How can I get STI testing/treatment, birth control, and other services?

• Taking care of your sexual health is important, even during a pandemic like COVID-19. This care could include STI testing and treatment, birth control, HIV care and treatment, and other services, like immunizations.

• For routine sexual health care, many health care providers are using phone and video appointments (telehealth) instead of in-person visits. This “no-touch” care reduces contact with other people, and the risk of getting COVID-19. Check with your local health care provider, health department, clinic, or hospital to see what sexual health services are available near you.

• In-person care and treatment are usually still available for people who have symptoms, are undergoing treatment, or have emergencies. In some places, in-person care is now available for routine visits.

• For sexually transmitted infections:
  
  • If you have any STI symptoms, you should contact your health care provider or clinic and seek care right away. You should also do so if you have had sex with someone recently diagnosed with an STI. You should be able to get treatment via phone (telemedicine) and/or in-person.
  
  • If you have been diagnosed with an STI and are under treatment, it’s important to complete all medication and care with your provider.
  
  • If you are living with HIV or on PrEP, it’s important to talk with your health care provider about how you can safely access medications, screenings, and other services.
  
  • If you’d like to get routine screening for STIs, such as chlamydia or gonorrhea, check with your local provider, clinic, or health department about availability, including at-home testing. Given COVID-19, it might be more challenging to find in-person services. As a result, preventing STIs and practicing safer sex is key. To learn more, go to www.fiveactionsteps.org/step2.

• For birth control:
  
  • Access to birth control is essential for people who want to plan and/or prevent pregnancies. And, even during COVID-19, there are many options for doing so.
  
  • Many providers are currently offering birth control via phone or video appointments (telehealth) and some are currently seeing patients in-person. Check with your local provider, health department, or Planned Parenthood for options in your area.
  
  • If you currently have a birth control prescription, ask your provider to give you multiple refills at one time so that you can reduce your number of trips to the pharmacy. (This could include the pill, patch, ring, shot, and emergency contraception.)
• Or, consider ordering your birth control using an online option to get your prescription via mail without an in-person visit. ([https://www.bedsider.org/features/851-how-to-get-birth-control-delivered-right-to-your-door](https://www.bedsider.org/features/851-how-to-get-birth-control-delivered-right-to-your-door))

• If you’d like to use a new method of birth control that requires an in-person visit (e.g., IUD or implant insertion), check with your local provider, community health center, and/or Planned Parenthood.

• Remember: you can always order condoms online or pick them up at your local store when shopping for essentials. Or, you might be able to get them for free or at reduced cost from local health departments, STD clinics, or health centers. Condoms can help prevent both STIs and pregnancy. ([https://www.bedsider.org/methods/condom](https://www.bedsider.org/methods/condom))

**How can I access HIV care and treatment, PrEP, and testing?**

• If you are living with HIV during COVID-19, taking care of your health is very important. It’s key to stay on care and treatment, or to start it now. HIV weakens your immune system, and if you get COVID-19, you can be at higher risk of complications from this new virus. But treatment can build up your immune system; help you live a longer, healthier life; and reduce the risk of giving HIV to your partner(s).

• HIV is not going away during the COVID-19 pandemic. About 1.1 million people in the U.S. are living with HIV, and nearly 40,000 get infected every year. So, taking steps to prevent HIV, such as using condoms (external or internal) or dental dams, taking the medication PrEP, and/or getting tested for HIV, are still essential.

**HIV Care and Treatment for People Living with HIV**

• If you take steps to strengthen your immune system, you may be able to better fight off infections, like COVID-19. These steps include:
  
  • If you are currently getting HIV care and treatment, be sure to keep up your routine. ([https://www.greaterthan.org/campaigns/lets-talk-about-hiv-treatment/](https://www.greaterthan.org/campaigns/lets-talk-about-hiv-treatment/))

  • If you are not currently getting care, try to get connected with a local health care provider and start treatment as soon as possible. [https://findhivcare.hrsa.gov](https://findhivcare.hrsa.gov).

