

Leave No Woman Behind

Addressing Disparities in HIV-Related Health Outcomes Among Women of Color

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THE NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Purpose

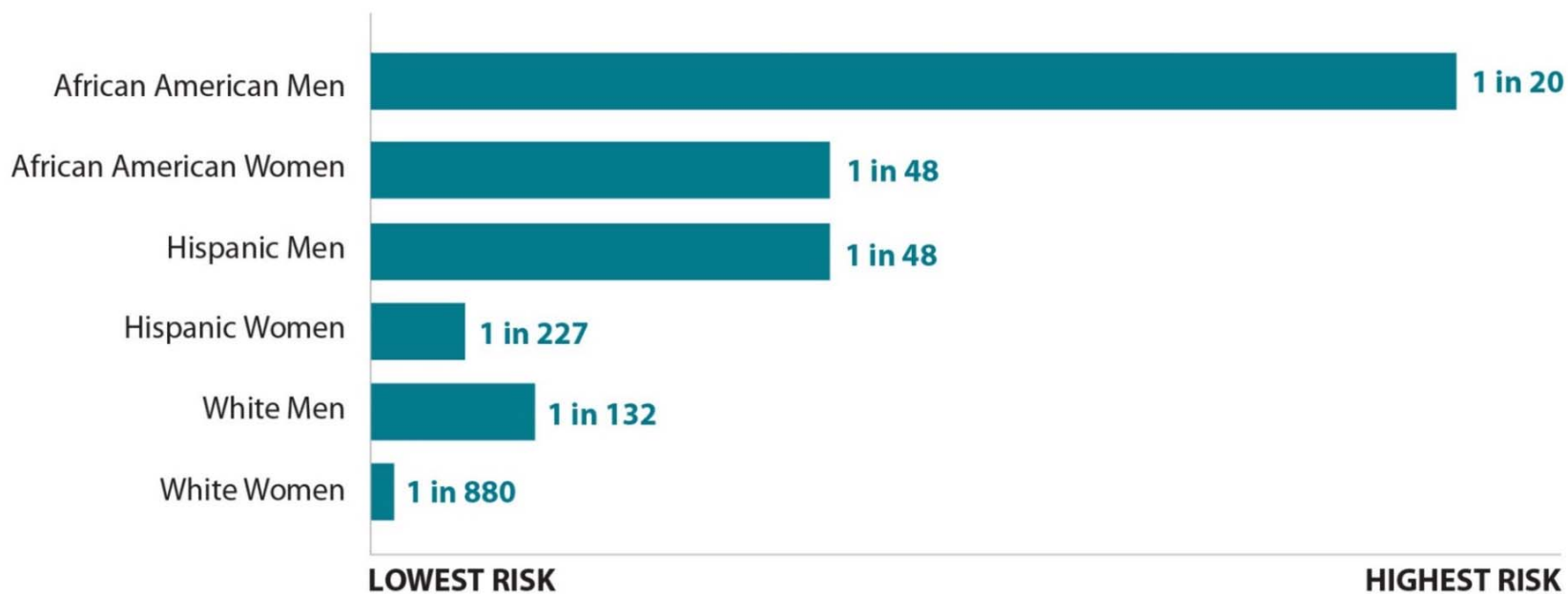
- ▶ NYC Department of Health, Bureau of HIV's priority is to address HIV-related health disparities among special populations including WOC
- ▶ Explore barriers to achieving optimal HIV health outcomes among WOC with HIV
- ▶ Brainstorm actionable solutions that can be taken away and implemented in clinics and CBOs
 - ▶ Information from this workshop will be used by the Health Department to inform program development and identify gaps in services

Background

- ▶ Decreases in HIV/AIDS-related morbidity and mortality have followed advances in HAART
- ▶ Despite advances, health disparities persist in new HIV cases and HIV-related health outcomes by race/ethnicity, gender, and transmission risk
 - ▶ Black MSM and heterosexual Black women are disproportionately represented among people living with HIV (PLWH)

