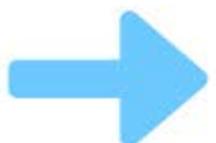




Staying PrEP'd with P3:

Swipe right to learn how this ATN study used a theory-driven app to support youth taking PrEP



Youth often struggle to keep up with the demands of their medication, and PrEP is no different.

When it comes to taking oral PrEP, youth aged 16 to 24 often face a variety of challenges to taking and staying on PrEP, such as:

- 1 Competing priorities related to family, school, or work
- 2 Stigma and homophobia for using PrEP from friends and family
- 3 Not having accessible, appropriate healthcare and support
- 4 Negative experiences or expectations of side effects



In a separate study of how youth take PrEP, most participants struggled to stay on PrEP and keep up the level of medication in their bodies.

 **56%** had protective levels after 4 weeks of taking PrEP

 **34%** had protective levels after a year of taking PrEP

For detailed information about PrEP, visit <https://www.cdc.gov/hiv/basics/prep.html>

With the widespread use of smartphones, app-based strategies provide new ways to support the sexual health decisions of sexual and gender minority youth (YSGM).

P3 aimed to build upon previous mobile app research to design an app that met the complex and unique needs of young sexual minority men and trans women starting or taking PrEP.

Goals of the P3 Study:

- Improve how well youth followed their PrEP regimen
- Impact how they navigate sexual health
- Give participants a positive experience





Key Features of the P3 app



Discreet medication reminders with personalized habit-building suggestions



Social wall with prompts to promote learning and sharing among peers



Games and daily quests to set goals, build skills, and test knowledge



Knowledge center with info about HIV, safer sex, relationships and more



P3+ (P3 plus in-app coaching)

Researchers also tested another version of the app called "P3+" users had one-on-one coaching sessions with a trained counselor to identify and troubleshoot challenges to taking PrEP.



Hey! How's it going with PrEP? lmk if you have any questions!

Hmm... well, i'm kind of having trouble with something....



Who participated in P3?

Between 2019 and 2021, researchers recruited and conducted follow-ups with 246 sexual minority men and trans women aged 16 to 24 across 9 cities in the US. All participants were beginning PrEP or already on PrEP at the time of starting the study.

Participant Quick Facts:

- 88% identified as men
- 50% identified as Black and/or Latine
- 92% identified as gay or bisexual
- 59% were casually dating or in a relationship

How did they use PrEP before P3?



91%

had used PrEP prior to P3



88%

said taking PrEP at least 60% in the past month



93%

started PrEP to take control of their sexual health



44%

said forgetting as a top issue for taking PrEP

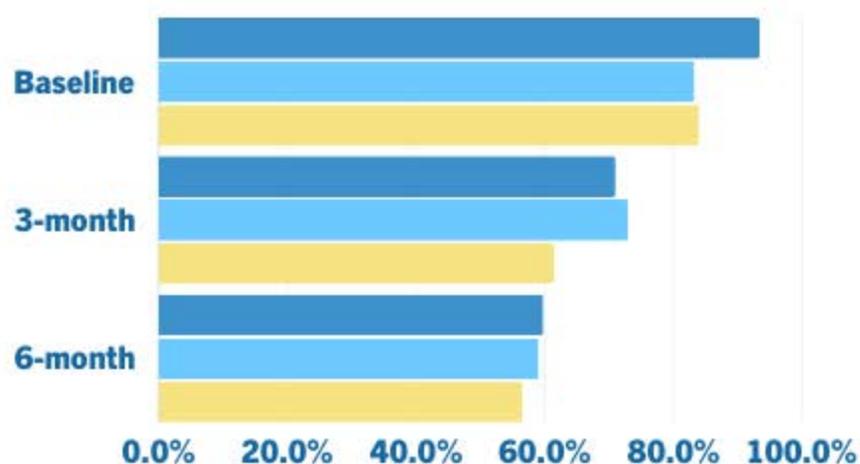
Youth using P3 & P3+ were more likely to take daily PrEP.

After 3 months, participants who used P3 and P3 with coaching reported improved PrEP use compared to those who did not have access.

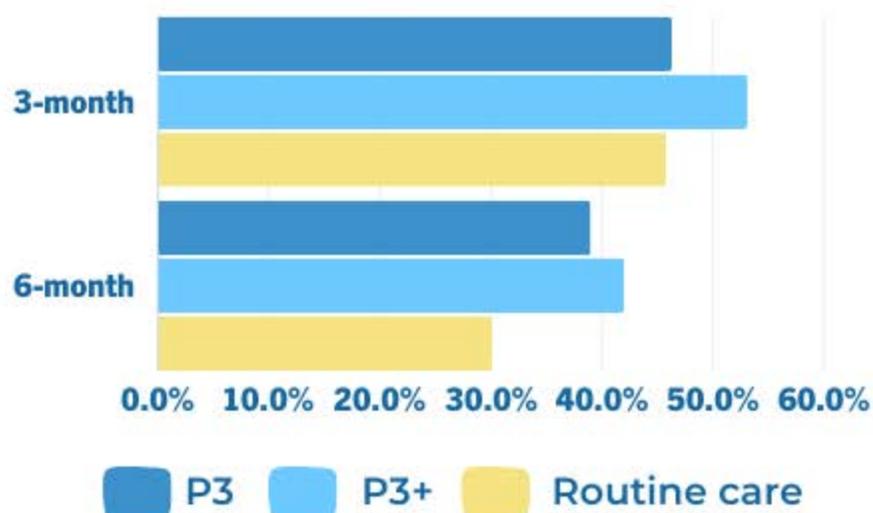
Dried blood spot samples, which measure medication levels in a person's bloodstream at a specific point in time, confirmed the reported increase in adherence.

