



Transnational Practices and Linkage to Care: Lessons from the SPNS Latino Access Initiative, 4021

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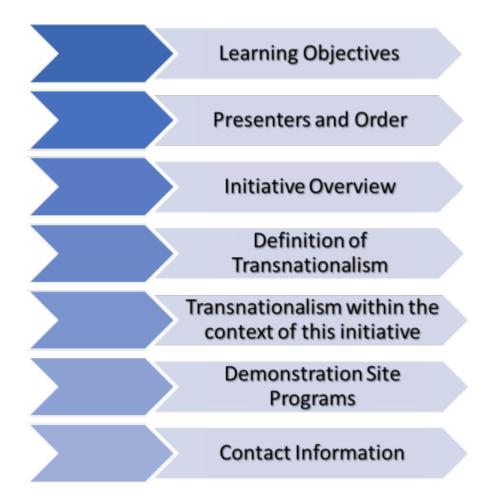
AIDS Arms, Inc.

Disclosures

This study was funded by the Health Resources and Services Administration, HIV/AIDS Bureau, Special Projects of National Significance



Overview







Learning Objectives

Define what is meant by transnationalism and describe what influences transnational practices Apply knowledge gained in this workshop to successfully integrate transnationalism into an ongoing intervention, when developing an intervention or in clinical practice

Demonstrate the ability to integrate transnationalism into intervention delivery and evaluation with the tools and strategies described by panelists

01

02

03

Presenters and Order of Presentation



Amy K Johnson, PhD

AIDS Foundation of Chicago

Jeff Bailey, MPH

AIDS Project Los Angeles





Martha Guerrero *AIDS Arms, Inc.*

Brendan O'Connell, MSW Bienestar Human Services







Culturally Appropriate Interventions of Outreach, Access and Retention among Latino Populations

- Multi-site demonstration and culturally specific service delivery models
- The Latino SPNS Initiative's goals are to:
 - Improve access, timely entry, and retention to quality HIV primary care
- Adapt the <u>transnational approach</u> for interventions targeting HIV-infected Latino subpopulations in the U.S.





Transnationalism



 Defined as "the processes by which immigrants forge and sustain multistranded social relations that link together their societies of origin and settlement."

This is accomplished via <u>practices and</u> <u>relationships</u> that link migrants and their children with their place of origin, where these practices have significant meaning and are regularly observed

Sources: Basch et al., 1994; Duany, 2011; Levitt et al., 2007 Basch et al., 1994; Mouw et al., 2014; Basch, Schiller, & Blanc, 1994; Greder et al., 2009; Stone, Gomez, Hotzoglou, & Lipnitsky, 2005; Smith 2005



Transnational Practices

Communication

Travel

Economic & Social Remittances





Politics

Activities and spaces that allow immigrants to remain connected to their places of origin







Transnationalism is best represented by the **cross-border activities**, practices and attachments of immigrants and can include informal and formal **social**, **political**, **economic**, **cultural**, and **religious practices**



Influences on Transnational Practices

- Length of time in the U.S.
 - We know transnational practices decline over time, the longer individuals live in the U.S.
- Generational impact
 - Transnationalism diminishes with each subsequent generations, but not uni-direction (2nd and 3rd generations can adopt transnationalism to reconnect with cultural roots).



Sources: Greder et al., 2009; Pries 2004; Levitt et al., 2007





Why is Transnationalism Relevant for this Initiative?

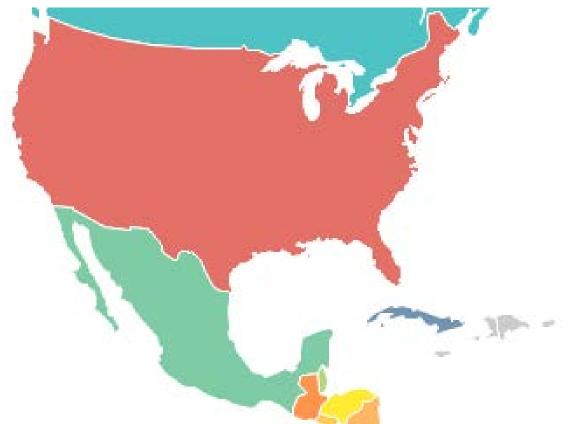
- Impact on health and healthcare-seeking behavior
- Benefit of transnationalism on life satisfaction and quality of life for immigrants
- Greater understanding of the role that culture and migration play in a person's ability to access and stay engaged in medical care
 - Culture and language can be facilitators, and not always barriers, when better understood
- But what is the impact of transnationalism on HIV care?

