ESCALATING the Response to Reducing HIV Stigma 201

Jane E. Fox, MPH – Abt Associates





Disclosures



Jane Fox has no relevant financial interests to disclose.

Disclosure will be made when a product is discussed for an unapproved use.

This continuing education activity is managed and accredited by AffinityCE, in collaboration with the Health Resources and Services Administration (HRSA), LRG, and AffinityCE. AffinityCE, LRG and HRSA staff, as well as planners and reviewers, have no relevant financial interests to disclose. AffinityCE adheres to the ACCME's Standards for Integrity and Independence in Accredited Continuing Education. Any individuals in a position to control the content of a CME activity, including faculty, planners, reviewers, or others, are required to disclose all relevant financial relationships with ineligible entities (commercial interests). All relevant conflicts of interest have been mitigated prior to the commencement of the activity.

There was no commercial support for this activity.

Learning Objectives



At the conclusion of this activity, participants will be able to:

- 1. Gain a better understanding of the ESCALATE learning collaborative and technical assistance (TA) frameworks
- 2. Understand the benefits of participating in ESCALATE technical assistance and learning collaboratives
- Explore strategies and approaches to reducing and eliminating HIVrelated stigma

What is ESCALATE?



• "ESCALATE" (Ending Stigma through Collaboration And Lifting All To Empowerment) trains and builds the capacity of participants to recognize and address HIV stigma within the Ryan White HIV/AIDS Program (RWHAP).

What is the Purpose of ESCALATE?



- To reduce stigma for people with HIV on multiple levels throughout the health care delivery system, including on the individual, clinic/organization, and system levels
- Provide training and support on the implementation of various stigma-reduction approaches with an emphasis on increasing cultural humility in RWHAP treatment settings

Three Track Approach



- 1. NMAC
 - Training
- 2. Abt Associates
 - Technical Assistance
- 3. NORC
 - Learning Collaboratives

Abt's TA Team



Project Quality Advisor/ Project Director



Jane Fox (she/her/hers) Principal Associate

Project Manager/ Technical Assistance Coach



Niki Reddy (she/her/hers) Associate Analyst

Technical Assistance Coach



Sharon Pollack (she/her/hers) Associate

Technical Assistance Coach



Hunter Robertson (he/him/his) Senior Analyst

Technical Assistance Coach



Elyse Yarmosky (she/her/hers) Senior Analyst

Technical Assistance



 Increase the capacity and readiness of RWHAP recipients and sub-recipients to address HIV-related stigma, particularly at a systems-level to support access and retention in care and services

- Support organizations to address HIV stigma in a time-limited, tailored approach
- Help organizations create organizational-level change through targeted work plans
- Provide organization-specific and topicspecific Office Hours

Technical Assistance Format



Site-specific TA led by TA Coach

√ 1 hour each month

Site-specific TA led by SME (Subject Matter Expert)

√ 1 hour each month

Office Hours

✓ 1 topic offered twice per month to accommodate greater attendance from TA site staff

TA Meet and Greets

✓ Peer sharing opportunity

TA Sites



State/County/City Health Departments









Federally-Qualified Health Centers





Community-based Organizations



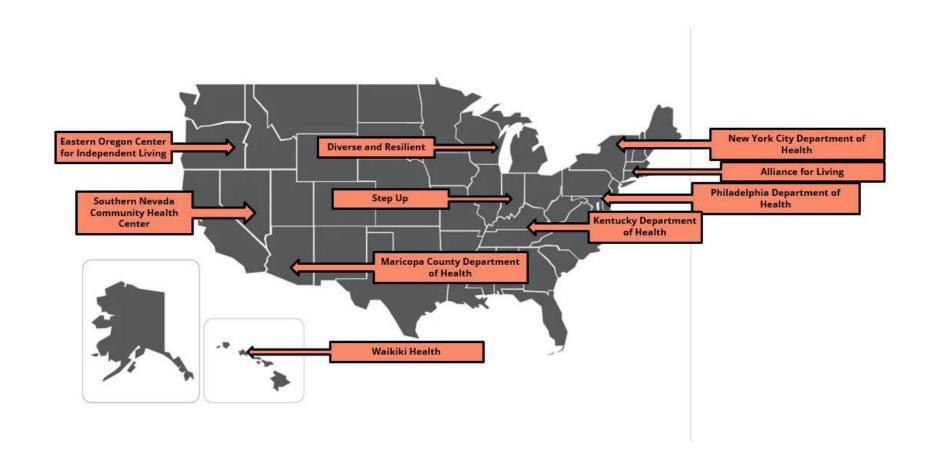






Site Locations





TA Goals and Activities



- Policies and Procedures (8)
- Internal Organization Assessment (3)
- Promotional Materials (1)
- Anti-Stigma Training (7)
- Evaluation (1)
- Hiring Practices (1)
- Client Surveys (2)
- Toolkits (2)
- Anti-Stigma Frameworks (1)

