ATN 160: TechStep
Summary of Study Results

Full Title

TechStep: Technology-based Stepped Care to Stem Transgender Adolescent Risk Transmission

Study Description

Transgender & gender expansive youth and young adults get HIV at higher rates than cisgender young people. The goal of TechStep was to try different ways to help lower the HIV infection rate among transgender & gender expansive (TGE) youth and young adults. TechStep was designed to help TGE learn more about and think about their behaviors involving things like PrEP and condom use.

In TechStep we tested and compared two smartphone interventions to see if one or both would help reduce behaviors that could lead to HIV among HIV-negative TGE youth and young adults. One intervention was a text-messaging intervention where participants received three text messages a day for 180 days. The text messages gave them information (about things like sexual health) and support, and provided tips on how to engage in safe sexual behaviors. The other intervention was a webapp (that is, a website formatted to emulate a mobile app) that participants would use, which provided health tips, allowed participants to interact with each other using text and pictures, provided a way to track any behavior (such as hormones or medication adherence), and linked participants to transgender health resources. In addition to these two interventions, some participants also received "eCoaching," which allowed them to meet online with coaches weekly who were trained to help participants with issues related to their health and wellbeing. eCoaching was given in addition to their original intervention (text or webapp). Some examples of possible eCoaching topics are 1) assertive communication to set boundaries, and 2) addressing inequities.

In total, we enrolled 254 youth and young adults (ages 16 to 24) in California, Massachusetts, New York, Pennsylvania, or Texas.

Study Results

Most of the participants in TechStep identified their gender as genderqueer or trans man, however some participants identified as trans women, agender, female, male, or another gender. Two-thirds of participants (n=169) were 21 years old or older. About one-quarter of participants (n=61) identified as Hispanic or Latino/a/x, and just over half (n=144) were white.

Almost one-half of the participants (n=116) reported having sex without a condom during the three months before they enrolled in the study. Of those that reported having sex in the past three months, nearly one-half (n=112) said that they were feeling the effects of drugs or alcohol when they had sex.

About 90% (n=224) said they had used alcohol or cannabis (weed) in their lives. About 40% of the participants (n=105) said they had ever used hallucinogens in at least once in their lifetime and around one-third (n=82) said they had ever used stimulants.

Compared to non-binary participants, those that identified as transgender were more likely to say their outward appearance or physical body matched their gender identity. Also, those that identified as transgender were more likely to have used hormones.

Over 90% of the participants (n=243) had heard of PrEP, the medication that can prevent someone from getting HIV if they are exposed, but less than 15% (n=35) had ever used PrEP.

Study Implications

Early data shows that while participants had heard of PrEP medication to prevent HIV, very few had ever used the medication. Also, condom use was low, and sex while on alcohol or drugs was high. We are looking at the data to see if one or both of the smartphone interventions helped the participants to reduce risk behaviors that can lead to HIV. If so, the intervention(s) can help change the risk behaviors, which could reduce the spread of HIV.

Authors

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Support