mHealth and Developmentally Tailored HIV/STI Prevention for YMSM

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Get Connected

• Adaptation of the Project Connect Health Systems Intervention
  • Circumvent structural barriers affecting the reach and success of efforts geared towards HIV/STI prevention and care

• Developed through a CBPR approach and informed by mixed methods data from YMSM in Metro Detroit & Flint
  • Youth Advisory Board
  • Practitioner Advisory Board
What is Get Connected?

• Get Connected (2.0) is a WebApp seeking to motivate HIV/STI testing and link young men to high-performing HIV/STI prevention and testing services.

• Content and images are **tailored** based on user characteristics.

  Age  
  Race/ethnicity  
  Sexual identity  
  Relationship status  
  Core personal values  
  Structural struggles  
  Sources of support  
  HIV/STI testing history  
  Testing barriers/fears


Are all HIV/STI Sites Created Equally?
Test Locator

• “Matches” users with the highest ranked sites in their area using an algorithm from mystery shopping and RCT data, and any filters a participant selects

• Help agencies identify how to improve their service delivery for YMSM

User-Experience Rank System

Raters’ Scores
• Site is Youth Friendliness
• Site is LGBTQ Friendly
• Provider is LGBTQ friendly
• Provider is Sex Positive
• Opportunities for goal setting
• Acknowledgement of Diversity

Ideal/Best Practices
• Confidentiality Maintained
• Assessment for IPV during visit
• Exploration for testing motivations
Mystery Shoppers
A Youth-Driven Community Assessment Approach

- Participant observation approach that synergizes the Standardized Patient Method (SPM) used for medical training and Mystery Shopping strategies used in marketing.

- Youth serve as consumers and researchers by evaluating services to recommended guidelines, and offer QI/QC recommendations based on experience.

- Mystery shopper has been employed to evaluate contraceptive services among young people, community pharmacy consultations, psychiatric services, and alcohol sales to minors.
### Mystery Shoppers

<table>
<thead>
<tr>
<th>Clinic Characteristics</th>
<th>Provider Exchanges</th>
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</thead>
<tbody>
<tr>
<td>Session speed</td>
<td>Relationship context</td>
</tr>
<tr>
<td>LGBT visibility</td>
<td>Counseling session</td>
</tr>
<tr>
<td>Medical forms</td>
<td>Safer sex education</td>
</tr>
<tr>
<td>Clinic environment</td>
<td>Perceived provider competency</td>
</tr>
<tr>
<td>Privacy &amp; confidentiality</td>
<td>Negative provider interactions</td>
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<tr>
<td>PrEP-specific indicators</td>
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</tbody>
</table>
Testing Experiences

The provider offered me risk reduction options.

The provider offered to help me set action steps to meet new safer sex goals.

The provider made sure I knew how to use a condom.

The provider helped me identify a lube that works for me.
Initially, the nurse practitioner appeared friendly and well-meaning. She told me about the different options and testing procedures that were available to me. ...When I refused to do the penile swab she replied: “Our clients do not have the option to pick and choose which test they can or can’t do. It is all or none here; if you do not do the penile swab then I cannot offer you any other tests.”
... When I still refused, she replied that this was a simple painless procedure and that it would take a few seconds. She seemed almost disappointed that she had no intimidated me into doing the penile swab. Then she did HIV rapid test and did not explain anonymity or confidentiality. She asked me to wait outside, and did not do any more counseling for me.
... She seemed really disappointed that my results were not what she expected. She said, “With your history, I was certain you would be positive. But you seem to be negative. I am going to give you some condoms. Use them every time for sex.”
... Overall, this was the worst testing site, where my autonomy were taken away and I was denied services because I refused to toe the line. This is a site that should be avoided for its unethical approaches and for being unapproachable to clients. This is definitely a site that should be avoided in its entirety.
## Testing Sites’ and Mystery Shopper Participants’ Characteristics

