Exploring Experiences of Disclosing HIV-Positive Status While in Prison

Investigator: Megan Comfort (RTI International)
Project Partners: Lynn Wenger (Urban Health Program), Andrea Lopez (Urban Health Program), Alex H. Kral (RTI International),

In order to receive HIV treatment while incarcerated, individuals who know they are HIV-positive must disclose their status either by consenting to HIV testing or by identifying themselves to correctional medical providers. Seroprevalence data suggest that a potentially large proportion of HIV-positive prisoners decide not to disclose their status and therefore do not receive HIV care while incarcerated.

Begun in January 2013, this 3-year study aims to develop an understanding of HIV-positive people’s experiences disclosing or not disclosing their status while incarcerated. With help from community-based organization partners, we have been recruiting formerly incarcerated HIV-positive people to participate in in-depth qualitative interviews. We are still conducting data collection, and to date have had 57 people participate. In our preliminary analyses, we have found that nearly all participants had disclosed their HIV-positive status to medical personnel during their most recent incarceration. The primary motivation for disclosure was to access HIV treatment, although participants also expressed fear of reprisals from correctional staff if they did not disclose and were later found to be HIV-positive. Participants articulated a wide variety of beliefs around whether or not correctional medical records reporting HIV status were transferred from one facility to another. Confusion regarding these policies led some people to assume their status had been disclosed to correctional staff without their consent. Participants also described a host of institutional policies that revealed their HIV-positive status to other people in the correctional facility, including being placed in segregated housing for people with medical needs and being called for appointments with an HIV-specialist physician. Many participants described high levels of stigma and direct experiences of discrimination in correctional settings as a result of being known to be HIV-positive. We conclude that there is a critical need to develop policies to protect medical confidentiality in jails and prisons so that the privacy rights of HIV-positive people are respected and so that they can receive HIV treatment according to the Health Information Portability and Accountability Act (HIPAA) protections afforded to the general population.
**Oakland Methadone Access Pilot Study**  
**Investigators:** Loris Mattox (HIV Education and Prevention Project of Alameda County - HEPPAC) and Alexis Martinez (San Francisco State University)

The project objectives are to explore the facilitators and barriers (social, economic, and geographic) associated with transitioning from methadone detox to methadone maintenance among African Americans in Oakland, CA.

**Stay Healthy, Stay Strong Intervention Study**  
**Investigators:** Alvan Quamina and Rani Eversley

Pilot Study Goals are to:

1) Examination of the relationship between depression, substance abuse, sexual risk-taking and medication adherence among African American MSM.

2) Development of an intervention designed to help AA MSM manage depression, substance abuse, sexual risk-taking and medication adherence (self-care).

3) Initial testing for feasibility and acceptability of self-care intervention.

**MSM, Bisexual and Transgender Populations**

**MSM Self-Testing Project**  
**Investigators:** Marguerita Lightfoot (UCSF Center for AIDS Prevention Studies - CAPS), Sheri Lipman (UCSF CAPS), Nicolas Moss (Alameda County Department of Public Health)  
**Study Team:** Sarah Treves-Kagan (UCSF CAPS)

The MSM self-testing project is a new three year HIV prevention grant to identify, test, and link to care African American and Latino MSM aged 18-45 in Alameda County. To do so, the study will combine newly available technology—HIV self-testing—into a “chain recruitment” methodology based on respondent-driven sampling (RDS). Peer recruiters or “seeds” (using RDS language) will be trained to deliver a peer-driven intervention that encourages friends who are at risk for HIV to take the HIV self-test. If positive, the trained peers will assist those newly infected to access and link to care. Consequently, the peer serves as a support structure during the initial HIV testing and navigator to link to care.

