#testathome: Increasing access to HIV home testing among priority populations through CBO partnerships in New York City

**Abstract**

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**BACKGROUND**

Surveillance data demonstrate major disparities among new HIV diagnoses in New York City (NYC). Timely HIV diagnosis and linkage to care greatly reduce HIV morbidity, mortality, and onward transmission. However, persons may face many barriers to regular testing due to lack of access to medical care and/or reluctance to seek testing for HIV in clinical settings due to medical distrust, insurance status, and previous negative experience. The HIV self-test (HIVST) can decrease testing barriers and increase HIV status awareness, but HIV-affected communities may experience barriers to accessing the HIVST, including lack of awareness and cost. In response, the NYC Health Department partnered with community-based organizations (CBOs) to launch the Community Home Test Giveaway program (CHTG) to provide HIVST kits free of charge to New Yorkers who are most affected by HIV.

**OBJECTIVES**

1. Improve access to HIV testing for priority populations in NYC
2. Decrease barriers to obtaining the HIVST among priority populations in NYC
3. Increase awareness of linkage to care resources for persons testing positive using an HIVST in NYC

**METHODS**

The CHTG study methods are represented in the image to the right. Partner CBOs were selected for their experience working with priority populations and individuals in less resourced environments.

**Eligible participants**

- 17 years old
- NYC resident
- HIV negative/unknown status
- Member of one or more priority populations

**RESULTS**

- From March 2017 to October 2018, 18 partner organizations distributed approximately 22,000 recruitment cards
- The CHTG reached eligible participants from each of the 5 boroughs in NYC with the majority residing in either the Bronx (45%) or Brooklyn (27%)

**Characteristics of eligible participants: Partner CBOs reached a majority of the intended priority populations through recruitment card distribution**

<table>
<thead>
<tr>
<th>Black and/or Hispanic/Latino</th>
<th>Women of color</th>
<th>Gay, bisexual or MSM</th>
<th>Gay, bi or MSM of color</th>
<th>TGNC or another gender</th>
<th>18-34 years old</th>
<th>Experienced exchange sex</th>
<th>Living in high-poverty areas</th>
<th>Unstably housed</th>
</tr>
</thead>
<tbody>
<tr>
<td>90%</td>
<td>49%</td>
<td>23%</td>
<td>21%</td>
<td>13%</td>
<td>54%</td>
<td>27%</td>
<td>80%</td>
<td>29%</td>
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</tbody>
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Of the 120 participants who completed an eligibility survey, 83% were eligible, of those 75% ordered their HIVST kit and 38% completed a follow-up survey.

**FOLLOW-UP SURVEY RESULTS**

- Among survey respondents, 52% had never heard of the HIVST prior to the CHTG
- Among participants who chose to pick up the HIVST kit at a CBO, 100% reported a positive experience
- The top reasons participants reported taking the recruitment card was "I wanted to get tested and try the home HIV test" and "I think getting tested for HIV is important"

Among those who reported using the HIVST:

- Would recommend it to a friend: 40%
- Tested sooner than they otherwise would have: 94%

**CONCLUSION**

- This innovative health department-community partnership distributed a large volume of recruitment cards to priority populations for redemption of a free HIVST, boosting awareness of the HIVST in the process.
- Though there were significant barriers to accessing the required online eligibility survey, the CHTG was able to reach the intended populations, especially the harder-to-reach and never-tested.
- Close collaboration with CBO partners has been integral to interpreting the successes and challenges of the CHTG and revising future implementation strategies.
- Eligibility survey data and CBO partner feedback helped identify that the required online eligibility survey posed significant barriers to scale-up.

We are exploring how best to boost participation and decrease barriers among those recruited to expand program reach and impact.

**REFERENCES**


**ACKNOWLEDGEMENTS**

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