PrEP (In)equity: Documenting, measuring, and flipping the script towards justice

Leisha-Mckinley Beach
Michael Chancley
Dr. Patrick Sullivan
HIV prevention research - a new forum for advocacy on the latest

avac.org/choice-agenda
People are not the drivers of transmission. Rather, it is their unmet needs
Equity and Justice
What ideas do you have to address PrEP inequities?
Focus on communities of color.

English/Spanish bilingual efforts.

Address sexual empowerment among black/brown cisgender women.

Center pleasure, stigma reduction in HIV prevention.

Prioritize allocation of resources.

Work on dismantling racist/inequitable systems/institutions.

Increase providers and clinics.

Fully covered/Free and OTC.

Non-traditional wrap around strategies.

De-medicalize as much as possible, street-based PrEP.

We need a national PrEP program, no more fake donations from big pharma or limited access programs.
PrEP Pass

MEMBER ID: 0123 4567 8901
RX BIN: 71612
RX GROUP: EHENOW
RX PCN: 1230

- Insured? Tell President Biden #ProtectPrEP coverage!
- Uninsured? Tell CDC #IWantMyPrEPPass and that coverage for labs and medication is essential!

EXP: 12-31-2030
PrEP In Black America

FRIDAY, MAY 19, 2023
10AM CT-4PM CT

Join Black HIV prevention advocates from across the U.S. as we develop and build on existing strategies to increase PrEP access and awareness in the Black community at the second interactive PrEP In Black America Summit.

Ashe Power House Theatre
1731 Baronne Street
New Orleans, LA 70113

For In Person Attendance, Register At:
prep4all.org/prepinnblackamerica
To Attend Virtually, Register via Zoom At: bit.ly/plbavirtual

In Partnership With:

10 days from now!
Let’s get started

PrEP (In)equity: Documenting, measuring, and flipping the script towards justice

Leisha-McKinley Beach
Michael Chancley
Dr. Patrick Sullivan
Equity-informed PrEP Programs: Methods, Metrics, and Public Health Consequences

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Conflict of Interest Disclosure

• Dr. Sullivan reports research grants and consulting fees from Gilead Sciences and Merck, and grant funding from Viiv
Background

• PrEP was approved for HIV prevention in the US in 2012
• Black and Hispanic people have higher rates of new HIV diagnoses than White non-Hispanic people in the US
• People in the US South have higher rates of new HIV diagnoses than people in other US regions
• Health equity dictates that access and use of prevention interventions should be proportional to the impact of the health concern in the population
How *do* we measure our success and opportunities in PrEP programs?

How *should* we measure our success and opportunities in PrEP programs?
Percentage of people with indications for PrEP classified as having been prescribed PrEP nationwide.

PrEP coverage is one of the six EHE indicators. PrEP coverage is the estimated percentage of individuals with indications for PrEP classified as having been prescribed PrEP.
Health Equality versus Health Equity
Equity indicator metrics

- PrEP-to-Need Ratio (PnR): Number of PrEP Users / Number of new HIV diagnoses
- Intuition: More PrEP use needed in groups that have more HIV diagnoses

Fig. 3. The prevalence of PrEP users and the PrEP-to-need ratio by state, Q4 2017.
PrEP Prevalence was higher in areas with PrEP-DAP alone, Medicaid alone, or both.

PnR (AKA more equitable PrEP use) was higher in areas with both PrEP DAP and Medicaid expansion.

The PrEP-to-Need Ratio (PnR) is the number of PrEP users divided by the number of new diagnoses in a given year. PnR serves as a measurement of how PrEP use compares to the need for PrEP in a population.
Trend in Black/White and Hispanic/White PrEP Equity Ratio, United States, 2012-2021

1.0 = Equitable PrEP Use by Race and Ethnicity

*Values below 1.0 indicate inequitable PrEP use.
PrEP-to-Need Ratio by Sex, United States, 2012-2021
Trend in Female/Male PrEP Equity Ratio, United States, 2012-2021
What does the PrEP Inequity Ratio tell us about prevention?
Projecting the impact of equity-based preexposure prophylaxis implementation on racial disparities in HIV incidence among MSM

How can these metrics make a difference in public health programs?

• PrEP equity metrics should be a primary measure of the success of PrEP programs
• Programming to equity metrics will drive programs to focus resources in proportion to need
• Local calculation and dissemination of PnR metrics – national equity will only come about from a sum of local success in equity
How to be Guided by Equity

• Prevention programs should be guided by PrEP equity (use relative to epidemic impact), not PrEP equality (equal use in groups, regardless of HIV diagnosis proportion).

• By this measure, US prevention programs in all regions demonstrated decreasing PrEP equity over time (e.g., larger gaps in PnR by race/ethnicity).

• The US South lagged all regions in equitable PrEP use, with the lowest PnR overall compared to other US regions.

