

DEPARTMENT

Interpersonal Violence among People living with HIV: Findings from the Texas Medical Monitoring Project

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Background

- Decreasing interpersonal violence (IPV) among people living with HIV (PLWH) is a priority outlined in the national HIV prevention goals, and may have an impact on key HIV outcomes such as adherence to antiretroviral therapy (ART).
- 2010-2012 National Intimate Partner and Sexual Violence Survey reports 37.3% of U.S women have experienced IPV in their lifetime and 6.6% have experienced IPV in the last 12 months. 30.9% of men experienced IPV in their lifetime and 6.4% in the last 12 months.
- This study aim is to assess the overall proportion PLWH who experienced IPV and their demographics, to help determine the use of and need for domestic violence (DV) services among PLWH in Texas.

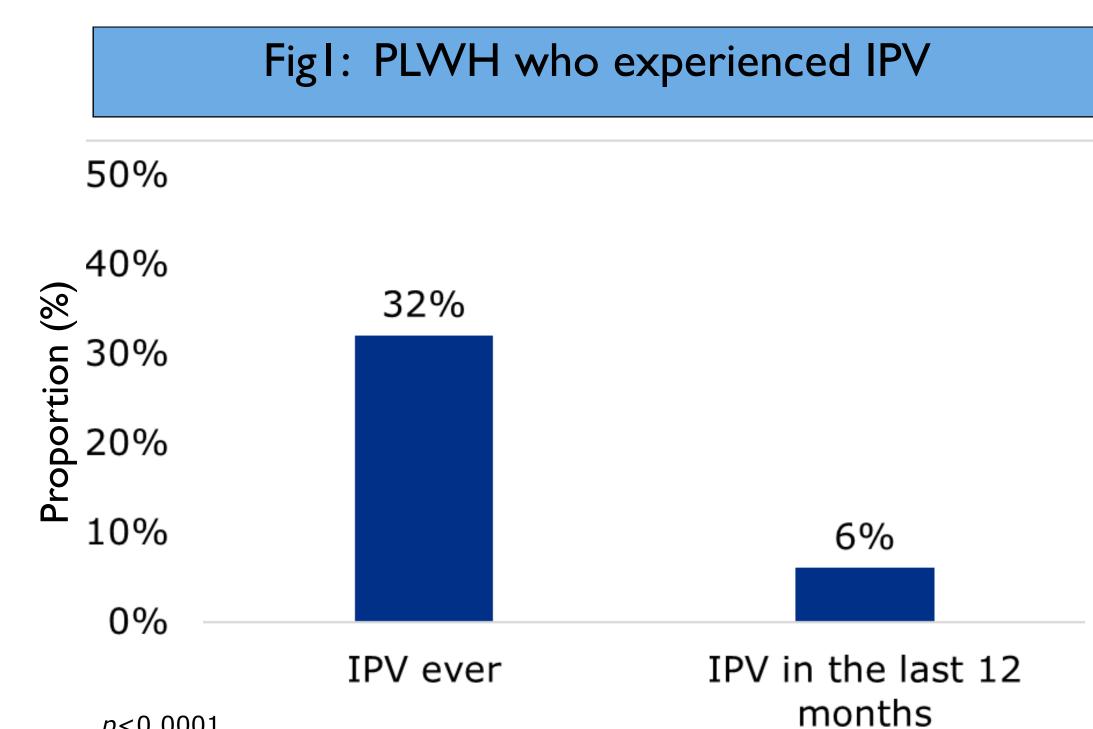
Methods

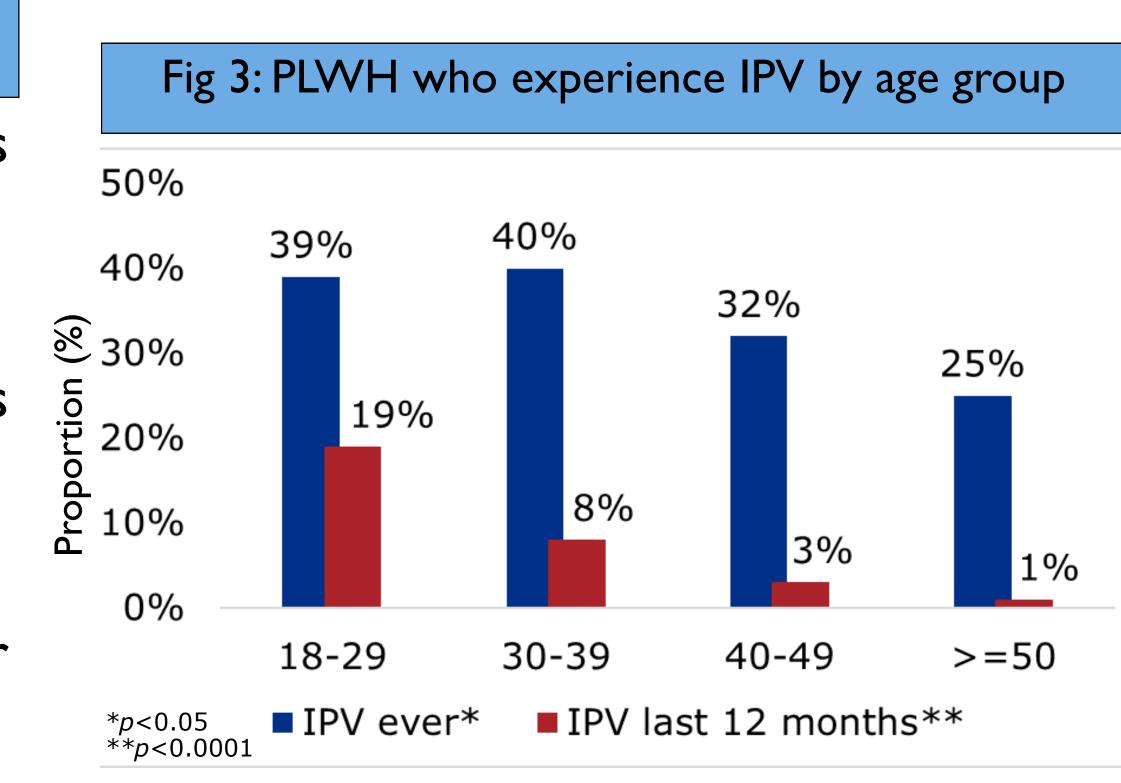
- The Medical Monitoring Project (MMP) is an ongoing surveillance system that assesses behaviors and clinical characteristics of people living with HIV.
- MMP: two stage sampling method in 23 city/state project areas.
- Interviews and medical record abstractions were conducted among 638 PLWH in Texas between June 2015-June 2017.
- IPV: physical violence by an intimate partner or sexual violence by anyone.
- Participants were asked if they experienced IPV in their lifetime and the 12 months prior to the interview.
- Participants were also asked if they received DV services in the previous 12 months.
 Those who did not receive DV services were asked if they needed DV services within the previous 12 months.
- Adherence to antiretroviral therapy (ART) was defined using a composite score of 3 survey questions.
- Demographic differences within lifetime experience of IPV were assessed using chi- $\frac{800}{5}$ square test, and significance level was determined at α =0.05.

Results Summary

• 32% reported experiencing IPV in their lifetime vs. 6% within the last twelve months (p<0.0001, Fig. 1).

