



Comparing PrEP initiation rates by service delivery models among adolescent boys and young men in Kwazulu-Natal, South Africa: preliminary findings from a population-based prospective study

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Background

South Africa has a high HIV prevalence, with more than 7 million people estimated to be living with HIV (1). Pre-exposure prophylaxis (PrEP) is an HIV prevention strategy that can reduce the risk of HIV acquisition by more than 90%, if taken consistently (2, 3). Although this is the case, adolescent boys and young men (ABYM) continue to experience high rates of HIV infection in South Africa, despite many efforts designed to address their HIV prevention care and needs. South Africa started rolling out PrEP in 2016, initially for selected population groups before expanding access to more people. However, there is a dearth of research focused on PrEP among ABYM, despite them experiencing high rates of HIV infection. In order to improve the rates of PrEP initiation among ABYM, it is imperative that we understand which service delivery points (SDPs) may be effective to ensure that men have appropriate access to PREP services. This study aimed to compare PrEP initiation rates by service delivery points/models among ABYM in KwaZulu-Natal, South Africa.

Methods

We conducted a population-based prospective study in 22 SDPs from July 2021 to June 2022 in uMgungundlovu district, KwaZulu-Natal, South Africa. Sexually active ABYM aged 15 – 35 years were recruited at purposively selected PrEP SDPs (i.e., healthcare facilities, secondary schools and Technical Vocational Education and Training (TVET) colleges, and community-based youth zones). We extracted data from REDCap and exported it to Stata version 17.0 for analysis, and then eliminated discrepancies and removed duplicates. We described baseline characteristics using summary and descriptive statistics (median, interquartile range [IQR] and proportions) and reported PrEP initiation proportions overall and by SDPs.

Results

The study included 1104 ABYM recruited from 22 SDPs, with a median age of 24 years (interquartile range (IQR): 21-28)). Almost all participants were black African (n=1090, 99%), with more than half aged 15-24 years (n=603, 55%) and 45% (n=501) aged 25-35 years (Table). The majority (n=963; 87%) had attained a secondary level of education. 26 participants were diagnosed with HIV, and excluded. Overall PREP initiation rate among ABYM was low: among 1078 participants who were eligible for PrEP, 13% (n=141) were started on PrEP (Figure). Among the participants who were initiated on PrEP, more than half (52%, n=74) were initiated from high schools and TVET colleges, compared with community-based youth zones (26%, n=37) and healthcare facilities (21%, n=30).

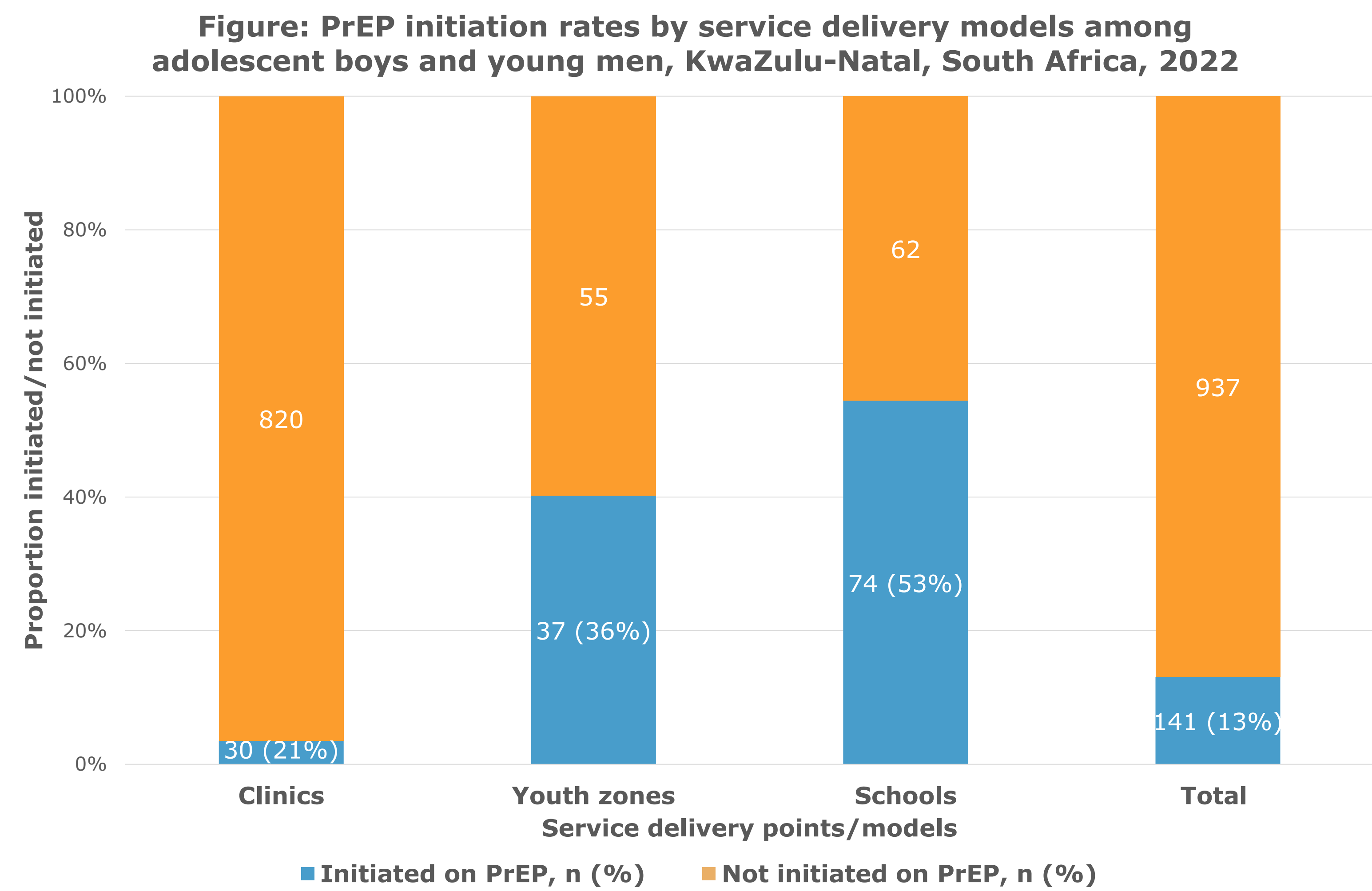


Table: Characteristics of adolescent boys and young men, KwaZulu-Natal, South Africa, 2022

Characteristic	Participants n=1104
Age (years)	
Median (IQR)	24 (21-28)
Age categories, n (%)	
15-24	603 (55)
25-35	501 (45)
Population group, n (%)	
Black (African)	1090 (99)
Coloured (Asian)	10 (0.9)
Indian	1 (0.1)
Other (not specified)	3 (0.3)
Level of education	
No education	1 (0.1)
Primary	16 (1)
Secondary	963 (87)
Tertiary	118 (11)
No response	6 (0.5)
Employment status	
Unemployed	133 (12)
Employed	417 (38)
Studying	93 (8)
Other (not specified)	461 (42)

Conclusion

This study provided preliminary evidence suggesting that expanding PrEP services to non-traditional settings, such as high schools, TVET colleges, and community-based organizations, may have a potential to increase PrEP access among ABYM in South Africa.

References

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