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I'm Ready Program: Racial and location disparities in PrEP awareness and uptake in Canada

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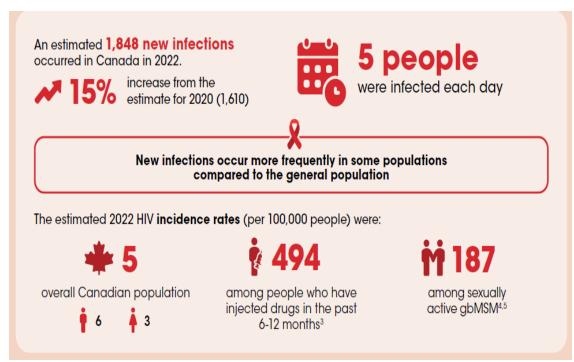




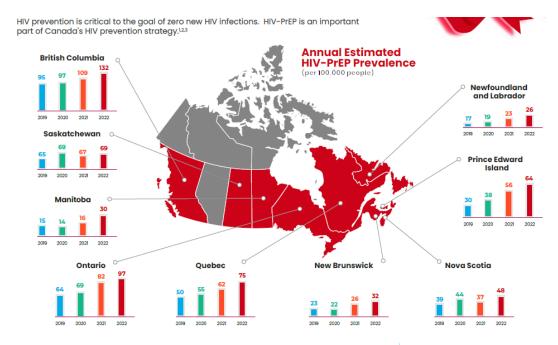


Background: HIV Infection and PrEP Use in Canada

New HIV Infection 2020-2022



HIV PrEP Use (2019-2022)





Background and Context

- In the last 5 years, PrEP use has increased from 61 to 89 per 100,000 people in Canada.¹
- In the ENGAGE study, of the 1,159 gay, bisexual and men who have sex with men indicated for PrEP, only less than 25% reported use.
- Despite increased usage, disparities in HIV incidence and PrEP access persist among racialized communities and key populations.
- Race-based data on PrEP awareness and uptake among Indigenous, Black and racialized communities is very limited in Canada.
- Disaggregated data on PrEP awareness and uptake will enhance equity-focused policy and program implementation, and progress towards ending the HIV epidemic.

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ENGAGE Study: PrEP Access among GBMSM

- Recruited 2,449 sexually active gay, bisexual and men who have sex with men (gbMSM) between 2017 to 2019.¹
- Implemented in three large cities in Canada Toronto, Montreal and Vancouver.
- Of the 1,159 people indicated for PrEP, 84.6% (Montreal) to 94.2% (Toronto) were aware of PrEP.
- Only 14.5% (Montreal), 21.6% (Toronto) and 21.8% (Vancouver) gbMSM used PrEP.
- Not using PrEP was associated with low-risk perception, distrust in its effectiveness, lack of a primary care provider, and no insurance.



Research

Use of HIV pre-exposure prophylaxis among urban Canadian gay, bisexual and other men who have sex with men: a cross-sectional analysis of the Engage cohort study

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Abstrac

Background: In Canada, gay, bisexual and other men who have sex with men (GBM) are disproportionately affected by HIV. Out objective was to describe access to HIV pre-exposure prophylaxis (PrEP) and identify factors associated with not using PrEP among self-reported HIV-negative or HIV-unknown GBM.

Methods: This was a cross-sectional analysis of the Engage study cohort. Between 2017 and 2019, sexually active GBM aged 16 years or more in Montréal, Toronto and Vancouver were recruited via respondent-driven sampling (RDS). Participation included testing for HIV and sexually transmitted and blood-borne infections, and completion of a questionnaire. We examined PEP access using a health care services model and fit RDS-adjusted logistic regressions to determine correlates of not using PrEP among those for whom PEP was clinically recommended and who were aware of the intervention.

