Currently, over 80,000 people in the U.S. are on PrEP. It’s estimated that 468,000 women in the U.S. are eligible for PrEP. Similarly, only about 1% of the Black people who could benefit from PrEP have filled a prescription. Most people who could benefit from PrEP simply don’t know about it. Everyone has the right to make an empowered, informed decision about whether PrEP is right for them.

You might be a good candidate for PrEP if you:

☐ Don’t regularly use condoms.
☐ Have a sexual partner who has HIV (sometimes called serodiscordant, serodifferent, magnetic, or mixed status couples).
☐ Have a sexual partner who engages in anal or vaginal sex with other people without condoms, or a partner who is an injection drug user.
☐ Have anal or vaginal sex with many partners, especially if you don’t use condoms regularly.
☐ Recently had another STD (chlamydia, gonorrhea, or syphilis).
☐ Do sex work that includes vaginal or anal sex.
☐ Have injected drugs, shared needles, or been in treatment for drug use in the past six months.

General Information on PrEP
www.blackaids.org
www.handleacoupleprep.com
www.hivonline.org/prep4women
www.women.prepfacts.org
www.plannedparenthood.org/learn/stds-hiv-safer-sex/hiv-aids/prep

Guidelines for Use of PrEP
www.cdc.gov/hiv/basics/prep.html
www.who.int/hiv/pub/guidance_prep/en

Finding a PrEP Provider
www.pleaseprepme.org
www.preplocator.org
www.greaterthan.org/get-prep/

Payment Assistance Programs
www.gileadadvancingaccess.com
www.copays.org/diseases/hiv-aids-and-prevention
www.panfoundation.org
What is PrEP?
PrEP or Pre-Exposure Prophylaxis is an HIV prevention strategy for HIV-negative people. It involves taking Truvada once a day to protect against HIV. PrEP is FDA-approved, safe, and effective!

Why is PrEP important for Black women?
Black cis* and trans women are much more likely to contract HIV than women of other races. 1 in 48 Black women will be diagnosed with HIV in their lifetime. HIV occurs more often in Black communities because HIV is fueled by racism, sexism, poor health services, and other factors that disproportionately impact Black women. PrEP is an HIV prevention method that gives you choice, privacy and control. (*Cis women are women who were assigned female at birth; cis women are women who are not trans.)

How does it work?
Truvada for PrEP is a pill that prevents HIV from entering the body’s cells and replicating.

How effective is it?
Studies have shown that, if taken daily, PrEP is over 90% effective at preventing HIV. It’s really important to take PrEP every day. PrEP doesn’t work as well if you skip pills. If you don’t take it every day, there might not be enough medicine in your body to block HIV.

How soon is it effective?
It takes 20 days to reach protective levels in vaginal tissues and seven days to reach protective levels for receptive anal sex.

Are there side effects?
Most people who take PrEP report zero side effects. Some users experience nausea, dizziness, headaches, or weight loss, but these are mild and usually resolve within a few weeks. Rare side effects include modest declines in kidney function and bone density, but studies show these resolve once treatment is discontinued. As with any medication, discuss potential side effects with your healthcare provider.

What about my birth control?
To date, research shows that hormone-based birth control drugs do NOT interact with PrEP.

What if I become pregnant or breast-feed while on PrEP?
PrEP is an option for women who want to start a family and prevent HIV. While the baby will be exposed to medicines if you are pregnant while taking Truvada, studies show that there is no known increased chance of birth defects, growth problems, or complications during pregnancy or breast-feeding. You and your healthcare provider can discuss the pros and cons of continuing or stopping Truvada if you become pregnant or are breastfeeding.

Will PrEP affect my hormone replacement therapy?
Currently, there is no evidence that PrEP will interfere with your hormones, either for hormone replacement therapy or for gender affirmation. Of course, discuss your particular concerns with your healthcare provider.

What about condoms?
While PrEP protects against HIV, it does not protect against other sexually transmitted infections or pregnancy. Condoms remain the best option to protect against all STIs and offer additional protection against HIV when used with PrEP.

How do I start PrEP? How do I get it?
Anyone who can write a prescription can provide PrEP, including a family planning clinician or your primary care provider. First, talk with your healthcare provider to see if PrEP is right for you. Be honest with your provider about your sexual and drug using activities. If you talk to a healthcare provider and they refuse to prescribe you PrEP ask for a referral to an HIV specialist. If you and your healthcare provider determine PrEP would be good for you, then they will test you for HIV, STIs and test how well your kidneys are working. If you are HIV-negative, your healthcare provider will give you a prescription for PrEP. You will need to visit a healthcare provider every three months and be re-tested in order to renew your PrEP prescription. Visit www.pleaseprepme.org to find a PrEP healthcare provider near you.

How do I pay for PrEP?
Most private and public insurance companies will cover the costs of PrEP. There are also medication assistance programs for those who qualify.

Do I have to take PrEP forever?
PrEP may only make sense for you at different points in your life. For example, when you are in a relationship with a partner who is HIV-positive or when you are having condomless sex with partners whose HIV-status you may not know. PrEP may also be good if you can’t always make your partner use a condom. You can stop taking PrEP if your life season changes. Always talk with your healthcare provider when starting or stopping PrEP.