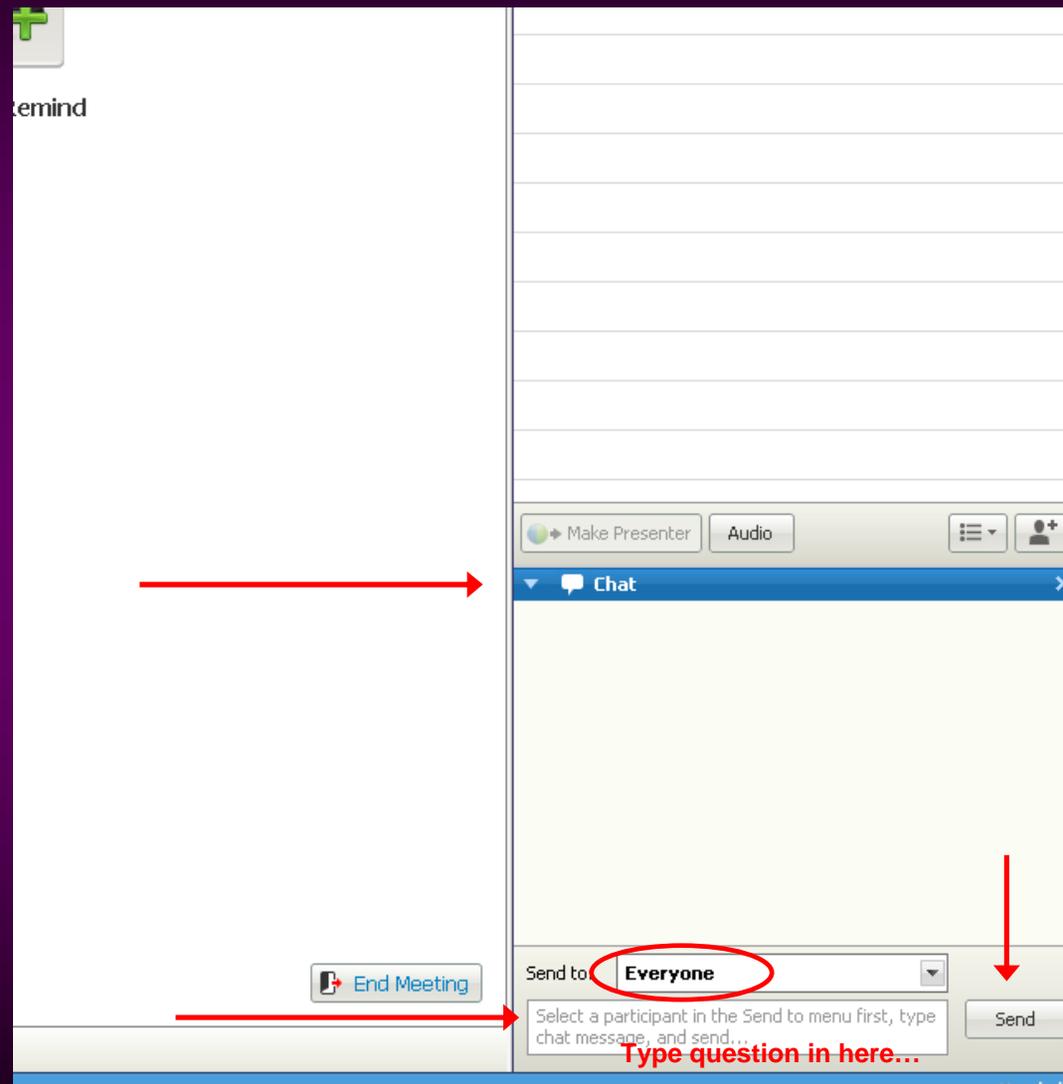


Targeted HIV Testing & Enhanced Testing Technologies

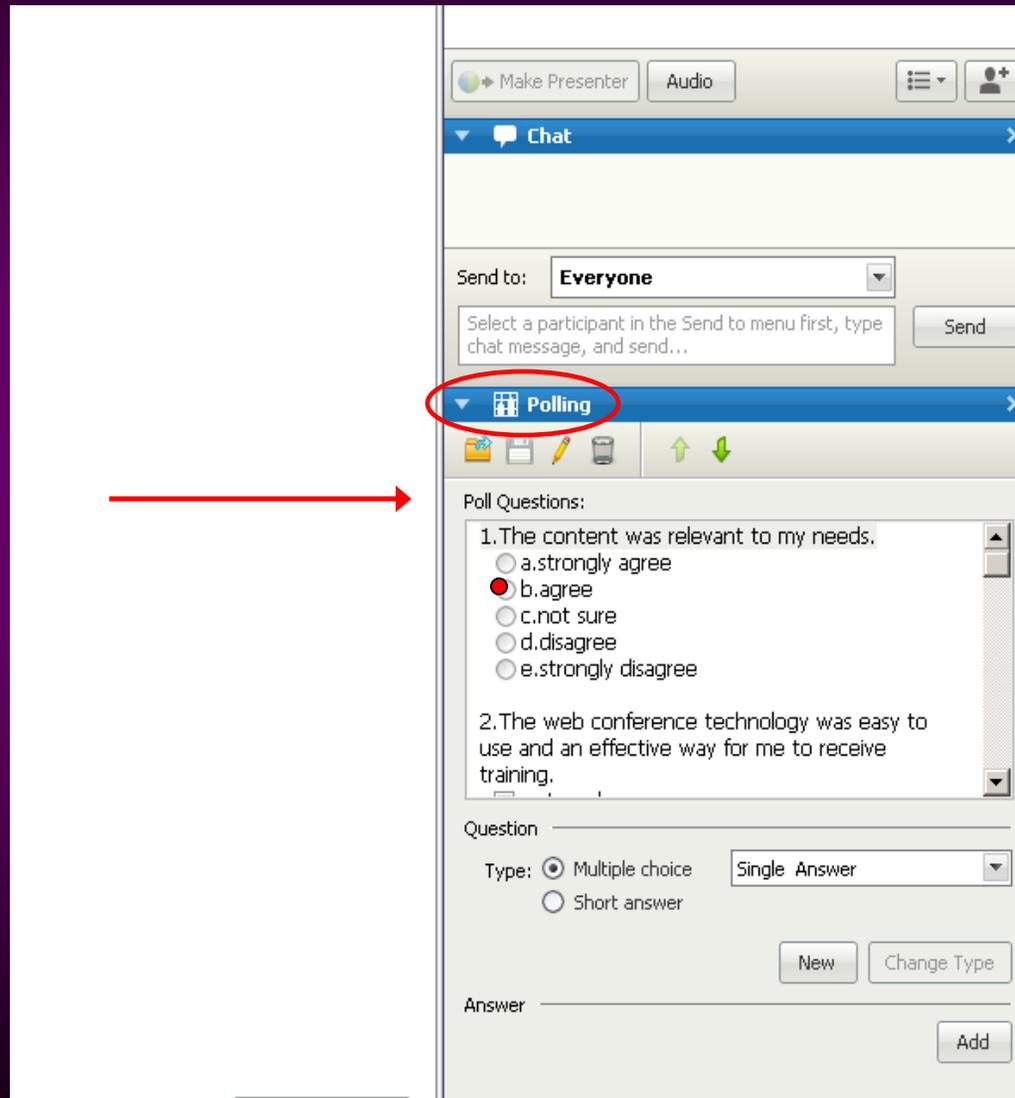
HIV Prevention Section
Bureau of HIV/AIDS

May 2012

Typing a Question in the Chat Box



Completing the Webinar Evaluation (opened at end of webinar)



The screenshot displays a webinar control panel with several tabs: 'Make Presenter', 'Audio', 'Chat', and 'Polling'. The 'Polling' tab is selected and highlighted with a red circle. A red arrow points from the left towards the 'Polling' tab. Below the 'Polling' tab, there are icons for a folder, a document, a pencil, and a mobile device, along with up and down arrows. The 'Poll Questions' section contains two questions:

1. The content was relevant to my needs.
 - a. strongly agree
 - b. agree
 - c. not sure
 - d. disagree
 - e. strongly disagree
2. The web conference technology was easy to use and an effective way for me to receive training.

