Secret Shopper Evaluation of HIV Testing Services for Youth in LAC

September 14, 2017 – Los Angeles County Commission on HIV
Objectives

By the end of the session participants will:

- Increase their understanding of barriers and facilitators to access of local HIV testing services for youth; and
- Identify next steps at the agency and community level to address identified barriers.
Background
LAICCSS

- Los Angeles Integrated Center of Care and Supportive Services (LAICCSS) was a collaborative of youth-serving agencies from 2014-2017 through the Office of Minority Health
  - AltaMed, APLA, CHLA, JWCH, LA LGBT Center, REACH LA
  - Focused on supporting young gay and bisexual men ages 20-29
  - Goal was to increase access to health services, improve health outcomes, and address structural barriers.
Background

- Adolescent HIV Consortium implemented the Undercover Youth Test-Site Evaluation Project in 1996
- Evaluated 16 sites in Los Angeles County
- Evaluation components: Accessibility, environment, content, staffing, and transitional support and linkage
AHC Evaluation Results

- “They told me it would be a 10-15 minute wait, I waited for 2 hours!”,
- “The counselor never introduced herself.”
- “The guy said, ‘Who is here for an HIV test? Come up to the reception desk’”,
- “He didn’t ask me why or when I engage in risky behavior”,
- “I felt judged when I told him I had had an STD”
AHC Evaluation Results

- “I got judged and technical information, no one asked how I was feeling”
- “He did not ask me why I wanted to get tested”
- “It was a straight lecture on HIV”
- “I felt completely out of touch with my counselor. Although she was friendly, I still was not welcomed to engage in the session”
- “If I had been this real person, each of these sessions would have been a waste of time”
AHC Evaluation Results – So then what?

- Findings presented back to multiple stakeholders including HIV testers.
- Multiple trainings developed in coordination with USC AETC that included standardized patients.
- Modifications to existing HIV counselor training through OAPP (i.e. DHSP)
- Opportunity for organizations to reflect on their own practice and approach
Methods
<table>
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<tr>
<th>Time Frame</th>
<th>Activities</th>
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<tr>
<td>Spring 2016</td>
<td>• LAICCSS CAB identified sites to be evaluated</td>
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<td>Summer 2016</td>
<td>• Conducted lit review and identified core areas of evaluation</td>
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<td>• Key informant interviews</td>
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<td>• Developed evaluation tool</td>
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<tr>
<td>Fall 2016</td>
<td>• Submitted to IRB</td>
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<td>• Notified sites</td>
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<td>January 2017</td>
<td>• Recruited youth evaluators</td>
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<td>• Conducted orientation for staff and youth</td>
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<td>February-April 2017</td>
<td>• Conducted secret shopper visits</td>
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Site Visit Process

- Youth trained by CHLA staff
- All youth tested for HIV prior to first site visit
- Compensated $25/hour in Target gift cards
- Staff escorted evaluators to clinic site
- Staff debriefed with evaluators and completed evaluation tool
Evaluation Tool

- Core Areas of Evaluation based on literature review and key informant interviews
  1. Confidentiality & privacy
  2. Youth-centered counseling
  3. Sex-positive health messaging
  4. Youth-friendly clinic environment

- 53 Questions
  - Multiple choice and open ended questions
Sample Questions

- Did people in the clinic call you by your name and gender pronouns?
- Did anyone offer to help you complete forms?
- After arriving, how long did you wait before seeing a provider?
- What things about the space made you feel safe and welcome?
- Were the clinic’s privacy policies explained to you in a way that you could understand?
- Did the counselor ask you personal questions about who you are or what your interests are?
- Did you feel the counselor was attentive to your specific needs/feelings at the time of disclosure?
- Did you leave with additional resources you needed based on your HIV results? If yes, which ones?
- Did they talk to you about PrEP or PEP? If yes, describe.
Youth Evaluators

- 12 youth completed required 2 hour orientation
- 7 youth completed requirements to conduct site evaluations
  - All between the ages of 18-25
  - 1 evaluator identified as transmasculine
  - 4 Black/African American, 3 Latino
  - All HIV-negative
Evaluated sites

