

Welcome

Central East PTTC Webinar

Substance Use and HIV Part 2: Recommendations for Prevention Professionals

The Central East PTTC is housed at the Danya Institute in Silver Spring, MD

Oscar Morgan
Executive Director

Deborah Nixon Hughes
Project Director

Each TTC Network includes 13 centers.



Network Coordinating Office

National American Indian and Alaska Native Center

National Hispanic and Latino Center

10 Regional Centers (aligned with HHS regions)

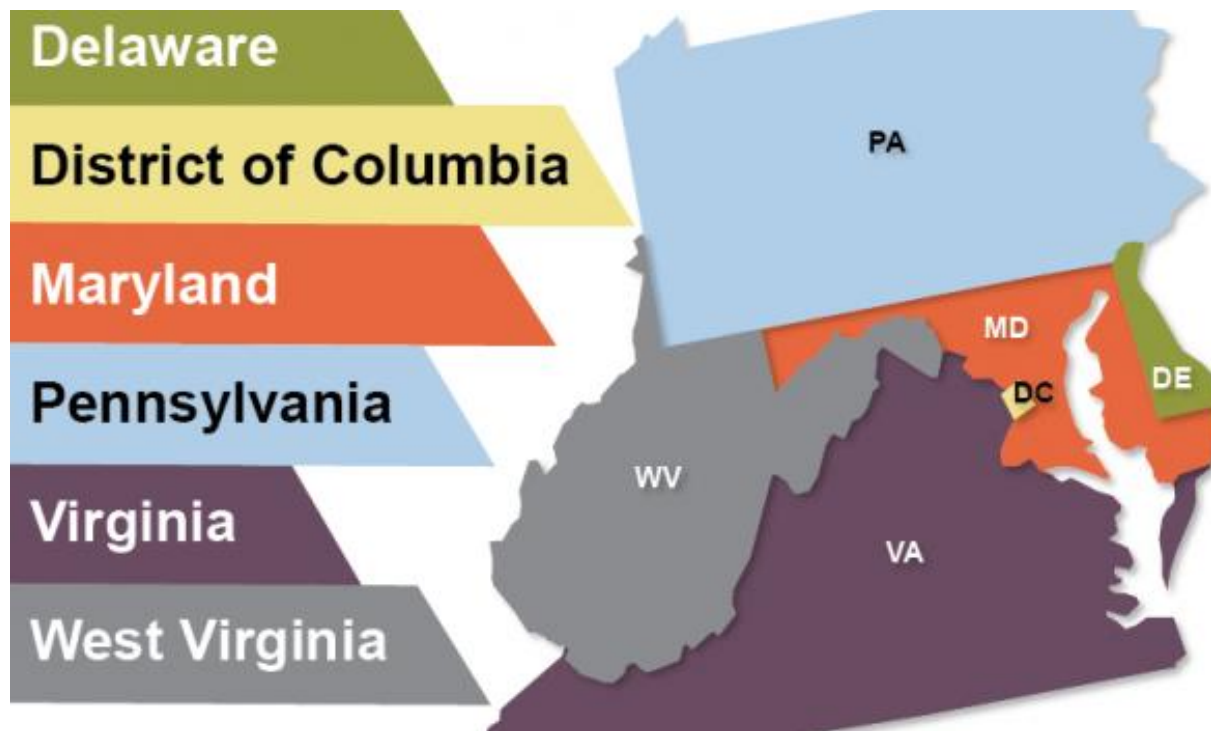


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Central East Region

HHS REGION 3



