

# SNAP ETAP

Status Neutral Approach to Improve HIV Prevention and Health Outcomes for Racial and Ethnic Minorities Initiative

## PROJECT FACT SHEET



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#### Project Period:

9/1/2023 – 8/31/2026

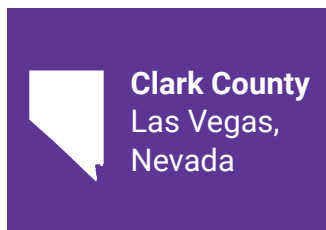
## Project Overview

The Status Neutral Approach to Improve HIV Prevention and Health Outcomes for Racial and Ethnic Minorities Initiative, funded by the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) through the Secretary's Minority HIV/AIDS Fund (MHAF), aims to advance the development, implementation, evaluation, and dissemination of whole-person approaches to reduce disparities, prevent new HIV diagnoses, and improve health outcomes for communities disproportionately affected by HIV and related syndemics. **Whole-person approaches** to HIV prevention and care emphasize comprehensive and high-quality care to engage and retain people in services. A whole-person approach continually addresses the healthcare and social service needs of all people who can benefit from HIV prevention and care services so that they can achieve and maintain optimal health and well-being.

The Status Neutral Approach (SNAP) Evaluation and Technical Assistance Provider (ETAP) team is supporting each funded jurisdiction to develop, implement, and evaluate a whole-person approach that:

- Creates "one door" for both HIV prevention and treatment services.
- Addresses institutionalized HIV stigma by integrating HIV prevention and care.
- Makes HIV testing, linkage to medical care and prevention services, and testing for other medical conditions such as sexually transmitted infections (STIs) and hepatitis C virus (HCV) more accessible and routine.

*The Ryan White HIV/AIDS Program (RWHAP) Part A jurisdictions funded for the initiative are:*



JSI is working in partnership with HRSA HAB, National Association of City and County Health Officials (NACCHO), HealthDataViz (HDV), and the Centers for Disease Control and Prevention (CDC).

## Person-Centered Care

Our whole-person approach is grounded in JSI's Person-Centered Care (PCC) framework to identify, prioritize, and tailor evaluation and technical assistance (TA) activities at the system, service delivery, and client levels, and across the six PCC domains of:

- Leadership and governance
- Workforce environment and development
- Monitoring, learning, and accountability
- Policy and financing
- Service design and delivery
- Point of care access and experience

The PCC framework complements a whole-person approach as it places the individual at the center; accounts for different perspectives on healthcare and wellness; supports a trauma-informed lens; and engages all stakeholders as active contributors to health systems, services, and experiences.

## Project Activities & Services



### Multi-site Evaluation

- Conduct participatory, mixed methods multi-site evaluation to produce and share real-world knowledge of how to successfully implement whole-person approaches in RWHAP Part A jurisdictions
- Develop data collection tools at the site, provider, and client level
- Create interactive data dashboards with HDV
- Develop site-specific evaluation plans
- Analyze and synthesize data to improve program planning and contribute to best practices
- Share evaluation results with sites and HRSA HAB



### Technical Assistance

- Develop a comprehensive landscape analysis report
- Develop site-specific TA plans
- Implement the TA plans, including convening cross-site stakeholder engagement sessions and developing TA resources
- Conduct monthly site partner calls and bi-monthly cross-initiative meetings to facilitate peer learning
- Ensure systems are in place to sustain whole-person services



### Dissemination

- Develop and maintain a web portal and data repository to host evaluation data and TA resources
- Disseminate TA materials, case studies, and key project findings nationally
- Disseminate best practices and lessons learned to increase uptake, replication, and expansion of whole-person approaches
- Post TA resources and tools on [TargetHIV.org](https://TargetHIV.org) and [snapetap.jsi.com](https://snapetap.jsi.com)

