

## **DROP IN RAPID TESTING AT COMMUNITY AGENCY**

### **Authors:**

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### **Background/Purpose:**

New Zealand recorded the highest number of new HIV infections on record in 2016 (243) after continual increases since 2011. Among the 94 MSM with a baseline CD4 count 26% recorded a CD4 < 350 indicating late diagnosis. New WHO guidelines recommend that people be offered treatment at diagnosis to improve long term health outcomes and decrease ongoing transmission through attaining undetectable. The first step is to ensure people are tested and know their status to engage in TasP as an effective strategy.

### **Approach:**

Current rapid testing models involve appointment times of 45 minutes with pre and post test counselling. Given the time requirements appointments are made days or weeks in advance. Our pilot study switched our rapid testing methodology from the 20 minute SD test to the Biolytical 60 second HIV and syphilis combo test. We moved to a drop in clinic requiring no appointments and reduced pre/post test counselling to a conversation. Peer testers were engaged as testing staff in place of counsellors.

### **Outcomes/Impact:**

Over 3 months 377 evaluations were completed by testing clients during the pilot. 23% of testers had never tested for HIV previously. 98% of testers were extremely or very satisfied with the testing experience. 39% saw booking an appointment as a barrier to testing. 99% found no appointment meant testing was easy to access.

Client : "Being able to walk in when ready means no backing out/changing of my mind (like having to wait for an appointment)"
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### **Innovation and Significance:**

We have adopted the 60 second rapid test as standard and eliminated appointments in favour of drop in testing. Testing numbers have remained consistently high. Testing clients have moved from episodic based testing to routine regular testing due to the convenience of access. Testing increased by 114% during the pilot from the previous year and has been maintained

### **Disclosure of Interest Statement :**

*Body Positive is supported through the Ministry of Health. No pharmaceutical grants were received in the development of this study.*