

Missing from Prevention: Increasing Access to HIV Prevention and Care for Women

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Office of the Assistant Secretary for Health, Region 8 and 10

Acknowledgment

This Mountain West AIDS Education and Training (MWAETC) program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$2,908,478 with 0% financed with non-governmental sources.

The content in this presentation are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government.



Agenda

Welcome

Introduction to OASH

National Women and Girls HIV/AIDS Awareness Day

Mountain West AETC

CEUs

Speakers:

- Amy Kennedy, MD, MS, AAHIVS, VA Puget Sound Health Care System; University of Washington
- Lisa Frederick, Denver Prevention Training Center
- Karissa Sanchez, RN, Yakima Valley Farm Workers Clinic, NEW HOPE Clinic
- Antonia D'orsay, PhD, MS, MA, Borrego Health
- Leah Dirkse, M. Ed., Anaya Richie, Colorado Health Network

Q&A

Evaluation and CEUs

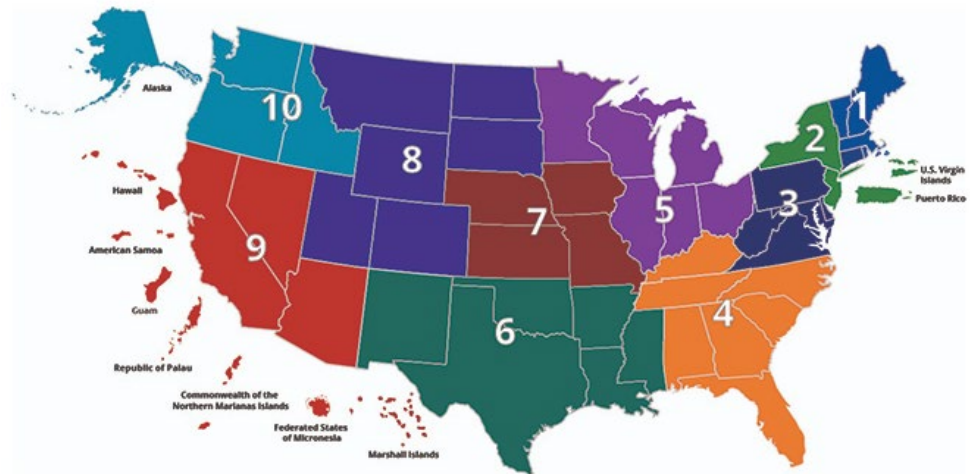
Office of the Assistant Secretary for Health

- Oversees the Department's key public health offices and programs.
- Office of Regional Health Operations - 10 regional offices

What We Do



Where We Are



Health Equity



LEADING AMERICA TO HEALTHIER LIVES

HEALTH
FOR ALL

Assure that everyone has a fair and realistic opportunity to optimize their health.

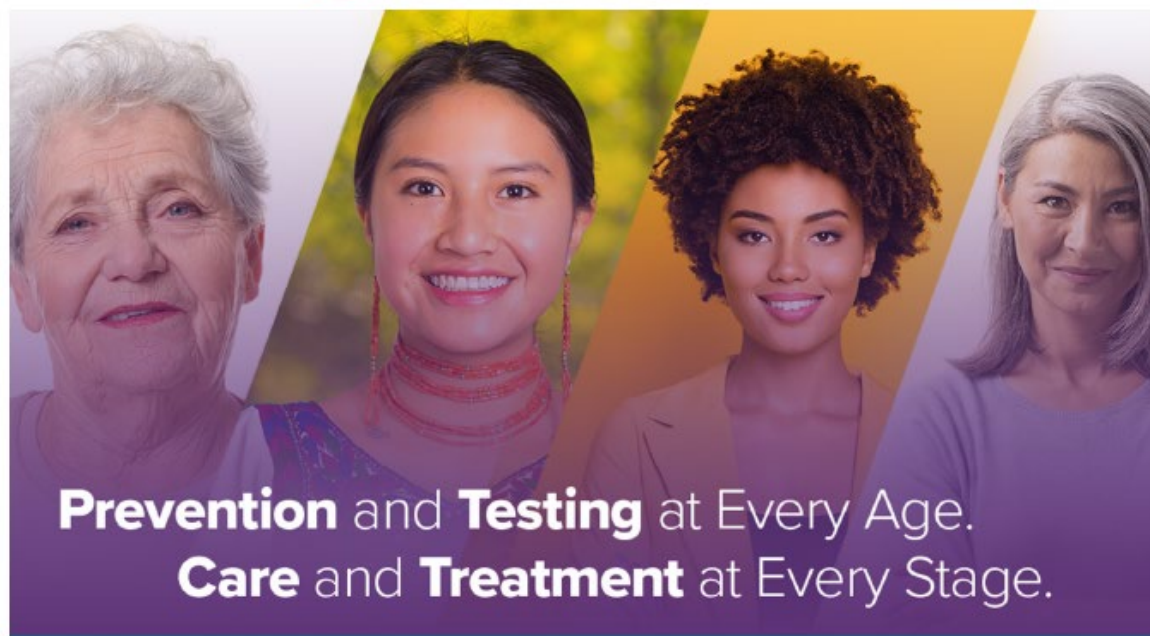
HEALTH
BY ALL

Distribute and democratize health care knowledge, capabilities, and delivery.

HEALTH
IN ALL

Prioritize health considerations in all sectors and policy areas.

