

BIOGRAPHICAL SKETCH

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NAME: Smith, Philip John

eRA COMMONS USER NAME (credential, e.g., agency login): PHILLIPSMITH

POSITION TITLE: Socio-Behavioral Scientist

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completi on Date MM/YYYY Y	FIELD OF STUDY
University of Cape Town, South Africa	BSocSc	12/2003	Psychology
University of the Western Cape	BA Honors	12/2004	Psychology
University of Cape Town	MSocSci Cum Laude	12/2010	Psychology
University of Cape Town	PhD	02/2019	Medicine
University of California, Los Angeles, CA	GloCal Fellowship	06/2022	HIV prevention
University of Cape Town	MPH modules	10/2022	Qualitative research

A. Personal Statement

I am a Behavioral Scientist at the Desmond Tutu Health Foundation (DTHF), and Senior Lecturer at the Dept. of Medicine, University of Cape Town (UCT). I have conducted HIV research since 2012 and my career has focused on using behavioral science to develop interventions to promote the uptake of HIV services in vulnerable, harder to reach populations living in limited resource communities in South Africa. This research has assessed financial incentives for linkage to HIV care, structural and psychosocial factors that facilitate and hamper health-seeking behavior, and characteristics of contextually appropriate sexual health services. I have led the Mobile Services Division and have been an active member of the socio-behavioral division at the DTHF. The mobile clinic services operate in limited resource, high HIV disease burden communities in Cape Town. Other research has investigated methods of improving linkage-to-care through the use of mhealth and incentives, and the use of alternative sexual risk behavior measures supporting clinical intervention research.

I completed my Post-Doctoral GloCal Fellowship with the University of California, Los Angeles. I was the Principal Investigator the GloCal funded study of HIV prevention among young men in East London, South Africa. The study explored PrEP preferences and evaluated willingness to take pre-exposure prophylaxis (PrEP). My recent research has investigated using the undetectable equals untransmittable (U=U) message adapted for men to improve HIV testing uptake in high disease burden communities in South Africa. Prior to receiving my PhD, I led mobile HIV testing services in Cape Town, South Africa, which affords me with the contextual perspective of program management and behavioral science.

A major component of my independent research focuses on men's health in HIV prevention. I am the PI of the study Male Access to PrEP and Sexual health Services study (MACCESS PrEP, K43 NIH/ Fogarty Emerging Global Leader) and receive mentorship and training in qualitative research methods, advanced biostatistics, and behavioral science. Since PrEP has been marketed to key populations and young women in South Africa, my research aims to understand the utility and accessibility of this HIV prevention tool for men. The K43 is designed to support a transition to independent scholarship through expert guidance by my mentorship team. The training and research objectives will promote my independent investigator career as a research expert in HIV prevention and care in men in low resource settings. Key publications describing my research are listed below.

Smith, P. *et al.* Undetectable=untransmittable (U=U) messaging increases uptake of HIV testing among men: Results from a pilot cluster randomized trial. *AIDS Behav.* (2021).

Smith, P. *et al.* Participatory Prototyping of a Tailored Undetectable Equals Untransmittable Message to Increase HIV Testing Among Men in Western Cape, South Africa. *AIDS Patient Care and STDs* (2021).

Smith, P., Davey, D. J., Green, H., Cornell, M. & Bekker, L.-G. Reaching underserved South Africans with integrated chronic disease screening and mobile HIV counselling and testing: a retrospective, longitudinal study conducted in Cape Town. *PLOS One.* *PLOS ONE* (2021).

Smith, P., Wallace, M. & Bekker, L.-G. Adolescents' experience of a rapid HIV self-testing device in youth-friendly clinic settings in Cape Town South Africa: a cross-sectional community based usability study. *J. Int. AIDS Soc.* **19**, (2016).

Morgan Jones, M. *et al.* Mapping Pathways: Developing evidence-based, people-centred strategies for the use of antiretrovirals as prevention. (2013). Available at: http://www.rand.org/pubs/research_reports/RR326.html.

