

# Report of the Strategic Director of Health and Wellbeing to the meeting of Health & Social Care Overview & Scrutiny Committee to be held on 26<sup>th</sup> January 2017.

Subject:

HIV

Summary statement:

At the full Council meeting on 19 January 2016 the Director of Public Health was asked to provide a report outlining what needs to be done locally in commissioning and provision of services in order to halve late diagnosed and undiagnosed HIV by 2020 including prevention and educational interventions to ensure the sustainability of any reductions achieved.

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Health & Social Care

**Overview & Scrutiny Area:** 



City of Bradford Metropolitan District Council



#### 1. SUMMARY

At the full council meeting on 19 January 2016 the Director of Public Health was asked to provide a report outlining what needs to be done locally in commissioning and provision of services in order to halve late diagnosed and undiagnosed HIV by 2020 including prevention and educational interventions to ensure the sustainability of any reductions achieved. As there has never been a report on HIV to the Health & Social Care Overview & Scrutiny Committee this report will also provide background to HIV in the Bradford District

#### 2. BACKGROUND

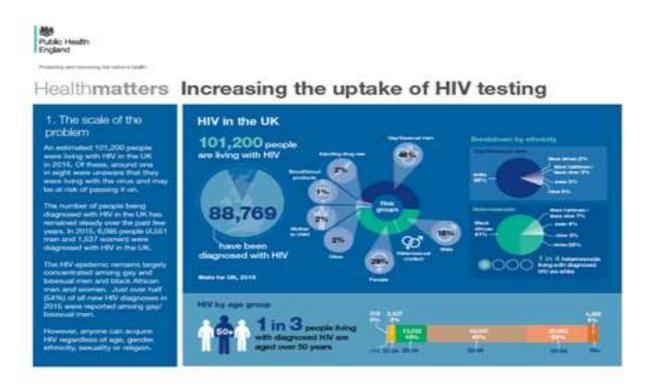
- HIV is a preventable infection which left untreated leads to high levels of morbidity and premature death. HIV is a virus that infects and destroys cells responsible for combating infections, leaving the body susceptible to diseases it would normally be able to fight.
- HIV is transmitted person to person through infected blood, semen, vaginal fluids or the breast milk of an infected woman with a high viral load. That is to say, HIV is mainly transmitted through vaginal or anal intercourse without a condom or by sharing a needle or syringe with someone who's living with HIV (England.nhs.uk).
- Over the last decade there has been a continuous rise in the number of people living with HIV in the UK. Evidence would suggest a significant number of people are unknowingly HIV positive, contributing to a national trend whereby in 2015, 39% of the UK HIV population were diagnosed late. There are three important issues to consider:
- > i) a continuous raise in the number of people living with HIV;
- ii) Public Health England estimate 13% of the UK HIV positive population are undiagnosed and do not know about their HIV infection and are therefore at risk of passing on their infection.
- iii) there are people presenting for HIV testing at a stage beyond which treatment ought to have begun – termed 'late diagnosis'. A late diagnosis is associated with:
  - a 10 fold increased risk of death within one year of diagnosis compared to those diagnosed promptly (HPA 2012)
  - treating an individual in the first year following a late diagnosis costs twice as much because of the higher rates of morbidity (NICE 2014).
  - those diagnosed late will have been unaware of their HIV status for a lengthy period of time, increasing the risk of onward transmission to their sexual partners (Halve it 2011). Its estimated that 50% of new cases are a result of people undiagnosed having unprotected sex (Sanders 2005). People who don't know their HIV status are believed to be 3 times more likely to pass on the infection than those who know their status. They are also twice as likely to have unprotected sex (PHE 2012).
- On an individual level, being diagnosed with HIV earlier is associated with improved health outcomes; with less morbidity and mortality. Highly active antiretroviral therapy (HARRT) has transformed treatment of HIV infection – life expectancy on treatment is almost normal.
- Timely diagnosis and treatment will decrease an individuals' viral load making the infection virtually undetectable, reducing the risk of onward transmission.





Increasing HIV testing is a key strategy in controlling the HIV epidemic in the UK and will address the issues of rising prevalence, onward transmission and late diagnosis.

#### The national picture



See appendix 1 for larger A4 version

#### HIV in Bradford

In Bradford in 2015, 385 people were living with a diagnosis of HIV. As a district Bradford has an overall prevalence rate of 1.24 per 1000 population of 15 to 59 year olds. This means that for everyone 1000 15 to 50 year old people living in Bradford, 1.24 individuals have been diagnosed as being infected with HIV. This prevalence rate is lower than the English prevalence rate; currently 2.26 per 1000. In Yorkshire and Humber, Bradford has the fifth highest HIV prevalence rate out of 15 local authorities.





