

Barriers to engagement in HIV care for women living with HIV in Mexico



P012

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Background

- Women receiving care for HIV in Mexico more frequently disengage from medical care and interrupt treatment (ART) than men.
- Information on barriers that Mexican women face to access and engage in medical services and adhere to ART is limited.
- We explored potential barriers for engagement in care among women with HIV; and compare characteristics of women that interrupted ART with those that never withdraw treatment, assuming that ART adherence is a good surrogate of engagement.

Methods

- Cross-sectional, observational study during 2018.
- Women receiving HIV-care in centers in geographically and culturally diverse regions (Mexico, Cuernavaca and Oaxaca cities).
- We collected data on individual, family, socioeconomic, physical, and gender-role characteristics using structured questionnaires.
- We compared characteristics of women self-reporting treatment interruptions (TI) with those never withdrawing ART.

Results

- We interviewed 167 women. Most were on ART (152/167, 91%). (Table 1)
- **Self-reported Treatment Interruptions: 24%.**

Table 1. Sociodemographic characteristics of women with HIV receiving care in 3 centers in Mexico (n=167) ¹

Characteristics	All (n=167)	Treatment Interruption	
		NO (n=115)	YES (n=37)
Age in years, p50 (p25-p75)	39 (31-48)	39 (12-87)	38 (17-64)
Marital status (n=167)		n=112	n=36
Single	58 (35%)	39 (35%)	13 (36%)
Married	70 (42%)	51 (45%)	13 (36%)
Divorced/separated	5 (3%)	3 (4.5%)	1 (2.7%)
Widow	30 (18%)	19 (17%)	9 (25%)
Education (≤9 years), n= 62	36 (60%)	23 (37%)	11 (58%)
Residence in urban area ²	97 (59%)	66 (58%)	21 (58%)

¹ Reported as number and percentage except when indicated. ² Mexico City n=85, Oaxaca n=47, Cuernavaca n=37

- **We observed no differences in the distribution of distance to clinic, mode, and cost of transport, and time to the clinic**

Figure 1. Distribution of length of treatment interruption (n=19)

