

Proposed Targeting Plan for SHINE pilot survey to assess STI/HIV Treatment in MD

Goal of pilot survey:

- Test logistics and quality of the survey.
- Provide an opportunity to refine the survey before implementing it state-wide.
- Improve the likelihood of a successful survey and thus, will provide a more accurate map of safety-net providers' treatment of STIs and HIV.

Prince George's County:

- Representative of a county with elevated STI/HIV rates.
 - 2nd highest prevalence rate of HIV/AIDS
 - Reports 19% of AIDS diagnoses in MD and 18.9% of adults/adolescents living HIV/AIDS patients (2011).
 - 2nd highest incidence rate of chlamydia in MD (per county).
 - 4th highest incidence rate of gonorrhea in MD (per county).
 - 3rd highest incidence rate of syphilis in MD (per county).
- Includes all examples of safety-net providers (FQHCs, SBCHs, etc.)

Allegany County:

- Representative of a rural county in Western region.
- Representative of a county with a lower prevalence of STI/HIV.
 - 4th lowest prevalence rate of HIV/AIDS.
 - 41 cases of gonorrhea p/100,000 people (state average: 111 p/100,000 people).
 - 234 cases of chlamydia p/100,000 people (state average: 467 p/100,000 people).
 - 2.7 cases of syphilis p/100,000 people (state average: 7.8 p/100,000 people).

Dorchester County:

- Representative of a county on the Eastern shore.
- Representative of average STI/HIV prevalence rates.
 - 1 case of HIV per 248 people in the county (state average: 1 case p/159 people).
 - 235 cases of gonorrhea p/100,000 people (state average: 111 p/100,000 people).
 - 506 cases of chlamydia p/100,000 people (state average: 467 p/100,000 people).
 - 6.1 cases of syphilis p/100,000 people (state average: 7.8 p/100,000 people).

Additional comments:

- Baltimore City was not selected for the pilot due to the prevalence of safety-net providers that currently exist there (>35 sites associated with FQHCs, for example).
 - Best to assess the workability on small-scale first.
- Only three counties were selected for the pilot study.
 - This decreases time and resources used if survey repetition is required, while still providing a range of information.

*HIV/AIDS information based on 2011 statistics. Data from the Maryland HIV/AIDS Epidemiological Profile, Third Quarter, 2012 by the Center of HIV Surveillance, Epidemiology and Evaluation, DHMH.

**STI information based on 2011 statistics. Data from the Center for Sexually Transmitted Infection Prevention, DHMH.