

People Take Action Save Lives (P-TAS):


An interdisciplinary approach using science, social science and technology to get special populations tested and engaged into care.


Facilitated by:

Doug Krampel
Catherine Correa
Jesse Thomas

August 2008
Ryan White Conference


CAL-453






Learning Objectives


1. By the end of this session participants will be able to describe and discuss a new model for community collaboration and innovative practices for improving outreach, testing, and care.
2. Workshop participants will be able to analyze outcomes, interventions and demographics data through the interactive use of graphical tools.
3. Participants will be able to gain knowledge from the lessons learned in this pilot project and be able to adapt strategies for the successful development their own innovative community collaborations to improve HIV outreach, testing, and care.

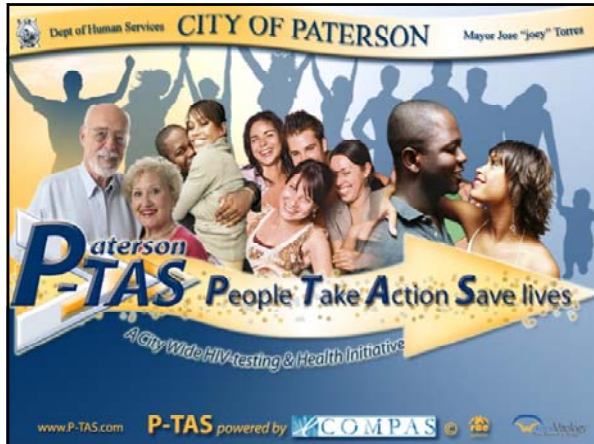




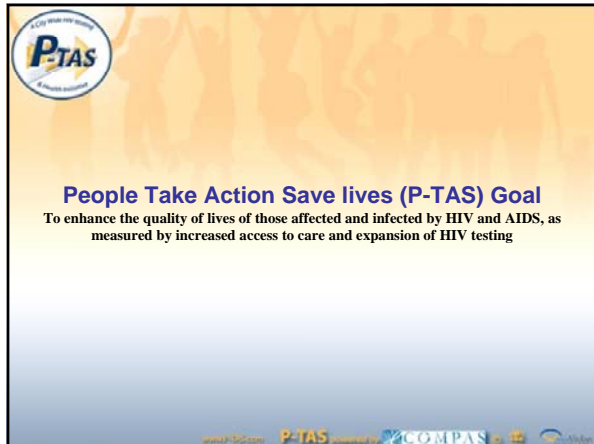
Lessons Learned


1. Having diverse disciplines and partners at the table on a regular basis has resulted in major improvements in new and unplanned creative partnerships, including the formation of one of the first needle exchange programs in New Jersey.
2. Data, not anecdote, is an essential driver and motivator of targeting scarce resources to the areas with the greatest impact.
3. Different messages, images, and social marketing appeal to diverse sub-populations differently, and cultural competence combined with statistics can make a real difference in health education.





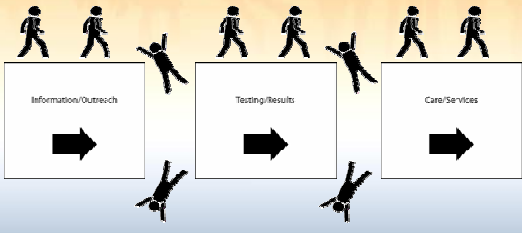







The Problem: Falling Through the Cracks

Almost half of those who are living with HIV/AIDS are not in care.



Some don't make the decision to be tested. Why Not.


www.p-tas.com P-TAS powered by GORTAS



The Impact of Falling through the Cracks

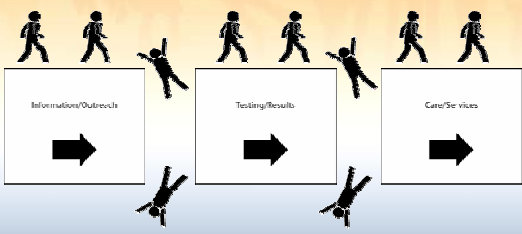
- Finding people at later stages of care
 - Higher mortality among ethnic minorities
 - Decreased quality of life
 - Accessing ER inappropriately
 - Infection and Reinfection
 - Burden on health care system
 - More expensive care
 - Limited access to treatment (fewer options)
 - Increased stigma
 - More resistant strains of the disease
- People not knowing their status
- People knowing status but choosing not to get into care

www.p-tas.com P-TAS powered by GORTAS



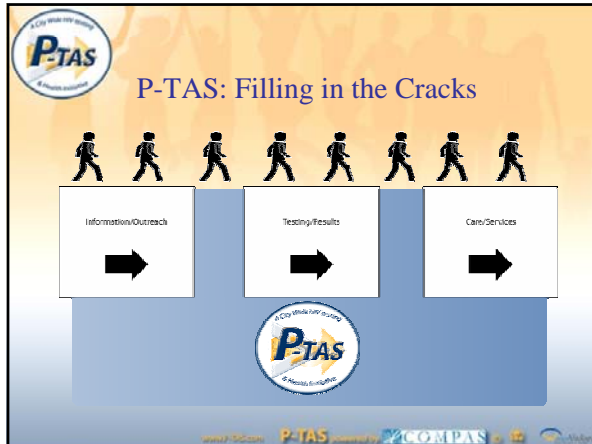
The Problem: Falling Through the Cracks

Almost half of those who are living with HIV/AIDS are not in care.



