

Workforce Development Employment Services Getting to Zero Program Impact Updates

ZERO SAN FRANCISCO WWW. SELLIBRITZEROSF. DT



Addressing Stigma

In 2019, PRC and the San Francisco AIDS Foundation co-hosted a workshop on addressing HIV Stigma and discrimination. Highlights included creating an "Anti-Stigma Toolkit", workshops on recognizing the devastation of internalized and institutionalized stigma, as well as ideas on how to create HIV Stigma-free programs.

What We Heard and Learned about Stigma

Focusing on use of language may be the first place to start in order to address stigma, social exclusion, and discrimination against people living with HIV.

Language – it helps to shape our world – it describes and gives meaning to our lives – it persuades and changes minds – It can lift us up and empower us. In our process group, participants recalled those deeply stigmatizing words and beliefs about HIV, and transcribed them onto paper cutouts of dead leaves. We then asked participants to share their thoughts on how they wished the world viewed them in their daily lives, living with HIV. Those affirming words were copied onto paper cutouts of fruit and flowers, glued to the branches of our figurative stigma-free tree. Lastly, the group placed all of those stigmatizing words at the bottom of the tree, symbolically reminding us that we can defeat stigma and hate, and plan a stigma free future.

Another group activity "Telling my Stigma Story," allowed participants to channel their collective voices to call out examples of organizational and institutional stigma, to encourage participants to move from gaining awareness to collective action.

- "I didn't realize how much some of my everyday thinking was me stigmatizing myself until I attended your workshop. Know better, do better. Thanks guys! "
 - We thought we were going to die, but we're still here. This workshop has helped to open up our eyes and continue living, because we stopped living...
- Attending the stigma event made me want to know more about the services of PRC. Now I'm happy to be a client and a graduate of PRC's Liftup Peer to Peer Program!!
- Stigma sometimes seems worse for me because I have mental health problems as well as HIV.

- ** Thanks for covering internalized stigma, that's the hardest for me to deal with. At last I know where it comes from.**
- "culture" in the conversation!" conversation! Thanks for starting the conversation!"
 "culture" in the conversation!"
 "culture" in the conversation!"
 "culture" in the conversation!"
 "culture" in the conversation!
 "culture" in the conversation!
- 66 I really liked the stigma busting kit. I will use it to remind me there are alternatives to isolation.

Creating a "virtual" Anti-Stigma Toolkit



A STICK OF GUM to stick to my focus and resolve



A RUBBER BAND for my elasticity and flexibility

Impact of Our Services

Services and Accomplishments

Completed training or enrolled in an education or on-the-Job training plan

Engaged in some form of employment, temporary or permanent

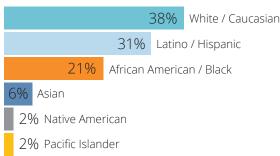
Received vocational and/or career counseling

Were linked to and retained in care with a primary care physician

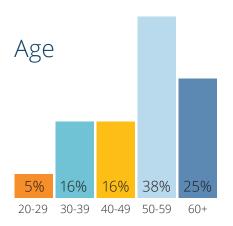
Reported an improvement in housing status 6 month post intake

Who We Serve

Ethnicity



Gender 10% Transgender 4% Female 86% Male



Housing and Better Health Outcomes

People with HIV/AIDS who have high quality housing are much more likely to access health services, attend primary care visits, receive ongoing care and receive care that meets clinical practical standards.



83%

improvement overall in housing status 10% moved from living in car to respite care or shelter

24% moved from emergency to secured permanent housing

50% improved quality of housing through employment

Being stably housed is positively associated with:

- Effective anti-retroviral therapy (HAART)
- Viral suppression
- · Lack of co-infection with Hepatitis C or Tuberculosis
- · Significant reductions in avoidable emergency and acute health care
- · Reduced mortality





A PAPERCLIP when I need to hold it together



5 A HAND MIRROR to know I have value when I feel invisible





Mission Statement

To help people affected by HIV/AIDS, substance use, or mental health issues better realize opportunities by providing integrated legal, social, and health services that address the broad range of social risk factors that impact wellness and limit potential.

Values

We aspire to provide services that:

- Give clients the knowledge they need to make their own choices.
- · Aid all clients in a culturallyappropriate way.
- · Utilize a client-centered model, emphasizing one-on-one and group relationships.
- Are easy to access.

We aspire to be an organization that:

- Is culturally competent and diverse across all levels, from volunteers to our staff to our board.
- Respects and seeks participation from all agency stakeholders, including people living with HIV, in all areas of the organization.
- Operates at all levels with accountability, honesty and integrity.

We aspire to meet the needs of all people affected by or at risk for hiv, including:

- People of any sexual orientation or gender identity.
- Immigrants, regardless of immigration status, and people with limited English proficiency.
- People who are (or who have been) incarcerated; ex-offenders; people with dependents; people of color; people with mental or physical disabilities, including the deaf and hard of hearing; women; youth; seniors; sex workers; active drug users; and people in recovery.

OUR CLIENT STORIES



arence, a 64 year-old African American male, had been living in his car in the Excelsior District of San Francisco after his livein caregiver job ended. He was skipping meals, as his SSI check didn't cover extras once his car insurance and monthly storage fees were paid. Additionally he had an overpayment charge that debited \$100 dollars of his monthly benefit check. PRC's Employment Specialist referred him to housing resources for assistance. Due to his deteriorating mental and physical health, he was accepted into medical hospice to improve both his HIV health and nutrition, which had exacerbated his cognitive decline. Clarence moved into hospice care with the understanding he would be eligible for senior housing once his HIV health improved. He is now housed in a rent subsidized senior building, and has regained his health, with an undetectable viral load. He is planning to attend City College for a brush up on his CNA skills.

enna₁, 42, was referred to PRC by her case manager in a medical rehabilitation facility. Jenna was diagnosed with HIV and diabetes, as well as severe PTSD, having fled a domestic violence situation and sex work, and was about to become unhoused. PRC 's Getting To Zero program team were able to secure Jenna a stay with Zuckerberg San Francisco General Hospital's Hummingbird Place, and within 30 days, she transitioned to permanent subsidized housing. This past fall, Jenna enrolled in SF City College, and is working towards obtaining her degree in psychology with an eventual goal of becoming a health counselor.

Onathan, 50, found himself sleeping on couches after leaving an abusive relationship with his partner. As Jonathan was without income and medical insurance, PRC helped him apply and get approved for Medi-Cal, and located a 28 day bed, while he looked for more permanent housing. He was accepted at a treatment facility, but he needed to come up with the first month's rent. We approached PRC'S Emergency Financial Assistance program, who provided a grant to cover this expense. Jonathan was able to find a place to live, and began substance use disorder treatment. Jonathan is now enrolled at CCSF and working towards his associates degree.

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