Women of color have a much higher lifetime risk of HIV

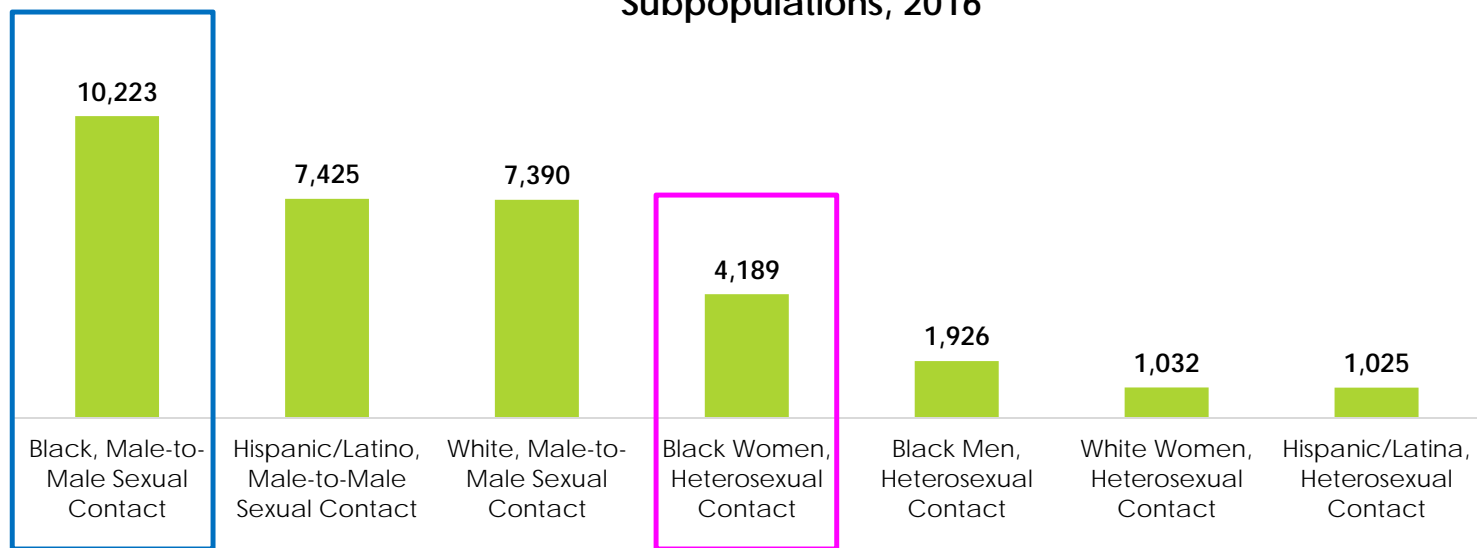
Lifetime Risk of HIV Diagnosis by Race/Ethnicity



