

Beauty salon-based intervention increases trust of PrEP among Black cisgender women

September 6 2023



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Among African American and other Black cisgender women, a beauty salon–based intervention improved knowledge and awareness of pre-exposure prophylaxis (PrEP) against HIV and increased trust in it,



according to a pilot study published in the September issue of *The Journal of the Association of Nurses in AIDS Care (JANAC)*, the official journal of the Association of Nurses in AIDS Care.

However, most study participants did not self-identify as requiring PrEP or having <u>risk factors</u> for HIV. "Like others, our study found <u>women</u>'s willingness to take PrEP increased once they understood how PrEP benefits and protects them, but there remains a gap between willingness and perceived need," lead investigator Schenita D. Randolph, Ph.D., MPH, RN, FAAN, of Duke University School of Nursing in Durham, North Carolina, and colleagues write.

Leveraging the social networks of Black women within a trusted environment

Black women in the U.S. represent just 26% of female PrEP users while constituting 57% of new infections among women. To address the urgent need to increase PrEP uptake in this population, Dr. Randolph's group designed a 3-part intervention called UPDOs Protective Styles: Using PrEP and Doing It for Ourselves:

- Two-hour training for beauty salon stylists who have Black women as their principal clientele; stylists receive continuing education credit and "Ask Me about PrEP" signage for their salons.
- A narrative-based educational video series, co-developed with Black women and an established community advisory council, designed to entertain while conveying key messages about HIV, PrEP, and Black women's social contributors to health.
- Opportunity to reach out to a PrEP navigator.

The intervention moved the needle on trust of PrEP



but uptake was not affected

In the <u>pilot study</u>, 44 Black women who typically visit their salon at least every two weeks took an <u>online survey</u> before and after watching the videos. 89% were heterosexual and the average age was 42.

Pre- intervention survey results showed insufficient knowledge and awareness of PrEP and its availability. Only one woman was currently taking PrEP. Post-intervention results showed significant increases in knowledge and awareness, and women's trust of PrEP and providers improved significantly.

After the intervention, women reported expecting less disapproval from sexual partners, family, and friends about PrEP use. However, there was no change in social stigma scores or PrEP user stereotypes.

Twenty women (45%) said they had no risk of HIV infection, and 22 (50%) said they had low risk. The other two said they were at medium risk. This is of concern because in 2019, the most recent year for which statistics are available, 84% of new HIV diagnoses among women were attributed to heterosexual sex.

On the pre-intervention survey, 7% of study participants said they were not considering starting PrEP within the next month, and 86% said they were not currently considering it. Post-intervention, those figures were 32% and 64%.

"To move Black cisgender women from intention to uptake will happen mainly in how we measure and define risk; there is a need to re-evaluate the messaging," Dr. Randolph and her co-authors recommend. They plan qualitative research to gain a deeper understanding of perceived and actual reasons for women to take PrEP and identify acceptable language that will influence positive views of PrEP use by women.



More information: Schenita D. Randolph et al, UPDOs Protective Styles, a Multilevel Intervention to Improve Pre-exposure Prophylaxis Uptake Among Black Cisgender Women: Pretest–Posttest Evaluation, *Journal of the Association of Nurses in AIDS Care* (2023). DOI: 10.1097/JNC.00000000000000424

Provided by Wolters Kluwer Health

Citation: Beauty salon–based intervention increases trust of PrEP among Black cisgender women (2023, September 6) retrieved 28 April 2024 from https://medicalxpress.com/news/2023-09-beauty-salonbased-intervention-prep-black.html

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