

# PATH to Jobs

*Expanding Employment Opportunities for PLWH as Peer Navigators and Community Health Workers*

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ON HIV CARE & TREATMENT

# Learning Objectives

- Explain how workforce development initiatives—career readiness and job placement—for persons living with HIV improve health outcomes of both the Peer Workers themselves and the individuals and communities they reach through role modeling, education, and resource connection to address health disparities and inequities exposed and exacerbated by the COVID-19 pandemic.
- Describe how participation in PATH to Jobs vocational training and job placement opportunities impacts psychosocial outcomes leading to improved physical and emotional health, employment, and financial stability of participants.
- Identify best practices to integrate Peer Navigators/CHWs into medical, behavioral health, and social service organizations.
- Explain how Peer Workers, whose shared lived experience is a qualification for employment, utilize employment and vocational training to expand our efforts towards Ending the HIV Epidemic.

## **PATH to Jobs is a workforce development and job placement clearinghouse for low-income New Yorkers living with HIV and other chronic health conditions**

- Values the shared lived experiences of low-income New Yorkers living with chronic health conditions as an essential employment qualification
- Increases the number of low-income New Yorkers who obtain vocational support and job placement opportunities in health and social service agencies across New York
- Facilitates the integration of community health workers and certified peer workers into health and human service delivery systems to provide:
  - patient navigation
  - linkage to care
  - harm reduction
  - treatment adherence support

# Overview 2

## **PATH to Jobs serves both the Community Health Worker (CHW)/Peer Worker and Employer**

### **PEER WORKERS/CHWs are provided:**

- Career readiness coaching, vocational education, training, supervision
- Vocational assessment, goal setting, timeline, and development of an action plan
- Benefits counseling, and support towards successful job placement
- Ongoing support for success in job placement and job retention

### **EMPLOYERS are provided:**

- Consultation and placement support to match frontline workers in positions that align employer needs and priorities
- Supervisor Training at Placement Employer Agencies

# 2-Year Pilot Funded by NYSDOH AIDS Institute

**Creating a statewide clearinghouse for career readiness and job placement services for entry-level community health workers and certified peer workers to:**

- Place 30-50 individuals into part-time and/or full-time entry level frontline workforce positions across New York State each year
- Evaluate project implementation and impact for all components of PATH to Jobs to demonstrate the program's achievement of increased job placement and economic mobility for low-income New Yorkers living with chronic health conditions

