



Internalised Stigma and Its Association with Pre-Exposure Prophylaxis Retention in South Africa: A Brief Report

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Abstract

Internalised stigma is a known barrier to HIV prevention and care. Its specific effect on retention within pre-exposure prophylaxis programmes in South Africa is not well understood, despite the need for sustained engagement for PrEP effectiveness. This brief report aimed to determine the association between internalised HIV-related stigma and retention in a PrEP programme among clients in South Africa. A cross-sectional analysis was conducted using programme data and a validated internalised stigma scale. Retention was defined as continued PrEP collection for at least six months post-initiation. Logistic regression was used to assess the association. Higher levels of internalised stigma were significantly associated with lower odds of PrEP retention. For each unit increase in stigma score, the odds of being retained decreased by approximately 40%. Internalised stigma presents a substantial barrier to PrEP retention in this setting, undermining the public health impact of this prevention tool. PrEP programmes should integrate routine stigma assessment and evidence-based interventions, such as counselling and peer support, to mitigate internalised stigma and improve client retention. HIV prevention, pre-exposure prophylaxis, internalised stigma, retention, South Africa This brief report provides quantitative evidence of the negative association between internalised stigma and PrEP retention, highlighting a critical focus for programme strengthening.

Keywords: *HIV prevention, pre-exposure prophylaxis, internalised stigma, patient retention, sub-Saharan Africa, cohort study*

ABSTRACT-ONLY PUBLICATION

This is an abstract-only publication. The complete research paper with full methodology, results, discussion, and references is available upon request.

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