Home HIV Self-Testing for Young Black and Latinx MSM

Dr. Hyman Scott, SFDPH Raj Gill, Santa Clara PHD

Center for Learning and Innovation San Francisco Department of Public Health





SFDPH CBA Program

Nonclinical
HIV
Testing

•Community-based testing
•Home testing
•Novel testing technologies
•Testing with social networks

Prevention for HIV-Negative Persons









- PrEP implementation
- Personalized Cognitive Counseling (PCC)
- Addressing social determinants of health



Gary Naja-Riese, M.S.W., M.P.H.(c)

Manager, Capacity Building
Initiatives

SFDPH, Center for Learning and
Innovation

Visit: www.getSFcba.org

Email: get.SFcba@sfdph.org

Call: 415.437.6226





Housekeeping

Questions – Please type them in the chat box!

Evaluation – Please complete at the end of the webinar.





Today's Speakers

Dr. Hyman Scott, SF DPH

Presentation of the HOME HIV testing study



Raj Gill, MPH, Santa Clara PHD

Overview of Santa Clara home HIV testing program



Moderator: Dr. Jessica Bloome, SF DPH

Discussion on building capacity for home HIV testing







Hyman Scott, MD, MPH



Bridge HIV, San Francisco Department of Health UCSF Division of HIV, Infectious Diseases, and Global Health





Funded by Centers for Disease Control and Prevention

HOME: A mHealth combination HIV prevention intervention for young Black and Latinx men who have sex with men

Hyman M. Scott¹, Kenneth Coleman¹, Rafael Gonzalez¹, Nicole Walker¹, Nicole Laborde², Albert Liu¹, Eric Vittinghoff³, Susan Buchbinder¹

¹Bridge HIV, San Francisco Department of Public Health; ²Consultant; ³University of California, San Francisco







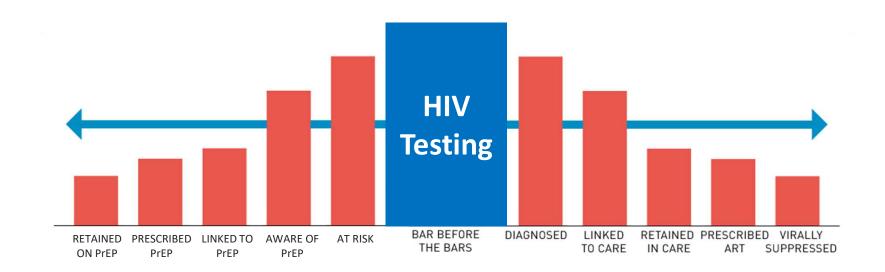
Disclosures

• I have no disclosures or conflicts of interest.





