



People with HIV Leadership Institute: Stigma and Intersectionality- 16280

2020 National Ryan White Conference on HIV Care and Treatment

August 12, 2020

Amelia Khalill
Sr. Project Officer, Division of Policy and Data
HIV/AIDS Bureau (HAB)

Vision: Healthy Communities, Healthy People



Health Resources and Services Administration (HRSA) Overview

- Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically vulnerable through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities
- Every year, HRSA programs serve tens of millions of people, including people with HIV/AIDS, pregnant women, mothers and their families, and those otherwise unable to access quality health care





HRSA's HIV/AIDS Bureau (HAB) Vision and Mission

Vision

Optimal HIV/AIDS care and treatment for all.

Mission

Provide leadership and resources to assure access to and retention in high quality, integrated care, and treatment services for vulnerable people with HIV/AIDS and their families.





HRSA's Ryan White HIV/AIDS Program

- Provides comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV
 - More than half of people with diagnosed HIV in the United States nearly 519,000 people receive care through the Ryan White HIV/AIDS Program (RWHAP)
- Funds grants to states, cities/counties, and local community based organizations
 - Recipients determine service delivery and funding priorities based on local needs and planning process
- Payor of last resort statutory provision: RWHAP funds may not be used for services if another state or federal payer is available
- 87.1% of Ryan White HIV/AIDS Program clients were virally suppressed in 2018, exceeding national average of 62.7%





Objectives

- Define leadership and identify key concepts of transformational leadership
- Describe the role and history of meaningful involvement of people with HIV in the Ryan White HIV/AIDS Program
- Define stigma and identify multiple forms of stigma and the impact of health outcomes
- Discuss intersectionality and its relationship to improving access to care
- Understand significance, methods, and impact of community engagement and involvement in the RWHAP



This project is supported by the Health Resources and Services Administration (HRSA) through the Minority AIDS Initiative Fund of the U.S. Department of Health and Human Services (HHS) under contract number U69HA304700100 as part of an award totaling approximately \$2,750,000. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.

Presenters

NMAC Staff & Trainer

- Charles Shazor
- Lauren Miller







Contact Information

Amelia Khalil

Sr. Project Officer, Division of Policy and Data

HIV/AIDS Bureau (HAB)

Health Resources and Services Administration (HRSA)

Email: akhalil@hrsa.gov

Phone: 301-443-0527

Web: <u>hab.hrsa.gov</u>





Connect with HRSA

Learn more about our agency at:

www.HRSA.gov



FOLLOW US:

















Building Leaders of Color Session Two: Stigma, Intersectionality, & Self-Care

Charles Shazor Jr., SME
Associate Program Manager
NMAC

Lauren Miller, BA Health Equity Program Coordinator NMAC

Disclosures



Presenters have no financial interest to disclose.

This continuing education activity is managed and accredited by AffinityCE/Professional Education Services Group in cooperation with HRSA and LRG. PESG, HRSA, LRG and all accrediting organization do not support or endorse any product or service mentioned in this activity.

PESG, HRSA, and LRG staff as well as planners and reviewers have no relevant financial or nonfinancial interest to disclose.

Commercial Support was not received for this activity.

Learning Objectives



At the conclusion of this virtual session, the participant will be able to:

- Define the impacts of stigma
- Determine key elements of stigma
- Explore how stigma impacts individuals living with HIV
- Define intersectionality
- Explain types of intersectionality
- Explore the importance of self-care

Obtaining CME/CE Credit



If you would like to receive continuing education credit for this activity, please visit:

http://ryanwhite.cds.pesgce.com

Stigma, Intersectionality, & Self-Care



Building Leaders of Color (BLOC)

Virtual Training Workshop



This project is supported by the Health Resources and Services Administration (HRSA) through the Secretary's Minority AIDS Initiative Fund of the U.S. Department of Health and Human Services (HHS) under contract number U69HA304700100 as part of an award totaling approximately \$2,750,000. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.

Partners





Program Leadership

The National Minority AIDS Council (NMAC) leads the BLOC Project.





Positive Women's Network-USA (PWN-USA)



United States People Living with HIV Caucus (HIV Caucus)



Transforming HIV Resentments into Victories Everlasting Support Services Incorporated (THRIVE SS Inc.)

Rationale for BLOC



The rationale for BLOC is to contribute to the national HIV goals by ensuring people of color living with HIV, including transgender women of color, are equipped to provide meaningful input and guidance on achieving these goals via their participation on HIV planning bodies.



Purpose of BLOC Program



To increase the number of Persons of Color Living with HIV who are actively serving in leadership roles or engaged in leadership activities related to HIV-related services at all levels of decision making.

Guiding Principles



• The BLOC is based on **the Denver Principles**, a Bill of Rights / Declaration of Independence for the AIDS movement written in 1983. At its core, the Denver Principles demanded a set of rights and recommendations for people living with HIV.

These principles are built on social justice movements building power for African Americans,
 Native Americans, Asian Americans, Latinos and Chicanos, women's health and LGBT

liberation.



Guiding Principles Continued

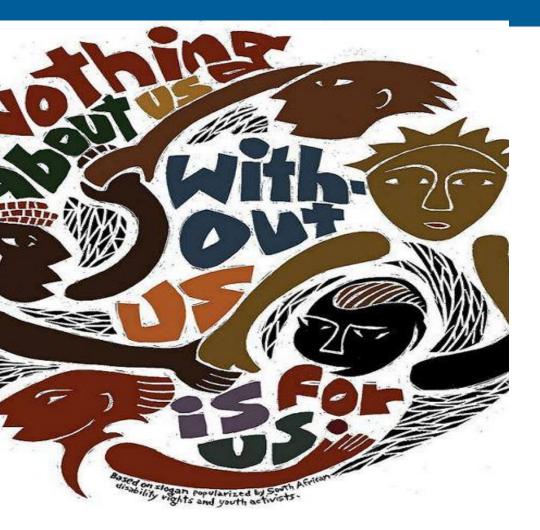


The principle of Meaningful Involvement of People Living with HIV/AIDS (MIPA) demands that people living with HIV be substantively engaged in policy and programmatic decision-making activities that impact our lives, and fairly compensated for our participation.



The Power of We





 The community of People Living with HIV nationally and globally holds the value of diverse leadership and broad stakeholder engagement.

This value is demonstrated in the structures that govern and lead these communities.

Our Aims as Leaders







CONFIDENCE.

While you are lost in music, we never loose our grip.

Stigma





Stigma Defined



Stigma is a social construction that involves at least two fundamental components:

- 1. The recognition of difference based on some distinguishing characteristic, or 'mark' and
- 2. Aa consequent devaluation of the person

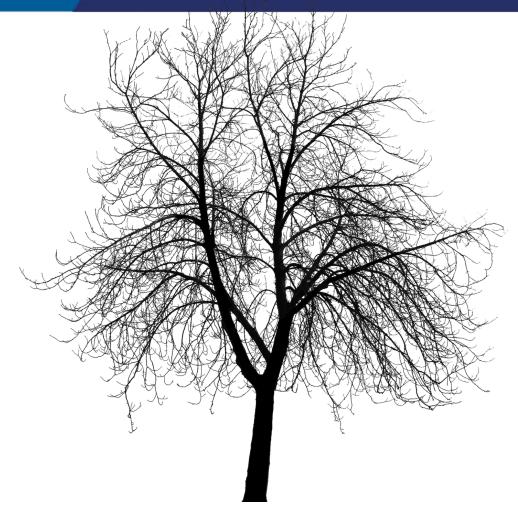
Activity Walk-Through:



The Stigma Tree

Stigma is and remains a significant barrier to care and treatment and has a measurable impact on health outcomes. To address stigma, we must understand where it comes from, what it looks like, and what it does to people and communities.

We're now going to explore a quick and effective activity that will help us to identify the primary drivers, forms, and outcomes of stigma from our own experiences.



The Stigma Tree



<u>Instructions</u> - Divide participants into three small groups. Each group has three colors of Post-It Notes and a Newsprint with a leafless tree drawn on it. Each group will only have 15 minutes to build their Stigma Tree.