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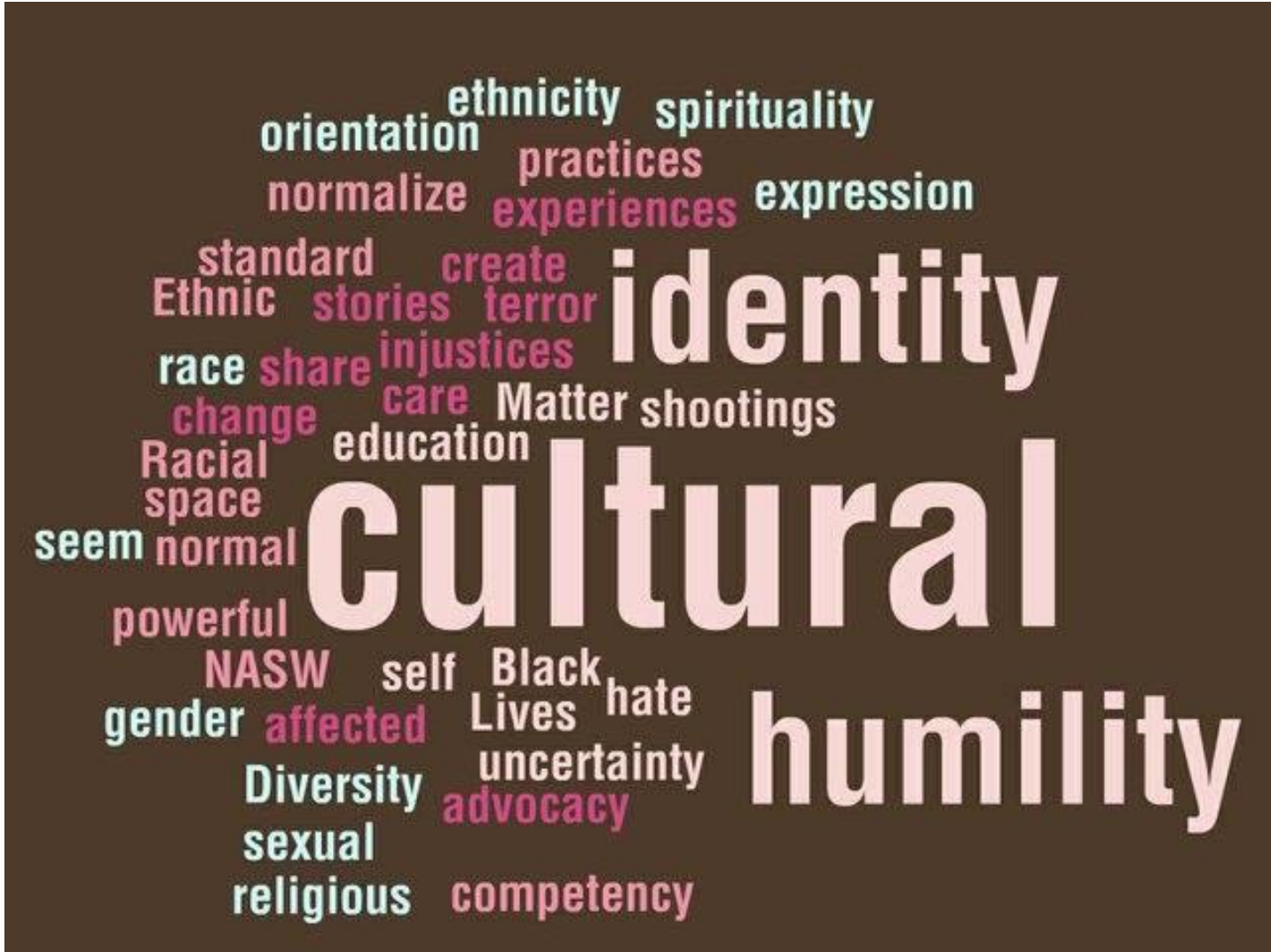
The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.



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PTTC Mission



To Strengthen the Capacity of the Workforce

1

To Deliver Evidence-Based Prevention Strategies

2

Facilitate Opportunities for Preventionists to Pursue New Collaboration Opportunities, which include Developing Prevention Partnerships and Alliances

3

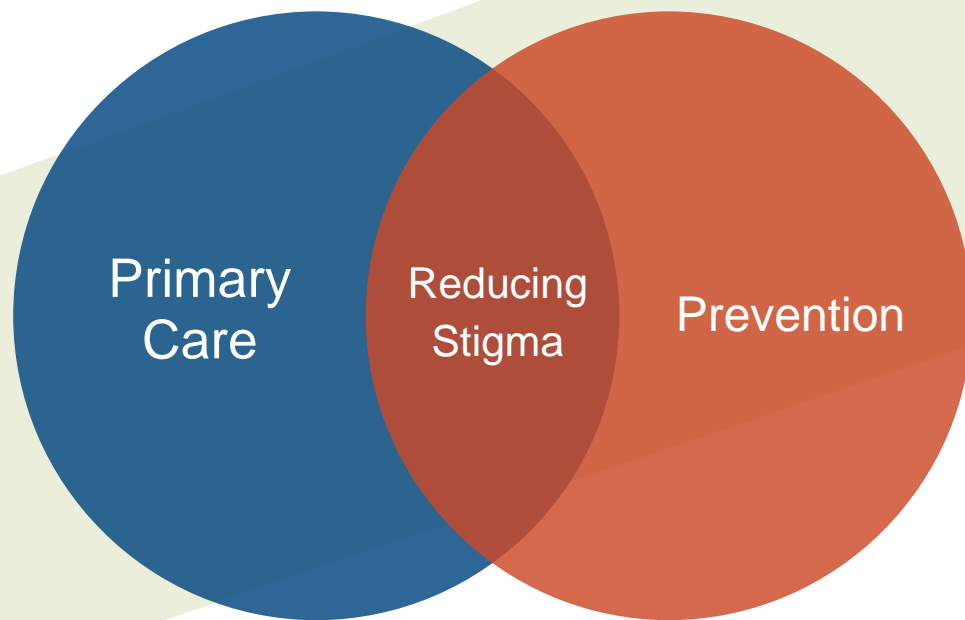


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Central East PTTC Specialty Area

Engaging and Collaborating
with Primary Care Providers
for Substance Use
Prevention



