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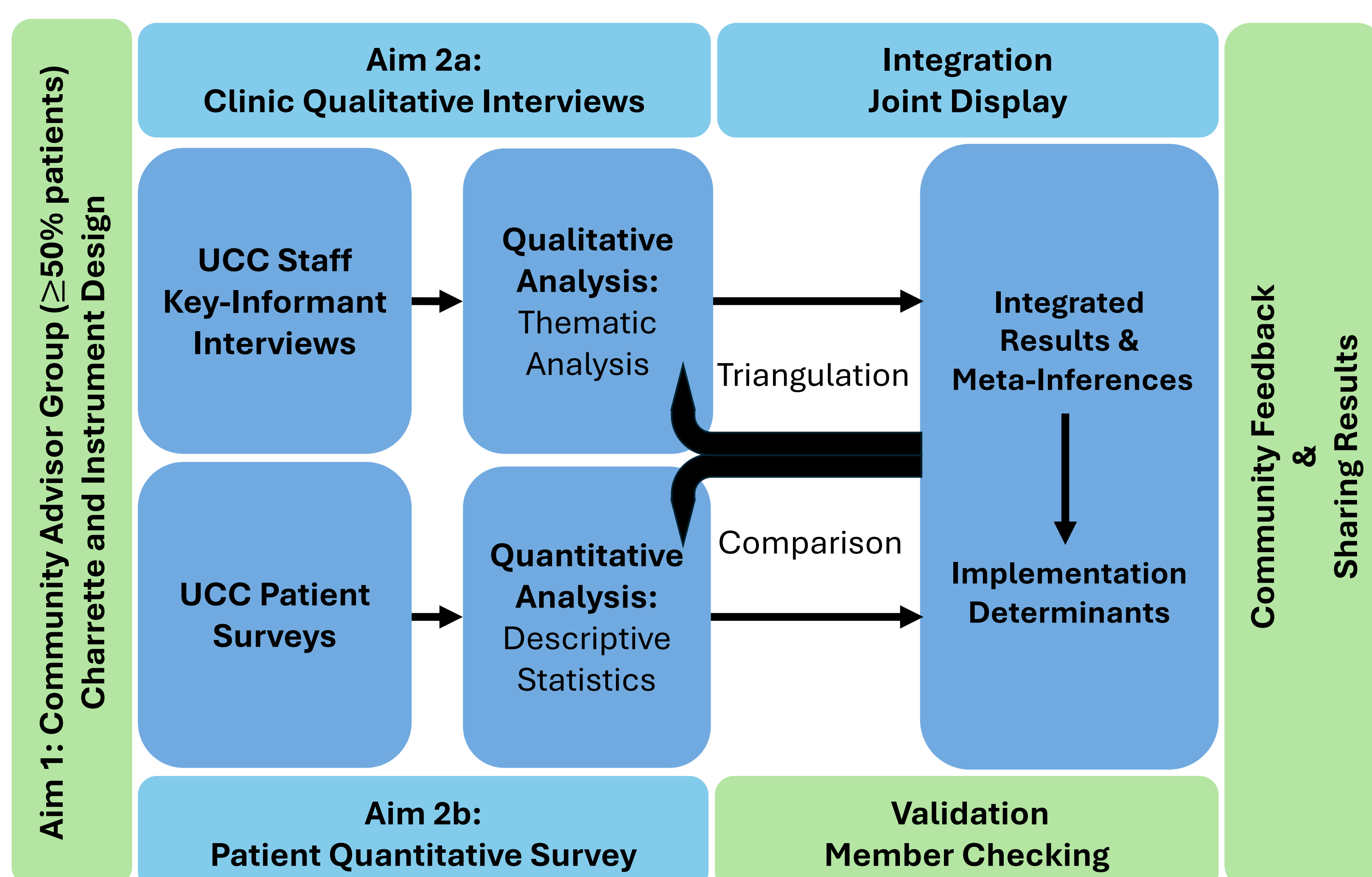
Background

- HIV disproportionately affects racial and ethnic minorities as well as sexual minority persons.¹
- Pre-exposure prophylaxis (PrEP) is an effective HIV prevention strategy. Uptake is lower among communities of color and cisgender women.^{2,3}
- Urgent care clinics (UCC) are often accessed for sexual health needs. PrEP should be a part of the HIV/STI discussion, but PrEP in urgent care is understudied.