Source: Centers for Disease Control and Prevention

Background

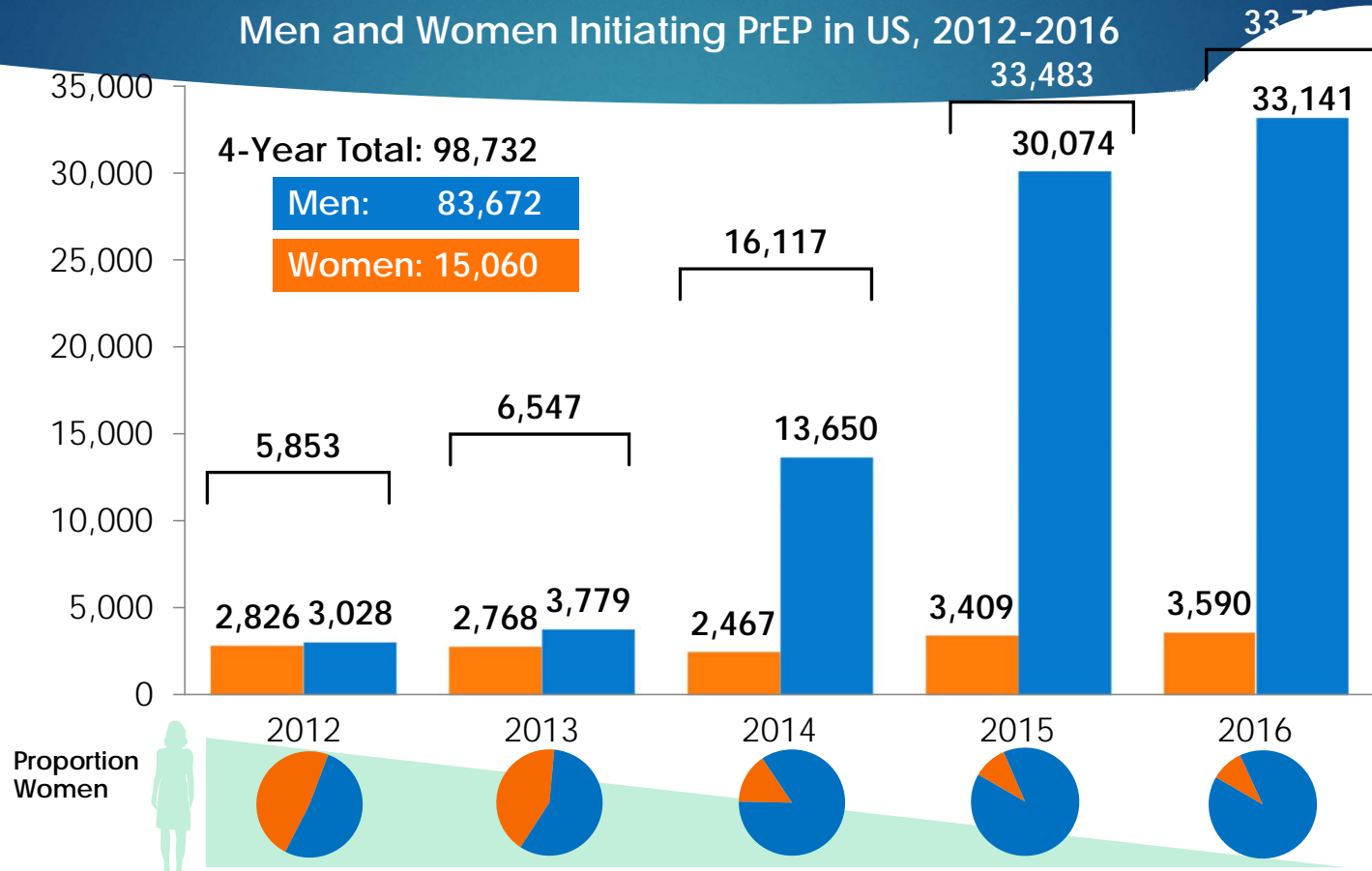
HIV Diagnoses in HIV in the United States for the Most-Affected Subpopulations, 2016



Source: Centers for Disease Control and Prevention

Nationally, gender disparities in PrEP initiation have grown

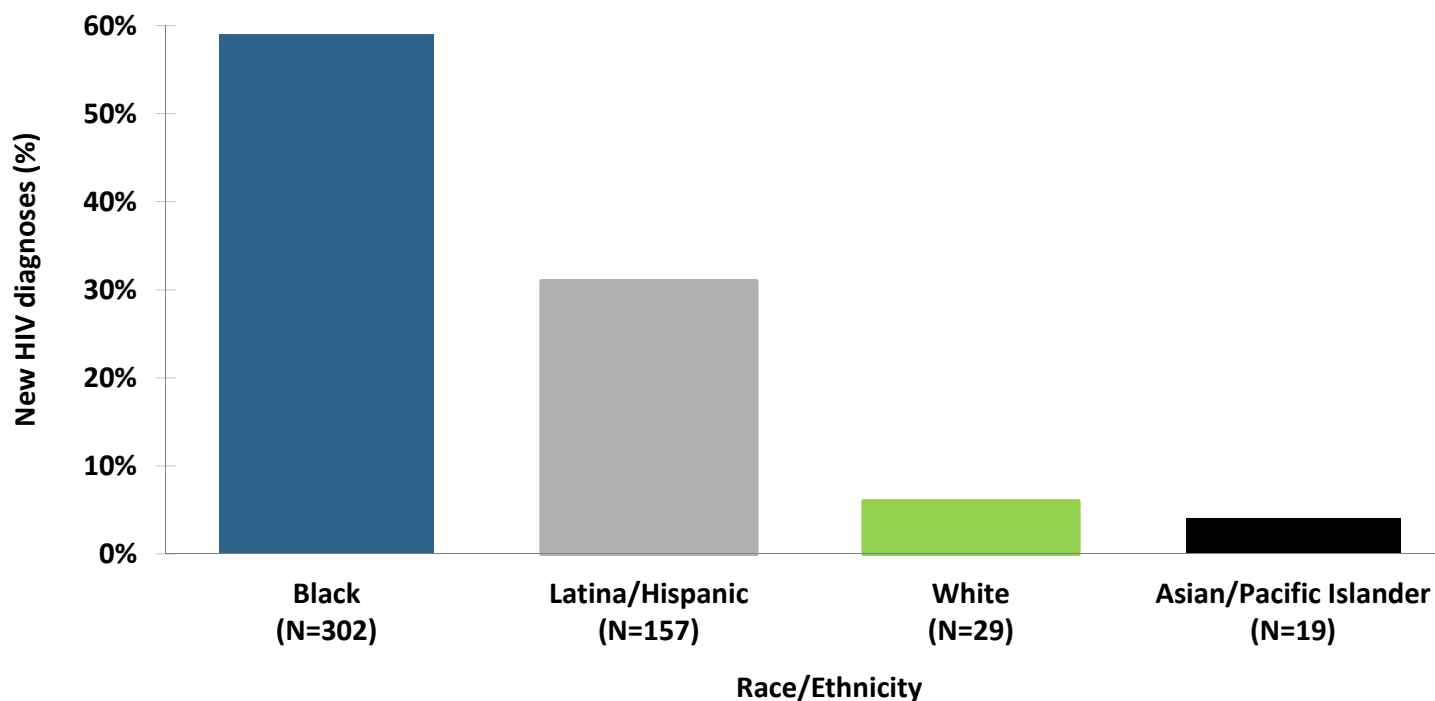
Men and Women Initiating PrEP in US, 2012-2016



