Ending the HIV Epidemic among Diverse Populations of Women

Bisola Ojikutu MD MPH
Division of Global Health Equity, Brigham and Women's Hospital
Infectious Disease Divisions, Brigham and Women's and Massachusetts General Hospital
Harvard Medical School
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Overview

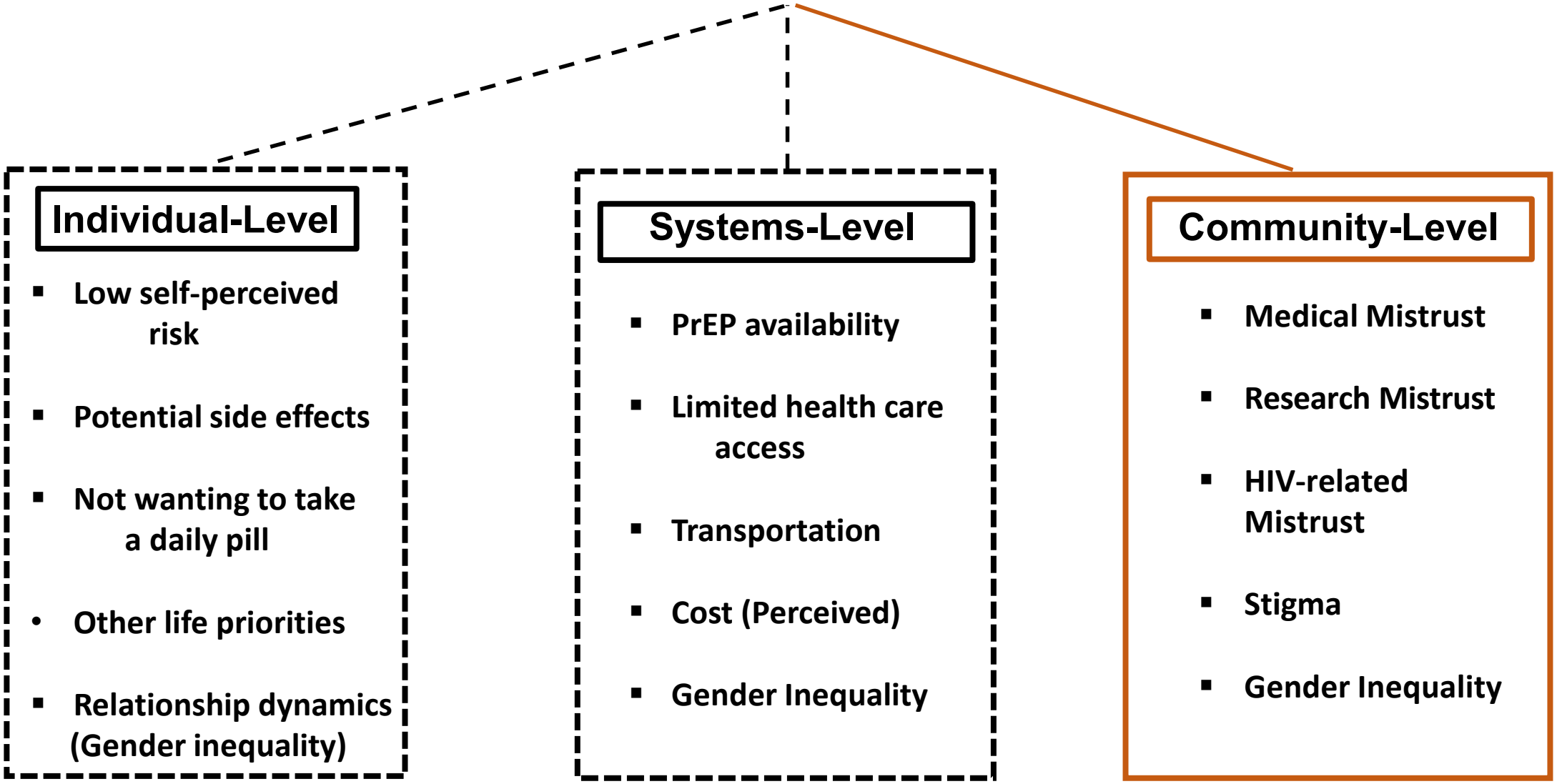
- Challenges regarding PrEP uptake

  → ***Community-level***

  → ***Psychosocial***

- Who are we missing?
- Future research needs

PrEP Uptake Among Women of Color



Goparaju L et al. 2017; Ojikutu BO et al. 2018; Willie TC et al. 2019; Bradley E et al. 2019; Amico KR et al. 2019; Tekeste M et al. 2019

