

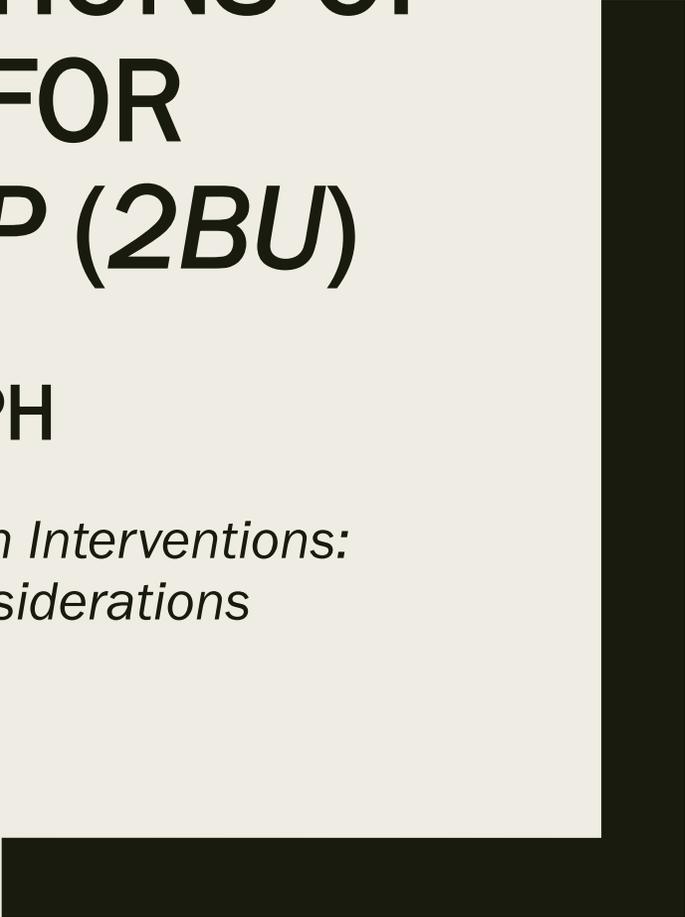


**THE TRIALS AND TRIBULATIONS OF  
USING TELEHEALTH FOR  
*BUILDING BROTHERS UP (2BU)***

**Kimberly A. Kisler, PhD, MPH**

*Delivery of Telehealth in Clinical Care and Research Interventions:  
Challenges, Barriers, Successes, & Future Considerations  
Virtual Mini Conference*

June 18<sup>th</sup>, 2021



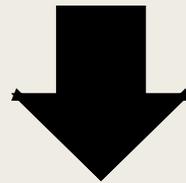
# Introduction

- Eight demonstration sites funded by Health Resources and Services Administrations' (HRSA) Special Projects of National Significance (SPNS)
  - *Implementation of Evidence-informed Behavioral Health Models to Improve HIV Health Outcomes for Black Men Who Have Sex With Men*
- Friends Community Center (FCC), the community research site of Friends Research Institute (FRI)
  - *Objective:* Reduce HIV transmission and acquisition and the risks that can result from substance use
  - *Target Populations:* MSM, transgender, and gender variant individuals

# Intervention Overview

## Original Model of Care:

*Youth-focused Case Management Intervention to Engage & Retain Young Gay Men of Color in HIV Care (YCM)*

