

### NHBS Baltimore: The BESURE Study 2014 update

Danielle German; Ju Nyeong Park; Christine Powell





#### Overview

- NHBS/BESURE standard indicators project: using behavioral data for prevention planning
- HET data
  - Sample characteristics (HET1, HET2, HET3)
  - HIV status, unrecognized infection & testing (HET1, HET2, HET3)
  - Standard indicators (HET3)
  - Local questions (HET3)
- Notable analyses in progress (UAI in HET, HCV in MSM)
- Upcoming MSM4 cycle

#### **STANDARD INDICATORS (REVIEW)**



#### Goals

- Match NHBS items with local and national HIV prevention and service goals
  - NHAS
  - ECHPP

Make it easier to use NHBS data locally



#### Methods

- Review NHAS, ECHPP, local HIV-related goals in collaboration with stakeholders
- Identify priority list of goals
- Review NHBS surveys of all waves for potential related measures
- Identify consistent set of measures (46)
- Descriptive data for each measure
  - Total, by HIV status, by newly diagnosed HIV, by race/ethnicity

#### Final items

- Socio-demographic characteristics (5)
- Injection and sex risk behaviors (6)
- HIV testing (5)
- HIV care (5)
- STIs (12) & Hepatitis (5)
- HIV community-based interventions (8)

• ...



#### Example: HIV testing goals, HET

	HET1 (n=3	332)		HET2 (n=38	33)		HET3 (20 <sup>-</sup>	13)	
	Total	Pos	New	Total	Pos	New	Total	Pos	New
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)
HIV Test in past 2 years	196 (63.2)	6 (54.5)	5 (50.0)	245 (65.0)	11 (47.8)	3 (37.5)			
HIV Test in past year	138 (44.8)	5 (45.5)	4 (40.0)	166 (44.2)	5 (21.7)	2 (25.0)			
Obtained result of recent test	227 (87.0)	4 (57.1)	4 (66.7)	313 (92.9)	16 (76.2)	8 (61.5)			
Offered HIV test by health care provider in past year *	141 (57.8)	7 (70.0)	7 (70.0)	168 (60.2)	8 (40.0)	5 (41.7)			
Most common location last test**	Cl	HC/PHC (37	%)	СН	C/PHC (35%	%)			
Most common reason for no HIV test in past year **	Afraid of	finding out	(28%)	Afraid of	finding out .	(28%)			



#### NHBS/BESURE data to date

	Wave 1	Wave 2	Wave 3
Men who have sex with men (MSM)	June 2004- April 2005	July - Oct 2008	Sept-Dec 2011
Data collection method	Venue-based	Venue-based	Venue-based
Total MSM in past year*	645	448	403
HIV prevalence	37.7%	37.5%	42.4%
Prevalence newly diagnosed HIV infection	58.4%	78.4%	69.6%
Injection drug users (IDU)	Aug 2006 – Jan 2007	Sept – Dec 2009	Aug-Dec 2012
Data collection method	Respondent Driven	Respondent Driven	Respondent Driven
	Sampling	Sampling	Sampling
Total IDU in past year recruited*	539	507	TBD
HIV prevalence	11.9%	16.2%	TBD
Prevalence newly diagnosed HIV infection	50.0%	41.2%	TBD
Heterosexuals at high risk (HET)	July - Oct 2007	Sept – Dec 2010	2013
Data collection method	Venue-based	Respondent Driven	Respondent Driven
		Sampling	Sampling
Total recruited *	332	376	TBD
HIV prevalence	3.9%	6.1%	TBD
Prevalence newly diagnosed infection	83.3%	65.2%	TBD

