

# Retention of Transgender People into HIV Prevention and Care Services

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# Acknowledgements

APLA-Shared Action<sup>HD</sup>

UCSF Center of Excellence  
for Transgender Health

# SHARED ACTION<sup>HD</sup>

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## Who we are...

- CBA for Health Departments
- Components
  - ✓ HIV Testing
  - ✓ Prevention with Positives
  - ✓ Condom Distribution

SA<sup>HD</sup> Capacity Building Assistance (CBA) program materials and activities are supported by Cooperative Agreement PS14-1403, Category A Number 5 NU65PS004403-03-00 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of Shared Action<sup>HD</sup> and do not necessarily represent the official view of the Centers for Disease Control and Prevention.



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# CoE Capacity Building Assistance Program

- High Impact HIV Prevention with CBOs
- Transgender health content expert
- Partnerships
  - UCSF Center for AIDS Prevention Study (CAPS)
  - Alliance Health Project



Shawn Demmons, MPH



Greg Rebchook, Ph.D.

# Introduction

- Increase awareness of National Transgender HIV Testing Day
- Increase provider capacity to retain high-risk transgender people in HIV testing services

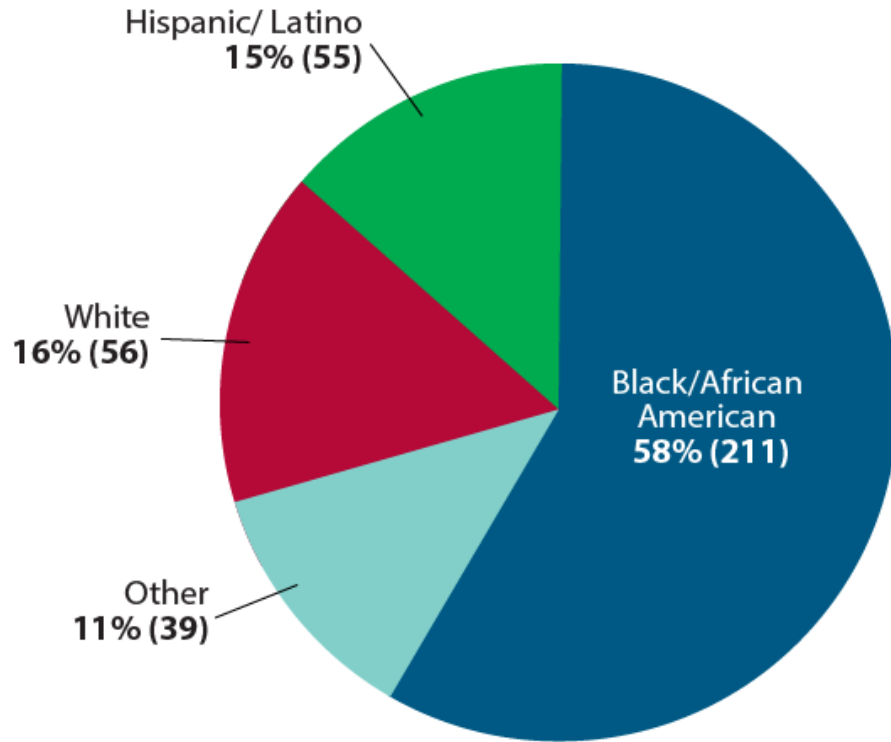


# Objectives

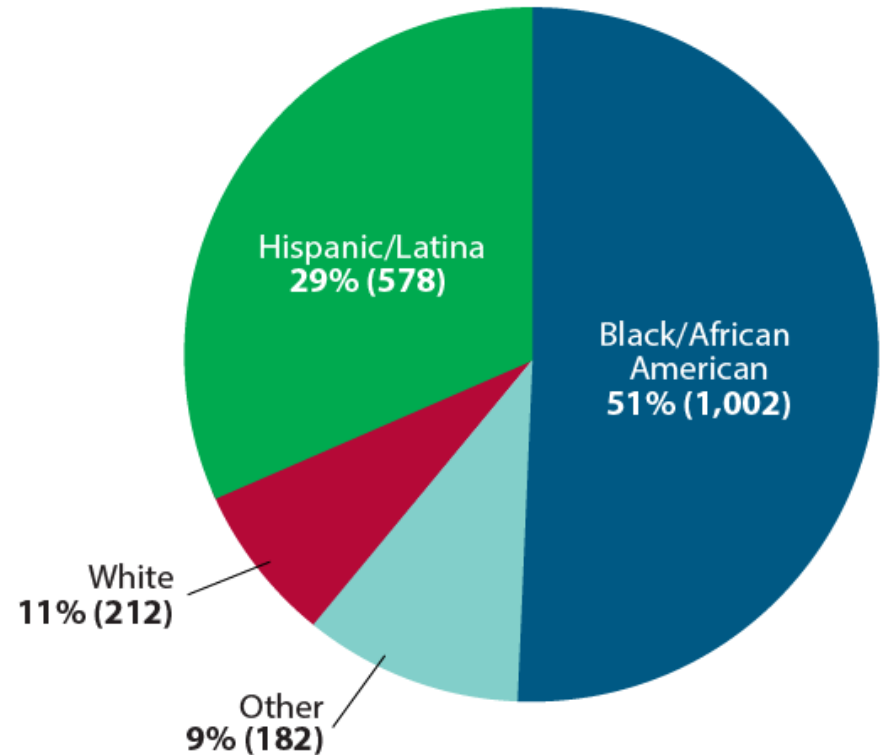
By the end of this webinar participants will:

