

Knowledge, Attitudes and Behaviors surrounding PrEP among Black and Latina Cisgender Women: Findings from the 2017 New York City Sexual Health Survey

Abstract #440692

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Background

In 2017, 449 women were newly diagnosed with HIV in New York City (NYC); 61% of these diagnoses were among non-Latina Black women and 27% were among Latina women.

Pre-exposure prophylaxis (PrEP) is an effective HIV prevention option for heterosexually active women.

While a few prior studies have indicated low PrEP awareness among U.S. women, scant research exists on the knowledge, attitudes and likelihood of PrEP use among Black and/or Latina women in the US.

Objective

Using data collected in a survey of Black and/or Latina women in New York City (NYC), we examined the prevalence of PrEP awareness, recent use (past 6 months), and attitudes.

Methods

Study Design: Fall 2017 data from an annual cross-sectional survey conducted among Black and/or Hispanic/Latina women in high poverty and high HIV diagnosis rate areas in NYC.

Recruitment: Street-intercept at transit hubs and commercial centers in areas in top quartile of HIV diagnosis rates among women.

Survey Administration: 15-minute anonymous, interviewer-administered survey; in English or Spanish via tablet; \$15 gift card.

Participant eligibility: NYC resident; age 18-64 years; assigned female sex at birth; Black and/or Hispanic/Latina; at least 1 male sexual partner (prior 6 months). Women reporting HIV-positive status not included in this analysis.

Outcomes Examined

PrEP awareness: "Sometimes people who do not have HIV take HIV medications on a daily basis before sex to keep from getting HIV. This is called Pre-Exposure Prophylaxis, or PrEP. Have you ever heard of PrEP?"

PrEP use: "In the past 6 months, have you ever used PrEP to prevent yourself from becoming infected with HIV?"

Perceived benefit of taking PrEP: "Do you feel that you would benefit from taking PrEP?"

PrEP discussion with healthcare provider: First asked, "In the past 6 months, have you discussed PrEP with your doctor or healthcare provider?" And subsequently, "How comfortable or uncomfortable would you be asking your doctor about PrEP?"

PrEP attitudinal statements: (1) "Women should know more about PrEP"; (2) "I worry there would be problems or risks in taking the PrEP pill along with other medications or substances I use"; (3) "PrEP users are taking control of their sexual health"; and (4) "If I were to take PrEP, I would worry about what other people would think of me."

Data Analysis: Described prevalence of each outcome overall, and stratified by race/ethnicity with significance analyzed using Chi-square and Fisher's exact tests (p<0.05).

*Denominator for these outcomes: Those aware of PrEP

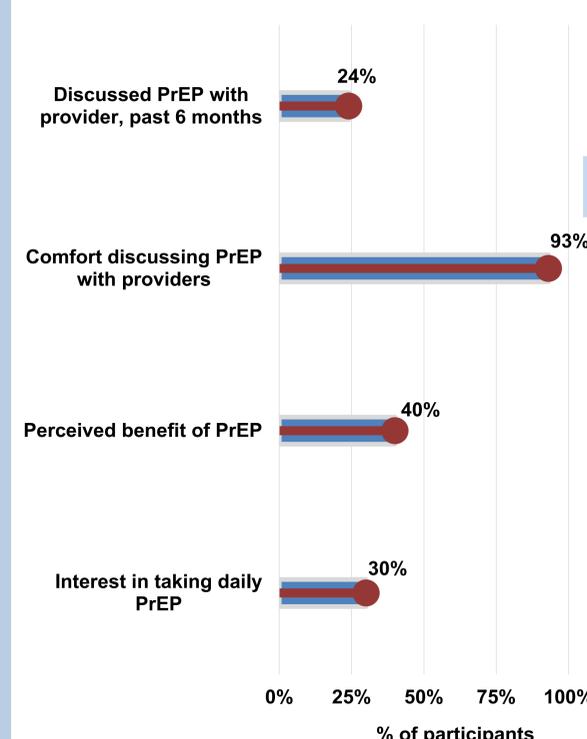
Results

Table 1. Sample Characteristics among Black and Latina Women Surveyed*, Sexual Health Survey, New York City, Fall 2017

Characteristics	n/N (%)	Black, non-Latina n/N (%)	Latina n/N (%)
Age			
18-24	78/407 (19.2%)	36/243 (14.8%)	42/164 (25.6%)
25-34	113/407 (27.7%)	67/243 (27.6%)	46/164 (28.0%)
35-44	105/407 (25.8%)	65/243 (26.7%)	40/164 (24.4%)
45-54	70/407 (17.2%)	43/243 (17.7%)	27/164 (16.5%)
55-64	41/407 (10.1%)	32/243 (13.2%)	9/164 (5.5%)
Insurance			
Insured	357/387 (92.2%)	217/230 (94.3%)	140/157 (89.2%)
US Born			
No	111/388 (28.6%)	59/231 (25.5%)	52/157 (33.1%)
Education			
≤ HS/GED/ Technical School	195/382 (51.0%)	105/225 (46.6%)	90/157 (57.3%)
Some college/AA degree	98/382 (25.7%)	58/225 (25.8%)	40/157 (25.5%)
≥ 4-year college degree	89/382 (23.3%)	62/225 (27.6%)	27/157 (17.2%)
Income			
<\$40,000	252/322 (78.3%)	137/183 (74.9%)	115/135 (85.2%)

