ISRCTN16488951 https://doi.org/10.1186/ISRCTN16488951

Evaluating the implementation of Common Ambition Bristol to reduce HIV inequities in African and Caribbean heritage communities

Submission date
21/07/2024

Recruitment status
No longer recruiting

Registration date
29/07/2024

Overall study status
Completed

Last Edited
10/09/2025

Condition category
Infections and Infestations

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[_] Results
[_] Individual participant data
[X] Record updated in last year

Plain English summary of protocol

Background and study aims
In the UK, two groups are most affected by a health issue called HIV – one is men who have sex with other men, and the other is people from African and Caribbean Heritage Communities (ACHC). In 2019, Bristol City Council looked at some information about this problem and asked the people living there. They found that some people from ACHCs were getting HIV without knowing it, and sometimes they found out too late, which led to poor health. They also learned that some people didn't want to use sexual health services because of negative thoughts about HIV (which we call stigma) and how the services were run. This could make people from ACHC not want to test for HIV or use PrEP, a pill that can stop them from getting HIV.

To help with this issue, we formed a group called Common Ambition Bristol (CAB). This group involves people from the ACHC working with healthcare staff to make sexual health services better (we call this co-production). We planned and tried out four activities to improve understanding of HIV and HIV testing (we call these interventions) These are: (1) website, adverts, social media and videos (2) community events to talk about HIV (3) going out to talk with the community about HIV (4) making HIV testing easier. We used learning from research to make the interventions better, and hope that they will help lower HIV stigma, make more people get tested and use medicine to prevent HIV (PrEP).

We first got money from the Health Foundation to design and start these four interventions. Bristol City Council has now given more money to keep the interventions running. We want to see if these four interventions are working and if they keep helping people for a longer time. We want to know if people like the interventions, if they help lower HIV stigma and make more people test for HIV and use PrEP. We also want to see if the group of people working together (co-production) has made these interventions better and if they are good value for money.

Who can participate?
Members of the African and Caribbean Heritage community in Bristol

What does the study involve?
We will look at how things like HIV testing were before we started these interventions and compare them with how things are now. We will also compare with a place in London that didn't try these interventions at all. We will use interviews and surveys to ask people from ACHCs what they thought about the four interventions, their views on HIV, testing and how to make sexual health services better. We will do interviews with the CAB group members to see how they all worked together. We will also do interviews with healthcare staff and other people involved in CAB to see if and how these interventions have made things better. We will see how much it cost and if it's worth it. All this will take two years.

What are the possible benefits and risks of participating?
The benefits of participating are to increase knowledge of HIV and how to test. There are no risks.

Where is the study run from?
University of Bristol (UK)

When is the study starting and how long is it expected to run for?
March 2024 to September 2025

Who is funding the study?
NIHR Public Health Research (PHR) Programme (UK)

Who is the main contact?
Dr Jeremy Horwood, j.horwood@bristol.ac.uk

Contact information

Type(s)
Public, Scientific, Principal investigator

Contact name
Prof Jeremy Horwood

ORCID ID
https://orcid.org/0000-0001-7092-4960

Contact details
Population Health Sciences, Bristol Medical School, University of Bristol, Canynge Hall, 39 Whatley Road
Bristol
United Kingdom
BS8 2PS
+44 117 455 1225
j.horwood@bristol.ac.uk

Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

Integrated Research Application System (IRAS)
315181

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
2022 - 3098, IRAS 315181

Study information

Scientific Title
Evaluating the implementation of Common Ambition Bristol to reduce HIV inequities in African and Caribbean heritage communities

Acronym
CAB

Study objectives
Evaluating the implementation of Common Ambition Bristol to reduce HIV inequities in African and Caribbean heritage communities

Ethics approval required
Ethics approval required

Ethics approval(s)
approved 01/03/2024, South Central - Berkshire B Research Ethics Committee (2 Redman Place, Stratford, London, E20 1JQ, United Kingdom; +44 207 104 8256; berkshireb.rec@hra.nhs.uk), ref: 22/SC/0322

Study design
Qualitative evaluation of co-production, process evaluation of intervention implementation, outcome impact evaluation, Health Economics analysis

Primary study design
Observational

Study type(s)
Prevention

Health condition(s) or problem(s) studied
HIV (human immunodeficiency virus)

Interventions
• Co-production evaluation - interviews are conducted with community members and sexual health clinicians
• Intervention implementation evaluation - people attending Common Ambition Bristol events are asked to complete a survey, and at the end, they are asked if they would like to take part in an interview. Focus groups will also be conducted with people running the events.

Intervention Type
Behavioural

Primary outcome(s)
The following primary outcome measures will be assessed at one timepoint:
1. Long-term intervention-related changes in HIV testing among the African and Caribbean communities measured using data derived from the electronic patient record (EPR) and postal testing kit systems of Unity Sexual Health (main site) and Croydon Sexual Health (control site)
2. Experiences of the co-production process measured using data collected in co-production interviews
3. The views of Community members attending Common Ambition Bristol events and improvements to sexual health services measured using data derived from a survey examining past and future HIV testing behaviour, HIV knowledge and open-ended questions
4. Testing history and intention; knowledge and awareness of HIV; HIV stigma and experience of attending CAB event measured using data derived from
Community member interviews
5. Factors that promote and inhibit the implementation of interventions, as well as how these interventions work, from implementation to integration measured using data derived from
Focus groups with members of the CAB team who deliver the interventions
6. Issues that promote and inhibit CAB events and indicate ways to improve future events measured using data derived from Interviews with the partners who host or support CAB events

Key secondary outcome(s))
There are no secondary outcome measures.

Completion date
30/09/2025

Eligibility

Key inclusion criteria
Members of the African and Caribbean Heritage community in Bristol

Participant type(s)
Healthy volunteer

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 years

Upper age limit
99 years

Sex
All

Total final enrolment
200

Key exclusion criteria
Does not meet inclusion criteria

Date of first enrolment
01/03/2024

Date of final enrolment
01/05/2025

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
University Hospitals Bristol and Weston NHS Foundation Trust
Trust Headquarters
Marlborough Street
Bristol
United Kingdom
BS1 3NU

Sponsor information

Organisation
University of Bristol

ROR
https://ror.org/0524sp257

Funder(s)

Funder type
Government

Funder Name

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be stored in a publically available repository on https://data.bris.ac.uk/data/.

The risk of re-identification from the anonymised interview data is low. We are therefore proposing that the data in the form of anonymised transcribed interviews be made available to bona fide researchers on request via the University's Research Data Repository, data.bris. A section on the interview consent will seek agreement for the participant's data (anonymised transcripts) to be made available to other researchers on request. If participants decline this aspect during the consenting process, we will still include them in the research as long as they sign up for the other parts, but their data will not be made available on data.bris for secondary analysis.
Only authorised users can access controlled data stored within the data.bris. The University Research Data Service (data.bris.ac.uk) is responsible for the repository and is committed to maintaining published datasets over the long term and for a minimum of twenty years. Access to controlled data by an outside researcher would need ethical approval and then need to apply to the University of Bristol Data Access Committee (DAC) to discuss and decide whether to release the data if they agree to preserve the confidentiality of the information. For more information on data.bris access levels see https://goo.gl/ui2VRt.

IPD sharing plan summary

Stored in publicly available repository, Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes