What's Going on @ SPNS

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SPNS Disseminates Best Practices Through IHIP

The Ryan White HIV/AIDS Program, administered by the Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB), has built a track record of delivering culturally competent and comprehensive treatment and care over the past 20 years to people living with HIV/AIDS (PLWHA) who otherwise would not be able to afford that care. The Program has saved countless lives, and today it serves nearly one-half—approximately 529,000—of the estimated 1.2 million PLWHA in the United States.[1]

HRSA owes part of its success in engaging PLWHA in care to its Special Projects of National Significance (SPNS) Program. Through SPNS, HRSA supports the development and evaluation of cutting-edge, innovative approaches to delivering HIV care to marginalized and underserved populations. SPNS disseminates invaluable information for medical personnel and administrators seeking to replicate models of care at their own clinics. To promote replicability and the ease with which clinics can do so, HRSA has launched the Integrating HIV Innovations Program (IHIP).

Created in partnership with Impact Marketing + Communications of Washington, DC, IHIP features a series of concise but comprehensive training materials, including training manuals, curricula, webinars, and a wiki. All the materials address different operational areas that clinics may want to augment along with the best practices developed through various SPNS projects that may help clinics reach their goals.

The Need to Get IHIP

The creation of IHIP could not be more timely. According to the U.S. Centers for Disease Control and Prevention (CDC), many PLWHA are not in care and 20 percent of HIV-positive persons in the United States are unaware of their serostatus.[2] Without intervention, these PLWHA most likely will progress to AIDS, undermining their health outcomes, quality of life, and life expectancy. Replication of SPNS models can help HIV providers more readily identify PLWHA and engage and retain them in care, thereby mitigating the impact of HIV nationwide, improving the quality of life for communities hardest hit by the epidemic, and saving lives.

To that end, HRSA, through its work administering the Ryan White HIV/AIDS Program, has taken a leadership role in the implementation of the National HIV/AIDS Strategy (NHAS).[3] Released by the White House Office of National AIDS Policy (ONAP) in July 2010, the NHAS provides a roadmap to mitigating and, ultimately, ending the HIV/AIDS epidemic in the United States. This map is crystallized in three goals that also speak directly to the mission of the Program:

- Reduce the number of people who become infected with HIV.
- Increase access to care and improve health outcomes for PLWHA.
- Reduce HIV-related health disparities.[4]

SPNS and the IHIP series further HRSA's efforts to fulfill each goals and address the NHAS's call for interagency cooperation at all levels. The overarching goal is to significantly reduce new infections and increase the number of people who know their serostatus.[5,6] HRSA is charged with engaging newly diagnosed PLWHA in clinical care as soon as possible after diagnosis. HRSA is also charged with increasing the number

Access IHIP training products at www.careacttarget.org/library/integrating-hiv-innovative-practices-ihip.

of clients who are aware of their HIV status in continuous HIV primary care.[4]

First Up: Buprenorphine

The inaugural edition of IHIP, *Integration of Buprenorphine Into HIV Primary Care Settings,* distills the research and information produced by the 2004–2009 SPNS initiative Innovative Methods for Integrating Buprenorphine Opioid Abuse Treatment in HIV Primary Care. The initiative marked the first time methods of integrating buprenorphine treatment—a form of medication-assisted treatment (MAT) for people with opioid dependence—has been expanded into primary HIV care.

The IHIP training manual provides an overview of opioid addiction and how buprenorphine helps mitigate withdrawal symptoms for people in treatment. It also details how MAT can help augment the health outcomes of PLWHA engaged in HIV care. The manual provides a summary of the best practices developed by clinics that participated in the SPNS buprenorphine initiative.

The related curriculum features modules that outline how to integrate buprenorphine into an HIV clinic's operations and provides detailed information concerning the staff necessary to operate the program. It also provides information about the credentials medical doctors must have to legally prescribe buprenorphine. Extensive handouts, information sheets, templates, and other resources are available to help agencies adapt the model of care, as are educational webinars.

Second: Time to Engage

The second edition in the IHIP series, *Engaging Hard-to-Reach Populations Living With HIV/AIDS Into Care,* provides a detailed overview of approaches to identifying hard-to-reach PLWHA and retaining them in care. Rather than examine a single project, this IHIP title draws from multiple SPNS initiatives, past and present, that have concerned themselves with how to best engage vulnerable PLWHA who are not in care, are unstable in care, or have fallen out of care and bring them into HIV/AIDS treatment and related services.

