

Awareness and use of pre-exposure prophylaxis (PrEP) for HIV infection among people who inject drugs (PWID) and tested negative in six cities of Tajikistan, IBBS 2022

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BACKGROUND

- There are an estimated 18,200 PWIDs in Tajikistan.
- PWIDs account for 27% of all registered HIV cases in the country¹.
- Based on case-reporting data, the primary mode of reported HIV transmission shifted from injection drug use to sexual. In 2021, HIV transmission was documented to be attributable to unsafe drug injection practices reduced to 11% of all newly diagnosed people living with HIV (PLHIV) from 50% in 2011¹.
- In 2021 HIV prevention interventions reached 60% of an estimated PWID population with the minimum package of services, including – needle/syringe programs, condom programs and information materials on various HIV prevention topics².
- Medication-assisted therapy (MAT) coverage is under 10% of an estimated PWID population in the country.
- PrEP as an additional prevention strategy was launched in late 2020, with a primary focus on MSM community and later on other Key Populations. PrEP uptake to date has been slow.

METHODS

- The bio-behavioral survey (BBS) in 2022 was conducted using a respondent-driven sampling (RDS), in the six largest population cities of Tajikistan.
- Face-to-face interviews covered PWIDs above ≥18 years old and who had injected drugs for non-medical purposes at least once within the 60 days preceding enrolment in the survey.
- RDS Analyst was used to calculate population estimates and 95% confidence intervals (CI) for key indicators.

RESULTS

- A total of 1,714 PWIDs were interviewed (1,6087 – male, 106 – female, or 7%) and 1,431 of them tested HIV negative in all six sites.
- The prevalence of HIV infection varied from 4.7% in the regional center in the east to 19.9% in Dushanbe, the capital city.
- The highest HIV prevalence was registered among the PWIDs (ranged from 4.7% - 19.9%) comparing to representatives of other key populations covered by IBBS 2022, including FSW and MSM.
- HIV testing (in the last 12 months) coverage ranged from 42% to 82% across the BBS locations.
- Awareness of HIV status among PWID/PLHIV exceeds 95% in five out of six BBS locations.
- The proportion of HIV Negative tested PWIDs who had sex in the last six months and used condom at the last sex varied from 38% - 51% in locations where the high number of HIV Negative tested people responded to this question. The proportion of HIV Negative tested PWIDs who had sex in the last six months and used condom at the last sex in locations with low level of responses varied from 10% to 76%.

SUMMARY

- Self-reported PrEP awareness among PWID who tested negative varied by location: 2.5% in Dushanbe, an urban city, to 17.9% in Khujand, a mid-sized city in northern Tajikistan.
- PrEP use among all HIV-negative respondents varied from 0% in Dushanbe, Khujand and Panjakent cities to 10.6% (95% CI 6.5-14.9%) in Kulob city.
- The proportion of PWIDs enrolled in PrEP in FY 24 under the CDC cooperative agreement with Republican Aid Center, within the PEPFAR Framework, corresponded to 16%³.

LIMITATIONS

- Data on service uptake and behavioral component rely exclusively on participant's self-reports. This often has limitations that are attributed to the tendency for people to under-report socially unacceptable attitudes and behaviors and to over-report socially acceptable behaviors.
- One major limitation of this survey is that it follows cross-sectional design. In cross-sectional studies, it is difficult to explain causality in both observed behavior and status.

References:

1. Republican AIDS center statistics, as of Dec 31, 2022.
2. Progress update & disbursement request to GF, HIV/TB project of UNDP Tajikistan, Feb 2022.
3. RAC E-PrEP database, October 2023

