

April 2013



DHIVERSE

HIV EARLY TESTING CAMPAIGN REPORT

The aim of the campaign was to help reduce the number of late HIV diagnoses in Cambridgeshire.

Grant Chambers

DHIVERSE Early Testing Campaign – Report

2012 – 2013

Background to campaign

National and regional statistics for HIV transmission in England and Wales, as published annually by the Health Protection Agency (HPA), indicate the key role of prompt diagnosis and, if appropriate, treatment in preventing the transmission of HIV, and reducing morbidity and mortality for people living with HIV. The most recent complete annual statistics for HIV (2011) indicate that around 23% of people living with HIV are not aware of their status and that around 47% of diagnoses are 'late' or 'very late'

As treatment options for People Living with HIV (PLWHIV) improve, and the population of PLWHIV in the UK increases, the role of onward HIV transmission from individuals who are unaware of their status is likely to play a more and more important role in sustaining the HIV epidemic.

The annual HPA reports of 2011 and 2012 have highlighted the role of late diagnosis in sustaining the HIV epidemic, and the reduction of late diagnoses has been specified as a significant target by the National HIV and Sexual Health Strategy.

The National AIDS Trust (NAT) has also highlighted the importance of reducing figures for late diagnosis in their HIV Testing Action Plan 2012. Details of NAT recommendations will be discussed in 'Moving Forward' below.

DHIVERSE has been promoting sexual health around HIV, and supporting people living with HIV since 1986, and in the course of this period we have accumulated a wealth of informal feedback on some of the barriers which discourage individuals from coming forward to test for HIV. DHIVERSE has also carried out several more formal needs assessments of groups with a high prevalence of HIV (Men who have Sex with Men (MSM) and members of Black and Minority Ethnic (BME) communities in 2005). This evidence reinforces the national research which has identified key barriers to HIV testing as:

- Fears around confidentiality and disclosure of status, and consequent experience of stigma and discrimination
- Ignorance of HIV treatment options
- Uncertainty as to the practicalities of testing (is it free, do I need to bring identification?)
- Identification of HIV as something which only affects 'others' – stereotyping of PLWHIV by individuals and by medical practitioners

Purpose of campaign

In the context of the national, regional and local evidence discussed above – the DHIVERSE early testing campaign was planned with the following aims:

- To raise awareness of HIV testing and sexual health services throughout Cambridgeshire
- To increase public awareness of treatment options around HIV
- To increase uptake of HIV testing and evidence this increase
- To use the campaign as a springboard to develop a sustained approach to promoting HIV testing.

The campaign had the following more specific objectives:

- To develop and distribute material resources (flyers, posters) to raise awareness of HIV testing
- To develop a sustained media presence throughout the campaign to raise awareness of HIV testing
- To integrate the campaign with all other DHIVERSE sexual health promotion and support activities – specifically with our World AIDS DAY campaign
- To monitor and process feedback from the campaign
- To hold an event to disseminate the conclusions of the campaign to stakeholders and partnership organisations, and to devise a strategy to sustain the promotion of HIV testing

Campaign Delivery

Date

The DHIVERSE Early Testing Campaign ran from 10th September 2012 to 11th January 2013. This allowed the campaign to 'piggy-back' on national media coverage around World AIDS Day, and the HPA press release on STIs and HIV statistics released at the end of November. Campaign materials were used in all DHIVERSE World AIDS Day events. It also spanned the beginning of the academic year and enabled us to disseminate campaign materials through fresher events and trainings.

Materials and Resources

Specific promotional materials (flyers and posters) were produced for the campaign and distributed to;

- All GP Practices in Cambridgeshire
- Cambridgeshire Libraries
- All schools , sixth year colleges, universities and further education centres

- Sexual health Clinics
- Partnership organisations and stakeholders

The text of the promotional materials can be found in Appendix 1.

