

# PrEP uptake, modality, and sources in Aotearoa New Zealand: Findings from national bio-behavioural surveillance

Leakey, C.J.<sup>1</sup>, Sriamporn, K.T.<sup>1</sup>, Fisher, T.<sup>1</sup>, Rich, J.<sup>2</sup>, Haunui, K.<sup>3</sup>, Fisher, M.<sup>4</sup>, Morley, S.<sup>5</sup>, Paynter, J.<sup>1</sup>, Ritchie, S.<sup>1</sup>, McAllister, S.<sup>6</sup>, Priest, P.<sup>6</sup>, Saxton, P.<sup>1</sup>

<sup>1</sup>Faculty of Medical and Health Sciences, University of Auckland, Auckland, New Zealand, <sup>2</sup>Burnett Foundation Aotearoa, Auckland, New Zealand, <sup>3</sup>Te Whāriki Takapou, Waikato, New Zealand, <sup>4</sup>Body Positive, Auckland, New Zealand, <sup>5</sup>New Zealand Blood Service, Auckland, New Zealand, <sup>6</sup>AIDS Epidemiology Group, University of Otago, Dunedin, New Zealand

Poster no. AS-IAS-2023-05239 Contact: [cameron.leakey@auckland.ac.nz](mailto:cameron.leakey@auckland.ac.nz) [www.spots.org.nz](http://www.spots.org.nz)

## Background

In 2018, Aotearoa New Zealand (NZ) became one of the first countries worldwide to publicly fund PrEP for populations at elevated risk of HIV including men who have sex with men (MSM). As of 2023, access to PrEP has substantially increased, and the removal of the prescription co-payment in NZ means the cost of PrEP prescriptions is now \$0 (i.e. free).

Despite this, PrEP uptake in NZ is lower than anticipated<sup>1</sup> and we have limited data on how many people are using PrEP. Awareness of and willingness to use PrEP amongst MSM in NZ is also unknown, since the last behavioural surveillance round was 2014, prior to PrEP being approved and publicly funded. We sought to understand more about PrEP in NZ using the first behavioural surveillance survey conducted post PrEP in 2022.