Disparities in Diagnoses

- ▶ Similar to national reports, women of color (WOC) in New York City are disproportionately infected with HIV:
 - ▶ Black and Latina women comprise of **90.3%** of all new diagnoses among women in 2016

PERCENTAGE OF NEW HIV DIAGNOSES IN FEMALES BY RACE/ETHNICITY IN NYC, 2016



Blacks accounted for the majority of new HIV diagnoses in women (59%) in 2016.

Native American and multiracial groups not displayed because of small numbers. There were N=0 Native American and N=1 multiracial females newly diagnosed with HIV in 2016.

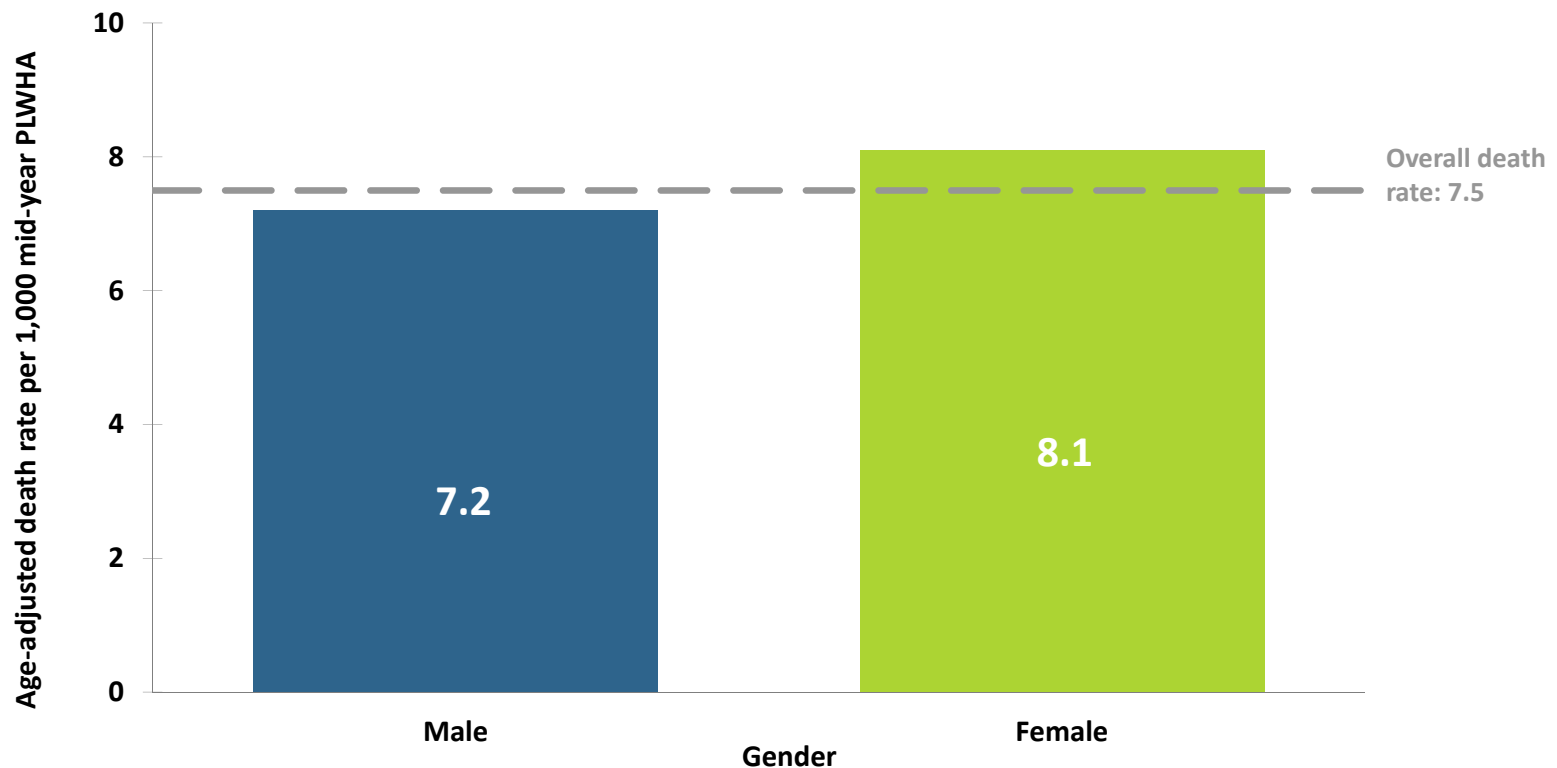
Female includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.