Both intervention groups were also more likely to attend at least one PrEP medical visit in the past 3 months.

Took PrEP at least 4 days in the past 7 days



Had a PrEP medical visit in the past 3 months



How did participants use the P3 app during the first 90 days?



Average number of days individuals logged into P3



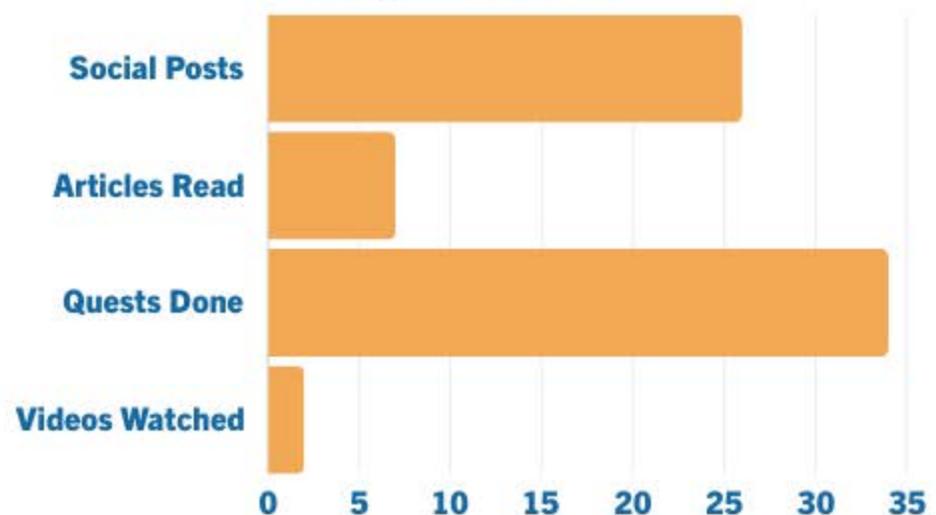
Average number of days folks used the PrEP medication tracker



Usual amount of minutes spent in app during each log in

The most popular features among users were the social wall and quests. Quests encouraged users to learn about sexual health, often asking users to read articles or watch videos.

Number of Times Participants Used App Features



Most participants enjoyed using the P3 app.



were very satisfied with the P3 app



would recommend the P3 app to friends

A smaller group of participants who used P3 were interviewed at the end of the study to see what they liked and found helpful about the P3 app. Here are examples of what they said.

“

When I had that counselor I felt a bit better about myself... if I had a question, or I just need to talk a little bit about a situation it definitely made me feel better and less alone. Some things you don't want to tell a friend, you need someone else to tell.

”

-Youth from Boston

“

At first, when I didn't know all of this information – all of the articles and the research studies – that was a little scary to undertake, but I think now it's given me the opportunity and the information to learn more about it [PrEP].

”

-Youth from Chicago

Participants who received the P3 intervention saw an improvement in PrEP use in the short-term.

However, participants using P3 did not see a significant improvement in their PrEP use after 6-months.

Key Takeaways:

- **Collaboration is key.** It is important to work with youth to make apps that actually engage and excite users. Features like virtual rewards and daily quests were added because of field testing feedback.
- **Thinking long-term.** We need more research on how to support youth who may want to stay on PrEP for longer periods of time.
- **Promoting to providers.** Apps are dynamic and useful resource, and providers should consider recommending the use of an app to help track PrEP when discussing PrEP adherence with youth.



Statement on Terminology

Research demands that we categorize people in ways that are not always fully descriptive and inclusive of intersectionalities. This may create feelings of discomfort or further minimization, which is never our goal. This research is meant to serve the community and we are doing our best to collect data in meaningful ways.

The wording contained in this literature is part of an open dialogue including the researchers and an interdisciplinary group of young adults known as the Subject Matter Research Consultants who add value to this work through their lived and experiences and subject matter expertise. The SMRCs are a part of communities that are most affected by the topics addressed within this research.

References

- *Biello KB, Daddario SR, Hill-Rorie J, et al. Uptake and acceptability of MyChoices: results of a pilot RCT of a mobile app designed to increase HIV testing and PrEP uptake among young American MSM. AIDS and Behavior. 2022. <https://doi.org/10.1007/s10461-022-03724-3>*
- *Shover CL, Javanbakht M, Shoptaw S, et al. HIV preexposure prophylaxis initiation at a large community clinic: differences between eligibility, awareness, and uptake. American Journal of Public Health. 2018; 108(10).*
- *Elopre L, Ott C, Lambert CC, et al. Missed prevention opportunities: why young, black MSM with recent HVI diagnosis did not access HIV pre-exposure prophylaxis services. AIDS behavior. 2021;25(5).*