Addressing barriers and facilitators accessing treatment and retention in care among HIV-positive Mexican MSM

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Disclosures

Presenter(s) has no financial interest to disclose.

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Commercial Support was not received for this activity.
Learning Objectives

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

1. Identify and describe at least two methods staff and peers can employ to successfully engage and link HIV-positive Mexican MSM to HIV treatment and support services.

2. Identify the importance of how access to support services supports linkage and retention in HIV care.

3. Describe the importance of patient perspectives on retention in care for intervention and program development.
Obtaining CME/CE Credit

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

http://ryanwhite.cds.pesgce.com
Proyecto Vida: Addressing Barriers in Accessing HIV Treatment Among Mexican Men Who Have Sex with Men

Robyn Schweizer, MSW
Bienestar Human Services
Los Angeles, CA
Bienestar Human Services: Who We Are
Bienestar Human Services

- A grassroots, non-profit community service organization established in 1989
- Created due to a lack of HIV/AIDS services for the Latino community in Southern California
- Six offices located throughout Los Angeles County

Mission Statement:

"Bienestar Human Services is committed to enhancing the health and well-being of the Latino community and other underserved communities. Bienestar accomplishes this through: community education, prevention, mobilization, advocacy and the provision of direct social support services."
Bienestar Services

- HIV/HCV/STI screening
- Mental health treatment
- Outpatient substance abuse treatment
- Syringe exchange (mobile and storefront)
- HIV linkage to care and peer navigation
- Support groups
- HOPWA case management
- Food bank
- PrEP/PEP navigation
- HIV prevention programming and research
Social Justice
Community Education

TRANSGERDER SURGERIES 
MEET & GREET

JOIN US FOR A MEET AND GREET WITH DR. MAURICE GARCIA & HIS TEAM FROM CEDARS-SINAL.

DISCUSSION TOPICS INCLUDE:
Various Trans Affirming surgeries such as vaginoplasty, top surgery, breast augmentation, results of surgeries, etc.

FRIDAY OCTOBER 12, 2018
12-4:30PM
525 E. 7th St. Long Beach, CA 90813

CEDEARS-SINAL

Please RSVP with: Khloe Rios
Or Brenda Gonzalez
Kperex·rios@bienestar.org
Or 866·590·6411 Ext. 503

For more information, call 866·590·6411 ext. 209, bienestar@bienestar.org

BENESSTAR PRESENTA UN FORO COMUNITARIO.

VIERNES 14 DE SEPTIEMBRE
7:00 PM

Presentador:
DR. STEVEN SANTIAGO

BIENESTAR HOLLYWOOD
4955 W. Sunset Blvd. Los Angeles Ca. 90027

Se ofrecerá cena

Para más información, llame a (866) 590-6411 ext. 402

LAPD + MUJERES TRANS
Foro Comunitario

Biendedr ELLA
5326 E. BEVERLY BLVD, LOS ANGELES 90022
MARTES AGOSTO 21
4:00-6:00PM

Para más información, llame a (866) 590-6411 ext. 402

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MARTES AGOSTO 21
4:00-6:00PM

Par más información, llame a (866) 590-6411 ext. 402
Community Outreach
Social & Cultural Events

El Centro de Pomona Celebra
Fiesta de las Américas
A Celebration of Latin American Culture

Miércoles 12 de Septiembre, 2018
6:30-9:30PM
180 E. Mission Blvd.
Pomona, CA. 91766

Información al 866-590-6411 Ext 600

Jesús Rosas o Edgar Camacho
Proyecto Vida: Project Overview

A culturally-specific program designed to:

- Improve the identification, timely entry, engagement and retention in quality HIV care for Mexican and other Latino MSM in Los Angeles County
- Address individual, provider, and structural barriers to accessing and engaging in HIV care
- Identify cultural factors, values and norms that may affect access to services
## Proyecto Vida: Project Overview, cont.

