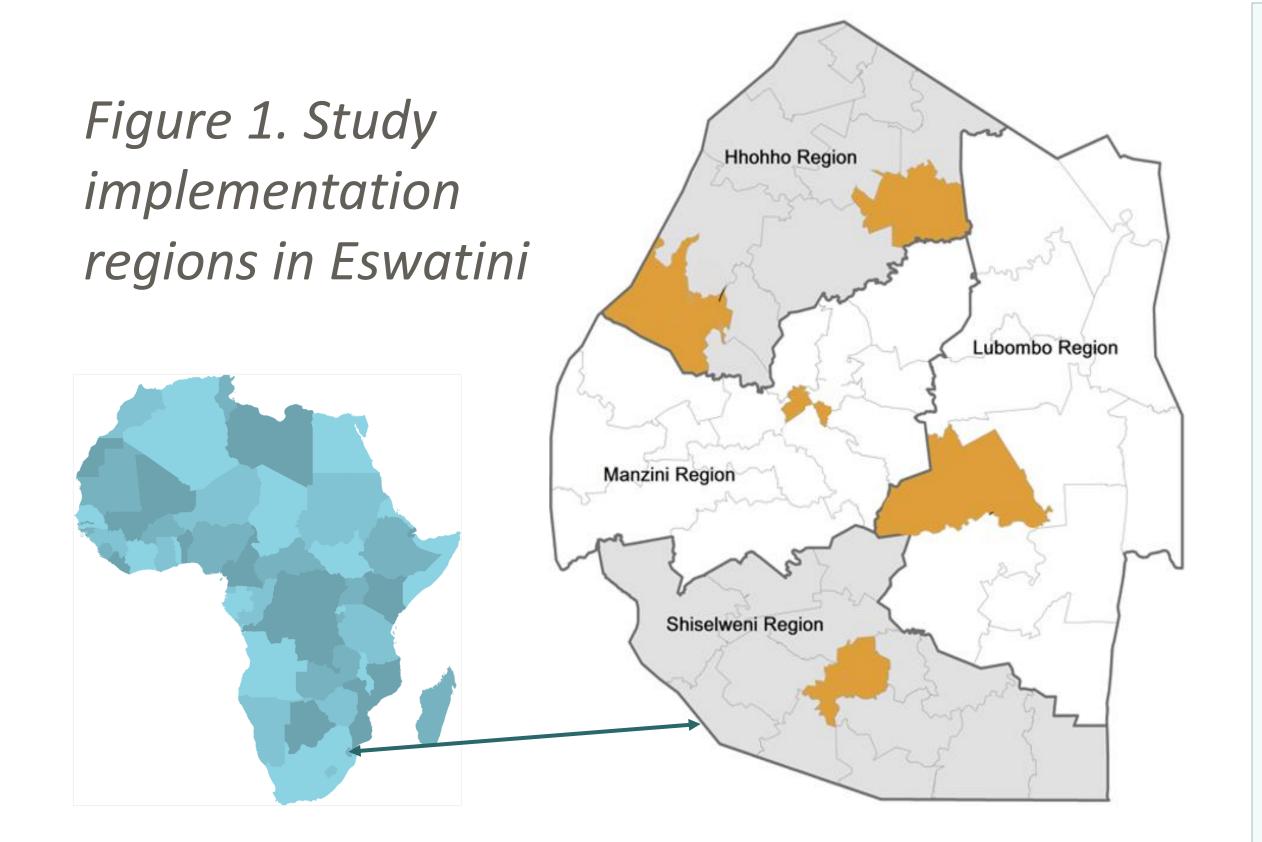
Provider perceptions of offering PrEP choice: A quantitative assessment of early experiences in Eswatini

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Background

HIV prevention strategies across sub-Saharan Africa are rapidly shifting toward the introduction of multiple methods of PrEP. The expansion of options provides opportunities for individuals to collaborate with their health care providers (HCPs) to select the method that will work best for them. HCPs are critical to the successful delivery of PrEP choice counseling, yet little is known regarding the acceptability of the service among HCPs.



Results

All responding HCPs (n=16) believed that counseling adolescent girls and young women (AGYW) on sexual and reproductive health was part of their job and that PrEP information should be included in HIV prevention education for AGYW. Most felt they had received sufficient training and information to offer PrEP (75% for oral PrEP; 56% for the PrEP ring). Nearly all respondents (94%) liked to offer PrEP choice counseling to clients, believed offering PrEP choice seemed a good match to clients' needs, and thought it was possible to offer the service at their site.

Providers were concerned about the PrEP ring's efficacy (94%) and clients' ability/willingness to insert and remove it on their own (63%). Ninety-four percent of HCPs were concerned about clients' ability to return on time for resupply for both oral PrEP and the PrEP ring, with 81% worried about clients' ability to follow a daily oral PrEP schedule.

Methods

From May through September 2023, eight health facilities in Eswatini (Figure 1) began offering the Dapivirine vaginal ring for PrEP (PrEP ring) alongside oral PrEP as part of the Eswatini PrEP Ring Study, implemented through the PEPFAR/USAID-supported MOSAIC project. During the first two months of offering PrEP choice, up to three PrEP service providers per facility were selected at random to complete a structured questionnaire.

Survey domains included HCP knowledge, acceptability, appropriateness, and feasibility of PrEP choice service delivery. Data were analyzed descriptively.

56%

Felt they prep ring

Conclusion
Overall, HCPs were as anticipated that it wo training, on-site ment their ability to provid should consider enhalper prep options.

Liked to offer PrEP choice counseling, believed offering PrEP choice seemed a good match to client needs, and thought it possible to offer choice at their site.

Were concerned about clients' ability/willingness to insert and remove the PrEP ring on their own.

Felt they had received sufficient training to offer the PrEP ring.

Overall, HCPs were accepting of PrEP choice counseling and anticipated that it would be feasible in their facilities. In addition to training, on-site mentoring may improve providers' confidence in their ability to provide the ring and support effective use. Countries should consider enhanced provider support as they introduce more PrEP options.

Presented at HIVR4P 2024, the 5th HIV Research for Prevention Conference

The authors would like to thank the Eswatini Ministry of Health for their leadership, the healthcare providers for participating in this study, data collectors, and Youth Advisory Committee members for their support and collaboration. MOSAIC is made possible by the generous support of the American people through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID). The contents of this presentation are the responsibility of MOSAIC and do not necessarily reflect the views of PEPFAR, USAID, or the U.S. Government. MOSAIC is a global cooperative agreement (#7200AA21CA00011) led by FHI 360, with core partners Wits RHI, Pangaea Zimbabwe, LVCT Health, Jhpiego, and AVAC.











