



*Paterson-Passaic County-Bergen County
HIV Health Services Planning Council*

Bergen-Passaic Ryan White Part A Program

THE EIIHA PLAN





Introduction

- **What is EIIHA?**
- **Planning Definitions**
- **Target Populations**
- **EIIHA Part II**
- **THE EIIHA Work Group**





What is EIIHA?

**Early Identification of
Individuals with HIV/AIDS**





BACKGROUND

CDC estimates that of the 1.1 million adults and adolescents at the end of 2006 living with HIV, 21% of infected persons *do not know* their HIV status.

The ultimate US Public Health goal is to *inform* all HIV+ persons of their status and *bring them into care* in order to *improve their health status, prolong their lives* and *slow the spread of the epidemic* in the United States through enhanced prevention efforts.





HRSA GOALS

- 1. Increase the number of individuals who are aware of their HIV status**
- 2. Increase the number of HIV positive individuals who are in medical care**
- 3. Increase the number of HIV negative individuals referred to services that contribute to keeping them HIV negative.**





HRSA REQUIREMENTS

- ⌘ Develop a plan to address EIIHA**
- ⌘ Include strategies, goals, implementation and coordination with other agencies**
- ⌘ Address target populations (3 or 4)**
- ⌘ Include specific actions to **I**dentify, **I**nform, **R**efer and **L**ink in medical care.**





DEFINITIONS - EIIHA

Identifying, counseling, testing, informing, and referring of *diagnosed* and *undiagnosed* individuals to appropriate services, as well as linking newly diagnosed HIV positive individuals to medical care.





DEFINITIONS - UNAWARE

Any individual who has *NOT* been tested for HIV in the past *12-months*, any individual who has *NOT* been informed of their HIV result (HIV positive or HIV negative), and any HIV positive individual who has *NOT* been informed of their *confirmatory* HIV result.





POPULATION GROUPS

- ❧ ***'Parent Groups'*** encompass a large and diverse number individuals with a common issue (e.g., substance abuse, men who have sex with men)
- ❧ ***'Target Groups'*** within the Parent Group allow overall EIIHA strategy to be customized based on the *Priority Needs and Cultural Challenges* of each Target Group.





EIIHA MATRIX

Parent Groups :

- ⌘ All Unaware Individuals in the TGA**
- ⌘ Individuals Tested in the Past 12 Months**
- ⌘ Individuals Not Tested in the Past 12 Months**
- ⌘ Other population groups such as MSM, Substance Abusers/IVDU, African Americans, Hispanics**





BERGEN-PASSAIC EIIHA MATRIX

Target groups:

- 🎗 Latina**
- 🎗 Latino MSM**
- 🎗 African-American Women**
- 🎗 Middle Eastern Community**

Chosen for their relative importance to their Parent Group and for their emergence as populations at risk in the TGA.





BERGEN-PASSAIC EIIHA MATRIX

P1. All Individuals in the Bergen-Passaic TGA who are Unaware of their HIV Status (HIV positive % HIV negative – Tested & Untested – Publically & Privately Tested)												
P2. Tested in the past 12 months		P3. Not tested in the past 12 months										
P4. Individuals Not Receiving Post Test Result (HIV positive & HIV negative) •Indifferent •In Denial •Fearful •Stigmatized •Misinformed		P5. Individuals Receiving Preliminary HIV Positive Result Only – No Confirmatory Test Result				P6. Traditional High Risk Individuals			P7. Moderate & Low Risk Individuals			
		P8. Latino	P9. Substance Abuser	P10. MSM	P11. African-American	P12. Living Outside the Urban Epi-Centers	P13. Diverse Ethnic Groups	P14. Youth	P15. Seniors	P16. Undocumented	P17. Homeless	
		T1. Latina Women		T2. Latino MSM	T3. African-American Women		T4, Middle Eastern Communities					





THE 2012 BERGEN-PASSAIC EIIHA PLAN





STRATEGIES

-  **Education through outreach**
-  **Collaboration**
-  **Social marketing**





GOALS

Goal 1: Expand education, outreach and early intervention programs to include the Unaware as a priority population.

Goal 2: Pursue collaborative programs to engage a wider community of stakeholders in the effort to reduce the number of Unaware in the region.

Goal 3: Enhance social marketing programs aimed at dispelling the stigma of HIV and increasing public knowledge of HIV.





