

Implementation and Evaluation of a Community-Based STI/HIV Testing Program in a High-Risk Population

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CINHS



CINHS



New Hope



AWAC



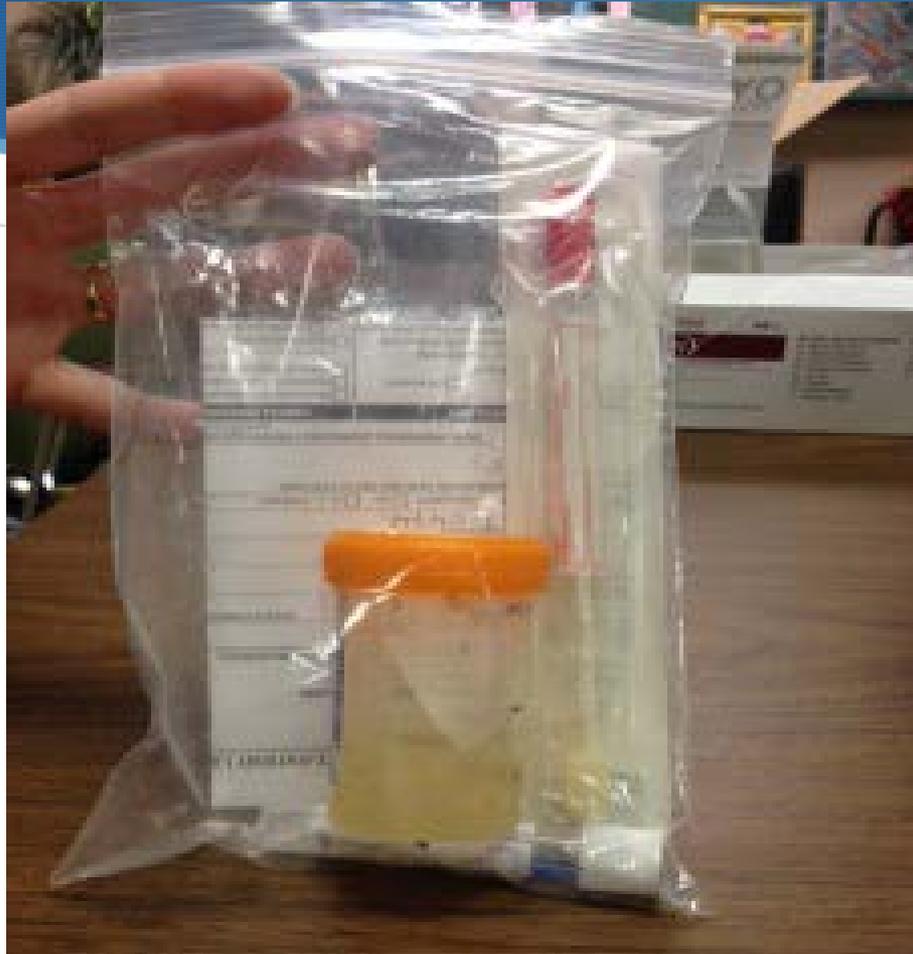
New Program

- ◆ New HIV/STI clinics 2 x 12 weeks (Pilot 1 & Pilot 2)
- ◆ AWAC and New Hope
- ◆ Self-collection: Chlamydia Trachomatis (CT), Neisseria Gonorrhoea (NG), Trichomonas Vaginalis (TV)
- ◆ Point of Care HIV (POC HIV)

Sample Collection



Sample Collection



HIV Point of Care Rapid Test



Methodology

- ◆ Quantitative and Qualitative data
- ◆ Quantitative: Encounters and rates of HIV/STI infections
- ◆ Qualitative: Interviews with coordinators and focus groups with women