Early Successes



- Finalizing workplans with SMART goals
- Progress on completing activities
- Engagement in office hours
- Creating awareness for the need for change
- Engagement of staff and leadership for buy-in and change
- Integration of ESCALATE



Early Challenges



- Workplans needed to be rightsized
- Variation in leadership support and understanding of the stigma reduction team goals
- Varied engagement of staff on monthly calls
- Some teams lack leadership representation

Case Study: Southern Nevada Health District



- Agency:
 - FQHC providing low-cost, high-quality healthcare including HIV services
- Population Served:
 - People living in both urban (Las Vegas) and rural areas. SNHD served 2.2 million people living in Nevada.
- Funding Source:
 - RWHAP Part A
- Stigma Reduction Team:
 - Nurse Case Manager, Health Educator and Community Health Worker

Case Study: SNHD



- Workplan Goals
 - Assessment of staff attitudes, beliefs, and behaviors on HIV stigma
 - Plan and conduct training series on how to recognize HIV stigma and stigmatizing behaviors
 - Promote organizational culture that supports the reduction of behaviors perpetuation HIV stigma

Successes

- Completed survey tool
- Staff attended ESCALATE training
- Leadership buy-in celebrating diversity and contributions of staff
- Challenges
 - Conducting survey and data analysis was time intensive
 - Limited budget to fund staff recognition activities/incentives

Case Study: NYC Health Dept



- Agency:
 - City health department addressing NYC's public and mental health needs
- Population Served:
 - All individuals are at risk for living with HIV
- Funding Source:
 - RWHAP Part A
- Stigma Reduction Team:
 - Data Governance Coordinator, HIV Prevention Liaison, Health Equity Coordinator, Evaluation Specialist, and RW Senior Training Specialist

Case Study: NYC Health Dept continued



- Workplan Goals
 - Incorporate anti-stigma framework in agency culture
 - Pilot organizational assessment
 - Examine Ryan White data with an anti-stigma lens

Successes

- Progress made on developing an antistigma framework
- Adapted ESCALATE training to be used as a tool to highlight stigma in the bureau
- Challenges
 - Developing goals to impact HIV stigma on the bureau and subs
 - Identifying and integrating project goals into existing initiatives
 - Coordination of efforts among team members in different divisions



TA Outcomes



What Sites are Saying about TA



What is one thing about TA that has been helpful for your organization?

- Keeping us on task and moving forward
- Giving us structure to move forward and to set realistic action steps and timelines has been helpful
- Creating dedicated time to discuss TA and bring together the right people
- Revising our workplan to have a working base that was clear and easy to determine where to start

- Assisting us with creating manageable goals
- Understanding the direction we should plan for
- Keeping things consistent and breaking down goals to be achievable
- Helping us with strategies for leadership buy—in

- Holding our organization accountable when it comes to working on our goals. We often just stop at the talking stage and don't get to implement anything
- Providing positive energy and knowledge
- Breaking down workplan into bite size chunks so it was not so overwhelming
- Working through barriers in our workplan

Lessons Learned



- TA requires Stigma Reduction Teams are aware and honest about the team capacity (e.g., time commitment, leadership buy-in, etc) for stigma reduction work.
- When applying for TA, Stigma Reduction Teams should develop preliminary goals for TA. This initial brainstorming will help the TA team ensure the TA offered is the best fit for the organization.
- ESCALATE works best when it is a stepped-process. The TA team encourages interested sites to complete the ESCALATE training before applying for TA.

What's Next?

