# **Characterizing Cis and Trans Women's Knowledge of HIV Risk and HIV Prophylaxis**



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## BACKGROUND

- Pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) effectively prevent HIV, and PEP-in-Pocket (PIP) offers a new modality for accessible PEP<sup>1-6</sup>
- Despite the availability of prophylaxis, HIV rates are increasing among Canadian women<sup>7</sup>
- In comparator countries, there are increased PrEP-to-need ratios among women, indicating an unmet need<sup>8</sup>
- There is a need for Canadian data regarding women's decision-making for prophylaxis

### **HIV RISK SELF-ASSESSMENT**

278 responses were included. Of these:

- 259 self-assessed their HIV risk as low/average
- 19 self-assessed their HIV risk as high
- High self-assessed risk was associated with self-reported HIV risk factors:
  - Sexual risk factors (sex work/transactional sex, concurrency, sexual violence, and sex while intoxicated)
  - Drug use risk factors (sharing injection equipment, being injected by someone else, taking drugs from someone else

### **OBJECTIVES**

This cross-sectional study evaluated women's objective HIV risk, the understanding of their own risk, and prophylaxis awareness and access.

### METHODS

#### **Population**

- We included participants who self-identified as sexually active women that were HIV prophylaxis-naïve
- We excluded women who identified themselves as HIV-positive

#### **Recruitment & Setting**

Recruitment took place in partnership with Ontario community-based organizations (e.g. shelters, addiction treatment centres, drop-ins, women's programming)

#### Survey Instrument

- 52-question paper survey
- Questions included socioeconomic and demographic variables, HIV risk behaviours, self-assessed HIV risk, and experiences with HIV prophylaxis

#### **Outcomes & Analysis**

- The primary outcome was self-assessed HIV risk
- We analyzed the association between reported sexual and drug use-related HIV risk factors and self-assessed HIV risk



# **EXPERIENCES WITH PROPHYLAXIS**

- Overall knowledge of PrEP, PEP, and PIP was 49%, 48%, and 25% respectively
- Knowledge was lower in the low self-assessed risk group than the high self-assessed risk group
- **PrEP:** 48.3% vs 57.9% (p=0.436)
- **PEP:** 47.9% vs 52.6% (p=0.724)
- **PIP:** 23.9% vs 36.8% (p=0.229)
- Prior PrEP offer and PEP offer was reported by 7% of women for both classes of prophylaxis
- Similarly, prior offer was less frequently reported by the low self-assessed risk group
- **PrEP:** 6.6% vs 10.5% (p=0.509)
- **PEP:** 6.2% vs 10.5% (p=0.467)





Figure 3: Reported drug risk factors and self-assessed HIV risk status. A) reporting any drug use risk factors (p<0.001), B) sharing injection drug equipment (p=0.012), C) being injected by another person (p=0.037), D) taking drugs from another person (p=0.023)

### CONCLUSIONS

- Self-assessed HIV risk was associated with some sexual and drug risk factors, though many women reporting risk factors still reported low-average risk
- Awareness of prophylaxis was low across groups, even among those with high self-assessed risk
- As women are a growing proportion of new HIV

# DISCLOSURES

MJB: ViiV, Gilead (speaking honoraria, advisory) CM: Canadian Network on Hepatitis C (funding). KM: Gilead (grant funding), Specialty Rx (consulting fees)

### CONTACT

■ No ■ Yes ■ Other/did not answer/unknown ■ No ■ Yes ■ Other/did not answer/unknown

infections, there is a need for increased awareness of risk factors and biomedical prevention options among this at-risk group



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