

More Than Just The Facts: HIV Providers In 7 U.S. Cities Identify Training Needs For HIV Preconception Care

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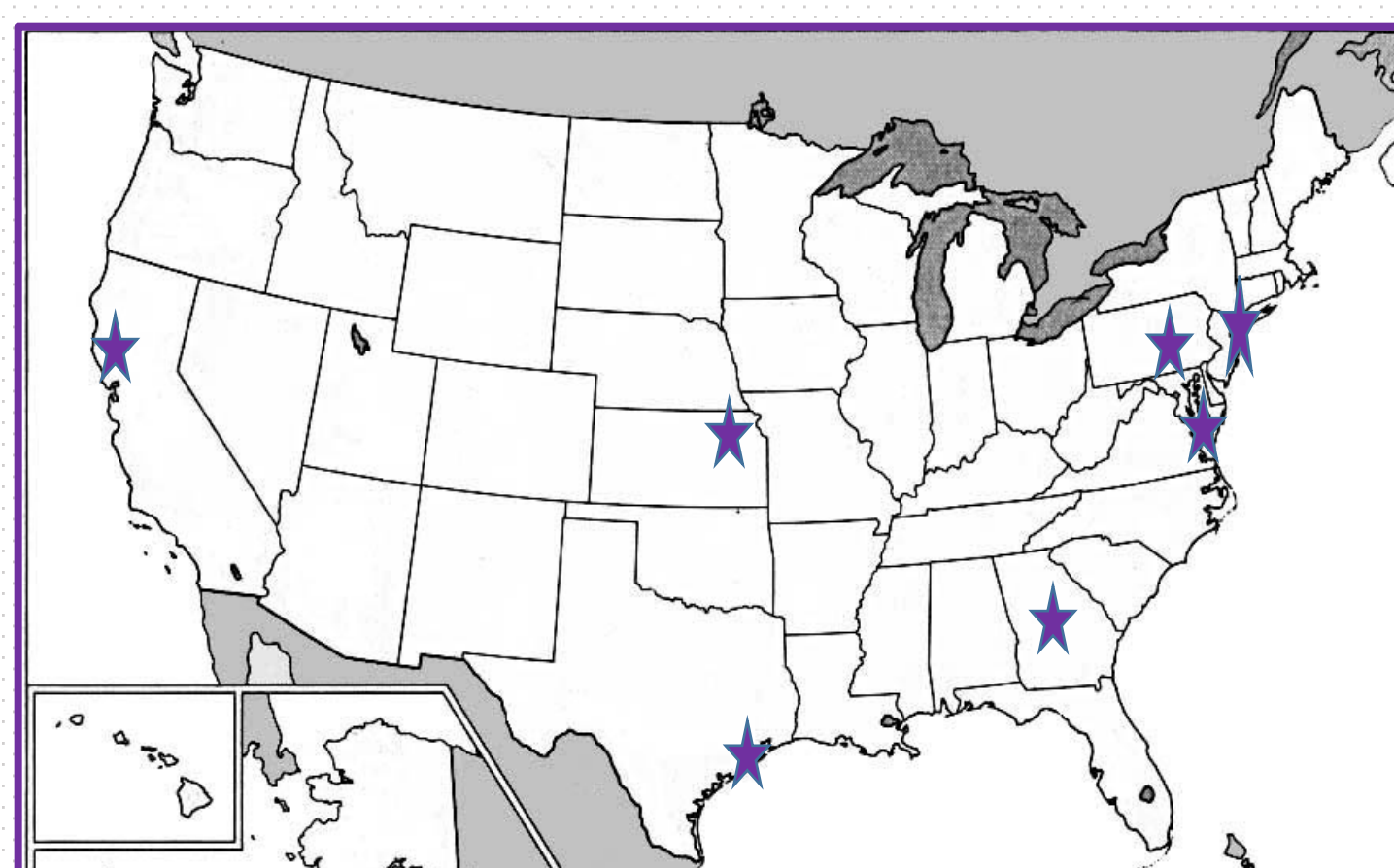
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Introduction

Preconception care (PCC) is not currently a routine aspect of HIV care.^{1,2} With approximately 50% of people with HIV in serodifferent partnerships, and childbearing desires similar to those of uninfected peers,^{3,4} HIV PCC services can optimize maternal and infant health while reducing HIV transmission to partners. Providers need additional training to confidently provide HIV PCC services.⁵

Methods

Trained interviewers conducted semi-structured phone interviews with n=92 HIV providers in seven cities (Atlanta[10], Baltimore[14], Houston[12], Kansas City[14], Newark[8], Philadelphia[20], San Francisco[13]).



Interviews covered topics related to childbearing options for HIV+ patients and their partners.