<sup>\*</sup>Complete survey and HIV test

### HETEROSEXUALS AT HIGH RISK, BALTIMORE NHBS DATA

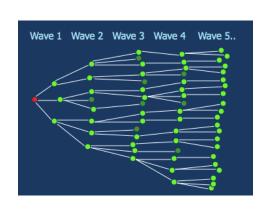
#### **HET** overview

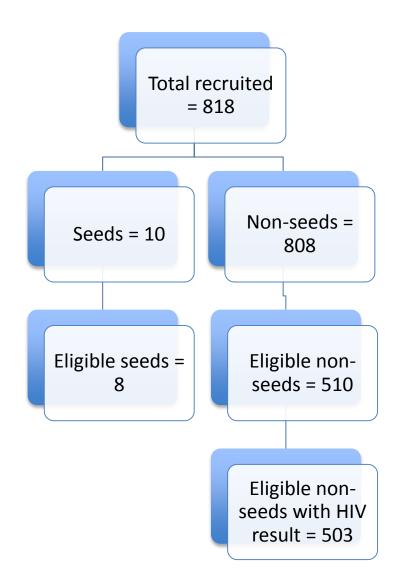
	Wave 1 Jul Oct 2007	Wave 2 Sept – Dec 2010	Wave 3 Sept – Dec 2013
Data collection method	Venue-based	Respondent Driven	Respondent Driven
Total HET recruited *	332	376	505
HIV prevalence	3.9%	6.1%	6.5%
Prevalence unrecognized infection	83.3%	65.2%	36.4%



<sup>\*</sup>Complete survey and HIV test

#### HET recruitment 2013

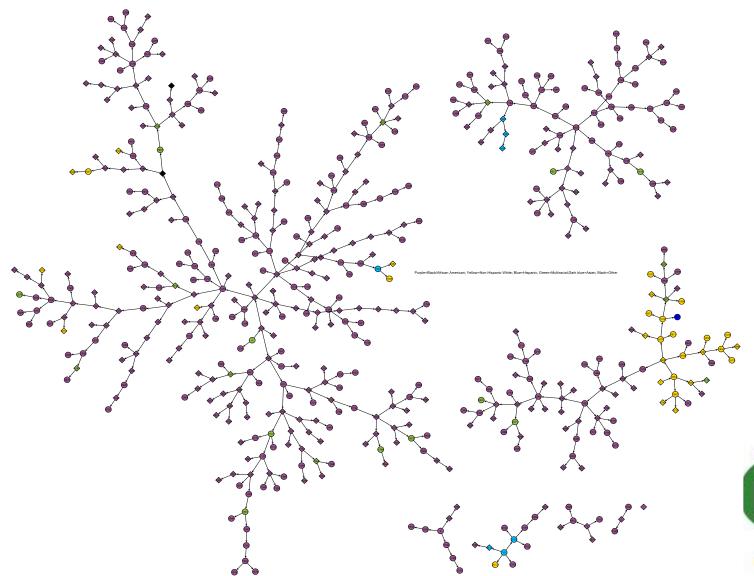




Most common reason for non-eligible: duplicate/repeat participants (n=233)



