Engaging HBCUs in HIV Prevention Research

2019 National CFAR Meeting

November 5, 2019
Engaging HBCUs in HIV Prevention Partnership
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MISSION: Support the science and operations of the NIH-funded global HIV/AIDS clinical trials networks by increasing efficiency and resource sharing through cross-network coordination of critical activities.

National Institute of Allergy and Infectious Disease (Division of AIDS)

ACTG - Treatment Adults
IMPAACT - Treatment Maternal/ Pediatrics/ Adolescents
HIV Vaccine Trials Network - Prevention: Vaccine
HPTN - Prevention & Treatment
MTN - Prevention: Microbicide

www.hanc.info
XULA Class of 2002
PrEP Care Flowchart for Student Health Clinic

Identifying PrEP Candidates
- The initial step involves a discussion about sexual health behavior
- If student has a positive STI test (gonorrhea, chlamydia or syphilis) in the last 6 months, then go to the next box with recommendation to initiate PrEP
- If student is concerned about STIs or asking about birth control, then go to the next box to consider PrEP
- If student asks about PrEP, then go to the next box to consider PrEP

PrEP Introduction
- See the script on the backside of this sheet for a general script and FAQ's about having a PrEP conversation
- Discuss additional methods to reduce HIV risk (e.g., condom use)
- Complete a Provider iPad Survey

Laboratory Screening
- Screen for HIV (If flu-like illness in last 28 days, order HIV viral load in addition to antibody test)
- Test for STIs
- Screen for renal function, hepatitis B (HBeA surface antigen)

End of Visit Debriefing
- Tell the student to anticipate a phone call in about 3 days about HIV test results
- Inform student that if they are HIV-negative, you will call in a prescription to their pharmacy (provide details about which pharmacy and how to fill prescription, and options to have pharmacy send Truvada to Student Health). This is time sensitive: they must start taking Truvada within 7 days of HIV testing
- Provide student with Gilead co-pay website (https://start.truvada.com/paying_for_truvada)
- Discuss anticipated challenges with medication adherence and provide flyer for Smartphone Study
- Give student iPad to complete Student iPad Survey (or provide URL: http://tinyurl.com/h5sZc3)
  - After survey completion, instruct student to take picture of confirmation code at the end of the survey and present to front desk to receive a small prize. Confirmation code will be recorded at the front desk anonymously for future end of study raffle.

Communicate Lab Results
- If HIV+, then terminate PrEP care plans and refer to Infectious Diseases clinic
- If HIV-, then continue to next box

Prescribing PrEP
- Call the student and state that:
  1. you will call in a 90-day prescription to their pharmacy and they will need to pick up the prescription at pharmacy/Student Health
  2. they must start taking Truvada within 7 days of HIV testing
  3. they should contact Student Health if side effects emerge
  4. medication adherence is important and there's a study to help with that: Smartphone Study
  5. Remind student to consider Student iPad Survey (http://tinyurl.com/h5sZc3)
  6. Remind student to return for 1-month lab check to monitor kidney function (this can just be blood draw)

Starting PrEP

Ongoing PrEP Care
- Follow-up visits (every 3 months)
  - Review indications for continued PrEP use
  - Assess for side effects for Truvada
  - Medication adherence counseling
  - Test for HIV at EVERY PrEP follow-up visit!!
  - Test for STIs and renal function every 6 months

Continuing PrEP

Discontinuing PrEP
- If student explicitly expresses that their previously identified risk factor is no longer present, consider PrEP discontinuation
- If student develops intolerable side effects or renal insufficiency

Additional Notes
- For students not interested in PrEP right now, this can be a topic that you initiate discussion about in the future.
NCCU PROJECT SAFE
ARE YOU PrEP READY?

PrEP stands for Pre-exposure prophylaxis.
PrEP is a preventative drug to reduce the chance of HIV infection.
PrEP is now being offered in Student Health & Counseling Services.
For more information contact:
Student Health & Counseling Services
919-531-5100

Truvada is now being used to prevent HIV infection.
Truvada is now offered in Student Health & Counseling Services.
Just one pill a day keeps HIV away!

Who's at Risk for HIV?

ALL THE ABOVE!