#### HIV diagnosed prevalence rate / 1,000 aged 15-59 2015

Area	Recent Trend	Count	Value		95% Lower Cl	95% Upper Cl
England	<b>†</b>	73,123	2.26	H	2.24	2.2
Yorkshire and the Humber region	+	4,171	1.32	Η	1.28	1.36
Leeds	<b>†</b>	1,193	2.48	⊦ <mark></mark>	2.34	2.63
Sheffield	+	636	1.80	H	1.66	1.94
Barnsley	<b>†</b>	199	1.43	H	1.24	1.65
Kirklees	+	348	1.36	HH	1.22	1.51
Bradford	+	385	1.24	<b>⊢</b> 1	1.12	1.3
Wakefield	+	232	1.20	H	1.05	1.36
Doncaster	+	212	1.20	H	1.05	1.38
Kingston upon Hull	+	186	1.16	H	1.00	1.34
Rotherham	+	168	1.13	ا <del>ن سا</del>	0.96	1.31
Calderdale	+	125	1.03	H	0.86	1.23
North Lincolnshire	+	66	0.69	⊨	0.53	0.88
York	+	84	0.65	H	0.52	0.8
North Yorkshire	+	211	0.65	<b>⊢</b> ⊣	0.56	0.74
North East Lincolnshire	+	50	0.55	<mark>⊢-</mark> ↓	0.41	0.73
East Riding of Yorkshire	+	76	0.42	<b>⊢</b> ⊣	0.33	0.53

Source: Public Health England

In Bradford, between 2013 and 2015, 43.1% of HIV diagnoses were at a late stage of infection. Local data indicates Bradford's late diagnosis trend is similar to national data; with people identifying as heterosexual generally being diagnosed late and a smaller proportion of MSM testing late. Due to low numbers of HIV diagnosis in Bradford district, late diagnosis analyses by ethnicity or age would not produce reliable information.

HIV late diagnosis (%) (PHOF indicator 3.04) 2013-15

Area	Count	Value		95% Lower Cl	95% Upper Cl
England	5,628	40.3	H	39.5	41.1
Yorkshire and the Humber region	364	48.2	H	44.6	51.8
York	11	68.8		41.3	89.0
Kingston upon Hull	22	59.5	<b> </b>	42.1	75.2
Harrogate	7	58.3		27.7	84.8
Calderdale	15	57.7		36.9	76.6
Sheffield	42	57.5		45.4	69.0
Hambleton	3	50.0		11.8	88.2
Scarborough	4	50.0		15.7	84.3
Ryedale	3	50.0		11.8	88.2
Kirklees	29	48.3	►	35.2	61.6
Rotherham	12	48.0		27.8	68.3
Doncaster	23	47.9	►	33.3	62.8
Leeds	110	47.4		40.8	54.1
Barnsley	20	44.4		29.6	60.0
Bradford	31	43.1	►	31.4	55.3
North East Lincolnshire	3	42.9	<b> </b>	9.9	81.6
North Lincolnshire	5	41.7	· · · · · · · · · · · · · · · · · · ·	15.2	72.3
East Riding of Yorkshire	6	37.5		15.2	64.6
Wakefield	14	34.1	►	20.1	50.6
Craven	1	14.3 -		0.4	57.9
Richmondshire	-	*	—		-
Selby	-	*		-	-

#### What is happening in Bradford to address HIV?

Several organisations combine to provide an HIV testing treatment and support service. Currently HIV treatment services are provided at a different location to HIV testing services. Treatment is provided at the Trinity centre in Bradford but a significant number of people with HIV also receive treatment outside the district. Yorkshire MESMAC is the main organisation, commissioned by CBMDC, providing





Crude rate - per 1000

Proportion - %

support for those living with HIV in the district. Yorkshire MESMAC are also commissioned by CBMDC to carry out education and point of care testing in outreach locations.

