



CASE STUDY: STRENGTHENING PEER SERVICES IN A COMMUNITY-BASED ORGANIZATION

CHRISTIE'S PLACE

SAN DIEGO, CA

Main challenge(s) addressed by peer program:

Christie's Place was founded in 1996 on a model of peer support for women living with HIV, and has an active peer program supporting women living with HIV. By 2007, the organization wanted to expand from referring clients to outside services to offering more services in house. At the same time, Christie's Place staff was concerned about an increase in burnout and relapse among its peers.

Capacity building activities:

- Peer training
- Capacity-building summits
- Consultation and training around peer supervision, building community partnerships
- Assistance in applying for funding
- Participating in training-of-trainers workshop
- Support for peer replication trainings

Peer program funding source(s):

- Ryan White HIV/AIDS Program Part A funding as the sole contractor in San Diego County to deliver Early Intervention Services: Integrated HIV Services for Women, Children and Families
- San Diego HIV Funding Collaborative
- AIDS United
- Ms. Foundation for Women

Results:

- Peer program serves over 1,100 HIV-positive individuals and their affected family members each year.
- Restructured the peer program to address issues of peer burnout and relapse
- Expanded the role of peers into a clinical case management model
- Increased opportunities for peer training and continuing education
- Created new funding opportunities for the agency
- Improved evaluation capacity and skills
- Christie's Place is now an award-winning, nationally recognized leading AIDS service organization, thanks in part to its peer-support model.

Benefits to patients:

- One-stop services: peers support clients who access clinical services including clinical case management, mental health services and drug and alcohol counseling
- Better trained and supported peers lead to less turnover and more continuity in client care and more effective peer support for clients
- Improved evaluation capacity helps Program Manager identify and address weaknesses and build on proven strengths, demonstrate results to funders

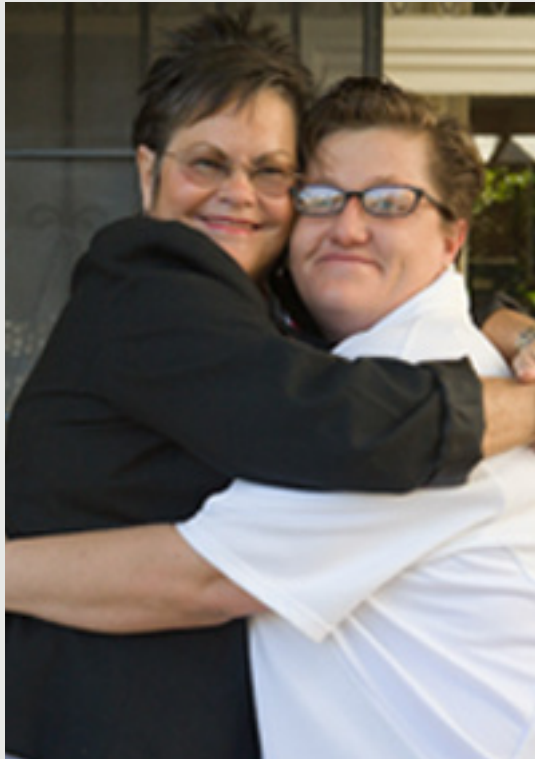
Next steps:

Christie's Place recently received a grant from AIDS United to support an initiative to improve underserved women's access to and retention in HIV care. As part of this project, Christie's Place plans to expand the capacity of the peer navigator model by:

- Placing peers in three clinics in the San Diego area
- Shifting to a mobile/home-based model in which HIV-positive peers meet with clients in their homes and communities to address barriers to care more effectively

Advice for organizations developing peer programs:

- Figure out what you need and put out the word: you don't get unless you ask.
- Always talk about your work—the stories are very compelling.
- Make sure the peer is supported. Supervision is paramount.
- Learn about best practices from other people doing this work.
- Use the resources provided through the Peer Education and Training Sites/Resource and Evaluation Center (PETS/REC) initiative and share them with others.