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Eligibility

Consistent with
Regional, State and
Local Needs

No Cost

Data Driven

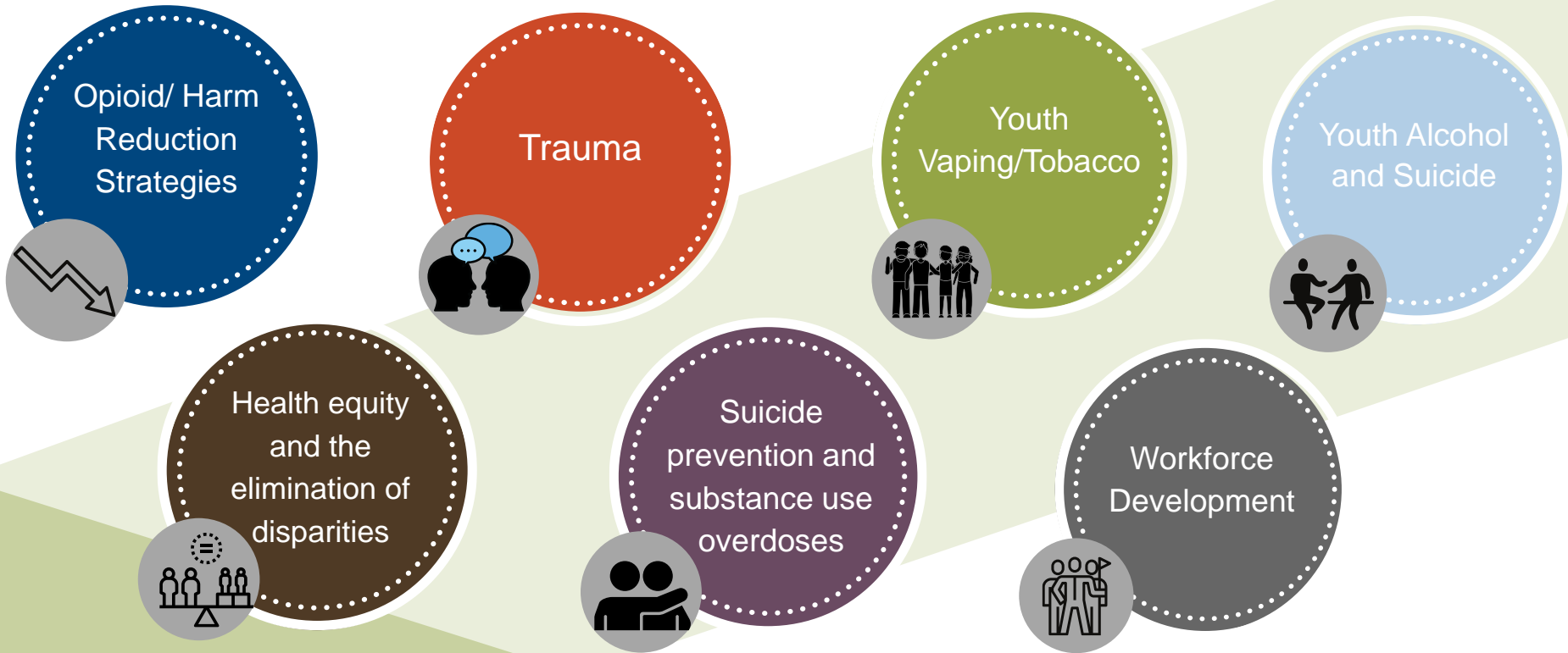
EBPs provided by
Subject Matter
Experts



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PTTC Focus Areas



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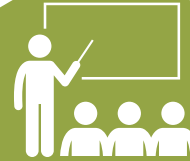
Services Available



Online Courses



Technical Assistance



Skill Based Training



Webinar



Toolkits



Facilitate Prevention Partnership & Alliances



Research Learning Collaborative



Newsletter



Technology Driven Models



Literature Searches



Virtual Meeting



Research Publication



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Other Resources in Region 3



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ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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Prevention Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Substance Use and HIV Part 2: Recommendations for Prevention Professionals

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July 26, 2022

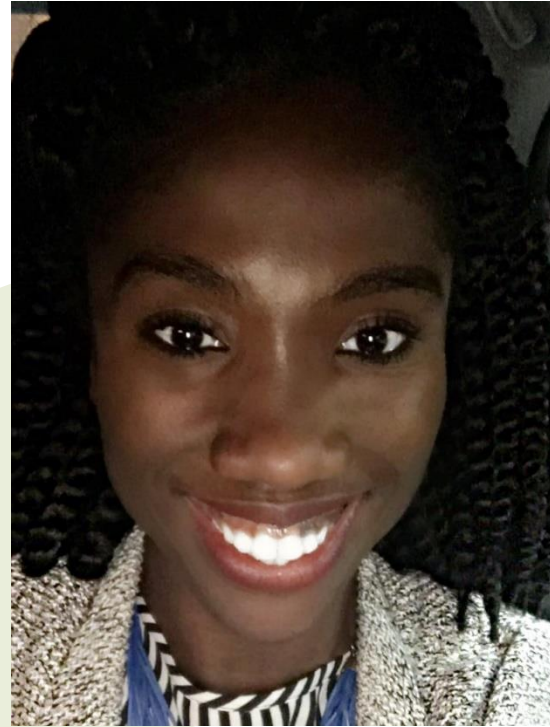
SAMHSA
Substance Abuse and Mental Health
Services Administration

THE DANYA INSTITUTE

Presenters



Josh Esrick



Princess Walker



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Learning Objectives

- Review evidence-based and promising programs for HIV and substance use prevention
- Summarize opportunities to improve services and to develop public health collaborative partnerships
- Discuss recommendations for developing new pilot programs
- Provide small group discussion and shared learning opportunity

Evidence-Based and Promising Programs



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Evidence-Based and Promising Programs

- Types of programs
 - Preventing both substance use and HIV
 - Preventing HIV among people using substances
 - Preventing substance use among people living with HIV
- Overlap- many shared risk factors
- BUT, adapt programs to fit local needs and consider ancillary services
 - E.g., offering referrals to SUD treatment

What We Are Not Covering Today

- Standalone HIV prevention
 - E.g., condom distribution through school health offices
- Standalone substance use prevention
 - E.g., anti-tobacco marketing campaigns

- Remember that many of these programs are effective at reaching their intended outcomes though, and could complement the programs discussed today



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When Selecting a Program, Consider... (SAMHSA)

- Who is your target population?
- What impact existing protocols/procedures may have?
- What local factor could impact service delivery?
- What are your organizational strengths and areas for improvement?
- What training opportunities are available?