## Methods

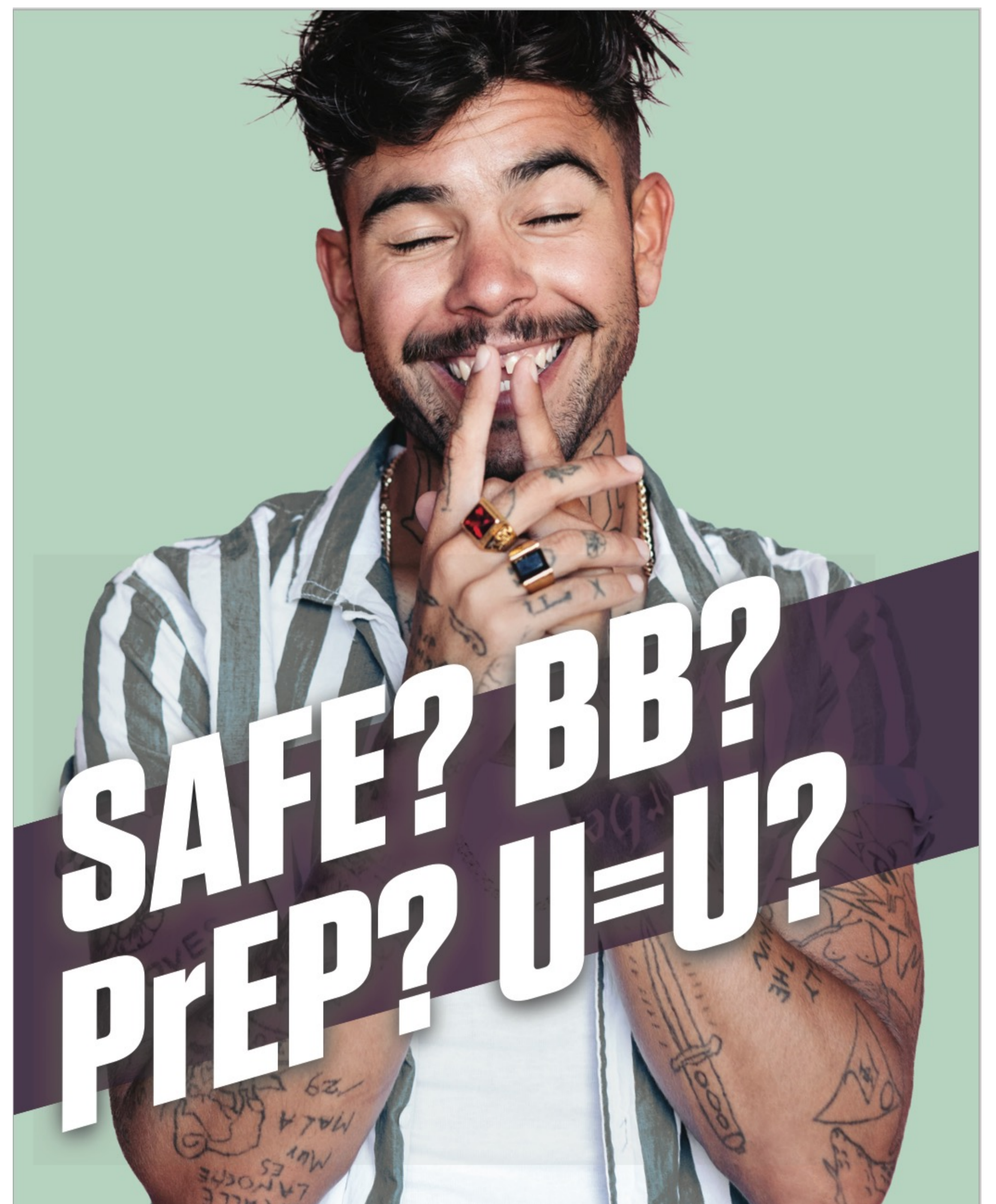
We analysed data from the 2022 Sex and Prevention of Transmission Study (SPOTS). SPOTS was a national purposive, online, voluntary study. The main aims of SPOTS were to inform HIV prevention, blood donor deferral policy and undiagnosed infection among MSM (cis and trans). SPOTS comprised a self-completed questionnaire and an opt in dried blood spot (DBS).

The survey component of the study was open from April 26<sup>th</sup> to 4<sup>th</sup> August 2022.

Promotion occurred via mainstream and social media, dating apps, influencers, posters, and community organisations.

Items relating to PrEP included:

- Have you heard about PrEP?
- In the last six months did you take PrEP to protect yourself against HIV?
- How did you take PrEP in the last six months?
- Who prescribed you PrEP in the last six months?
- Where did you get PrEP medications in the last six months?
- If all these options were available and with equal effectiveness and similar cost, which if any would you be willing to use in future?



## Results

3838 people aged 16 and over completed SPOTS. This includes MSM, trans women and non-binary people who have sex with MSM. People from all around NZ participated, reporting a wide variety of sexual identities and sexual histories. One in eight (13%) identified as Māori, one in ten (10%) as Asian and one in thirty (3%) as Pasifika. Two out of five (43%) were aged under 30.

Almost all (96.6%) SPOTS respondents were aware of PrEP and 24% of the total sample had taken PrEP in the preceding six months (Fig 1)

Of those who indicated they had taken PrEP, the choice of regimen was predominantly daily PrEP (75%), followed by event-driven (17%) and daily for a limited time (8%) [Fig 2].

Most participants were prescribed PrEP by a primary care practitioner – either their regular general practitioner or another (Fig 3). Overwhelmingly, the sample received PrEP publicly funded through pharmacy (Fig 4). The proportion of the sample reporting online procurement of PrEP is very low (Fig 4).

