

# Reported violence and its influence on receptiveness to mental healthcare among MSM and transgender women in La Romana, Dominican Republic

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## BACKGROUND

Violence is associated with higher rates of depression and attempted suicide in transgender and MSM patients, including in the Dominican Republic (DR) (1, 2, 3, 4). Unfortunately, sexual and gender minority (SGM) patients face high rates of violence around the world (5) and prior research suggests that SGM-targeted violence is also high in the DR (6, 7, 8). However, there is little research on violence experienced by SGM patients in the DR, and we have a limited understanding of the types and magnitude of violence, or patients' desire for mental health interventions. It is crucial that we characterize the types of violence that MSM and transgender patients experience, and how these forms of violence relate to receptiveness to care. Answering these questions will help us recruit more patients to life-saving mental health services

## DESCRIPTION OF ORGANIZATION

Survey respondents were patients at Clínica de Familia, in La Romana, Dominican Republic. Clínica de Familia is a full-service community clinic serving around 200 patients per day, 13,000 unique clients per year, and performing 177,000 total services annually. Clínica de Familia is unique in the Dominican Republic for its direct service and investigatory work targeting vulnerable populations such as sex workers, sexual and gender minority patients, and people living with HIV.

## METHODS

We recruited 48 self-identified MSM and 19 trans women from the DR who endorsed a history of violence for a cross-sectional study in 2018. We used venue-based, time-day sampling. Mapping of sites and recruitment were performed by community peers working at Clínica de Familia La Romana. Data were analyzed using Excel and R.

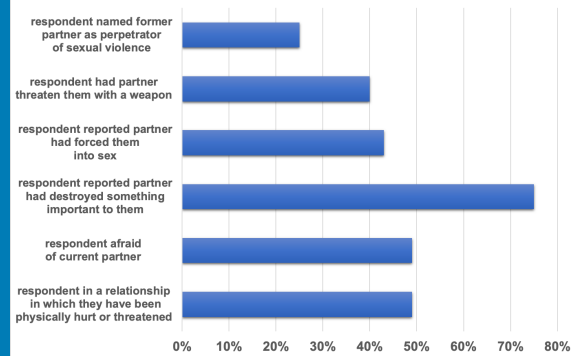
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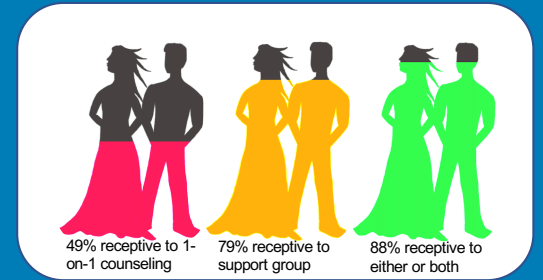
## RESULTS

Variable	Response	Total N (%)	Receptive N (%)	NOT receptive N (%)	p-value	
Have you ever been a victim of violence?	Yes	67 (100)	33 (49)	34 (51)		
	No	0 (0)	0 (0)	0 (0)		
If yes, type of violence:	Psychological	50 (75)	27 (54)	23 (46)	0.183	
	Physical	56 (84)	32 (57)	24 (43)	<b>0.004</b>	
	Sexual	32 (48)	13 (41)	19 (59)	0.177	
	Economic	28 (42)	17 (61)	11 (39)	0.112	
	Gender	31 (46)	20 (65)	11 (35)	<b>0.020</b>	
By whom:	Partner	28 (42)	17 (61)	11 (39)	0.112	
	Former Partner	27 (40)	16 (59)	11 (41)	0.178	
	Other sexual partner	15 (22)	11 (73)	4 (27)	<b>0.034</b>	
	Client(s)	20 (30)	13 (65)	7 (35)	0.093	
	Stranger	30 (45)	17 (57)	13 (43)	0.275	
	Family member	25 (37)	17 (68)	8 (32)	<b>0.018</b>	
	Security authorities	19 (28)	13 (68)	6 (32)	<b>0.048</b>	
	Unknown	5 (7)	1 (20)	4 (80)	0.174	
	Have you ever been physically hurt?	Yes	60 (90)	31 (52)	29 (48)	0.247
		No	7 (10)	2 (29)	5 (71)	
If yes, by whom?	Partner	23 (34)	12 (52)	11 (48)	0.730	
	Former Partner	24 (36)	16 (67)	8 (33)	<b>0.033</b>	
	Other sexual partner	5 (7)	3 (60)	2 (40)	0.617	
	Client(s)	10 (15)	6 (60)	4 (40)	0.461	
	Stranger	29 (43)	16 (55)	13 (45)	0.397	
	Family member	19 (28)	13 (68)	6 (32)	<b>0.048</b>	
	Security authorities	15 (22)	11 (73)	4 (27)	<b>0.034</b>	
Unknown	1 (1)	0 (0)	1 (100)	0.321		

Prevalence of Intimate Partner Violence (IPV)



## FINDINGS



- 88% of respondents were receptive to mental health care
- Type and perpetrator of violence had a significant association with receptiveness to 1-on-1 counseling
- Intimate Partner Violence was reported at high rates

## DISCUSSION

Although preliminary, our work demonstrates that MSM and trans women experience a high burden of violence in the DR. Overall, these patients are receptive to care, either through 1-on-1 counseling or through peer support groups. These patients should be routinely screened for histories of violence and invited to counseling or support groups.

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