Each group will conduct three brainstorms to identify how Persons of Color Living With HIV experience stigma to build their "Stigma Tree"

The three brainstorms should identify:

- 1. The causes of stigma the roots
- 2. The forms of stigma the trunk
- 3. The effects of stigma the branches

Instruct participants to transfer their brainstorm outcomes to Post-Its and place on their "Stigma Tree"

The Stigma Tree



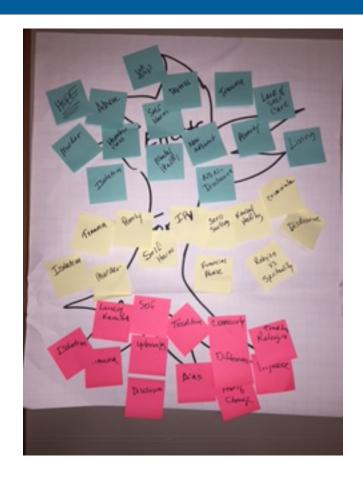
Some examples to guide your brainstorm:

- Roots: Lack of Knowledge, Lack of Awareness, Fear, Stereotyping
- Forms: Physical Violence, Emotional Violence, Segregation
- Effects: Depression, Isolation, Fear

After fifteen minutes, call time, and ask each group to present their Stigma Tree. If the Stigma Trees are very similar ask groups 2 and 3 to share only the elements of their tree that differ from the previous group's presentation.

The Stigma Tree - Examples





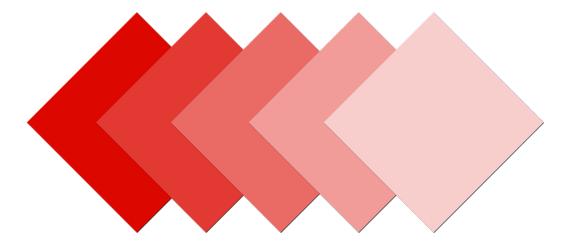




Manifestations of Stigma



- Public Stigma
- Self-Stigma
- Stigma by Association
- Structural Stigma



Social Psychological Functions of Stigma





Question



 Can anyone name some examples of these different types of stigma?

- Public
- Self-Stigma
- Stigma by Association
- Structural Stigma



How do people stigmatize?



- Isolation and Rejection
- Shaming and Blaming
- Enacted Stigma (Discrimination)
- Self-Stigma
- Stigma by Association
- Layered Stigma (Intersectionality)









• Intersectionality is a term first coined in 1989 by American civil rights advocate, Kimberlé Williams Crenshaw, to describe what she saw as failures of the system in responding to domestic violence against poor Black women.





 Intersectionality promotes an understanding of human beings as shaped by the interaction of different social locations and identities.

 These interactions occur within a context of connected systems and structures of power.

 Through such processes, interdependent forms of privilege and oppression shaped by colonialism, imperialism, racism, homophobia, ableism and patriarchy are created.



 According to an intersectional perspective, inequities are never the result of single, distinct factors.



Tenets of Intersectionality





- People's lives are multi-dimensional and complex
 - Cannot be explained through single identities
- Relationships and power dynamics between different identities and oppressions are linked.
 - They can also change over time and space.

Tenets of Intersectionality





- People can experience privilege and oppression simultaneously, based on context.
- With social problems, the importance of any identity or structure cannot be predicted but can be discovered through investigation.

Tenets of Intersectionality

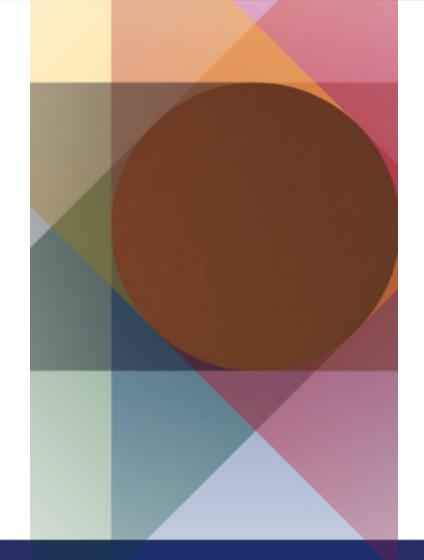


Individual experiences must be linked to broader structures of oppression.

