

Evaluating Complex Combination HIV Interventions

The London-wide HIV Prevention Programme: Design and Methods

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INTRODUCTION

The HIV epidemic in the UK remains concentrated in London and in two at risk communities, men who have sex with men (MSM) and Black African heterosexual men and women, see figure 1. Through the National Institute for Health Research School of Public Health Research (NIHR SPHR) Public Health Practice Evaluation Scheme (PHPES), the University College London in partnership with Public Health England and the LHPP, is currently evaluating the London-wide HIV Prevention Programme (LHPP).

The LHPP is an evidence-based behavioural intervention that uses a combination of media, condom distribution, and outreach programmes to interface with and complement HIV test and treat services commissioned by Local Authorities in sexual health clinics since 2013. This approach has been designed to achieve a comprehensive combination intervention package across London for MSM and Black Africans. The UCL evaluation is designed to deliver a comprehensive and multi-methods evaluation of the LHPP.

The overarching aim of the LHPP is to reduce new HIV infections and late diagnosis of HIV infection, and thus to reduce the prevalence of those with undiagnosed HIV. The objectives of the LHPP are to:

1. Increase HIV testing
2. Increase consistent condom use
3. Increase adoption of safer sexual behaviours.

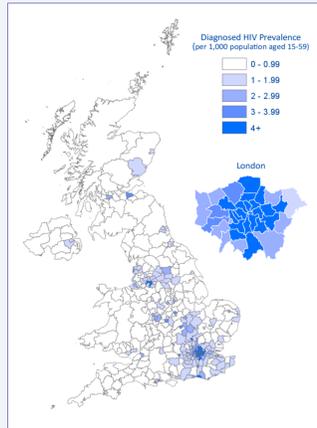


Figure 1. Prevalence of diagnosed HIV infection by area of residence among population aged 15-59: UK, 2014¹

DO IT LONDON CAMPAIGN

From 1st April 2013, a range of public health responsibilities, including the commissioning of HIV prevention services, transferred from the NHS to local authorities. In November 2013, Leaders of all 32 Councils in London agreed to establish and fund a new three-year, London-wide prevention initiative. A total of £3.4 million has been allocated to the LHPP to deliver a number of key HIV prevention and outreach services with at-risk populations in London.

The new LHPP has three key elements:

- Media and communications on HIV (for all Londoners, with specific campaigns targeted at key at-risk groups of MSM and black African communities);
- Condom procurement and distribution (for MSM only); and
- Targeted digital and risk-focused outreach (for MSM only).

MSM Condoms and Outreach:

The LHPP aims to distribute 1.5 million condoms and lubricant sachets to a minimum of 80 MSM venues across London and to deliver 76,000 face to face outreach contacts per year at 22 priority venues, as well as outreach at 6 key events a year (e.g. Gay Pride).

Communications:

The LHPP media campaign focuses on HIV testing and condom use with a core common brand, "Do it London" that can speak to a range of audiences without any stigmatisation. The 2013 needs assessment identified new priorities for communications, including much more extensive use of public-facing campaigns, digital and social media. So, while not part of the previous NHS London programmes, a large new media component sits at the heart of the LHPP. This has been commissioned to specifically recognise the changing patterns of social behaviour in the priority target groups, to link in to, for example, social networking sites, adverts on public transport, articles in the press and public transport stations.



METHODS

The overall aim of the evaluation is to establish the extent to which the LHPP meets its aims and objectives and through what methods. The evaluation is a collaboration between those in academia, national and local public health, and those representing patient and public views to share expertise and allow generalisation of results across different environments.

Objectives of the Evaluation

- To measure the extent of the LHPP dissemination and penetration in the target populations
- To assess the impact of the LHPP on HIV testing uptake and frequency in target populations
- To ascertain condom use and adoption of safer sex behaviours among MSM and Black African communities
- To undertake process evaluation to improve understanding of which components of the LHPP programme works for who and in what circumstances

The overall study design uses a mixed methods approach to evaluate the LHPP programme, which is in line with the complex intervention evaluation approach advocated by the MRC guidance. The major sources include:

Quantitative community surveys:

Two large scale cross-sectional community surveys of the target populations (MSM (n=750) and Black African (n=750)). Using well-established methodologies we will assess the reach and impact of the LHPP by asking about engagement with LHPP services (e.g. campaign recognition or use of condom distribution services), impact on subsequent health behaviour (e.g. their decision to test, use condoms, use of alcohol and recreational drugs during sex, etc.) and recent sexual and testing behaviour. Respondents will also be asked to provide an oral swab, which will be anonymously tested for antibodies to HIV.

Surveillance data:

Two sources of surveillance data will be analysed to inform this evaluation. GUMCAD is the routinely collected dataset on all attendances at English GUM clinics and will be analysed to assess changes in service use and HIV testing among at-risk populations during the period of the intervention using time-series analyses as well as compared to trends in service use in other areas outside of London, where service provision will be different. Similarly, late HIV diagnosis data will be analysed to assess trends in this outcome measure and compared to areas outside of London with a different service provision.

Qualitative studies:

We will purposively sample individuals from the two target populations to explore which aspects of the LHPP programme works for whom and in what circumstances. Focus groups will be used to investigate the drivers and barriers to use of services and the impact that the services have on subsequent behaviour changes. A purposive quota sampling approach will ensure diversity in age, HIV testing experience, ethnicity, migration status and service use histories in those who take part in the focus group discussions. Recruitment will occur from a variety of settings (e.g. from community and social venues as well as through social and other media or online advertising).

Process analysis:

The data provided by the commissioned service will also be employed to evaluate the LHPP. The specifications for each of the three elements of the programme (condoms, media and outreach) will stipulate a data set for collection and a range of key performance indicators identified at the initiation of the programme that will support its monitoring and evaluation.

SUMMARY

Rates of HIV diagnoses in the UK are at a ten-year high, with the majority occurring in London and in at risk groups; namely MSM and those of Black African ethnicity. In MSM in particular many are recent infections indicating on-going transmission. The UCL evaluation will determine the extent to which the LHPP meets its overall aim to reduce HIV incidence in key at risk groups and evaluates the impact of the LHPP on the inequalities which remain evident in HIV transmission and subsequent outcomes in the key populations targeted by the LHPP. This evaluation will also provide evidence of the robustness and generalisability of the LHPP to be applied across the whole of England thus supporting another key aim of the SPHR.



Reference

1. Skingsley A, Yin Z, Kirwan P, Croxford S, Chau C, Conti S, Presanis A, Nardone A, Were J, Ogaz D, Furegato M, Hibbert M, Aghaizu A, Murphy G, Tosswill J, Hughes G, Anderson J, Gill ON, Delpech VC and contributors. HIV in the UK – Situation Report 2015: data to end 2014. November 2015. Public Health England, London.