





# **Success Stories Profile**

## Gender Orientation Sexual Health HIV (GOSHH), Ireland

## **HIV & HCV in Ireland**

Between 2010 and 2014, the rate of HIV diagnoses in Ireland had been stable; however, Ireland saw an increase of 30% from 2014 to 2015.<sup>1</sup> According to the National Health Protection Surveillance Centre, the increase was attributed to the improvement of the national surveillance case definition which resulted in improved sensitivity, timeliness and increased number of notifications. The increase was also linked to outbreaks among people who inject drugs (PWID) and migrant men who have sex with men (MSM). Additionally, even though rates of hepatitis C (HCV) have been in steady decline since peak levels in 2007, it still remains to be a cause of concern as HCV infection is largely asymptomatic and those infected can unknowingly transmit it to others.<sup>2</sup>

GOSHH is a charity in Limerick, Ireland that provides a safe, confidential, and welcoming environment for everyone.<sup>3</sup> They focus on the promotion of equality and wellbeing of all with a positive and respectful approach to sexual orientation and gender diversity. GOSHH provides a drop-in service to provide information on sexual health related issues, support services, a confidential hotline, free condom distribution, as well as services specifically tailored for anyone under 18, sex workers, people living with HIV, people who identify as lesbian, gay, bisexual, transgender, and people living with hepatitis.

#### **European Testing Week 2016**

For European Testing Week 2016, GOSHH aimed to provide as many free HIV and hepatitis C tests as possible in places within the community where MSM, sex workers, migrants, substance users, and people living with hepatitis C (PLWHCV) could be reached. Testing sessions were deliberately planned during varying times of the day to ensure availability of testing for those who cannot access testing during clinic hours. Testing was implemented for 5 days over the course of 10 days, which included weekend and evening sessions. Medical follow up and psycho social support was in place for every test. Testing was self-referred, voluntary, and without appointment.

## **Innovation during European Testing Week**

For the first time ever, GOSHH provided free rapid HCV and HIV tests that were performed using only one finger stick puncture. In this method, GOSHH employed two people to



test: the first person gathered the required quantity of blood for the HCV test (10 minute result) and the second person immediately gathered the lesser amount of blood required for the HIV test (1

<sup>&</sup>lt;sup>1</sup> HSE. Health Protection Surveillance Centre. HIV in Ireland, 2015. Dublin: Health Protection Surveillance Centre; 2016

<sup>&</sup>lt;sup>2</sup> HSE. Health Protection Surveillance Centre. HPSC Annual Epidemiological Report 2015. Dublin: Health Protection Surveillance Centre; 2016

<sup>&</sup>lt;sup>3</sup> Gender Orientation Sexual Health HIV (GOSHH), 2017. http://goshh.ie





minute result). In utilizing one sample for two rapid tests, testing was streamlined and made easy for individuals who wanted to test for both HIV and HCV.

Additionally, GOSHH were surprised to discover that when rapid testing for HIV and HCV is offered at the same time, a higher percentage of women present for testing. They saw a similar trend with a rapid HCV testing pilot for International Hepatitis Day on July 28th 2016.

A key aspect of the success of this model was the multi-agency testing team, which also included people living with Hepatitis.

#### Impact of European Testing Week

The impact of the Testing Week created a discussion on testing for at-risk groups within the community. GOSHH found that women at risk from HCV need specific targeted interventions in order to raise awareness and increase testing. Women also seem to be more willing to present to community based rapid HCV testing programmes. However, whether this is impacted by their perception of safety needs to be explored. The barriers to women testing in standard HSE primary care settings is something that needs to be addressed as well, especially in the context of homelessness, substance use, and sex work.

The presence of people living with HCV in the testing team allowed for immediate support and reduction of fear both prior to and post testing.

The multi-agency testing team allowed for a variety of needs to be met during the testing sessions, including harm reduction for drug or alcohol use, sexual health information and advice, assistance with housing issues, and accompaniment to follow on medical care for reactive results.

For MSM, stigma created from targeting MSM sex venues could be a barrier to organising future outreach MSM testing sessions.

Lastly, engagement with primary care has increased the discussion about testing within health professional circles but the need to reduce stigma and increase access to services are still issues that need work.

# GOSHH creates a welcoming environment for the Limerick community and is a vital component of ensuring the health and safety of its members.















www.testingweek.eu www.hiveurope.eu