Source of Funding: None.

Abstract #: 2.025_INF

Reimagining Health Communication: A Non-Inferiority Randomized Controlled Trial of Crowdsourcing in China

W. Tang1, J. Mao2, C. Liu3, K. Mollan4, T. Wong4, Y. Zhang4, S. Tang5, M. Hudgens4, Y. Qin5, B. Ma5, M. Liao5, B. Yang5, W. Ma5, D. Kang5, C. Wei7, J. Tucker6; 1University of North Carolina at Chapel Hill, Chapel Hill, Chapel Hill, USA, 2UCLA, Los Angeles, USA, 3SESH Global, Guangzhou, China, 4UNC Chapel Hill, Chapel Hill, NC, USA, 5UNC Project-China, Guangzhou, China, 6Kunming Medical University, Kunming, China, 7Beijing Danlan, Beijing, China, 8Shandong CDC, Jinan, China, 9GDDH, Guangzhou, China, 10Shandong University, Jinan, China, 11University of California San Francisco, San Francisco, CA, USA

Background: Crowdsourcing, the process of shifting individual tasks to a large group, may reimagine health communication, making it more people-centered. We aimed to compare the effectiveness of a crowdsourced versus a social marketing video in promoting condom use.

Methods: Men who have sex with men (MSM) (≥16 years old, had condomless sex within three months) were recruited through a nationwide MSM website and randomly assigned to watch one of two videos in 2015. The crowdsourced and social marketing videos were developed through an open contest and designed by a company, using social marketing principles, respectively. Participants completed a baseline survey and follow-up surveys at three weeks and three months post-intervention. Intention-to-treat analyses was used for data analysis, with a non-inferiority margin of +10%.

Findings: Among the 1173 participants, 907 (77%) and 791 (67%) completed the three week and three month follow-ups. At three weeks, condomless sex was reported by 146/434 (33.6%) and 153/473 (32.3%) participants in the crowdsourced and social marketing arms, respectively. The crowdsourced intervention achieved non-inferiority (estimated difference: +1.3%, 95% CI: -4.8 to 7.4%). At three months, 196/376 (52.1%) and 153/473 (32.3%) participants in the crowdsourced and social-marketing arms (estimated difference: +2.5%, 95% CI: -4.5 to 9.5%). The two arms also had similar intervention cost (25/64, 39%) among the public and subpopulations (25/64, 39%) and lack of test kits (25/64, 39%).

Interpretation: Our study demonstrates that crowdsourcing is an effective tool for designing media to promote condom use. Crowdsourcing contests could create more imaginative intervention tools that promote HIV prevention and control.

Source of Funding: This work was supported by the NIH NIAID 1R01AI114310; NIH FIC 1D43TW009532; NIH 5P30AI050410, NIAID P30 AI027763.

Abstract #: 2.026_INF

HepTestContest: A Global Innovation Contest Soliciting Descriptions of Hepatitis B and C Testing Programs

J. Tucker1, H. Team2; 1UNC Project-China, Guangzhou, China, 2HepTestContest, Geneva, Switzerland

Background: Innovation contests provide a structured mechanism to solicit community feedback on important public health issues. Innovation contests have been used to develop public health campaigns, clinical algorithms, and inform policy. The purpose of this innovation contest was to solicit descriptions of hepatitis B and C testing from around the world.

Methods: The innovation contest represented a collaboration between SESH (Social Entrepreneurship for Sexual Health) and the World Health Organization. The contest, called HepTestContest, included the following steps: 1) organizing a steering committee to create the open call; 2) engaging the general public through social media; 3) evaluating contributions based on pre-specified criteria; 4) recognizing finalists and sustaining engagement. Information was collected from each contributor regarding when testing programs started, percent of organization’s work devoted to hepatitis, availability of direct acting antivirals (DAAs), providing HIV testing, and barriers to testing.

Findings: The HepTestContest received 64 entries from 27 countries. Thirty-one groups received a commendation of excellence from the World Health Organization. A mean of 9301 individuals were tested for HBV, HCV, or both among the 39 entries that reported. Most (42/64, 66%) entries were from testing programs that started in the past three years. A mean of 44% of each organization’s work was devoted to hepatitis. Most entries (49/64, 77%) were from countries in which DAAs were available. Most (45/64, 71%) programs also provided HIV testing and four entries described integration of HIV-hepatitis testing services. The most commonly mentioned barriers were lack of hepatitis awareness among the public and subpopulations (25/64, 39%) and lack of test kits (25/64, 39%).

Interpretation: This innovation contest solicited a wide range of descriptions of hepatitis B and C testing programs. Public policy experts and community health workers alike may benefit from innovation contests that engage end-users of guidelines. As testing for hepatitis B and C programs scale up in many regions, further innovation will be important for achieving WHO service targets towards the elimination of hepatitis B and C.

Source of Funding: SESH, US NIH, WHO.

Abstract #: 2.027_INF

Crowdsourcing Designation: A New Model for Multisectoral Collaboration

J. Tucker1, W. Tang2, H. Li3, C. Liu4, R. Fu5, S. Tang6, B. Cao6, C. Wei7, T. Tangthanasu8; 1UNC Project-China, Guangzhou, China, 2University of North Carolina at Chapel Hill, Chapel Hill, NC, USA, 3UNC Chapel Hill, Chapel Hill, USA, 4SESH Global, Guangzhou,