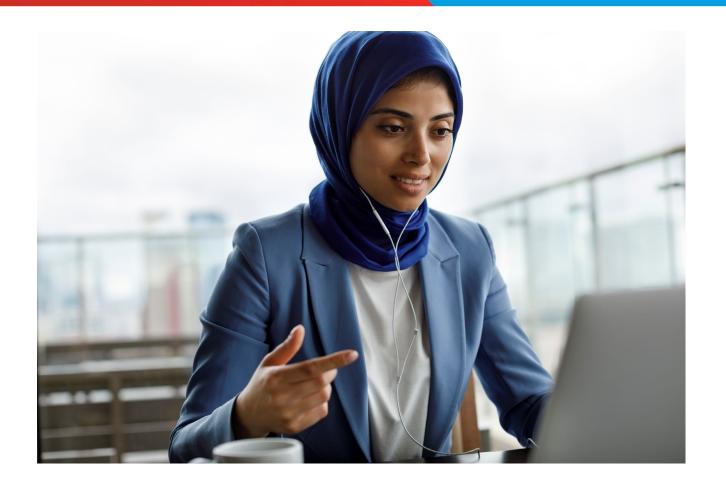


Get in Touch with Us



Jane Fox, Abt Associates

Jane fox@abtassoc.com



ESCALATING the Response to Reducing HIV Stigma 201

Reducing Stigma Through Effective Learning Collaboratives and Technical Assistance

NORC at the University of Chicago Team

Christopher La Rose, PhD

Shannon TenBroeck, MA

Chandria Jones, PhD, MPH

Sarah Hodge, MPH

Jessica Fox, BA





Disclosures continued



Chris La Rose, Shannon TenBroeck, Jessica Fox, Sarah Hodge, and Chandria Jones have no relevant financial interests to disclose.

Disclosure will be made when a product is discussed for an unapproved use.

This continuing education activity is managed and accredited by AffinityCE, in collaboration with the Health Resources and Services Administration (HRSA), LRG, and AffinityCE. AffinityCE, LRG and HRSA staff, as well as planners and reviewers, have no relevant financial interests to disclose. AffinityCE adheres to the ACCME's Standards for Integrity and Independence in Accredited Continuing Education. Any individuals in a position to control the content of a CME activity, including faculty, planners, reviewers, or others, are required to disclose all relevant financial relationships with ineligible entities (commercial interests). All relevant conflicts of interest have been mitigated prior to the commencement of the activity.

There was no commercial support for this activity.

Learning Objectives continued

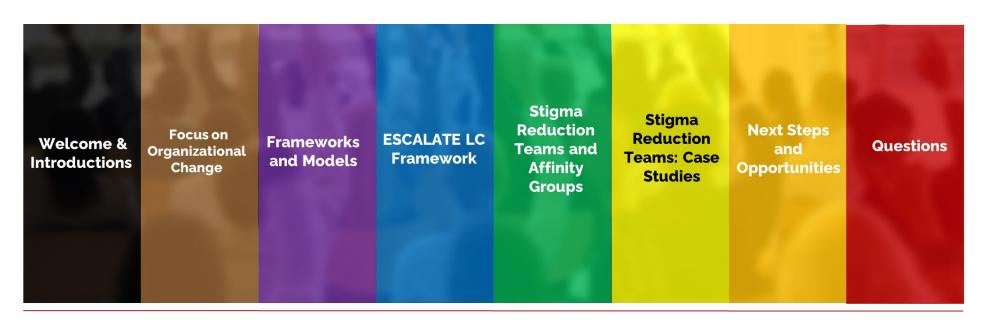


At the conclusion of this activity, participants will be able to:

- 1. Gain a better understanding of the ESCALATE learning collaborative framework
- 2. Understand the benefits of participating in an ESCALATE learning collaborative
- 3. Explore strategies and approaches to reducing and eliminating HIV-related stigma

