Medical and Support Service Need Characteristics of HIV-Positive Transgender Women Enrolled in the Los Angeles County Medical Care Coordination Program (2013-2016)

Sona Oksuzyan, PhD, MD, MPH; Jesse Bendetson, MPH; Sonali Kulkarni, MD, MPH; Wendy Garland MPH

Los Angeles County Department of Public Health Division of HIV and STD Programs

13th International Conference on HIV Treatment and Prevention, Adherence 2018, June 10, 2018
Background

• Transgender women (TGW) experience disproportionately higher prevalence and incidence of HIV compared to cisgender males (CGM) and females (CGF).

• Data on the medical and psychosocial needs TGW living with HIV are limited.

• Assessment data for HIV-positive patients enrolled in Medical Care Coordination (MCC) services in Los Angeles County (LAC) from 2013-2016 was evaluated to characterize and compare medical and support services needs of TGW versus CGM and CGF.
Overview of Medical Care Coordination (MCC)

• An integrated model to provide medical and psychosocial support services to patients identified as being at risk for poor health outcomes at 35 Ryan White-funded HIV medical homes in LAC

• Delivered by a clinic-based, multidisciplinary team: Registered nurse, Licensed social worker (MSW), and Case worker (BA/BS)

• Comprehensive assessment completed to identify service needs and calculate acuity level

• Services tailored to patient acuity level (low, moderate, high, severe):
  ▪ Brief interventions: ART adherence, risk reduction, engagement in care
  ▪ Linked referrals: Mental and addiction treatment, housing, partner services
Methods

• Secondary analysis using a cross-sectional study design

• MCC Assessment Data
  • Collected at enrollment across 11 domains to calculate acuity level

• LAC HIV Surveillance Data
  • Retention in Care (RiC): ≥ 2 CD4, viral load (VL) or resistance tests at > 90 days apart in the past 12m
  • Viral Suppression (vs.): Most recent VL<200 copies/mL in past 6m (missing=failure)

• Compared patient characteristics and service needs by gender (TGW vs. CGM and vs. CGF) using McNemar’s, Fisher’s exact, Student’s t and ANOVA tests
Assessment Domains and Acuity

• Identified 11 domains associated with poor engagement in care and ART adherence

• Key assessment items in each domain were assigned scores specific to responses on those items

• Scores were used to calculate domain-specific need and overall acuity level (low, moderate, high and severe)

• Patients were considered to have identified need within a domain if the domain-specific acuity was high or severe

• Assessment used to guide service delivery and inform program evaluation

11 DOMAINS
- Health Status
- Quality of Life
- ART Adherence
- Medical Access
- Sexual Risk
- Substance Use
- Mental Health
- Housing
- Financial
- Social Support
- Legal Needs
Sample Characteristics (n=6,492)

• Socio-demographic:
  – Race\(^1\): 48% Latino, 28% African-American, 19% White, 4% Other
  – Gender\(^1\): 85% male, 13% female, 2% transgender
  – Age\(^1\): 50% age 40 years and older
  – Income and insurance\(^1\): 77% at or below federal poverty level; 68% uninsured
  – Homelessness\(^2\): 24% homeless in the past 6m
  – Incarceration\(^2\): 27% ever incarcerated; 9% incarcerated in the past 6m
  – Sexual Risk\(^1\): 23% diagnosed with an STD in past 6 months

• HIV History and Care:
  – 74% currently prescribed ART\(^1\)
  – 57% retained in care in the past 12m\(^2\)
  – 41% virally suppressed in the past 6m\(^2\)

• Psychosocial\(^2\)
  – 21% symptoms of substance addiction disorder
  – 32% met criteria for depressive disorder (PHQ-9)

\(^1\)Provider reported; \(^2\)patient self-report
Assessed Acuity Level by Gender (n=6,492)

*A significantly higher proportion of TGW were high/severe acuity compared to CGF (p<0.05)

<table>
<thead>
<tr>
<th>Acuity Level at Enrollment</th>
<th>CGF* (n=863)</th>
<th>CGM (n=5,479)</th>
<th>TGW* (n=150)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>40%</td>
<td>36%</td>
<td>31%</td>
</tr>
<tr>
<td>Moderate</td>
<td>43%</td>
<td>43%</td>
<td>42%</td>
</tr>
<tr>
<td>High/Severe</td>
<td>17%</td>
<td>21%</td>
<td>27%</td>
</tr>
</tbody>
</table>
Characteristics of TGW Compared to CGM and CGF

- Significantly higher proportions of TGW reported being Latino/a, ever being and recently incarcerated, and exchanging sex for drugs or money in the past 6 months vs CGM and CGF