Pre-exposure prophylaxis - One pill a day - Prevents HIV infection
For more information, please contact
North Carolina A&T State University Health Center for an appointment.
<table>
<thead>
<tr>
<th>Characteristic</th>
<th>All (n = 210) (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>53 (25)</td>
</tr>
<tr>
<td>Female</td>
<td>158 (75)</td>
</tr>
<tr>
<td>Transgender</td>
<td>0</td>
</tr>
<tr>
<td><strong>Mean Age (SD)</strong></td>
<td>19.8 (1.8)</td>
</tr>
<tr>
<td><strong>Sexual Orientation</strong></td>
<td></td>
</tr>
<tr>
<td>Straight</td>
<td>186 (89)</td>
</tr>
<tr>
<td>Gay or Lesbian</td>
<td>5 (2)</td>
</tr>
<tr>
<td>Bisexual</td>
<td>9 (4)</td>
</tr>
<tr>
<td>Other</td>
<td>6 (3)</td>
</tr>
<tr>
<td>Decline to Answer</td>
<td>4 (2)</td>
</tr>
<tr>
<td><strong>Year in College</strong></td>
<td></td>
</tr>
<tr>
<td>Freshman</td>
<td>81 (39)</td>
</tr>
<tr>
<td>Sophomore</td>
<td>47 (22)</td>
</tr>
<tr>
<td>Junior</td>
<td>51 (24)</td>
</tr>
<tr>
<td>Senior</td>
<td>23 (11)</td>
</tr>
<tr>
<td>Graduate Student</td>
<td>5 (2)</td>
</tr>
<tr>
<td>Decline to Answer</td>
<td>3 (1)</td>
</tr>
<tr>
<td>Characteristic</td>
<td>All (n = 210) (%)</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td><strong>Have you heard of PrEP?</strong></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>110 (52)</td>
</tr>
<tr>
<td>No</td>
<td>100 (48)</td>
</tr>
<tr>
<td><strong>Are you on PrEP? (n = 60)</strong></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>2 (3)</td>
</tr>
<tr>
<td>No</td>
<td>58 (97)</td>
</tr>
<tr>
<td><strong>Where did you hear about PrEP? (n = 54)</strong></td>
<td></td>
</tr>
<tr>
<td>Friend/sex partner</td>
<td>4 (7)</td>
</tr>
<tr>
<td>Health promotion event on campus</td>
<td>9 (17)</td>
</tr>
<tr>
<td>Student Organization</td>
<td>2 (4)</td>
</tr>
<tr>
<td>Advertisement (not social media)</td>
<td>8 (15)</td>
</tr>
<tr>
<td>Social Media</td>
<td>4 (7)</td>
</tr>
<tr>
<td>Student Health</td>
<td>13 (24)</td>
</tr>
<tr>
<td>In class</td>
<td>2 (4)</td>
</tr>
<tr>
<td>Can’t remember/decline to answer</td>
<td>10 (19)</td>
</tr>
<tr>
<td>Other</td>
<td>2 (4)</td>
</tr>
<tr>
<td><strong>How long have you known about PrEP? (n = 54)</strong></td>
<td></td>
</tr>
<tr>
<td>&lt; 3 months</td>
<td>21 (39)</td>
</tr>
<tr>
<td>3-6 months</td>
<td>12 (22)</td>
</tr>
<tr>
<td>6-12 months</td>
<td>11 (20)</td>
</tr>
<tr>
<td>1-2 years</td>
<td>7 (13)</td>
</tr>
<tr>
<td>2+ years</td>
<td>3 (6)</td>
</tr>
</tbody>
</table>
Based on your sexual activity in the last 3 months, do you think that you are at risk to get HIV? (n = 210)

<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at risk</td>
<td>73%</td>
</tr>
<tr>
<td>A little bit of risk</td>
<td>16%</td>
</tr>
<tr>
<td>Somewhat at risk</td>
<td>7%</td>
</tr>
<tr>
<td>Very much at risk</td>
<td>2%</td>
</tr>
</tbody>
</table>

Would you take a pill once a day to protect yourself from getting HIV? (n = 210)

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>58%</td>
</tr>
<tr>
<td>No</td>
<td>19%</td>
</tr>
<tr>
<td>Not Sure</td>
<td>23%</td>
</tr>
</tbody>
</table>

Would you take an injection once a month to protect yourself from getting HIV? (n = 210)

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>51%</td>
</tr>
<tr>
<td>No</td>
<td>27%</td>
</tr>
<tr>
<td>Not Sure</td>
<td>22%</td>
</tr>
</tbody>
</table>