<table>
<thead>
<tr>
<th>IDENTIFY</th>
<th>ENGAGE</th>
<th>RETAIN</th>
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</table>
| • Targeted HIV testing  
  • Community outreach efforts in areas frequented by Latino MSM  
  • Social network testing and engagement  
  • Referrals from community partners | • Link to medical care  
  • Peer navigation | • Peer navigation  
  • Referrals to other programs and services  
  • Meet to complete incentivized ACASI (audio computer-assisted interviewing) follow-ups every 6 months of 24-month period of enrollment |
**Proyecto Vida: Project Overview, cont.**

Of 104 total participants enrolled:
- 64 (62%) newly-diagnosed with HIV
- 40 (38%) re-engaged to care
- 95% linked timely to medical care

Ethnic background of participants:
- 1 Puerto Rican participant
- 21 Mexican-American participants
- 82 Mexican participants
Focus on Mexican Participants

Of the 82 participants from Mexico enrolled in the project:

- 49 (60%) were newly diagnosed with HIV
- 33 (40%) were re-engaged to HIV medical care
- 98% were linked timely to medical care
ACASI Surveys

Audio computer-assisted interviewing (ACASI) surveys were completed at baseline and every six months until completion of program at 24 months.

Data being presented are from ACASI baseline surveys conducted by 82 Mexican participants.
ACASI Survey Variables

- HIV-Related Medical History
  - Past engagement in medical care
  - ART use
  - CD4 count and viral load
  - AIDS diagnosis

  - Communication in Spanish versus English
  - Cultural identity/identities and feelings associated with that identity/identities
  - Types of interactions and frequency of interactions with family and friends from country of origin

- Risk Factors & Protective Factors for Engagement and Retention in Care
  - Support/lack of support of family and/or friends
  - Internalized stigma
  - Perceived and real discrimination
  - Mental health
  - Substance use
  - Documentation status
  - Income level
  - Transportation
  - Mexican cultural factors
Mexican Cultural Factors

- **Machismo**
- **Caballerismo**
- **Personalismo**
- **Familismo**
- Helping Others
- Religiosity
- Personal Growth

<table>
<thead>
<tr>
<th>Mexican Cultural Components</th>
<th>Interventions with Program Participants</th>
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<tbody>
<tr>
<td></td>
<td>Recruitment</td>
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<tr>
<td></td>
<td>Social Network HIV Testing</td>
</tr>
<tr>
<td>Conceptualizations of Masculinity (machismo/caballerismo)</td>
<td>X</td>
</tr>
<tr>
<td>Personalismo</td>
<td>X</td>
</tr>
<tr>
<td>Helping Others</td>
<td>X</td>
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<tr>
<td>Religiosity</td>
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<td>Familismo</td>
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<td>Personal Growth</td>
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</tbody>
</table>
ACASI Baseline Findings
HIV Medical History

More than half of all participants declined to answer questions related to HIV medical history:

- **Taken ART:** 1% no, 10% yes, 89% no answer
- **Taking ART:** 5% no, 6% yes, 89% no answer
- **Lowest CD4:** 12% less than 200, 1% 201-349, 7% 350-499, 9% 500 or higher, 18.3% don't know, 52% no answer
- **Last viral load result:** 20% detectable, 22% undetectable, 6% don't know, 52% no answer
Risk Factors Impacting HIV Care

Potential barriers to engagement and retention in HIV medical care were identified and categorized into four levels:

1. Structural-Level Barriers
2. Provider-Level Barriers
3. Individual-Level Barriers
4. Cultural-Level Barriers
## Structural-Level Barriers to Care

<table>
<thead>
<tr>
<th>Household income at baseline</th>
<th>Client income</th>
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<tbody>
<tr>
<td>Less than $50 per month</td>
<td>33%</td>
</tr>
<tr>
<td>Less than $51 to $249 per month</td>
<td>11%</td>
</tr>
<tr>
<td>Less than $250 to $499 per month</td>
<td>6%</td>
</tr>
<tr>
<td>Less than $500 to $957 per month</td>
<td>17%</td>
</tr>
<tr>
<td>Less than $958 to $1,273 per month</td>
<td>10%</td>
</tr>
</tbody>
</table>