The study will be conducted two discrete phases: 1) formative research phase, in which we will conduct in-depth interviews and FGD with MSM and providers to inform the development of the intervention and a pilot test of the intervention approach; and 2) intervention phase, in which we will conduct a full implementation of the peer network-based self-testing and navigation intervention and evaluate its efficacy.
Project WAMERU: Understanding HIV Prevention Needs in the Relationships of Behaviorally Bisexual African American Men and their Female Partners
Investigator: Sonja Mackenzie (Santa Clara University)
Project Partners: Tazima Jenkins Barnes

Project WAMERU is a five-year mixed-methods study that aims to develop understandings of the cultural and relationship context of HIV risk among behaviorally bisexual Black men and their female partners. In-depth qualitative interview data collected so far with women who are or have recently been partnered with a bisexual male partner (N=30) has been analyzed alongside qualitative interview data (N=60) with bisexual Black men to develop a culturally-appropriate quantitative measure that will be used in the final research phase to assess the effects of disclosure, levels of knowledge of bisexual activity and gender ideologies on sexual risk behaviors among a cross-sectional sample of men and women. We will conduct an exploratory study of dyads to explore how partners influence each others behaviors. Findings so far indicate that men and women underscore the role of racism and gender norms in conditioning sexual identities and behaviors among bisexual men; and that both men and women configure complex informal HIV prevention strategies in the face of these contexts to protect themselves and their partners from HIV.

Project WAMERU is funded by NIMH # #MH096608.

The SHINE Study
Investigator: Erin C. Wilson (San Francisco Department of Public Health)
Study Team: Sean Arayasirikul

The SHINE study is a 5-year longitudinal qualitative and epidemiological study of 300 transgender female youth ages 16-24 years which seeks to examine HIV-related risk behaviors and identify protective factors for resilience. The study will reach and retain participants by taking an innovative approach to adapting Respondent Driven Sampling (RDS) using socially interactive technologies. The study also seeks to adapt and refine measures of protective factors to identify resilience among transyouth, identify factors specific to their developmental stage to explain engagement in HIV-related risk, and to determine the effect of protective factors on the relationship between risk factors and risk behavior. The methods to be investigated, refined, and applied for this research are critical to the evidence base of HIV prevention for marginalized youth populations affected by HIV. The study will also fill important gaps in the literature by providing causal data to identify key risk and protective factors for trans-female youth. The sampling strategy will elicit a diverse, representative sample of transyouth from which will address both the challenges this population faces and build upon the strengths they possess.

The STRIPE Study - HIV Surveillance of Transmen
Investigator: Willi McFarland (San Francisco Department of Public Health)
Study Team: Cris Youssef

The STRIPE Study is the 1st NIH-funded HIV surveillance study of transmen in the U.S. and will test a new hybrid approach to sampling hidden populations called “starfish sampling” to collect epidemiological data on HIV prevalence, risk-related behavior and other health issues faced by transmen. The STRIPE Study will also gather population size estimation of transmen in San Francisco.
TransAccess: Enhancing Engagement and Retention in Quality HIV Care for Transgender Women of Color (The Brandy Martell Project)
San Francisco Department of Public Health

This study is a HRSA funded 5-year site evaluation research project whose aims are to improve engagement and retention in HIV care among transgender women of color. The primary focus of the initiative is to identify and successfully engage and retain in care transgender women of color who are at high risk of HIV infection or are infected with HIV but are unaware of their HIV status; are aware of their HIV infection but have never been engaged in care; are aware but have refused referral to care; or have dropped out of care.

The HOME Study
Investigators: Hyman Scott (San Francisco Department of Public Health), Susan Buchbinder (San Francisco Department of Public Health)

The HOME study is a home-based HIV self-testing and linkage to care prevention package for young (18-35) Black and Latino men who have sex men (MSM) in San Francisco and Oakland. HOME will support the development of a new multistage HIV prevention intervention, utilizing technology and peer-navigation, to facilitate and support home HIV self-testing as well as linkage to local HIV prevention and treatment services. A major component of this project will be collaboration with community partners and community based organizations that are a vital part of HIV prevention. The study will start with qualitative work to explore facilitators and barriers to HIV testing and linkage to care for HIV positive and HIV negative MSM, and will be followed by a quantitative survey of 500 Black and Latino MSM to explore the generalizability of the themes from the qualitative work. These findings will inform the development of an HIV testing and linkage intervention which will first be tested in a small pilot, then a larger randomized control trial.

