



# Health4U: Dissemination Event

## Introduction and Project Overview

- Dr. Catrin Evans, University of Nottingham;
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- Katie Turner, University of Nottingham;
- Dr. Holly Blake, University of Nottingham;
- Dr. Suzanne Suggs, Università della Svizzera Italiana



## Structure of the Dissemination Event

- Four Short Presentations on the Health4U Project (including Q&A)
  1. Overview & context setting
  2. Formative research & message development
  3. SMS intervention – preliminary outcomes
  4. Evaluation & implications
- Presentation of Certificates
- Lunch
- Round Table Discussion on HIV Testing Strategies

**NATIONAL**

**HIV**

**22-30**

**NOVEMBER**

**2014**

**TESTING**

**WEEK**



## What is Health4U?

Research project (19 months), funded by Nottingham City Public Health in 2013

### Research Aim

To explore the feasibility of using a mobile phone based SMS text-messaging intervention to increase uptake of HIV testing amongst African communities in Nottingham



# Research Objectives

- To identify views regarding HIV testing amongst African communities in Nottingham
- To collaboratively design, pilot and implement a culturally appropriate SMS based intervention based on the target community perceptions
- To evaluate whether the intervention leads to a change in self-reported uptake of HIV testing (**primary outcome**)
- To evaluate whether the intervention leads to a change in self-reported (i) HIV-related knowledge and (ii) attitudes to testing (**secondary outcomes**)
- To explore the appropriateness of follow up measures and processes
- To assess the acceptability of the intervention by qualitatively exploring participants' experiences of engaging with the intervention



# HIV in African Communities in the UK

- Total people living with HIV in the UK: 107,800
- Two thirds of **heterosexual people** living with HIV in the UK are African (n=38,700)
- Relatively high HIV prevalence amongst African communities:
  - 4.1% men
  - 7.1% women
- Late diagnosis is a key issue:
  - 61% of African women & 66% of men are diagnosed 'late'
  - 31% of African women & 38% of African men with HIV are unaware of their diagnosis
- Rates of undiagnosed infection outside London are even higher (41% women & 50% men)

Public Health England (2014a), HIV in the UK: Annual Report



## HIV Testing in African Communities in the UK

- Upward trend in HIV testing: 50% in 2007 to 65% in 2014, (Sigma Research 2008, 2009, 2014)
- Major reason for not testing is lack of self-perceived risk & lack of knowledge (Sigma Research, 2014):
  - 63% (of those never tested or tested >5yrs ago) stated “no reason to believe I have HIV”
  - 72% not aware of high prevalence in the UK
  - 44% not aware that treatment can prevent onward transmission
  - 36% not aware that treatment is free in the UK
- Recent national audit found that 45% of Africans with undiagnosed HIV had had a previous HIV test (Rice et al, 2013)

**= Public health need to increase testing amongst those never tested but also need to encourage regular testing**



# Why SMS for Health Promotion?

- Inexpensive
- Wide reach
- Able to access hard-to-reach groups
- Cost effective
- But - most research re. HIV has focused on adherence, awareness raising, retention & appointment reminders (not testing)

(Lim et al, 2008; Muessig et al, 2013; van Velthoven et al, 2013)



## SMS & HIV Testing: A Promising Strategy?







- Pilot studies from Uganda suggest increase in HIV testing after mass messaging (Chib et al, 2012)
- South African 4-arm RCT found that SMS intervention group were more likely to test (effect was greatest in the motivational messaging group with a 10 week intervention); (de Tolly et al, 2012)
- Kenyan PMTCT study showed that SMS intervention led to significantly greater numbers of infants being brought back to the clinic for testing (Odeny et al, 2014)
- In Australia, SMS GUM study significantly improved re-testing rates in MSM (Bourne et al, 2011)
- Sexual health studies in Australia show SMS intervention leads to significantly higher rates of chlamydia testing (Lim et al, 2012, Gold et al, 2011)



# NICE Guidance (2011)

Recommendations for developing new interventions amongst African communities in the UK: -

- Assessment of local needs
- Development of local strategies to meet locally identified needs
- Tailoring and targeting of interventions
- Reducing structural barriers to HIV testing
- Ensuring appropriate community involvement, including local African HIV testing champions

Phase	Focus	Activities and Methods
<b>A</b> 	Project set up	<ul style="list-style-type: none"> <li>Recruiting a community research team</li> <li>Research capacity building and community engagement</li> </ul>
<b>B</b> 	Formative research	<ul style="list-style-type: none"> <li>6 qualitative focus groups representing different African communities (n=48 in total)</li> </ul>
<b>C</b> 	Message development	<ul style="list-style-type: none"> <li>Collaborative development meetings</li> <li>Message piloting and refinement</li> </ul>
<b>D</b> 	Development of baseline and follow up measures	<ul style="list-style-type: none"> <li>Development and piloting of baseline and follow up survey tools</li> </ul>
<b>E</b> 	Intervention implementation	<ul style="list-style-type: none"> <li>Recruitment to the main intervention (n=172)</li> <li>Face to face administration of baseline survey</li> <li>Administration of SMS intervention</li> </ul>
<b>F</b> 	Follow up of primary and secondary outcomes	<ul style="list-style-type: none"> <li>Telephone calls to follow up all participants (n=76, 45%)</li> <li>Analysis of pre/post intervention questionnaire data (n=60, 36%)</li> </ul>
<b>G</b>	Process evaluation	<ul style="list-style-type: none"> <li>Qualitative semi-structured telephone interviews (n=21)</li> </ul>