

Implementing and Effectively Adapting an HIV Prevention Intervention with African American and Latina Lesbian and Bisexual Women in NYC.

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Agenda

- Iris House-Introduction/History
- Mission/Vision
- HIV/AIDS Statistics
- Just For Us Program
- SISTA/SIHLE Adaptation and Implementation
- Integration of Services
- Best Practices/Lessons Learned



At Iris House...We Save Lives

COMMEMORATING 20 YEARS

March 2, 1993. Iris House, a new center for Latina and African-American women diagnosed with AIDS opens its doors in East Harlem. This program came to fruition through nearly a decade of work by the Women and AIDS Working Group, and named for Latina HIV Activist Iris De La Cruz, who sadly would not live to see the doors of Iris House open to the women she was fighting to help.



Iris De La Cruz- was a force of nature, and we are grateful for her vision, her drive and her commitment to making sure the women of her community were not without options or resources. We honor her legacy

today.





Mission

Iris House provides comprehensive services and promotion of women, families and communities infected and affected by HIV/AIDS, while at the same time offers prevention and education for our consumers and communities at risk. To fulfill this mission, Iris House provides services that promote prevention and education, while also focusing with the reality of those living with HIV/AIDS.



We Save Lives.....







HIV Prevention Programs at Iris House

- Women Helping Women
- Just For Us
- Women on Women (WOW)
- TransAction
- WILLOW and SIHLE
- Women Supportive Services
- P.U.S.H.
- Leading Ladies
- Listen Up- Nia and d-up

- All Services are provided in English and Spanish
- Funding Sources:
 Federal, State, City and private funding.



Iris House...Supportive Services

- Food and Nutritional Services
- Housing
- Harm Reduction
- Supportive Services
- Behavioral Health Services
- Advocacy/Leadership
- Volunteer and Internship opportunities



HIV/AIDS 2010 Data

- 1.8 million people in the U.S. are estimated to have been infected with HIV; 50,000 new infections per year.
- Nearly 280,00 women are living with HIV.
- Black women account for nearly 64% of new infections.
- Latinas account for 15%, white women 18%.
- Teen and young adults under 35 account for 56%.
- 13-24 year olds accounted for a greater share of newly infected Blacks (33%); Latinos 24%; Whites 16%.



The Henry J. Kaiser Family Foundation

HIV/AIDS, Lesbian and Bisexual Women

 Generally lesbians are at low risk of HIV infection, however they are vulnerable to certain sexually transmitted diseases STDs as women who have sex with men.

2002 National Survey of Family Growth

Sexual behavior and sexual identity data indicated that 1.3% to
 1.9% of the women were lesbians and 3.1% to 4.8% were bisexual.

 Self-reported viral STD rates were significantly higher among bisexual women (15.0% to 17.2%) than among lesbians (2.3% to 6.7%).

AVERTing HIV and AIDS



HIV/AIDS, Lesbian and Bisexual Women's Risk Factors

- Oral sex risk is low, but increased if partner receiving oral sex has sores on her genitals or is having her period.
- Sharing sex toys sharing sex toys can be risky if they have vaginal fluids, blood or faeces on them.
- Rough sex any sexual activity that can lead to bleeding or cuts/breaks in the lining of vagina or anus is risky, including 'fisting' activities.
- Donor insemination need donor's detailed medical history including drug use and sexual history. It is important that the donor has taken an HIV test.





Just For Us Program

- Provides HIV/STI/Hepatitis C services to African American and Latina Lesbian and bisexual adolescents and women who are HIV-positive or at high-risk.
- Funded by The New York State Department of Heath AIDS Institute.
- Iris House is the ONLY organization funded in NYC;
 Grant started December 1, 2011



Just For Us Program-Objectives

- Outreach
- SISTA and SIHLE Interventions
- Presentations, electronic media, and internet
- HIV Counseling, Testing, Referrals and Partner Services
- STI/HCV Screenings
- Support Groups



Just For Us Program

- Pre-Implementation Phase
 - Focus Group- A total of nine women who selfidentified as lesbian and or bi-sexual participated.
 - Group was facilitated by Iris House staff.
 - Women were asked a total of 15 questions which ranged from challenges and barriers faced by lesbian/WSWM women, gaps in services, HIV, STI, program design and recruitment.
 - Curricula review and adaptation.



What do you feel are some of the challenges or barriers faced by Latina and African American lesbian/WSWM living in New York City?

- Rejection because of our sexual orientation.
- Depression is a big one for us. We live alone.
- Stigma as it relates to our family, religion, community.

- Lack of information within the African American and Latino communities about sexual orientation or sexuality.
- Being "outed" at work affects us and we are discriminated because of it.



Do you talk about HIV/STI/Hepatitis prevention or testing among your friends? If yes, what do you talk about? If not, why not?

- Women don't think Lesbian/WSWM women can be HIV+.
- They perceive us as low risk, so we don't talk about it.
- When we do talk about testing, they often have excuses of why not to test.
- Some women are only into sex, get a "quickie" and not use condoms.

- No conversation about it.
 We rather be raw and worry later.
- Taboos associated with sexuality.
- Being honest with partner is hard.
- Sometimes our partners are not open to the conversation.



Currently there are no evidence based interventions (EBI) focused on lesbians/WSWM, with this program we plan to adapt SISTA and SIHLE for this population. If you are familiar with these interventions, please let us know what adaptations/modifications you would like us to consider.