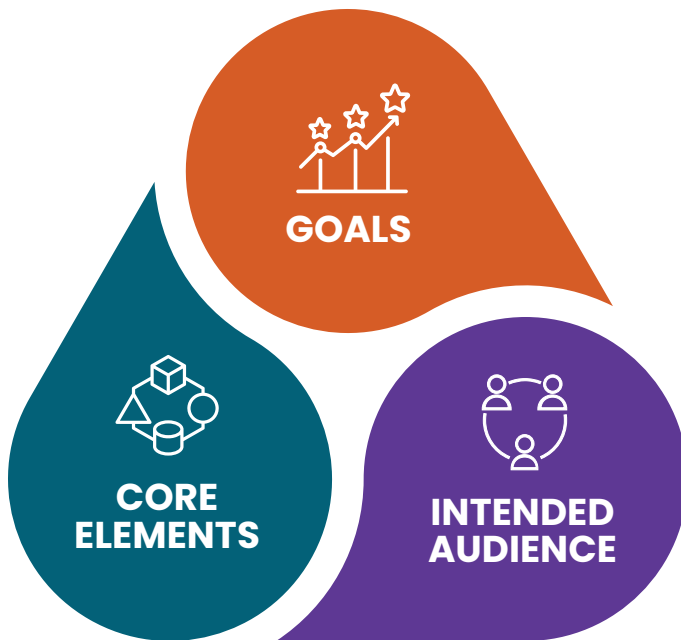




## WHOLE-PERSON APPROACHES TO HIV PREVENTION AND CARE



Launched in September 2023, the Status Neutral Approach (SNAP) Evaluation and Technical Assistance Provider (ETAP) initiative aims to advance the development, implementation, evaluation, and dissemination of whole-person approaches to reduce disparities, prevent new HIV diagnoses, and improve health outcomes for communities disproportionately affected by HIV and related syndemics.



### Goals

- Eliminate stigma
- Make services more accessible
- Help people achieve optimal health and well-being
- Efficiency in service delivery
- Greater health equity

### Core Elements

- Offer whole-person, holistic services
- Provide prevention, care, and treatment services regardless of HIV status

### Intended Audience

- All people who can benefit from HIV prevention and care services

### What is a whole-person approach?

A whole-person approach to HIV prevention and care, is a comprehensive system of prevention that includes all people who can benefit from HIV prevention and care services, regardless of

their HIV status. Originally called a status neutral approach, a whole-person approach continually addresses the healthcare and social service needs of all people affected by HIV so that they can achieve and maintain optimal health and well-being.

### Social Determinants of Health & a Whole-Person Approach

Social determinants of health affect the risk of acquiring HIV. A whole-person approach aims to provide “comprehensive support and care to address the social determinants of health that create disparities, especially as they relate to HIV.” Whole-person approaches recognize the influence of social determinants of health and prioritize innovative, person-focused care to address not only HIV prevention and treatment, but also to address all barriers to staying healthy. Ultimately, whole-person approaches promote health equity by putting client needs above HIV status to improve care and minimize stigma.

## Implementation Site Profiles



### **Bexar County** **San Antonio, TX**

The Bexar All-Inclusive model of care aims to enhance whole-person service delivery and reduce stigma by expanding access to syndemic testing and treatment, and providing navigation services to increase access to a range of sexual health and support services for those who would benefit from both prevention and care.

University Health implements the project in partnership with the Alamo Area Resource Center.



### **Clark County** **Las Vegas, NV**

Clark County aims to tackle the HIV epidemic and foster community involvement by using a whole-person approach. Their program provides both preventive and treatment services, building upon the existing Rapid stART method for HIV care, and introducing the Rapid PREVENT approach. It also aims to broaden community involvement and create equitable service pathways for individuals testing positive for HIV, as well as those who can benefit from HIV prevention services.

Clark County Social Services, Office of HIV implements the project in partnership with the Southern Nevada Health District, Collaborative Research, and the Pacific AIDS Education and Training Center-Nevada.



### **Hennepin County** **Minneapolis, MN**

Hennepin County utilizes the RWHAP non-medical case management model to provide comprehensive services in Hennepin County. The project will provide more opportunities for effective service delivery by enabling a “one door” approach to care that continually assesses clients’ needs as a way to retain individuals in prevention and care services. HIV prevention and other critical services will be accessed in the same place and as a result, healthcare delivery will improve, new HIV diagnoses will decrease, and clients will have better overall health and social stability.

Hennepin County implements the project in partnership with Red Door Clinic and Youth and AIDS Projects at the University of Minnesota.



### **San Diego County** **San Diego, CA**

The County of San Diego is implementing the project to expand existing non-medical case management services to include people who could benefit from HIV prevention services. The project will deploy a Social Network Strategy to expand the County’s outreach and testing services to include communities that have not previously been reached, and revise service standards co-created by the HIV Planning Group and County staff to reflect a whole-person approach to services.