

# HIV PrEP SERVICES for URBAN WOMEN



[Evidence-Informed for the Structural Interventions Chapter](#)  
[Evidence-Informed for the Pre-Exposure Prophylaxis Chapter](#)

## POPULATION

- Healthcare providers in an urban sexual health clinic

## KEY INTERVENTION EFFECTS

- Increased PrEP prescription/initiation for female clinic patients
- Increased PrEP persistence for female clinic patients

## BRIEF DESCRIPTION

*HIV PrEP Services for Urban Women* is a multicomponent, educational HIV PrEP intervention that promotes universal PrEP services for cisgender women attending sexual and reproductive health centers. The intervention includes:

- Clinic-wide PrEP trainings for providers and clinic staff
- Electronic health record (EHR) prompts for PrEP counseling
- Educational videos about PrEP that are repeatedly played in the patient waiting room

**DURATION:** One year

**SETTING:** Sexual health clinic in Washington, DC

**STUDY YEARS:** March 2018 – July 2019

**STUDY DESIGN:** One-group, pre-post

**DELIVERERS:** Clinic providers and staff, local HIV/PrEP expert

**DELIVERY METHODS:** Training, EHR prompt, video

## STUDY SAMPLE

The baseline study sample of (N = 1,720) female patients during the implementation period was characterized by the following:

- 76% Black or African American persons
    - 12% White persons
    - 7% Hispanic or Latina persons
    - 3% Asian persons
    - 1% persons who identify as another race or ethnicity
  - Median age of 29 years
- Percentages may not add up to 100% due to rounding.

## STRUCTURAL COMPONENTS

Access – HIV healthcare

- Increased access to PrEP services

Capacity Building – Provider/supervisor training

- Weekly clinic-wide provider and staff trainings were led by a local HIV/PrEP expert

Capacity Building – Technology

- EHR prompts were added to encourage and alert providers to offer counseling and education about PrEP

- Educational videos were displayed in the waiting rooms for patients to facilitate conversations with providers about PrEP

Policy/Procedure – Institutional policy/procedure

- EHR prompt and PrEP training for new providers incorporated into center procedures

**KEY INTERVENTION EFFECTS** (see **Primary Study** for all outcomes)

- The proportion of participants prescribed/initiating PrEP increased from 2.6% pre-implementation to 8.1% post-implementation ( $p < 0.01$ ).
- The proportion of participants persisting on PrEP increased from 1.6% pre-implementation to 4.8% post-implementation ( $p < 0.01$ ).

**CONSIDERATIONS**

- The proportion of participants screened for HIV behavioral risk factors and PrEP eligibility increased from 5.6% pre-implementation to 89.2% during the implementation period ( $p < 0.01$ ).
- The proportion of participants offered PrEP increased from 6.2% pre-implementation to 69.8% during the implementation period ( $p < 0.01$ ).
- The authors reported that the providers and clinic staff found the intervention both highly feasible and acceptable.
- The authors reported the low-cost of the intervention made the intervention sustainable.

**ADVERSE EVENTS**

The author did not report adverse events.

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**PRIMARY STUDY**

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**PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.**

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