Piloting TelePrEP Information Sessions to Increase PrEP Awareness and Uptake among Black and Latina Cisgender Women

University of California, Los Angeles
Center for HIV Identification, Prevention, and Treatment Services
Study Team and Partners

• **Study Team:**
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  - Ronald Brooks, PhD (Co-PI)
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  - Sung-Jae Lee, PhD
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• **Partners:**
Aims

• The study team trained staff at Black Women for Wellness (BWW) and East Los Angeles Women’s Center (ELAWC) to conduct TelePrEP Information Sessions with their BLCW clients to:
  
  • **AIM 1:** Raise awareness and knowledge of PrEP among BLCW.
  
  • **AIM 2:** Motivate BLCW to consider using PlushCare as an option to access PrEP.
Implementation Science Methodologies

- Agency staff completed monthly client engagement logs and submitted them to the study team.

- The study team conducted mixed-methods interviews to assess the acceptability and appropriateness of the TelePrEP Information Sessions, PrEP, and PlushCare.
  - We used Proctor’s taxonomy of implementation outcomes to guide development of the interview guide.
  - We utilized two separate quantitative measures to help assess the appropriateness and acceptability of the Information Session: the Acceptability of Intervention Measure (AIM) and the Intervention Appropriateness Measure (IAM).
Key Outcomes: Overall Agency Findings from BWW

- **83 Participants**
  - 22 Interested in PrEP
  - 15 Interested in PlushCare

- **11 Sessions**
  - 265 total minutes
  - 15 - 45 minutes each
  - 24 minutes average

Type:
- Individual: 3
- Group: 8

Ending the HIV Epidemic
Key Outcomes: Overall Agency Findings from ELAWC

94 Participants
- 16 Interested in PrEP
- 6 Interested in PlushCare
- 7 Had Follow-Up Meetings

26 Sessions
- 688 total minutes
- 15-60 minutes each
- 26 minutes average

Type:
- 9 Individual
- 17 Group

Language:
- 20 English
- 6 Spanish
Key Outcomes: Highlights from Qualitative Interviews with LCW

- The majority of LCW did not know about PrEP and PlushCare.
- The Information Sessions increased knowledge and awareness of PrEP and PlushCare.
- LCW viewed the Information Sessions as acceptable and appropriate.
- LCW generally expressed positive attitudes about PrEP and PlushCare.
- The majority of LCW did not feel they were at sufficient risk to warrant PrEP use.
Discussion: Getting to the Next Level

• What were the challenges?
  • Staff turnover
  • Lack of support and communication from senior leadership to frontline staff
  • Limited timeline to complete project (one year)
  • Mistrust of research among clients

• How did you address those challenges?
  • Increased training sessions to accommodate new staff members
  • Created opportunities for discussion related to recruitment
  • Conducted coaching sessions with senior leadership and frontline staff
  • Created video introductions from investigators and tailored promotional materials
Best Practices and Lessons Learned

• The TelePrEP Information Sessions were very successful in raising awareness and knowledge of PrEP and PlushCare among LCW clients.

• Connecting BLCW to PrEP services will require extensive time and support.

• There is a need to build trust with BLCW around research and PrEP.

• The health messenger is important.
Acknowledgements

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• Black Women for Wellness: Jan Robinson Flint, Akil Bell, Stephanie Haynes, Aareka Davis, Milan Eatmon, Isabella Faith

• PlushCare: Dr. James Wantuck, Jonathan Bandy, Seth Ragonese, Michael Contreras, and Dr. Cristina Garcia

• Los Angeles County Department of Public Health, Division of HIV and STD Programs (DHSP): Dr. Sonali Kulkarni
Participant Demographic Information (N=20)

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<th>Characteristics</th>
<th>n</th>
<th>(%)</th>
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<tbody>
<tr>
<td>Age (years): mean (range)</td>
<td>41</td>
<td>(26-62)</td>
</tr>
<tr>
<td>Straight/heterosexual</td>
<td>17/19</td>
<td>89.5 %</td>
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<tr>
<td>Completed some high school or received high school diploma/GED</td>
<td>13/20</td>
<td>65.0 %</td>
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<td>Employed (full-time, part-time, or other)</td>
<td>13/19</td>
<td>68.4 %</td>
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<tr>
<td>Annual income of $20,000 or less</td>
<td>12/17</td>
<td>70.6 %</td>
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<tr>
<td>Have health insurance</td>
<td>16/20</td>
<td>80.0 %</td>
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Definitions of Acceptability and Appropriateness

**Acceptability**
- The perception among implementation stakeholders that a given intervention is agreeable or satisfactory. Acceptability can be measured from the perspective of various stakeholders, such as senior leadership, health educators, and consumers.

**Appropriateness**
- The perceived fit, relevance, or compatibility of an intervention for a given practice setting, provider, or consumer; and/or perceived fit of an intervention to address a particular issue or problem.