PrEP Awareness *versus* Willingness

Authors (Year)	Population	PrEP Awareness (%)	PrEP Willingness (%)
Rutledge R et al (2018)	125 women in CJS* 59% White/22% Black Connecticut	25%	90%
Patel AS et al (2019)	225 women - - 72 PrEP eligible 83% Black/16.9% non-Black Southern US	11%	77%
Carley T et al (2019)	144 women 62% Black/31%White GYN clinic in Louisiana	44%	38%

*Criminal Justice System

Medical Mistrust

"Social inequality drives mistrust; Mistrust drives disparities"

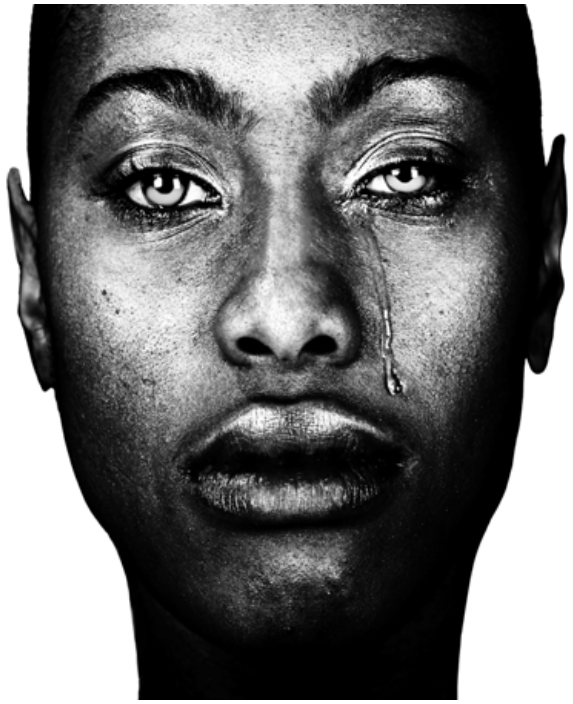
***Types of Medical Mistrust*:**

- Health care provider-level
- Clinic-level
- System-level: mistrust in the health care system or the government
- Research-related
- **HIV-Related Mistrust***:* holding certain beliefs regarding HIV ("conspiracy beliefs")

- Highest among Black and Latinx individuals

- Associated with lower ART adherence, decreased PrEP willingness, higher HIV testing

Bogart L.M. et al (2020) Medical Mistrust, Discrimination and the Domestic HIV Epidemic. In B.O. Ojikutu & V.E. Stone (Eds), *HIV in US Communities of Color*. Springer.
Jaiswal et al. Behav Med. 2019; Pellowski JA et al. Journal of Health and Psychology. 2017; Bogart LM et al. JAIDS. 2010; Ross MW et al. JAIDS. 2006; Tekeste M et al AIDS Behav. 2019

