

How can we Help



Identification, Linkage and Retention in Care of Adolescents with HIV

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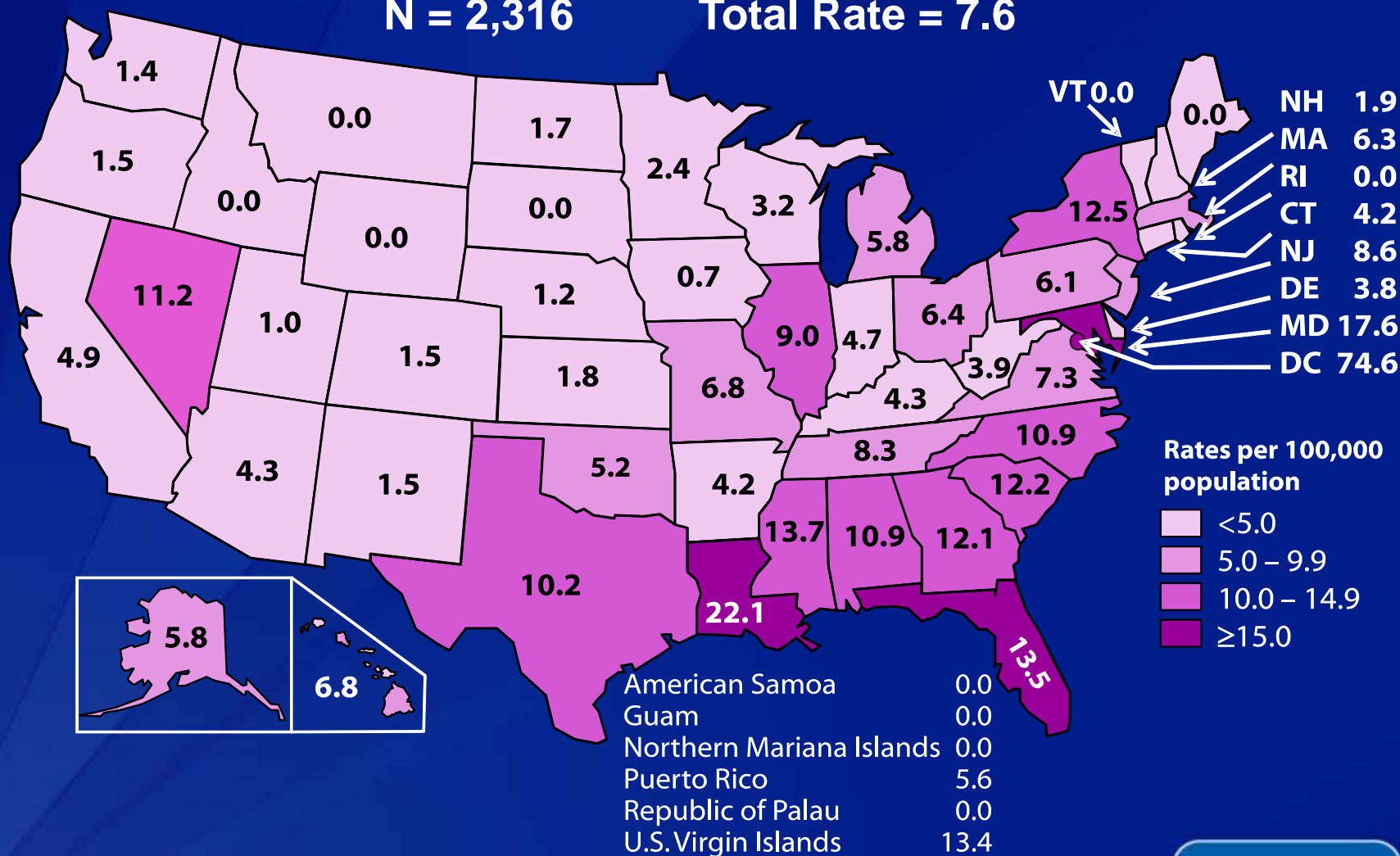
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Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years, 2011—United States and 6 Dependent Areas