Results





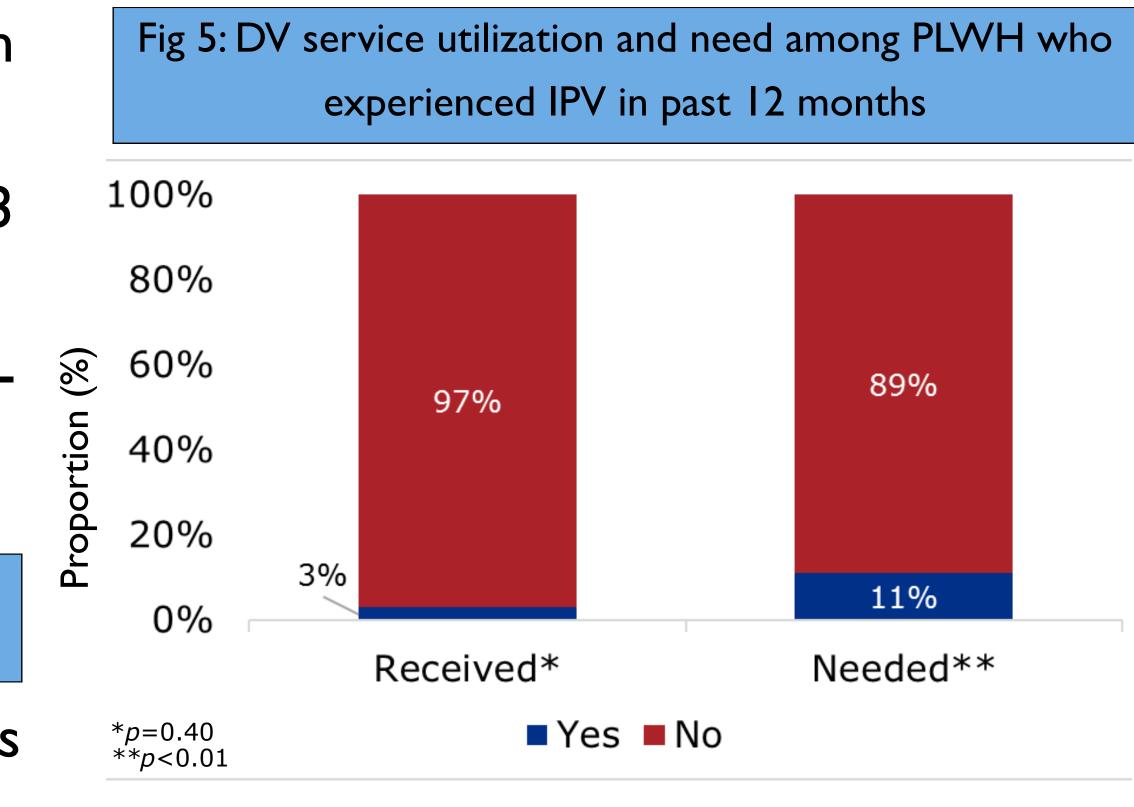
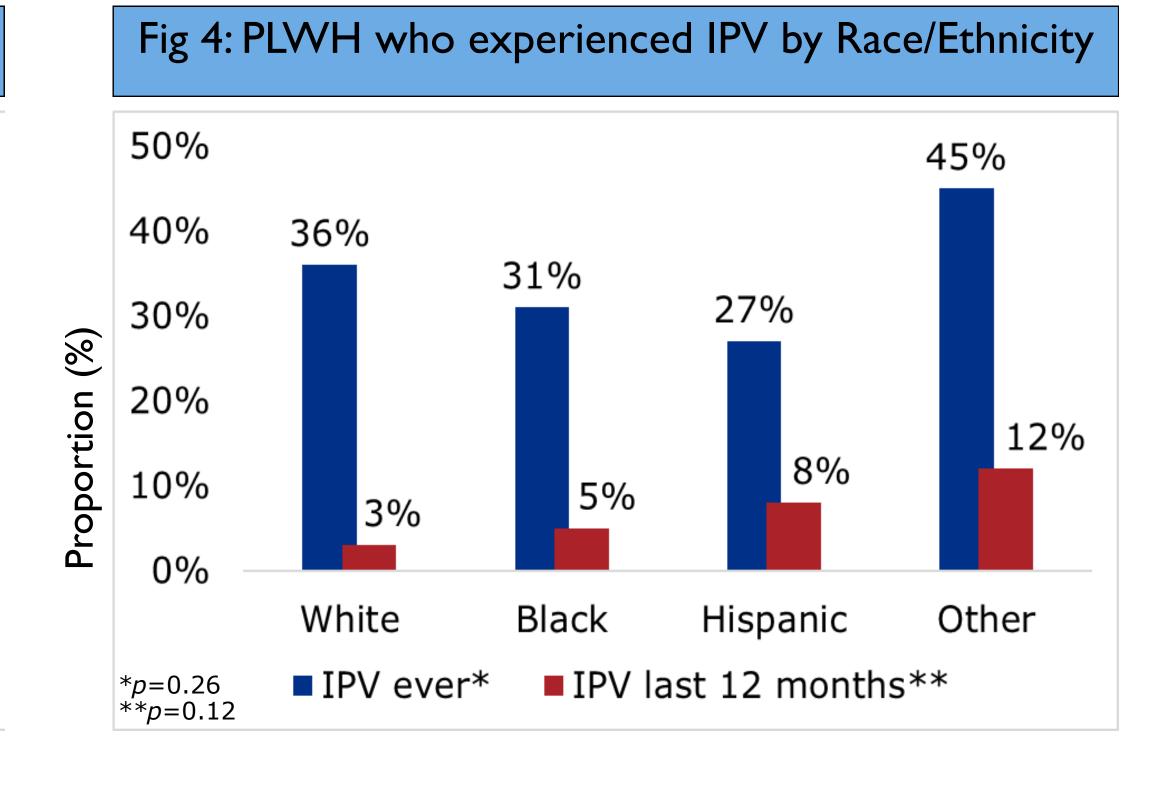