AGENDA

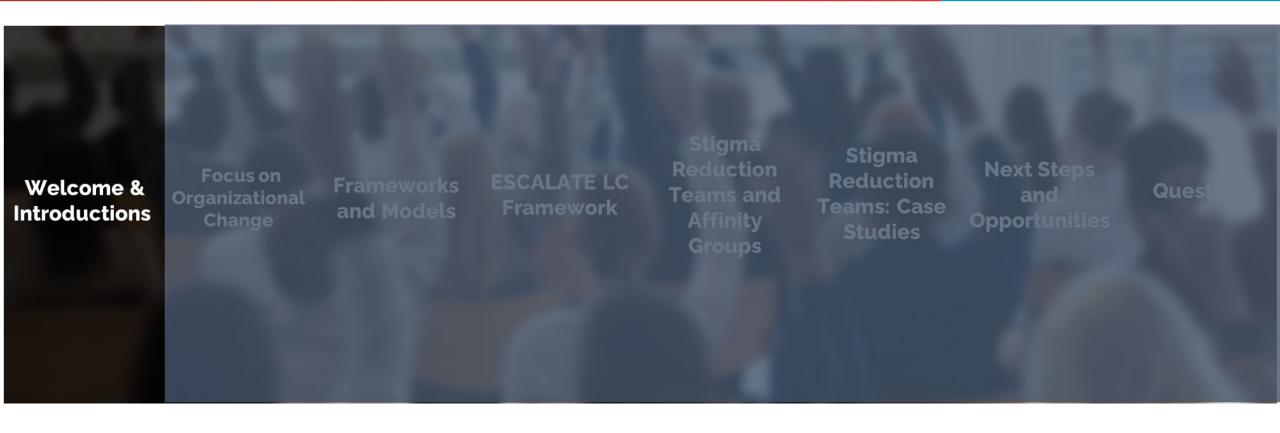




- Welcome and Introductions
- Focus on Organizational Change
- Frameworks and Models
- ESCULATE LC Framework
- Stigma Reduction Teams and Affinity Groups
- Stigma Reduction Teams: Case Studies
- Next Steps and Opportunities Questions

Welcome and Introductions





Learning Collaborative Team (NORC)



Project Director, LC Liaison



Chris La Rose (he/him/his) Senior Research Scientist, Public Health

Project Manager



Shannon
TenBroeck
(she/her/hers)
Senior Research
Director,
Public Health

Senior Advisor



Tracy McPherson (she/her/hers) Principal Research Scientist, Public Health

LC Liaison



Chandria Jones (she/her/hers) Senior Research Scientist, Public Health

LC Liaison



Sarah Hodge (she/her/hers) Research Scientist, Public Health

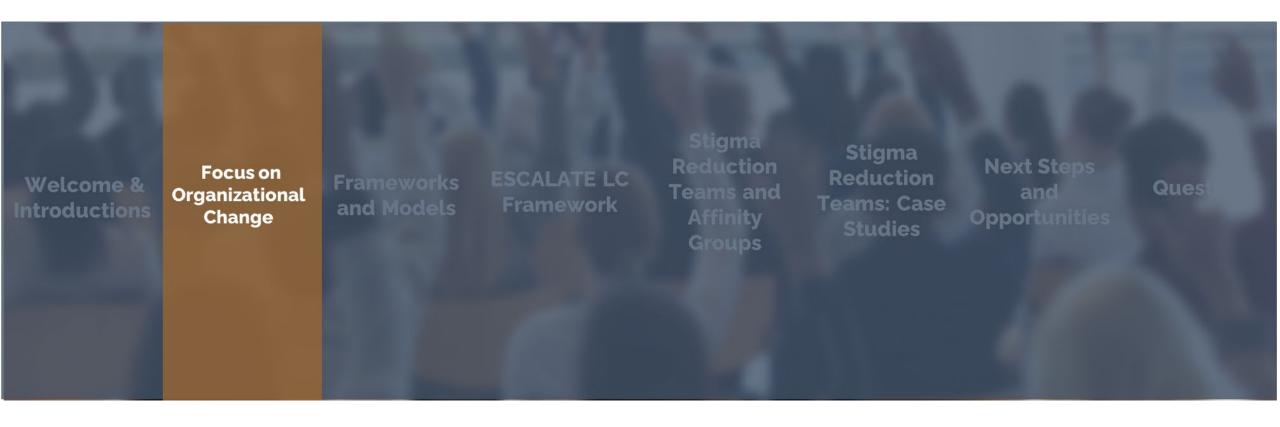
LC Coordinator



Jessica Fox (she/her/hers) Research Associate II, Public Health

Focus on Organizational Change





What are ESCALATE Learning Collaboratives?



Learning Collaboratives bring organizations together to participate in **Learning Sessions** and actively engage in **Action Periods** between learning sessions to implement quality improvement practices and strategies to a focused topic area.

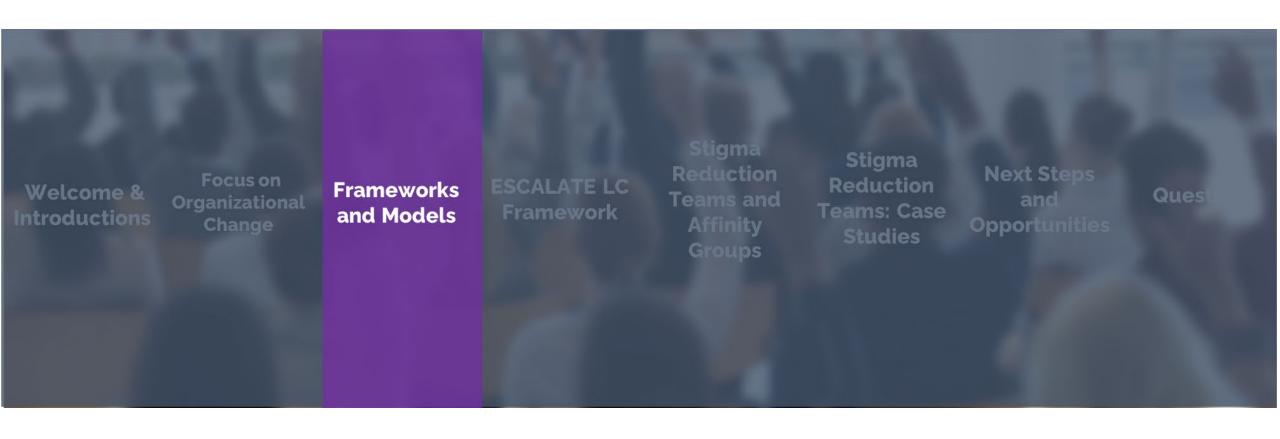
ESCALATE LCs will focus specifically on supporting RWHAP recipients/subrecipients in developing, planning, implementing, evaluating, and refining an initiative to reduce the impact of HIV stigma.