#### HET recruitment 2013

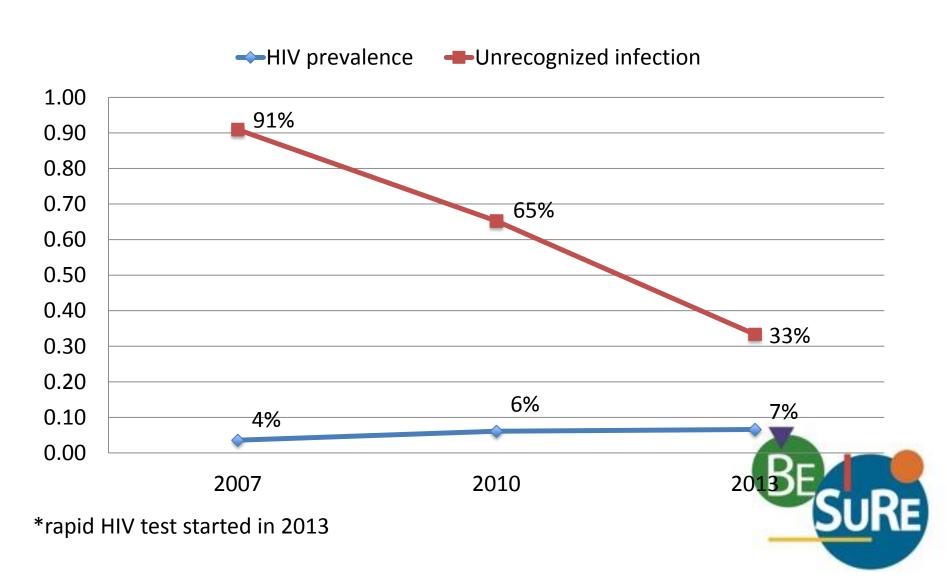




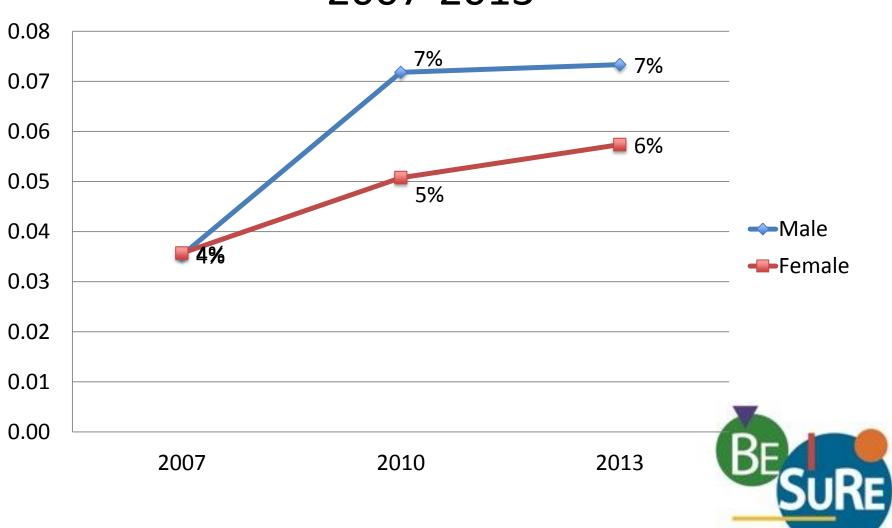
## Sample characteristics: HET1, HET2, HET3

Characteristic		HET1 (n=332)	HET2 (n=376)	HET3 (n=505)
Gender	Male	55%	48%	52%
Race/Ethnicity	Black, not Hispanic	96%	80%	89%
	White, not Hispanic	4%	16%	6%
	Hispanic	0%	0%	1%
	Other	0%	2%	5%
Age	<25	26%	25%	18%
	25-34	27%	26%	29%
	35-44	32%	18%	17%
	45-60	16%	30%	37%
Education	High school or less	79%	86%	79%
	College or some	21%	14%	21%
Unemployed	Of total	35%	44%	40%
	Of workforce	43%	60%	58%
Median annual household income	(mid-point)	\$10,000-15,000	\$5000- \$10,000	\$10,000- \$12,500
Homelessness	Past year	23%	39%	17%

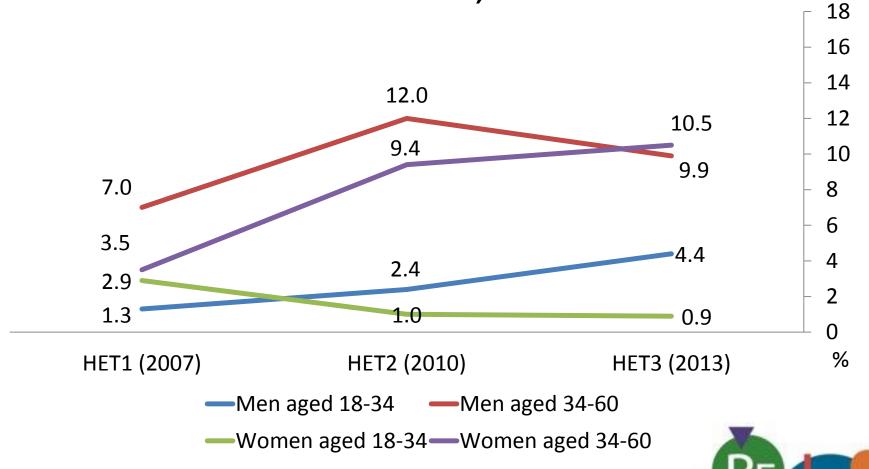
### HIV among heterosexual men and women, 2007-2013