Wallace, M. *et al.* Feasibility and acceptability of conducting HIV vaccine trials in adolescents in South Africa: going beyond willingness to participate towards implementation. *S. Afr. Med. J.* (2018).

B. Positions and Honors

Positions and Employment

2011	Lecturer - Cultural Studies and Quantitative Research Methods, CTI Midrand Graduate Institute, Cape Town
2012	PEPfAR Fellow, Desmond Tutu HIV Foundation, Cape Town
2013- present	Socio-Behavioral Scientist, DTHF, Cape Town
2015- present	Desmond Tutu Health Foundation company member
2016- present	Member, International AIDS Society
2022- present	Senior Lecturer, Department of Medicine, University of Cape Town

Awards, Honors and Lectures

2009-2010	Harry Crossley Research Foundation Research Fellowship
2013-2015	NRF and Department of Science and Technology PhD award for Innovation in Research
2021	UCT Grand Rounds Lecture, Best Lecture award

C. Contributions to Science

D Smith's research has investigated novel approaches to the problem of delivering HIV services to and supporting health outcomes for those most at risk of HIV acquisition and onward transmission in limited resource communities in Cape Town, South Africa. Specifically, young people in sub-Saharan Africa are disproportionately affected by HIV, sexually transmitted infections, and unplanned pregnancies. Moreover, young South African men have the highest rates of premature mortality (<35 years), where HIV is the second leading cause of death. The provision of accessible sexual and reproductive health services (SRHS) for young people in SSA is vital to reduce this burden. We conducted fifteen focus group discussions across five research sites, with 120 male and female adolescent HPV vaccine trial participants aged between 12–19 years from four South African provinces in low-income areas with high HIV incidence. Participants highlighted the need for youth friendly services, availability of developmentally appropriate and tailored information, and improved relationships between healthcare workers and clinic attendees. In the absence of creating dedicated youth services, existing SRHS should be more responsive to adolescents and young adults. Innovations such as mobile outreach services, self-testing, and flexible hours can provide responsive health services. We subsequently piloted services, including HIV self-testing, a mobile clinic for adolescents and young adults, and web-based self-testing service and found high acceptability for all three services. Taken together, young South Africans prefer differentiated, community-based services over traditional, clinic-based services and gave high acceptability for all three services.

Smith, Philip, Wallace, M., Gill, K., Beijneveld, N., Bennie, T., Myer, L., Dietrich, J., Gray, G., & Bekker, L.-G. Young male's uptake and acceptability of Medical Male Circumcision in two culturally distinct settings in South Africa: A longitudinal, community-based study: The MACHO Study. *SAMJ: South African Medical Journal*, (2020).

Smith P, Marcus R, Bennie T, Nkala B, Nchabeleng M, Latka MH, Gray G, Wallace M, Bekker LG. What do South African adolescents want in a sexual health service? Evidence from the South African Studies on HIV in Adolescents (SASHA) project. *S Afr Med J*. 2018 Jul 25;108(8):677-681. doi: 10.7196/SAMJ.2018.v108i8.13013. PubMed PMID: 30182885.

Smith P, Tolla T, Marcus R, Bekker LG. Mobile sexual health services for adolescents: investigating the acceptability of youth-directed mobile clinic services in Cape Town, South Africa. *BMC Health Serv Res*. 2019 Aug 19;19(1):584. doi: 10.1186/s12913-019-4423-4. PubMed PMID: 31426788; PubMed Central PMCID: PMC6701080.

Smith P, Wallace M, Bekker LG. Adolescents' experience of a rapid HIV self-testing device in youth-friendly clinic settings in Cape Town South Africa: a cross-sectional community based usability study. *J Int AIDS Soc*. 2016 Jan;19(1):21111. doi: 10.7448/IAS.19.1.21111. Epub 2016 Dec 23. PubMed PMID: 28406597; PubMed Central PMCID: PMC5380981.