Disparities in Mortality

- ▶ Disparities in mortality:
 - ▶ Death rate among PLWH was higher in females (8.1/1,000) compared to that in males (7.2/1,000)
 - ▶ Greatest burden among both Latinx and Black women respectively (8.3 and 8.1/ 1,000)

AGE-ADJUSTED DEATH RATES¹ PER 1,000 MID-YEAR PLWHA BY GENDER IN NYC, 2016



The death rate among people with HIV/AIDS was higher in females (8.1 deaths per 1,000 people) than in males (7.2).



¹Death data for 2016 are incomplete. Rates are age-adjusted to the Census 2010 NYC population. Female includes transgender women and male includes transgender men. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.

Women, Intersectionality, and HIV

- ▶ Intersectionality is the idea that many parts of a person's identity impacts their life at the same time
- ▶ Research suggests that the intersectionality of being Black or Latina and female may contribute to negative HIV-related health outcomes¹
 - ▶ Racism
 - ▶ Sexism
 - ▶ Social determinants of health

1. Hessel, N. et al. Retention of Women Enrolled in a Prospective Study of Human Immunodeficiency Virus Infection: Impact of Race, Unstable Housing, and Use of Human Immunodeficiency Virus Therapy. 2001. American Journal of Epidemiology. 54(6) 563-573.

