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Introducing Pre-Exposure Prophylaxis (PrEP) Therapy for Populations Experiencing Homelessness

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Background:

As healthcare management of HIV continues to evolve with new pharmaceutical options for prophylaxis and treatment, providers in all care settings need to be up-to-date on evidence-based utilization of these options(Karris, Beekman, Mehta, Anderson, & Polgreen, 2014). Around the globe, PrEP utilization is variable and there is a critical need for interventions that can effectively meet the needs of individuals who are without housing or stable shelter. Research has identified common barriers to implementation and adherence of PrEP therapy including concerns about safety, side effects, cost, and overall effectiveness of the regimen (Koechlin et al., 2017). Healthcare providers are in key positions to provide education and offer PrEP to individuals at increased risk for HIV infection (Haberer et al., 2017).

For individuals who are experiencing homelessness, access to care and financial barriers remain significant obstacles to obtaining needed care(Barker & Maguire, 2017). Unfortunately, among individuals who are without stable housing, infectious diseases remain a very real and ongoing threat and HIV continues to be a significant problem affecting overall health and quality of life. While targeted therapy has improved worldwide, more focus is needed on reaching this population of individuals.

Method:

A search was conducted for clinical trials, qualitative studies, or PrEP guidelines discussing the utilization of PrEP in individuals experiencing homelessness. To date, there is very little available evidence relating to the use of PrEP with this population. The review of literature identified several articles discussing adherence interventions, provider education and willingness to prescribe PrEP, clinical effectiveness of the regimen, and patient attitudes and behaviors relating to the use of PrEP (Bourne, et al., (2017); Alistar, Grant, & Bendavid, (2014); Chen & Dowdy, (2014). This information is helpful in evaluating the use of and response to therapy among different population groups and may serve as a guide for the development of interventions aimed at individuals who are experiencing homelessness.

Findings:

Healthcare providers who work with individuals experiencing homelessness are usually cognizant of the many barriers to healthcare seen in this population (Barker & Maguire, 2017). However, knowing the specific risks for contracting HIV and how to prevent infection within their living situation is critical information for individuals experiencing homelessness. New PrEP regimens are designed to effectively prevent infection in many individuals who are at increased risk for contracting the disease (Morton et al., 2017). Thus, there is great need to provide education about and access to PrEP to providers and individuals who are without stable shelter.

Discussion:

Homelessness is not restricted to one demographic or geographic area(Barker & Maguire, 2017). The provision of effective healthcare to this population is a critical need worldwide. One way of addressing this need is to provide ongoing education about HIV prevention and treatment to professionals who are caring for individuals experiencing homelessness. Facilitating access to treatment is another area of focus for providers along with consideration of financial constraints and barriers that are present(Cohen et al., 2016). In order to expand services to individuals without secure shelter, providers globally need to invest in education and outreach in order to improve HIV preexposure prophylaxis for this demographic. By partnering with non-profit organizations focused on HIV prevention and AIDS treatment, providers will be able to assist individuals in obtaining needed care.

Conclusion:

While current guidelines exist and are being developed to assist providers in the effective utilization of PrEP in the prevention of HIV in the setting of primary care, there is great need for expanding knowledge to include individuals who are experiencing homelessness and are at risk for acquiring HIV. PrEP has proven efficacy in preventing HIV and can substantially change the landscape of AIDS incidence and prevalence around the world. Healthcare providers who work with homeless persons should invest the time and energy needed to ensure that this potentially life-saving intervention is available for this vulnerable population.

Title:

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Symposium

Keywords:

HIV prevention, PrEP in homeless population and PrEP service utilization

References:

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Abstract Summary:

Individuals who are experiencing homelessness are at increased risk for exposure to HIV because of precarious living situations and crowded shelter populations. The utilization of pre-exposure prophylaxis (PrEP) by agencies providing healthcare for the homeless is urgently needed.

Comments to Organizers:

Unwithdrawn with session

Content Outline:

Introduction

- Individuals who are homeless often have poor access to health care and live in precarious situations.
- Providers who care for this population need education regarding the use of pre-exposure prophylaxis
- Patients who are eligible for PrEP therapy and are without stable housing should be given the option of taking PrEP to prevent the acquisition and transmission of HIV infection.

Body:

- Targeted therapy using PrEP has increased in the United States, however more focus is needed on improving access for vulnerable population groups such as individuals experiencing homelessness.
- Provider education is an integral component of expanding utilization to this population.
- HIV testing should be made widely available to vulnerable populations, among whom the disease may take a devastating toll.
- Partnerships between non-profit governmental agencies and providers will improve access to HIV testing and PrEP for individuals who are homeless.

Conclusion:

- Utilization of PrEP in persons experiencing homelessness will decrease the risks of HIV transmission among this population.
- Creative methods of forming partnerships within communities may provide a feasible method to improve access to care for people who are homeless.

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Professional Experience: Family Nurse Practitioner for 12 years. Current primary practice site: Homeless clinic and Community Free Clinic Clinical Assistant Professor, UAH, College of Nursing, Fulltime faculty

Author Summary: Dr. Caires has practiced as a family nurse practitioner for the past 12 years. Her practice focus and research interests relate to homeless care and indigent care in the United States. She serves as Clinical Associate Professor in the Nurse Practitioner Program at the University of Alabama in Huntsville, Alabama.

Second Secondary Presenting Author **Corresponding Secondary Presenting Author** Yeow Chye Ng, PhD, MSN, BSN, BSE, RN, FNP-BC, NP-C, NRCME, AAHIVE University of Alabama in Huntsville College of Nursing Assistant Professor Huntsville AL USA

Professional Experience: Dr. Yeow Chye Ng holds a bachelor's degree in Computer and Electrical Engineering. He was employed as a computer hardware design engineer in a private company for three years. Dr. Ng then made the decision to return to school for a nursing degree. Dr Ng had developed a strong interest and enthusiasm for both innovative engineering designs and the medical field. He completed the bachelor's program, master's program and PhD program in nursing. Presently, Dr. Ng teaches in an academic setting, and also practicing as a family nurse practitioner. Dr. Ng is also a board certified HIV Expert[™] (AAHIVE) by The American Academy of HIV Medicine. Dr. Ng holds a strong and passionate commitment to provide novel solutions to improve a patient's healthcare outcome. One of his professional goals includes the development of innovative software equipment for improving a patient's adherence towards their medical appointments.

Author Summary: Dr. Ng has developed a strong interest and enthusiasm for both innovative engineering designs and the medical field. Dr. Ng holds a strong and passionate commitment to provide novel solutions to improve a patient's healthcare outcome. One of his professional goals includes the development of innovative software equipment for improving a patient's adherence towards their medical appointments.

Third Secondary Presenting Author Corresponding Secondary Presenting Author Jack Mayeux, MSN

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Professional Experience: Jack Mayeux holds a Master's of Nursing with a focus as a Family Nurse Practitioner and currently working on his Doctorate of Nursing. He is presently employed at an urgent

care clinic and has been practicing in this setting for more than two years. Previously, he was employed at a family practice clinic. He has been a registered nurse for nine years with his primary experience in the cardiac setting.

Author Summary: Jack Mayeux has practiced as a family nurse practitioner for three years. While working at the Urgent care setting, Jack developed a strong interest in developing an HIV protocol specifically to this setting. His primary research interest relates to HIV and PrEP as it relates to an urgent care setting. Jack has served as preceptor/mentor to current and past NP students. Jack is currently a DNP student at the University of Alabama in Huntsville.