

2017-2021

HOUSTON AREA COMPREHENSIVE HIV PREVENTION AND CARE SERVICES PLAN

STRATEGY 3: STRATEGY TO ADDRESS THE NEEDS OF SPECIAL POPULATIONS

DEFINITIONS

- **Youth** – People living with or at risk for HIV aged 13-24 years
- **Homeless** – People living with or at risk for HIV who lack a fixed, regular, and adequate nighttime residence, including those who live in locations not meant for human habitation such as public parks and streets, those who live in or are transitioning from temporary housing or shelters, and those who have persistent housing instability.
- **Incarcerated/Recently Released (I/RR)** – People living with or at-risk for HIV who are currently incarcerated in the jail or prison system or have been released from jail or prison within the past 12 months.
- **Injection Drug Users (IDU)** – People living with or at-risk for HIV who inject medications or drugs, including illegal drugs, hormones, and cosmetics/tattooing.
- **Men who have Sex with Men (MSM)** – People living with or at-risk for HIV who engage in male-to-male sexual practices and identify as gay or bisexual, those who engage in male-to-male sexual practices and do not identify as gay or bisexual, and those who engage in gay or bisexual male culture regardless of gender identity.
- **Transgender and Gender Non-conforming** – People living with or at-risk for HIV who cross or transcend culturally-defined categories of gender.
- **Women of Color** – People living with or at-risk for HIV who identify racially or ethnically as Black/African American, Hispanic/Latina, or multiracial women, regardless of sex at birth.
- **Aging** – People living with or at risk for HIV aged 50 years and older;

Note: All definitions were developed by participants using various source materials.

GOALS

1. Prevent new HIV infections among the special populations of youth, homeless, IRR from jail or prison, IDU, MSM, transgender and gender non-conforming, women of color, and aging
2. Reduce barriers to HIV prevention and care for the special populations of youth, homeless, IRR from jail or prison, IDU, MSM, transgender and gender non-conforming, women of color, and aging
3. Strengthen the cultural and linguistic competence of the HIV prevention and care system

SOLUTIONS

1. Evaluate HIV prevention and care system policies, procedures, and other structural components, and adjust to ensure that treatment is sufficient to meet the needs of all people living with or at risk for HIV.
2. Close gaps in targeted interventions and services to better meet the HIV prevention and care needs of special populations.
3. Improve data management systems to better reveal information on the HIV epidemiology, risks outcomes, and needs of historically under-sampled populations and support Data to Care.

ACTIVITIES (RESPONSIBLE PARTY, TIMELINE)

1. Assess and adjust Standards of Care and other relevant policies to ensure access to facilities and services for all people regardless of sexual orientation or gender identity (RWGA, TRG, and HHD; annually)

ACTIVITIES (RESPONSIBLE PARTY, TIMELINE)**CON'T**

2. Review and revise client satisfaction survey tool to measure provision of culturally and linguistically appropriate services (RWGA and TRG; 2018)
3. Educate providers serving special populations about routine HIV testing and PrEP, and promote inclusion of routine HIV testing and PrEP education in policies, procedures, and practices to facilitate linkage to care (HHD, CPG, and RWPC; annually)
4. Partner with SIRR to develop a process for tracking linkage for recently released PLWH (TRG and RWGA; 2019)
5. Explore feasibility of cooperation between RWGA and HCD to provide assisted living facility service aging PLWH (RWGA and RWPC; 2018)
6. Develop an HIV Care Continuum for each Special Population as possible, and disseminate to providers and the public as appropriate (RWPC and HHD; 2017, then include as needed in each epidemiologic profile)
7. Expand distribution of HIV testing and PrEP information and resources to healthcare providers (HHD and CPG; annually)
8. Coordinate a workgroup to develop and secure funding for public service announcements for each special population educating the community on the benefits of treatment as prevention (RWPC; 2020)
9. Compile HIPAA compliant best practices for using technology to communicate with consumers and incorporate into provider training (RWGA and TRG; 2017)
10. Evaluate the feasibility of establishing a site or sites with community partners for PLWH experiencing homelessness to safely store and access medications (RWPC and RWGA; 2018)
11. Provide training to DIS staff on data collection for transgender and other special population clients (HHD; annually)
12. Collaborate with City of Houston Housing and Community Development Department on development of a local Housing Unmet framework and local Housing Care Continuums, including special populations to the extent feasible (RWPC; 2018)
13. Explore additional Need Assessment activities (including utilization of local data systems) to assess causes of loss to care among special populations (RWPC and HHD; 2018)
14. Train surveillance staff to enhance data collection on transgender community (HHD; TBD pending changes in data systems to collected gender identity information)

BENCHMARKS

1. Reduce the number of new HIV infections diagnosed among each special population by 25%:
 - a. Youth (13-24) (360 to 128)
 - b. Homeless (54 to 41)
 - c. Incarcerated in Jail (Baseline to be developed)
 - d. Incarcerated in Prison (Baseline to be developed)
 - e. IDU (66 to 50)
 - f. MSM (930 to 744)
 - g. Transgender and Gender Non-conforming (Baseline to be developed)
 - h. Women of Color (Baseline to be developed)
 - i. Aging (50 and older) (264 to 198)

BENCHMARKS CON'T

2. Increase (or maintain) the proportion of newly-diagnosed individuals within each special population linked to clinical care within one month of their HIV diagnosis to 85%:
 - a. Youth (13-24) (from 74.0%)
 - b. Homeless (from 53.9%)
 - c. Recently released from in Jail (Baseline to be developed)
 - d. Recently released from Prison (Baseline to be developed)
 - e. IDU (from 85.0%)
 - f. MSM (from 78.0%)
 - g. Transgender and Gender Non-conforming (from 54.1%)
 - h. Women of Color (Baseline to be developed)
 - i. Aging (50 and older) (from 84.0%)
3. Decrease the proportion of PLWH with unmet need within each Special Population to 10%:
 - a. Youth (13-24) (from 24%)
 - b. Homeless (Baseline to be developed)
 - c. Recently released from Jail/Prison (Baseline to be developed)
 - d. IDU (from 27.0%)
 - e. MSM (from 25.0%)
 - f. Transgender and Gender Non-conforming (Baseline to be developed)
 - g. Women of Color (Baseline to be developed)
 - h. Aging (50 and older) (from 25.0%)
4. Track the percentage of grievances relating to cultural and linguistic competence received through the Ryan White grievance lines and the HHD prevention "warmline" and website (Track only)