RETENTION IN CARE – PrEP – TUBERCULOSIS
SCIENCE AND COMMUNITY IN THE HIV RESPONSE
IN THE CARIBBEAN

AIDS 2018 POST-CONFERENCE WORKSHOP

Haiti, 28-29 November 2018
Puerto Rico is an organized but unincorporated territory of the United States of the America since 1898.

- PR lacks self-determination
- Puerto Ricans on the islands do not have full representation in Congress and cannot vote for president
- US federal mandates take precedence over local legislation and policies in all areas of governance
And Hurricane Maria happened

• On September 20, 2017 Hurricane Maria struck PR as a Category 4 hurricane.

• This was just 2 weeks after category 5 Hurricane Irma impacted PR causing significant damage to the electric infrastructure, houses, and roads leading to the declaration of disaster zones in nearly 30 municipalities.

The perfect storm

• What PR has experienced since September, 2017 was a perfect storm caused by the natural disaster of a major hurricane and a human-made financial crisis manufactured by bankers and predatory class of investors.

• Under the economic and social circumstances imposed by austerity measures in PR, it was impossible for individuals and their government to be prepared for hurricanes and its aftermath.

Rodriguez-Diaz, 2018
Puerto Rico in the context of the US HIV epidemic

Hispanics/Latinx make up 17% of the U.S. population but accounted for 24% of all new HIV diagnoses in 2015. Some of the most impacted cities include:

- Miami
- San Juan
- New York City
- Houston
- Chicago

Number of Hispanic/Latina persons newly diagnosed with HIV, 2015

Puerto Rico is 9th in HIV incidence among adults and adolescents ≥ 13
17.8 per 100,000

Puerto Rico is 5th in HIV prevalence among adults and adolescents ≥ 13
564 per 100,000

Puerto Rico is 10th in amount of AIDS cases (Stage 3)
HIV in Puerto Rico
December, 2017

48,769 HIV cases reported

| 28,663 deaths | 18,627 people in PR living with HIV | 671 Children (0-12yo) diagnosed with HIV |

PR Department of Health, 2017

Epidemiology of HIV in PR
1981-2017

www.iasociety.org
HIV incidence among adults in PR
2010-2016

HIV incidence by age and risk factor in PR,
2010-2016
Among men who have sex with men engaging in condomless anal intercourse in San Juan (N=191):

- 15% had ever had an STI
- 85% had ever heard of PrEP
  - 64% Reported likelihood of using PrEP
  - A third needed more information before using PrEP
  - 38% reported won’t use it because cannot afford it

In a sample of HIV-positive MSM, less than 19% knew of PEP or PrEP
Access to HIV services

• People may avoid HIV services due to experiences of discrimination, prejudice and stigma
  o Reinforced by rigid religious morality
  o **Fear of result**, low-perceived HIV risk, **confidentiality concerns**, and lack or limited knowledge of care settings

CDC, 2016; Mazzán, Rodríguez, & Varas, 2013; Pharr, Lough & Ezeanolue, 2015; Solorio, Forehand, & Simoni, 2013

Access to HIV services Cont.

• Previous research on **LGB health in Puerto Rico** has documented:
  – Based on behavioral surveillance data, **nearly half of GBMSM have not tested for HIV recently**.
  
  – Among LGB people, nearly half (N= 233) do not self-disclose their sexual orientation to healthcare providers.
    • 13.1% have reported **experiences of discrimination** at healthcare settings.
  
  – Less than 15% of primary healthcare providers have received training on LGBT health issues.

Colón-López et al, 2015; Rodríguez-Díaz et al, 2015
HIV continuum of care in PR
2013

Approximately 46% of all people with HIV are virally suppressed

People living with HIV
Linked to care
Engaged or retained in care
Prescribed antiretroviral therapy
Achieved viral suppression

PR Department of Health, 2017

HIV co-morbidities in Puerto Rico

- Over 95% of patients with HIV present at least one co-morbidity

<table>
<thead>
<tr>
<th>Most common co-morbidities</th>
<th>Frequency (N=250)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dyslipidemia</td>
<td>152</td>
<td>60.8</td>
</tr>
<tr>
<td>Alcohol abuse</td>
<td>122</td>
<td>48.8</td>
</tr>
<tr>
<td>Hypertension</td>
<td>99</td>
<td>39.6</td>
</tr>
<tr>
<td>Cigarette smoking</td>
<td>89</td>
<td>35.6</td>
</tr>
<tr>
<td>Overweight</td>
<td>67</td>
<td>26.8</td>
</tr>
</tbody>
</table>

Rodríguez-Díaz et al, 2016
HIV post Maria: Government response

**Ryan White Program**
- Ordered all ADAP network pharmacy to refill medication for 30 days to as much patients as possible.

**HIV Care & Public Health Laboratory**
- Services were interrupted for at least 2 weeks due to shortage of materials.
- Some labs buildings were affected and ran on power generators for almost 2 months.

**HIV Surveillance**
- Between September 2017 and January 2018, approximately 60-70 PRMIs lost the island.
- Most relocated to continental United States (Florida and Texas).

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**HIV post Maria**

Data gathered from September 20, 2017 to March 31, 2018

**Focus Group**
- All cases with at least one cause of death identified as a "HIV".
- Source: PR Department of Health

**Secondary Data Analysis**
- HIV Positive YMSM
- Experiences related to the aftermath of the hurricanes
- Source: Contacto en Grupo Project

**Governmental Strategies**
- HIV Care and Ryan White Program Response
- Enhanced HIV Surveillance
- Source: PR Department of Health

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Marzán-Rodríguez et al, 2018

www.iasociety.org
## Secondary Data Analysis

Table 1
Selected sociodemographic characteristics of people who died between September 20, 2017 and March 31, 2018 and had HIV as one of the causes of death (N=89)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Category</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CD4 levels</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>51</td>
<td>57.3%</td>
</tr>
<tr>
<td>Normal</td>
<td>38</td>
<td>42.7%</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than HS Diploma</td>
<td>39</td>
<td>43.8%</td>
</tr>
<tr>
<td>HS Diploma</td>
<td>10</td>
<td>11.4%</td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployed</td>
<td>15</td>
<td>17.1%</td>
</tr>
<tr>
<td>Employed</td>
<td>74</td>
<td>82.9%</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>10</td>
<td>11.1%</td>
</tr>
<tr>
<td>Female</td>
<td>79</td>
<td>88.9%</td>
</tr>
<tr>
<td>Residential Zone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>52</td>
<td>57.7%</td>
</tr>
<tr>
<td>Rural</td>
<td>37</td>
<td>42.3%</td>
</tr>
</tbody>
</table>

Marzán-Rodríguez et al, 2018

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Thank you! ¡Gracias! Merci

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