

Effect of
Pre-Exposure
Prophylaxis (PrEP)
Education on
Sexual Behaviors of
Gay and Bisexual Men

Randulf Erguiza, DNP, APRN, FNP-BC, NP-C

GEORGETOWN UNIVERSITY

Problem Statement

 A concern that has been raised is that the entry of PrEP into the market may result to risk compensation or behavioral disinhibition through increase unsafe sexual behaviors such as unprotected sex.

Research Aim

- Understanding of the effect of PrEP education on the sexual behaviors and STI rates of a purposive sample of GBM.
- Results are intended to inform the development and promulgation of evidence-based, effective PrEP education



Research Design

RESEARCH DESIGN

Pilot Study using Mixed-Method involving one group, Exploratory and Quasi Experimental Pre- and Post- Test Research

POPULATION & SAMPLE

- Adult Gay and Bisexual Men in an HIV Center in Oakland, California
- Sample: 8 (Pre-Post-Intervention) and 4 (Follow-Up)

THEORETICAL FRAMEWORK

- Pender's Health Promotion Model
- Individual Characteristics, Behavior specific Cognitions and Affect, and Behavioral Outcome-Health Promoting Behavior

STI-PrEP Knowledge Questionnaire

Sexual Risk
Cognition
Questionnaire

Educational Intervention

Self-Reported STI Status

SemiStructured
Open-Ended
Questions

INSTRUMENT & TOOLS

RESULT: STI-PrEP Questionnaire Scores

Pre-Post-Intervention, & Follow-Up Sessions	Mean	Standard Deviation	Median	X ² (2), p
Pre-Intervention for those with Follow-up (n = 4)	13.50	0.58	13.50	
Post-Intervention for those with Follow-up (n = 4)	14.75	0.50	15.00	
Follow-up (n = 4)	14.50	0.58	14.50	7.54, p = .023

RESULT: SRCQ Scores

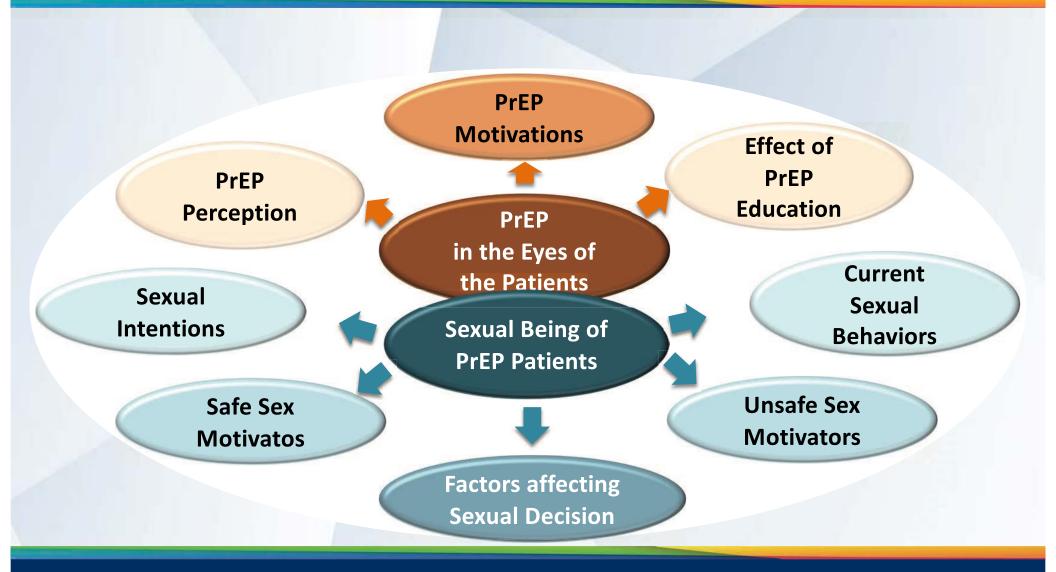
Pre-Post-Intervention, & Follow-Up Sessions	Mean	Standard Deviation	Median	Z, p
Pre-Intervention for those with Follow-up (n = 4)	20.0	5.70	19.50	
Follow-up (n = 4)	20.50	3.11	20.50	378, p = .705

RESULT: Self-Reported Status

	Pre-Post Intervention		Follow-Up	
Pre-, Post-Intervention, & Follow-Up Sessions	Positive STI History	%	Positive STI History	%
Pre- & Post-Intervention for those with Follow-Up (n = 4)			4	100.0
Follow-Up (n = 4)			3	75.0

RESULT:

Themes from Open-Ended Questions



Recommendations & Implications

- Nurses are instrumental in providing health interventions to PrEP patients
- The multimodal approach of interventions should be utilized.
- Tailoring risk-reduction education to individual PrEP patient is needed.
- There is a need for mandatory training to health practitioners by clinics or health setting providing PrEP.
- The CDC guidelines should be adopted by PrEP clinics utilizing a multidisciplinary team-based approach in consideration of limited time visits of patients with primary care providers.
- A larger scale study with adequate sample consisting of all groups identified as high risk for HIV and utilizing multimodal approach in behavioral risk reduction is recommended.



References

- American Sexual Health Association (ASHA). (2016). Statistics. Retrieved from http://www.ashasexualhealth.org/stdsstis/statistics/
- Centers for Disease Control and Prevention (CDC). (2014). Pre-exposure prophylaxis (PrEP) for HIV prevention. Retrieved from http://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf
- Centers for Disease Control and Prevention (CDC). (2014). US Public Health Service Preexposure prophylaxis for the prevention of HIV infection in the United States-2014. A clinical practice guideline. Retrieved from www. cdc/hiv/guidelines/index. Html
- Centers for Disease Control and Prevention. (2016). Diagnoses of HIV infection in the United States and dependent areas, 2015. *HIV Surveillance Report, 27*, 1-114.
- Centers for Disease Control and Prevention (CDC). (2017). 2016 Sexually transmitted diseases surveillance. Retrieved from https://www.cdc.gov/std/stats16/tables/1.htm
- Centers for Disease Control and Prevention (CDC). (2017). CDC Fact sheet: Reported STDs in the United States. Retrieved from https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/std-trends-508.pdf
- Pender, N. J. (2011). Heath Promotion Model Manual. Retrieved from https://deepblue.lib.umich.edu/bitstream/handle/2027.42/85350/HEALTH_PROMOTION_MANUAL_Rev_5-2011.pdf?sequence=1&isAllowed=y
- Shah, D., Thornton, S., & Burgess, P. 1997. Sexual risk cognitions questionnaire: a reliability and validity study. *AIDS Care*, 9, 471-480.
- Strauss, A. and Corbin, J. (1998). Basics of Qualitative Research. Thousand Oaks, CA: Sage.
- World Health Organization (WHO). (2015). Policy brief: consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection: what's new.