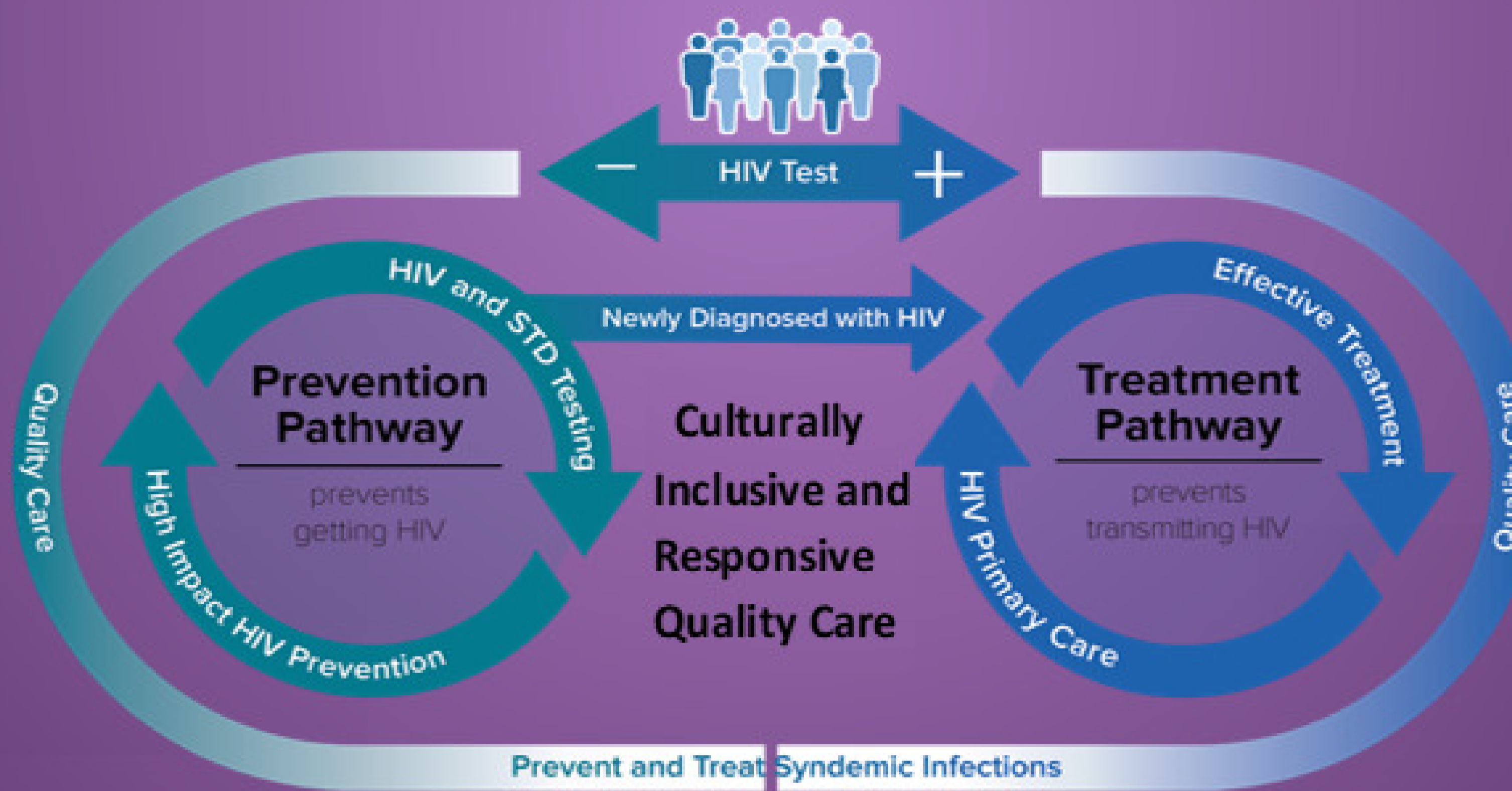
Awareness and use of PrEP are low among PWIDs in Tajikistan. None of the PWIDs from the two largest cities reported using PrEP in the past.

'Status-neutral' approach in the delivery of HIV testing services, provides an opportunity to increase demand, rapid referral and initiation of PrEP for PWID and other populations.

Further integration of PrEP into routine narcology and harm reduction services (MAT, Trust Points) enables targeted increase of awareness/demand and referral to PrEP services for the PWID population.

Increasing PrEP distribution approaches beyond the health facility can provide PrEP at scale to PWIDs and other high priority populations.