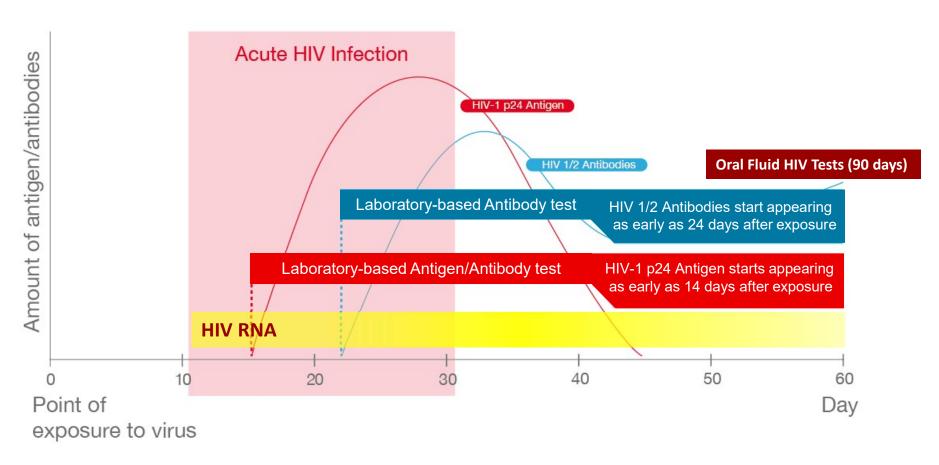
The Status Neutral Continuum





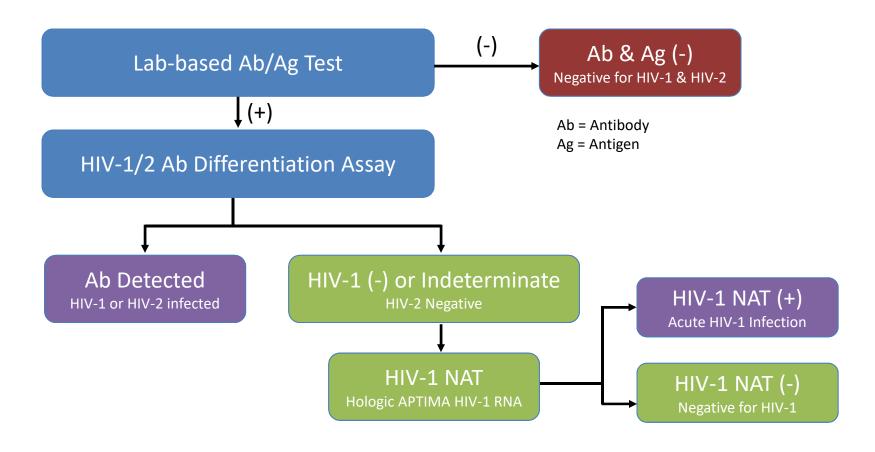


Timeline Following HIV Infection



Hurt et al STD 2017 Graphic adapted from Action for AIDS Singapore

HIV Testing Algorithm



Branson et al Laboratory Testing for the Diagnosis of HIV Infection: Updated Recommendations 2014. https://www.cdc.gov/hiv/pdf/testing/hiv-tests-advantages-disadvantages_1.pdf https://stacks.cdc.gov/view/cdc/50872





Never Testers Among MSM

- Internet survey of 1,170 MSM.
- Recruitment on social media and MSM networking sites.
- 13% reported never testing.

TABLE 2. MULTIVARIABLE ANALYSIS OF FACTORS ASSOCIATED WITH NEVER TESTING FOR HIV AMONG 1170 MEN WHO HAVE SEX WITH MEN IN THE UNITED STATES

	Never tested for HIV			
	Crude OR (95% CI)	AOR (95% CI)		
Sociodemographics				
Recruitment source				
Men-seeking-men websites	Ref	Ref		
Facebook/other	2.25 (1.57-3.22)	1.70 (1.07-2.68)		
Age ^a		0.95 (0.93-0.97)		
<associates degree<="" td=""><td></td><td>1.56 (1.03-2.34)</td></associates>		1.56 (1.03-2.34)		
Nonpermanent housing	4.11 (2.88–5.86)	1.96 (1.29–2.96)		
Rural residence	2.16 (1.36-3.46)	2.34 (1.37-4.02)		
Non-gay sexual orientation		2.75 (1.51–5.02)		
Not fully "out"	1.58 (1.12-2.23)	_		
No primary partner		1.70 (1.10-2.60)		
Sexual behaviors (past 3	3 months)			
No. of partners ^a	0.91 (0.85-0.96)	_		
Condomless anal sex		0.56 (0.38-0.82)		

Nelson et al AIDS Pt Care STDS 2018



Strategies to Increase HIV Testing

Individual

Incentives may have a role among some populations.

Home testing options.

Social

Social and sexual network-based testing strategies.

Peer/social support (including family).

Social marketing.

Structural

Increased access to healthcare services.

Non-clinical testing sites.

Oster et al PLoS One 2013; Ellen et al Int J STD AIDS 2013; Frye et al AIDS Patient Care and STDs 2015 Oct; Ma et al Cult Health Sexuality 2015 Oct; St Lawrence et al AIDS Educ Prev. 2015 Jun; Young et al AIDS Behav. 2012 Apr.



Home HIV-self Test (Oraquick)

July 3, 2012

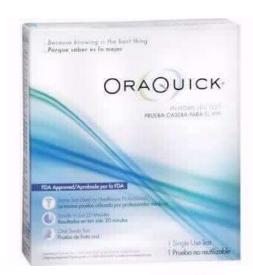
The New Hork Times

Rapid H.I.V. Home Test Wins Federal Approval

By DONALD G. McNEIL Jr.

After decades of controversy, the Food and Drug Administration approved a new H.I.V. test on

- Approved in July 2012
- 20-40 minutes for result
- Comparable to older EIA (lab) tests
 (90 day window period)





Home HIV Self-Testing (Oraquick)

- Advantages
 - Privacy
 - Control of testing
 - Availability (pharmacy/online)
 - Rapid result
 - Ease of use

- Disadvantages
 - Cost
 - Sensitivity (vs. blood tests)
 - Packaging (single use)
 - Linkage?
 - Lack of counseling?



