



Key Considerations for Replication

- Selection of a specific target audience that is informed by surveillance data will help guide the intervention.
- The CDC recommends at least two staff persons be trained on the social networks testing intervention; however, specific staffing needs depend on the scale of the intervention.
- Recruiters are integral parts of this intervention and should have specific experiences and qualifications.
 - Recruiters should either be **HIV-positive or at high-risk for HIV infection**. (*Recruiters do not need to disclose their HIV status or high-risk behaviors to Network Associates.*)
 - Recruiters should be **in good standing** with your organization, be **knowledgeable on HIV topics**, and be considered **trusted community leaders**.
 - Recruiters should **interact well with peers** and be **able to effectively recruit** members of their social networks to refer to HIV testing.
 - Individuals **should not be considered as recruiters** if they have a history of violence against peers, have acute mental health issues, or if they may jeopardize their own health or social needs by participating in the intervention.
- **Provide recruiters with orientation and coaching** on basic strategies for discussing HIV and referring their peers for testing.
- Carefully **consider the inclusion of incentives** for Recruiters and Network Associates; they may require additional funding and can create “bad motivation” for Recruiters.

continued →

Key Considerations for Replication, continued

- A **Counseling, Testing, and Referral** program, as well as a **referral tracking system**, are needed for this intervention.
- **Establish communication channels** among partner agencies to facilitate referrals.
- **Identify opportunities to expand the reach** of the intervention, such as offering testing outside of standard business hours.
- **High staff turnover** at partner agencies may require ongoing training on the intervention.



Resources

This pocket guide is part of the *Improving Health Outcomes: Moving Patients Along the HIV Care Continuum and Beyond* resources from the Integrating HIV Innovative Practices (IHIP) Project.

Systems Linkages and Access to Care Initiative

hab.hrsa.gov/abouthab/special/systemslinkages.html

Social Network Strategy for CTR

effectiveinterventions.cdc.gov/en/HighImpactPrevention/PublicHealthStrategies/SocialNetworkStrategy.aspx

Social Network Strategy for CTR Resources and Tools

effectiveinterventions.cdc.gov/en/HighImpactPrevention/PublicHealthStrategies/SocialNetworkStrategy/resources-and-tools-for-sns

This publication lists non-federal resources in order to provide additional information to consumers. The views and content in these resources have not been formally approved by the U.S. Department of Health and Human Services (HHS) or the Health Resources and Services Administration (HRSA).



Improving HIV Diagnosis Among High-Risk and Hard-to-Reach Populations

Highlights from the Special Projects of National Significance (SPNS) Program

POCKET GUIDE

This pocket guide contains highlights from the Wisconsin Department of Health Services' Social Networks HIV Testing Strategy (Social Networks Testing). Social Networks Testing is a recruitment program for HIV counseling, testing, and referral (CTR) services.

Innovative approaches to reaching persons at risk for HIV infection are needed to increase diagnosis rates and advance individuals along the HIV Care Continuum.

The goal of this pocket guide is to provide a condensed reference tool for HIV provider organizations working to increase HIV diagnoses among high-risk individuals, using social networks to reach target populations.



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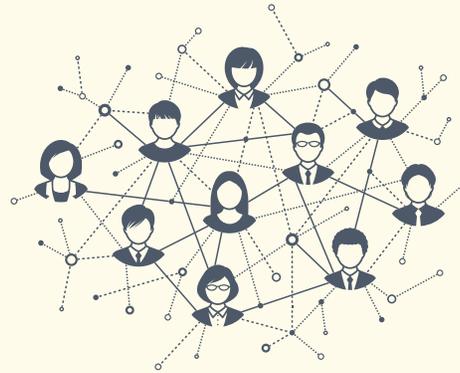
Unmet Needs In Reaching Undiagnosed PLWH

Approximately 1 in 8 HIV-positive individuals in the U.S. are unaware of their status.¹ Therefore, a necessary first step to address this stage in the HIV Care Continuum is to link these individuals into HIV medical care.