Some don't make the decision to be tested. Why Not.

www.p-tas.com P-TAS powered by GORTAS



- ### Challenges
- **Limiting Factors**
 - Limited resources (time, money, technical).
 - Sphere of influence / expertise / comfort zone
 - No beginning-to-end approach



- ### P-TAS: What is it?
- A new way of looking at the problem
 - A continually evolving process
 - A philosophy shift
 - A model for change
 - Both scientific (quantitative) and real-world (qualitative)




Key Components of P-TAS


1. Collaboration “bringing the community together”	Political Support	Statewide Support
	Public & Private	Best Practice
2. Process “enjoying the journey”	Flexibility	Open Communications
	Social Marketing	
3. Tracking System		















Mayor's Proclamation








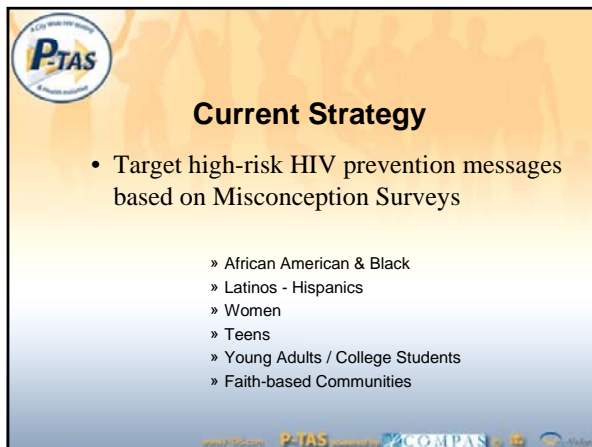


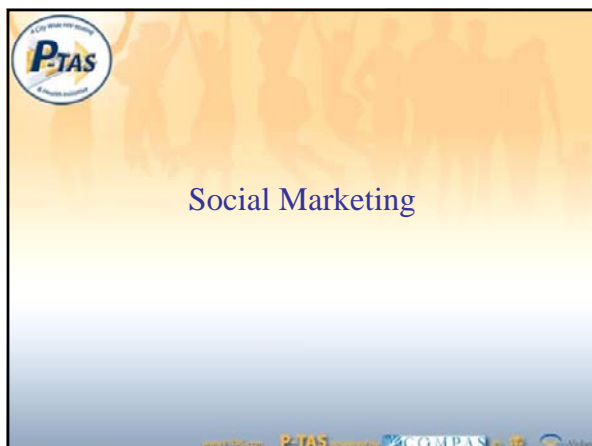
Community Wide Effort P-TAS Efforts

Before	After
<ul style="list-style-type: none"> • 6 outreach workers • Clinics Working Independently • Individual training programs • No dedicated HIV testing Van • Independent awareness programs • No City employee testing initiative • No coordinated measurement effort • Low level Dx and Tx Incentives • No way to easily track program activities and outcomes. 	<ul style="list-style-type: none"> • 50 new outreach workers through PCCC • City Partners working together • Citywide Training programs with AETC involvement • City of Paterson Testing Van • P-TAS Banners and Brochures throughout the City • Mayor offering opportunity for every City employee to get tested • Fully integrated monitoring program • Citywide Incentives • Easy-to-use system to track program activities and outcomes graphically in real-time.










Purpose of Marketing?

→ Affect Behavior: Get Tested and Into Care

Do Beliefs Affect Behavior?

→ Yes!


© 2011 P-TAS | P-TAS | COMPAS



Health Quiz Given to Community by P-TAS Outreach Workers

A person can get HIV by a mosquito bite. T or F
 A person cannot get HIV if over age 50. T or F
 Sharing needles increases risk of HIV. T or F
 AIDS is the final stage of HIV infection. T or F
 HIV infection is preventable. T or F
 You can tell if someone has HIV - AIDS. T or F
 Only gay men get HIV - AIDS. T or F
 There is a treatment for AIDS. T or F
 There is a cure for AIDS. T or F


© 2011 P-TAS | P-TAS | COMPAS



Answers


A person can get HIV by a mosquito bite. False
 A person cannot get HIV if over age 50. False
 Sharing needles increases risk of HIV. True
 AIDS is the final stage of HIV infection. True
 HIV infection is preventable. True
 You can tell if someone has HIV - AIDS. False
 Only gay men get HIV - AIDS. False
 There is a treatment for AIDS. True
 There is a cure for AIDS. False


© 2011 P-TAS | P-TAS | COMPAS




What are the beliefs in Paterson and Passaic that are barriers to healthy decisions?

