THE EVOLUTION OF DIGNITY

A Model Approach to Engaging and Retaining HIV + Women in Care

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The Evolution of Dignity:

Moving from Chaos to Care and Access with Ryan White Part D

• Chaos:

 Failure to identify and refer to HIV medical and psychosocial care are missed opportunities that can be removed by using Ryan White Part D to build partnerships.

• Care:

 For for many HIV+ women care is unpredictable. Many of these women are triply diagnosed and are involved with the child welfare and/or criminal justice systems. These circumstances and others contribute to their inability to access and remain in care.

• Access:

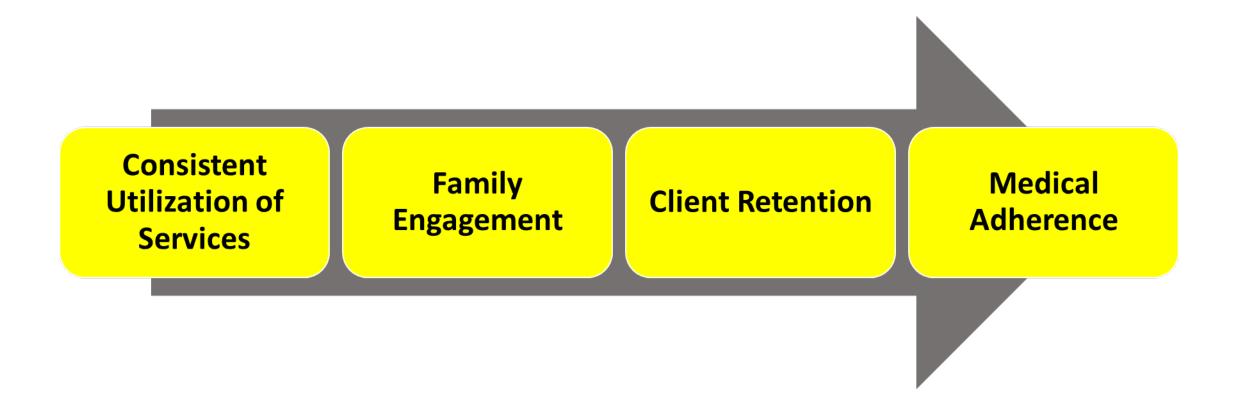
 Ryan White Part D shows how a non-clinical process of integrated and familycentered services provides a safety net for HIV+ women to access and remain in care.

The Evolution of Dignity: Building Care Systems...

• Ryan White Part D Builds Care Systems:

- Developing family-centered care systems that are coordinated, accessible and responsive to the needs of HIV+ women, creates an inclusive model that increases access to entry to healthcare and social services.
- Non-clinical interventions, such as pharmacy medications pick-up, community outreach, transportation, housing and various community resources, can maximize resources to identify and eliminate barriers to care.

The Evolution of Dignity Ryan White Part D...Produces Sustainable Outcomes



The Evolution of Dignity: The Power of One

- The Power of One is a mindset.
 - Using this mindset provides no greater force for changing a client's world.
 - Using this mindset provides a way for clients to begin the process of regaining their dignity.
 - **One** step is all it takes to start even the biggest journey.
- The Evolution of Dignity Intervention
 - Is a pathway that that leads to long-term sustainable transformation.

- A pathway for transformation consist of many challenges, activities and outcomes. Two examples:
 - **Challenge:** Removing the mask that has been used to guard and protect.
 - Activity: Rotating client-driven weekly leadership.
 - <u>Outcome</u>: Individual accountability, bond within the core group, consistent utilization of services and retention in care.
 - **Challenge:** Learning how to successfully live with HIV.
 - Activity: Easily accessible weekly meetings, co-located in the clinic, same day of the week and prior to medical appointment with ancillary support (i.e., transportation, childcare and food).
 - <u>Outcome</u>: consistent utilization of services and medical adherence.

The Evolution of Dignity: Purpose Over Pain

Success was Expected

The success of the intervention led to:

- Additional funding for program replication.
- Clients were consistent in adhering to their medical regimen.
- Peers became Red Cross certified HIV/AIDS educators.
- "First of Many First"
 - First to graduate
 - First to be drug free
 - First to regain custody of children
 - First to live on their own

Success was Experienced

- Changed thinking led to changed circumstances.
 - Increased self- esteem, confidence and dignity
 - Employment opportunities
 - Family engagement
 - National Recognition
 - HIV/AIDS Consultants
 - Presenters at National arenas,
 - Board Members of local and national HIV/AIDS organizations

The Evolution of Dignity: = Transformation

• Recognize Challenges

- The stigma of HIV/AIDS
- The Mask
- Barriers to care:
 - Access to care
 - Transportation
 - Child care

• Create Expectations

- Maintain an environment of trust
- Establish an environment filled with:
 - Expectation
 - Accountability
 - Mutual participation

• Measures:

- Percentage of clients that were enrolled and consistently participated 3, 6, 9,12 months.
- Percentage of clients who consistently kept medical appointment.

• Outputs

- Number of women enrolled and engaged in the intervention.
- Number of participants that signed up and consistently kept medical appointment.
- Number of participants 100% compliant with medical regimen.