Individuals who are unaware of their HIV status, and those diagnosed but not in medical care, account for 91.5% of new HIV transmissions.²

Many barriers prevent people from being tested, such as lack of access to health care; lack of perceived risk; stigma; and more. Traditionally underserved groups in the U.S. are more affected by HIV than others—including, but not limited to, certain gender groups, racial/ethnic groups, and those of lower socioeconomic status. Populations at higher risk for HIV infection include:

- **Gay and bisexual men** are most affected by HIV—accounting for an estimated 83% of HIV diagnoses among men and 67% of all diagnoses, in 2014.¹
- **African Americans** comprise 12% of the U.S. population, yet have the most severe burden of HIV of all racial/ethnic groups in the United States.³ In 2014, 44% of estimated new HIV diagnoses were among African Americans. Additionally, 2013 data indicate that 54% of HIV-related deaths occurred among African Americans.
- **Transgender women** are at high risk of HIV infection; studies suggest that 28% of transgender women are HIV positive. African American transgender women are more likely to be HIV positive (56%) than other racial/ethnic groups.⁴



Opportunities to Reach Target Populations by Leveraging Social Networks

Social Networks Strategy leverages existing social networks to find members of high-risk groups and reach persons unaware of their HIV status. Social networks often overlap with sexual or drug-use networks, where HIV risk activities occur. This approach may be more effective, and a better use of staff time for contacting undiagnosed HIV-positive people, than more common approaches.⁵



Five Primary Phases to Social Networks Strategy

- Recruiter Enlistment
- Engagement
- Recruitment of Network Associates
- Counseling, Testing and Referral
- 5** Linkage-to-Care Specialist

¹ CDC. HIV in the United States: At a Glance. FactSheet. Available at: <http://www.cdc.gov/hiv/statistics/overview/ata glance.html>.

² Skarbinski, J et al, Human Immunodeficiency Virus Transmission at Each Step of the Care Continuum the United States, *JAMA Intern Med.* 2015;175(4):588–596, published online February 23, 2015.

³ CDC/Division of HIV/AIDS Prevention. HIV Among African Americans. Available at: <http://www.cdc.gov/hiv/group/raciaethnic/africanamericans/index.html>

⁴ CDC/Division of HIV/AIDS Prevention. HIV Among Transgender People. Available at: <http://www.cdc.gov/hiv/group/gender/transgender/index>.

⁵ Kimbrough LW, Fisher HE, Jones KT, et al. Accessing Social Networks With High Rates of Undiagnosed HIV Infection: The Social Networks Demonstration Project. *AJPH.* 2009;99(6): 1093–99.

⁵ Wisconsin Department of Health Services. *Social Networks HIV Testing Program Manual: A Recruitment Program for HIV Counseling, Testing, and Referral Services.* August 2015.

Wisconsin Department of Health Services Social Networks Testing Intervention

Intervention Objectives

The goal of Social Networks Testing is to leverage existing social networks to find members of high-risk groups and reach persons unaware of their HIV status, provide HIV testing, and link newly diagnosed clients into HIV primary care with the support from a Linkage-to-Care Specialist. Clients are also linked to HIV Partner Services.⁶ The Wisconsin Department of Health Services’ addition of a dedicated Linkage-to-Care Specialist, including more robust patient navigation services following diagnosis, are unique additions to this intervention. Because the Ryan White HIV/AIDS Program is focused primarily on care and treatment of PLWH and Social Networks Testing targets an earlier stage of the Care Continuum, the Wisconsin Department of Health Services created more intensive linkage services to ensure that newly diagnosed patients connect with Ryan White-funded care and treatment services and actively progress along the Care Continuum.

Intervention Staff and Participants

Social Networks Testing staff screen and enlist HIV-positive and high-risk HIV-negative individuals to serve as “Recruiters.” Recruiters have social networks that intersect with the intervention’s target population, and they identify individuals from their social, sexual, and drug-using networks who may be at risk for HIV infection.

The individuals identified by recruiters are known as “Network Associates.” Network Associates, individuals who are believed to be HIV-positive or at risk for HIV, come in for testing based on the encouragement of a Recruiter and receive referrals to HIV counseling and other services.

Select Network Associates may be approached about becoming a Recruiter, allowing for the intervention to become cyclical.

Approximately



*HIV-positive individuals are
unaware of their status.*