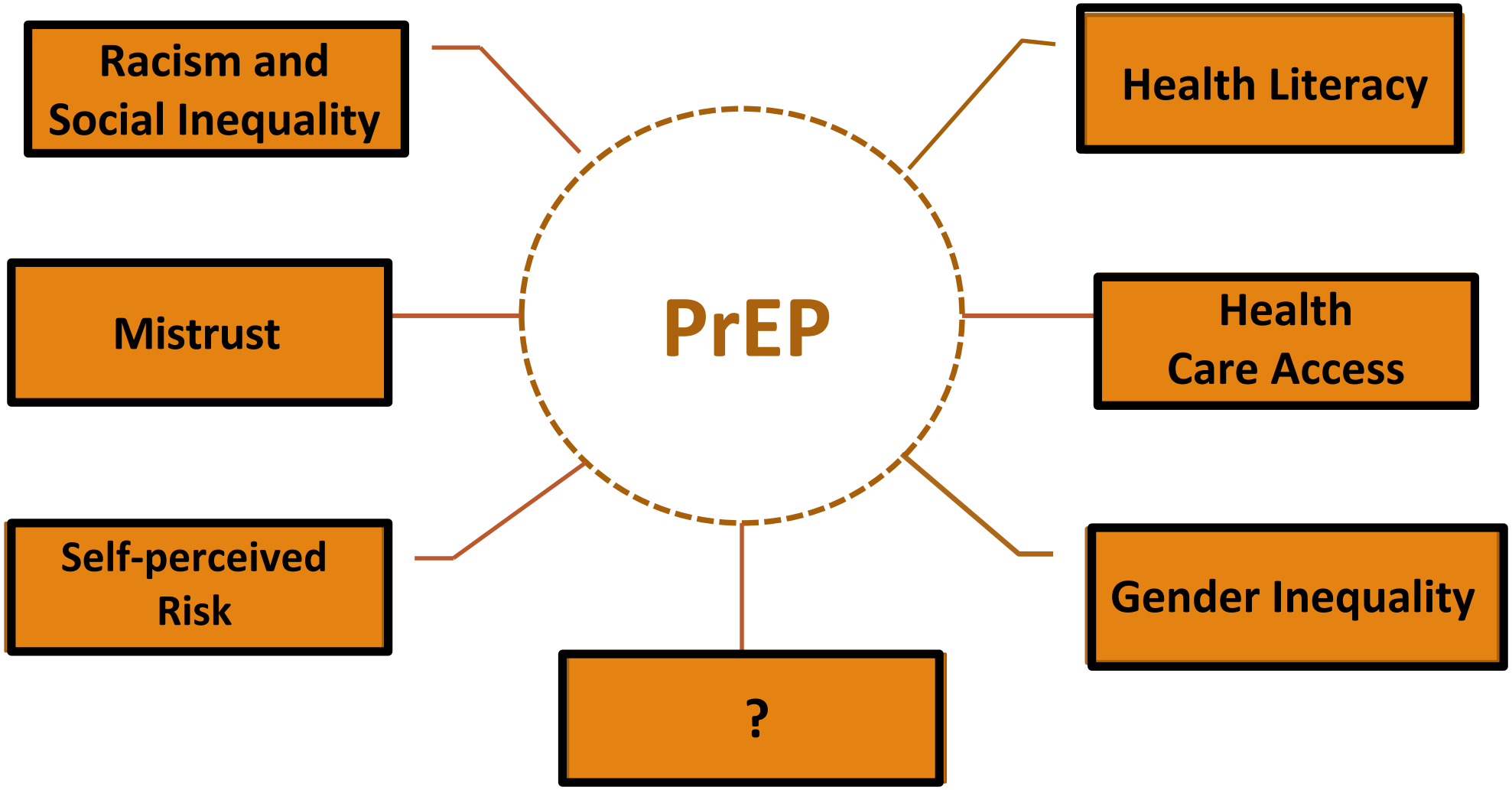


Intimate Partner Violence (IPV) Gender Inequality & HIV

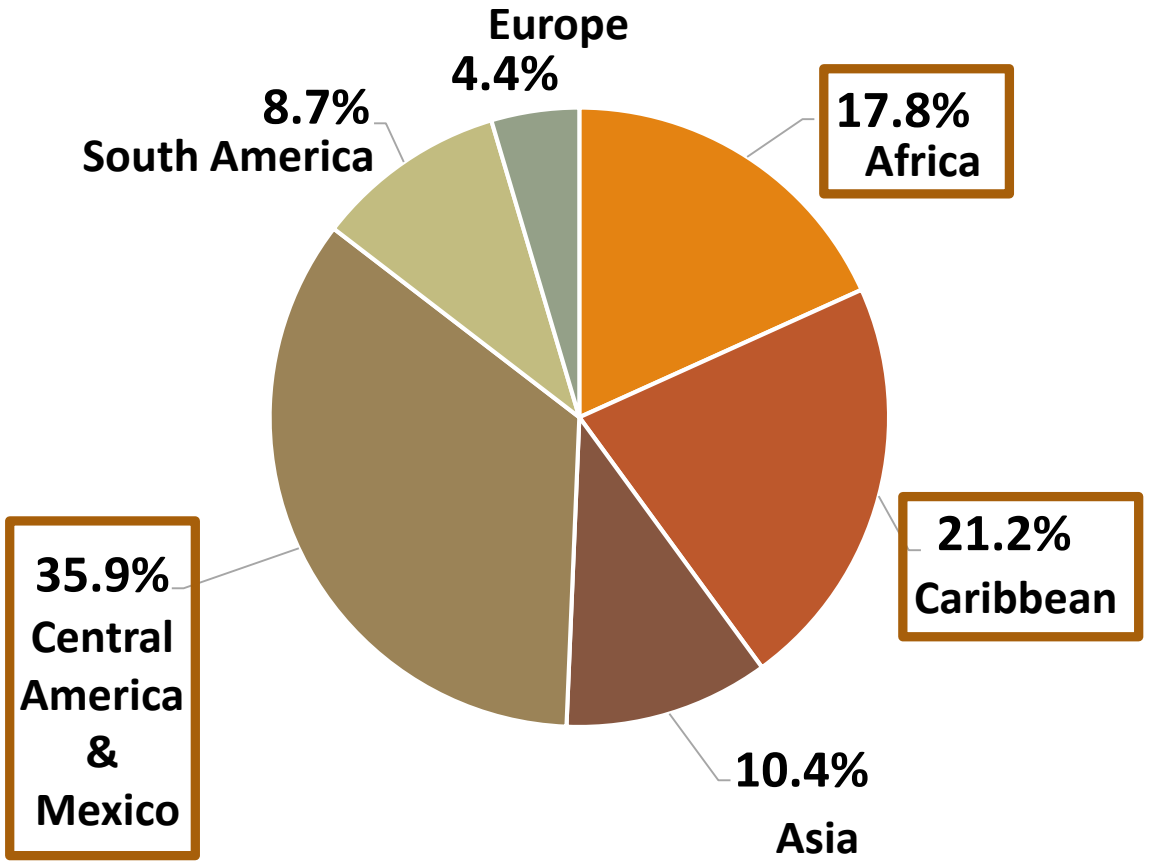
- ❑ Gender inequality is associated with IPV
- ❑ Women of color are more likely to experience IPV
- ❑ IPV increases risk of HIV acquisition
- ❑ Women who have experienced IPV may be ***more willing, but IPV is a barrier*** to PrEP use
- ❑ PrEP guidelines?

Willie TC et al. 2020; Stockman J et al. 2019; Li Y et al. 2014; Roberts ST et al. 2016

