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2020 NATIONAL
RYAN WHITE
CONFERENCE ON
HIV CARE & TREATMENT

Engaging Systems to Optimize Adherence to the HIV Care Continuum for African-born Persons

Helena Kwakwa, Djalika Sanogo-Goines, Oumar Gaye, Mayla Jackson

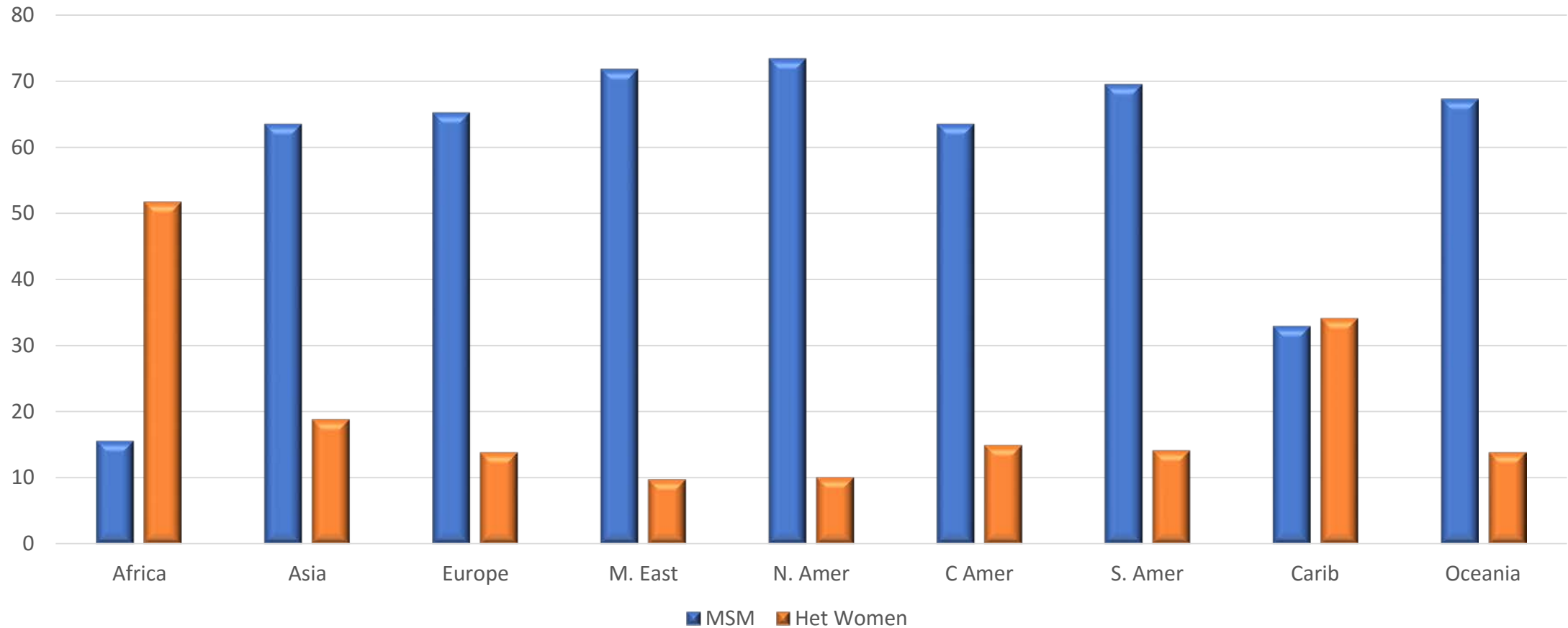
Overview



- Background
 - HIV epidemiology in African-born in US
 - Setting
 - Barriers to care for African-born
- Systems collaborations
- Successes
- Challenges

Background: Epidemiology

MSM and women with heterosexual mode of transmission by world region of birth



Prosser AT, Tang T, Hall HI. JAMA. 2012;308(6):601-607.

