



WEPDC0107

# Online Supervised HIV Self-Testing identified high HIV yield among Thai men who have sex with men and transgender women

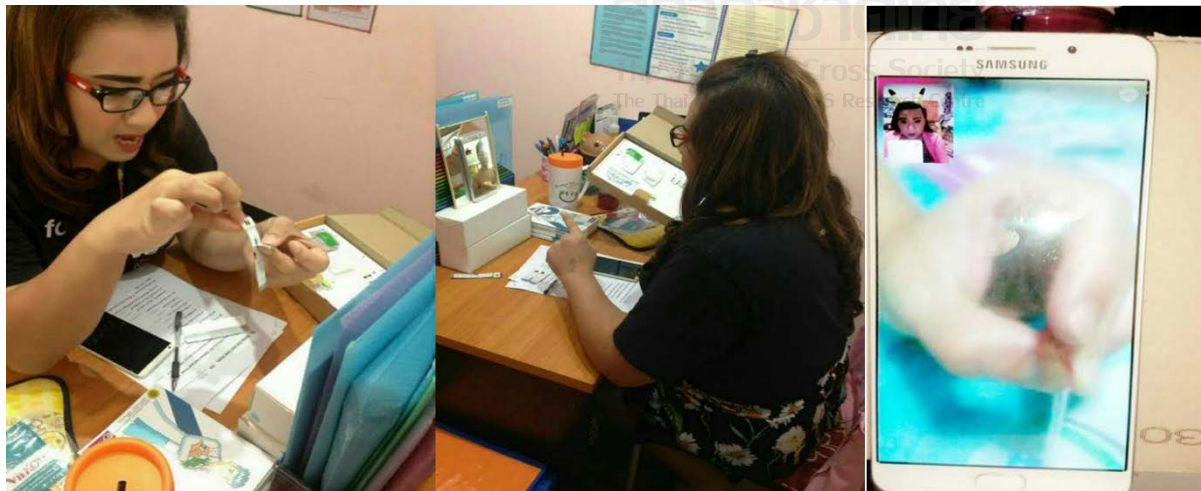
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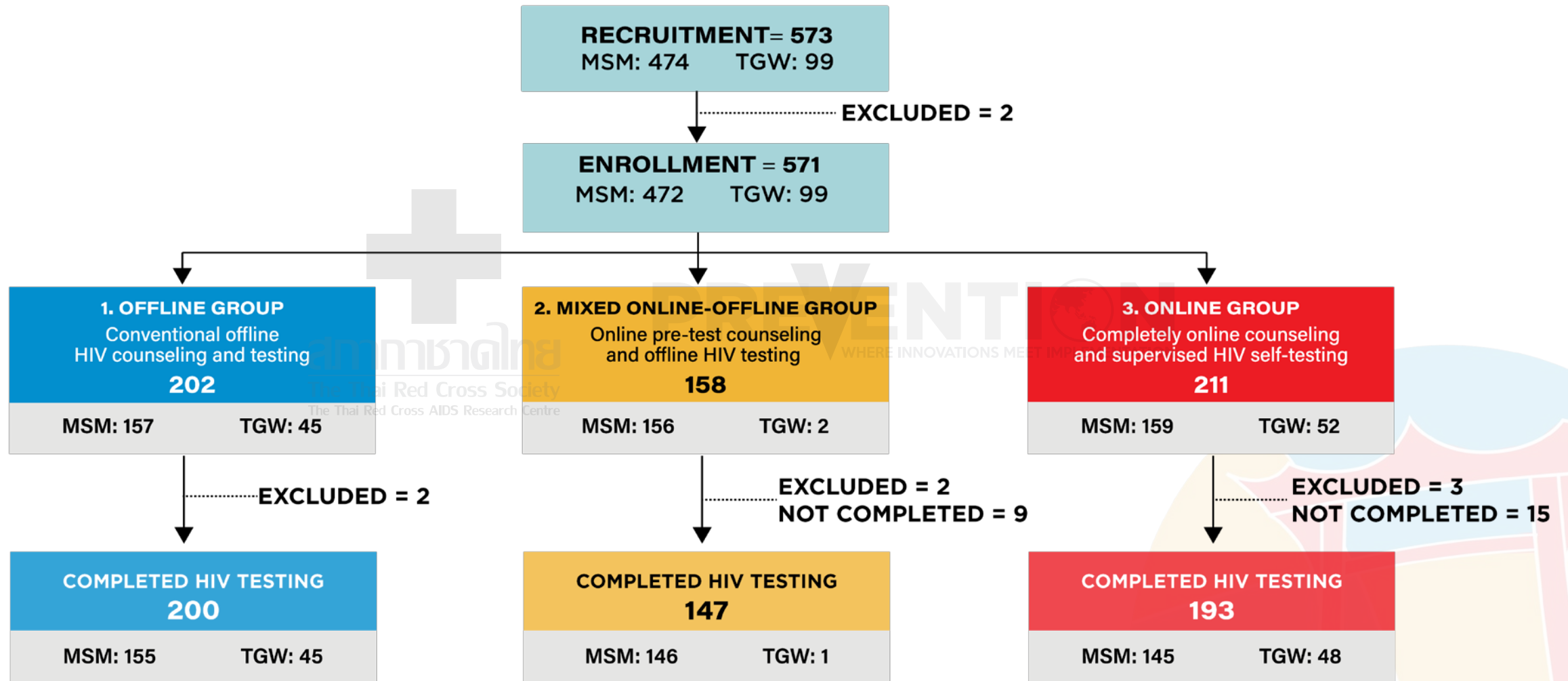
# Background & Method

- Over half of new HIV cases in Thailand are MSM and transgender women (TGW).
- Innovative and effective strategies are needed to enhance the Recruit-Test-Treat-Prevent-Retain cascade for HIV prevention and care among MSM and TGW.
- We hypothesized that “integrating varied levels of online HIV services has high potential to engage specific sections of MSM and TGW populations in HIV services”.

- MSM and TGW self-selected to enroll into 1) Offline HIV counseling and testing (Offline group) OR 2) online counseling and online, supervised, HIV self-testing (Online group) OR 3) online pre-test counseling and offline HIV testing (Mixed Online-Offline group).
- Linkage to ART was provided immediately after HIV-positive/reactive test results were known.
- Self-administered questionnaires used to collect socio-demographic data, stigma and discrimination, sexual and drug use behaviors, perceived barriers and facilitators for access to HIV testing
- Used binary logistic regression to identify factors associated with unsuccessful linkage to ART



# Results



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Characteristics	Offline group	Mixed Online-Offline group	Online group	P-value (Offline VS online group)
First time tester (%)	42.4	18.1	47.3	<0.001
HIV prevalence (%)	13	3.4	15.9	0.001
Linkage to ART (%)	83.9	75.0	52.8	0.02

- Factors significantly associated with unsuccessful linkage to care included: being in the Online group (aOR=8.54, 95%CI 1.08-67.59, p=0.04), aged < 17 years at first sex (aOR=13.16, 95%CI 1.62-107.08, p=0.02), and having single partner (aOR 12.61, 95%CI 1.52-104.9, p=0.02).
- Stigma and discrimination experiences did not reduce the chance of successful ART linkage.

# Conclusions

- Offering online supervised HIV self-testing successfully engaged MSM and TGW with high HIV-reactive yield into HIV testing service.
- Linking clients tested HIV-reactive online to come out for offline HIV confirmation and ART initiation proved to be a real challenge.
- Innovative methods to support transition of these clients from online to offline services are urgently needed.