Acceptable among YMSM

- Study of 425 YMSM randomized to receive home self-testing, home self-collection, or medical/CBO testing.
 - > Self-testing and medical/CBO testing was higher than self-collection
 - ➤ No difference by race/ethnicity (Black, Latinx, White)

	Self-test n=142	Self-collection n=141	Medical/CBO n=142
% completing test	66.2 (58.4, 74.0)	40.1 (32.1, 48.2)	56.0 (47.8, 64.2)
Time to completion (days)	14.0 (11.0, 17.0)	17.0 (15.0, 22.0)	17.0 (11.0, 26.0)

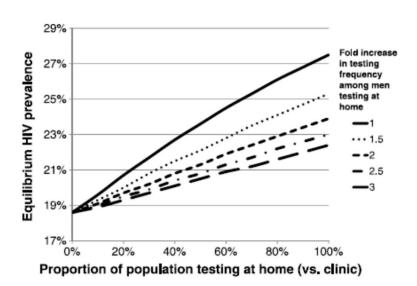
Merchant et al AIDS Behav 2018

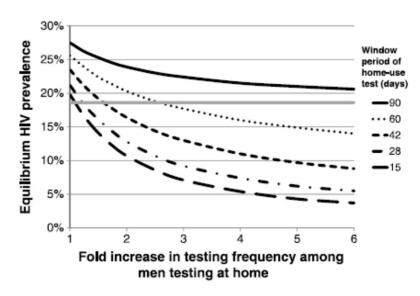




The Potential Impact of the Long Window

Stable 18.6% HIV prevalence among MSM in Seattle.









Background

- Young Black and Latinx MSM have the highest proportion of undiagnosed HIV infections.
 - High rates of STIs among these populations, which is likely driving new infections.
- Home HIV self-testing is acceptable and may reach groups that don't access available community based organization or clinic testing locations.
- PrEP uptake has been slow among young Black and Latinx MSM in the US.
- Mobile health (mHealth)-based interventions have potential to reach young Black and Latinx MSM who may not access other HIV prevention and care services.

Whitham et al AIDS and Behavior 2018; Rolle et al JAIDS 2017; Merchant et al AIDS Behav 2018; Smith et al CROI 2018; http://www.pewresearch.org/fact-tank/2017/06/28/10-facts-about-smartphones; CDC STD Surveillance 2017, 2018; Sullivan Am J Public Health. 2018





HOME Intervention

- Developed and optimized through formative work using Information-Motivation-Behavioral Skills (IMB) model.
 - Focus groups and interviews
 - Pilot tested with 30 young MSM

Intervention Components

- 1. Information and Linkage to PrEP and HIV care
- 2. HIV Risk Assessment Sex Pro
- 3. SMS Testing Reminders
- 4. Home HIV/STI testing options
- 5. HIV/STI testing log
- 6. Support to test with a "buddy"

Get on PrEP Test Results

I Tested

Positive

I Tested

Negative

STI Test

Instructions

HIV Test

Instructions



Home HIV and STI Testing Options

Home HIV self-testing



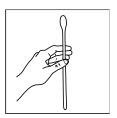
Home STI self-collection

Rectal Swabs





Penile Swabs (meatal)

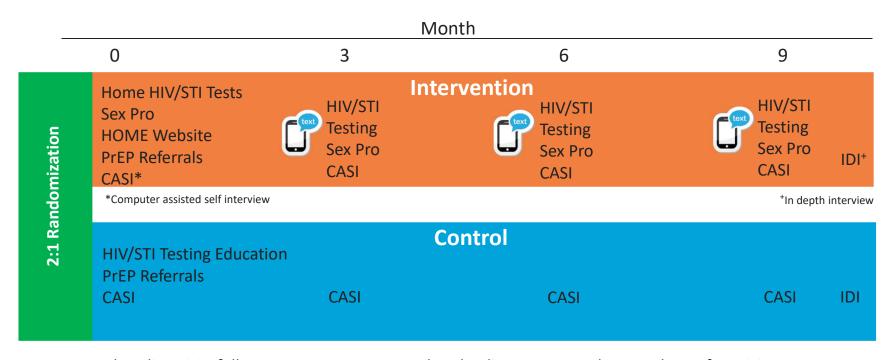








Study Design



In person baseline visit; follow-up assessments completed online. IDI was only in a subset of participants.





