Nevada AIDS Education & Training Center (NAETC)

January 28, 2019

AETC Program

- HRSA-funded Ryan White program
  - Part A: Transitional Grant Areas (TGA), severely affected population centers (Clark County)
  - Part B: state funding, including ADAP and
  - Part C: Early Intervention Services (EIS) and ambulatory care services (clinical/treatment)
  - Part D: Women, children
  - **Part F:** AETCs, Dental, MAI, SPNS- innovative models of care delivery

AETC Program Overview

- The mission of the AETC Program is to increase the number of healthcare teams educated and motivated to care for individuals with HIV, increase access to care, thereby reducing HIV-related health disparities.

- This mission is obtained through provision of targeted, multidisciplinary education, training, and technical assistance to healthcare professionals

- Overall, the AETC Program is charged with expanding the number and ability of healthcare professionals and organizations to provide high quality HIV services to increase access to healthcare and decrease health disparities

AETC Program Overview

The AETC Program goals are to:

- <u>Increase the size and strengthen the skills of the current and novice HIV clinical workforce</u> in the United States.

- <u>Improve outcomes along the HIV care continuum</u>, including diagnosis, linkage to care, retention, and viral suppression, in alignment with the National HIV/AIDS Strategy, through training and technical assistance.

- Reduce HIV transmission and incidence of new infections by <u>improving access to biomedical and other prevention strategies through training and technical assistance.</u>

HRSA 19-035 – training levels

- **Didactic Presentations** have the training objective of changing knowledge, attitudes and skills. The learner listens to a lecture-type presentation and has the opportunity to ask questions. Examples might include plenary sessions at conferences, lectures, and "brown bag lunches."

- **Interactive Presentations** are online presentation that allow the learner to participate. They present choices or paths in response to a learner's action or request. The learner can learn different methods and outcomes utilizing different choices.

- **Communities of Practice** consist of a group of people who share knowledge to develop a shared practice. A community of practice may use different modalities or interventions to obtain a shared outcome.

- **Self-Study** seeks to increase knowledge through a training program that users can complete on their own time. These programs may include CD-ROMs/DVDs/Videos, Web-based materials, or print products.

- **Clinical Preceptorships** aim to change knowledge, attitudes, and clinical skills, and to increase the comfort and confidence of the trainee to make appropriate clinical decisions. The training takes place outside of a traditional classroom, and more likely in health care settings. They involve clinical observation of patient care, interaction with patients in care settings, and mini-residencies, in which trainees work alongside experienced providers and interact with patients in a clinical setting.
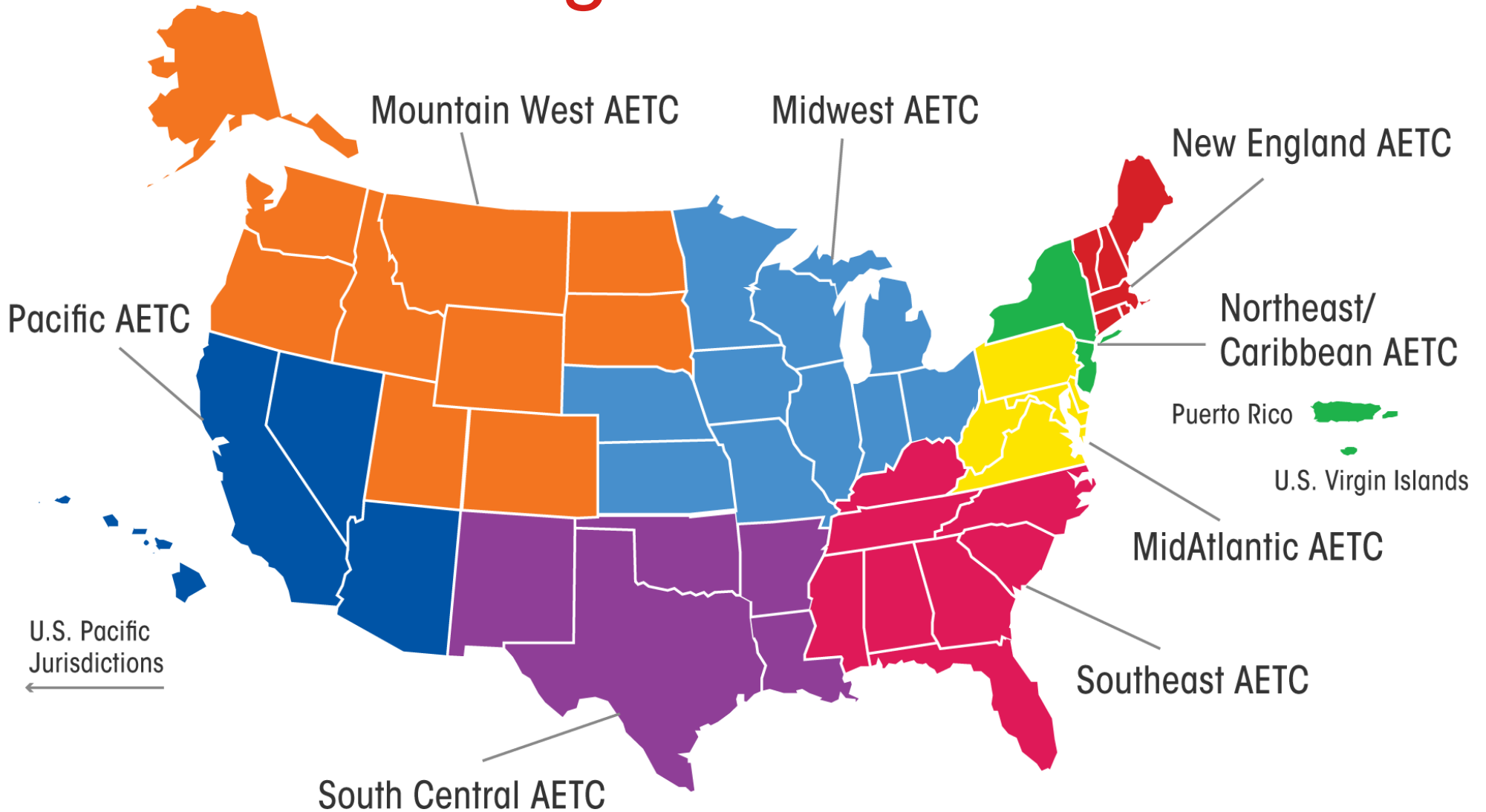
HRSA 19-035 – training levels