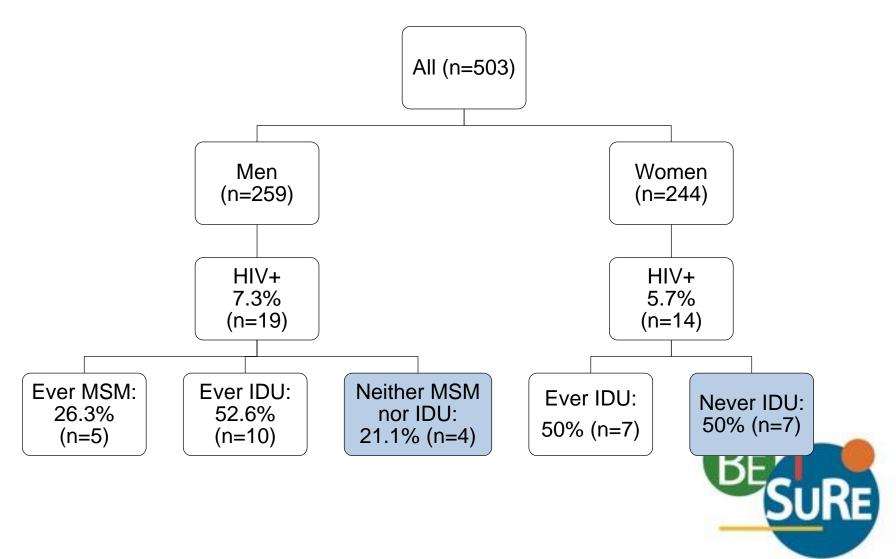
# HIV prevalence by gender among Baltimore heterosexual men and women: 2007-2013



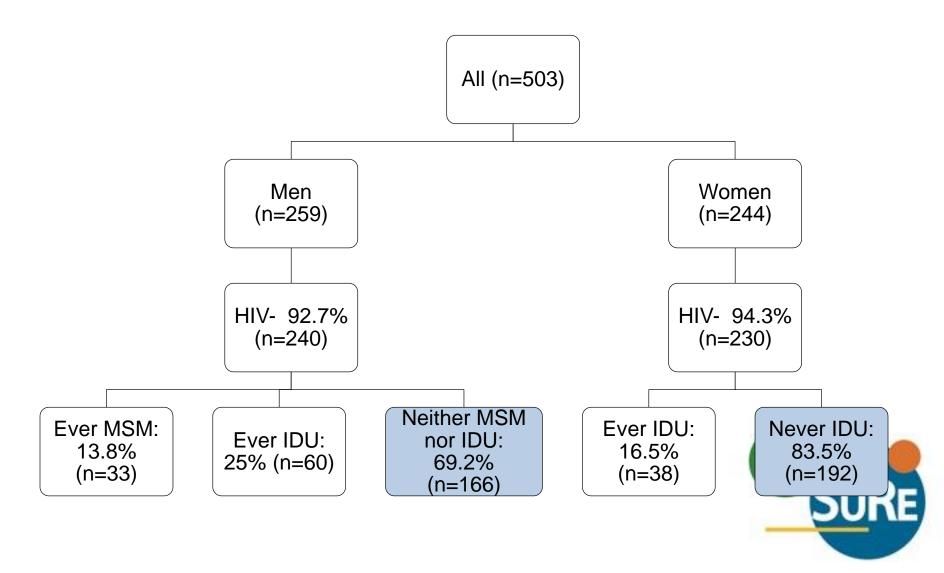
### HIV among African-American heterosexual men and women, 2007-2013



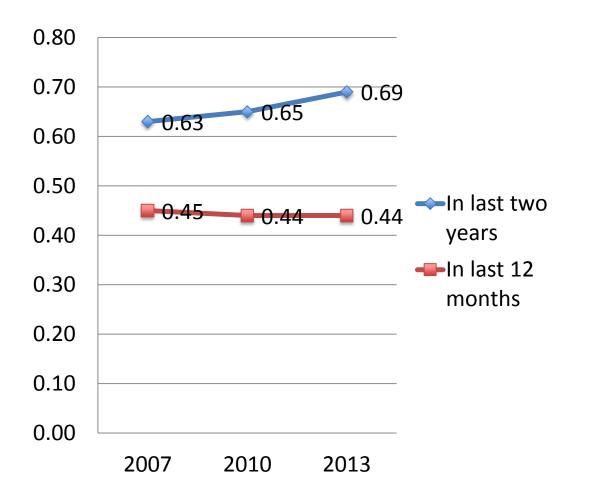
### IDU and MSM among HIV+ heterosexual men and women, 2013