Below the questions, there are settings for 'Question' type: 'Multiple choice' (selected) and 'Short answer'. A 'Single Answer' dropdown menu is also visible. At the bottom, there are 'New' and 'Change Type' buttons, and an 'Add' button for the 'Answer' field.

Introduction

- National HIV/AIDS Strategy
- High Impact Prevention
- New CDC HIV Prevention Grant (Cat. A vs. Cat. B)

Nat'I HIV/AIDS Strategy Goals

1. Reduce the number of people who become HIV infected
2. Increase access to care and optimize health outcomes for people living with HIV
3. Reduce HIV-related health disparities, discrimination and stigma
4. Achieve a more coordinated national response to the domestic HIV epidemic

High Impact Prevention (HIP)

Scientifically proven HIV prevention interventions

This DOES NOT mean *only* DEBIs. What it *does* mean is the following:

- HIV testing and linkage to care
- Antiretroviral therapy
- Access to condoms and sterile syringes*
- Prevention programs for people living with HIV and their partners
- Prevention programs for people at high risk of HIV infection
- Substance abuse treatment
- Screening and treatment for other STIs

*Syringe exchange is currently prohibited in FL due to certain paraphernalia laws.

High Impact Prevention (HIP)

Populations at highest risk

- **Gay and bisexual men of all races and ethnicities**
- **Blacks/African Americans**
- **Hispanics/Latinos**
- **Injection Drug Users**
- **Transgender Individuals**

CDC HIV Prevention Grant (PS12-1201)

- Category A- HIV Prevention
 - Required Core Components
- Category B- ETI
 - Required Core Components

Epidemiologic Background & Data



Awareness of HIV Status among Persons with HIV, United States

Estimated new infections annually	48,100
Number HIV infected	1,178,350
Number unaware of their HIV infection	235,670 (20%)

The Epidemic in Florida 2011

Population: 18.8 million →

(4th in nation)

Cumulative AIDS cases: 124,069

(3rd in nation)

Cumulative pediatric AIDS cases: 1,543

(2nd in nation)

Cumulative HIV (not AIDS) cases: 47,695

(2nd in nation of 46 states with HIV name reporting)