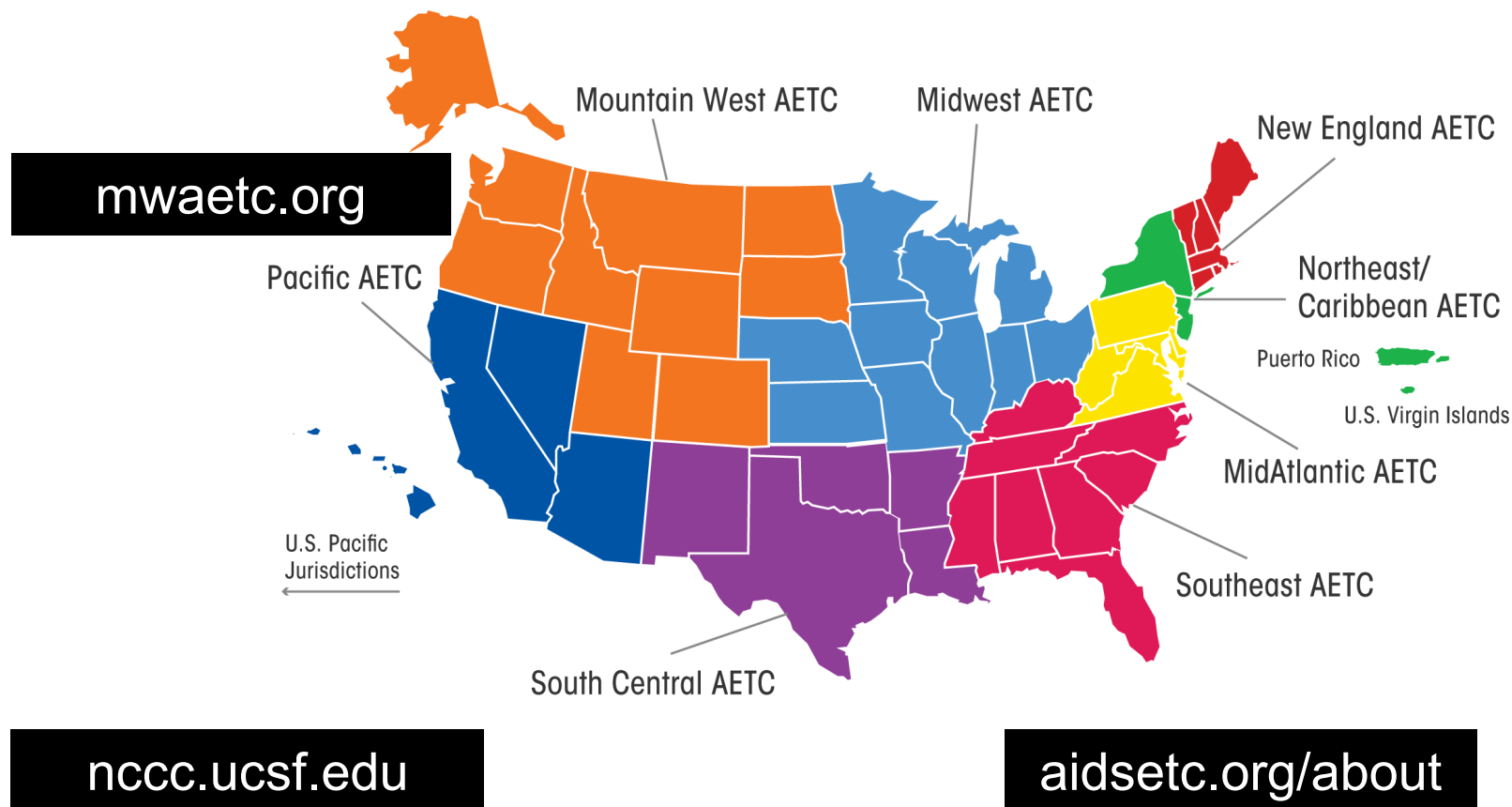
NWGHAAAD



<https://www.womenshealth.gov/nwghaad>



AETC Regional Training Centers



Continuing Education Credits

- Fill out evaluation
- Receive instructions for how to apply for continuing education credits

Panelists

- Amy Kennedy, MD, MS, AAHIVS, VA Puget Sound Health Care System; University of Washington
- Lisa Frederick, Denver Prevention Training Center
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- Antonia D'orsay, PhD, MS, MA, Borrego Health
- Leah Dirkse, M. Ed., Anaya Richie, Colorado Health Network

Women and HIV: The 10,000 Foot View

Epidemiology, Prevention, and Engagement Strategies

Amy J. Kennedy, MD, MS, AAHIVS

Acting Assistant Professor, University of Washington School of
Medicine

Director, GMS Addiction Medicine Program, VA Puget Sound
Healthcare System

Last Updated: 3/17/2022

Disclosures

No conflicts of interest or relationships to disclose

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March 10

Women & Girls

HIV/AIDS

awareness day



www.cdc.gov/hiv
1-800-CDC-INFO



Outline – Women and HIV

- Epidemiology
- Pre-exposure Prophylaxis (PrEP)
- Women who inject drugs (WWID)
 - Risks for HIV
 - Care Needs
 - Strategies for engagement



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Epidemiology of Women living with HIV

THE GLOBAL IMPACT OF HIV & AIDS



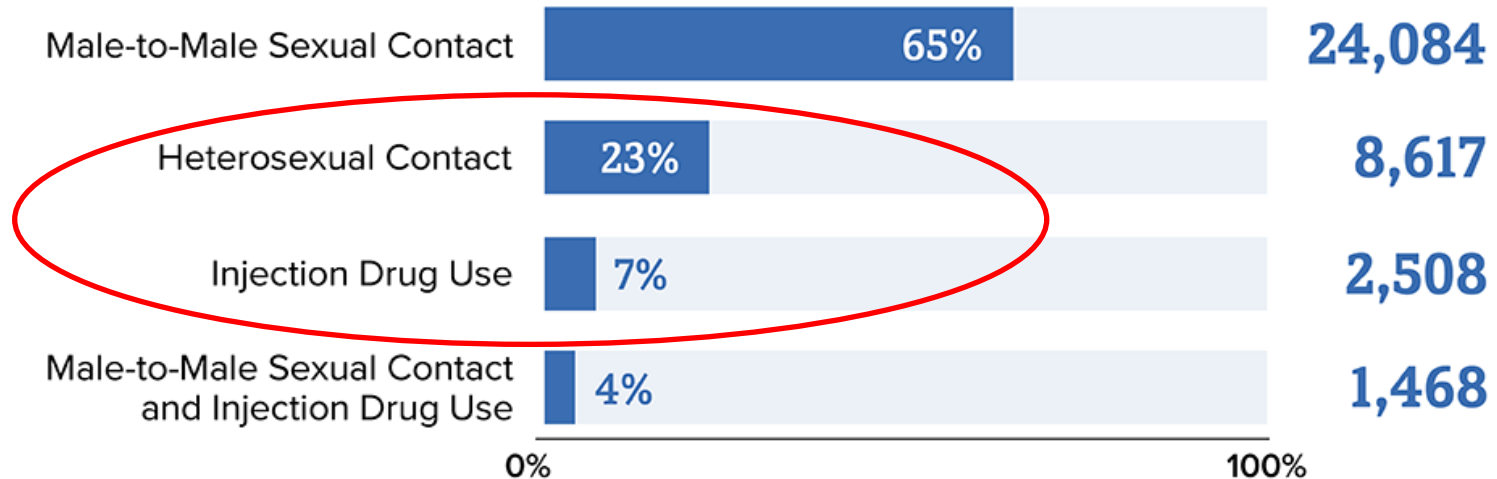
Approximately 38 million people worldwide have HIV or AIDS.



Worldwide, women and girls account for:

- 53% of all people living with HIV
- 50% of new infections

New HIV Diagnoses in the US and Dependent Areas by Transmission Category, 2019



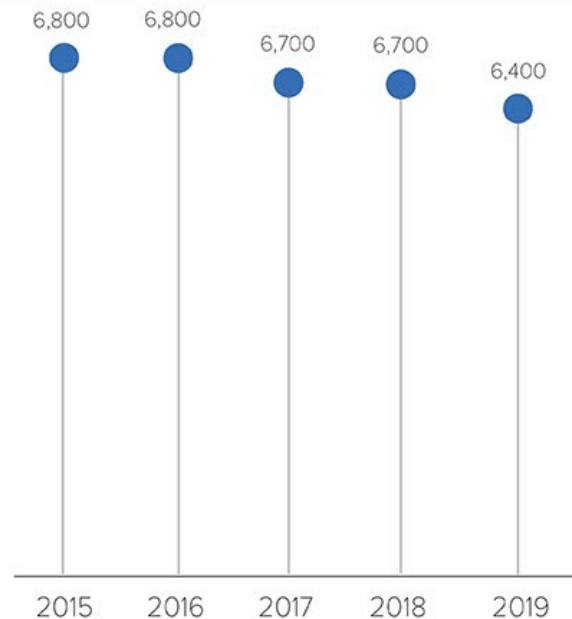
NOTE: Does not include *other* and *perinatal* transmission categories.

Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2019. *HIV Surveillance Report* 2021;32.



There were **34,800 estimated new HIV infections** in the US in 2019. Of those, 18% (6,400) were among women.

Estimated HIV Infections Among Women in the US, 2015-2019*

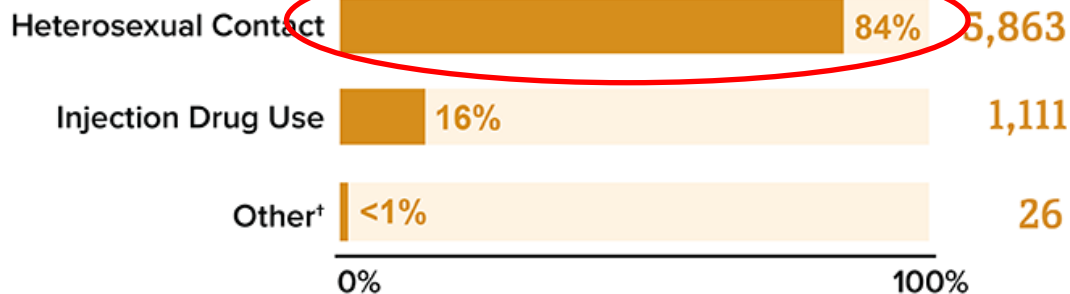


* Based on sex assigned at birth.

Source: CDC. Estimated HIV incidence and prevalence in the United States, 2015–2019. *HIV Surveillance Supplemental Report* 2021;26(1).

New HIV Diagnoses Among Women by Transmission Category in the US and Dependent Areas, 2019*

Most new HIV diagnoses among women were attributed to heterosexual contact.



