BACKGROUND

- Use of PrEP for HIV prevention is not life-long, but rather linked to "seasons of risk".[1, 2]
- Adolescents and young women (AGYW) may underestimate HIV risk, limiting effectiveness in this population.[3]

We adapted a novel approach to elicit perceptions of HIV risk in the context of narrative sexual histories,[4] a method previously used to understand meaning in the histories.[5]

- Sexual histories were obtained from adolescent girls and young women (AGYW) in an open label PrEP uptake and adherence in 16-25 year-old HIV-uninfected women in Zimbabwe (Harare) and South Africa (Crossroads, Cape Town, and Mbombela, Johannesburg).

RESULTS

OVERVIEW

- 67 participants enrolled in the qualitative sub-study; 56 completed the second interview. Relationship timelines were collected from 31 participants, encompassing 130 discrete relationships; 99 were rated by participants using the 1-5 risk scale.

- Participants said that creating the timelines gave them new and valuable insights into their lifetime exposure to risk.

- Socio-demographics:
  - Median age 21 years (IQR 19-23)
  - 79% had completed high school or higher; 37% current students
  - Half reported having at least one main partner; 11% married
  - Most (61%) living with their parents

KEY PATTERNS IN RISK ASSESSMENTS

- "Low risk" partners were described in largely positive terms:
  - "decent, humble and respectful", "loving and caring", [Harare]
  - "perfect", "kind and good hearted" [Johannesburg].
  - "lurid" and male participants "felt loved" [Cape Town]
  - "smooth", and believed to not have other partners [other younger men] ("He was still young. I don’t think he has a lot that he did.", Harare), or men with no obvious "suspicious behavior" ("I did not see him as someone who likes [other] women", Johannesburg).

- Other protective factors considered to lower HIV risk:
  - relationships with shared decision-making and good communication
  - HIV testing together with a partner
  - Infrequent sex
  - Condom use (even if inconsistent)

- "High risk" relationships were those with:
  - men who were partners of other partners ("womanizers", "smooth talkers", "players" and "cheats"). Women said they would have used PrEP in these relationships had it been available.
  - older, transactional sex partners ("blissened") and casual partners ("time pushers") in Harare, "F**k boys" in Johannesburg, and "saddle men" in Cape town, but only if they had other sexual partners.
  - men in precarious socio-economic circumstances: financially unstable, not supporting children, with no fixed abode [Harare] or PrEP and controlling behavior, where AGYW described feeling "used for sex" and abused", and reported depression and low self-esteem [Johannesburg].
  - more substance use: men who were "drunkards" (Harare), drug-users, or men with whom participants had had "drunk sex" (Johannesburg and Cape Town).

- Participants felt at risk not only of HIV but also of unplanned pregnancies and other sexually transmitted infections

- Participants’ own concurrent partners were largely ignored in the risk calculation.

CONCLUSIONS

This "visual storytelling" approach with young women in HPTN 082 revealed how their calibration of personal risk of HIV infection differed from that used in conventional public health messaging about HIV risk:

- Partner fidelity is a deal-breaker: In the absence of infidelity, the significance of other risk factors – such as low condom use or transactional sex was de-emphasized.
- Prior experience of partner infidelity affected women’s ability to trust later partners, but did not appear to improve accurate detection of risk in subsequent relationships.
- Emotions matter: HIV risk tended to be underestimated in relationships where participants had been ‘in love’ or emotionally connected to the partner, or that were affirming and egalitarian.
- Full descriptive narratives were completed for each participant, from which key risk factors were isolated using a matrix. For the analysis reported here, risk scores were clustered into low (1-2), and high (3-5).