



T.W.E.E.T

Transgender Women Engagement and Entry To Care Project

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Disclaimer (2)

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Presentation Outline (2)

- Background
- Engagement and Retention
- Program structure
- Success and Outcomes
- Lessons Learned



Overview

- This grant was awarded to Community Healthcare Network in 2012
- A multi-site demonstration project
- Transgender Women of Color Initiative to improve timely entry, engagement, and retention in quality HIV care, for transgender women of color living with HIV



Background

- The program operated out of our Jamaica Health Center, located in Jamaica, Queens.
- The T.W.E.E.T Care Project provided the following services to individuals 18 years of age and older:
 - a. Identify newly diagnosed transgender women of color and link them to care.
 - b. Identify HIV-positive transgender women of color who are currently out of care and link them to care.
 - c. Enroll identified clients into the TL-Teach Back Intervention
 - d. Identify and utilize Peer Leaders,
 - i. Peer Leaders are members of the target population that receive the requisite training in the identification, engagement, and linkage



Program Structure

Staff

- Project Investigator (PI)
- Program manager
- Patient Services Specialist
- Retention Specialist
- Peer Educator

Location

- Facility should include a conference room big enough to hold 10-20 people
- Equipment: computer modem connected to TV or projector to display PowerPoint's.
- Budget for incentives: light snacks, transportation (metro cards), gift cards for Peer Leaders



Engagement & Retention

Exceeded Target Participation Rate Of 150 Patients

- 163 HIV-positive transgender women were successfully enrolled by the end of the project.
- Participants ranged in age from 24-55 years old, with an average age of 35 years old.
 - 30% identified as African American
 - 65% identified as Hispanic
 - 9% identified race/ethnicity as “other”
- Patients from: Mexico, Ecuador, Peru, Dominican Republic, Puerto Rico, El Salvador, Honduras, and Columbia



Program Implementation

The staff took an aggressive approach to engagement and retention

- Consistently followed up with each patient.
 - Weekly check-ins via phone and messages through social media (face book).
 - Individual level intervention sessions during medical visit (monthly, quarterly).
- Followed up with home visits for patients who were difficult to engage due to substance use challenges.
- Brief discussions in the street – meet the people where they are.
- Condom give-away program.
- Reassurance that we are here to help.



Successes and Challenges

Community Partners

Successes

- The LGBT community had a strong presence in the Jackson Heights, Queens area.
- The night club establishments were supportive of the T.W.E.E.T Care Projects' mission.

Challenges

- Police raids, unjust false arrest, violence, physical, sexual abuse, and harassment.
- Tenants not being accepting of trans-community renting apartments in the community.



Successes and Challenges Intervention TL Teach Back

Successes

- Participants felt empowered to give back to the community and have an important role.
- Graduations had a high turn-out.

Challenges

- Program reached maximum capacity, space became a concern.
- During group sessions, conversations became intense and judgmental.



Successful Outcomes

Comprehensive Medical Care

Primary Care Services Include:

- HIV Care
- ART Adherence
- Dental ● Podiatry ● Nutrition
- Hormone Therapy
- Health Homes Coordination

Preliminary Clinical Outcomes

- **83%** (135/163) were either in active care or had pending appointments
- **17%** (28/163) were either non-compliant or lost to follow-up due to substance abuse, depression and/or other social factors
- **79%** (107/135) participants who were either in active care or had pending appointment reached viral load suppression
- **>4%** rate of sexually transmitted infections



Supportive Services

- Legal is an important key component to the intervention.
 - a. Staff were able to connect with not-for-profit legal agencies that assisted with:
 - i. free name changes
 - ii. legal representation for loitering or misdemeanor charges.
- Asylum
- Work authorization
- T and U visa application



Lessons Learned

- Community dialogue is fundamental to the response to HIV.
 - Must understand the needs and respond to the concerns, questions, and doubts from the community.
 - “Keep an open mind and an open heart.”
- Essential that participants feel that they are part of the initiative and the impact it makes.
- Promote Community Empowerment: Participants were able to become their own advocates and were able to disseminate and replicate the information to their peers within the community.
- Important to create more programs that are trans-specific, trans-inclusive and trans-directed.



Best Practices

- Assess sexual behavior in a professional manner, differentiating between medical necessity and curiosity.
- Discuss safety in the clinical setting.
- Provide behavioral health referrals if needed.
- Discuss survival sex, HIV, and its transmission.
- Assess transition plan and aid in the planning process.
- Remember that behavior does not equal identity
- Think about the patient as a person not as another number or rare case.
- Create corresponding policies and procedures.



Sustainability (2)

- Since program ended we were able to retain 70% of patients enrolled in the program.
- Weekly group sessions continue.
 - Funding is provided by the Human Trafficking Intervention Court city grant.
- Community Healthcare Network received an High Impact Prevention AIDS Institute grant, all staff members were able to transfer and remain employed.
- During the five years, staff focused and ensured patients have:
 - Medical Insurance
 - Stable Housing
 - Resources



Recommendations/Key Takeaways

- Community assessment including gate keepers, places of congregation and target population.
- Community leadership must include members of the target population who will contribute to local demographic and community knowledge.
- Develop a strong resource tool with outside providers such as legal, housing, mental health, and substance use facilities.
- Create a planning committee for social activities to maintain participant engagement and retention.
- Identify a space that provides a safe environment to all participants.
- Establishing a team that is motivated by the same focus is important to implement an intervention of this magnitude.
- Ensure support and buy-in from leadership which includes:
 - Senior Management
 - Medical Providers
 - Frontline Staff



Resources (2)

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