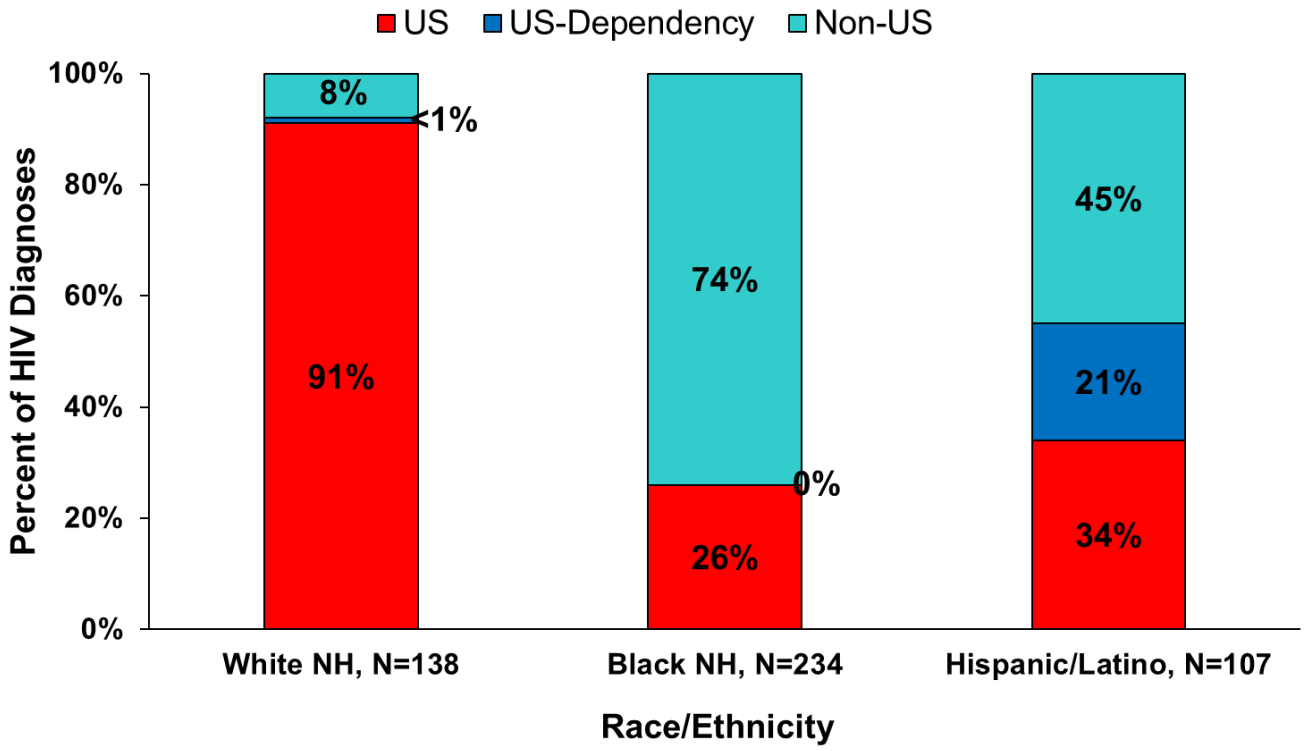
Complex Drivers of PrEP Utilization among Women of Color



Nationally: Immigrants Diagnosed with HIV by Region, 2010-2014
17.2% of Total (36,324): 26.7% Female



Massachusetts: Women Diagnosed with HIV Infection Within the Years 2015-2017, by Race/Ethnicity and Place of Birth
36% of the Total



Kerani R et al. CROI 2017. Abstract #851

Data Source: MDPH HIV/AIDS Surveillance Program, Data as of 01/01/19

Metropolitan Statistical Areas with the Largest Number of non-US Born Individuals Living with HIV 2010-2014

Kerani R et al. CROI 2017. Abstract #851

National Data:
HIV Among Black Individuals in the US
US versus Non-US Born

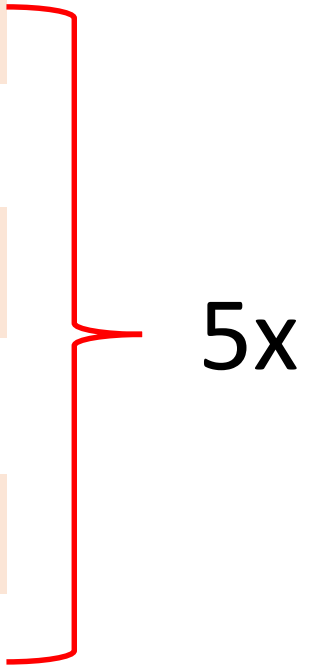
	US Born	Non-US Born
Gender (new diagnoses)	>Male	>Female
Risk Category (Men)	Majority MSM	Majority Heterosexual
Highest Annual Rate (2008-2014)	MSM	African Women
Diagnoses Trend	Largest decline among women	Smallest decline among women
Late Diagnoses*	26%	37%

*AIDS classification ≤ 3 months after HIV diagnosis

Demeke HB et al. J Immigr Minor Health. 2018 Jan 27.
Johnson AS et al. Public Health Rep. 2010 Jul-Aug;125 Suppl 4:61-9.

