

# Are we PrEPared?

Exploring the impact of HIV Pre-Exposure Prophylaxis on the sexual behaviours of men who have sex with men.

Christie Roberts, Masters in Public Health

16014611@brookes.ac.uk

## CONTEXT

The UK HIV Action Plan outlines a commitment to 0 new HIV transmissions by 2030, with an interim target of 80% reduction by 2025 <sup>(1)</sup>, aligning with the UN Sustainable Development Goals <sup>(2)</sup>.

Gay, bisexual and men who have sex with men (GBMSM) are at higher risk of acquiring HIV compared to heterosexual counterparts <sup>(3)</sup>. Both total HIV incidence and GBMSM incidence have decreased since 2015 (Figure 1) but there were still 3805 new diagnoses in 2022. Sex between men now accounts for under 30% of probable exposures, down from 51% in 2015 <sup>(3)</sup>.

Pre-Exposure Prophylaxis, or PrEP, is 99% effective in preventing HIV transmission via sexual contact <sup>(4)</sup> and is recommended for all GBMSM with sexual risk behaviour indicators <sup>(5)</sup>.

Sexual behaviours include risks and protectors, such as condom use, STI testing, sexualised drug use, and multiple sexual partners. Behaviours deemed 'high risk' for HIV acquisition are well researched, but little research exists considering how GBMSM's sexual behaviours impact their experience of PrEP, and vice versa.