Analysis must occur on multiple levels

Scholars, researchers, policy makers, and activists must consider their own social position and power.

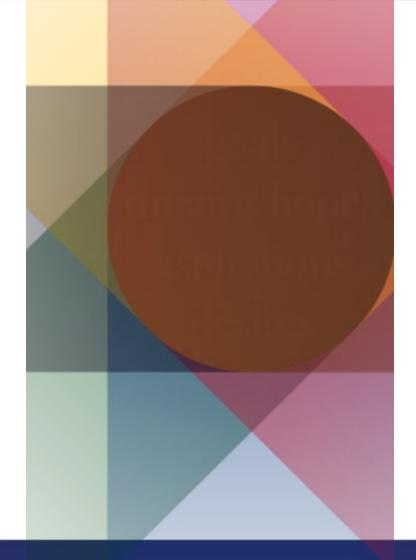
• This "reflexivity," should be in place before setting priorities and directions in research, policy work and activism.



Tenets of Intersectionality

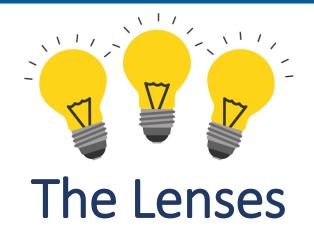


• Intersectionality is explicitly oriented towards transformation, building coalitions among different groups, and working towards social justice.



Activity Walk-Through



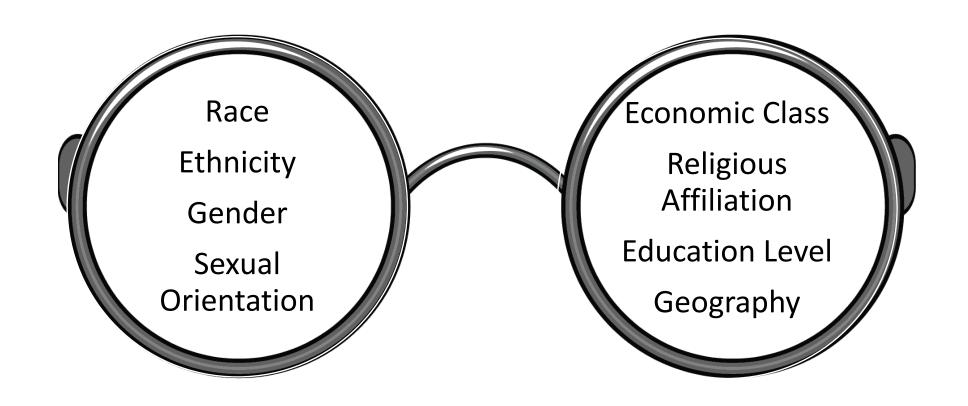


All of us come to the table with multiple identities. These identities are reflections of the communities and the cultures we come from. Some examples are race, ethnicity, sexual orientation, or gender identity. But it could also be your economic class or your education level.

These identities affect our view of the world and thus our lens of the world.

The Lenses



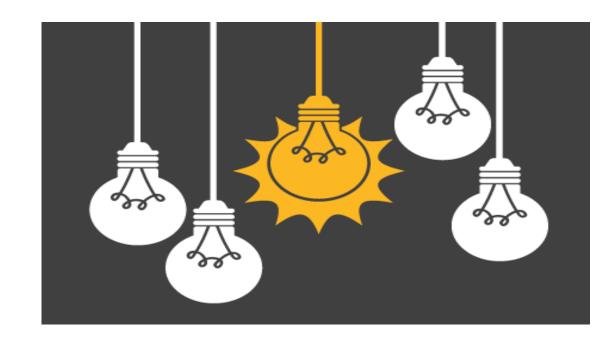


The Lenses



Ask Participants - How you identify yourself?

- 1. For this activity, participants should consider how they identify
- Using the Lenses handout, have participants fill in lenses with these identities
- 3. Be prepared to have participants share back with the larger group



Remember we all have multiple identities. Such as Race Ethnicity, Gender, Sexual Orientation, Economic Class, Religious Affiliation, Education Level, Geography.

