













Social network strategy to promote HIV testing and linkage to double cascade services among adolescent men who have sex with men and transgender women in Thailand

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Affiliations

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Background



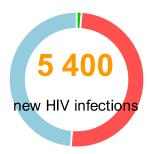






Half of new HIV infections in 2019 occurred among young adolescent (15-24 yr)

2019



50%

- Children (0-14 yr)
- Young people (15-24 yr)
 - Adult (25+ yr)

Young adolescent especially MSM and TGW are key population to promote HIV testing for early diagnosis and treatment

Barrier to HIV testing among young MSM and TGW¹

- Vulnerable to and affected by HIV
- Limited ability to navigate to medical services
- Many concerns: their sexual debut, suffer from gender identity-related stigma and privacy

Source: Prepared by <u>www.aidsdatahub.org</u> based on UNAIDS. (2020). UNAIDS 2019 HIV Estimates and UNAIDS. (2020). UNAIDS Data 2020. Chikwari CD, et al. Curr Opin HIV AIDS. 2018;13(3):257-64.

Background









WHO recommended HIV testing service delivery approaches

HTS is an important gateway to treatment and prevention



Facility-based: TB, STI, family planning/contraceptive services



Community-based



UPDATED Provider-assisted referral

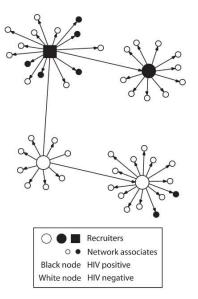


NEW Social network-based approaches



UPDATED HIV self-testing

Social network strategy (SNS): same social network share similar risks and risk behaviors for HIV infection
They know and trust each other that same as adolescent population



Slide courtesy of WHO HTS guidelines – presentation part ${\bf 1}$

Kimbrough LW, et al. Am J Public Health. 2009;99(6):1093-9.

Objective









Primary objective

• Evaluate the effectiveness of SNS to promote HIV testing and linkage of YMSM and YTGW to HIV services and described character of network member (NM) and their recruiter.

Secondary objective

- Evaluate the impact of social network strategies in increasing linkage of YMSM and YTGW to double cascade HIV services
 - Prevention cascade
 - Treatment cascade

Research Methodology









- Study design: A effectiveness-implementation study design
- Population: YMSM and YTGW aged 15-24 years at adolescent-friendly HIV care clinics (Buddy CU clinic)
 - Recruiter: Good rapport and comfortable discussing HIV with peers
 - Network member (NM): Behavior risk for HIV infection such as multiple sex partners or condomless
- Duration: 12 months
- Study sites: King Chulalongkorn Memorial Hospital, Bangkok, Thailand.
- Statistical analysis
 - Number of NMs recruited by recruiters and prevalence of HIV infection were collected. Outcome measures included effectiveness of SNS measured by proportion of first-time testers among participants enrolled. SNS is considered effective when proportions exceed 50%.