- **Clinical Consultations** are provider-driven and may occur with an individual or a group, both in person or at a distance through the use of telephone, e-mail, fax, or other remote communication technologies. Discussion of real-life cases is a key element of clinical consultation. Clinical consultations have three intended results:
  - To improve clinical problem solving;
  - To change the behavior of the provider in order for him/her to make better or more appropriate clinical care decisions; and
  - To impart the most up-to-date knowledge regarding specific HIV patient care.

- **Coaching for Organizational Capacity Building** aim to increase knowledge, attitudes, and clinical skills, in order to increase capacity across the organization.
- **Distance-based (Live)** is an event occurring by telephone or internet with one or more people actively participating in the event.
- **Distance-based (Archived)** is a training program that users can complete on their own time. These programs may include CD-ROMs/DVDs/Videos, Web-based materials, or print products.
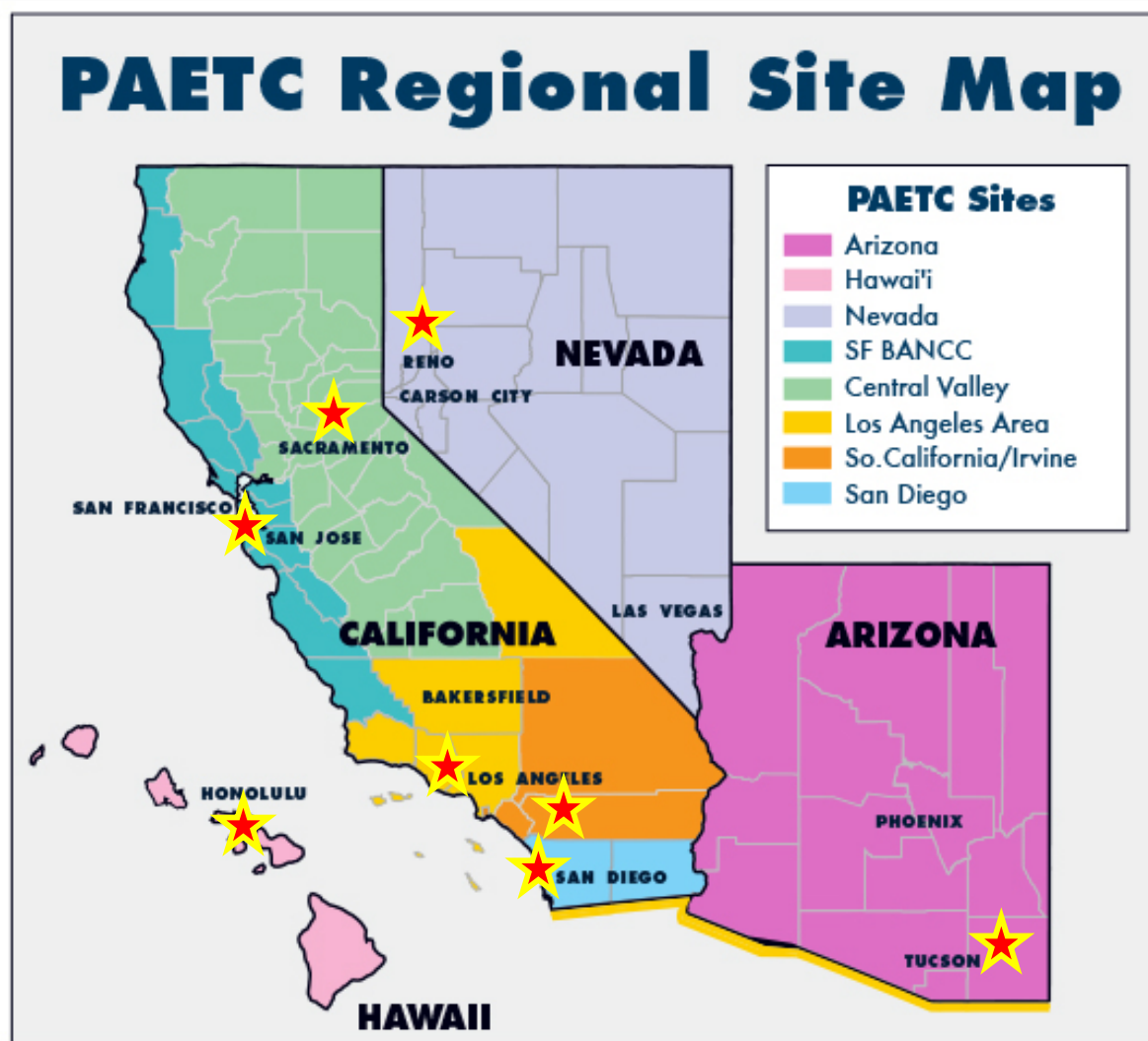
Nevada AETC

- Targeted Trainings
  - SOGI
  - PrEP/PEP
  - HIV Pharmacology
  - Hep C, STD, Substance use
  - Cultural sensitivity
  - By request/need

- Conferences:
  - RW Provider Summit
  - STD Update (LV and Reno)
  - ANAC
  - Autumn Update (annually, Lake Tahoe)

- Technical Assistance:
  - Practice Transformation (targeted QI)
  - IHPCP- report and monitoring workgroup
  - Getting to Zero (new!)

