

P R E V E N T I O N A N D A C C E S S T O C A R E A N D T R E A T M E N T



PACT: HEALTH AND HOPE

FOR BOSTON'S SICKEST AIDS PATIENTS





EVEN IN A NATION AS FORTUNATE AS OURS, SIGNIFICANT HEALTH CARE GAPS EXIST, ESPECIALLY FOR THE POOR.

Boston is no exception. An HIV-positive black woman living in Roxbury is 15 times more likely to die from AIDS than an HIV-positive white man.

Despite major advances in medical treatment for HIV/AIDS, the impact continues to rise among the poor and within black and Latino communities.

Our health system is failing some of its most vulnerable patients. PACT (Prevention and Access to Care and Treatment) is dedicated to eliminating health disparities among people in Boston living with HIV/AIDS. Using a proven community health worker model, PACT is bringing Boston's hardest to reach AIDS patients back to health and saving significant health care costs in the process.



“At the beginning, I was afraid. But, (my health promoter) helped me. She was always by my side, at every moment, for everything.” PACT patient

WHO WE ARE

PACT is a joint program of Brigham and Women’s Hospital, one of the nation’s top academic medical centers, and Partners In Health, a pioneering community-based health care provider working in nine countries around the world. PACT is led by Brigham and Women’s physician Heidi Behforouz, MD, working closely with Brigham and Women’s colleagues Paul Farmer, MD, PhD and Jim Yong Kim, MD, PhD (who also co-founded Partners In Health).

WHO WE SERVE

At any one time, PACT serves approximately 100 people living with HIV/AIDS, or about a fifth of the HIV/AIDS patients in Boston believed to be failing within the health care system. Doctors from 20 hospitals and clinics city-wide refer their patients to PACT when they have run out of other options to help them. Most participants are Black or Latino men and women living below the poverty line. Most are so sick that they have experienced frequent hospital stays and trips to the emergency room for the illnesses that come with a weakened immune system, illnesses like pneumonia and certain types of cancer. Some have substance use issues, some live with mental illness, and some are victims of domestic violence. They have significant difficulty navigating the health care system and maintaining the complex drug regimens they need to stay alive. As a result, **many are facing the very real prospect of death. For all of them, PACT is their last hope to regain their health and their lives.**

WHAT WE DO

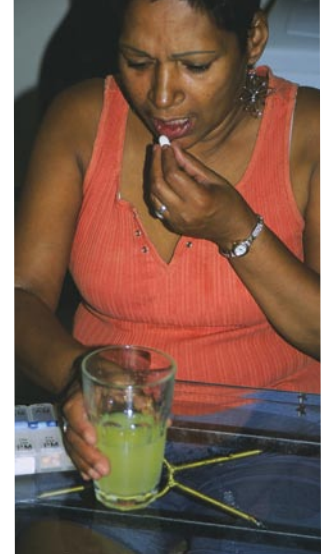
PACT helps participants negotiate complex social issues, including poverty and mental illness, which can affect their health and their ability to take care of themselves. This unique program helps participants understand their HIV/AIDS, connect with their health care providers, and prioritize their health care needs.

PACT employs specially-trained community health workers to deliver care, based on the successful model developed and used at Partners In Health sites worldwide. According to PACT Director Heidi Behforouz, community health workers are the best possible advocates for people struggling with HIV/AIDS. “The community health workers empower the participants by giving them education, skills and hope,” she says.

Community health workers fill one of two roles, Health Promoter or Directly Observed Therapy Specialist. They work with participants at home, where the interaction can be most effective.

Health Promoter services include medication adherence training and counseling. Health Promoters also accompany participants to health care appointments and help coordinate their care through close, frequent communication with health and mental health care providers, case managers, and social service personnel. Directly Observed Therapy Specialists provide intensive intervention for individuals facing the most serious health problems, who need extra support to stay on their complex medication schedules. Directly Observed Therapy Specialists typically visit participants at least once a day to help them stay on schedule and remain positive about their situation. At any time, about 30% of PACT participants are receiving daily assistance.

The average PACT participant sees a **78%** drop in HIV in the bloodstream and a **50%** drop in costly hospitalizations.