The Lenses - Report Back





- Ask Participants to Share:
- What lenses do you view the world through?

Debrief:Participant Follow-Up Questions





- 1. What identities align with one another?
- What identities conflict with one another?
- 3. What makes them in conflict with one another?
- 4. How do/did you reconcile the two?
- 5. Have you ever experienced stigma as a result of your identities? What happened? How did you handle it?
- 6. Have you ever had to minimize or hide your identity because of the fear of be discriminated against?
- 7. Have you ever stigmatized or discriminated against someone? If so, what happened?







Ask yourself:

- What is self-care?
- Why is it important?



What Is Self-Care?



- Self-care is an individual's decision to modify behavior in order to improve health and well-being.
- Types of self-care
 - Physical
 - Psychological
 - Emotional
 - Spiritual
 - Social



Why Self-Care Is Important



Self-care can increase the likelihood of:

- Seeking medical care
- Maintaining medical adherence
- Improving diet and exercise
- Reducing substance use
- Obtaining social support

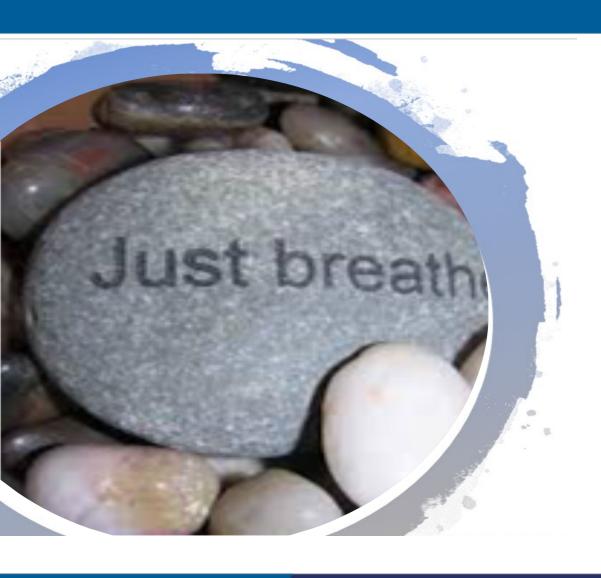






- Good self-care may keep you focused on your health needs
- Good self-care may help you with addressing stressors, mental health, and substance use concerns
- Good self-care may improve your personal engagement with your own health care provider and align your wellness goals





Stress Reduction Checklist (SRC)

Tips for Stress Management



Remember to:

- 1. Set priorities. Focus on what's important. Let the other stuff go.
- 2. Identify tasks that you can share or delegate, then ask for help.
- 3. Get organized. Disorder can make things confusing and hard to remember.
- 4. Set short-term goals you can reach. Reward yourself for meeting them!
- 5. Say no -- gracefully -- to taking on more obligations.
- 6. Laugh! Look for humor in your everyday life or watch a funny video.
- 7. Listen to music. Choose tunes that relax or revive you.
- 8. Talk to a counselor or a friend.

Too Good to Leave Out



- 1. Remember, things don't have to be perfect. Sometimes "good enough" is just fine.
- 2. Take a time-out for yoga, meditation, or some deep breaths.
- 3. Get regular exercise. Find something you like doing that you can work into your schedule.
- 4. Set aside some time, even 5 to 10 minutes, for yourself each day.



Thank you





To Learn More





To learn more about BLOC please visit:

http://www.nmac.org/programs/thecenter/bloc/

Contact Us





NMAC leads with race to urgently fight for health equity and racial justice to end the HIV epidemic in America

NMAC

1000 Vermont NW Suite 200 Washington, DC 20005

www.nmac.org

Charles Shazor Jr.

(Pronouns: he, him, his)
Associate Program Manager
NMAC's Training Center
P: 202-302-7515
cshazor@nmac.org

Lauren Miller

Imiller@nmac.org

(Pronouns: she, her, hers)
Health Equity Program Coordinator
NMAC's Training Center
P: 202.997.0951