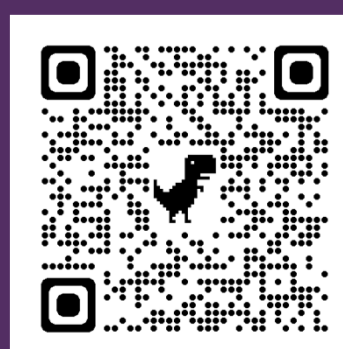
Status Neutral HIV Prevention Care



Follow CDC guidelines to test people for HIV. Regardless of HIV status, quality care is the foundation of HIV prevention and effective treatment. Both pathways provide people with the tools they need to stay healthy and stop HIV.



Photo Credit: FHI 360

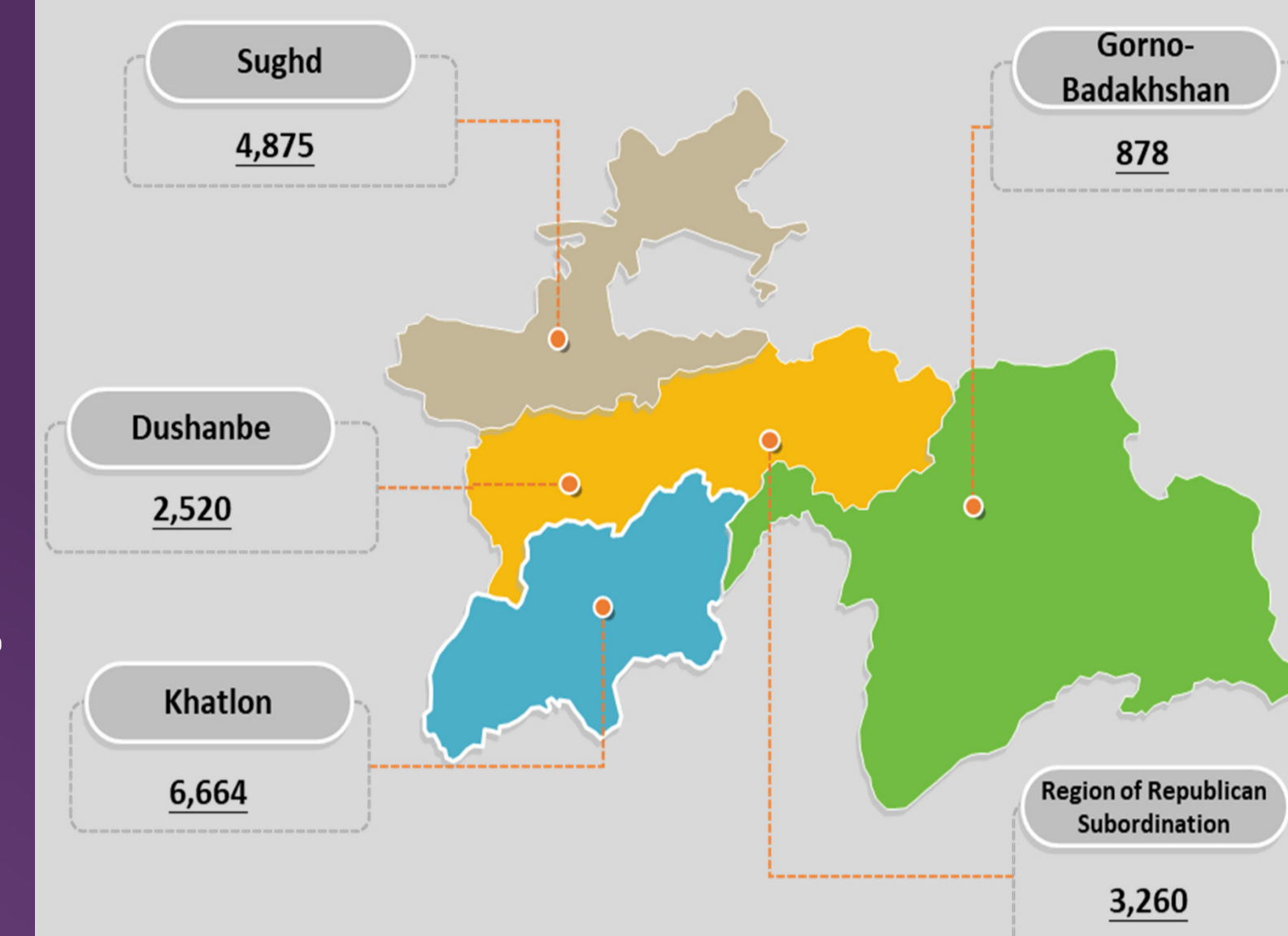


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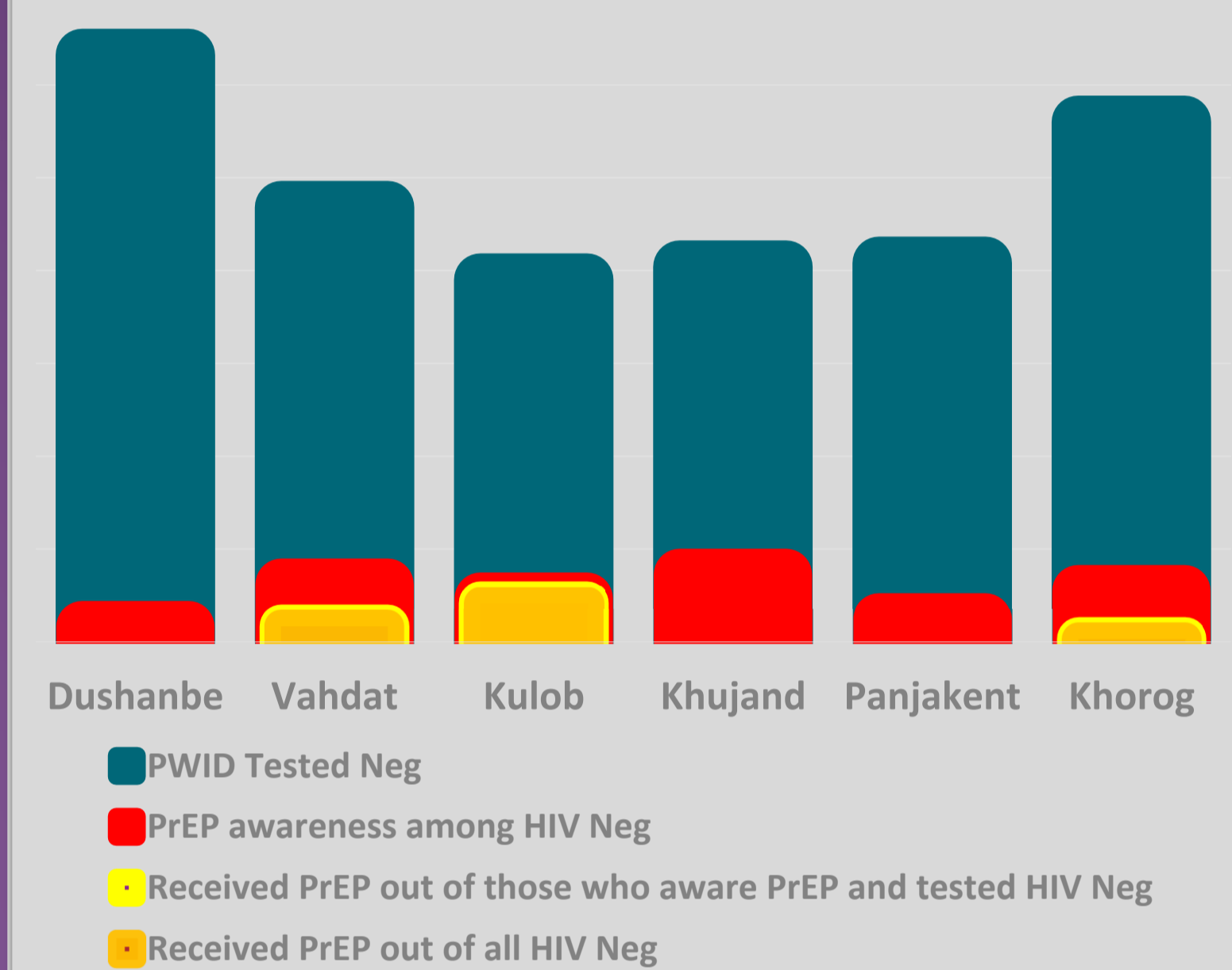