89% of HIV negative or HIV status unsure participants reported willingness to take one or multiple form(s) of HIV PrEP in future, with a relatively similar proportion willing to take Daily oral PrEP and/or long-acting injectable form (Fig 5)

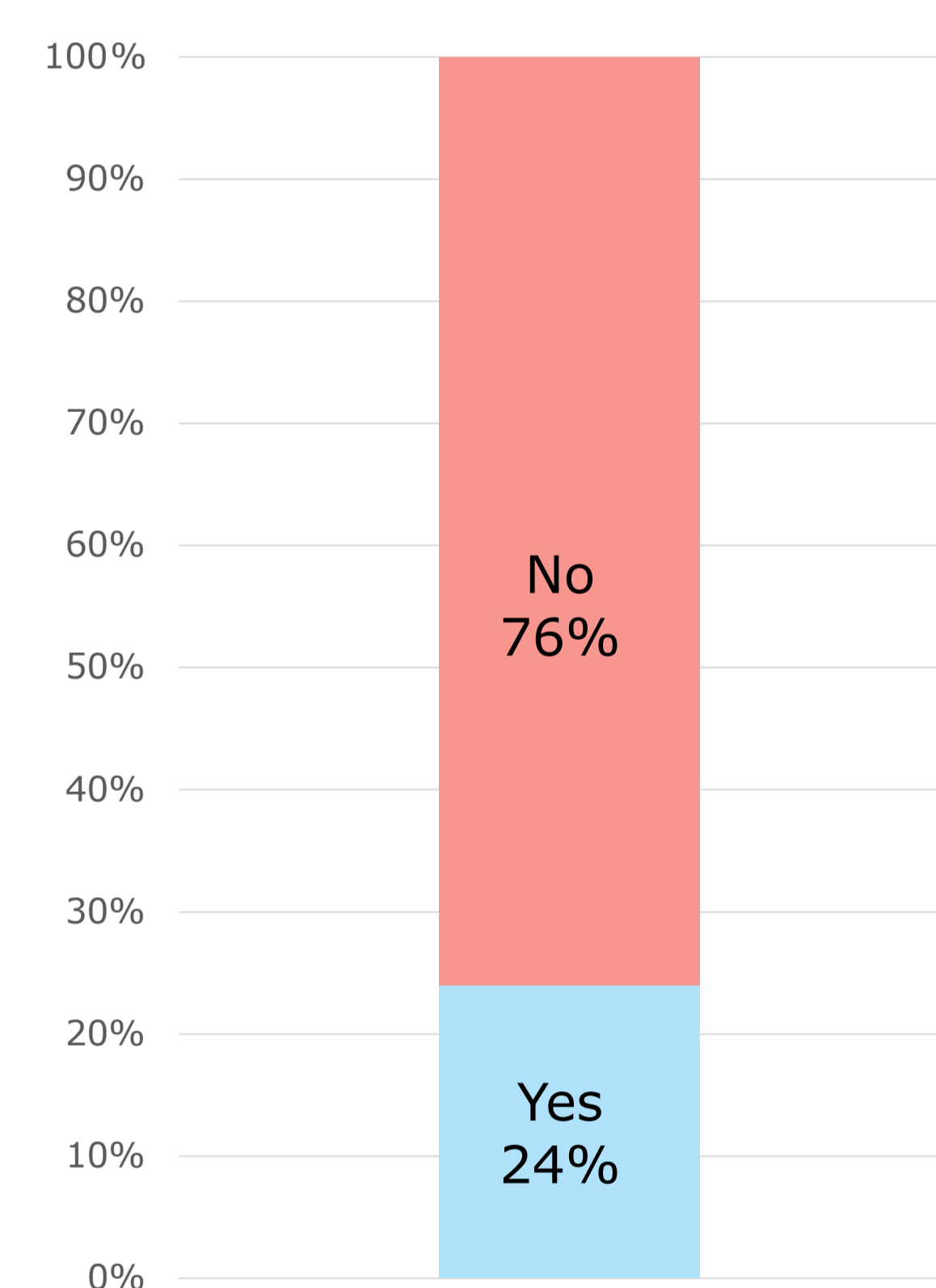


Fig 1. Have you taken PrEP in the last six months?

