

Boogie Down Bronx Program

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For

Bronx AIDS Services

And

Adolescent AIDS Program
Children Hospital at Montefiore

YMSM of Color SPNS Initiative

www.basnyc.org

www.AdolescentAIDS.org



Purpose

- Share our challenges engaging HIV+ YMCSM to care in an urban setting (Bronx, NY)
- Describe a range of successful intervention strategies to engage HIV+ adolescents in care
- Provide strategies for outreach and clinic staff to improve service delivery and interactions with HIV+ YMCSM



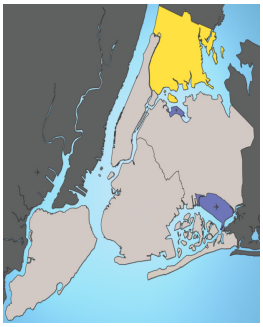
Boogie Down Bronx Program

- The project strives to improve outreach, care and prevention services to engage HIV seropositive Young Men of Color Who Have Sex With Men (YMCMS) in the region and help them stay in care




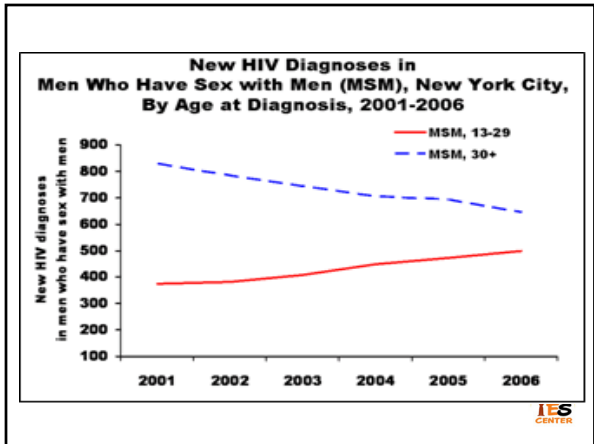


The Bronx



- Population: 1,332,650
- Square miles: 43.03
- Population per square mile: 31,709.34
- Male gender: 46%
- Age 15 to 24: 15.1 %
- Race: 51 % Hispanic; 35% AA
- 30% of the population are below poverty level





HIV/AIDS in The Bronx

- HIV prevalence in the Bronx is 1.3%
- HIV death rate is higher in the Bronx comparing with overall deaths in NYC
- Growing number in the Bronx diagnosed at the same time with HIV and AIDS
- Of all new HIV diagnosis in NYC during 2006 25% were Bronx residents



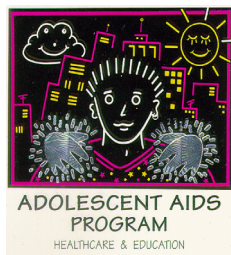
Bronx AIDS Services

- Community Service Program founded in 1986 in response to the overwhelming impact of HIV/AIDS in the Bronx
- Deliver consumer centered services to people with HIV/AIDS, to people at risk of contracting or affected by HIV/AIDS through education, advocacy, outreach, direct services and connecting people to care.



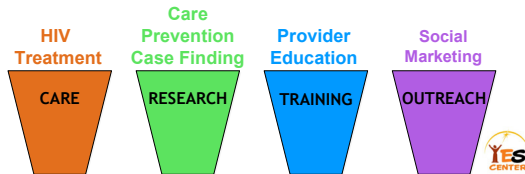
Adolescent AIDS Program Children's Hospital at Montefiore

- The AAP is a local and national resource for
 - ◆ HIV+ adolescents
 - ◆ Adolescents at-risk for HIV infection
 - ◆ Healthcare providers who treat adolescents living with or at-risk for HIV infection
 - ◆ Lesbian, gay, bisexual, transgender or questioning adolescents, their families, and caregivers



Adolescent AIDS Program

- Founded in 1987
- Nations' first youth clinic for HIV/AIDS
- AAP is built in four pillars of services



