Ryan White Programs and Youth

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HIV/AIDS Bureau

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Vision and Mission of HIV/AIDS Bureau

- Vision: The HIV/AIDS Bureau envisions optimal HIV/AIDS care and treatment for all.
- Mission: The HIV/AIDS Bureau provides leadership and resources to assure access to and retention in high quality, integrated care and treatment services for vulnerable people living with HIV/AIDS and their families.

Ryan White Programs

- Heavily Impacted Cities (Part A)
- States and Territories (Part B)
 - AIDS Drug Assistance Programs (ADAP)
- Community Based Organizations
 - HIV Primary Care (Part C)
 - Women, Infants, Children, Youth and Affected Family (Part D)





Ryan White Programs

- Other Programs (Part F)
 - Special Projects of National Significance (SPNS)
 - AIDS Education and Training Centers (AETC)
 - Community Based Dental Programs
 - Dental Reimbursement





Ensuring Quality of Care

- Continuous Clinical Quality Improvement
- HIVQUAL
- National Quality Center





Ryan White Funding

- Primary health care including medications and support services
- Provider training
- Technical Assistance
- Demonstration projects





Primary Care Services Funded

- Medical evaluation and clinical care
- Oral health care
- Laboratory Testing
- Medications and Adherence Counseling





Primary Care Services Funded

- Specialty Care
- Substance abuse and mental health screening and treatment
- Nutrition services
- Case Management





Support Services Funded

- Transportation
- Child Care
- Food Assistance
- Respite Care
- Emergency Housing Assistance
- Legal Services



Clients Served

- Annually more than 529,000 uninsured and underinsured persons affected by HIV/AIDS
- **73** % racial minorities, 33% women





Youth Served

 Youth ages 13-24 comprise approximately 7% of Ryan White clients





Part C: Early Intervention Services

- 352 grantees
- Public and private non-profit communitybased organizations
- Focus is on outpatient HIV primary care





Part C: Early Intervention Services

- Services associated with direct provision of medical evaluation and clinical care, including
 - Oral health
 - Laboratory testing
 - Medications
 - Medical and dental personnel and support personnel
 - Mental health assessment and treatment
 - Substance abuse assessment and treatment





Part D: Women, Infants, Children, Youth, Families

- Family-centered services
- Medical care for PLWHA only
- Support services that enable clients to access medical care
- Education on clinical research opportunities and outreach



Part D Youth Programs

- 17 grantees funded to provide services for HIV infected youth
- Goals: Identify HIV positive youth, enroll them into care, and retain them in care
- 16 sites are in large cities.
- 1 program located in Harlingen, TX



Part F: Special Projects of National Significance (SPNS)

- Funds innovative models of care
- Develops or modifies an existing model of care
- Evaluates the effectiveness of the model
- Disseminates findings to promote the adoption of effective models of care.





SPNS Initiative of Interest

Identifying, Linking, Engaging, and Retaining Young Men having Sex with Men (MSM) of Color in HIV Care





Identifying, Linking, Engaging, and Retaining Young MSM of Color in HIV Care

- Innovative service models designed to reach HIV-infected young MSM not engaged in clinical care and link them to appropriate clinical, supportive and preventive services.
- Support innovative outreach to assist HIV-infected individuals learn their HIV status
- Link HIV-infected persons to primary care services
- Prevention with positives





Outreach Methods: Young MSM

- Venue-based outreach
- HIV testing vans
- Youth-focused materials
- Chat rooms and social network sites
- Community drop-in centers





Outreach Methods: Young MSM

- Social and sexual networks
- Community-wide HIV testing initiatives
- Use of peer or near-peer outreach workers
- Health care and youth-focused service system "inreach," networking with health care providers





Treatment Interventions and Services

- Aware of and embraced youth culture
- Created youth-friendly physical site and staff
- Offered separate youth-designated waiting rooms
- Used multidisciplinary staffing model
- Employed clinicians expert in treatment of adolescent medicine AND HIV
- Created one-stop clinical and psychosocial support services





Treatment Interventions and Services

- Provided transportation and accompanied clients to their first medical appointment
- Met clients where they feel comfortable, emphasized privacy and respect, and maintained consistent contact
- Used motivational interviewing to engage clients
- Effectively and creatively addressed treatment adherence and medication education





Treatment Interventions and Services

- Peers or near-peers served as system navigators
- Decreased wait time for appointments
- Flexible scheduling- expect appointments to be missed and rescheduled
- Addressed the legal issues faced by HIV+ youth
- Anticipated and addressed loss to follow-up





Lessons Learned: Youth

- Recognize and address the struggle for daily survival among Young MSM
- Create a friendly, safe, youth-centered space, with separate youth waiting rooms
- A youth-centered model differs from an adult model





Other critical elements in designing programs for YMSM of color

- Establish strong care teams with clear roles and responsibilities among team members
- Training in adolescent development, motivational interviewing, and mental health and addiction screening are important
- Awareness of youth culture
- Adopt new technologies, such as texting
- Assign experienced social workers to YMSM of color



Develop community resources



Special Supplement

The YMSM of Color Initiative Special Supplement was published last August in "AIDS Patient Care and STDs".





Engaging Youth in Planning and program implementation

- Peer counselors/patient navigator
- Peer educators
- Consumer Advisory Group
- Quality management activities (Cross Part Collaborative)





Challenges

- Persistent stigma
- "Cultural competency" within the healthcare system
- Complex disease management issues
- Co-morbidities (mental illness, substance abuse)





Challenges

- Increased demand for services with few new or declining resources
- Rising costs of care and growing prevalence of HIV
- Expanding access to medication at the lowest possible price
 - Prioritizing core medical services

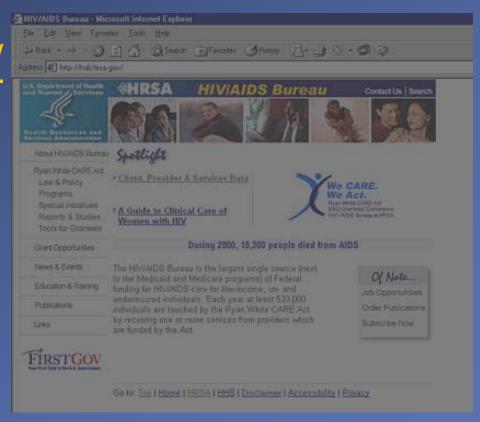


Challenges

- Fair and equitable distribution of resources
- Retaining patients in care
- Transitioning HIV + Youth from adolescent to adult care
- Retaining/recruiting knowledgeable staff
- Ensuring sound fiscal management of grants and fiscal viabilities of grantees and funded foroviders

HIV/AIDS Bureau Website

http://hab.hrsa.gov/







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