



National HIV Testing Day June 27, 2018

Research and Resources
on HIV Counseling and Testing

Center for AIDS Prevention Studies (CAPS)

UCSF Prevention Research Center (PRC)

Research & Resources

This brochure lists CAPS/PRC research focusing on HIV testing and helpful resources produced by CAPS/PRC. You might use it to:

- Stay up-to-date on research and learn what we found out from research
- Use the materials in trainings/presentations
- Advocate for services/funding
- Write grants
- Develop new or modify existing HIV prevention programs
- Evaluate current programs
- Connect with CAPS/PRC to develop new projects. Lead researchers (PIs) are listed for each study.

Questions? Comments? Contact Daryl Mangosing via phone at 415-502-1000 ext. 17163 (vm only) or Daryl.Mangosing@ucsf.edu

This brochure was prepared by the CAPS **Community Engagement (CE) Core**, which is previously known as the *Technology and Information Exchange (TIE) Core*.

Acronyms

MSM: Men who have sex with men

PI: Principal Investigator (lead researcher on the study)

CO-I: Co-Investigator (contributing researcher or research partner)

VCT: Voluntary counseling and testing

Message from the Director

Extraordinary progress has been made in HIV prevention research over the last three decades. One thing is clear, if we want to reach our goal of eliminating HIV, we need to ensure that those living with HIV know it. However, in 2015, CDC reported an estimated 38,500 new HIV infections and, in 2016, 39,782 new HIV diagnoses in the U.S., both had improved from previous years.¹ It is estimated that 15% (1 in 7) of people infected with HIV still don't know their status.² We have some ways to go to reach our goal.

There's been much progress in increasing HIV testing, including advanced testing technology that now allows us to identify acute infections diverse strategies to reach individuals for testing (e.g., social marketing, social networking, etc.); and testing approaches (e.g., routine testing, self-testing, etc.)

Knowing one's HIV status is the foundation for the HIV continuum of care. Researchers at the Center for AIDS Prevention Studies (CAPS) and UCSF Prevention Research Center (PRC) work and continue to ensure that research addresses all stages of the HIV continuum of care. Today, on National HIV Testing Day, we share research accomplishments that focus on that first step for eliminating HIV – people knowing their HIV status.

We are committed to research that 1) addresses a need; 2) is community-engaged through the use of our community advisory board (CAB)³ and other study-specific advisory boards; and, 3) is broadly disseminated and implemented among those who could most benefit from the research.

It is our hope that the research highlighted in this booklet, which discusses self-testing, peer networks, community mobilization, testing in healthcare/clinical settings, and more, will inform, inspire and empower people to get tested for HIV their way and share their testing stories. Moreover, to share and implement this research at the community level.



Marguerita Lightfoot, PhD
CAPS/PRC Director
Division of Prevention Science Chief

1. CDC. HIV in the United States: At A Glance. <https://www.cdc.gov/hiv/statistics/overview/ataglance.html>

2. HIV.gov. U.S. Statistics. <https://www.hiv.gov/hiv-basics/overview/data-and-trends/statistics>

3. UCSF Division of Prevention Science. Community Advisory Board. <https://prevention.ucsf.edu/about/community-advisory-board/>

Research with Men Who Have Sex with Men (MSM)

Project T: MSM and HIV Self-Testing

Investigators: Marguerita Lightfoot (PI), Sheri Lippman (Co-I), Nicholas Moss (Alameda County Department of Public Health)

Project T aimed to enhance identification of undiagnosed HIV infection and increase linkage to HIV care among African American and Latino gay and other MSM in Alameda County utilizing HIV self-test kits.

We enlisted 34 members of the African American and Latino MSM and Transgender communities to act as recruiters. Each was asked to identify 5 MSM peers they believe to be sexually active to complete a HIV self-test. A total of 165 tests were distributed to social and sexual network members.

Research finding: *Compared to MSM who utilized the health department's sponsored testing programs, individuals reached through the peer-based self-testing strategy were significantly more likely to have never tested for and to report a positive test result. Our findings suggest that a network-based strategy for self-test distribution is a promising intervention to increase testing uptake and reduce undiagnosed infections among African American and Latino MSM.*

Use of Rapid HIV Self Test by High Risk Populations

Investigators: William Brown III (Co-I) & Alex Carballo-Diéguez (PI, Columbia University and NY State Psychiatric Institute)

This study aims to determine if high-risk MSM and transgender women (TGW) who have access to a rapid HIV-self test (ST) and learn how to use it with potential sexual partners engage in less sexual risk behavior than MSM and TGW who do not use ST. HIV-uninfected participants in New York City and San Juan, Puerto Rico who have a history of unprotected anal intercourse with serodiscordant or unknown status partners are randomly assigned to either receive an intervention orienting them to effective ways of screening partners using ST kits and they will be supplied ST kits, or they will receive neither the intervention nor the supply of kits.