Results: A total of 2449 GBM were recruited, of whom 2008 were HIV-regartive or HIV-unknown; 1159 (511 in Montréal, 247 in Toronto and 40 in Vanouruery and chinical recommendations for PrEP. Of the 1159, 1100 were swarre of PEP (Erd adjusted proportion: Montréal 84.6%, Toronto 94.2%, Vanouruer 92.7%), 678 had felt the need for PrEP in the previous 6 months (RDS-adjusted proportion: Montréal 93.2%, Toronto 94.2%, Vanouruer 92.7%), 678 had felt the need for PrEP in the previous 6 months (RDS-adjusted proportion: Montréal 93.6%, Toronto 95.2%, Vanouruer 92.6%), and 919 had used PrEP in the previous 6 months (RDS-adjusted proportion: Montréal 14.6%, Toronto 92.1%, Vanouruer 92.6%), and 919 had used PrEP in the previous 6 months (RDS-adjusted proportion: Montréal 14.6%, Toronto 92.1%, Vanouruer 92.6%), Not using PrEP was associated with several factors, including not feeling at high enough risk, Vewing PrEP as not completely effective, not having a primary care provider and lacking medion insurance.

Interpretation: Although half of GBM met clinical recommendations for PrEP, less than a quarter of them reported use. Despite high levels of awareness, a programmatic response that addresses PrEP-related perceptions and health care system barriers is needed to scale up PrEP access among GBM in Canada.

he HIV epidemic continues to disproportionately affect gay, bisexual and other men who have sex with men (GBM) in Canada. Although GBM account for 2%–3% of the Canadian population, they represent almost half of all prevalent and newly reported cases of HIV infection. 1-1 The disease burden is concentrated in Canada's 3 largest cities — Montréal, Toronto and Vancouver — where many GBM roside. 5 HIV pre-exposure prover — where many GBM roside. 5 HIV pre-exposure pro-

y including GBM.º Pre-exposure prophylaxis was approved in x Canada in 2016²⁰ and is increasingly available. It was approved in Quebec in 2013, ¹¹⁻⁴⁴ in Ontario in 2017¹⁵ and in British Columbia in 2018.¹⁶

Documenting PrEP uptake and related barriers, especially among GBM who may benefit, is important, as this intervention

Source: 1. Cox J et al; Engage Study Team. Use of HIV pre-exposure prophylaxis among urban Canadian gay, bisexual and other men who have sex with men: a cross-sectional analysis of the Engage cohort study. CMAJ Open. 2021 May 21;9(2):E529-E538. doi: 10.9778/cmajo.20200198. PMID: 34021010; PMCID: PMC8177951.



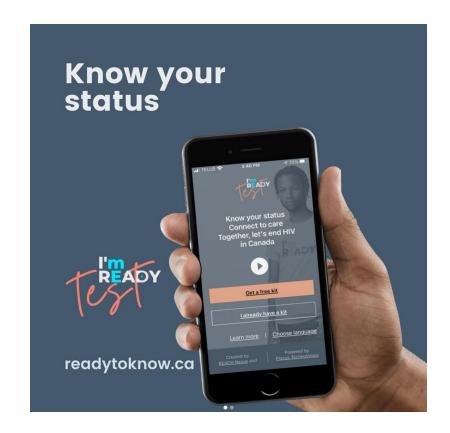
Objective

To examine differences in PrEP awareness and uptake among different potentially affected and key populations and in different locations across Canada.



I'm Ready: National HIV Self-Testing Program

- I'm Ready Research Program is the first Canadian national HIV self-testing program a mobile app intervention to promote uptake of HIV self-testing across Canada.
- 12,007 participants downloaded the *I'm Ready Test* App and answered a pre-test survey.
- 8,803 participants (73%) answered three questions on HIV risk and two questions on PrEP awareness and uptake.
- Of these, 85% (n=7,439) had indications for PrEP, of which 54% (n=3,989) were aware of PrEP and 17% (n=682) used PrEP.