* Sample includes sexually active Black and Latina women aged 18-64 years that did not report HIV-positive status

Figure 1. PrEP Attitudes among Black and Latina Women Surveyed*, Sexual Health Survey, New York City, Fall 2017 (n=126)



*Sample includes sexually active Black and Latina women aged 18-64 years that were aware of PrEP and did not report HIV-positive status

PrEP Aware and Use

Over one-third (34.1%; n/N = 126/370) of participants reported to be aware of PrEP

Awareness was significantly higher among non-Latina Blacks (39.8%; n/N = 88/221) than Latinas (25.5%, n/N=38/149) (p=0.004)

In the past 6 months, 1.4% (n/n = 5/361) of participants reported to have used PrEP

PrEP Attitudes (Figure 1)

Nearly one-fourth (24%) reported having discussed PrEP with a provider in the past 6 months

Almost all reported they would be very comfortable (41%) or comfortable (52%) talking to their doctor or healthcare provider about PrEP

Almost two-thirds (60%) did **not** feel they would benefit from taking PrEP

Majority (70%) were not at all interested in taking daily PrEP

PrEP Attitudes (Figure 2)

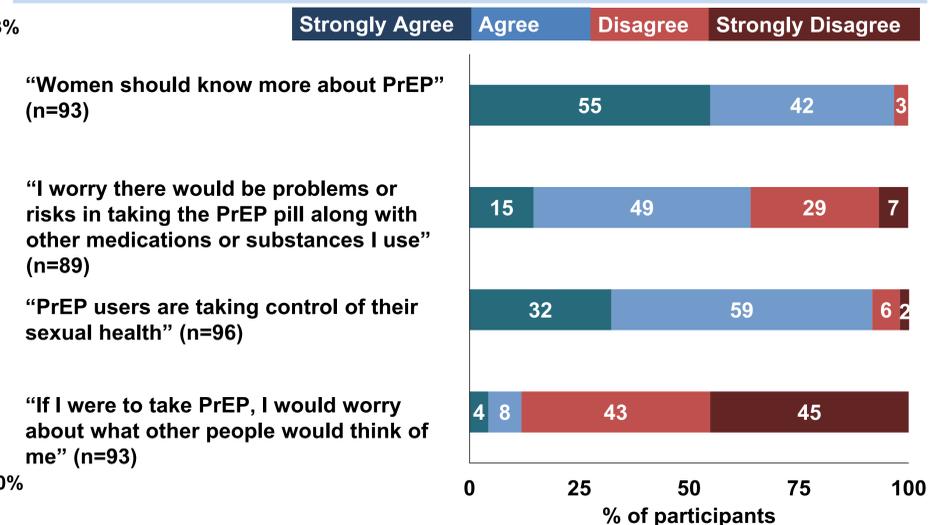
About 97% strongly agreed (55%) or agreed (42%) with the statement: **Women should know more about PrEP.**

About 64% strongly agreed (15%) or agreed (49%) with the statement: **I worry there would be problems or risks in taking the PrEP pill along with other medications or substances I use.**

About 91% strongly agreed (32%) or agreed (59%) with the statement: **PrEP users are taking control of their sexual health.**

About 88% strongly disagreed (45%) or disagreed (43%) with the statement: **If I were to take PrEP, I would worry about what other people would think of me.**

Figure 2. PrEP Attitudes among Black and Latina Women Surveyed*, Sexual Health Survey, New York City, Fall 2017 (n=126)



*Sample includes sexually active Black and Latina women aged 18-64 years that were aware of PrEP and did not report HIV-positive status

† Limited differences in attitudes towards PrEP observed by race/ethnicity.

Summary of Main Findings

- Approximately *one in three* Black and/or Latina women in high-diagnosis NYC neighborhoods were aware of PrEP.
- Despite their own lack of perception of PrEP need/interest, respondents felt women should know more about PrEP;
- Women did not express concern about theoretical disclosure of PrEP use and maintained a positive view of other PrEP users;
- Women felt comfortable talking with providers but expressed concern about potential adverse effects; and
- Black and Latina women did not differ significantly in their attitudes towards PrEP.
- Limitations**
 - Data were self-reported; potentially subject to recall error and social desirability bias.
 - Data collected cross-sectionally; cannot measure individual-level attitudinal changes over time or distinguish temporality between PrEP use and behavior.
 - Modest sample size and small numbers of those aware of PrEP may limit ability to identify statistically significant correlates of outcomes.
 - Convenience sample; potentially subject to selection bias.