Research finding: *The project has completed recruitment and is now in the process of data cleaning and analysis. Read the first publication from this project: <http://ow.ly/E14E30kAz4C>*

Home Testing Among Young, African American Gay, Bisexual, & other MSM

Investigators: Greg Rebchook (PI), Susan Kegeles, John Peterson (Georgia State University), David Huebner (George Washington University)

Encouraging young, African American gay, bisexual, and other MSM (YAAMSM) to know their current HIV status in order to reduce the number of undiagnosed HIV cases is an important part of the National HIV/AIDS strategy, but little data exist about YAAMSM's experience with and attitudes toward home testing. To address this knowledge gap, we conducted an evaluation of an Mpowerment Project adapted for YAAMSM in Texas to learn more about their experience with and attitudes towards home testing for HIV.

Given the strong interest in home testing as an option for YAAMSM, the HIV prevention workforce should consider developing strategies to make home testing more widely available and affordable.

Research finding: *Among the HIV-negative or status unknown participants, 61% said that they are either extremely likely or somewhat likely to use a home kit in the future. Home testing use increased significantly from 19% in '13 to 27.5% in '14.*

A Community-Level HIV Prevention Intervention for Young Black MSM

Investigators: Susan Kegeles (PI); John Peterson (Georgia State University, Co-PI); Greg Rebchook (Co-PI); & David Huebner (University of Maryland, Co-I)

This project involves adapting the Mpowerment Project for young Black MSM in Texas and testing its efficacy in reducing sexual risk behavior and increasing HIV testing. The adapted project is called United Black Ellument. The adapted intervention was first implemented in Dallas, and then it was implemented in Houston. The project also involves a qualitative study of young Black MSM who are being followed over several years to see the issues that they face within HIV prevention efforts. The study is currently ongoing.



Photo: United Black Ellument

Distribution of HIV Self-Testing Kits in a Gay Bathhouse Setting

Investigators: William Woods, Sheri Lippman, & Diane Binson

Gay bathhouses have been a venue where a high proportion of non-testers can be found, and bathhouse-based HIV testing programs usually operate only a few hours a week at best and only reach a limited number of men per hour of operation. To determine whether a HIV self-testing kit distribution program could reach those who never tested or who are infrequent testers and to characterize the testing behavior of those who accepted self-test kits, we distributed free OraQuick In-home HIV Test® kits to men at a gay bathhouse. Men were systematically selected to receive a coupon, which could be redeemed that night for a HIV self-testing kit.

Research finding: *Men who had never tested or who last tested more than 6 months ago were among those most likely to take the free test kit. We found that bathhouse distribution could reach a MSM population most in need of improved access to HIV testing.*

The CRUSH Project: Connecting Resources for Urban Sexual Health

Investigator: Janet Myers (Evaluation PI)

Due to the local HIV/AIDS epidemic in Alameda County among young MSM, the overall goal of the CRUSH project is to demonstrate the feasibility and effectiveness of integrating and implementing comprehensive sexual health services within a youth clinic to support HIV prevention and care engagement. Specifically, the study seeks to enhance the services provided by an existing model program for HIV-infected youth to strengthen linkage and retention in HIV care.

The CRUSH project demonstrated the feasibility and effectiveness of integrating comprehensive sexual health services in a youth clinic to support HIV prevention and care engagement. *Lessons learned here:* <http://ow.ly/RiiK30igmPc>

Utilizing a broad range of scientific and community partners, patients can arrive for scheduled or drop-in visits, receive regular HIV testing, and much more.



Youth

We Are Family: Testing, Linkage and Engagement in Care among African American Gay, Bisexual, and Trans youth in the House Ball Community

Investigators: Emily Arnold (PI), Parya Saberi, Susan Kegeles, Torsten Neilands, Lance Pollack, Michael Benjamin (CAL-PEP), Felicia Bridges (CAL-PEP), & Gloria Lockett (CAL-PEP)

This is a 4-year study supported by the California HIV/AIDS Research Program (CHRP) to develop intervention activities that build upon forms of social support already occurring among young people involved in the house ball and gay family communities, specifically in HIV prevention and care. This is a collaboration between UCSF, CAL-PEP, and the house ball and gay family communities.

Research finding: *A number of Bay area houses already share HIV prevention information at house meetings, and many house parents connect members to services if necessary. Participants therefore felt that house meetings were appropriate venues for discussing the most recent prevention modalities, such as home testing and PrEP/PEP.*

We will enroll up to 120 participants to test the acceptability and feasibility of the intervention this year.