  • Take medications (Antiretrovirals or ARTs) every day as prescribed by your health care provider. Refill your medications, and make sure you have a 30- to 90-day supply on hand.

  • Stay in touch with your provider, and discuss options for regular check-ins and lab work through virtual, phone, or in-person visits.

  • Try to maintain a healthy lifestyle such as eating well, exercising, and getting plenty of sleep.

  • Mental health matters, too! Stay connected with friends and/or family, but do so safely at a distance (at least six feet apart) and/or virtually.
• If you can’t access services and/or medications due to cost, there are options available. Check out these websites: www.findHIVcare.hrsa.gov (Ryan White providers) and www.hab.hrsa.gov (State AIDS hotlines).

• To help prevent infection with COVID-19, see sections #1-5 in the NCSH Factsheet: COVID-19 and Sexual Health. You can also check out CDC’s guideline: www.cdc.gov/coronoavrius/20.

Taking PrEP to Prevent HIV

• If you don’t have HIV and want to avoid getting it through sexual activity (e.g., anal, vaginal or oral sex), you can take a daily medication called PrEP (pre-exposure prophylaxis). It’s safe and over 90% effective in preventing HIV infection. To learn more, go to www.PleasePrepMe.org.

• Even if you’ve never taken PrEP before, you can talk with your provider about starting it now. You should be able to make an appointment either in-person or via telehealth. Then, your provider will order lab tests. If your provider says PrEP is right for you, you will get a prescription, and have follow-up visits every three months. If you’d like to find a provider, go to www.PleasePrepMe.org/find-a-provider or to an online PrEP service: www.pleaseprepme.org/online-providers.

• Should you take PrEP during COVID-19 when your sex life might be on hold? That’s totally up to you. But, here are some pros and cons to help you decide:
  
  • If you are having sex (anal, vaginal, or oral sex) with partners – inside and/or outside of your household – you should stay on PrEP to reduce risk of HIV infection.

  • Even if you’re not having sex right now, you may want to stay on PrEP since you’re in the routine, it’s safe and effective, and you’ll be ready to go as soon as you want to have sex.

  • If you want to stop PrEP, first talk with your health care provider. Make sure to ask how many days you need to continue taking it after you last had sex. And, if you have chronic hepatitis B, seek your provider’s advice before you stop PrEP.

  • If you stop PrEP and do have sex, you can still take steps to reduce your risk of HIV. You can use a condom (internal or external), or a dental dam.

  • Or, if you stop PrEP, have sex without a condom, and think you might have been exposed to HIV, you can take a medication called PEP (Post-exposure prophylaxis) https://www.cdc.gov/hiv/basics/pep.html.

  • If you stopped taking PrEP but want to restart it, you need to contact your health care provider and get tested for HIV. If you don’t HIV, you can start taking PrEP again.

• Tips for staying on PrEP during COVID-19:
  
  • Talk with your health care provider about how to keep up with regular PrEP care. You might have visits via telehealth (phone, video, online), in-person, and/or modify your visit schedule.
• Be sure to have plenty of your medication on hand. Ask your provider for a 30- to 90- day supply, and explore mail order or drive-up pharmacy options to reduce your visits to stores.

• If you can’t afford to pay for PrEP or related health care visits, explore these options: https://www.greaterthan.org/videos/prep-without-insurance/ or https://preplocator.org/.

Getting Tested for HIV During COVID-19

• It’s estimated that 160,000 people with HIV in the United States don’t know they have it. This means 1/7 people with HIV have not been tested and diagnosed.

• During COVID-19, accessing HIV testing could be more challenging, but it’s still possible to do so. Talk with your health care provider, local clinic, or health department about your options. Some are now offering at-home self-testing, while others are still providing in person services. To learn more, check out: https://locator.hiv.gov, call 1-800-232-4636, https://gettested.cdc.gov or text your zip code to KNOW IT (566948).

