

Wabanaki Generations – Addressing HIV/AIDS in tribal communities in Maine

A project of GENERATIONS: Strengthening Women and Families Affected by HIV/AIDS

- •Wabanaki Mental Health Association
- Maine Migrant Health Program
- Maine Community AIDS Partnership









Background

- HIV in tribal communities is still a hidden problem surrounded by lack of knowledge and stigma
- Focus on women taps into matriarchal culture in Wabanaki tribes









Collaborative Description

Three agencies

- 8 days of training for outreach workers
- Management team: email and phone calls as needed (at least monthly)
- "All hands" meetings bi-monthly, alternating conference calls /in person
- Monthly outreach worker contact sheets
- We are a team









Project Overview

- Capacity building with tribes in Maine
- Focus on women and families
- Goals

•reduce stigma

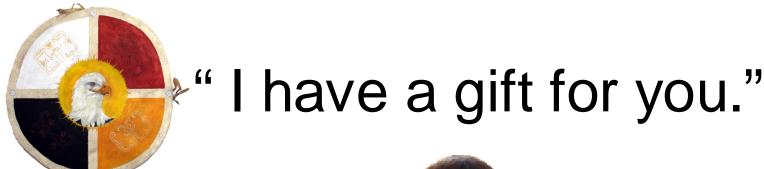
•bring topic into consciousness

• Awareness of risks & protective behaviors



















Methods: Outreach

Outreach –

bring messages to audience

- One on One
- Small groups
- Health Fairs
- Large Gatherings











"We are the program"



Investing in the wisdom, training, capacity and empowerment of key individuals is the cornerstone of both the intervention and the transformation.









Outreach Strategies

Strategies

- Education and information
- Testimonials and storytelling
- Counseling and testing
- Referrals











Outreach Sites

Laundromats	Grocery Stores	Raker Center
Campfires	Blueberry Barrens	Health Fairs
Camps	Gatherings	Social Networks
Senior Centers	Boys & Girls Clubs	People's Homes
Community Kitchen	Methadone Clinics	Schools









Evaluation

Process Measures

- Number of events, contacts
- Number of tests, referrals
- Feedback from Champions and community leaders
- Instances of community initiated contact









Contacts

Outreach Contacts: 752

- -1x1 = 232
- 17 Groups = 220
- 8 Gatherings = 300



HIV CTR = 160 women









Findings

- Eventually, we were welcomed
- Indigenous and ingenious outreach generated large volume of testing
- Stigma has gone down
- Issue awareness has increased
- Collective acceptance in community









Lessons Learned

- Invest in training and team building
- Hiring / Staffing decisions are key
 - HIV+ women willing to speak
 - Traditional healers for outreach and education encounters
- Part time / Full time doesn't matter because eventually they're always working because they become community resources









Reflections

- Migrant camps
- Agency collaboration
- New horizons









Thank You

Donna Augustine Sharon Paul Patty Neptune Mulian Dana Sharon Tomah Stephanie Brady Barbara Ginley

NATIONAL AIDS FUND A National Catalyst for Local Action Miigam'agan Kate Perkins Lauren Stevens Amy Joseph **RMCL** DEAN Jill Devereaux Johnson 4 Johnson



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Take good care of yourself



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