

PRINCESS PROJECT



Evidence-Informed for the Structural Interventions Chapter
Evidence-Informed for the Linking and Retention in HIV Care Chapter

POPULATION

- Black or African American transgender women with HIV

KEY INTERVENTION EFFECTS

- Increased viral suppression

BRIEF DESCRIPTION

The *Princess Project*, based on the motivational enhancement intervention curriculum, provides culturally and transgender-sensitive community outreach, HIV prevention services, support groups, and gender transition feminization medical services (e.g., electrolysis, laser hair removal) to enhance engagement and retention in HIV care. The intervention includes the Butterfly Nest, a safe physical space for transgender women that hosts weekly support groups and a legal clinic. The intervention also includes referrals to comprehensive HIV care.

DURATION: Ongoing

SETTING: Oakland/Alameda County, California

STUDY YEARS: 2012 – 2017

STUDY DESIGN: One-group, pre-post

DELIVERERS: Clinical advisors, project coordinator/evaluators, health educators

DELIVERY METHODS: Motivational enhancement therapy, case management, outreach

STUDY SAMPLE

The baseline study sample of N = 60 participants was characterized by the following:

- 80% Black or African American persons
 - 13% Hispanic, Latino, or Latina persons
 - 5% persons who identify as another race or ethnicity
 - 2% Asian persons
- Median age = 41 years

STRUCTURAL COMPONENTS

Capacity Building – Hiring staff

- Hired transgender women as health educators

Capacity Building – Provider/supervisor training

- Staff was trained in motivational interviewing techniques following the intervention curriculum

Physical Structure – New physical structure

- Created the Butterfly Nest - the site for delivering intervention activities, health promotion workshops, and support groups for transgender clients

Social Determinants of Health – Survival

- Referrals to collaborating agencies for basic needs (e.g., housing and employment programs)

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

- At the 24-month follow-up, intervention participants with at least one outpatient visit were more likely to be virally suppressed as compared to baseline (unadjusted Odds Ratio (uOR) = 3.10, 95% Confidence Interval (CI): 1.19 - 8.07).

CONSIDERATIONS

- Of the 60 participants enrolled, 57 participants (95%) were exposed to the entire intervention.
- The median number of hours of intervention exposure was 4.58 hours.
- Of the 60 participants enrolled, 40% participated in virtual sessions, 8.77% participated in drop-in sessions, and 1.75% participated in group sessions.
- The author reported the annual cost for implementing the intervention as \$307,610 at the time of intervention implementation.
- Eleven participants enrolled in HIV primary care.

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). [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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