#### IDU and MSM among HIVheterosexual men and women, 2013



**HIV** testing among **Baltimore** heterosexual men and women: 2007-2013





#### **STANDARD INDICATORS: HET3**



#### Sex and drug-related behaviors (HET3)

	% Total (n=503)	% HIV+ (n=33)	% New HIV+ (n=11)
Men who ever had sex with men ^	15%	26%	17%
In the past 12 months	6%	21%	17%
Injection drug use ever	23%	52%	46%
In the past 12 months	9%	12%	18%
Inject with used needle past yr ^^	67%	75%	100%
Any unprotected sex in past year *	90%	54%	82%
Any unprotected anal sex in past year *	88%	50%	82%



<sup>^</sup> among males

<sup>^^</sup> among those who injected in past year

<sup>\*</sup> note: not partner type specific

#### HIV testing behavior (HET3)

	% Total (n=503)	% HIV+ (n=33)	% New HIV+ (n=11)	
Ever had HIV test	91%	91%	73%	
HIV Testing in Last Two Years ^	69%	58%	64%	
HIV Test in Past Year ^	44%	39%	36%	
Obtained Result of Last Test ^^	93%	90%	75%	
Offered HIV test by health care provider in the last 12 months ^^^	57%	61%	44%	
Public health clinic (39%), mobile (13%),			(13%),	
Location of last test	emergency room (13%)			
Most important reason didn't get tested in past year	No particular reason (41%), Afraid of finding out (30%), Think at low risk (15%)			

^of total

^^among those ever tested

^^^among those who saw health provider in past year



#### HIV care and partner services (HET3)

	% Total (n=503)	% HIV+ (n=33)	% New HIV+ (n=11)
Doctor's visit in the last 12 months for HIV care^^	-	89%	-
Antiretroviral use^^	-	79%	-
Asked to provide partner information for contacting after receiving first positive result ^^	-	79%	-
Provided contact information of any partners when asked ^^^	-	93%	-

^^among those who reported prior HIV positive test result ^^among persons asked to provide partner information



#### STD & HCV Testing/Diagnosis (HET3)

	% Total (n=503)	% HIV+ (n=33)	% New HIV+ (n=11)
Any STD test in the last 12m	41%	30%	27%
Any STD diagnosis last 12m	7%	3%	9%
Among those tested past 12m	18%	10%	33%
Ever diagnosed with Hepatitis	14%	46%	18%
Ever HCV test	71%	85%	73%
HCV test in the last 12m ^	39%	46%	38%
Ever diagnosed with HCV	17%	39%	25%
Diag. w/HCV in last 12m ^^	13%	0%	50%



## HIV community-based interventions (HET3)

	% Total (n=503)	% HIV+ (n=33)	% New HIV+ (n=11)
Received free condoms in past year	53%	55%	52%
Used free condoms*	84%	86%	87%
Received sterile syringes in past year	5%	9%	18%
Used free syringes**	100%	100%	100%
One-on-one conversation with outreach worker/counselor about ways to prevent HIV (excluding HIV testing)	15%	36%	18%
Organized group session to discuss ways to prevent HIV (excluding discussions with friends)	8%	27%	0%

<sup>\*</sup>Among those who received free condoms, \*\*Among those who received free syringes, \*\*Among those who received free kits

Living situation
Economic situation
Exposure to violence
Cigarette smoking
Depression
Recent arrests
Reproductive health
HIV test location preferences

#### **LOCAL QUESTIONS: HET3**



#### Local questions (HET3): Living situation

Item	% Total (n=503)
Current living situation	
House I own	5.2%
House or apartment I rent	49.9%
Rent a room or space	22.1%
Stay with someone for free	13.7%
Supportive or transitional housing	4.2%
On the street, homeless, more than 2 place/week	3.6%
Other	1.4%
How long there	
Less than 1 year	32.3%
1-5 years	44.2%
More than 5 years	23.5%
Moved 2+ times in past year	18.3%
Child under 18 in household	50.3%
Concerned about needing a new place to live:	
Very, extremely, always	42.2%

