

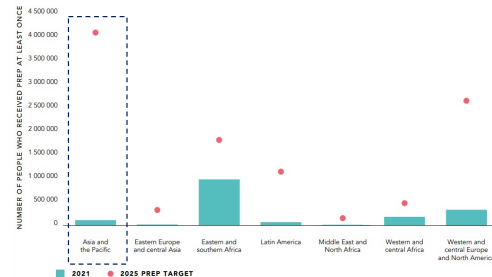
K.E. Green¹, C. Chan², M.M. Cassell³, J. Ong^{4,5,6}, D. Fraser², L. Zhang⁷, M. Poonkasetwattana⁸, N. Suwandi⁸, N. Phanupak⁹, H. Boonyapisomparn¹⁰, B.R. Bavinton², H.-M.A. Schmidt^{11,12}

BACKGROUND

Despite recent efforts to expand access to oral pre-exposure prophylaxis (PrEP) in Asia, uptake has lagged significantly behind the regional 2025 PrEP target, with only 3% of the 4 million goal achieved by the end of 2021 (Figure 1).

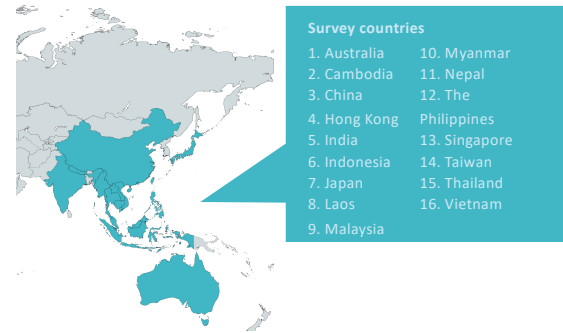
We aimed to measure unmet PrEP need among men who have sex with men (MSM) and transgender women (TGW) in Asia to identify access gaps inform scale-up strategies.

Figure 1. Number of people who received PrEP at least once during the reporting period, by region, 2021, and 2025 target (source: UNAIDS 2022).



METHODS

We implemented an online cross-sectional survey among MSM and TGW across 16 countries or territories in Asia from May to November 2022 (Figure 2). The study was designed to inform PrEP product and services values and preferences. Participants were asked about potential HIV risk, PrEP use history, and PrEP product and service preferences. For our analysis, we defined **unmet PrEP need** as those who had: (1) Heard of and wanted to take PrEP but had never taken it; (2) Never heard of PrEP but had HIV risk factors indicating need; (3) Taken oral PrEP but preferred a different PrEP product (e.g., long-acting PrEP); (4) Temporarily discontinued oral PrEP due to a barrier (e.g., side effects, not liking pills, cost) but still needed it. We generated descriptive statistics and used multivariable logistic regression models to identify factors associated with unmet PrEP need.



RESULTS

Among 17,032 MSM and 1,260 TGW surveyed, 10,195 (59.9%) MSM and 598 (47.5%) TGW were found to have any form of unmet PrEP need (Figure 3).

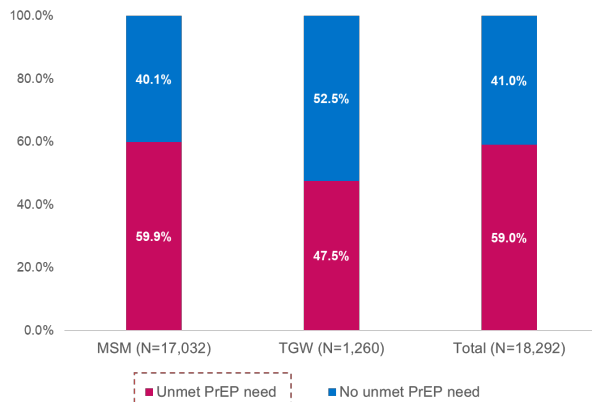


Figure 2. Unmet PrEP need among MSM and TGW surveyed.

CONCLUSION

We identified substantial unmet PrEP need among MSM and TGW respondents, in the largest known regional study on PrEP in Asia. Urgent investment is needed to increase PrEP awareness and reduce barriers to service access, accompanied by a wider selection of PrEP products, that best align with what TGW and MSM in the Asia region need and want.

As shown in Figures 4 and 5, the most commonly cited indication of unmet PrEP need among respondents was being PrEP-naïve but wanting to take PrEP (60.1% of MSM and 33.8% of TGW), followed by being a current oral PrEP user but preferring to use a different product, e.g., a long-acting product (19.7% of MSM and 30.4% of TGW), being unaware of PrEP but reporting risk factors indicative of PrEP need (13.4% of MSM and 22.4% of TGW), and having temporarily discontinued PrEP due to a barrier to accessing services (6.8% of MSM and 13.4% of TGW).

Figure 3. Unmet PrEP need among MSM (N=17,032).

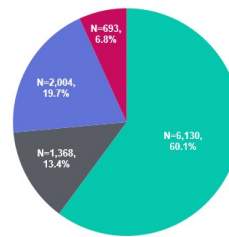
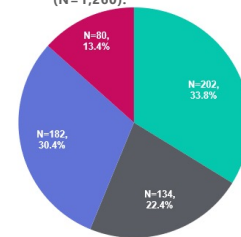


Figure 4. Unmet PrEP need among TGW (N=1,260).



- PrEP naïve and want to take PrEP (regardless of risk factors)
- PrEP unaware and report risk factors
- On oral PrEP (daily/event-driven) but would prefer a different form of PrEP
- Previously on PrEP and discontinued due to a barrier but still need PrEP

Knowing fewer people who took PrEP (aOR=1.85; 95%CI:1.72-2.00), condomless anal sex in past 6 months (aOR=1.64 95%CI:1.54-1.75), and younger age (aOR=1.02 95%CI:1.01-1.02) were positively associated with unmet PrEP need.

AUTHOR AFFILIATIONS

¹PATH, Hanoi, Vietnam, ²University of New South Wales, Kirby Institute, Sydney, Australia, ³FHI 360, HIV Department, Hanoi, Vietnam, ⁴Alfred Health, Melbourne Sexual Health Centre, Melbourne, Australia, ⁵Monash University, Central Clinical School, Melbourne, Australia, ⁶London School of Hygiene & Tropical Medicine, Faculty of Infectious and Tropical Diseases, London, United Kingdom, ⁷School of Public Health, Xi'an Jiaotong University Health Science Center, China-Australia Joint Research Centre for Infectious Diseases, Xi'an, China, ⁸Asia Pacific Coalition on Male Sexual Health, Bangkok, Thailand, ⁹Institute of HIV Research and Innovation, Bangkok, Thailand, ¹⁰Asia Pacific Transgender Network, Bangkok, Thailand, ¹¹UNAIDS Regional Office for Asia and the Pacific, Bangkok, Thailand, ¹²World Health Organization, Global HIV, Hepatitis and STIs Programme, Geneva, Switzerland

ACKNOWLEDGEMENTS

This study was supported by funding from the World Health Organization, the Kirby Institute, and Outstanding Young Scholars Support Program. The Australian arm of the study was supported by funds from Viiv Healthcare, NSW Ministry of Health, MAC AIDS Fund, and the Australian Government Department of Health.



Presented at IAS 2023, the 12th IAS Conference on HIV Science