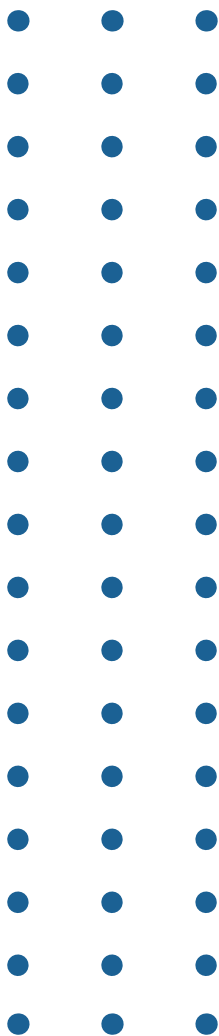


# ABC

**ALIGN • BRAINSTORM • COMMIT**

## **COMBINATION PREVENTION COUNSELING**



**SEXUAL RISK REDUCTION COUNSELING**

**PrEP ELIGIBILITY ASSESSMENT**

**PrEP USE PLAN**



# Sexual Risk Reduction (SRR) Counseling

## ALIGN

### ▶ Ask & Explore

*How would you describe your current sexual health situation?*

### ▶ Summarize Strengths & Challenges

*It sounds like your strengths are... (being motivated, current protection strategies, positive attitude)*

*And some challenges you face are...(recent breakup, difficulty accessing services, intimate partner violence, drug use, depression)*

## BRAINSTORM

### ▶ Identify

*What do you think would need to happen for it to feel a bit easier to (stay HIV-negative, reduce risk)*

### ▶ Strategize

*How could you see that happening?*

*There are a few things you may want to consider. Can I share those with you?*

**Generate menu of options.**

### **MENU OF SAFER SEX STRATEGIES TO CONSIDER**

Regular HIV/STI testing  
Using water-based lubricants  
PrEP or pre-exposure prophylaxis  
PEP or post-exposure prophylaxis  
Reduce number of partners  
Reduce drug/alcohol use  
Using clean needles and not sharing  
Discuss HIV status with sex partners  
Safe pregnancy/conception plan  
Condom use (male & female condoms)

## COMMIT

### ▶ Commit or Continue

*Of these strategies, what would you be willing to try or continue doing from now until your next visit?*

# PrEP Eligibility Assessment

- Do you use condoms only sometimes or not at all?
- Are you having sex with more than one person?
- Do you have sex with people whose HIV status you don't know?
- Are you in a relationship with an HIV-positive partner?
- Do you desire pregnancy with an HIV-positive partner?
- In the past year, have you:
  - Taken PEP to prevent HIV infection?
  - Had a sexually transmitted infection?
  - Used drugs like poppers, cocaine, ecstasy, or others?
- Do you inject drugs?

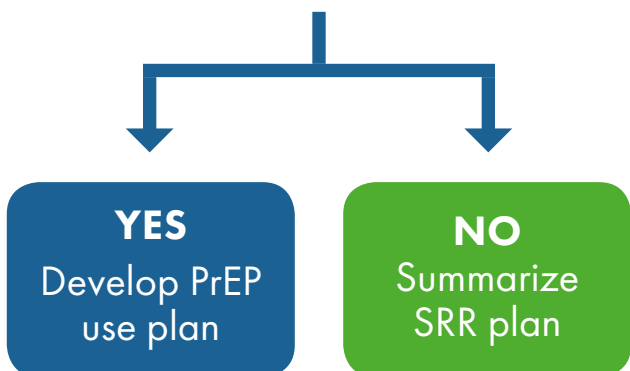
## PrEP

### ► Introduce PrEP

*PrEP is proven to reduce the risk of HIV in men and women if taken daily. Common side effects include nausea or cramping in 1:10, kidney dysfunction in 1:200, or a small decrease in bone density.*

### ► Assess Patient Interest

*Are you interested in trying PrEP?*



# PrEP Use Plan

## ALIGN

### ▶ Ask & Explore

*How would taking a pill everyday fit or not fit in your life right now?*

### ▶ Summarize Strengths & Challenges

*It sounds like your strengths are... (already taking a medication daily, easy to link to daily event, positive attitude)*

*And some challenges you have with daily pill taking are...(away from home, busy schedule, substance use, toxicity concerns, lack of privacy)*

## BRAINSTORM

### ▶ Identity & Strategize

*Given what we just talked about, what kinds of things need to happen for you to take PrEP everyday?*

*I have some ideas from other PrEP users that may help. Can I share those with you?*

### Generate menu of options.

## MENU OF STRATEGIES TO CONSIDER

Link PrEP to daily routine or event  
(like brushing teeth)

Take at same time everyday

Identify what to do if dose is missed

Using a pillbox

Understand side effects & how to  
manage side effects

Disclose PrEP use to significant other

Plan for intentional discontinuation

Using reminder alarms/texts or calendar

Have back-up supply in bag/purse

## COMMIT

### ▶ Commit or Continue

*You said you'll use this strategy. I'll check in on you about this at your next visit.*