



Family Tree Clinic

Improving Sexual & Reproductive Health Outcomes



CONTEXT

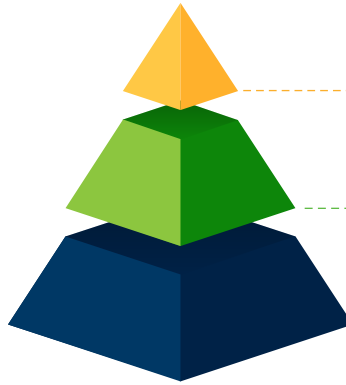
Goal: Family Tree Clinic is addressing HIV/AIDS, sexually transmitted infections (STIs), and teen pregnancy prevention for African American people and people of color in the 7-county Twin Cities area.

Causes: Racism and discrimination have caused long-standing disparities in education, employment, income/wealth, housing, neighborhood conditions, access to health care, transportation, social connections and support that directly affect health.

Population: More than 300,000 African and African Americans live in the 7-county metro area.

Issue: Despite innovations in HIV treatment, prevention, and policy, the HIV epidemic remains a significant health issue in Minnesota. At the end of 2017, 8,789 people were estimated to be living with HIV/AIDS in Minnesota. The highest rates of new HIV infections are in the 20-29-year-old population. Geographically, new cases of HIV/AIDS are concentrated in the Twin Cities metropolitan area. African American and African-born blacks together make up 5 percent of the population in Minnesota but represent nearly half of all new HIV cases in 2017.

APPROACH



Providing de-stigmatizing HIV/AIDS and STI screenings and education among African American youth and adults. Training parents as sex educators to increase child/parent connectedness.

Training clinic staff and improving clinic accessibility and responsiveness to intersectional black communities. Changes include new clinic hiring practices, new staff anti-oppression trainings, and integration of healing and health promotion.

Decreasing stigma and normalizing positive relationships within the broader community.

ROOT CAUSES/ CONDITIONS FOR HEALTH

Addresses the social and economic conditions for health (also known as the social determinants of health). This often happens by changing local, regional or state policy, changing the way systems work or changing the environment.

ORGANIZATIONAL/ INSTITUTIONAL CHANGE

Addresses a health area by changing policies or systems in a school, clinic, hospital, etc. to support healthy behaviors and individual risk/protective factors.

HEALTH PROMOTION/ DIRECT SERVICE

Addresses individual or family-level risk/protective factors through health education, programming, case management, etc.

"I loved this class! I learned that the way I was taught [about sexuality] was based on shame. I'm changing the way I talk to my kids with this class."

– parent participant

IMPACT

- 206 people participated in parenting classes
- 258 African/African American youth and adults were connected to HIV/AIDS and STI information and testing resources
- 280 professionals were trained in culturally competent care for LGBTQ people of color

93% of surveyed parents report the **ability to talk** about relationships with their children



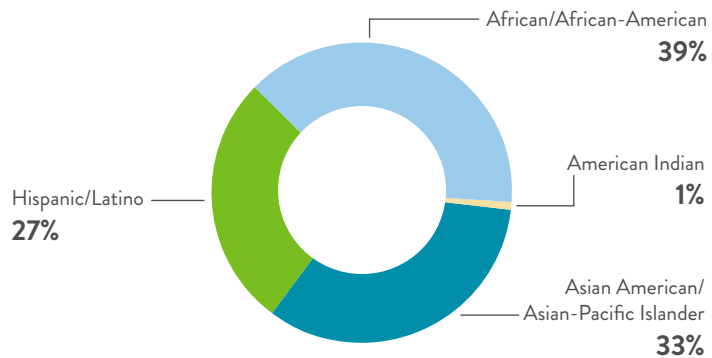


Family Tree Clinic provides reproductive and sexual health services, limited primary care, and educational outreach. We specialize in serving those left out of larger medical or educational systems.

PRIORITY HEALTH AREA SPOTLIGHT

Currently, an estimated 8,789 Minnesotans are living with HIV/AIDS. In 2015, there were 25,986 diagnosed cases of STIs in the state, an all-time high. Communities with limited access to HIV testing and prevention programs had higher rates of HIV, chlamydia, and gonorrhea infections. Access to programs and services is hindered by long-standing social, medical, and income disadvantages, which disproportionately affect communities of color and American Indians. Syphilis infection rates are higher among men who have sex with men (all races) and American Indian and African American women.

Collective Impact: 44,201 individuals were reached through the work of seven grantees addressing this priority health area in 2017-18. The proportions of individuals reached by race/ethnicity are shown in the figure below.



EHDI grantees addressing HIV/AIDS and sexually transmitted infections identified common measures to track and report. Collective results include:

- ★ 324 people tested for HIV/AIDS or STIs
- ★ 88% of program participants had someone to talk to about HIV/AIDS or STIs
- ★ 84% of sexually active participants planned to use barrier methods to prevent the spread of HIV/AIDS and STIs

MDH ELIMINATING HEALTH DISPARITIES INITIATIVE

The Eliminating Health Disparities Initiative (EHDI) grant program was created to address health inequities for populations of color and American Indians across eight different priority health areas. Since 2001, the EHDI approach has been to support organizations and projects run by and for communities of color and American Indians to develop and implement strategies that are effective in reaching their communities. Every few years, the program reallocates the competitive grants to organizations and tribes across the state of Minnesota. The current grant cycle is from 2016-2019.