NATIONAL CENTER FOR HIV, VIRAL HEPATITIS, STD, AND TB PREVENTION

MEDICAL MONITORING PROJECT

Gaps in Sexual and Reproductive Health Care Among Cisgender Women With Diagnosed HIV

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BACKGROUND

- Comprehensive women's health, including sexual and reproductive health (SRH), is an important component of overall health and well-being.
- Understanding outcomes across the SRH spectrum—including access to routine screening, family planning, prenatal/obstetric care, and postpartum care—among cisgender women with HIV (WWH) may improve care access and overall health and well-being, but national estimates are lacking in this population.

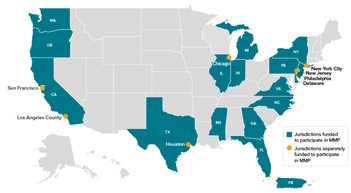
We described outcomes across the SRH spectrum among U.S. WWH, overall and by social determinants of health (SDOH).

METHODS

- **Medical Monitoring Project**: Collects annual, cross-sectional, nationally representative data on characteristics and outcomes—including SRH—among U.S. adults with diagnosed HIV.

Sampling: 2-stage complex sample survey design

Stage 1: 16 states and 1 territory sampled from all U.S. states, D.C., and Puerto Rico



Stage 2: Simple random sample of adults with HIV selected from sampled jurisdictions



Data Collection:

Interview

Medical record abstraction

Data Analysis:

- 2018–2020 data cycles included (data collected June 2018–May 2021)
- Weighted percentages of SRH-related outcomes calculated among WWH aged 18-44 years (N=855), overall and by selected SDOH:
  1. Receipt of Pap smear during the past 3 years (via interview)
  2. Receipt of STI testing among sexually active persons during the past 12 months (via medical record abstraction)
  3. Use of ≥1 form of contraception among persons who engaged in vaginal sex in the past 12 months (via interview)
  4. Being pregnant ≥1 time since HIV diagnosis (via interview)
     - Pregnancy outcomes (via interview)

Abbreviations: STI: sexually transmitted infections; RWHAP: Ryan White HIV/AIDS Program. Icons taken from Microsoft icons or downloaded from flaticon.com or CDC website.

Sexual and reproductive health (SRH) is an important component of overall health and well-being among WWH.

Many WWH have suboptimal SRH outcomes.

1 *in* 7 did not receive a Pap smear during the past 3 years

3 *in* 5 did not receive STI testing during the past 12 months*

*Among women who had vaginal or anal sex during the past 12 months.

Over half of WWH had ≥1 pregnancy since HIV diagnosis, of whom:

4 *in* 5 had ≥1 unintended pregnancy

1 *in* 4 had ≥1 miscarriage or stillbirth

1 *in* 10 had ≥1 induced abortion

Selected SRH outcomes varied by certain SDOH

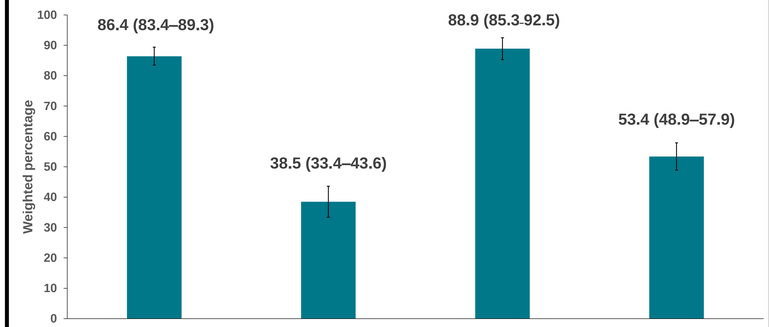
A multipronged approach could be helpful in improving SRH outcomes and reducing inequities among WWH, including:

- ❑ Ensuring access to services across the SRH spectrum to meet people where they are, including comprehensive family planning counseling
- ❑ Enhancing capacity for safety net programs to increase access

RESULTS

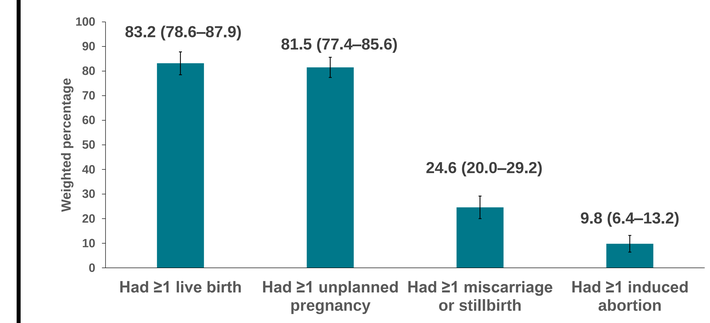
- Age distribution: 18% aged 18-29 years, 20% aged 30-34 years, 62% aged 35-44 years
- Many WWH did not receive cervical Pap smears during the past 3 years, STI screening during the past 12 months, or contraception during the past 12 months.
- Over half reported ≥1 pregnancy since HIV diagnosis.
- A wide spectrum of pregnancy outcomes were reported, including live births, unintended pregnancies, miscarriages/stillbirths, and abortions.

Figure 1. Spectrum of sexual and reproductive outcomes among women with diagnosed HIV aged 18–44 years—Medical Monitoring Project, United States, 2018–2020 (N=855).



*Among women who had vaginal or anal sex during the past 12 months. †Among women who had vaginal sex, did not have tubal ligation or hysterectomy, and were premenopausal.

Figure 2. Pregnancy outcomes among women with diagnosed HIV aged 18–44 years who reported ≥1 pregnancy since HIV diagnosis—Medical Monitoring Project, United States, 2018–2020 (N=855).



- Selected SRH outcomes varied by certain SDOH:

Compared with WWH living ≥138% of the federal poverty level, WWH living **below the federal poverty level** were:
- **Less likely to receive Pap smears** during the past 3 years **(84% vs. 93%)**
- **More likely to have ≥1 unintended pregnancy** during the past 12 months **(86% vs. 69%)**

Compared with WWH who did not receive care at RWHAP-funded facilities, **WWH receiving care at RWHAP-funded facilities** were:
- **More likely to receive STI testing** during the past 12 months **(43% vs. 23%)**
- **More likely to have ≥1 unintended pregnancy** during the past 12 months **(85% vs.70%)**

Compared with WWH with any private insurance, WWH with **Medicaid (but only those who resided in non-Medicaid expansion states)** were:
- **Less likely to receive Pap smears** during the past 3 years **(79% vs. 91%)**
- **More likely to have had ≥1 unintended pregnancy** during the past 12 months **(94% vs. 67%)**

Compared with WWH who did not have such experiences, WWH who **experienced physical violence by an intimate partner or forced sex during their lifetime** were **more likely to have ≥1 unintended pregnancy** during the past 12 months **(86% vs. 77%)**

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