Would you take an injection once every two months to protect yourself from getting HIV? (n = 210)

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>57%</td>
</tr>
<tr>
<td>No</td>
<td>22%</td>
</tr>
<tr>
<td>Not Sure</td>
<td>20%</td>
</tr>
</tbody>
</table>

What method of PrEP would you prefer to use? (n = 210)

<table>
<thead>
<tr>
<th>Method</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pill once a day</td>
<td>29%</td>
</tr>
<tr>
<td>Injection once a month</td>
<td>14%</td>
</tr>
<tr>
<td>An injection once every two months</td>
<td>38%</td>
</tr>
<tr>
<td>Not sure</td>
<td>19%</td>
</tr>
</tbody>
</table>

Expressed interest in at least one form of PrEP?

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>69%</td>
</tr>
<tr>
<td>No</td>
<td>31%</td>
</tr>
</tbody>
</table>

Black students are becoming increasingly aware of PrEP, but they do not necessarily perceive themselves as at risk for HIV infection.
North Carolina PrEP Summit
Inter-CFAR Workshop on Partnerships between HBCUs and CFAR
• Program Implementation/ Operational Expertise

• Connections to South Carolina HBCU Leadership
• Pharmacy Expertise

• Clinical Expertise in HIV and PrEP, PrEP prescriber
• Implementation Experience at NC HBCUs
Study Team

Campus Leadership

Student Health Centers

Student Organizations

Local Health Departments

Comprehensive Campus HIV Prevention Strategy
Attitudes and Perceptions of HIV and HIV Clinical Research Among Historically Black College and University Faculty and Students

^Stephaun E. Wallace, MS; ~Michele Andrasik, PhD; +Shelley Johnson, BA; ~Nubia Chong, BS; ~Vera Okolo; ~Logan Wahl; +Denise Gaither-Hardy, MA; ^Damon L. Humes, MHS

^Office of HIV/AIDS Network Coordination, Fred Hutchinson Cancer Research Center, Seattle, WA; +Lincoln University, Lincoln University, PA; ~HIV Vaccine Trials Network, Fred Hutchinson Cancer Research Center, Seattle, WA

Background

Historically Black Colleges and Universities (HBCUs) are a fundamental vehicle for the development and education of over 5 million alumni8,9. HBCUs have matriculated 24% of all African-American (AA) students enrolled in four-year colleges; awarded master’s degrees and first-professional degrees to about one in six AA men and women; and awarded 24% of all baccalaureate degrees earned by AA nationwide10,11. The National Medical Association has noted that the lack of involvement of AA and other people of color in clinical research has contributed to existing disparities12. Among those same lines, African Americans have historically been, and are currently, underrepresented in HIV clinical research trials5,12,13. HIV/AIDS incidence and prevalence is increasing among all Americans but has reached epidemic proportions among AA, including AA youth and among adults14. This two year qualitative study examined the range of knowledge, attitudes, and perceptions of HIV, and HIV clinical research among students and faculty of HBCUs which may serve to impact the epidemic in AA communities.

Methods

48 HBCU students from 2 HBCU campuses participated in 4 focus group interviews, and 25 HBCU faculty from 8 HBCU campuses participated in semi-structured one-on-one interviews. HBCU institutions represented in this qualitative data include: Lincoln University, PA; Cheyney University, PA; Bowie State University, MD; Morgan State University, MD; Elizabeth City State University, NC; Delaware State University, DE; University of Maryland Eastern Shore, MD; North Carolina Central University, NC; South Carolina State University, SC; Central State University, OH.

Participants were recruited using convenience and random sampling methods, and received remuneration for participation. Discussions explored: barriers and facilitators to engaging HBCU students in preventive HIV services and programs; appropriate HIV messaging strategies; general knowledge and perceptions of HIV; and support of, and knowledge and readiness to, participate in HIV clinical research among HBCU students and faculty. Atlas.ti was used to organize and synthesize the qualitative data. Codes were developed from the themes and organized to further analyze the data.

Domains & Sample Questions Used

HIV/AIDS on HBCU Campuses

• How is HIV perceived among students on HBCU campuses? What about among faculty and administration?

Existing HIV Programs and Services

• What types of HIV-related programs exist on your HBCU campus (e.g., counseling, testing, and support groups)?

Involvement with HIV Clinical Research

• What would make you interested in learning about HIV clinical trials? What about participating in an actual HIV clinical trial?

