

# Hand in Hand: A peer outreach Model in the New Orleans EMA

Using peer social networks to bring out of care and unaware clients into care and reduce unmet need.



# Objectives

- Describe the Hand-in-Hand model
- Discuss the use of peers as outreach models
- Evaluate the impact of a similar program in different systems of care

# The Problem(s)

- Unmet need
- Unaware individuals
- Inefficient and ineffective EIS/Outreach programs
- Inability to access hard to reach populations

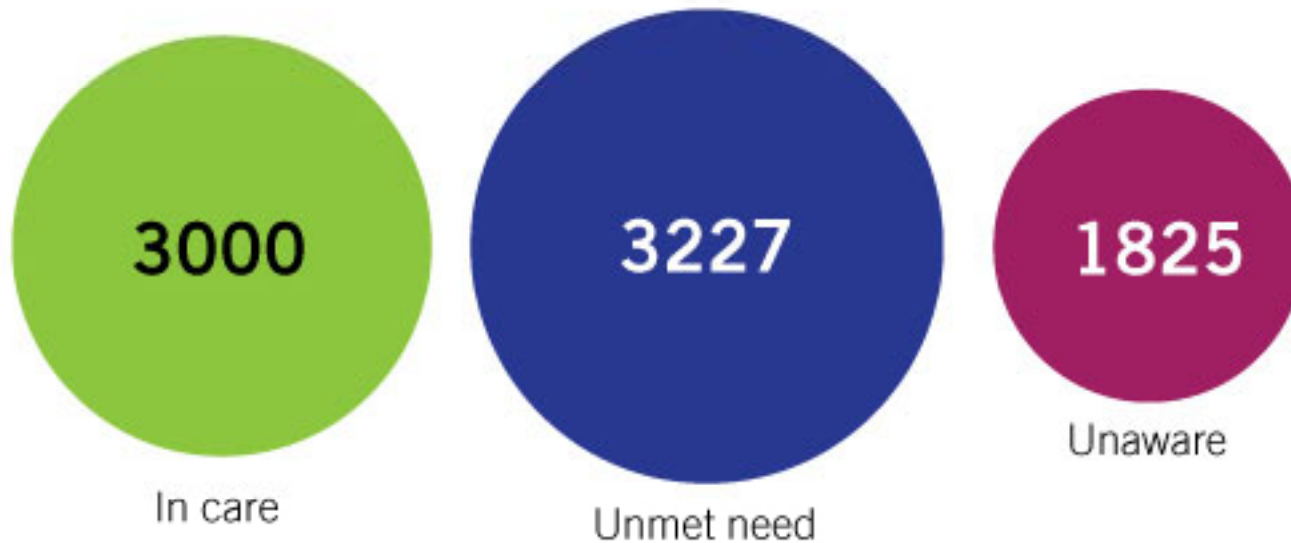
# Possible Solutions

- MONEY!
- Magic eight ball
- Peers
- More money

# Background: the New Orleans EMA and unmet need

- 3000 clients served in FY 2009
- Barriers to care
- Unmet need framework
- Progress made since 2005

# PLWH in NOEMA



**Total estimated PLWHA: 8692**

**Total estimated not in care: 5052**

\* The number 'in care' reflect the number of clients served in 2009 therefore differ slightly from the estimated in care for 2010 as the unmet need data and unaware data include new infections

THAT'S A LOT OF PEOPLE FOLKS

20 Years of Leadership  
A LEGACY OF CARE



2018 RYAN WHITE ALL GRANTEE MEETING AND 10TH ANNUAL CLINICAL CONFERENCE

‘Every HIV positive individual in care knows at least three positive individuals who are not accessing care’



