PrEP Access as HIV Prevention for LGBTQ+ College Students: An Exploration of Current Barriers to Access

Brittany L. Feeling, MPH Equitas Health Institute

Stella I. Sheke, MPH Equitas Health Institute

ABSTRACT

Background: Although tremendous strides have been made in Human Immunodeficiency Virus (HIV) prevention, detection, and treatment, HIV remains a public health issue in the United States. Sexual and gender diverse individuals and the 18-24 age group are considered vulnerable populations at risk for contracting the virus. Pre-exposure prophylaxis (PrEP) is a medication that has proven effective in reducing the risk of HIV transmission.

Aim: This article aims to justify the necessity of PrEP medication on college campuses, especially for gender and sexual diverse students.

Methods: This article provides information on the state of PrEP education, availability, and access on college campuses in the United States. This article also addresses barriers that college students face with accessing PrEP medication through college health services.

Results: Limited research has found that most colleges in the United States lack PrEP availability for college students. Other factors, including insurance, privacy concerns, and stigma, may deter students from seeking and taking PrEP medication.

Conclusions: This article supports widespread PrEP availability and access on college campuses and acknowledges the need to address barriers that keep students from utilizing PrEP.

Submitted 21 December 2022; accepted 14 February 2023 *Keywords:* PrEP, HIV prevention, college students, LGBTQ+, student health

INTRODUCTION

In the United States, Human Immunodeficiency Virus (HIV) remains a persistent public health problem. In 2020 alone, 30,635 people received an HIV diagnosis (Centers for Disease Control and Prevention [CDC], 2022a). While HIV rates in the general population have declined in recent years, traditional-aged college students (ages 18-23 years) remain at risk for HIV (Hendricks et al., 2018). Unfortunately, the HIV prevalence among college students is unknown. However, according to the CDC, 21% of new HIV infections were in 13–24-year-olds (CDC, 2022b). Although CDC statistics do not provide specific data for college students, most students likely fall within this age range, therefore putting them at risk of contracting HIV. In addition, inexperience, unsafe sexual practices, and inadequate sexual education make college students HIV-prone (Rawlins et al., 2020).



Despite the prevalence of HIV among this group, little is known about their understanding of HIV pre-exposure prophylaxis (PrEP). PrEP, under the trade names Truvada or Descovy, is a small, daily administered pill that prevents HIV acquisition by protecting the cells that the virus attacks (HIV.gov, 2022). Truvada is recommended for all individuals considered at risk for HIV, while Descovy is only recommended for people assigned male at birth (HIV.gov, 2022). PrEP reduces HIV risk by 99% (HIV.gov, 2022). However, PrEP use among young adults is known to be suboptimal, and disparities in PrEP prescription are more pronounced for young racial and gender minorities (Hojilla et al., 2021). Access to PrEP on college campuses may be one way to help sexual and gender diverse young adults prevent HIV transmission.

PrEP Knowledge and Education among College Students

Although the use of PrEP could have a considerable impact on the prevalence of new HIV infections in young adults, most research on PrEP knowledge, education, and awareness has been undertaken among men who have sex with men (MSM) and people living with HIV (Stutts et al., 2020). However, very few studies have examined college student PrEP awareness or understanding. This information gap is especially alarming, given the risky sexual practices reported among college students (Stutts et al., 2022). Despite comprising 21% of all new HIV infections, PrEP is under-prescribed among young adults. New CDC data indicates that only 16% of PrEP users are between 16 and 24 years of age (CDC, 2021). Similarly, whereas Black and Hispanic individuals make up the bulk of those for whom PrEP is suggested, they have the lowest PrEP use of any racial or ethnic group, 9% and 16%, respectively (CDC, 2021). PrEP is recommended for Black and Hispanic individuals due to their elevated risk of contracting HIV (CDC, 2021).

