

When We Know Better, We Do Better

The State of HIV/AIDS Science
and Treatment Literacy
in the HIV/AIDS Workforce

Black AIDS Institute
February 6, 2015



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Approach

Design

A quantitative survey was developed to assess the level of HIV science and treatment knowledge. The instrument also measured familiarity with biomedical interventions, attitudes about biomedical interventions, respondent demographics, and information about the respondent's work organization.

Implementation

- The survey was administered online, via iPad on site or via respondents' computer
- There were multiple waves of data collection:
 - US Conference on AIDS (USCA)
 - National Rollout, conducted via intercepts in each of 10 US markets
 - Spanish language roll out with 300 respondents
 - State Survey via state & local health departments conducted in 43 states

Respondent Completes Summary

Wave	Dates	# Completes
Total across waves	9/30/12-9/7/14	3663
USCA	9/30-10/2/12	643
National Rollout	3/22-5/5/13	1523
Spanish Language augmentation	10/10-12/2/13	300
State Rollout	6/13-9/7/14	1197

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Overall Level of Knowledge

Overall, the level of knowledge of HIV science & treatment is quite low.

The average HIV Knowledge Score is 61%-63%

- Even the median score is only 64%
- with a score below 70%--67% get a D or lower
- Only 4% of those surveyed would get an A grade—that is, a score of 90% or above.



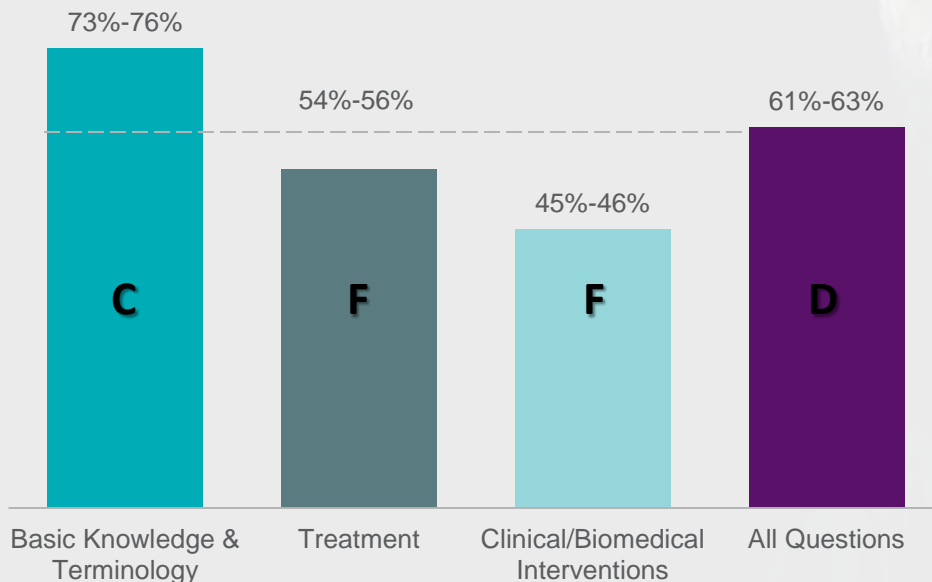
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There were three knowledge categories, with the most basic category having the highest score

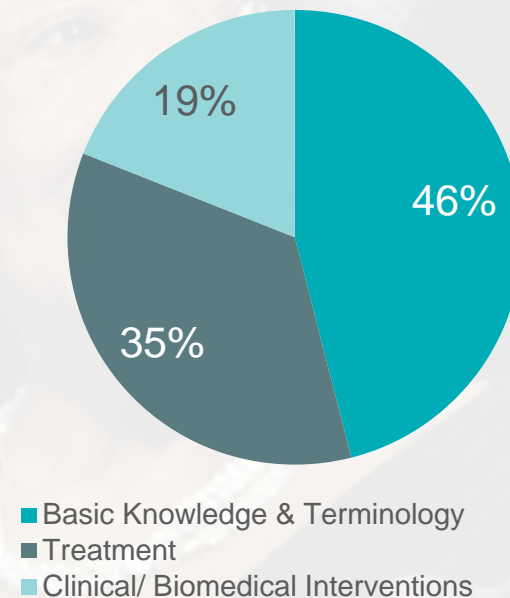
Questions covered 3 major topic areas—Basic Knowledge & Terminology, Treatment and Clinical/Biomedical Interventions.

Scores were highest, on average, for Basic Knowledge and Terminology questions (73%-76%), and lowest for the questions pertaining to Clinical/Biomedical Interventions (45%-46%).