From left: Irene Milton, founder of Christie's Place, and Cinnamon Kubricky, a peer.

The peer has always been the most critical piece for us. She is able to look at the client more holistically and bridge the gap for clients who need services.

Elizabeth Brosnan
Executive Director
Christie's Place
San Diego, CA

Background

Christie's Place was founded in San Diego, CA in 1996 as a haven where HIV-positive women and their families can turn for practical support, encouragement and connection. What started as a small, grassroots organization has grown into a comprehensive support center, serving over 1,100 HIV-positive individuals and their families annually. From inception, both volunteer and paid peers have been part of the services offered. Christie's Place serves a large Latina population and the majority of the staff are bilingual.

When Christie's Place began working with the Lotus Project in 2006, the agency was at a crossroads. Several peers were experiencing burnout, "compassion fatigue" and lapses in self care. At that time, a needs assessment revealed clients were requesting that services such as mental health, substance abuse treatment and clinical case management be offered within Christie's Place. This would require an expansion of the role of peers within the organization.

Activities

Participation in capacity-building summits, ongoing support from Lotus Project

In June 2007 Christie's Place staff attended the first annual Lotus Project two-day capacity-building summit. When WORLD, a peer program affiliated with the Lotus Project, presented a supervision model that addressed issues peers encounter such as client confidentiality and setting boundaries, Christie's Place participants recognized a way to make improvements to their program.

The experience led to profound changes. Drawing on the Lotus Project's expertise, Christie's Place staff worked with its board of directors to develop a strategic plan. First, it hired a licensed marriage and family therapist to serve as clinical supervisor for the peers. This was funded by a grant from the Alliance Health Care Foundation for a two-year pilot project. The supervisor began meeting one-on-one with peers to monitor activities and address concerns. At the same time, the agency restructured peer positions to ensure that peers were spending no more than 30 hours per week in case work, alleviating some of the stress that was leading to burnout.

Having an experienced clinical supervisor on staff enabled the agency to convince the County to increase Ryan White Part A funding to bring family-centered medical case management, mental health services, and drug and alcohol counseling in house. The Lotus Project supported the peer program as Christie's Place

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introduced clinical services to clients. The peer role expanded to become part of a multidisciplinary team, consisting of peer, clinical case manager, mental health counselor, drug and alcohol counselor, child-care coordinator and outreach coordinator. The team adopted a collaborative approach toward client care, with peers participating in weekly case consultations.

Christie's Place attended Lotus capacity-building summits in 2008 and 2009, bringing back new ideas to put into practice. "Every time I came back from a Lotus summit, the binders never left my desk," said Executive Director Elizabeth Brosnan. "Every tool was tremendously helpful. We updated our peer job descriptions and the way we handle peer orientation based on what we learned."

In early 2009, the Lotus Project also assisted Christie's Place to apply for a federal grant, an area where the organization had little prior experience. Lotus staff also worked with Christie's Place to expand the program's evaluation capacity.

Support for peer training, expansion of training opportunities

Christie's Place partnered with the Lotus Project to conduct an on-site peer training in San Diego in 2006, and has continued to send peers to Lotus training workshops over the past four years. They also encouraged other area AIDS organizations to participate in these trainings. Support from Lotus led Christie's Place to close one day per month to hold continuing education sessions on topics related to peer work, such as working with transgender populations, recognizing intimate

partner violence, or understanding mental health issues women face. Christie's Place built on Lotus's advocacy experience to create the MUJERES empowerment program for Latina women. In 2009, it organized the first annual three-day HIV women's empowerment retreat, based on the Lotus model.

"Here in San Diego, women were underrepresented in the planning process, and there is a direct correlation between where women's services were ranked and how much money they got," explained Brosnan. "Now we have this continuum of training and advocacy support for women. There are five [HIV] positive women on the planning council, and women's services went from being ranked number 22 to number 4, with a corresponding increase in funding."