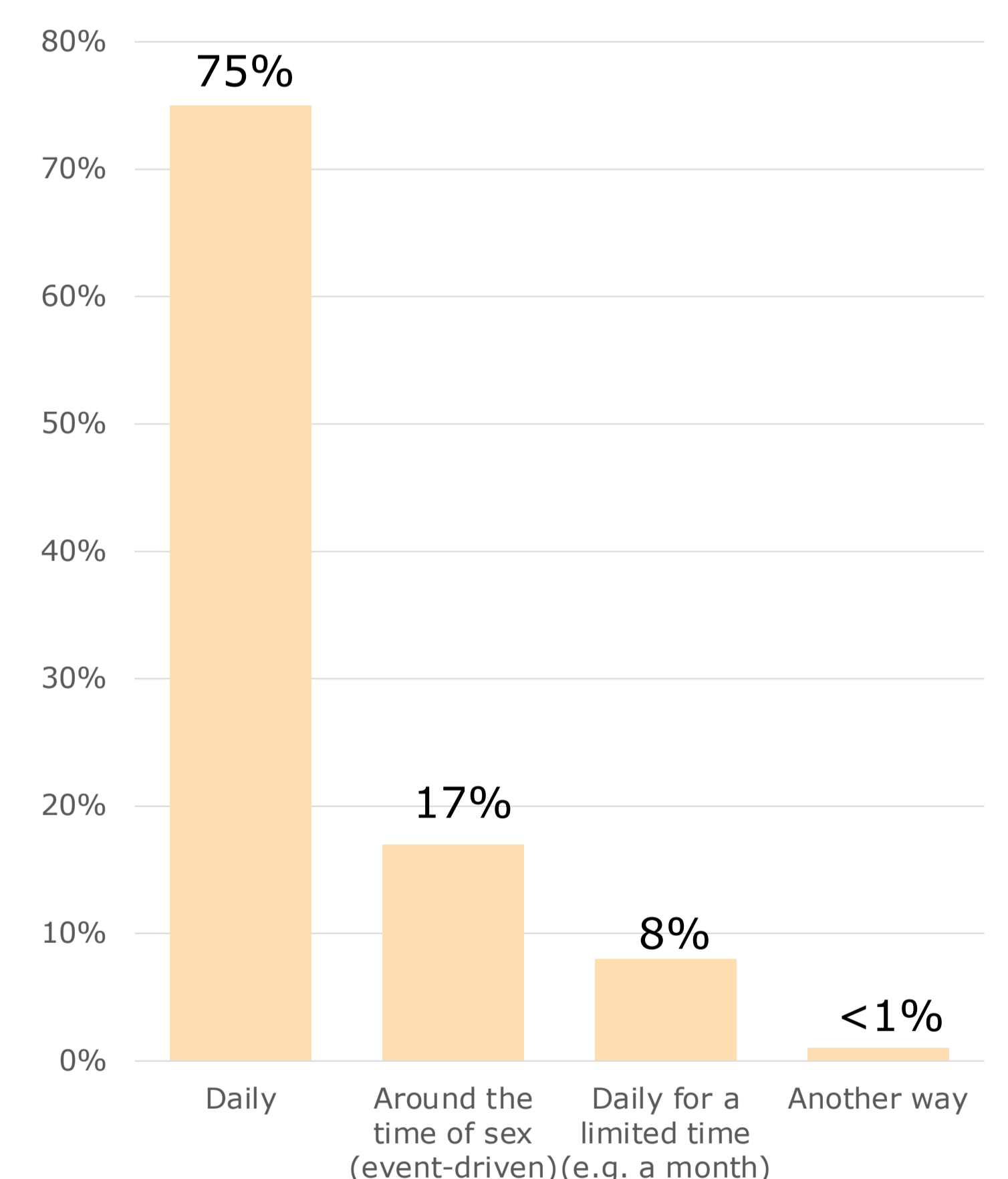


Fig 2. How did you take PrEP in the last six months?

