



CCTG 593: Can We Improve HIV Prevention Services? Understanding the Rationale for Expressed Lack of Interest in PrEP in Recently HIV-tested Individuals

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BACKGROUND

- Willingness to use pre-exposure prophylaxis (PrEP) for HIV varies by demographic factors and perceived risk of HIV infection
- Less studied are reasons for PrEP refusal
- We examined recently tested HIV-negative individuals who declined referral/linkage to PrEP evaluation (hereafter known as PrEP-refusers) to determine reasons for PrEP refusal

METHODS

- Participants who tested HIV negative at a Southern California local health department testing site and a university-based testing site were asked to complete an anonymous survey that recorded demographics, PrEP awareness and reasons for refusal
- Reasons for refusals were divided into risk-behavior concerns, medication-related concerns, and logistical concerns
- Comparisons between groups were done by Chi-square test

DEMOGRAPHICS

- 1450 survey forms were collected
- Gender breakdown: 55% females, 44% males and 4 (0%) transgender
- Mean age was 34
- Twenty four percent Black, 23% White, 39% Hispanic
- Of the males, 56% (350/627) self identified as men who have sex with men (MSM)
- Twenty one percent of Black men (29/135) and 82% (182/221) of White men self reported as MSM

RESULTS

- Overall PrEP awareness was 50%, with greater awareness associated with being male, White, non-Hispanic and MSM
- Overall, 68% reported being interested in PrEP
- PrEP refusal differed by race, with Blacks having lower refusal rates, and Hispanics higher than whites
- Refusers were less aware of PrEP
- Of PrEP refusers, 81% marked refusal reasons, most commonly: perceived lack of HIV risk, lack of doctor recommendation, side effects concerns
- MSM refusers were concerned primarily with side effects, not wanting pills, or perceived a lack of HIV risk
- Women chose lack of risk-behavioral concerns, and men medication related concerns

Table 1: Reasons for PrEP refusal

Top Reasons for PrEP Refusal		p value	
Overall	Perceived lack of HIV risk	37%	
	Lack of Doctor Recommendation	27%	
	Side Effects Concerns	24%	
	Not interested in taking pills	17%	
	In monogamous relationship	16%	
MSM	Side Effects Concerns	45%	
	Not interested in taking pills	30%	
	Lack of Doctor Recommendation	23 %	
	Perceived lack of HIV risk	18%	
	Not sure if it will be effective	17%	
Gender	Lack of Behavioral concerns	Women	101/150 (67%) <0.001
		Men	52/132 (39%)
	Medication Related concerns	Women	27/150 (18%) <0.001
		Men	77/132 (58%)

Table 2: PrEP Refusal

Variable		#/total responses in category (%)	p value
Overall	Refused	361/1140 (32%)	
MSM	Refused	119/328 (36%)	
Race	Black	58/276 (21%)	<0.001
	White	94/284 (33%)	
	Other	209/580 (36%)	
Ethnicity	Non-Hispanic	201/713 (28%)	<0.001
	Hispanic	160/427 (37%)	
Awareness	Aware	165/622 (27%)	<0.001
	Not Aware	196/518 (38%)	

Table 3: PrEP Awareness

Variable		#/total responses in category (%)	p value
Gender	Male	411/627 (66%)	<0.001
	Female	305/785 (39%)	
Race	White	213/335 (64%)	<0.001
	Black	176/350 (50%)	
	Other	337/765 (44%)	
Ethnicity	Non-Hispanic	478/884 (54%)	<0.001
	Hispanic	248/566 (44%)	
Sexual Orientation	MSM	289/350 (83%)	<0.001
	Not MSM	432/1076 (40%)	

CONCLUSIONS

- Understanding awareness and reasons for PrEP refusal is essential to better educate high-risk groups about HIV prevention strategies
- Our findings suggest that women need to understand their HIV risk, heterosexual men and MSM need to be better educated about PrEP medication
- Awareness within culturally distinct groups appear to be different suggesting a need to reach out, especially to Hispanic populations

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