BREAKING THE STIGMA
2017 COMMUNITY IMPACT REPORT
Howard Brown Health is helping to break the stigma around LGBTQ health.
DEAR SUPPORTERS,

Stigma and discrimination are bad for your health. People stigmatized and discriminated against because of their race, ethnicity, nationality, immigrant status, gender, age, ability, or sexual orientation face egregious quality-of-life barriers. Achieving a living wage, gaining credit, affording decent housing, obtaining educational and career advancement, and myriad other commonplace needs become challenges. The stress associated with stigma and discrimination can affect physical and emotional well-being and hamper efforts to obtain high-quality healthcare and other essential services.

For LGBTQ people, experiences of discrimination and shame in healthcare settings affect the quality of the care we receive. This is why many people are not out as LGBTQ to their care providers, a decision that may result in inadequate care and dangerously inappropriate health-related counseling.

For example, finding a mental health professional who is affirming of our sexuality, true gender, and relationships can be an enormous challenge. We tend to circumvent providers who are indifferent to our healthcare needs or who treat us with disrespect.

At Howard Brown Health, we are proudest of our affirming and compassionate model of care, calibrated for populations and conditions that are all too often deeply stigmatized. Our long history of LGBTQ and HIV activism and healthcare provision informs our commitment to breaking the stigma. Howard Brown’s drive for accessible, affordable, and patient-centered care is reflected in everything we do. This is why we offer a comprehensive array of medical, behavioral, sexual wellness, and gender-affirming services to meet the needs of everyone in our community. Because we believe healthcare is a basic human right, we offer our services to everyone regardless of their ability to pay.

This year’s Community Impact Report highlights our successes in addressing stigma within our medical and behavioral health practice. Throughout the report, we celebrate patient-centered programs that reduce barriers to care, affirm our patients’ experiences, and have measurable impact on health outcomes in our community. We are eager to share these with you, as we continue our commitment to data-driven healthcare and quality improvement. Data cited in this report is for 2016, unless otherwise stated.

Thank you, patients, community stakeholders, and readers for your ongoing support. We could not do this work without you.

In solidarity,

David Ernesto Munar, President and CEO

Magda Houlberg, MD, Chief Clinical Officer
PATIENTS WE SERVED IN 2016

RACE AND ETHNICITY
- White (45%)
- Black or African-American (21%)
- Hispanic or Latino (19%)
- Native Hawaiian or Other Pacific Islander (<1%)
- Unspecified (9%)
- Asian (5%)
- American Indian/Alaska Native (1%)

SEXUAL ORIENTATION
- Gay (43%)
- Heterosexual (29%)
- Lesbian (3%)
- Queer (1%)
- Patient Declined (8%)
- Bisexual (9%)
- Something Else (1%)

GENDER IDENTITY
- Cisgender Men (63%)
- Cisgender Women (21%)
- Transgender Women (6%)
- Transgender Men (5%)
- Patient Declined (4%)
- Genderqueer/Gender Nonconforming (1%)
- Something Else (<1%)

AGE
- 25-34 (39%)
- 19-24 (19%)
- 0-18 (1%)
- 35-44 (18%)
- 45-54 (13%)
- 55-64 (8%)
- 65 and over (2%)
- Patient Declined (8%)
- 0-18 (1%)
EXPANDING ACCESS TO AFFIRMING CLINICAL SERVICES

Over the last year, Howard Brown Health expanded our reach from Rogers Park to Englewood, making high-quality healthcare more accessible for LGBTQ people and our allies across the city. In 2016, Howard Brown staff reached more than 26,000 people across all service lines. Our sliding fee scale, now with a nominal charge as low as $5, is an important safety net for low-income and uninsured patients. In 2016, 48% of our patients had an annual income at or below 200% of the federal poverty level ($23,760 for an individual in 2016) and 14% of patients were uninsured.

As a result of our expansion, we hope to reach people who do not have a health home and can benefit from our high-quality and affirming services. Over the last year, we saw more people with untreated chronic conditions, including an 18% increase in patients diagnosed with asthma and a 37% increase in patients needing diabetes-related services. As our patient base grows, so do the programs and services we provide, to meet more complex challenges.

26,170
TOTAL PATIENTS

74%
OF PATIENTS IDENTIFY AS LGBTQ

4,798
NEW PATIENTS

42%
INCREASE IN PEOPLE OF COLOR SERVED

48%
PATIENTS WITH ANNUAL INCOME BELOW 200% OF FEDERAL POVERTY LEVEL*

14%
OF PATIENTS UNINSURED

* In 2016, 200% of federal poverty level equals $23,760 for one individual.
GUY, 64

Last year, Guy was rushed to the emergency room after suddenly fainting at work. He was diagnosed with hepatitis C, a dangerous and chronic viral infection of the liver. Guy worried about his health and longevity. Thankfully, hepatitis C is now curable for patients who adhere to a powerful but expensive treatment regimen. Unsure how he would afford medications and specialists, Guy feared the complexities of starting treatment. He was referred to Howard Brown where he and his new medical provider worked together to develop his treatment plan. After three months of carefully following his treatment regimen, his case manager called with good news: Guy was successfully cured of hepatitis C!