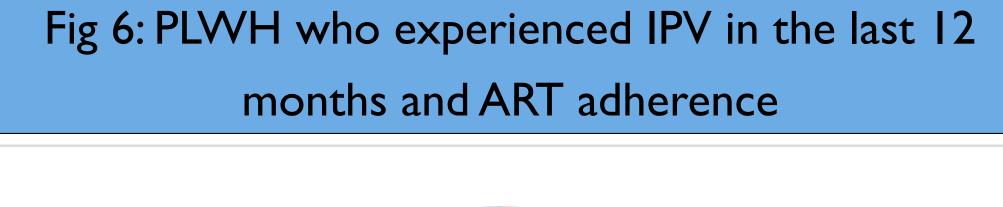
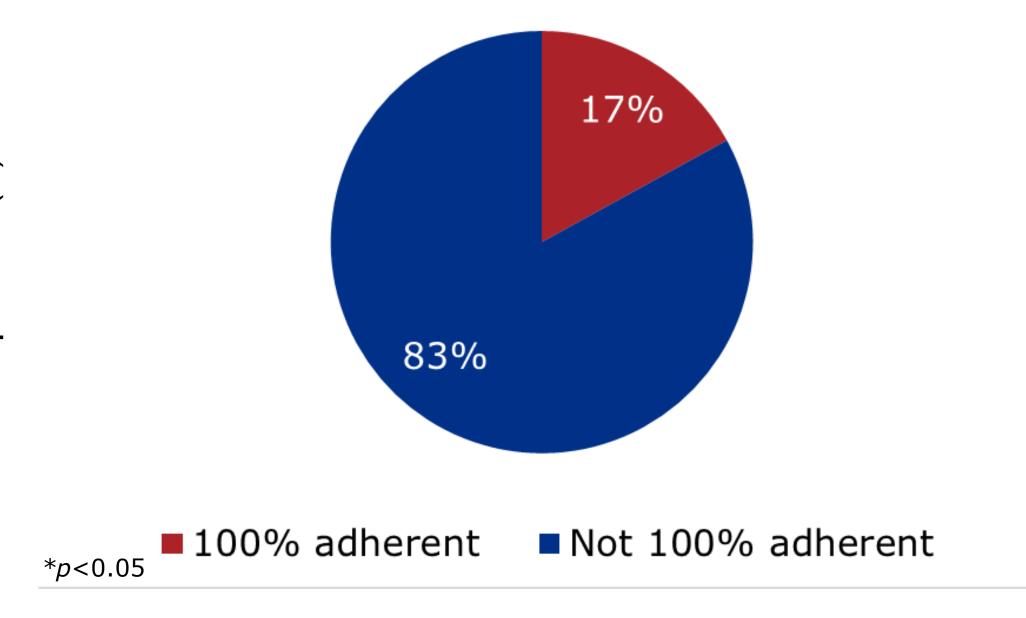


