Multidimensional violence experiences and HIV vulnerabilities among gender diverse sex workers in Jamaica

Presented by Dr. Carmen Logie
Factor-Inwentash Faculty of Social Work, University of Toronto, Toronto, Canada
Co-authors: Ying Wang\textsuperscript{1}, Kandasi Levermore\textsuperscript{2}, Davina Williams\textsuperscript{2}, Patrick Lalor\textsuperscript{3}
\textsuperscript{1}: University of Toronto, Toronto, Canada; \textsuperscript{2}: Jamaica AIDS Support for Life, Kingston, Jamaica; \textsuperscript{3}: Sex Work Association of Jamaica, Kingston, Jamaica
Background

Jamaica AIDS Support For Life


Let's take off our masks and talk
Sex work, criminalization and HIV

- Sex workers are a key population that experience criminalization, rights violations and violence\(^1\).
  - This combined with a lack of legal protection elevates risk of HIV exposure.

- AIDS is Jamaica's leading cause of death for persons aged 18-49\(^2\).
  - Caribbean: global region most impacted by HIV following Sub-Saharan Africa\(^3\).
  - UNAIDS (2018): 31% of people with HIV in Jamaica were on treatment, 25% virally suppressed.
LGBTQ persons and sex work in Jamaica

• Many sex workers in Jamaica identify as lesbian, gay, bisexual, transgender and/or queer (LGBTQ)\textsuperscript{4,5}
  
  * pervasive discrimination and criminalization of same sex practices in Jamaica are barriers to employment

• Gay and bisexual men’s HIV prevalence is estimated at 32.8%-the Caribbean’s highest and and 17-fold higher than Jamaica’s general population prevalence of 1.9\textsuperscript{5}

• Trans women’s HIV prevalence is \~25%; our work identified more than half (52%) reported sex work

• Cisgender women sex worker’s HIV prevalence estimated at 2.8% (1.4 fold higher than national estimate)

• Jamaica is one of 72 countries that criminalizes same-sex sexual practices, a legacy of British colonial rule
Laws impact sex workers in Jamaica

Town & Communities Act:
- Section 3(r) - Loitering and Soliciting in a Public Place for Prostitution
- Section 7 - Disturbing the Peace, Lying or Loitering in Open Spaces
- Section 9(b) - Indecent Exposure

Sexual Offences Act:
- Section 23(1) - Living off the Earnings of a Prostitute: “Every person who (a) knowingly lives wholly or in part on the earnings of prostitution; or (b) in any place, whether public or private, persistently solicits or importunes for immoral purposes, commits an offence…”
- Section 23(2) - Living with or being habitually in the company of a prostitute
- Section 23(3) - Using a house for prostitution

Offences Against the Person Act (Section 68) - Suppression of Brothels

Constabulary Force Act (Section 20): “Empowers a constable to take measures to prevent congestion of a public thoroughfare by the giving of commands to move on, and keep moving. Sex workers, who congregate at particular public locations and on public streets, especially in busy commercial areas, in order to attract clients, need to be aware that failing to obey such commands, can result in their arrest”
Criminalization, violence & health

• Criminalization and policing of sex work renders sex workers vulnerable to violence and result in a lack of legal protection from harm and/or recourse to justice

• A systematic review of 28 studies found that policing practices were independently associated with increased violence against sex workers

• Violence among sex workers is associated with HIV vulnerabilities
  • Studies in Thailand and India report violence was associated with lower condom use with clients
  • Also studies in Russia & China found associations between excessive alcohol use, police & client sexual coercion
  • Police violence also associated with limited access to police services & other public services, such as healthcare
  • Alcohol may be a coping strategy for violence
  • Convergence of police violence, substance use & lack of access to health prevention & legal protection (structural violence)
HIV, Gender, Race, Sexual Orientation, and Sex Work: A Qualitative Study of Intersectional Stigma Experienced by HIV-Positive Women in Ontario, Canada

Carmen H. Logie, J., Llana James, Wangari Thaou, Mona F. Loufty.
Study objective

Examine multiple forms of violence (police, client, IPV) among gender diverse (cisgender men, cisgender women, transgender women) sex workers in Jamaica and associations with condom use.