US regional distribution of foreign-born persons living with HIV

Africa

- 9.7% in the West
- 36.7% in the Midwest

Central America

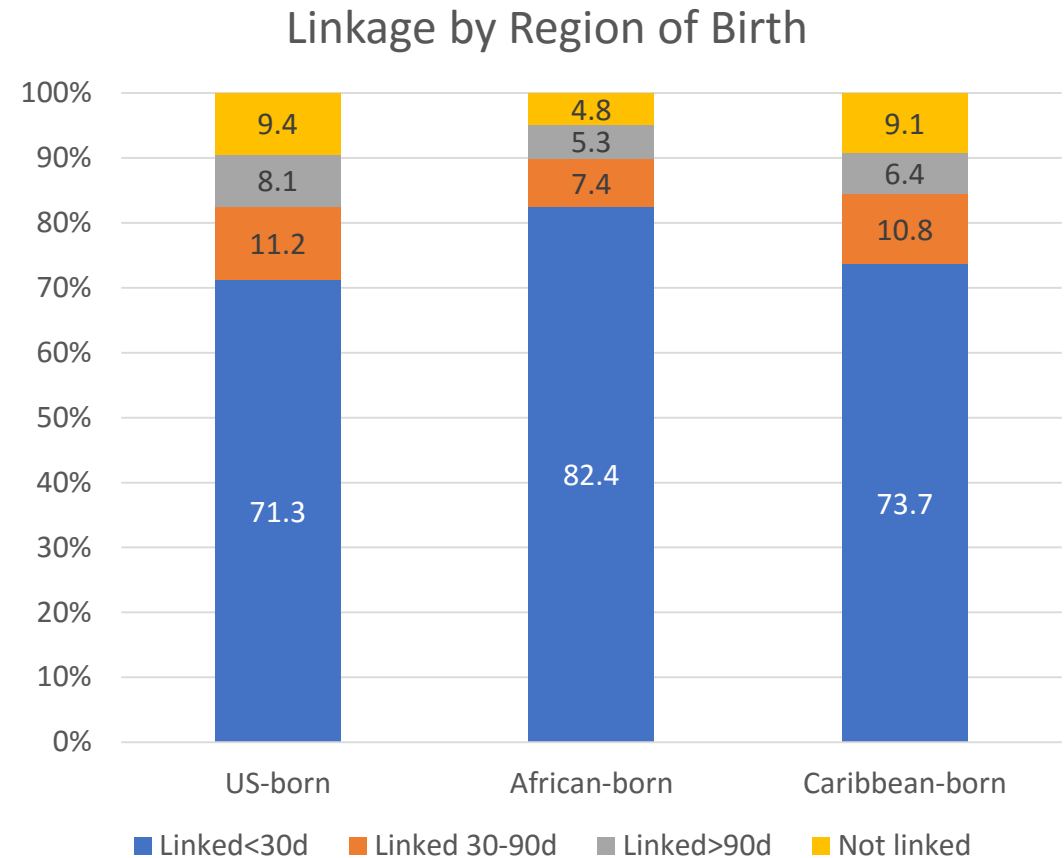
- 19.4% in the NE
- 65.8% in the West

Asia

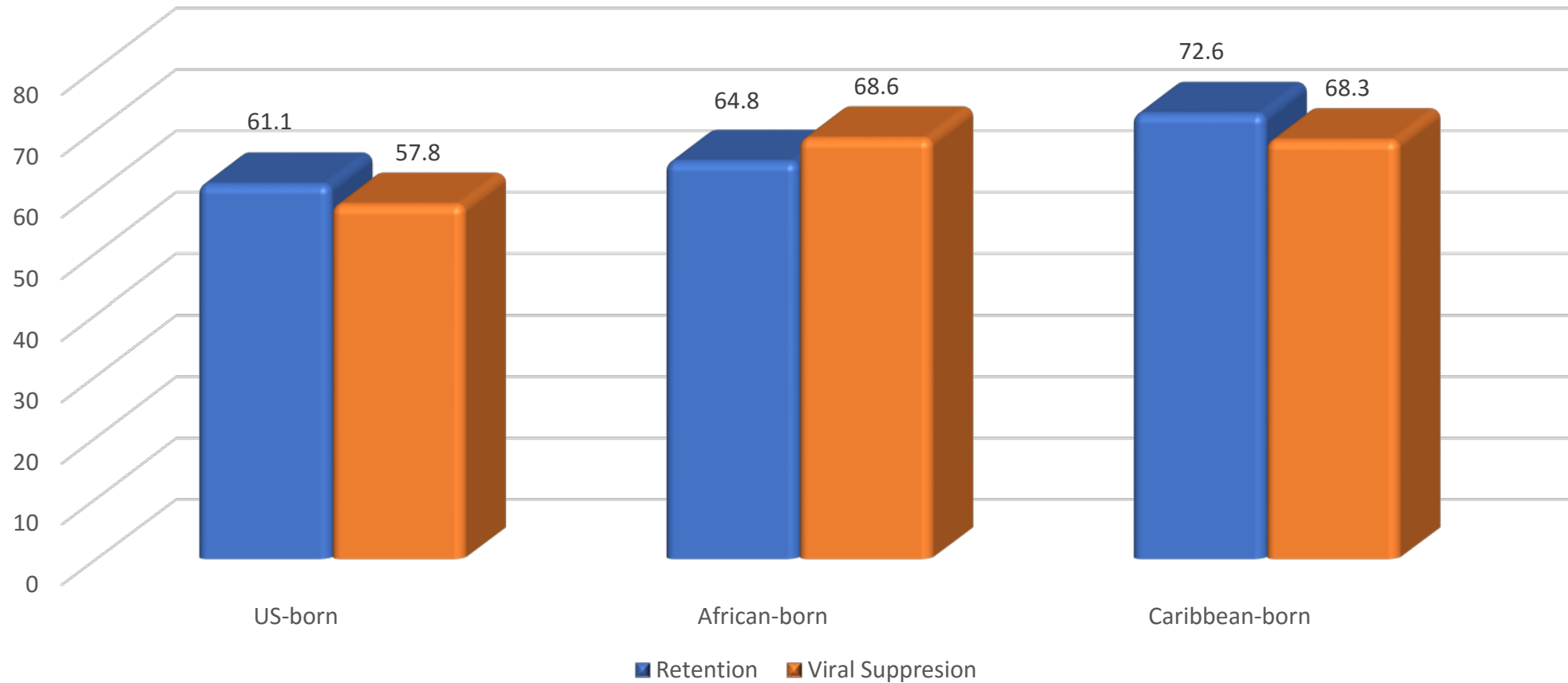
- 4.2% in the South
- 12.4% in the West

Selected characteristics of US-born and non-US-born Black persons living with HIV

- Among non-US-born Blacks diagnosed with HIV in 2016
 - 56% were African-born
 - 39% were Caribbean-born
- 54% non-US-born were female (22% of US-born)
- MSM mode of transmission
 - 80% US males, 47% non-US males
- Metropolitan residence
 - 79% US-born, 89% non-US-born

