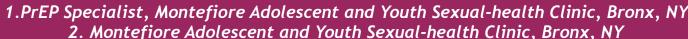
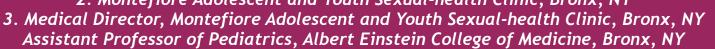
Transgender Adolescents of Color and HIV: Unique Challenges in Preventing New Infections

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BACKGROUND

- HIV estimated prevalence 9.2% for all transgender persons nationally with a significantly higher prevalence for transgender women at 14.1%.¹ A paucity of published data exists defining the risk of HIV in transgender or non-binary (TGNB) youth of color.
- TGNB youth of color have numerous risk factors for HIV infection, including unstable housing, under or uninsured, unemployment, and substance use disorder.
- Recent CDC data reported the urgent need for more HIV prevention and treatment services in this population.²
- We assessed key social determinants of health (SDOH) in TGNB youth of color and the impact on their ability to prioritize and access HIV prevention

METHODS

- In 2021-22 we conducted an assessment of 101 sexually active TGNB youth 14-27 years to evaluate potential barriers to HIV prevention by querying the 4 U's: 1) Unemployed, 2) Uninsured/Underinsured, 3) Unstable housing, and 4) substance Use disorder.
- Patients were interviewed by the MAYS clinic PrEP Specialist

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- The assessment also questioned medical gender affirmation and HIV/STI prevention.
 Information obtained was used to assess knowledge gaps that affect their understanding of HIV risk.
- Based on results, a research tool, ARTISTA (Assess Risk for Transmitted Infections in Sexually active Transgender Adolescents) was implemented to improve gaps in understanding HIV/STI risk in TGNB youth.

PRIMARY ENDPOINT

 Assess key SDOH in TGNB youth of color and the impact on their ability to prioritize and access HIV prevention

STUDY PARTICIPANTS

• Sexually active transgender and non-binary youth of color ages 14-27 years who receive gender affirming care and PrEP or STI testing at the MAYS clinic in the Bronx, New York.

STATISTICS

Odds ratio (of receiving gender affirming care and STI testing)

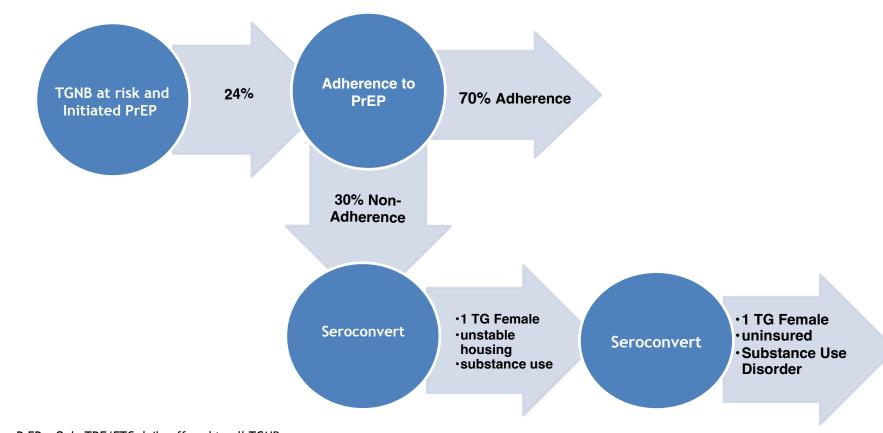
PATIENT DEMOGRAPHICS

Table 1: Demographics of TGNB youth of color attending the MAYS clinic, Bronx, NY

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	Sexually active TGNB youth of color assessed for PrEP awareness (N=101)	
Transgender female, n (50%)	51 (50.4%)	
Mean Age (years)	20 ± 2.7 years	
TGNB Youth of Color	66%	
PrEP initiation and adherence	24% (10/41)	

RESULTS / FIGURES

Figure 1: TGNB Youth assessed for HIV Risk and initiated Pre Exposure Prophylaxis



