



Text Me, Girl!

This fact sheet contains highlights from the Text Me, Girl! intervention, designed to reach transgender women with HIV who are not linked to care in Los Angeles County, California.

INTERVENTION OVERVIEW: A 90-day theory-based, transgender-specific, automated text-messaging intervention designed to improve health outcomes along the HIV care continuum.

PRIORITY POPULATION: Transgender women with HIV, ages 18–34

ORGANIZATIONAL SETTING: Community Research Center (Los Angeles, California)

FUNDING SOURCE(S): HRSA RWHAP Part F: SPNS “Use of Social Media to Improve Engagement, Retention, and Health Outcomes Along the HIV Care Continuum” Initiative

INTERVENTION PURPOSE/GOAL: This intervention aims to connect transgender women with HIV, ages 18–34, to HIV care with the desired outcome of viral suppression.

INTERVENTION SUCCESSES: Text Me, Girl! served a total of 105 clients. At 18 months post-intervention:

- Initiation of antiretroviral therapy (ART) increased from 49% to 77%
- Viral suppression increased from 35% to 51%
- Self-Reported “Excellent” ART medication adherence increased from 5% to 44%

SUSTAINABILITY: Sustainability was supported through supplementing the text message library with language specific to transgender youth and young adults vulnerable to HIV acquisition; language inclusive of transgender masculine and gender expansive individuals; and updating content that shifts to the HIV prevention continuum including messages on PEP and PrEP initiation and adherence.

Consider surveying participants upon intervention completion to learn ways to improve recruitment,

retention, and overall participant satisfaction. Update text message content to align with changes in the HIV landscape, language, and emerging research. Collaborating with public health authorities, including health departments, is key to securing future grants.



INTERVENTION CORE ELEMENTS:

Assess staff capacity and training needs. Conduct an inventory of internal staff with experience engaging with transgender women, ages 18–34, and identify gaps in staff training needs. Determine hiring needs and/or partnerships needed to recruit and enroll participants.

Develop and refine text messages to be disseminated. Create a text message bank and share with a community advisory board (CAB) comprised of individuals with similar lived experience as the audience of focus, to ensure wording of text messages is culturally responsive.

Contract a text messaging gateway provider. Identify a short message (SMS) gateway provider to contract with to send the text messages.

Develop marketing materials. Create marketing materials such as flyers, posters, and digital ads that are eye-catching, engaging, and resonate with the community you are trying to reach.

Conduct outreach and enroll participants. Develop an outreach strategy that is user-focused such as placing ads on social media channels, websites, and at physical locations. Schedule a time that is convenient for participants to complete their enrollment and send a test text message.

Post-participation engagement. Provide ongoing resources to participants who are interested in receiving continuing intervention (e.g., utilization of the pre-established HRSA UCARE4LIFE library).



INTERVENTION STAFFING:

- **Project Director:** Responsible for day-to-day operations of the project; staff hiring and training; participant safety; quality assurance; conducting in-service trainings at local community-based organizations and networking with community gatekeepers to enhance awareness; developing text-message library and ensure messages are culturally responsiveness.
- **Outreach Coordinators:** Conduct street- and venue-based outreach to recruit participants; conduct screening/interviews with potential participants to determine eligibility; obtain informed consent; manage participant tracking and retention; and attend CAB meetings. One coordinator monitors the text-message and email logs from the messaging gateway service provider to identify potential problems in the message delivery system.
- **Frontline Staff:** Comprised nurses, case managers, navigators, peer educators, or even physicians. Assigned the task of offering the intervention and enrolling each participant in the messaging system.



IMPLEMENTATION CHALLENGES:

HIV-related stigma. Potential participants were hesitant to screen for a project that had community awareness of serving young transgender women with HIV due to the stigma related to HIV status among transgender women and disclose their HIV-positive serostatus to people they did not know.

Recruitment. Many of the initially identified locations were determined inappropriate for outreach and recruitment. For instance, clubs and bars originally identified as key outreach locations proved less successful as many of the transgender women in these venues were working the sex trade. Additionally, it was determined that online and website recruitment was less successful at reaching young transgender women, as face-to-face interaction was needed to build trust.

Mobile phone access. The inability to consistently deliver the intervention in its entirety due to interruptions in participants' cell phone service was a barrier to retention, usually due to lack of funds or lack of phone (due to loss, theft, or sale).

Incarceration. The high rate of short- and/or long-term incarceration experienced by the participants was a barrier to retention. While incarcerated, it was not possible for participants to receive text messages via their cell phones.

Ensuring confidentiality. An unanticipated challenge related to retention was boyfriends having access to participants' cell phones. Whether fear of disclosing HIV status, transgender identity, or other reasons, it is important that participants are offered methods of receiving the messages that ensure their safety and wellbeing (i.e., email rather than cell phone).

RESOURCES:

The Text Me, Girl! Monograph and Implementation Manual: <https://targethiv.org/library/spns-social-media-initiative-demonstration-site-resources>

Text Messaging to Improve Linkage, Retention, and Health Outcomes Among HIV-Positive Young Transgender Women: Protocol for a Randomized Controlled Trial (Text Me, Girl!): <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6690158/>

Text Messaging Improves HIV Care Continuum Outcomes Among Young Adult Trans Women Living with HIV: Text Me, Girl!: <https://pubmed.ncbi.nlm.nih.gov/34164763/>

HRSA IHIP Text Me, Girl! Intervention Implementation Guide: <https://targethiv.org/ihip/textmegirl>