# Peer Programs

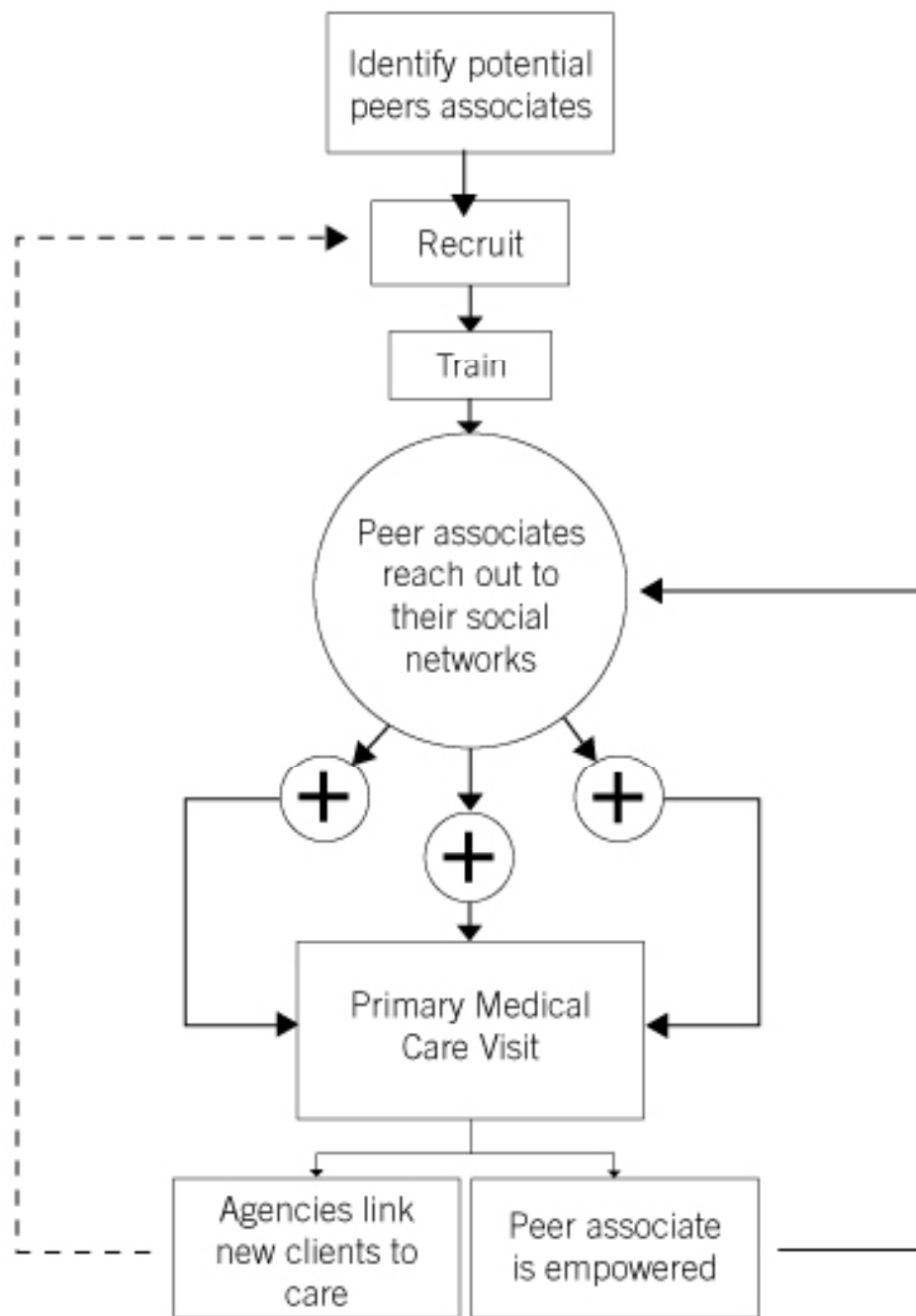
- Instant cultural competency
  - Peers tend to refer peers who are like themselves into care
- Cost effective
- Can reach out to networks that traditional outreach programs cannot
  - Provider based outreach programs are based upon provider-client models that do not incentivize innovative thinking

# HIV Social Networks

- Social context of HIV transmission
- Structural characteristics of social networks associated with risk
- Influence of peers in social networks
- Social support in retention into care

# Hand in Hand: The model

- Collaboration with Mosaica
- Joint effort between Grantee and Planning Council
  - 51 Percent consumer participation on Planning Council
- Role of the Peer Associate



# Logistics

- EMA specific training on Continuum of Care
- Forms Forms Forms
- Clearly defined roles
- INCENTIVES
- Measures

# Outcomes

- Outcome 1: Clients brought into care
- Measure 1: Number of clients who initially access PMC and follow-up six months months later
- Outcome 2: Associate empowerment
- Measure 2: Validated pre/post test data from associates

# Questions?



Thanks!





# Contact information

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