Point of View

PrEP4All’s M-Pox Alert is a weekly bulletin containing key information for activists, advocates and impacted communities on the evolving response to monkeypox in the United States and worldwide. We will issue our alerts weekly, updating key data points and progress on action steps.

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Avoiding the Next Outbreak

Achieving Equitable Pandemic Preparedness through a National PrEP Program

For HIV advocates, the recent US failures to address the monkeypox crisis are déjà vu. The disjointed uncoordinated federal and state responses have resulted in racial disparities with monkeypox, as they have with HIV. As we reported in Mpox Alert #4, Black people with monkeypox are under-represented among people with monkeypox receiving TPOXX, the antiviral that treats symptoms and alleviates pain. At the same time, PrEP is only getting to 9% of Black individuals estimated by CDC to be most in need of PrEP.

The root causes of these disparities are systemic: racism, homophobia, and transphobia create structural inequities in health systems at every level. Many of the logistical concerns we have in coordinating a response in vulnerable communities continue (and will continue) to undermine efforts in queer communities and communities of color until we develop and invest in the kind of infrastructure necessary to reach key individuals. But the solutions are often silo’ed—even for activists, such as focusing on the stockpiles of vaccines to be converted into ready-to-administer or raising alarms about racial inequities in TPOXX or PrEP without a holistic look at solutions that can address multiple disparities.
As the crises converge, it is clearer than ever that the challenges involved in responding to queer communities and communities of color will endure until federal, state and community stakeholders develop and invest in the kind of infrastructure necessary to reach key individuals.

A national PrEP program is a key piece of this infrastructure. In March of this year, before monkeypox was even on the radar, the administration included a request in its FY2023 budget for a national PrEP program to dramatically scale up this essential HIV prevention intervention in vulnerable communities. This program drew heavily from a proposal from a multi-stakeholder group of advocates, recently published in a special issue of the Journal of Law, Medicine, and Ethics.

This community-derived strategy—which the Biden Administration has endorsed—would build a network of community-based providers that offer key preventive services (such as PrEP) to un- and under-insured people through telemedicine, trusted clinics and community health workers. This is exactly the kind of infrastructure that is also needed when new outbreaks, like monkeypox, emerge.

Additionally, across the nation, communities and health departments alike are struggling with all-too-familiar uncertainty around coverage for testing, treatment, and prevention for MPV. In spite of excruciating pain, individuals are avoiding seeking care for fear of unknown financial costs. By calling for federal coverage of PrEP medications—priced reasonably for a public health response—required labs, HIV testing, and clinician costs; Biden and community advocates have opened the door for the establishment of a federal reimbursement mechanism that could also be used to cover other urgent public health services for vulnerable communities during infectious disease outbreaks.

We believe that the current WH response to monkeypox has the potential to work synergistically with the vision of a national PrEP program, leading to compounding benefits for vulnerable communities and political benefits for an administration receiving criticism for its mishandling of the monkeypox crisis. It would be a missed opportunity for the Biden Administration not to realize the potential of its own recommendation, that there is an essential link between their PrEP proposal and their attempts to recover lost ground in the MPV fight and as key to responding to multiple pandemics. They should take their own side in this fight and press forward in support of this program recognizing its potential benefits.

PrEP In Black America Summit

The link between PrEP and emerging disease threats like MPV is more than theoretical; the CDC is currently basing part of its estimate on MPV vaccine need on existing estimates of PrEP need. This is not because PrEP leads to greater vulnerability; it is because HIV and other communicable diseases have a tendency to spread faster within smaller highly interconnected communities, particularly when those communities have less access to resources. Because of this connection, existing sexual health and wellness infrastructure in places like NYC is providing the foundation for an MPV response right now.

Both this administration and our communities cannot afford to allow another key public health opportunity to pass by. Queer communities need this administration to put its full political weight not only behind an effective monkeypox response, but also the creation of the national PrEP program that it proposed in March.

**ACTION STEPS**

- Chart out a politically viable pathway to a robust national PrEP program in FY2023. Community stakeholders have already done much of this work and can provide guidance.
- Work with community advocates to connect the dots between the immediate MPV response and a pathway to better preparedness that includes a national PrEP program.
- Meet with community advocates to determine the fastest and most strategic pathway to implementation of a national PrEP program, building on the call from hundreds of experts for the establishment of an expanded clinical and nonclinical provider network and a federal reimbursement mechanism that would support both PrEP access and rapid outbreak responses.

The development of a national PrEP program for un- and under-insured individuals would not only be a vital next step toward addressing the ongoing PrEP crisis; it would provide necessary infrastructure and coverage mechanisms that could be leveraged to address urgent new outbreaks in communities that are vulnerable to complications due to socioeconomic status and/or transmission dynamics in small interconnected communities. To better prepare for pandemics, build a program to deliver PrEP. Join us in calling for a national PrEP program now!