Both the training manual and the curriculum provide an overview of the underserved and marginalized populations most heavily affected by the AIDS epidemic, including racial and ethnic minorities, substance users, injection drug users, and men who have sex with men. Also included are

- An overview of the psychosocial and economic determinants—from homophobia and racism to poverty and lack of health literacy—that prevent most PLWHA from accessing treatment and care;

- A review of the continuum of care and definitions of various states of care;

- A comprehensive list of resources for further information about the research on which these models are based;

- Descriptions of the models of care common to initiatives addressing hard-to-reach populations and the benefits and challenges of each; and

- Logic models detailing how clinics using each model of care recruit, link, and engage PLWHA and, ultimately, retain them in care.

More About Getting IHIP

IHIP will be released as electronic documents ready for download through the TARGET Center website and related sites. A series of webinars will accompany the launch of each IHIP training manual and curriculum. These live, interactive events will feature representatives from clinic sites whose work informed the creation of the IHIP materials, SPNS officials who oversaw the projects, and the writers themselves. Participants will have the opportunity to ask questions; those who cannot join the webinar will have the

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For More Information . . .

Consult the following resources for more information about IHIP.

SPNS Web Site

- http://hab.hrsa.gov/abouthab/partfspns.html. HRSA, HAB site provides information about the SPNS Program as well as details related to current and completed SPNS initiatives.

TARGET Center Website

- Integration of Buprenorphine into HIV Primary Care Settings Training Manual, Curriculum, and webinars. Available at: www.careacttarget.org/library/integrating-hiv-innovative-practices-ihip

- Engaging Hard-to-Reach Populations Living with HIV/AIDS into Care Manual and Curriculum. Available at: www.careacttarget.org/library/integrating-hiv-innovative-practices-ihip

opportunity to watch at their leisure through the TARGET website, where webinars will be archived.

IHIP users will be able to find answers to their questions through the series' monitored online help portal, which will operate in a similar fashion to popular wiki sites, such as Wikipedia. Users will be able to type their questions into a search box that will return answers provided by IHIP writers and SPNS personnel. In addition, users' colleagues nationwide will be able to respond to those questions. This open, collaborative system of information sharing is meant to foster a learning community. Queries that cannot be answered using the pool of information already in the wiki can be posted by users for comment and review by their colleagues.

Final Thoughts on IHIP

IHIP can help clinics extend the depth and reach of their HIV primary care service delivery, engaging additional vulnerable PLWHA and retaining them in care and further mitigating the impact of the AIDS epidemic in their communities. This work involves more than implementation of a model of care; it involves recommitment and rededication to scaling up and continuing to improve operations, cultural competency, and services.

Through this work, agencies that provide services to PLWHA can overcome the personal, community, and cultural barriers that keep PLWHA out of care; decrease clients' viral load or achieve viral suppression; and dramatically reduce clients' chances of transmitting the virus to others. PLWHA in care will also benefit from health literacy and education programs as well as wraparound services, many of which are designed to help patients' families in addition to PLWHA themselves.

The SPNS models of care have helped disseminate the Ryan White HIV/AIDS Program's holistic approach to care of PLWHA who otherwise would not be able to access services. These approaches to care were never meant to exist in a vacuum but were intended to be replicated and adapted by providers nationwide serving vulnerable populations. With IHIP, providers everywhere now have the tools to adopt the many effective innovations generated by the SPNS projects.

Endnotes

1 U.S. Centers for Disease Control and Prevention (CDC). HIV Surveillance—United States, 1981–2008. *MMWR*. 2011;60: 689-93.

2 CDC. Vital signs: HIV prevention through care and treatment—United States. *MMWR*. 2011;60:1618-23.

3 Morin S, Kelly J, Charlebois E, et al. Responding to the National HIV/AIDS Strategy—setting the research agenda. *JAIDS*. 2011; 57:175-80.

4 Office of National AIDS Policy (ONAP). *National HIV/AIDS Strategy*. July 2011. Available at: http://aids.gov/federal-resources/policies/national-hiv-aids-strategy/nhas-fact-sheet.pdf

5 ONAP. *National HIV/AIDS Strategy for the United States*. July 2010. Available at: http://www.whitehouse.gov/sites/default/files/uploads/NHAS.pdf

6 National Institutes of Health. *Guidelines for the use of antiretroviral agents in HIV-1-infected adults and adolescents*. 2012. Available at: http://aidsinfo.nih.gov/guidelines/html/1/adult-and-adolescent-treatment-guidelines/0/