



# Increasing PrEP Awareness and Access Among Women: Stories of Five Title X-Funded Family Planning Sites Offering PrEP Services



# Pre-exposure prophylaxis (PrEP) is a safe and highly effective once-a-day pill to prevent HIV.

However, PrEP uptake among individuals who could potentially most benefit has been limited. According to the U.S. Centers for Disease Control and Prevention (CDC), approximately 180,000 sexually active U.S. women of reproductive age are potential candidates for PrEP. Since 2012, PrEP uptake in the U.S. increased significantly among men, while the number of women starting PrEP remained steady and significantly low among African-American and Hispanic/Latina women. **Of the 78,360 PrEP users in 2016, only 4.7% were female.**



**As a primary source of care for women, family planning organizations are in a prime position to reduce HIV-related health disparities by addressing gaps in PrEP awareness, access, and uptake.** Many family planning sites are already offering PrEP to their clients. Here, we share the stories of five Title X-funded family planning service sites across the country offering PrEP services to their clients.

The five Title X family planning sites featured here share how their sites made the decision to offer PrEP services, how to prepare clinicians and staff for PrEP implementation, how to approach clients about PrEP, and other lessons learned for family planning sites considering offering PrEP services. This compilation of stories from Title X-funded family planning sites is a companion piece to the [Decision-Making Guide for the Provision of PrEP Services in Title X-Funded Sites](#), a new resource from the U.S. Department of Health and Human Services' Office of Population Affairs (OPA) to help Title X family planning service sites make evidence-informed decisions about their role in assuring access to PrEP for HIV prevention services in their communities.

## Women and HIV

19%

Women accounted for approximately 19% of new HIV infections in the U.S. in 2017; 75% of the women were African-American or Hispanic/Latina.

68%

Approximately 176,670 U.S. women are potential candidates for PrEP, accounting for 68% of heterosexual adults in the U.S. with PrEP indications.

5%

Of the 78,360 PrEP users in 2016, only 4.7% were female.

Sources: Huang YA et al., 2018; Mera Giler R et al., 2017; Smith DK et al., 2018



### OneWorld Community Health Center

Omaha, NE

*“Offering PrEP allowed our clients to access comprehensive care at our health center without having to refer them outside of our network. And we’ve found that many of our clients have done their homework! They’ve talked with family or friends or partners, and they are really seeking a clinic who can help them with this. So by increasing our outreach, we have really made our PrEP services more visible to the community.”*

**Federally Qualified Health Center serving ~40,000 clients annually**



### Community Health Centers of Pinellas

Pinellas County, Florida

*“Our PrEP program is helping us to expand our HIV prevention services, and it’s giving us a unique opportunity to really focus on serving communities who may benefit the most, including minorities and women. We have a very specific, purposeful and targeted message and outreach strategy for our PrEP program where we’re trying to reach women who are underserved in this area.”*

**Federally Qualified Health Center serving ~55,000 clients annually**



### Planned Parenthood Mohawk Hudson

Mohawk Hudson Region, NY

*“We do outreach in the community to educate our clients and potential clients about PrEP. Once we realized that women were underrepresented in the clients that were coming out to us, we made a bigger effort to start doing targeted presentations at women-focused community groups and events. We also made sure that women were highlighted in our outreach materials so women could see that this wasn’t just for men, but for women as well.”*

**Planned Parenthood Health Center serving ~20,000 clients annually**



### Drexel Women's Care Center

Philadelphia, PA

*“The benefit of our program is that our clients are receiving PrEP from providers that they already know and trust. We offer a one-stop-shop for well woman exams, contraception, prenatal care, HIV/STI testing, and PrEP. So, we don’t send our PrEP patients to a different clinic just for that one thing. Our providers have developed comfort and expertise in offering PrEP. And women in Philadelphia now have greater access to PrEP through our clinic.”*

**University Hospital-Based Clinic serving ~4,000 clients annually**



### Albany Area Primary Health Care

Albany, GA

*“Being able to offer PrEP services was such a benefit for our health centers. We really had to take a look at our data and look at how many people were being newly diagnosed with HIV. Having those numbers really prompted us to start offering PrEP and talking about PrEP more with our clients. We just wanted to be able to do all we could to keep our clients healthy.”*

**Federally Qualified Health Center serving ~40,000 clients annually**

## Implementing PrEP Services in Family Planning Settings

Sites shared how they made an organizational decision to offer PrEP, and what the PrEP services look like at their sites.

### Deciding to Offer PrEP Services

The five Title X sites shared how they made the decision to offer PrEP services. For many sites, the local need for additional HIV prevention services was a key decision-making factor. Sites often described being in an area with few other PrEP providers—especially women-friendly providers—as an opportunity to fill a service gap in their areas and an additional motivator to offer PrEP. In several of the sites, a PrEP champion such as a clinic manager or health educator advocated for the importance of offering PrEP services, and engaged other leadership, clinicians, and staff to get the program started. All the sites shared that the ability to offer comprehensive HIV prevention services for their clients, along with other family planning and primary care services, was a major advantage and decision-making factor so that clients would be able to access all their care in one place.