- Also explored binge drinking & condom use self-efficacy as mediators and moderators of this relationship.
Methods

• Community-based research project with Jamaica AIDS Support for Life and Sex Worker’s Association of Jamaica in Kingston, Ocho Rios, and Montego Bay, Jamaica

• Tablet-based peer researcher administered survey to a sample of gender diverse sex workers

• Convenience sampling methods: peer researchers, snowball and venue-based sampling

• Descriptive analyses, followed by logistic regression to estimate OR of consistent condom use

• Structural equation modelling (SEM) with weighted least squares estimation methods to examine:
  ◦ direct effects of 3 forms of violence (police harassment, intimate partner violence, client violence) on consistent condom use,
  ◦ indirect effects via condom use self-efficacy
  ◦ moderation: estimate effect of binge drinking on condom use self-efficacy
Measures

**Consistent condom use** with clients, casual partners (non clients), primary partners (non clients) in past month: always (coded as consistent), vs more than half of the time, less than half, never

**Violence:** multi-dimensional measure used for frequency of police harassment (sexual, physical, robbery, arrested)
- Past 6 month client violence (verbal, physical, sexual)
- Past 6 month partner violence (verbal, physical, sexual)

**Condom use self-efficacy**\(^{11}\): scale for negotiating safer sex (e.g. confidence about suggesting condoms with new sex partners)

**Binge drinking:** how many drinks usually per sitting (>5 coded as binge drinking)
Overview of characteristics

- 340 sex workers in Jamaica (mean age: 25.77 (SD=5.71)
  - 124 (36.47%): cisgender men
  - 101 (29.71%): transgender women
  - 115 (33.82%): cisgender women

- More than half of the participants (51.18%) reported having ever experienced police harassment
- Over one-third (36.14%) experienced past 6 month client violence
- Half (49.41%) ever experienced intimate partner violence
  - transgender women reported significantly higher police and client violence than cis men or women,
  - while cis women reported significantly higher intimate partner violence than trans women or cis men.
Findings

Among 340 participants (mean age: 25.77, range: 17.57): 124 (36.47%) were cisgender men, 101 (29.71%) were transgender women, and 115 (33.82%) were cisgender women.

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Total N (%) /Mean (SD, range)</th>
<th>Missing</th>
<th>Cisgender men N (%) /Mean (SD, range)</th>
<th>Cisgender women N (%) /Mean (SD, range)</th>
<th>Transgender women N (%) /Mean (SD, range)</th>
<th>P (ANOVA/ Chi-square)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>N=340</td>
<td></td>
<td>N=124 (36.47%)</td>
<td>N=115 (33.82%)</td>
<td>N=101 (29.71)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Age</td>
<td>25.77 (5.71, 17-57)</td>
<td>13</td>
<td>24.72 (4.11, 17-38)</td>
<td>28.07 (6.54, 17-57)</td>
<td>24.57 (5.75, 17-51)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Weekly income in USD</td>
<td>119.92 (131.50, 0-1580)</td>
<td>95.03 (84.62, 0-711)</td>
<td>152.64 (166.64, 0.079-1580)</td>
<td>109.84 (126.72, 0.079-790)</td>
<td>&lt;0.01</td>
<td></td>
</tr>
<tr>
<td>Education: high school or higher</td>
<td>266 (78.24)</td>
<td>106 (85.48)</td>
<td>81 (70.43)</td>
<td>79 (78.22)</td>
<td>&lt;0.05</td>
<td></td>
</tr>
<tr>
<td>Police harassment</td>
<td>173 (51.18)</td>
<td>2</td>
<td>52 (41.94)</td>
<td>55 (47.83)</td>
<td>66 (66.67)</td>
<td>&lt;0.01</td>
</tr>
<tr>
<td>IPV</td>
<td>167 (49.41)</td>
<td>2</td>
<td>51 (41.13)</td>
<td>70 (60.87)</td>
<td>46 (46.46)</td>
<td>&lt;0.01</td>
</tr>
<tr>
<td>HIV positive serostatus</td>
<td>50 (16.23)</td>
<td>32</td>
<td>15 (13.27)</td>
<td>3 (2.78)</td>
<td>32 (36.78)</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>
 Consolidated condom use findings

- 70% reported past 1 month consistent condom use with clients (81% among cis women, 79% among trans women, 54% among cis men)
  - 52% with primary partners (72% among trans women, 48% among cis men, 41% among cis women)
  - 57% with casual sex partners (78% among trans women, 51% among cis women, 47% among cis men)

- Gender differences in consistent condom use: with clients (higher among trans and cis women than cis men), with primary & casual sex partners (higher among trans women than cis men or cis women)

- Nearly one-quarter (23.24%) reported binge drinking (no gender differences)