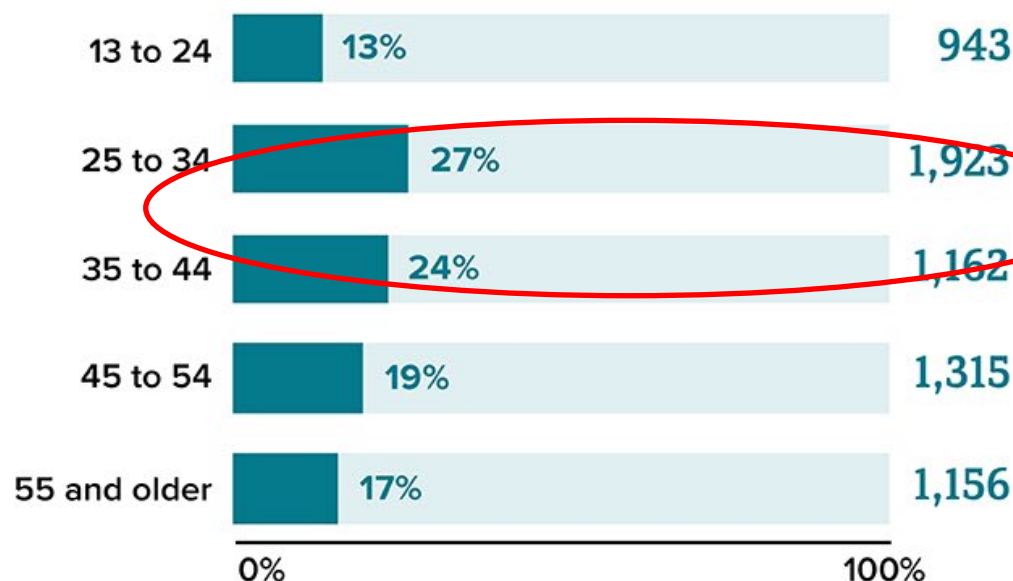
* Based on sex assigned at birth and includes transgender people. For more information about transgender people, visit CDC's HIV and Transgender People web content.

† Includes perinatal exposure, blood transfusion, hemophilia, and risk factors not reported or not identified.

Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2019. *HIV Surveillance Report* 2021;32.

New HIV Diagnoses Among Women by Age in the US and Dependent Areas, 2019*

Women aged 25 to 34 had the highest number of new HIV diagnoses.



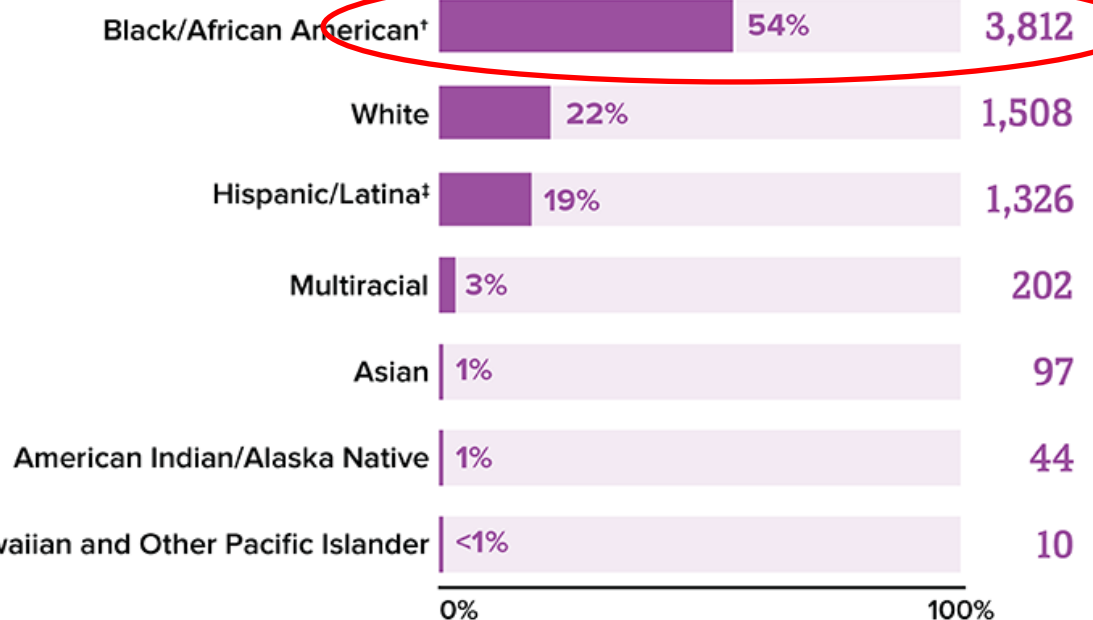
Total may not equal 100% due to rounding.

* Based on sex assigned at birth and includes transgender people. For more information about transgender people, visit CDC's HIV and Transgender People web content.

Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2019. *HIV Surveillance Report* 2021;32.

New HIV Diagnoses Among Women by Race/Ethnicity in the US and Dependent Areas, 2019*

Black/African American women continue to be disproportionately affected by HIV.



* Based on sex assigned at birth and includes transgender people. For more information about transgender people, visit CDC's HIV and Transgender People web content.

† Black refers to people having origins in any of the Black racial groups of Africa. African American is a term often used for people of African descent with ancestry in North America.

‡ Hispanic/Latina women can be of any race.

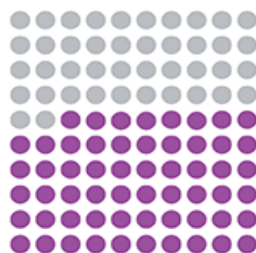
Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2019. *HIV Surveillance Report* 2021;32.

Women with Diagnosed HIV in 44 States and the District of Columbia, 2019*

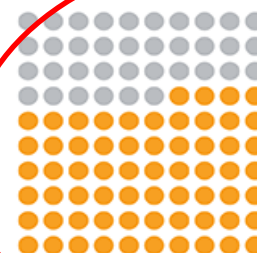
Compared to all people with diagnosed HIV, women have lower viral suppression rates. **For every 100 women with diagnosed HIV in 2019:**



76
received
some
HIV care



58
were
retained
in care[†]



64
were virally
suppressed[‡]

For comparison, for every **100 people overall** with diagnosed HIV,
76 received some care, **58 were retained in care**, and **66 were virally suppressed**.

* Based on sex assigned at birth.

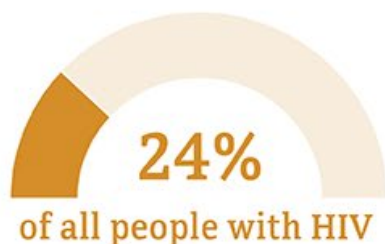
† Had 2 viral load or CD4 tests at least 3 months apart in a year.

‡ Based on most recent viral load test.

Source: CDC. Monitoring selected national HIV prevention and care objectives by using HIV surveillance data United States and 6 dependent areas, 2019. *HIV Surveillance Supplemental Report*. 2021;26(2).

Missed HIV Medical Care Appointments Among Women with Diagnosed HIV in the US, 2019*†

Staying in HIV care is important to achieving and maintaining viral suppression.



missed at least 1 medical appointment in the past 12 months

Data for transgender women are not included because the numbers are too small to report.