• Women lag in PnR compared to men in the US and all regions; inequities are smaller in magnitude by sex than by race

• Better programs are needed to provide PrEP to communities and people at greatest risk for HIV infection/who will benefit from it most

• Removing barriers to access – out of pocket costs, travel distance to providers, and stigmas association with seeking or being on PrEP – must be high priorities for research, policy and programs
With Gratitude and Respect

- Aaron Siegler, PhD
- Dawn Smith, MD, MPH
- Travis Sanchez, DVM, MPH
- Jeremy Grey, PhD
- Sam Jenness, PhD
- Palmer Hipp, MPH
- Marta Juhasz, MPH
- Pema McGuinness, MPH
- Shamaya Whitby, MPH
- Stephanie DuBose, MPH
- Farah Mouhanna, PhD
PrEP (in) Equity

Leisha McKinley-Beach
CEO Black Public Health Academy

To Learn More, Visit: prep4all.org/prepInblackamerica
Guiding Documents to Address PrEP (in)Equities in Black communities

https://Blackaids.org
https://www.blacksouthrising.org
https://www.prep4all.org/prepinblackamerica
1 Dismantle anti-Black practices, systems and institutions that endanger the health and wellbeing of Black people and undermine an effective, equitable response to HIV in Black America.

2 Provide resources and services that address the fullness, richness, potential and expertise of Black people and mitigate social and structural factors that worsen health outcomes in Black communities.

3 Ensure universal access to and robust utilization of high-quality, comprehensive, affordable and culturally- and gender-affirming healthcare to enable Black people to live healthy lives in our full dignity.

4 Build the capacity and motivation of Black communities to be the change agents for ending HIV.
We insist on Black leadership and representation.
Five Key Components For PrEP Scale Up In Black Communities

- National PrEP Program
- Expansion of Providers
- Black Marketing Campaigns
- Research-With Black Researchers
- Sex positivity
National PrEP Program
Thank You!
Leisha@blackpublichealthacademy.com

"Black Health is Black Wealth"
Addressing Racial Disparities in PrEP Uptake with a National PrEP Program

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Communications and Mobilization Manager, PrEP4All
Organizer, PrEP In Black America
Disclosure of Conflicts of Interests

Michael Chancley, MSW has not received any funding, honorariums, or in kind donations from pharmaceutical companies in the last 24 months.
Background

- Black Gay Male from the Deep South
- PrEP user since 2015
- Former PrEP Navigator and Linkage-to-Care Specialist in New Orleans, LA and Decatur, GA, linking over 1000 clients to HIV prevention and care services
- Writer for The Body and The Body Pro with focus on PrEP, PEP, HIV Criminalization, HIV Stigma, and Workforce Equity and Diversity.
- Organizer for PrEP In Black America and Advocate for Federally Funded National PrEP Program
PrEP Use By The Numbers

Black people represent 14% of PrEP users, but 42% of new HIV diagnoses nationally.

Of Black Americans who can benefit from PrEP, 91% have not received a prescription.
PrEP Use By The Numbers

In 2020 Black people represented 52% of new HIV diagnoses in the South, yet only accounted for 21% of PrEP users in the region in 2021.
PrEP Use By The Numbers

While the rate of PrEP use has increased consistently across all races/ethnicities, equity in PrEP use by race/ethnicity has decreased over time.

PrEP Use Rate by Race/Ethnicity Over Time, 2012-2021

PrEP-to-Need Ratio by Race/Ethnicity Over Time, 2012-2021

The PrEP-to-Need Ratio (PrNR) is the number of PrEP users divided by the number of new diagnoses in a given year. PrNR serves as a measurement of how PrEP use compares to the need for PrEP in a population.

SOURCE: AIDSVu

AIDSVu.ORG
Barriers to PrEP Uptake

- HIV stigma and lack of sex positive approaches representing the diversity of the Black community
- Mistrust of historically problematic medical systems, as well as medical biases
- Gender inequity in HIV prevention research, including in lack of studies on modalities for ciswomen and individuals assigned female at birth
- Lack of education on interactions with hormones for transgender individuals
- Lack of medical coverage, including in non-Medicaid expansion states
PrEP In Black America
PrEP In Black America

- Held in Atlanta, GA on Sept. 13, 2022
- Engaged Black community stakeholders on the gaps in PrEP access
- Strategize what a National PrEP Program needs to address racial disparities
- Mobilize Black advocates to create a community demand for a National PrEP Program
- Release "For Us, By Us: PrEP In Black America: A Master Plan for HIV Prevention" at prep4all.org/prepinblackamerica
- Next summit in New Orleans, LA on May 19, 2023
Energize

• Energize the Black public health workforce to lead the HIV prevention response.

Educate

• Educate Black masses on the science and effectiveness of PrEP.

Support

• Support a Federally-Funded National PrEP Program.
Key Components of National PrEP Program

PrEP Pass
Build simplified federal reimbursement mechanisms that leverage existing pharmacy supply and payment mechanisms and laboratory networks.

The system needs to cover labs, medications, and provider visits related to PrEP.

Provider Network Expansion
An expanded nonclinical network can leverage telePrEP in a way that allows immediate virtual access to a prescribing provider as well as act as a traditional referral system for patients who prefer in person clinical visits.

Demand Creation
Contract with an experienced PR/marketing firm that specializes in deep partnership with communities most in need of PrEP

National and locally-tailored campaigns
Contact:

- Email: michael@prep4all.org
- LinkedIn: Michael Chancley, MSW

Register for PrEP In Black America
New Orleans, LA
May 19, 2023
10 am-4 pm

- Virtual Attendance: bit.ly/pibavirtual
- In Person: prep4all.org/prepinblackamerica