**Shared staffing in New York City and Albany to ensure greater reach across New York State**

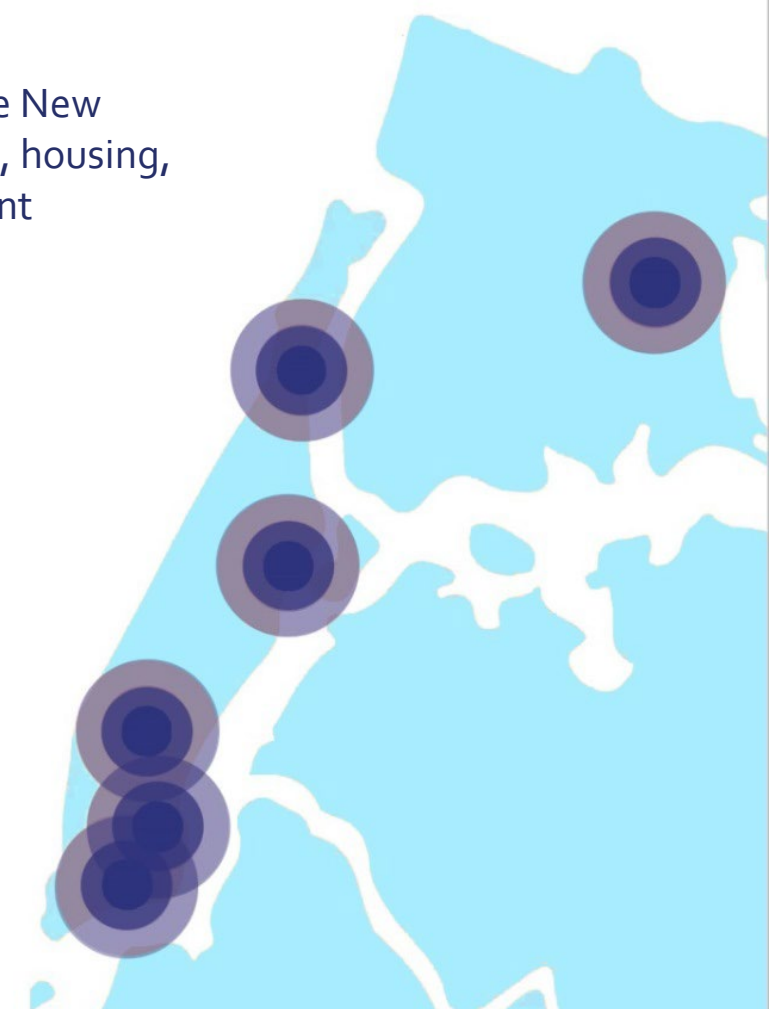
# Alliance for Positive Change

Alliance for Positive Change is a leading multiservice organization that provides low-income New Yorkers living with HIV/AIDS and other chronic conditions with access to quality health care, housing, harm reduction, coaching, and PATH to Jobs—our renowned peer training and job placement program that cultivates leadership and economic mobility.

Each year, we help New Yorkers:

- Get tested for HIV, HCV & COVID-19
- Manage substance use and access recovery support
- Become Certified Peers and get practical job training
- Access medical care and health insurance
- Get equitable COVID-19 information and vaccination
- Find stable housing and other basic needs
- Rejoin the world of work through PATH to Jobs
- Replace isolation with community
- Lead healthier and more self-sufficient lives

Learn about all the ways we inspire *positive change* at [www.alliance.nyc](http://www.alliance.nyc)



# Peer Power

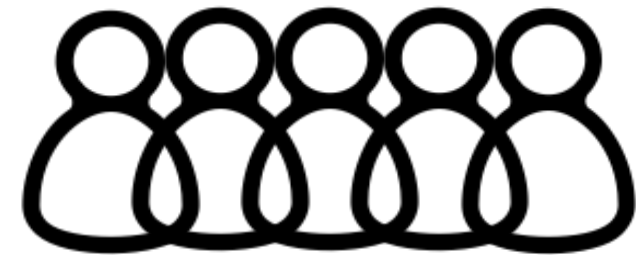
- Peer Power is a programming model that drives economic development and social impact through role modeling.
- Peers empower individuals to become community leaders and they inspire others to make healthy choices.



Photo: David Nager/Alliance

# Peer Internship Placements

- Managed Care Companies (MCOs)
- Medicaid Health Homes
- Hospitals / Health Centers
- STD Clinics
- Syringe Exchange Programs
- Drug Treatment Clinics
- SROs and Supportive Housing Programs
- AIDS Service Organizations





# Role of Peer Workers

- Shared Lived Experience:
  - Culturally
  - Linguistically
  - Socially
  - Economically
- Reduce Barriers to Care
- Foster Trust
- Promote Long-term Engagement
- Guide Patients Toward Health and Stability