Which messages must we focus on to affect behavior?






Real-Time Tracking & Monitoring:
Myths and Misconceptions for Targeted Outreach




	Total Answered	Answered Correct	Percentage
1. A person can get HIV by contact of tears, sweat or mucous like	218	38	17.43%
2. A person cannot get HIV if over age 50	218	32	14.68%
3. Sharing needles and other drug-related accessories HIV risk	218	9	4.13%
4. AIDS is the final stage of HIV infection	217	36	16.59%
5. HIV and/or AIDS is preventable	218	41	18.81%
6. HIV and/or AIDS is curable	215	35	16.28%
7. A person may get HIV infection and not realize it	215	15	6.98%
8. Only gay men get AIDS	217	18	8.29%
9. You can't get HIV if you have one sex partner	215	39	18.14%
10. There is a treatment for AIDS	215	57	26.51%

Over 26% of people in our community believe AIDS is not treatable!

Why bother get tested if you believe that HIV/AIDS is not treatable?






Getting the Word Out

Using real-time data on the most prevalent *local* misconceptions about HIV, testing, and treatment, we target our scarce marketing, training, and outreach resources to correct these harmful beliefs.

This assessment done by neighborhood, demographic profile, and over time, so the process of refining our key messages and delivery strategies is continuous and adaptive.






Street Banners




Banners Displayed at Testing Sites



Magnetic Banners for Mobile Vans





Information Brochure



**Learn the Facts,
Know Where to Go,
Stay Healthy,
Get Involved.**

Agenda for Workshop,
Steps to Donate It!,
Mandatory Sex Education,
Incentives.

A City Wide HIV Testing & Health Initiative
 P-TAS powered by 



Information Brochure

Choose Quality of Life
Get tested for HIV to get tested to live.

Take Action Now!
Get tested.

Information is Power.
There are important decisions to make. Some choices are made when... other choices are made tomorrow or in a matter of weeks or days.

A recent trend shows that Latinos and African Americans are getting the most common types of HIV infection in the United States, leading to a higher rate of death, disability and poor quality of life.

To decide your best action on this **ONE DECISION** is **GET TESTED**.

WWW.SUVIDA.COM/CAJADAD

Quit

A person can get HIV by a mosquito bite. T F

A person cannot get HIV if over age 50. T F

Sharing needles increases risk of HIV. T F

ADIS is the final stage of HIV infection. T F

Only injection is prevention. T F

You can test if someone has HIV/AIDS. T F

Only gay men get HIV/AIDS. T F

There is treatment for AIDS. T F

There is a cure for AIDS. T F


Answer Code: 222222222


Participating Agencies

<p>Pateron Locations</p> <ul style="list-style-type: none"> Paterson Division of Health 1700 Broadway Paterson, NJ 07651 973-261-1277 ext. 4340 Paterson Hospital 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 Paterson Health Center 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 Paterson Family Health Center 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 Paterson Community Center 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 	<p>Paterson Locations</p> <ul style="list-style-type: none"> City of Paterson/Office of Public Health 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 Center for AIDS in Paterson County 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 Northwest Life Skills Association, Inc. 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 St. Mary's Family Health Center 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400 Strategic & Member 100 North Mountain Ave. Paterson, NJ 07651 973-261-1400
---	--

For More Information Contact:

City of Paterson
Department of Human Services
Ryan White Title I Program
Catherine Garcia, Director
120 Essex Street, 1st Floor
Paterson, NJ 07651
Phone: 973-261-1242 ext. 8
Fax: 973-261-1225
www.P-TAS.com

A City Wide HIV Testing & Health Initiative
 P-TAS powered by 




Information Brochure


Take Action Now!


A City Wide HIV-Testing and Health Initiative to Improve Access to Medical Care and Available Services.

A coalition of caring residents, AIDS Services Organization, Passaic County Community College, Project ECHO, Paterson Factory Workshop, Ryan White Programs, Paterson Health Services, NJ State Department of Health, NY/NJ AIDS Education & Training Center at UNMC, Abbott Laboratories, plus numerous community-based agencies and medical providers.

Steps to Take

Get tested  **\$5**


Get results  **\$10**

Get tested!  **\$20**

Free gift!

Includes:
200 Certificates provided at multiple levels while quantities last. Do not miss out!

