

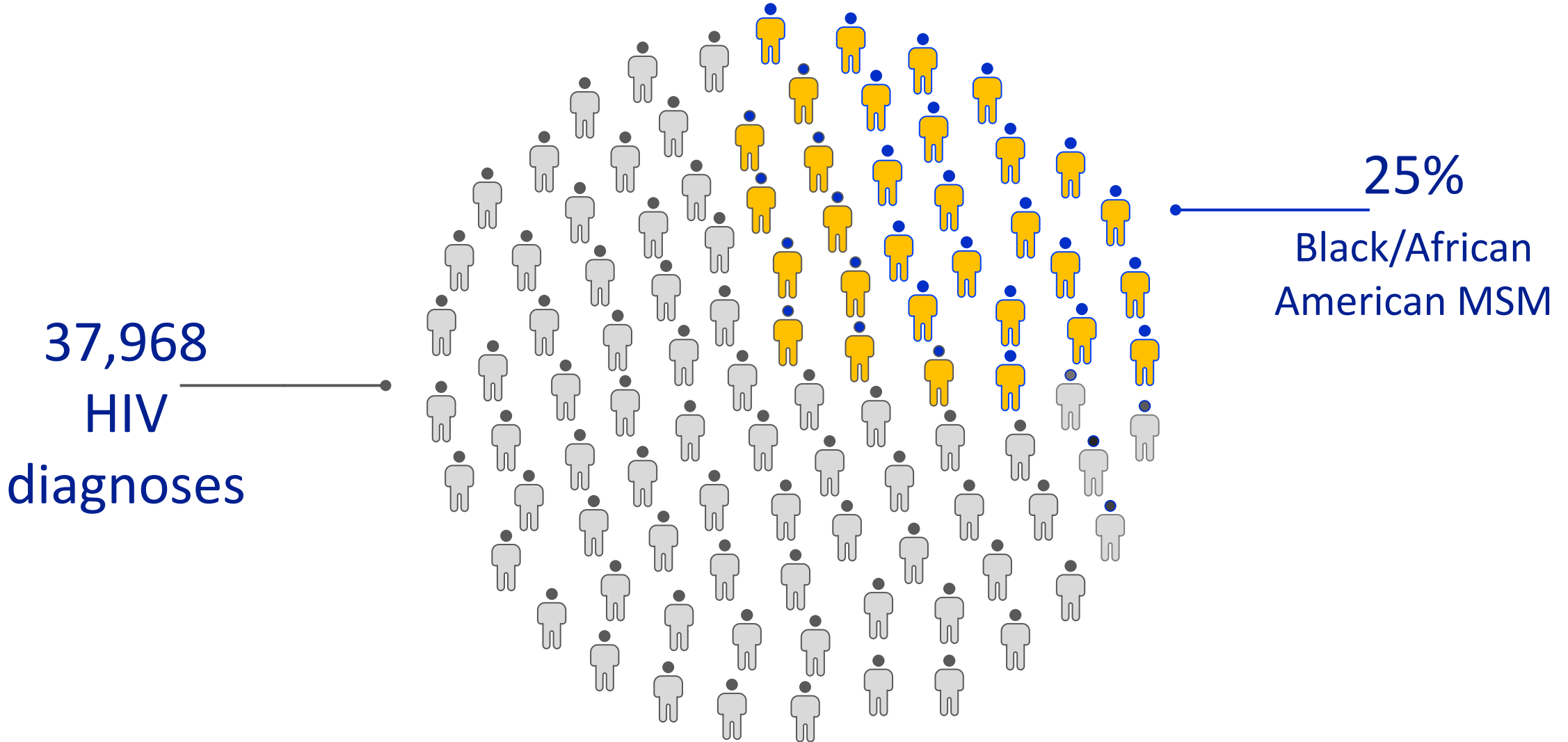
# **An Examination of Perceived Autonomy Support, Care Coordination Quality, and PrEP Discontinuation among Black MSM in Three US Cities: HPTN 073**

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 **HPTN**  
HIV Prevention  
Trials Network



Source: CDC. [Diagnoses of HIV infection in the United States and dependent areas, 2018 \(updated\)](#). *HIV Surveillance Report* 2020;31.