Persons living with HIV/AIDS: 95,335 →

HIV prevalence estimate: 130,000

HIV Incidence Estimates are approximately

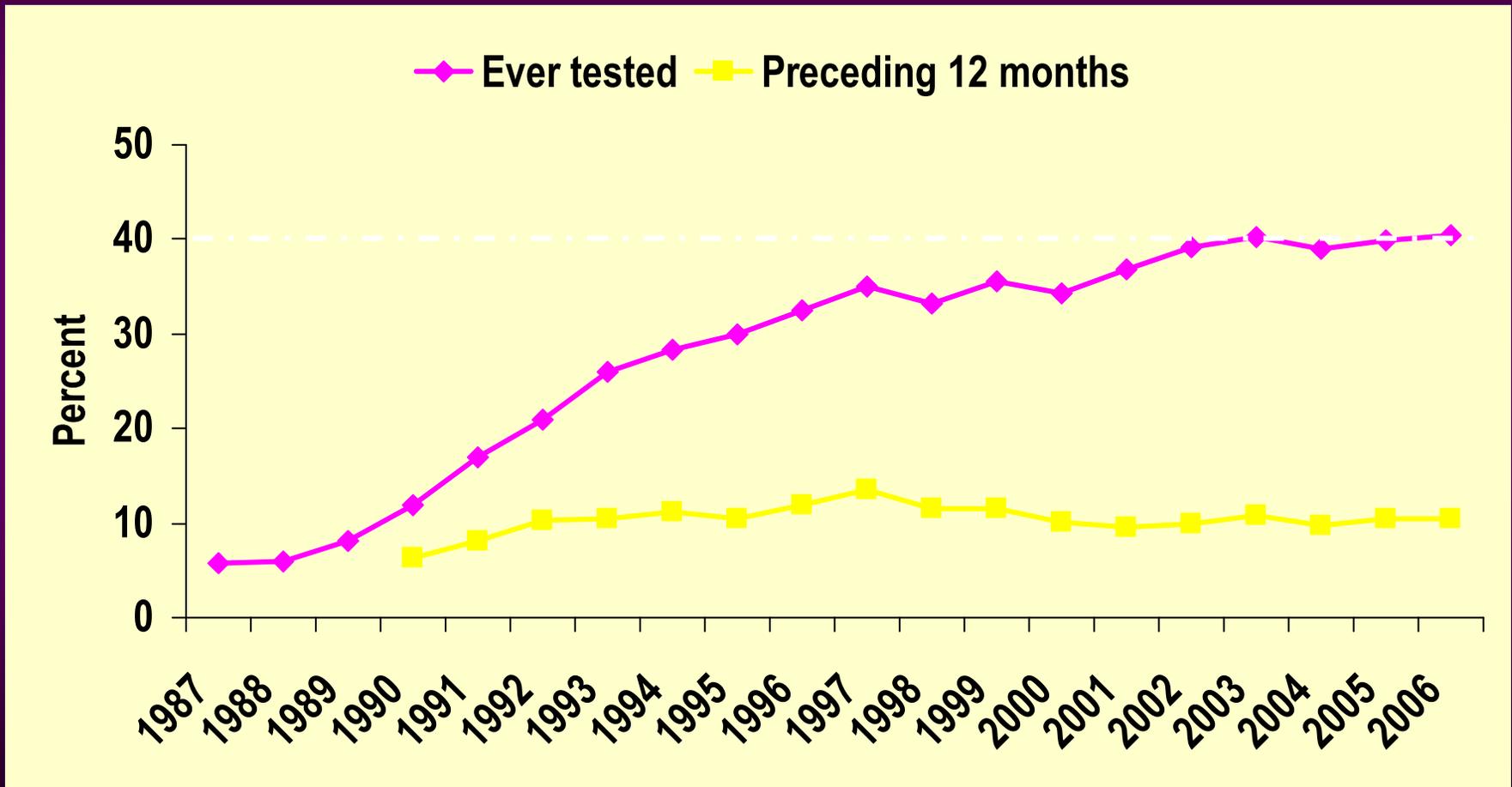
5,000 per year, 2006-2009

60% White
16% Black
22% Hispanic
2% Other*

30% White
49% Black
19% Hispanic
2% Other*

*Other = Asian/Pacific Islanders; American Indians/Alaskan Natives; multi-racial.
Trend data as of 12/31/2011, Living data as of 05/26/2011

Percent of Persons Ever Tested and Tested in the Preceding 12 Months - NHIS 2002-2006



HIV Testing: 2006

- 40% of adults tested for HIV at least once
 - *Estimated 71.5 million persons*
- 10.4% tested in the preceding 12 months
 - *Estimated 17.8 million persons*

Early Indications of Progress

	<u>Ever Tested</u>	<u>Last 12 months</u>
2005	70,036,336 (39.9%)	18,042,610 (10.4%)
2006	71,468,420 (40.4%)	17,775,006 (10.4%)
2007	73,848,002 (41.3%)	18,791,895 (10.7%)