Measures

- ◆ *Quantitative:*

- ◆ BASELINE: Oct. 28, 2014- Jan 20th, 2015

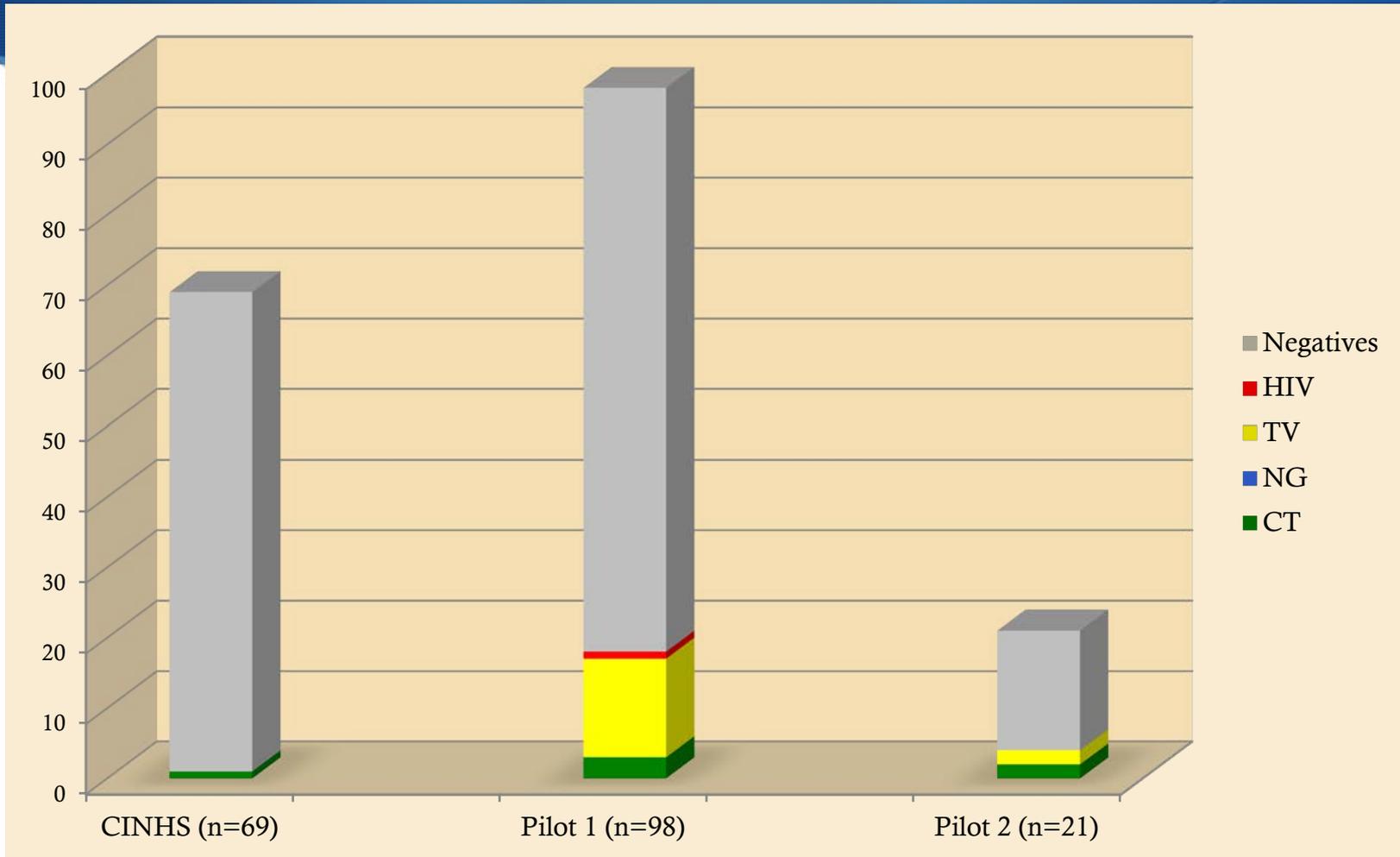
- ◆ PILOT 1: Jan 21-Apr 15th, 2015

- ◆ PILOT 2: May 6-July 29th, 2015

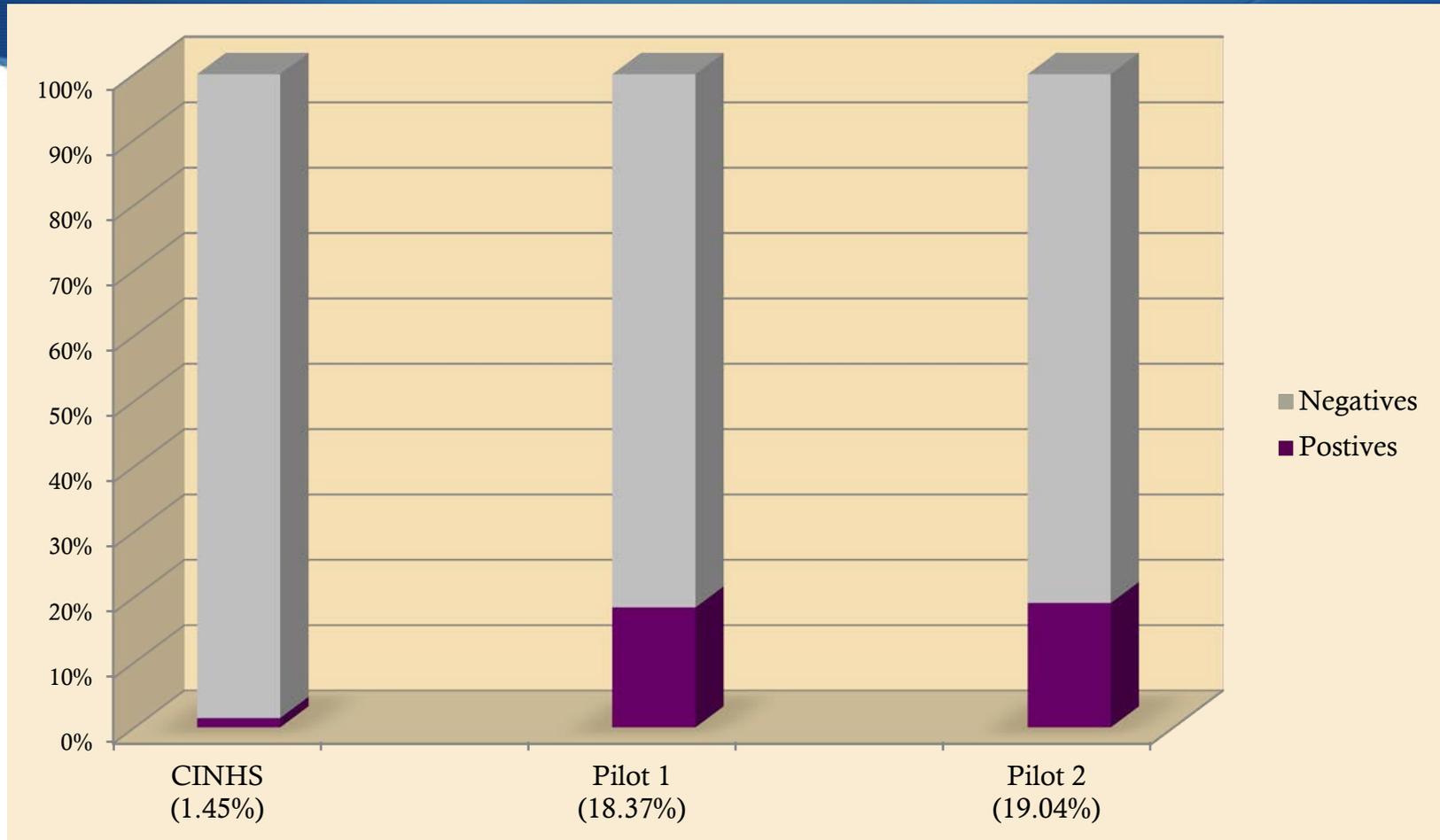
Quantitative Data Analysis

- ◆ 1-The number of encounters and the tests provided for CT, NG, TV, and HIV
- ◆ 2-The positive results for CT, NG, TV and HIV
- ◆ 3-The number of participants that complete treatment for CT, NG, and TV, and the number that initiate treatment for HIV