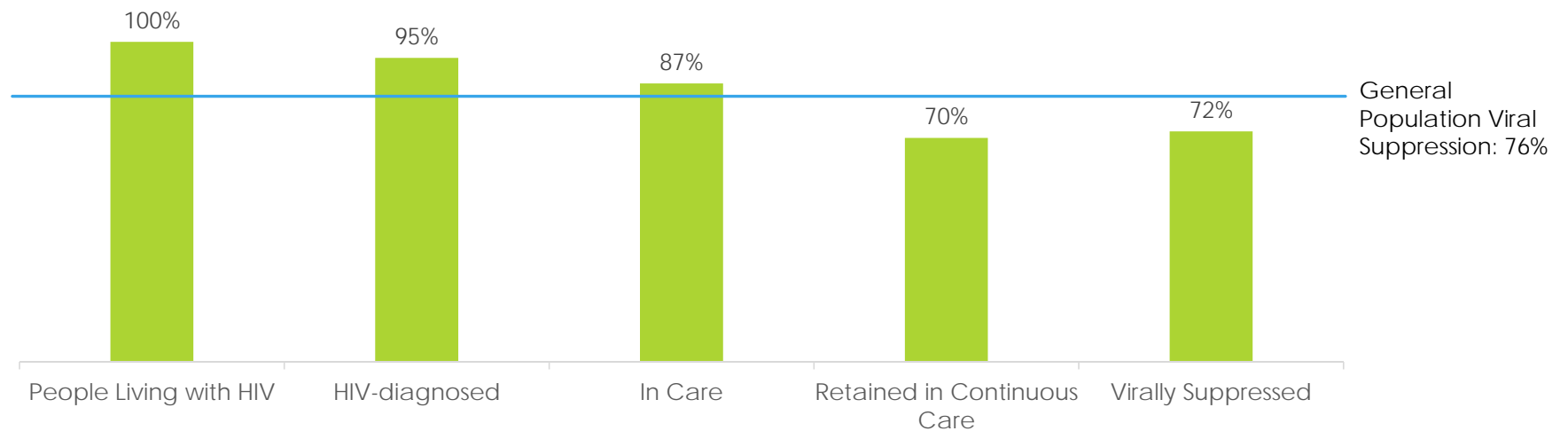
Adherence Practices

- ▶ Low adherence is the single most important challenge to controlling HIV through the use of high acting anti-retroviral therapy (HAART)
- ▶ Women are more likely to exhibit poorer adherence to HAART than men^{1,2}
 - ▶ Especially true among women of color including African- Americans
 - ▶ Can be associated with adherence practices
- ▶ As new diagnoses increase among women of color, it is important to understand their adherence practices

1. Sankar, A., Luborsky, M., Schuman, P., Roberts, G. Adherence discourse among African-American women taking HAART. 2002. AIDS Care; 14(2): 203-218.
2. Holstad, M., Dilorio, C., Kelley, M., Resnicow, K., Sharma, S. Group Motivational Interviewing to Promote Adherence to Antiretroviral Medications and Risk Reduction Behaviors in HIV Infected Women.2011. AIDS Behav 15:885-896

Background—HIV Care Continuum, Black Women

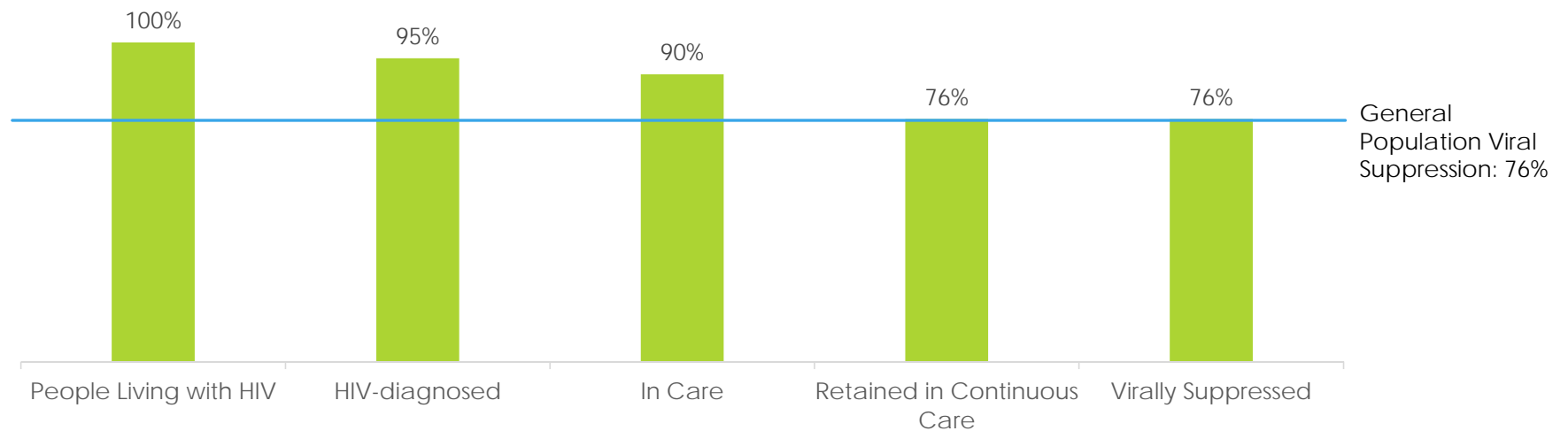
Black Women in NYC, 2016



Data reported to the NYC HIV Epidemiology and Field Services Program by March 31, 2017. Data reflect 12-month periods from January 1 – December 31.
All data shown are for people ages 13 and older.
Geographic residence refers to most recent known residence as of the last day of the reporting quarter for all indicators on this page.
The Other/Unknown race/ethnicity category includes people of Native American, multiracial, and unknown races.
Borough-wide and citywide totals may include cases assigned to a borough with an unknown UHF or assigned to NYC with an unknown borough, respectively.
Therefore, UHF totals may not sum to borough totals and borough totals may not sum to citywide totals.
*HIV prevalence expressed as a percent of population. Rates calculated using the 2010 Census population.

