WELCOME TO OUR COLLEAGUES & PARTNERS

CHANGE Training Program





TODAY'S PRESENTATION







- Mentors Community Engagement Eligibility & Application Q&A
- Trajectory
- Core Competencies
- Program Description
- Why CHANGE?
- CHANGE Leadership
- **Opening Statements**

OPENING STATEMENTS

Erin Kobetz, PhD Vice Provost for Research





CHANGE LEADERSHIP



Daniel Feaster, PhD CHANGE Program Co-Director Professor, Department of Public Health Sciences

Sannisha Dale, PhD CHANGE Program Co-Director Assistant Professor, Department of Psychology









WHY CHANGE?

Ending the HIV epidemic remains out of reach mostly because effective strategies and scientists are needed to reach, care for, and offset barriers for the communities most impacted by HIV: Black, Latinx, and LGBTQ.



75

25

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Percent of all people living with HIV



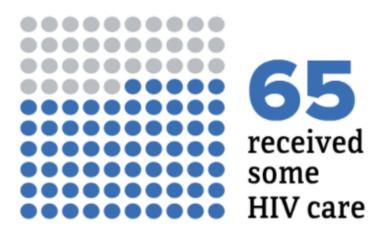


Adults and Adolescents with HIV in the 50 States and District of Columbia

At the end of 2018, an estimated **1.2 MILLION AMERICANS** had HIV. *

It is important for people to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or stay virally suppressed) can live a long and healthy life. They also have effectively no risk of transmitting HIV to HIV-negative sex partners.

Although more than half of adults and adolescents with HIV are virally suppressed, more work is needed to increase these rates. For every **100 adults and adolescents with HIV in 2018:***





* Includes diagnosed and undiagnosed HIV infections.
 * Had 2 viral load or CD4 tests at least 3 months apart in a year.
 * Based on most recent viral load test.

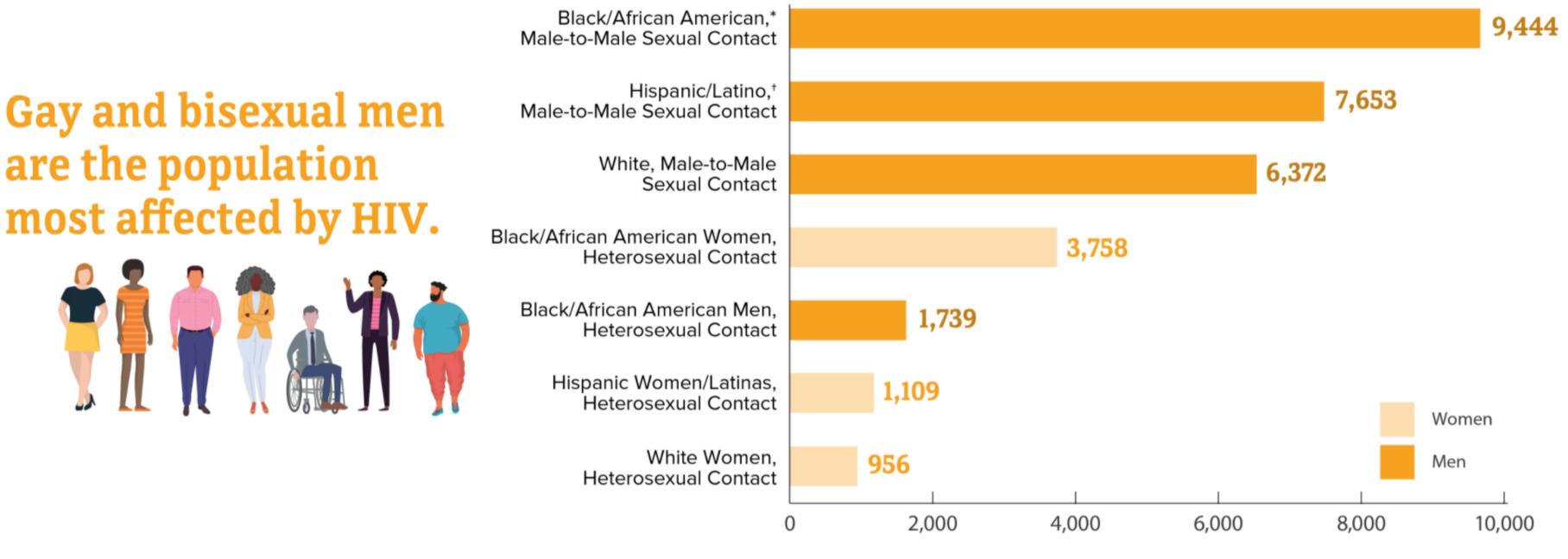
Source: CDC. Estimated HIV incidence and prevalence in the United States 2014–2018. *HIV Surveillance Supplemental Report* 2020;25(1). Source: CDC. Selected national HIV prevention and care outcomes (slides).







