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The first comprehensive National HIV/AIDS Strategy for the United States was released in 2010. Since then the Strategy has changed the way in which people in American talk about HIV/AIDS, and many organizations and people have joined together around its vision and goals. Strategy has been implemented to organize prevention, prioritize, and deliver care in clinical and non-clinical services that support people living with HIV to remain engaged in care.

The most challenging portion of Goal 1 reducing new human immunodeficiency virus (HIV) infections can be the use of combination of effective evidence-based approaches to expand efforts to prevent HIV infection. These challenges exist because some people are resistant to change due to cultural practices and norms. Also they do not perform safe sex practices with the use of condoms, and they do not conform to the harm reduction needle exchange program directions such as not sharing needles or equipment also the safe way to perform injection drug use. Some people are not taking their antiretroviral medications consistently in the manner prescribed by their health care provider. The side effects of antiretroviral therapy are the main reason for medication noncompliance. The Center for Disease Control CDC has distributed guidance to providers recommending pre exposure prophylactic (PrEP) to be considered for persons at substantial risk for HIV. Also guidelines from the U.S. Department of Health and Human Services (HHS) now recommend that all persons with HIV should be offered treatment for their health and to reduce the risk of HIV transmission including women who are HIV positive and pregnant.

Another challenge can be providing support and comprehensive coordinated, patient-centered care for people living with HIV, including addressing HIV-related co-occurring conditions and challenges such as meeting basic needs, and housing. Improving outcome at every step of the HIV health care continuum must remain priority. President Obama issued and executive order establishing the HIV Care continuum initiative calling for coordinated action among Federal agencies to activate efforts in line with the recent advances in HIV treatment. These efforts are expected to extend lives and reduce new infections. Hard work must be directed to toward improving outcomes at every step of the continuum. Vulnerable populations must be connected and engaged in comprehensive care. The importance to this effort will be the identification and re-engagement of people who have been lost to care. When treating people with HID/AIDS it is important to assess all aspects of their health including physical assessment including(sexually transmitted infections (STI), viral hepatitis infections, opportunistic infections, laboratory and diagnostic test, and immunization history, psychological-status substance use, psychosocial-intimate partner violence (IPV) also basic services such as housing, education, employment and spiritual support. Linkage and engagement in care, treatment, and eventually achieving viral suppression, extension of life and reduction of new infection is main outcome. It is a main priority to promote research to stop gaps in HIV prevention science among the highest risk populations and communities, such as African American, Latino, Gay, Transgender, and Men who have sex with Men. Planning and assessing innovative prevention strategies and combination approaches for preventing HIV infection is imperative, cultural competency must be addressed when providing care for people with HIV because they are aware of stigmatism. Increase contact to effective prevention services, including pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) can reduce the spread of HIV. Emphasis on enhancing the continuum of care and making access to lifesaving antiretroviral therapy a right, not a privilege, becomes a core principle of the Strategy. Creating models of proficient care that treat the entire person, as well as the virus, is critical. After being diagnosed with HIV, people entering the healthcare system and being prescribed treatment need support to remain involved in care. A culturally competent and skilled workforce is very important to this effort, and comprised of a multi disciplinary team that consist of peer navigators, doctors, nurses, social workers, case managers, and pharmacists. Main priorities for improving outcomes along the care continuum include increasing the workforce by engaging and training non-traditional providers and expanding proven models of team-based, patient-centered care that support ongoing participation in care. Carrying out science research is also essential to produce evidence-based models of care that are proven to deliver life-enhancing services

One of the most important interventions the nurse can provide for a patient is education. However the nurse must take into consideration the patient’s level of education, the cultural background and be sensitive and respectful, also allowing the patient to be an active agent in the care planning process. Education is a great tool because when people learn about effective ways that they can impact their health they tend to be empowered to make changes to promote their health. Provide clear, specific, consistent, and scientifically up-to-date messages about HIV Utilize evidence-based social marketing and education campaigns, and leverage digital tools and new technologies. Encourage patients to practice safe sex by using latex condoms consistently because they provide maximum protection against reinfection. Discuss, practicing harm reduction measures for substance abuse safe injection drug use which can greatly reduce the spread of infection Explain in a simplified manner the reason why it is important to take their antiretroviral medications every day as prescribed by their health care specialist so that the HIV virus would not change and the medication will be able to work. This is important because if medications are not taken daily as prescribed the virus will mutate and the antiretroviral medications will not work. Include in discussion the importance of knowing when it is best t to take medications whether they should be taken before, after, or with meals also what can decrease or if crease the strength of medications. Being familiar with expected side effects of cART and ART and the more serious effects that can occur with these medications can produce great results in management of medications. Promote the benefits of keeping a record of all appointments which will help eliminate doubts or forgetting what’s going on and thereby oversight appointments.

Working together with renewed focus and vigor will advance that vision of eradicating HIV Virus. Challenge misunderstandings, stigma, and discrimination to break down barriers to HIV prevention, testing, and care. Vital focus areas include HIV testing knowing health status early also connection to care for people with HIV infection, along with support for maintenance in care and treatment adherence to make certain that individuals living with HI remain virally suppressed. The usage of PrEP for those testing negative but have considerable risk, and support for medication adherence. Everyone is needed to put this Strategy into action and end the HIV epidemic.

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