### Local questions (HET3): Economic situation

Item	% Total (n=503)
Unsure where money would come from in past year:	
About half, most, always	50.1%
In past year, money from:	
Full time job	23.1%
Part time job	21.3%
Odd jobs	43.3%
Day labor	10.1%
Social security	26.6%
Food stamps	69.0%
Welfare/ public assistance	26.6%
Unemployment	4.6%
Selling drugs	7.8%
Family/ friends	56.1%
Sex partners (not exchange)	38.8%
Ever traded sex in exchange for money, drugs, gifts,	34.2%
Past year, traded sex in exchange	23.3%

#### Local questions (HET3): Smoking, violence, arrest, depression

Item	% Total (n=503)
Ever smoked cigarettes	83.1%
Currently smoke cigarettes	70.2%
Threatened with a weapon such as gun/knife/club in past year	14.1
Carried a weapon such as gun, knife, club in past month (average # of days)	2.0
Arrested in past year	23.7%
Depressive symptoms (CES-D 10)	42.0%



#### Local questions (HET3): Reproductive health and HIV

Item	% Total (n=503)
Pregnant at least once in lifetime (among women)	90.5%
Birth control used during last sex (among women)  None Birth control pills Condoms An IUD or implant A shot, patch, or birth control ring Withdrawal or some other method	51.0% 5.4% 0.2% 4.1% 4.5% 16.1%
Most likely place to go for an HIV test Public health clinic Private doctor's office Emergency room Mobile/Outreach Other	48.3% 16.7% 10.5% 9.9% 14.6%

#### **HET3 Limitations**

- Cross-sectional: not same samples, not causal
- Sample characteristics differ across waves
- HET1 procedures different from HET2, HET3
- Voluntary enrollment
- Self-report
- Not RDS adjusted



#### Discussion: HET3

- High HIV prevalence relative to general population
- Overlapping epidemics between HET, IDU, and MSM
- High degree of social and economic instability
- Competing health and social needs
- Recent HIV testing may be worth attention

Unprotected anal intercourse among heterosexuals at high risk for HIV Hepatitis C infection among MSM

#### **ONGOING ANALYSES**



Acknowledgments to Trang Nguyen, Tiffany Traylor, participants and study team

# FACTORS ASSOCIATED WITH UNPROTECTED ANAL SEX: HET2



#### Research question

- Reported unprotected anal sex in HET3
  - Among men: 40.5%
    - RDS adjusted: 41.5% (30.9, 51.0)
  - Among women: 40.4%
    - RDS adjusted: 38.3% (29.4, 47.2%)

 What characteristics associated with unprotected anal sex among heterosexuals at high risk for HIV?

## Characteristics associated with unprotected anal sex among males

	Crude Odds Ratio (n=185)
Homeless in past year	2.9
Same sex partner in past year	42.1
Casual sex with heterosexual partners	3.7
Exchange sex with heterosexual partners	4.0
Number of sex partners 1 partner 2-3 partners 4-7 partners 8+ partners	Ref. 1.6 <b>6.2</b> <b>8.9</b>
Heroin use	2.5
Prescription drug use	2.6



# Characteristics associated with unprotected anal sex among females

	Crude Odds Ratio
High school grad, GED or higher	0.4
Same sex sex	4.6
Casual sex with heterosexual partners	2.6
Exchange sex with heterosexual partners	6.5
Number of sex partners  1 partner  2-3 partners  4-7 partners  8+ partners	Ref. 4.0 9.3 12.5
Crack or heroin use	3.7
Prescription drug use	3.5

# Characteristics independently associated with unprotected anal sex: HET3

#### Among males:

- Homeless in past year (A.O.R. 3.2)
- Same sex sex (A.O.R. 16.8)
- Increasing number of sex partners (4-7 A.O.R. 5.6; 8+ A.O.R. 7.6)

#### Among females:

- High school graduation (A.O.R. 0.3)
- Homeless in past year (A.O.R. 0.3)
- Increasing number of partners (2-3 A.O.R. 3.7; 4-7.2; 8+ A.O.R. 7.8)
- Crack or heroin use (A.O.R. 3.2)

### Prevention implications

- Confirms prior reports of high prevalence of UAI among heterosexuals at high risk for HIV
- Important to recognize efficiency of potential HIV transmission via UAI
- Need to broaden heterosexual sexual health promotion and HIV/STI prevention to ensure that risks and prevention strategies for anal intercourse are adequately and appropriately addressed.