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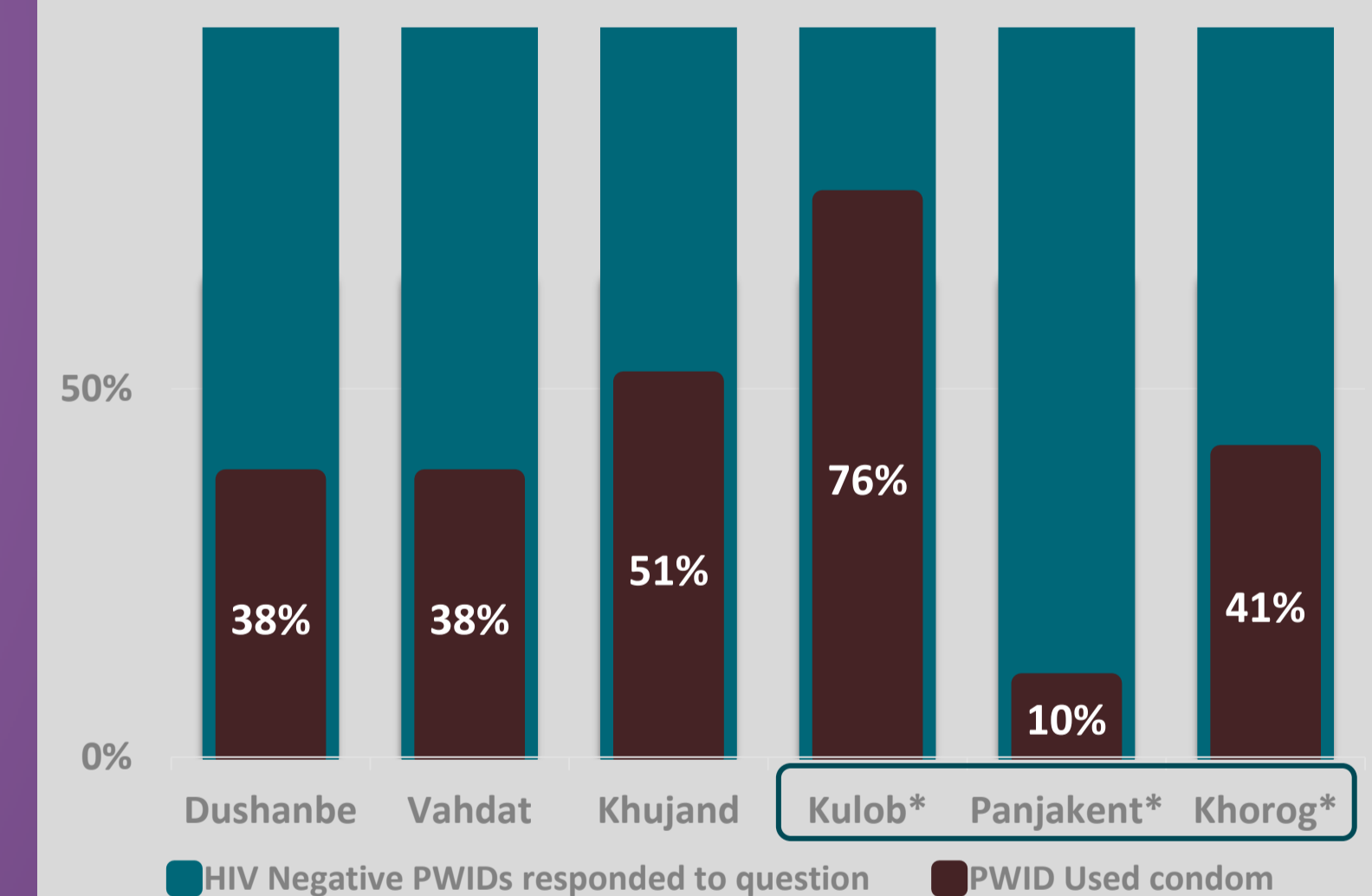
PWIDs Population Size Estimates by Regions, IBBS 2022 (Total ≈18,200)



