

# Demonstration Project Overview



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Overall, 14 health departments and 36 community-based organizations (CBOs) have been awarded more than \$26 million for 2-year projects to develop models and demonstrate feasibility of setting up the 4 Advancing HIV Prevention (AHP) strategies. The 4 AHP strategies are to

- make HIV testing a routine part of medical care
- implement new models for diagnosing HIV infections outside medical settings
- prevent new infections by working with HIV-infected persons and their partners
- further decrease perinatal HIV transmission

The following demonstration projects are under way.

## AHP Demonstration Projects for State and Local Health Departments

- *HIV Rapid Testing to Improve Outcomes for Partner Counseling, Testing, and Referral Services (PCTRS)*. This demonstration project addresses AHP strategies 2 and 3: setting up new models for diagnosing HIV infections and testing people who are known to have had potentially infectious contact with HIV-positive partners. Health departments in Chicago, Colorado, Los Angeles, Louisiana, San Francisco, and Wisconsin were awarded contracts totaling \$2.7 million. As of June 2004, all 6 health departments had incorporated rapid HIV testing into their PCTRS activities. As of June 2005, 397 partners had been tested for HIV, and 41 had received confirmed positive results (positivity rate = 10%.)
- *Routinely Recommended HIV Testing as Part of Regular Medical Care Services*. In 4 health department jurisdictions, 12 facilities in urban areas with high prevalence of HIV are funded to evaluate the feasibility and sustainability of offering HIV testing to eligible clients as a routine part of medical care in clinical settings. The facilities, which include emergency departments, outpatient clinics, and a dental clinic, are in Los Angeles, Massachusetts, New York State, and Wisconsin. All facilities started testing by June 2004. Each will test 1,500 to 6,000 persons per year and will facilitate access to care for at least 80% of those whose test results are positive. As of June 2005, 12,510 persons had been tested for HIV, and 116 had received confirmed positive results (positivity rate = just under 1%.)
- *Routine Rapid HIV Testing of Inmates in Short-Stay Correctional Facilities*. State health departments in Florida, Louisiana, New York, and Wisconsin are funded to conduct this demonstration project in correctional facilities. Approximately 38,750 inmates will be tested for HIV in a total of 20 prisons during the 2-year project period. From January 2004 through June 2005, more than 20,000 persons had been tested for HIV, and 253 had received confirmed positive results (positivity rate = 1.3%.)

### AHP Demonstration Projects for CBOs

- *Prevention Case Management (PCM) for Persons Living with HIV/AIDS.* Funding was awarded to 9 CBOs to provide prevention case management to HIV-positive persons who have many and complex needs for HIV risk reduction. The CBOs are in California, Maryland, Massachusetts, Michigan, Missouri, New York, Pennsylvania, and Washington, DC. As of August 2005, 845 persons had been screened for eligibility, 659 had been determined eligible, and 444 had been enrolled. The average number of visits per participant was 7.4.
- *Rapid HIV Testing in Nonclinical Settings.* Funding was awarded to 8 CBOs to provide rapid HIV testing in nonclinical settings, such as parks and bars. The settings are Boston, Chicago, Detroit, Kansas City, Los Angeles, and Washington, DC. As of June 2005, 17,149 persons had been tested for HIV, and 249 had received confirmed positive results (positivity rate = about 1.5%).
- *Using Social Network Strategies to Reach Persons at High Risk for HIV Infection in Communities of Color.* Funding was awarded to 9 CBOs in 7 cities to demonstrate the feasibility of using social network strategies to reach persons at high risk for HIV infection and provide them with HIV counseling, testing, and referral services. The CBOs are in Boston, Lafayette (Louisiana), New York City, Orlando (Florida), Philadelphia (2), San Francisco (2), and Washington, DC. Through October 2005, the 408 recruiters had persuaded 2,878 persons in their social, sexual, or drug-using networks to get tested for HIV. To date, 160 of these network associates have been confirmed as HIV-positive (positivity rate = 5.6%), which is 5 times the average prevalence reported by publicly funded counseling, testing, and referral sites. The June 24, 2005, Morbidity and Mortality Weekly Report featured an article on preliminary data from the social

networks project (<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5424a3.htm>.)

### AHP Demonstration Projects for Primary Care Providers

- *Incorporating HIV Prevention into Medical Care Settings.* Funding was awarded to 6 sites to help providers incorporate HIV prevention into medical care. The sites are in Atlanta, Brooklyn (New York), Chapel Hill (North Carolina), Denver, Kansas City (Missouri), and Nashville (Tennessee). As of August 2005, staff members at the sites had screened 2,088 patients, enrolled 1,109 in a measurement cohort, and delivered the Positive S.T.E.P.s (Striving to Engage People) intervention to all patients attending the clinics (not just the measurement cohort). In addition, participating clinics were conducting 6- and 12-month follow-ups of the measurement cohort. Provider surveys will contribute information on provider capabilities and perceived barriers to delivering HIV prevention messages.

### Other Projects

- *HIV Testing in Alternative Venues and Populations, Historically Black Colleges and Universities, and Primary Care Settings.* New models for diagnosis through greater access to HIV testing and prevention and care services are being tested at sites that serve migrant and seasonal farm workers, transgender persons or American Indians, and at sites that serve historically black colleges and universities. Funding was awarded to sites in Albany (Georgia), Chicago, Hartford, Jackson (Mississippi), Lawrenceville (Georgia), Miami, Milwaukee, New York City, Oakland, Phoenix, Pine Bluff (Arkansas), Salt Lake City, San Francisco, Sault Ste. Marie (Michigan), and Washington, DC. As of September 2005, 9,326 persons had been tested, 148 had received confirmed positive results (positivity rate = 1.6%).

- *Antiretroviral Treatment and Access Study (ARTAS II)*. Funding was awarded to 10 sites in the United States: 4 state health departments (2 sites in Florida and 1 each in Louisiana, South Carolina, and Virginia) and 5 CBOs (Atlanta, Baltimore, Chicago, Kansas City (Missouri), and rural Alabama.) ARTAS II is based on the recently completed controlled trial of brief case management vs. passive referrals to link to HIV primary care people who have recently received an HIV diagnosis. It will determine whether a 75% rate of linkage to care can be attained in non-research settings. Participants will be enrolled and followed up for a minimum of 6 months to determine linkage outcomes. As of April 2006, 803 persons living with HIV have been approached and screened for participation, and 558 persons living with HIV have been enrolled. Of the 558 enrolled, 146 have completed a 6-month follow-up interview thus far. Additional 6- and 12-month data collection will continue during the second year of this project.

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**For more information . . .**

**Advancing HIV Prevention**

[http://www.cdc.gov/hiv/topics/prev\\_prog/AHP](http://www.cdc.gov/hiv/topics/prev_prog/AHP)  
*Resources on the Advancing HIV Prevention initiative*

**CDC National Prevention Information Network (NPIN)**

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*CDC resources, technical assistance, and publications*