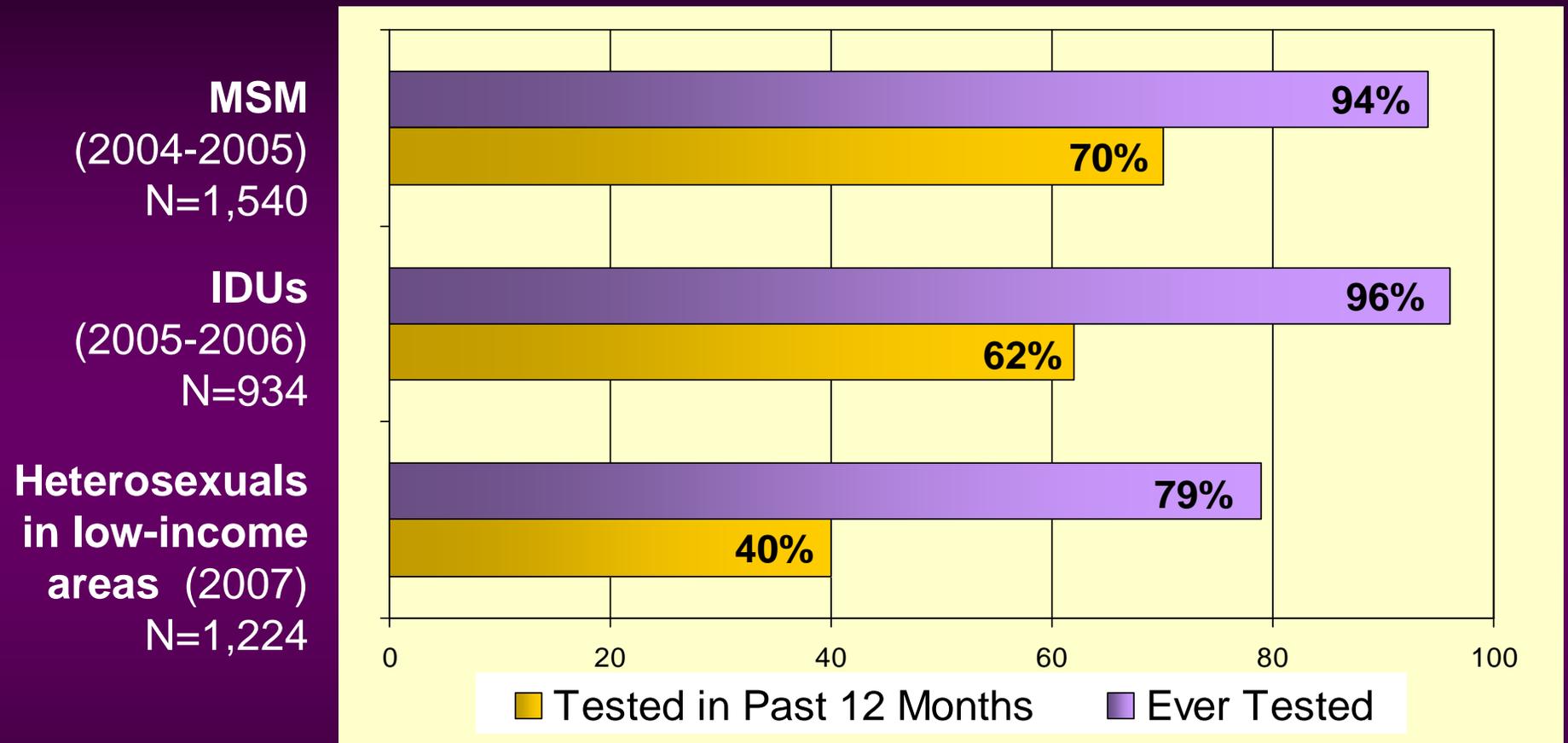
Persons Tested, Preceding 12 Months

White	8%
Black	22%
Hispanic	13%
Risk factors?	
Yes	23%
No	10%
Pregnant?	
Yes	61%
No	13%

Where were persons tested for HIV?