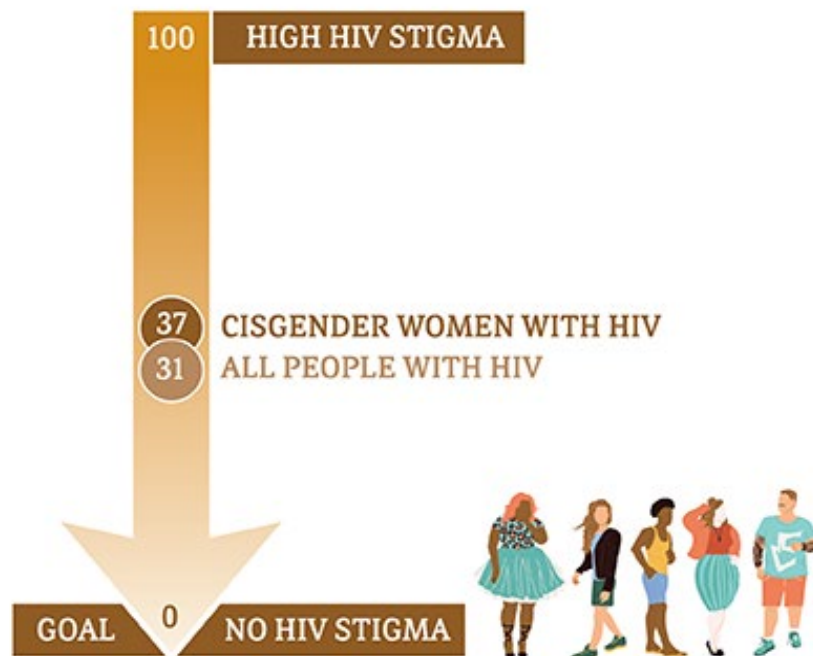
* Based on current gender identity.

† Among people aged 18 and older.

Source: CDC. Medical Monitoring Project.

Median HIV Stigma Score Among Women with Diagnosed HIV in the US, 2019*†

Women with diagnosed HIV experienced HIV stigma.



Data for transgender women are not included because the numbers are too small to report.

Median HIV stigma scores are presented based on a ten-item scale ranging from 0 (no stigma) to 100 (high stigma) that measures personalized stigma, disclosure concerns, negative self-image, and perceived public attitudes about people with HIV.

* Based on current gender identity.

† Among people aged 18 and older.

HIV Prevention in Women

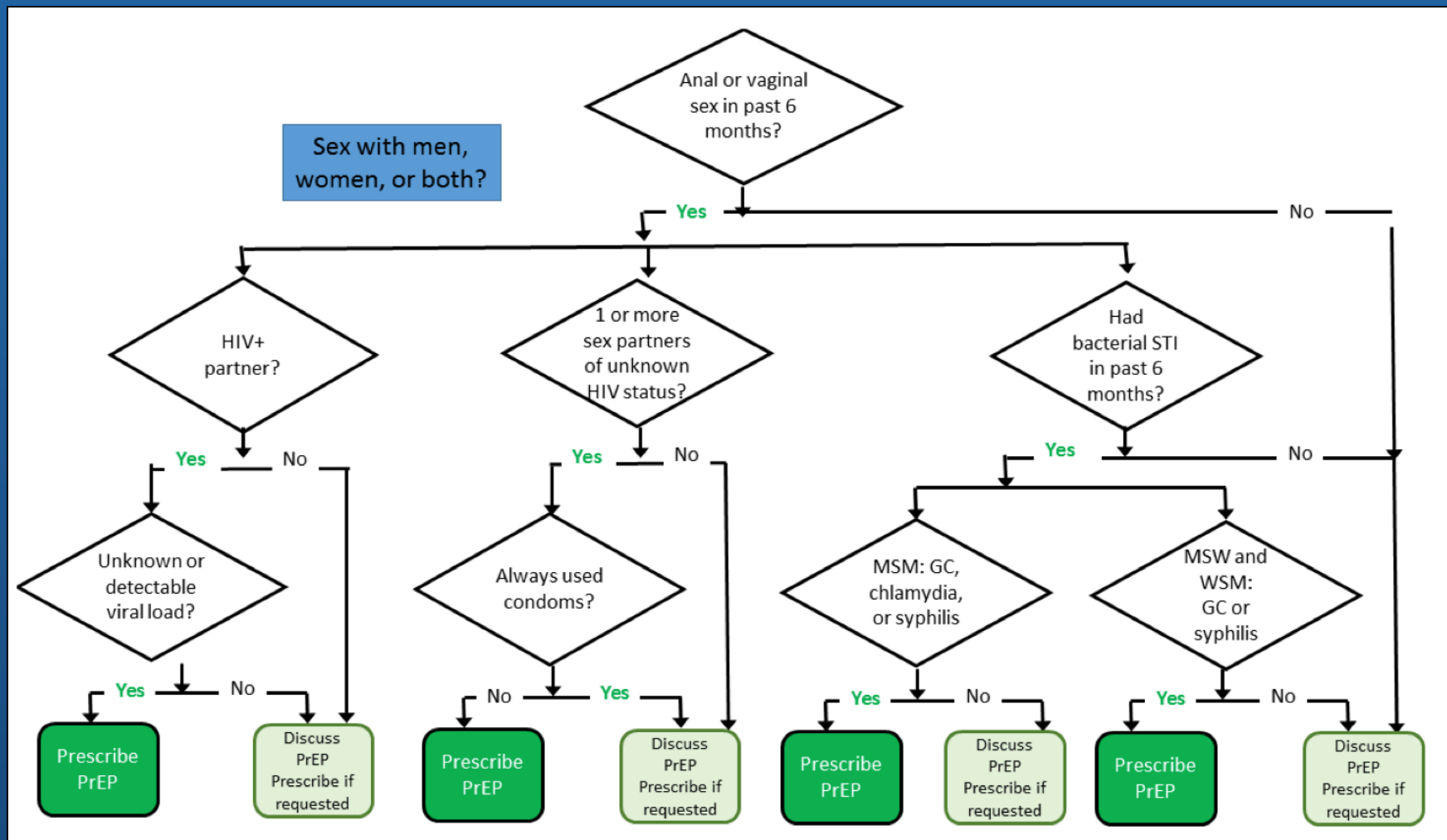
Pre-Exposure Prophylaxis (PrEP)

CDC Indications for PrEP

	HIV+ Partner	Recent Bacterial STI	Multiple Sex Partners	Sex Without Condoms	Exchange Sex	Sharing injection equipment
MSM	✓	✓	✓	✓	✓	
Heterosexual M/W	✓	✓	✓	✓	✓	
PWID* <small>*PWID = person who injects drugs</small>	✓	✓	✓	✓	✓	✓

