TITLE: Antecedents & Social Segmentation of Oral-SIT Beliefs Following Exposure to HIV Oral Self-Testing

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STUDENT SUBMISSION: Yes

TOPIC/TARGET AUDIENCE: Researchers, program developers, and evaluators with interest in HIV prevention

ABSTRACT: Background: Oral self-implemented HIV testing (Oral-SIT) has significant potential for increasing the reach of the current HIV-testing system. However, to be a successful screening tool, people need to use the kit multiple times per year. Little is understood about factors influencing continued use of Oral-SIT over time.

Purpose: To better understand factors influencing continued use of Oral-SIT, the current study examined hypothesized social and psychological antecedents of Oral-SIT beliefs (OSB) developed after a single Oral-SIT trial.

Methods: African American MSM, a particularly high-risk population, with no prior Oral-SIT experience (n=181) were administered a novel measure assessing OSB following administration of an Oral-SIT kit.

Results: Linear regression indicated that OSB was significantly related to social stigma (B=-.18, SE=.06, p=.001) and preferred HIV self-test kit cost (B=.14, SE=.05, p=.004) (i.e., individuals with low levels of stigma or a preferred cost of more than \$20 had significantly more positive OSB).

Conclusions: Results highlight psychosocial and economic factors that drive belief formation following an initial exposure to Oral-SIT. High levels of social stigma may interfere with the development of positive beliefs following an initial Oral-SIT trial. Moreover, the high retail cost of Oral-SIT (>\$40/kit) would be expected to inhibit continued use over time.

OBJECTIVE(S): Identify individual-level antecedents related to beliefs about oral HIV self-implemented testing among a high-risk population, following exposure to self-testing.

Discuss potential barriers to and facilitators of continued use of oral self-implemented testing over time among African American MSM, and implications for intervention.

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