- Increase their capacity to retain transgender people in HIV prevention and care services
- Be able to identify the six factors that affect retention
- Increase their awareness of National Transgender HIV Testing Day

# HIV Among Transgender People in the U.S.



**Transgender Men**  
(N=361)



**Transgender Women**  
(N=1,974)

Source: Clark H, Babu AS, Wiewel EW, Opoku J, Crepaz N. Diagnosed HIV Infection in Transgender Adults and Adolescents: Results from the National HIV Surveillance System, 2009-2014 (<https://www.ncbi.nlm.nih.gov/pubmed/28035497>). December 2016.

# Statistics: 2015 U.S. Transgender Survey

- Respondents were living with **HIV (1.4%)** at nearly **five times the rate in the U.S. population (0.3%)**
- **33%** of those who saw a health care provider in the past year **reported having at least one negative experience related to being transgender**
- **40%** *have attempted suicide in their lifetime*, nearly nine times the rate in the U.S. population (4.6%)

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). The 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality.



# Statistics: 2015 U.S. Transgender Survey

- 4 times more likely to live in poverty
- 3 times higher unemployment rate
- **Nearly half (46%) were verbally harassed** in the past year because of being transgender.

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). The 2015 U.S. Transgender Survey. Washington DC: National Center for Transgender Equality.

# Polling Question #1

- What are some primary barriers to retention with transgender individuals at your organization?

# HIV Care and Prevention Continuum



( Trans HIV Testing Toolkit, Center of Excellence for Transgender Health, 2016)

# What is Retention?

Continuous engagement of the client with a specific service or program

Examples:

- Maintaining client participation for the duration of the intervention cycle; when time-limited
- Completion of all sessions required for the delivery of the intervention: *Multi-session group level or individual level*
- Ongoing participation in and adherence to PrEP or ART

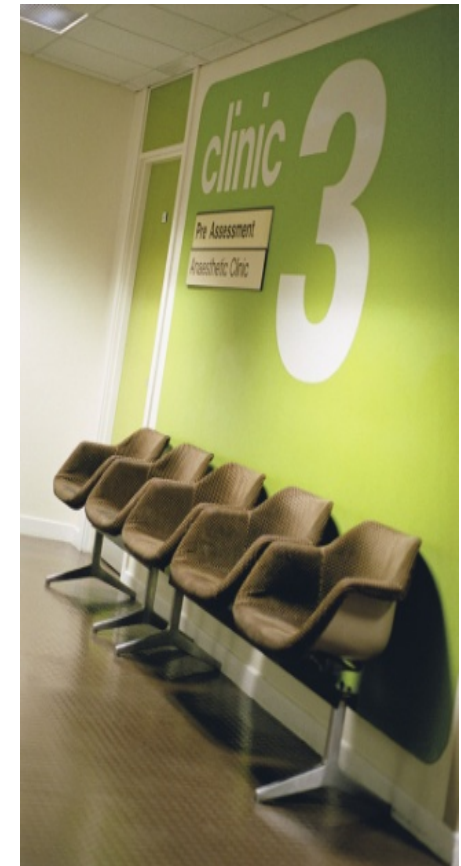
# Retention Rate

- What is retention rate?

# Currently Engaged

# Enrolled

- What affects your program's retention rate *with transgender communities?*



# Why Clients Engage or Not

Why do  
people stay?

Why do  
people go?

# Polling Question #2

- How does your organization respond to challenges to retention with transgender communities?