Participants Demographics (N=8,803)



Age

25-34 age group: **43**% 18-24 age group: **31**%



Sexual orientation

Gay or bisexual: **42%** Heterosexual: **38%**

Sexual minorities²: 20%



Location

Very large urban (>200k): 53%

Large urban (100k-199k) and

small (<29k): **23%**



Gender

Cis-man: **65%**

Cis-woman: 30%

Gender minorities¹: 5%



Education

> High school: **70**%

High school: 23%



Employment

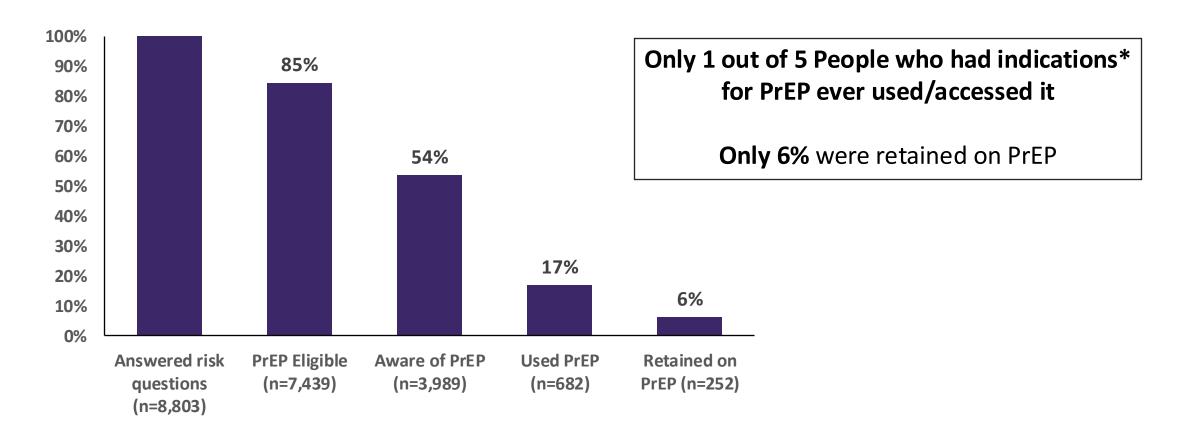
Full time: **47%**

Student: 21%

- 1. Gender minorities: Transgender, non-binary, genderqueer and self-described gender
- 2. Sexual minorities: Queer, lesbian, pansexual, heteroflexible, questioning, asexual and self-described



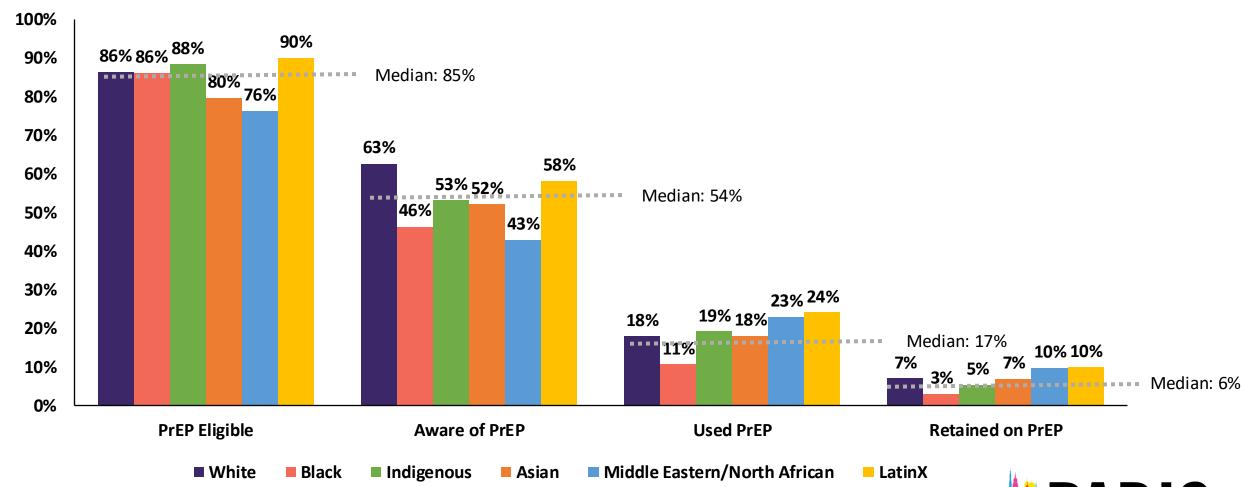
PrEP Cascade



^{*}Indications for PrEP: We used responses to questions on sexual behavior (unprotected sex in the last 3 months and unprotected sex with multiple sexual partners with HIV positive or unknown status in the last 12 months) to determine indications (eligibility) for PrEP.



