



National Youth HIV/AIDS Awareness Day April 10, 2019

Research and Resources for
Youth HIV/AIDS Prevention



Center for AIDS Prevention Studies
Prevention Research Center
Division of Prevention Science



Center for AIDS Prevention Studies (CAPS)

UCSF Prevention Research Center (PRC)

Research & Resources

This brochure lists research projects with Youth or young adults as well as helpful resources produced by CAPS/PRC. You might use it to:

- Stay up-to-date on research and learn what we found out from research
- Provide materials in trainings/presentations
- Advocate for services/funding
- Write grants
- Develop new or modify existing HIV prevention programs
- Evaluate current programs
- Connect with CAPS/PRC to develop new projects. Lead researchers (PIs) are listed for each study. Contact us below to connect.

Questions? Comments? Contact Daryl Mangosing via phone at 415-502-1000 ext. 17163 (vm only) or email at Daryl.Mangosing@ucsf.edu

This brochure was prepared by the CAPS **Community Engagement (CE) Core**, which is previously known as the *Technology and Information Exchange (TIE) Core*.

Acronyms

MSM: Men who have sex with men

PI: Principal Investigator (lead researcher on the study)

CO-I: Co-Investigator (contributing researcher or research partner)

Message from the Director

This annual observance of National Youth HIV & AIDS Awareness Day (NYHAAD), now in its 7th year, was created April 10, 2013 by partners to educate the public about the impact of HIV/AIDS on youth. The Center for AIDS Prevention Studies (CAPS) and the UCSF Prevention Research Center (PRC) continue to work in partnership with local, national, and international organizations and communities to ensure that HIV prevention research focuses on youth. On one hand, we acknowledge that youth continue to be deeply impacted by the HIV epidemic; on the other, we recognize that our research has made a significant difference in the lives of youth who are infected with HIV as well as those who are at risk of infection.



Globally, 590,000 young people between the ages of 15 to 24 were newly infected with HIV in 2017 alone.¹ In 2016, youth aged 13 to 24 made up 21% of all new HIV diagnoses in the United States.² From 2010 to 2015, an estimated annual HIV infections among youth declined 24%.² Similarly, from 2008 to 2014, a significant decline (18%) in HIV infection was reported for young gay and bisexual males, the groups hardest hit by the epidemic. Yet, we still have much work to do. In 2016, the majority (81%) of new infections occurred among young gay and bisexual males.² About 60% of all youth with HIV do not know they are infected and therefore are not treated.³ Youth living with HIV who know their status are the least likely of any age group to be linked to care and suppress their viral load, two conditions that would allow them to stay healthy and greatly reduce their risk of transmitting HIV to others.⁴

To continue progress made in reducing new HIV infections among youth, CAPS researchers will need to continue to address HIV disparities; develop strategies to engage and retain youth in care; and, empower youth to reduce their risk, make healthy decisions, and test for HIV.

We are excited to share this second annual Research and Resources Booklet with you, featuring our work and highlighting current research portfolios of faculty who have committed their life work to working with community-based research partners to improve our knowledge and understanding of key HIV prevention issues that affect youth. With our dedication, scientific innovation, commitment to rigor, and commitment to community engaged partnerships, it is our continued goal to improve HIV prevention among youth and ensure that our most precious resource has the opportunity for a healthy, bright and prosperous future.

Marguerita Lightfoot, PhD
CAPS/PRC Director
Division of Prevention Science Chief

1. UNICEF. Adolescents and Young People - UNICEF Data. <https://data.unicef.org/topic/hivaids/adolescents-young-people/>
2. CDC. HIV Among Youth. <https://www.cdc.gov/hiv/group/age/youth/index.html>
3. CDC. HIV Among Youth in the US. <https://www.cdc.gov/vitalsigns/hivamongyouth/index.html>
4. CDC. HIV Among Youth [PDF]. <https://www.cdc.gov/hiv/pdf/group/age/youth/cdc-hiv-youth.pdf>

HIV Testing and Care Engagement

Project T: MSM and HIV Self-Testing

Investigators: Marguerita Lightfoot (PI), Sheri Lippman (Co-I), Nicholas Moss (Alameda County Department of Public Health)

Project T aimed to enhance identification of undiagnosed HIV infection and increase linkage to HIV care among African American and Latino gay and other men who have sex with men in Alameda County utilizing HIV self-test kits.

We enlisted 34 members of the African American and Latino MSM and Transgender communities to act as recruiters. Each was asked to identify 5 MSM peers they believe to be sexually active to complete a HIV self-test. A total of 165 tests were distributed to social and sexual network members. Compared to data from the county testing program, men in our sample were more likely to have never tested and more likely to report a positive test result.

Research finding: Our findings suggest that using a network-based strategy to distribute HIV self-test kits has the potential to increase testing uptake and reduce undiagnosed infections among African American and Latino MSM.

