

# Study finds barriers to accessing HIV prevention pill

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APLA Health, in partnership with the California HIV/AIDS Research Program (CHRP) of the University of California, today (Sept. 12) released a new report on pre-exposure prophylaxis (PrEP) titled "Addressing PrEP Disparities among Young Gay and Bisexual Men in California." The report includes results from a statewide survey of more than 600 young gay, bisexual and other men who have sex with men (YMSM) and examines current levels of PrEP awareness and use, likelihood of use, as well as barriers to PrEP access.

PrEP uses a well-established antiretroviral medication, Truvada, to block HIV infection in HIV-negative individuals. PrEP is a highly effective HIV prevention tool that could dramatically reduce new HIV infections among YMSM. The results of the study, however, indicate that less than 10 percent of YMSM in California have used PrEP and blacks and Latinos are significantly less likely to be aware of PrEP than their white counterparts. Black and Latino YMSM are among the groups at highest risk for HIV in California and across the United States.

"PrEP has the potential to help end the HIV

epidemic in California and yet too few of those most at risk for HIV—especially young gay and [bisexual men](#) of color—are accessing it," said Dr. George Lemp, director of CHRP. "The California HIV/AIDS Research Program is pleased to have supported this important study about PrEP uptake in California."

The report's key findings include:

- PrEP awareness is lower among black, Latino, and younger YMSM. Nearly three-quarters (73 percent) of participants in the study were aware of PrEP. However, PrEP awareness was significantly lower among blacks and Latinos compared to whites. PrEP awareness was also significantly lower among the youngest men in the study, ages 18–21, in comparison to their older counterparts.
- PrEP use is low, especially among Latino and younger YMSM. About 1 in 10 participants reported using PrEP (9.6 percent), but PrEP use was significantly lower among Latinos compared to whites. PrEP use was also significantly lower among YMSM ages 18–21 compared to the older men in the study.
- YMSM are interested in taking PrEP. The majority (55.9 percent) of YMSM in the study said they were highly likely to use PrEP if it were available to them, and they demonstrated favorable attitudes toward PrEP.
- YMSM don't know where or how to access PrEP. More than half of participants indicated not knowing where to go to get a PrEP prescription (59.3 percent) or how to find a doctor who could give them a PrEP prescription (56.4 percent), with blacks and Latinos being significantly more likely to indicate lack of knowledge in comparison to whites.
- YMSM have concerns about PrEP's safety,

efficacy and cost. The majority of participants said they were concerned about side effects from taking PrEP (63.4 percent) and that PrEP is only partially effective (58.4 percent). More than half (58.9 percent) of participants felt they would not be able to afford PrEP.

"These results clearly show that young gay and bisexual men are interested in taking PrEP if they know about it and can easily access it," APLA Health Chief Executive Officer Craig E. Thompson said. "But we must eliminate social and structural barriers to this highly effective HIV prevention tool. APLA Health is proud to take a leadership role in making sure that everyone who wants or needs PrEP is able to benefit from it."

The report's key recommendations include:

1. Targeted education campaigns and strategies are needed to increase PrEP awareness and uptake, especially among black and Latino, low-income, and non-gay-identified YMSM.
2. PrEP access points must be available throughout the state, particularly in communities of color, and provider directories should be widely publicized.
3. PrEP navigation services tailored to the needs of YMSM of color are essential, and must include screening for and enrollment in health coverage.
4. PrEP education must provide clear and consistent information on side effects and efficacy.
5. California should use public funds to help pay for PrEP, including PrEP-related clinical ancillary services.

**More information:** The report is online:

[aplahealth.org/wp-content/uplo ...  
P\\_FullReport\\_WEB.pdf](https://aplahealth.org/wp-content/uploads/2018/07/APLA_FullReport_WEB.pdf)

The policy brief is online: [aplahealth.org/wp-  
content/uplo ... APLA\\_PrEP\\_PB\\_WEB.pdf](https://aplahealth.org/wp-content/uploads/2018/07/APLA_PrEP_PB_WEB.pdf)

Provided by University of California

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