Dr Smith's research has also investigated the use of financial incentives. A randomized trial investigated whether an incentive could increase linkage and treatment initiation for patients who had recently tested HIV positive at a mobile clinic. Finding showed that patients seen at the mobile clinic were motivated to initiate care with 67% linking to care with no difference between the experimental and control group. Similarly, there was no difference between the two groups for treatment initiation (42%). Treatment initiation was low in both groups and qualitative evidence suggests there are significant challenges experienced, travel distance, limited financial resource, clinic delays, fragmented clinic services, stigma, which may delay treatment initiation. This evidence provides impetus for investigating same-day treatment on board community-based mobile clinics.

Maughan-Brown, B., Kuo, C., Galárraga, O., Smith, P., Lurie, M. N., Bekker, L.-G., & Harrison, A. (2017). Stumbling Blocks at the Clinic: Experiences of Seeking HIV Treatment and Care in South Africa. *AIDS and Behavior*, 1–9. <https://doi.org/10.1007/s10461-017-1877-4>

Maughan-Brown, B., Smith, P., Kuo, C., Harrison, A., Lurie, M. N., Bekker, L.-G., & Galárraga, O. (2017). Readiness for Antiretroviral Therapy: Implications for Linking HIV-Infected Individuals to Care and Treatment. *AIDS and Behavior*. <https://doi.org/10.1007/s10461-017-1834-2>

Complete List of Published Work in My Bibliography:

<https://www.ncbi.nlm.nih.gov/myncbi/1jK9i1On-ny5c/bibliography/public/>

D. Additional Information: Research Support and/or Scholastic Performance

NIH/ Fogarty, NIMH Smith (PI) 2022/09/01-2027/08/31

MACCESS PrEP: Male Access to Sexual Health Services and PrEP

Role: PI

NIH Bekker/ Medina-Marino (PI) 2022/06/01-2027/05/31

Improving HIV testing, linkage, and retention in care for men through U=U messaging

Role: Co-PI

Carnegie/ UCT Smith (PI) 2021/04/01-2023/03/31

Male Community PrEP Study

Role: PI

BMGF Bekker (PI) 2020/06/01-2023/05/31

FastPrEP: Delivering PrEP to high disease burden communities through Mobile Clinics

Role: Co-PI

Previous support

FIC/ NIH Smith (PI) 2021/04/01-2023/03/31
Male Community PrEP Study
Role: PI

EDCTP Bekker (PI) 2020/08/01-2021/07/31
TRACE: Transmission of COVID-19 in Crowded Environments.
Role: Co-PI

BMGF Davey (PI) 2019/11/01-2020/10/31
Leveraging social and sexual networks to reach young men with HIV testing and linkage services – This project investigated the impact of U=U messaging on HIV testing uptake.
Role: Co-PI

SAMRC/ FORTE Bekker (PI) 2016/08/01-2018/07/31
Engaging Men in HIV Care
Role: Co-PI

Abbott Smith (PI) 2014/01/01-2020/12/31
The project investigated mobile clinic diagnostic services. Tutu Tester Mobile Clinic Health on Wheels.
Role: PI

Research Fellowship National Research Foundation, Department of Science and Technology PhD award for Innovation in Research 2013/01/01-2015/12/31

Harry Crossley Research Foundation award (Masters in Psychology) 2009/01/01-2010/12/31

Metropolitan Health Group, R3,000,000, 2014-2016. Tutu Tester Mobile Clinic Health on Wheels.

Discovery Health, R1,800,000, 2014-2016. Tutu Tester Mobile Clinic Health on Wheels.

AngloAmerican Chairman's Fund, R1,500,000. 2015-2016. Tutu Tester Mobile Clinic Health on Wheels.

Alere Healthcare, R7,500,000, 2015-2017. Tutu Teen Truck Mobile Clinic.