

HIV Prevention among Men Who Have Sex with Men: HIV Testing; CDC Activities; Social Networks; Behavioral Intervention Training and Technical Assistance

(from a CDC Satellite Broadcast on May 17, 2007)

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention, CDC, safer, healthier people.

[Announcer] After the airing of this Satellite Broadcast in May 2007, CDC issued a revised 2005 HIV/AIDS Surveillance Report (June 2007). Some of the data cited in this broadcast have been updated. The revised report can be found at

www.cdc.gov/HIV/datarevision.htm.

[Moderator/Dr. Rob Janssen] A high priority for all of us is increasing the number of persons with HIV who know their HIV status so if they're infected, they can be offered treatment and care and needed prevention services as early as possible in their infection. Among persons reported with AIDS, 45% received their first positive HIV test result less than one year before they were diagnosed with AIDS. This is another indicator that too many people are unaware of their HIV infection and, because of this, are unable to benefit from prevention and care services designed to enhance and prolong life. With this in mind, CDC and others are working together to reduce barriers to HIV testing to improve use of rapid testing technology, and focus on testing in clinical and non-clinical settings. Identifying HIV-infected persons who are not aware of their infection and linking them to medical care and prevention services is a national priority here at CDC. Among other activities to increase HIV testing, CDC also modeled a Social Networks Demonstration Project after a successful program that was conducted by Dr. Wilbert Jordan of the Oasis Clinic in Los Angeles, California. In this study, Dr. Jordan identified HIV positive persons to recruit their peers for HIV counseling, testing and referral services. They were asked to identify persons in their social networks who they thought might have HIV infection. For the CDC project, nine community-based organizations used a similar framework as Dr. Jordan's study and, for two years, enlisted more than 400 HIV positive and high-risk HIV negative persons to serve as recruiters. The recruiters successfully referred more than 3,000 of their peers and sex partners for HIV counseling, testing and referral services. Of those, nearly 180 had undiagnosed HIV infection, yielding a prevalence of nearly 6%. This strategy is very promising for programs particularly targeting MSM. In the Social Networks Project, MSM were among the most effective recruiters, 12% of MSM who were tested had undiagnosed HIV infection. Health departments and other organizations are currently being trained to implement this strategy. Training information and the CDC Manual "Social Networks Testing: An interim guide for HIV CTR Programs," are available at www.CDC.gov/HIV. You may view a two-hour CDC webcast and the Social Networks Strategy and how organizations across the country are implementing it. The webcast is available at www2a.CDC.gov/phtn. Organizations around the country are also offering HIV testing in innovative locations and ways. Here's People of Color in Crisis, located in Brooklyn, New York, to discuss their HIV prevention work with MSM and how they routinely offer HIV testing as part of a community festival each summer.

[David Curry and colleagues] Here at People of Color in Crisis, in Brooklyn, New York, we deliver intervention called "Many Men, Many Voices." The intervention is designed to get Black/Latino MSM to discuss safer sex options, substance use, as well as perceptions of sexual role and identity and have this conversation and dialogue. And also activities about the ways in which STDs play a role in acquisition of HIV or AIDS. They literally go through an exercise that shows them how HIV enters the body and replicates and transmits itself throughout the body to become HIV or AIDS. Men are given or have the tools needed to make safer sex options: condom negotiation, harm reduction skills and so, therefore it decrease their chance of getting HIV or AIDS.

[Mr. Lucas (People of Color in Crisis)] My biggest role in the intervention is to be the point person for the retention, the recruitment and the follow-up of all the participants who come into Many Men Many Voices. That allows me to be very creative in creating the advertising that goes into magazines, here in Ney York City like HX and Next and a local gay paper we have called "Gay City News." It also allows us to go out to the private events across the five burrows of New York City, we take our volunteers, we take our tables and we're able to meet people where they are at a festive event and we talk about the program, give out our brochures which is part of our creative process and we also have a partner who may attend the retreats and then come home and share the words with their friends and colleagues and then that's how we get a lot of folks coming in to do Many Men Many Voices. So, my role is the main point person who explains and gets all the information to folks as they may need it.

[David Curry] Pride and City is a three day event during the first week in August where we offer an opening reception, a family picnic, a beach party and an art series. Underneath all of that, there is a testing component. We collaborate between eight to ten agencies to offer HIV counseling and testing. Part of our goal initiative is to make testing normalized for community wide. So it's not just limited to MSM, it's open to everybody. Last year we tested nearly 400 people and of those 400, 20 people of them came back HIV positive and we connected them to care. We also wanted to make sure that people recognize that HIV can become part of the normal health screening process.

[Moderator/Dr. Rob Janssen] CDC is dedicated to collaborating with as many health departments and organizations as possible to work together to eliminate the disproportionate impact of HIV/AIDS among MSM. For example, because knowing one's HIV status and getting into appropriate medical care as early as possible in one's infection is so important, CDC published "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Healthcare Settings." These recommendations, released in 2006, discuss routine testing for HIV and reducing barriers to testing. You may obtain these recommendations online at www.CDC.gov/HIV. And you may view a two-hour CDC webcast about these recommendations online at www2a.CDC.gov/phtn. CDC is also proactively sharing information on evidence-based interventions and working with other organizations to build capacity at community-based organizations. In 2006, CDC provided fifty-four funding awards to community-based organizations that focus primarily on MSM. Of

these fifty-four awards, 63% focus on African-Americans, 43% on Hispanics, 13% on Asians and Pacific Islanders, and 20% on Whites. Some of these organizations serve more than one racial or ethnic group. CDC also provides funding through state territorial and local health departments. In August 2005, CDC held a consultation with community leaders and researchers to discuss the disproportionate impact of HIV among African-American MSM. The input from that consultation was invaluable and has resulted in the development of new research projects and prevention activities. We are currently preparing a report that summarizes how CDC has responded to the input we received at this consultation. We anticipate posting that report in the very near future on the CDC HIV/AIDS and MSM website at www.cdc.gov/HIV/topics/MSM. Earlier, we mentioned five evidence-based interventions to prevent HIV/AIDS among MSM. Here to discuss training and technical assistance for organizations to conduct those interventions is CDC Behavioral Scientist, Dr. Charles Collins.

[Dr. Charles Collins/CDC] Training is available on the five behavioral interventions that are appropriate for Men Who Have Sex with Men. They are, Many Men Many Voices, The Popular Opinion Leader, Empowerment, Community Promise and Healthy Relationships. The training is provided by our STD/HIV prevention training centers, as well as by our Capacity Building Assistance Providers, which we call CBAs. Our CBAs are group of cooperative agreements that the CDC has with ethnic and racial minority Capacity Building Organizations. A CBO could register for one of the trainings on these five interventions at www.effectiveinterventions.org. When a CBO goes on the website not only could they register for training but they may also obtain informational resources from the website. If a community-based organization is directly funded by the CDC, they can obtain technical assistance through our Capacity Building Resource and Information System website or the CRIS website. The address for the CRIS website is www.cdc.gov/HIV/topics/cba. For all other organizations, these community-based organizations can also obtain technical assistance through contacting their health department project officers or health department contact monitors and asking them to request technical assistance through CRIS. Technical assistance on these five interventions is provided by our capacity building assistance providers or CBA, our Behavioral and Social Scientist Volunteer Program and by Behavioral Scientists located at the Centers for Disease Control and Prevention.

[Announcer] *To access the most accurate and relevant health information, that affects you, your family and your community, please visit www.cdc.gov.*