

Lessons Learned from HOPE Decliners at Lilongwe site

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Outline

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- Acknowledgements

Introduction

- Targeted all participants who were assessed as eligible at prescreening but refused to join HOPE study.
- Eligibility criteria:
 - Declined to enroll into HOPE study
 - Willing to enroll into decliner population sub-study
- HOPE decliners were:
 - Sensitized to enroll into decliner cohort
 - Informed consent obtained
 - Administration of CRFs (i.e. demographic and Baseline behavioral assessment form)
 - 3 decliners were asked to be interviewed further.
 - In-depth interview conducted



Study Updates

- HOPE activation was on 1 December, 2016
- Approved as a qualitative site on 14 Jan 2017
- HOPE first participant was enrolled on
 - 21 December, 2016
- First decliner participant was enrolled on
 - 27th April, 2017
- 9 participants enrolled into a decliner cohort
 - 3 of them were enrolled into a qualitative component

Lessons Learned from HOPE Decliners

- Participant characteristics
- Partner characteristics
- Reasons for declining HOPE
- ASPIRE experience and whether it influenced participants' decision to decline HOPE
- Understanding of ASPIRE results
- Current thoughts about Dapivirine Ring
- Views about HIV

Decliner Participant Demographic Characteristics

	N=9 (%)
20-25	4 (44.4)
<u>></u> 25	5 (55.6)
Single	0 (0.0)
Married	9 (100.0)
Primary	3 (33.3)
Secondary	6 (66.7)
0	1 (11.1)
1	3 (33.3)
<u>≥</u> 1	5 (55.6)
ce ASPIRE	
0	8 (88.9)
1	1 (11.1)
	≥ 25 Single Married Primary Secondary 0 1 ≥ 1 ce ASPIRE 0

Sex partners' characteristics

Primary Sex Partner Characteristic	N = 9 (%)
Same as ASPIRE	9/9 (100)
Living together	9/9 (100)
Supportive	7/9 (78)
Knowledge about study offer	8/9 (89)
Knowledge about ring offer	8/9 (89)
Circumcised	3/9 (33)
HIV Status	
Positive	1 (11)
Negative	5 (56)
Unknown	3 (33)
Age	
25 – 35	4 (44)
36 – 45	3 (33)
Unknown	2 (22)

Sex partners' characteristics

Primary Sex Partner Characteristic	N = 9 (%)
Relationship with partner	
Physical abuse	1/9 (11)
Sexual abuse	0/9 (0)

Sexual Behavior

- Sexual practice
 - Vaginal 9/9
 - Anal o/9
- Vaginal sexual encounter
 - A range of 2 times/ week to 31 times/month
- Condom use at last sex
 - 1 used a male condom
 - 8 did not use a condom

Reason for declining HOPE

Main Reason for Declining	N = 9
Relocating	1
Pregnancy intention	4
Partner not supportive	1
Frequent clinic visits	1
Duration of staying with the ring	1
Other (No reason given)	1

Reasons for declining

- From 3 qualitative participants
- Relocation (1 participant)
 - Was not influenced by anyone to decline
- Pregnancy intention (2 participants)
 - Both were influenced by their partners so they can have children.

Reasons why other women would decline

- Fear of ring causing cancer
- Association of the study with satanism
- Negative influence from friends on consequences of study participation e.g. blood draws
- Influence from partners/lack of support
- Community perceives study participants as HIV infected and on ART
- Time consuming to participate in the study due to many visits
- Pregnancy intention
- Breastfeeding

What would change participants' decision about enrolling into HOPE?

Views from qualitative participants

- If trip can be cancelled i.e. fails to relocate
- If partner can either accept or participant separates from the current partners.

ASPIRE experience

- Did not influence their decision not to participate in HOPE.
- All had good experience
 - Warm welcome, Good care, Once a month clinic visits, Were given food at the clinic.

"There is nothing bad that I experienced in ASPIRE..... when we come here we were being welcomed warmly and they took good care of us until we could leave for home. There was nothing disappointing that was happening"

Understanding of ASPIRE results

- All said that the ring can protect HIV.
 - It provides a lot of protection (7/9)
 - It provides some protection (2/9)
 - "The ring protects women from contracting HIV... because I experienced that ... I can testify on that because after I had stopped wearing the ring and a week passed by, my husband tested HIV positive whilst I was found negative and am still negative until today"

Current thoughts about the Dapivirine Ring

Protection

- Ring can protect better than condoms.
- Would prefer a ring that can provide 80-100% protection rate.

Availability

- Has to be available to every woman
- At schools and health facilities (e.g. clinics, hospitals &health centers)

Current thoughts about Dapivirine Ring

Qualitatively:

- Likes: Texture, size, color, easy to use, doesn't hurt, helps to tighten the vagina, changing once a month.
- **Dislikes:** None
- Cost: Has to be sold about \$1.5
- Suggested change: Dual protection
 - Duration of use to be 3-5 months
- Partners support ring use but not when they want a child.
- In future, many women would use the ring to protect themselves from HIV.

Views about HIV

Views about HIV (Quant)

- Thoughts
 - Rarely 3/9
 - Never 6/9
- Worries
- Not at all worried 7/9
- Some what worried 2/9

Views about HIV (Quant)

- Likelihood of contracting HIV
- Very unlikely
- Somewhat likely
- Certainty of HIV protection
- All 9 were very certain

Views about HIV

Worries (Qualitatively)

- Among the 3 who were qualitatively interviewed,
 - 2 were very worried

"The worry is there... because I am currently not wearing the ring, therefore contracting the virus is very easy right now...."

Summary

- Hope decliners were all young women
 - Most in their 20s.
- All were married, living together with their partners (same partner they had in ASPIRE), sexually active with no condom use, had good relationship with their partners
- Parity ranged from 0-3.
 - Only 1 got pregnant since ASPIRE
- Majority declined HOPE because they wanted to be pregnant.

Conclusion

Lessons learned from HOPE decliners suggest that:

- There is a need of the ring that can be effectively used in pregnancy
- There is a need of the long acting ring that can be used for several months without removing it
- There is a need of the dual protection ring (contraceptive plus HIV protection) for those who would not want to get pregnant

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