

# Clinical Care: Providers (Part D)

Technical Assistance for the Ryan White HIV/AIDS Program



## Overview

The HIV/AIDS National Resource Center (NRC) offers a range of services to HIV/AIDS healthcare educators and providers. Technical assistance (TA) is focused on Ryan White Part D agencies and includes support for developing guidelines and information for program that address the needs of HIV infected women, infants, children, youth and their families. TA will also assist clinicians in such programs and consumers of these services.

[careacttarget.org](http://careacttarget.org)

### National Cooperative Agreement TA Partner

HIV/AIDS National Center (NRC)  
Francois-Xavier Bagnoud Center  
University of Medicine &  
Dentistry of New Jersey  
30 Bergen Street, ADMC 4  
Newark, NJ 07107

Pamela Rothpletz-Puglia, PhD  
Phone 973-972-8393  
Fax 973-972-0399  
Email [rothplpm@umdnj.edu](mailto:rothplpm@umdnj.edu)  
Web [www.fxb.org](http://www.fxb.org)

## Major Activities—Year 3 of 3—2010—2011

¶ Active support and facilitation of the Perinatal and Pediatric Guidelines Working Groups as they review and revise the detailed national guidelines for the use of antiretroviral medications in the treatment of pregnant women, infants, children and youth who are infected with HIV/AIDS. These national guidelines are used across all Parts of the Ryan White service community and by a vast array of HIV/AIDS clinicians.

¶ Contribute to the best practice resources to assist women in the self-management of HIV as a chronic disease. The project is scaling up and disseminating a self-care intervention in multiple New Jersey cities.

### HAB Project Officer

Helen Rovito  
Phone 301-443-3286  
Email [hrovito@hrsa.gov](mailto:hrovito@hrsa.gov)

### Project Period

September 1, 2008 to  
August 31, 2011



## Accomplishments

¶ Community participatory research was carried out in the form of a pilot test of an on-line meeting using Web 2.0 Tools vs. a traditional in-person venue with women infected or affected by HIV.

¶ The community mobilization intervention process enabled women infected or affected by HIV to go out into the community to communicate with other women about various self-care topics of their choice, including HIV prevention. Within one and a half months, 64 participants provided outreach on a variety of self-care health topics to

approximately 6,264 women. Preliminary data suggest that the women who participated in providing outreach benefited from the intervention due to increased awareness about self-care health topics. Participants also gained a sense of collective unity by advocating for women and health in the community.