# Howard Brown Health Center Transgender Women of Color Initiative



<u>Evidence-Informed for the Linking and Retention in HIV Care Chapter</u> <u>Evidence-Informed for the Structural Interventions Chapter</u>

## **POPULATION**

Transgender women of color with HIV

#### **KEY INTERVENTION EFFECTS**

- > Increased engagement in HIV care
- Increased antiretroviral therapy (ART) initiation (having an ART prescription)
- Increased viral suppression

## **BRIEF DESCRIPTION**

The *Howard Brown Health Center Transgender Women of Color Initiative* provides culturally relevant, tailored transgender and gender non-conforming (TGNC) services with a goal of successful engagement and retention in primary medical care and adherence to HIV care in a safe space. The initiative included the following components:

- A biweekly Friday evening drop-in that provides medical, pharmacy, and behavioral health services, staffand community-led programming, insurance counseling, dinner, TGNC-specific needle exchange, and other survival resources (i.e., clothing, hygiene products, letter writing)
- Weekly youth (ages 14-24) and biweekly adult (ages 25 and above) drop-in support groups that provide staff- and community-led programming, dinner, and other survival resources
- TGNC-specific community and health-center based outreach
- Training on providing trans-affirmative care to increase trans-competence among staff

**DURATION:** Ongoing

**SETTING:** Federally qualified health center (Chicago, IL)

**STUDY YEARS:** 2012 - 2016

STUDY DESIGN: One-group, pre-post

**DELIVERERS:** Program director, program manager, outreach staff, program staff

**DELIVERY METHODS:** Counseling, outreach, harm reduction, training

#### **STUDY SAMPLE**

The baseline study sample of 104 transgender women was characterized by the following:

• 70% Black or African American persons

19% Hispanic, Latino, or Latina persons

7% persons who identify as another race or ethnicity

2% Asian, Native Hawaiian, or another Pacific Islander

• Median age = 31 years

Note: Percentages may not add up to 100% due to rounding and loss of data.

# STRUCTURAL COMPONENTS

Access – Syringe/sterile injection equipment

• A needle exchange program was made available at the Friday evening drop-in

Capacity Building - Provider/supervisor training

- All staff involved in the program and at the agency were trained in TGNC care competencies Physical Structure – Integration of services
- Friday evening drop-in bundled medical, pharmacy and behavioral health services Physical Structure – Services provided in a non-traditional setting
- Friday evening drop-in provided in medical clinic and lobby offered a TGNC-only space for TGNC patients Social Determinants of Health Survival
  - Participants were provided food, clothing, and hygiene products

# **KEY INTERVENTION EFFECTS** (see **Primary Study** for all outcomes)

- At 12-month follow-up, intervention participants had greater engagement in HIV care than at baseline (unadjusted Odds Ratio (uOR) = 1.81, 95% Confidence Interval (CI): 1.12 2.96).
- At 24-month follow-up, intervention participants had received more ART prescriptions than at baseline (uOR = 2.57, 95% CI: 1.21 3.35).
- At 12-month and 24-month follow-ups, intervention participants were more likely to be virally suppressed than at baseline (12-month uOR = 1.76, 95% CI:1.24 2.50; 24-month uOR = 2.01, 95% CI: 1.21 3.35).
- At 12-month and 24-month follow-ups, intervention participants with an outpatient ambulatory health service visit were more likely to be virally suppressed than at baseline (12-month uOR = 2.09, 95% CI: 1.00 4.34; 24-month uOR = 2.90, 95% CI: 1.11 7.58)

#### **CONSIDERATIONS**

- Of the 104 participants enrolled, 20 participants (19%) were exposed to the entire intervention.
- The median number of hours of intervention exposure was 3 hours.
- Of the 104 participants, 70% participated in the group sessions and 40% participated in the drop-in sessions.

#### **ADVERSE EVENTS**

The author did not report adverse events.

#### **FUNDING**

Health Resources and Services Administration (U90HA24973)

## PRIMARY STUDY

Rebchook, G. M., Chakravarty, D., Xavier, J. M., Keatley, J. G., Maiorana, A., Sevelius, J., Shade, S. B., & the SPNS Transgender Women of Color Study Group. (2022). <u>An evaluation of nine culturally tailored interventions designed to enhance engagement in HIV care among transgender women of colour in the United States</u>. *Journal of the International AIDS Society*, *25*(Suppl. 5), e25991. doi: 10.1002/jia2.25991

# PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

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