N = 2,316

Total Rate = 7.6



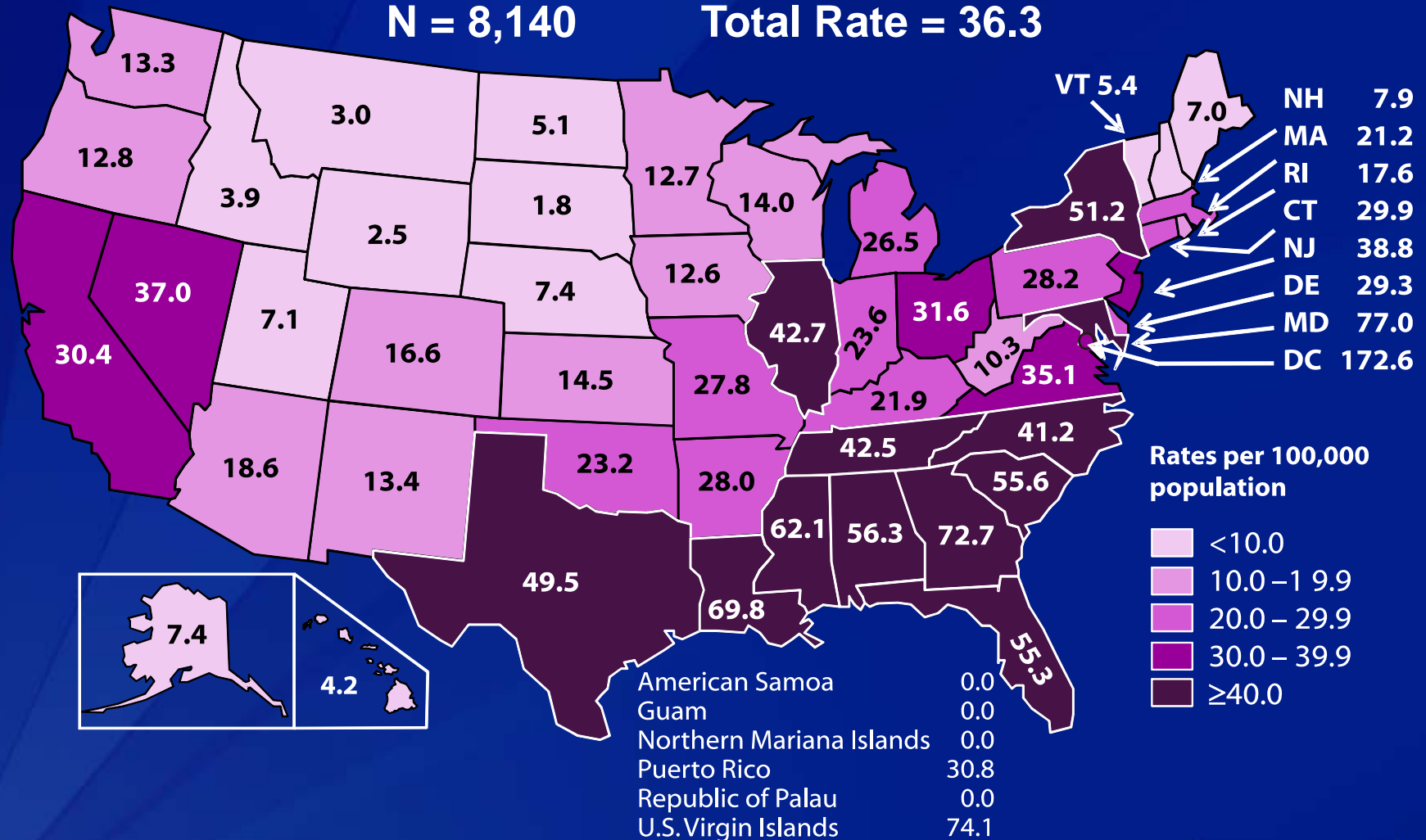
Note. Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. All displayed data have been statistically adjusted to account for reporting delays, but not for incomplete reporting.



Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2011—United States and 6 Dependent Areas

N = 8,140

Total Rate = 36.3

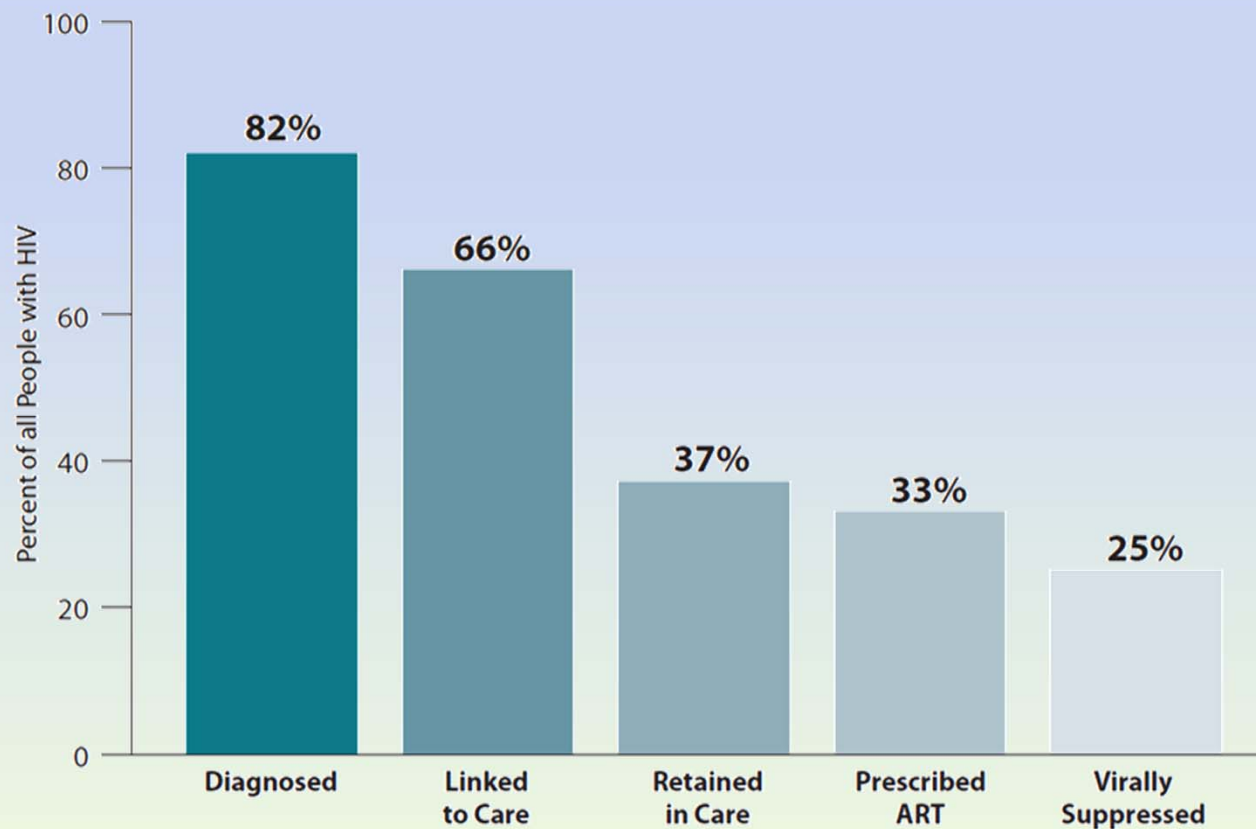


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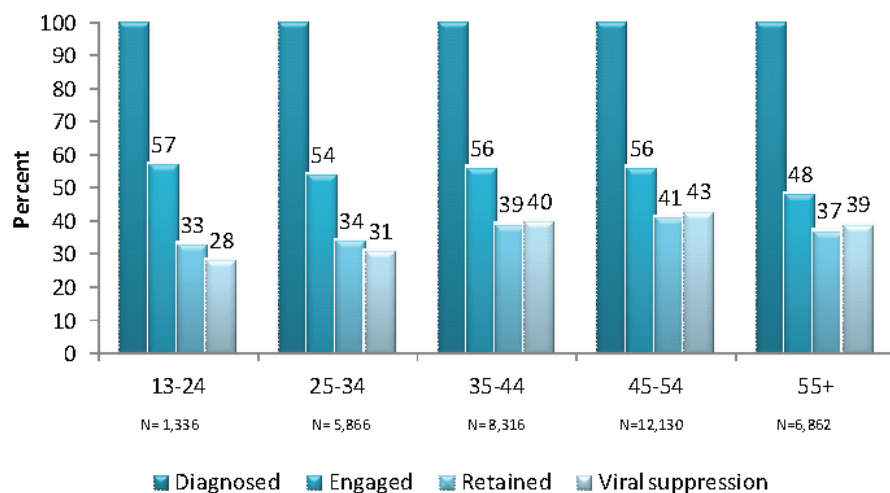
US HIV Treatment Cascade

Overall: of the 1.1 million Americans living with HIV, only 25% are virally suppressed