New HIV Diagnoses in the US and Dependent Areas for the Most-Affected Subpopulations, 2018



Subpopulations representing 2% or less of all people who received an HIV diagnosis in 2018 are not represented in this chart.

* Black refers to people having origins in any of the black racial groups of Africa. African American is a term often used for Americans of African descent with ancestry in North America. [†] Hispanics/Latinos can be of any race.

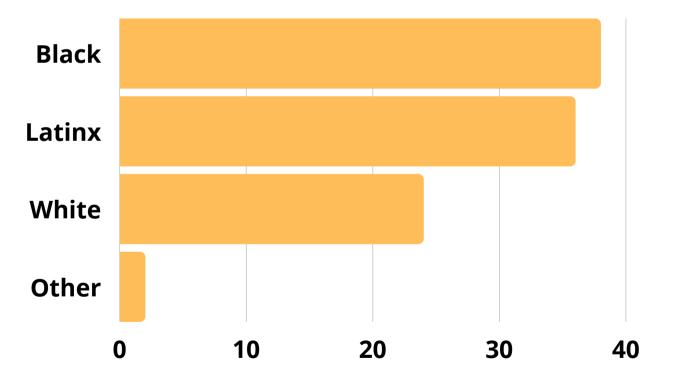
Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2018 (updated). HIV Surveillance Report 2020;31.

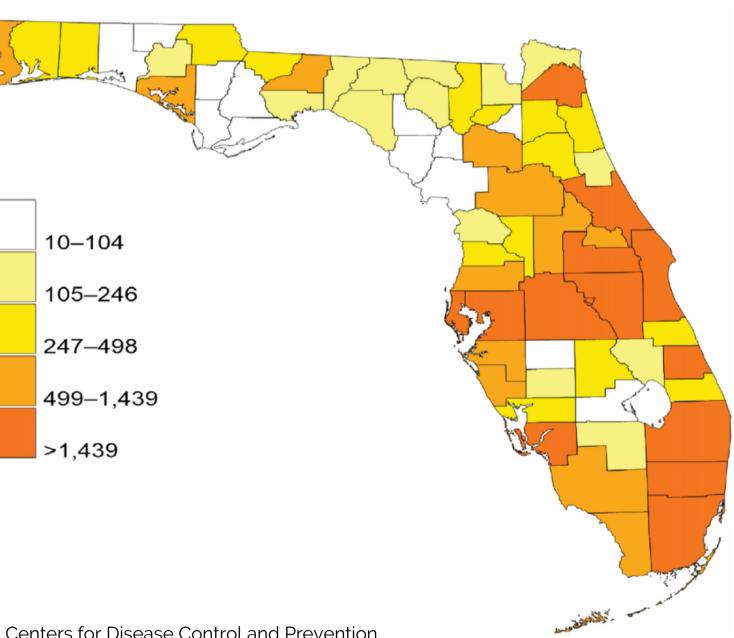


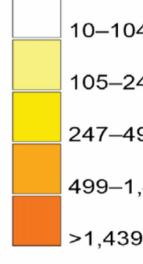


Florida had the 2nd highest rate of new HIV diagnoses among adults and adolescents in 2018¹

Among 4,584 persons who recieved an HIV diagnosis in FL in 2019²







Source: 1. Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention https://www.cdc.gov/hiv/statistics/overview/index.html 2. Florida Department of Health Fact Sheet: Persons With an HIV Diagnosis in Florida, 2019 http://www.floridahealth.gov/%5c%5c/diseases-and-conditions/aids/surveillance/_documents/fact-sheet/FloridaFactsheet.pdf



