

The Benefits of Cross-Border Collaboration in STD/HIV Prevention

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1. BACKGROUND

The CDC estimates that nearly half of new HIV infections are transmitted by individuals who are unaware of their HIV positive status. This makes early diagnosis critical in reducing the rate of new infections. While there is evidence that community-wide control of STDs is effective in preventing transmission, there is also increasing competition for resources among government and non-government organizations. The Sexually Transmitted Infections Community Coalition (STICC) overcame these challenges by instituting a collaborative inter-jurisdictional testing event in April 2009 for National STD Prevention month.

Patient Barriers to Testing

Provider Barriers to Testing

1. Time of testing is not convenient
2. Not anticipating event
3. Trust/recognition
4. Privacy/stigma
5. Accessibility/location

1. Availability of testing kits
2. Legal policy about pre-test counseling and risk assessment
3. Resources for staff

2. OBJECTIVES

1. To measure the effectiveness of a one-day, inter-jurisdictional STD/HIV screening event.
2. To assess benefits, challenges, and limitations of working collaboratively on STD/HIV screening.

3. METHODS

Developing Partnerships

Eighteen Community-Based Organizations (CBO's) and Government partners offered 18 hours of free Syphilis, HIV, Chlamydia and Gonorrhea testing over the course of 28 hours, in 16 different locations, across three jurisdictions (the District of Columbia and two adjoining counties).

Testing Venues

Testing locations were chosen based on syphilis morbidity rates and CBO's familiarity and access to neighborhoods.

Outreach

Street outreach teams were recruited through Facebook, listservs of partner CBOs and academic institutions. Outreach training was provided to all volunteers and covered safety, ethics, cultural competency, STIs and sexual health prevention messages.

Evaluation

The number of individuals tested at each location and anecdotal qualitative feedback was documented.

4. RESULTS

Time	Jurisdiction	Venue Type	Service Provider Type	HIV Test	Syphilis Test	Total Tests
April 2, 2009						
10pm-2am	Washington, D.C.	Night club	Clinic	22	11	33
10pm-2am	Washington, D.C.	Night club	Community-Based Organization (CBO)	0	1	1
April 3, 2009						
11am-3pm	Washington, D.C.	Street corner	Health Department	22	10	32
1pm-3:30pm	Washington, D.C.	Street corner	CBO	5	8	13
1:30-3:30pm	Washington, D.C.	Street corner	Clinic	21	2	23
3pm-8pm	Washington, D.C.	Street corner	CBO	9	9	18
4pm-8pm	Washington, D.C.	Street corner	CBO	16	9	25
5pm-10pm	Washington, D.C.	Street corner	CBO	70	17	87
5pm-9pm	Washington, D.C.	Grocery store	Clinic	16	9	25
9pm-1am	Washington, D.C.	Grocery store	CBO	20	7	27
10pm-2am	Washington, D.C.	Night club	Clinic	33	24	57
10am-4pm	Prince George's County, MD	College campus	Health Department	69	69	138
10am-4pm	Prince George's County, MD	College campus	Health Department	34	15	49
11am-1pm	Northern Virginia	Education & employment center	Clinic, Health Department & CBO	30	0	30
3pm-5pm	Northern Virginia	Health center	Health Department & Faith-Based Organization (FBO)	18	21	39
3-5pm	Northern Virginia	Health clinic	Health Department, FBO	1	0	1
4-7pm	Northern Virginia	Restaurant	Health Department & FBO	8	0	8
10pm-midnight	Northern Virginia	Lounge	Clinic, Health Department & CBO	7	7	14
	3 jurisdictions	18 locations	18 organizations	401	219	620

Source: Sexually Transmitted Infection Community Coalition (STICC), 2009

401 HIV tests and 219 syphilis tests were conducted during the event. Some sites with capability also provided free urine tests for Chlamydia and Gonorrhea; 48 were conducted. Benefits, challenges, and limitations to collaboration were identified.

Benefits to Collaboration

1. Resource sharing – use of resources from all jurisdictions to accomplish a single mission
2. Networking between organizations and communities
3. Use of student volunteers
4. New organizations build on existing relationships with communities
5. Ability to cover more areas and serve more diverse populations by sharing information, skills, and resources

Challenges and Limitations

1. Logistics of resource sharing
2. When in new locations, people were unprepared to take advantage of free testing opportunities
3. Organizing volunteers and transporting them to new, non-specific locations.
4. Outreach messages and strategies must be adjusted in urban vs. suburban settings to reflect differences in knowledge and attitudes about STD/HIV.



5. CONCLUSIONS

Collaboration provided opportunities which would not have been possible had government and non-government organizations attempted screening on their own, such as access to resources (i.e. mobile testing units, condoms, phlebotomists, volunteers), access to broader community populations, and breadth of coverage (i.e., more hours of testing, more testing locations). Limitations included lack of resources for event promotion, formal evaluation, and lack of preparatory analysis of ideal times and locations for screening.

6. IMPLICATIONS FOR PROGRAMS, POLICY, AND/OR RESEARCH

This event provides a model for other organizations to collaborate across borders to offer more comprehensive STD/HIV services. Comparative analysis of collaborative vs. non-collaborative events should be conducted to identify the validity of these findings and to provide recommendations for financial policies which favor organizations who work collaboratively.



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