<table>
<thead>
<tr>
<th></th>
<th>Philadelphia</th>
<th>Atlanta</th>
<th>Houston</th>
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</thead>
<tbody>
<tr>
<td><strong>Mystery Shoppers</strong></td>
<td>N=9</td>
<td>N=6</td>
<td>N=9</td>
</tr>
<tr>
<td><strong>Age Range</strong></td>
<td>19-24</td>
<td>21-24</td>
<td>19-24</td>
</tr>
<tr>
<td><strong>Site Characteristics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sites identified</td>
<td>N=53</td>
<td>N=50</td>
<td>N=46</td>
</tr>
<tr>
<td>Free HIV Testing</td>
<td>53 (100%)</td>
<td>50 (100%)</td>
<td>46 (100%)</td>
</tr>
<tr>
<td>Walk-in appointment</td>
<td>38 (71.7%)</td>
<td>19 (38.0%)</td>
<td>19 (41.3%)</td>
</tr>
<tr>
<td>Rapid HIV test</td>
<td>30 (56.6%)</td>
<td>17 (34.0%)</td>
<td>19 (41.3%)</td>
</tr>
<tr>
<td>Sites visited</td>
<td>38 (71.7%)</td>
<td>19 (38.0%)</td>
<td>19 (41.3%)</td>
</tr>
<tr>
<td>Sites deemed accessible* to youth</td>
<td>30 (56.6%)</td>
<td>17 (34.0%)</td>
<td>19 (41.3%)</td>
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</tbody>
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Average Site Scores across MS Domains

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<tbody>
<tr>
<td>PHL</td>
<td>43%</td>
<td>53%</td>
<td>72%</td>
<td>86%</td>
<td>51%</td>
<td>62%</td>
<td>29%</td>
<td>68%</td>
<td>67%</td>
</tr>
<tr>
<td>ATL</td>
<td>71%</td>
<td>74%</td>
<td>80%</td>
<td>87%</td>
<td>46%</td>
<td>48%</td>
<td>16%</td>
<td>44%</td>
<td>60%</td>
</tr>
<tr>
<td>HOU</td>
<td>43%</td>
<td>57%</td>
<td>65%</td>
<td>83%</td>
<td>54%</td>
<td>61%</td>
<td>25%</td>
<td>61%</td>
<td>65%</td>
</tr>
</tbody>
</table>

Average Site Scores: PHL 53%, ATL 74%, HOU 57%
SO THAT'S OUR KILLER APP. WHAT'S YOURS?

A TALENTED WORKFORCE.
Beyond individual-level change efforts, mHealth can (and should) leverage advances in public health informatics to support ongoing quality assurance practices and provide opportunities for system level change across the cascade.
What About the Agencies?

Agency barriers to cultural competence

- Each agency receives their report in the mail

- Key barriers
  - Agency decision-making structures
  - Inappropriate materials
  - Space for confidential testing & counseling
  - Lack of quality control or incentives to do so
  - Perception of existing training as sufficient
  - Diverse/ divergent counseling approaches
Summary of Site Ratings

Below Average  | Average | Above Average
--- | --- | ---
LGBT Visibility | Medical Form Inclusivity | Privacy and Confidentiality
Clinic Environment | PrEP Information and Dialogue | Participant-Provider Interactions
Relationship Context | Perceived Provider Competency | Safer Sex Education
Medical Form Inclusivity | Provider-Provider Performance | Peer Support Connections
Provider Support Community | Patient Experience | Community Engagement
Integrating Systems-Level Interventions with mHealth

• Optimal success across the prevention and care continuum may prove challenging due to individual, structural, and societal barriers.

• To "make prevention work", we must maximize the potential of systems-level interventions to address gaps in the cascade, and ensure that engagement bridges digital and real-world needs and resources.

• Gaps remain the availability and evaluation of systems-level interventions along the Prevention and Care Continuum.
Conclusions

• Integration of online and offline best practices are needed to advance gaps in HIV/STI prevention and care continuum.

• Optimal Service Delivery:
  • Respect the patient
  • Protect or enrich client autonomy
  • Ensure safety, privacy, and confidentiality

• System-level interventions are needed for providers to:
  • Evaluate performance based on organizational best practices & guidelines
  • Offer services that are organized around client needs
  • Build and strengthen resources within/across systems

• On-going quality assurance & improvement (QA/QI) practices may provide opportunities for implementation science strategies and systems-level change across the HIV/STI Prevention and Care cascade.
Acknowledgments

The content is solely the responsibility of the author and does not necessarily represent the official views of funding agencies.

Mystery Shoppers

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ATN ADOLESCENT MEDICINE TRIALS NETWORK FOR HIV/AIDS INTERVENTIONS
Questions?