HIV Messaging

• What is the best way to provide information about HIV to students? What about HIV clinical research?

Awareness and Support for HIV Clinical Research

• What are some ways that we can make students and other young adults aware of HIV clinical research trials?
• How would you build support for HIV trial participation?
• Who else would need to support it?

HBCU Students

• Mean age: 23
• 92% identify as AA
• 62% identify as female, 36.1% identify as male

HBCU Faculty Rank

• 10 assistant professors
• 11 associate professors
• 4 full professors

Conclusions/Recommendations

1. Focused, accessible, and culturally relevant HIV prevention and treatment information and services among HBCU students.

2. Collaborative approaches (perspectives of HBCU students and strengths of HBCU campuses and faculty) may result in successful and meaningful engagement around sexual health.

3. Development of strategic partnerships with CBOs and local and state health departments, to address gaps.

4. Several other strategies were identified that may provide opportunities for ramping up HIV prevention education and service efforts on HBCUs, and engaging HBCU students and faculty in HIV clinical research.

Acknowledgements

The faculty and students from participating HBCUs who made this work possible. The Legacy Project is a program of the Office of HIV/AIDS Network Coordination (HCN). HANC is funded in whole or in part with Federal funds from the Division of AIDS, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Department of Health and Human Services, grant number 5UM1A086814, entitled Leadership Group for a Global HIV Vaccine Clinical Trials (Office of HIV/AIDS Network Coordination) with additional support from the National Institute of Mental Health.

References

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- Bowie State University, MD
- Morgan State University, MD
- Elizabeth City State University, NC
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• How would you build support for HIV trial participation?
• Who else would need to support it?
Check out our new website—available in English and Español!

www.bethegeneration.org

Featuring cutting-edge info and resources on...

**Microbicides**: products applied vaginally or rectally that may prevent the transmission of HIV.

**PrEP & TasP**: The use of anti-HIV drugs by people living with and without HIV to reduce the likelihood of HIV transmission.

**Vaccines**: harnessing the immune system to help prevent a person from contracting HIV.

You can also...
- **Test** your HIV prevention knowledge with an interactive quiz
- **Watch** powerful videos from people working to end the epidemic
- **Learn** about participating in HIV clinical trials
- **Read** the latest news in HIV prevention research

Working together, we can **Be the Generation** to end the HIV/AIDS epidemic!

Contact: bte@hanc.info
HIV Prevention Research

Presenter: The Legacy Project
The human immunodeficiency virus, or HIV, is the virus that causes AIDS.
HIV can be transmitted...

Through vaginal and anal sex

Through needles or syringes containing HIV

Perinatally (during pregnancy, labor, delivery, or breastfeeding)

Rarely through oral sex, blood transfusions, and other contact with blood containing HIV
How HIV is **NOT** Transmitted

HIV is **NOT** Transmitted by:

- Insect bites
- Injecting drugs with sterile works
- Saliva
- Swimming pools, showers, toilet seats
- Sneezing, coughing, shaking hands, or playing sports
- Kissing
- Sharing drinking glasses, musical instruments, or kitchen utensils
HIV prevention research is designed to find safe and effective methods to prevent HIV and AIDS. HIV prevention methods include:

- Biomedical (medicines, vaccines, approaches, and tools to fight diseases that include biological and medical characteristics)
- Behavioral (sex education, HIV testing, reducing partners, etc)

Successful partnerships among the following can make a difference:

- Community leaders
- Local and national organizations
- Health professionals
- Educators
How to Prevent HIV

- HIV testing and counseling
- Correct and consistent condom use with internal/external condoms
- Using antiretroviral drugs
- Sex education
- Family planning
- Needle exchange
- And more…
How to Prevent HIV

Using antiretroviral drugs for:

- Treatment as prevention (TasP)
- Pregnant & breastfeeding mothers
- Pre-exposure prophylaxis (PrEP)
- Post-exposure (PEP) prophylaxis
History of HIV/AIDS

Total: 36.7 million adults and children estimated to be living with HIV, 2016

Source: UNAIDS
History of HIV/AIDS

HIV has killed more than 35 million people worldwide.

HIV/AIDS is most prevalent in sub-Saharan Africa.

40 million people died during World War II.

20 million people died worldwide during the flu epidemic of 1918.
HIV/AIDS in the U.S.