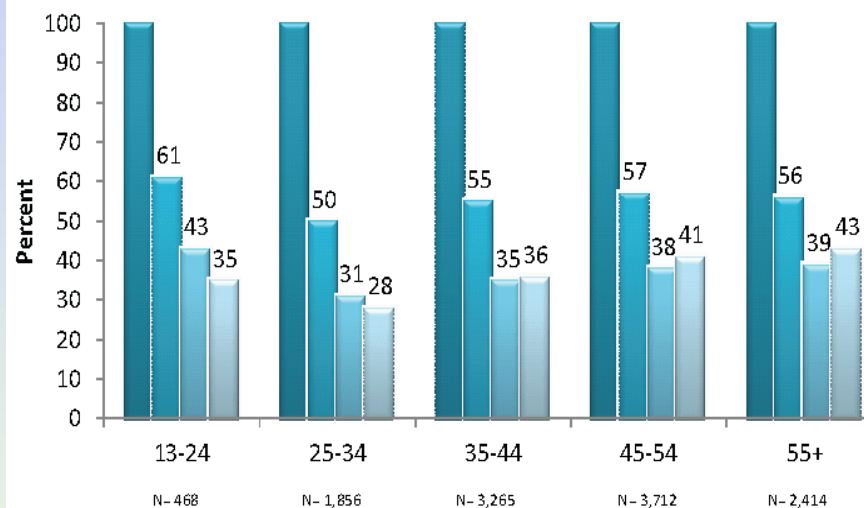


HIV Treatment Cascade in Georgia

**Adult and adolescent males living with HIV
by current age (years), Georgia 2012**



**Adult and adolescent females living with HIV
by current age (years), Georgia 2012**

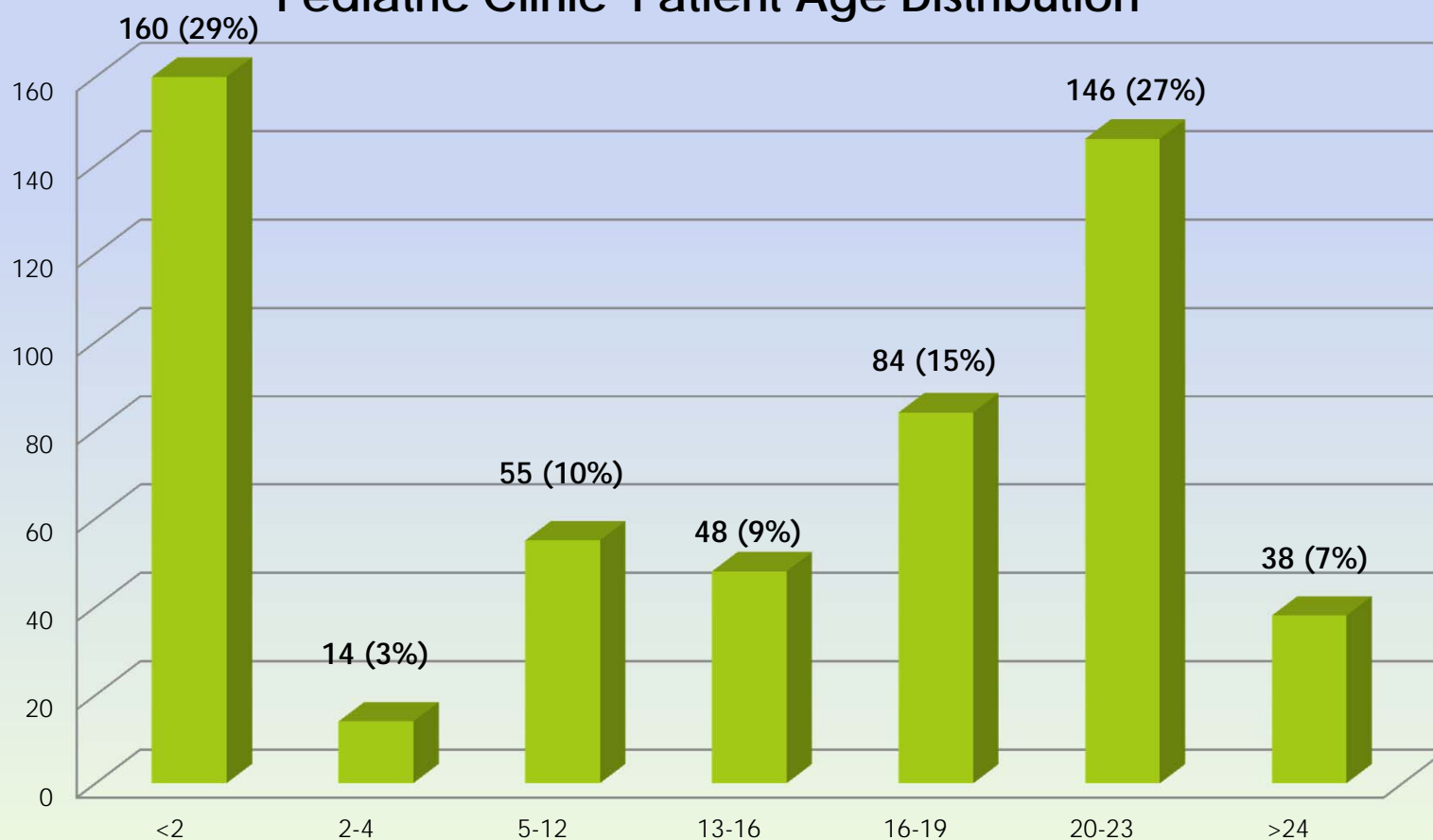


IDP Family & Youth Clinic

- Population we serve
 - Children, adolescent and young adults: 0-24 years of age
 - Perinatal HIV Exposure or HIV Infected
 - No insurance to Private insurance
 - Regardless of T-Cell count: **BIG DIFFERENCE FROM THE ADULT CLINIC**
- Multidisciplinary approach
 - Physician or Physician Assistant (3 pediatricians with HIV specialization, 2 PAs)
 - Primary Care/Specialized HIV management
 - Psychologist & Psychiatry
 - Social workers (3 medical social workers)
 - Nutrition (1 nutritionist)
 - Clinical Support Staff: Nurse Educator, Team Nurses