Sources: Greder et al., 2009; Kessing et al., 2013; Murphy & Mahalingam, 2004



Demonstration Sites FOUNDATION OF CHICAGO



















Transnational Practices and Linkage to Care: Lessons from the SPNS Latino Access Initiative

Amy K Johnson, PhD & Roman Buenrostro

AIDS Foundation of Chicago

Salud y Orgullo Mexicano



The name of our project translates to "Mexican Health and Pride"

Our program aims to remove barriers for men of Mexican descent by:

- providing peer-based support for HIV+ men
- increasing access to HIV testing
- reducing HIV-related stigma
- linking and retaining men in HIV medical care





Recruitment as Intervention

Community level intervention

- Social Marketing campaign
- Initially designed to increase awareness & decrease stigma



- Revised to promote healthy living with HIV
 - retention in medical care
 - undetectable viral load
- Re-imagined as a digital social marketing campaign

Engaged community in development of recruitment materials Intercept surveys to assess the reach and impact of campaign Ongoing review of referral source into intervention













Evaluating community intervention-Intercept Survey results

Intercept survey #1, 2014:

- Across 10 different locations, 115 people completed the intercept survey.
- 25% of respondents reported that they had seen the ad.

Once participants were shown the advertisement **over half (51%)** reported that they felt the ads were influential in reducing stigma related to HIV with 32% feeling neutral about the impact on stigma.



Evaluating community intervention-Intercept Survey results

Intercept survey #2, 2015

- Across 4 different locations, 204 people completed the survey
- All participants identified as Mexican
- 24% reported seeing the ad
- After viewing the ad,
 - 51% reported the ad to be very influential in making someone comfortable with HIV testing
 - 50% reported the ad to be influential in reducing stigma around HIV



Evaluating community interventionrecommendations

- Overall campaign a success
 - Participants viewed the campaign as influential in reducing stigma, increasing testing acceptance
- Increase number and placement of project advertisements
- Ensure ads and branding is unique
- Barriers to attending partner clinic
 - Location
 - Unknown



Digital Marketing

Facebook- monthly average 540 clicks Adam4Adam- 280 clicks BoyAhoy- 230 clicks

Two participants enrolled from digital Marketing efforts

Engaged with over 60 people

Made loteria card templates available For social media pictures





Intervention: Transnational approach

Language & Identity

- Promotores are peers
- Bilingual, Mexican, MSM, HIV+



Intervention-living examples

Integrate immigrant stories into intervention sessions

Discussion & Reflection

- Talking about if & how being Mexican impacts HIV care and living with HIV?
 - Access to HIV meds in Mexico?
 - Understanding & navigating immigration law
 - Disclosure





Intervention: updates

- 25 participants currently enrolled
 - 63% are newly diagnosed
 - •21% completed all 5 intervention sessions
 - Feedback about intervention is positive
 - Participants value promotores life experience and personalization of the intervention
 - Participants have been retained in care



Range of transnational experiences

- 95% report Spanish as their first language
- 95% were born in Mexico
- 76% never travel to Mexico
- 60% send money to Mexico regularly
- 47% have regular contact with family in Mexico
- ~50% report listening to Mexican radio, watching TV shows from Mexico and viewing web pages from Mexico



Next steps ...

- Focus groups
 - Newly diagnosed
 - Lost to care
- Topics
 - Transnational themes
 - Barriers and facilitators to retention in care or engagement in care
 - Feedback on intervention structure & content
 - Exploration of sustainability



FUERZA POSITIVA





Overview of Los Angeles County

10.2 Million People Live in LA County.

- 48.1 % are Latino
- 75% of Identify as Mexican

LACDHSP estimates over 59k people were living with HIV at the end of 2014.