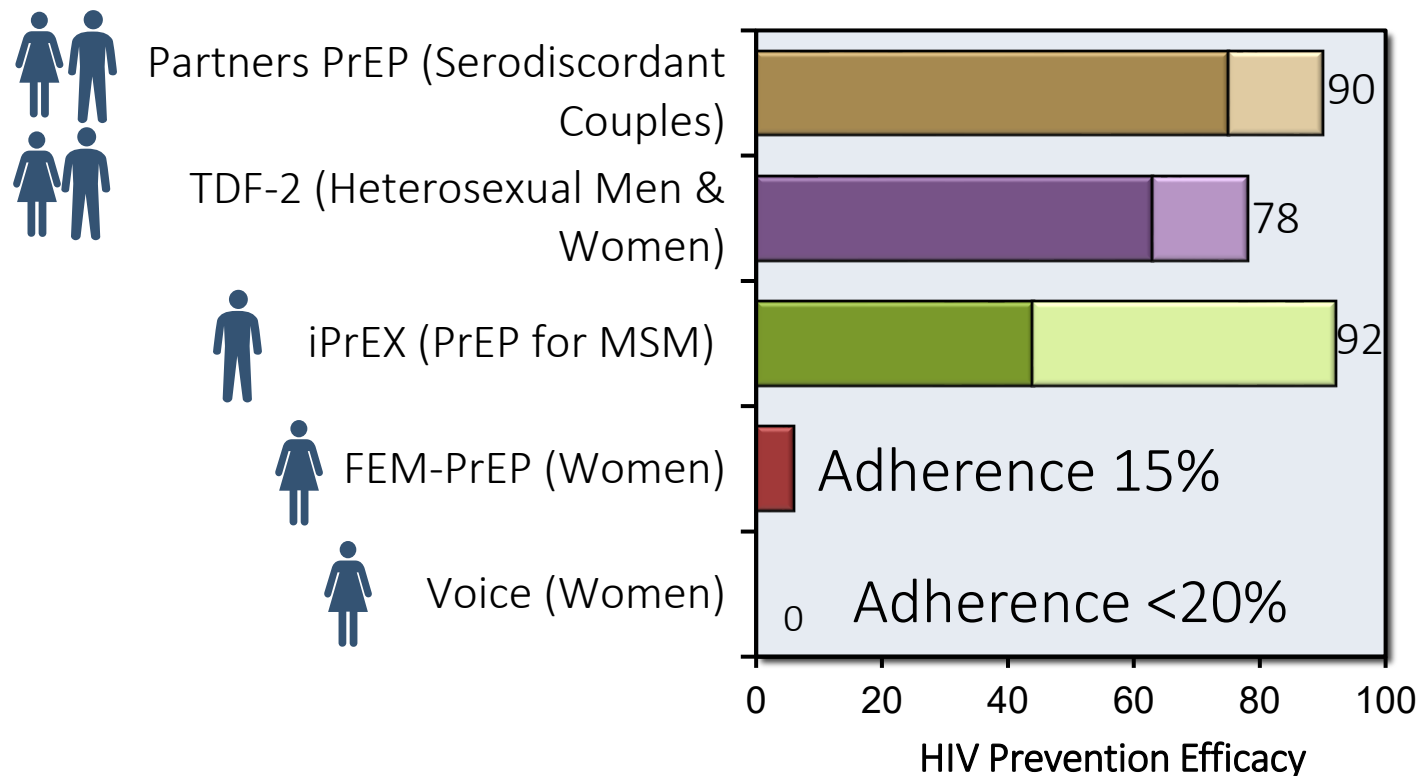
Anyone at risk for HIV

CDC Indications for PrEP: Sex



Estimated Protection in Adherent Participants

All Participants (Dark Bar) vs Adherent Participants (Light Bar)



ONLY



of women who could benefit from PrEP were prescribed PrEP in the US in 2019.

- Less than 0.5% of women undergoing HIV testing are prescribed PrEP
- PrEP was not prescribed for >13,000 women diagnosed with gonorrhea or syphilis

ONLY



of women who could benefit from PrEP were prescribed PrEP in the US in 2019.

- 96% of individuals using commercial insurance taking PrEP were men
- White individuals were 7 times more likely to be on PrEP than black individuals and 4 times more likely than hispanic individuals.
- DISCOVER PrEP (TAF/FTC) excluded cisgender women

DISCOVER Trial: TAF/FTC for PrEP

- Design: Multicenter non-inferiority RCT of TDF/FTC vs TAF/FTC
- Population: 5,387 MSM and TGW at high risk of HIV
- Primary Endpoint: HIV incidence
- Results
 - TAF/FTC non-inferior to TDF/FTC
 - Bone: Less decrease in BMD at hip and spine
 - Renal: Less renal injury

Only MSM & TGW in the study population; cannot extrapolate to persons having receptive vaginal sex or PWID

Alternative to daily PrEP: IM Cabotegravir

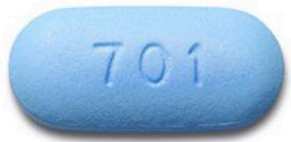
- Design: Multicenter, double blind, randomized control trial
 - Injectable cabotegravir q8w + placebo VS daily TDF/FTC + placebo injection
- Population
 - HPTN 083: 4570 MSM and TGW from 43 sites across 3 continents
 - HPTN 084: 3224 cisgender women ages 18-45 in sub-Saharan Africa
- Primary Endpoint: HIV infection
- Result
 - HPTN 083: IM Cabotegravir non-inferior to TDF/FTC
 - HTPN 084: IM Cabotegravir is superior to TDF/FTC for PrEP

Not studied in PWID

Which medication should I prescribe for daily PrEP?

TDF/FTC
(Truvada)

FDA approval: 2012



19 mm



EFFECTIVENESS*

MSM & TRANS WOMEN

HETEROSEXUALS

PWID



12.5 mm

TAF/FTC
(Descovy)

FDA approval: 2019

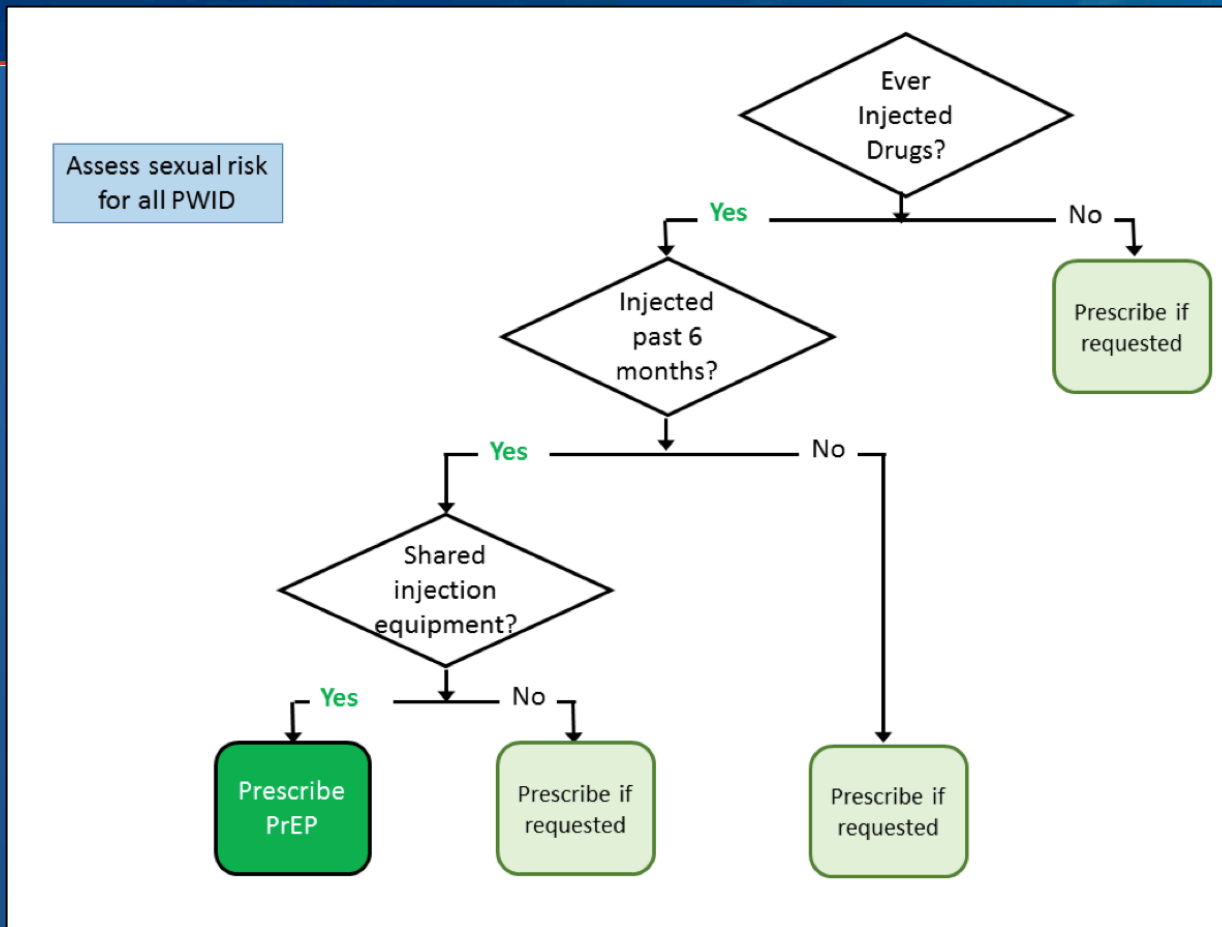


Cabotegravir

LONG-ACTING
INJECTABLE PREP

Women who inject drugs (WWID)

CDC Indications for PrEP: Injection Drug Use



- TDF/FTC remains the only guideline recommended medications for HIV prevention in PWID

Injection Behaviors Among Women Who Inject Drugs in 23 US Cities, 2018

Sharing needles, syringes, and other drug injection equipment puts people at high risk for HIV and other infections.

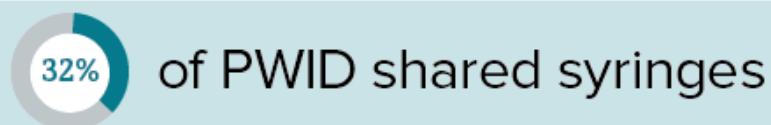


* Based on current gender identity.