PrEP Cascade by Race



^{*}Indications for PrEP: We used responses to questions on sexual behavior (unprotected sex in the last 3 months and unprotected sex with multiple sexual partners with HIV positive or unknown status in the last 12 months) to determine indications (eligibility) for PrEP.



Intersecting identities among Black populations

	Heard of PrEP			Received PrEP			
	OR	95% CI	р	OR	95% CI	р	
White gay/bi/queer cis-men		ref			ref		
Black gay/bi/queer cis-men	0.30	(0.22, 0.41)	<0.01	1.06	(0.69, 1.64)	0.78	
Black straight cis-men	0.12	(0.09, 0.16)	<0.01	0.17	(0.08, 0.37)	<0.01	
Black other cis-men	0.17	(0.12, 0.23)	<0.01	0.44	(0.22, 0.87)	0.02	
Black gay/bi/queer cis-women	0.14	(0.09, 0.22)	<0.01	0.09	(0.01, 0.66)	0.02	
Black straight cis-women	0.18	(0.14, 0.23)	<0.01	0.23	(0.13, 0.39)	<0.01	
Black other cis-women	0.16	(0.11, 0.24)	<0.01	0.15	(0.05, 0.47)	<0.01	

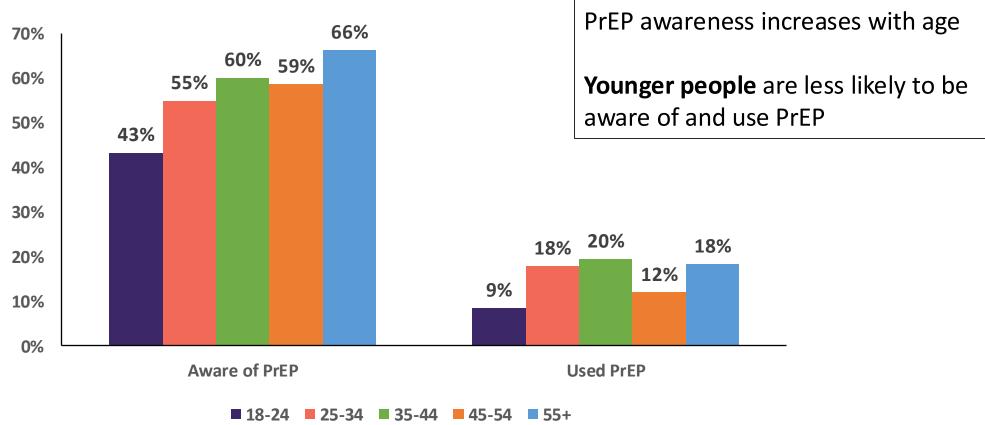


Intersecting identities among Indigenous populations

	Heard of PrEP			Received PrEP		
	OR	95% CI	р	OR	95% CI	р
White gay/bi/queer cis-men		ref			ref	
Indigenous gay/bi/queer cis-men	0.81	(0.50, 1.31)	0.39	1.31	(0.81, 2.10)	0.27
Indigenous straight/other cis-men	0.09	(0.06, 0.16)	<0.01	0.69	(0.23, 2.08)	0.51
Indigenous cis-women	0.13	(0.10, 0.19)	<0.01	0.30	(0.13, 0.69)	0.01