Study Objectives

- Primary Objectives
 - To evaluate the efficacy of the HOME mHealth intervention to increase HIV and STI testing frequency.
 - To evaluate efficacy of the HOME mHealth intervention package to support linkage to PrEP (for HIV-negative men) or HIV care (for HIV-positive men).
- Secondary Objective
 - Feasibility and acceptability of the individual components.

Methods

- Inclusion Criteria
 - Age 18-35.
 - Self-identify as a man and male sex at birth.
 - Self-identify as Black or Latinx.
 - Report anal sex with at least one male sex partner in the prior 12 months.
 - HIV negative by self-report.
 - Currently own a cell phone.
 - Willing and able to provide written informed consent.

 Recruitment on Social Media Sites and venues:



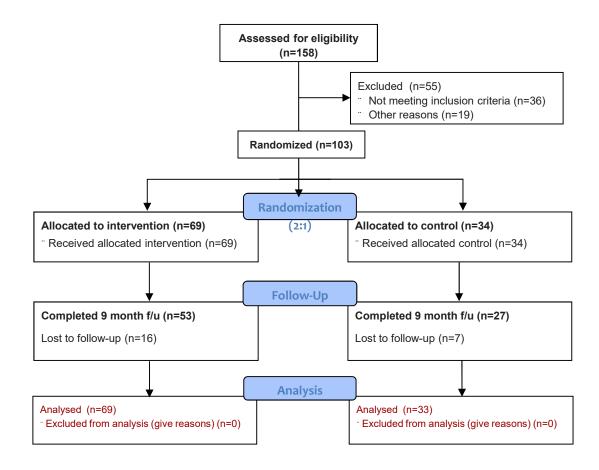




Statistical Analysis

Logistic regression to evaluate the primary outcomes assessed via computer assisted self interview (CASI).

Enrollment and Retention



Baseline Characteristics

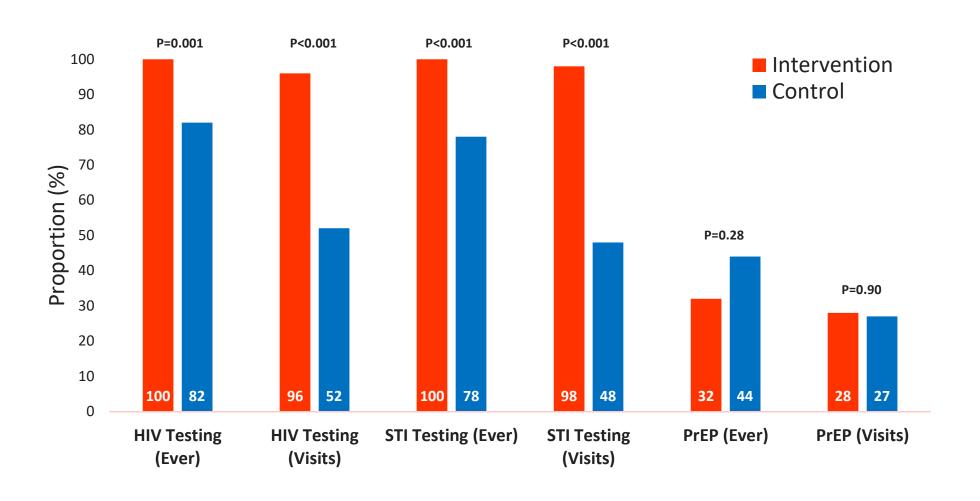
Variable	Control (N=34)	Intervention (N=69)	P value
Age (median, IQR)	26 (23-29)	27 (23-31)	0.80
Latinx	67%	64%	0.70
Black	35%	41%	0.43
Lives in San Francisco County	50%	35%	0.14
Annual Income < \$30,000	41%	62%	0.052
Ever incarcerated	5.9%	22%	0.04
Education - Some college or more	82%	82%	0.76
Number of male partners* (median, IQR)	3.0 (1-4.5)	3.5 (1-5)	0.62
Exchange sex (Ever)	31%	26%	0.62
Recreational Drug Use*	49%	34%	0.17
Previously on PrEP	23%	15%	0.33
Very/Extremely Interested in PrEP	53%	32%	0.045

^{*} Past 3 months.