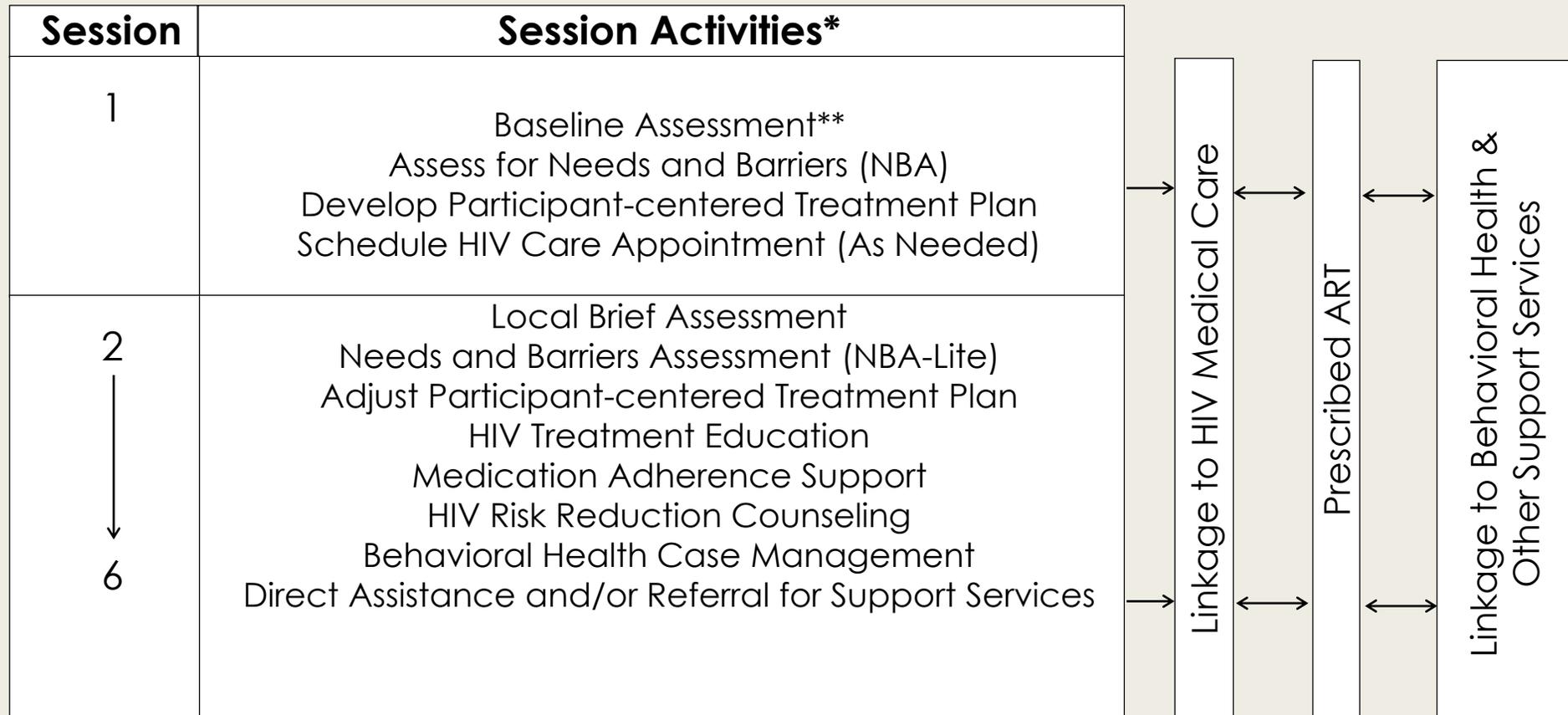


## Adapted Model of Care:

*Building Brothers Up (2BU)*



# 2BU Intervention Activities



\*Sessions occurred weekly in month 1 (Sessions 1-4), and monthly in months 2 & 3 (Sessions 5-6).

\*\*Baseline Assessment included MSE-PS, Local Evaluation, & Local Brief Assessment

# Target Population

## ■ Eligibility Criteria:

- BMSM living with HIV
- Ages 18-65 years
- Not in HIV care or at risk of falling out of HIV care

## ■ Sociodemographic Highlights:

- *Age:* 18-34 (24%), 35-44 (24%), 45-54 (24%), 55-65 (29%)
- *Insurance:* 86% had Medicaid/Medi-Cal/Medicare
- *Education:* HS diploma (36%), More than HS (39%)

# Impact of COVID-19 on 2BU Activities

- First, we created a **fully in-person** intervention.
  - Historically, had worked well for other programs at FCC.
  - Great gateway into *2BU* from other programs.
  - Easy to access several programs on-site at once.

***Then COVID-19 hit...***

- Second, we transitioned *2BU* into a **fully remote/virtual** intervention.
  - Could be delivered over the phone or via Zoom.
  - Wanted full accessibility to all *2BU* components (i.e., screening, enrollment, assessments, peer case management sessions) regardless of COVID-19 impact.

# Telehealth Adaptations Made To *2BU* Activities

- Shifted **recruitment** to primarily remote/virtual strategies (i.e., online, incentivized snowball recruitment)
- **Screening** process primarily done remotely/virtually via phone or Zoom
- **Enrollment** procedures primarily conducted remotely/virtually via phone or Zoom
  - Informed consent and other signatures collected via DocuSign
  - Incentives payout via electronic gift cards
- **Assessments** conducted remotely/virtually via phone or Zoom
  - Link sent to participant via email → Staff remains on phone or Zoom during survey (if possible) → Electronic incentive payout
- **Peer case management** sessions completed remotely/virtually via phone or Zoom

# Effectiveness of Telehealth for 2BU Activities

	Pre-COVID (10/28/19-3/11/20)	During COVID (3/12/20-12/31/20)
Screens	72	19
Enrollments	59	11
Attended Session 1	59	10
Attended Session 2	31	20
Attended Session 3	34	12
Attended Session 4	28	16
Attended Session 5	39	10
Attended Session 6	25	19
6-month F/U Completed	N/A	35
12-month F/U Completed	N/A	39
Withdrawals	1	3

- Total Screens: 91
- Eligible Screens: 87
- Eligible but not interested: 17
  - One main reason for not being interested: technology barriers (i.e., phone, internet)

- Withdrawals: 4
- PI withdrawal due to safety concerns: 1
- Participant self-withdrawal: 3
  - No longer Interested: 1
  - Technology Barrier(s): 2

