

FINDINGS FROM PAN'S 2020 BC TESTING NEEDS ASSESSMENT:

Enthusiasm for HIV self-testing and needs for clarifications, guidelines, and collaboration

(November 2020)

What did we do?

New testing options for sexually transmitted and blood-borne infections (STBBIs) are being introduced to the market in Canada, with the goal of making testing available and accessible to those who need it most. For example:

- self-testing for HIV and hepatitis C
- multiplex point-of-care (POC) testing for HIV and other sexually transmitted infections (STIs), such as syphilis

Health Canada recently provided final approval of [Canada's first HIV self-test](#) on November 3rd, 2020. Approval of this novel testing option effectively makes bioLytical Laboratories' INSTI HIV point of care (POC) test accessible for use by non-healthcare providers.

HIV self-testing? What is it?

HIV self-testing (HIVST) is a process in which **a person collects their own blood specimen, performs an HIV test, and interprets the result on their own**. This testing is often performed in a private setting, either alone or with a trusted person. The self-test results act as an **initial screening** for HIV, and a **confirmatory test is required for HIV diagnosis**.



In this context, **PAN engaged its member organizations:**

1. to **provide information** on HIVST and other novel testing technologies
2. to learn about the **supports that organizations need** to effectively support HIV self-testing and other testing technologies as they roll out across the province of British Columbia (BC)

How did we do it?



We talked to **17 PAN members and allied stakeholders** across BC between **July and August 2020**.

We asked:

1. How do community-based organizations (CBOs) and AIDS service organizations (ASOs) see **their role in testing** in this new context?
2. How can CBOs and ASOs **engage with the new testing technologies** as they become available?
3. Are there any **potential challenges or opportunities** they foresee concerning HIVST?
4. What **resources and tools** would support CBOs' and ASOs' engagement in HIVST?



What did we find?: Quick snapshot



OPPORTUNITIES

Enthusiasm about new testing technologies, including HIV self-testing, dried blood spot (DBS) multiplex testing for HIV and STBBIs, and self-testing for hepatitis C.

ASO and CBO stakeholders think that it is important and beneficial to **expand testing opportunities**.



CHALLENGES

Pathway for access to HIV confirmatory testing and linkage to prevention and treatment care, must be in place and clearly presented for those using HIVST, especially in communities with fewer services.

Legal, surveillance, and public health reporting requirements concerning positive HIVST results must be clear for CBOs and ASOs.



NEEDS

ASO and CBO stakeholders **call for guidelines and role clarity** of different stakeholders involved, including the anticipated role of peer support workers in HIVST.

Collaboration between ASOs/CBOs, healthcare providers, and health authorities is perceived as critical as HIVST is rolled out in the province.

5 areas of opportunity identified

- 1. Advantages of self-testing:**
 - Potential to **reduce the stigma** around testing
 - Offer **confidentiality and privacy** to those living in smaller communities
 - **Reduce the need to travel** for people in communities with fewer testing options
 - Provide testers a **sense of autonomy and ownership** over testing and access to care
- 2. Strengths of community-based programs:**
 - **Well-equipped to distribute** HIVST kits and are interested in the opportunity
 - Provide a **less clinical space** for HIVST and wrap-around supports to testers
- 3. Peer-based or non-healthcare-provider-based testing:**
 - Promote diverse testing options and ways to connect with different populations, i.e. through peer workers
- 4. Working with pharmacists:**
 - As **distribution and resource sites** for linkage to care and community-based services
- 5. Fostering partnerships with health authorities:**
 - Build new testing options at CBOs and ASOs, and outside of healthcare provider-testing options

4 potential challenges recognized

- 1. Linkage to confirmatory testing:**
 - **Access to confirmatory testing**, especially in rural and remote communities, can be a challenge
 - Immediate follow-up may not be possible due to **COVID-19** public health and safety measures
- 2. Meeting Needs of Priority Populations:**
 - People who experience homelessness or use substances may **not be able to engage in HIVST**
 - HIVST might impact **testing for other STBBIs**
- 3. Concerns around HIVST:**
 - Importance of reach -- **promoting widely** across populations and geographies
 - **Negative impacts** of testing alone or unsupported when the result is positive
 - Technology and literacy skills may pose a barrier for accessing the HIVST online platform
- 4. Work on stigma:**
 - Privacy and **confidentiality** important with HIVST
 - **Public health reporting requirements** for positive HIVST are unknown

The needs of CBOs and ASOs around HIV Self Testing



Clarity of roles

- Require guidelines and role clarity around HIVST for community stakeholders, medical service providers, health authorities, and peers support workers
- Designate a person in each health authority who can help in linking people who test positive for HIV to treatment and care



Importance of giving people access to their peers

- Peer support workers can provide important follow-up and support care for HIVST testers
- Explore peer-based, or non-healthcare provider-based testing options



Information on linkage and care

- Linkage to care guidelines and resource needed, specifically in accessing confirmatory testing
- Health and social service resources, easily accessible online or through phone line, needed for those who test positive or negative (prevention services)



Training

- Training and capacity-building resources as new testing technologies emerge and CBOs or ASOs take on new roles
- Standardized HIVST protocol or procedures CBOs or ASOs can access



Additional funding and human resources to support testing

- If CBOs or ASOs take on new and additional testing activities, they need additional funding or shifts in contract deliverables to accommodate new work
- HIVST should be provided for free and/or through a publicly-funded program to manage costs and track volume of HIVST testing



Documentation and guidelines

- Information on HIVST kits and other testing technologies is needed as they become available
- Explanation of rules around surveillance and public health reporting of HIV positive results and what tests these apply to (is there no public health reporting for HIVST?)

Conclusions and next steps

New testing technologies and options offer both potential opportunities and challenges for CBOs and ASOs as they are rolled out in BC. The CBO and ASO stakeholders who participated in this assessment expressed enthusiasm for HIVST. A key finding from this assessment indicates the need for clear recommendations and easy to access to resources linking those who test positive through HIVST to confirmatory HIV testing and care.

We are very grateful to the participants in this needs assessment. PAN will be developing a testing work plan grounded in these findings. We will also use these findings as a discussion starter with key partners and decision-makers who can shift how testing happens in this province. Testing is an essential step in reaching the undiagnosed, linking them to care and having a positive impact on the HIV epidemic in BC.