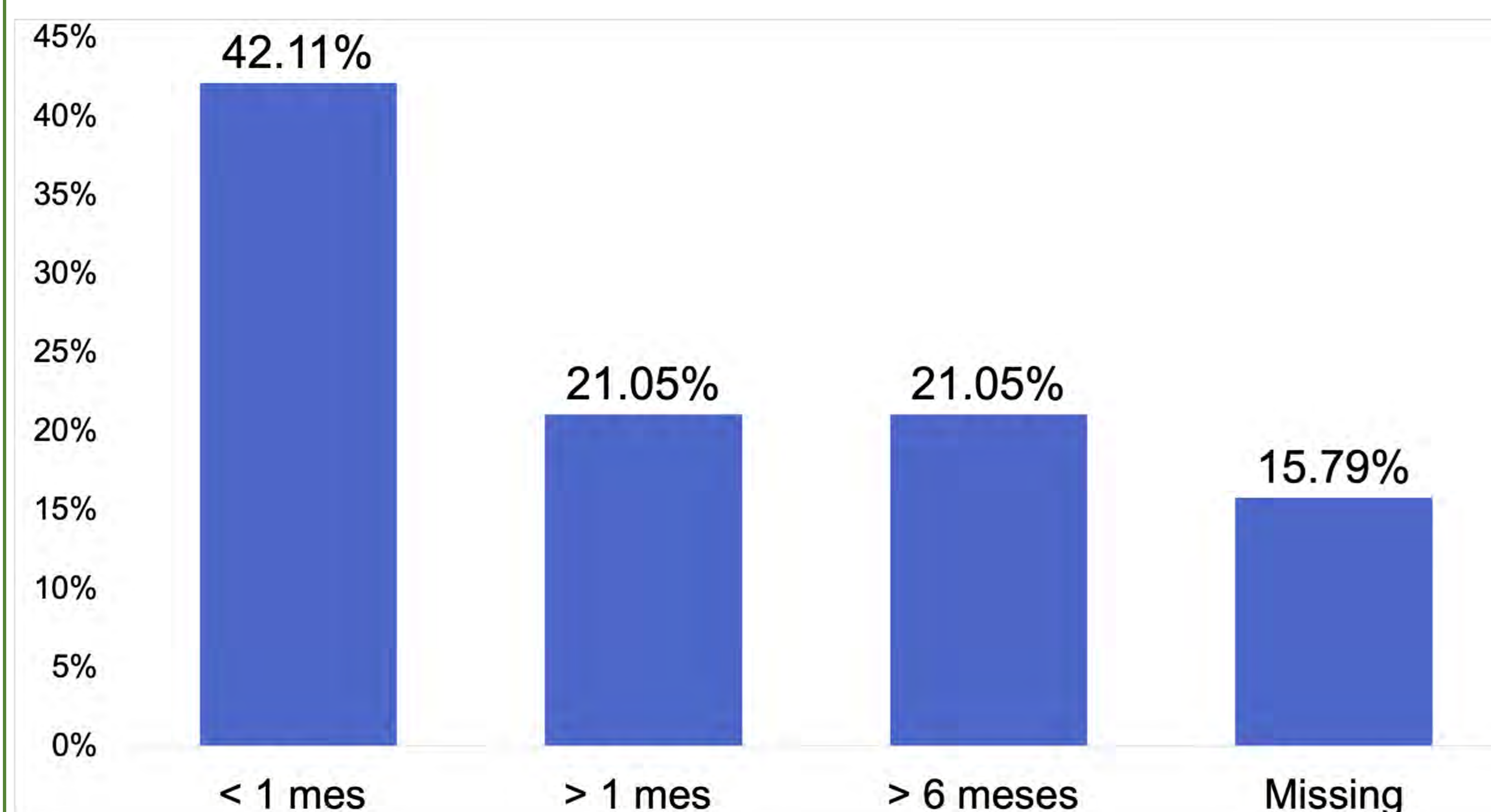


Figure 2. Frequency of self-reported reasons for ART interruption

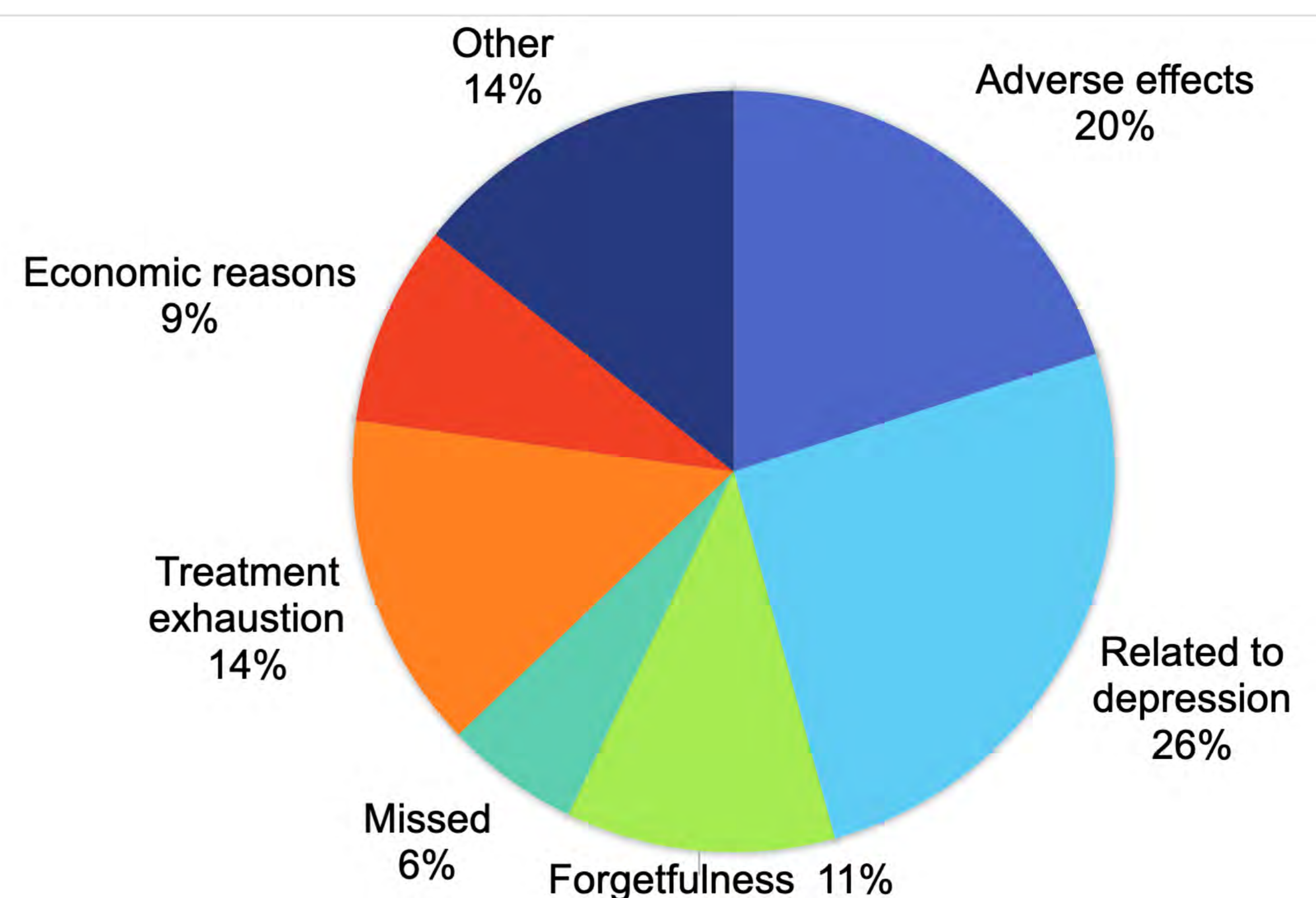


Table 2. Comparison of characteristics between women with and without treatment interruption (n=152)

Characteristic	Treatment Interruption	
	NO (n=113)	YES (n=37)
Women with children	86 (76%)	33 (89%)
Child with HIV	6 (7%)	4 (12%)
Partner gender and HIV status	n=103	n=32
Man HIV-	15 (14%)	8 (25%)
Man HIV+	36 (35%)	7 (22%)
Man without test	5 (5%)	4 (12%)
No partner	47 (46%)	12 (37%)
Partner death due to AIDS	17 (28%)	8 (80%)
Family income, per month	n=82	n=31
< 4000 pesos	47 (57%)	24 (77%)
> 4000 pesos	30 (36.5%)	4 (13%)
Unknown	5 (6%)	3 (10%)
Contributes to family income	n=77	n=27
Partially	48 (62%)	13 (48%)
No contribution	15 (19%)	7 (26%)
Only contributor	14 (18%)	7 (26%)

Conclusions

- A high proportion of women receiving care for HIV in 3 different regions in Mexico self-report treatment interruptions.
- Different factors related to individual (age and education), medical (depression and drug toxicity), partnership and family (marital status, and partner's HIV-status, having children), socioeconomic (family income), and related to gender roles (caring for children and being economically dependent or head of household) appear to negatively impact the ability of women to adhere to ART.
- Our study reinforces the need to better understand the barriers for women to maintain ART adherence over long periods of time.