	<u>2003</u>	<u>2006</u>
Private doctor/HMO	44%	53%
Hospital, ED, Outpatient	22%	18%
Community clinic (public)	9%	9%
HIV counseling/testing	5%	5%
Correctional facility	0.6%	0.4%
STD clinic	0.1%	0.1%
Drug treatment clinic	0.7%	0.4%

HIV Testing among High-Risk Populations, Findings from Behavioral Surveillance in South FL



Top Reasons for Not Testing in Past 12 Months (all populations)

- Low risk for HIV
- Afraid of finding out HIV+
- Didn't have time

Testing Technologies

- OraSure
- Rapid Testing
- 4th Generation



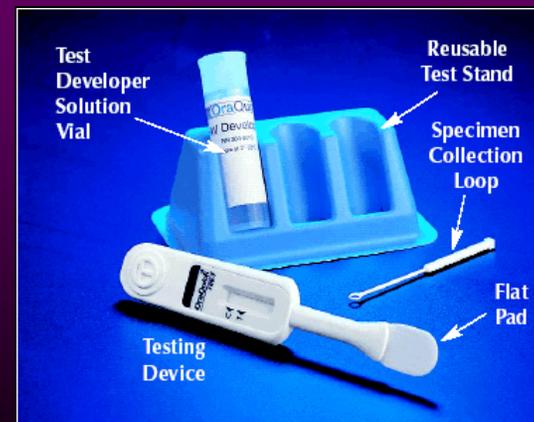
OraSure

- Oral fluid testing
- Great for outreach settings
- Best at identifying long-term infection



Rapid Testing

- Very good/accurate tests
- Use in “lab like” settings and mobile units
- Results in as little as 15 minutes
- Excellent technology for ensuring the client receives results



4th Generation Testing

- Abbott Architect Ag/Ab Combination



4th Generation Testing

Blood only

– Antibody

- Looks for antibodies for HIV-1 and HIV-2

– Antigen (p-24)

- Antigens are molecules that react with an antibody
- A protein found in the core structure of HIV – actually part of the virus itself
- The test doesn't differentiate between Ag+ and Ab+ - that is determined in the confirmatory test

4th Generation Testing

- Confirmatory Testing
 - IA Positive – Multispot Confirmatory

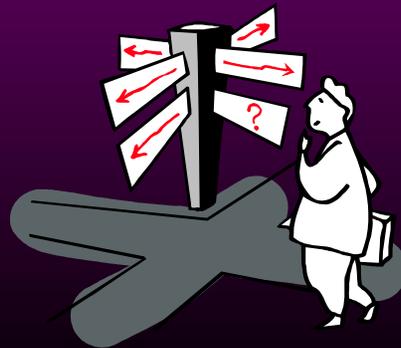


- Multispot Can Detect HIV-1 and HIV-2
- Quickly identifies Ab+ (including those WB -)

- Confirmatory Testing
 - IA positive – Multispot negative
 - Conduct Nucleic Acid Amplification Test (NAAT)
 - Looks for actual virus (HIV-1 RNA)
 - Reduces window period to 1 to 2 weeks
 - Blood only

Targeted Testing: New Directions

- What does HIV testing look like in terms of HIP?
- New CDC requirements regarding seropositivity rates (1% minimum, Cat. A)
- Populations to test (MSM, serodiscordant couples, black/Hispanic, etc.)



Targeted Testing, cont.

- Incorporate additional tests when possible (e.g., STD, Hepatitis)
- Low impact vs. high impact testing?
- When new positives are identified, linkage is KEY

Testing in Medical Settings



- Building partnerships/collaborations
- Potential collaborations/sites

Social Network Strategy (SNS)

- CDC Model (researched, showed evidence of effectiveness)
 - <http://www.cdc.gov/hiv/resources/guidelines/snt/>
- Social Networks is a recruitment strategy designed to increase HIV testing among high-risk populations by using their existing social networks.
- Recruiters refer the social, sexual, and drug using members of their social network to HIV counseling and testing services.
- Network associates are the members referred by recruiters.

Social Networks Strategy (SNS)

- It is designed to reach those individuals who would not normally seek HIV CTL services.
- SNS is based on relationships, trust, and incentives.
- Population MUST share common risk behaviors and risk factors in order for SNS to work to its full potential (i.e., find the most positives as possible).
- Examples include: young black MSM (ages 18-29) on HBCU campus, sex workers on OBT, IDUs, etc.

