A Social Network Strategy for HIV Testing and Linkage to Care Among MSM

TARGET POPULATION: Young African-American Men Who Have Sex with Men (MSM)
LOCATION: Nashville and Memphis, Tennessee
PROGRAM DESIGN: HIV Testing Using Social Networks
ESTIMATED COST: $200,000 per year
FUNDING SOURCE: CAPUS, PS12-1201, PS15-1506

CORE ACTIVITIES

Testing Services

Three community-based organizations (CBOs) were contracted to implement Tennessee’s Social Network Strategy (SNS). Under this contract, the CBOs were required to conduct at least 25 HIV tests among young black men who have sex with men (MSM) (i.e., Network Associates) and to identify at least four new recruiters each month.

Recruiters were identified by SNS coordinators housed in three CBOs. Recruiters and each person they brought to be tested received a monetary incentive. Each person tested was offered a $20 incentive for participating in the SNS HIV testing program. Participants who tested positive were provided with linkage to medical care and Partner Services.

Funding for SNS was initially provided through the CDC’s Care and Prevention in the United States (CAPUS) demonstration project which was intended to reduce HIV morbidity and mortality among racial and ethnic minorities. Diagnosed participants have also been referred for other HIV prevention activities and to non-HIV related behavioral health services.

Care & Prevention Services

CBO staff refer newly positive participants in the SNS HIV testing program to the Early Intervention Specialist (EIS) at their agency, who assisted them with linkage to HIV medical care in a single session. The EIS staff are funded via Ryan White Part A in both Memphis and Nashville.

The Social Network Strategy (SNS) HIV Testing Program is a non-clinical testing program that was implemented in the two cities of Tennessee with the highest rates of HIV over a period of three years. Recruiters were identified by SNS coordinators housed in three CBOs. (Memphis) and Lentz Public Health Center (Nashville).

CBO staff report each participant who tested positive to their county health department (Memphis) and Lentz Public Health Center (Nashville).

DATA

Of the 1,959 participants first tested in the SNS Program, 161 (8%) tested positive. Almost 40% (63) of the positive clients were newly diagnosed. Ninety-five ensure participants received Partner Services. Newly diagnosed participants were also referred for other HIV prevention activities and to non-HIV related behavioral health services.

percent of those newly diagnosed were African American and 98% were MSM. About 3% (4) of the clients diagnosed as positive identified as transgender individuals and of those, 50% were newly diagnosed.

Of those newly diagnosed, 75% (47) were linked to medical services within 90 days and 94% (59) were
referred to Partner Services. 67% (66) of the previously diagnosed positive individuals were also linked to medical services within 90 days.

EVALUATION
The project has not undertaken a formal evaluation aside from interim and annual data reporting to CDC as part of the CAPUS grant.

OUTCOMES
Sixty-three people were initially newly diagnosed with HIV through the SNS Program. Overall, the program has had an 8% positivity rate. The success of the program is credited to the SNS coordinators who are Black/African American MSM tied to the networks of the target population and therefore able to recruit the right participants. Of the 1,959 people tested, 99.5% were MSM, 97.8% were male, and 95.8% were Black/African American. Both previous and new positives have been linked (or re-engaged) to medical services. Negatives and positive have also been referred to other needed services including Partner Services.

Dovetail to PrEP Services
The participants who tested negative in the Memphis area will be navigated to PrEP by Tennessee’s PrEP navigators hired through CDC’s Project PRIDE grant program in hopes that they will remain negative.

FUNDING & COST
The CAPUS Demonstration Project was a three year pilot program funded by the Centers for Disease Control and Prevention (CDC). The purpose of CAPUS is to reduce HIV/AIDS morbidity and mortality among racial and ethnic minorities. CAPUS funds in the amount of $200,000 per year were used to fund the SNS Program. The SNS Program has continued with the support of PS12-1201 and PS15-1506 funds.

STRENGTHS
- The SNS Program has yielded a high percentage of clients testing positive
- The CBOs and local health departments have built a stronger working relationship and streamlined Partner Services
- Engages the young, black MSM community
- Dovetails with PrEP education and referral services; the participants that tested negative will be contacted to provide them with PrEP education and referrals
- Uses peer-to-peer outreach
- Can use social media to reach social networks
- Despite use of incentives, still very cost effective – especially when comparing cost per positive found to other testing programs

LIMITATIONS
- SNS is not intended to be a long term intervention. It is inevitable for social networks to eventually be “tapped out” after several years of implementation. This is especially pronounced in smaller, more specific target populations.
- The SNS program has not been shown to be as successful in smaller cities (i.e., under 1 million population)
- Use of incentives is a key element of this intervention – which can be more difficult for those in non-CBO settings to get approval to use

The Social Network Strategy HIV Testing Program is an innovative and non-traditional approach to reach the hard-to-reach and high risk population of Black MSM in Tennessee

STAKEHOLDERS
The CBOs that participate in SNS are Friends for Life (Memphis), Le Bonheur Community Health and Well Being (Memphis) and Nashville CARES. The local health departments that participate are the Shelby County Department (Memphis) and Lentz Public Health Center (Nashville).

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