# 6 FACTORS THAT AFFECT RETENTION



# Factors Affecting Retention

- 1) Target population
- 2) Provider characteristics
- 3) Site specific
- 4) Internal systems & processes
- 5) Personal barriers
- 6) Community

# 1. Target Population

- Knowledge of target population
- Recruiting individuals within target
- Information about program



# Getting to Know the Transgender Community

- Physical and digital networks
- Leaders, gatekeepers, “mothers”
- Community advisory board (CAB)
- Consult transgender staff

## 2. Provider Characteristics

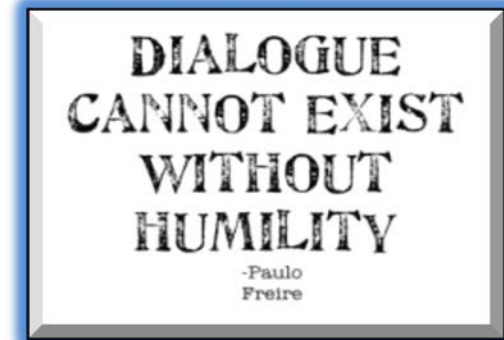
- Bias
- Cultural sensitivity, competency
- Lack of knowledge of protocol
- Client-centered
- Problem solving skills
- Hire transgender staff



# Provider Characteristics:

## We all have biases...

- Implicit bias
  - Microaggressions
    - Micro-invalidations
    - Body appraisal
  - Misgendering
    - Names & pronouns



# How to address these biases...

- Provider training
  - Ongoing
  - Agency policies
- Cultural humility
  - Lifelong learner
  - Self-reflection
  - Institutional accountability

# 3. Site Specific

- Accessibility
- Environment, atmosphere
- Reputation, credibility



# Creating a Trans-Inclusive Environment

## Structural

- Hire transgender staff
- Accessibility
- Program hours
- One-stop

## Environment

- Knowledgeable staff
- Forms
- Restrooms
- Décor





# 4. Internal Systems & Processes

- Implementation Plan
  - Protocols in place
  - Client Flow
    - Waiting for an appointment
  - Communication between services
- Evaluation
  - Quality Assurance



# Effective Program Planning

- Input from community opinion leaders
- Collaborate with other trans service agencies
- Ongoing evaluation



# 5. Individual Factors

- Competing needs
  - Substance abuse
  - Mental health
  - Housing
  - Food insecurities
- Fear
- **Navigating healthcare system**



# Transgender Specific Factors and Strategies

## Psychosocial Issues

- Interference with hormone therapy
- Negative past experiences with providers
- Stigma
- Engagement in sex work

## Strategies

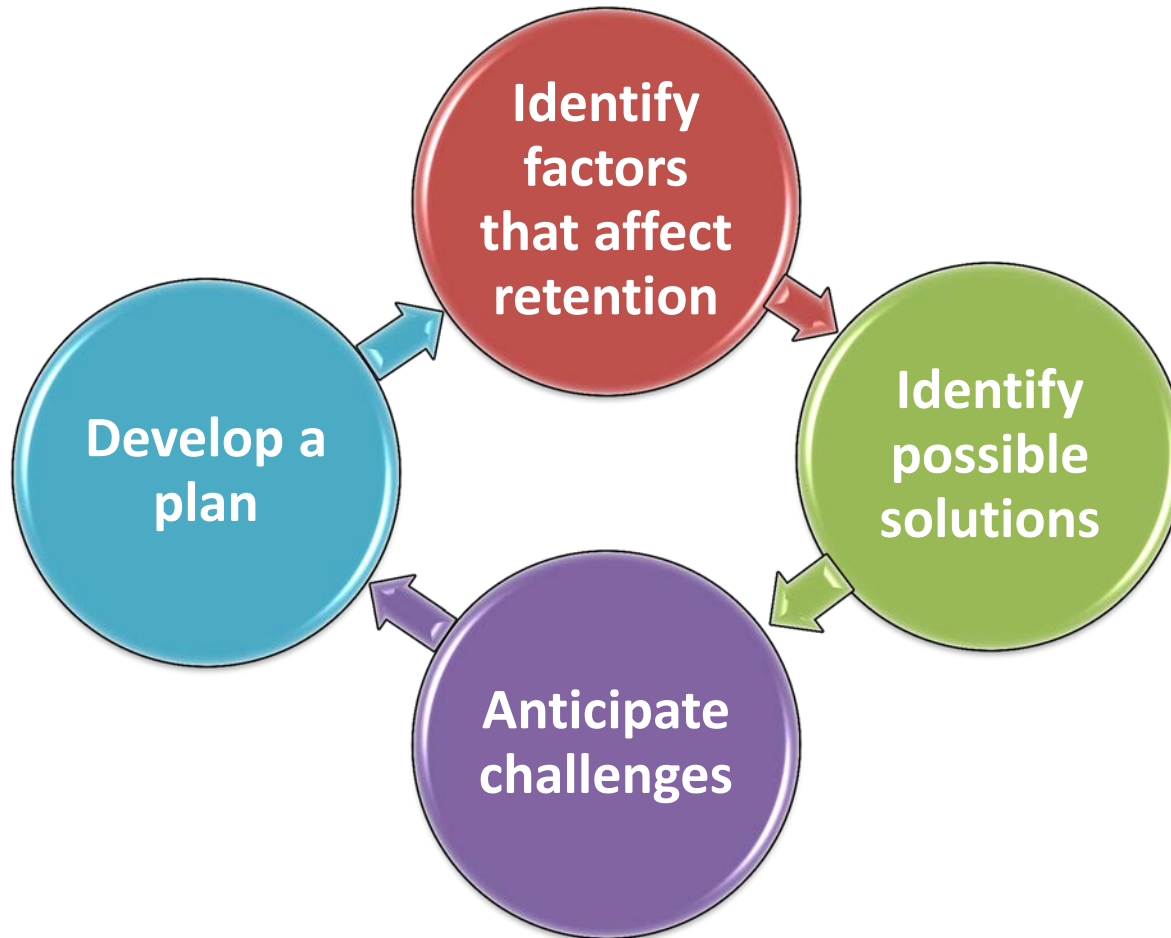
- Sufficient time to establish trust and rapport
- Program hours
- Hire transgender staff
- Services that address competing priorities