**“Being able to offer the service was a huge draw for our site. We were seeing more cases of individuals newly diagnosed with HIV, and we realized no other sites in our service area were offering PrEP. Looking at our HIV numbers and thinking about that service gap were really a huge motivator for us to offer the service.”**

### Talking to Clients About PrEP

Each of the sites took steps to educate their clients about PrEP for HIV prevention, and make people aware of the new service. Clients were often not familiar with PrEP or did not see themselves at risk for HIV, so clinicians and staff tried to talk to all clients about PrEP at each family planning visit to normalize and destigmatize conversations about HIV. The sites also developed informational cards, fliers, posters, and other PrEP educational materials for clients, making sure that materials reflected their client population, including women, transgender individuals, and people of color.

**“Our patients were pretty unfamiliar with PrEP. Most often, we would ask a patient, ‘Have you heard of PrEP?’ And they would say, ‘No, I have no idea what you’re talking about.’ So, we use that as an opportunity to offer PrEP counseling, alongside our family planning and HIV/STI test counseling that we are already doing.**

**We take the first step to ask them, ‘Do you know about PrEP, the daily pill that prevents HIV?’ And we continue to keep bringing it up to our clients at different points and in different ways. We have had a lot of clients who have decided to start PrEP after multiple visits, or have recommended it to other people they know.”**

## Clinical Flow for PrEP Services

After educating clients about PrEP and taking a sexual history, clinicians and staff at the sites counsel and offer PrEP as an option for eligible clients. For clients who are interested in PrEP, clinicians do baseline lab work and then schedule follow-up appointments with clients to review their lab results and write the prescription. Some sites offered same-day PrEP prescriptions for eligible clients. One site described offering a one-month PrEP prescription to get clients started while waiting for the lab results to come back. After getting clients started on PrEP, sites scheduled follow-up visits every three months to continue PrEP care.

**“We have walk-in services five days a week. Our clients fill out a sheet that says ‘I want an HIV test, I want a chlamydia test, I want a pregnancy test.’ So we also added a bullet point that said, ‘I would like to learn more about PrEP, the HIV prevention pill.’ So, that is integrated into those other walk-in prevention services.”**

## Preparing Clinicians and Staff for PrEP Services

Family planning clinicians and staff play a key role in implementing PrEP services. Leadership, clinician, and staff engagement and buy-in, as well as training for all clinicians and staff who interact with clients, are key for successful PrEP implementation.

### Leadership, Clinician, and Staff Engagement

Leadership support is vital to successful PrEP service implementation and sustainability. Leadership at each of the five featured family planning sites were supportive, and often directly engaged, in the implementation of PrEP services. Site leadership often introduced the idea to offer PrEP services, encouraged clinicians and staff to attend PrEP training, and promoted readiness for PrEP services across the sites. Various clinicians and staff can participate in educating clients about PrEP, conducting labs, and helping clients navigate patient assistance programs, including: **physicians, nurse practitioners, physician assistants, and other prescribing clinicians; clinical pharmacists; PrEP program coordinators; health educators; social workers; patient navigators and case managers; front desk staff; and marketing team staff.**

Various clinicians and staff participated in educating clients about PrEP, counseling potential PrEP candidates, conducting labs, prescribing and offering follow-up services, and helping clients access the medication through their insurance or patient assistance programs.

### Training Clinicians and Staff of PrEP

All the featured sites provided training to clinicians and staff at their sites, and spoke about taking the time to educate clinicians and staff as pivotal for the success of their programs.



**A 2015 national survey of 495 family planning providers found that approximately 1/3 of providers:**

- Correctly identified PrEP
- Correctly stated the efficacy of PrEP in clinical trials
- Chose the correct HIV test to evaluate a client with a recent exposure
- Have seen PrEP guidelines, including those by the CDC, ACOG, or New York State Department of Public Health

**The vast majority of family planning providers wanted more education about PrEP!**

In some sites, clinicians from a neighboring health center, local hospital, or health department visited the site and offered in-person trainings for clinicians and staff. At other sites, clinicians and staff attended outside trainings offered by the health department or a local hospital. Clinicians who attended the outside trainings came back to the family planning site and offered training for the rest of the staff.

**“At our clinical training, we really learned that offering PrEP services wasn’t a big leap for us. We were already doing a lot of the counseling on HIV prevention anyway, so the PrEP training really introduced the medication, who may be eligible for it, how to prescribe it, and what labs and follow-up are needed. The clinical piece of it was so simple that it really was easy for the trainer to roll out in one training.”**

## Effectively Engaging Clinicians and Staff

Like other clinical services, clinician and staff support for PrEP services is a key factor for service provision, and often a challenge that sites must overcome to offer PrEP services successfully. Several of the featured sites described clinicians and staff who were initially hesitant about offering an additional service in an already jam-packed appointment. To overcome this, sites offered trainings led by clinicians who shared first-hand experiences about the importance of offering PrEP service, and how simple it is to offer the service. Additionally, a few sites began their PrEP programs by training a handful of their providers, and leveraging those providers as champions to encourage other providers in the clinic to begin educating on and offering PrEP.