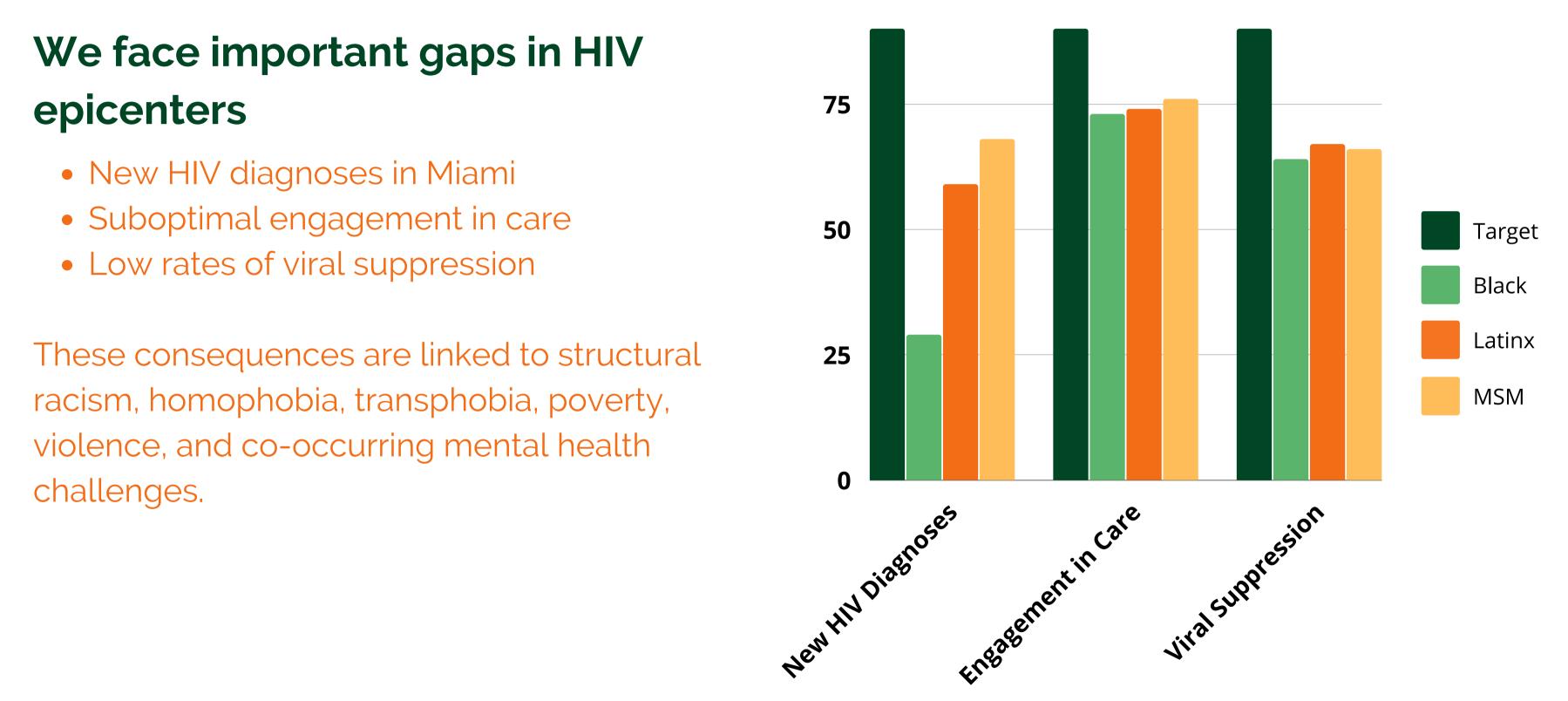
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116,689 persons with HIV diagnosis in FL in 2019²





100 living





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Percent of all people living with HIV in Miami



We need innovative advancements • Invest in the next generation of culturally diverse scientists currently under-represented in HIV 50 research • Prove rigorous training in research design/methods, community-based participatory research, and 25 implementation science • Expand inclusive mentorship and professional networks 0

Although PLWH come from many racial and ethnic backgrounds, the makeup of the workforce currently does not mirror their diversity, particularly in large urban areas. According to data from 2013-2014, 63% of the workforce is white, 11% black, 11% Hispanic, and 16% other races. Research demonstrates that patients are much more likely to evaluate the care they receive as excellent when the provider shares their racial background.