HIV/STI Testing and PrEP Uptake



HIV/STI Testing and PrEP Uptake

Outcome Variable*	Odds Ratio	95% Confidence Interval	P-value
HIV Testing	5.89	3.23 - 10.74	<0.001
STI Testing	5.95	3.05 - 11.62	<0.001
PrEP Uptake	0.51	0.21 - 1.24	0.14

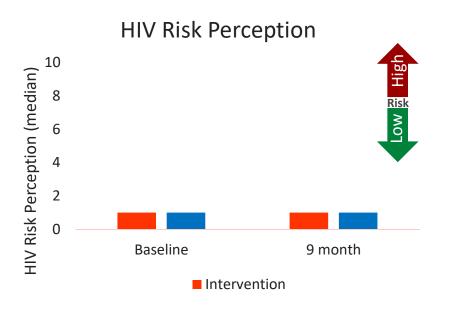
^{*} Assessed via quarterly CASI

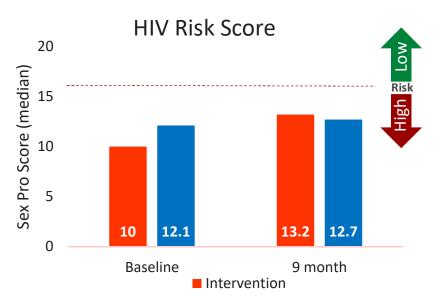
Home HIV and STI testing

- Home HIV self-testing
 - 60% used and disclosed home HIV test results on the HOME website testing log
 - 26% tested with a "buddy"
 - 3 participants reported positive home HIV tests (1 false positive; 1 confirmed and linked to care; 1 unable to link to confirmation/care despite multiple linkage attempts)
- Home STI self-collection
 - 48% of swabs were returned for testing
 - 5% of rectal swabs were positive for Gonorrhea and 5% for Chlamydia
 - 2% of penile swabs were positive for Gonorrhea and 3% for Chlamydia



Low HIV Risk Perception



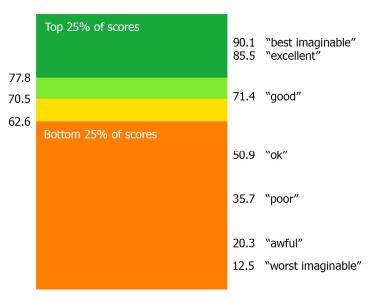


Scott AIBE 2019 [epub ahead of print]

Acceptability

- HOME Website
 - System Usability Score (SUS): median score 82.5/100 (IQR: 70-95)
- Home HIV self-testing
 - 92% reported testing was easy
 - 90% reported testing would be very convenient to use in the future
- Home STI self-collection
 - Penile Swabs 93% reported collection was easy
 - Anal Swabs 86% reported collection was easy

System Usability Score (SUS)





Limitations

- No syphilis or pharyngeal STI screening
- HIV & STI testing and PrEP uptake assessed by self-report
- Retention challenges with online follow-up





Summary

- HOME mHealth intervention led to significant increase in HIV and STI testing.
- Participants were willing to disclose HIV test results online, including positive test results.
- Intervention components were highly acceptable and scalable.
- There was no impact on PrEP uptake, indicating more counseling/support is likely needed.
 - Exploring through individual interviews



Implications

- HOME study results in the context of HIV testing program implementation
- Considerations in efforts to reach young Black and Latinx men who have sex with men for HIV testing



References

- 1. https://www.nastad.org/domestic/hiv-prevention-health-equity
- 2. Hurt, et al. Exploring the HIV continuum of care among young black MSM. STD, 2017.
- 3. Branson et al. Laboratory Testing for the Diagnosis of HIV Infection: Updated Recommendations 2014.
- 4. Nelson, et al. Correlates of Never Testing for HIV Among Sexually Active Internet-Recruited Gay, Bisexual, and Other Men Who Have Sex with Men in the United States. AIDS Pt Care STD, 2018.
- 5. Katz, et al. Replacing clinic-based tests with home-use tests may increase HIV prevalence among Seattle men who have sex with men: evidence from a mathematical model. STD, 2014
- 6. Whitham, et al. Sex Practices by HIV Awareness and Engagement in the Continuum of Care Among MSM: A National HIV Behavioral Surveillance Analysis in 21 U.S. Cities. AIDS and Behavior, 2018.
- 7. Rolle, et al. Challenges in Translating PrEP Interest Into Uptake in an Observational Study of Young Black MSM. JAIDS, 2017
- 8. Merchant, et al. Comparison of home-based oral fluid rapid HIV self-testing vs. mail-in blood sample collection or medical/community HIV testing by young adult black, Hispanic, and white MSM: results from a randomized trial. AIDS Behav, 2018.
- 9. Smith, et al. By Race/Ethnicity, Blacks Have the Highest Number Needing PrEP in the United States, 2015. CROI 2018
- 10. http://www.pewresearch.org/fact-tank/2017/06/28/10-facts-about-smartphones
- 11. CDC STD Surveillance 2017, 2018
- 12. Sullivan, et al. Potential Impact of HIV Preexposure Prophylaxis Among Black and White Adolescent Sexual Minority Males, Am J Public Health, 2018.