State of PrEP on College Campuses

Educational institutions are a good place to reach young adults making them ideal locations to disseminate PrEP widely. However, data on PrEP uptake and efficacy in educational institutions remain largely insufficient (Rawlins et al., 2020). Even though the data on PrEP is scant, a 2017 American College Health Association (ACHA) study reported that less than 50% of the colleges surveyed offered PrEP (ACHA, 2019). Because PrEP is relatively new and untried in many educational institutions, there are concerns that PrEP as a prevention method may undermine educational efforts and advocacy for condoms and other safer sexual practices (Calabrese et al., 2014). As a result, PrEP is not adequately marketed on college campuses, especially to underserved populations (Chandler et al., 2020; Calabrese et al., 2014). For instance, a study by Downer & Bailey (2018) reported that only 25% of students attending historically black colleges or universities had heard of PrEP.

Stigma, Homophobia and Racism Regarding HIV and PrEP

The factors that threaten PrEP availability and utilization is incredibly complex. Stigma is a major intersectional obstacle to PrEP uptake and adherence, especially among sexual and gender diverse young adults. PrEP users may suffer stigma due to preconceived notions that they are promiscuous, irresponsible, and immoral (Eaton et al., 2017). Similarly, PrEP and homophobia might overlap. Individuals may refuse PrEP for fear of being associated with a

specific sexual orientation (Kerr et al., 2022). It is commonly acknowledged among gay men that HIV infection results from risky sexual behaviors, making it their obligation to take measures to lessen their vulnerability to the virus (Regent, 2020). Thus, it may be left to same-gender-loving men, particularly black gay men, to assess their risk and get PrEP despite societal barriers (Quinn et al., 2023). Because of the stigmatization and stereotyping of LGBTQ+ sexual practices, PrEP usage has been marred by hesitancy. Higher levels of stigma may diminish relationships with LGBTQ+ people and restrict resources, access, and willingness to use PrEP (Quinn et al., 2023). Consequently, LGBTQ+ individuals who anticipate higher discrimination based on their skin color are less likely to utilize PrEP (Quinn et al., 2022).

Insurance and Privacy Concerns with PrEP

PrEP is covered by most health insurance plans. Colleges may require their students to be on health insurance which can be secured through the school or elsewhere. For uninsured college students, or students whose insurance does not cover PrEP, there are assistance programs that can help patients cover the cost of the medication (ACHA, 2019). The Affordable Care Act (ACA) was instrumental in ensuring young adults ages 18-26 receive access to insurance by allowing individuals in this age group to remain on their parents' health insurance until the age of 26 (Mishory et al, 2020). However, for college students on their parents' health insurance, concerns about privacy can be a barrier to receiving PrEP medication even when the medication is covered by the insurance.

While there is no one universally accepted definition of privacy, health or medical privacy addresses who has access to personal health or medical information and under what conditions (Institute of Medicine Committee of Health Research and the Privacy of Health Information, 2009). The Institute of Medicine Committee on Health Research and the Privacy of Health Information studied the meaning of medical and health privacy through the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule. The HIPAA Privacy Rule establishes national standards to protect medical records and identifiable health information (also called protected health information). The Rule gives rights to patients over their protected health information, which includes protecting the privacy of that information (Office for Civil Rights, 2022).

Privacy issues along with PrEP stigma or fear of disclosure of sexual orientation can keep students from accessing PrEP (Marks et al, 2017). A study conducted by Arnold et al. (2017) found that concerns parents could see fees related to PrEP-related medical services on the insurance statements may discourage students from taking PrEP. Additionally, a position statement by the ACHA endorsing PrEP availability in student health services listed confidentiality as a concern for college students seeking PrEP (ACHA, 2019).