# PrEP Use in Black MSM

PrEP use among Black men who have sex with men has not reached levels sufficient to have a population impact on HIV incidence.

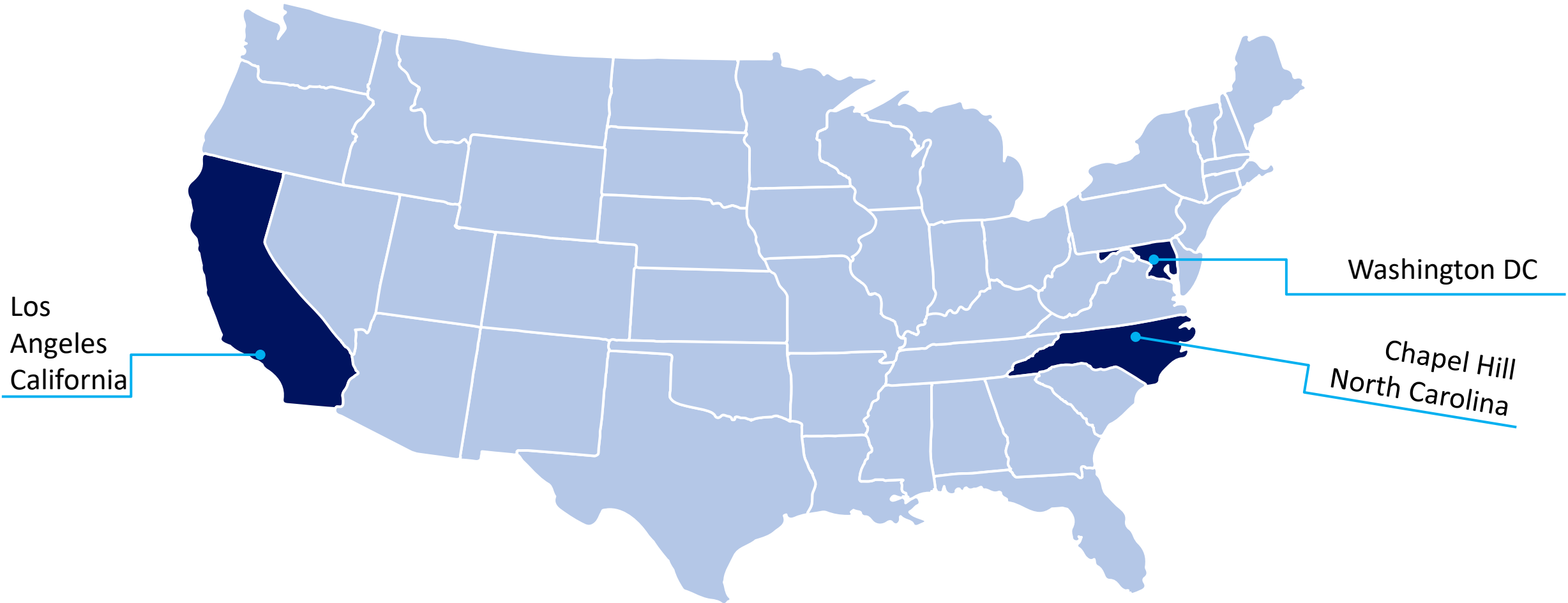


# HPTN 073: Pre-Exposure Prophylaxis (PrEP) Initiation and Adherence among Black Men who have Sex with Men (BMSM) in Three U.S. Cities

## **Purpose:**

To assess the initiation, acceptability, safety, and feasibility of PrEP for Black men who have sex with men (BMSM) in three U.S. cities utilizing client-centered care coordination (C4) models.

# Setting



# C4: Client-centered care coordination



## Purpose

- The purpose of this study was to examine whether perceived autonomy support and care coordination quality were associated with discontinuation of PrEP use among Black MSM who initiated PrEP in HPTN 073.
- H1: We hypothesized that high perceived autonomy support would be negatively associated with PrEP discontinuation.
- H2: We hypothesized that the high perception of coordination quality would be negatively associated with PrEP discontinuation

# Measure – Client Perceptions of Coordination Questionnaire

- Higher mean scores correspond with a higher perception of coordination quality..

