

Attachment B—Assessment of Domestic Guidelines for HIV Testing during the Refugee Medical Screening at U.S. Health Departments

Form Pending
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Introduction

In January 2010, mandatory HIV testing was removed as part of the pre-departure medical screening for U.S.-bound refugees and immigrants. The lack of overseas HIV testing highlights the importance of the current CDC domestic guidelines for HIV testing in refugees, which recommend voluntary testing and the initiation of early treatment for those who are infected.

Currently, there is no national comprehensive information on the implications of this change among newly arriving refugees. This data collection’s findings will be used to identify best practices and challenges, provide more effective support for your efforts, and advance evidence-based public health policy and practice.

Your participation is voluntary, and there is no penalty if you choose not to participate. Only one completed data collection by the State Refugee Health Coordinator (RHC) or designee will be accepted from each state and the District of Columbia. The RHC can consult with local health providing agencies to obtain some information needed to complete the assessment. All responses to questions will be kept in secure manner. No personal identifiers will be recorded.

The data collection form can be accessed for any changes until <Month, Day, Year [Date TBD pending OMB approval] You may use the PDF copy of the data collection form we sent you to collect needed information prior to completing the online assessment. This will facilitate having all the necessary information to complete the online data collection in one session.

For questions and/or comments, please feel free to contact Deborah Lee, DLee1@cdc.gov, 404-639-0439.

The questions should take approximately 30 minutes to complete. Thank you for your assistance and participation.

Public reporting burden of this collection of information is estimated 30 minutes to complete this assessment, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879)

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Section 1: Facilities for Domestic Medical Screening of Newly Arriving Refugees

1. For what state do you serve as refugee health coordinator? (Drop-down list of states and District of Columbia)

2. Of the 7 highest volume facilities that newly arriving refugees complete their domestic medical screening in your state, what are the facility types and percentage of newly arriving refugees who complete their domestic medical screening in these facilities?

	Facility Type	Percentage (%)
Facility #1	<i>List of choices--</i>	<i>List of choices--</i>
Facility #2	• Health Department	<1
Facility #3	• Community Health Center	1-4
Facility #4	• Non-profit organization	5-9
Facility #5	• University affiliated	10-14
Facility #6	• For-profit organization	15-19
Facility #7	• Other (specify below)	20-24
	• Not Applicable	25-29
		30-34
		35-39
		40-44
		45-49
		50-54
		55-59
		60-64
		65-69
		70-74
		75-79
		80-84
		85-89
		90-94
		95-99
		100
		Not Applicable

**Explain the 'other' facility types selected above: <open text 100 characters>

3. Do any facilities provide HIV testing for newly arriving refugees?
 - Yes (*This selection goes to Section 2. Domestic Guidelines for HIV Testing*)
 - No (*This selection skips to the end.*)
 - Don't Know (*This selection skips to the end.*)

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Section 2: Domestic Guidelines for HIV Testing

4. **For newly arriving refugees--** indicate if these facilities:
- a) Provide HIV testing during domestic medical screening,
 - b) What **month** and **year** the facility began HIV testing,
 - c) What is the average timeframe from arrival into the US to HIV test (e.g. HIV test is provided to refugee on average 1 month to 2 months post arrival into the U.S. in this facility),
 - d) Also, indicate if facility is opt-in, opt-out, don't know or not applicable.

Note: Opt-in is testing offered and the patient is required to actively give permission before it is performed.

Opt-out is notifying the patient that the test is normally ordered and performing the test unless the patient declines or defers testing.

	Provides HIV testing?	HIV testing began?	HIV Test is provided on average timeframe post arrival?	Is HIV testing Opt-in, Opt-out, don't know, or not applicable?
Facility #1	Yes	Not Applicable	<2 weeks	Opt-in
Facility #2	No	Before 2010	2 weeks to 1 month	Opt-out
Facility #3	No	After 2012	1 month to 2 months	Don't know
Facility #4	Applicable	January,2010	2 months to 3 months	Not Applicable
Facility #5		February,2010		
Facility #6		March,2010		
Facility #7		April,2010		
		May,2010		
		June,2010		
		July,2010		
	August,2010	>3 months		
	September,2010			
	October,2010			
	November,2010			
	December,2010			
	January,2011			
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	November,2012			
	December,2012			

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**Provide reasons for those facilities not providing HIV testing: <open text 100 characters>

5. In the facilities where HIV testing is conducted, indicate the facility's adherence to each guidelines listed:

	A) Provides HIV screening for refugees in these age groups unless they decline (opt-out)	B) Provides repeat screening 3-6 months following resettlement for refugees with a recent exposure or high-risk activity	C) Provides specific testing for HIV-2 for refugees who screen positive and are native to or have transited through West Africa	D) Documents HIV test decline/refusal in medical record	E) Provides culturally sensitive and appropriate counseling in their primary spoken language	F) Provides referral for care, treatment and preventive services for all individuals confirmed to be HIV-infected
Facility #1	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Facility #2	All ages tested	Yes	Yes	Yes	Yes	Yes
Facility #3	13-64 years only	No	No	No	No	No
Facility #4	<13 and >64 years only	Don't know	Don't know	Don't know	Don't know	Don't know
Facility #5	< 13 years only					
Facility #6	>64 years only					
Facility #7						

**Please comment on any facilities, the reasons for not implementing the guideline. <open text, 10 lines X 100 characters>

6. In facilities that provide HIV testing with culturally sensitive and appropriate counseling in their primary spoken language, how is the culturally sensitive and counseling provided? (Check all that apply.)