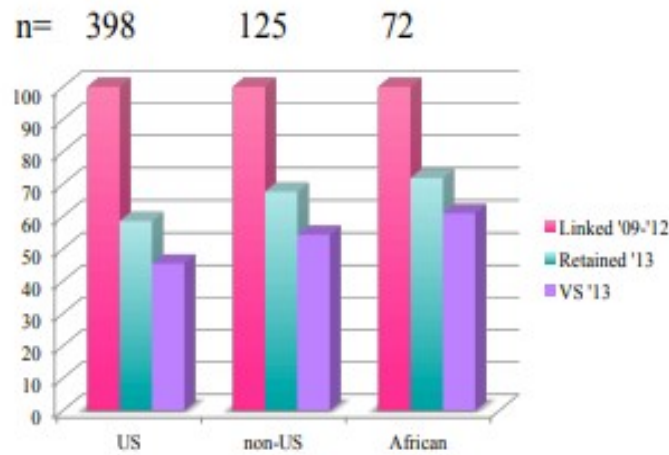


Retention and viral suppression among Black persons by world region of birth

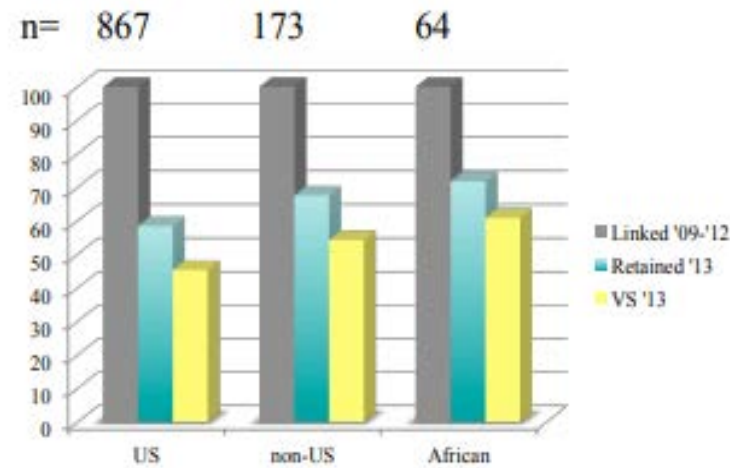


Demeke HB et al. 2018. Int. J. Environ. Res. Public Health;15, 2404.

Linkage to care, retention and viral suppression for US, non-US and African persons - Philadelphia, 2009-2013



Women



Men

The primary need for the African-born is engagement in testing and linkage to HIV primary care

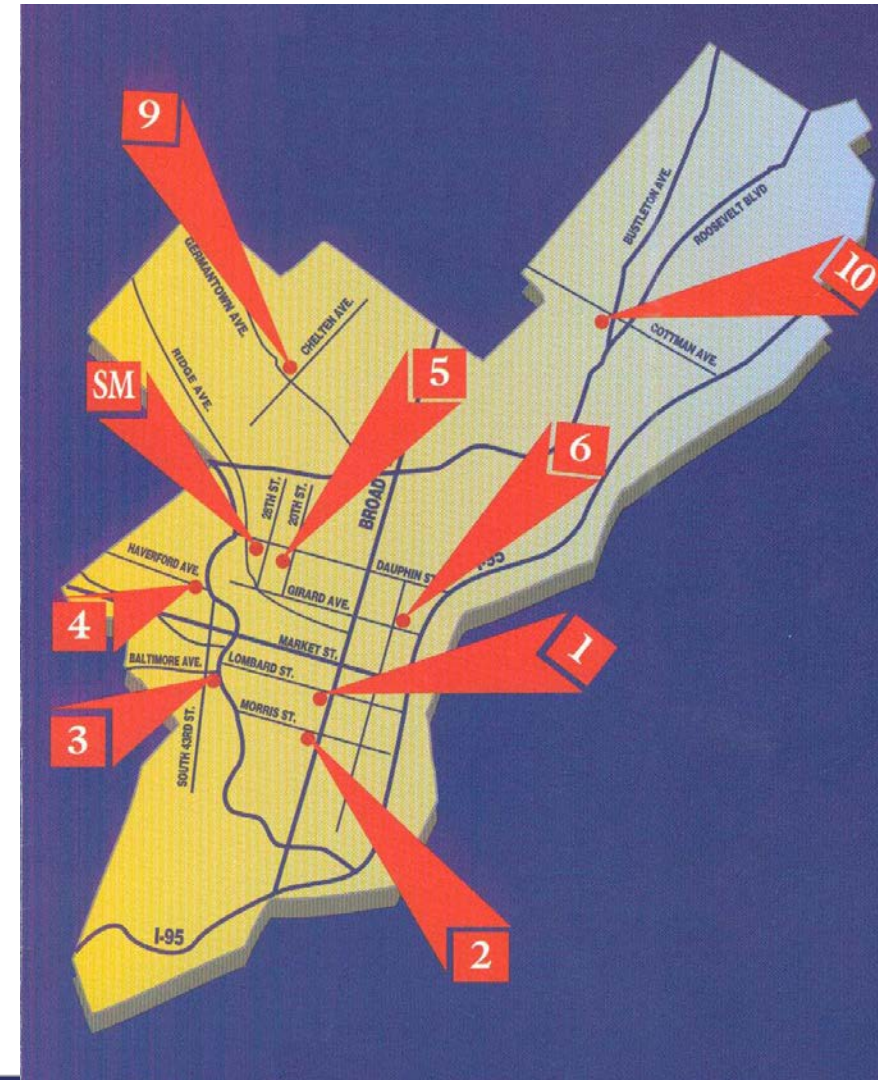
Background: Setting

City Health Centers of the Philadelphia Health Department



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- 8 FQHC and FQHC look-alike facilities
- In the neighborhoods of Philadelphia
- African populations primarily in West and Southwest, increasingly in Northeast