- For people to have control over their involvement in HIV transmission they need the knowledge, skills, resources and access to timely services. Yorkshire MESMAC develops and delivers a programme of HIV prevention work across the district focusing on at risk communities in both real world and online settings. For example,
  - $\circ$   $\,$  Outreach to public sex and sex on premises venues.
  - Community group development and support.
  - Joint testing events and awareness raising events e.g World Aids Day & National HIV Testing Week.
  - Condom and lubricant distribution scheme via LGB&T venues
  - o Interactive website including online booking for HIV testing,
  - Training sessions for local people.
  - Training sessions for local professionals.
  - Free formula milk for breast feeding mother who are living with HIV.
  - Positive speakers programme.
- Knowledge MESMAC holds the Information Standard, which, together with their commitment to co-production, increases trust in, and relevance of, health promotion resources and encourages a sense of community ownership. They produce information in a range of formats e.g. posters, YouTube videos and community language podcasts. MESMAC's website receives 800,000+ hits per year. Their Yorkshire footprint allows for shared development and production costs, whilst maintaining local relevance.
- Yorkshire MESMAC are the local activation partners for HIV Prevention England and ensure that the needs and concerns of local MSM and Africans are in national campaigns, levering additional resources into the local health system.
- Skills Yorkshire MESMAC run courses including: The Arse Class, HIV and Faith, Working with LGB&T Communities, ensuring that people have the skills to avoid STIs, build resilience and support services to be acceptable to Most at Risk communities. Skills and confidence are also developed via 1-2-1 support and counselling.
- Resources All LGB&T saunas, bars and shops across our area act as condom and health promotion distribution points. MESMAC have developed a network of local African groups/shops in Bradford that mirror this role. MESMAC operate a postal condom service across the area. This unique infrastructure means that resources get to the right people cost effectively.
- Access Yorkshire services have multiple access points; pubs, PSEs, telephone and digital platforms etc. Their e-outreach provides information, condoms, testing appointments and counselling referrals direct to MARPs using dating websites and apps, and via Facebook and Twitter
- Effective clinical referral MESMAC have extensive joint working arrangements with The Trinity Centre and Locala including fast track access for service users requiring PEP. Trinity and MESMAC's close working also ensures effective referrals for people diagnosed with HIV.
- Training Yorkshire MESMAC offers training to Primary Care staff, ensuring that they feel skilled and supported to offer HIV tests and highlighting the need for this to be offered when MARPs present with illnesses typical of sero-conversion. Locally, African communities are more likely to receive a late diagnosis. MESMAC have a





history of effective community engagement with Africans backed up by our community testing, which is effective at diagnosing recent infections. We deliver additional targeted outreach to African communities in Bradford promoting HIV testing, funded by HIV Prevention England.

- Independence and integration of PLWHIV MESMAC have developed innovative workshops, peer and expert support for empowering PLWHIV to achieve independence including support in returning to education, employment and/or training. PLWHIV are central to this work, whether that be as staff, volunteers, trustees or service users.
- Reduced stigma and discrimination Anti-stigma and discrimination is central to everything Mesmac. More specifically staff, volunteers and PLWHIV are actively involved in the Stigma Index. A group of service users trained as Positive Speakers give talks in local schools and organisations. We lead on the planning and delivery of World AIDS Day events in Bradford and Wakefield. At a local level we developed the Stamp out Stigma campaign and nationally we work with NAT, NAM and others to develop and lobby for policy change. Including successfully challenging NHS England's assertion that they could not fund PrEP
- Normalising testing Testing Times Yorkshire MESMAC's award winning, community based POCT service is tailored to meet the needs of most at risk populations (MARPs) across Bradford, MESMAC harness their extensive community reach, and build on the community infrastructure and partnerships developed over 25 years working with local communities in the district.
- Testing Times aims to reduce late diagnosis by reducing barriers to testing, taking services to where people are and normalises the testing process by offering it in familiar venues. Testing sessions are offered from their base, in Little Germany, via outreach e.g. local gay bars and saunas and at community events e.g. Bradford African women's health days.

MESMAC works with churches and faith groups in Bradford, encouraging HIV testing, prevention and support. Building on their successful work with local faith communities and with support from Public Health, Yorkshire MESMAC in partnership with the NAZ Project (London) won funding from Public Health England's innovation fund to deliver the Testing Faith programme in Bradford.

- 'Testing Faith' is designed for faith leaders in mosques and Black Majority Churches (BMC). It allows them to positively address issues surrounding HIV and support people affected by HIV in their community. The Testing Faith project has three key elements:
  - A training course for faith leaders on HIV and sexual health
  - Creation of a sexual health plan to educate the congregation and offer support
- Social Support for People Living With HIV, (PLWHIV) Social support for PLWHIV is offered by the OUR Project (Part of Yorkshire MESMAC Group of Services).
- Each service user has their own co-developed plan, service users have access to the counselling service, 1-2-1 support can be offered in the Yorkshire MESMAC base, at home over the telephone or by Skype,
- Yorkshire MESMAC have weekly support group meetings for people living with and affected by HIV. These are an opportunity to meet people who have similar experiences, develop support networks and build skills.
- > Although emotional support is important, practical support living with HIV is also





essential. A high proportion of service users are unemployed, this is particularly true of 'long term survivors' who acquired HIV when the prognosis was poor and treatments relatively ineffective making full time work impossible. Many service users are asylum seekers who have no recourse to public funds, some are living in poor, damp and cold accommodation, mothers cannot afford formula milk for their babies. MESMAC have developed links with employment and training providers, to support people back into work, awarded grants for home improvements to ensure that the home environment contributes to improved health outcomes and supplies formula milk to mothers to prevent HIV transmission via breast feeding.

