

Socio-Peer Attitudes on HIV Testing and Patient Perceptions of an Emergency Department HIV Testing Program – A Qualitative Study



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BACKGROUND

- Emergency departments (EDs) are key venues for HIV testing given the populations they serve.
- The health behaviors and attitudes of individuals' peers are thought to influence individuals' health, as seen with obesity, for example.
- No study has explored socio-peer attitudes on HIV testing as it relates to HIV test acceptance by patients and their friends.

OBJECTIVE

- To assess ED patients' perceptions of their friends' attitudes on HIV testing.
- To compare socio-peer attitudes to patients' history of HIV testing and personal reasons for accepting or declining test offers.

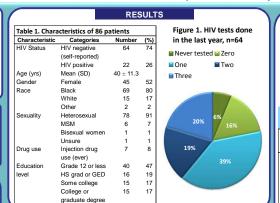
METHODS

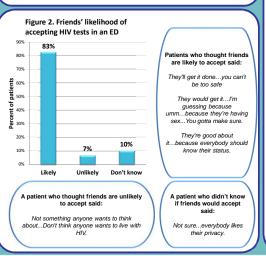
- An urban academic adult ED (JHH ED) with a long standing HIV testing program offering patients free point-of-care or blood-based HIV tests. Patients are offered an HIV test by a nurse during triage or by testing staff at bedside.
- JHH ED serves a diverse and mostly socioeconomically disadvantaged population.

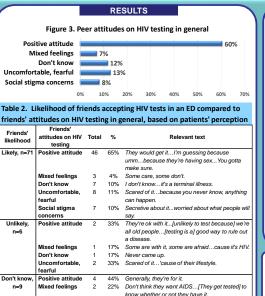
Study Design

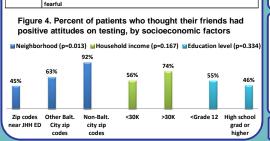
Setting

- We conducted in-depth interviews with patients during their visit to the JHH ED from November 2013 through June 2014.
- Patients were enrolled with the aim of sampling a population representative of the ED patient population in terms of age-group, gender and race distribution. HIV positive status was intentionally oversampled, with a goal of 20 HIV positive patients and 60 HIV negative patients. Enrolled patients were asked to comment on their experience of being offered HIV tests and on their friends' attitudes on HIV testing.
- Interviews were transcribed by the interviewer (AA). Two reviewers (AA and CW) reviewed transcripts to identify themes. Themes were revised several times through discussion between the two reviewers and principle investigator (Y-HH). The two reviewers independently applied themes to each response and discrepancies were resolved through consensus.
- Chi-square tests were performed comparing socioeconomic factors to distribution of themes. Zip codes were grouped by neighborhood proximity to the ED: Near JHH ED (21202, 21205, 21213, 21231, 21224), other Baltimore City (other 212xx), and non-Baltimore City (other zip codes).









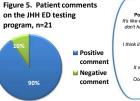
Don't know

Uncomfortable.

22% Not sure...cause we don't talk.

11% Not something anyone wants to think about

RESULTS Patients' response to HIV test offer during ED visit, n=38 Patient reason for accepting: Just to make sure I'm safe...If I'm HIV Table 3. Patients response to test offer during ED visit and testing history positive, I don't want to give it to nobody test offer, n = 38 Testing history Total 21 ccepted, n=24 Tested in the last year (63%) Tested over 1 year ago 3 Patients' reasons for declining: Never been tested Declined, n=14 Tested in the last year 12 I mean I don't have a need for it. My (37%) Tested over 1 year ago husband and I have been together 16 Never been tested





LIMITATIONS

- Patients may not have disclosed accurate information due to the sensitive nature of interview questions.
- A few of the interviews were conducted with patients' friends or family present which may have influenced their responses.
- The ED testing program is long standing which may make the ED population more familiar with testing than other urban ED populations

CONCLUSIONS

- Patients believed that their friends were likely to accept testing in an ED (83%) and had positive attitudes on HIV testing in general (60%).
- Most patients offered a test in the ED accepted (63%) or indicated that they were recently tested (18%) and patients had mostly positive comments on the testing program (90%).
- Results suggest that ED-based HIV testing is acceptable to urban patients and their peers.
- Future studies could explore interventions utilizing peer networks to address concerns about HIV testing and increase testing acceptance.

FUNDING

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