Project Aims

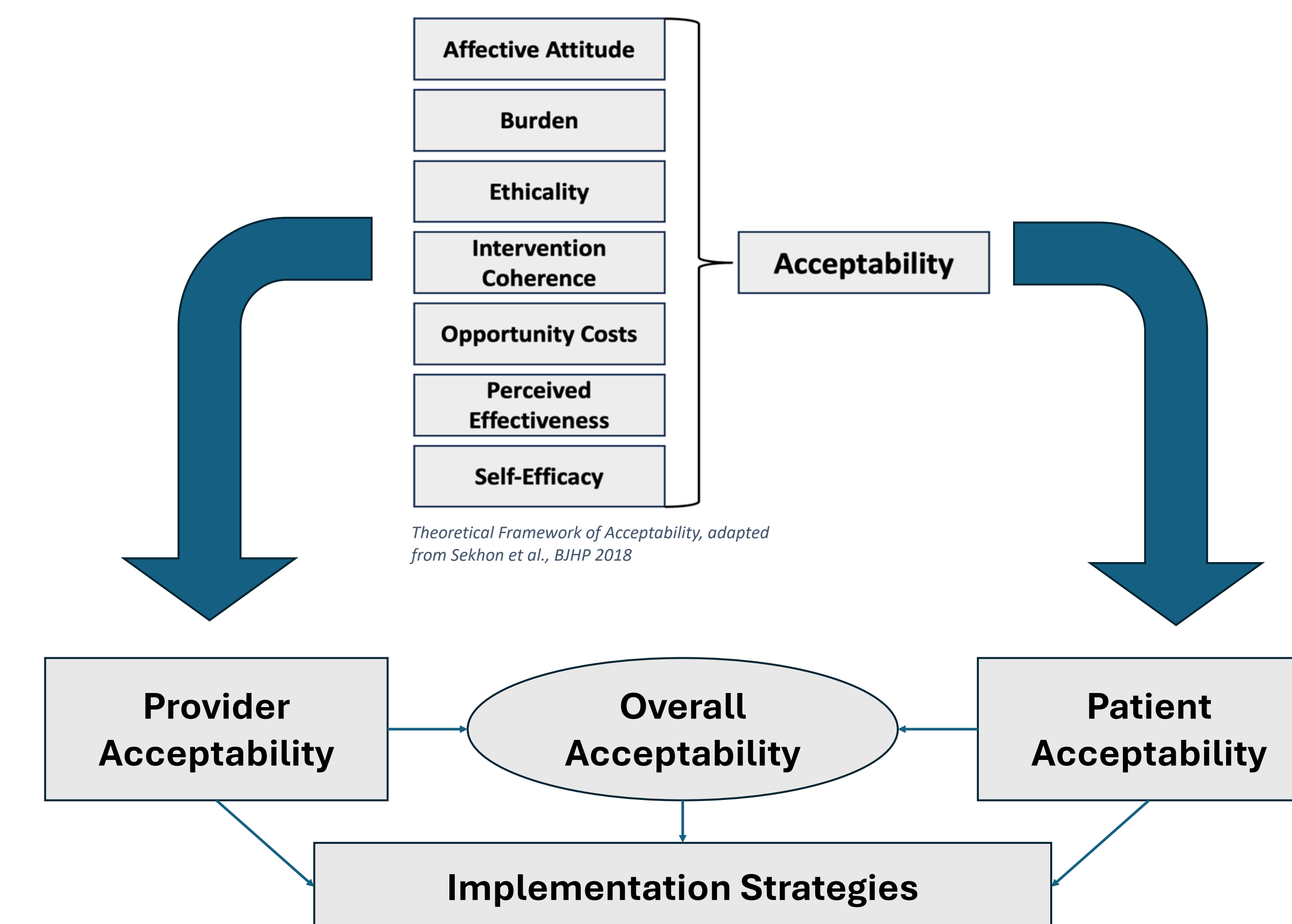
- Aim 1: Convene a community advisory group (CAG) of urgent care clinic staff and patients to inform and review study procedures.
- Aim 2: Using a concurrent mixed methods approach, determine clinic and patient perspectives to inform implementation determinants for urgent care clinic PrEP provision at the proximal PrEP continuum.

Study Design



Theoretical Framework

Pre-implementation work, grounded in Practical, Robust Implementation and Sustainability (PRISM), will use the Theoretical Framework of Acceptability (TFA) to determine internal contextual factors affecting PrEP uptake, from both the clinic and patient perspective.^{4,5}



Outcomes

- Themes from the clinic perspective as to the acceptability of providing PrEP in the urgent care setting.
- Urgent care patients who feel that PrEP provision in the urgent care setting is acceptable.
- Implementation determinants will inform implementation strategies to be evaluated in future studies on PrEP in urgent care.

Key Messages

- PrEP is severely underutilized by communities with the highest need due to inadequate access.
- This proposed work will establish the acceptability groundwork for PrEP provision in urgent care clinics and help improve PrEP delivery to reduce PrEP disparities.

Community Impact

Community & Clinical Benefits:

- Improving HIV and sexual health care delivery to underserved populations
- Facilitating HIV disease prevention and reducing HIV disparities

Translational Science Benefits



References



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