

Howard Brown Health Center Transgender Women of Color Initiative



[Evidence-Informed for the Structural Interventions Chapter](#)

[Evidence-Informed for the Linking and Retention in HIV Care Chapter](#)

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, staff- and 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

Rebhook, 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). [An evaluation of nine culturally tailored interventions designed to enhance engagement in HIV care among transgender women of colour in the United States](#). *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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