- Each center has a Ryan White-funded HIV Clinic
- Each center conducts HIV testing
- Each center offers Medical Case Management





Background: Barriers to Care

**One falsehood
spoils a thousand
truths.**

~African Proverb (Ashanti, Ghana)

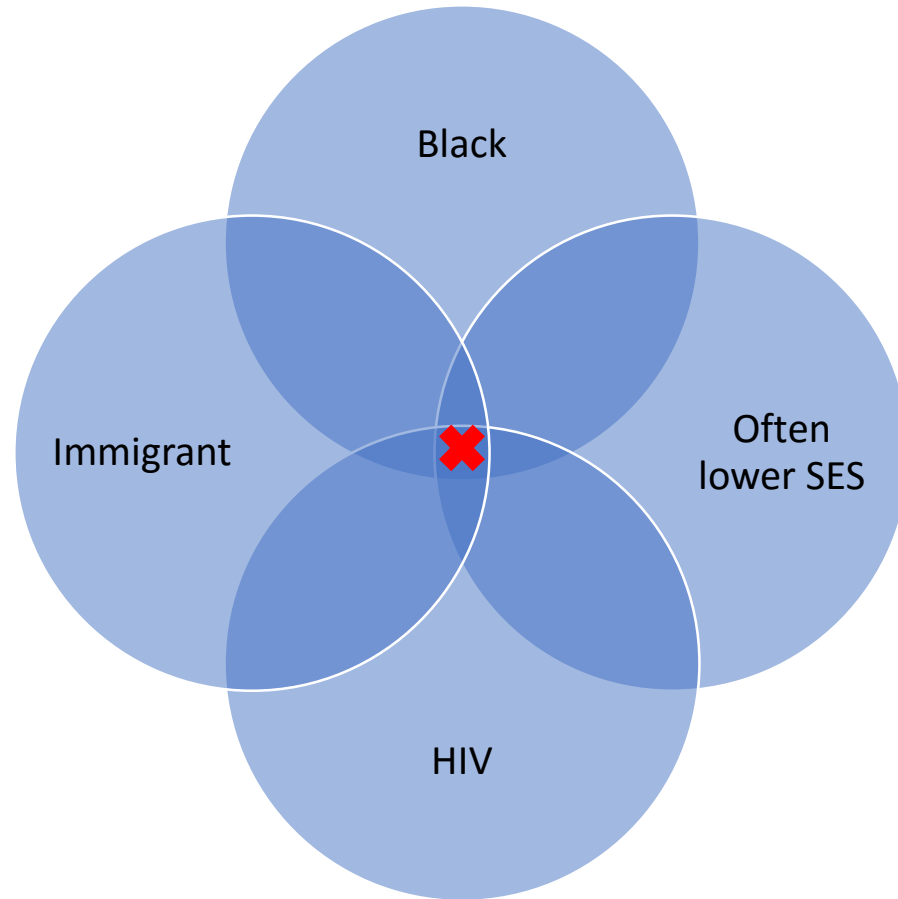
- Earning trust
 - Consistent presence
 - Demonstrated commitment
 - Managing expectations
- Trust by association
 - Community leaders - project
 - Community project – institution
 - Project staff - other

Fear of immigration officials



- Fear of deportation enhanced in recent years
 - Compounded by fear of seeking care
 - Especially seeking care for HIV
- January 2010, HIV entry ban lifted in the US
 - Part of community education is about lifting of the entry ban – people no longer have to have an HIV test as part of an immigration medical exam
- Continued reassurance in community that an HIV test does not result in deportation if positive.