Programs (SAMHSA & Blueprints)

- Life Skills Training
- Be Proud! Be Responsible!
- Eisenhower Quantum Opportunities Program
- Families Unidas
- Good Behavior Game
- HIPTeens
- Positive Prevention Plus
- Promoting Health Among Teens!
- Reducing the Risk
- Practices to increase uptake of and improve adherence to Pre-Exposure Prophylaxis (PrEP)
- Syringe Services Programs (SSPs)
- Contingency Management
- Cognitive Behavioral Therapy
- Patient Navigation



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Life Skills Training

- Classroom-based universal substance use prevention program
- Contains 30 sessions taught over 3 years
- Focuses on building protective factors against substance use; many SUD-related studies
- Research has found lower risk of HIV at 10 years follow-up as well
- Why? Many shared risk factors are addressed
 - Participants also less likely to be risky drivers



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Families Unidas

- Family-base intervention to build parent-support networks among Hispanic immigrant parents and improve parenting practices
- Contains 8/9 multi-parent education sessions and 10 family visits
- Focuses on supporting parents in helping their children respond to various risks
- Research has found reduced risk of substance use and unsafe sexual behaviors



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Reducing the Risk

- Student intervention designed to reduce sexual risk-taking behavior
- Contains 16 sessions delivered by high school teachers or other community leaders
- Focuses on teaching skills to refuse risky sexual behavior
- Research has found reduced risk of unsafe sexual behavior; no studies of SUD
- However, some skills (e.g., managing peer pressure) overlap; potentially promising



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Practices Related to PrEP

- Specifically, practices for people already living with SUD
- PrEP is a biomedical intervention to prevent HIV transmission with strong evidence of effectiveness
- PrEP requires daily intake and people with SUD or MH disorders often face barriers
- Psychosocial practices exist to encourage PrEP intake, with emerging evidence



Practices Related to PrEP, 2

- PrEP Mate
 - Bidirectional text messaging program
- Bio-Behavioral Community Health Recovery Program
 - Weekly group therapy and text-message reminder intervention
- Pharmacy-led PrEP
 - Integrated care intervention with in-clinic pharmacist consultations



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Syringe Services Programs

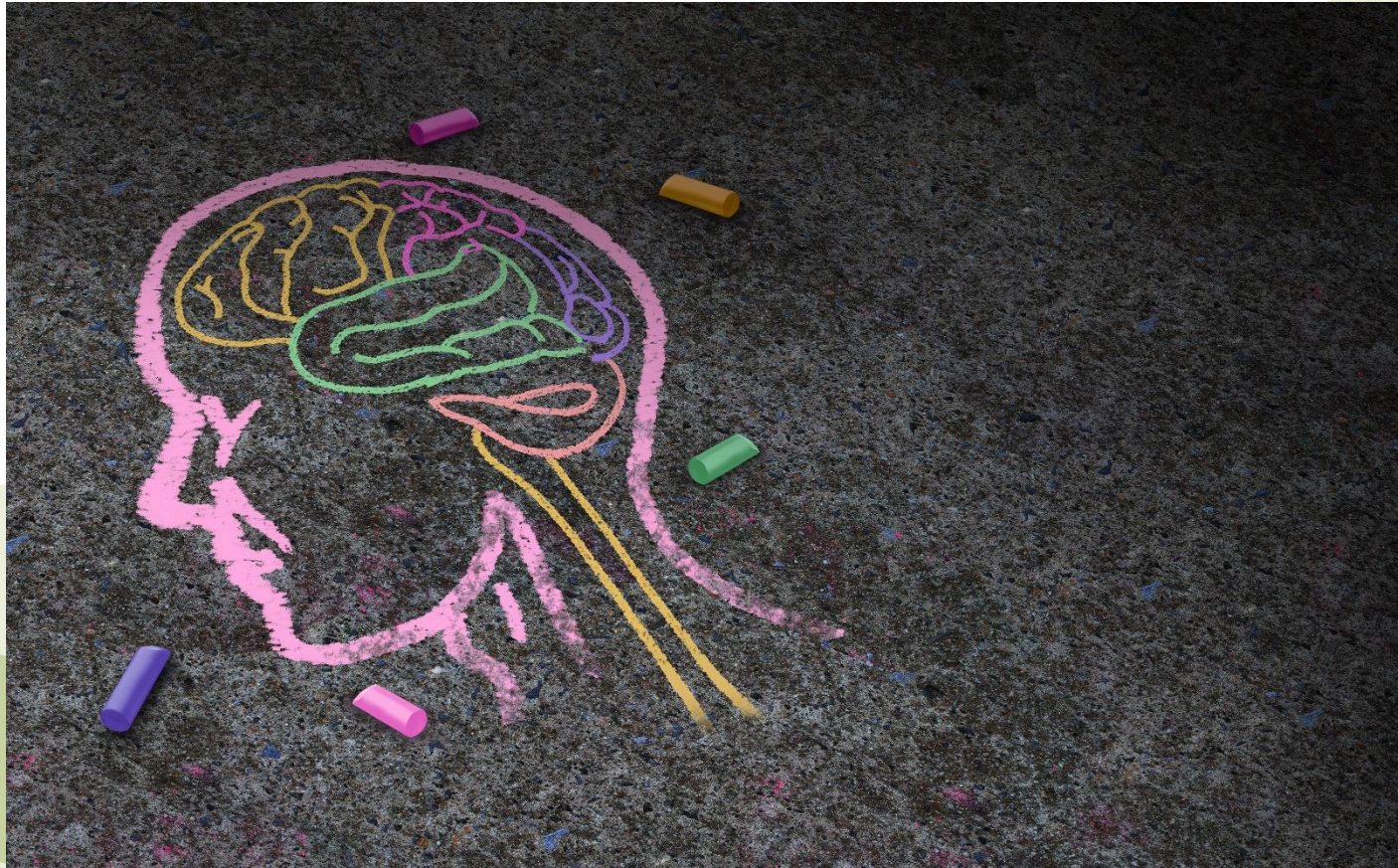
- SUD harm reduction interventions with strong evidence of effectiveness at reducing risk of infective diseases
- Components
 - Provision of sterile syringes and injection drug equipment
 - Harm reduction education
 - Linkages to MH and SUD treatment services
- Shown to reduce HIV and Hep C by 50%
- Also associated with reduced rates of substance use