- 45% of PLWH in LAC identify as Latino
- 83% of infections among MSM
 - > 41 % Latino





General Framework for Fuerza Positiva Linkage and Engagement in Care Model

Recruitment & Engagement

Patient Navigation

Emotional Support

Initial Contact -Encounter

Enrollment

Individual Service Plan Linkage to care

Retention in care

- Identify and recruit eligible Latino MSM through social networks, social and clinical service providers, HCT sites, and clients receiving services at APLA.
- Enroll HIV-positive patients of Mexican origin in program and obtain necessary consent
- Utilize SBCM framework for intensive linkage case management.
- Collaboratively identify and place client in appropriate HIV primary care medical home based on factors that include accessibility, range of services, and consumer preference
- Provide additional intensive peer navigation support and psychosocial case management for patients facing specific barriers to care engagement

- Provide initial retention support using the Hermanos de Luna Y Sol model
- Provide a range of additional retention support services include individual and group counseling, extended case management, peer events, and community coalitions



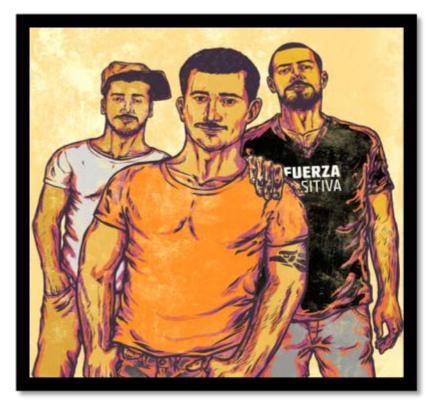
Recruitment & Engagement

- In-reach (engaging agency staff and existing clients)
- Venue-based outreach
- Community partnerships
 - Service providers
 - Event producers
- Social Marketing
 - Print media
 - ➤ Social Media

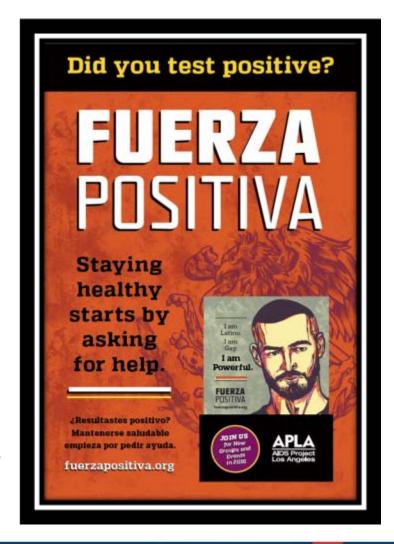




Recruitment Materials



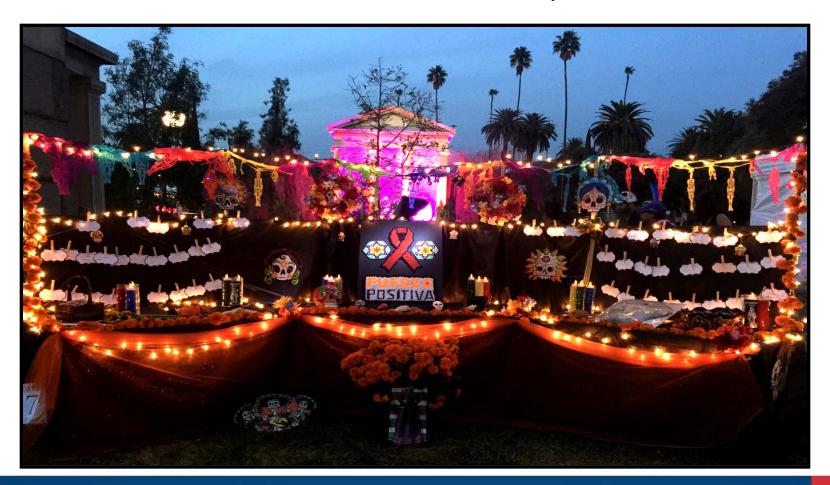
In printed recruitment materials, FP subtly used the "Hecho en Mexico" logo to identify the men in the picture as Mexican.





Community Engagement

To evoke nostalgia, FP participates in the annual "Dia de los Muertos" event at Hollywood Forever





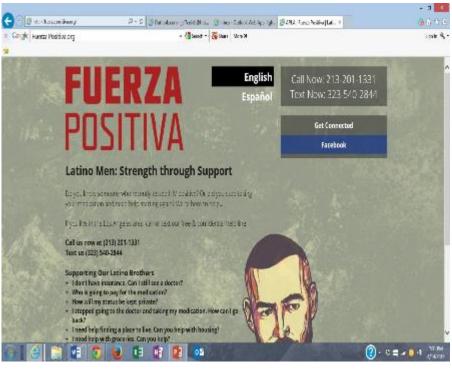




Social Media













Program Results

Total Enrollment	56
Self Identification	92% identify as gay
Age range	25-61
Primary Language	62% Spanish





Transnational Practices and Linkage Care: Lessons from the SPNS Latino Access Initiative

Martha A. Guerrero, B.A.