- No lack of information; only 3 women had heard of SISTA and SIHLE.
- Include poems from Lesbian women.

- First session, consider how gender pride will affect Lesbians/WSWM.
- Consider how the role plays will be handled with two women.

- Include sexual orientation as part of our pride.
- Include social roles of women who define themselves as lesbians.



What should we call the program? What do you think about these names? What other names come to mind? What words or pictures come to mind? Choose your first choice.

- The four names mentioned were ranked and voted on.
 - Women Empowering women- 2 votes
 - Progressive Females-3 votes
 - Just for Us- 5 votes
 - □ W²⁻ 6 votes

They also agreed that we need to keep the name as open as possible for all women, including those that are in the DL, "in the closet", have survival sex with men, etc.



Focus Group Recommendations









SISTA Intervention Adaptation

- Incorporated language that is sensitive to Lesbian and bisexual women.
- Included latex barriers and dental dams to safer sex demonstration.
- Replaced "he/him" to "she/her."
- Added girlfriend when boyfriend is referenced.
- Changed male names to female ones.
- Included poems by lesbian women.
- Sex toys, dildos, straps, vibrators, etc.
- Discussion on masturbation.



SISTA Intervention Adaptation

Examples of Adaptation:

Session 1: Ethnic and Gender Pride: What does it mean to be a lesbian and or bisexual woman of color?

Session 3: For the past years, you have been in a relationship with your girlfriend Nancy. Nancy has a problem with you seeing Keyshawn because he had returned into your life and wants to have sexual relationships with you again. Keyshawn is your baby daddy. What do you do?



SISTA Implementation and Outcomes

- Enrolled 44; 41 graduated and completed all 5 sessions
- 90% self-identified as lesbian, 5% bi-sexual
- 90% had been tested for HIV
- Within the last 12 months;
 - 79% sexually active, 94% had sex with women
 - 91% did not engage in sex while intoxicated
 - 91% did not know if they had sex with someone infected with HIV/AIDS

Outcome information based on available evaluation data.



SISTA Implementation and Outcomes

Knowledge/Communication/Beliefs/Attitudes

- 80% correctly answered true or false questions.
- 100% believed JFU increased their knowledge.
- 70% believe they can use assertive communication.
- 100% will change behaviors to decrease risk.
- 80% agreed that poverty impact HIV.
- 74% could put a condom and plan to use a condom next time they have sex.

Outcome information based on available evaluation data.



SIHLE Intervention Adaptation

Incorporated language that is sensitive to Lesbian and bisexual girls.

 Included latex barriers and dental dams to safer sex demonstration.

- Replaced "he" and "him" to "she" and "her" and or "him/her" when referring to partner.
- Added girlfriend when boyfriend is referenced.



SIHLE Intervention Adaptation

Example of Adaptation

Session 3

Tiffany has been dating Andrea for three months, and she really likes her. They have been having sex, but they have not been using condoms. Now Tiffany is ready to talk to Andrea about using condoms every time they have sex.



SIHLE Implementation and Outcomes

- Enrolled 5 girls, 3 completed all 5 sessions
- 60% self-identified as heterosexual; 40% bisexual.
- 100% were single; 88% worked part-time.
- 80% had been tested for HIV.
- Within the last 12 months
 - 40% sexually active, 92% had sex with men
 - 60% did not engage in sex while intoxicated
 - 60% never used a condom



SIHLE Intervention and Outcomes

Knowledge/Communication/Beliefs/Attitudes

- 100% correctly answered true or false questions.
- 100% believed JFU increased their knowledge.
- 100% believe they can use assertive communication.
- 67% would insist on condom.
- 67% agreed that poverty impact HIV.
- 74% could put a condom and plan to use a condom next time they have sex.



Integration of Services: HIV, STI and Hepatitis C Testing

Knowing your status

Linkage to Care for those with positive and or reactive results

Referrals to supportive Services





Support Groups

Bi-weekly groups for lesbian and bisexual women.

- Les Be Honest Happy Hour at Iris House
 - Topics Covered
 - How to forgive people from your past- Iyana Vanzant
 - The importance of ancestry.
 - Harassment faced by lesbian women.
 - Need for medical services for lesbian women.



Best Practices/Lessons Learned

- Safe space for lesbian and bisexual women.
- Remove stigma associated with sex, sexual preferences and sexual orientation. "Les Be Honest"
- Closed nit community makes it difficulty to access lesbian and bisexual girls/women.
- Prevention interventions tailored to lesbian and bisexual women based on their sexual orientation and coming out experiences.



Best Practices/Lessons Learned

 Connection to lesbian community is based on trust.

Address risk factors associated with WSWM behaviors.

 On-going relationship with men as fathers, exhusbands, etc.

Inclusion of men in discussions.



Best Practice/Lessons Learned

 Girls/women might still be dealing with their sexual orientation and disclosure.

- Engaging in high-risk behaviors with boys/men.
- Building self esteem when we focus on women's needs.

Reinforce decision making process and the power that girls/women hold.



Best Practices/Lessons Learned

- Power of the "P"- Private, Pussy, Penis, Pleasure, Prevention and Pelvis.
- Holistic curriculum that addresses the social-economic factors of women.
- Address substance use and intimate partner violence.
- Provide technical assistance and increase collaboration with In Our Own Voices our sister agency in Albany and others working with lesbians and bisexual women.



Thank You

Contact Just For Us staff at:

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