Thank You

- Susan Buchbinder
- Al Liu
- Eric Vittinghoff
- Marguerita Lightfoot
- Nicolas Sheon
- Nicole Laborde
- Kenneth Coleman
- Nicole Walker
- Janie Vinson
- Rafael Gonzalez

Our Study Participants!



Funding: R01AI104309 (PI Buchbinder),

K23MH104116 (PI: Scott)

Raj Gill, MPH



Health Program Specialist
Santa Clara County Public Health Department





Funded by Centers for Disease Control and Prevention

Santa Clara County Home HIV Testing Pilot Program

- Goal: distribute OraQuick home HIV testing kits to MSM who reside in Santa Clara County
 - Focus on confidentiality
- Recruitment: online ads through dating/hook up apps and in-person outreach at events
- Initial roll out: email voucher for Walgreens
 - 42 test kits distributed in 6 months
- Follow up: in-person distribution at events and venues
 - 382 tests distributed in 6 months
- Two individuals were diagnosed as HIV positive and linked to care



Santa Clara County Reflections

Challenges

- Confidentiality
- Redemption Process
- County Processes

Successes

- Partnerships
- Reach/Raising Awareness
- Reduction of Stigma



Home HIV Testing Health Department Programs

NYC HIV Self-Test Giveaway Program

- Online HIV self-testing program targeting MSM and transgender persons, conducted through advertisements on social media and dating apps
- From 2015 through 2018, >12,000 test kits mailed, 16% reported no prior testing
- Additional Community Home Test Giveaway program through CBO partnerships

Edelstein E., et al. Five waves of an online HIV self-test giveaway in New York City, 2015-18. Presentation at the National HIV Prevention Conference 2019. https://www1.nvc.gov/assets/doh/downloads/pdf/dires/five-waves-of-an-online-hiv-self-test-giveaway.pdf

Johnson M, et al. Using surveillance data, community input, and reported naloxone administrations to guide programmatic decision-making in implementing the New York State (NYS) HIV Home Test Giveaway (HHTG). Abstract 5364, https://www.cdc.gov/nhpc/pdf/NHPC-2019-Abstract-Book.pdf

Hubbard S, et al. #testathome: Implementing HIV self-testing through CBO partnerships in New York City. Presentation at the National HIV Prevention Conference 2019. https://www1.nvc.gov/assets/doh/downloads/pdf/dires/testathome-implementing-hiv-self-testing-cbo-partnerships.pdf

Virginia Home HIV Testing Program

- Online HIV self-testing program administered through the state Health Department, focused on MSM
- From 2016 through 2018, 819 test kits were mailed, 45% reported no testing in the prior 12 months

Collins B. "Discreet": characteristics of MSM in a Virginia home testing program and reasons for requesting a home test kit. Abstract 5872, https://www.cdc.gov/nhpc/pdf/NHPC-2019-Abstract-Book.pdf

Arizona Department of Health Services Home Test Kit Program

• Online HIV self-test program for all residents, with option for mailed kit or pharmacy voucher https://hivaz.org/dont-know-your-status/free-home-test-kit

Audience Q&A

Questions – Please type them in the chat box!

Evaluation – Please complete at the end of the webinar.





Funded by Centers for Disease Control and Prevention

SFDPH CBA Program

Nonclinical
HIV
Testing

•Community-based testing
•Home testing
•Novel testing technologies
•Testing with social networks

Prevention for HIV-Negative Persons









- PrEP implementation
- Personalized Cognitive Counseling (PCC)
- Addressing social determinants of health



Gary Naja-Riese, M.S.W., M.P.H.(c)

Manager, Capacity Building
Initiatives

SFDPH, Center for Learning and
Innovation

Visit: www.getSFcba.org

Email: get.SFcba@sfdph.org

Call: 415.437.6226