Qualitative study to describe the substance use experiences of young Black MSM
Investigator: Austin Nation (UCSF)

This qualitative study will offer insight about the range of factors and enhance our understanding about the role that substance use plays in the lives of young Black MSM. Clinicians and researchers in all settings will encounter young Black men and need to understand the prevalence of substance use among this population as well as how this influences sexual risk behavior. This information will contribute to the development of prevention education strategies specifically tailored to this population that address both substance use and HIV transmission.
The Princess Project  
Investigator: Tooru Nemoto (Public Health Institute)

Project Goals: 1) Through implementing culturally sensitive and transgender specific outreach programs in African American transgender communities in Oakland/Alameda Country, the Butterfly Project will identify African American transgender women who are at high risk for HIV infection or are infected with HIV but are unaware of their HIV status; are aware of their HIV infection but have never been engaged in care; are aware but have refused referral to care; or have dropped out of care; 2) Engage the targeted African American transgender women, enroll eligible clients in the Butterfly Project, provide HIV counseling and testing, comprehensive case management and client advocacy based on the Motivational Enhancement Intervention (MEI), and retain and monitor the comprehensive HIV primary care and other necessary services in collaboration with service providers in Alameda and San Francisco County; 3) Evaluate the efficacy and impact of the Butterfly Project in collaboration with the Evaluation and Technical Assistant Center (ETAC), disseminate findings and experience to service providers and transgender community members, and sustain the Butterfly Projects in collaboration with the Community Advisory Board (CAB), transgender community members, and local, State, and national government agencies.

A Randomized Controlled Trial of the Bruthas Project  
Investigators: Emily A. Arnold (Academic PI), Gloria Lockett (Community PI), Susan Kegeles (UCSF CAPS), Don Operario (Brown University), Tor Neilands (UCSF CAPS), Lance Pollack (UCSF CAPS) and Carla Dillard Smith (AACCESS Research and Advocacy, Inc)  
Project Partners: Michael Benjamin, Raysean Ford, William Stewart, John Weeks, Stuart Gaffney, Shakema Snow, Stephanie Cornwell, and Elizabeth Bartmess

This study is a randomized controlled trial of the Bruthas Project, an individual level HIV prevention intervention for African American men who have sex with men and women (AAMSMW), which is designed to build upon standardized HIV counseling and testing (HIV-CT). Bruthas is a series of four individualized sexual health promotion counseling sessions, delivered over the course of 3 months. In our trial, the Bruthas Project is being compared to a standardized HIV-CT and referrals to general case management services. Men receiving the Bruthas Project intervention engage in sessions with the following goals: (a) increasing comfort with one’s personal identity, (b) building safer sex and sexual communication skills, and (c) increasing regular HIV testing for men who are negative. A sample of 400 African American MSMW who do not identify as gay have been recruited from the San Francisco Bay Area. After receiving HIV counseling and testing, half were randomly assigned to the enhanced intervention condition and half were randomly assigned to the standard program. All participants completed baseline, 6 month follow up, and 9 month follow up behavioral risk assessments using an audio computer-assisted interview. A subset of participants also completed post-intervention qualitative interviews to provide in-depth experiential insight into the intervention process, and we have also conducted a small sub-study with participants who are living with HIV. The effectiveness of the Bruthas Project intervention will be evaluated by examining the impact of the intervention on our primary outcomes, sexual risk behavior and regular (every 6 months) HIV testing for men who are HIV-negative. This work is a collaboration between the Center for AIDS Prevention Studies (University of California, San Francisco) and the California Prostitutes Education Project (CAL-PEP) in Oakland, CA. The team works out of a shared understanding that service providers, researchers, and community members must collaboratively work together to create solutions that can mitigate the spread of HIV/AIDS in the African American community.
Connecting Resources for Urban Sexual Health: The CRUSH Project
Investigator: Janet Myers
Project Team: Ifeoma Udoh and Kimberly Koester

