

Community Involvement Project



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Project Goal

Improve the health and well-being and the quality of life of young, HIV infected African American, Latino and API Men Who Have Sex With Men by developing and testing a new model intervention for reaching, linking and maintaining this population in HIV/AIDS primary care and prevention services.



Project Description

- Outreach (Strategic Referral Relationships)
- Social Networks Recruitment Strategy
- Testing (Outreach Settings, On Site)
- Youth Centered Clinical Care
- Dynamic Clinical and Ancillary Relationships
- Connection and Retention Staff
- Together Learning Choices (TLC) & Young Men's Hang Out Nights at NYC



Updates

- Staffing Changes
- Busy clinic (26 new clients; 23 of whom are YMSM; 21 of whom are YMCSM)
- Quarterly retreats (completed 2 thus far, 1 more scheduled for end of January)
- Co-location of outreach workers working in clinic setting (practical and philosophical change)

Local Evaluation Strategies

Local Evaluation PI and Staff Changes

- **Changes in Executive Director and PI**
- **Changes in collaborating partners**
- **Role of and changes in evaluation staff**
- **Changes in outreach and peer advocates**

**How above impacted project
Lessons learned**



Local Evaluation Outreach Strategies

- Document changes in and to the outreach strategies
- Why strategies changed
- What worked; what did not work; why
- Difficulties in tracking people from outreach to testing to obtaining results to entry and retention in care

How above impacted project
Lessons learned



Local Evaluation Linkages To Care

- Document how we link youth to care
- What worked; what did not work; why
- Difficulties in tracking people

How above impacted project
Lessons learned



Local Evaluation Retention in Care

- Document models and programs we use to retain HIV positive youth in care (e.g., TLC)
- Discuss number of people involved in various programs
- Discuss what works and what did not work in retaining youth in care and keeping them motivated to stay safe and healthy

How above impacted project
Lessons learned



Evaluation Methods

- **Historical documentation**
- **Qualitative data**
- **Local questionnaires**
- **Interviews with current and previous clients and staff**
- **Chart reviews**

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In the Process of Hiring an RA

Results Thus Far

Multisite Enrollment and Survey Assessments

Race/ Ethnicity	Baseline	1st F/U	2 F/U	3 F/U	4 F/U
African- American	19				
Latino	8				
Total	27	4	7	2	1

Outreach Strategies: What We Have Tried

- **Street Outreach/Truck Testing**
- **Street Outreach W/Condom Distributions**
- **Street Outreach @ High-Schools**
- **Hood Outreach**
- **Bar Outreach**
- **Drop-In Clinic**
- **Relationship Building**

Outreach Strategies: Lessons Learned

- Shift from individualistic-based to social/sexual network outreach strategies
- Shift from street outreach to referral network development
- Shift from peers to career oriented outreach staff

Linkages to Care: What's Been Working

Modes NYC Clients are Linked to Care:

- PRENATAL TESTING 4%
- CLINICAL REFERRAL 29%
- EMERGENCY ROOM TESTING 8%
- TESTING SITE REFERRAL 12%
- CLIENT REFERRAL 19%
- NYC SOCIAL NETWORK TESTING 10%
- SELF-REFERRAL 4%
- CRIMINAL JUSTICE SYSTEM REFERRAL 4%
- CHO INFECTIOUS DISEASE CLINIC
- Other 2%

**Note: approximate percents have been rounded*

Linkages to Care: What's Been Working

Clinical Referral –29%

CHO Perinatal Infection Clinic –18%

Testing Site Referral –12%

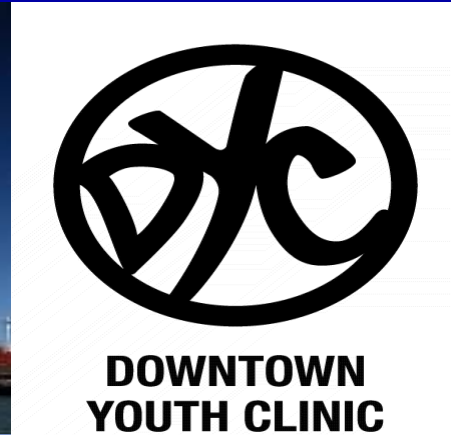
DYC Social Network Testing/Client Referral –10%

***Note: approximate percents have been rounded**

Community Involvement Project Retention Strategies

- **Downtown Youth Clinic Model of Care**
- **Prevention with Positives Interventions**
- **Youth Clinic Community Building**
- **Access to Specialty Care**
- **Social/Sexual Network Testing**





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THANK YOU!!
GRACIAS!!

