NEW ENGLAND HIV IMPLEMENTATION SCIENCE NETWORK

WORK GROUP MEETINGS AND WORKSHOPS - Friday, February 27, 2015
Sturbridge, Massachusetts

Review of Progress Achieved in the Work Groups
NEW ENGLAND HIV IMPLEMENTATION SCIENCE NETWORK

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Friday, February 27, 2015
Sturbridge, Massachusetts

Hard to Reach/High Risk Populations Work Group
Review of Progress
Call #1, 12/12: 25 participants
Call #2, 1/27: 20 participants
Definitions of Hard to Reach/High Risk Populations

- MSM
- Individuals in substance abuse treatment and/or seeking treatment
- Women – esp women of color
- Incarcerated individuals
- Sex workers
- Transgender persons
- Homeless populations
Critical Research Areas Involving Hard to Reach Populations in New England

- PrEP
- PEP
- Apps and websites: Remapping the spaces and revising the scripts for MSM sex
- Use of technology and social media for prevention interventions
- Mobility of MSM and other high risk groups across NE cities/states
- Peer approaches for HIV education and to increase testing
- Identifying transgender persons through social and community mapping
- Using (pooling) existing datasets for research
What interventions for Hard to Reach/High Risk Groups have been funded and implemented in New England?

- Examples from work group members:
  1) Interventions for LGBT youth in RI which include media campaign, peer-led and community-based activities (Mpowerment)
  2) Intervention for PWID to diffuse HIV/hepatitis/STI risk reduction through drug-user networks (Hartford, CT)
  3) Partner services (CT and RI)
What datasets are regularly collected by state health departments, CBOs and researchers that we can use to evaluate regional trends?

- Examples of datasets collected by State Health Departments:
  1) RI data: Disease Intervention Specialists (DIS)/partner services, syphilis awareness campaign, HIV statistics/epidemiology, HIV testing
  2) CT data: Disease Intervention Specialists (DIS)/partner services, HIV statistics/epidemiology, co-infection (Hepatitis C, TB, STD), HIV testing
Areas and Activities of Interest to Work Group Members

- Regional epidemiology data to support a collaborative funding application
- A historical overview of past interventions funded by NE HDs
- Current HIV prevention and care interventions funded by NE HDs
- Developing a compendium of Evidence-Based Interventions (EBIs) that have been implemented in the New England region
- A list of funded technology and social media interventions
- Improving online information portals related to HIV/STI for hard-to-reach groups
- PrEP (and PEP)
- ACA and implications for HIV prevention in MSM
- Integrated programs to address co-occurrence of HIV risk, substance use, mental health among MSM and other hard-to-reach groups
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Mapping Work Group
Review of Progress
Call #1, 1/5: 14 participants
Call #2, 1/23: 18 participants
Critical Research Areas

- Mapping HIV incidence, prevalence and risk
- Mapping interventions, programs, and outcomes
- Compare mapping outcomes for prevalence, risk & interventions to identify service gaps
Activities of Interest to Work Group Members

• Focus mapping on small cities; New Haven, Hartford, Springfield, Bridgeport, Providence & Worcester

• Map risk, incidence, prevalence, effective interventions

• Will mapping the cascade in small urban centers identify gaps?

• Map prevention, care and treatment services and specific interventions and analyze access to services juxtaposed with high risk, high prevalence areas.
Activities of Interest to Work Group Members

• Determine availability and level of datasets from State Health Departments, other existing databases and underutilized studies with geographic data

• Identify areas of overlap with other Work Groups on intervention data needed for mapping studies (EBIs, DEBIs and other evidence-based interventions)

• Focus mapping on specific populations, i.e., minority MSM, women of color, homeless, non-US born, transgender, incarcerated, sex workers, and infected individuals with unknown risk factors
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Modeling and Cost Utility Analysis Work Group
Review of Progress
Call #1, 1/6: 16 participants
Call #2, 1/29: 10 participants
Critical Research Areas

- Treatment Cascade
- PrEP
- Ranking Evidence: *D/EBIs and other interventions*
Activities of Interest to Work Group Members

- Utilize modeling to compare/evaluate the treatment cascade across the region

- Utilize modeling to compare/evaluate PrEP programs to inform clinical level practice and public health initiatives

- Ranking evidence: construct a project that evaluates specific D/EBI’s in small urban areas in the region

- Expand components of CT DPH’s modeling project “Using a validated computer simulation to assess HIV prevention efforts in Connecticut” into MA and RI
Activities of Interest to Work Group Members

- Use modeling tools to evaluate overdose surveillance data and potential utilization of Naloxone

- Collaborate with other Network work groups to identify interventions that are not being effectively utilized or used at all

- Identify ways to incorporate modeling as part of decision-making process for planning and RFPs

- Use modeling data and analysis in supporting how funders structure Syringe Exchange Programs (potential joint project with Mapping Work Group)
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WORK GROUP MEETINGS AND WORKSHOPS
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Technology and Social Media Work Group
Review of Progress
Call #1, 1/7: 23 participants
Call #2, 1/21: 20 participants
Critical Research Areas

- Adherence/Care
- Primary Prevention
- MSM
Activities of Interest to Work Group Members

- Bidirectional communication between patient and provider to improve therapeutic alliance and care.
- Support of ART adherence. Reminder for taking medications, for refilling prescriptions. Use apps to track missed doses and learn about triggers for missed doses.
- Chat room for social support, tips sharing, etc.
- Using incentives or positive behavioral reinforcement strategies through apps. Could also connect it with some sort of social outlet or network to connect with other HIV-positive individuals.
- E-counseling to support adherence. Digital counselors.
- Linkage to care – support Disease Intervention Specialists and partner referral.
- PrEP support. An app linking people to PrEP providers.
Activities of Interest to Work Group Members

- Games to support primary prevention efforts.
- Social media support for education and support of safer behavior.
- GIS-based app to direct people to care/locate places to get tested.
- A partnership seeking app/website for men looking for safer sex.
- Social media focused on reducing stigma and changing norms around seeking HIV prevention, diagnosis and care – a structural-level intervention.
- “Ask the DOC” chat for health questions. Link to pharmacists.
- An intervention utilizing existing apps (like, Jack’d, Scruff and Growlr), that offers different ways people can identify their statuses (i.e. HIV-negative on PrEP, HIV-positive bareback).
- Using social media/chats to support closeted young gay men, or men who don't identify as gay or bi but have sex with men.
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<th>Themes</th>
<th>Hard to Reach/High Risk Populations</th>
<th>Technology &amp; Social Media</th>
<th>Mapping</th>
<th>Modeling &amp; Cost Analysis</th>
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