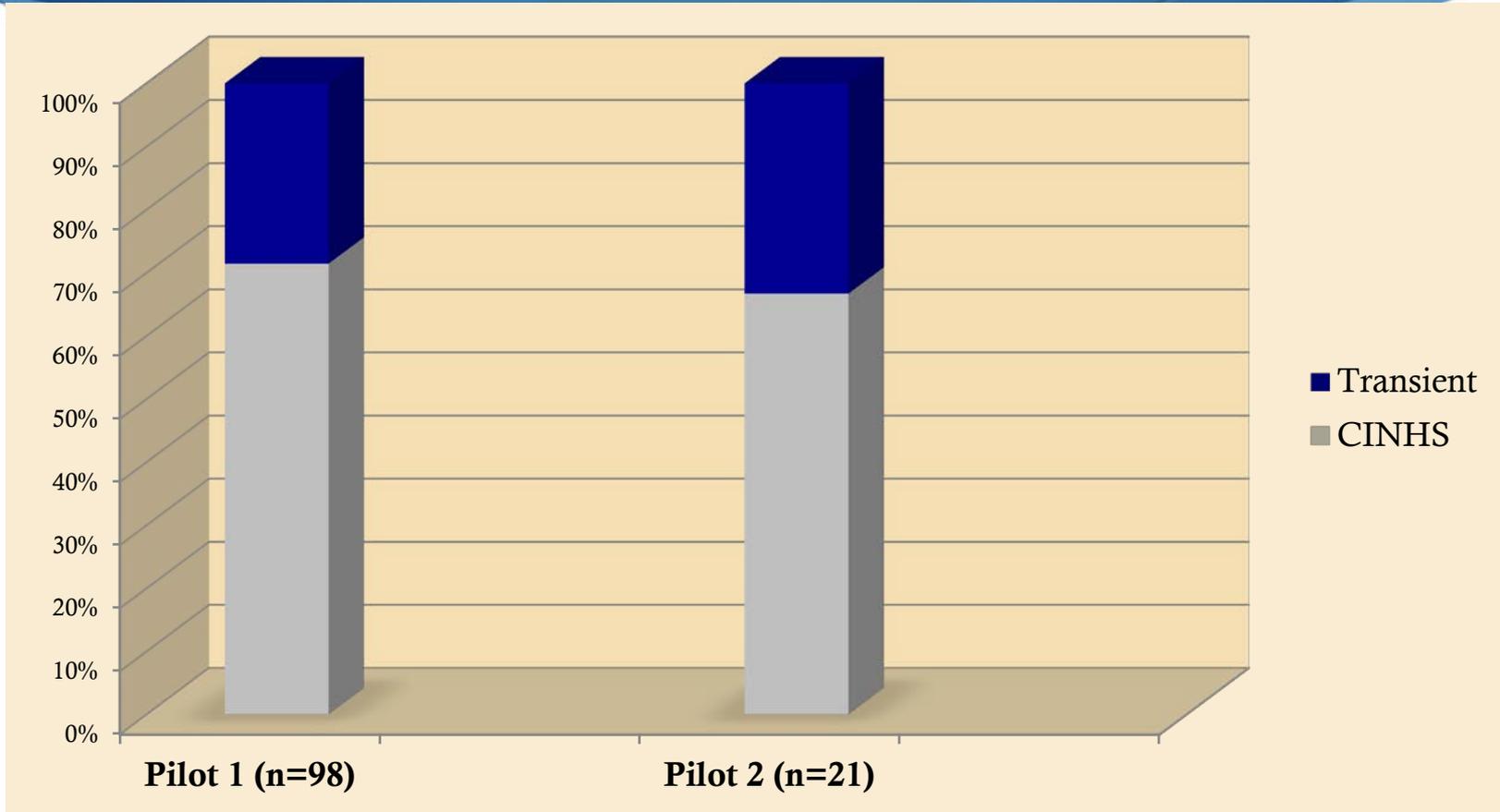
Encounters



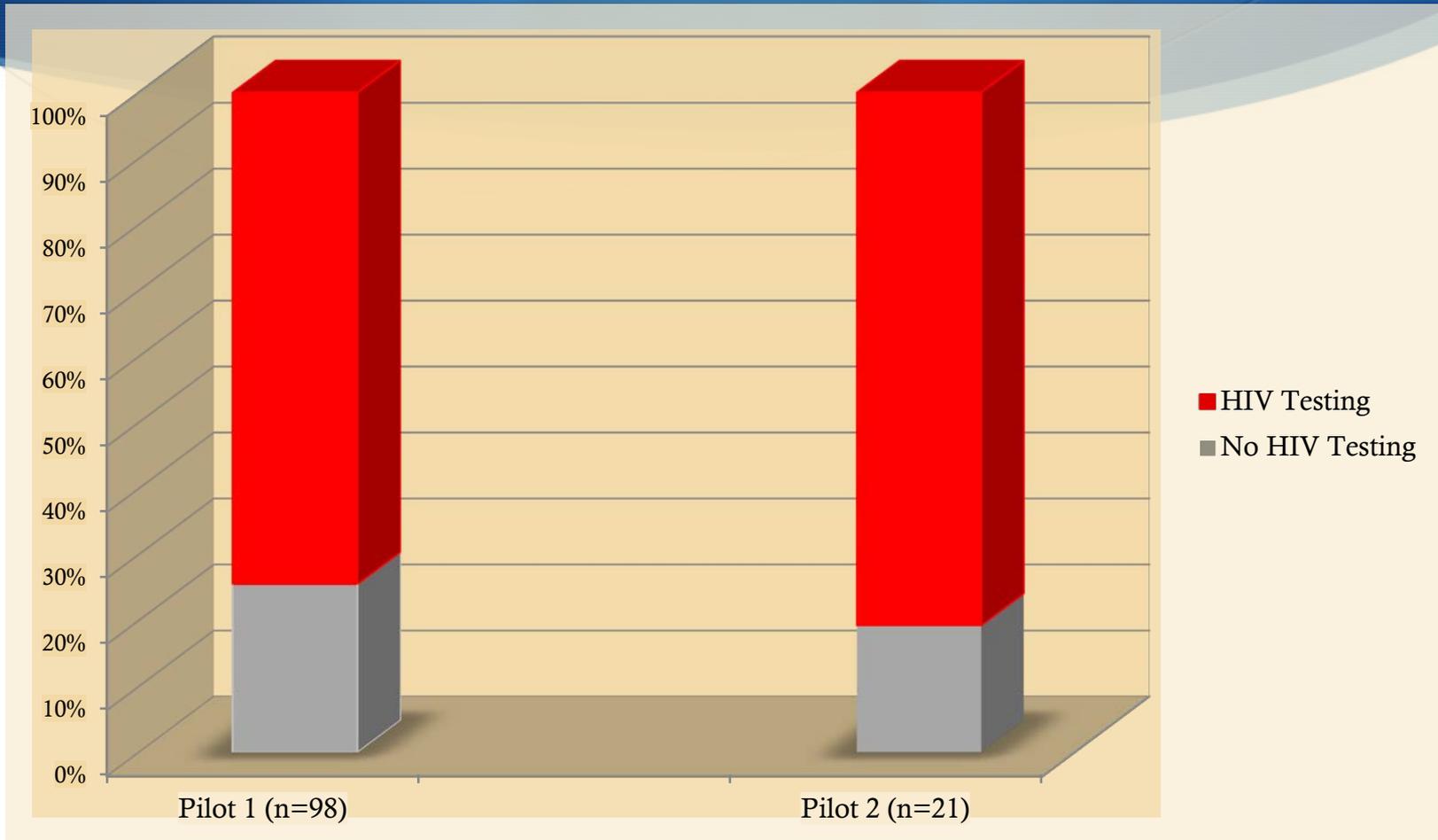
Positivity Rates



Patient Population



HIV Testing Uptake



Qualitative Data Analysis

- ◆ *Qualitative 1:*
- ◆ *Evaluation of community coordinators (n=3)*
- ◆ Informal interviews with NP
- ◆ 60 minutes
- ◆ Pre set questions
- ◆ Data was analyzed and reported on the perceived effectiveness and recommendations for the new program

Coordinator Interview Questions

- ◆ 1- Do you think that the day and time of the community-based clinics was appropriate?
- ◆ 2- Do you think that the community-based program is worthwhile to continue?
- ◆ 3- Do you think that extending the services of the community-based clinics to include primary care is feasible?
- ◆ 4- What general feedback have you heard from the patients?
- ◆ 5- What recommendations do you have to improve this service?

Qualitative Data Analysis

- ◆ *Qualitative 2:*
- ◆ * *Two focus groups (one at each community venue) with the women (n=15)*
- ◆ Pre set questions
- ◆ Facilitated by research assistants
- ◆ Incentive - small gift (value <\$5)
- ◆ 60 minutes
- ◆ Data was analyzed and reported on perceived effectiveness and recommendations for the new program

Focus Group Questions

- ◆ 1- Do you prefer community-based testing or traditional clinic based testing?
- ◆ 2- What are the problems you have with community-based testing?
- ◆ 3- What are the problems you have with traditional clinic-based testing?
- ◆ 4- Would you like to see the community-based testing sites continue?
- ◆ 5- Would you like to see the community-based sites services extended to include primary care?

Implications

- ◆ Community-based STI/HIV testing increases testing rates and has an increased positivity rates (1.45% to 18.37 and 19.04%)
- ◆ Uncertain if incentives increase testing
- ◆ Women are supportive of continuing the community-based clinics, and expanding the services
- ◆ Traditional and community-based clinics should strive to provide stable /consistent care to high-risk populations

Outcomes

- ◆ CINHS and Northern Health support/staff primary care clinics at AWAC and New Hope
- ◆ AWAC and New Hope agree to offer administrative support to the new primary care clinics
- ◆ New clinics will start in January 2016

Questions?



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