

**Increasing Adherence to Pre-Exposure Prophylaxis using Antiretroviral PrEP**

**Motivational Interviewing in Black Sexual Minority Men**

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NR.210.899 Project Advancement

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April 27, 2021

### Abstract

**Background and Purpose:** Among high risks groups, such as Black sexual minority men, Pre-exposure prophylactic (PrEP) is a medication that can reduce HIV infection when taken daily. However, the stigma associated with PrEP acts as a barrier to initiation and adherence. The purpose of this project was to evaluate if a motivational interviewing intervention would decrease stigma and increase adherence to PrEP among Black sexual minority men and determine its acceptability among providers.

**Methods:** A quality improvement project using a pre/post design was conducted in two inner-city sexual health outpatient clinics over 12-weeks. Adult (age  $\geq 18$ ), English speaking, Black sexual minority men, enrolled or re-enrolled in the PrEP program within the past three months, met inclusion criteria for this project. The intervention consisted of two 15-30 minute telephone-based motivational interviewing sessions conducted by a Nurse Practitioner and Social Worker. Before and after the intervention, participants were assessed on adherence to PrEP measured by patient self-report and PrEP prescription as documented in patient's chart; and stigma measured with the Multiple Discrimination Scale. A four-item survey assessed providers' satisfaction with the intervention. Analyses included descriptive statistics, Wilcoxon Sign Rank, and chi-square tests.

**Results:** The sample included 14 Black sexual minority adult men, plus two providers from the clinics. Participants were a median of 32 years old, 35.7% were monogamous, and most recently engaged in condomless anal (71.4%) and oral (92.9%) sex. Fourteen patients (100%) were adherent with PrEP. The median stigma score was .77 (IQR: 1.00, 2.91) in the pre-test and .82 (IQR: 1.18, 2.91) in the post-test, which was not statistically significant ( $p=0.89$ ). Providers

reported overall satisfaction with the intervention and were willing to incorporate it into clinical practice.

**Conclusions:** The acceptability and satisfaction of motivational interviewing among providers support the assumption that motivational interviewing is a viable tool to incorporate in sexual health clinics.

**Implications:** The format of this project may be adaptable in busy sexual health clinics where PrEP is offered.

*Keywords:* PrEP, black sexual minority men, stigma, motivational interviewing, adherence