

# BILINGUAL/BICULTURAL CARE TEAM INTERVENTION



The Bilingual/Bicultural Care Team intervention provides an opportunity to engage and retain Hispanic/Latinx adults with HIV by offering culturally and linguistically appropriate care services, leading to improved retention in HIV care and viral suppression.<sup>1</sup>

Download intervention Implementation guides and explore resources to help you innovate while replicating interventions that link, re-engage, and retain people within HIV care at [www.CIEhealth.org](http://www.CIEhealth.org).



## Priority Population

Adults with HIV who identify as Hispanic/Latinx and speak Spanish as their primary language



## The Challenge

Hispanic and Latinx people in the U.S. experience a rate of HIV three times that of non-Hispanic whites. They enter care later in the course of HIV disease and have a lower survival rate compared with non-Hispanic whites due to problems accessing quality care, navigating the healthcare system, and adhering to HIV treatment.<sup>2,3,4</sup>



## The Model

The intervention's coordinated approach leverages existing community resources, expertise, and resilience to support organizations in addressing the unique barriers faced by Hispanic/Latinx people with HIV. It is an adaptable model that enables clinics and other service-delivery settings to better serve the Hispanic/Latinx community.



## Pilot and Trial Sites

Truman Medical Center (TMC) in Kansas City, MO



## Impact

The clinic that implemented the intervention experienced a significant increase in clients scheduling and keeping appointments, from a mean of 2.81 to 5.30 visits per year. The viral suppression rate among clients who met the criteria for ARV therapy increased by 31.5 percent.<sup>1</sup>

<sup>1</sup>Enriquez, M., Farnan, R., Cheng, A. L., Almeida, A., Del Valle, D., Pulido-Parra, M., & Flores, G. (2008). Impact of a bilingual/bicultural care team on HIV-related health outcomes. *The Journal of the Association of Nurses in AIDS Care: JANAC*, 19(4), 295–301. <https://doi.org/10.1016/j.jana.2008.04.004>.

<sup>2</sup>Fitzpatrick, L. K., Sutton, M., & Greenberg, A. E. (2006). Toward eliminating health disparities in HIV/AIDS: the importance of the minority investigator in addressing scientific gaps in Black and Latino communities. *Journal of the National Medical Association*, 98(12), 1906–1911.

<sup>3</sup>Shapiro, M.F., Morton, S.C., McCaffrey, D.F., Senterfitt, J.W., Fleishman, J.A., Perlman, J.F., Athey, L.A., Keesey, J.W., Goldman, D.P., Berry, S.H., et al. Variations in the care of HIV-infected adults in the United States: results from the HIV Cost and Services Utilization Study. *JAMA*. 1999 Jun 23;281(24):2305–2315.

<sup>4</sup>Cooper, L.A., Beach, M.C., Johnson, R.L., Inui, T.S. Delving below the surface. Understanding how race and ethnicity influence relationships in health care. *J Gen Intern Med*. 2006 Jan;21 (Suppl 1): S21–S27.