TRUST

Evidence-Based for the Structural Intervention Chapter Evidence-Based for the Risk Reduction Chapter



POPULATION

> Young Black or African American men who have sex with men (YBMSM) and transgender women (TW)

KEY INTERVENTION EFFECTS

Increased HIV self-testing

BRIEF DESCRIPTION

TRUST is a brief, peer-based behavioral intervention designed to increase uptake of consistent (every three months), rapid HIV self-testing (HST). TRUST is delivered via friend pairs to enable joint learning of self-testing and support future self-testing. Friend pairs consist of the primary eligible participant (PEP) and a friend of the PEP who engage in HIV self-testing together using rapid HIV self-test kits.

The intervention includes:

- An interactive session that consists of describing how HIV testing fits into an optimal sex life, HIV self-testing
 instruction, skills building on how to use the self-test, identifying, and communicating the specific peer
 support needed to support consistent testing, planning for risk reduction and consistent testing over time
- Free HIV self-test kits at baseline visit and every 3 months via preferred delivery method (control
 participants also received free HIV self-tests)

DURATION: One year

SETTING: New York, New York

STUDY YEARS: July 2016 – December 2017

STUDY DESIGN: Randomized controlled trial (RCT)

DELIVERERS: Trained peer educator

DELIVERY METHODS: Counseling, HIV self-test kits

STUDY SAMPLE

The baseline study sample of N = 188 PEPs was characterized by the following:

53% Black or African American
 30% African/other
 7% Afro-Latino
 9% Caribbean

- 86% persons identifying as male
 12% persons identifying as transgender
 2% persons identifying as female
 1% persons identifying as another gender
- Means age 23 years

STRUCTURAL COMPONENTS

Access - HIV testing

Increased access to HIV testing via provision of self-test kits

Physical Structure – Services provided in nontraditional settings

HIV self-testing could be done at a location chosen by the participant

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

• Participants in the intervention arm had twice the odds of reporting HIV self-testing in the past 3 months at the 3-month follow-up as participants in the control arm (57% vs 42%; unadjusted Odds Ratio [uOR] = 2.29; 95% Confidence Interval [CI]: 1.15 - 4.58).

 Participants in the intervention arm had almost twice the odds of reporting HIV self-testing in the past 3 months at the 6-month follow-up as participants in the control arm (54% vs. 42%; uOR = 1.94; 95% CI:1.00 -3.75).

CONSIDERATIONS

• Two PEPs reported testing HIV positive during follow-up (1 in the intervention arm and 1 in the control arm). Five friends of PEPs self-reported testing positive during follow-up (2 in the intervention arm and 3 in the control arm). One PEP in the intervention arm reported using HIV self-test to identify the new infection; however, the one PEP in the control arm did not report using HIV self-testing to identify the new infection.

ADVERSE EVENTS

• The author did not report adverse events.

FUNDING

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PRIMARY STUDY

Frye, V., Nandi, V., Paige, M.Q., McCrossin, J., Lucy, D., Gwadz, M., Sullivan, P., Hoover, D., Wilton, L., & TRUST Study Team. (2021). TRUST: Assessing the efficacy of an intervention to increase HIV self-testing among young Black men who have sex with men (MSM) and transwomen. AIDS and Behavior, 25(4), 1219-1235. doi: 10.1007/s10461-020-03091-x.

PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

Contact information

Leo Wilton, PhD, MA, MPH

Department of Human Development, College of Community and Public Affairs State University of New York at Binghamton 4400 Vestal Parkway East Binghamton, NY 13902

Email: lwilton@binghamton.edu

Victoria Frye, DrPH, MPH

Department of Community Health and Social Medicine City University of New York School of Medicine 180 Convent Avenue New York, NY 10032

Email: vfrye@med.cuny.edu