Promotional Events were held at:

- Cambridge University Fresher's Fair
- St Columbas Church, Cambridge
- Hunts Mencap
- West Anglia College Fresher's Fair
- CRC Fresher's Event
- 82 Russell street
- Women's AID
- Youth Offending Service
- Inclusion
- CWRC
- Health Fair, Romsey Mill
- CCAT
- VAMPS Production of 'RENT' at St. Neots
- 'People Matter' University Centre
- Salvation Army, Kings Ripton Court, Huntingdon

Campaign materials were also distributed at all DHIVERSE Schools and Young People's trainings and at support/peer groups for PLWHIV.

Media Presence

The campaign opened with full-page articles in the Fenland Citizen and Cambridge News, with photo coverage and quotes from MP Julian Huppert (Cambridge) and MP Steven Barclay (Fenland), supporting the campaign. This was followed by radio events with Hunts FM, Star Radio 107, Hunts FM and BBC Radio Cambridgeshire (for details of Press releases see Appendix 2). DHIVERSE identified a service user who had been diagnosed late, and who was willing to talk about his experiences on BBC Radio Cambridgeshire in particular about the responses of medical practitioners who had been reluctant to advise an HIV test as he didn't fall into a 'high risk' group.

Outcomes

Given the scope of the campaign and the resources of DHIVERSE it is, of course, difficult, if not impossible, to demonstrate a causal connection between a specific health intervention, and a desired outcome – in this case, an increase in the uptake of HIV testing at sexual health clinics in Cambridgeshire. However, the quantitative information kindly provided by Clinic 1a at Addenbrookes, and Clinic 6 at the Oaktree Centre, Huntingdon

indicates a rise in the uptake of testing in the early stages of the campaign, and immediately after Christmas/New Year (compared to the previous year), DHIVERSE is currently attempting to obtain statistics for February/March to ascertain whether this rise was sustained (see Appendix 3 for full statistics). Feedback from staff at clinic 6 also indicates increased awareness of HIV on the part of clinic attendees, specifically related to the DHIVERSE campaign.

Monitoring feedback from trainings and health promotion events pinpointed the following themes, which need to be addressed through further sustained health promotion:

- Lengthy waiting times (up to 14 days) discouraged testing, as did the lack of community testing, and point-of-care 'finger prick' or swab tests. The heightened profile of sexual health testing for Chlamydia in the community, outside traditional clinical venues, has heightened the disparity with testing regimes for other sexually transmitted infections.
- Despite assertions of 'complacency' around the efficacy of HIV treatment most respondents were not aware of the impact of current combination therapies on PLWHIV, or the potential impact of early testing.
- Providers of mainstream social and residential care were aware of a gap in training provision around the support needs of people living with HIV.
- Members of MSM communities were not getting clear messages about the importance of annual HIV testing (as recommended by BHIVA).
- Members of BME communities were also not receiving clear messages on the importance of regular testing (as recommended by BHIVA and AHPN).

Moving Forward

Sustaining the drive toward early testing

DHIVERSE will hold an early testing event in autumn 2013, to which stakeholders, partnership organisations and PLWHIV will be invited. This event will provide a forum to develop a strategy to take forward early testing initiatives throughout the county.

DHIVERSE will also incorporate early testing initiatives in its mainstream activities through:

- Promoting early testing on our re-designed web-site
- Integrating early testing resources into all DHIVERSE trainings, sexual health outreach events, and peer education groups.
- Incorporating early testing objectives in all staff work-plans

DHIVERSE will also seek funding to ensure the continued production and distribution of appropriate flyers and posters.

Targeting

Feedback from the DHIVERSE Early Testing campaign supports the recommendations of the NAT 'Early Testing Plan', that sustained promotion needs to be carried out in high prevalence groups, specifically with MSM and in BME communities. National figures indicate a particularly high (67%) rate of early diagnosis among African men who identify as heterosexual, and although the rate of early diagnosis among MSM (33%) is below the rate for the total population of the UK, the high prevalence of HIV among MSM means that in absolute numerical terms this is a very significant component of the total number of late diagnoses.

DHIVERSE is working with the Cambridge Ethnic Community Forum (CECF) and Huntingdon Diversity Forum to develop a series of combined short trainings and needs assessments with BME community representatives, and will use the results of these needs assessment to roll out a series of 'sexual health champion' trainings to develop peer education programmes within BME communities.

