

TRUST

Good Evidence for the Risk Reduction Chapter
Evidence-Based for the Structural Intervention Chapter



POPULATION

➤ Young Black or African American men who have sex with men (YBMSM) and transgender women (TW)

KEY INTERVENTION EFFECTS

➤ Increased HIV self-testing

BRIEF DESCRIPTION

TRUST is a brief, peer-based behavioral intervention designed to increase uptake of consistent (every three months), rapid HIV self-testing (HST). TRUST is delivered via friend pairs to enable joint learning of self-testing and support future self-testing. Friend pairs consist of the primary eligible participant (PEP) and a friend of the PEP who engage in HIV self-testing together using rapid HIV self-test kits.

The intervention includes:

- An interactive session that consists of describing how HIV testing fits into an optimal sex life, HIV self-testing instruction, skills building on how to use the self-test, identifying, and communicating the specific peer support needed to support consistent testing, planning for risk reduction and consistent testing over time
- Free HIV self-test kits at baseline visit and every 3 months via preferred delivery method (control participants also received free HIV self-tests)

DURATION: One year

SETTING: New York, New York

STUDY YEARS: July 2016 – December 2017

STUDY DESIGN: Randomized controlled trial (RCT)

DELIVERERS: Trained peer educator

DELIVERY METHODS: Counseling, HIV self-test kits

STUDY SAMPLE

The baseline study sample of N = 188 PEPs was characterized by the following:

- 53% Black or African American
- 30% African/other
- 7% Afro-Latino
- 9% Caribbean
- 86% persons identifying as male
- 12% persons identifying as transgender
- 2% persons identifying as female
- <1% persons identifying as another gender
- Means age 23 years

STRUCTURAL COMPONENTS

Access – HIV testing

- Increased access to HIV testing via provision of self-test kits

Physical Structure – Services provided in nontraditional settings

- HIV self-testing could be done at a location chosen by the participant

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

- Participants in the intervention arm had twice the odds of reporting HIV self-testing in the past 3 months at the 3-month follow-up as participants in the control arm (57% vs 42%; unadjusted Odds Ratio [uOR] = 2.29; 95% Confidence Interval [CI]: 1.15 - 4.58).

- Participants in the intervention arm had almost twice the odds of reporting HIV self-testing in the past 3 months at the 6-month follow-up as participants in the control arm (54% vs. 42%; uOR = 1.94; 95% CI:1.00 - 3.75).

CONSIDERATIONS

- Two PEPs reported testing HIV positive during follow-up (1 in the intervention arm and 1 in the control arm). Five friends of PEPs self-reported testing positive during follow-up (2 in the intervention arm and 3 in the control arm). One PEP in the intervention arm reported using HIV self-test to identify the new infection; however, the one PEP in the control arm did not report using HIV self-testing to identify the new infection.

ADVERSE EVENTS

- The author did not report adverse events.

FUNDING

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PRIMARY STUDY

Frye, V., Nandi, V., Paige, M.Q., McCrossin, J., Lucy, D., Gwadz, M., Sullivan, P., Hoover, D., Wilton, L., & TRUST Study Team. (2021). [TRUST: Assessing the efficacy of an intervention to increase HIV self-testing among young Black men who have sex with men \(MSM\) and transwomen](#). *AIDS and Behavior*, 25(4), 1219-1235. doi: 10.1007/s10461-020-03091-x.

PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

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