Background—HIV Care Continuum, Latina Women

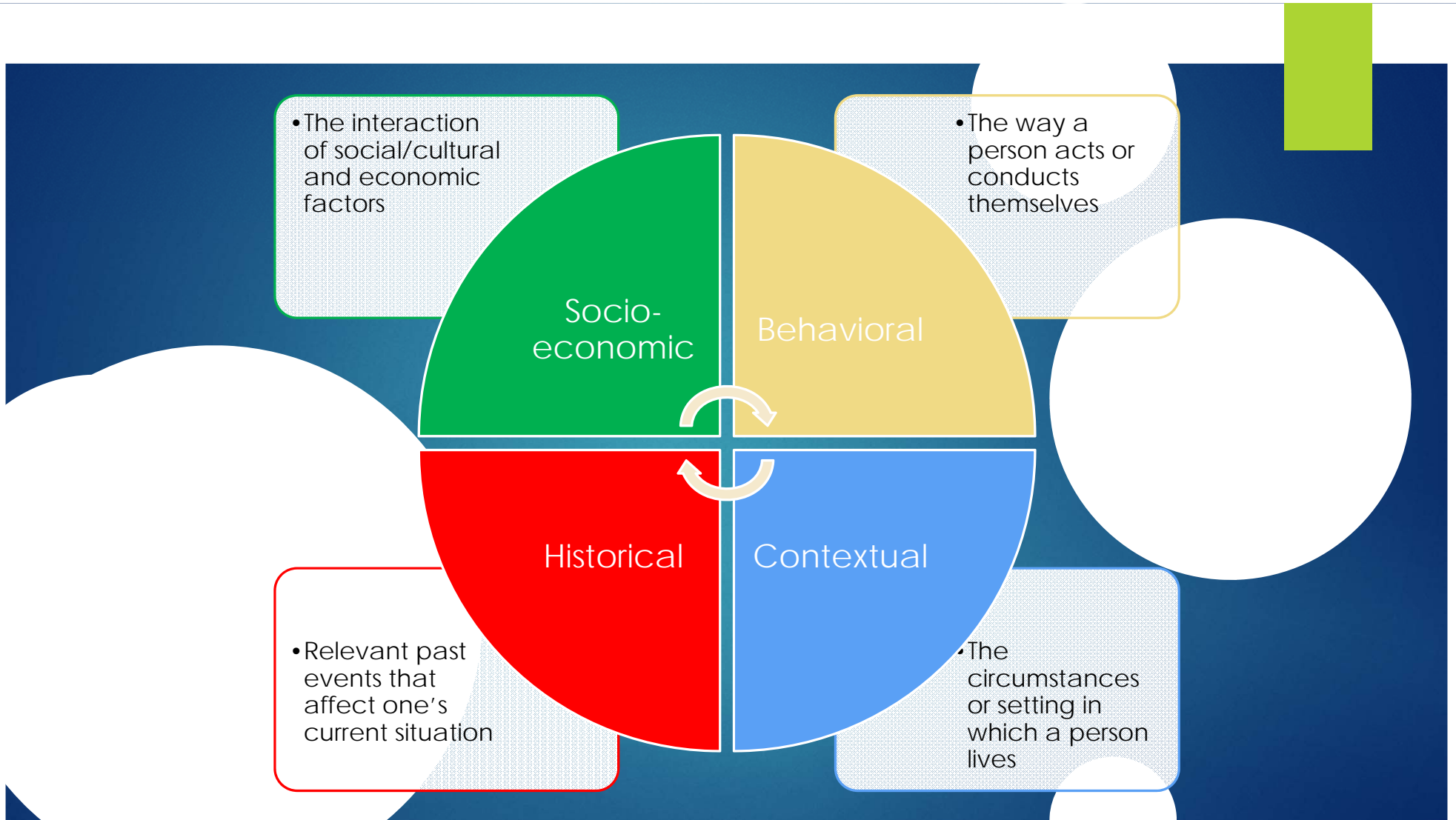
Latina Women in NYC, 2016



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Activity – Identifying Barriers to Care for WOC

- ▶ Identify barriers to care and treatment for WOC
- ▶ Break into 4 groups:
 - ▶ Socioeconomic
 - ▶ Behavioral
 - ▶ Historical
 - ▶ Contextual
- ▶ Report top 3 barriers to the larger group



