

Who is Being Served?

HIV Prevention Utilization among Transgender Women in Los Angeles County

Nina T. Harawa, MPH, PhD
Assistant Professor
Charles Drew University
ninaharawa@cdrewu.edu

Purpose

- To examine sociodemographics and HIV status,
- To examine level of exposure to HIV prevention and testing services,
- To identify predictors of receiving little-to-no services
- . . . among male-to-female (MtF) transgenders in Los Angeles.

Funding/Support

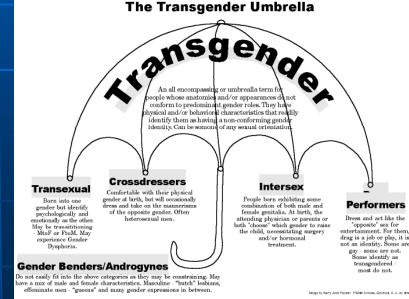
- Centers for Disease Control and Prevention: funded original study
- HIV Epidemiology Program, LA County Department of Public Health: Carried out the research
- Institute for Community Health Research: funded secondary analysis
- Charles Drew University



- Data from the 2003 Los Angeles-based HIV Testing Survey (HITS)
 - CDC-sponsored
 - Cross-sectional study
 - Also collected a host of data on risk behaviors, prevention/treatment utilization, attitudes, and sociodemographics
 - Study recruited:
 - Female sex workers (FSWs)
 - Male-to-female transgenders (MtF TGs)

MtF Transgender Eligibility

- Labeled male at birth and now identifies as female or transgender.
- Reports sex with a male partner in the prior 12 months



Interviews: Oct. 2003 - Jan. 2004

- Recruitment sites (venues):
 - Hustling areas, social service agencies, clubs, and social events
- Face-to-face interview: \$25
- Recruited and interviewed 268 participants
 - 128 eligible transgender
 - 104 eligible female sex worker

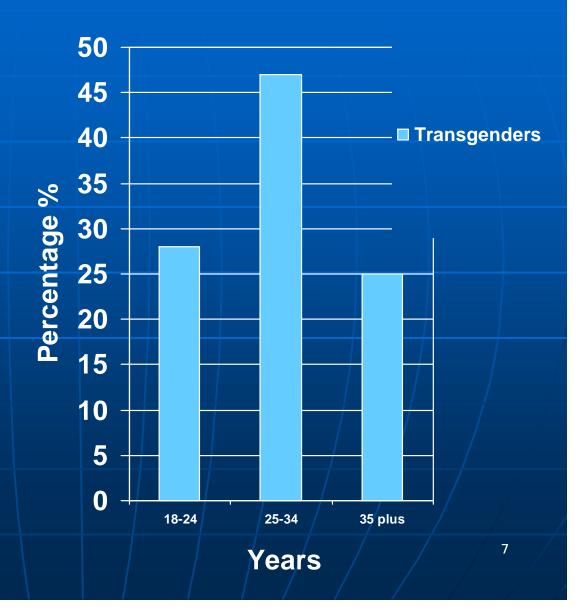


Age distribution

 Largest age group was 25-34.

Education

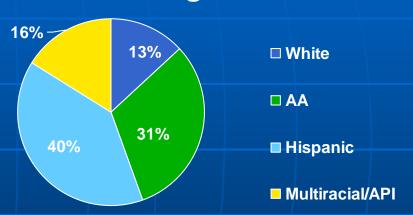
 40% had not completed high school/GED.



Race/ethnicity

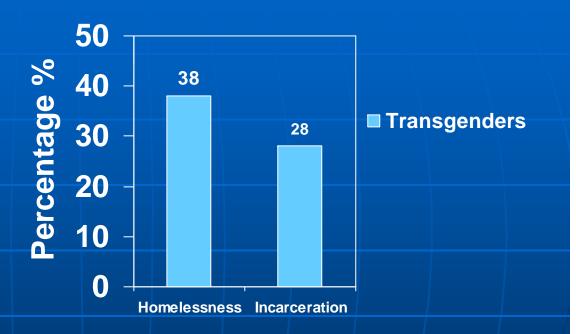
- Participants were primarily Hispanic (40%) and African American (31%), with Whites composing 13% of the population, and multiracials/API 16%.
- 20% were foreign born

MtF Transgenders



Living status

28% were incarcerated and 38% were homeless at one point in the past 12 months.



Marriage or Cohabitation

• 30% were married or living with a partner.

Monthly Income Over the Past Year

• The majority of TGs (60%) had household incomes of less than \$2,000 a month, with nearly one-third making less than \$1,000 and 30% on public assistance.

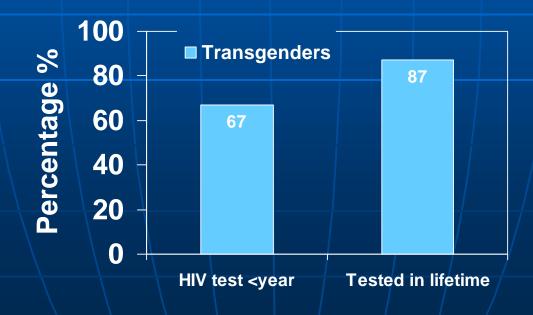


HIV Antibody Testing



HIV Testing History

- •67% had tested within one year.
- •87% had tested in their lifetime.





HIV Status

Among those tested, 14% of TGs reported having tested HIV positive.



