# **Youth Perspectives**

## on Next Gen PrEP

& the Implications for Healthcare Providers



## **Healthcare Experiences & PrEP**

Researchers interviewed young men who have sex with men (MSM) aged 15 to 24 about their experiences, attitudes, and preferences regarding HIV prevention products. In addition, they also explored how interactions with healthcare providers and systems might influence the acceptability of next generation PrEP products. '

Participants identified four key barriers to accessing daily oral PrEP.



Talking to **Providers** 



**competence** to discuss sexual practices & poor knowledge about **HIV** prevention options



Youth may be hesitant to explore new PrEP options without appropriate education and guidance from providers



"The less I know about the method. the more insecure I feel about it, so the more I would need to trust the provider to make a decision"



**practices** or access to HIV prevention services by insurances and providers

Disclosure of sexual

Youth may prefer next generation PrEP options that are **discrete** and **do** not bring unwanted attention

"If injectable PrEP does leave a bump or sore mark, like a flu shot, then if your parents find out they might be a little bit suspicious"



Gaps in **Access to Care** 

coverage and healthcare when "aging out" of pediatric care, starting college, or moving cities

Gaps in insurance

Youth may prefer PrEP options that are long-acting and require less frequent medical visits

"Anytime you move, you need to get new healthcare providers. So something long-term [...] where I wouldn't need to worry about HIV prevention for many months would be really beneficial."



Access to **Health Services** 

YMSM with and without health insurance often depend on cost assistance programs and convenient health clinics to access daily oral PrEP

Similar cost assistance programs and a wide networks of **clinics** providing multiple PrEP options will be key to equitable access

"For those who don't have stable transportation, they might have to rely on a parent to get to the doctor's, and then it becomes more of a process."

## Making Sense of PrEP Descriptions

The same researchers also asked YMSM aged 15 to 24 to provide feedback on randomly assigned descriptions of next-generation PrEP products. They asked participants to evaluate descriptions' clarity and cultural appropriateness and provide suggestions for improvements.

Participants feedback largely concerned 4 main themes.

# Scientific Terminology Individuals preferred casual References to **Established Products**

#### Helpful Imagery Using images and iconography to

make products easier to visualize, especially for those that might not be part of regular medical experiences

### over technical language for reducing confusion, fear, or apprehension.

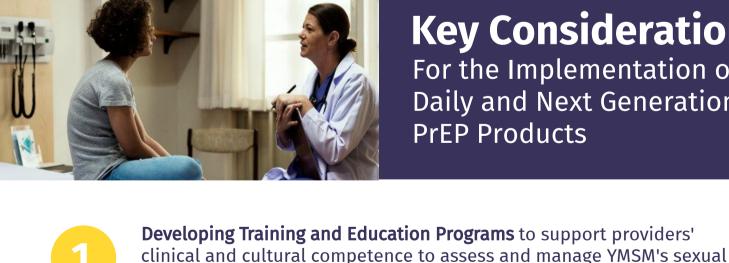
familiar modes of delivery would facilitate trust, such as references to flu vaccine injections or birth control implants

Youth felt that comparisons to more

### Unnecessary level of detail

**Clarity & Redundancy** 

might cause confusion or anxiety. Details should be used methodically, such as when introducing new products like rectal douches.



# **Key Considerations** For the Implementation of

Daily and Next Generation **PrEP Products** 



health and HIV prevention needs. Partnering with local "PrEP Champions" to facilitate trainings and



PrEP among providers. Assessing YMSM's Support Networks and provide individualized

guidance and counseling regarding HIV prevention options, especially

education in order to promote the wider adoption of next generation



with respect to the concealed use of PrEP products. Offering Patient Navigation and Case Management Services to help

YMSM navigate insurance and cost-related issues for equitable,



affordable, and confidential access to next generation PrEP products. **Ensuring a Wide Network of Health Services** for health appointments and administration of next generation PrEP products, particularly for



modalities that require more frequently medical visits (e.g., injectable

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