



HIV/AIDS Service Organizations & HIV Prevention Vaccine Research

Introduction

HIV Prevention Vaccine trials are not happening in a vacuum. They are happening right now in communities around the world, including ours. Hundreds of DC residents from many different racial and ethnic backgrounds, sexual orientations, and genders have participated or currently participate in HIV Prevention Vaccine Clinical Trials. Many choose to share this information with friends and family. Some do not. In the US alone, more than 10,000 individuals are current or past HIV vaccine trial participants.

Effective HIV prevention, education, testing, and counseling efforts cannot happen in a vacuum. They must take into account the changing face of HIV and AIDS, and the changing face of HIV/AIDS Research. The following are some specific suggestions for AIDS Service Organizations in our area.

Pre Test Counseling

Prior to testing for HIV, counselors should routinely be asking if people are involved in HIV vaccine research. While most trial participants will know to disclose this information, this may not always be the case. Current trial participants should be referred to their trial site for testing. For past trial participants, it is important to ask about the results of the trial and discuss how that may impact an HIV/AIDS test. If a participant received a placebo, there is no potential affect on their HIV test results. However, individuals who received a vaccine may need more sensitive tests in order to obtain accurate results. These tests are available at the HIV vaccine research site. At no point should a person be denied an HIV test if they want one but they, and you, must be made aware of the potential impact on the accuracy of the tests results.

Testing and Counselling

Bearing in mind that some who seek testing services may have sexual partners, friends, or family who are or have participated in trials. Counselors should be prepared to answer basic questions about HIV Vaccine Research. For example:

- My boyfriend told me he's HIV negative, but I found out he's in an HIV vaccine trial. Does that mean that he's infected or that he can infect me?
- I asked my partner to come get tested with me, and he said he can't because he's in an AIDS trial. Why can't we get tested together?

Prevention HIV Vaccine research enrolls individuals who are HIV negative. However, there is no guarantee that they have not engaged in high risk behavior while enrolled in the trial. When a counselor cannot answer a question, it is important that s/he find the answer for the client. Ignoring questions like these, or giving out inaccurate information can cause unnecessary harm to current, past, and potential future trial participants. It may also affect an individual's willingness to get tested again.

Post Test Counseling

While not necessary, it may be helpful to provide information about current HIV vaccine trials to eligible clients. Trial participants have the benefit of long term risk reduction counseling. Many participants also report social benefits, including the positive feeling they get by making a contribution to their community. Most people will decline, but making the information available raises awareness about vaccine trials and will help ease community concern about vaccine trials and possibly reduce any stigma that participants may face.



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Prevention Education

With increased awareness of HIV vaccine research, comes the increased potential for misinformation or partial information. Again, prevention specialists should be prepared to answer basic questions about HIV vaccine Research. For Example:

- Can you get HIV by being in an HIV vaccine trial?
- When will a vaccine be available?
- Is there HIV in the vaccine?
- Will it make me sick? What are the side effects?

This information needs to be integrated into current training programs for ASO employees. In addition speculation about an HIV vaccine is inevitable:

- I don't need to worry about AIDS. There's going to be a vaccine I can take in a few years.

HIV Prevention outreach and education should consider the effects of local HIV vaccine research on attitudes and behaviors regarding HIV risk.

Contingency Planning

When an HIV vaccine becomes a reality, it will be part of a larger prevention strategy. Vaccines made through the use of genetic engineering may well have a lower efficacy rate than more traditional vaccines the public is familiar with, yet still have a benefit when used in combination with other prevention methods. With or without an HIV vaccine, other sexually transmitted diseases will continue to be a concern for those at risk. These are sophisticated public health messages. How will this be communicated? It is not too early for AIDS service organization to start thinking about these issues

How You Can Help

The steps outlined above are necessary to respond to the existence of HIV vaccine trials in our community. There is much more work, however, and AIDS service organization could do to further this cause. We believe an HIV vaccine may be our best hope to end this epidemic and the only realistic hope for many who will not be able to afford HIV/AIDS medications. Yet, we have seen little action from major AIDS Service organizations across the country. Some things local AIDS Service Organizations can do include:

- inviting HIV vaccine advisory board members and researchers to present information to their staff
- creating brochures and educational materials to educate their communities
- partnering with researchers to create public education campaigns
- attending advisory board meetings for HIV vaccine trials in their communities
- designating a staff person to be the 'point of contact' for information and resources on trials, and to attend HIV vaccine community advisory board meetings
- holding a town meeting or forum on HIV vaccine research

Members of the Capital Area Vaccine Effort will be happy to work with you to accomplish any or all of these goals.