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75





The Primary Goal

Develop the next generation of researchers with the expertise to successfully address HIV and Mental Health disparities throughout the HIV prevention and treatment cascades using community-engaged research, implementation, and dissemination

Training will focus on the following two linked areas:

- Culturally informed interventions for racial/ethnic, sexual, and gender minority populations
- Innovative bio-behavioral interventions including scale up, linkage, and dissemination/implementation programs for pre-exposure prophylaxis (PrEP) and treatment as prevention (TasP) in populations who need it most



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THE CHANGE PROGRAM

CHANGE Training Program



CHANGE INFRASTRUCTURE



Dept of Public Health Sciences

CLaRO

Graduate School







Internal Advisory Board

- Victoria Behar-Zusman, PhD
- Savita Pahwa, MD
- Steven Safren, PhD
- Deborah Jones Weiss, PhD

CHANGE Organizational Structure

- Laura Kohn-Wood, PhD
- Guillermo Prado, PhD
- Donald Spivey, PhD

Arbitration Committee

- Norman Altman, PhD
- David Lee, PhD
- Phillip McCabe, PhD



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External Advisory Board • C Hendricks Brown, PhD • Seth Kalichman, PhD James Sorensen, PhD • Steffanie Strathdee, PhD

Diversity & Inclusion Committee

Executive Advisory Board

- Henri Ford, MD, MHA
- Erin Kobetz, PhD, MPH
- Carl Schulman, MD, PhD





Program Structure

This program will ensure the necessary skills and preparation for a research career for pre-doctoral trainees and a pathway to research independence for the post-doctoral trainees.



design methods

through participatory research

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Professional development, mentorship, and network building



PROGRAM COMPETENCIES

Social Determinants of HIV and Mental Health Outcomes

Biological/Clinical Foundations of HIV & Mental Health Prevention, Care, & Treatment

Community-Based Participatory Research (CPBR)

Training in Responsible Conduct of Research State of Science Methods for Design, Analysis, & Reproducibility

Professional & Career Development

Innovations in Assessment, Intervention, & Implementation Science in Specific Populations

Scientific & Grant Writing

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CTSI, HSRO, & CFAR Workshops & PCO/CBPR Modules

Formal Coursework

Mentored Research Experience

Experiential Research: Laboratory & Community Exposures

Seminar on Mental Health/HIV & CHARM Workshops & Seminars



YEAR 1 Post-Doc / YEARS 1-3 Pre-Doc

YEAR 2 Post-Doc / YEARS 4-5 Pre-Doc

TRAINING ACTIVITIES TIMELINE

Mentored Research Projects and Community Outreach

Presentations, Publications, Conferences, and Workshops

Weekly Seminars

Structured Coursework

CTSI Workshop



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Finalize CHARM Portfolio

Grant Preparation

Conduct CBPR



INPUTS

- Leadership
- Trainees
- Mentors
- Community
 Partners
- Training
 Programs
- Institutional Infrastructure

PROGRAM TRAJECTORY

ACTIVITIES

- Management/ Advisership
- Seminars
- Team-based experiences
- HIV & Mental Health Advised Projects
- Coursework focused on CPBR & Methods
- Community
 Work
- Webinars
- Professional
 Workshops

OUTPUTS

- Oversight
- Seminars
 delivered and
 attended
- Networking
- Papers
 submitted for
 publications
- Mentorship
 delivered
- Coursework attended
- Stakeholder involved in projects
- Attendance to events



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OUTCOMES

SHORT TERM

- Networking
- Research
- Academic
- Selfsufficiency
- Increased
 Collaboration
- Cultural
 Competence

