

Community-based HIV testing: experiences of lay-testers and end-users at the Aids Healthcare Foundation Checkpoint in Amsterdam

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Methods

A qualitative study with semi-structured interviews was conducted between April-June 2020 by telephone or video calling with ten lay-testers and five end-users from AHF-Checkpoint. A special recruitment flyer was developed for end-users (Figure 2). The recorded interviews were transcribed verbatim and thematically analysed to explore perspectives, experiences and needs with those offering (lay testers) or receiving (end-users) HIV testing. Triangulation to ensure validity of data was applied by cross-verification of outcomes between the two interviewed groups.



Needs expressed by lay testers included: being prepared for emotionally charged situations and receiving extra training to improve knowledge on STIs. Needs expressed by end-users were based on obtaining a comprehensive STI test package at AHF Checkpoint.

5Cs

The evaluation of **WHO 5Cs** showed that the **Consent, Counselling, and Correct test** results were realised. **Confidentiality** was sometimes difficult to accomplish at pop-up locations (festivals) and referral barriers for HIV confirmation testing (**Connection-to-care**) were sometimes experienced by lay testers during weekends.



Quote 1 - A strong feature is just listening. Listen more. We want to help so badly and then we go straight to the help mode ... but by just listening to the customer and listen to his story. "What happened?" Then you know exactly what kind of approach needs to be done.
[Lay tester 6, MSM-non-Western, 38 years]



Quote 2 - So, we don't give priority for someone. Of course, we encourage MSM to test, because of their high risk. but we test everyone, we test heterosexuals, women with a very, very, very low risk. So, we don't say no to anyone. We test every person and that is what I like about AHF.
[Lay tester 4, MSM-non-Western, 26 years]



Quote 3 - They always explain me first how the test works. ... and how you should read the result. Then they show me the results. So basically, I am part of the test! ... and I can see the test working. So that, uh, gives more confidence.
[End-user 3, MSM-non-Western, 31 years]

Results

Data analysis of 15 transcripts identified four domains (Figure 3).

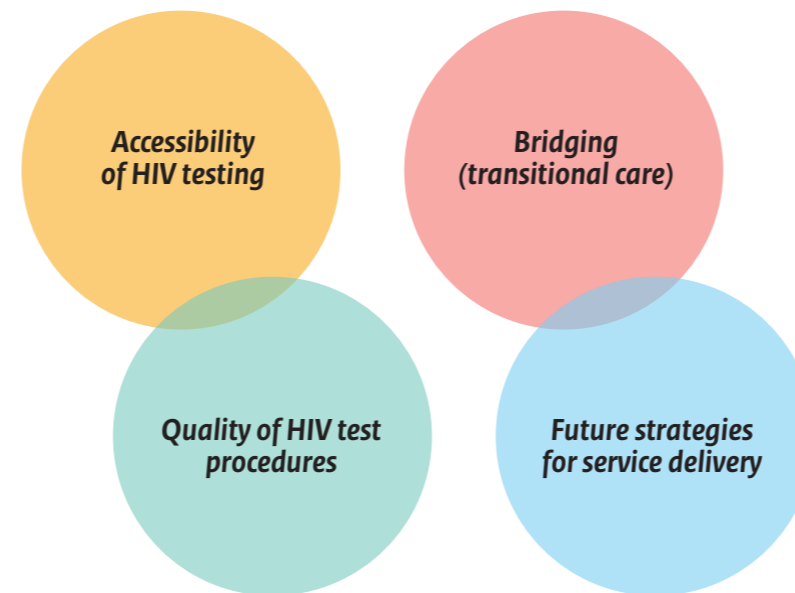


Figure 3. Four domains for sustainability and enhancement of reaching high-risk populations for HIV testing.

Background:

Reaching people living with undiagnosed HIV remains a challenge. Community-based HIV test approaches are promising to overcome test barriers and to connect with 'difficult-to-reach' high-risk populations.

The community approach of Aids Healthcare Foundation (AHF)-Checkpoint provides free 'walk-in', rapid HIV testing at on-site and off-site (pop-up) locations (Figure 1). We explored the perspectives, experiences, and needs of lay testers and end-users of HIV testing at AHF-Checkpoint. Also, we evaluated to what extent adherence to the World Health Organizations' 5Cs (consent, confidentiality, counselling, correct results, connection) for HIV test services was achieved by AHF-Checkpoint.

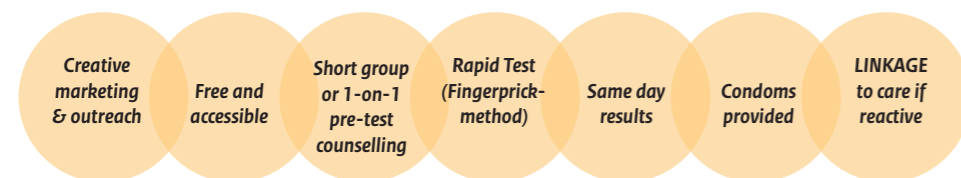


Figure 1. AHF-Checkpoint Rapid HIV testing model.



Figure 2. Recruitment flyer for end-users at AHF Checkpoint Amsterdam.

According to lay testers and end-users, AHF-Checkpoint fills a gap for people who experience barriers to HIV testing at sexual health centres or general practitioners, by providing:

- Free, anonymous, and rapid HIV testing (especially for individuals at high-risk including LGBTQ communities and refugees).
- The level of trust between lay testers and end-users was highly valued by the end-users.
- End-users also appreciated the low threshold to test,
- No barriers like waiting lists,
- No test costs or triaging that could include referral to another test location.

Conclusion

AHF-Checkpoint was described as a convenient and easily accessible service by end-users and lay testers. Most of the WHO criteria were met. Optimisation of referral-to-care for STI testing or HIV confirmation could be reached by a liaison approach with experts from the regular healthcare sector.