The University of Arkansas for Medical Sciences is partnering with Better Community Development (BCD) to expand and enhance prevention and treatment services available to low income, adult African American (AA) women in Pulaski County, Arkansas (AR) who have substance use disorders (SUD) and are at high risk for HIV/Viral Hepatitis (VH) infection or transmission due to personal and environmental factors including living in the US South, race, socioeconomic circumstance, trauma, sexual network, stigma and lack of access to appropriate health care including mental health services. We plan to increase annual admissions of AA women with SUD at BCD from 33 in SFY 2015 to 109 in SFY 2019. The greatest increase will be in outpatient services. Evidence-based, gender-specific, culturally competent, and trauma informed care is expected to increase treatment program retention and improve outcomes.

Arkansas is a small, southern state that suffers from widespread poverty, some of the nation’s worst health indicators (America’s Health Rankings, 2016) and significant health and social disparities. AR ranks 48th of the states in overall health, and also ranks disproportionately high in new HIV cases for the nation. The HIV prevalence rate for Pulaski County is 525, which is more than 2.5 times the already high average rate of 205 for AR counties. According to the Arkansas Department of Health, AAs made up a disproportionately high 45.2% of new HIV cases in 2014. The African American population in the US is 13.2%; in AR the African American population is 15.6% and for Pulaski County it is 36%. The greatest prevalence of HIV is among males having sex with other males. The second highest risk group is heterosexual African American females. The greatest risk category for AA women is heterosexual sex, followed by a rising rate of intravenous drug use (IDU) exposure in AR (4.9% in 2014 vs. 1.8% in 2013). Crack cocaine is the drug of choice for AA women in AR and although inhalant abuse increases the risk for HIV and VH, AR treatment admissions for crack cocaine are decreasing. Substance abuse is also a risk factor for HIV because the effects of substance use impair one’s judgment, increasing the risk for unprotected and/or unsafe sex.

The AR Passion Project seeks to decrease substance abuse and HIV infection and transmission rates among low income, high risk heterosexual AA women with substance use disorders by: 1) active “street” and “agency” outreach that results in increased referrals and admissions of high risk AA women with a substance use disorder to BCD; 2) enhanced evidence-based, gender-specific, culturally competent, and trauma informed interventions that engage and retain women in treatment BCD; 3) BCD admission testing for HIV, VH, and other health issues including co-occurring substance use and mental health disorders; 4) referral, care coordination, and follow-up services for health care and transitional social support needs; and 5) continuous, data-driven quality improvement that incorporates the voices of clients, staff, and partners.