Program Director
Viviendo Valiente Program, AIDS Arms Inc.

AIDS Arms – Mission

To combat HIV/AIDS in our community by improving the health and lives of individuals living with the disease and preventing its spread.



AIDS Arms - Services

Primary Focus - Integrated programs and effective collaboration to:

- Outreach to and test those at high risk for HIV
- Provide education about HIV/STI prevention, risk reduction and treatment
- Link HIV positive people to medical care and psychosocial services
- Provide medical care, psychosocial support services
- Ensure that HIV positive people are engaged, maintained in care
- Build/sustain collaborations with partner agencies to ensure respectful care for clients



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- Angie Mora Data Collection/ Management Specialist
- Martha A. Guerrero Program Director
- Erica Martinez Lead Promotora de Salud
- Firenze Cardeña Promotora de Salud
- Celicia Cardoso Promotora de Salud



Viviendo Valiente Project Overview

Importance of Viviendo Valiente



- ➤ Mexicans 83% of Dallas Co. Latino population (Pew Hispanic Center)
- ➤ Dallas area Latinos were most likely to receive late dx 2005-09 (Ryan White, 2010)
 - > 36% AIDS dx within one year of HIV dx (Ryan White, 2010)
 - > 29% AIDS dx within one month of HIV dx (Ryan White, 2010)



Core Objectives

✓ Identify and recruit HIV positive individuals of Mexican descent, 18 years of age or older

Other

Mexican = 83%

- ✓ Link and engage HIV+ individuals in care/treatment
- ✓ Remove barriers to HIV treatment



Intervention Description

Service delivery setting

Dallas County

Priority population

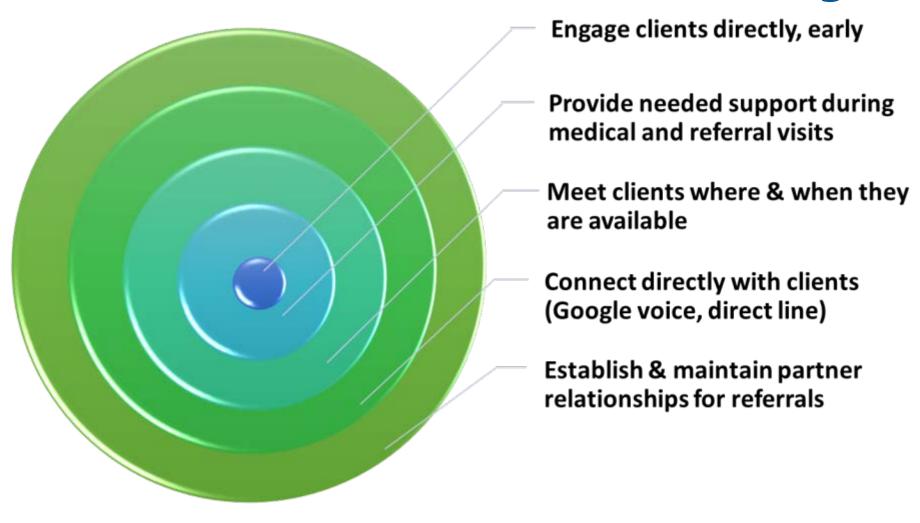
 Mexican origin or descent, 18 or older, living with HIV

Staffing

- 3 Promotores de Salud (PdS)
- Data Management Specialist
- Program Director
- Program Evaluator
- Principal Investigator



Recruitment and Retention Strategies



Individual Level Interventions



ARTAS (Anti-Retroviral Treatment & Access to Services)

- Helps to link clients to medical care.
- Encourages clients to identify and use personal strengths
- Promotes development of personal goals by clients

