Developing a Peer-Led Navigation Program that Addresses Intersectional Stigma to Improve Access to PrEP for HIV-Prevention for Women Involved in the Carceral System

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INTRODUCTION

- In the US, women account for ~19% of new HIV infections.
- Women involved in the carceral system (WICS) experience multifaceted and stigmatized sexual, and substance use behaviors that increase their risk of HIV-acquisition and reduce their access to prevention healthcare services.
- PrEP uptake among women is low (<5% of all PrEP prescriptions) and initiation has declined in recent years.
- This study uses the Intersectionality-Enhanced Consolidated Framework for Implementation Research (IE-CFIR) to analyze data collected to inform the development of a peerled PrEP linkage navigation intervention (kINSHIP) designed to address intersectional stigma as a healthcare barrier for WICS.

METHODS

Semi-structured individual interviews with WICS (n=10) and stakeholders from the carceral (CS) and public health (PH) systems (n=15).

ELIGIBILITY

CS-involved women

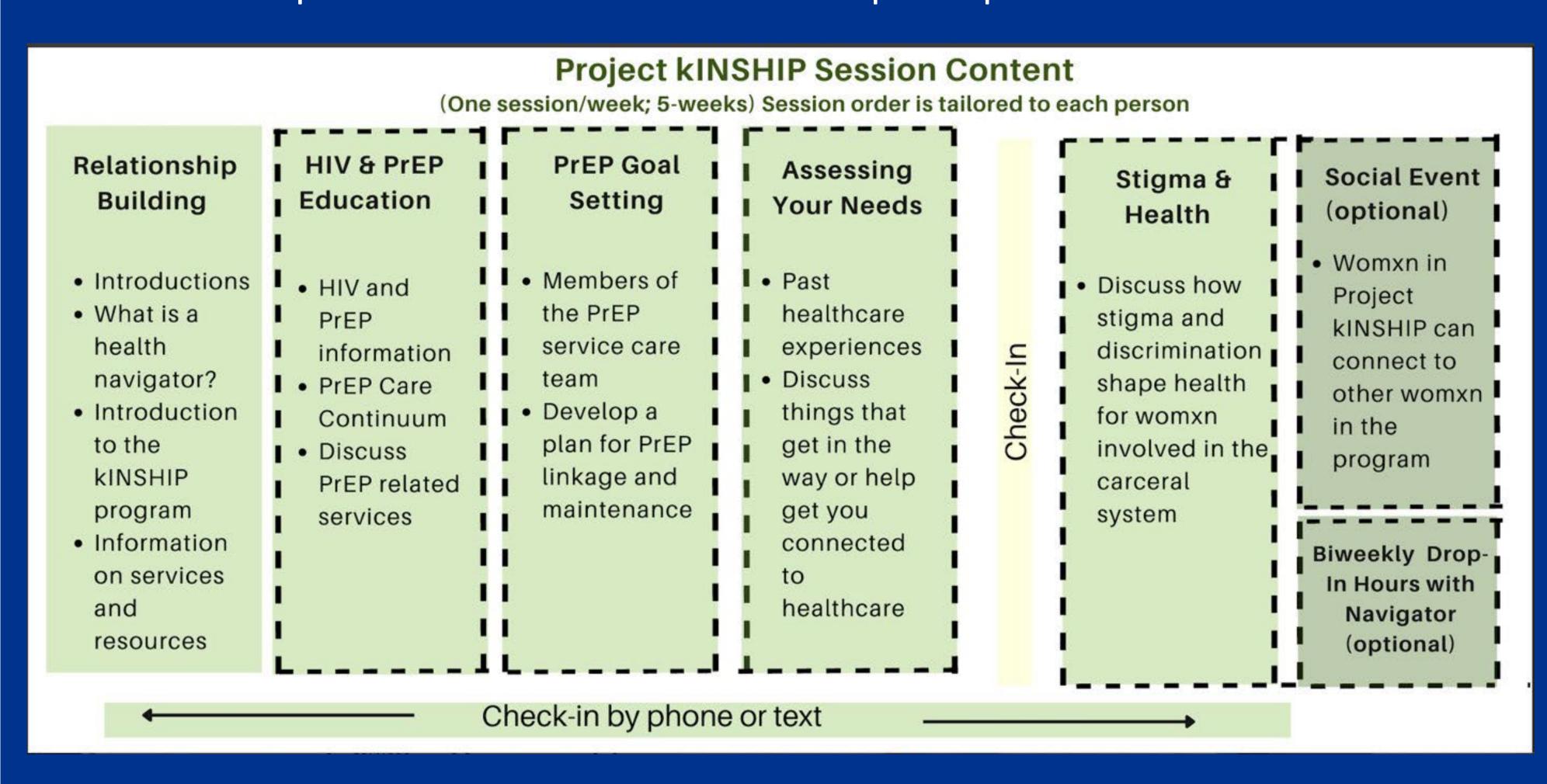
- 18 to 64 years
- CS status < 3 years
- PrEP indication
- English-speaking

CS & PH Stakeholders

- Employed in either the CS or PH system
- Work with gender-based or SH services
- Interviews elicited feedback on a 5-session, 30-day kINSHIP model and asked participants to provide feedback related to session content, structure, and delivery.
- Incentives: \$50 for WICS (\$10 for screening and \$40 for interview) and stakeholders.
- Data analyses were informed by the IE-CFIR using Inductive Thematic Analysis in Dedoose.

CONCLUSIONS

- Participants were optimistic about Project kINSHIP because it addressed gaps in existing PrEP services.
- kINSHIP should incorporate content and activities that address the unique of intersectional stigma and discrimination experiences of WICS.
- Participants suggested collaborating with CS partners, particularly Jail Health Services, because of believed to be championing this work.
- Results informed the revision of Project kINSHIP content, structure, and delivery for testing in a pilot trial (N=75 WICS; see below).
- The Relationship Building session will always be offered first and all subsequent sessions will be tailored to participant needs.



GRANT SUPPORT

Project kINSHIP is supported by the National Institute on Drug Abuse (R34DA050480; PI: Dauria).

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RESULTS

SOCIODEMOGRAPHIC CHARACTERISTICS

- WICS: M_{age} = 29 years; 78% self-identified as being from a racial or ethnic minority group; 67% <\$10,000 annual income; 78% had a high school graduate degree or higher.
- Stakeholders: $M_{years in the system}$ = 12 years; 67% female identifying; 73% have graduate-level education.

TABLE. Factors shaping Project kINSHIP implementation

with WICS, by domain and construct of the IE-CFIR (N=25). **IE-CFIR Domain Factors Shaping Implementation** Outer Setting (economic, political, and social context). Sessions should include activities that address WICS' experiences of discrimination related to women's intersecting stigmatized identities (e.g., CS involvement, gender, Patient needs race; Spotting Stigma activity). and resources Intervention should incorporate CS contact (w/consent) to meet participants' court requirements. Expand recruitment procedures to include External policies contact during jail detention given COVIDand incentives related probation service disruption. Inner Setting (the institution's structural, political, and cultural context). To be *compatible* sessions should be offered Implementation in an order that is responsive to individual climate

- needs and allow for social support. Incorporate CS contact procedures (w/ consent) to meet participants' court requirements and reduce burden. Readiness for
- Access to knowledge and information will be supported with brief sessions (<45 min.) implementation that limit written text, avoid triggering language, and allow for self-reflection (e.g., journaling).
- Collaborate w/ jail health staff champions Champions