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Improving Services and Developing Public Health Collaboratives



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Improving Services and Developing Public Health Collaboratives

- As discussed in part 1, HIV and SUD have significant overlap in risk factors
- Meaning there are many stakeholders who may be interested in addressing both issues
- However, HIV also has many stakeholders who have historically been less focused on SUD
- There may be many additional potential partners for substance use prevention to work with on HIV issues



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Strategies to Improve Services (SAMHSA)

- Adapting Programs
- Coordinating Care
- Workforce Capacity and Development
- Access to Services
- Financing

Adapting Programs

- Ensuring programs enshrine the principles of cultural humility and cultural competency
- Follow the core principles of adaptation
- ADAPT-ITT
 - Model for adapting HIV programming, uses same concepts as SUD models

Coordinating Care

- Especially relevant for people at-risk for HIV who already have co-occurring MH/SUD; or at-risk for SUD who already have HIV
- Coordinated care models
 - E.g., HIV clinics screening for HIV and SUD and capable of providing services for both
- Collaborative Care vs. Integrated Care

Workforce Capacity and Development

- Many behavioral health professionals have not received training on addressing infectious diseases
- Practice-specific training
- Addressing stigma and creating supportive environments

Access to Services

- Common barriers to services
 - Transportation, lack of trained providers, provider discrimination, community stigma, financial costs, etc.
- Common strategies to address barriers
 - Telehealth, transportation assistance, combined care visits/screenings, mobile health programs, outreach, etc.



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Financing

- As with all public health, HIV prevention can face financing challenges
- However, there are additional federal programs that SUD prevention may be less familiar with:
 - Ryan White HIV/AIDS Program
 - Private insurance reimbursement
 - Centers for Medicare & Medicaid Services grants
 - Special federal funding (e.g. “Ending the HIV Epidemic: A Plan for America”)



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Pilot Program

Pilot strategy is the blueprint that defines how the business will develop, implement, and test the application

- Short term, smaller-scale version of the initiative undertaken to determine feasibility
- Should help gather more information on cost and time requirement
- Should assist with identifying and understanding any impact point. Along with areas that need improvement before a large scale implementation takes place



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Why Pilot a Program?

What is the purpose?

What problem are you trying to overcome

What is the scope?

Should be related to the question you are trying to ask for feasibility

Should address the question you are trying to answer within the timeframe that's required

How to measure success?