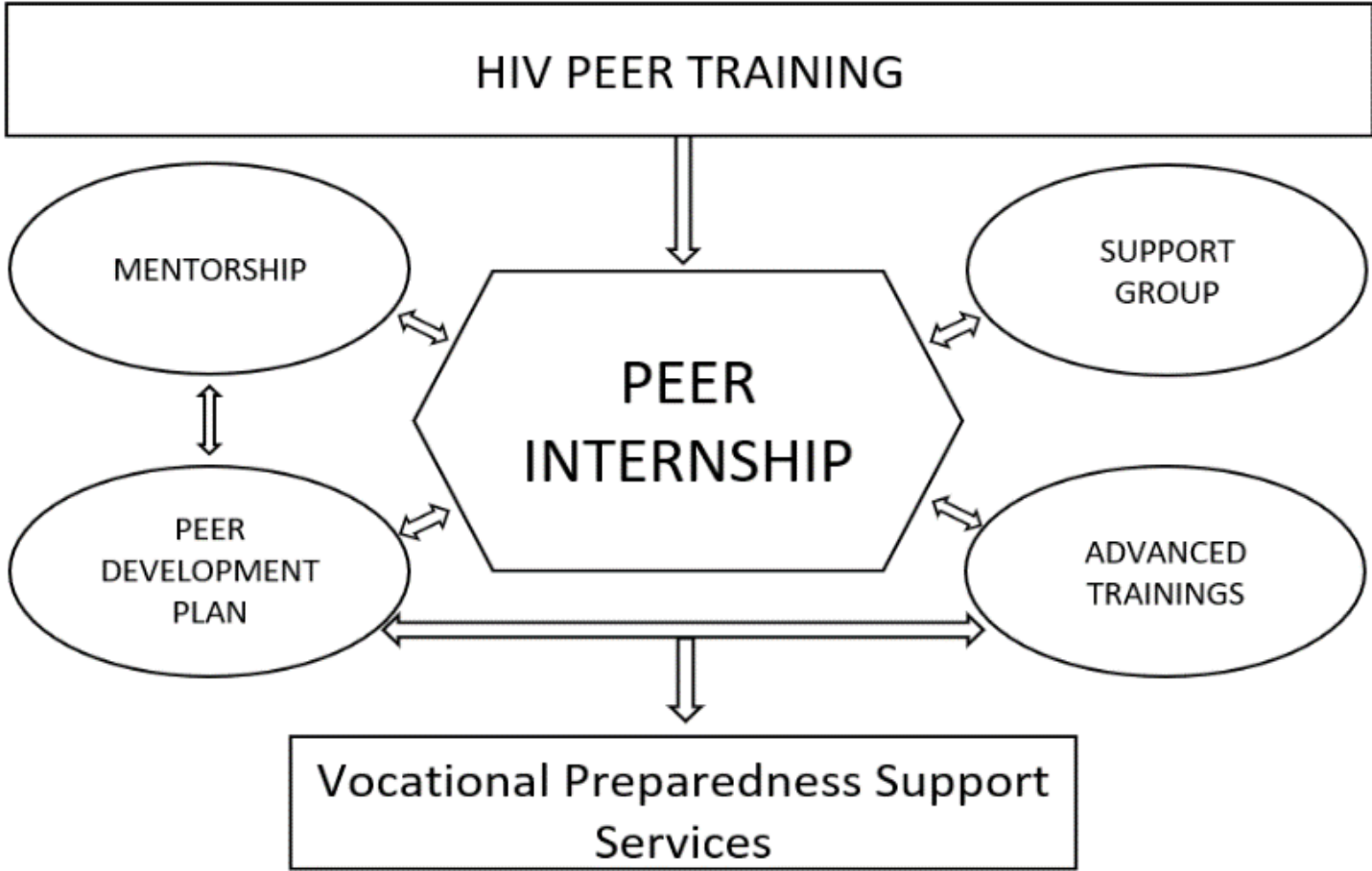


Photo: David Nager/Alliance

## Employing a Peer/CHW Workforce Can Help Your Organization Provide New Value to the Community.



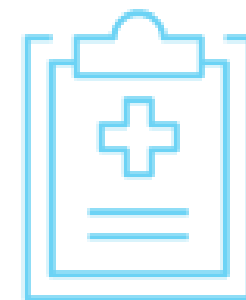
# Peer Placement & Support



# Peer Internship Placements 2

## Peers conduct:

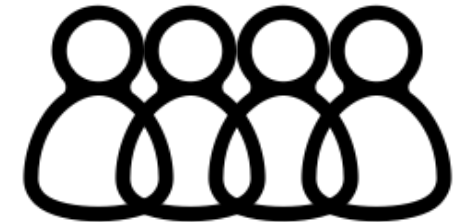
- Outreach for Patient Activation/Linkage to Care
- MSM/YMSM Education and Engagement
- HIV/HCV/Covid Testing
- Coaching / Health Education
- Harm Reduction / Syringe Exchange
- Patient Navigation
- Adherence Support
- Self-Management