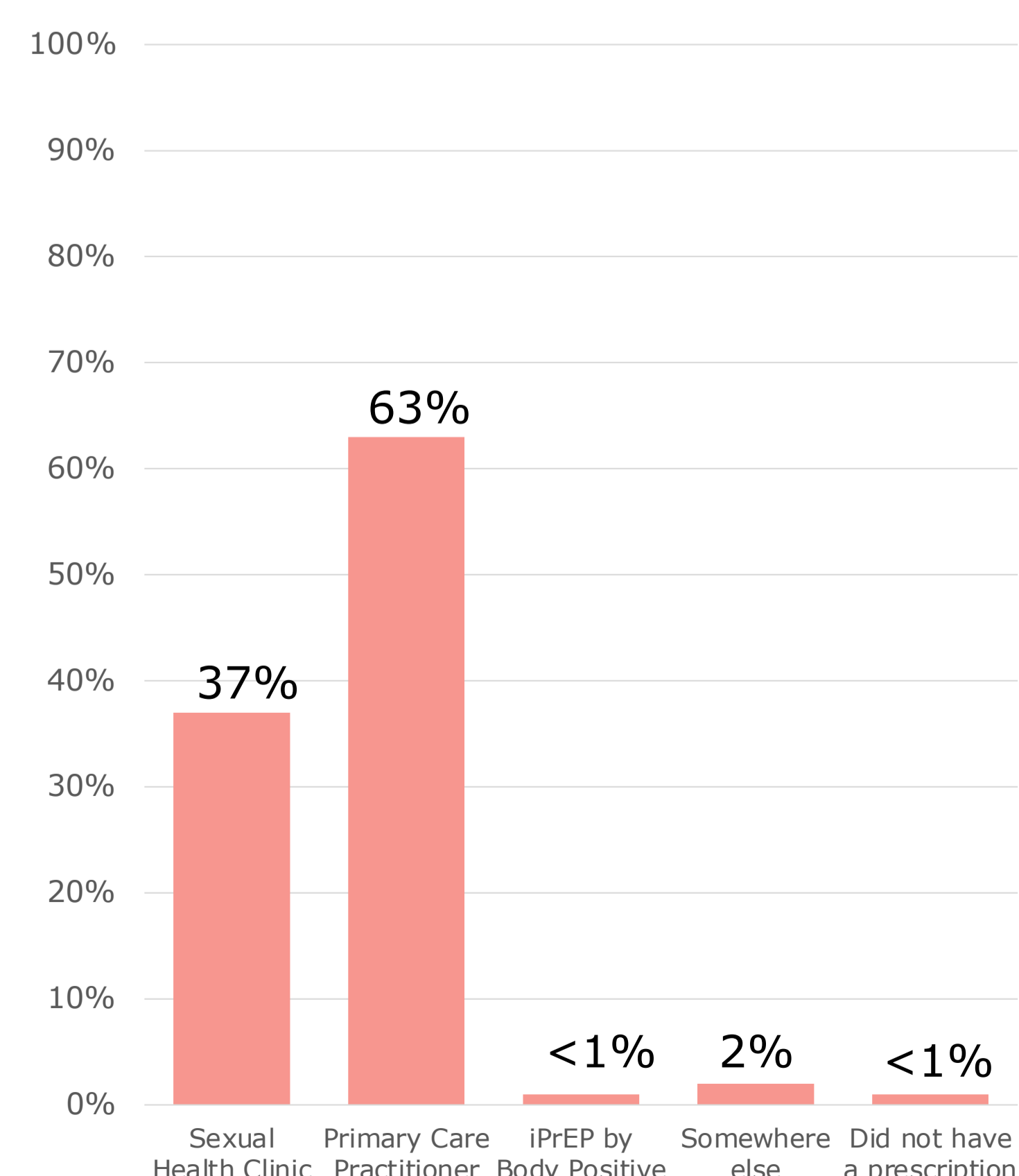


Fig 3. Who Prescribed your PrEP?