Each LC will bring together organizations that want to implement stigma-reduction activities and offer:

- Coaching;
- Peer-to-peer learning;
- Collaborative tracking of progress; and
- Support from stigma-reduction subject matter experts.

Frameworks and Models





Frameworks and Models continued



Institute for Healthcare Improvement's (IHI) Breakthrough Series Collaborative (BSC) model

- Provides structured framework for multidisciplinary teams from different organizations to work with each other and with recognized experts.
- Accelerate the spread of best practices.

Institute for Healthcare Improvement. (n.d.). Testing changes. Institute for Healthcare Improvement. Retrieved March 15, 2011, from http://www.ihi.org/IHI/Topics/Improvement/Improvement Methods/HowToImprove/testingchanges.htm

Agency for Healthcare Research and Quality's (AHRQ's) Innovations Exchange Learning Community "5S Model"

- Supporting, Sharing, Strengthening, Sustaining, and Scaling up
- Supplements IHI model with insights around LC startup, operations, and implementation of evidence-based initiatives.

Carpenter D, Hassell S, Mardon R, Fair S, Johnson M, Siegel S, Nix M. Using Learning Communities to Support Adoption of Health Care Innovations. Jt Comm J Qual Patient Saf. 2018 Oct;44(10):566-573. doi: 10.1016/j.jcjq.2018.03.010. Epub 2018 Jul 9. PMID: 30064957.

ESCALATE LC Framework





ESCALATE LC Framework: Scaffolded Approach



Learning Session (LS) 1/ Action Period (AP) 1: identifying, clarifying, or confirming your population(s) of focus

LS2/AP2: identifying, clarifying, or confirming the stigma reduction activities needed to address the type(s) of stigma your population(s) of focus experience

LS3/AP3: developing an implementation plan that specifies SMART goals and objectives, includes a timeline for implementing activities, and identifies resources needed for implementation

LS4/AP4: developing an evaluation plan to assess the process and outcomes of your stigma reduction initiative

LS5/AP5: applying a Plan-Do-Study-Act (PDSA) cycle to improve the implementation of your stigma reduction initiative

LS6: opportunity for each SRT to **share and interpret results** from their PDSA Cycle and discuss successes, challenges, and lessons learned over the course of the LC

ESCALATE LC Framework: Evaluation Approach



Pre-LC

- ESCALATE Organizational Self-Assessment for LC Member Organizations (EOSA-LC)
 - Assesses LC member organizations' capacity to address stigma

During LC

- Post-Learning Session Surveys (6)
 - Assesses content, structure, and flow of each Learning Session
- Digital Pulse Checks (5)
 - Conducted during Action Periods,
 - Assesses satisfaction with overall functioning of the LC

Post-LC

- EOSA-LC
- Overall LC Survey
 - Assesses LC member organizations' experience of the LC as a whole

Progress



Learning Session (LS) 1/ Action Period (AP) 1: identifying, clarifying, or confirming your **population(s) of focus**

LS2/AP2: identifying, clarifying, or confirming the **stigma reduction efforts** needed to address the type(s) of stigma your population(s) of focus experience

LS3/AP3: developing an **implementation plan** that specifies SMART goals and objectives, includes a timeline for implementing activities, and identifies resources needed for implementation

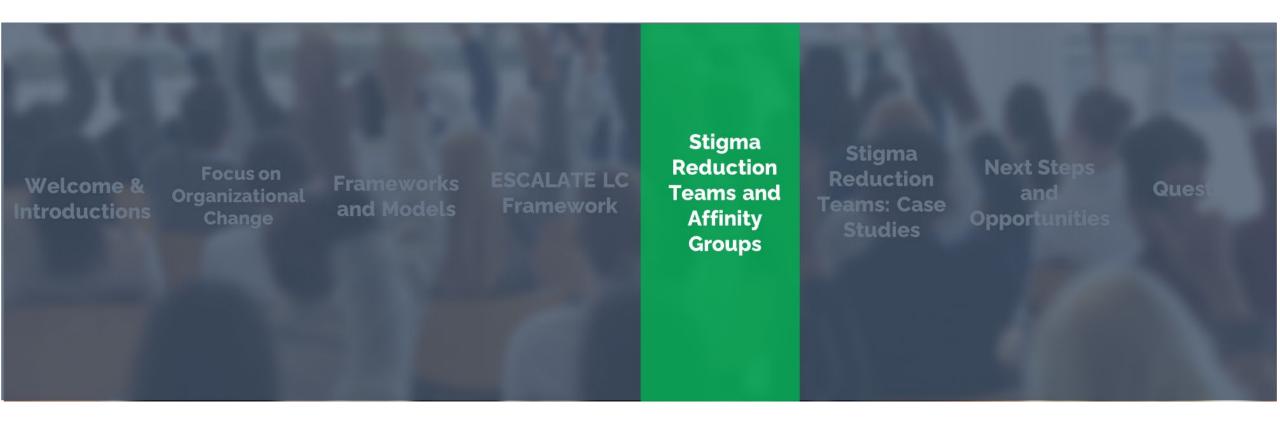
LS4/AP4: developing an **evaluation plan** to assess the process and outcomes of your stigma reduction initiative

LS5/AP5: applying a Plan-Do-Study-Act (PDSA) cycle to improve the implementation of your stigma reduction initiative

LS6: opportunity for each SRT to **share and interpret results** from their PDSA Cycle and discuss successes, challenges, and lessons learned over the course of the LC

Stigma Reduction Teams and Affinity Groups





Stigma Reduction Teams and Affinity Groups continued



Affinity Group	Stigma Reduction Team		
State Health Departments	Iowa Department of Heath		
State Health Departments	North Carolina Department of Health and Human Services		
Health Systems	UF CARES		
Health Systems	Vivent Health		
Community-Based Organizations	GMHC		
Community-Based Organizations	VAC		

Overview of Stigma Reduction Teams: State Health Department Affinity Group



SRT	Final POF	Stigma Faced by PoF	Proposed Stigma Reduction Activities	Implementation/ Evaluation Plans
lowa Department of Heath	Women of color	Racism, HIV Stigma, Culture	 Collaborate with mental health providers who identify as women of color Implement one or more of the following potential activities Add stigma section to case management assessment Re-evaluate/update Mental Health section of case management assessment Provide capacity building opportunities to sub-recipient staff on stigma and mental health challenges experienced by women of color 	Implementation DoneEvaluation Plan - TBD
North Carolina Department of Health and Human Services	Black/ African American MSM aged 35-50, HIV+ not virally suppressed in care	Internalized/ Externalized Stigma, Racism, HIV Stigma, Homophobia, Religious Discrimination	 Cultural Humility Trainings Youth-serving sexual health programs State-wide promotion of U=U Stigma Reduction Tool Kit (RNCP) PoF Stigma (6) question survey Stigma survey added to 5-year integrated joint HIV/Prevention plan listening session and community survey online registration process. 	Implementation DoneEvaluation Plan - TBD

Overview of Stigma Reduction Teams: State Health Department Affinity Group continued



SRT	Final POF	Stigma Faced by PoF	Proposed Stigma Reduction Activities	Implementation/ Evaluation Plans
UF CARES	UF CARES Staff UF CARES African- American Clients	HIV Stigma	 Update policies/training/onboarding Increase outreach Develop client support groups Promote CAB membership Recruit more PLWHA volunteers 	Implementation DoneEvaluation Plan - TBD
Vivent Health	Persons of color ages 25-44, esp. Black gay men and MSM Internalized/External ized Stigma, Racism, HIV Stigma, Homophobia, Transphobia, Ageism, Classism		• TBD	Implementation DoneEvaluation Plan - TBD