How or whether your goal was achieved

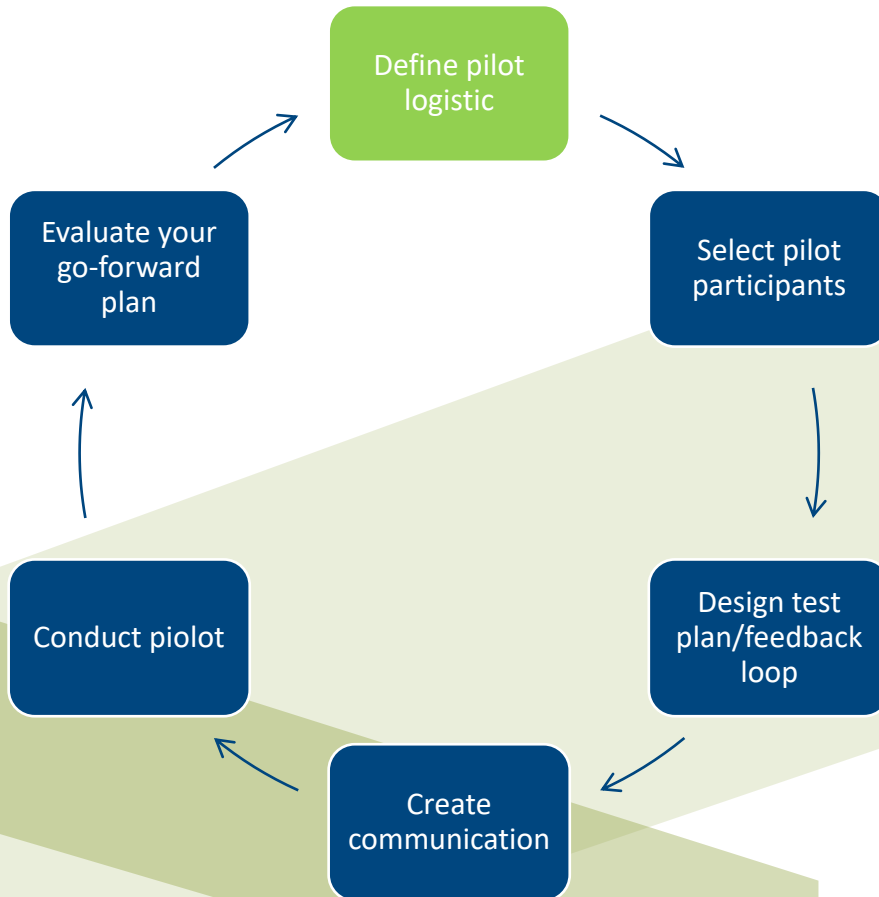
What data points are you using



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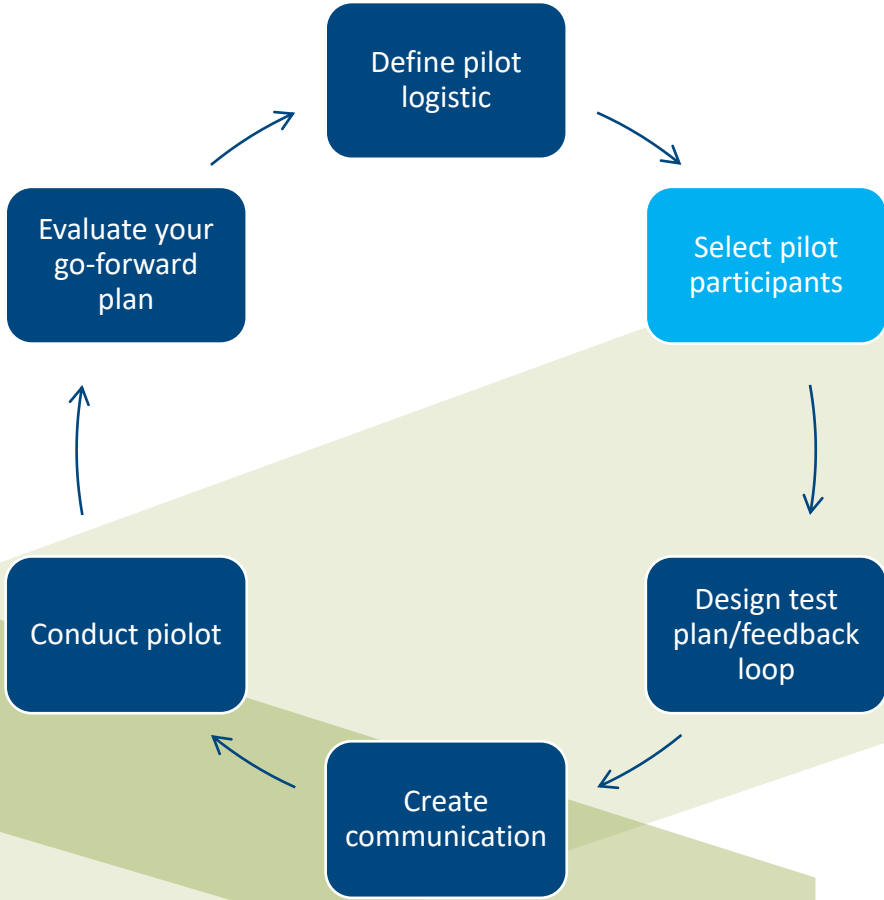
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6 Steps for Implementing a Successful Pilot



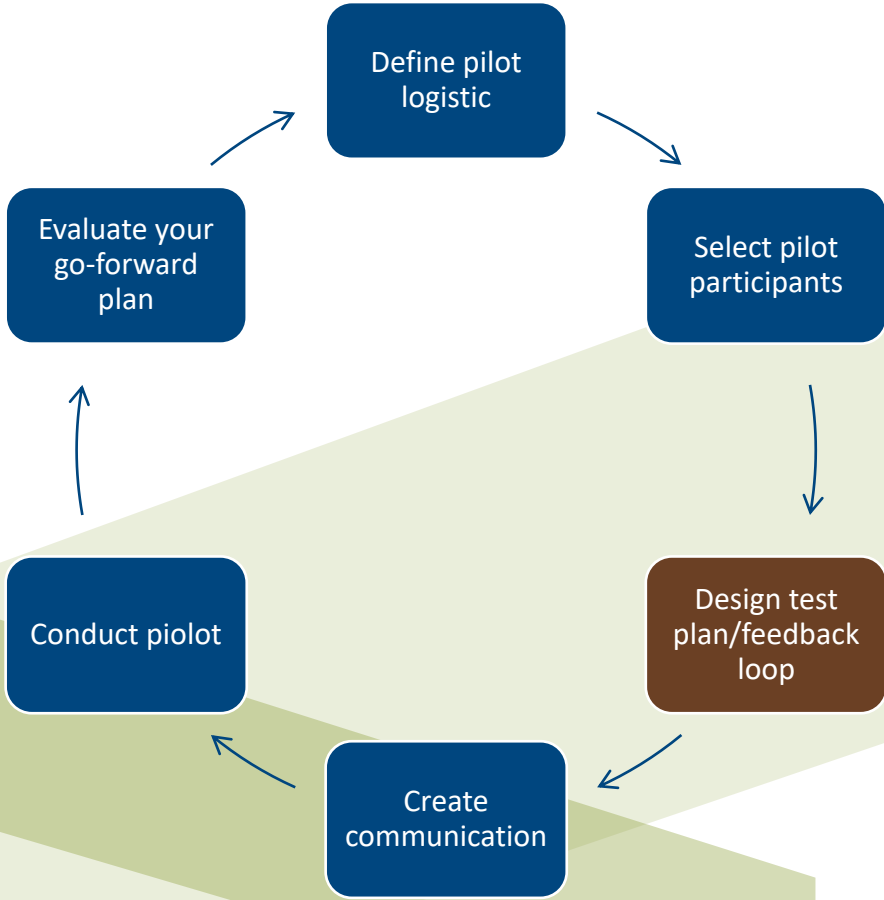
- What to do:
 - Define stakeholders
 - Select use/case scenarios
 - Understand roadmap
 - Set goals and success criteria
 - Plan a timeline