Significance of PrEP Access for LGBTQ+ College Students

PrEP should be available and accessible for college students within student health and wellness centers. Along with providing the medication, additional barriers to taking PrEP, such as privacy concerns, stigma, and lack of cultural competency, must be addressed in order to keep students in care and increase PrEP retention. The ACHA states that students need education and assistance navigating insurance statements and Explanations of Benefits (EOBs) if they do not want parents to see a statement related to their PrEP care (ACHA, 2019). A lack of cultural competence can deter students, particularly sexual and gender minorities, from seeking PrEP even when it is accessible. Therefore,

cultural competence training for providers that work with LGBTQ+ and other minoritized students seeking PrEP should be provided and mandatory (Calabrese et al., 2019). In addition, PrEP awareness, attitude, and prescription patterns need to be assessed on college campuses. Education should include aggressive marketing and outreach to student groups such as Black, Indigenous, and People of Color (BIPOC) organizations and women's groups (Stutts et al., 2020).

Increasing access to PrEP on college campuses is a way to prevent HIV transmission among this vulnerable age group. Improved PrEP access could positively effect the sexual health of sexual and gender diverse college students who are significantly at risk. Wide availability and access to PrEP on college campuses is a decision that aligns with the National HIV/AIDS Strategy as it would help reduce new HIV infections (White Office of National AIDS Policy, 2022). With proper education on PrEP medication, insurance, cultural competency, and stigma reduction in PrEP care, colleges will effectively care for students, promote health and contribute to the end of HIV.

REFERENCES

- American College Health Association. (2019). HIV pre-exposure prophylaxis. https://www.acha.org/documents/resources/guidelines/ACHA_HIV_PrEP_Guidelines_Jan2019.pdf
- Arnold, T., Brinkley-Rubinstein, L., Chan, P. A., Perez-Brumer, A., Bologna, E. S., Beauchamps, L., Johnson, K., Mena, L., & Nunn, A. (2017). Social, structural, behavioral and clinical factors influencing retention in preexposure prophylaxis (PrEP) care in Mississippi. PLOS ONE, 12(2). https://doi.org/10.1371/journal.pone.0172354
- Calabrese, S. K., Earnshaw, V. A., Underhill, K., Hansen, N. B., & Dovidio, J. F. (2014). The impact of patient race on clinical decisions related to prescribing HIV pre-exposure prophylaxis (PrEP): assumptions about sexual risk compensation and implications for access. AIDS and behavior, 18(2), 226-240. https://doi.org/10.1007/s10461-013-0675-x
- Calabrese, S.K., Tekeste, M., Mayer, K.H., Magnus, M., Krakower, D.S., Kershaw, T.S., Eldahan, A.I., Gaston Hawkins, L.A., Underhill, K., Hansen, N.B., Betancourt, J.R. & Dovidio, J.F. (2019). Considering stigma in the provision of HIV pre-exposure prophylaxis: Reflections from current prescribers. AIDS Patient Care STDS. 33(2), 79-88. https://doi.org/10.1089/apc.2018.0166
- Centers for Disease Control and Prevention. (2021). PrEP for HIV prevention in the U.S. https://www.cdc.gov/nchhstp/newsroom/fact-sheets/hiv/PrEP-for-hiv-prevention-in-the-US-factsheet.html
- Centers for Disease Control and Prevention. (2022a). New HIV diagnoses and people with diagnosed HIV in the U.S. and dependent areas by area of residence, 2020. https://www.cdc.gov/hiv/basics/statistics.html
- Centers for Disease Control and Prevention. (2022b). HIV information and youth. https://www.cdc.gov/healthyyouth/youth_hiv/hiv-information-and-youth.htm
- Chandler, R., Hull, S., Ross, H., Guillaume, D., Paul, S., Dera, N., & Hernandez, N. (2020). The pre-exposure prophylaxis (PrEP) consciousness of black college women and the perceived hesitancy of public health institutions to curtail HIV in black women. BMC Public Health, 20(1), 1-11. https://doi.org/10.1186/s12889-020-09248-6