See Terms/Restrictions:
www.P-TAS.com/Paters

A City Wide HIV Testing & Health Initiative
 P-TAS powered by 



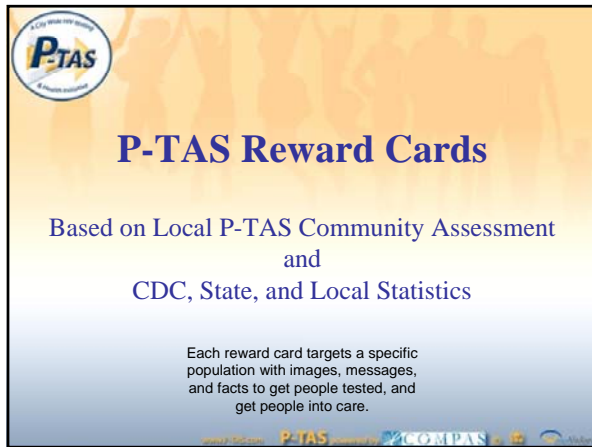
P-TAS
A City With One Mission
A Health Initiative

Logo Stickers
Window & Door Displays

A City With One Mission
HIV IS TREATABLE
P-TAS
SUPPORTER
www.p-tas.com

A City With One Mission
HIV IS TREATABLE
P-TAS
MEMBER
www.p-tas.com

www.p-tas.com P-TAS powered by COMDAS



P-TAS
A City With One Mission
A Health Initiative

P-TAS Reward Cards

Based on Local P-TAS Community Assessment
and
CDC, State, and Local Statistics

Each reward card targets a specific population with images, messages, and facts to get people tested, and get people into care.

www.p-tas.com P-TAS powered by COMDAS



P-TAS
A City With One Mission
A Health Initiative

Reward Cards & Facts.....

I promise to always be here for you
Take the rapid test
FREE P-TAS REWARD CARD

www.p-tas.com P-TAS powered by COMDAS

P-TAS Fact Sheet

- After you have sex with a new partner, if you have sex, you're at risk of getting HIV.
- African American men up to 72% of the population, and over 50% of HIV cases in the US.
- Many African American men who have sex with both men and women are not protected by condoms.
- HIV infection is the leading cause of death of African American women between the ages of 25 and 34.

www.p-tas.com P-TAS powered by COMDAS

Colorful Posters with tear-offs Reward Cards

A public and private partnership venture

Businesses, Merchants, Organizations, City Agencies, Offices of Elected Officials display posters for public to access

Real-Time Outcomes Tracking Tools (Tracking P-TAS in eCOMPAS)

Tracking Outcomes

Real-time tracking of outcomes throughout entire process, anonymously with pre-printed incentive code on reward cards

**Real-Time Tracking & Monitoring:
Outcomes at-a-glance**

We can tell in real-time what impact P-TAS is having for each dimension of success.

So far, P-TAS efforts have resulted in positive rates much higher than State average, and contributed to a 10% improvement in engaging those out-of-care into care!


Total One Month Surveys Completed	100	100.00%
Total People Tested	88	100.00%
Total People Referred to Primary Care	5	5.21%
Total Patients on medication	1	1.00.00%

**Real-Time Tracking & Monitoring:
Outcomes by Demographic Profile**


We track outcomes, barriers, and success by demographic profile, so we can take a targeted approach with continuous program refinement.

**Real-Time Tracking & Monitoring:
Outreach Worker Effectiveness & Sharing of Best Practices**

The success of each outreach worker is tracked. Highly successful outreach workers are asked to share their best practices and inspire others. Success is tracked in different ways, for example: number of people outreached; percentage who got tested; and number and percentage to get into care.




Real-Time Tracking & Monitoring: Myths and Misconceptions for Targeted Outreach



	Total Answered	Answered Wrong	Percent Wrong
1. A person can get HIV by contact of tears, sweat or urine on the skin	218	36	16.47%
2. A person cannot get HIV if over age 50	218	32	14.67%
3. Having needles and other drug material decreases HIV risk	218	9	4.13%
4. AIDS is the final stage of HIV infection	217	36	16.59%
5. HIV infection/AIDS is preventable	218	41	18.81%
6. HIV infection/AIDS is curable	215	33	15.35%
7. A person may get HIV infection and not realize it	215	15	6.98%
8. Only gay men get AIDS	217	18	8.29%
9. You can't get HIV if you have one partner	218	39	17.90%
10. There is a treatment for AIDS	215	37	17.21%

Beliefs are tracked on an ongoing basis so we can see if our education and outreach efforts are having an impact on belief and behavior over time.

This enables us to adapt our messages and approaches according to the evidence "on the ground" in our local community over time.



Contact Information

Catherine Correa, Director,
Ryan White Title-I,
Paterson Department of Human Services
(Bergen-Passaic EMA),
(973)-321-1234, ccorrea@patcity.com

Jesse Thomas, Project Director,
RDE Systems,
(973)-773-0244,
jesse@rdesystems.com
