

Acceptability of Pre-Exposure Prophylaxis (PrEP) Among a Large Cohort of Young Transgender Women in Two U.S. Cities: Findings from LifeSkills Study

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Abstract #1017

BACKGROUND

- In recent years, transgender women (TW) have been recognized as an at-risk community, with lab-confirmed studies showing average HIV prevalence of 28% (range 16%-68%).¹
- Truvada as PrEP is an efficacious biomedical HIV prevention modality for HIV-uninfected individuals at high-risk for infection, such as young transgender women (YTW)²⁻⁵

OBJECTIVE

- In a community-recruited cohort of HIV-uninfected, sexual active YTW in two US cities, the purpose of this study was to: (1) examine PrEP acceptability and related factors; (2) describe reasons for reporting lack of interest in PrEP.

METHODS

- About the Study:** LifeSkills is the first randomized controlled trial with established efficacy of a culturally-tailored, empowerment-based, behavioral HIV prevention intervention designed for and by YTW in the US.⁶ Recruitment materials are shown in Figure B.
- Recruitment Sites:** Boston, MA and Chicago, IL
- Study Design:** Empirical qualitative or quantitative research
- Analyses:** Analysis was restricted to 230 HIV-uninfected YTW enrolled. Characteristics associated with PrEP acceptability were examined using bivariate and multiple linear regression procedures (alpha = < 0.05 a priori, and analyses used SPSS version 23.0).⁷
- Outcome:**
 - PrEP Acceptability:** PrEP acceptability was a 10-item measure summed in continuous scores (mean=23.4, range=10.0-30.0). Items included likelihood for taking PrEP (1='not at all likely,' 2='somewhat likely,' and 3='very likely') in various situations like different dosing frequencies & types of partnerships.
 - Predictors examined:**
 - Socio-demographics:** age, race/ethnicity, employment status, sexual orientation identity, highest education attained (≤ high school vs. ≥ college), history of recent (<4 mos.) sex work (yes/no), incarceration (yes/no), & homelessness (yes/no).
 - Healthcare Utilization:** insurance (government-issued, private, vs. none), primary care provider or PCP (yes/no), types of healthcare accessed (clinics, private office, hospital, vs. no access), provider meeting YTW's health needs (always/sometimes vs. never/rare), ever taken hormone replacement therapy (HRT) (yes/no), and ever STI diagnoses (yes/no).
 - PrEP Interest and Awareness:** Participants were given a brief description of PrEP and were asked if they were aware of PrEP prior to the study (yes/no) and if they were interested in taking/using PrEP (yes/no).

RESULTS

Sample Characteristics:

- Study site: 58% from Boston, MA, and 42% from Chicago, IL.
- Race: 42% black, 13% Latina, 33% white, and 12% other race/ethnicity.
- Mean age: 23 years (SD=3.5 years; range 16-29)
- Sexual Identity: 39% identified as heterosexual, 24% gay, 23% bisexual, 7% lesbian, and 8% other sexual identity.
- Majority were unemployed (72%) & had high school or less education (59%).
- In the past four months, 34% had engaged in sex work, 7% were incarcerated, and 22% were homeless.
- 57% of YTW in the sample had government-issued insurance, followed by 24% no insurance, and 18% private insurance.
- 78% of YTW accessed clinics as their healthcare facility, & 70% had PCP.
- 30% reported that their provider 'rarely/never' meet their health needs.
- 65% had ever taken HRT; and about one-fifth (18%) had prior STI diagnoses.

Table 1. Final multiple linear regression model examining factors independently associated with PrEP acceptability among young transgender women (N=230).

Characteristics	PrEP Acceptability		
	β (SE)	95% CI	p
Age in Years			
16-20	-1.0 (1.0)	-3.0 – 1.0	0.32
21-25	-2.0 (0.8)	-3.6 – -0.4	0.01*
26-29	–	–	–
Recently engaged in sex work			
Yes	-1.5 (0.8)	-3.0 – -0.1	0.04*
No	–	–	–
Provider meeting health needs			
Always/Sometimes	2.9 (0.8)	1.3 – 4.4	<0.001***
Rare/Never	–	–	–
PrEP Interest			
Yes	3.7 (0.8)	2.2 – 5.2	<0.001***
No	–	–	–

* p < .05; ** p < .01; *** p < .001 (two-tailed tests).
β = beta coefficient; SE = standard error; CI = confidence interval.
o = equal to or less than 4 months.

Figure 1. Reasons for Not Being Interested in PrEP among young transgender women in the study sample (n=78).