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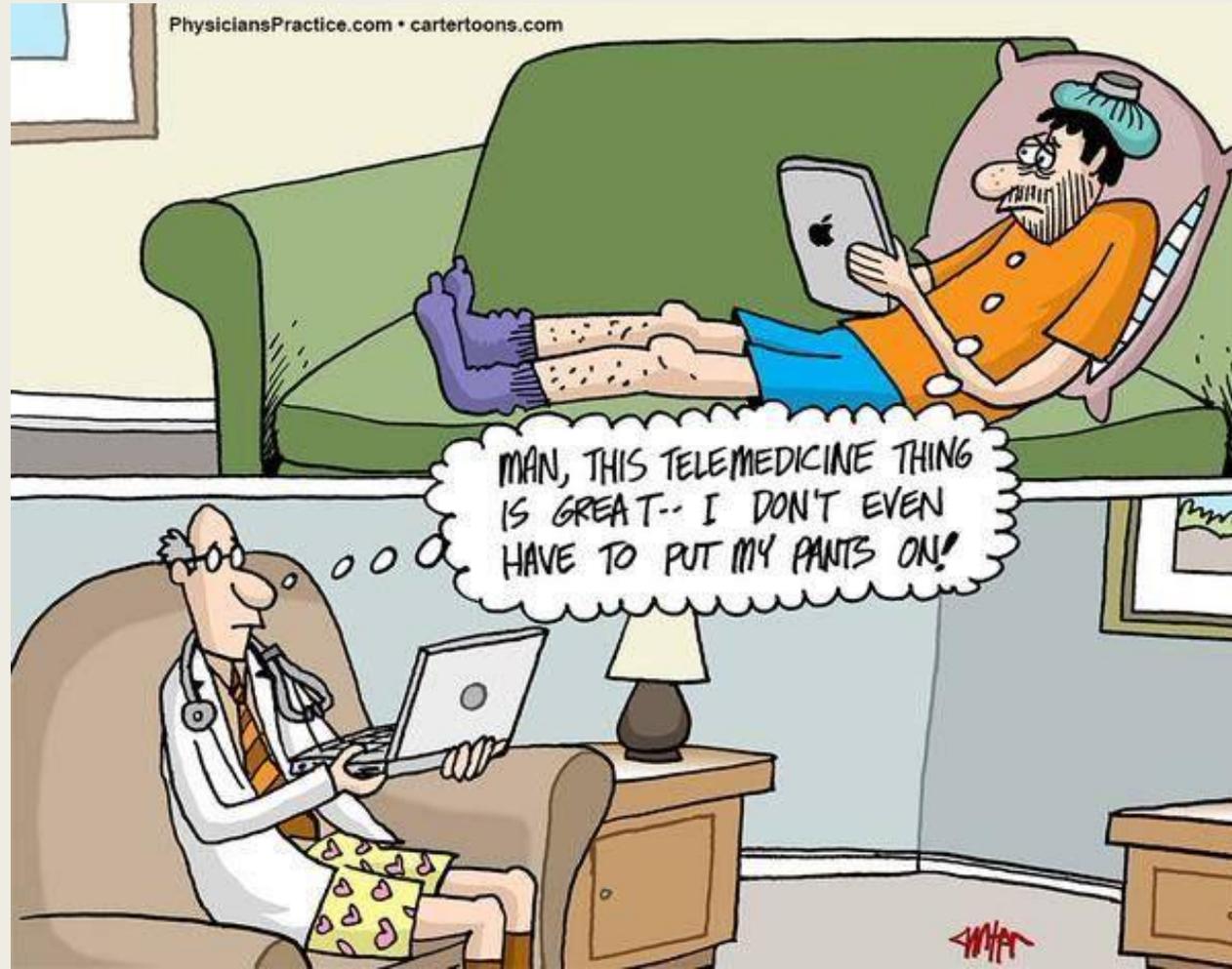
**But, the participants did not respond to the virtual/remote delivery. ☹️**

- Third, we created a **hybrid** intervention whereby participants could participate in-person, over the phone, via Zoom, or any combination of in-person and/or remote/virtual.

# Lessons Learned

- In-person delivery of *2BU* intervention and evaluation was most successful
  - For remote/virtual delivery, many participants faced challenges, such as:
    - Accessing reliable internet
    - Finding time and a quiet space without distractions to complete intervention and/or evaluation
    - Identifying a private space where they felt comfortable disclosing confidential information
    - Feeling knowledgeable and confident in accessing email, DocuSign, and Zoom

Telehealth is great for everyone, right?!?  
Not necessarily.



# Future Considerations

- We will **miss out on serving** those who need services but lack comfort with/interest in utilizing telehealth.
- Provide both **in-person and remote/virtual options** for participation in all intervention and evaluation components.
- For those who opt into remote/virtual participation, be prepared to provide instruction **to enhance literacy around using telehealth technology** (i.e., email, DocuSign, Zoom).
  - This takes time and patience!

Are you a Black man living with HIV  
who has sex with men?

**2BU**

**BUILDING BROTHERS UP**

You may be eligible to participate in a 3-month  
Peer Case Management program where you will attend  
6 sessions, complete surveys at baseline, during sessions, and at  
6- and 12-month follow-ups. You may earn up to \$330 in gift cards.

For more information,  
please call or text  
Friends Community Center  
**(323) 422-2913**

Friends Community Center

A Division of Friends Research Institute, Inc.

6910 Santa Monica Blvd.  
Los Angeles, CA 90038

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