Overview of Stigma Reduction Teams: Community-Based Organization Affinity Group



SRT	Final POF	Stigma Faced by PoF	Proposed Stigma Reduction Activities	Implementation/ Evaluation Plans
GMHC	Women of Color	Internalized/externalized HIV stigma Racism Homophobia Gender identity/transphobia Ageism Classism Differently abled Gender bias Literacy Xenophobia	 Staff training on Stigma Reduction Updating client intake/assessment forms and interview using GOALS framework for sexual history taking Updating physical and virtual marketing materials with affirming and destigmatizing language using principles of the GOALS framework 	Implementation DoneEvaluation Plan - TBD
VAC	Older Adults	HIV stigma Ageism Mental health/behavioral health stigma Racism Homophobia	 Revising policies, procedures, and signage to incorporate stigma-related language Developing a 1-2 page guide for all departments to review and incorporate into their P&P specifically on stigma 	Implementation DoneEvaluation Plan - TBD

Next Steps for Stigma Reduction Teams



AP4: Develop evaluation plans

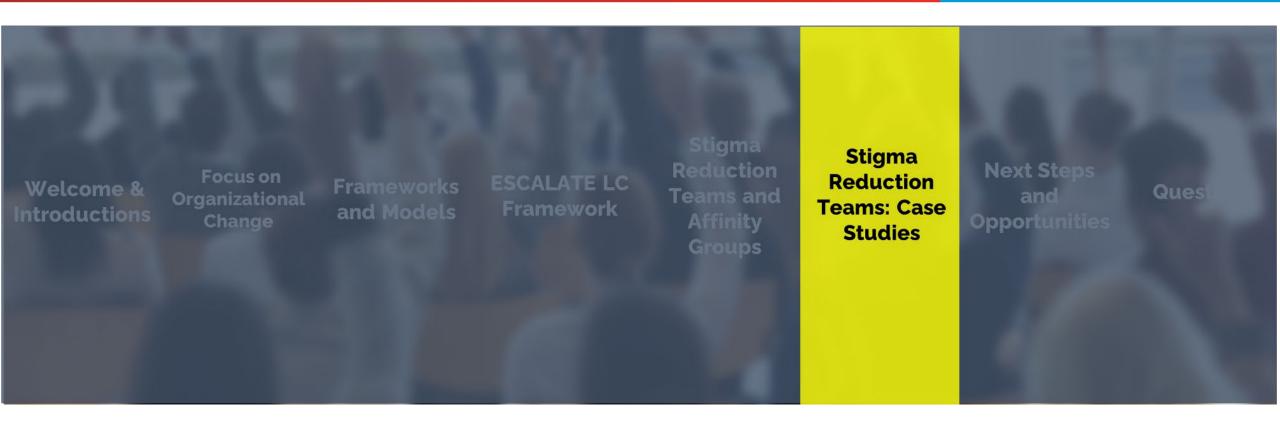
LS5/AP5: Conduct Plan-Do-Study-Act (PDSA) cycle

LS6: Share and interpret results, successes, challenges, and lessons learned

Post-LC1: Disseminate results, experiences, successes, challenges, and lessons learned

Stigma Reduction Teams: Case Studies





Case Study: UF CARES



Pre-LC

- Established institutional support for stigma reduction activities Identified goals and objectives, personnel, and potential activities to be conducted, and resources needed
- Not yet started with implementation

During LC

- Reviewed data to identify potential PoFs
 - UF CARES Staff and African American Clients
- Identified stigma affecting PoF, including
 - HIV stigma
- Proposed Stigma Reduction Activities
 - Selected: Revising P&P manual and signage

Challenges/Facilitators

- Challenge: Client engagement noticeable lack of client participation across a lot of activities post-COVID
- Facilitator: Staff interest and engagement

Case Study: VAC/Westbrook Clinic



Pre-LC

- Leadership engagement and investment in identifying ways to address stigma in the clinic.
- Some previous implementation activities, but not done systematically

During LC

- Reviewed data to identify potential PoFs
 - Selected Older Adults
- Identified stigma affecting PoF, including
 - Racism, HIV stigma, Ageism, behavioral health
- Proposed Stigma Reduction Activities
 - Selected: Revising P&P manual and signage

Challenges/Facilitators

- Challenge: Organization serves many interests – "default" LGBTQ services organization
- Facilitator: Existing relationships and trust with PoF

Case Study: Iowa Department of Health



Pre-LC

- Strong data on stigma 17 years of assessing stigma on multiple dimensions
- Some implementation had conducted some stigma reduction activities but these weren't well
 connected
- No PoF prioritized

