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A RANDOMIZED TRIAL OF PATIENT ACTOR TRAINING TO IMPROVE PREP SERVICES FOR ADOLESCENT GIRLS AND YOUNG WOMEN IN KENYA

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BACKGROUND

- The Priya-SP study aimed to determine whether a standardized patient actor training intervention improved quality of PrEP service delivery to adolescent girls and young women in Kenya
- Adolescent girls and young women (AGYW) in sub-Saharan Africa are at disproportionately high risk for HIV acquisition and have low uptake of PrEP
- Judgmental interactions, inaccurate information, and inadequate counseling from health providers negatively affects PrEP uptake

METHODS

- Cluster randomized trial of a patient actor training intervention at 24 PrEP sites in Western Kenya
- Health providers participated in a 2-day training
  - Lectures on national guidelines, adolescent PrEP
  - Values clarification and communication exercises
  - Role play encounters with standardized patient actors
  - Individual and facilitated group feedback


Photo: Group debriefing

- Primary outcome = quality of PrEP counseling
  - Adherence to national guidelines (binary)
  - Communication skills (Likert)
- Quality outcome measured by unannounced patient actors (USPs or mystery shoppers)
- Intent to treat analysis compared post-intervention quality scores by randomization arm, clustering on facility and USP, and adjusting for baseline scores


Photo: Priya SP actors

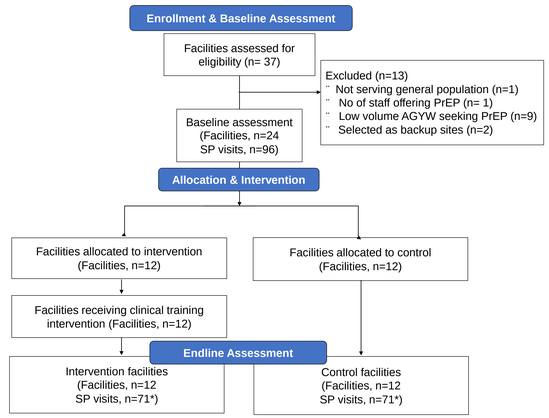
Training with standardized patient actors significantly improved adherence to national guidelines and communication skills by PrEP providers in Kenya

RESULTS

The mean quality score was 73.6% at intervention sites and 58.4% at control sites. By domain, mean adherence to PrEP guidelines scores were 57.2% at intervention sites and 36.2% at control sites and mean communications scores were 90.0% at intervention sites and 80.5% at control sites

Outcome Mean score	Intervention sites N=12 Mean (SD)	Control sites N=12 Mean (SD)	Mean difference 95% Confidence Interval [CI], p-value	Adjusted Mean difference* 95% CI, p-value
Overall quality	73.6 (16.3)	58.4 (16.7)	15.2, 9.1-21.4, p<0.001	15.3, 9.4-21.1, p<0.001
Domains				
PrEP guideline adherence	57.2 (25.4)	36.2 (26.9)	20.9, 12.2-29.7, p<0.001	20.9, 12.5-29.4, p<0.001
Provider communication	90.0 (10.9)	80.5 (11.4)	9.5, 5.1-13.9, p<0.001	9.5, 5.5-13.6, p<0.001

RESULTS



- 232 providers consented to USP visits, and 94 providers at intervention sites completed the training
- Median age of 31 years, 58% female; 49% were nurses, 45% clinical officers, and 7% counselors
- USPs posed as AGYW seeking PrEP at facilities in 142 encounters (71 at intervention sites and 71 control sites)

CONCLUSIONS

SP training significantly improved quality of care delivered by PrEP providers for AGYW in Kenya, including both adherence to national guidelines and communication skills

Incorporating SP training and unannounced SP evaluation could potentially improve PrEP uptake among AGYW and enhance understanding of other health services related barriers to acceptance of HIV interventions.

ADDITIONAL KEY INFORMATION

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