- People living with HIV
  - Among Asians and Pacific Islanders (API)
  - Among American Indians and Alaska Natives (AI/AN)
  - Among Hispanics
  - Among African Americans
  - Among gay and bisexual men
  - Among transgender persons

New HIV transmissions
The Treatment Cascade in the U.S.

1.1 million people with HIV

935,000 (85%) know their status

682,000 (62%) have started HIV medical care

528,000 (48%) have stayed in HIV medical care

539,000 (49%) have a suppressed viral load (<200 copies/ml)

-CDC, 2017
Stigma and discrimination occur when we start to act differently because we are afraid of something or do not understand something.
Clinical research includes:

- Development of new ways to treat, prevent, and control disease
- The evaluation of new interventions for:
  - Safety
  - Efficacy (the capacity to produce a desired effect/effectiveness)
  - Acceptability and adherence (whether or not people use the product as designed)
  - Preventing and controlling disease
Who Can Participate in a Clinical Trial?

People of different ages, genders, races/ethnicities, geographic locations…
Clinical research is conducted according to a very well-defined plan called a *protocol*. The protocol acts like a “recipe” for conducting the clinical trial. The protocol describes:

- What will be done?
- How will it be conducted?
- Who can participate?
- Why is each part of the clinical trial necessary?
- How do we safeguard participants’ health?
- How will safety be monitored?
What Are Research Ethics?

- Respect for persons
- Justice
- Beneficence

Ethics
What Form Does Community Engagement Take?

- **Community Advisory Board or Group**: A group of community members that regularly meets with research staff.
- **Community Forum**: Health fair, town hall meeting, seminar, or educational forum.
- **Focus Group**: Facilitated session to gather information on a specific topic or from a specific group of individuals.
- **Consultation**: A larger group meeting to seek input/advice or gather information.
Comprehensive HIV prevention includes multiple approaches instead of just one or two approaches.
# The HIV Combination Prevention Toolbox

## Behavioral/Physical Barriers
- Condoms and other barrier methods
- Voluntary Medical Penile Circumcision (VMMC)
- Harm reduction

## Medical
- Treatment as Prevention (TasP)
- Microbicides
- Diagnosis and treatment of sexually transmitted infections (STIs)
- Post-Exposure Prophylaxis (PEP)
- Pre-Exposure Prophylaxis (PrEP)
- Prevention of perinatal transmission (PMTCT)

## Vaccines
- Vaccines

## Education
- Needle exchange programs
- Treatment/prevention of drug/alcohol abuse
What Are HIV Prevention Tools and How Are They Used in HIV Prevention Research?

Three Important Medical Prevention Tools

**PrEP & Integrated Strategies**
New formulations and delivery methods to reduce the likelihood of transmission.

**Microbicides**
Products applied vaginally or rectally that may prevent HIV transmission.

**Vaccines**
Harnessing the immune system to help prevent a person from contracting HIV.
THE BAR BEFORE THE BARS

Overall:
Of all Americans diagnosed with HIV, only 50% are virally suppressed.

PrEP Use in the US

HIV prevention pill is not reaching most who could potentially benefit – especially African Americans and Latinos

44% of people who could potentially benefit from PrEP are African American – approximately 500,000 people...

...but only 1% of those – 7,000 African Americans – were prescribed PrEP*

25% of people who could potentially benefit from PrEP are Latino – nearly 300,000 people...

...but only 3% of those – 7,600 Latinos – were prescribed PrEP*

*Prescription data in this analysis limited to those filled at retail pharmacies or mail order services from September 2015 – August 2016; racial and ethnic information not available for one-third of the prescription data
Provider Knowledge about PrEP

Not enough health care providers know about PrEP.
Pre-exposure prophylaxis (PrEP) is a medicine taken daily that can be used to prevent HIV infection. PrEP is for people without HIV who are at very high risk for acquiring it from sex or injection drug use.

90% Daily PrEP can reduce the risk of sexually acquired HIV by more than 90%.

70% Daily PrEP can reduce the risk of HIV infection among people who inject drugs by more than 70%.

1 in 3 1 in 3 primary care doctors and nurses haven’t heard about PrEP.


Vitalsigns™
www.cdc.gov/vitalsigns/HIVPrEP
HBCU Engagement Resources

www.hanc.info

www.bethegeneration.org

https://www.hanc.info/cp/resources/Pages/default.aspx
Thank You!