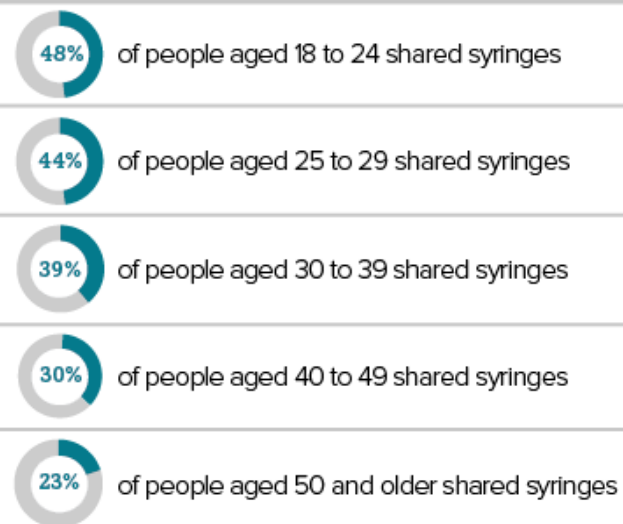
Source: CDC. HIV infection risk, prevention, and testing behaviors among persons who inject drugs—National HIV Behavioral Surveillance: injection drug use, 23 U.S. Cities, 2018. *HIV Surveillance Special Report 2020*; 24.

Syringe Sharing Among People Who Inject Drugs in 23 US Cities, 2018

Sharing needles, syringes, or other drug injection equipment puts people who inject drugs (PWID) at high risk for HIV and other infections.



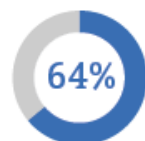
Syringe sharing is more common among young people.



Barriers to Care

Selected Characteristics Among PWID With HIV in 23 US Cities, 2018

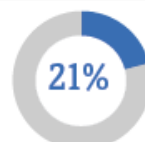
Social and economic factors may limit access to HIV treatment services among PWID with HIV.



reported being homeless



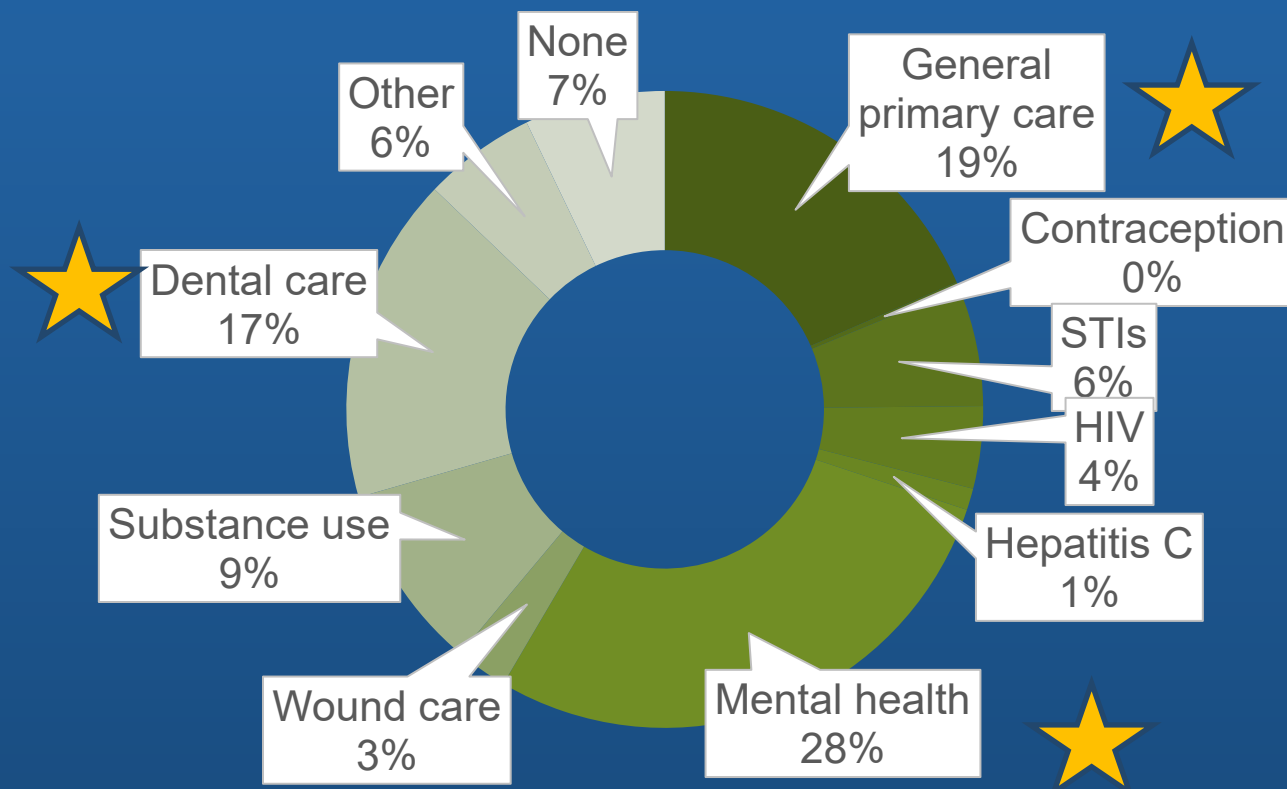
reported being incarcerated



reported having no health insurance

What is your most important medical concern right now?

- Among women who exchange sex



Strategies for engagement

- There is relatively few data on concrete strategies to improve PrEP uptake and sustained use among WWID
- Many novel strategies, such as “home PrEP,” “tele-PrEP,” community pharmacy-based PrEP, and “on-demand PrEP” many not be well suited towards WWID.

Strategies for engagement

- Integrating PrEP in SSP for women
 - Philadelphia, WWID
 - 95 Women (70% transactional sex, 63% unhoused, 46% shared needles)
 - 63 Women received FTC/TDF, 43 at 12 weeks, 23 at 24 weeks
- Co-located, low barrier services
 - Seattle, unhoused women
 - 76 women, 41 seen at SHE clinic
 - 49% ↑ to be prescribed PrEP
 - Only 5% sustained on PrEP

Table: Utilization of HIV harm-reduction services among 76 women accessing day-shelter services in north Seattle, by care at SHE Clinic

Characteristics	SHE Clinic patients (n=41)	SHE Clinic non-adopters (n=35)	p-value
Recent STI screening	34 (83)	22 (63)	0.03
Recent STI treatment	13 (32)	3 (9)	0.06
Opioid replacement*	21/36 (58)	3/22 (14)	0.001
PrEP prescription*	18/37 (49)	0/22 (0)	<0.001

*calculated for those eligible for intervention (OUD or HIV negative)

What can we learn from HIV treatment adherence strategies among WWID?

Systematic review of HIV treatment adherence research in PWID, which included 20 studies

Factors enabling ART adherence included:

- Substance use treatment, including MOUD
- Self-efficacy, empowerment and social support
- Stable housing
- Health insurance
- Trust in providers and good patient-provider relationships
- Accessibility of health care services
- Directly administered ART

Looking forward

- Additional work is needed to integrate PrEP into low-barrier services for WWID, including drug treatment programs, SSPs, other community-based organizations, and primary care
- More research is needed to identify successful strategies to improve both uptake AND sustained use of PrEP among WWID
- Cabotegravir has the potential to improve sustained use of PrEP, particularly among WWID with concurrent sexual risk factors for HIV

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Black Women's Health and Wellness; Engage. Empower. Educate.

