Integrating Peers into HIV Care and Treatment

Programs designed to keep people living with HIV engaged in health care





Boston University School of Public Health



Objectives

By the end of this seminar, participants will be able to:

- Describe the key elements for integrating peers into the HIV care team
 - Identify ways to structure a peer program within your organization
 - Identify roles and responsibilities for peers
 - Describe training and supervision for peers
 - Gain strategies for addressing challenges
 - Obtain ideas for funding & sustaining peers



Speakers



PEER Center/BUSPH

Serena Rajabiun



PACT/ICAP/Columbia University Paul Colson



Kansas City Free Health Clinic Sally Neville



WORLD Shalini Eddens



- Interactive session with audience
- Take questions via the phone or written

Evaluation

Structure of Peer Programs

- There is great diversity in peer programs.
- Generally speaking, peer programs work to:
 - Identify HIV+ persons
 - Engage & retain them in care
 - Support adherence to treatment
- Internal or External Programs
- Paid or Volunteer

Common Themes

- Peers are HIV+
- Representative of the community they serve
- Specific roles/job descriptions
- Trained
- Supervised
- Integrated with other services

Program Development

- Funding—we'll talk about that later
- Most programs started small
- There is an internal champion
- Clearly defined peer role
- Organizational buy-in
- Provider buy-in

- Client outreach & recruitment to care
 - Clients lost to care or newly diagnosed
 - Pre & Post test counseling

- Practical & emotional support
 - Transport to appointments
 - Appointment reminder phone calls
 - Interpretation
 - Disclosure support

- Healthcare systems navigation
 - -Linkage to care and support services
 - Housing & dental care
 - Food or transportation vouchers
 - Non-medical case management
 Facilitate communication with providers
- Educating & supporting clients to practice healthy behaviors
 - Making & keeping appointments
 - Reducing risks

- Group Facilitation
 - Support and education groups
 - Substance abuse groups
 - Adherence/wellness groups
- Collaborate with providers
 - Case conferencing
 - Participate in weekly multidisciplinary team meetings
 - Hold clinic hours

- Adherence support
 - Starting or changing treatment
 - Collaborate with clinical pharmacists/medication clinics
 - Treatment education
- Role modeling
 - Provide hope and inspiration
 - Unique understanding & perspective
 - Ability to connect

Training

- Most programs use a combination of techniques, including:
 - Interactive classroom training
 - Observing experienced peers
 - Self-study materials
 - Mentoring
 - In-service training
- Prior training on basics of HIV disease and its treatment are often required

Training

Curricula focus on 3 themes:

- HIV/AIDS information
- Communication skills
- Role of the peer
- PETS Initiative created Training Toolkit from various peer curricula:
 - Over 100 modules of varying lengths and foci
 - Includes information on designing and implementing training
 - Available on-line at http://peer.hdwg.org/training_toolkit

Supervision

Peer supervision is vital

- Peers on the "front line" of what their clients experience
- The peer role is not well understood
- Particular attention to the issue of boundaries is needed
- Most peer programs offer both individual and group supervision
- Group supervision allows the development of group cohesion and exchange of ideas

Supervision

• Administrative supervision:

- Achieve program goals
- Review tasks
- Problem-solving
- Attention to boundaries

• Supportive supervision:

- Help the peer process his/her feelings about clients
- Support peer in identifying and addressing client issues
- Creates a safe environment for emotional support

Supervision

Clinical Supervision

- Provided by a licensed counselor
- Supports the peer in understanding how the work affects him/her
- Explores issues of transference and countertransference

Always a challenge

- Start small
- Look at current funding sources
- Ryan White mandates consumer involvement
 - Consumer involvement is a legislative mandate of Ryan White
- Stay Current

No Easy Answers

- Hard times
- Demonstrate outcomes
- Local foundations

Questions & discussion

FOR MORE INFORMATION

http://peer.hdwg.org/program_dev

ling Blocks to Peer Program Suc	*	
Home	Building Blocks to Peer Program Success	
News	A toolkit for developing HIV peer programs	
About Us	Purpose of this toolkit: to support organizations and communities who work with	
Partner Sites	peers to effectively engage and retain PLWHA in care and treatment.	
How Peers Help	Primary audiences: directors/managers, supervisors of social services, clinic	
Models for Peer Programs	managers and medical directors, nurses and case managers, state and county health officials in charge of HIV program dollars, planning councils, consumer	
Resources for Peer Programs	advisory committees and anyone interested in building, enhancing or incorporating	
Build a Peer Program	peers into a program Additional uses: Organizations can review and select relevant sections based on their program's needs and use	
Frequently Asked Questions	the tools and resources available.	
Newsletter		
Upcoming Events	1. Introduction (PDF)	
Contact Us	2. Organizational readiness for peer programs (PDF)	
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Peers in action		
peopleto	8. Funding sources (PDF)	
	Program resources	

Resources

Websites:

- PEER Center: peer.hdwg.org
- Kansas City Free Health Clinic: <u>www.kcfree.org</u>
- Lotus project: www.lotuspeereducation.org
- PACT project Harlem Hospital: <u>www.peernyc.org</u>
- WORLD: <u>www.womenhiv.org</u>
- TARGET Center: http://careacttarget.org/

Thank you!

Serena Rajabiun PEER Center Paul Colson PACT Program

Sally Neville People to People Shalini Eddens The Lotus Project

For more information please visit http://peer.hdwg.org





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