PrEP and Pharmacies

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Aim & Why?

- To raise awareness of PrEP, SH information and services to racially minoritised people, including non-English speakers by increasing capability of pharmacists to provide culturally competent PrEP and SH information, signposting and advice for the target audiences.
- Pharmacies are an ideal setting for providing tailored HIV, SH and reproductive health advice.
- More accessible and acceptable to audience (BA heterosexuals) than SH Clinics.
- Knowledge about and uptake of PrEP very low among Black and other racially minoritised people.
- Oct '17 July '20: PrEP Impact Trial: 3% identifying as women and 1.5% as Black African.

How? Activities and Outputs

- Create 'brief' digital training programme.
- Provide PrEP & SH interactive e-learning sessions.
- Create written PrEP and SH resources in two languages.
- Share resources in-pharmacy and online with key local communities.
- Establish PrEP referral pathways.
- 40 pharmacists recruited and complete e-learning.
- 50 monthly visits to online portal.
- 2 different language resources produced (digital).
- 300 different language resources disseminated in-pharmacy.
- 500 individuals from target group to receive PrEP information.

What 'actually' happened...

- Online training developed and rolled out 40 to 60 mins length
- 1 x interactive online session with 8 pharmacists
- A4 poster and wallet sized handout in nine languages Amharic, Arabic, English, French, Portuguese, Somali, Spanish, Swahili & Tigrinya.
- Online resources with further information for potential users provided in nine languages, linked from the wallet sized handouts.
- Resources sent to 19 pharmacies, referral pathways to SHS services already established in-pharmacy, enhanced via training & links.
- 28 pharmacists from 18 pharmacies completed training.
- Unclear how many individuals seen 1 pharmacy collected data over two months 15 individuals approached, 14 discussed PrEP. This would imply over 1500 individuals could be informed and signposted to SHS for PrEP per year over the 18 pharmacies.

E-Learning for pharmacists - evaluation

Pre and Post Intervention evaluation was carried out with the pharmacists undertaking the e-learning.

Questionnaire comprised of four sections containing twenty five questions in total.

All questions were measured against: 'Knowledge of', 'Skills in' and 'Comfort with' – scoring each on a five point scale

- 4 = Very Confident,
- 3 = Confident
- 2 = Some confidence
- 1 = Not confident
- 0 = Not involved with this

E-Learning for pharmacists - evaluation

The four sections covered: HIV and STI Prevention and Treatment – 10 questions

(Prevention, Transmission, Symptoms & Treatments for HIV and STIs; most affected communities; PEP & PrEP; Self testing & Self Sampling kits)

Provision of screening and testing services – 2 questions

(screening and testing services for HIV and STIs)

Stigma and Discrimination – 11 questions

(attitudes; underserved communities; non-judgemental services; socio economic impacts on health; sexual practice, orientation and gender identity; stigma attached to HIV and STIs and the provision of prevention and treatment tools)

Communication and Interaction – 2 questions

(abilities to communicate and engage with people effectively)

E-Learning for pharmacists - evaluation

Analysis across the data sets show a positive movement in increased values across all markers in all sections of the assessment, with a minimum 40 to 50% increase in knowledge, skills and comfort achieved after the intervention.

This is further supported by informal feedback received after the online training session with the training being identified as "easy to understand", "simplifying complex issues to help my learning", "it helped me consider what I do and how I interact with my customers on possibly confidential issues" and "a quick and easy piece of training to complete that gave me the knowledge and confidence I needed to talk with my customers about PrEP".

Questions around drug interactions, drug resistance and PrEP; including PrEP in other SH discussions and new tech (implants etc.) were also answered.

Impacts – what hampered the project?

- Capacity issues related to Covid 19 impacting on pharmacies ability to engage.
- ✓ Fix: Expanded project out to two other areas of high incidence and changed from payment per pharmacy involved to payment per pharmacist trained.
- Training accreditation, not seen as professional qualification.
- ✓ Fix: Discussion with pharmacies involved, inclusion of LPC's in project, ongoing developmental discussion with RPS and teaching/accrediting bodies for pharmacists.
- Covid 19 related capacity issues in general less people in SH need (less sex happening), capacity issues at THT etc. etc.
- Late recruitment for Project Lead.
- ✓ Fix: recruit already known staff member with skills in groupwork development.



- Pharmacists & Pharmacies generally enthused and engaged in process. Payment helped but wasn't the sole motivator.
- Personal contact via phone rather than just over email helped engagement.
- Excellent partners help (thanks Mesfin @ Embrace UK and Marsha & Shivali @ The Middlesex Pharmaceutical Group of LPCs)
- Pre and post evaluation could have been part of training package rather than separate entities.
- Work closely with RPS and others to increase engagement at pharmacy level.
- Training package worked well and been used in other regions for healthcare professionals. Will be available shortly via HPE.
- Including a research project (with Imperial College London) has helped ground and expand the discussions about the use of community resources for SHS.

Going forward...

- Ongoing advocacy & policy work: THT, ICL etc.
- HIV Action Plan joined up thinking about SHS & PrEP.
- Training programme and online resources developed and available to use soon they have been amended to work for all healthcare workers. Making every contact count...

The project has been able to show that engagement with community based services such as pharmacies increases reach to less well served communities, with pharmacists involved understanding the need for culturally competent targeted work around specific HIV related issues. The collaborative work with Embrace UK and the development of online and print resources in 9 languages shows the ability of projects like this to step towards the communities it was trying to serve, providing easily accessible materials and support for the uptake and use of PrEP.

Thanks 🙂