





Comparing Client and Provider Preferences for HIV Prevention in South Africa

Overall

Elizabeth

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Background & Significance

- Estimated HIV prevalence among South African men who have sex with men (MSM) between 10 and 50%, more than twice that of other reproductive age men
- South African MSM experience unique barriers to accessing HIV prevention services, including heterosexual focus of HIV prevention efforts and providers' stigmatizing views and lack of understanding regarding MSM
- MSM included for the first time as a target demographic in the South Africa's 2007-2011 National Strategic Plan for HIV
- Emerging approach to HIV prevention is the development of "combination prevention packages" that conglomerate multiple prevention measures into a single intervention and are designed uniquely for the needs, risks, and preferences of a specific population

Purpose

Examination and comparison of perceptions of the HIV prevention needs of South African MSM by both MSM and HIV service providers in order to determine manners of optimizing HIV prevention interventions for this population.

Theoretical Framework

According to the conceptual framework of patient-centeredness, a conglomerate of factors come together to create a health environment that is optimal for the patient.

> Biopsychosocial Perspective of Illness

> > **Understanding** of "Patient as Person"

Patient

Understanding of "Provider as Person"

Shared Power and Responsibility Therapeutic Alliance

Methods

- Part of a larger qualitative study assessing health care access and sexual behaviors among MSM in South Africa Recruitment:
- Existing lists of MSM interested in research participation and snowball sampling through initial contacts
 - Local HIV service organizations contacted and staff invited to participate
- Eleven focus group discussions:
- Five focus groups with MSM, three in Cape and two in Port Elizabeth
- Six focus groups with HIV service providers, three in Cape Town and three in Port Elizabeth
- Participants asked about experience utilizing (MSM) or administering (providers) each service
- Participants asked to select the three most desirable and important clinic characteristics and prevention services, respectively, for MSM

Clinic Characteristics

Confidentiality of Visit Friendly Staff

Short Wait Time

Same Doctor at Each Visit

Clean Environment

LGBT-sensitization Training

One-stop Shop

MSM-specific Testing Space

General Testing Space MSM-specific Questions from Provider

HIV Prevention Services Condoms

VCT (Voluntary Counseling and Testing) PrEP/PEP (Pre/Post-Exposure Prophylaxis)

Home VCT **HIV Education**

CHTC (Couples' HIV Testing and Counseling)

SMS (Text Message) Health Advice

Referral Services

Lubricant

Data Analysis

- Votes for each clinic characteristic and prevention service tallied at each focus group
- Independent coding of focus group transcripts by three coders, followed by consensus revisions and development of inductive codebook
- Codes applied to text, examining reasons for desired clinic characteristics and combined prevention package items

Results

Analysis of transcripts revealed six themes that underlay the clients' and providers' selections: Community Stigma, Healthcare Stigma, Patient Adherence, Personal/Partner Preference, Availability of Care, and Perceived Effectiveness.

Community Stigma

Clients: Confidentiality of Visit, One-stop Shop, Short Wait Time, MSM-specific Testing Space, and Friendly Staff

"I like to come to [specific clinic]... [that] mostly is people I don't know unlike the clinic that's close to my house that everyone goes there." (Client, Port Elizabeth)

"...people, so many times, cross borders where they go to from one area to another just not to be seen and to be known." (Provider, Cape Town)

Providers: Confidentiality of Visit and Onestop Shop

Healthcare Stigma

Clients: Confidentiality of Visit, Friendly "...the minute they heard... you say you are Staff, Same Doctor at Each Visit, MSM- gay, there is this immediate shift in attitude." specific Questions from Provider, and (Client, Cape Town) SMS Health Advice

"I wouldn't encourage uh uh promoting men and men sexual projects... it's not a thing that I would enjoy doing it honestly speaking." (Provider, Cape Town)

Providers: Confidentiality of Visit, Friendly Staff, MSM-specific Testing Space, and MSM-specific Questions from Provider