PLAN FORMAT

Priority Needs

- **Activities to Address Priority Needs**

Cultural Challenges

- **Activities to Address Cultural Challenges**

Responsibilities

Timeline





TARGET POPULATION – LATINA

Target Group T1: Latina Women

Priority Needs:

Self empowerment; self efficacy; stress from work and family issues; language issues; literacy; depression; poverty; dealing with the consequences of immigration status; transportation; child care; fear of deportation; dealing with stigma of HIV

Cultural Challenges:

Many subcultures leading to disenfranchisement; machismo; domestic violence; class discrimination; varied levels of acculturation; refusal to discuss issues openly with family and medical professionals

Activities to Address Priority Needs

1. Identify female peer educators from Part A Programs such as Hyacinth Foundation, Hispanic Multi-Purpose Service Center, Passaic Alliance and Friends for Life to outreach into the communities and develop one-on-one relationships with at-risk Latina.
2. Provide educational programs at non-Part A organizations in the Hispanic communities such as the Hispanic Information Center, the Community Health Partnership of Bergen County and other community centers, churches and/or other social venues at a rate of one per quarter beginning second quarter FY 2012.
3. Create a Latina Collaborative of Part A and key non-Part A stakeholders to coordinate EIIHA activities for this target population.
4. Educate physicians and nurses who work with Latina on general health issues and the need for HIV testing.

Responsibility

- Part A Outreach sub-grantees
- Part A EIS sub-grantees
- Grantee with the Planning Council

Timeline

- Task 1: Q1 2012
- Task 2: Q-Q2 2012.
- Task 3: Q1 2012 and ongoing
- Task 4: 2011 and ongoing

Activities to Address Cultural Challenges

1. Create and maintain a website in the Spanish language with a page devoted to Latina at risk for HIV.
2. Provide public service messages in local Hispanic media/social media targeted to Latina to de-stigmatize, normalize and encourage conversation about HIV disease and testing.
3. Collaborate with educational institutions to produce a minimum of one program, utilizing the social media, to begin the dialogue about HIV.
4. Seek out a higher education program to create, manage and evaluate the social marketing programs.
5. Participate in up to three Latino health fairs to educate on women's health, the need for HIV testing, and cultural stigma; and provide HIV testing on site.
6. Utilize the peer educators to advance the discussion of stigma, machismo, and other cultural barriers to HIV testing.

Responsibility

- EIIHA Work Group
- Part A Outreach sub-grantees
- Part A EIS sub-grantees

Timeline

- Task 1: Q1 2012
- Task 2, 3 and 4: Q1 – Q3 2012
- Task 5: Q2 – Q3 2012
- Task 6: Q1 – Q4 2012 and ongoing





TARGET POPULATION – LATINO MSM

Target Group T2: Latino MSM

Priority Needs: Substance abuse assessment, i.e., abuse of recreational drugs, alcohol, prescription drugs, sexual performance enhancing drugs; health and risk reduction education; social service needs, especially food resources; routine primary health care

Cultural Challenges: Ethnic sub-cultures, stigma, suspicion, shame, targeted by hate crimes (safety), illegal immigration, reticence to be seen or heard, isolation, fear of disclosure, non-communication, language issues

Activities to Address Priority Needs

1. Create a Latino MSM Collaborative of Part A and key non-Part A stakeholders in the TGA to coordinate EIIHA activities for this target population.
2. Collaborate with grass-roots culturally sensitive organizations to provide confidential information about social services along with a local resource guide.
3. Network with faith-based organizations (church pastors) that serve Latino MSM to build awareness of available culturally sensitive social services.
4. Network with social service organizations that serve Latino MSM to build awareness of available culturally sensitive social services.
5. Educate Latino MSM on the risks of using combination drugs for recreational purposes.

Responsibility

- EIIHA Work Group
- Grantee
- Part A Outreach sub-grantees
- Part A EIS sub-grantees

Timeline

- Task 1: Q1 2012
- Task 2 Q2 and ongoing
- Task 3 and Task 4: Q1 2012 and ongoing
- Task 5: 2011 and ongoing

Activities to Address Cultural Challenges

1. Continue to conduct outreach activities to provide health information including HIV testing at Latino gay clubs in Paterson; and provide HIV testing on site.
2. Utilize a peer educator to engage Latino gay men at entertainment venues in the TGA.
3. Advocate at the NJ HIV/AIDS Planning Group (NJHPG) to expand the CDC-approved Mpowerment Project and bring it to the TGA.
4. Collaborate and cooperate with NJHPG in their initiatives that target MSM.
5. Advocate at the NJHPG to expand the CDC-approved Many Men, Many Voices (3MV) interventions and bring it to the TGA.
6. Utilize the internet and electronic social media venues to communicate with Latino MSM about the need for HIV testing and health education.

