# Integrating Community Health Worker Services into Internet-based STI Testing Programs

Brenice Duroseau, Kelly Lowensen, Jessica LaRicci, Adam Bocek, Amita Patil, Aubrey Alvarenga, Errol Fields, Rachel Fink, Charlotte A. Gaydos, Gretchen S. Armington, Joyce Jones, Yukari C. Manabe, Jason E. Farley

### **BRENICE DUROSEAU, MSN, FNP-BC, RNC-OB, AAHIVS**

PhD Student/Infectious Diseases Nurse Practitioner Johns Hopkins University School of Nursing



THE CENTER FOR INFECTIOUS DISEASE AND NURSING INNOVATION

# **Disclosures & Acknowledgement**

- No financial relationships with a commercial entity producing healthcarerelated products and/or services. No conflicts of interest.
- I would like to thank and acknowledge funding from Ending the HIV Epidemic, Baltimore City Health Department
- Special thanks to Tong Yu for helping prepare this analysis.



# Learning Objectives

- Identify strategies to advance access to STI and HIV testing
- Identify demographics of users of Internet-based STI Testing Program in Maryland
- Evaluate benefits and feasibility of integrating client navigation services into Internet-based STI Testing Programs



HE CENTER FOR INFECTIOUS DISEASE AND NURSING INNOVATION

## **Background Information**

### **IWTK I WANT THE KIT** Take Control, Know Your Status

1	2	3
Login	Order	Wait for the mail
	$\widehat{\mathbf{A}}$	

Click on <u>I WANT THE HOME TEST KIT</u> to create a new account or <u>LOGIN</u> to go to an account you previously created. Be sure to tell us your full first and last names and your complete mailing address. Please answer all other questions completely.



Wait for your kit to arrive in the mail. Your kit may take 7 days to arrive if you live in Maryland and longer if you live elsewhere. After 7 days, <u>Contact Us</u> if you are worried about why your kit has not arrived.

- Increasing access to sexually transmitted infection (STI) and HIV testing is essential to Ending the HIV Epidemic (EHE)
- The COVID-19 pandemic accelerated uptake of internet-based STI testing programs (i.e., IWTK)
- Several studies have highlighted the success of internet-based STI testing programs (i.e., IWTK)<sup>1-4</sup>
- In 3 easy steps users can confidentially request STI sample self-collection and HIV self-test kits to be mailed to their homes

### What Will the Package Look Like?

We mail our STI kits in discreet manila envelopes and our HIV kits in small corrugated boxes. If you order both types of kits, we mail everything in the small corrugated box. Your address will be on the mailing label and our return address will be there too.







**HIV KIT** 

**STI KIT** 





#### INSTRUCTIONS FOR SELF-COLLECTING A VAGINA SAMPLE





Wash your hands thoroughly with soap and water for at least 20 seconds.

waist down. Remove



a position where you can comfortably insert a swab into your vagina, such as sitting on the toilet, standing with one foot on a chair, or any position you would use to insert a tampon.



Open the swab. DO NOT TOUCH THE TIP OF THE SWAB. A. Twist first to break the seal. B. Then pull. The swab will stay attached to the cap. C. Do NOT throw the plastic tube away! You will need to put your swab into the tube after you

have collected the sample.



Firmly hold the swab 1 to 2 inches away from the soft tip.



Remove the swab from your vagina. Do not let the tip of the swab touch Be sure the swab touches the anything. It is okay if there walls of your vagina. is blood or other discharge



Place the used swab back into the transport tube. Close the tube tightly to prevent leakage.



Place the closed tube into the red specimen bag. Seal the bag. (If you are returning multiple swabs, they should all be placed into the same specimen bag.)



Place the sealed bag into the Wash your hands thorreturn mailer (white envelope oughly with soap and wawith blue diamond shaped ter for at least 20 seconds. sticker on the front). Write the collection date on your contact form and place the form into the return mailer too. Seal the envelope.

on the swab.



Drop the return mailer into any USPS mailbox.





#### **INSTRUCTIONS FOR SELF-COLLECTING A PENIS SAMPLE**



Wash your hands thoroughly with soap and water for at least 20 seconds. Undress from the waist down.



B



C. Do NOT throw the plastic tube

away! You will need to put

your swab into the tube after you have collected the sample.



Firmly hold the swab 1 to 2 inches away from the soft tip.



Remove the swab from touching the tip of the penis. Do not let the tip of





Place the closed tube into the red specimen bag. Seal the bag. (If you are returning multiple swabs, they should all be placed into the same specimen bag.)



return mailer (white envelope with blue diamond shaped sticker on the front). Write the collection date on your contact form and place the form into the return mailer too. Seal the envelope.



Roll the swab completely around at the opening of the penis. If you see any discharge, be sure to run the swab through the discharge. Do not put the swab inside of the penis.



Wash your hands thoroughly with soap and water for at least 20 seconds.

tube tightly to prevent leakage.

the swab touch anything.