- 19 sites were identified by LAICCSS CAB
  - Hollywood (5), Long Beach (3), South LA (6), East LA (3), DTLA (2)
  - 1 mobile unit, 1 PH clinic
  - 16 sites received a visit (same number as 1996 AHC evaluation)
Evaluation Results
Wait Time to See a Provider

- Wait times on low or high end
  - 43% waited 20 minutes or less
  - 44% waited 60 minutes or more

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<th>Wait Time</th>
<th>Percentage</th>
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<tr>
<td>Under 5 minutes</td>
<td>12%</td>
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<tr>
<td>5 - 10 minutes</td>
<td>6%</td>
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<tr>
<td>10 - 20 minutes</td>
<td>6%</td>
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<tr>
<td>20 - 30 minutes</td>
<td>6%</td>
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<tr>
<td>30- 45 minutes</td>
<td>0%</td>
</tr>
<tr>
<td>45 - 60 minutes</td>
<td>6%</td>
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<tr>
<td>60 minutes or more</td>
<td>44%</td>
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Clinic Environment

- 69% reported front desk staff friendly upon arrival
- 88% said furniture “comfortable” or “very comfortable”
- 100% said environment was “clean” or “very clean”
- Only 44% reported signs indicating a safe space
Condoms Made Available

Condoms made available to a little over half of evaluators

Yes: 56%
No: 44%
Privacy and Confidentiality Policies

- Half of evaluators reported:
  - Policies not explained in way they could understand

- Questions about confidentiality and disclosure not explained in way they could understand

![Bar chart showing responses to understanding policies and answering questions](chart.png)

- Policies Explained in Way You Could Understand:
  - Yes: 25%
  - Kind of: 25%
  - No: 50%

- Questions About Confidentiality and Disclosure Answered in Way You Could Understand:
  - Yes: 37%
  - Kind of: 13%
  - No: 50%
Counselor Introduced Themselves to You

Majority of counselors introduced themselves

Yes 69%
No 31%
Someone Explained Testing Process throughout Visit

Over half said testing process was not explained throughout visit

Yes 44%
No 56%
Counseling Session Characteristics

- Less than half reported counselor:
  - Focused on topics evaluator brought up for discussion
  - Asked for evaluator’s input on risk reduction
  - Celebrated evaluator’s health choices…

Counselor….

- focused on topics evaluator brought up for discussion: 25%
- asked for evaluator's input on risk reduction: 38%
- celebrated evaluator's health choices: 44%
Sexual Health in Counseling Session

- Over half reported counselor:
  - Talked about sex in positive way
  - Told sexual health information in understandable way
  - Able to answer sexual health questions

Counselor....

- Talked about sex in positive way: 56%
- Told sexual health information in understandable way: 56%
- Able to answer sexual health questions: 63%
Disclosure and Follow-up

Disclosure
- 69% felt counselor was comfortable reporting test results and was attentive to their needs at time of disclosure
- 75% said counselor provided “just enough” information when HIV results disclosed

Follow-up
- Only 31% left with additional resources
- Only 50% said counselor talked about PrEP or PEP
“They didn't let me get tested. They told me that I need to make an appointment to see them for HIV testing. One person told me about my insurance and told me that I have to be seen in San Bernardino County.”

“She moved really fast. She spoke faster than me. If this was my first time getting tested, I would've been lost.”

“Judgmental tone when they asked me when the last time I had sex and then told me to stick to a three-month testing schedule with attitude inflection. Basically, it made me feel like I shouldn't have come in today to get tested”
Overall Experience

“The counselor introduced himself and thanked me for getting tested with them. He brought out other options after I got tested just in case I knew what options I had if I had unprotected sex and possible HIV exposure. He brought up PEP and PrEP, which was exciting.”

“He explained how HIV testing works. He compared PEP and PrEP and shared how I could get them both. He told me about the process (i.e. how long I have to be on it, how often I'll need check-ups to make sure it's working, etc.) He made me feel comfortable by answering all my questions. He also celebrated my health choices around protection. He said was rare and congratulated me.”
Limitations
Limitations

1. Convenience sample
   - No youth living with HIV volunteered to be evaluators
   - Not able to evaluate how counselors managed HIV-reactive results

2. Snapshot evaluation
   - Results based on one visit per site
   - Only one counselor’s performance evaluated

3. HIV testing only
   - No information on how sites conduct follow-up on reactive STI test results
Panel Discussion: Next Steps