- Regionally
  - Clinical preceptorships
  - HIV Learning Network (telehealth education)
  - Regional trainings

Regional AETCs

PAETC Local Partners

PAETC Regional Site Map

PAETC Sites
- Arizona
- Hawai'i
- Nevada
- SF BANCC
- Central Valley
- Los Angeles Area
- So.California/Irvine
- San Diego

Overview of the PAETC Team

- **Central Office / UCSF**
- **Local Partners (8)**
  - **Arizona** / University of Arizona
  - **Hawai`i** / University of Hawai'i
  - **Nevada** / University of Nevada
  - California: **Bay Area North & Central Coast (BANCC)** / UCSF
  - California: **Central Valley** / UC Davis
  - California: **Los Angeles Area** / UCLA, USC, Charles Drew University
  - California: **Orange / Riverside / San Bernardino** / UC Irvine
  - California: **San Diego / Imperial** / UC San Diego

Nevada AETC

University of Nevada, Reno School of Medicine

https://med.unr.edu/naetc

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Learning Objectives

By the end of this training, participants will be able to:

- Describe the distinction between sexual identity, sexual orientation and sexual behavior.

- Define common terms used to describe sexual orientation and gender identity.

- Explain the importance of asking patients about sexual orientation and gender identity (SOGI).

- Identify at least two strategies health care organizations and providers can use to better meet the sexual health needs of their patients.

Group Agreements

- Stay engaged …with the experience and each other
    - Practice Digital Detox
    - Be present
- Make this a possibility zone …stay open to new perspectives and experience
- Stretch yourself …practice vulnerability and get out of your comfort zone
- Understand trainers may need to put some questions in the parking lot and come back to them later, either in the interest of time or that we will come back to the topic later in the training
- Believe and demonstrate you are an AWESOME group of participants!

Introductions
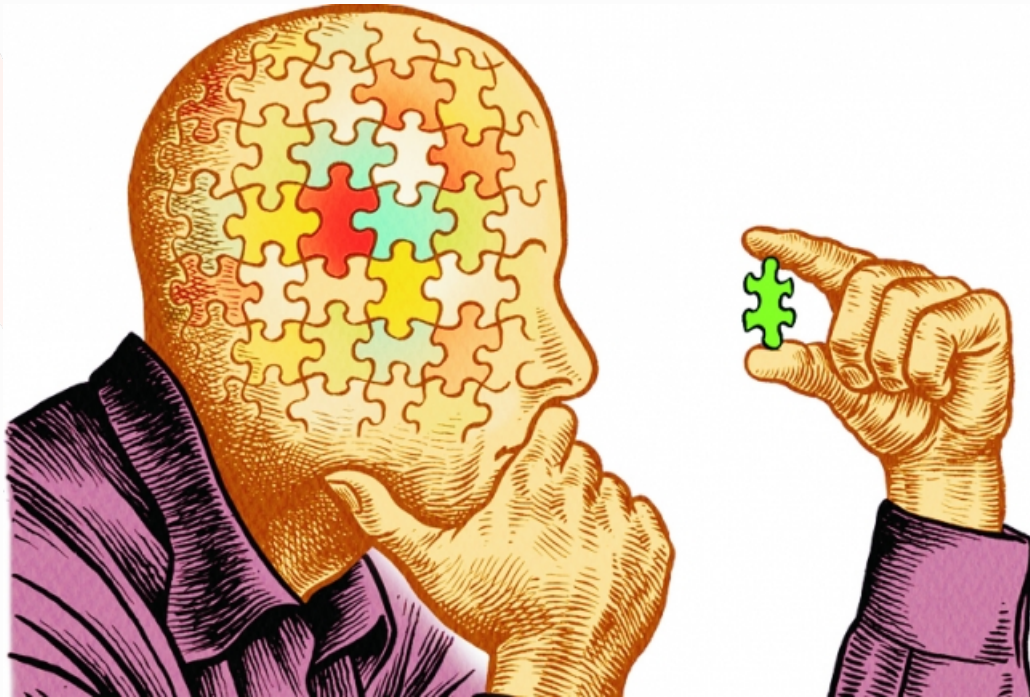
1. Name
2. Role
3. Describe your experience collecting SOGI data?

Why SOGI?

When was the last time your provider asked you about your sexual health?

- At every visit

- During annual exam

- During intake appointment

- Only through a form or patient portal

- Hasn't come up

How did you feel when we asked you about your sexual orientation and gender identity when registering for this training?

We collect the following information solely for the purpose of facilitating the on-line registration process for our events. This information is not stored with or connected to your unique PIF ID.

Email: [_____] * required

Save Info: ☐ (Save your contact information to ease future registrations.)