# 6. Community

- Stigma
- Social Norms
- Culture/Religion
- Social Networks



# Recap



# RESOURCES



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# Best Practices for HIV Prevention Among Trans People

1. Ground your work in the community

2. One size does not fit all

3. Use multi-level approaches

4. Get the facts

5. Look in all the right places

6. Increase access to health care

7. Staff development

8. Advocate

[transhealth.uscf.edu](http://transhealth.uscf.edu)



# 8 Best Practices for HIV Prevention among Trans People



## 8 Best Practices for HIV Prevention among Trans People

- 1. Ground Your Work in the Community.** Develop partnerships with trans people and organizations to create and grow programs, services and research with, by, and for trans people. Community involvement ensures acceptability, appropriateness, and relevance of your interventions, programs and services to the trans people.
- 2. Race & Ethnicity: One Size Does Not Fit All.** Interventions and programs are most effective when they incorporate racial and ethnic issues that contribute to HIV risk and issues of stigma and discrimination that are specific to trans people.
- 3. Utilize Multi-Level Approaches to HIV Prevention.** Educate and provide services and care through a broader context of health and wellness. Consider approaches that not only focus on the individual, but also families, social networks, schools, communities, and organizations that transgender people live, work, and play in.
- 4. Get the Facts! Assess, Evaluate & Enhance.** Conduct thorough needs assessments and evaluations, use the data in program planning an improvement, and disseminate what you learned.
- 5. Looking in All the Right Places.** Recruitment and retention strategies should consider the unique needs and circumstances of priority populations. Make an effort to go beyond what was convenient, and bring education and services to trans people in their neighborhoods and communities.
- 6. Increase Access to Health Care for Trans People.** Have a central or multiple locations with easy access to public transportation, provide services in multiple languages, and have trained providers who understand current HIV and health care issues of trans people. Provide hormone therapy as part of primary care.
- 7. Invest In Developing and Supporting Your Staff.** Prioritizing staff recruitment and development, on-going training and education, and creating opportunities for advancement are key to building capacity and healthy work environments for staff and their clients and patients.
- 8. Advocate for Structural and Systemic Change on Behalf of Trans People.** Collaborate with community partners to advocate for policy development and social change to identify and address how HIV among trans people is impacted by housing, employment, transphobia, racism, violence, lack of health insurance, provider education, and legalized discrimination.

Please visit our website for the complete report:  
*"Increasing access to comprehensive, effective, and affirming health care services for trans and gender variant communities."*

**For more information, contact:**  
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[www.transhealth.ucsf.edu](http://www.transhealth.ucsf.edu)

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# Transgender HIV Testing Toolkit

## TRANS HIV TESTING TOOLKIT



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# Things Your Agency Can Do

- Learn how HIV affects transgender people
- Encourage Testing
  - Share Videos from *Act Against AIDS's Doing It* campaign
- Utilize social media
  - #TransHIV
  - #Doingit



[https://www.cdc.gov/hiv/library/awareness/nthtd\\_tycd.html](https://www.cdc.gov/hiv/library/awareness/nthtd_tycd.html)

# Questions?



# Upcoming Webinars

- Effective HIV Prevention for Transgender Communities
  - June 19, 2018
  - 11 am PST / 2 pm EST



# Contact Information

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