Technology to Connect At-Risk Youth to Testing

Investigator: Marguerita Lightfoot

Peer education and outreach strategies have been successful at reducing sexual risk behavior and increasing the use of health resources in adolescents and other at-risk groups, including adults residing in census tracts where STI rates are high. A potential vehicle for outreach to adolescents is socially interactive technologies (e.g., text messages).

Research Finding: *We found that text messaging between peers is a feasible and acceptable strategy and has the potential for impacting HIV testing. Given the low number of youth accessing health care services and STI/HIV screening, innovative strategies such as this one are needed to address the barriers that exist and encourage connection with the healthcare system and STI screening.*

Transgender

HIV Self-Testing with Trans Women

Investigators: Sheri Lippman (PI), Jae Sevelius, & Susan Buchbinder (Bridge HIV)

Transgender women represent the population most impacted by HIV in the United States with infection rates approximately 40 times higher than the general population. Despite elevated risk, the rates of HIV testing within the transgender community are particularly low.

HIV self-testing kits were made available over-the-counter in late 2012 and have the enormous potential to increase testing uptake and earlier diagnosis of HIV infection, thereby leading to improved health and decreased transmission. We are exploring the feasibility, acceptability, and supportive materials needed to offer home-based self-administered HIV testing for trans women in three phases. The pilot study includes following 50 HIV-negative trans women in San Francisco in a 3-month study of home test kits.

This represents the first attempt to systematically examine acceptability, feasibility, preferences, and support for home-based rapid HIV testing in the U.S. trans female community.

TRANS HIV TESTING TOOLKIT



MSR Capacity Building Assistance Partnership
Building High Impact and Sustainable Capacity
 Center for AIDS Research Studies • Center of Excellence for Transgender Health • HIV/AIDS Health Impact



The UCSF Center of Excellence for Transgender Health (CoE) has developed a Transgender HIV Testing Toolkit, consisting of five modules designed to reflect the most current HIV prevention research and best practices for serving trans and gender non-binary people. Source: <http://transhealth.ucsf.edu/trans?page=ev-nthtd>

International Research: Africa

Self-testing with MSM in South Africa

Investigators: Sheri Lippman (PI), Timothy Lane, James McIntyre & Oscar Radebe (Anova Health)

MSM in South Africa do not currently utilize clinic-based HIV testing at a rate commensurate with their risk. We explored the feasibility and acceptability of self-testing among South African MSM in the Mpumalanga Province, including how, when, where, what kind, and with whom self-tests are utilized; how sexual risk behaviors may be modified by introducing self-test kits into this community; and strategies to ensure linkage to care following self-testing in this underserved and high risk population.

Research findings: 127 HIV-negative MSM were provided with up to 9 test kits of their choice – oral fluid or blood fingerstick – to use themselves and distribute to their networks; six participants sero-converted during the study. 91% of participants self-tested and over 80% reported preferring HIVST to clinic-based testing. Fingerstick was preferred to oral fluid tests by approximately 2:1, and participants distributed 728 test kits to friends, family members, and sex partners. Frequent (semi-annual) testing increased from 37.8% before the study to 84.5% at follow-up and participants reported anticipated frequent testing of 100% if HIVST were made available, compared to 84% if only clinic-based testing were available in the coming year (both changes in testing proportions statistically significant).

HIV-testing Among Couples in Malawi

Investigator: Amy Conroy

Uptake of HIV testing services is less than ideal in Malawi with about 75% of women and 50% of men having ever tested as of 2010. This project mixed methods study explored how couple dynamics could affect decisions to test for HIV in rural Malawi.

Research finding: Participants with higher levels of relationship unity were less likely to test for HIV. This was consistent with qualitative data in that an HIV test signified a breach of trust and breakdown of the relationship.

Innovations in HIV testing to enhance care for young women and their peers and partners in South Africa

Investigators: Sheri Lippman (Co-I), Kathleen Kahn (PI, University of the Witwatersrand), & Audrey Pettifor (PI, University of North Carolina, Chapel Hill)

Young women continue to be at the epicenter of the HIV epidemic in South Africa. In 2012 over 30% of young women ages 20-34 were infected; young women are at risk due to multiple risk factors (behavioral, biologic and structural). We propose improving HIV prevention and care by expanding HIV testing options to include self-testing for young women, their peers and their sex partners, and by facilitating linkage to care.

We enrolled 284 South African young women age 18-26 years in a randomized control trial to examine HIV testing uptake among those randomized (1:1) to either: 1) an invitation to a local clinic for free HIV Counseling and Testing (HCT) or, 2) choice of free HCT or HIV Self-testing (HIVST) kits. Young women choosing HIVST in the choice arm were provided 5 HIVST kits (OraQuick); young women randomized to or choosing HCT were given 5 invitations to test for free at local clinics.

