

Minority AIDS Initiative

Overview and Accomplishments

What is the Minority AIDS Initiative?

- A targeted initiative aimed at reducing the disproportionate impact of HIV/AIDS on racial and ethnic minority populations

Brief History of the Minority AIDS Initiative

- April 1998 – African American community leaders meet with CDC to discuss the epidemic in minority communities. Concerned about what they learned, they worked with the Congressional Black Caucus to request that a state of emergency be declared
- October 1998: The Clinton Administration declared HIV/AIDS in racial and ethnic minority communities a “severe and ongoing health crisis.”
- 1990 – The Congressional Hispanic Caucus and Congressional Asian Pacific American Caucus joined in supporting expansion of the Black Caucus Initiative.
In acknowledgement of the cross-Caucus support, the Initiative was renamed the Minority AIDS Initiative (MAI)

Congressional Intent

FY 2002 – House Report Language

- “...It (Minority AIDS Initiative) was designed to focus special attention on solving a growing public health problem, as well as to develop and improve the capacity of minority community based organizations to more effectively serve their communities. This approach was tailored to yield innovative and successful strategies specifically targeted to the highest risk and hardest to serve populations, which for the past two decades have eluded more traditional HIV/AIDS prevention, treatment, and education efforts...”

HHS Goals for the Minority AIDS Initiative

Department of Health and Human Services' goals for the MAI:

- Increase access to HIV prevention, care, and treatment services
- Develop and implement innovative models for racial/ethnic minority communities by designing, implementing, and evaluating strategies and care models to: 1) improve timely entry and retention of racial/ethnic HIV-positive individuals in care, and 2) promote adherence to antiretroviral regimens
- Establish collaboration or partnership opportunities for programs or activities to be integrated

The Minority AIDS Initiative at HRSA

- At HRSA, the MAI has allowed for targeted expansion and creation of new services to address identified gaps and weaknesses in serving communities of color affected by HIV/AIDS in three broad categories:
 - Technical assistance and infrastructure building;
 - Increasing access to prevention and care; and
 - Strengthening community linkages to address the HIV prevention and health care needs of racial/ethnic minority populations
- MAI funds also support evaluation and assessment initiatives in order to identify gaps in services and unmet needs, develop, implement, and evaluate models of HIV/AIDS care, and address issues related to provider training, quality of care, and services being provided to communities of color in order to respond with targeted initiatives

How is the Minority AIDS Initiative Funded?

- Minority AIDS Initiative funding streams:
 - Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)
 - Department of Health and Human Services MAI Fund

Minority AIDS Initiative Funding Fiscal Years 1999 - 2010

Public Law 111-87

	(\$ millions)	(\$ millions)
FY1999	24.3	5.8
FY2000	74.0	5.0
FY2001	110.2	6.1
FY2002	123.6	6.2
FY2003	130.4	5.6
FY2004	129.6	6.9
FY2005	128.5	8.2
FY2006	127.3	8.6
FY2007		
FY2008		
FY2009		
FY2010		

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TOTAL

MAI Funding Stream: Public Law 111-87

- Part A MAI provides medical and support services in Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs) based on local epidemic and service needs in communities of color
- Part B MAI provides support for outreach and education activities intended to increase minority participation in the AIDS Drug Assistance Program (ADAP)
- Part C MAI (Early Intervention Services) funds support activities aimed at recruiting and retaining HIV-infected persons of color into HIV primary care
- Part D MAI (families) supports culturally competent research-based interventions that provide additional HIV/AIDS care, services, and linkages to minority children, youth, and families
- Part D MAI (youth) supports efforts aimed at identifying HIV infected youth, and providing them access to comprehensive, culturally appropriate, youth centered HIV care
- Part F MAI supports the AIDS Education and Training Centers (AETCs) that conduct targeted, multidisciplinary education and training programs for health care providers serving communities of color. MAI funds also support the National Minority AETC which builds capacity for HIV care through provision of training to minority health care professionals, health care professionals serving communities of color, and minority-serving colleges, universities, and health professions training programs

MAI Funding Stream: MAI Fund

- **Since FY1999, the MAI Fund allocates \$50.0 million each fiscal year to HHS agencies and offices for targeted initiatives to improve HIV/AIDS health outcomes in communities of color**
- **HRSA uses the MAI Fund allocation to support innovative projects that address unmet programmatic needs which cannot be funded under the Ryan White HIV/AIDS Program**
- **Unifying themes for the projects are: training; technical assistance; capacity building; and evaluation**

