Depression Associated with PrEP Holidays Among Key Populations in Namibia

1075

Laimi Ashipala[1], Kaitlyn Atkins[2], Leonard Bikinesi[1], Justine Heita[3], Denis Mali[4], Abubakari Mwinyi[5], Robyn Eakle[6], Jane Schueller[6], Kelly Curran[7], Jason Reed[7]
[1] Ministry of Health and Social Services, Windhoek, Namibia, [2]Johns Hopkins University, Baltimore, MD, USA, [3]U.S. Agency for International Development, Windhoek, Namibia, [4]U.S. Agency for International Development, Pretoria, South Africa, [5]Jhpiego, Windhoek, Namibia, [6]U.S. Agency for International Development, Washington, DC, USA, [7]Jhpiego, Washington, DC, USA

BACKGROUND

Evidence before this study

- Mental health challenges negatively impact engagement in HIV services and treatment outcomes
- Key populations may be more vulnerable to these impacts, particularly with interventions that require frequent engagement with healthcare systems such as oral PrEP

Objectives

- Estimate the prevalence of depression among adolescent girls and young women (AGYW), female sex workers (FSW), and men who have sex with men (MSM) using PrEP in Namibia
- Examine relationships between mental health (depression and substance use) and PrEP use

METHODS

Data source and measures

We collected survey data (January to April 2021) from new and continuing PrEP users (n=500) when they accessed PrEP services at 13 facilities in three regions of Namibia.

We measured mild, moderate, and acute depression using the Patient Health Questionnaire (PHQ-9), self-reported alcohol and drug use, HIV risk perception, and condom use.

PrEP use outcomes were PrEP holidays (taking a break from PrEP for at least three consecutive days), missed pills, and self-reported side effects.

Analysis

We estimated the prevalence of mild, moderate, and acute depression among AGYW, FSW, and MSM separately.

In each group, we estimated adjusted prevalence ratios (aPR) and 95% confidence intervals (CI) for the association of depression with PrEP holidays. All analyses adjusted for age and education.

- **Suicidal ideation reported by 3 in 10 key population PrEP clients studied in Namibia**
- **Depression and substance use associated with PrEP non-adherence and stoppage**

RESULTS

Mental health characteristics of sample (n=500)

- PHQ-9 suggested moderate depression in 11% (n=55) of participants, including 17.1% of MSM, and acute depression in 5% (n=26) of participants including 7.6% of FSW (Figure).
- Six in 10 participants (62.8%) were screened as having potential alcohol use disorder, including 74% of FSW, 45% of AGYW, and 92% of MSM.

Association between mental health and PrEP outcomes

- Depression associated with PrEP holidays (p=0.03) and missing pills on weekends (p=0.02).
- PrEP holidays associated with alcohol use disorder (p<0.01), and illicit drug use (p<0.01).
- Among MSM, PrEP holidays and missing pills on weekends more prevalent among individuals with moderate vs no depression (PrEP holidays: aPR 3.59, 95% CI 1.15-11.23); missing pills: aPR 10.47, 95% CI 1.51-72.76).
- Among AGYW, PrEP holidays more prevalent among individuals with moderate vs no depression (aPR 2.60, 95% CI 1.37-4.95).
- Among FSW, depression not associated with PrEP holidays or missing pills on weekends.

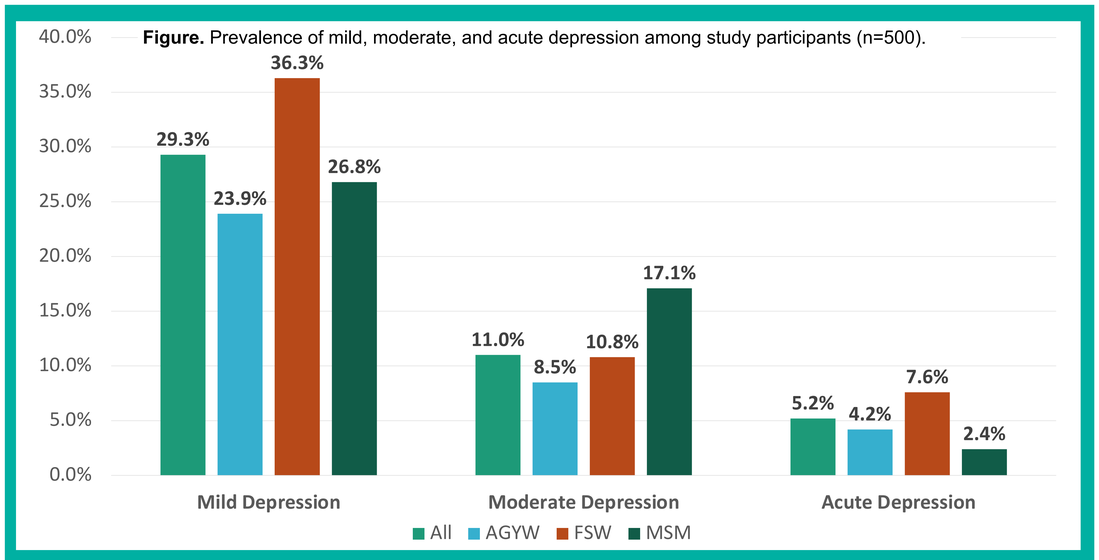

Figure. Prevalence of mild, moderate, and acute depression among study participants (n=500).

CONCLUSIONS

Key findings

- Clients accessing oral PrEP services represent populations who may be at greater risk for mental health issues including depression, suicidal ideation, and substance use.
- PrEP clients with mental health challenges may need additional support to maintain daily oral PrEP use during periods of HIV risk.
- Associations of depression with PrEP outcomes were stronger among MSM, which may suggest heightened vulnerability in this group.

Implications

- Interventions are needed to provide tailored support to key populations facing mental health challenges.
- Integration of mental health and HIV services is critical to promote well-being and foster positive HIV outcomes among key populations.
- Additional research is warranted to understand the specific mechanisms through which depression may shape daily oral PrEP use, and the impacts of depression or other mental health challenges on use of long-acting injectable PrEP.

ADDITIONAL INFORMATION

This study was made possible with support from the U.S. President's Emergency Plan for AIDS Relief through the United States Agency for International Development funded RISE program, under the terms of the cooperative agreement 7200AA19CA00003. The contents are the responsibility of the RISE program and do not necessarily reflect the views of USAID or the United States Government.

PEPFAR USAID FROM THE AMERICAN PEOPLE RISE Reaching Impact, Saturation, and Epidemic Control