

**Project Title:** Feasibility of PrEP for Persons Who Inject Drugs

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## **Abstract**

Persons who inject drugs (PWID) face a dual risk for HIV via injection and sexual behaviors. Given recent increases in opioid use and a new cohort of injectors arising, additional PWID may be coming into HIV risk. Pre-exposure prophylaxis (PrEP) can reduce HIV infections among PWID. Yet, few PWID are on PrEP despite the fact that most PWID are eligible for PrEP. There have been no studies focusing on geographic differences among PWID and PrEP, even though differences in risk environment by locality probably affect PrEP interventions. Nor have barriers to, and facilitators of, PrEP use among PWID been adequately studied. Syringe exchange programs (SEPs) successfully reduce HIV incidence and may be well positioned to implement PrEP for PWID, but state differences and policies could impact their PrEP implementation readiness, as well as create state-specific barriers and facilitators to PrEP. This study uses ethnographic methods guided by the Consolidated Framework for Implementation Research (CFIR) to assess PrEP implementation readiness and identify barriers to, and facilitators of, PrEP implementation in rural Illinois and New York City (NYC). First, we assess PrEP implementation readiness at SEP programs and other programs targeting PWID in rural and urban settings by focusing on the feasibility and capacity for a PrEP implementation. Second, we identify barriers to, and facilitators of PrEP readiness among PWID whose drug of choice are opioids residing in rural and urban settings, and among local programs targeting PWID. Barriers and facilitators are explored at the individual level, as well as the organizational level by exploring PWID perceptions and experiences with local programs and at the institutional level by exploring PWIDs experiences with local programs and their policies. This project will be the first to explore rural and urban differences (and similarities) among PWID in relation to PrEP readiness.