# Linkage to Care Track

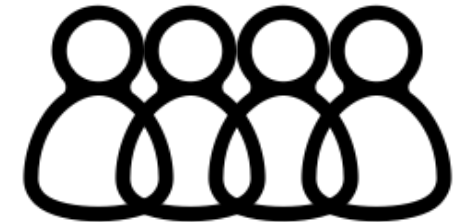
## Peer Health Coaches conduct outreach and engagement activities that facilitate linkage to care and include provision of:

- Health promotion messages and education
- Screening, enrollment and consent forms to participate in services
- Referrals to risk reduction services (e.g., syringe exchange, PEP/PrEP, and integrated HIV/HCV/STI screening services)
- “Warm hand-off” to care team
- Accompaniment to appointments



## Peer Navigators are part of care coordination teams providing individualized services including:

- Appointment reminder phone calls.
- Follow-up on missed appointments, and scheduling and rescheduling appointments.
- Accompaniment to appointments.
- Navigation to specialty care.
- Home visits.
- Motivational interviewing and goal setting.
- Case conferences / communication with all members of the care team.



# Peer Placement & Support 2

- **Peer Internship:** 6-month cycles—extensive on-the-job employment readiness experience.
- **Peer Placement:** Matching skills of peer, customized to the needs of the facility, staff and clients.
- **Consultation:** 1:1 support to Task Supervisor at placement site to ensure optimal placement.
- **Authenticity/Efficacy:** Knowledge and relatability of peer to client. Cost efficient, additional support for existing professional staff.
- **Evaluation:** Assessment of impact of peer-delivered services.

# Peer Placement & Support 3

- **Payment of Peer:** Part-time or full-time, minimum \$15/hour.
- **Individualized Placement Support/Mentorship:** Focus on skills development; creation of individualized personal and professional development plans tailored to each Peer's interests, priorities, and needs.
- **Mandatory Support Group:** Provide skill enhancements, encouragement, and guidance to help the Peer Interns “stay on track” with their own recovery and personal aspirations.
- **Continued Training/Education:** Ongoing skills training on variety of topics.



# Benefits of Employing a Peer Workforce

- **Motivates** clients to become self sufficient
- **Builds rapport** with the client. It's a great time to talk with them.
- **Decreases fear and stigma** for the client.
- **Coaches** the client on how to talk to their doctor.
- **Advocates** for and with the client, with a goal of self-advocacy and self-management.
- **Accompanies** the client to medical and other appointments.
- **Supportive Services** – promotes engagement in support services at Alliance, in addition to going to the doctor.