During LC

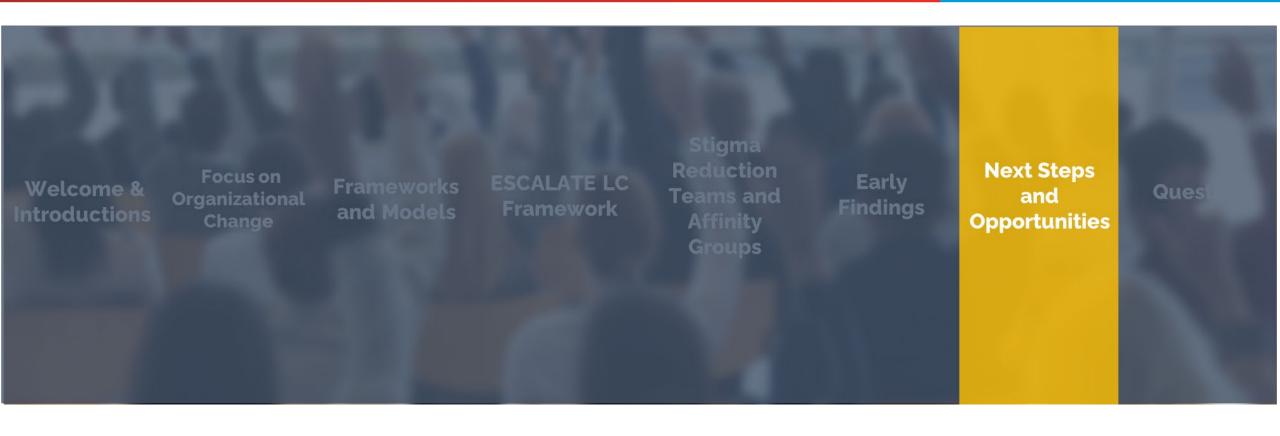
- Reviewed data to identify potential PoFs
 - Selected Women of Color
- Identified stigma affecting PoF, including
 - Racism, HIV Stigma
- Proposed Stigma Reduction Activities
 - Selected: TBD

Challenges/Facilitators

- Strong Data
- Leadership Support
- Rebates

Next Steps and Opportunities





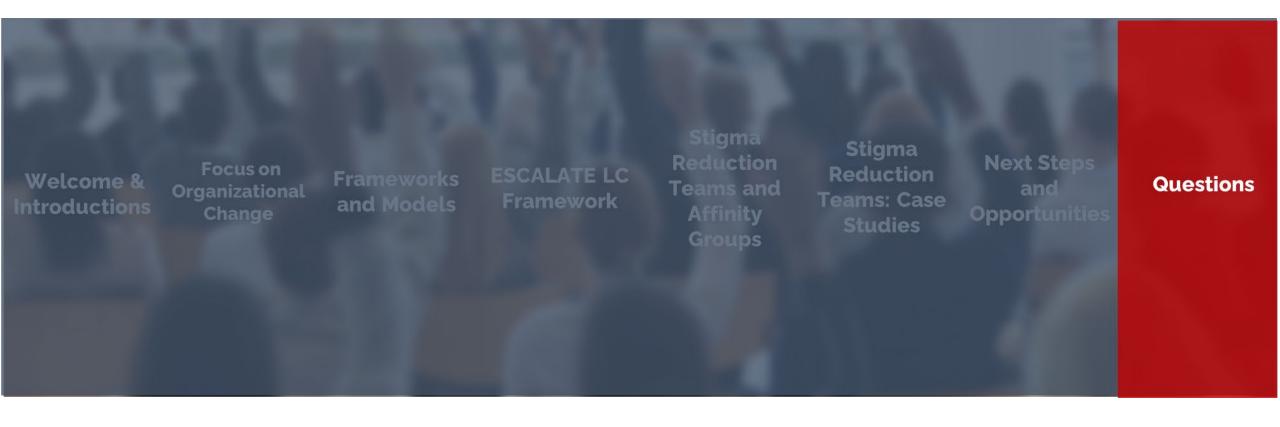
Next Steps and Opportunities continued



- Consider your organization's readiness for Learning Collaborative 2
 - ➤ Application period opens in summer/fall 2022
- If your organization is <u>not yet ready for an LC</u>, consider applying for ESCALATE Training or Technical Assistance.
- Look out for ESCALATE LC Digital Stories on TargetHIV.org
 - > Lessons learned
 - Successes
 - Pitfalls to avoid
 - Opportunities to connect with former LC members

Questions





Questions?







Get in Touch

Chris La Rose (he/him/his), Project Director Shannon TenBroeck (she/her/hers), Project Manager Jessica Fox (she/her/hers), LC Coordinator

ESCALATE@norc.org

How To Claim CE Credit



If you would like to <u>receive continuing education credit</u> for this activity, please visit:

ryanwhite.cds.pesgce.com



Thank You!

Email us at: ESCALATE@norc.org