Project WE CARE
SPNS Women of Color Initiative
Healthy Relationships (HR)

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Disclaimer

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The Ruth M. Rothstein CORE Center – Chicago, IL
Women Empowered to Connect and Remain Engaged in Care (WE CARE)

- Cook County Health and Hospitals System – Public “Safety-Net” Facility
- “One Stop Shop” with Co-Located Services
- 5,000 active patients, 35,000 primary care visits annually
- 64% African American and 20% Hispanic/Latino
- Frequent history of drug use, incarceration
- Approximately 1200 women with HIV served annually.
HRSA SPNS Women of Color Initiative 2009-2014

- To Enhance the Engagement and Retention of HIV-Positive Women of Color in HIV Primary Care.
  - **Primary Intervention**
    - Peer Patient Navigation
  - **Supplemental Intervention**
    - Healthy Relationships
      - ~¼ of overall participants
Target Population

- Women of color
- Below federal poverty level
- Newly diagnosed – (Within the last 6 months)
- Lost to Care: No HIV primary care visit in 12 month period
- Sporadic Care: One HIV primary care visit in 12 month period
- Lost to Follow-Up: 2 or more missed and rescheduled visits
What is Healthy Relationships (HR)?

- CDC DEBI
- Small group intervention for men and women living with HIV/AIDS (Kalichman, 2000)
- Focus: Skill building and self-efficacy to make safe and informed decisions about disclosure and behaviors
- 5 sessions (2 hours/session)
CORE ELEMENTS

Intervention components that must be maintained

KEY CHARACTERISTICS

Activities and methods used to implement the intervention in order to ensure relevancy to target population
Rationale for Implementing HR

• Prevention with Positives
• Enhance retention
• Address/reduce stigma
• Increase disclosure self-efficacy
• Reduce spread of HIV
Staff Capacity Requirements

Project Director or Coordinator
Leader of all aspects for reporting, planning, logistics, and protocols. Have the trust and respect of staff and clients alike.

Facilitators/Group Staff
Two to four part or full-time staff during the actual group session time. If replicating on a smaller scale, this can be done with 2 part-time staff. Particularly if using existing. (Note: There is some more staff intensive work upfront for planning and recruitment before group sessions begin.)

Advisory Board
Group of diverse staff, board members, and other stakeholders for staff selection, movie clips, and feedback on the length and day of the group session.
Resource Checklist Assessment

- Ready access to target population or via partner agency.
- Clinic or other healthcare setting that offers at least two HIV services on the premises.
- Peers or capacity to hire Peers or via partner agency.
- Staff time 40-60 hours for intervention training and development prior to client group sessions. (Note: less time if utilizing existing video clips and resource packets)
- Provision of snacks or meals as an incentive, at least for first group meeting
- Access to video editing equipment or via partner agency
- DVD player/computer with DVD capabilities to play video clips during group
- Flipchart pre-printed with HR scenarios & blank flipchart pages and markers
  - or PowerPoint for digital version
- Quiet, closed space with room for 5-12 clients
Recommendations → Adaptations

Movie clips (Core Element)
- Incorporated contemporary clips from popular culture (Precious and For Colored Girls)

Facilitators (Key Characteristic)
- Female facilitators
- > 2 facilitators
- Health educators/Peer Educator

Duration (Key Characteristic)
- Extended time from 2 hours to 3.5 to allow for more sharing & practice

Evaluation (Key Characteristics)
- Adapted process and outcome measures
Challenges

- Recruitment/Retention
  - Integrating with women’s complex lives
- Training
  - Arranging for initial training was time-consuming
  - Unclear about availability of TA
  - Limited resources to commit to refresher training
  - Boundary issues for facilitators (e.g. vicarious traumatization from clients’ stories)
- Resource Intensive
- Costs
# Costs of Implementing HR

## Average Costs Across Sites

<table>
<thead>
<tr>
<th></th>
<th>Pre-implementation (3 month startup phase)</th>
<th>Implementation Costs per Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel Costs(^1)</td>
<td>$13,000</td>
<td>$10-12,000</td>
</tr>
<tr>
<td>Equipment</td>
<td>$0-750*</td>
<td></td>
</tr>
<tr>
<td>Supplies</td>
<td>$1,700-2,300*</td>
<td>$50-60</td>
</tr>
<tr>
<td>Training (^2)</td>
<td>$4-5,000</td>
<td></td>
</tr>
<tr>
<td>Incentives (including refreshments) for participants</td>
<td></td>
<td>$90-750 (depending on if snacks or meals are provided during sessions)</td>
</tr>
<tr>
<td>Travel costs for participants</td>
<td></td>
<td>$200-350 (transit cards or group shuttle service)</td>
</tr>
<tr>
<td>Estimated Averages(^3)</td>
<td>$20,000</td>
<td>$12,000/group ($1500/participant; estimating 8/group)</td>
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</tbody>
</table>

* lower estimates for equipment and supplies can be used if you already have computer and projector equipment and classroom materials are projected rather than displayed as poster sized easel chart visuals (as recommended by the manual).
**Reach**

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Chicago, IL

<table>
<thead>
<tr>
<th>Item</th>
<th>Number</th>
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<tbody>
<tr>
<td># Cohorts Completed</td>
<td>6</td>
</tr>
<tr>
<td># Participants (completed at least one session)</td>
<td>50</td>
</tr>
<tr>
<td># Graduated (attended 4 out of 5 sessions)</td>
<td>33</td>
</tr>
<tr>
<td>% African American</td>
<td>86.3%</td>
</tr>
<tr>
<td>% Hispanic</td>
<td>3.9%</td>
</tr>
<tr>
<td>% Caucasian (non-Hispanic)</td>
<td>7.8%</td>
</tr>
<tr>
<td>Average Age</td>
<td>44.9</td>
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</tbody>
</table>
Successes

• Higher rates of retention in care

• Vignette: Disclosure
  One woman disclosed to her best friend and her best friend disclosed right back to her. She was telling her about this workshop...happened during the 5-week group. She wasn’t planning on doing that.
Value/Added Benefits

Fellowship
A woman who had never had a female friend before.

Social Support
Never got a chance to talk about how they felt when getting diagnosed and when they disclosed.
One woman said the only reason she got up that morning was because of this group.

Motivation/Therapeutically Powerful
Even though it was considered a skills-building group, many women considered the group therapeutic.

Staff Skill Development
Had to develop self-care strategies (e.g. debriefing)
Benefitted

High demand for additional groups
Sustainability

- Other initiative is integrating [disclosure] component into individual level intervention.

Recommendations

- When asking agencies to implement EBI afford/require sufficient funding.

- Consider common skills and support capacity building:
  - Facilitation
  - Self-care strategies
  - Adaptation
  - Sustainability
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