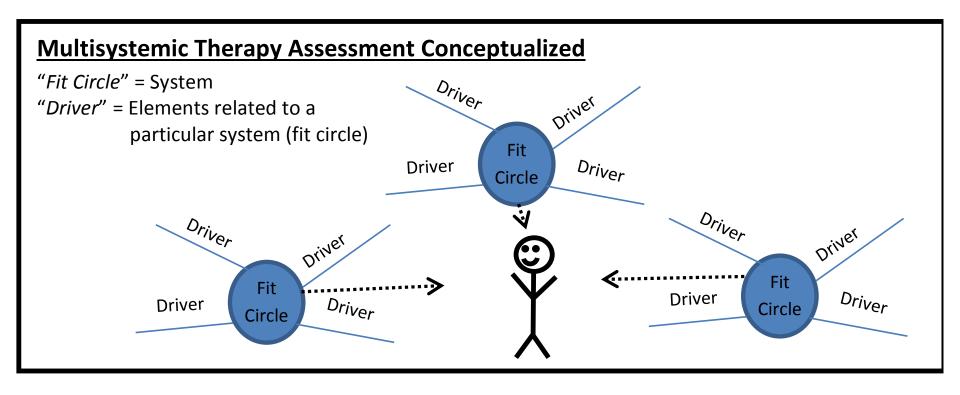
Strengths Based Counseling

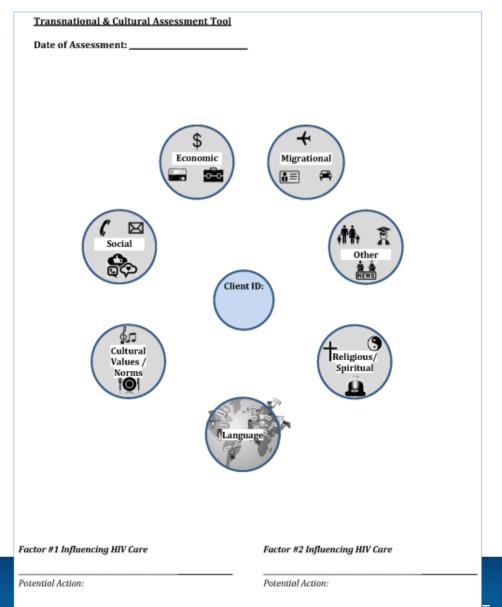
On-going, beyond ARTAS

Motivational Interviewing Techniques

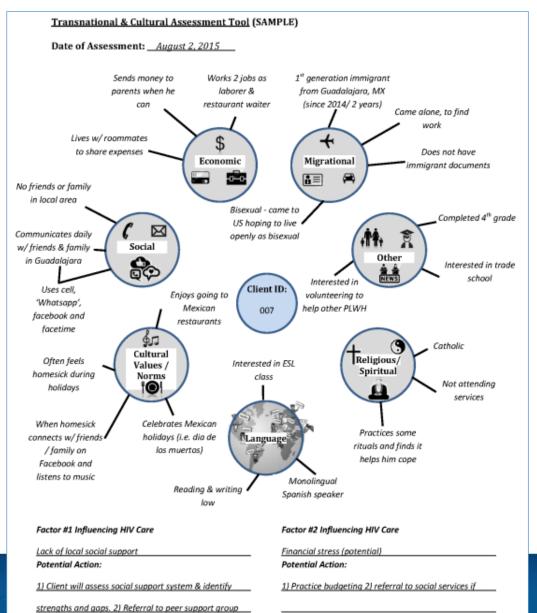
To move clients toward greater commitment to change, sensitive to their state of readiness and at their pace