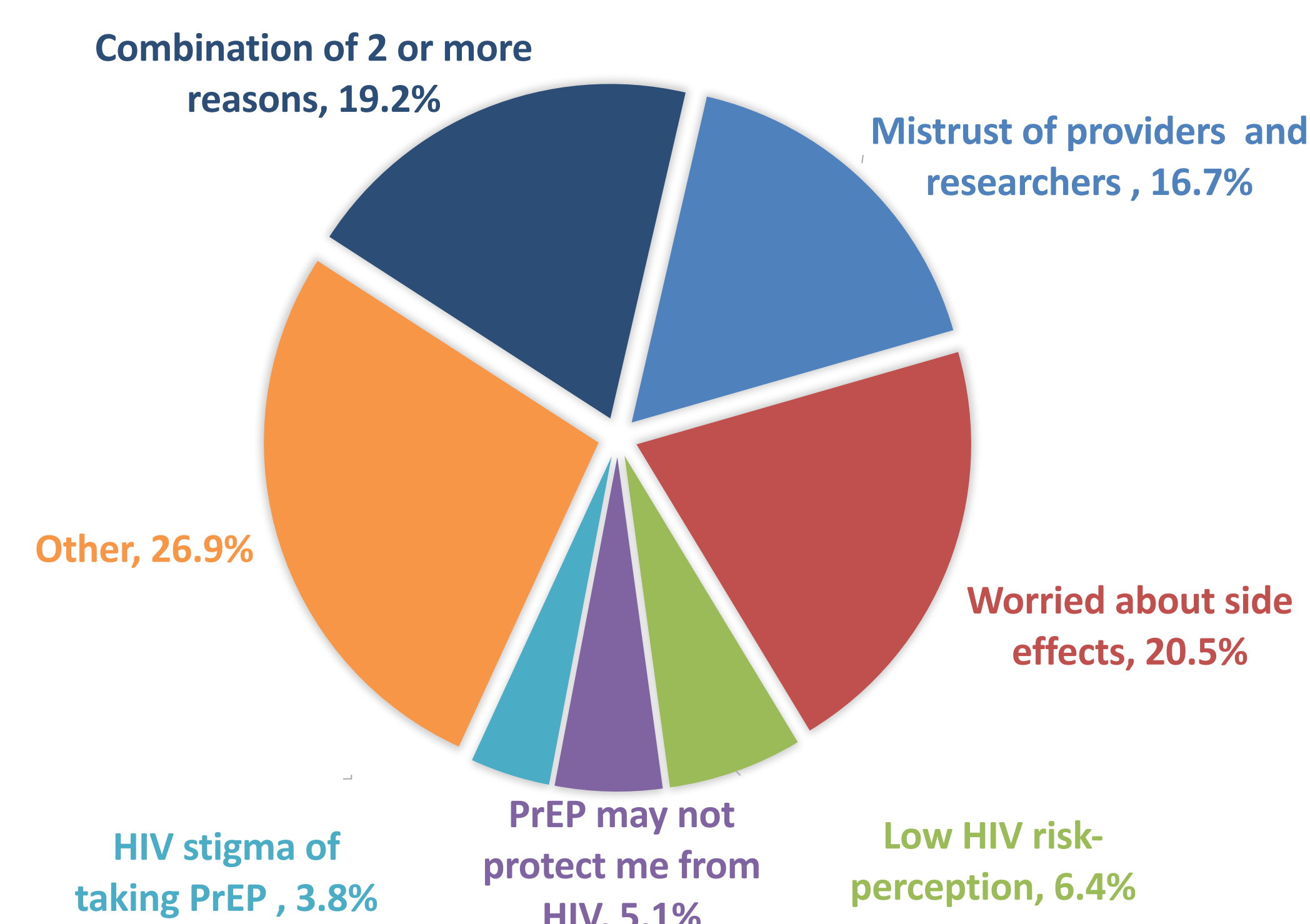


Figure 2. LifeSkills study recruitment materials.



RESULTS

Table 1:

- Factors remaining significant and associated with higher PrEP acceptability scores:
 - PrEP interest
 - Having providers who meet YTW's health needs
- Factors remaining significant and associated with lower PrEP acceptability scores:
 - Younger age (ages 21-25 vs 26-29 years)
 - Having transactional sex <4 months

Figure 1:

- The most commonly reported reasons for being uninterested in PrEP included: concerns for medication side-effects (20.5%), and mistrust with providers and researchers (16.7%).

CONCLUSION

- To our knowledge, these findings represent the first account of PrEP acceptability in a community-recruited sample of YTW in the US.
- Further research on this topic is needed to elucidate ways to increase PrEP acceptability among YTW.
 - Potential areas to bolster impact on PrEP acceptability among YTW could be around building trust between providers and YTW, meeting YTW's other health needs (e.g., hormone therapy), and providing culturally-responsive educational materials, particularly specific to youths or those with a history of recent transactional sex.

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