• Testing is the gateway to care and treatment, and to a longer, healthier life for people with HIV. Thanks to effective medications and health care, HIV is now a chronic condition that people can manage and live with. (www.cdc.gov/hiv/testing).

• The CDC recommends that all adults get tested for HIV at least once, and more often if you are at risk. You should get tested at least once a year if you have unprotected sex (without condoms, dams, and/or PrEP), an STI or have a partner who has, multiple partners, shared drug injection equipment, or have a partner who engages in any of these behaviors. Also, if you are a man who has sex with men, you should be tested at least once a year, and more often if you’re at risk (For more details, go to: www.ncshguide.org).

How can I get infertility, pregnancy, and prenatal/postpartum care?

• During this crisis, health care services are changing rapidly to ensure the safety of both patients and providers and to meet urgent and chronic health care needs. COVID-19 will probably be with us for a while and will affect both how health care is provided and how we access it. Check back regularly with your health care provider to see what in-person and telehealth services are available to you.

• Many providers are resuming services to help people achieve pregnancy, including infertility services, both in-person and using telehealth. Returning to reproductive care during this pandemic can be stressful and people may benefit from mental health services specialized in fertility/infertility counseling. Ask your local health care provider, health department, clinic, or hospital what “no touch” and mental health services are available near you.

• Prenatal and postpartum care are essential health care services that remain very important. However, how these services are delivered may change during this time. Some people may have fewer or more spaced out in-person visits, and you may be asked to come alone to these visits. Your provider may also offer more over the phone and/or online video calls.
• Researchers are still learning how the virus may affect those who are pregnant and their fetus. It is always important for pregnant people to protect themselves from illnesses, including COVID-19; however, they may want to be even more careful during this time to limit exposure to the virus. This includes hand washing, social distancing, wearing a mask in public, following stay-at-home orders, and avoiding exposure to anyone who could have COVID-19.

• Studies show that pregnant people may be at increased risk for severe illness from COVID-19 compared to non-pregnant people, and there may be increased risk of adverse pregnancy outcomes, such as preterm birth. One study suggests that COVID-19 may pass to a fetus during pregnancy, labor, or delivery. But more research is needed.

• Most hospital and birth centers are allowing one support person to accompany patients during labor and delivery. Usually this person will be given a mask to wear and must stay in the room for the duration. And, in most cases, no postpartum visitors are allowed.

• After birth, a newborn can get the virus if they are exposed. Talk with your health care provider about the various postpartum precautions that may be needed to minimize the risk to you and your baby.

• If you have an unplanned or non-viable pregnancy, essential health services, including medication abortion, are still available. While they might be harder to access, contact your health care provider or clinic about options available to you: https://www.plannedparenthood.org/abortion-access

• Many providers are currently offering birth control via phone or video appointments and some are currently seeing patients in-person. Check with your local provider, health department, or Planned Parenthood for options in your area. (See Sections #2-5 in the NCSH Factsheet: COVID-19 and Sexual Health for more details about safer sex).

What if I’ve experienced sexual violence, abuse, assault or harassment?

• Sexual violence, abuse, assault, and harassment do not end during a crisis. And, in fact, under stay-at-home/safer-at-home orders, it is likely to get worse. Although many sexual assault centers may be limiting in-person services, most remain available to provide free and confidential services through telehealth. For the National Sexual Assault Online Hotline, go to: https://hotline.rainn.org/online

• If you think you might have been exposed to HIV, you can take a medicine called PEP (post-exposure prophylaxis). It is important to start PEP as soon as possible, but no more than 72 hours (three days) after a possible exposure to HIV. Call your local health care provider, health department, clinic, or hospital to get a prescription over the phone.

• You do not need a prescription to get emergency contraception (aka the morning-after pill) to prevent pregnancy. Anybody—of any age or gender—can buy EC at their pharmacy or online without having to visit a health care provider first. Just remember, the sooner you take EC, the better, but you have up to 5 days after unprotected sex to use it.