FROM OUTREACH TO CARE: The Challenge of Engaging HIV + YMCSM in Care



- Services delivery barriers
- Population barriers



Service Delivery Barriers

- Unfamiliarity with MSM behavior and gay identity
- Unable to adjust to adolescent needs
- Lack of Cultural Competency & Sensitivity
- Integration of Research into the Community (population and service providers) and Clinical Services
- Blending of two organizations with the same mission but different organizational philosophy (hospital vs community- based)



Population Barriers

- Developmental challenges of adolescence with transition from childhood into adulthood
- Stigma attached to HIV infection
- Stigma associated with MSM behavior
- Resource deficiency
 - ◆ Housing, income, health care, education



Adolescent “Friendly” Clinic

- Friendly staff
- Flexible schedule
- Accessibility of care
- “One stop shopping”



Successful Innovative Strategies for Collaboration

- Communication
- Memorandum of understanding
- Monthly conference calls
- Case conference meetings



Successful Innovative Strategies for Collaboration

- Escorting Clients to Appointments
- Flexible Clinic Appointments for Linkage to Care
- Sharing of Tools (visit calendars, checklists)
- Quarterly Evaluation of the Collaboration Performance



Successful Innovative Strategies to Link Youth to Care

- Aggressive outreach (face to face, phone, mail, email, text)
- Obtain collateral contact information
- Transportation
- Incentives
- Staff buy-in
- Provide safe, confidential, and private space
- Use services appealing to the youth as a bridge for engagement in care

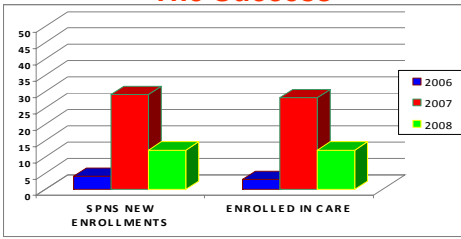


“Well, right now all I can say is that this program really care for people. I appreciate that you keep calling me to remind me of my appointments. It shows me that you care about me”

“I like it that you go the extra steps to make sure I get the help I need. I’m not invisible anymore..you know...I don’t like that there is no cure for HIV”



The Success



TOTAL ENROLLED IN SPNS : 43
 TOTAL CURRENTLY IN CARE: 40
 ■ 2008: 6 months data

TOTAL OF EXPECTED INTERVIEWS COMPLETED FOR THE SPNS MULTISITE STUDY: 127/133

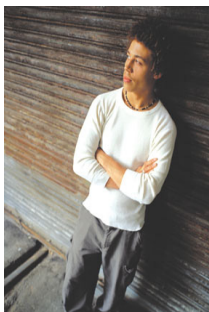


Characteristics of YMCSM Enrolled in SPNS Multi-site Initiative

- 29 HIV positive YCMCSM were enrolled in the SPNS project during 2007
- Age Range: 16-23 yrs at enrollment
- 63% had an STD at the time of HIV diagnosis
- 37% were homeless
- 45% had no or inadequate insurance
- 58% diagnosed by outreach; 40% HCP; 2% self referral
- 100% youth of color (58% AA; 42% Latino)



Juan's Story



- Relationship building with team
 - ◆ Engaged in care
- Address immediate issues
 - ◆ Insurance
 - ◆ Food and shelter
 - ◆ Income
- Focus on strength
 - ◆ Well organized
 - ◆ Personable
 - ◆ Likes to know things

DISCLAIMER: NO PATIENTS PICTURES ARE UTILIZED IN THIS PRESENTATION



“...I love ya’ll services. You are the bombs. The day I found out I have.. you know... “IT” I thought I was gonna die but Mario told me I was gonna be fine. He took me to see Alice... She really cares about me .And look at me now...I am all right”



Future Plans

- Extension of referrals to social networks
- Increase venues for HIV testing
- Partnerships with other stakeholders
- Analysis of Behavioral Data
- Gathering feedback from clients/ study participants
- Making program adjustments per client needs





The Bronx: *The First Borough That Knows!*

OUR GOAL

Increase HIV testing, so that every Bronx resident learns his or her HIV status and has access to quality care & prevention



Suggestions for Implementation

- Focus Groups with youth participants
- Collaborative Planning Meetings
- Review of Implementation Models
- Openness to Change
- Flexibility
- Memorandum of Agreement



Acknowledgements



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