6 Steps for Implementing a Successful Pilot



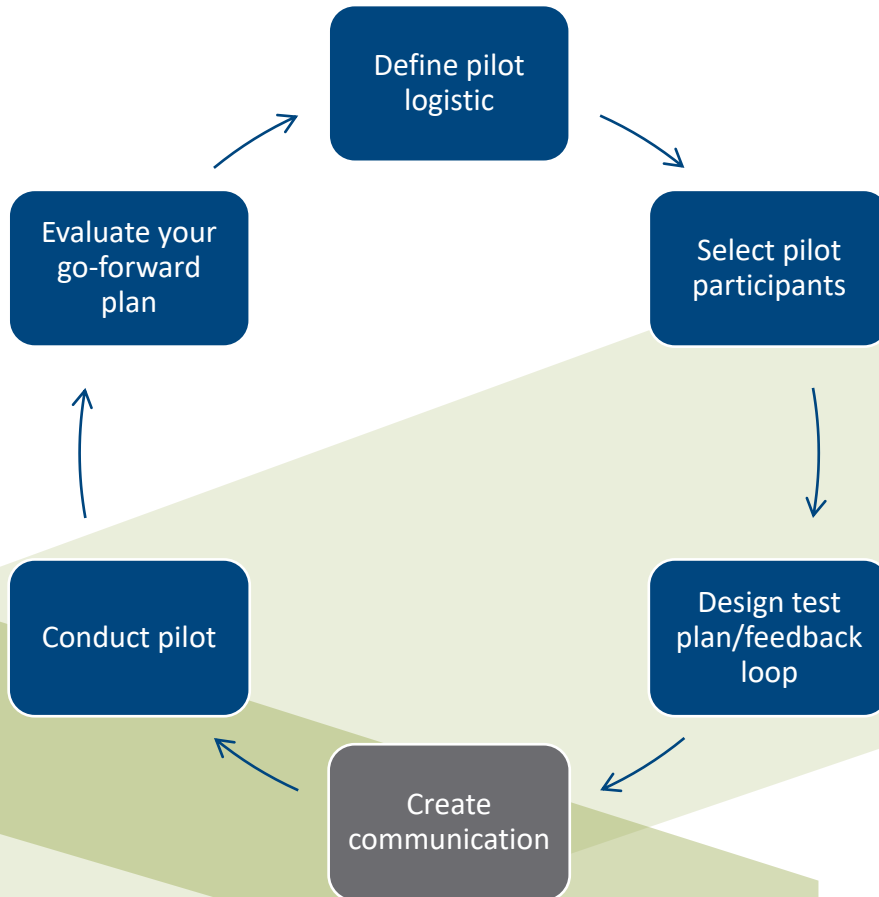
- Who benefits:
 - Cross representation of person and use cases
 - Select person or groups that would benefit
 - Include stakeholders and supports to aid in verification

6 Steps for Implementing a Successful Pilot



- Validate Applicability:
 - Define a clear test plans to offer structure
 - Create a feedback loop to ensure timely and appropriate sentiment

6 Steps for Implementing a Successful Pilot



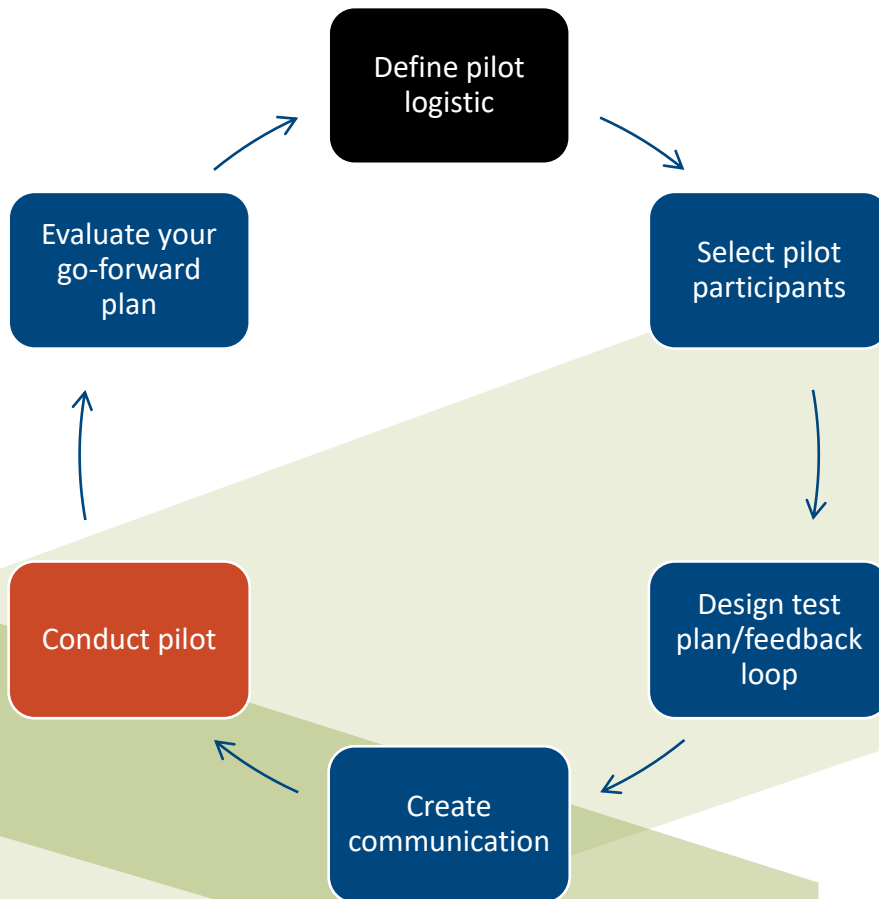
- Define Program:
 - Clearly articulate the scope and expectation
 - Drive active participation with explicit value messaging