PrEP = Only TDF/FTC daily offered to all TGNB persons

Seroconvert = Diagnosis of HIV Confirmed with HIV PCR

Figure 2: Assessment of Key SDOH in TGNB Youth of Color in the Bronx: 4 U's

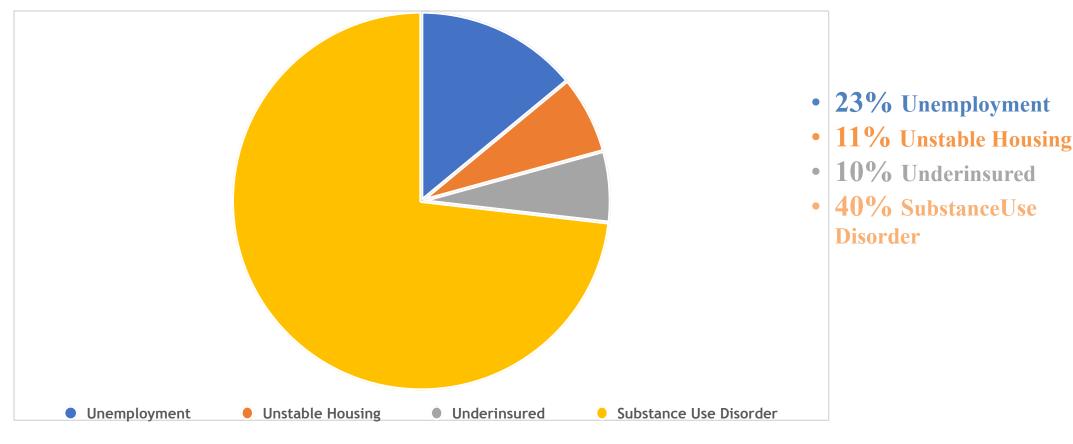


Table 2: Primary Endpoint

	SDOH	Initiated PrEP
Total Sexually Active TGNB Assessed	101	24% (24)
Unemployed	23%	5
Unstable Housing	11%	3
Uninsured or Underinsured	10%	3
Substance Use Disorder	40%	10
More than one of the above SDOH	66%	3

DISCUSSION

- HIV estimated prevalence is 9.2% for all transgender persons nationally with a significantly higher prevalence for transgender women at 14.1%
- Receipt of gender affirming care was associated with increased odds of STI testing (adj odds ratio = 1.90, 95% CI 1.33-2.73) with no relation to gender identity
- Our data from the Bronx MAYS TGNB youth of color cohort suggests despite awareness,
 PrEP initiation and adherence among trans females was disappointing.
- The 4 U's: Unemployment, Unstable housing, Under or Uninsured and substance Use Disorder are significant barriers specifically in TGNB youth of color. (Figure 2)
- ARTISTA assessment reveals that there are significant social/structural barriers to PrEP access, uptake and persistence.
- ARTISTA data should be used to influence HIV prevention policies; SDOH must be addressed
 in this population- and others similarly affected- if we are to end the HIV epidemic.

CONCLUSION

- Gender affirming care is associated with access and willingness for STI testing
- SDOH, specifically the 4 U's negatively impact TGNB youth of color in the Bronx and are prioritized over HIV prevention
- Further studies are needed to understand the impact of ARTISTA assessment on improved PrEP uptake in TGNB youth of color

LIMITATIONS

• Inconsistent follow up and contact information for MAYS clinic TGNB PrEP patients

REFERENCES

- 1. Poteat T, Reisner SL, Radix A. HIV epidemics among transgender women. Curt Opin HIV AIDS. 2014;9:168-173.
- 2. Centers for Disease Control and Prevention. April 15, 2021

DISCLOSURES

The authors of this presentation NOTHING TO DISCLOSE concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation

IDWeek 2022TM	•	Washington, D.C.
October 19-23, 2022	•	Poster Number:

2091