

HIV Tutor Care service: a cooperative model between Public Institutions and Community Associations for the improving of well-being among Persons With HIV

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Introduction/Summary

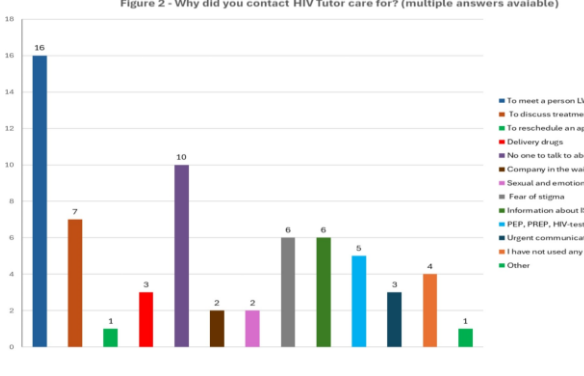
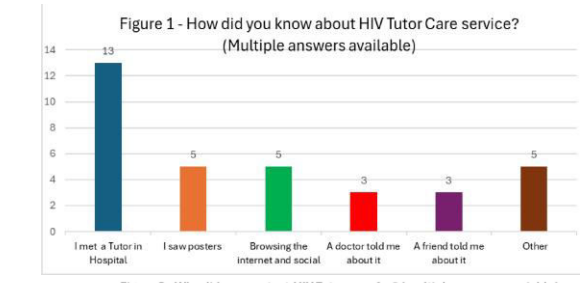
- “HIV Tutor Care” is an initiative led by **Arcigay Napoli Antinoo** at **Cotugno Hospital** in Naples, Italy, funded by Unconditioned contribute of **Gilead Community Award Program**.
- People capable of addressing the social and relational needs of persons with HIV (PWH) are often lacking, especially in the hospital setting. This gap may be filled by the inclusion of HIV tutor peers next to medical/nursing staff.
- Tutor peers in HIV care are specially-trained individuals able to provide patients with information and support. Mostly, HIV peers are PWH themselves. The role of HIV peers is fundamental in the social-health integration aimed at the well-being of patients with HIV.

Methods

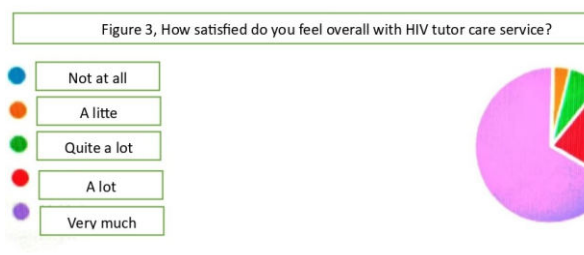
- HIV Tutor Care objective is to support HIV-positive patients by providing them with assistance from individuals with personal experience in HIV. The project aims to improve patients' well-being, break down barriers of fear and stigma, and change the narrative around HIV.
- Three experienced tutors from the community conducted an intervention model based on the ideas of peer learning and peer-empowerment. Clear and large posters illustrating the logo and aims of the Tutor Care service were exposed in the HIV clinic waiting room. Tutors were clearly recognizable with badges with the same logo. Approaches to PWH waiting for medical visits were informal, and occurred in different hospital settings, mainly in the waiting room. Initial and successive speeches with PWH occurred face-by-face, by dedicated email inbox and text messaging or by appointment on de-hospitalized places (bars, a walk in the park etc.).
- The activities were summarized in 4 domains: emotional support, practical support, help in connection with doctors, services to non-HIV people (Table 1).

Results

- Service was evaluated by anonymous questionnaires sent to all PWH who established a link with the service.
- Totally, about 80 PWH were contacted within the service. Among these, 54 (68%) established a durable connection with the service and 28 answered to anonymous questionnaire.
- How the PWH learned about the service, and main reasons for using it are summarized in figures 1 and 2.



- Every single service has been evaluated, and the total level of satisfaction is shown in figure 3



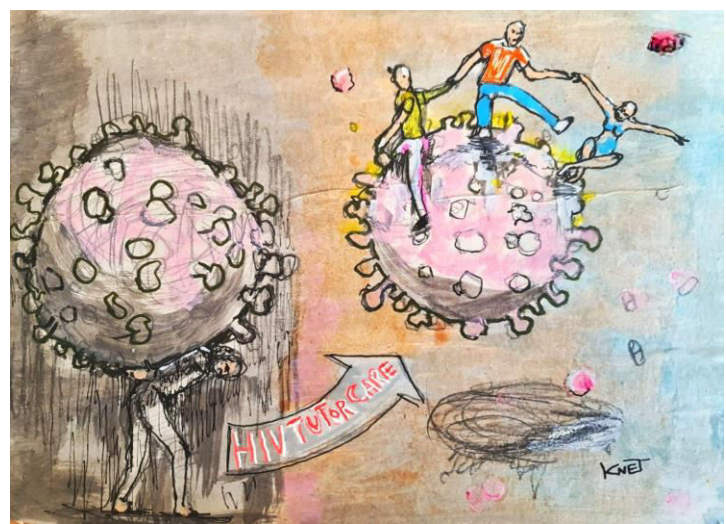
Results

Among PWH approached, 4 had previously stopped treatment, and 3 of them resumed care, now constantly in contact with the tutors (Retention in care).

Conclusions

- As Italy begins to recognize the importance of social prescribing, the HIV Tutor Care project stands out as a vital contributor to this emerging field. Social prescribing involves linking patients to non-medical community support sources which is crucial for holistic care
- This preliminary evaluation offers a picture of how this service offers opportunities for motivational confrontation, guidance and support to PWH by other PWH recognized by the institution. In addition, the service carries out an important mediation activity between medical staff and patients. The empowerment of patients, the improvement of their conditions and the cultural changes promoted by this service can produce an important impact in their various family, friendship, and work contexts, and extend the positive effects to a correct awareness and prevention about HIV.
- We believe that HIV Tutor Care service represents a good cooperative model between public institutions and Community associations and can be replicated in other hospitals dedicated to HIV care.

Tabella 1. TUTOR CARE ACTIVITY	
MACRO AREA	Actions
Emotional Support	Having an expert patient living with HIV available immediately and live to talk with, set appointments in de-hospitalized settings or WhatsApp/mobile talks; receiving support in cases of comorbidity; connect patients with similar experiences; encouragement to be compliant with therapy; answering embarrassing questions; talking about stigma and self-stigma; awareness through art placed around and humanization of common areas.
Practical Support	Therapy collect and delivery; help in filling out forms; proxy; request to change or set new appointment, even when DH service is off; Information on procedures for accessing services and for disability; carry out simple errands for patients in the ward during hospitalization; advocacy.
Help in connection with doctors	Give simple answers for which the intervention of a doctor is not necessary; Act as a buffer for complaints and restlessness; obtain additional information from the patient; communications about blood test results (its interpretation is not a tutor's task).
services to non-HIV people	Information on STI, PREP, PEP and HIV tests (phone and WhatsApp)



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