“I remember when the blood test came back clear, it felt like the day I got on the plane to come back from ’Nam. It felt like I was going to live! This illness wasn’t going to take me.”
When patients receive compassionate guidance about their healthcare choices, they are more likely to actively participate in their healthcare plans. Howard Brown helps patients with HIV and hepatitis C virus (HCV) navigate health services from diagnosis to treatment. Our HIV linkage-to-care and case management programs connect 94% of patients who are newly diagnosed to primary care. We also advise patients about the insurance choices that best fit their income and particular healthcare needs. Once individuals are connected to Howard Brown, we offer affirming medical care, case management, social services, and support workshops to help them achieve as many of their health goals as possible. Because of our integrated and comprehensive approach, 82% of patients with HIV achieve maximum viral suppression, compared to 55% nationally. And the vast majority of patients who begin treatments for HCV are successfully cured of their infections.

Informed by our team-based HIV model, Howard Brown developed an interdisciplinary team to help patients living with HCV meet their health goals. In 2016, Howard Brown invested in medical provider training on HCV treatment and imaging technology, designed so that patients complete treatment within the primary care setting. As a result, Howard Brown screened 8,516 patients for HCV across all medical locations, with a 2.98% positivity rate, supporting 46 people in curing the virus.
KATIE, BEHAVIORAL HEALTH CONSULTANT

For patients in primary care, Howard Brown’s Behavioral Health Consultants (BHCs) serve as an important bridge to subspecialty medical and behavioral health referrals, including psychiatry. Addressing patients’ mental health and substance abuse needs opens the door for more patients to access needed psychotropic medications within primary care, thereby avoiding unnecessary copays and visits. Katie Jensen, one of Howard Brown’s BHCs, meets with patients to talk through their health goals and prepare patients for critical next steps.

I’m reminded of how important behavioral health consultations are each time a patient says, ‘I have not told anyone about this…it feels good to be able to talk.’
Whether experiencing overt housing or employment discrimination or more subtle judgement from neighbors or family members for being different, the stigma people face because of their identities far too often results in people suffering alone.

Howard Brown’s mental health model focuses on decreasing patients’ experiences of isolation and loneliness by immediately connecting them to mental health professionals. Our program encourages patients to seek healing services in the company of people who share the same identity or are in the same place in their lives. We know that linking patients to care providers when they feel ready for treatment is critical. Over the last year, Howard Brown’s behavioral health team evolved our intake process so that patients receive a phone screening on the same day that they seek treatment. In the months ahead, we are doubling the number of therapy groups offered, so that patients can experience healing in concert with others who share similar experiences.
ANDREW, 25

Andrew moved to Chicago about three years ago and heard about Howard Brown through his friends. He is a student and works as a server, so his income fluctuates. When Andrew first came to Howard Brown’s Sexual Health Walk-in Clinic, he was able to take advantage of our sliding-scale fee. That day, Andrew discussed insurance options with a patient navigator and learned he could access PrEP, even on a tight budget, to prevent HIV infection.

Howard Brown is special; to say it’s a clinic is not enough. Being a young gay man, I wouldn’t know where else to go where I would feel safe and comfortable. It feels like a community with all walks of life, not a stale doctor’s office.
Howard Brown’s pre-exposure prophylaxis (PrEP) services are designed to be adaptive and help patients tackle important concerns – such as transportation, mental health needs, legal services, and affordability – that can get in the way of patients accessing this critical tool to prevent HIV. Over the past three years, more than 3,000 patients have started this once-daily treatment regimen to protect themselves against HIV infection. Over the last year, Howard Brown focused on addressing disparities in PrEP uptake among people of color and women. In 2016, our PrEP team partnered with the Chicago Women’s AIDS Project, helping more women access PrEP through case management services. In addition, we refined our case management model, which walks patients through medication access and routine sexually transmitted infection screening, to focus on retention in PrEP care.

Howard Brown also expanded capacity for post-exposure prophylaxis (PEP), offering immediate relief for patients who believe they may have been exposed to HIV. Patients who access PEP within 72 hours of a possible exposure to HIV may reduce their risk of infection by adhering to a 28-day treatment regimen. During this critical time, we want patients to know that we are by their side. In 2016, Howard Brown prescribed PEP and provided related care for an average of one person per day.
MAXINE, 63

Maxine was experiencing dizziness, nausea, and other symptoms of hypertension when she arrived at Howard Brown Health 63rd St. in Englewood. Maxine was also uninsured. Working with her care team, Maxine applied for health insurance and found a blood pressure medication combination that works. She’s no longer scared to go out for fear of falling – she can exercise and go to the movies, taking it one day at a time.