# Methods

# Study Design & Inclusion Criteria

Observational cohort of IWTK users who self-selected (i.e., opted in or out of) community health worker (CHW) services

This cohort included persons who ordered kits between April 7, 2021 and April 7, 2022 and included only Baltimore City and County residents only who completed testing by mailing the kits back



THE CENTER FOR INFECTIOUS DISEASE AND NURSING INNOVATION

# In 2021, the IWTK program added an 'opt-in' option for CHW services to support linkage to care before receiving STI results

Do you want a health navigator to contact you about additional services and resources? Health navigators are members of our team who can answer questions about your test results, help you make an appointment with a healthcare provider, help get you signed up for health insurance and link you to HIV prevention and treatment services.



Yes

### Select Clinic

Choose a clinic/public health department that can assist you should you have a positive result. Some clinic centers have a fee, and this fee can be seen when selecting the clinic.

Clinic

# If user <u>ever</u> selected CHW navigation & requested more than 1 kit...

ld	Order date	Name	Client navigator	Clinic	N_used	Used_cat	Sum_cn	STI
MD-9999	2015-01-01	Alex Adam			5	Never used before	2	-
MD-000001	2021-05-01	Alex Adam	No		5	Used 1 yr ago	2	-
MD-000002	2021-06-01	Alex Adam	Yes	CIDNI	5	Used within 1 yr	2	-
MD-000003	2021-07-01	Alex Adam	Yes	Bartlett	5	Used within 1 yr	2	+
MD-000004	2021-08-01	Alex Adam	No		5	Used within 1 yr	2	+

Select latest record with client navigator selection

Id	Order date	Name	Client navigator	Clinic	N_used	Used_cat	Sum_cn	STI
MD-000003	2021-07-01	Alex Adam	Yes	Bartlett	5	Used within 1 yr	2	+

## If user <u>never</u> selected client navigator...

Id	Order date	Name	Client navigator	Clinic	N_used	Used_cat	Sum_cn	STI
MD-9999	2015-01-01	Alex Brown			5	Never used before	0	+
MD-000001	2021-05-01	Alex Brown	No		5	Used 1 yr ago	0	-
MD-000002	2021-06-01	Alex Brown	No		5	Used within 1 yr	0	-
MD-000003	2021-07-01	Alex Brown	No		5	Used within 1 yr	0	-
MD-000004	2021-08-01	Alex Brown	No		5	Used within 1 yr	0	-

Select latest record

ld	Order date	Name	Client navigator	Clinic	N_used	Used_cat	Sum_cn	STI
MD-000004	2021-08-01	Alex Brown	No		5	Used within 1 yr	0	-

## Statistical Analysis

Descriptive data were compared using a t-test, and categorical variables were compared using a chisquare test.

 Logistic regression was used to model the odds of "opting-in" to CHW navigation services
 Full model included: Age, Gender, Race, Hispanic, Risk Score, HIV Oraquick Order, & Any STI

We refined the model using backward selection, after comparing AIC scores

► All analyses were completed using R

# Results

## **IWTK Orders by Month-Baltimore City**

<sup>500</sup> Mean # of kits ordered





3340 orders





Duplicates & incomplete orders removed from total sample ፝ኯ፟፟፟፟፟፟፝፝፞ኯ፟ ፟፟፟፟ዀ፝፟፝፟፟፟፟፟፟ዀ፟፟፟፟፟፟

2524 sample

Characteristics	n (%)				
Characteristics	Total	CHW Group (N=293)	No CHW (N=2231)	p-value	
Age, mean [range]	2524	27.0 [23.0-33.0]	27.0 [23.0-32.0]	0.414	
Gender:	2524				
Female	1296 (51.4%)	153 (52.2)	1143 (51.2)	0.571	
Male	1121 (44.4%)	131 (44.7%)	990 (44.4%)		
Other	107 (4.2%)	9 (3.1%)	98 (4.4%)		
Race:	2524				
White	791 (31.3%)	54 (18.4%)	737 (33.0%)	<0.001	
Black	1252 (49.6%)	179 (61.1%)	1073 (48.1%)		
Other	481 (19.1%)	60 (20.5%)	421 (18.9%)		
Hispanic	235 (9.3%)	35 (11.9%)	200 (9%)	0.123	
Risk score group**:	2435				
Low risk	461 (18.9%)	50 (17.5%)	411 (19.1%)	0.816	
Medium risk	1497 (61.5%)	178 (62.5%)	1319 (61.3%)	0.810	
High risk	477 (19.6%)	57 (20.0%)	420 (19.5%)		
Ordered Oraquick	2524				
No Oraquick	1087 (43.1%)	114 (38.9%)	973 (43.6%)	0.143	
Oraquick	1437 (56.9%)	179 (61.1%)	1258 (56.4%)		
Any STI***:	1377				
Negative	1265 (91.9%)	138 (82.6%)	1127 (93.1%)	<0.001	
Positive	112 (8.1%)	29 (17.4%)	83 (6.9%)		

