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TITLE

HIV care and prevention cascades indicate low engagement among young trans women at high risk of and living w Janeiro. Brazil

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BACKGROUND: Youth are the only age group facing a rise in HIV. The HIV prevention and care needs of young trans we middle-income countries are understudied despite the extraordinary risk this population faces. We evaluated the HIV prevention cascades among young Brazilian trans women and examined the association between HIV-related risk fa engagement in HIV prevention.

METHODS: We assessed baseline data collected in 2022 from BeT - a status neutral intervention to increase HIV prever behaviors among young trans women ages 18-24 in Rio de Janeiro, Brazil. We describe the HIV care and prevention co young trans women. Odds ratios were also calculated to determine correlates of HIV testing, post-exposure prophylaxis (PrEP).

RESULTS: We enrolled 165 participants with a median age of 21 years (interquartile range 18-24), 64.4% identified as Bla Among 23 participants living with HIV, 9 (39.2%) were linked to care, 5 (21.7%) missed an HIV appointment in the last 6 r (21.7%) were virologically suppressed. Of the 142 HIV-negative young trans women, 109 (76.8%) had ever been tested fo them in the past 12 months, 91 (64.1%) and 120 (84.5%) were aware of PEP and PrEP, respectively. Only 19 (13.4%) ever use ever used PrEP. Young trans women who had ever done sex work had significantly higher odds of HIV testing (OR:3.20, 'p=0.014) as did those who had recently used substances (OR:3.29, 95%CI:1.00-10.41, p=0.042). Young trans women who had insecurity had a borderline association with lower PrEP use (OR:0.35, 95%CI 0.10-1.12, p=0.084) as did youth who screedenession (OR:0.32, 95%CI:0.07-1.10, p=0.095).

CONCLUSIONS: None of the HIV care and prevention cascade indicators measured among young trans women in Bra meeting UNAIDS targets, except for ever HIV testing. HIV prevention interventions may benefit from examining strate; women who use substances and do sex work employ. Instrumental support like food and mental health care may im prevention behaviors among those who are least engaged in HIV prevention.