Research finding: *Of those randomized to choice, 96% chose HIVST over HCT. At the 3-month visit, 97% of women in the HIVST/choice arm reported testing compared to 48% of women in the HCT arm, a risk difference of 48%. These women reported inviting 465 peers (80% female) and 35 partners to test—34% by HCT arm participants and 66% by choice arm.*

Providing young women with a choice to self-test in addition to the option of clinic-based HCT led to 97% testing uptake within three months-virtually all through self-testing; in addition, we saw substantially more peer-referrals among women offered HIVST compared to the HCT arm.

Past Research

Project Accept: Community-Based Intervention to Reduce HIV Incidence in Populations at Risk for HIV in Sub-Saharan Africa and Thailand

Investigators: Gertrude Khumalo-Sakutukwa, Stephen Morin, & Edwin Charlebois (CAPS)

Project Accept is the first community-randomized trial to test a combination of social, behavioral, and structural approaches for HIV prevention and to assess the impact of an integrated strategy for HIV prevention on HIV incidence as well as behavioral and social outcomes at the community level.

Research finding: *Community mobilization, mobile HIV counseling and testing (VCT), post-test support services, and real-time performance feedback increased the number of people who know their HIV status, and reduced HIV risk behaviors, especially among people with HIV who might otherwise transmit the virus to others. The prevention strategy also resulted in a modest 14% reduction in HIV infection in the intervention communities compared to control communities.*

Berkeley Health Steamworks Bathroom Testing Program

Investigators: William Woods, Diane Binson, LeRoy Blea, Jeff Kant, & Paul Cotten

A collaborative intervention conducted by the health department on-site at a gay bathhouse and evaluated by UCSF CAPS to promote HIV and STI testing among MSM. The collaborative effort was very successful in meeting implementation goals and offering HIV and STI screening with high-risk men.

Evaluating the Process of Developing and Implementing an Emergency Department (ED) HIV Testing Program

Investigators: Kimberly Koester, Sheri Weiser, Tim Lane, Janet Myers, & Stephen Morin

We evaluated the development and implementation process of routine testing for HIV in three urban Bay Area hospital EDs serving sizable racial/ethnic minority and socioeconomically disadvantaged populations: Alameda County Medical Center-Highland Hospital, Alta Bates Summit Medical Center, and San Francisco General Hospital.

Research findings: *Discomfort among ED providers about disclosing a positive HIV test result was a barrier. Common facilitators were a commitment to underserved populations, the perception that testing was an opportunity to re-engage previously HIV-infected patients in care, and the support and resources offered by the medical setting for them.*

CAPS/PRC Resources

HIV Counseling/Testing Research and Publications

Fact Sheets: <https://prevention.ucsf.edu/resources/factsheets-english-and-spanish>

- What is the role of disclosure assistance services in HIV prevention?
<https://prevention.ucsf.edu/research-project/disclosure-assistance-pcrs>
- What Is the role of counseling and testing in HIV prevention?
<https://prevention.ucsf.edu/research-project/hiv-counseling-and-testing>
- How is rapid testing used in HIV prevention?
<https://prevention.ucsf.edu/research-project/rapid-testing>
- What is the role of rapid testing for US-Mexico border/migrant populations?
www.caps.ucsf.edu/uploads/pubs/FS/pdf/borderrapidtestingFS.pdf

Survey Instruments & Scales:

<https://prevention.ucsf.edu/resources/survey-instruments-and-scales>

- Topics include counseling and testing, healthcare providers, risk behavior, adherence, coping, substance use and knowledge/attitudes.

Evaluation Manuals:

- [Good Questions Better Answers: A Formative Research Handbook for California HIV Prevention Programs](#)
- [Working Together: A Guide to Collaborative Research in HIV Prevention](#)

Intervention Curricula: <https://prevention.ucsf.edu/resources/intervention-curricula>

This information was compiled for you by the CAPS Community Engagement (CE) Core, previously known as the Technology and Information Exchange (TIE) Core.

Questions? Comments? Contact Daryl Mangosing at 415-514-4590 or Daryl.Mangosing@ucsf.edu

<https://prevention.ucsf.edu>



Center for AIDS Prevention Studies
Prevention Research Center
Division of Prevention Science

CAPS/UCSF PRC
Mission Hall Bldg
UCSF Box 0886
550 16th Street, 3rd Floor
San Francisco, CA 94143

Ph: +1 (415) 476-6288
Web: <https://prevention.ucsf.edu>
Email: caps.web@ucsf.edu