Patient Adherence

Clients: Lubricant and CHTC; reason against selecting PrEP/PEP

"To prevent HIV [lubricant] would be much easier for me [than] for me to wake up and take the PrEP/PEP and use a, carry condoms with me." (Client, Cape Town)

bonding [even] besides knowing the status of your partner." (Provider, Port Elizabeth)

Providers: CHTC

Personal/Partner Preference

Clients: Condoms, PrEP/PEP, Lubricant, and VCT

Providers: no mention of this theme

"...there are still MSM... that still don't use condoms because they're trying to... protect their relationship." (Patient, Cape Town)

Availability of Care

Clients: PrEP/PEP, Short Wait Time, and Same Doctor at Each Visit

"I think they must give everyone [PrEP] so that the drugs must be in their blood when the HIV goes into their body." (Patient, Cape

"...staying in a clinic from let's say 7 o'clock to 4 o'clock, it's not a friendly approach to patient care." (Provider, Cape Town).

Wait Time; reason Providers: Short against selecting PrEP/PEP

Perceived Effectiveness

Clients: Condoms and Lubricant (as "...there are less risks of getting HIV when primary protection), and PrEP/PEP, VCT, you use lube." (Patient, Port Elizabeth) CHTC, and HIV Education (as secondary protection)

"...anybody that's educated will, they will obviously go to the VCT to know their status, they will use condoms to protect themselves." (Provider, Cape Town)

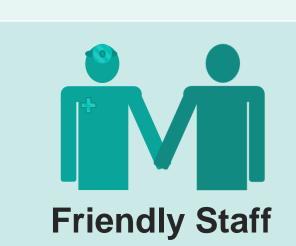
Providers: Condoms, VCT, CHTC, and HIV Education (as primary protection), and PrEP/PEP and Lubricant (as secondary protection)

Client Preferences for Clinic Characteristics Cape Town Confidentiality of Visit Same Doctor at Each Visit

Port Confidentiality of Visit Elizabeth

> **Confidentiality of Visit** Same Doctor at Each

Visit



Friendly Staff

Friendly Staff

Provider Preferences for Clinic Characteristics

Cape Town Confidentiality of Visit One-stop Shop Friendly Staff Confidentiality of Visit Port

Confidentiality of Visit



Same Doctor at Each

MSM-specific Testing Space LGBT-sensitization Training



Client Preferences for HIV Prevention Services PrEP/PEP Cape Town Condoms

Condoms Elizabeth **Overall**

PrEP/PEP

HIV Education



HIV Education

HIV Education

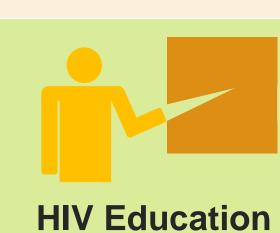
Provider Preferences for HIV Prevention Services

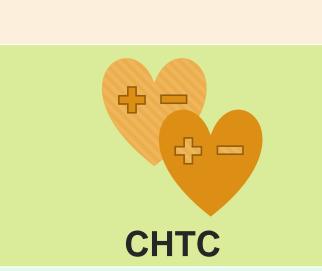
Condoms

Condoms

Port Condoms Elizabeth **Overall**

Cape Town Condoms





Summary

VCT

CHTC

- Consistencies and discrepancies were found between MSM and HIV service providers as well as across cities in understanding of HIV prevention needs of MSM
- General understanding across all groups that specific prevention efforts must be tailored to South African MSM
- · Discrepancies in understanding of which clinic characteristics and prevention services are important, as well as the reasons why each is important
- Minority of discriminatory opinions expressed by providers toward MSM
- Information necessary to strengthen relationships between MSM clients and service providers is available through this study
- Importance of tailoring interventions to both target populations and locales is highlighted

Conclusions

Study findings provide groundwork for the development of a combination prevention package tailored to the needs and preferences of South African MSM. Information is also presented that provides a basis for creating a parallel intervention targeting providers, working to bridge the divergence between them and their MSM clients. Future HIV prevention efforts may benefit by utilizing this knowledge to gauge the preferences of other sub-Saharan MSM and implementing optimally accessible and relevant HIV prevention interventions for South African MSM in these areas.