## Client Perceptions of Coordination Questionnaire (CPCQ)

**Health Service (General):** Questions 1-11 relate to the care you received for your health from any doctor or service provider in the last 3 months

1. How often did you get the services you thought you needed?

Never  Rarely  Sometimes  Mostly  Always  Prefer Not to Say

2. How often did you have to wait too long to obtain a service/appointment?

Never  Rarely  Sometimes  Mostly  Always  Prefer Not to Say

3. In the past 3 months, how often did you seem to receive the medicines you thought you needed?

Never  Rarely  Sometimes  Mostly  Always  Not Applicable  Prefer Not to Say

4. How often were the results of tests discussed with you (e.g. blood tests)?

Never  Rarely  Sometimes  Mostly  Always  Not Applicable  Prefer Not to Say

5. In the past 3 months, how often did you feel the care you received was well coordinated?

Never  Rarely  Sometimes  Mostly  Always  Prefer Not to Say

6. How often were you happy with the quality of care you received?

Never  Rarely  Sometimes  Mostly  Always  Prefer Not to Say

7. In the past 3 months, how often have service providers responded appropriately to changes in your needs?

Never  Rarely  Sometimes  Mostly  Always  Not Applicable  Prefer Not to Say



# Measure – Health Care Climate Questionnaire

- Autonomy support was defined as the degree to which a patient perceives their providers were supportive about a health care issue.
- Higher scores correspond with a higher perception of autonomy support.

**Health Care Climate Questionnaire**  
Perceived Autonomy Support

Please answer the questions below regarding your relationship with your health care practitioners about smoking and/or diet. Practitioners have different styles in dealing with patients. Your responses will be kept confidential, so none of the practitioners will know your responses. Please be honest and candid. Choose your answers using the scale below for each question by filling in the blank after each question with a number from 1 to 7.

1	2	3	4	5	6	7
Strongly disagree	Moderately disagree	Slightly disagree	Neutral	Slightly agree	Moderately agree	Strongly agree
1.						_____
2.						_____
3.						_____
4.						_____
5.						_____
6.						_____
7.						_____
8.						_____
9.						_____
10.						_____
11.						_____
12.						_____
13.						_____
14.						_____
15.						_____

# Outcome – PrEP Discontinuation

- Discontinuation was defined as the first product hold that was greater than 14 days

# Analysis

- Predictors:
  - Perceived autonomy support at weeks 4 and 8, and CPCQ at week 13 were assessed separately as predictors while adjusting for site.
- Outcome:
  - Cox proportional model was used to predict time (in days) to first PrEP discontinuation of 14 days or more.

# Results

	Participants who had C4 sessions %( n)		Client Perception Coordination Quality Mean (SD)			Healthcare Climate Questionnaire Mean (SD)		
	PrEP	Non-PrEP	PrEP	Non-PrEP	<i>P-value</i>	PrEP	Non-PrEP	<i>P-value</i>
<b>Enrollment</b>	66% (117)	65% (31)	-	-		-	-	
<b>Week 4</b>	63% (109)	60% (25)	-	-		6.2 (1.1)	6.1 (1.2)	0.628
<b>Week 8</b>	63% (105)	53% (19)	-	-		6.4 (0.9)	6.2 (1.1)	0.577
<b>Week 13</b>	64% (110)	59% (22)	4.3 (0.7)	4.2 (0.8)	0.171	6.3 (1.0)	6.0 (1.3)	0.616

## Results – PrEP Discontinuation >14 days

- Coordination quality
  - Week 13 measure (HR:0.99; 95% CI (0.62-1.57))
- Autonomy support
  - Week 4 : (HR 0.83; 95% CI 0.63-1.09)
  - **Week 8: (HR 0.67; 95% CI 0.51-0.90)**

# Discussion

- Most client's initiated PrEP at enrollment and had good adherence.
- Consistent with our hypothesis, those with perceived higher autonomy support were less likely to discontinue PrEP.
- This suggests that theory driven interventions using Self Determination Theory to address social, individual, and structural barriers to PrEP can benefit Black MSM irrespective of their PrEP use.

# Implications

- Interventions that incorporate Self Determination Theory can be advantageous in optimizing PrEP use in Black MSM.
- Training providers on how to recognize and support the autonomy of patients can facilitate PrEP continuation and also support clients in their decision making on issues that are relevant to their needs.

# Thank you!

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