Awareness Without Initiation: The PrEP Cascade Among Black and Latinx Transgender and Gender-Nonbinary Youth Assigned Female at Birth

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Background: Black and Latinx transgender and gender-nonbinary (TGNB) youth experience disproportionate HIV burden, yet PrEP initiation remains low. Prior work compares them with cisgender men or pools TGNB strata, obscuring those assigned female at birth (AFAB). We characterized the PrEP cascade by gender identity and sex assigned at birth, focusing on TGNB-AFAB.

Methods: We analyzed the baseline survey of the PUSH study (2017 to 2021), a cohort of Black and Latinx sexual and gender minority youth in Baltimore, Washington DC, Philadelphia, and Tampa/St. Petersburg. The analytic cohort comprised 419 participants aged 15-24 with laboratory-confirmed, not self-reported, HIV-negative status: 273 cisgender men, 48 TGNB assigned male at birth (TGNB-AMAB), 14 TGNB-AFAB, 84 cisgender women. By design, cisgender men were the cascade referent on items verified as identically worded across arms; cisgender women, completing the same assigned-female-arm survey, isolated whether any gap reflected measured need. Firth penalized logistic regression, chosen for sparse outcomes, modeled TGNB-AMAB initiation on reported partner PrEP use.

Results: TGNB-AFAB youth were highly aware of PrEP (85.7%) and willing to use it (78.6%), but few intended near-term use (21.4%) and none initiated (0 of 14; 95% CI 0.0-21.5%) versus 31.1% among cisgender men (intention 39.0 points lower, p=0.005; initiation p=0.013). Against cisgender women on the identical instrument, TGNB-AFAB youth were similar on two separate indicators, CDC-informed behavioral high need and any reported anal sex, but reported lower recent male-partner exposure (35.7% versus 70.2%, p=0.017); the gap was not fully explained by these indicators. Among TGNB-AMAB youth, reporting a partner on PrEP was associated with initiation (aOR 5.84, 95% CI 1.69-23.29); only 1 of 14 TGNB-AFAB youth reported that exposure.

Conclusions: Willingness, near-term intention, and PrEP initiation behaved as distinct stages: TGNB-AFAB youth cleared the first and not the last, and lower partner exposure did not account for it. The stratum was small (n=14) and this cross-sectional design cannot establish temporality, so contrasts are descriptive. Clinicians can nonetheless offer PrEP to transmasculine adolescents rather than await request. Prospective studies should distinguish psychosocial influences on near-term intention from provider offer, confidentiality, navigation, and network exposure as determinants of PrEP initiation.