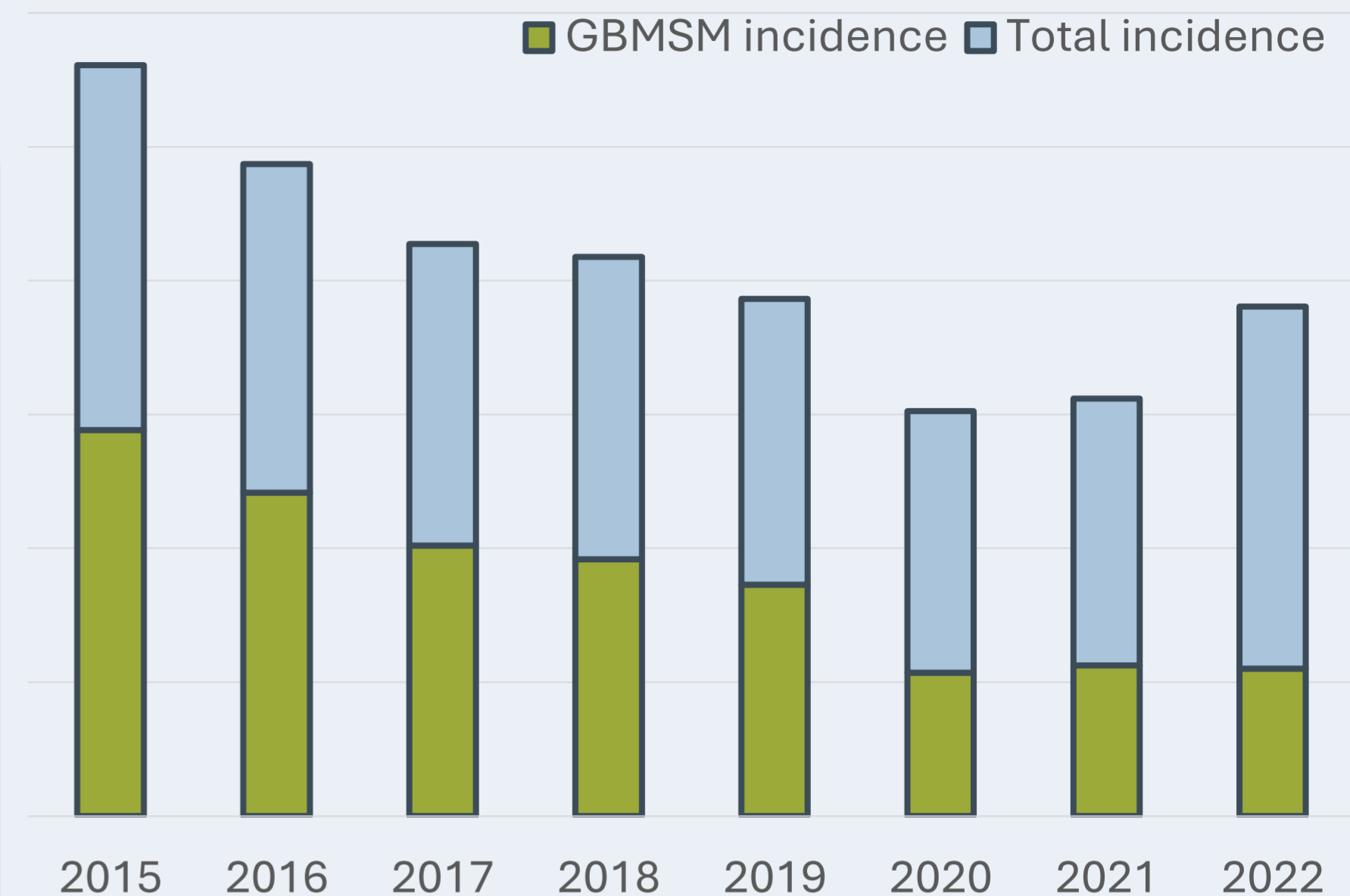


Figure 1- HIV incidence, England 2015-2022 <sup>(6)</sup>

**Sustainable Development Goal 3.3:**  
"By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases" <sup>(2)</sup>

**British HIV Association guidelines:**  
"Recommend PrEP for HIV-negative MSM and trans women who report condomless anal sex in the previous 6 months and on-going condomless anal sex" <sup>(5)</sup>

## AIMS

- To explore the experiences of GBMSM using PrEP
- Consider what impact PrEP has had on sexual risk and protective behaviours and other health outcomes.

## METHODS

A quasi-systematic review was undertaken to identify and collate all relevant primary research. Each study was critically appraised to judge methodological quality. Narrative synthesis was used for inductive data analysis.

Systematic search of CINAHL, PsycINFO, BND and PubMed. Snowball and citation searches.

16 studies for inclusion:  
• 7 qualitative  
• 8 quantitative  
• 1 mixed methods

Conceptual mapping and thematic analysis generated 3 descriptive themes.

## RESULTS

### Risk and protection

PrEP was seen as a positive step of protective self-care.

Typically, risk behaviours did not increase or decrease- condomless sex, chemsex and group sex continued as usual when on PrEP.

STI diagnoses increased due to risk compensation with condoms. STIs were considered inevitable within the GBMSM community, however, STI testing did also increase.

### Sexual satisfaction

Participants reported increased pleasure, intimacy, liberation and disinhibition in their sexual encounters once on PrEP.

Self-care through HIV prevention allowed for greater expression of sexual identities and was associated with reduced internal and external stigma.

Condomless sex was greatly preferential to condom use, and PrEP facilitated this preference.

### Psychosocial impact

Universally, PrEP reduced anxiety, fear and stress around HIV acquisition.

Chemsex often acted as a coping mechanism to deal with shame and guilt from engaging in risk behaviours.

Perceptions of PrEP users varied, from being seen as responsible for self and others, to being promiscuous.

"I think we're finally in a position where gay men can have the sex they want" <sup>(7)</sup>

## RECOMMENDATIONS

Additional research into the mental health impacts of HIV risk, including use of chemsex as a coping mechanism.

Further targeted promotion of PrEP uptake to all MSM with high-risk sexual behaviours, to achieve zero HIV transmission.

Ringfenced funding for sexual health services to ensure timely, equitable access to PrEP and additional services, such as STI screening.

### References:

1. DHSC (2021) *Towards Zero- An action plan towards ending HIV transmission, AIDS and HIV-related deaths in England- 2022 to 2025*. Available at: <https://www.gov.uk/government/publications/towards-zero-in-england-2022-to-2025> (Accessed 25 Mar 2024)
2. United Nations (no date) *The 17 Goals*. Available at: <https://sdgs.un.org/goals> (Accessed 27 Mar 2024)
3. UNAIDS (2023) *Fact Sheet: Global HIV Statistics*. Available at: <https://www.unaids.org/factsheet> (Accessed 27 Mar 2024)
4. NHS (2023) Common questions about Pre-Exposure Prophylaxis (PrEP). Available at: <https://www.nhs.uk/medicines/pre-exposure-prophylaxis-prep> (Accessed 31 Mar 2024)
5. BHIVA (2018) BHIVA/BASHH guidelines on the use of HIV pre-exposure prophylaxis (PrEP) 2018. Available at: <https://www.bhiva.org/PrEP-Guidelines.pdf> (Accessed 27 Mar 2024)
6. UKHSA (2023) New HIV diagnoses, AIDS, deaths and people in care tables, England. Available at: <https://gov.uk/2023-HIV-country-region-data-tables-updated-ods> (Accessed 27 Mar 2024)
7. Harrington, S., Grundy-Bowers, M., McKeown, E. (2020) "Get up, brush teeth, take PrEP": a qualitative study of the experiences of London-based MSM using PrEP in *HIV Nursing*. 20(3), pp.62-67.