Ponce Family and Youth Clinic

Pediatric Clinic Patient Age Distribution

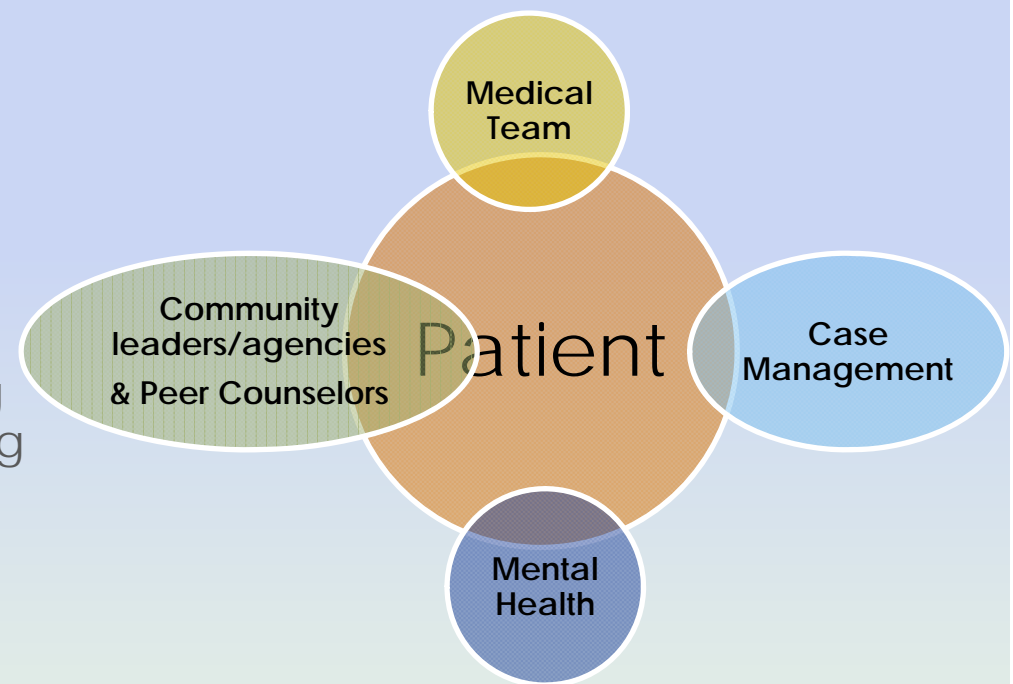


Antiretroviral Treatment and Access to Services (ARTAS)

- Linkage for newly diagnosed HIV+ individuals
- Linkage for those lost to follow up (out of care > 1 year)
- Once patient sees a medical provider, intervention ends

IDP-Pediatric Clinic Outreach effort

- **MACARTI Initiative**
 - High Risk Population
 - Non-Traditional Testing
 - Multidisciplinary approach
 - Intervention that specifically targets adolescents and young adults: Motivational Interviewing
 - 1 year follow-up to secure retention
- Serve as a bridge between different organizations and the IDP



MACARTI –Community partnerships

- Aids Healthcare Foundation
- AID Atlanta
- LGBTQ Unit of the Atlanta Police Department
- Covenant House Georgia
- Mercy Care Services
- Work in progress: DeKalb/Fulton Health Departments, Positive Impact, Georgia State, T-Gates Production

MACARTI Role

- Accompany organizations in testing events
 - Actual testing/Supporting Personnel
 - Starting Linkage process in the venue
 - One to one physician/social worker/nurse interactions in venues
- Coordinating referrals with partner organizations
 - Working with patients from the time of referral until effective enrollment into the clinic (Linkage)
- Follow-up of clients for 1 year to secure retention
 - Motivational Interviewing
 - Home visits if necessary