<u>INTERMEDIATE</u>

- Job placement
- Job retention

LONG TERM

Research
 careers

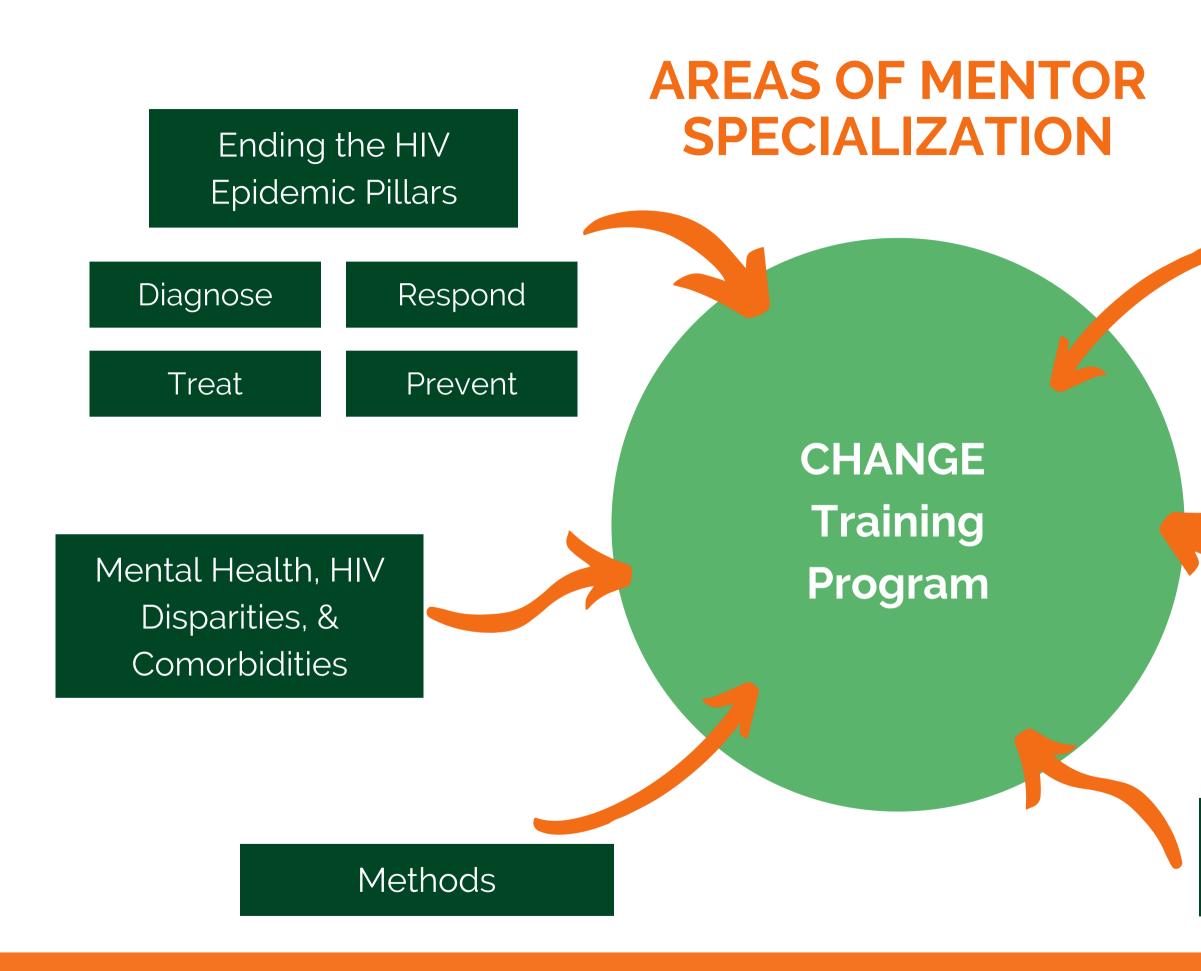
IMPACT

Cadre of
 Specialized
 researchers in
 HIV & Mental
 Health
 Disparities

• Ending the HIV Epidemic









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CBPR & Contextual Factors

Social Determinants of Health

Culturally-Informed Interventions



COMMUNITY ENGAGEMENT EXPERIENCE

- project



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An immersive community engagement experience with community-based organizations combating HIV • Trainees will assist with various tasks, including outreach, events, and assistance with grant writing • Trainees will develop a community-based participatory research (CBPR) project influenced by their experiences and implement this CBPR in partnership with the CBO as their final CHANGE





Predoctoral Applicants

- 1 student from Psychology
- 1 student from Public Health Sciences

Postdoctoral Applicants

- Postdoctoral students can come from anywhere
- Postdoctoral applicants must have received their doctorate (or medical) degree at the time of appointment

Eligibility Criteria

- US Citizen
- Demonstrate a commitment to a career in HIV-related, mental health, and/or health disparity research



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PROGRAM ELIGIBILITY

Applications are now open!





APPLICATION COMPONENTS

- CV
- 3 academic references
- Recommendation Letter (s)
- Unofficial Transcript
- Applicant Statement (maximum 2 pages) describing:
 - Previous work relevant to CHANGE
 - Area of research and goals for the next 5 to 10 years
 - Explanation of why this training program is a good match
 - Rationale for selecting mentors









THANK YOU!

CHANGE Training Program





QUESTIONS?