Responsibility

- EIIHA Work Group
- Part A Outreach sub-grantees
- Part A EIS sub-grantees
- Planning Council
- Grantee

Timeline

- Task 1: 2011 and ongoing
- Task 2: 2011 and ongoing
- Task 3: Q1 2012
- Task 4: 2011 and ongoing
- Task 5: Q1 2012
- Task 6: Q1 2012 and ongoing.





TARGET POPULATION – AFRICAN-AMERICAN WOMEN

Target Group T3: African-American Women

Priority Needs: Overall access to health care, insurance, financial resources, transportation, safe affordable housing, education and vocational training, support.

Cultural Challenges: Low socioeconomic status, single head of households with multiple dependents; low educational attainment; substance abuse prevalence, stigma, unflattering stereotyping

Activities to Address Priority Needs

1. Collaborate with local welfare offices, federally qualified health centers and boards of social services to educate African-American women on the need to access routine health care and HIV testing.
2. Advocate for policy change with local, state and federal legislators to alleviate the priority needs of African-American women.
3. Expand outreach activities to African-American women at risk for HIV, and assist them with accessing primary medical care. Target Abbott pre-schools and elementary schools with significant African-American enrollments to reach impoverished women at risk for HIV.

Responsibility

EIHA Work Group
Grantee
Part A Outreach sub-grantees

Timeline

Task 1: Q1 2012 and ongoing
Task 2: 2011 and ongoing
Task 3: Q1 2012 and ongoing

Activities to Address Cultural Challenges

1. Collaborate with schools and vocational training facilities to raise awareness of HIV.
2. Collaborate with Alcoholics Anonymous, Narcotics Anonymous, Double Trouble, Al-Anon and Nar-Anon, and CODA to include HIV risk education, targeting African-American women at risk for HIV.
3. Combat HIV stigma among African-American women through public service announcements via popular radio stations (WBLS, WLIB, Hot97.1, 98.7 KISS, etc.)
4. Expand outreach to local nail salons, beauty salons and churches.

Responsibility

EIHA Work Group
Grantee
Part A Outreach sub-grantees

Timeline

Task 1: Q2 2012 and ongoing
Task 2: Q2 2012 and ongoing
Task 3: 2011 and ongoing
Task 4: Q2 2012 and ongoing





TARGET POPULATION – MIDDLE EASTERN COMMUNITIES

Target Group T4: Middle Eastern Communities

Priority Needs: Ethnically compatible physicians and nurses, literature in native languages, inability to communicate health and social needs.

Cultural Challenges: Denial of HIV as a social problem in the community; closed community; language issues; social taboo of HIV; medical care practices requiring same sex physicians; gender inequality; bias and prejudice; political distrust

Activities to Address Priority Needs

1. Collaborate with Middle Eastern medical providers on the need for HIV testing.
2. Invite member of the Middle Eastern community to participate in activities of the Planning Council and its committees.
3. Educate Part A Providers on cultural competencies required to serve the Middle Eastern communities.
4. Educate physicians and nurses who serve the Middle Eastern community about HIV testing and linkage to care.

Responsibility

EIIHA Work Group

Planning Council and Community Development Committee (Task 2)

Grantee and CEO

Timeline

Tasks 1-4: FY 2012 and ongoing.

Activities to Address Cultural Challenges

1. Seek entry into Middle Eastern social organizations in an effort to begin the dialogue on HIV.
2. Seek out the Islamic centers to cross-dialogue on cultural differences and similarities, and reach a common ground regarding HIV.

Responsibility

EIIHA Work Group

Timeline

Tasks 1 and 2: FY 2012 and ongoing.





EIHA PART II - IDENTIFY

- Creation of an *EIHA Work Group* and sub-groups, all of which will collaborate on steps to reach and educate the at-risk unaware population.***
- Expands the roles of outreach workers to include education through one-on-one and on-site interventions***
- Social marketing component targeted to specific populations***





EIIHA PART II - INFORM

- Ⓡ Cooperates with Part B to locate and inform those who are lost to care.**
- Ⓡ Collaborates with testing sites on rapid test procedures to avoid an opportunity for those waiting for their confirmatory test results from leaving the premises.**





EIIHA PART II - REFER

- Ⓡ Expands EIS to include peer navigators who provide one-on-one assistance with engagement in care**
- Ⓡ Includes electronic exchange of health information program (SPNS)**





EIIHA PART II - LINK

- Ⓡ Part A patient navigator or EIS provider will continue to track that patient until two medical visits are completed and the patient is considered fully engaged in care.**
- Ⓡ Electronic linkage with non-Part A providers to track engagement of referred individuals**
- Ⓡ National Quality Center in+care Campaign to increase retention in care**