Florida's HIV Testing Initiatives

- Expanded Testing Initiative (ETI)
- Citywide Testing Awareness Campaigns (Miami, Orlando, Palm Beach, Tampa Bay, Broward is Greater than AIDS)
- 112,000 by 2012 (Latino Testing Initiative)
- SOS



Expanded Testing Initiative (ETI)

- 12 counties
- Focus is on testing populations with highest burden of HIV
 - Black and Hispanic heterosexuals
 - MSM, IDU of all races and ethnicities
 - Transgender populations
- 70% of funding to testing in healthcare settings

Bus Placards



Mobile Billboard



Citywide Testing Awareness Campaigns

- Take Control Events, Miami
- Test Miami, Broward is Greater than AIDS, Test Orlando, Test Tampa Bay, Test Palm Beach County



112,000 Latinos in 2012

- Seeks to respond to HIV crisis by uniting Latino leaders, businesses, churches, CBOs and others in FL to act and fight against the spread of HIV.
- The goal is to increase and normalize HIV testing in all Latino communities throughout the state by testing 112,000 Latinos by the end of 2012.



Sistas Organizing to Survive SOS

- Grassroots mobilization initiative for black women, launched in June 2008
- Encourages black women to get tested where they live, work, play, and worship
- Original goal was to test 100,000 black women each year by 2010

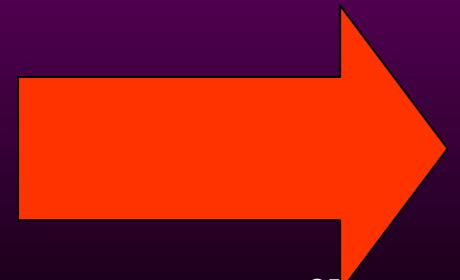


What's the Take-home?

- Know who you need to reach
- Know where you need to reach them
- Repeat testing for high-risk populations

Webinar Evaluation

- Before you leave the webinar, please take a moment to complete the evaluation in the polling section (to the right of your screen)
- Your feedback is extremely important to us and will help improve on current and future trainings
- The more feedback the better!



Resources

High Impact Prevention: CDC's Approach to Reducing HIV Infections in the United States

<http://www.cdc.gov/hiv/strategy/>

National HIV/AIDS Strategy

<http://www.cdc.gov/hiv/strategy/>

FL HIV Prevention Section Website (slides from today's webinar will be available here, under Resources & Materials) <http://www.preventhivflorida.org/>

Testing Page, FL HIV Prevention Section (rapid testing guidelines, forms, data, training schedules)

http://www.preventhivflorida.org/Counseling_Testing_Team.html

FL Bureau of HIV/AIDS and Hepatitis Website

<http://www.floridaaids.org/>

Social Networks Testing: A Community-based Strategy for Identifying Persons with Undiagnosed HIV Infection, CDC, Atlanta, GA <http://www.cdc.gov/hiv/resources/guidelines/snt/pdf/SocialNetworks.pdf>

Duran, D., Beltrami, J., Stein, R., Voetsch, A., & Branson, B. (August 2008). Persons Tested for HIV, 2006. *MMWR*, 57(31); 845-849. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5731a1.htm>

Campsmith, ML, Rhodes, P, Hall, HI, & Green, T. (October 2008). HIV Prevalence Estimates- United States, 2006. *MMWR*, 57(39); 1073-1076. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5739a2.htm>

Hall, IH, Song, R, Rhodes, P, Prejean, J, An, Q, Lee, LM, Karon, J, Brookmeyer, R, Kaplan, EH, McKenna, MT, & Janssen, RS. (2008). Estimation of HIV Incidence in the United States. *JAMA*, 300(5); 520-529. <http://jama.jamanetwork.com/article.aspx?volume=300&issue=5&page=520>

Questions/Comments



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