Conclusions & Implications

- Our findings can inform the development of standards for evaluating stigma as an implementation barrier to HIV prevention among Black and/or Latina women
- Our findings contribute evidence to strengthen PrEP delivery and use among Black and/or Latina women in New York City:
 - Providers should be prepared to address concerns about adverse effects when considering PrEP as an HIV prevention tool for Black and/or Latina women.
- NYC DOHMH is utilizing these data to inform social marketing (a) and provider education campaigns (b,c) to increase PrEP awareness among women and PrEP provision by women's healthcare providers, including a public health detailing campaign.

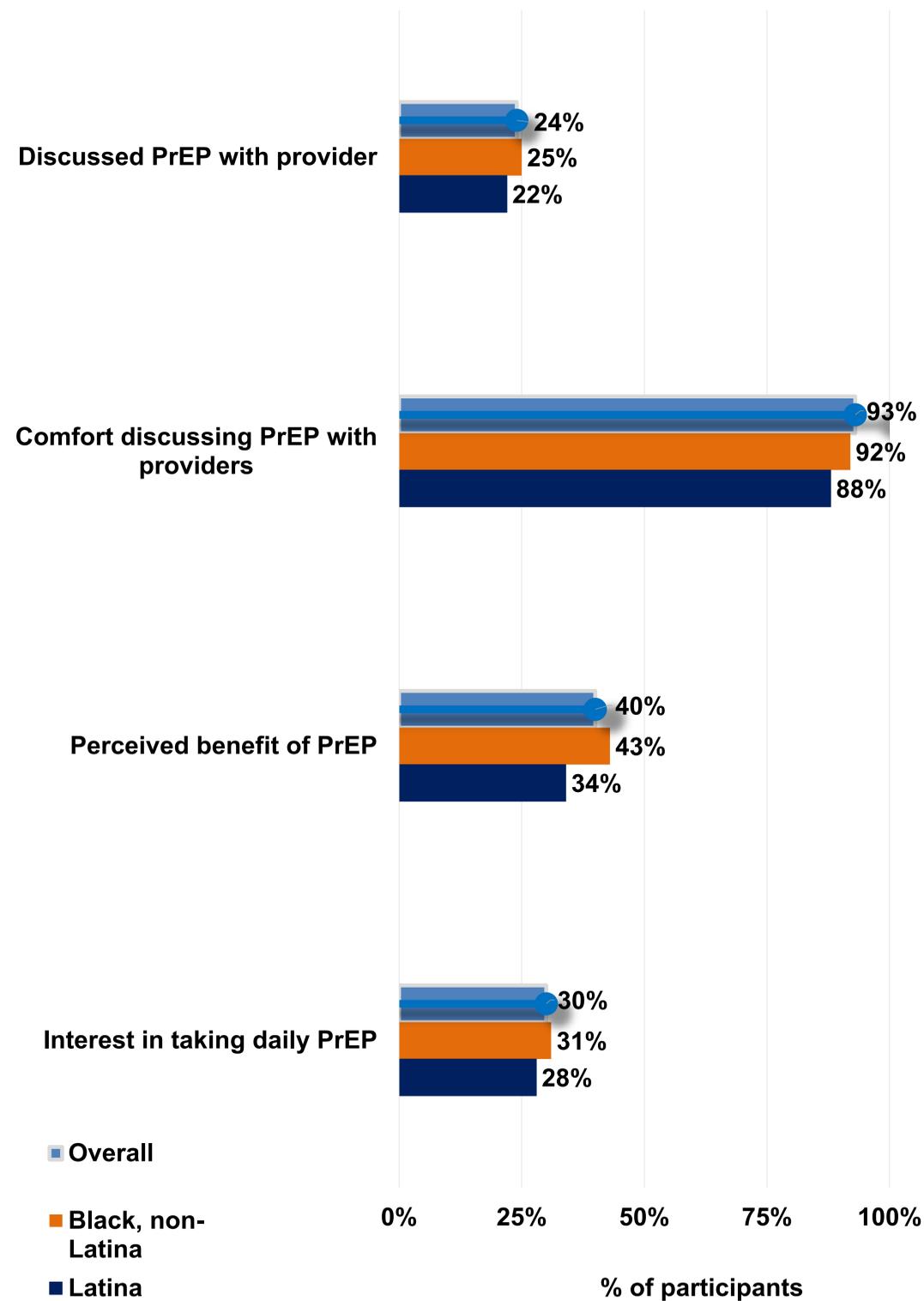


Acknowledgements

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Appendix A. Figures Stratified by Race/Ethnicity