First Name: [_____] * required

Last Name: [_____] * required

Degree: [_____]

Title: [_____] * required

Organization: [_____] * required

Address: [_____] * required

City: [_____] * required

State: [____] * required

Zip Code: [_____] * required format(xxxxx-xxxx)

Phone: [_____] * required format(xxx-xxx-xxxx)

Phone 2: [_____] format(xxx-xxx-xxxx)

Discipline:

○ Physician	○ Social Worker	○ Grants Manager	○ Dentist
○ Physician Assistant	○ Case Manager	○ Project Manager	○ Other Dental Professional
○ Nurse	○ Mental Health Provider	○ Non Health Discipline	○ Nurse Practitioner
○ Nurse Midwife	○ Substance Abuse Professional	○ Other	○ Advanced Practice Nurse
○ Pharmacist	○ Health/HIV Educator	[_____]	

Sex assigned at Birth   ○ Male   ○ Female   ○ Decline to state

Current Gender Identity   ○ Male   ○ Female   ○ Transgender - Transwoman   ○ Transgender - Transman   ○ Unknown   ○ Other gender identity (specify) [_____]

Sexual Orientation   ○ Gay   ○ Lesbian   ○ Bisexual   ○ Heterosexual   ○ Other   ○ Decline to Answer
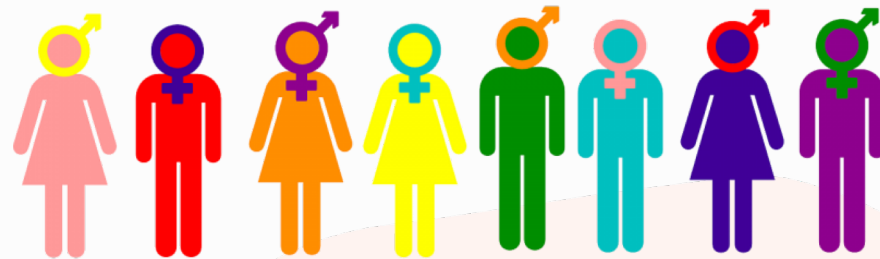
Ethnicity [_____]

[Continue]

Gender Identity Sample Questions

- Two Question Approach - Part 1

  Sex were you assigned at birth: **What sex was listed on your birth certificate?**
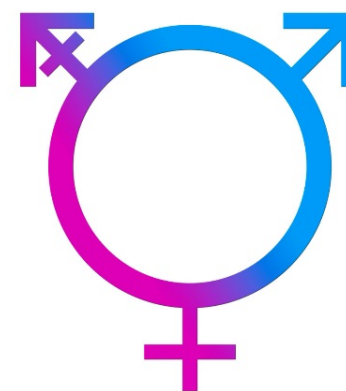
  - ❑ male
  - ❑ female

  Note:

  - In rare cases, a person may be listed as intersex on their birth certificate, but this is not one of the categories reported to the Health Resources and Services Administration.
  - Other is not reported back to HRSA

Gender Identity Sample Questions

Two Question Approach- Part 2

Gender Identity: **Do you identify as male; female; transgender male/ female-to-male; transgender female/ male-to-female; other; choose not to disclose?**

- ❑ male
- ❑ female
- ❑ female-to-male (FTM)/transgender male/ trans man
- ❑ male-to-female/ transgender female/ trans woman
- ❑ other
- ❑ don't know
- ❑ choose not to disclose

Sexual Orientation Sample Questions

Sexual Orientation: What is your sexual orientation?

(Possible prompt: who are you attracted to?)

❑ straight or heterosexual

❑ lesbian, gay, or homosexual

❑ bisexual

❑ other

❑ don't know

❑ choose not to disclose

Why is asking your patients about sexual orientation and gender identity (SOGI) important?

Uniform Data System 2016

II. APPROVED CHANGES FOR CY 2016 UDS REPORTING

A. SEXUAL ORIENTATION AND GENDER IDENTITY (SO/GI) – TABLES 3A, 3B

Sexual orientation and gender identity are reported on Table 3A, 3B.

Rationale: Improving the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services is a priority of the Health Center Program. Sexual orientation and gender identity can play a significant role in determining health outcomes. Gaining a better understanding of populations served by health centers, including sexual orientation and gender identity, promotes culturally competent care delivery and contributes to reducing health disparities overall. In addition, adopting sexual orientation and gender identity (SO/GI) data collection in the UDS aligns with the 2015 Edition Health Information Technology (Health IT) Certification Criteria, 2015 Edition Base Electronic Health Record (EHR) Definition, and the Office of the National Coordinator for Health Information Technology (ONC) Health IT Certification Program. Alignment of UDS SOGI data elements with ONC certification criteria also reduces overall health center reporting burden.
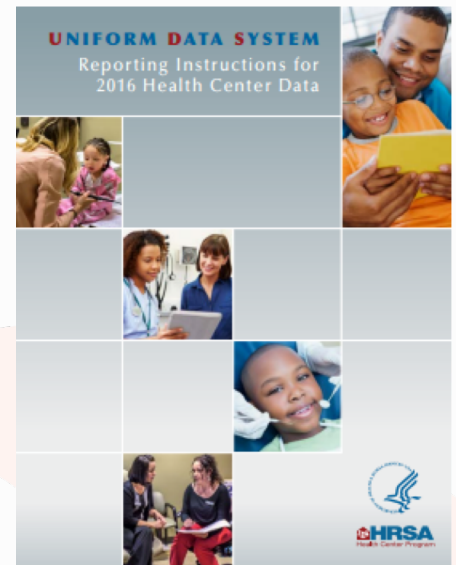
UDS Report of Gender

