

PREP(ARING) THE CONVERSATION

Key messaging for talking to clients about pre-exposure prophylaxis



Introduction:

Pre-exposure prophylaxis (PrEP) is an HIV prevention method that, research suggests, is 99% effective at preventing HIV transmission through sexual contact, and 74% from injection drug use when taken as indicated.¹ PrEP is available in two forms: it can be taken as an oral medication or through a bimonthly injection by a provider. It holds great potential in our goal of reaching zero new HIV infections, but knowledge and structural barriers continue to limit uptake. Objective, empathetic, and supportive navigation from a trusted messenger can help make PrEP a prevention tool for all those that can benefit. This resource is designed to support staff in both clinical and community-based programs to engage clients in conversations about PrEP, assess HIV risk, and facilitate access to the medication. The suggested phrasing throughout this document can be used as a guide to educate and counsel clients on strategies to incorporate PrEP into their HIV prevention practices.

Individual, cultural, and social differences influence comfort levels with discussing personal behaviors related to sex and drug use. **Active listening and supportive language are essential for building rapport with clients.** A conversational approach with eye contact and neutral and engaged body language will foster an open and safe environment, prioritizing client needs.



Framing the Conversation:

Explain the intent, ask permission, and normalize the content of the conversation.

- “We understand these topics are personal and sensitive. We ask everyone these questions; they help us get a better understanding of your HIV risk, and help connect you to resources and services to prevent HIV—including PrEP. Are you comfortable having that conversation today?”
- “If you have any questions or worries about sex or drug use, I am open to any topic you want to bring up.”

Practice a trauma-informed approach and be patient, flexible, and non-judgmental.

- “If at any point during our conversation today you’d like me to take a break or would like to stop altogether, please let me know.”
- “We don’t have to accomplish every goal today, I am happy to move at your pace.”
- “If you decide that PrEP isn’t the right fit for you right now, we can review other HIV prevention options that are available.”



Keep it Person Centered: Trauma-informed care and motivational interviewing are foundational elements of client-centered PrEP navigation. Practicing these approaches fosters safety, prioritizes client choice, and can improve positive health outcomes.

Trauma-informed Care:

“A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization.”

— Substance Abuse and Mental Health Services Administration²

The six core principles of Trauma-informed Care include:



Motivational interviewing is a “collaborative, person-centered counseling approach that aims to strengthen someone’s inner motivation for change by exploring and actively considering possibilities for changing one’s behavior.”

—Justice Resource Institute

OARS: The 4 key practices of effective motivational interviewing³



Facilitating the Conversation:

Ask open-ended questions: Beginning the session with open-ended questions allows the client to lead the conversation, and for the staff to identify topics to explore in greater depth. Make note of knowledge gaps and belief statements to address with follow up questions. Remain neutral and avoid reactions, both verbal and nonverbal, that can be interpreted as judgmental.

- “What brought you to getting tested today?”
- “Can you talk to me about the types of sex you are having?”
- “If you do, can you talk with me about how you use drugs?”
- “What do you think your risk is like for getting HIV?”
- “Have you ever tested positive for HIV or other sexually transmitted infections (STIs)?”
- “What questions or concerns do you have about testing?”

Take cues: Pay close attention to the language the client uses and use their language in your conversations with them. Ask follow-up questions to learn more about their concerns. This will demonstrate that you are listening carefully, and will help you develop a trusting relationship with the client.

- “You mentioned feeling concerned about your lower condom use when drinking, is that something you want to discuss further?”
- “It sounds like you’re concerned about how your partner’s sexual risks might impact you. Would you tell me more about that?”

Ask concrete and specific questions: Direct questions can help identify specific risk behaviors to address through education and motivational interviewing, allowing the client to explore their knowledge and beliefs as it relates to their behaviors.

- “When you have sex, what methods to prevent HIV and other STIs have you used in the past?”
- “Do your prevention methods vary depending:
 - ... on the partner?”
 - ... if you are using drugs?”
- “Do you ever share supplies (needles, cookers, cottons, pipes) when preparing or using drugs? When was the last time? Walk me through it.”

Assess awareness and beliefs about PrEP: Ask questions that gauge knowledge of PrEP and listen for beliefs the client may have about it. Be prepared to address preconceived notions about PrEP as it relates to behaviors or identity, normalizing it as a tool appropriate for anyone with HIV risk.

- “Can you tell me what you know about PrEP?”
- “How do you see PrEP fitting into your day to day life?”
- “What questions or concerns do you have about PrEP?”

Educate through direct, objective statements: Clear, concise, and unambiguous messaging should be used when educating about PrEP. Emphasize key points that address concerns raised by the client during assessment.

Effectiveness:

- “PrEP is a medication for HIV negative individuals taken to prevent HIV acquisition.”
- “Studies have shown that PrEP is 99% effective at preventing HIV through sex and 74% from injection drug use.”