Figure 3. PrEP Attitudes among Black and Latina Women Surveyed Stratified by Race/Ethnicity*, Sexual Health Survey, New York City, Fall 2017 (n=126)

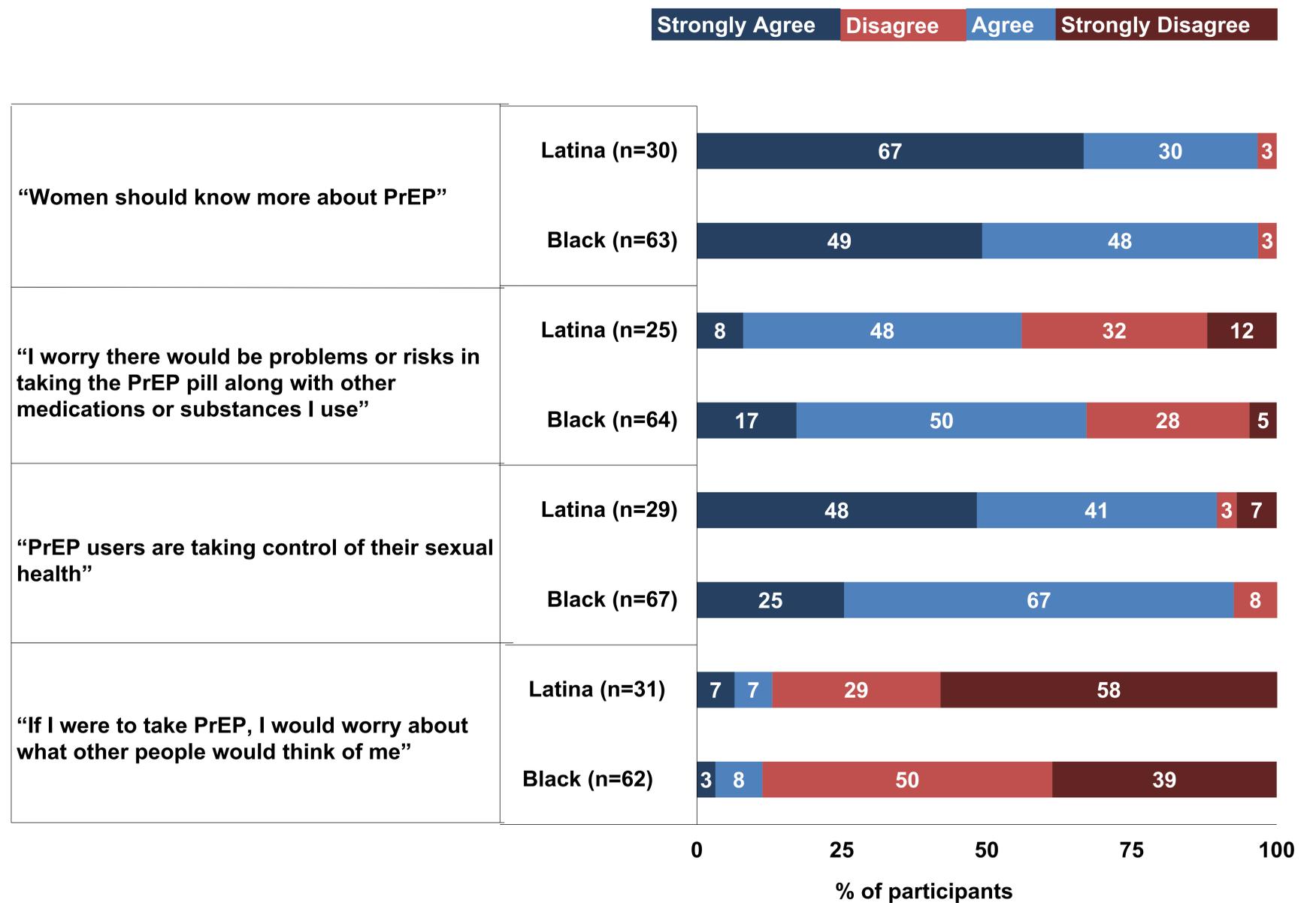


*Sample includes sexually active Black and Latina women aged 18-64 years that were aware of PrEP and did not report HIV-positive status

Key Findings

- Our findings suggest that Black and Latina women in our sample did not differ significantly in their attitudes towards PrEP

Figure 4. PrEP Attitudes among Black and Latina Women Surveyed Stratified by Race/Ethnicity*†, Sexual Health Survey, New York City, Fall 2017 (n=126)



*Sample includes sexually active Black and Latina women aged 18-64 years that were aware of PrEP and did not report HIV-positive status
 † Limited differences in attitudes towards PrEP observed by race/ethnicity.