



# How do we message condom use in the Age of PrEP?

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# ARE we in the age of PrEP?

## What we know:

- PrEP is very effective against HIV when used correctly
- Access to PrEP is still limited across many regions and for many communities

## What we also know:

- Condoms are very effective against HIV (and STIs) when used correctly
- Condoms are available cheaply and widely (but not always)

# And what we also know...

PrEP and condoms are two very important tools in the HIV prevention toolbox. And there are others:

- Regular HIV and STI testing
- Treatment as Prevention/U=U
- Behaviour change interventions

# So, is it really the age of PrEP?

- It is the (exciting!) age of **Combination Prevention**
- We need to (continue to) promote:
  - Biomedical interventions – TasP, PEP, PrEP
  - Structural interventions – stigma, poverty, etc...
  - Behavioural interventions – drugs/alcohol, risk reduction

# Is condom messaging still relevant?

## Yes(!)

- Because condoms are still relevant!
  - Other STIs
  - Adherence issues with PrEP
  - For those who can't access or don't want to take PrEP

## No(?)

- Condoms won't or can't be for everybody though, so access to and promotion of other methods is crucial
- But: of course it is still relevant! (For those reasons to the left and likely more)

# AHF and Prevention



Treatment as Prevention

Rapid Testing

Condom Distribution

Comprehensive Sexual Education

Clean Injecting Tools

Biomedical Prevention

Social Marketing

Effective Behavioral Interventions

# AHF and Condoms

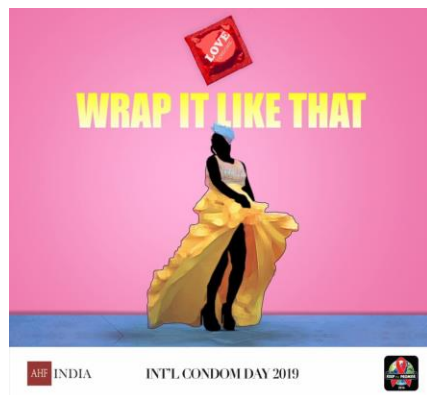


## AHF Branded Condoms



## Outdoor and Print Condom Marketing





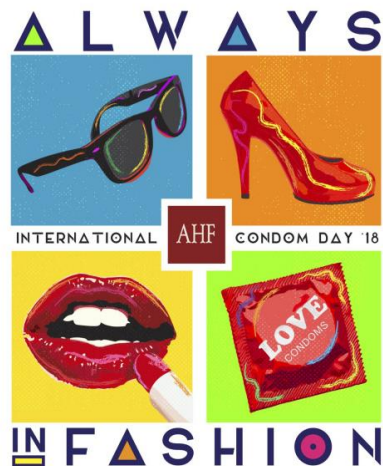
## Event-based Condom Promotion







# International Condom Day (13 February)



# AHF and PrEP

- PrEP is actively prescribed through our medical providers (in the U.S.)
- AHF is one of the largest providers of PrEP through our pharmacies (in the U.S.)
- AHF strongly supports efforts to develop an implant-based/long-acting PrEP

# Reaching COMMON GROUND on PrEP

A sometimes emotional debate over the proper use of Truvada for prevention of HIV has now been raging for the last several years. Based on the current available scientific data, AIDS Healthcare Foundation offers the following principles for the administration of PrEP for the community's consideration:

1. Those who have not and will not use condoms and are having multiple sexual partners are the best candidates for PrEP.
2. Those who use condoms with every partner do not require PrEP.
3. Every person who is going to take PrEP should be tested beforehand and retested quarterly for HIV and other STDs.
4. The decision to begin PrEP should be thoroughly discussed with one's medical provider—including adherence, which should be monitored closely—and patients should be counseled to take the drug daily.
5. Persons who start PrEP and then discontinue its usage should be counseled to use condoms.
6. The goal should be to get every HIV+ patient's virus to undetectable levels that would render them non-infectious (in which case their partner does not require PrEP).
7. Reducing the total number of sexual partners you have will decrease your risk of contracting HIV and other STDs.
8. In general, medical providers should engage in frank conversations about sexual risks with patients.
9. More study is needed, particularly among marginalized populations such as women, youth, African-Americans, and Latinos about the likelihood of adherence to PrEP.
10. In the future, an implant that delivers a steady level of medication or an injection that maintains blood levels for months will be preferable to daily dosing.
11. Gilead Sciences, the manufacturer of Truvada, should not have undue influence over decisions made by the medical community or at-risk populations about the use of PrEP.

# In summary...

It is crucial to use a combination approach to HIV prevention to:

- Meet the needs of our clients and patients
- Reduce transmission of HIV and other STIs and improve overall sexual health
- Support people fully with how they choose to reduce their risks, however that may be.

There is still some way to go yet to end the epidemic, but as we get closer, we can't afford to be complacent with any of the options we have at our disposal.

There is a place and space for all our prevention work !

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