Lisa Frederick
Consultant, Public Health Institute at Denver Health
Co-Director, Black Women's Learning Institute

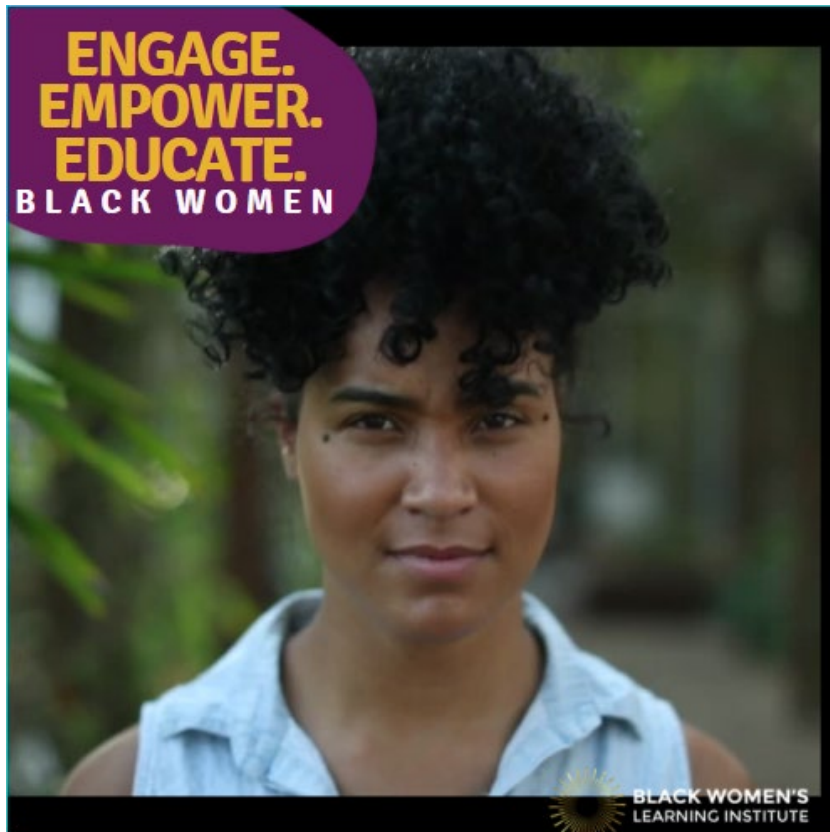
Last Updated: 7/13/21



Disclosures

“No Conflicts of Interest or Relationships to Disclose.”

Born out of reflection and need



COVID-19

Racial Justice
Movement


Racial & Health
Equity

Continued Health
Disparities for
Black women


Real
Conversations
that Move Black
Women Forward

Complexities of
Black Women's
Health Issues

Here's what we did...

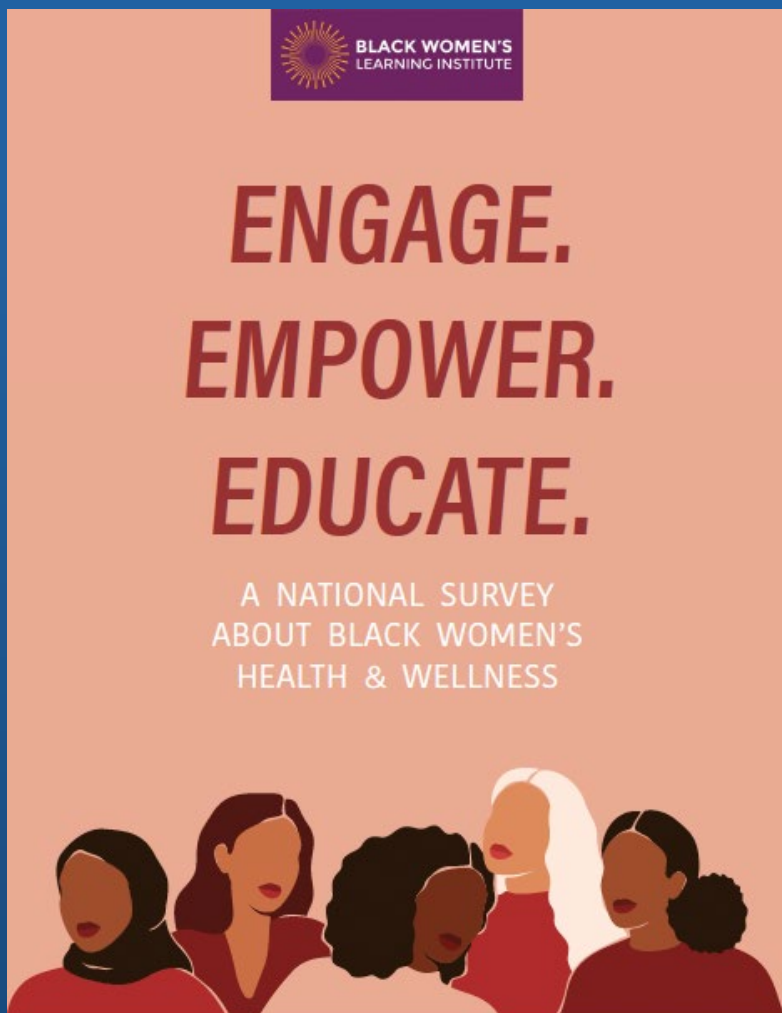


We did a national survey
on **Black Women's**
health & wellness...



BLACK WOMEN'S
LEARNING INSTITUTE

Who took the survey?



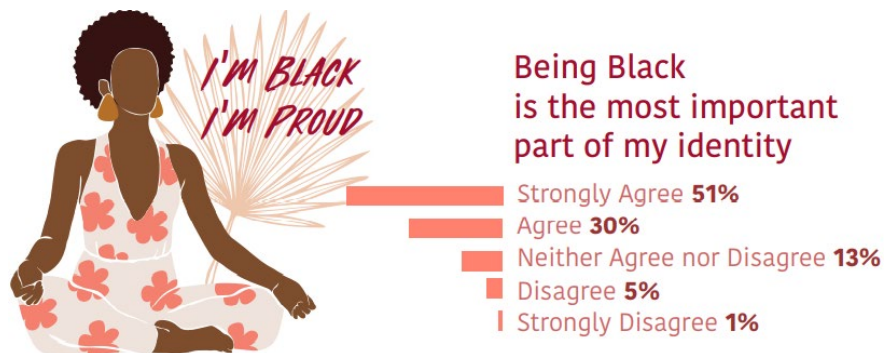
- 1600 - sample size
- 1039 - self identify as Black women
- 83% - in southern states
- 17% - northern states
- 33% - 18-29
- 32% - 30-44
- 24% - 45-60
- 11% - >60

Here's what we found...



- We learned that COVID-19 serves as a window into how people view the government, public health, and pharmaceutical companies.
- COVID-19 is both a reflection and a driver of suspicion among Black women and disengagement in care including HIV prevention, treatment and care.

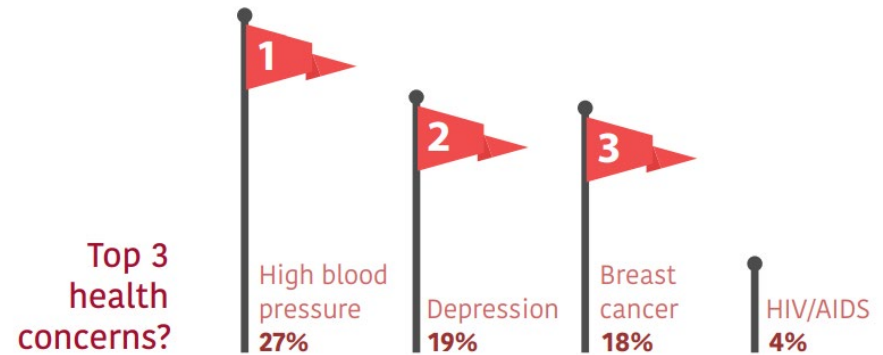
Here's what we found...



- It is imperative for public health practitioners (clinical and non-clinical) to understand the needs of Black women from a lens of intersectionality, taking into consideration the multiple identities to which Black women subscribe, and the social drivers that impact their health.
- This survey made it clear that Black women feel that they are not heard, and not receiving care that reflects a clear understanding of their lived experience and historical underpinnings of their relationship with the US healthcare system.

Here's what we found...

- Despite a disproportionate burden of HIV disease among Black women, so few in the survey identified HIV/AIDS as a top health concern
- According to the CDC, Black women account for nearly 60% of new HIV infections in the US, despite making up less than 15% of the female population.¹



Here's what we found...