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6 Steps for Implementing a Successful Pilot



• How to Manage Execution:

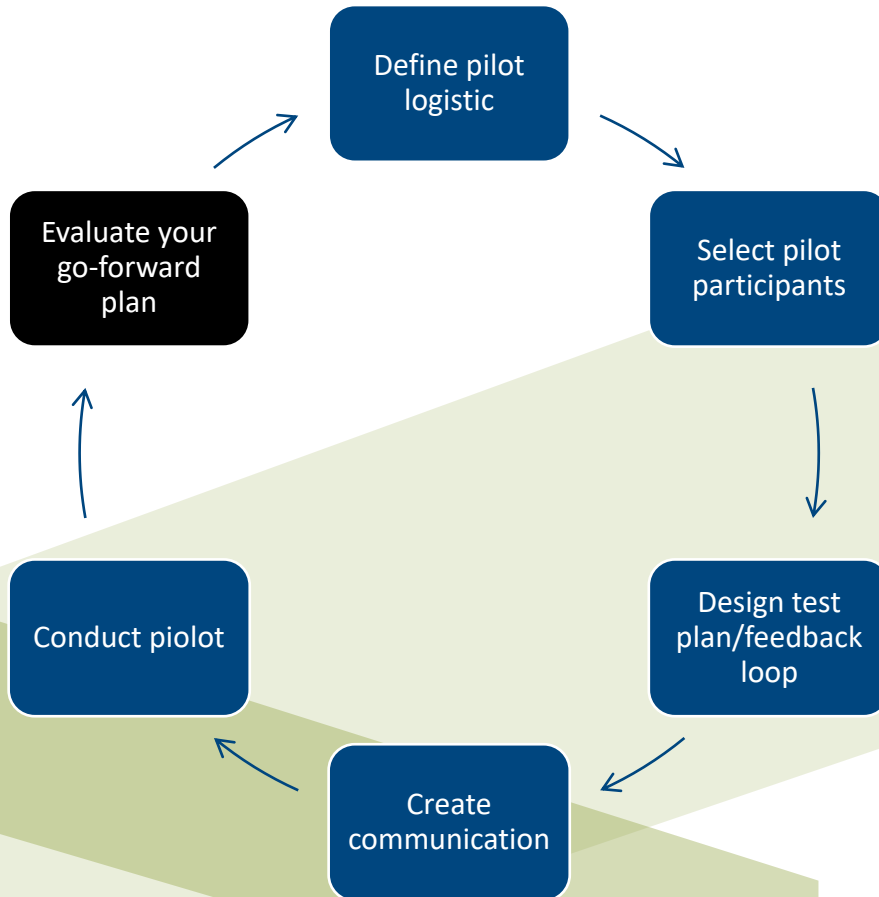
- Send communication
- Meet with project team weekly to:
 - Monitor usage +network health
 - Track feedback in a timely manner



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6 Steps for Implementing a Successful Pilot



- How to Evaluate:
 - Define stakeholders
 - Select use/case scenarios
 - Understand roadmap
 - Set goals and success criteria
 - Plan a timeline

Small Group Discussion



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Start a Pilot Program: HIV Awareness Program

- The proposed program is a public awareness program aimed directly at the marginalized/homeless/underserved community.
 - To improve public awareness and address negative stigma of the HIV/AIDS endemic among homeless/underserved community
 - To provide basic educational resources regarding causes, effects, modes of transmission, prevention, and treatment of HIV/AIDS
 - To empower the community to enable them to make more informed choices regarding their sexual health and life in general



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Discussion Questions

- How could you learn more about the needs of the marginalized/homeless/underserved population?
- Who could you collaborate with to implement this program and improve service?
- What challenges might you face in piloting a new program? Any ideas on overcoming these challenges?
- What else can we do to increase awareness?

15 Minute Discussion



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Discussion Debrief



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Conclusion

- Many opportunities to address the significant overlap between HIV and SUD risk
- Need to consider opportunities to improve public health services
- Piloting new programs offers additional flexibility for stakeholders to meet community needs



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Contact Us



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Prevention Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

a program managed by



THE DANYA INSTITUTE

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