

Project Details	
Project Code	MRCPHS26Ca Gillespie
Title	Optimising awareness of, access to, and uptake of HIV pre-exposure prophylaxis among underserved communities in the UK
Research Theme	PHS
Project Type	Dry lab
Summary	<p>This PhD project addresses persistent inequities in access to HIV pre-exposure prophylaxis (PrEP) in the UK. Through a multi-stage approach—comprising a literature review, qualitative research, co-production workshops, intervention prototyping, and knowledge mobilisation—it aims to co-develop inclusive, community-informed PrEP interventions tailored to underserved populations, including Black communities, trans individuals, recent migrants, and heterosexual men and women. Emphasising design flexibility and cultural relevance, the research will generate practical guidelines for equitable PrEP delivery and explore the feasibility of implementation in settings beyond traditional clinics. The project directly supports the UK's goal to end new HIV transmissions by 2030.</p>
Description	<p>*Background</p> <p>The UK government's target of ending new HIV infections by 2030 requires a coordinated strategy to improve prevention, detection, and treatment—particularly among underserved populations. Pre-exposure prophylaxis (PrEP), a highly effective tablet taken daily or around potential HIV exposure, has reduced HIV diagnoses among White men who have sex with men (MSM). However, uptake remains disproportionately low among other groups, including women, people of Black ethnicity, recent migrants, trans individuals, and heterosexual men and women.</p> <p>To address this, new initiatives aim to extend access to PrEP beyond sexual health clinics, through community pharmacies and digital platforms. Yet, structural limitations suggest that a single intervention model will not adequately serve all populations. Globally, differentiated service delivery models have been successful in high-incidence settings and may offer a more responsive approach in the UK.</p> <p>A national strategy to increase PrEP awareness and uptake will likely need to combine service provision in non-traditional settings, a wider range of product options, and targeted efforts to reduce stigma. Currently, there is a gap in PrEP services that are co-developed with service users—particularly from underserved communities. With the emergence of long-acting injectables and other alternatives, the need for inclusive, co-designed services continues to grow.</p> <p>*Key Research Question</p> <p>This PhD project is driven by the following key questions:</p> <ul style="list-style-type: none"> • What interventions have been introduced globally and in the UK to improve PrEP awareness, access, and uptake, and how well do they serve underserved communities? • What are the perceived barriers and enablers of PrEP use among UK underserved communities such as Black individuals, trans people, recent migrants, and heterosexual men and women? • What intervention design principles and components are essential for ensuring inclusivity, acceptability, and feasibility?

	<ul style="list-style-type: none"> • How can community and stakeholder perspectives inform co-developed guidelines for equitable PrEP interventions? • What are the early experiences of delivering and receiving these interventions in various settings (e.g. pharmacies, community organisations, digital platforms)? • What supports adoption and scale-up of co-produced PrEP interventions at regional or national levels? <p>*Specific Objectives</p> <p>Throughout the PhD, the student will:</p> <ol style="list-style-type: none"> 1. Review the literature Conduct a systematic review of interventions aimed at increasing PrEP awareness, access, and uptake. The review will identify core design features, focusing on how interventions meet the needs of one or more underserved communities. 2. Conduct qualitative research Based on findings from the literature, conduct interviews and/or focus groups with people from underserved communities and relevant stakeholders. This phase will examine context-specific barriers and enablers to PrEP uptake. 3. Facilitate co-production workshops Using insights from the review and qualitative research, the student will work with community members and stakeholders to: <ul style="list-style-type: none"> o Co-produce guidelines for designing PrEP interventions for underserved communities in the UK. o Develop a prototype intervention grounded in inclusivity, cultural relevance, and implementability. 4. Prototype the intervention An early-phase pilot will test the intervention in select settings, using surveys and interviews with recipients and delivery teams to gather feedback on feasibility and acceptability. 5. Mobilise knowledge Develop a strategy to share the guidelines and findings with stakeholders and national health bodies (e.g. UKHSA, Public Health Wales, BHIVA, BASHH), as well as policy makers in UK and devolved governments. Outputs may support national HIV prevention planning, such as through the PrEP roadmap or Action Plans. <p>*Areas Where the Student Will Take Ownership</p> <p>The PhD student will have the flexibility to shape their methodological approach throughout the project.</p> <p>For example:</p> <ul style="list-style-type: none"> • They may choose to conduct a Realist review or another form of evidence synthesis. • Intervention development could follow the MRC's framework on complex interventions, or alternative approaches such as the Person-Based Approach. • Qualitative research may be guided by the COM-B model, the Theoretical Domains Framework, or other relevant frameworks. • Depending on findings, the intervention may focus on one or multiple underserved groups with shared needs. • The student may opt to use focus groups, individual interviews, or a mix of both, depending on the context.
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Supervisory Team	
Lead Supervisor	
Name	Dr David Gillespie
Affiliation	Cardiff
College/Faculty	Biomedical & Life Sciences
Department/School	Centre for Trials Research / Medicine
Email Address	gillespie1@cardiff.ac.uk
Co-Supervisor 1	
Name	Dr China Harrison
Affiliation	Bristol
College/Faculty	Medical School
Department/School	ARC West
Co-Supervisor 2	
Name	Professor Efi Mantzourani
Affiliation	Cardiff
College/Faculty	Biomedical & Life Sciences
Department/School	Pharmacy
Co-Supervisor 3	
Name	Dr Jo Kesten
Affiliation	Bristol
College/Faculty	Medical School
Department/School	ARC West