

Real-life social networking prompts people to get tested for HIV

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Old-school face-to-face social networking is a more effective way to identify people with HIV than the traditional referral method, suggests research being presented at IDWeek 2014. The study shows that social networking strategies (SNS) – enlisting people in high-risk groups to recruit their peers to get tested – is more efficient and targeted than traditional testing and referral programs, resulting in 2-1/2 times more positive test results.

As many as 20 percent of HIV-positive people are unaware of being infected with the virus, and therefore do not receive vital treatment. In addition to missing out on medications that can improve their prognosis and quality of life, these patients also are more likely to spread the disease to others. Therefore, encouraging people at risk for HIV to get tested is critical.

SNS programs likely are more effective because they are more proactive than traditional counseling, testing and referral (CTR) programs, which are available to anyone who wishes to be tested but do not offer the same motivation as encouragement by peers.

"A limitation of the traditional approach is that many people who are at high risk of HIV never take the initiative to get tested on their own," said Ryan Westergaard, MD, PhD, MPH, lead author of the study and assistant professor of medicine at the University of Wisconsin School of Medicine and Public Health, Madison. "Our study found that using social network strategies, in which we enlist people at high risk to

encourage peers in their social networks to get tested, results in a higher proportion of positive HIV tests – making our efforts more effective and allowing us to reach the people who need it most."

In the study, researchers collected data from 45 HIV testing sites in Wisconsin over four years. Through SNS, 54 of 2,169 (2.49 percent) people tested were HIV-positive vs. 440 of 48,318 (.91 percent) of those tested through CTR.

In SNS – which is growing in large cities – people at high risk for HIV are paid an incentive (typically \$10 to \$20) for every person they refer who gets tested. Some experts are concerned that these programs are costly, but the new research suggests that SNS is worthwhile, because it results in a higher percentage of positive tests.

"Some SNS programs limit the numbers of people a recruiter can refer for testing, based on the assumption that that they're just signing up everyone they know to make more money, even if they're unlikely to be HIV-positive," said Dr. Westergaard. "Our study showed that, on average, the 30th or 40th person referred for testing through SNS had just as high if not a higher probability of having a positive HIV [test](#) than the first five or 10 people referred. This suggests SNS can be a cost-effective tool to increase testing in specific [high risk](#) pools, such as men who have sex with men and transgender people."

Provided by Infectious Diseases Society of America

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