01173

Reaching Emergency Contraceptive Pill Users With HIV and Post-Exposure Prophylaxis Services in Kenyan Pharmacies

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BACKGROUND

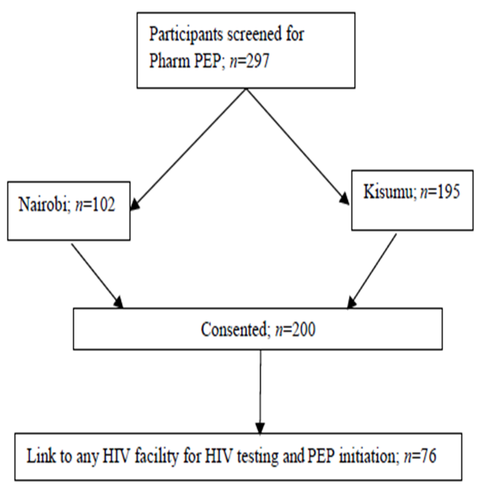
Adolescent girls and young women (AGYW) seeking emergency contraceptive pills (ECP) have had recent condom-less sex. They are therefore eligible for post-exposure prophylaxis (PEP) to lower the risk of HIV acquisition. Most AGYWs purchase ECP at pharmacies, but it is not known whether AGYWs are interested in HIV testing and PEP services when they seek ECP

METHODS

We enrolled AGYW aged 15-24 from May to August 2023 seeking ECP in Kenyan pharmacies. Pharmacy providers were trained on research practices and linked ECP purchasers to a REDCap survey. Participants answered questions on HIV risk perception, HIV testing history, willingness to test for HIV, initiate PEP, and comfort with inviting sexual partners to test for HIV. Referrals were given for HIV testing and PEP services. A 10-day follow-up survey assessed whether participants had engaged in PEP or HIV testing.

RESULTS

Figure 1: Flow diagram for participants



DEMOGRAPHIC CHARACTERISTIC

Table 1: Characteristics of AGYW seeking emergency pill at pharmacies

Characteristic	Overall n (%)
County	
Nairobi	83 (40.1)
Kisumu	124 (59.9)
Age (years)	
15-19	39 (18.8)
20-24	168 (81.2)
Education level (completed/ongoing)	
Primary	20 (10.1)
Secondary	83 (41.7)
Mid-level College/University	96 (48.2)
Relationship status	
Single	102 (51.0)
Dating	78 (39.0)
Married/in-union	17 (8.5)
No answer	3 (1.5)
Main source of income	
Family	114 (55.1)
Employed informal/formal sector	34 (16.4)
Self employed	52 (25.1)
No answer	7 (3.4)

Table 1

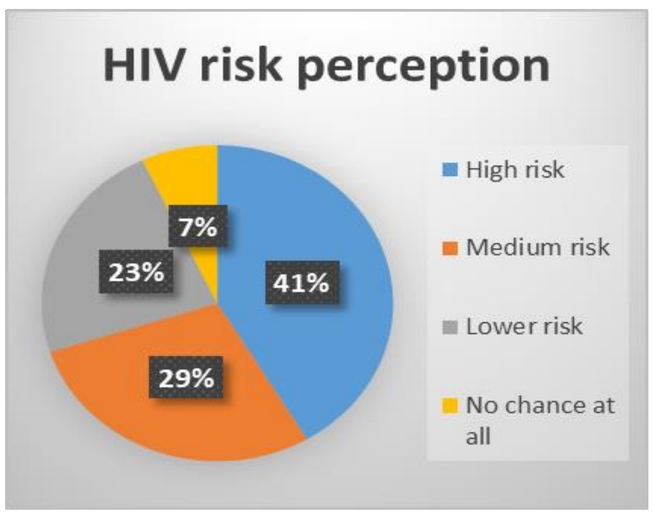


Figure 2

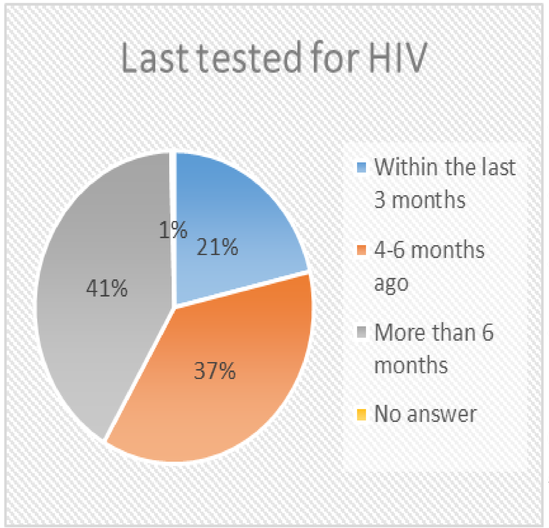


Figure 1

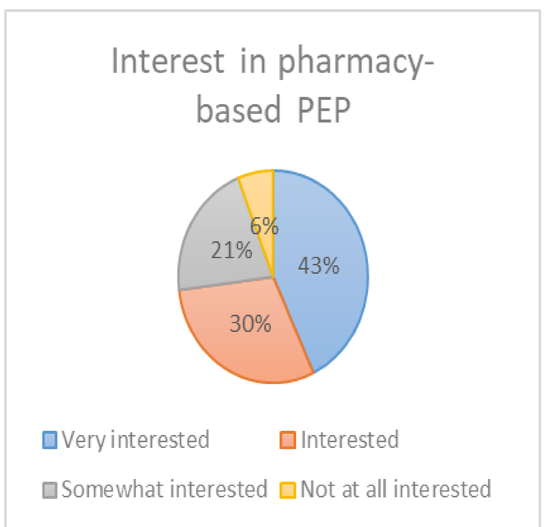


Figure 3

REASONS FOR NOT SEEKING HIV TESTING

- Felt not at risk -23%
- Know partner HIV status -11%
- Feared to tested -12%
- Facility was far -7%
- Lack time-44%

CONCLUSIONS

AGYW are frequent users of local pharmacies for reproductive health needs, especially emergency contraception. This demographic expresses interest in HIV prevention services, including testing and PEP. Further efforts to expand HIV prevention services at pharmacies and educate pharmacists in adolescent-friendly care are needed as this can extend services to an underserved population at high risk of HIV as well as in need of STI and FP services

ACKNOWLEDGMENTS

We thank the pharmacy providers and AGYW for their contribution. This research was funded by Bill & Melinda Gates Foundation [OPP1213352/INV009408] through the Reducing HIV in Adolescents and Youths (RHAY) mentorship initiative and the University of Washington Center for AIDS Research (P30 AI027757).

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