A RECORD OF SUCCESS

PACT is saving lives and saving money for the health care system.

For most PACT participants, the turnaround is stunning. The average participant sees a 78% drop in the concentration of HIV in his or her bloodstream, the most critical indicator of health for an HIV/AIDS patient. For PACT participants, this drop means that the disease that once threatened death is under control. Most PACT participants stay in the program a little over a year. They graduate healthy and ready to lead fuller, more productive lives.

In helping these HIV/AIDS patients get healthy, PACT also helps them avoid frequent hospitalizations and trips to the emergency room. As a result, the savings to the health care system are significant. Overall, PACT participants experience a 50% drop in hospital stays and hospital costs.

HECTOR'S STORY

Hector, his wife Isabel, and their two young children immigrated to Boston from Cuba in search of better jobs. Two years later, Hector started having terrible headaches and sleeping 12 hours or more every day. Not knowing what else to do, Isabel took him to the emergency room.

Tests revealed toxoplasmosis, a brain infection that takes hold only in people whose immune systems are too weak to fight it off. Hector's doctors soon confirmed their suspicions that he was suffering from advanced HIV disease.

After 10 days in the hospital Hector improved enough to go home. He and Isabel worked hard to communicate with their English-speaking providers, to understand Hector's 17 different medications, and to negotiate the requirements of their insurance.

In the end it was not enough. Hector would spend 30 more days in the hospital that winter, in large part because he was unable to adhere to the complicated drug regimen required to fight HIV and toxoplasmosis.

In February one of Hector's doctors contacted PACT. PACT staff went to his hospital room, where they found Hector barely conscious and Isabel sick with fear and confusion.

Juana, a PACT health promoter, began visiting Hector and Isabel every day. She explained what the doctors said and did and helped Isabel plan how to care for Hector at home.

When Hector did go home again Isabel was able to take charge of his treatment. Juana visited them regularly, answering questions, tracking medication changes, and observing Hector's progress.

Hector's toxoplasmosis is now under control. His HIV viral load is undetectable, and his CD4 immune cell count is rising steadily, suggesting an excellent response to therapy.

On a warm evening in August, Juana walked up Hector's block for a home visit. She heard him shout a greeting from the driveway. He was putting new headlights on his car, his son proudly handing him the tools.



“The community health workers empower the participants by giving them education, skills and hope.” Heidi Behforouz, PACT Director

REPLICATING PACT'S SUCCESS

PACT has shown that community health workers can significantly improve the health and lives of even the sickest and most marginalized HIV/AIDS patients. The word is spreading, and there is increasing interest in expanding the PACT model around the country both for HIV/AIDS patients and for other chronic diseases.

In 2006, New York City officials asked PACT to help them bring the PACT model to HIV/AIDS patients there, and today, PACT's successful intervention is benefiting patients at Lincoln Hospital in the Bronx. The model has also been expanded to Miami, Florida's Jackson Memorial Hospital.

The PACT approach also holds significant promise for other chronic conditions like diabetes and heart disease that disproportionately impact poor and minority patients. In 2007, PACT began a major project with the Codman Square Health Center to bring the community health worker model of care to diabetes patients in Dorchester and other local communities.

WE NEED YOUR HELP

PACT is giving new hope to Boston's sickest, hardest to reach HIV/AIDS patients and proving that community-based health workers can not only save lives, but can also save significant health care costs.

Despite this success, there is not yet any source of health care funding that pays for PACT's services. In time, with continued strong results, proven cost savings and expansion to more patients and more diseases, we believe that will change. Until then, PACT must rely on philanthropic support to help Boston's underserved HIV/AIDS patients, to replicate our program in other communities of need, and to adapt this model for other chronic illnesses that devastate poor and minority populations. Thanks to the generous contributions of individuals and foundations, PACT has already helped hundreds of patients and has become a model that promises to help many thousands more.

Please join us as we make good on that promise and create a healthier future for all communities.

The PACT Project

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www.brighamandwomens.org/socialmedicine/pact.aspx

www.pih.org/where/USA/USA.html



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