Christie's Place also attended a national training-of-trainers (TOT) workshop sponsored by the PETS/REC initiative in Tennessee in May 2009. In August 2009, the Christie's Place team held the first replication training for area peers, with support from Lotus Project and PEER Center staff. In March 2010, it conducted the first Spanish version of the replication training. "Of the women we trained, almost all are either actively volunteering or working as a paid staff person in the field now," said Brosnan. "We plan to hold one session in English and one session in Spanish every year as part of our commitment to expand the capacity of other programs to use peers."

Results and Next Steps

Thanks to all these efforts, there is now a cadre of trained HIV-positive women who are "job-ready, trained and able to

I can't say enough about how important Lotus has been for our organization's development, for our viability, for our sustainability, for our overall success.

Elizabeth Brosnan
Executive Director
Christie's Place
San Diego, CA

work in the field," according to Brosnan. At Christie's Place, peers are better trained and better supported, staff skills have increased, and the organization is better able to seek funding and offer more services on site, all factors that contribute to improved services for clients and their families.

Christie's Place has been recognized with several recent awards. The City of San Diego Human Relations Commission recognized the organization with a commendation for promoting activities that protect basic human and civil rights in the community. Christie's Place was also selected as the recipient of the 2010 Public Health Champion Award by the County of San Diego, Health and Human Services Agency, Public Health Services, in recognition of extraordinary achievements in protecting and promoting public health. Brosnan attributes the success of the organization in large part to the central role of peers in supporting women living with HIV.

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In February 2011, AIDS United awarded a major grant* to Christie's Place to support the development of the Comprehensive and Integrated HIV Services for Women (CIHSW) project. Christie's Place will serve as the lead organization in a collaborative of eight area organizations whose goal is to improve women's timely entry, access to, and retention in HIV care, with an emphasis on underserved Latina communities. Peers are at the heart of this initiative, providing advocacy, coaching, community outreach, and working to address comprehensive needs, increase coordination and expand access to care. Christie's Place has hired an access-to-care coordinator

to work with peers to link HIV-positive women not in care or who have fallen out of care into treatment. It plans to hire six additional peer navigators, three of whom will be integrated into the multidisciplinary health care teams in three San Diego area clinics. It will also expand the peer navigator model to include a mobile/home-based model similar to the "promotora" role used in Latin American communities. This model uses community health workers to meet with women in their homes and neighborhoods to support them in overcoming barriers to care including limited education, language barriers, mental illness, substance abuse and domestic violence. An estimated 69%

The PEER Center website is a tremendous resource to the field. I'm constantly referring other projects there.

Elizabeth Brosnan
Executive Director
Christie's Place
San Diego, CA

of HIV-positive women in San Diego County who know their status are not accessing HIV medical care;** Brosnan believes this initiative will help hundreds of HIV-positive women get the life-saving care they need.

*Supported by a federal grant to AIDS United from the Social Innovation Fund (SIF) to improve the lives of people living with HIV/AIDS

**County of San Diego Health and Human Services Agency HIV/AIDS Epidemiology Unit Unmet Need Framework, 2010.

About the Peer Education and Training Sites/Resource and Evaluation Center Initiative

This case study accompanies the report *Integrating Peers into HIV Care and Treatment Teams: Lessons Learned from the Peer Education and Training Sites/Resource and Evaluation Center (PETS/REC) Initiative 2005-2010*, available on the PEER Center website at <http://peer.hdwg.org/lessons>. The PEER Center, the initiative's resource and evaluation center, is a collaboration between the Boston University School of Public Health's Health & Disability Working Group and the Justice Resource Institute (JRI). The PEER Center works in partnership with the PETS/REC initiative's three national peer education and capacity-building centers:

- Lotus Project in Oakland, CA—a collaboration between the Center for Health Training (CHT) and Women Organized to Respond to Life-Threatening Diseases (WORLD)
- Peer Advanced Competency Training program (PACT) at Columbia University and Harlem Hospital in New York, NY
- People to People in St. Louis and Kansas City, MO—a collaboration between the American Red Cross St. Louis Area Chapter and Kansas City Free Health Clinic

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PACT
Peers in action



people to people