



Health service-based HIV testing and counselling: a review of European guidelines

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Never Stand Still

Arts & Social Sciences

Centre for Social Research in Health

BACKGROUND TO THE SURVEY



- Review of HIV testing and counseling guidelines relevant to European settings
 - to document the various best practice recommendations
 - establish extent of variation within various guidelines
- Part of a larger project being carried out by CSRH at UNSW Australia on behalf of HIV in Europe Initiative
 - assess and increase understanding of similarities and differences in the HIV testing process across countries in the WHO Europe Region, and how this may affect uptake of HIV testing and effective linkage to other services
 - also includes European survey and expert consultation

METHODS

- Analysis of recommendations, and evidence used to inform these, in regional and global guidelines
 - **Regional:** (1) HIV in Europe (2012), (2) European Centre for Disease Prevention and Control (ECDC, 2010), (3) European Office of the International Union against Sexually transmitted Infections (IUSTI, 2008), (4) WHO Regional Office for Europe (2010), (5) European Monitoring Centre for Drugs and Drug Addiction (EMCDDA, 2010)
 - **Global:** (6) WHO/UNAIDS (2007); (7) WHO (2012)
 - **National:** US (CDC, 2006), UK (BHIVA, BASHH, 2008)

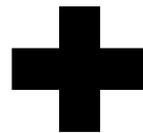


FINDING 1: TYPE OF PRE-TEST INFORMATION

Issues until the test is carried out:

- The reason for testing
- What the test procedure consists of
- Information about how test results will be delivered
- Possible re-testing might be required
- Voluntary nature of test
- Patient's right to decline a test
- Opportunity to ask questions

(ECDC, HIV in Europe)



Encourage patients to think about the possible implications of testing:

- Relevant national laws that might impact an individual receiving a positive test
- Potential risks (e.g. stigma, discrimination) associated with testing positive
- Services available post-test
- Potential need for partner disclosure

(IUSTI, WHO Europe, WHO/UNAIDS)

Which of the following components of HIV testing are included in HIV testing guidelines?

(265 respondents)



Pre-test information or pre-test counseling	61.5%
Informed consent	83.0%
Delivery of HIV- test results	81.5%
Delivery of HIV+ test results	82.6%
Post-test counselling (HIV-)	74.3%
Post-test counselling (HIV+)	84.5%
Referral of people testing HIV+ to specialist treatment/care services	84.9%

In your country, which of the following does pre-test information or counseling include?

(274 respondents)



Assurance that the HIV test is voluntary	78.5%
Assurance that the test and result will remain confidential	82.8%
Explanation of the reason for testing if initiated by provider	69.3%
Information about the person's right to decline a test, implications	62.8%
Making arrangements for the person to collect the test results	64.6%
Opportunity for the person to ask questions	71.9%
Discussion of clinical benefits of testing (positive result)	72.6%
Discussion of the preventative benefits of testing	70.1%

Information of services available after a negative test result	53.6%
Information of services available after a positive test result	77.4%
Explanation of possible need for partner notification (+ve test)	62.4%
Information about potential risks for client taking a test	44.9%
Information about laws/regulations impacting the person taking a test and receiving a positive result	40.1%

FINDING 2: THE DELIVERY OF POST- TEST COUNSELING AND IMPLICATIONS FOR REFERRAL



- Differing detail about which issues should be covered in post-test counseling for positive or negative results
 - More comprehensive guidelines by IUSTI, WHO/UNAIDS

POST-TEST COUNSELLING FOR A POSITIVE TEST



Assurance that the person understands the test result	88.4%
Making arrangements for 2 nd blood sample and a repeat test (as required)	86.3%
Discussion of any immediate concerns about the test result	85.1%
Assessing the need for psychosocial support	76.8%
Assistance in determining availability of social support	66.0%
Discussion of possible disclosure of results to sex partners, partner referral and contact tracing	85.1%
Offer of testing and counselling of partners and/or children	76.8%
Information about prevention of HIV transmission	79.7%
Information about services available in the facility where testing was undertaken, and in other health and community settings	88.0%
Assistance with referral to specialist HIV services	89.2%
Assistance with referral to HIV support services	75.9%
Opportunity for the person to ask questions	84.6%

POST-TEST COUNSELLING FOR A NEGATIVE TEST



Explanation of the window period; need for re-testing if recently exposed	90.1%
Provision of, or referral for, comprehensive STI screening	56.2%
Provision of basic advice on prevention of HIV transmission	85.0%
Encouragement of safe practices and behaviour change	79.0%
Provision of post-exposure prophylaxis if appropriate	57.6%
Assessment of client's needs for referral to more extensive post-test counselling or prevention services	45.9%
Referral to harm reduction and/or other prevention services, if appropriate	64.4%

THANKS!



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- Is there a need for consensus or greater clarity around these issues?
- Probably need for an updated review of the evidence, including research which emphasises client perspectives
- Next steps:
 - we will be sending a document incorporating survey results and review findings out for further expert consultation
 - aim of detailing recommendations based on project
 - If you would like to to hear more, or have some input into this, please contact us on this address