Annual HIV Diagnosis Rates, 2014
per 100,000 Population

African-born women	100.5
US-born Black men	72.8
African-born men	51.3
Caribbean-born men	40.6
Caribbean-born women	31.8
US-born Black women	19.1



Demeke HB et al. J Immigr Minor Health. 2018

Non-US Born Individuals and HIV

- ***Immigration is a social determinant of health***
  - Language discordance, lack of familiarity with the health care system, poverty, and fear
  - The Ryan White HIV/AIDS Program covers any HIV-infected individual in need, regardless of immigration status

- ***Women***
  - High rates of HIV-stigma, low rates of HIV knowledge
  - Gender inequality, IPV
  - Once in care: mental health (depression/PTSD), status non-disclosure, isolation, quality of life concerns

Page LC et al. 2009; Ojikutu BO et al. 2013 ; Ojikutu BO et al. 2014; Cyrus E et al. 2017; Ojikutu BO et al. 2018; Kim H et al. 2019

PrEP Use among non-US born Women

- **Are non-US born individuals at risk here in the US?**
  - Constructed a national HIV transmission network for all individuals diagnosed in the US from 2001-2013 (genetically similar viruses)
  - **38%** of transmission partners of female non-US born individuals were born in the US
  - **Conclusion**: A significant proportion of newly reported HIV infections among non-US born women occurred after immigrating to the United States.

Little data about PrEP barriers and uptake among at risk non-US born women

Valverde EE et al. JAIDS. 2017

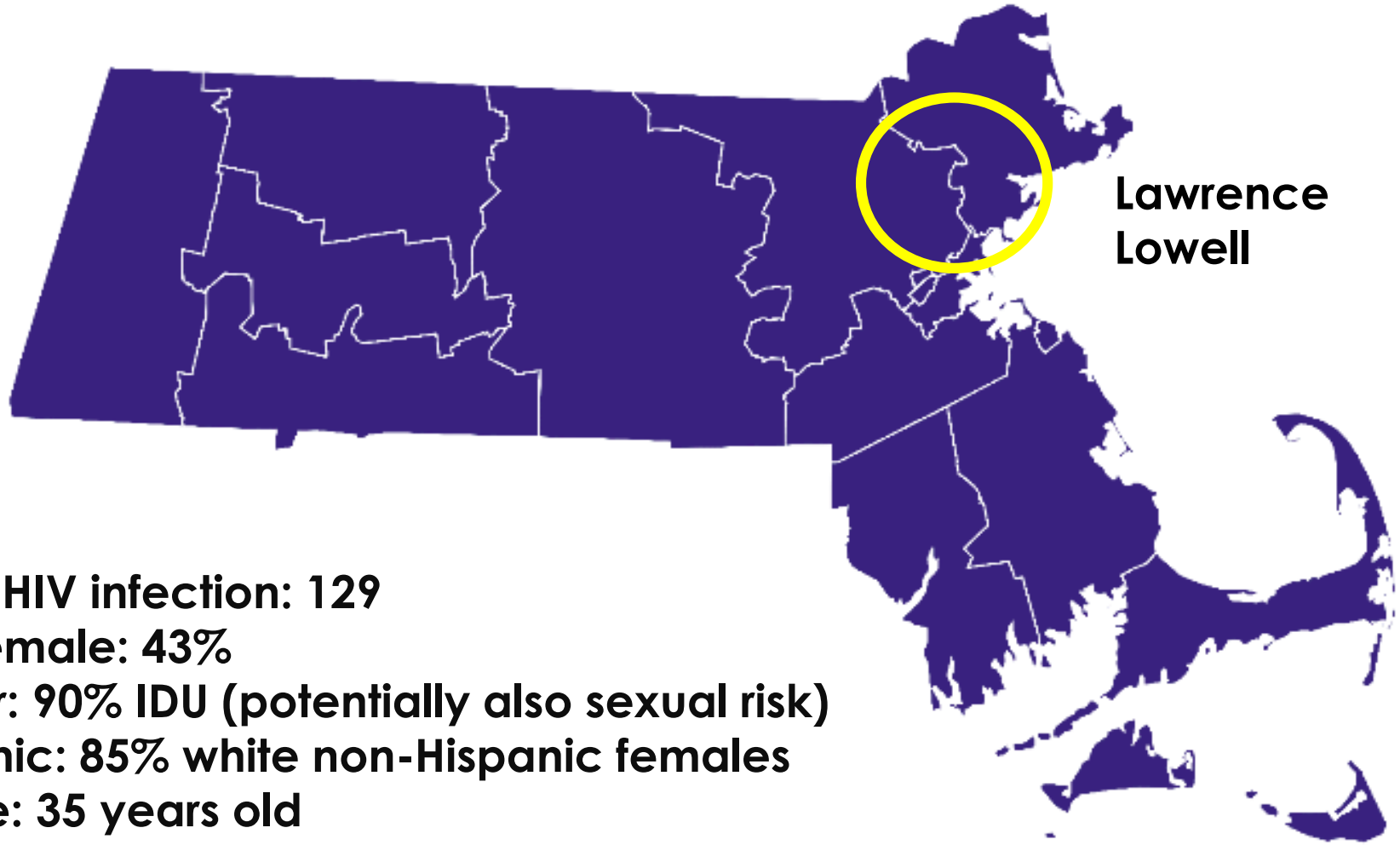
Tulumbe! or "Let's Engage": Academic-Community-Department of Public Health Partnership