Safety:

- “PrEP is a safe method for preventing HIV.”
- “Side effects are rare, but some people report stomach pain, nausea, and fatigue when they first start the medication.”

How to Take:

- “There are several different options for taking PrEP. You should identify the best method for you with the support of your provider. All methods are endorsed as effective HIV prevention.”
- “With each option, you will need to return to the clinic for routine bloodwork and STI screening.”
 - Daily: “The most common method is a once-daily oral pill.”
 - 2-1-1: “If you know ahead of time when you’re going to be having sex, PrEP can be taken orally 2 pills 24 hours prior to sex and 1 pill each day for the two days following sexual contact.”
 - Injection: “Another option is to receive an injection of PrEP every other month.”

Adherence:

- “Regardless of which option you choose, PrEP works best when you adhere to the set schedule. Communicate with your provider if you are having difficulty taking your medication or attending appointments, as missing doses increases your risk of HIV infection.”

Care Retention:

- “Regardless of which option you choose, you’ll need to see a provider to get tested every two to three months. Because PrEP does not prevent other STIs this is an opportunity to be tested and treated for chlamydia, gonorrhea, and syphilis in the event that you are positive.”

Cost:

- “Here in Massachusetts, PrEP is usually covered by health insurance, with no cost to you.”
- “If you have issues with your health insurance, the Massachusetts PrEP Drug Assistance Program (PrEP DAP) may be able to cover the full cost of your medication.”



Making the Connection:

Linking a client to PrEP will look different depending on the clinical capacity of the site, appointment availability, and client preference. It is important to share all options available in your facility.

Initiate on site: Following the completion of HIV/hepatitis C/STI testing and results delivery, the client will meet with a provider to discuss patient preferences for PrEP format and identify a routine of care. Staff will support appointment scheduling, insurance verification, and PrEP DAP application.

- **Same Day:** If possible in your space, offer the client same day PrEP. This minimizes barriers and increases the likelihood of their PrEP initiation.

Facilitate a supported referral: Many programs are based in community-based organizations without onsite access to clinicians. In these settings, it is most effective to begin the PrEP referral process at the time of initial testing so action steps may be initiated by the time of results delivery. Completing these administrative steps while the client is physically present increases the likelihood of success. Prioritize referral sites that are low-barrier and convenient to the client and establish a follow up contact plan to ensure initiation by providing a warm referral (calling the provider with the clients to make the appointment).

- **Online PrEP Providers:** There are many options for online PrEP providers, offering no cost and no contact appointments and medication. If this is preferable to the client, and your organization has a process in place for working with online PrEP providers, provide support to complete enrollment.



References:

- ¹ CDC - Let's Stop HIV Together. <https://www.cdc.gov/stophivtogether/hiv-prevention/prep.html>. February 18, 2025.
- ² SAMHSA - Trauma-Informed Approaches and Programs. <https://www.samhsa.gov/mental-health/trauma-violence/trauma-informed-approaches-programs>. December 3, 2024.
- ³ Enhancing Motivation for Change in Substance Use Disorder Treatment: Updated 2019. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2019. (Treatment Improvement Protocol (TIP) Series, No. 35.) Chapter 3—Motivational Interviewing as a Counseling Style. <https://www.ncbi.nlm.nih.gov/books/NBK571068>



Useful Resources:

- Infectious Disease Technical Assistance - PrEP (JSI): <https://idta.jsi.com/prep/>
- PrEP, PEP & Treatment as Prevention (TASP): HIV Biomedical Interventions (MDPH - ELMS Course): <https://tinyurl.com/BIDLSPrePModule>
- Massachusetts Health Promotion Clearinghouse provides patient information resources including posters, fact sheets, and information cards: <https://massclearinghouse.ehs.state.ma.us/category/PrEP.html>
- Community Resource Initiative - Massachusetts Drug Assistance Program: <https://crihealth.org/prevention/prepdap/>
- Care That Fits You (MDPH/BIDLS): <https://carethatfitsyou.org/>
- What is Trauma Informed Care (Center for Health Care Strategies): <https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care/>
- Six Guiding Principles of Trauma Informed Care (SAMHSA): <https://www.samhsa.gov/resource/dbhis/infographic-6-guiding-principles-trauma-informed-approach>
- PrEP Action Kit (National LGBTQIA+ Health Education Center/ Fenway Institute): <https://www.lgbtqihealtheducation.org/publication/prep-action-kit-2024/>
- PrEP Navigator Manual (HealthHIV): <https://pleaseprepme.org/prepnavigatormanual/>
- Motivational Interviewing (Jack, Joseph and Morton Mandel School of Applied Social Sciences Center for Evidence-Based Practices, Case Western Reserve University): <https://case.edu/socialwork/center-forebp/practices/motivational-interviewing>

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