- Downer, G. A., & Bailey, D. (2018). HIV prevention on HBCU campuses. Annals of Infectious Disease and Epidemiology, 3(1). http://www.remedypublications.com/open-access/hiv-prevention-on-hbcu-campuses-1161.pdf
- Eaton, L. A., Kalichman, S. C., Price, D., Finneran, S., Allen, A., & Maksut, J. (2017). Stigma and conspiracy beliefs related to pre-exposure prophylaxis (PrEP) and interest in using PrEP among black and white men and transgender women who have sex with men. *AIDS and Behavior*, 21(5), 1236-1246. https://doi.org/10.1007/s10461-017-1690-0
- HIV.gov. (2022). Pre-exposure prophylaxis. https://www.hiv.gov/hiv-basics/hiv-prevention/using-hiv-medication-to-reduce-risk/pre-exposure-prophylaxis
- Hendricks, I., Brooks, T., Tague, A., Ray, A. (2018). HIV among today's college students. HIV and AIDs Research Journal, 1(1). https://www.researchgate.net/publication/323737798_HIV_among_Today's_College_Students
- Hojilla, J. C., Hurley, L. B., Marcus, J. L., Silverberg, M. J., Skarbinski, J., Satre, D. D., & Volk, J. E. (2021). Characterization of HIV preexposure prophylaxis use behaviors and HIV incidence among US adults in an integrated health care system. JAMA Network Open, 4(8), e2122692. https://doi.org/10.1001/jamanetworkopen.2021.22692
- Institute of Medicine (US) Committee on Health Research and the Privacy of Health Information: The HIPAA Privacy Rule. (2009). The value and importance of health information privacy. In S. J. Nass, L. A. Levit, & L. O. Gostin (Eds.), Beyond the HIPAA privacy rule: Enhancing privacy, improving health through research. National Academies Press. https://doi.org/10.17226/12458
- Kerr, J., Ayangeakaa, S., Bullock, N. A. A., Burton, K., Combs, R., Harris, L., & Northington, T. (2022). A qualitative exploration of various stigmas impacting HIV pre-exposure prophylaxis (PrEP) uptake among African American young adults. *Family & Community Health*, 45(4), 218-227. https://doi.org/10.1097/FCH.00000000000346
- Marks, S. J., Merchant, R. C., Clark, M. A., Liu, T., Rosenberger, J. G., Bauermeister, J., & Mayer, K. H. (2017). Potential healthcare insurance and provider barriers to pre-exposure prophylaxis utilization among young men who have sex with men. *AIDS Patient Care and STDs*, 31(11), 470–478. https://doi.org/10.1089/apc.2017.0171
- Mishory, J., Chan, O., & Granville, P. (2020). *The ACA's impact on college students*. https://tcf.org/content/report/the-acas-impact-on-college-students/?agreed=1
- Office for Civil Rights. (2022). The HIPAA Privacy Rule. https://www.hhs.gov/hipaa/for-professionals/privacy/index.html
- Quinn, K. G., Dickson-Gomez, J., Craig, A., John, S. A., & Walsh, J. L. (2023). Intersectional discrimination and PrEP use among young Black sexual minority individuals: The importance of Black LGBTQ communities and social support. AIDS and Behavior, *27*(1), 290-302. https://doi.org/10.1007/s10461-022-03763-w
- Rawlins-Pilgrim, S., Wheelock, A., & Taylor, J. (2020). PrEP in student health services—a call to action. *Journal of General Internal Medicine*, 35(12), 3689-3690. https://doi.org/10.1007/s11606-020-05774-6

- Regent, M. (2020). *Does homophobia limit PrEP's availability?* https://blogs.lse.ac.uk/humanrights/2020/04/08/how-cultural-concerns-affect-preps-availability/
- Stutts, L. A., Robinson, P. A., Witt, B., & Terrell, D. F. (2020). Lost in translation: College students' knowledge of HIV and PrEP in relation to their sexual health behaviors. *Journal of American College Health*, 70(2), 561-567. https://doi.org/10.1080/07448481.2020.1757679
- White Office of National AIDS Policy. *National HIV/AIDS Strategy*. https://www.hiv.gov/federal-response/national-hiv-aids-strategy/national-hiv-aids-strategy-2022-2025

Address author correspondence to: Name: Brittany L. Feeling Email: brittanyfeeling@equitashealth.com

Author's Note

We have no conflicts of interests to disclose.