- Effective with the UDS report for 2016, health centers will report patient's *sex at birth* on Table 3A

- *Excerpted from UDS Table 3A*

LINE	AGE GROUPS	MALE PATIENTS (a)	FEMALE PATIENTS (b)
1	Under age 1		
2	Age 1		
3	Age 2		
4	Age 3		
5	Age 4		
6	Age 5		
7	Age 6		

# UDS Report of Gender Identity and Sexual Orientation

- Table 3B: Demographic Characteristics
- Health centers are to report sexual orientation and gender identity information about the population served

Line	Patients by Sexual Orientation	Number (a)
13.	Lesbian or Gay	
14.	Straight (not lesbian or gay)	
15.	Bisexual	
16.	Something else	
17.	Don't know	
18.	Choose not to disclose	
19.	Total Patients (sum lines 13 to 18)	

Line	Patients by Gender Identity	Number (a)
20.	Male	
21.	Female	
22.	Transgender Male/ Female-to-Male	
23.	Transgender Female/ Male-to-Female	
24.	Other	
25.	Choose not to disclose	
26.	Total Patients (sum lines 20 to 25)	
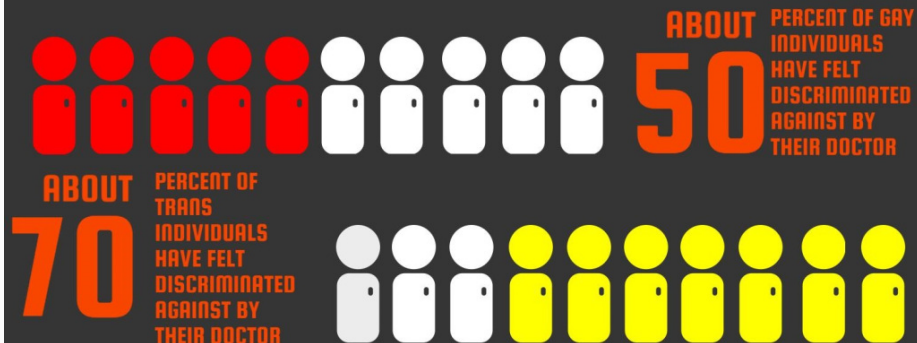
SOGI Data Importance

- If you are not counted, you are discounted
- Data collection allows us to tell the LGBT story
- Creates safe spaces and affirms the LGBT Community
- Identifies disparities
- Secures funding
- Informs public policies and laws
- Evaluation
- Ethical Responsibility and Legal Compliance

DATA

LGBT Health Disparities

- LGBT health requires specific attention from health care and public health professionals to address a number of disparities, including:

- LGBT youth are 2 to 3 times more likely to attempt suicide.

- LGBT youth are more likely to be homeless.

- Lesbians are less likely to get preventive services for cancer.

- Gay men are at higher risk of HIV and other STDs, especially among communities of color.

US Department of Health and Human Services. Healthy People 2020. [Internet]. Available from: https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health

LGBT Health Disparities

- Lesbians and bisexual females are more likely to be overweight or obese.

- Transgender individuals have a high prevalence of HIV/STDs, victimization, mental health issues, and suicide and are less likely to have health insurance than heterosexual or LGB individuals.

- Elderly LGBT individuals face additional barriers to health because of isolation and a lack of social services and culturally competent providers.

- LGBT populations have the highest rates of tobacco, alcohol, and other drug use.

US Department of Health and Human Services. Healthy People 2020. [Internet]. Available from: https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health

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LGB/TGNC Youth Disparities

➢ 2-3x more likely to commit suicide

➢ 3x more likely to use illegal drugs

➢ 4 in 10 say their community is not accepting of LGB/TGNC people

➢ 26% of youth say biggest problems are family acceptance, trouble at school/bullying and fear to be out/open

➢ Studies indicate that between 25% and 50% of homeless LGBT youth are on the streets because of their sexual orientation or gender identity

http://www.pflagnyc.org/safeschools/statistics;
http://www.mjja.org/images/training/conferences/2016/spring/presentations/LGBT-bringing-the-experience-to-life.pdf;
http://dragitout.org/facts

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Drivers of LGBT Disparities

Eileen Blass/for Kaiser Health News

- Anti LGBT Bias and Discrimination
- Lack of Cultural Awareness
- Lack of Insurance
- LGBT Health Disparities
- Homeless-ness
- Lack of Legal Recognition
- Structural Discrimination
- Poverty
- Mental Health

https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health

Policy Drivers of Social Change

- Uniform Data System 2016

- Institute of Medicine report on LGBT health

- Healthy People 2020

- HHS LGBT Data Progression Plan

- LGBT data collection in health IT

Image: https://www.russellsage.org/research/social-economic-and-political-effects-affordable-care-act

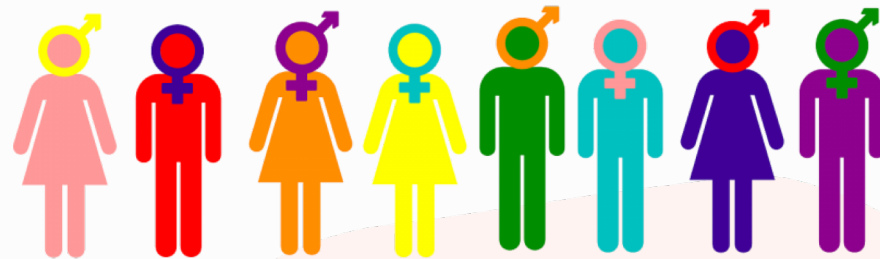## "To Treat Me, You Have to Know Who I Am"