Outcome variables

Prevention utilization in past 12 months Types of Utilization

- Passive Does not generally require initiative on the part of the participant
- Active Generally requires initiative on the part of the participant

Passive Utilization

- Receiving or observing up to 10 passive services, including the following:
 - Observed prevention messages or information on

```
1. " television,
```

- 2. " " Internet,
- 3. " " billboards,
- 4. " radio,
- 5. " " magazines/newspapers,
- 6. " " health centers,
- 7. " " clubs/bars, and
- 8. " " buses/bus stops),
- 9. Received printed HIV materials, and
- 10. Received free condoms.

Active Utilization

Active participation in up to 8 services, including the following:

- 1. Contacting an HIV hotline,
- 2. Discussing prevention with an outreach worker,
- 3. Participating in a prevention group session,
- 4. Role playing negotiation of safer sex behaviors,
- 5. Exchanging needles for drug injection,
- 6. Receiving HIV testing,
- 7. Receiving an HIV risk-reduction plan with HIV testing, and
- 8. Currently participating in drug or alcohol abuse treatment.

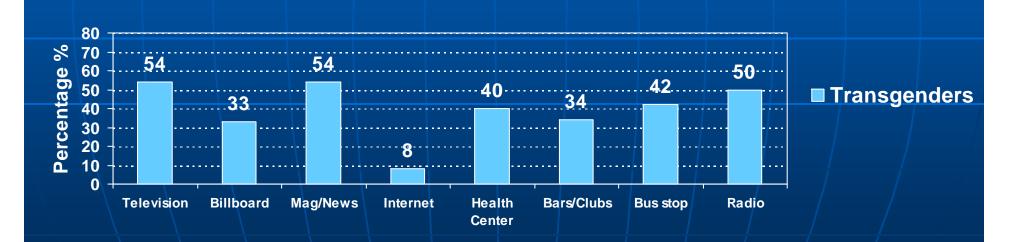
Outcome: Passive Utilization

- Percentage receiving any services in past 12 months
 - Passive: 77%
 - Active: 80%
- Average number of services received
 - Passive: 4.2
 - Active: 2.3

Outcome

Passive Utilization

 Television and magazines/newspapers were the most commonly reported source for HIV prevention messages.
 Radio was the 2nd.

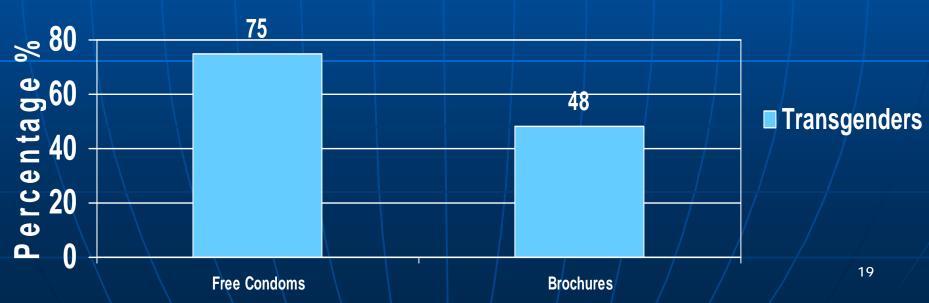


Outcome

Passive Utilization

 Receiving a free condom in the past year was the most commonly reported type of passive prevention received.

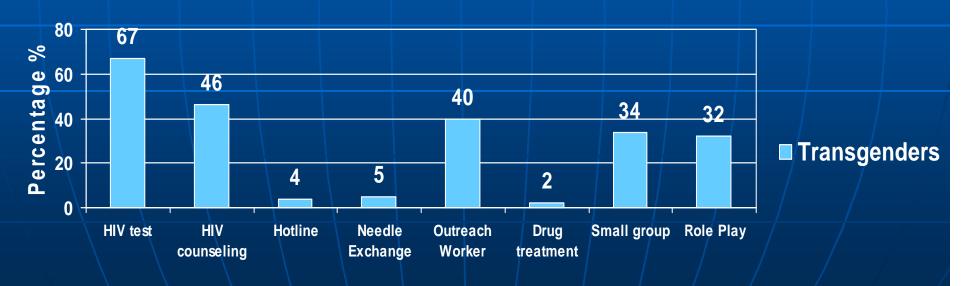




Outcome

Active Utilization

 Receiving an HIV test in the past year was the most commonly reported active prevention indicator. The next most common were HIV counseling and talking to an outreach worker.



Examining Predictors of ReceivingLittle HIV Prevention among TGs







TG - Predictors of Receiving Little-to-No Services

Demographics

- Race/ethnicity (Black): A/P
- Place of birth (U.S.): A/P
- Age
- Married/cohabiting: A/P
- SPA
- Incarceration

Summary

- The following subgroups were most likely to receive little or no services:
 - African Americans,
 - those currently living with a spouse or partner,
 - those with (relatively) higher incomes,
 - those not seeking health care, and
 - those lacking a regular source of health care.
- In a number of instances, lower prevention utilization was associated with an absence of reported risk behaviors.
 - e.g., no drug use, no exchange sex
- In other instances, the opposite was true.
 - e.g., binge drinking

Limitations

- Non-representative sample.
- Small sample numbers.
- Data are becoming out of date

Conclusions

- More efforts should be focused on reaching subpopulations not being reached through current efforts.
- Marshalling passive prevention services to lead people into active services.
- Services should address the contextual issues and root causes that impact the lives of TG women.
 - Poverty, housing access, unemployment, and lack of education.



JITS 2003

HIV Testing Survey

◆Acknowledgements: Chanel Tresvant, Xtina Quinonez, James Andrews, Helen Shih, Maria Roman, Juli Ann Carlos, participants, and the community

♥Colnvestigator: Dr. Trista Bingham





