

Feasibility of an HIV Self-Test Voucher Program to Raise Community-Level Serostatus Awareness, Los Angeles

Robert W Marlin¹, BS; Sean Young¹, PhD, MS; Claire C. Bristow², MSc; Greg Wilson³; Joe Montes⁴; Jeffrey Rodriguez⁵; Jose Ortiz⁶; Rhea Mathew⁶; Jeffrey D Klausner¹, MD, MPH

¹Department of Medicine, UCLA Medical Center, David Geffen School of Medicine at UCLA, Los Angeles, CA

²Department of Epidemiology, Fielding School of Public Health, University of California Los Angeles, CA; ³Reach LA, Los Angeles, CA; ⁴Bienestar, Los Angeles, CA; ⁵LA Gay & Lesbian Center, Los Angeles, CA; ⁶University of California, Los Angeles, CA

Summary

This study examined the feasibility of developing a voucher program to promote the use of OraQuick® In-Home HIV Tests. Voucher usage was tracked and qualitative and quantitative data was obtained from a follow-up anonymous phone survey.



Background

Increasing serostatus awareness may reduce the number of new HIV infections

- Of the estimated 1.1 million people infected with HIV in the United States, about 25% are unaware of their infection.
- Up to half of all new HIV cases may result from transmission from a sero-unaware individual

African Americans are increasingly becoming the most vulnerable demographic group affected by HIV

- In 2011, African Americans had the highest rate of HIV infections for any demographic group at 966 per 100,000 persons in Los Angeles (LA).
- In addition, African American men who have sex with men (MSM) in LA are 4 times more likely than white MSMs to not know they are infected with HIV.

Self-testing presents a new method of increasing serostatus awareness

- Of 75 MSM surveyed in LA, an at home, immediate, and free HIV test had the highest acceptability.
- In 2012, the FDA approved the OraQuick® In-Home HIV test, which allows for private, rapid self-testing at home, and helps to overcome stigma, which is a major barrier to testing.

Promotion of HIV self-test kits among African American MSM in LA may increase serostatus awareness and reduce the number of new infections

Methods

Criteria for Feasibility

- Establish a functional voucher redemption and third-party payment system.
- Use community-based organizations (CBOs) to disseminate vouchers.
- Collect and analyze data from an anonymous telephone survey on user demographics, sexual behavior, prior testing practices, and self-testing experience.

Redemption System

- We created paper vouchers for a free OraQuick® In-Home HIV Test redeemable at 12 local Walgreens using a third party payment system.
- Each voucher had a unique number that allowed us to track its time and location of distribution and redemption.



Voucher Distribution

- We supplied 641 vouchers in July 2013 to the three CBOs, three student distributors, and one clinic. CBOs reported distributing 292 of these vouchers to high-risk African American MSM in LA (Figure 1).



Follow-Up Survey

- Interviewers anonymously surveyed the participant regarding demographic information, sexual history, and experience with the voucher program.
 - Participants were over 18 years of age and had received the voucher for the OraQuick In-Home HIV Test
- The following survey response pattern was used to determine if the respondent was at high-risk for HIV infection: >1 sex partner, untested for HIV infection, and inconsistent condom use for the past 6 months
- Survey data was encoded using SurveyMonkey and analyzed with Microsoft Excel® and STATA® 13 (StataCorp, College Station, TX)

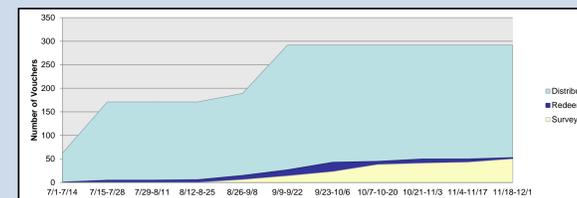
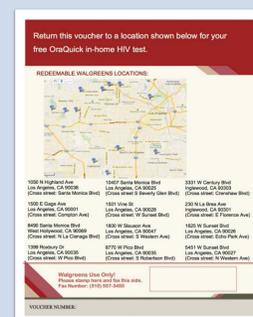


Figure 1: Cumulative number of HIV self-test kit vouchers distributed to clients, redeemed at Walgreens®, and cumulative survey responses

