Taking It to the Pews (TIPS): Church and Community Members' Satisfaction with HIV screening in African American churches

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“No relationships to disclose”
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- ASOs: Kansas City Health Department, KC CARE Health Clinic, Truman Medical Center Infectious Disease Clinic, Good Samaritan Project
- National Institutes of Mental Health
Why Black Churches?

Why not Black Churches!
Contextual Background

- National Week of Prayer (NWP) the Healing of AIDS in Kansas City since 1995
- Screening offered at all events, but few people sought screening
- Beyond the Week of Prayer, lack of churches’ follow-through in “doing something!”
Church Leaders Guiding the Research Agenda

Ongoing meetings and discussions with African American pastors regarding the role of the church in addressing HIV/AIDS

“No” to delivering information prevention information about condom use

“Yes” to focusing on HIV awareness and screening in African American churches
TIPS Aims:

To mobilize African American churches to increase HIV education and testing among their church and community members.
Exploring Church Based HIV Testing

- 4 churches completed surveys

- Health Beliefs and Behaviors Survey
  - Baseline, 6 months and 12 months
  - HIV testing beliefs, behaviors, and satisfaction

- 543 participants (417 church members & 126 community members)

- Post intervention focus groups with all 4 churches
TIPS Liaisons and Health Agency as Intervention Implementers

Church liaisons:
- Distributed 1-2 TIPS tools per month
- Coordinated 3 HIV testing events
  
  Use the TIPS Screening Event Request Form and Screening event checklist.

Kansas City Health Department:
- Provided confidential HIV testing on Bible Study nights and Sunday’s
- Supplied HIV test kits (Rapid – oral and blood)
- Described HIV testing during church service
- Facilitated Pastor role modeling
TIPS Strategies to Motive HIV Screening

- Testimonies
- Pastors modeled receipt of HIV test
- Tester described screening
- Testing during church services, community and special events
- Ministries primed for testing
- Calls for people to get tested throughout service/special event
- No/short wait times to get tested

### 12--Month HIV Testing at 4 TIPS Churches

<table>
<thead>
<tr>
<th>Churches</th>
<th>Testing #s*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>249</td>
</tr>
<tr>
<td>Comparison</td>
<td>61</td>
</tr>
<tr>
<td>Total</td>
<td>310</td>
</tr>
</tbody>
</table>

* 3 HIV Testing events per church
## Health Beliefs and Behaviors Survey
### Strategies That Encouraged HIV Testing

<table>
<thead>
<tr>
<th>Intervention Church Participants</th>
<th>6 mos.</th>
<th>12 mos.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV testing has been openly and regularly discussed at your church</td>
<td>75%</td>
<td>88%*</td>
</tr>
<tr>
<td>The pastor or a church leader asked the church/community members to get tested</td>
<td>71%</td>
<td>78%</td>
</tr>
<tr>
<td>You got tested with friends, family or church members</td>
<td>65%</td>
<td>86%</td>
</tr>
<tr>
<td>Someone asked you to get tested with them</td>
<td>37%</td>
<td>31%</td>
</tr>
</tbody>
</table>

*p ≤ .001
# Health Beliefs and Behaviors Survey

## Satisfaction with HIV testing

<table>
<thead>
<tr>
<th>Intervention Church Participants</th>
<th>6 mos.</th>
<th>12 mos.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV test was free</td>
<td>78%</td>
<td>88%</td>
</tr>
<tr>
<td>You felt that your test results would be kept confidential</td>
<td>71%</td>
<td>82%</td>
</tr>
<tr>
<td>You felt safe, like you would not be judged or talked about</td>
<td>65%</td>
<td>74%</td>
</tr>
</tbody>
</table>
### Health Beliefs and Behaviors Survey

**Satisfaction with HIV Testing (12 mos.)**

<table>
<thead>
<tr>
<th>Question</th>
<th>Intervention</th>
<th>Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>How HIV testing events were made available at your church?</td>
<td>90%</td>
<td>67%*</td>
</tr>
<tr>
<td>How often HIV information and events were offered?</td>
<td>87%</td>
<td>68%*</td>
</tr>
<tr>
<td>How private and compassionately HIV testing was offered?</td>
<td>94%</td>
<td>66%*</td>
</tr>
<tr>
<td>HIV test was free.</td>
<td>88%</td>
<td>83%</td>
</tr>
<tr>
<td>You felt that your test results would be kept confidential.</td>
<td>82%</td>
<td>78%</td>
</tr>
<tr>
<td>You felt safe, like you would not be judged or talked about.</td>
<td>74%</td>
<td>59%</td>
</tr>
<tr>
<td>You knew that you could get tested quickly without a long wait time.</td>
<td>84%</td>
<td>73%</td>
</tr>
</tbody>
</table>

* *p ≤ .001*
Getting tested in church:

“I think we had excellent participation. We announced the testing events people waited to get tested. I thought that was good.”

Attitude change toward getting tested in church:

“ I think initially people were sort of iffy and [feeling] like I don’t want to be put out the like I’m doing something wrong [be]cause again the stigma [is] attached to it. Then the second testing came around then the third testing...I think people grew a comfort level [that] improved just because of the education that was put out there...”
Intervention Post Focus Group

Developing trust in testing confidentiality:

• “Everybody was doing it. It wasn’t just one person we had many people getting tested. And, so it let everyone know it’s okay.”

• “Once people found out the privacy of it [the screening process] I think that comforted a lot of people and the numbers went up the second time.”

Potentially impacting screening behavior:

• “It offered people a chance who would not normally getting tested a chance to do so at regular intervals”
Lessons Learned

• Securing collaborative partnerships to conduct HIV screenings on Sunday and Wednesday evenings is a significant strategy.
• Developing the skills of church liaisons to implement health programming and coordinate HIV testing events.
• Church-based testing can be conducted privately and compassionately.
• Congregants will take advantage of HIV testing when accessible at their church.
Questions