- Multivariate logistic regression indicates that condom use self-efficacy was associated with higher odds of consistent condom use (AOR: 1.24, 95% CI: 1.05-1.46, p<0.05)
Structural equation modelling results

- Final model fit indices suggested that the model fit the data well ($\chi^2[0] = 0$, $P < 0.001$; CFI = 1.00; RMSEA = 0.00; WRMR = 0.001).
- The direct path from police harassment to consistent condom use is significant, with condom use self-efficacy mediating the relationship and accounting for 29.23% of the total effect.
- Direct paths from client violence & IPV to consistent condom use not significant: condom use self-efficacy mediates this relationship.
- Binge drinking moderated the association between client violence & condom use self-efficacy, suggesting that binge drinking exacerbated the negative impact of client violence on condom use efficacy.
Discussion

❖ Gender diverse sex workers in this study reported high prevalence of violence across multiple sources (clients, police, intimate partners)
  ❖ Violence was not distributed equally: trans women > police/client violence, cis women > IPV

❖ Violence was associated with recent consistent condom use in complex ways
  ❖ Police harassment was directly associated
  ❖ IPV and client violence reduced condom self-efficacy, that in turn led to reduced consistent condom use
  ❖ Binge drinking exacerbated effect of client violence on lower condom use efficacy

❖ 3 forms of violence were associated, suggesting the importance of looking at polyvictimization
Implications & recommendations

1. Need for **trauma informed approach** to address sequelae of violence (traumatic stress, feelings of powerlessness that can impede condom self efficacy), from a polyvictimization approach

2. **Violence prevention & human rights protection** for gender diverse sex workers in Jamaica (and globally)
   1. Decriminalization of same-sex practices
   2. Decriminalization of sex work could avert 33% to 46% of HIV infections in the next decade\(^\text{12}\)
   3. Inclusion of gender diverse sex workers in national sex work surveillance

3. **Police interventions** to reduce harassment & instill legal protections

4. **Sex worker empowerment**: collective action for legal literacy among sex workers, community mobilization, drop in centre & crisis line
Implications

- HIV and human rights interventions grounded in an intersectional approach to sex work can focus on decriminalizing sex work and same-sex practices, and ensuring human rights protection for LGBTQ persons and sex workers and those at the intersection...
Acknowledgments

Participants & peer research assistants

Collaborators: Jamaica AIDS Support for Life, Caribbean Vulnerable Communities (CVC), WE-Change, University of the West Indies, Sex Worker Association of Jamaica

Team members at Jamaica AIDS Support for Life: Kandasi Levermore, Nicolette Jones, Tyrone Ellis, Nicolette Brien, Patrick Lalor

Funders: Canadian Institutes of Health Research

Contact: carmen.logie@utoronto.ca
Pathways From Sexual Stigma to Inconsistent Condom Use and Condom Breakage and Slippage Among MSM in Jamaica

Carmen H. Logie, PhD,†,‡ Ying Wang, MSW, ‡ Natania L. Marcus, MA,§ Kandasi Levermore, MPH,§ Nicolette Jones, MA,§ Tyrone Ellis, BA,§ Aneeka Marshall, PhD,|| and Peter A. Newman, PhD∗

† Acquir Immune Defic Syndr • Volume 78, Number 5, August 15, 2018

GLOBAL HEALTH ACTION 2018

ORIGINAL ARTICLE

Social-ecological factors associated with selling sex among men who have sex with men in Jamaica: results from a cross-sectional, tablet-based survey

Carmen H. Logie,§ Ashley Lacombe-Duncan,§ Kathleen S. Kenny,§ Kandasi Levermore,§ Nicolette Jones,§ Stefan D. Baral,§ Ying Wang,§ Aneeka Marshall, and Peter A. Newman

Factors associated with sex work involvement among transgender women in Jamaica: a cross-sectional study

Carmen H. Logie,§ Ashley Lacombe-Duncan,§ Kathleen S. Kenny,§ Kandasi Levermore,§ Nicolette Jones,§ Tyrone Ellis,§ Aneeka Marshall, and Peter A. Newman

Prevalence and Correlates of HIV Infection and HIV Testing Among Transgender Women in Jamaica

Carmen H. Logie, PhD,§ Ashley Lacombe-Duncan, MSW,§ Ying Wang, MSW,§ Nicolette Jones, MA,§ Kandasi Levermore, BS,§ Aura Neel, BA,§ Tyrone Ellis, BS,§ Nicolette Bryan, BA,§ Sheldon Hawker, BA,§ Aneeka Marshall, PhD,|| and Peter A. Newman, PhD∗
References