Acknowledgements to Maria Lulis Navarro, Christine Powell, Sabriya Linton, participants and study team

# FACTORS ASSOCIATED WITH HEPATITIS C INFECTION: MSM3



### Research question

- Results of serological testing show HCV prevalence of 14.3 among MSM
  - Among never IDUs: 10%
  - Among current and former IDUs: 60%
  - Ever diagnosed with HCV: 5.8%
  - Unrecognized HCV infection: 60.7%
- What characteristics are associated with HCV infection among among MSM?

## Prevalence of HIV and HCV coinfection among MSM

	Europe (%)	San Francisco (%)	Baltimore (%)
HIV Prevalence		23.2	43.25
HCV Prevalence	0-23	4.5	14.3
Among IDU	25-50	15.5	60.0
<ul><li>Among never-IDU</li></ul>		2.3	9.9
<ul> <li>Among HIV- positive</li> </ul>	6.6	15.7	21.9

# Characteristics associated with HCV infection among never-IDU MSM

Variable	Crude odds ratio	<i>p</i> -value
Socio-demographics		
Age • 45-54 • 55+	4.71 11.13	0.002 0.001
HIV positive	4.26	<0.001
Employment Full time	0.41	0.06
Sexual behavior		
Any Exchange MSM sex partners*	2.64	0.006
Multiple Exchange MSM sex partners*	2.51	0.01
Multiple Casual MSM sex partners*	2.64	0.01
UAI with Multiple MSM partners*	2.61	0.01

# Sex behaviors associated with HCV among never IDU MSM

Sexual behavior in the past 12 months	Adjusted odds ratio*	95% CI	<i>p</i> -value
Any exchange MSM			
sex partners	2.24	1.01 - 4.91	<0.05
Multiple exchange			
MSM partners	2.14	0.91 - 4.87	<0.1
<b>Multiple casual MSM</b>			
sex partners	3.01	1.35 - 7.19	< 0.05
UAI with multiple			
MSM partners	1.76	0.73 - 4.06	0.19



<sup>\*</sup> Each model adjusted for age and HIV status

## Public health implications

- Risk of HCV transmission and need for testing and treatment among MSM
- Attention to those with multiple casual or exchange partners
- Growing evidence of sexual transmission of HCV; need to better identify contexts and dynamics of transmission in this population
- Potential of age cohort effect
- High HCV/HIV co-occurrence. Sample also uniquely includes a small set of MSM with HCV infection but no HIV infection.

MSM4 – Coming Summer 2014!

#### **BESURE NEXT STEPS**



### BESURE next steps

- Continued analysis
- Dissemination activities
- Round 4: MSM4 2014



#### MSM4: Timeline and Plan

- April 2014: Concluding formative research
- May 2014: Operational preparations, community awareness, continued community engagement, and additional venue explorations
- June 2014: Begin venue based survey and HIV testing
- December 2014 or hopefully sooner: Conclude

## MSM4: Key change under consideration

- Rapid instead of standard HIV testing for BESURE?
  - At venues?
  - Provide results on site?
  - Option to receive results later?
  - Barrier to participation?
- Pros and cons...
- What do you think?



#### IN CONCLUSION...



#### How to find our data

- DHMH website <u>http://phpa.dhmh.maryland.gov/OIDEOR/CHS</u>
   E/SitePages/behavioral-surveillance.aspx
- Facebook! Coming soon.
- Contact us
  - Danielle German <u>dgerman@jhsph.edu</u>
  - Christine Powell <u>cpowell@jhsph.edu</u>
  - Colin Flynn colin.flynn@maryland.gov



## Coming very soon!

Baltimore National HIV Behavioral Surveillance System 2011 MSM Cycle III Data Report



BESURE Study April, 2014



#### With sincerest thanks to:

- Study participants
- Community partners
- DHMH state lab staff
- Data collection team: Brenda Costley, Glenn Fulton, Allysha Robinson, Kristy Lunquest, Miriam Alvarez, Laura Dellplain, Maria Lulis Navarro Sanchez, Bernetha Williams
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- Field Supervisor: Louis Spencer
- Data Manager: Ju Park / Sabriya Linton
- Project Coordinator: Christine Powell
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