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**HIV can be managed. Smoking with
HIV led to this.**

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PrEP: The Raw Story

By P. J. Moton, LMSW



The truth is, PrEP isn't for everyone. I know we've all heard the recent narrative about this magic pill you can take once a day to protect yourself from contracting HIV. True enough, it does exist, but magic it is not, and here's why.

In 2012, the FDA approved the drug Truvada to be used as a pre-exposure prophylaxis. What does that mean? That means the governing body that determines what medications can be used for what purposes approved a drug that can protect HIV-negative persons from contracting HIV. OMG the HIV health burden has been solved, finally! Not quite.

Let's take a step back, then we will proceed. When I say PrEP can protect an HIV-negative person from contracting HIV let's talk about what that really means. No, you cannot have as much raw sex as you want, worry free. While PrEP does protect you from contracting HIV, it provides no protection for other more common and easily transmitted sexually transmitted infections (STIs). And remember, when you get an STI it weakens your immune system and pink parts (rectum, vaginal cavity, urinary tract, and mouth) which makes you more at risk of contracting HIV. You don't want to lower your risk in one area and increase it in another. So, condoms should still be a strong consideration even if you are on or considering PrEP as a prevention option. Now that that's out of the way, before even considering PrEP you should ask yourself the following questions.

1. Is/Are your primary sexual partner(s) HIV-positive?

Remember, individuals who are HIV+ but undetectable lower their chances of transmitting the virus by up to 96%, so PrEP could be a double layer of protection. But let's be real, PrEP is already so damn expensive and hard to get if you don't have insurance in most cities, so chose the option(s) that is right for you and your sexual lifestyle.

2. Do you primarily bottom, and enjoy often find yourself engaging in raw sex?

No judgment, but it's important to know that as the bottom your risk is slightly higher so you may want to consider this for those "the condom makes my dick soft" tops. Don't put your sexual health in the hands of someone else, I don't care how nice his dick is. Ladies, that goes for you too, vaginal sex has the same risk.

3. Have you been treated for a non-oral STI more than once in the past year?

PrEP is something you may want to consider. Remember, as I mentioned before, STIs break down your pink parts and weakens your immune response to germs like HIV. This increases your risk BIGTIME for HIV.

4. Do you use drugs or alcohol commonly when or before you have sex?

Hey, this is the no judgment zone, I like a cocktail or two before getting it in myself. However, if you find that you are drunk or high almost every time you have sex then you may want to consider PrEP. Again, no judgment, but being high and tipsy or drunk impairs your judgment quite a bit. And while you may typically use condoms 100% of the time, this one time you may be too lit and slip up. It only takes one time.

5. Do you live in a city with a high HIV prevalence or incidence rate?

Now, no shade, but you have to look out for yourself, and you can't assume that everyone who is HIV-positive is on treatment or virally suppressed (undetectable) no matter how well-put-together he looks. Currently, the cities with the highest HIV rates per capita are Baton Rouge, New Orleans, Jackson, Miami, and Orlando.

So, if you answered "yes" to any of those questions, PrEP might be something to add to your toolbox of prevention options. It's also important to know that PrEP is only as remarkable as it's designed to be if you take it correctly. PrEP must be taken once a day every day to provide the maximum level of protection. This is not the morning after pill, no mam, no sir, it doesn't work like that. And for those who only "turn up" when you go to pride or other festive encounters and only want to take PrEP when you consider yourself at highest risk, it is recommended that you begin taking PrEP at least three weeks prior to your risky encounter(s).

But that's not the whole story. See, when they fought long and hard to get this drug approved, they didn't quite think about the barriers associated with getting this from the lab and legislature into the hands of those who need it the most. The burden of HIV still lies heaviest within the Black community, particularly among gay, bisexual, and other men who have sex with men. You have a large sector of this community who still faces systemic barriers to basic needs such as housing, general and mental health services, and health insurance. How on earth did they anticipate PrEP would reach these hard-hit communities when basic needs are still lacking.

So, the issue becomes one of access. If there is not a coordinated effort between physicians, community-based organizations, and health departments, in which there isn't in some of the most hard-hit cities; then this tool becomes inaccessible. And that's what we are finding across the nation. White gay men are learning about and being prescribed PrEP at much higher rates than brothers of color. As a result, HIV rates in those communities are decreasing, while recent reports indicate that half of us will contract HIV by the age of 30 if this trend continues. Sounds disjointed to me.

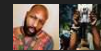
So, magic it is not, but it is certainly a great tool to have in your toolbox of options to manage your sexual health. For more info on where to find and how to access PrEP ask your primary care physician or contact your local community-based HIV prevention organization. Remember, your sexual health is your responsibility, so don't let anyone make the choice for you, not even your doctor.

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