Photo: David Nager/Alliance

# Outcomes of Employing a Peer Workforce



## FOR PEERS

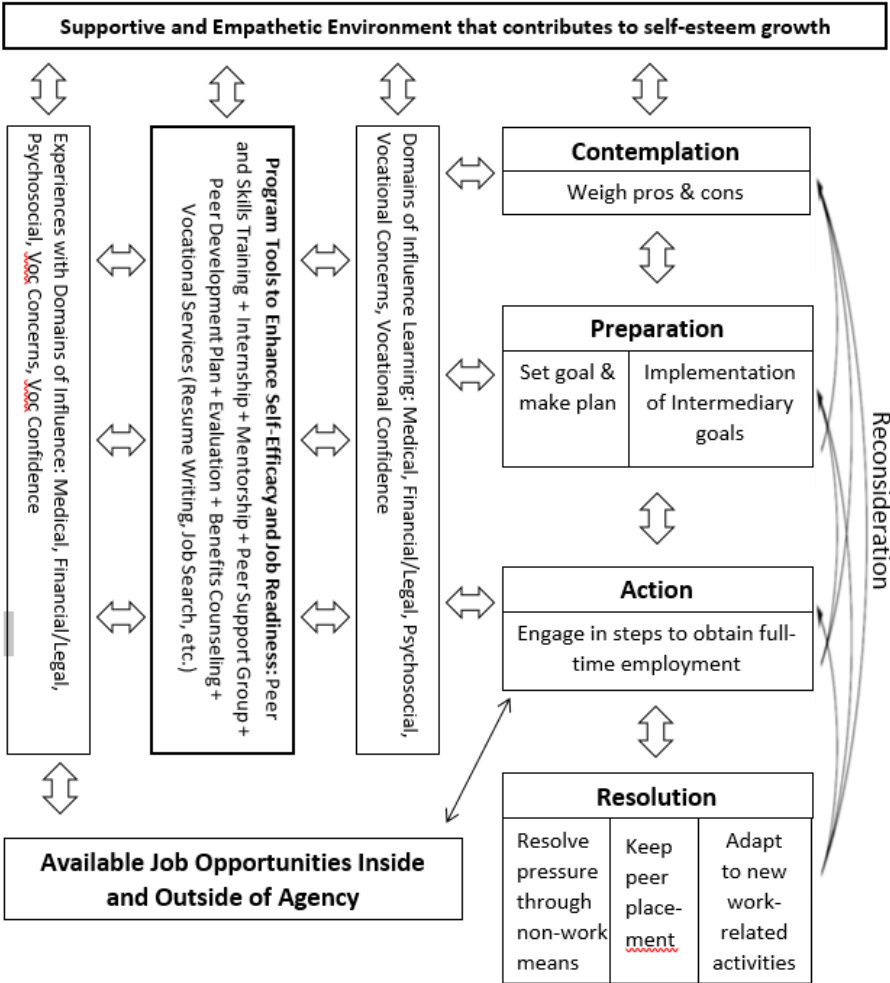
- Self-sufficiency
- Adherence to appointments
- Adherence to medications
- Economic development (peer placement)
- Community influence
- Role model / community leader



## FOR ORGANIZATIONS

- Reduced healthcare costs
- Retention in care
- Improved health outcomes
- Longevity in position
- Increased service resources (for outreach, enrollment, navigation)
- Low-cost strategy
- Strengthening communities

# Client-Focused Considering Work Model For HIV Peer Programs



Goldblum P, Kohlenberg B. Vocational counseling for people with HIV: The client focused considering work model. *Journal of Vocational Rehabilitation*. 2005; 22:115-24.

Conyers L. A client-focused considering work model for people with emerging or episodic illnesses. *Journal Of Vocational Rehabilitation*. 2018; 48:331-43.

# ALLIANCE PEERS



## Peer Program Health and Psychosocial Survey

- **Assessments:** Demographics, emotional and behavioral psychosocial measures, work history, health outcomes
- **Timing:** Participants completed the survey at the start of PREP, at the end of PREP, and every six-months as a peer.
  - Nine cohorts of PREP participants were followed through 6-months of internship
- **Methods:** Descriptive statistics were completed for each PREP/Peer cycle
  - PREP Cohorts: Longitudinal evaluation of score changes in psychosocial measures utilizing paired t-tests (Pre-PREP/Post-PREP/6-months peer)
  - N=192 participants completed PREP
  - N=55 participants completed PREP and 6 months of peer internship