PrEP Awareness and Use among HIV Negative Tested PWIDs, IBBS 2022

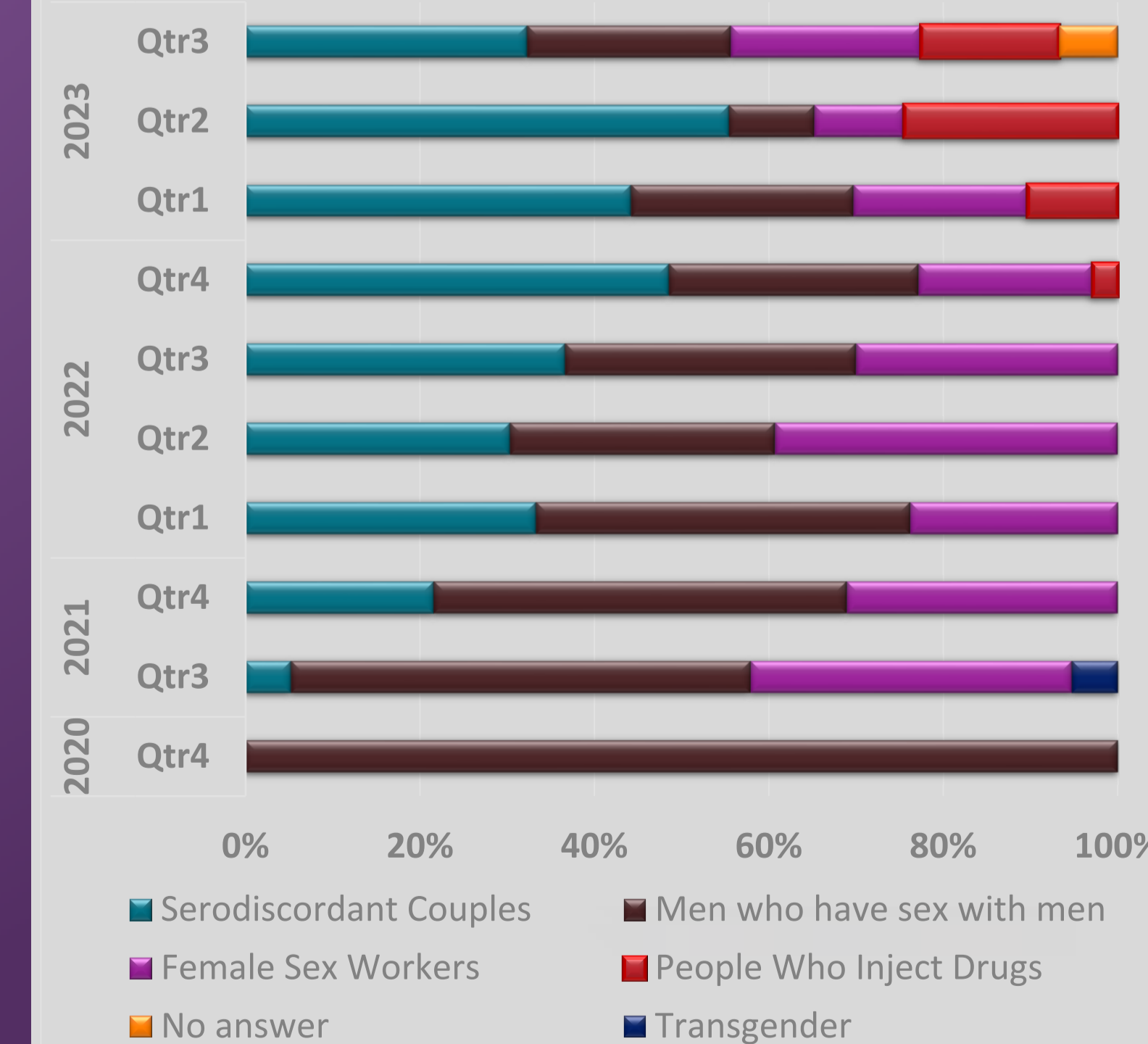


HIV negative PWIDs who had sex in the last six months and used condom at the last sex, IBBS 2022



*The proportion of respondents who did not answer to the question and/or had not had sex in the last 6 months, in these three locations, was high.

Newly enrolled to PrEP by KPs (E-PrEP data)



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