Family, Disclosure, and the PrEP Continuum: Implications for Programming for Youth in Southern Africa

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1. Despite availability of daily oral PrEP for adolescent girls and young women in Southern Africa, uptake has been slow.

2. Parental support and encouragement for PrEP initiation, adherence, and persistence holds powerful influence for adolescents and young adults; particularly since many live with family. Programs should consider implementation approaches that engage families in health education.

3. This research advances implementation science in PrEP programming for HIV prevention among a population group with some of the highest incidence globally.
HPTN Scholar Study Team

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HPTN 082

Study Site Locations:
- Harare, Zimbabwe
- Johannesburg, South Africa
- Cape Town, South Africa
Zimbabwe becomes first African nation to approve HIV prevention drug

World Health Organization welcomes country’s ‘crucial step’ in backing use of long-acting injectable cabotegravir (CAB-LA)

Zimbabwe has already reached knowing their status, 90% getting.
Photograph: Jeขวา/Abjia/PEFAP
Zimbabwe has become the approve an HIV prevention Organization (WHO).

Analysis: What is behind the Western Cape’s low PrEP numbers?

Spotted by

We are generation that will end HIV
Pediatric Self Management Framework

Methods

Rapid Qualitative Analysis

Phase 1
- Open coding of five participant transcripts across sites
- Literature review: PrEP and adolescent girls and young women

Phase 2
- Structured Summary Memo per participant (Week 13 & 26 Interviews; n=67)
- Matrix analysis with key topics (i.e. family & adherence) x participant

## Interview Participants

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<thead>
<tr>
<th>Characteristic</th>
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<th>Cape Town N= 20 (30%)</th>
<th>Johannesburg N=22 (33%)</th>
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<td>24 (22-25)</td>
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<td>Parents</td>
<td>10 (40%)</td>
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Emerging Themes: Family, Disclosure, & PrEP Continuum

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Examples of Facilitators
• Encouragement from family
• Family member living with HIV
• Health education about PrEP

Examples of Barriers
• Concerns around disclosure
• “Harsh” parents

“It’s not that I didn’t want to [initiate PrEP] but it’s just that I was scared of speaking to my parents at home...I am mostly scared of my father.... If I am going to keep them at home, he is always there when he comes back from work...Maybe it would be best to give them to someone to keep for me...So that they [PrEP pills] are not at home”

Fundiswa, Interview 2 at Week 26
Lives with parents, Declined to initiate
Cape Town, South Africa
“I told [my family] in December when I visited the granny who lives with my child… I didn’t hide the pills I took them as normal…. my child’s granny, what can I say, she likes people who take care of themselves, in general she gets tested herself, she’s fifty something and she still gets tested for HIV.”

Thandiwe, Interview 2, Week 26
Lives alone, Strong adherence
Johannesburg, South Africa

**Examples of Facilitators**
- Reminder setting: parents know the timing of meds and remind/ask
- Habit Formation: Living with someone also taking PrEP or HIV tx

**Examples of Barriers**
- Visiting parents or family and skipping doses
- Nondisclosure and need to take medication privately
PREP RETENTION

My mother encourages me, she will say that “We know every woman needs a woman by her side – so continue going to the study and continue to get the pills because you don’t know the people you sleep with, what kind of sexual diseases they have so continue to take the pills.”

**Patience**, Interview 2 at Week 26
Lives with parents, Strong adherence
Harare, Zimbabwe

**EXAMPLES OF BARRIERS**
- Visiting parents for extended visit/ pausing PrEP
- Unintentional disclosure and stopping PrEP

**EXAMPLE OF FACILITATORS**
- Living with a relative who assuages concerns
- Parents offering logistical or childcare support so that participant can visit the clinic
Implications & Future Considerations

- Intervention strategies to engage parents and family
- Coach or facilitate disclosure
- Increase health literacy
- Direct clinic outreach
Acknowledgments

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Thank you

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