ARTAS-MACARTI Role



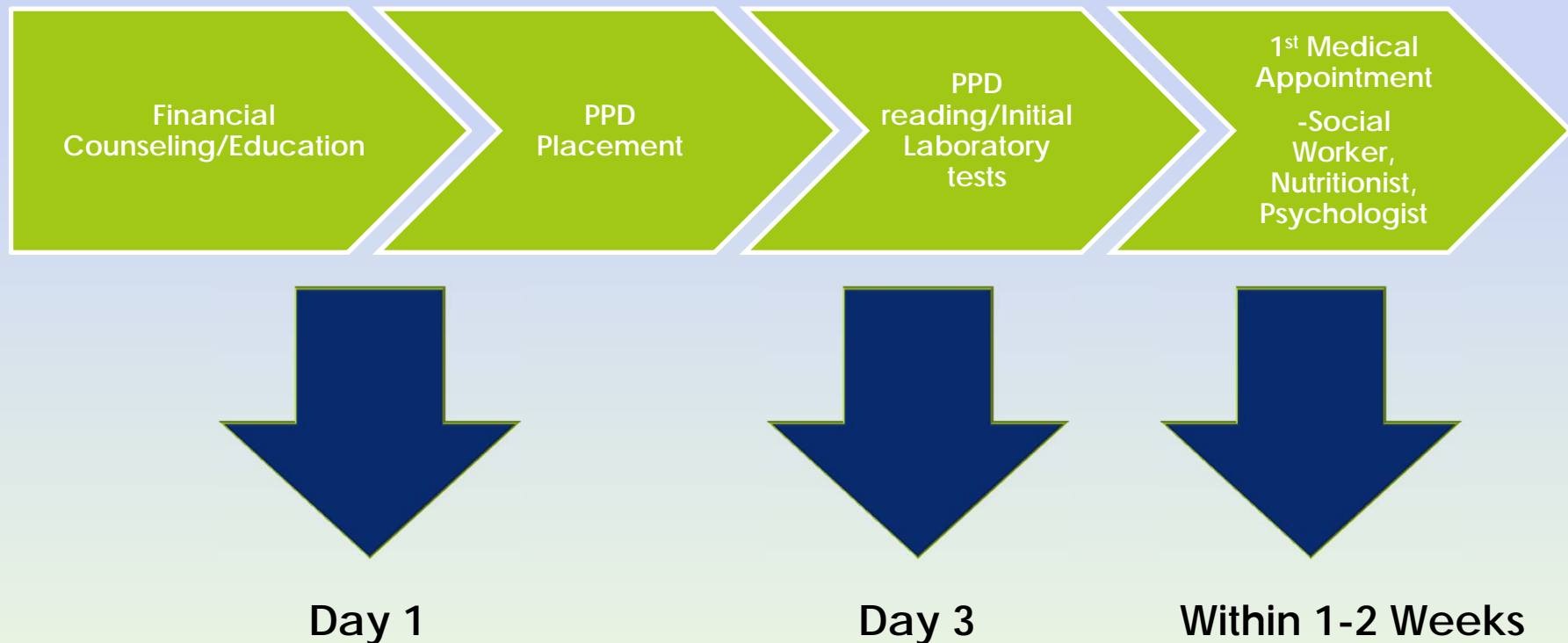
Supporting Each Other



Paperwork needed to enroll at Ponce Family and Youth Clinic

- Proof of Status: Documentation of positive HIV test (result from 2 rapid tests)
- Proof of Income: If no income, Income Verification Summary (Dept. of Labor)
- Proof of Residence: Lease, shelter letter, voter registration card, current utility bill, bank statement
- Current Georgia ID

Procedure and Time to First Medical Appointment



Increasing Capacity

- The IDP will hire an outreach social worker in the near future through the ARTAS program who will support outreach efforts linkage and retention.
- Increase retention efforts through specific programs
 - Use of technology: HealthySteps app
 - YAN Group
 - Peer Mentoring Program
 - Intensive social work and case management support