Attitudes and factors to PrEP uptake among HIV risk groups across London

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Who is GMI? The GMI Partnership, established in 2008, is a collaboration between METRO Charity, Positive East and Spectra.

The Partnership works across London to address the sexual health of diverse groups of Men who have Sex with Men (MSM), Black, African and Minority Ethnic (BAME) communities and people from trans communities by delivering one of the largest outreach and community-based HIV testing programmes.



GMI's mission is to, "provide high quality, holistic sexual and reproductive health and wellbeing services to people and communities with diverse sexual orientations and gender identities" who are disproportionally impacted by health and social inequalities,

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mental ill-health and homo, bi and transphobia.









What was the PrEP Champions Project?

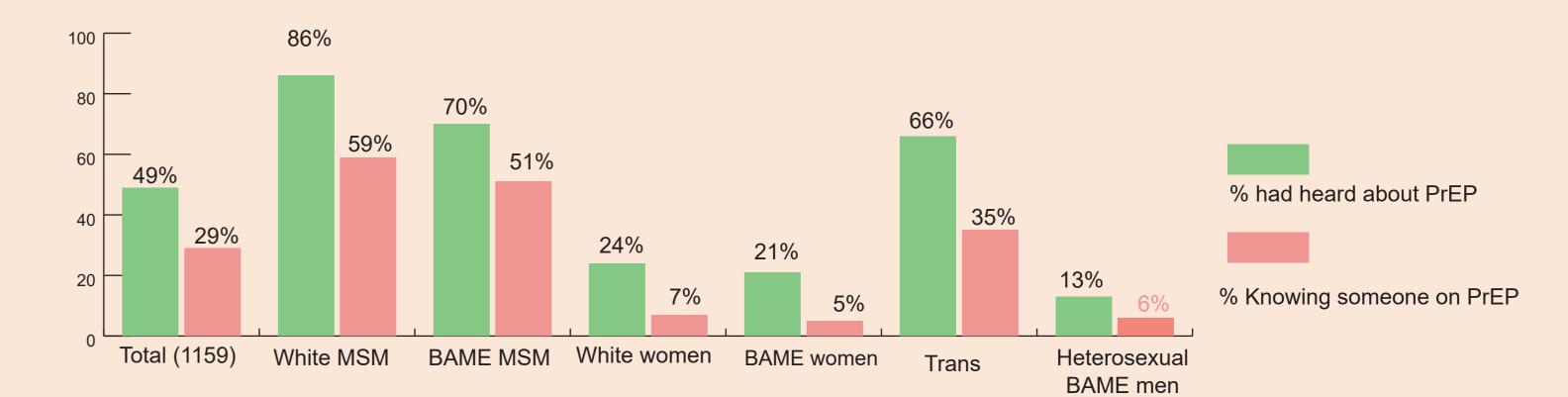
Aim: to increase knowledge and accessibility of PrEP

- Focussed on MSM, women, BAME and trans people
- Funded through PHE's HIV Innovation Fund
- Implemented December 2017 November 2018
- GMI Partnership and Prepster collaboration

Results:

Awareness:

513 people (49%) had heard about PrEP including 81% of MSM, 66% trans people, 22% women and 13% heterosexual BAME men. PrEP awareness among MSM is significantly higher than other groups (p=0.000). This may be due to more PrEP users among MSM and sexual health discussions being less normalised in certain communities, eg BAME.



- 54 PrEP Champions were trained to assess PrEP knowledge and acceptability differences among the target groups using a specifically designed PrEP Assessment Tool.
- 172 PrEP focussed engagement sessions
- 1056 participants across all target groups were included in the analysis Age range: 16-71 years old (average = 35); 85% people were from the 33 boroughs of London.
- A comprehensive outreach FAQ guide was produced

Conclusions

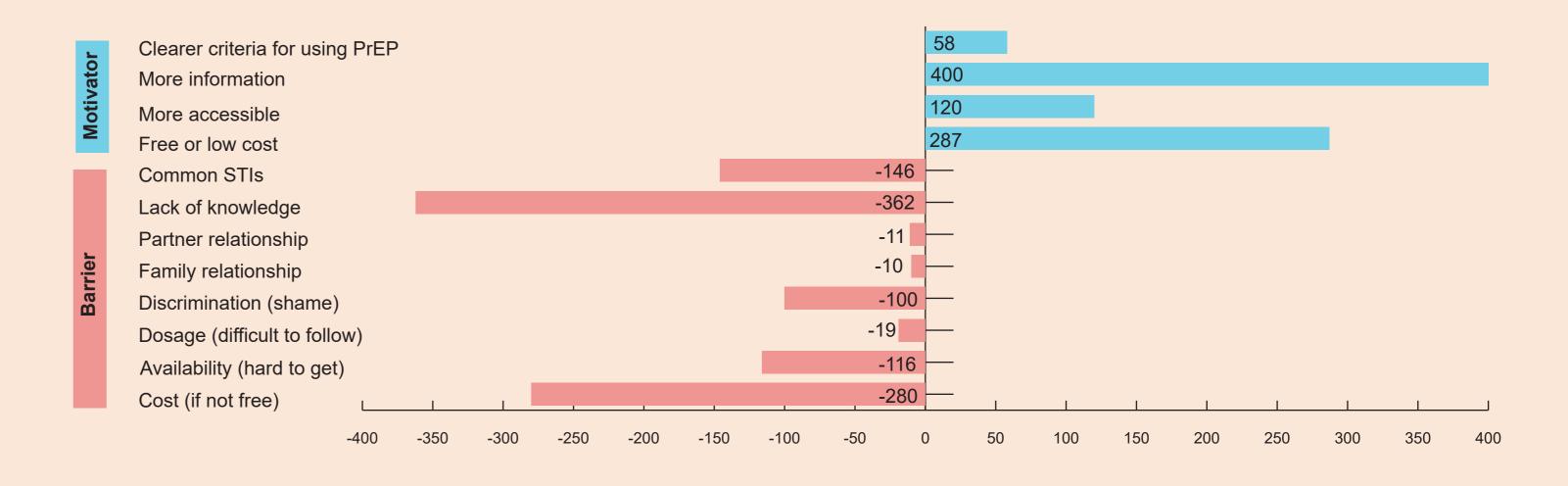
As PrEP is implemented in England in the upcoming years, it is important to understand factors that hinder and support its use, especially among high risk groups.



Approximately half of the target groups had previously heard about PrEP.

Barriers to PrEP use:

These included lack of knowledge around PrEP (44%); cost (34%); lack of protection from other STIs (18%); availability (14%); and stigma (related to multiple partners) (12%). Of the top named factors influencing PrEP use, cost and Knowledge were consistent among all target groups; being most important to MSM and trans people, whereas knowledge of PrEP was more important for women and heterosexual BAME men.



Attitude around PrEP use:

903 people were HIV negative or not taking PrEP at the time of the assessment. 45% said they would use PrEP when needed and 26% might consider PrEP if needed. Women are less likely to reject PrEP initially more than other groups (p<0.02); yet they are also less likely to use PrEP, probably due to a perception of low HIV risk. Trans people reported being less likely to use PrEP (p=0.005) mainly due to concerns of side effects, drug interactions and common STIs.



19%

26%



Most would use PrEP when needed however the percentages were lower for women and trans people.



Factors influencing PrEP use, across all target groups, included cost, knowledge and accessibility, presenting key areas upon which programmes to encourage PrEP use can be built.