### Table 1: Demographic characteristics by Navigation Status (CHW Opt In)

\*p-value either t-test or  $\chi^2$  test unless otherwise specified

\*\*2435 completed the risk assessment survey (285 opt in CHW & 2150 opt out CHW)

\*\*\*1377 ordered a STI kit (167 opt in CHW opt in & 1210 opt out CHW)

Table 2: Factors Associated with Opting Into CHW Navigation Services, Among Ever Opt InPatients

	OR (97.5% CI)					
	Full Model	Final Model				
Age	1 (0.98, 1.02)	-				
Gender						
Male	1.09 (0.76, 1.56)	-				
Other	1.22 (0.06, 7.08)	-				
Female (ref)	1.00 (0, 0)	-				
Race						
Black	2.09 (1.38, 3.22)	1.98 (1.32, 3.02)				
Other	1.38 (0.81, 2.35)	1.46 (0.86, 2.45)				
White	1.00 (0, 0)	-				
Hispanic (yes/no)	1.49 (0.83, 2.57)	-				
Risk Score						
Medium risk	0.93 (0.6, 1.48)	-				
High risk	0.96 (0.55, 1.7)	-				
Low risk (ref)	1.00 (0, 0)	-				
HIV Oraquick (yes/no)						
HIV Oraquick	1.45 (1.03, 2.04)	1.47 (1.05, 2.08)				
Any STI						
Positive	2.76 (1.7, 4.38)	2.76 (1.71, 4.37)				
Negative	1.00 (0, 0)	-				

## Limitations

>Unmeasured confounding is possible

Findings in Baltimore with high STI and HIV rates may not be generalized to other cities

➢Only 1331 patients were included in the final logistic regression model, due to limitations in STI testing

# Conclusions

Key Take Aways  Online STI testing is feasible and increases access to lowbarrier sexual healthcare

2. Users of this service are more likely to be Black and be positive for an STI

3. Although the majority tested negative for STIs, individuals testing positive for STI(s) were more likely to request CHW services

 These findings suggest that those who opted into CHW services had a higher pre-test probability possibly due to presenting symptoms or an accurate risk perception

# Q & A

# Thank you for your time and attention



THE CENTER FOR INFECTIOUS DISEASE AND NURSING INNOVATION

## References

- Patel AV, Gaydos CA, Jett-Goheen M, Barnes M, Dize L, Barnes P, Hsieh YH. Assessing association between IWantTheKit risk quiz tool and sexually transmitted infection positivity in male users for sexually transmitted infection screening. Int J STD AIDS. 2018 Feb;29(2):122-127. doi: 10.1177/0956462417718758. Epub 2017 Jul 1. PMID: 28669325; PMCID: PMC5628160.
- Gaydos C, Barnes M, Aumakhan B, et al. Can e-technology through the Internet be used as a new tool to address the Chlamydia trachomatis epidemic by home sampling and vaginal swabs? Sex Transm Dis. 2009;36:577–80.
- 3. Gaydos C, Dwyer K, Barnes M, et al. Internet-based screening for Chlamydia trachomatis to reach non-clinic populations with mailed self-administered vaginal swabs. *Sex Transm Dis.* 2006;33:451–7.
- 4. Chai S, Aumakhan B, Barnes M, et al. Internet-based screening for sexually transmitted infections to reach nonclinic populations in the community: risk factors for infection in men. *Sex Transm Dis.* 2010;37:756–63.

In the following section, you will enter information on your ANAC Annual Conference presentation, including an educational gap assessment, two to four learning objectives, and a brief presentation outline.

Save & Complete Later

1. Please identify one or more gaps in knowledge or skills that justifies the need for this presentation: \*required

Your response here...

2. Describe the current state of knowledge regarding your presentation topic: \*required

Your response here...

3. Describe what you desire to achieve as a result of this presentation: \*required

Your response here...

- 4. Gap to be addressed by this activity: \*required
  - Knowledge
  - Skills
  - Practice
  - Other, please describe:

Your other response here...

5. Please identify a desired learning outcome for this presentation (i.e., What do you want learners to able to do as a result of participating in this activity?) \*required

Your response here...

6. In the following table, please identify 2-3 learning objectives associated with your presentation along with a brief outline of the content related to each objective. The learning objectives should indicate the specific topics that you will present to achieve your desired learning outcome. If you will have multiple presenters, please indicate which presenter(s) will be responsible for the educational content. \*required

OBJECTIVES	CONTENT (Topics)	TIME FRAME	PRESENTER	TEACHING METHODS
List learner's objectives in behavioral terms	Provide an outline of the content for each objective. It must be more than a restatement of the objective.	State the time frame for each objective	List the Faculty for each objective.	Describe the teaching methods, strategies, materials & resources for each objective
Your response here	Your response here	Your response here	Your response here	Your response her Save & Complete Later
Your response here	Your response here	Your response here	Your response here	Your response here
Your response here	Your response here	Your response here	Your response here	Your response here

7. List references used in the development of your presentation. A minimum of 2 references should be provided: \*required

Your response here...