- Interpreter present in-person
- Interpreter present via phone
- Written materials
- Video

**Other (please specify) <10 lines X 100 characters>

7. In facilities that provide HIV testing with referral to care, treatment and preventive services for all individuals confirmed to be HIV-infected, where are the refugees referred? (Check all that apply.)

- Private Physician
- Health Department
- Designated public health outreach worker who are responsible for finding and counseling people with sexually transmitted diseases and their contacts such as Disease Intervention Specialist (DIS)

**Other (please specify) <10 lines X 100 characters>

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Section 3: Challenges and Best Practices

8. What **challenges**, if any, has the refugee resettlement community in your state had with implementing/adhering to the CDC HIV screening guidelines for resettling refugees? (Check all that apply.)

- Limited staff
- Language barriers
- Refugee refuse testing
- Unable to follow-up with refugees due to missing or incorrect contact information
- Refugees not reporting for domestic medical screening
- Lack of effective culturally relevant intervention which promote prevention, testing and linkage to care

- None

**Other (please specify) and expound on challenges marked above: <10 lines X 100 characters>

9. What **successes or best practices**, if any, has the refugee resettlement community in your state had as a result of implementing/adhering to the CDC HIV screening guidelines for resettling refugees? (Check all that apply.)

- Increased number (percentage) of HIV testing among newly arriving refugees compared to years before January 2010
- Success in testing partners of persons who are HIV-infected
- Stronger services and expedited access to services to treatment and counseling
- Stronger alliance with refugee communities
- Development of education programs focused on heterosexual transmission and among women

**Other (please specify) and expand on the successes checked above that can be shared with public health partners. *Provide references such a publications or website links where possible.* <10lines X 100 characters>

10. How has the removal of HIV from the CDC list of communicable diseases of public health significance impacted refugee health related activities? Please provide any information not provided in previous sections. <10lines X 100 characters>

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Section 4: HIV Testing Data

11. Does your state health department currently collect any data related to HIV screening among resettling refugees?

Yes

No (*This selection skips to end.*) **‘Thank you for completing this assessment!’**

12. What type of HIV-related screening data is currently collected among resettling refugees?

(Check all that apply.)

Individual-level testing

Individual-level results

Aggregate-level testing

Aggregate-level results

**Other (please specify) <100 characters>

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Section 5A, 5B and 5C: 2010-2012 Aggregate HIV Testing Results (if available)

If your state health department currently collects any data related to HIV screening among resettling refugees and are able to share any aggregate-level testing and results information with CDC, please provide values for calendar year **2010, 2011** and **2012** where possible.

Categories	HV Testing and Results (Aggregate)		Calendar Year		
			2010	2011	2012
<i>General</i>	<input type="checkbox"/> Total number of refugee arrivals in your state				
	<input type="checkbox"/> Number of refugees offered HIV testing				
	<input type="checkbox"/> Number of refugees screened for HIV				
	<input type="checkbox"/> Number of refugees who declined or refused HIV testing				
	<input type="checkbox"/> Number of refugees who had positive HIV test result				
	<input type="checkbox"/> Number of these refugees with positive HIV test results who were referred to care and treatment				
	<input type="checkbox"/> Number of refugees with HIV-positive test results prior to U.S. arrival				
<i>Demographic information of refugees who are HIV positive</i>	Gender	Male			
		Female			
	Age Group (years of age)	< 15			
		15-19			
		20-64			
		≥65			
	Birth Country Regions (See Attachment H. List of Selected U.S. Refugee Birth Countries by Regions)	Africa (Sub-Sahara) (e.g. Somalia, Ethiopia, Dem.Rep of Congo, Kenya, etc.)			
		East Asia and Pacific (e.g. Burma, Thailand, Malaysia, etc.)			
		Europe and Eurasia (e.g. Ukraine, Moldova, Russia, Turkey, etc.)			
		Near East (North Africa and Middle East) (e.g. Iraq, Iran, Jordan, Syria, etc.)			
		South and Central Asia (e.g. Bhutan, Nepal, Afghanistan, Pakistan, etc.)			
		Western Hemisphere (e.g., Cuba, Colombia, etc.)			