Gender Identity Sample Questions

- Two Question Approach - Part 1

  Sex were you assigned at birth: **What sex was listed on your birth certificate?**
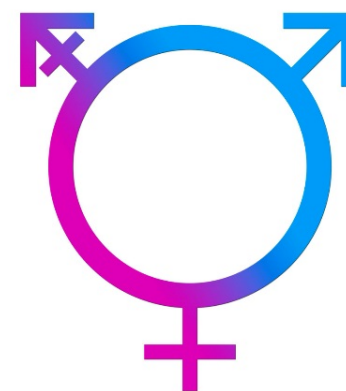 - ❑ male
  - ❑ female

  Note:
  - In rare cases, a person may be listed as intersex on their birth certificate, but this is not one of the categories reported to the Health Resources and Services Administration.
  - Other is not reported back to HRSA

Gender Identity Sample Questions

Two Question Approach- Part 2

Gender Identity: **Do you identify as male; female; transgender male/ female-to-male; transgender female/ male-to-female; other; choose not to disclose?**

- ☐ male
- ☐ female
- ☐ female-to-male (FTM)/transgender male/ trans man
- ☐ male-to-female/ transgender female/ trans woman
- ☐ other
- ☐ don't know
- ☐ choose not to disclose

Sexual Orientation Sample Questions

- Sexual Orientation: What is your sexual orientation?
- *(Possible prompt: who are you attracted to?)*

❑straight or heterosexual

❑lesbian, gay, or homosexual

❑bisexual

❑other

❑don't know

❑choose not to disclose

http://www.trainingtoserve.org/sites/default/files/images/Sensitive%20History.pdf

Asking SOGI Questions- Video 1

Asking SOGI Questions- Video 2
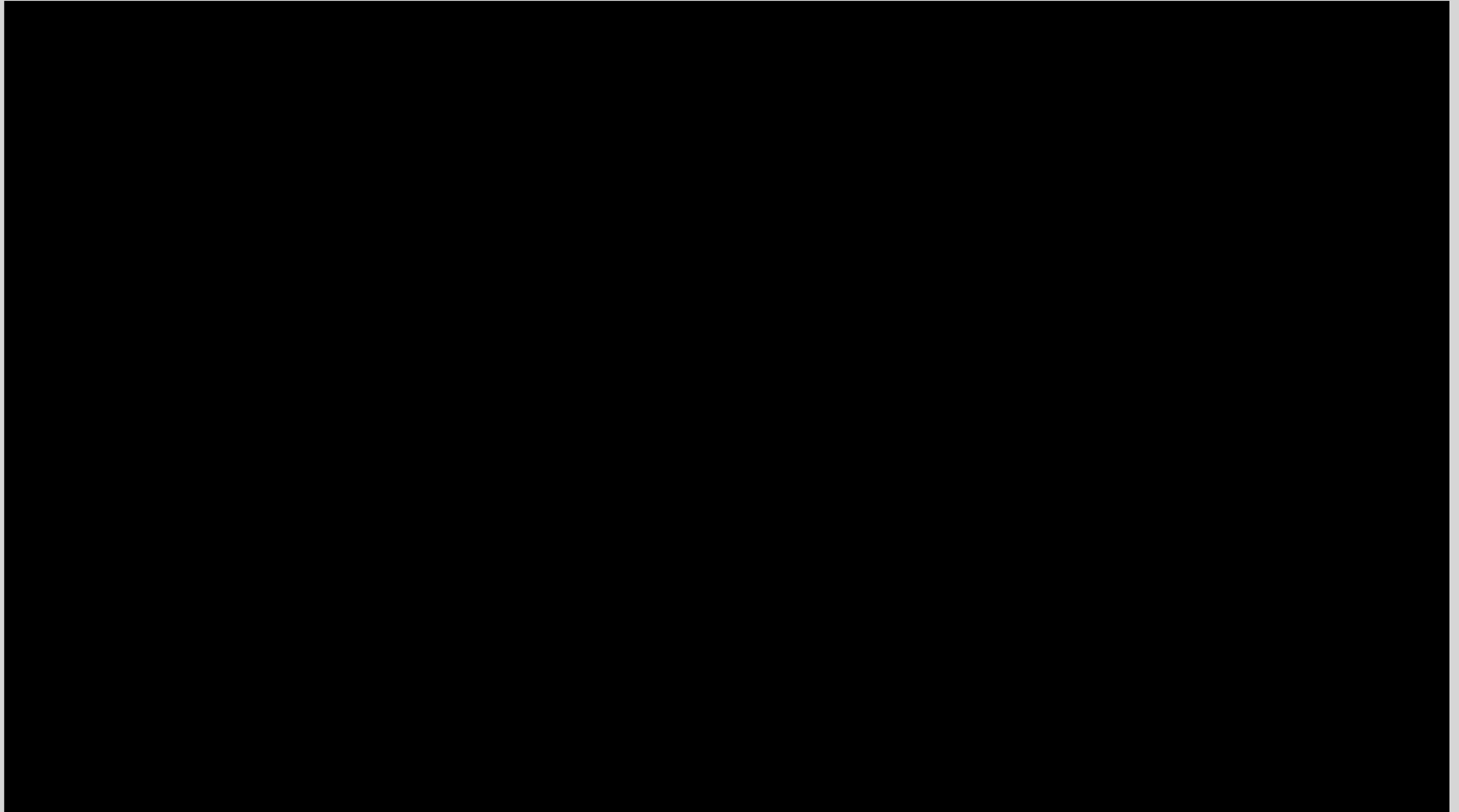
Concepts & terminology