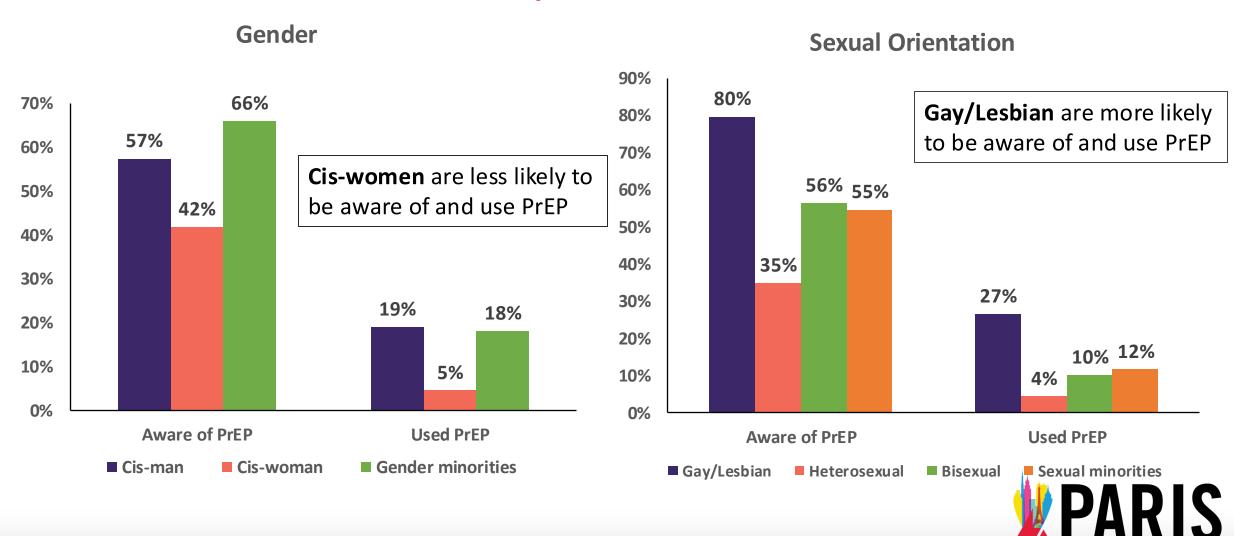


PrEP Awareness and Uptake: Differences in Age Groups

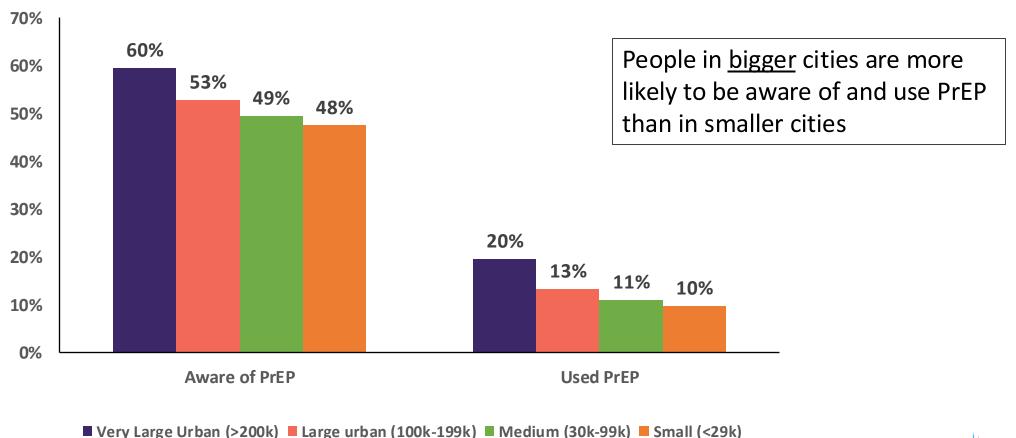




PrEP Awareness and Uptake: Differences in Identities



PrEP Awareness and Uptake: Differences in Location

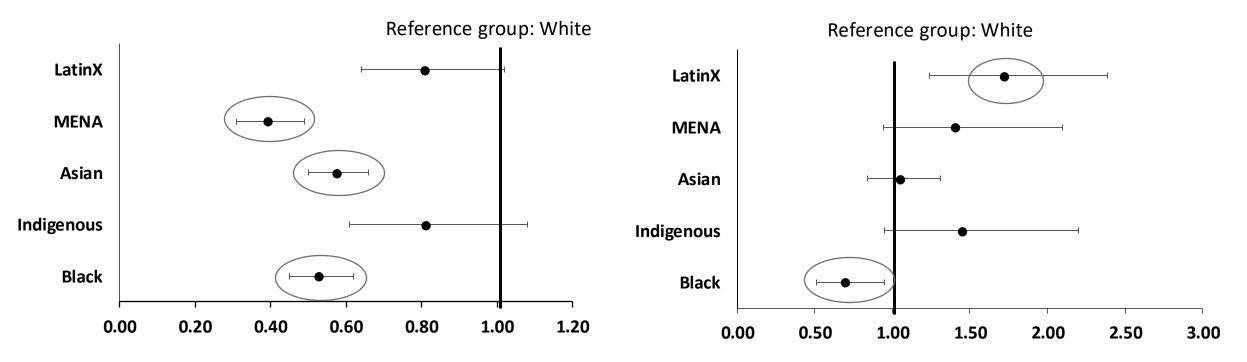




Likelihood of PrEP Awareness and Uptake in Urban Areas (population >100k)

Odds Ratios – Aware of PrEP

Odds Ratios – Used PrEP



Black, Asian and Middle Eastern/North African (MENA) are less likely to be aware of PrEP

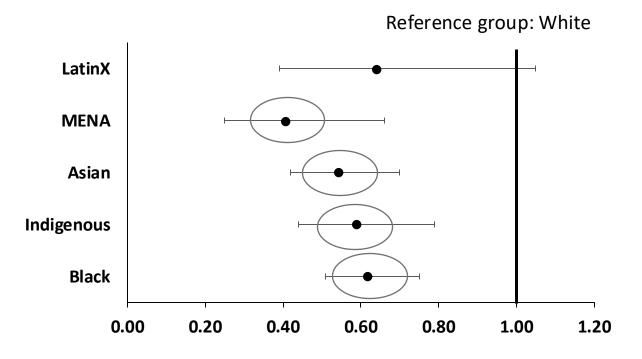
Black people are less likely to use PrEP, while LatinX are more likely to use PrEP.

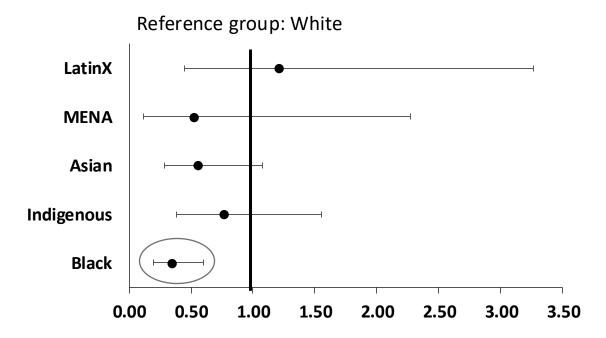


Likelihood of PrEP Awareness and Use in Small Cities & Rural Areas (population <100k)

Odds Ratios – Aware of PrEP

Odds Ratios – Used PrEP





Black, Indigenous, Asian and Middle Eastern/North African (MENA) are less likely to be aware of PrEP.

Black people in small cities and rural areas are less likely to use PrEP.



Conclusion and Next Steps

- **Social Location and Social Position**: Considerable health disparities with PrEP exist by race/ethnicity and where people live.
- **PrEP awareness and uptake** were low in racialized communities compared to participants who identified as White.
- Black and Indigenous people have increased HIV rates in Canada, making targeted interventions crucial to improve their access to PrEP and other support services.
- The next phase of I'm Ready will explore barriers and willingness to connect to direct use of PrEP among these communities.
- We aim to strengthen our community partnerships to link HIV selftesting with PrEP, ensuring individuals can access prevention and PrEP resources and providers through the I'm Ready App.