“I have joy now, when I wake up. There was a time I didn’t have that. With my blood pressure under control, I feel restored.”
Navigating health systems can be incredibly complex, especially if you have any complicating factors, such as having limited access to transportation, limited English proficiency, or an insurance card that does not match your gender identity. Howard Brown takes steps to mitigate these barriers in order to make our patients’ healthcare experiences as easy as possible.

Last year, Howard Brown completed its first year of partnership with Legal Council for Health Justice and LAF to form a medical-legal clinic. For patients experiencing the threat of eviction, utilities being shut off, or benefits denials, legal challenges can mean the choice between paying bills and accessing medication. Co-location at the clinic site increases the likelihood patients are able to receive immediate legal advice or a referral to another specialized legal resource.
ALEXIS, 27
Alexis left high school when she was 17, getting a job to help her family. After a few years, she wanted to pursue a new career but experienced roadblocks without a high school diploma. Howard Brown’s Broadway Youth Center (BYC) provided her with bus passes to get to and from our individualized tutoring program to help individuals earn their General Equivalency Degree (GED), the alternative to a high school diploma. With her GED in hand, she enrolled in college. Alexis was moved by the affirming environment she found at the BYC and she is pursuing a career in LGBTQ care.

Before, I didn’t know about the community’s struggles, I only knew about my own. After I complete college, I hope to work at an LGBTQ resource center so I can give someone the same thing BYC gave to me: inspiration.
The bright colors, youth-centered signage, and custom interiors of the Broadway Youth Center (BYC) immediately remind visitors that the BYC puts young people first. The new space expands our capacity for much-needed services, offering basic needs drop-in programming, behavioral health services, walk-in clinic hours, a GED classroom with computer lab, storage lockers, insurance navigation, in-house laundry facilities, a shower, and much more. In 2016, BYC increased the number of meals we offered clients from one to three per day and expanded the number of clinic days per week. With expanded hours, the BYC now offers same-day access to PrEP, long-acting reversible contraceptive (LARC) methods such as implants and intrauterine devices (IUDs) for pregnancy prevention, and expanded psychiatric services.

In 2016, the BYC secured funding for the Violence Prevention Program, a trauma-informed and client-centered program to help young people explore their identities, access mental health services, learn restorative justice practices, and reduce violence in their communities. Participants explore topics such as street harassment, gang violence, verbal abuse, and substance use and identify their own triggers as they learn de-escalation and self-soothing techniques.
Melissa Soulier, Health Educator, is passionate about making HIV/STI screening services accessible. Our outreach teams listen to client feedback, which informs partnerships for new testing sites in the community. Community outreach takes our skills and services to unlikely venues so that we may help people benefit from essential services they might not access otherwise. In doing so, we help spread awareness of Howard Brown and the ways we can help people meet their health goals.
Our outreach team takes the motto “meeting you where you are” literally. With 17 total screening sites in Cook County (11 in Chicago and 6 in the suburbs), we make access to HIV and STI screenings easier. Almost every day of the week, you can find our teams in the field, providing screening services to people in their own communities.

Opening our Clark Street clinic in Rogers Park and 63rd St. clinic in Englewood, we have enjoyed getting to know our neighbors. Over the last year, we participated in the 5k Gospel Run, offering free diabetes screening and hosting an “Ask a Doctor” event. We host picnics and food trucks and attend church meetings because we know that it is with the support of our community that we better address persistent social determinants of health, such as poverty and hunger.

Last year, when we learned about a national shortage of injectable estrogen we responded swiftly to ensure our trans feminine and gender nonconforming patients would continue to receive their treatments without interruption. We made alternative treatment options available, continually checked national supplies, and joined organizations nationally who advocated for increasing stocks.
As the Chair of the Community Advisory Board (CAB), Chris Pazdernik gives back to his community. Howard Brown’s CAB, a community-based patient board, meets monthly, offering Howard Brown staff valuable feedback on our programs and services. Over the last year, the CAB shaped the community input process that informed Howard Brown’s 2017–2020 Strategic Plan. By contributing to the patient experience at Howard Brown, Chris is helping sculpt tailored programs, increasing access to vital services in Chicago.

When a patient is affirmed every step of the way, it helps ensure that they feel comfortable in taking an active role in their healthcare.
MAKING AN IMPACT FAR AND WIDE

Howard Brown draws patients from across metro Chicago and throughout Illinois, 24 other states, and the District of Columbia. Our new clinic locations offer greater accessibility for patients across Chicago.

Howard Brown is also committed to increasing our advocacy efforts to help shape the world in which our patients live. If we can make a difference outside of our clinics, our patients will fare better in all areas of their health and lives. For example, we launched in.power*, the first holistic, LGBTQ-specific sexual assault response program in the nation to address discrimination experienced by LGBTQ survivors of sexual assault. Through the program, we have built our own post-assault care services team, strengthened our community partnerships to address sexual assault, and prepared other service providers for similar roles in their community.