Adapting, Implementing, and Evaluating an Evidence-Informed Intervention to Improve Engagement in Care Among Black MSM Living with HIV in Alameda County

Investigators: Greg Rebchook (PI), Janet Myers, Susan Kegeles, Emily Arnold (Co-Is), Rob Newells (APEB)

AIDS Project of the East Bay (APEB) and the UCSF PRC's collaborated to adapt, implement, and evaluate STYLE, an evidence-informed intervention shown to improve engagement in healthcare among young MSM of color. APEB worked with local stakeholders to tailor STYLE for the target population and rebranded it as M+. M+ was intended to provide red-carpet HIV care in a community-based clinic, support groups, educational classes, wrap-around services (e.g., case management, transportation, nutrition assistance, referrals to mental health and substance use services), social marketing, community outreach, and mobile HIV testing. The UCSF PRC and APEB are evaluating M+ through qualitative interviews with staff and participants and with longitudinal quantitative surveys with M+ program participants.

Technology

WYZ: A Mobile Health Application for Engagement in Care among Youth Living with HIV

Investigators: Parya Saberi (PI), Theodore Ruel (Co-I), Torsten Neilands (Co-I), Mallory Johnson (Co-I), Xavier Erguera (Research Coordinator)

In the US, fewer than 6% of all youth living with HIV (YLWH) achieve HIV viral suppression. This health disparity extends to the entire HIV care continuum in that there is a strong association between younger age and later HIV diagnosis, lower engagement in care, lower levels of antiretroviral therapy (ART) adherence, and worse HIV clinical outcomes. In response to this critical public health dilemma, our research team proposes to develop a novel mobile health application ("app"), called WYZ (pronounced "wise"), to improve engagement in health care and ART adherence and to pilot test this mobile health app in 18-29 year-old YLWH. The aims of our study are to conduct a pilot trial to assess the feasibility and acceptability of WYZ to optimize HIV care engagement among YLWH. We will assess the perceived impact of WYZ from the perspective of healthcare providers delivering care to our youth participants.

Research finding: *After numerous individual qualitative interviews and focus groups with YLWH and their healthcare providers, we have developed WYZ 1.0 (for both Android & iOS) and will be initiating a pilot trial in June 2019.*

Further details of our study can be viewed here: wyz.ucsf.edu

Y2TEC: Youth to Text or Telehealth for Engagement in HIV Care

Investigators: Parya Saberi (co-PI), Carol Dawson-Rose (co-PI), Valerie Gruber (co-I), Torsten Neilands (co-I), Angie Wootton (Counselor), Dominique Legnitto (Research Coordinator)

Youth (18-29 years old) who are living with HIV (YLWH) have worse clinical outcomes than older adults living with HIV. There are many reasons for this including a lack of youth-friendly health care settings. Some youth may not be involved in their health care or taking HIV medications regularly because of substance use or mental health issues. We are conducting a pilot study to determine if using technology (i.e., videoconferencing and text messaging) to provide mental

health, substance use, and HIV care engagement counseling will be feasible and acceptable for YLWH.

Research finding: *Qualitative interviews with clinicians/ staff from 8 different clinics/organizations serving YLWH in San Francisco and Oakland that show system-level (e.g., availability of technology and clinic capacity), provider/ staff-level (e.g., privacy and comfort with use), and youth-level (e.g., changing phone numbers and relationship with provider) barriers to technology use. Quantitative surveys and qualitative interviews with YLWH that showed that providing ongoing mental health and substance use treatment is an important mechanism to achieving HIV care engagement.*

The majority of participants favored the use of technology for the delivery of mental health and substance use services, including videoconferencing with a counselor and noted the convenience. Therefore, we have enrolled 50 YLWH in a randomized pilot trial to examine the feasibility and acceptability of a telehealth and text messaging intervention aimed at reducing substance use, improving mental health, and enhancing engagement in HIV care.

Young men who have sex with men

We Are Family: Testing, Linkage and Engagement in Care among African American Gay, Bisexual, and Trans youth in the House Ball Community

Investigators: Emily Arnold (PI), Parya Saberi, Susan Kegeles, Torsten Neilands, Lance Pollack, Michael Benjamin (CAL-PEP), Felicia Bridges (CAL-PEP), and Gloria Lockett (CAL-PEP)

This 4-year study was supported by the California HIV/AIDS Research Program (CHRP) to develop and test intervention activities that build upon forms of social support already occurring among young people involved in the house ball and gay family communities, specifically related to HIV prevention and care. This is a collaboration between UCSF, CAL-PEP, and members of the house ball and gay family communities.

Research finding: Many Bay Area houses and gay families already share HIV prevention information and support to help one another connect to services if necessary. Building on family connections provides a natural forum to bring up the most recent prevention and treatment advances, such as home testing and PrEP/PEP, and U=U.



Photo: We Are Family Study

Partner status, viral load, childhood sexual abuse, personal responsibility, and sexual behavior of young African American MSM living with HIV in Texas

Investigators: Greg Rebchook, Lance Pollack, Judy Tan, David Huebner (George Washington University), Susan Kegeles

Young, African American gay, bisexual, and other MSM (YAAMSM) experience significant HIV-related health disparities. While Treatment as Prevention continues to be a critical HIV prevention strategy, knowing more about the sexual behavior of people living with HIV is important to HIV and STI prevention efforts. To address this knowledge gap, we surveyed YAAMSM using long-chain peer referral in Texas to assess sexual behavior, STI history, psychosocial variables related to HIV risk behavior and engagement in care including childhood sexual abuse (CSA), and personal responsibility around HIV prevention.