Fig 2: PLWH who experienced IPV by Gender 50% 46% 40% 30% 20% 10% 6% Women MSM MSW *p<0.0001 **p=0.4514 **IPV ever* **IPV last 12 months**







Results Summary

- More women (45%) experienced IPV in their lifetime than men (28%) (p<0.01).
- Thirty-two percent of men who have sex with men (MSM) reported experiencing IPV in their lifetime vs. 18% of men who have sex with women (MSW) (p<0.01, Fig. 2).
- Increasing age was inversely associated with IPV experience prevalence: 19% among <30; 8% among 30-year olds; 3% among 40-year olds; 1% among ≥50 (p<0.01, Fig. 3)
- No significant difference among PLWH who experienced IPV and race (p=0.26, Fig. 4)
- 97% of participants who experienced IPV in the last 12 months said they did not receive DV services (p=0.40), and of that 97%, 11% said they needed DV services (p<0.01, Fig. 5).
- 17% of PLWH who experienced IPV in the last 12 months were 100% adherent to ART (p<0.05, Fig. 6) compared to 41% of PLWH who did not experience IPV in the last 12 months.

Conclusions

- The overwhelming majority of participants who experienced IPV within the last 12 months stated they did not need nor did they receive DV services. Only one participant who experienced IPV in past 12 months received DV services indicating that increased awareness and referrals for DV services may be needed.
- As outlined in the National HIV/AIDS Strategy efforts to expand public outreach, education, and prevention efforts on HIV and the intersection of IPV through IPV screenings and services are needed.
- Ryan White HIV/AIDS Program Part D funding supports progress along the HIV care continuum to improve the health and life span of PLWH including IPV screening and counseling.
- In order to decrease IPV, HIV care and case management should be oriented to identify and address barriers to DV services at individual and organizational levels.

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