Results

- Survey respondents were young (90% under 35 years of age), primarily African American (82%), and MSM (66%). See Table 1a and Table 1b for additional information on subject characteristics.
- Following our set criteria, 24% were at high-risk for HIV infection
- Three (6.1%) of 49 reported a positive result and being linked to care, and an additional 2 (4.1%) wished not to disclose their test result but engaged in follow-up medical care.
- Respondents indicated the difficulty travelling to Walgreens, their comfort level during redemption, and other opinions on the voucher program using a Likert scale (Figure 2)
- Interviewers collected qualitative feedback: redemption was "easy" in some stores, whereas others took longer, had to involve the manager, and made participants feel uncomfortable

Table 1a: HIV In-Home Self-Test Voucher Use Survey Participant Characteristics (N=50), Los Angeles, 2013

Survey Response	Total (n=50)
Age (years):	
18-25	19 (38%)
26-35	26 (52%)
36+	4 (8%)
Race:	
White	4 (8%)
Black	44 (88%)
Other	3 (6%)
Population sexuality:	
MSW	1 (2%)
WSM	9 (18%)
MSM	33 (66%)
WSW	2 (4%)
TW	5 (10%)

Number sex partners past 12 months:	Total (n=50)
0 to 1	17 (34%)
2 to 3	6 (12%)
3 to 4	13 (26%)
5+	14 (28%)

Condom Use	Total (n=50)
Everytime	13 (26%)
Frequently or Usually (5-6/7)	29 (48%)
Sometimes or less (1-4/7)	8 (16%)

Last HIV Test:	Total (n=50)
3 months or less	10 (20%)
3-6 months	7 (14%)
6-9 months	10 (20%)
9-12 months	8 (16%)
12+ months	15 (30%)

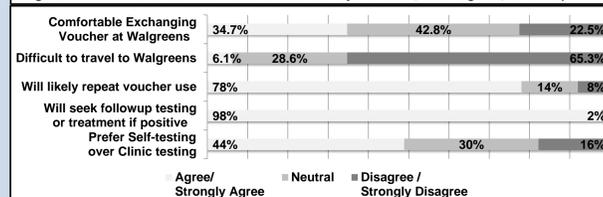
Population at	Total (n=50)
Low Risk	38 (76%)
High Risk	12 (24%)

Voucher Redemptions:	Total (n=50)
Redeemed	49 (98%)
Did not redeem	1 (2%)

Table 1b: HIV In-Home Self-Test Voucher Redeemer Characteristics (N=49), Los Angeles, 2013

Survey Response	Total (n=49)
Reported Test Result	
Positive	3 (6.1%)
Negative	44 (89.8%)
Don't want to disclose	2 (4.1%)
Activities Before taking the test:	
Engaged in Pre-Test Activity	44 (89.9%)
Activities After Taking the Test:	
Engaged in Post-Test Activity	37 (75.5%)

Figure 2: HIV In-Home Self-Test Voucher Use Survey Attitudes, Los Angeles, 2013 - Opinions



Discussion

It was feasible to create a voucher program for HIV self-test kits.

- Voucher usage could be tracked by cross-referencing serial numbers given to distributors and serial numbers that Walgreens redeemed.
- CBOs promoted vouchers during community meetings and outreach events and are a viable means of distribution.

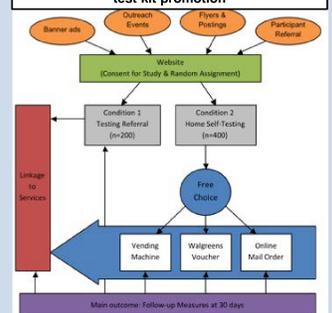
It was feasible to collect anonymous survey responses from voucher users.

- Respondents answered questions about sexual activity, HIV testing, and experiences with the vouchers and kit.
- Two to five respondents may have tested positive for HIV. Thus, it is possible to identify new HIV cases with a survey linked to a voucher system.
- We successfully used the survey to capture the positive testers' linkage-to-care activities after receiving their test result.

Limitations and future directions

- Because surveys were anonymous, there was no way to know how many individuals might have participated in our program more than once.
- Walgreens stores occasionally ran out of kits.
- Our team plans to compare multiple methods of delivering HIV self-test kits with conventional site-based testing to find the best place for HIV self-testing in the evolving HIV testing paradigm. (Figure 3)
- We are currently offering free HIV self-test kits through Grindr, an MSM networking app, and allowing interested users to receive their kits via mail, an automated smart-vending machine, of with a voucher. Participants will be asked to give feedback on their experience.

Figure 3: Design of Randomized Controlled Trial to Examine Different Methods of HIV self-test kit promotion



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