Stigma



Addressing HIV-Related stigma in the field



- Bundling screening
 - HIV, blood pressure, diabetes
 - Participants may choose any or all
 - HIV education conducted for all on one-to-one basis in privacy
- Linking to primary care or other health care services as needed
- Group education topics left to host entity
 - Hepatitis B
 - Female genital mutilation
 - Health care access
 - Nutrition

Avoiding the label of “HIV” is critical to success

Addressing HIV-Related stigma in the care facility



- Community Health Center
 - Patients seen for full spectrum of primary care services
- HIV primary care
 - Includes care for non-HIV-related conditions as well
- Pharmacy delivery services available for those opting in
- Patient education
- Staff education

Denial



- Skepticism of test results, especially if patient
 - Ever had a negative test
 - Has partner or child with negative test
 - Is asymptomatic
- Peer support
- Peer engagement
- Affirmation of attributes deemed positive
 - HIV discussed apart from attributes, as a condition
 - Past experience (stripped of identifying information)
- Avoid doomsday scenarios

Paradigm shift in health care utilization pattern



Expectations of Health Care System



- May not be used to elaborate testing preceding treatment
 - Especially for US health care system
- May expect expeditious management in absence of data
- Explain lag times for return appointments
 - Or initial appointments
- Explain chronic nature of some conditions
 - Explain concept of refills and expectation of continuing some meds

Language and communication



- Translation services critical
- Many will speak English or French, others will communicate only in a local dialect
 - Some spoken across countries
- Pay attention to body language – theirs and yours
- If you have the option, select your mode of translation carefully
 - Gender, religion, country of birth if possible (translator)

Expression of unwellness



- Differs by culture
 - “I have heat”
 - “I feel fire”
 - “I am cold in the back”
- Explore with patient what they feel, the significance to them of the feeling
 - Exclude what you can with a ROS
 - Do not forget exacerbating and relieving factors

Critical role of a Navigator



- Liaise between community and home institution
 - Between entities at various levels (groups and individuals)
 - Critical role
 - Must be respected and taken seriously in community
- Preferably community-based with ties to the home institution
- Consider selection of staff carefully
 - Do not have to be of the community
 - Do have to understand the cultures, health care needs, importance of discretion

Systems Collaborations

Systems engaged



City of Philadelphia:
Mayor's Commission
on African and
Caribbean
Immigrant Affairs
&
AIDS Activities
Coordinating Office

Community leaders



- Identified leaders from religious, business, service provider sectors
 - Created Advisory Committee
- Critical in project development, implementation, evaluation
 - Guide on macro level
 - Point out potential pitfalls, suggest new directions
 - Introduce project to new communities
 - Lend credibility

Religious organizations



Churches

- Welcoming of concept
- Important to be prepared with information for screening in alternate settings
- Social networking among pastors

Mosques

- More difficult to gain entry
 - Difficulties getting through leadership
 - Constituents very interested in services
- Special occasions yield more participation than Friday prayer

Secular organizations



- Examples include
 - Social service providers (ACANA)
 - Country associations
 - Tribal associations
- Reach a different swath of people than religious organizations

Medical practices



- Not all are comfortable receiving services from a government entity
 - Partnered with other local FQHCs
 - Partnered with some private practices
 - Partnered with University of Pennsylvania for referrals for survivors of FGM (team includes Psych, Plastic Surgery, OBGYN)

- Referral network of pharmacies
 - Commit to provide meds at cost
 - Donate vaccines, including annual flu vaccines
 - Conduct counseling for persons utilizing traditional therapies
 - Access to various communities

Successes and Challenges

Successes



- Reached more than 5,000 Africans with HIV testing, health screening and counseling
- Identified persons living with HIV who may otherwise not have been, and kept them in care
 - Diagnosed other serious illnesses in some
- Developed an enduring network of partners in the community
- Improved the capacity of city health centers to provide care for this population

Challenges



- Stigma
- Lack of trust of outsiders, medical professionals, government agencies
- Had to overcome past experiences of the community
- Culture clash at institutions have to be anticipated, managed carefully
- General lack of health insurance
 - Perception by patients that they are not able to receive treatment
- Unique population with few resources – difficult to get adequate attention and resources to build on such programming

If you think you are too small to make a difference, you haven't spent the night with a mosquito.

-African proverb

Thank You



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