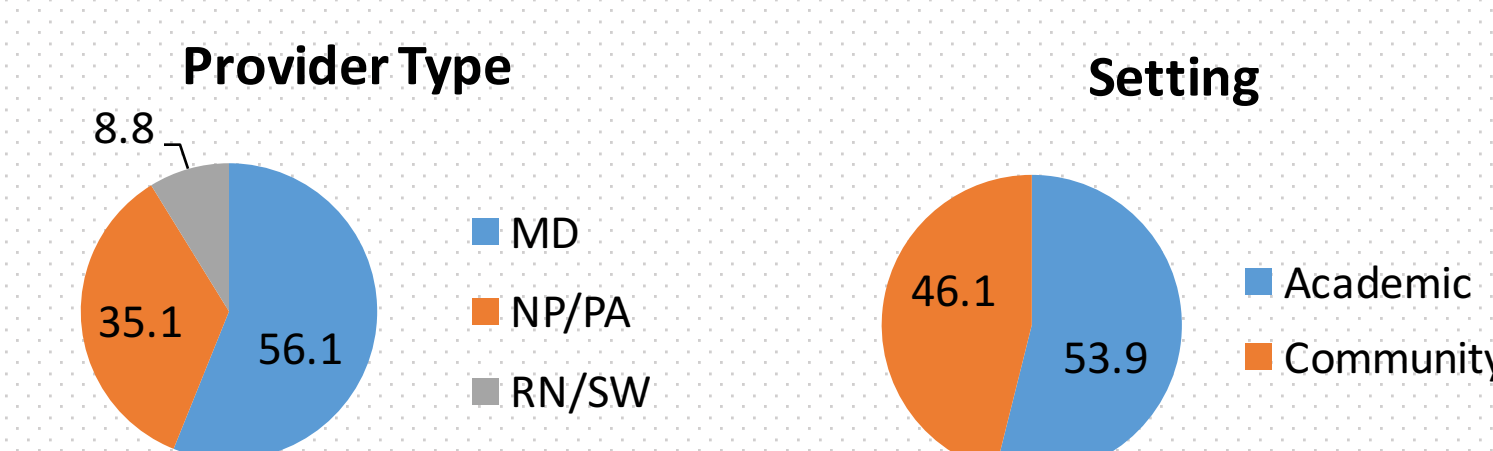
Audio files were transcribed and coded using Dedoose, a web-based program for mixed methods analyses.

We employed content analysis methods to identify themes and categorize responses related to HIV PCC training experience and needs.

Results

HIV Provider Demographics:

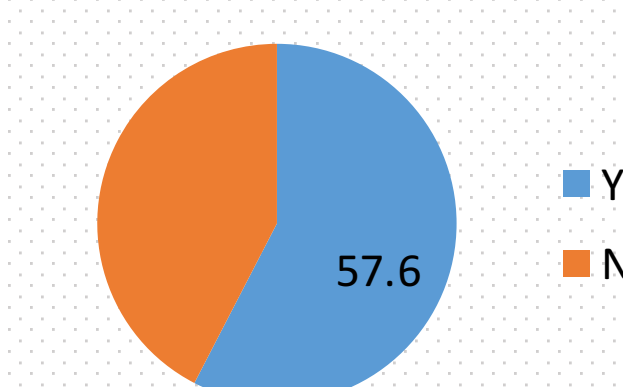
71.6% female, 45.2 mean years of age
71.8% white, 11.5 mean years treating HIV+ patients
56.1% MD, 35.1% NP or PA, 8.8% Nurse or SW
46.1% at community vs academic health facilities



Exposure to HIV Preconception Care Training

1. Very few providers described any formal training in this area.
2. Providers treating HIV+ women were more likely to have knowledge and training in this area.
3. Sources of training ranged greatly:
 - Self-directed review of literature and research
 - Attended a conference session or grand round seminar
 - Webinars or other online training
 - Discussions with providers experienced in HIV PCC
 - Observation of providers experienced in HIV PCC

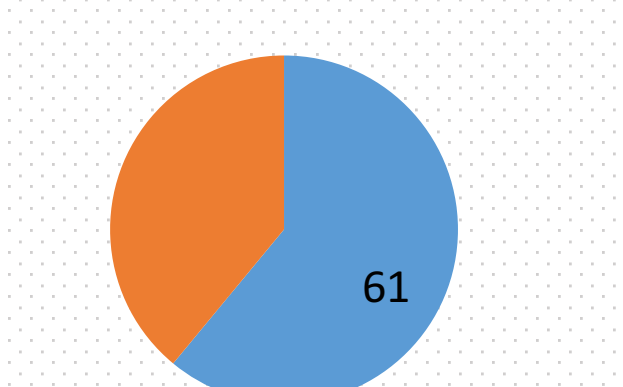
Any previous training



Awareness of National HIV Perinatal Guidelines

1. A majority of providers reported being aware (but not necessarily familiar) with the National Perinatal HIV Guidelines.
2. Providers with a larger proportion of female patients were more familiar with these guidelines.

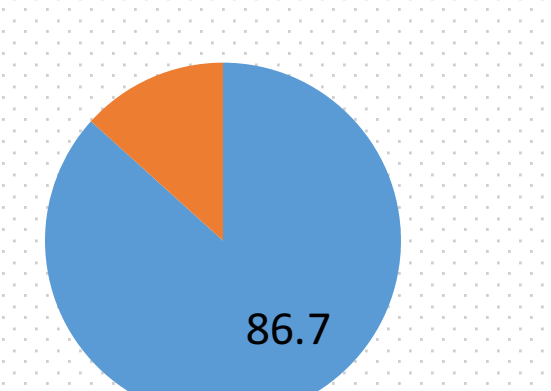
Awareness of HIV PCC Guidelines



Desire for Additional Training

1. A significant majority (86.7%) wanted additional training in HIV PCC and identified the following priorities:
 - Consensus on safer conception methods and their associated risk of HIV transmission, including PrEP for conception
 - HIV PCC best practices to determine and standardize own approach
 - Provider tools to facilitate routine counseling and specialty referrals
 - Direct mentorship and observation by experts
 - Practical information for patients to determine feasibility/access of services
2. Among those not wanting additional training; 7% felt sufficiently trained or could refer patients to trained provider, and 16.3% felt it was not relevant for their patients.

Desire Additional Training



Conclusions

Few providers have received any formal training on providing preconception care or counseling to patients and partners living with HIV.

A majority of HIV providers expressed a desire for training in HIV preconception care to ensure adherence with best practices and guidelines.

Practical information for patients and partners to access services for safer conception was particularly valued.

References

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