Developing an HIV strategy for MSM in Cambridgeshire

DHIVERSE has collaborated with Encompass Network to deliver a training/workshop on HIV and MSM in Cambridgeshire at the Encompass 'Health and Well-Being Event'. The event was attended by PLWHIV, individual MSM, representatives of voluntary and community groups, and health professionals. The workshop was designed to enable participants to prioritise perceived needs around HIV and MSM in Cambridgeshire, and these needs will be developed into a strategy for promoting HIV awareness and testing among MSM, to be distributed by July 2013.

Resources

1. Poster

How do you know if YOU have HIV ?

ANSWER: You don't unless you take a **TEST!**

Fact: The sooner you are diagnosed, the better your chances of staying healthy and living a normal life span.

Fact: 1 in 4 people living with HIV in the UK don't know

Fact: Those diagnosed late are 10 times more likely to die within 1 year of diagnosis compared to those diagnosed early.

Fact: The sooner you are diagnosed the less chance you have of passing the infection to others.

If you're worried you could have HIV...

GET TESTED NOW!

For more information on HIV Testing call

DHIVERSE on **01223 508805**

or

Visit: **www.sexualhealthcambs.nhs.uk**

2. Factsheet

Early Diagnosis Fact Sheet



What is 'early diagnosis'?

HIV is a virus which can be transmitted from person to person, most commonly through unprotected penetrative sex, but sometimes, through sharing needles, or from mother to baby. If untreated, the virus can weaken your immune system so you become vulnerable to a range of infections which your body would normally be able to fight off. For some people this can happen within a year or two of being infected, for others it may take several years before they become ill. Living with the virus does not mean that you necessarily feel ill, and the only way to find out whether you are infected or not is to take an 'HIV Test'. At the moment there is no cure for HIV and the virus cannot be eliminated from the body, but there are highly effective treatments which can stop the virus from weakening your immune system and enable you to live a healthy and active life. It is important to start taking these treatments before HIV has seriously weakened your immune system, and if you know that you have HIV your doctor will be able to monitor how your body is coping with the virus and help you to determine when the best time to start treatments might be.

Why is it important?

The treatments work best before your immune system has been seriously weakened by HIV. In fact, three out of five people who die from HIV infection are diagnosed late. Also, the sooner you know if you have HIV, the sooner you are able to take steps to prevent passing it on to other people.

How common is HIV? How many people know that they are infected?

Although HIV is not a particularly common infection in the UK, rates of new diagnoses have risen from just over 2,000 per year in the mid-nineties to over 6,000. There are thought to be around 100,000 people living with HIV in the UK – around a quarter are not aware that they are infected.

How many people are diagnosed late?

The technical definition of 'late diagnosis' is that your CD4 count is less than 350 within three months of diagnosis. 'CD4 count' is a test which looks for the number of 'CD4 cells' in your blood. These cells help to co-ordinate the way your immune system works - untreated HIV infection will generally cause your CD4 count to drop, and this is a sign that your immune system is being weakened by the virus. Having a CD4 count around 350 is recommended by the British HIV Association (BHIVA) as an appropriate time to start treatment. The term 'very late diagnosis' means that three months after diagnosis your CD count is around 200 or less, this is usually the point at which people living with HIV become ill.

More than 50% of HIV diagnoses in 2010 were 'late diagnoses' as defined above. 9% of people with late diagnoses were diagnosed with AIDS. The figures were particularly high for heterosexual women (54%) and men (63%). Having a late diagnosis means that you are six times more likely to die from HIV infection.

Am I at risk? Should I be worried?

More than 97 per cent of HIV transmissions in the UK are thought to take place through unprotected penetrative sex. So if you think you have exposed yourself to a sexually transmitted infection through having unprotected sex there is a chance that you have been exposed to HIV, and it is important to have a sexual health check-up, including an HIV test. You may have heard or seen articles in the media referring to 'high risk groups' (such as gay men, drug users or members of BME communities). This can be confusing and unhelpful - certain demographic groups do indeed have a high prevalence of HIV, but 'risk' is more properly associated with the type of activity which might expose you to HIV infection (such as unprotected penetrative sex, or injection drug use). Rather than worrying about HIV in particular, it makes sense to have a regular sexual health check-up, including an HIV test, if you are sexually active and have had unprotected sex, or are changing partners.

