In May 2020, CDC issued guidance to programs experiencing a disruption in HIV testing and PrEP clinical services as a result of COVID-19. As part of this guidance, CDC encourages programs to use self-testing via a home specimen self-collection kit or an oral swab-based test whenever lab visits are unfeasible.

In June 2020, NASTAD surveyed its members to learn more about how health departments are providing access to at-home HIV, HCV, STI, and PrEP self-testing services. Thirty-eight health departments responded to the RFI. Below are key themes identified from this RFI.

AN EXPANDING SELF-TESTING SERVICES LANDSCAPE
Twenty-one jurisdictions currently offer HIV self-testing services. This represents 55% of the jurisdictions that responded to NASTAD’s RFI. Most of these self-testing programs are a recent addition to expand the availability of HIV testing services. Two-thirds of these programs started in 2019 or 2020, with nearly half of these programs beginning to mail testing kits this year. At least 19 of these programs will have HIV self-testing services available on National HIV Testing Day (June 27). To better serve communities impacted by HIV, almost three in four of all health departments plan to expand self-testing services by the end of the year.

AMONG THOSE CURRENTLY PROVIDING SELF-TESTING SERVICES
- Digital & Traditional Community Engagement to Promote Self-Testing
  To increase the reach of self-testing programs, health departments are pursuing several dissemination and promotion strategies. Almost two in three self-testing programs are using social media promotion and referrals from contracted providers/community outreach. Half of these programs reported using web advertising and geosocial mobile applications, while one fourth is leveraging Building Healthy Online Communities advertising as a promotion channel.

- Rapid HIV Testing and Self-Collection
  Almost all the jurisdictions (95%) currently offer self-testing mail rapid HIV test kits to clients directly. Five of the health departments also deliver HIV and STI test kits that the client self-administers and mails back for lab processing.

- Digital Wrap-Around Services
  All 21 of the health departments with self-testing services provide digital support for clients by phone, text, chat, or video calls. These services include digital strategies to support linkage to HIV care (86%), referrals to support services (81%), HIV risk reduction counseling (71%), STI treatment (57%), harm reduction counseling (43%), and partner services (19%).

- Testing Logistics
  More than 95% of self-testing programs only support rapid test kits, and therefore, do not require lab testing. Overall, self-testing programs are maximizing existing infrastructure to fulfill testing kits. Funded HIV prevention providers, syringe services program (SSP) staff, STD clinic staff, or PrEP clinics assemble and mail the kits to their own clients in more than half of HIV self-testing programs. Six programs contract with a vendor to purchase, assemble, and mail the testing kits after clients or providers place orders through the vendor’s website. Five of these programs are part of the Take Me Home self-testing pilot that Building Healthy Online Communities and NASTAD operate.
Communities Served
A majority of self-testing services focus on young gay and bisexual men and other men who have sex with men (GBM), black GBM, Latinx GBM, and people of transgender experience.

Creative Funding Sources
Four in five programs leverage CDC HIV Prevention program funds, two in five use categorical state/local funds, and one-quarter of programs use Ryan White HIV/AIDS Program funds. Almost three-quarters of Phase I EHE Jurisdictions with active self-testing programs plan on using PS20-2010 resources to support self-testing strategies.

Future Plans
The vast majority of health departments recognize the importance of making self-testing available. More than 71% of jurisdictions currently implementing self-testing services plan to expand their self-testing options. Furthermore, two-thirds of the jurisdictions not already implementing a self-testing program plan to make it available before the end of the 2020 calendar year.

Challenges
Among all jurisdictions that responded to the survey, these were the top five challenges anticipated in establishing at-home HIV, HCV, STI, and PrEP self-testing:
- More than 59% indicated challenges surrounding the cost of the commercial self-testing services available
- 56% anticipate challenges with the integration of current care models and self-testing services
- Nearly 43% anticipate shipping costs and logistics to be a barrier
- More than 46% anticipate issues surrounding reporting and secured communication with providers and clients
- 41% foresee laboratory validation of self-collection methods being a challenge to implementation.

ADDITIONAL RESOURCES
1. In June 2020, NACCHO conducted a survey of local health departments focusing on self-testing capacity. NACCHO’s report is available here.

2. NCSD resources on self-testing are available here, including a technical assistance brief and a dedicated webinar series.

3. NASTAD is collaborating with Building Healthy Online Communities (BHOC) to support a national mailed HIV testing program called Take Me Home. The program distributes HIV rapid testing kits financed by public health programs to persons at risk for HIV who face structural barriers to testing in clinical settings and who have not tested for HIV within the previous twelve months.