Sex, Gender & Sexuality
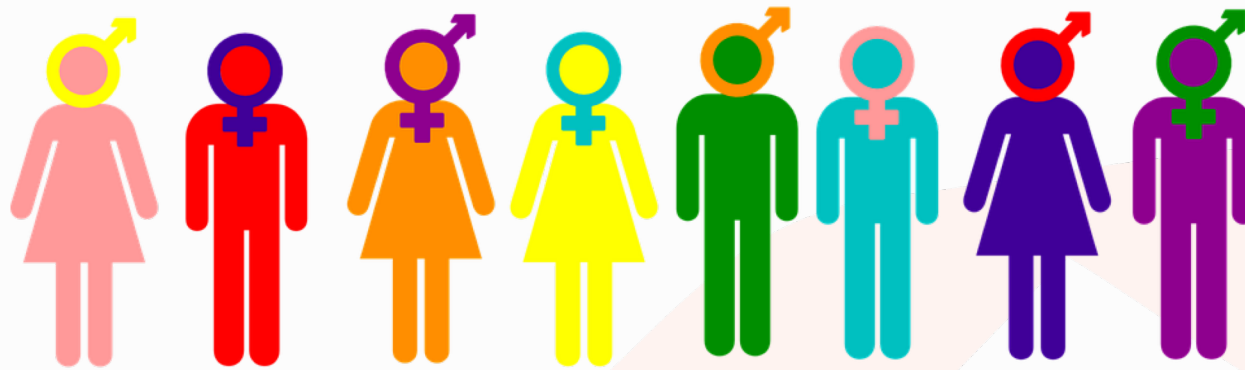
Green, E.R. & Maurer, L.M. (2015). The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, & Building Skills. Ithaca, NY: Planned Parenthood of the Southern Finger Lakes: Out for Health. ISBN: 978-0-9966783-0-8. www.teachingtransgender.com.

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"Gender Identity: Being Female, Male, Transgender or Genderfluid"

BEING FEMALE, MALE, TRANSGENDER OR FLUID

Review of Terms

- **Biological Sex**
  - A person's combination of genitals, chromosomes and hormones, usually categorized as "male" or "female" based on visual inspection of genitals via ultrasound or at birth

- **Gender Identity**
  - A person's deep-seated, internal sense of who they are as a gendered being—specifically, the gender with which they identify themselves

Green, E.R. & Maurer, L.M. (2015). The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, & Building Skills. Ithaca, NY: Planned Parenthood of the Southern Finger Lakes: Out for Health. ISBN: 978-0-9966783-0-8. www.teachingtransgender.com.

MIND THE GAP

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Review of Terms

- ## Cisgender or "cis" *(pronounced /sis-gender/)*
  - ### Adjective to describe a person whose gender identity "matches" the biological sex they were assigned at birth

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Review of Terms

- **Transgender**
  - Adjective used to describe a person whose gender identity does not "match" the biological sex they were assigned at birth
  - *"Transgender" serves an umbrella term to refer to the full range and diversity of identities within transgender communities*
  - *Currently the most widely used and recognized term*

Green, E.R. & Maurer, L.M. (2015). The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, & Building Skills. Ithaca, NY: Planned Parenthood of the Southern Finger Lakes: Out for Health. ISBN: 978-0-9966783-0-8. www.teachingtransgender.com.

GENDER IDENTITY/
SEXUAL ORIENTATION CONTINUA

BIOLOGICAL SEX

Male   Intersex   Female

GENDER IDENTITY

Man/Boy   Transgender/Genderqueer   Woman/girl
Two-spirited/etc.