2014 Federal Poverty Level Medicaid Eligibility

<table>
<thead>
<tr>
<th>Income range</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than $1,274 to $2,999 per month</td>
<td>19%</td>
</tr>
<tr>
<td>Less than $3,000 to $4,999 per month</td>
<td>3%</td>
</tr>
<tr>
<td>Less than $5,000 or more per month</td>
<td>1%</td>
</tr>
</tbody>
</table>

- Poverty
- Homelessness
- Lack of transportation
- Low levels of education
- Lack of insurance coverage or inadequate coverage
- HIV-related stigma
Provider-Level Barriers to Care

- Language barriers
- Cultural differences
- Lack of flexible appointment times
- Perceived discrimination
Individual-Level Barriers to Care

- Lack of motivation or ambivalence to engage and remain in care
- Mental health
- Substance use
Cultural-Level Barriers to Care

• *Machismo*

• Fatalism
Protective Factors Improving HIV Care

**Cultural Factors**
- Caballerismo
- Personalismo
- Familismo
- Helping Others
- Religiosity
- Personal Growth

**Structural Factors**
- Transportation
- Regular income
- Access to social capital
- Documentation status
- Housing

**Provider Factors**
- Positive past experiences
- Care in Spanish
- Linkage Coordinator/Peer Navigator assistance

**Individual Factors**
- Knowledge of HIV
- Knowledge of how to access care
- Positive outlook
- Mental health
US-American and Mexican Transnational Identities
What is Transnationalism?

Transnationalism can be defined as "those [activities] that take place on a recurrent basis across national borders and that require a regular and significant commitment of time by participants. Such activities may be conducted by relatively powerful actors, such as representatives of national governments and multinational corporations or may be initiated by more modest individuals, such as immigrants and their home country kin and relations. These activities are not limited to economic enterprises, but include political, cultural and religious initiatives as well" (Portes, 1999, p. 464).
Mexican Identity

Majority of clients (93%) strongly agree that they identify as Mexican and are proud of being Mexican. In addition:

- 83% strongly agree that they feel that they are a part of Mexican culture and 84% have a strong sense of being Mexican
- 73% communicate almost always in Spanish, and 20% often
- 84% listen to music from Mexico (31% sometimes, 26% often and 28% always)
- 77% use Facebook, Twitter, and/or other social media with people from Mexico (26% sometimes, 17% often and 34% always)
- 72% call, Skype, or text family in Mexico at least once a month
- 56% call, Skype, or text friends in Mexico at least once a month
US-American Identity

Although less than half of participants (43%) identified with being US-American:

• 33% strongly agree that they feel that they are a part of US-American culture
• 32% strongly agree that they have a strong sense of being US-American
• 50% of participants reported feeling good about being US-American and that being US-American plays an important part in their lives
• 15% communicate in English almost always, and 24% often
How might the intersection of these identities affect retention and engagement in HIV care?
How is a CBO like Bienestar uniquely suited to working with clients of transnational identities?
• Nearly 30-year history in Los Angeles County
• Community engagement, advocacy and outreach
• Cultural events
• Community partnerships
• Holistic, culturally-informed and culturally-relevant client services
• Referrals to meaningful and accessible community resources and services
How was *Proyecto Vida* successful at engaging clients into care?

- Bienestar's 30-year history of working in Los Angeles County
- Peer Navigation Model
  - Bilingual, culturally-competent and culturally-trained staff
  - Use of Transtheoretical Model of Change and Motivational Interviewing
  - Individualized peer support
  - Holistic, client-centered care
- Incorporation of Mexican cultural components into program's design
  - *Machismo* versus *caballerismo*
  - *Personalismo*
  - Helping others
  - Religiousity
  - *Familismo*
  - Personal Growth
  - Fatalism
Recommendations for Service Providers

Service providers play an integral role in mitigating risk factors and strengthening protective factors

• Engage community and hire from within the community
• Maintain presence in community
• Stay informed on issues that affect community and advocate for community
  • Local, state and federal policies
  • Health trends
• Offer client-centered, culturally-appropriate resources and services and/or refer client to relevant resources and services
Next Steps in Evaluating Proyecto Vida

1. Obtain and analyze results of follow-up ACASI surveys
2. Obtain and analyze results of medical data extraction/WAVE data
Questions?

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