MISSION: To build a sustainable partnership that considers the contributions of <u>patients, community members, and researchers</u> to reduce the impact of HIV among African immigrants

Listed as the primary strategy to address HIV among non-US born individuals in the MA State Comprehensive Plan 2017-2021

Funding Source: Patient Centered Outcomes Research (PCORI) funded, 5136253-014

HIV Cluster Investigation among Injection Drug Users



Total new HIV infection: 129
Percent female: 43%
Risk factor: 90% IDU (potentially also sexual risk)
Race/ethnic: 85% white non-Hispanic females
Mean age: 35 years old
HCV infection: 90% current or past

Cranston K et al. MMWR Morb Mortal Wkly Rep. 2019.

Women Who Use Drugs (WWUD)

- More than 12 million women reported illicit drug use in the past month and have increased HIV risk
  - *PrEP works for women who inject drugs*: Bangkok Tenofovir Study
    - 482 women
    - 50% reduction in HIV incidence; 79% reduction among women (high adherence)

- But are they willing to use it?
  - 755 WWUD
  - 21% aware of PrEP
  - 60% willing to use PrEP

Choopanya K et al. Lancet. 2013
Zhang C et al. AIDS Behav. 2019

Women Living with HIV

- *Perspective of my patients*
- Community-level and psychosocial issues
- Aging with HIV
  - Non-AIDS morbidity
  - Intersectional stigma and discrimination
  - Resilience

Psaros C et al. 2015; Sangaramoorthy T et al. 2017; Durvasula R et al. 2014

Ongoing and Future Research Needs

- Women must be more equitably included in the HIV prevention research agenda
  - Demonstration projects to determine promising and innovative models of PrEP uptake (and adherence) among women
  - Qualitative research to understand women's HIV prevention preferences
  - Explore PrEP use and perception of risk among non-US born women, particularly those from sub-Saharan Africa and the Caribbean
  - Development of trauma-informed HIV prevention interventions
- **PrEP guidelines that incorporate female-specific indications**

Ojikutu BO et al. 2019; Chapman CL et al. 2018; Sales JM et al. 2016

Thank You!

- **Presidential Advisory Committee on HIV/AIDS (PACHA) for organizing this session**
- **Community of women who have contributed to the data presented**
- **Community-based collaborators**
  - Chioma Nnaji MPH MEd (Africans for Improved Access/Multicultural AIDS Coalition)
  - *Tulumbe!* team
- **Mentors**
  - Kenneth Mayer MD
  - Laura Bogart PhD
  - Valerie Stone MD MPH