Research finding: Only 15% of YAAMSM living with HIV reported sexual behavior at the highest risk of transmitting HIV, but over 25% have been diagnosed with an STI in the past year. Multivariate analyses showed that age, CSA, and a sense of personal responsibility were all significantly and independently associated with reporting condomless insertive anal intercourse with serodiscordant partners.

A Community-Level HIV Prevention Intervention for Young Black MSM

Investigators: Susan Kegeles (PI); John Peterson (Georgia State University, Co-PI); Greg Rebchook (Co-PI); David Huebner (University of Maryland, Co-investigator)

This project involves adapting the Mpowerment Project for young Black MSM in Texas and testing its efficacy in reducing sexual risk behavior and increasing HIV testing. The adapted project is called United Black Ellument. The adapted intervention was first implemented in Dallas, and then it was implemented in Houston.

The project also involves a qualitative study of young Black MSM who are being followed over several years to see the issues that they face within HIV prevention efforts.

Community Mobilization to Improve the HIV/AIDS Continuum of Care Among Young Black Gay Men

Investigators: Susan Kegeles (PI), Greg Rebchook (Co-PI), John Peterson (Georgia State University), David Huebner (George Washington University)

This project involves using a community empowerment and mobilization approach to help and motivate young black men who are living with HIV to engage in care and take ART medications regularly. This includes adapting the Mpowerment Project so that it focuses, in addition to risk reduction and HIV testing, on helping men deal with internalized and external HIV stigma, support men living with HIV to get support from friends in their social networks, and increase HIV treatment literacy.

Translational and implementation research

Prevention Research Center (PRC)

Investigators: Marguerita Lightfoot (PI), Greg Rebchook, Janet Myers, Susan Kegeles, Emily Arnold; George Rutherford (GHS); Rob Newells (AIDS Project of the East Bay or APEB)

This project addresses the significant HIV health disparities among African Americans by strengthening community engagement and supporting implementation of evidence-based strategies and approaches. The PRC will also translate and disseminate high-impact prevention research, the STYLE (“Strength Through Youth Livin’ Empowered”) Implementation Package from our core research project, train students, public health professionals, and community members, and continually evaluate the PRC’s activities.

The PRC is collaborating with the AIDS Project of the East Bay (APEB) in Oakland, CA to adapt, implement, and evaluate the evidence-based intervention, STYLE, to improve engagement in healthcare among MSM of color living with HIV (African American and Latino), with a focus on younger men.



Photo: STYLE Project (M+)

Past projects

Technology to Connect At-Risk Youth to Testing

Investigator: Marguerita Lightfoot (PI)

Peer education and outreach strategies have been successful at reducing sexual risk behavior and increasing the use of health resources in adolescents and other at-risk groups, including adults residing in census tracts where STI rates are high. A potential vehicle for outreach to adolescents is socially interactive technologies (e.g., text messages).

Research Finding: *We found that text messaging between peers is a feasible and acceptable strategy and has the potential for impacting HIV testing. Given the low number of youth accessing health care services and STI/HIV screening, innovative strategies such as this one are needed to address the barriers that exist and encourage connection with the healthcare system and STI screening.*

Common approaches for reaching youth are resource intensive, and frequently implemented in schools or community programs. This neglects those youth not connected to such settings, who are often the most in need of services.

The CRUSH Project: Connecting Resources for Urban Sexual Health

Investigator: Janet Myers (Evaluation PI)

The CRUSH project demonstrated the feasibility and effectiveness of integrating comprehensive sexual health services in a youth clinic to support HIV prevention and care engagement. Lessons learned here: <http://ow.ly/RiiK30igmPc>

CAPS/PRC Resources

Research and publications with Youth:

<https://prevention.ucsf.edu/library?title=youth>

Fact Sheets on Youth:

- What are adolescents' HIV prevention needs?
<https://prevention.ucsf.edu/research-project/adolescents/> | [Spanish](#)
- What is the role of the family in HIV prevention?
<https://prevention.ucsf.edu/research-project/family/> | [Spanish](#)
- Parents and children
<https://prevention.ucsf.edu/research-project/parents-and-children> | [Spanish](#)
- What works best in sex/HIV education?
<https://prevention.ucsf.edu/research-project/sex-education/> | [Spanish](#)

Survey Instruments & Scales: <https://prevention.ucsf.edu/resources/survey-instruments-and-scales>

- Topics include counseling and testing, healthcare providers, risk behavior, adherence, coping, substance use and knowledge/attitudes.

Evaluation Manuals:

- [Good Questions Better Answers](#): A Formative Research Handbook for California HIV Prevention Programs
- [Working Together](#): A Guide to Collaborative Research in HIV Prevention

Intervention Curricula: <https://prevention.ucsf.edu/resources/intervention-curricula>

- Healthy Oakland Teens Curriculum (adolescents)
- Mpowerment Project (young gay/bisexual men)

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