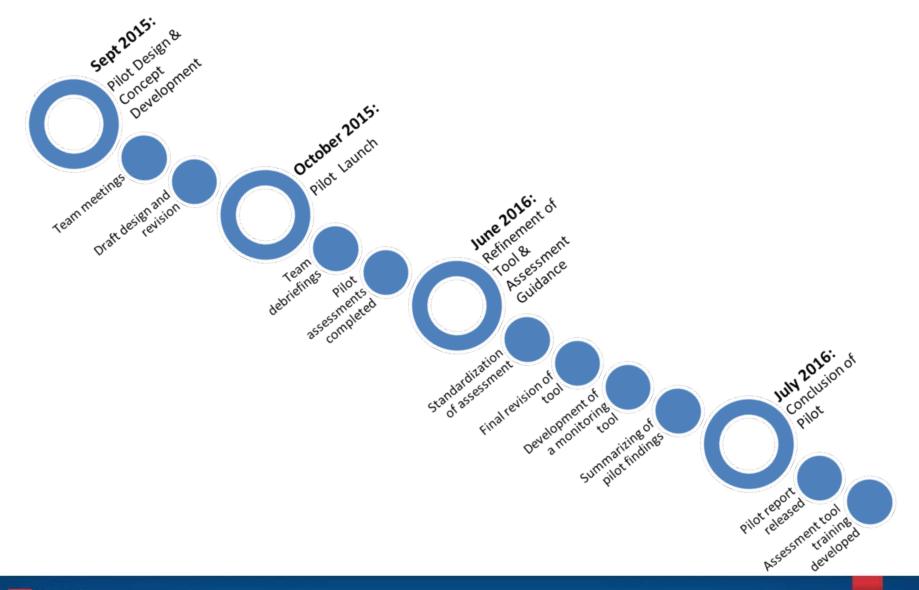








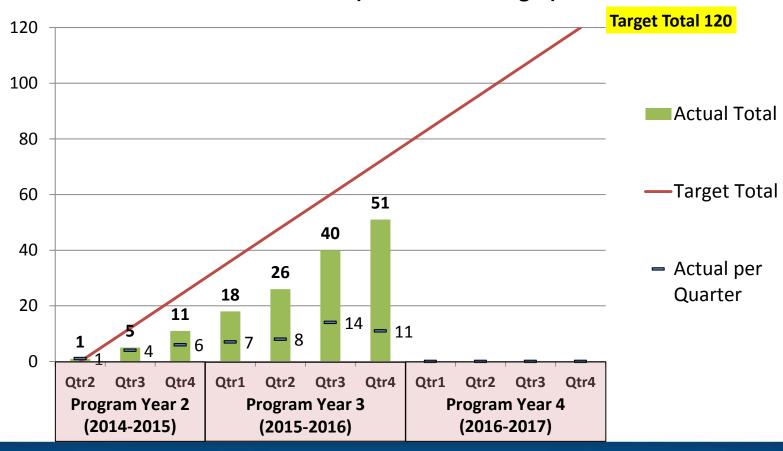
Develop plan for meeting people.





Enrollment Numbers

Viviendo Valiente 2016
Study Recruitment Tracking, as of 08/17/2016
Total Recruited= 51 (43% of Total Target)







Linking Mexican and Mexican American MSM to HIV Care through a Culturally Innovative Program Design

Brendan O'Connell, MSW

Director of Programs
BIENESTAR Human Services

Overview

- 1) Program Design
- 2) Identification and Linkage
- 3) Progress
- 4) Next Steps





Program Design

- Incorporation of Mexican Cultural Components in Program Design
 - Conceptualizations of masculinity (machismo/caballerismo)
 - Personalismo
 - Fatalism
 - Familismo

2) Transnationalism

- Communication with family
- Travel to Mexico
- Economic remittances
- Civic engagement
- New and events



Program Design

3) Program Components

- 18 months of navigation services from Linkage Coordinator/Peer Navigation (LC/PN)
- Translation services
- Incorporation of Mexican transnational focus
- Six one-on-one sessions described in a program manual
 - 1. Linkage to care
 - 2. Review of first medical appointment
 - 3. HIV medication adherence
 - 4. Engagement and retention in medical care
 - 5. Impact of stigma on treatment adherence
 - 6. Transition to self-managed medical care navigation

4) Community Collaboration

- Created MOUs with 7 different Federally Qualified Health Centers in Los Angeles
- Identifying outreach locations in the community to engage Mexican MSM.



Identification and Linkages

1) Outreach

- Bars and night clubs frequented by Mexican MSM
- Cruising spots
- Mexican Consulate and Mexican community events
- Facebook and social media
- BIENESTAR programs/support groups

2) HIV Testing

- 6 store front testing locations in Los Angeles
- 3 HIV testing vans

3) Linkage to Medical Care



Progress

Participant Status	Clients
Newly diagnosed	36 (55%)
Re-Engaged in Care	29 (45%)
Referral from BENESIAR Programs	inkage to
Outreach by LC/PN	$+ \circ \circ$
Referral from Partne Ceah organization	11e, 69%
Self-Referral	19 (29%)
Store Front/ Mobile Testing	24 (37%)
Other	4 (6%)
Country of Birth	Clients
United States	17 (26%)
Mexico	48 (48%)



Progress

Language of Interview	Clients
English	20 (31%)
Spanish	45 (69%)

Age	Clients
18-29	15 (23%)
30-39	28 (43%)
40-49	13 (20%)
50-54	5 (8%)
55+	4 (6%)

Next Steps

- 1) Program ends August 31, 2018
- 2) Enrollment goal: 150 individuals
- 3) Publications and dissemination

"Don't tell me the sky is the limit when there are footprints on the moon" -Brandt Paul





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Questions?