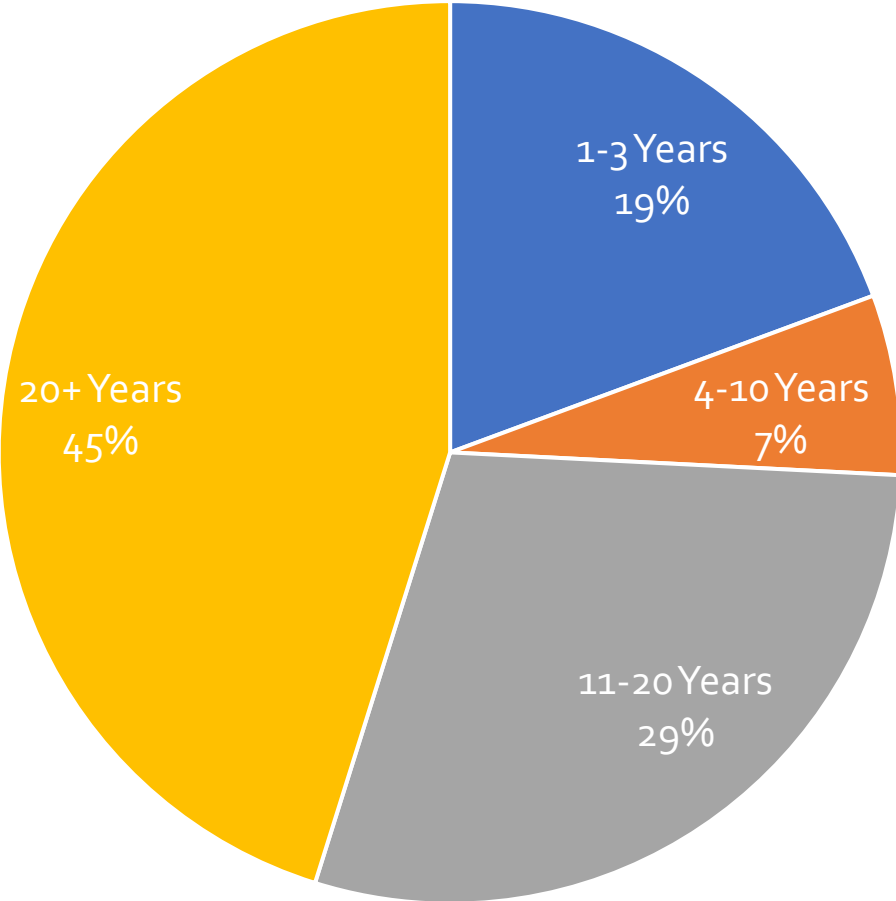
# Alliance Peer Interns

(December 2018; N = 122)

- Gender
  - 43% Female
  - 5% Male
  - 2% Transgender
- Age
  - 44% >50 years old
  - 29% 35 – 50 years old
  - 27% 18 – 34 years old
- Race/Ethnicity
  - 43% Black/African American
  - 40% Latinx/Hispanic
  - 1% Asian
  - 13% Multiple Races
  - 3% White
- Sexual Identity
  - 37% LGBTQIA+
  - 63% Heterosexual
- Level of Education
  - 15% Less than High School
  - 24% High School/GED
  - 44% Some College/Technical Training
  - 17% College Graduate
- Health Status
  - 63% HIV-Positive
  - 55% AIDS Diagnosis (among those living with HIV)
  - 31% Mental Health Diagnosis
  - 40% In Recovery

# Alliance Peers in Recovery

(December 2018; N=48 (40%))



Years in Recovery	%
1 – 3 Years	19%
4 – 10 Years	7%
11 – 20 Years	29%
20+ Years	45%

# Program Evaluation

## PREP training & Internship *Significantly*

- Decreases Depression ( $p < .001$ ) & Internalized HIV Stigma ( $p < .003$ )
- Increases Medication Adherence ( $p < .02$ )
- Increases Patient Self-Advocacy ( $p < .02$ )
- Decreases Sexual Communication Anxiety ( $p < .001$ )

## Peer Internship *Significantly*

- Increases Self-Esteem ( $p < .01$ )



Photo: David Nager/Alliance



# Program Evaluation 2

- 91% of PREP Graduates have visited their doctor in the last 6 months
- 79% have not missed a dose of prescribed medication in the last month
- 94% have sustained recovery for at least one year
- 92% have sustained viral suppression



Photo: David Nager/Alliance

# Discussion

**“Alliance let me know that just because you have HIV doesn’t mean you can’t do everything you wanted to in life. Being a Peer gives me a purpose in life, and with that type of support, then we’re able to go out and give that same message to others.”**



Photo: David Nager/Alliance

# Benefits of Peer Navigation

I've been an Alliance Peer for 5 years. I tell people, "I came from where you're coming from, and there was help for me, hope for me—and there can also be hope for you."



Photo: David Nager/Alliance

# Peer Training @ Alliance



The Alliance  
for Positive Change

About Get Care

## Today Show Highlights Positive Change



[www.alliance.nyc/news/2017/12/4/today-show-highlights-positive-change](http://www.alliance.nyc/news/2017/12/4/today-show-highlights-positive-change)

# QUESTIONS?

# THANK YOU!

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