The overall goal of the CRUSH project is to enhance and extend a response to the local HIV/AIDS epidemic in Alameda County with a set of innovative, evidence-based interventions across the continuum of HIV prevention and care, targeting young men who have sex with men. The East Bay AIDS Center (EBAC), along with UCSF/CAPS, Gladstone Institutes, and the Pangaea Global AIDS Foundation have partnered to implement a study towards exploring the best practices in integration of HIV prevention and care services for young MSM of color in the East Bay. Specifically, we will enhance the services provided by an existing model program for HIV-infected youth to strengthen linkage and retention in HIV care. The existing model of the Downtown Youth Clinic in engaging and retaining HIV positive youth will then be “replicated” to support the engagement and retention of HIV negative youth in comprehensive sexual health services, including the provision of PrEP and nPEP.

The interventions associated with the aims of this demonstration project are as follows:

AIM 1: Test and link young MSM of color to sexual health services: We will expand the Downtown Youth Clinic’s successful HIV testing strategy targeting youth to include: social network testing; and an innovative youth outreach corps working with existing and new community partner agencies.

Aim 2: Enhance and evaluate engagement and retention strategies for young MSM of color infected with HIV: We plan to optimize the current HIV care and treatment services at DYC by adding three new components: a patient peer mentoring component, a linkage and retention specialist, and psychosocial support for program staff.

Aim 3: Engage and retain HIV-uninfected young MSM of color in sexual health services, including PrEP: We plan to build a highly innovative model of sexual healthcare that integrates sexual health services for HIV-uninfected young MSM of color into an HIV care setting. These services will offer a highly effective combination HIV prevention strategy, including PrEP, warm-hand offs for high risk negatives, non-occupational post-exposure prophylaxis (nPEP), risk reduction counseling, repeat HIV and STI testing, and youth-focused programming.
2nd CHANCE: Creating a Healthy And Nurturing Community Environment for Women Living with HIV
Investigators: Stephanie Cornwell (Women Organized to Respond to Life-threatening Diseases - WORLD), N. Dietz (WORLD), Nikia Harris (WORLD), Cynthia Carey-Grant (WORLD)

The goal of 2nd CHANCE is to implement and evaluate the efficacy of a new, peer-based model which significantly expands the number of low-income, women of color living with HIV in Alameda County who are effectively engaged in HIV care and who are adherent to HIV medications, both to enhance their quality and length of life and to achieve undetectable viral load levels that virtually eliminate the risk of passing HIV to others. WORLD Outreach and Linkage Specialists (OLS) conduct street and community outreach, in addition to partnering with local clinics to identify, link, and help retain in care low-income women of color who are either out of care or precariously retained in care, including women with co-occurring behavioral disorders and women with complex family or life situations that threaten their long-term retention in care. Data collection is ongoing, but preliminary analysis of baseline data have been analyzed (n=57) to describe barriers to care including homelessness (16%), incarceration in the past 12 months (16%), involvement in sex trade in the past 90 days (9%), substance use in the past month (32%), and injection drug use in the past 30 days (4%).

Project Bridge: Intensive Case Management for HIV Positive Drug Users
Investigators: Christina Powers (RTI International), Megan Comfort (RTI International), Andrea Lopez (RTI International), Alex Kral (RTI International), Jennifer Lorvick (RTI International)

This presentation describes Project Bridge (PB), an intensive case management program in Oakland designed to improve engagement and continuity of HIV care among triply diagnosed people with criminal justice involvement. Funded by the National Institute of Mental Health, PB was the intervention arm of a larger quantitative study to “Seek, Test, and Treat” HIV positive adults who were either newly diagnosed or out of HIV care. PB provided outreach and services to clients across office, community, clinic, and correctional settings. As will be discussed in this presentation, these strategies helped to link and retain people in HIV care and increase community stabilization.