**“Making sure that providers are comfortable with PrEP is so important for offering PrEP. And if they’re not comfortable, figure out what type of training you can offer. Even if every provider doesn’t get trained on PrEP, at least start with a few providers who are trained to offer PrEP, and then other providers know who they can refer clients to internally.”**

Some clinicians and staff were initially uncomfortable approaching clients about PrEP, or asking sexual history questions to determine eligibility for PrEP. To overcome this, sites encouraged clinicians to have conversations with every one of their clients about PrEP for HIV prevention. Sites also created tools and reminder systems to encourage clinicians to start the conversation, including pocket cards with counseling tips and PrEP eligibility criteria, as well as reminders in the electronic health record system to prompt providers to talk about PrEP with all their clients or offer PrEP to clients who may be potential candidates.

**“We made sure that our support staff, including medical assistants, the call center, receptionists—really anyone with patient interaction—also received training on our PrEP program. That was a key lesson that we learned. Make sure that your whole team understands the PrEP services offered at your site, or at least understands how to refer a patient.”**

## Partnerships for PrEP Access in Family Planning Settings

Partnerships with outside organizations present valuable opportunities for collaboration when offering PrEP services. Community partners may offer PrEP services or serve as referral partners, help link high-risk clients to services at the Title X site, provide training to Title X providers, or offer financial resources to support the clinic's PrEP activities.

### Partnering to Increase Awareness About PrEP

Title X sites worked with community partners formally and informally to educate community members about PrEP and tell potential clients about the family planning site's services. Family planning clinicians and staff described setting up tables at local health fairs and other community events to raise awareness about PrEP. Clinicians also partnered with other local health centers offering PrEP services to discuss PrEP cases and troubleshoot unusual situations. A few sites also worked with partners to offer complementary services for clients starting PrEP, such as counseling and other social services.

### Partnering for Professional PrEP Training

Many of the featured Title X sites partnered with local university medical centers, state health departments, and other local PrEP providers for professional PrEP training for the sites' clinicians and staff. Local health care providers offering PrEP often provided on-site training at the family planning sites, or conducted presentations for medical staff at staff meetings. There are also free training resources and capacity building assistance for clinics and providers offering PrEP, such as the AIDS Education and Training Centers (AETC) and the Capacity Building Assistance (CBA) Provider Network.

**“Working with partners that you know to tackle the problem together has been successful for our site. For other sites considering offering PrEP services, consider each of your organizations' strengths, and how you can work together to help the patients. For us, it wasn't so much about going out to find new partners—we already had partners. We just brought a new problem to existing partnerships to figure out how we could work on this together.”**

## Financing PrEP Services in Family Planning Settings

Family planning sites offering PrEP services often consider the availability of resources to assess and manage service costs for the site and clients, especially for clients who are uninsured or underinsured. Financial counseling and other client resources for accessing low- or no-cost PrEP medication may help minimize barriers to care and increase patient adherence to the medication.

### Payment Methods to Access PrEP Services

Clients at the Title X sites utilized a range of payment methods to access PrEP services, including commercial insurance, Medicaid, sliding fee scales, prescription assistance programs, or a combination of these options. For example, the Gilead Advancing Access Program assists clients without insurance or prescription drug coverage to offset PrEP medication costs. For uninsured individuals, the Gilead Medication Assistance Program provides free medication for those who qualify based on financial need.

**“Most of our PrEP clients have commercial insurance or Medicaid, and we have a sliding fee schedule for uninsured individuals. We also have a patient navigator that helps uninsured clients enroll in the prescription assistance programs to get the medication. We never turn anyone away because of their inability to pay for their visit.”**

State and local prescription assistance programs can help reduce the cost of PrEP for clients. One feature site was located in a state with a PrEP prescription assistance program, and shared how the program has reduced out-of-pocket costs for their clients.

**“For the vast majority of our patients, they either have Medicaid or private insurance that they can pair with the Gilead programs to pay for outstanding costs. And we’re able to enroll people through the state assistance program, so if someone doesn’t have insurance or is underinsured, we can help them that way too.”**

### Helping Clients Navigate Their Options

Helping clients navigate their financing and payment options for PrEP services was key for each of the five featured sites’ PrEP programs. Identifying clinic staff to act as case managers or patient navigators was especially useful for linking uninsured and underinsured clients to resources for accessing PrEP. A few of the sites also partnered with local pharmacies to help clients navigate their payment options.

**“The health educator assists with enrollment in Gilead prescription assistance programs. We also encountered patients who did start PrEP but wouldn’t be retained in care, and our clinicians weren’t sure why. Maybe their circumstances changed, or they got to the pharmacy and it was too expensive and they never even filled the prescription. So we hired a PrEP navigator who provides follow-up support and adherence counseling for all of our patients who have been prescribed PrEP.”**



**Several states offer prescription assistance programs to reduce the cost of PrEP for clients, such as the:**

- California PrEP Assistance Program
- Washington State PrEP Assistance Program
- Ohio Prevention Assistance Program Interventions
- New York PrEP Assistance Program
- Illinois PrEP Assistance Program

**For additional resources, visit the [Decision-Making Guide for the Provision of PrEP Services in Title X-Funded Sites.](#)**