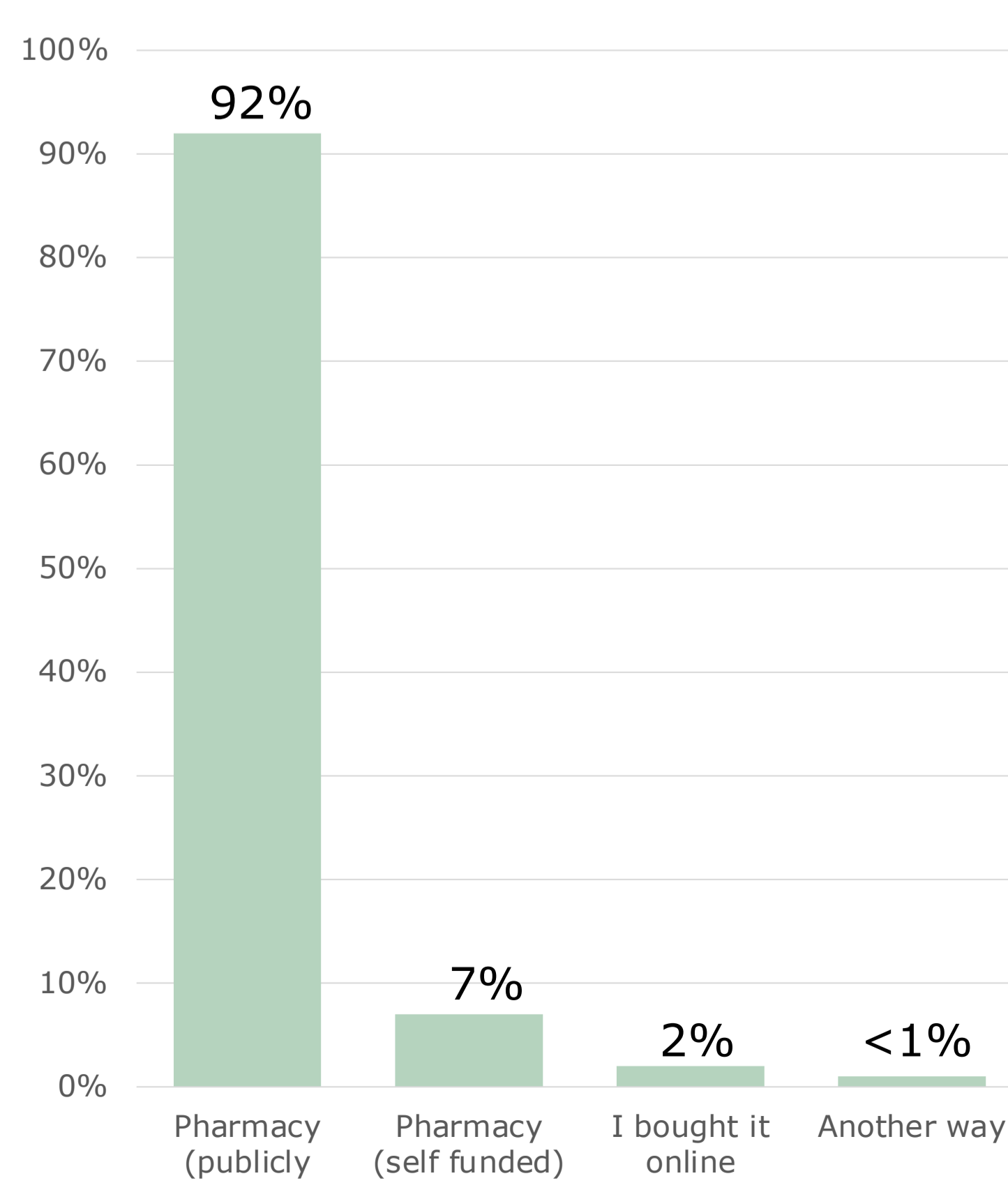


Fig 4. Where did you get your PrEP from?