September 2012

3. Early Testing Card (business card size)

**How do you know
if YOU have HIV?**

Answer: You don't until you take a TEST!

If you're worried you could have HIV...

GET TESTED NOW

For more information on HIV Testing
or if you would like support with
getting a test contact DHIVERSE:

01223 508805

info@dhiverse.org.uk

or visit:

www.sexualhealthcambs.nhs.uk

4. Roll up banner

**How do you
know if YOU
have HIV?**

ANSWER:

**You don't until
you take a TEST!**

If you're worried you could have HIV...

GET TESTED NOW

For more information on HIV testing
or if you would like support with
getting a test contact **DHIVERSE**

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Appendix 2

Early Testing Campaign
Press Releases and Media Events

Date	Activity	Where	Aim of activity
31/08/12	Photo shoot with Stephen Barclay MP for Fenland	Boathouse Wisbech	Promote Early Testing Campaign in Newspapers
31/08/12	Interview with Sarah Cliss of Fenland Citizen	Boathouse Wisbech	Promote Early Testing with Newspaper Article
04/09/12	Spoke with Star Radio 107 and sent Press Release	Cambs	Promote Early Testing
04/09/12	Spoke with Heart 103 and sent Press Release	Peterborough & Cambridge	Promote Early Testing
04/09/12	Sent Press Release to Archant Newspaper Group	County wide	Promote Early Testing
04/09/12	Star Radio 107	Cambridge	Pre Record Interview to Promote Early Testing
04/09/12	Cambs Times Sent Press Release & talked with Emma	March	Promote Early Testing
16/09/12	Interview on Star Radio	Cambridge	Promote early Testing
27/09/12 30/09/12	Campaign promoted to college welfare Officers through Fresher's Talk Trainings	Cambridge	Raise awareness of campaign and distribute materials
2/10/12 3/10/12	Campaign promoted at CUSU Fresher's fair	Cambridge	Raise awareness distribute materials
12/10/12	Interview on BBC Radio Cambs. (Service User and GC)	Cambridgeshire	Raise awareness of barriers to early diagnosis (assumptions of health practitioners)
25/11/12	Hunts FM	Cambridgeshire	Promote Early Testing
04/12/12	BBC Radio Cambs. Jeremy Salliss Discussion and Phone-in	Cambridgeshire	Promote Early testing

Appendix 3

Testing statistics for period of campaign

11/9/11 – 19/10/11

11/09/12 – 19/10/12

Location	Total tests	Positives	Total tests	Positives	%Total change	% Positive change
Addenbrooke's	775	3	813	5	4.9	66.66
GP	810	2	879	0	8.52	-100
Clinic 1a	501	4	539	10	7.58	150
Hinchingbrooke	372	0	322	1	-15.53	100
Oak Tree Centre	226	3	250	2	10.62	-33.33

19/10/11– 19/11/11

19/10/12 – 19/11/12

Location	Total tests	Positives	Total	Positives	%Total change	% Positive change
Addenbrooke's	602	26	671	10	11.5	-61.5
GP	493	13	443	6	-10.1	-53.8
Clinic 1a	411	22	464	27	12.9	22.7
Hinchingbrooke	240	9	222	0	-7.5	-100
Oak Tree Centre	477	14	409	5	-14.3	--64.3

19/11/11 – 19/01/12

19/11/12 – 19/01/13

Location	Total tests	Positives	Total tests	Positives	%Total change	% Positive change
Addenbrooke's	1081	5	1300	7	20.26	40
GP	945	2	861	1	-8.89	-50
Clinic 1a	701	12	756	6	7.85	-50
Hinchingbrooke	447	0	460	0	2.91	0
Oak Tree Centre	309	0	345	1	-14.3	

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DHIVERSE is a working name of The Dales Trust. The Dales Trust is a registered charity in England and Wales charity number 1058307 and a company incorporated in England with company registration number 03249464 with its registered address at Office B, Dales Brewery, Gwydir Street, Cambridge CB1 2LJ