- PLWHIV in Bradford have access to three grants through Yorkshire MESMAC social support services, each having their own eligibility criteria:
  - Hardship Fund open to PLWHIV experiencing hardship or transitional changes i.e. changes in employment or family support
  - Vicar's Relief Fund open to PLWHIV, who are in danger of becoming homeless, who are currently homeless, destitute and/or vulnerable, and those attempting to establish or maintain a tenancy
  - Health Support Grant– open to PLWHIV, used to empower service users to improve their own health, i.e. gym memberships or swimming lessons
- CBMDC provides a relationship and sex education course for young people. One of the sessions focuses on the consequences of condomless sex and the potential to contract sexually transmitted infections – one of which is HIV. HIV is discussed within the context of other sexually transmitted infections and young people receive information on testing services.
- Locala carry out testing within the district sexual health services. Primary care carry out test for patients who request a test and the acute hospitals will routinely offer HIV tests for patients for HIV.

#### Future challenges

- A HIV needs assessment was concluded in Summer 2016. The needs assessment had a strong focus on the epidemiology of the infection and illuminated groups disproportionally affected by HIV within the district.
- In order to halve late diagnosed and undiagnosed HIV by 2020 including prevention and educational interventions to ensure the sustainability of any reductions achieved the current work carried out by all partners needs to continue.
- The public health department will shortly be undertaking a procurement process of HIV support services, point of care testing and education. The aim of which is to ensure value for money and that the current good work continues and HIV positive people can access support services designed to enable them to live well with HIV in the future and the downward trend in HIV prevalence and late diagnosis continue.

#### 3. OTHER CONSIDERATIONS

> There are no other considerations at this time.

#### 4. FINANCIAL & RESOURCE APPRAISAL

There are no financial issues arising as any reprocurement of services will be undertaken within the current financial resources being used





#### 5. RISK MANAGEMENT AND GOVERNANCE ISSUES

There are no significant risks arising out of the implementation of the proposed recommendations

#### 6. LEGAL APPRAISAL

> There are no legal issues arising

#### 7. OTHER IMPLICATIONS

#### 7.1 EQUALITY & DIVERSITY

To halve late diagnosed and undiagnosed HIV by 2020 work will have to continue with the current focus on those groups with the greatest prevalence of HIV but this will continue to do this within the context of continuing to raise awareness of HIV across all communities.

#### 7.2 SUSTAINABILITY IMPLICATIONS

None

#### 7.3 GREENHOUSE GAS EMISSIONS IMPACTS

None.

#### 7.4 COMMUNITY SAFETY IMPLICATIONS

None

#### 7.5 HUMAN RIGHTS ACT

None

#### 7.6 TRADE UNION

None

#### 7.7 WARD IMPLICATIONS

None

## 8. NOT FOR PUBLICATION DOCUMENTS

None'.

## 9. OPTIONS





This report was provided at member request to provide an update.

#### 10. **RECOMMENDATIONS**

It is recommended that members note the contents of the report and support partnership working across the District to halve late diagnosed and undiagnosed HIV by 2020

#### 11. APPENDICES

> Appendix 1 – the national picture of HIV in the UK.

#### 12. BACKGROUND DOCUMENTS

None





Appendix 1 - The national picture of HIV in the UK.

Public Health England

#### Breakdown by ethnicity 101,200 people Gay/blsexual men Gay/bisexual men are living with HIV Injecting drug use 46% Black African 2% Black Caribbean / 2% Blood/blood Black other 3% White products 86% Asian 3% 1% Other 5% Risk 88,769 groups Heterosexuals Black Caribbean / Black other 7% 2% Black Asian 4% Mother African 18% to child 61% -Other 3% Ç 2% have been White 25% Male Heterosexual diagnosed with HIV Other contact 29% 1 in 4 heterosexuals living with diagnosed HIV are white Stats for UK, 2015 Female HIV by age group 315 2,427 4.268 0% 3% 5% In J people living 13.032 50+ with diagnosed HIV are 48% 15% 29% aged over 50 years 35-49 <15 15-24 25-34 65+ 50-64

## Healthmatters HIV in the UK