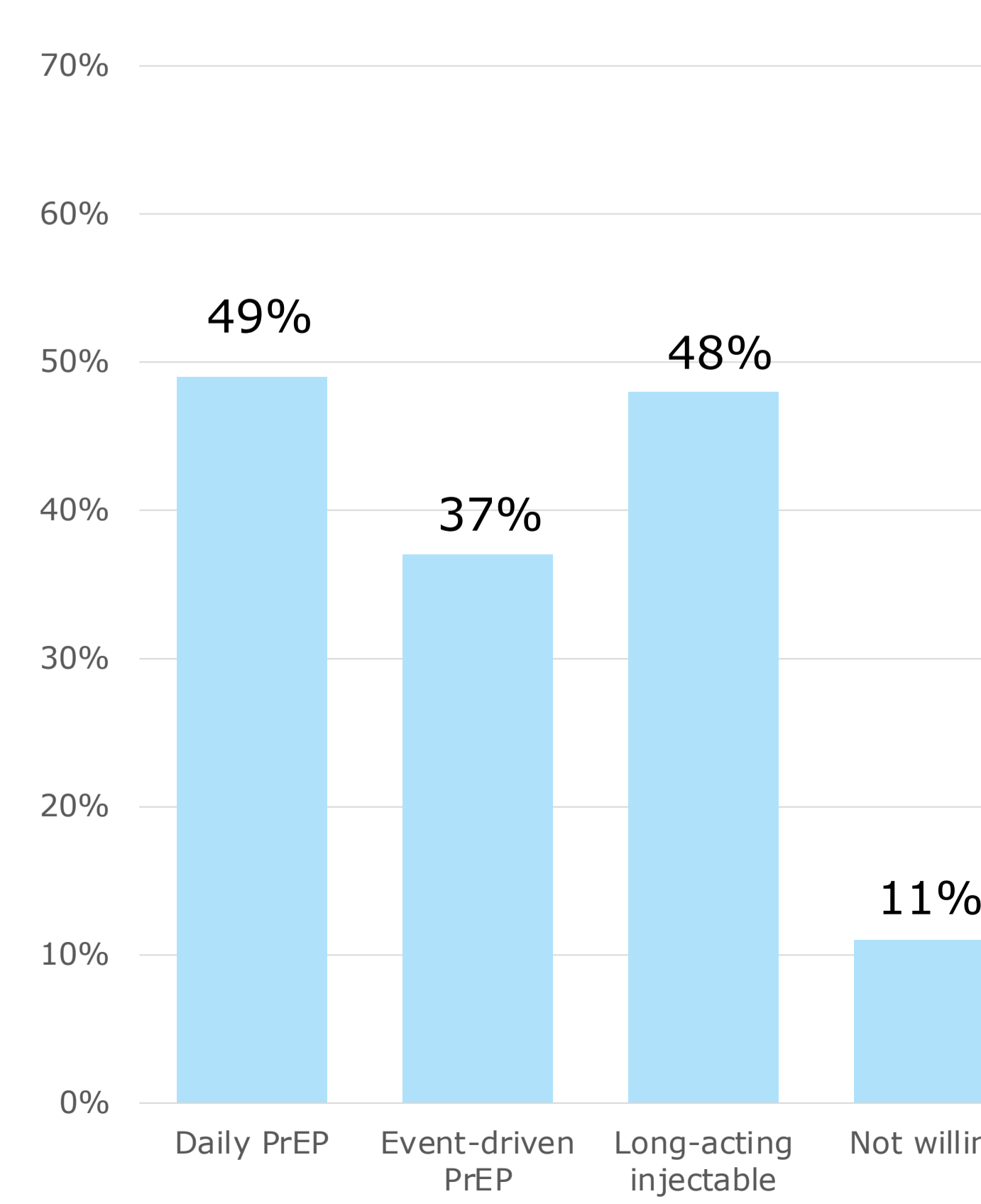


Fig 5. If all these options were available and with equal effectiveness and similar cost, which if any would you be willing to use in future?

## Conclusions

PrEP awareness is high among MSM in this national online sample in NZ. Daily oral PrEP use is the dominant modality with prescribing and dispensing being largely through primary care.

It is crucial that primary care in NZ is well prepared to respond to PrEP needs by MSM communities.

These data will inform NZ's PrEP Cascade, a country-level indicator to monitor PrEP delivery and equity. Cascades disaggregated by ethnicity, risk profile, and age will be constructed to understand inequities and inform targeted health promotion and social marketing actions.

<sup>1</sup> Ministry of Health. 2023. *National HIV Action Plan for Aotearoa New Zealand 2023-2030*. Wellington; Ministry of Health.