THE EIIHA WORK GROUP





ROLE

-  **Oversight**
-  **Collaboration**
-  **Partnership**





ORGANIZATION

Ⓡ Reports to the Planning & Development Committee of the Planning Council

Ⓡ Membership:

Ⓡ Part A leadership

Ⓡ Cultural community leaders

Ⓡ Other Ryan White program representatives

Ⓡ Consumers

Ⓡ EIS and Outreach providers

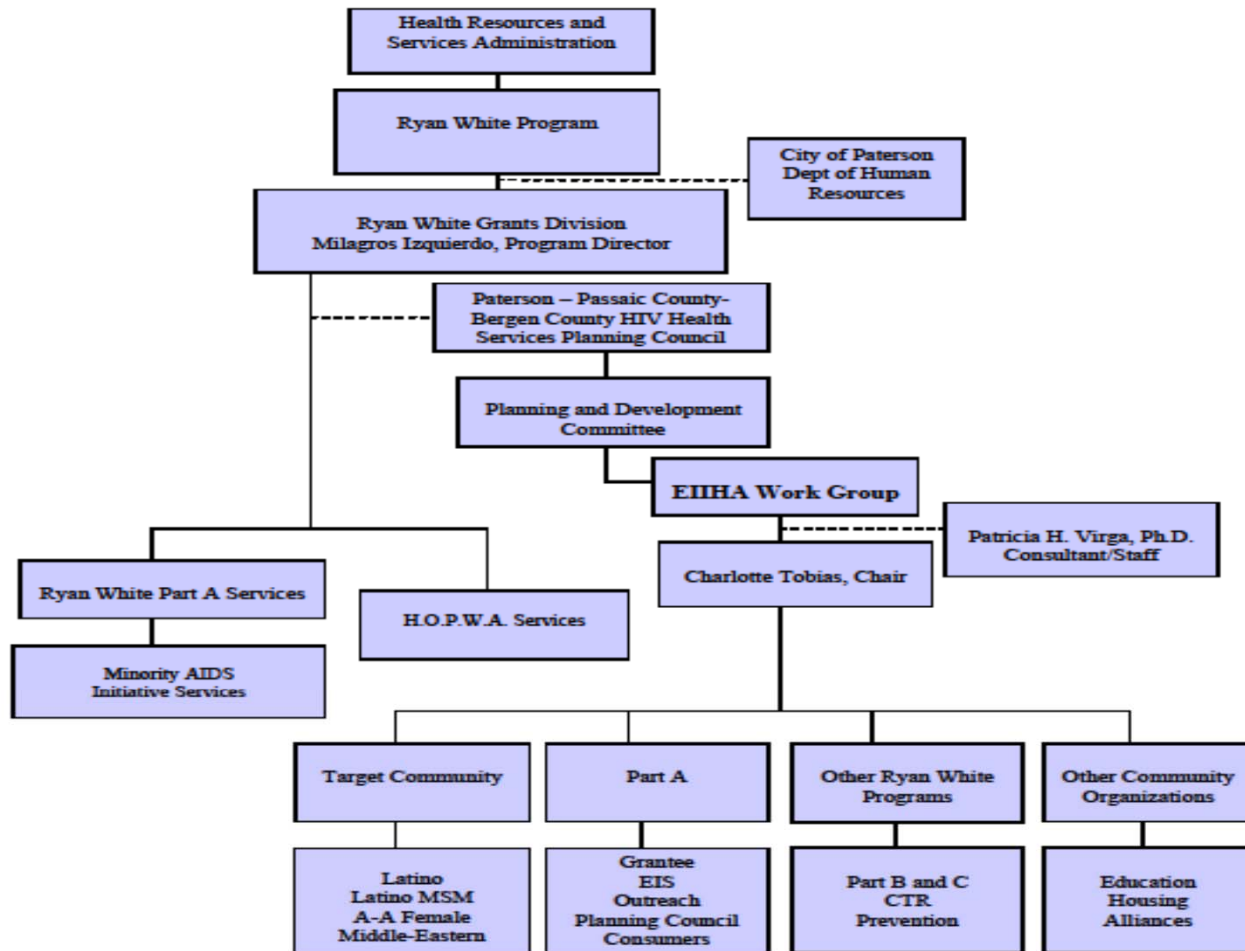
Ⓡ Educational institutions

Ⓡ NAP/Counseling, Testing and Referral





**EIHA
Organizational Chart**





WORK PLAN

- 🎀 Project Plan Undergoing Review by P&D**
- 🎀 Monthly meetings**
- 🎀 To be continued...**