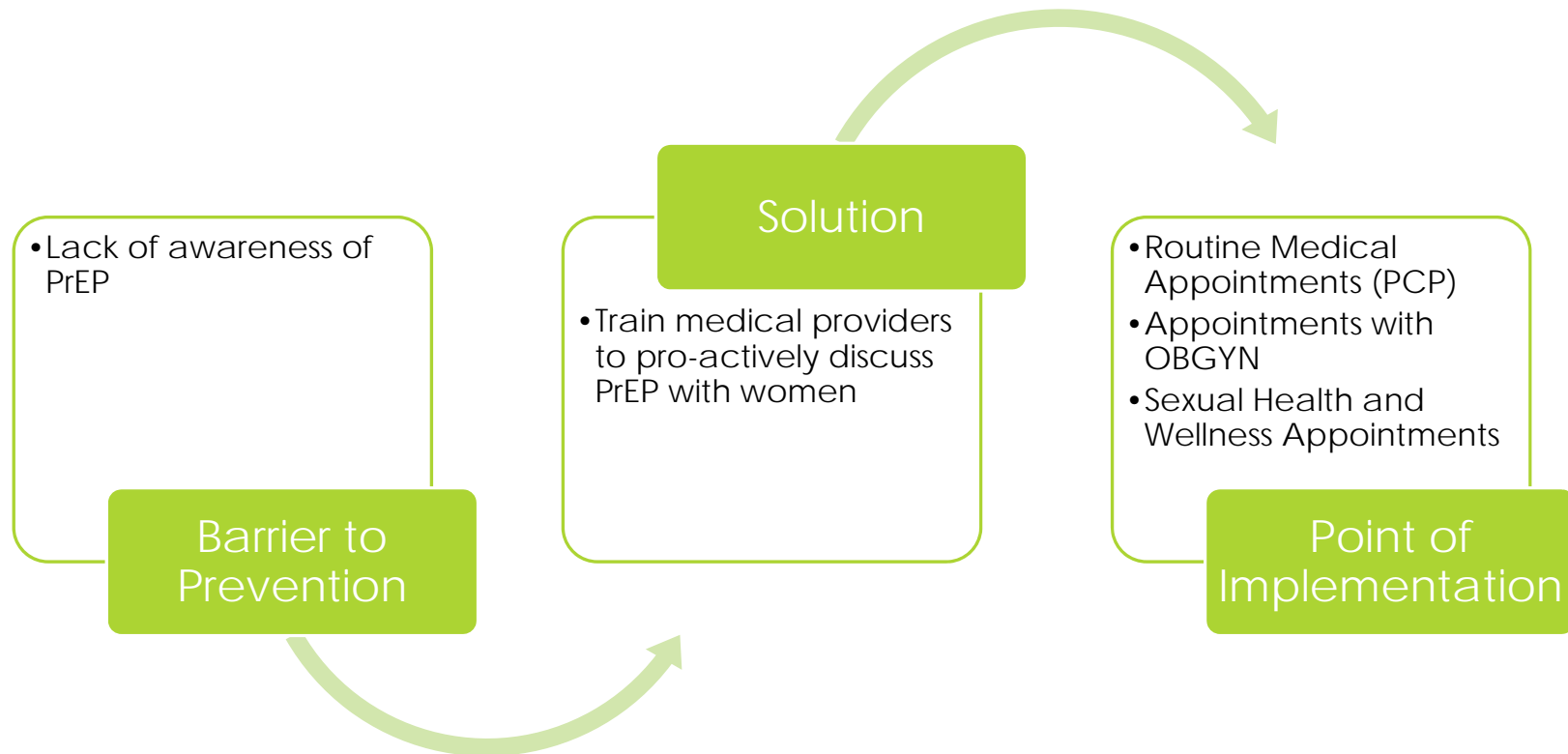
Activity – Identifying Solutions

- ▶ Pick your top barrier
 - ▶ Consider the level of intervention
 - ▶ Individual, CBOs, government, structural, etc.
- ▶ 15-minutes to brainstorm solutions
- ▶ Report top 3 solutions to the larger group

Activity – Identifying Points of Implementation

- ▶ For the identified priority barrier and solutions, where do you see points of implementation?
 - ▶ When are women most vulnerable?
 - ▶ When do you commonly see signs of disengagement?
 - ▶ When are women most open to improving health behaviors?

Activity Example using HIV Prevention for Women of Color





Recap:

- ▶ What did you learn from today's workshop?
- ▶ What did you learn from the activity?
- ▶ How do you plan on taking what you've learned today and implementing them into your program(s)?



Thank you!

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