Percentage Distribution of Expenditures MAI Fund Projects by Category

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Accomplishments of Selected MAI Fund Projects

- **Capacity Building & Technical Assistance**
 - Supporting Networks of HIV/AIDS Care
 - Provided free education, training, and technical assistance (TA) to minority community-based organizations (CBOs) through on-site individualized instruction, regional skills building workshops, and development and dissemination of resource materials
 - Findings from project evaluation supported that project activities impact participants' knowledge of, attitudes toward, and use of the information and materials presented at trainings. The data also supported the need for continued TA and resources for continued TA and resources for CBOs that seek to provide primary care services to persons living with HIV/AIDS

Accomplishments of Selected MAI Fund Projects

■ Training

- Peer Educator Training Sites and Resource Evaluation Center
 - Purpose of program is to establish a cadre of HIV/AIDS peer treatment educators indigenous to racial/ethnic minority communities that are highly and disproportionately impacted by the HIV epidemic
 - Project supported the establishment of a national resource and evaluation center for people living with HIV and organizations interested in peer education training programs
 - Products: 1) Toolkit for developing HIV peer programs; 2) Toolkit for training HIV-positive peers; 3) Video: *The Power of Peers to Change Lives*; 4) Video: *The Peer Program Makes A Big Difference*; 5) Webcasts about developing peer programs at peer.hdwg.org/webcasts

Accomplishments of Selected MAI Fund Projects

■ Evaluation

- Enhancing Access to Quality HIV Care for Women of Color
 - Project identified effective models to link women of color living with HIV to retain them in quality HIV care
 - Project developed a technical assistance, searchable resource tool containing identified literature on linking women of color and engaging them in care
 - Core themes of common approaches resulting from the literature review, key informant interviews, and consultation meetings with HAB grantees, which are thought to be effective in linking women of color living with HIV and retaining them in care: 1) development of a women-responsive care environment which incorporated respect, cultural competency, and flexibility to meet women's needs regardless of her stage of engagement in care; 2) incorporation of peers into the care system as trained and paid members of the care team; and 3) addressing women's needs through care coordination, flexibility, health system navigation, and better coordination and communication between medical and social support providers

Impact of MAI

- Three studies addressed the impact of MAI-funds on the Ryan White HIV/AIDS Program:
 - The first study conducted by the Henry J. Kaiser Family Foundation assessed the macro level impact of the MAI on all HHS-funded programs
 - The second study, supported by HRSA and conducted by Positive Outcomes, Inc. (POI) involved a national survey of MAI-funded programs
 - The third study, also supported by HRSA and conducted by Health Systems Research, Inc. and RTI International, used case study methods to assess the impact of MAI funds on Part C of the Ryan White HIV/AIDS Program

Key Findings

■ Kaiser Study

- MAI has led to increased attention to the impact of HIV/AIDS on communities of color and highlighted the issue among federal policymakers in Congress and in the Administration
- MAI has strengthened leadership on HIV/AIDS in minority communities in general and fostered new partnerships between these communities and local, state, and the federal government; between community leaders and policymakers; and between the various Congressional Caucuses
- MAI has increased the number of HIV service providers, particularly minority providers
- MAI has focused attention on the importance of capacity building, quality, and availability of services for racial/ethnic minorities.

Key Findings

■ POI Study

- MAI-funded programs are minority providers
- MAI funds were used in the twelve months prior to the survey to create new or expand existing services
- ✓ One quarter (25%) of MAI-funded programs reported that they added new services to their HIV programs during the twelve months prior to the survey
- Poverty, homelessness, lack of health insurance, enrollment in Medicaid, and being HIV infected but not having AIDS are associated with the HIV positive clients of MAI-funded minority programs

Key Findings

- **Health Systems Research RTI International Study**
 - MAI grantees face similar challenges related to identifying, engaging, and retaining clients of color in care
 - Grantees face serious challenges related to stigma, social and economic issues, funding, staffing, and confidentiality, yet are developing creative strategies to overcome the challenges
 - Grantees are implementing numerous strategies for recruiting and retaining people of color in care, but could use additional support
 - Grantees are able to highlight numerous promising practices and lessons learned related to providing client-centered services, expanding service delivery, enhancing linkages, and assessing need