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>TGW (n=150)</th>
<th>CGM (n=5,479)</th>
<th>CGFF (n=863)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latino/a</td>
<td>58%</td>
<td>49%</td>
<td>43%</td>
</tr>
<tr>
<td>Ever incarcerated</td>
<td>47%</td>
<td>26%</td>
<td>25%</td>
</tr>
<tr>
<td>Incarcerated ≤6M</td>
<td>16%</td>
<td>9%</td>
<td>6%</td>
</tr>
<tr>
<td>Sex for Drugs/Money ≤6M</td>
<td>15%</td>
<td>5%</td>
<td>3%</td>
</tr>
</tbody>
</table>

- No significant differences by gender in FPL, in ART use, RiC or VS at enrollment
Characteristics of TGW Compared to CGM

- Compared to CGM, significantly lower proportions of TGW reported:
  - Education beyond high school (41% vs 21%)
  - Speaking English as their primary language (79% vs. 68%)

- Significantly lower levels of social support were reported by TGW compared to CGM (mean index score for social support 55.3 vs. 61.2)
Characteristics of TGW Compared to CGF

• TGW were significantly younger than CGF (mean age= 39 years vs 44 years)

• Significantly higher proportions of TGW compared to CGF reported:
  – Being homeless in the past 6 months (22% vs 20%)
  – Symptoms of a substance addiction disorder (23% vs 15%)
  – ≥1 STD diagnosis in the past 6 months (21% vs 9%)
  – An AIDS diagnosis (50% vs 35%)

• Significantly lower proportions of TGW compared to CGF reported being uninsured in the past 12 months (61% vs. 72%)
Identified Needs of TGW compared to CGM and CGF

Percent of patients

- Housing: 21% (TGW*)
  - CGM*: 14%
  - CGF*: 14%

- Legal: 20% (TGW*)
  - CGM*: 12%
  - CGF*: 9%
Identified Needs of TGW compared to CGM

Percent of patients

- **Social Support**
  - TGW*: 33%
  - CGM*: 19%
  - CGF: 26%

Domains
Identified Needs of TGW compared to CGF

- **Sexual Risk**
  - TGW*: 43%
  - CGM: 32%
  - CGF*: 50%

- **Substance/drug addiction**
  - TGW*: 23%
  - CGM: 21%
  - CGF*: 15%

- **Financial**
  - TGW*: 45%
  - CGM: 38%
  - CGF*: 32%

- **Quality**
  - TGW*: 9%
  - CGM: 9%
  - CGF*: 17%
Limitations

• Cross-sectional design, so can only describe associations and not infer causation

• Assessment data were self-reported and may be subject to bias

• Potential for misclassification of transgender identity

• TGM excluded from analysis due to extremely small numbers (>5)

• Sample included those targeted for services and may not be generalizable beyond MCC
Conclusions

• Among HIV-positive patients in the clinic-based MCC intervention TGW, compared to CGM or CGF:
  – Did not have significantly different clinical outcomes, however,
  – Reported significantly higher need for psychosocial support services related to sexual risk, substance use/addiction, financial, social support, legal and housing domains

• Programs for TGW should include assessment of needs and linkage to support services to facilitate patient engagement

• Analyses on the impact of MCC on identified need, acuity and health outcomes among TGW are ongoing and, along with these findings, will inform program improvements
Acknowledgements

• This research was supported by funds from the California HIV/AIDS Research Grants Program Office of the University of California, Grant Number MH10-LAC-610

• All recipients of MCC services as well as the staff of all participating agencies
Contact Information

Sona Oksuzyan, PhD, MD, MPH
Email: soksuzyan@ph.lacounty.gov

Division of HIV and STD Programs
Los Angeles County Department of Public Health

MCC Service Guidelines and Assessment available at: http://publichealth.lacounty.gov/dhsp/MCC.htm
Questions ?
Medication Access and Adherence

Prescribed ART? [p.4, Q9 checked YES or NO]

Yes

Last Viral Load Undetectable? [p2, Q3, if “most recent viral load suppressed <200” is checked NO or YES]

NO: SEVERE

Yes: HIGH

No

Missed ≥6 ART doses [p.10, Q4 if “6 doses”, 7 doses”, or “8 or more doses”, then=YES, else=NO] OR ≤20% of doses taken [p10, Q5 if % of doses taken is 0%, 10%, 20%, then =YES, else =NO]

Yes: MODERATE

No: SELF MANAGED

No

Meets TX guidelines:

Last CD4 <500 [p.2, Q2 if “most recent CD4 count” <500 =YES]] OR
HIV nephropathy [p2, Q7.1 if HIV nephropathy is checked “active”] OR
Currently pregnant [p.2, Q6, if checked YES or NO] OR
AIDS-defining illness or Chronic Hep B? [p.2, Q7.1 if any conditions marked with (*) are checked “active”]

Yes: SEVERE

No: SELF MANAGED