Average Score by Category



Proportion of questions per Category

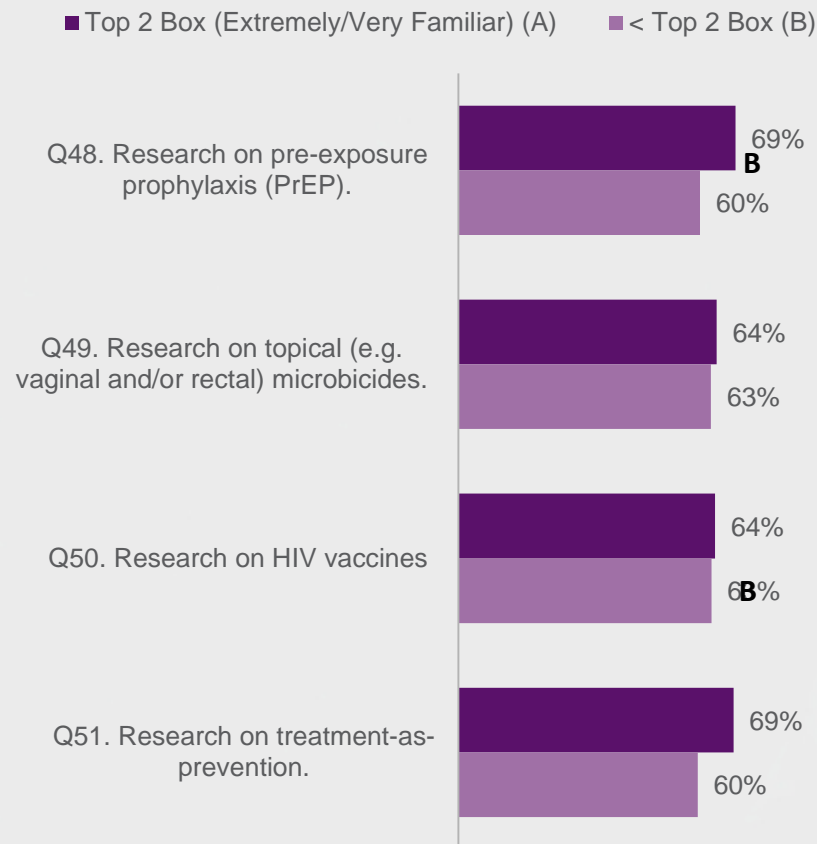


Familiarity and attitudinal agreement go hand-in-hand with higher scores.

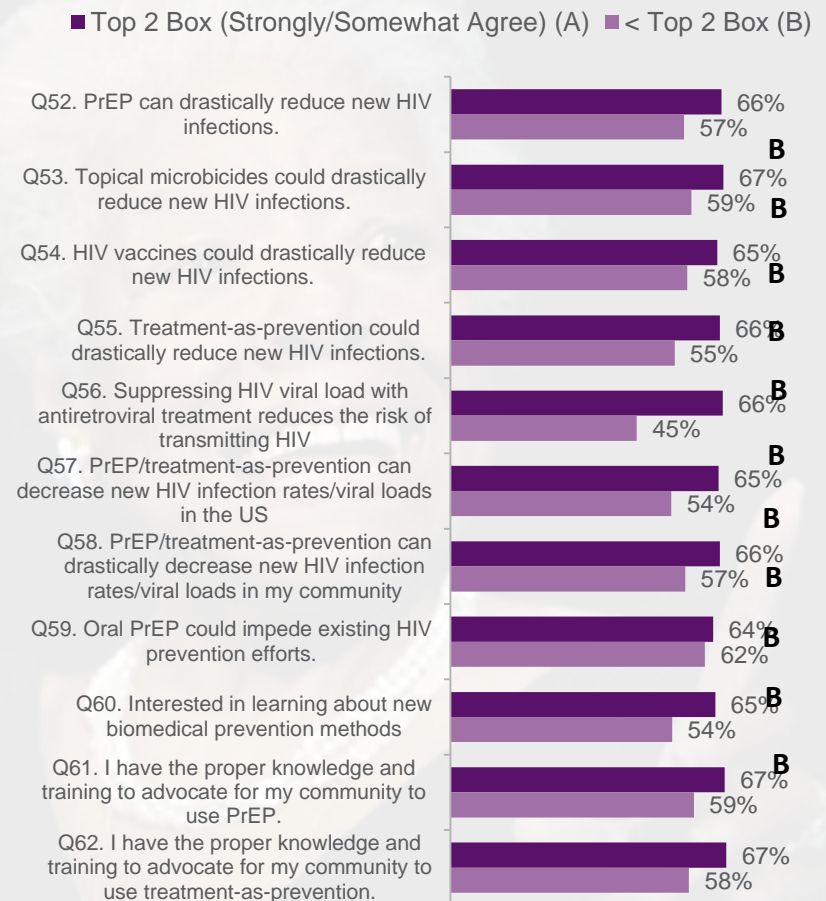
On all but two of the attitudinal items, respondents with high familiarity (Q48-Q51) or high agreement (Q52-Q62) are significantly more likely to have higher scores on the HIV Knowledge questions. This makes sense, as both the knowledge questions and the agreement/familiarity questions appear to measure knowledge of HIV.

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% Correct Answers by Level of Familiarity



% Correct Answers by Level of Agreement



Sample size: 3363

Statistically significant differences between comparison groups marked with a letter (95% significance)

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State-Level Differences

Location matters! The State scores range from a high of 67% (Ohio) to a low of 57% (North Carolina).

While, North Carolina, Florida, Texas and Georgia have below average HIV Knowledge scores, Maryland respondents have above average scores. Those from Alabama, Louisiana, and DC have scores that are close to the national average.

Top five States:

Ohio:	67%
Pennsylvania:	66%
Maryland:	66%
Missouri:	65%
District of Columbia:	64%

Bottom five States:

Arizona:	62%
Texas:	60%
Florida:	60%
Georgia:	59%
North Carolina:	57%



High Impact Prevention Partnership (CDC PS 15-1502)

Black Treatment Advocates Network Collaborative

FLOW CHART

The BTAN Collaborative is a partnership between the Black AIDS Institute, JWCH Institute and T.H.E. Clinic. The Black AIDS Institute is the project administrator, the outreach Lead and the BTAN LA Lead. JWCH Institute and T.H.E. Clinic are the testing and treatment leads. All three partners share responsibility for retention, condom distribution and referral to essential services. In addition, the Black AIDS Institute has three subcontracts: National Council of Negro Women, REACH LA and the Men's Health Foundation.