**4 out of 10 women
reported NEVER
getting tested for
HIV**



**BLACK WOMEN'S
LEARNING INSTITUTE**

Here's what we found...

Are you familiar with a once daily pill called PrEP which prevents HIV?

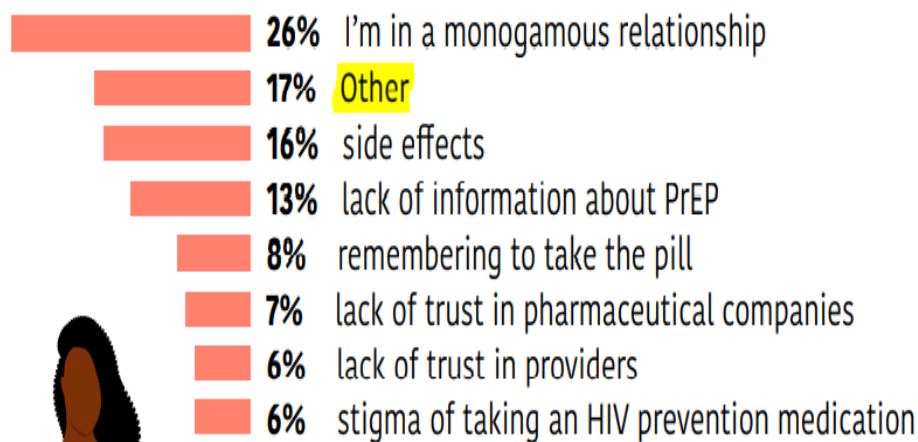


Here's what we Found.....

Would you consider or are you already taking PrEP?



What are your concerns about taking PrEP?
(for those who said “maybe” or “no”)



Survey and Listening Session Recruitment

BLACK WOMEN'S LEARNING INSTITUTE

We care what you think.

Join BWLI to fully engage and expand on answers, thoughts on the issues that relate to Black women in your region.

Listening Session
SATURDAY, JUNE 22 2-4pm
Free Event - Refreshments
Saturday, July 10, 6-3pm
Out of The Box
9148 Scollard Avenue
Baton Rouge, LA 70807

JOIN US
Listening Session
ENGAGE. EMPOWER. EDUCATE.
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Host
Sashika Baunchand
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A CONVERSATION ABOUT BLACK WOMEN'S HEALTH
WEDNESDAY OCTOBER 13, 2021
EVENT STARTS AT 7PM CST/8PM EST
JOIN US ON [f](#) [LIVE](#)
@omgyouthconference

Speakers:
Hanna Tessema
Co-Director
@blkwomenlearning
Lisa Frederick
Co-Director
@blkwomenlearning
Kimberley Alexander
Health & Wellness Expert
@mobbsubunit
Nicolette Gordon
Southern University
Area Agent for The Agricultural Research and Extension Center
@farmhousekissy

MOBB UNITED

BLACK WOMEN'S LEARNING INSTITUTE

JOIN US For Lunch
AND AN IMPORTANT CONVERSATION ON WOMEN'S HEALTH

THURSDAY SEPTEMBER 30, 2021
EVENT STARTS AT 11:30AM
FLUX EVENT SPACE
1615 W. MAIN ST. LOUISVILLE, KY 40203

Host
Terra Leavell
President & CEO
Black Community Development Corporation
@blkwomenlearning · www.bwli.org

To register and for more details
Email Terra Leavell at: Tleavell@blackcdick.org

YOU'RE INVITED
TO A PRIVATE LISTENING SESSION

BLACK WOMEN'S LEARNING INSTITUTE
CONVERSATION ON BLACK WOMEN'S HEALTH

THURSDAY OCTOBER 14, 2021
EVENT STARTS AT 5:30PM

Sponsored By:
Black Women's Learning Institute
@blkwomenlearning
www.bwli.org

Host
Shawn Moore
Black CDC
Grants Manager/
Operations Specialist

To register and for more details
Email Terra Leavell at: Tleavell@blackcdick.org

BLACK WOMEN'S LEARNING INSTITUTE

Engage. Empower. Educate.

LAST CHANCE!!!
to take the survey to improve Black women's health.

COMPLETE SURVEY

www.bwli.org

ENGAGE. EMPOWER. EDUCATE.

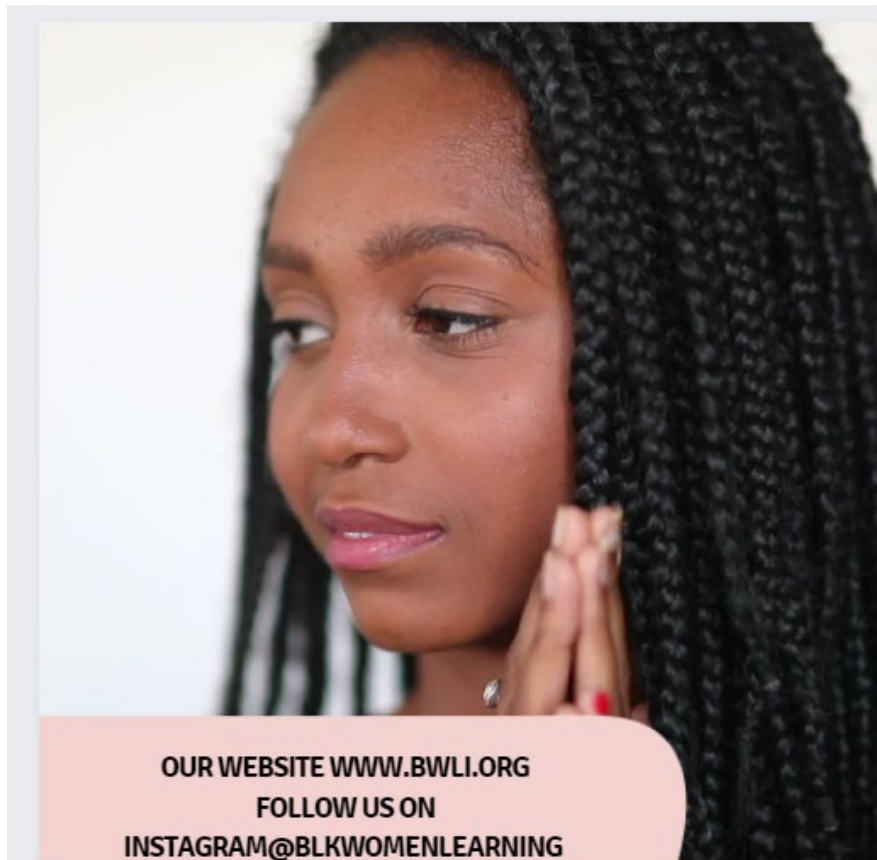
BLACK WOMEN'S LEARNING INSTITUTE

CALLING ALL BLACK WOMEN
Help us improve our health & wellness by completing the survey
ENGAGE. EMPOWER. EDUCATE.

Next Up...

- **White Paper:** BWLI will write and disseminate an in-depth report sharing relevant data from the EEE survey which points to a need for anti-racist clinical care for Black women.
- **Publications:** BWLI will write and submit articles for publication in peer reviewed journals (TBD) based on the findings from the EEE survey including recommendations for improved health outcomes for Black women around accessing HIV prevention, treatment and care services.
- **HIV Prevention Campaigns:**
 - In collaboration with two local HIV care clinics, BWLI will develop and test messaging for two targeted health literate HIV prevention campaigns for dissemination via social media focused on Black women in Louisville and Baton Rouge.
 - Messages will be developed and tested through focus groups in each city

We Need Your Voice and Feedback!!



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Questions?

Resources

- National Women and Girls HIV/AIDS Awareness Day
<https://www.womenshealth.gov/nwghaad>
- Mountain West AIDS Education and Training Center
www.mwaetc.org
- Find HIV Testing Sites and Care Services at www.HIV.gov
- National HIV Curriculum can be found at www.hiv.uw.edu
- National HIV/AIDS Strategy (2022-2025) can be found at <https://www.hiv.gov/federal-response/national-hiv-aids-strategy/national-hiv-aids-strategy-2022-2025>

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