GENDER EXPRESSION

Masculine   Androgynous   Feminine

SEXUAL ORIENTATION

Attracted to women   Attracted to all/both/none   Attracted to men

Image from The Gender Book (Mays and Hill)
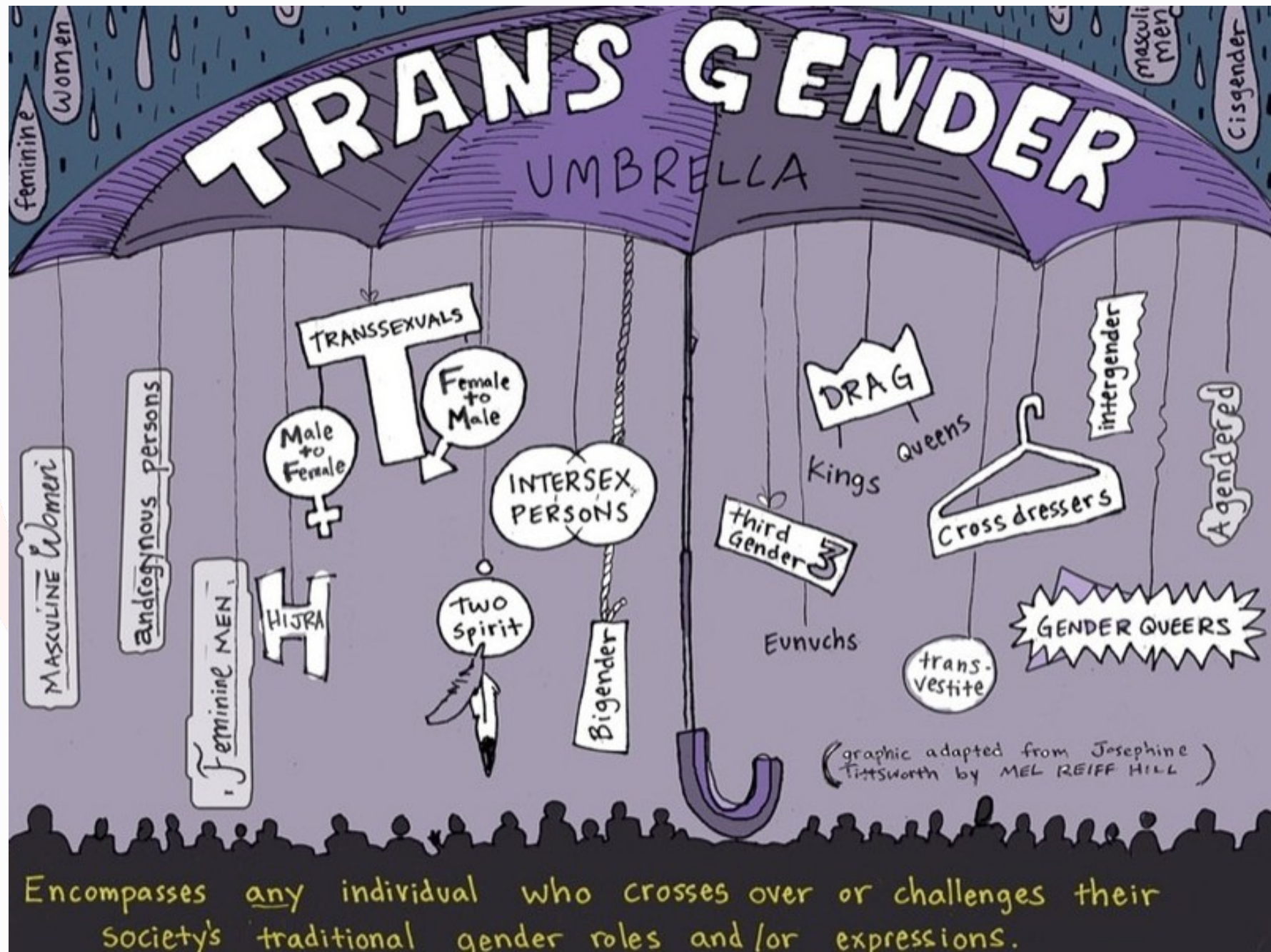
Review of Terms

- ## Gender Non-Conforming

  - ### A person whose gender expression is perceived as being inconsistent with cultural norms expected for that gender

  - ### *Specifically, boys/men are not masculine enough or are feminine, while girls/women are not feminine enough or are masculine*

Green, E.R. & Maurer, L.M. (2015). The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, & Building Skills. Ithaca, NY: Planned Parenthood of the Southern Finger Lakes: Out for Health. ISBN: 978-0-9966783-0-8. www.teachingtransgender.com.

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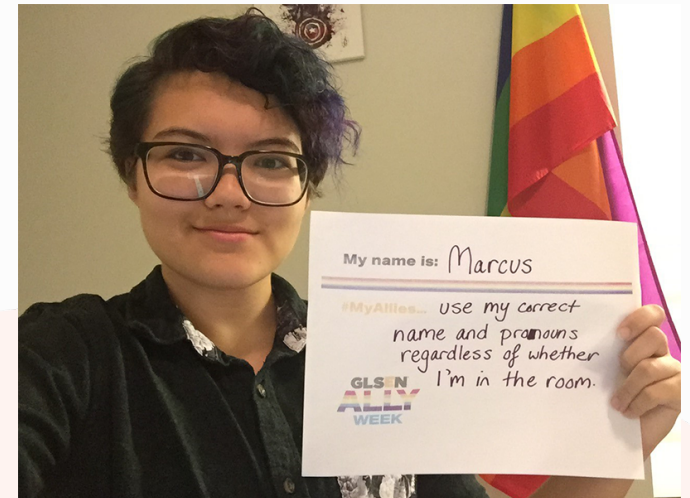
Review of Terms

- ## Gender Non-Conforming

  - *Not all transgender people are gender non-conforming, and not all gender non-conforming people identify as transgender*

  - *Cisgender people may also be gender non-conforming*

  - *Gender non-conformity is often inaccurately confused with sexual orientation*

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Photo Credit: https://www.glsen.org/author/all?page=4

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Review of Terms

- **Sexual Orientation**
  - A person's feelings of attraction (emotional, psychological, physical, and/or sexual) towards other people
  - *A person may be attracted to people of the same sex, to those of the opposite sex, to those of both sexes, or without reference to sex or gender*
  - *Some people do not experience primary sexual attraction, and may identify as asexual*

Green, E.R. & Maurer, L.M. (2015). The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, & Building Skills. Ithaca, NY: Planned Parenthood of the Southern Finger Lakes: Out for Health. ISBN: 978-0-9966783-0-8. www.teachingtransgender.com.

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Review of Terms

- *Sexual orientation is about attraction to other people (external), while gender identity is a deep-seated sense of self (internal)*

- *All people have a sexual orientation that is separate from their biological sex, gender identity and gender expression*

Green, E.R. & Maurer, L.M. (2015). The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, & Building Skills. Ithaca, NY: Planned Parenthood of the Southern Finger Lakes: Out for Health. ISBN: 978-0-9966783-0-8. www.teachingtransgender.com.

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Thank you!

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