

WHY US?
LEFT BEHIND AND DYING



Video Curriculum Modules



**Lesson 3: HIV –
Poverty**

LEARNING WAS NEVER LIKE THIS



Lesson 3: Poverty

Standards:

Health:

1.12.2

1.12.3

1.12.6

2.12.4

2.12.10

5.12.2

5.12.4

8.12.1

8.12.3

Science:

7.1

7.5

7.6

8.2

8.3

Skills Practiced and Gained:

1.1—1.7

2.2—2.5

Overview

Poverty has a huge impact on the health of a community. People who live in poverty conditions often do not have access to regular medical care, drugs, healthy foods and other critical resources. Unfortunately, behaviors and practices that contribute to the spread of HIV and AIDS flourish in poverty conditions. In this lesson, explore the connections between income, access to resources and health. Can a poor person *afford* to get sick?



Key Concepts

Cost of healthcare and costs particular to treating HIV and AIDS

Impact of poverty on the proliferation of HIV/AIDS in the United States and Africa

Health disparities and access to healthcare

Materials for Activities and Educator Background Knowledge

Handout 3.1

List of costs associated with healthcare (included at the end of the lesson)

Handout 3.2

List of HIV medications and costs (included at the end of the lesson)

Flip chart paper (if exercise is done as a group)



Procedure

Part I

View the “Poverty” video module. After viewing the module use the following questions to facilitate group discussion or give the questions as prompts for journal entries.

Discussion / Journal Questions

- 1) **W**hat new information did you gather from the video module?
- 2) **H**ow does poverty contribute to the high rates of HIV/AIDS in African and African American Communities?
- 3) **W**hat other questions or comments do you have?



Part II

Access to medical resources can affect a person’s ability to fight off a disease from early to later stages. Likewise, access to critical resources can affect a person’s behavior in addressing health setbacks. Let’s examine the role poverty and wealth can play in a person’s life, health, and exposure to HIV/AIDS. You will be using **Activity 3.2** and **Handouts 3.1** and **3.2** which follow the lesson plan.

Activity 3.1

- 1) To get a better idea of the potential costs involved in treating a person with HIV. Use the information provided in **Handout 3.1**—list of costs for healthcare—and **Handout 3.2**—list of HIV medications and costs—to estimate probable annual costs incurred by an HIV positive person.
 - a) Let’s estimate the annual costs for a person 18—39 years of age. Do you think the cost will be different for males and females?
 - b) Include in the estimate that the person has two office visits to the doctor per month and that blood is drawn once a month. Assume that one of the office visits each year is a complete physical exam.
 - c) Find a range for the annual cost. You can do this by picking a less expensive HIV drug to estimate a lower annual cost and picking a more expensive HIV drug to estimate an upper annual cost.



Part II (continued)

Activity 3.2

- 1) **H**ave participants/students fill out the chart “Path of Two Lives,” *Activity 3.2*. You may want to do this portion as a group on flip chart paper.
- 2) **A**fter participants fill out the chart, have them analyze how access to economic resources can influence a person’s health and his/her exposure to HIV/AIDS and other diseases. Ask participants to discuss:

What have you learned about the connection between poverty and health?

What are some ways that access to healthcare can be equalized for individuals, no matter what their resources?

How can you, as an informed citizen, take action to equalize access to healthcare?

Closure

Activity 3.3

No matter what our resources, there are ways we can work toward preventing disease and maximize our health. Have workshop participants or students journal **(a)** what actions they can take to increase their health in general, **(b)** what resources they have access to, and **(c)** how they can maximize these resources for the prevention, diagnosis, and treatment of disease.

Activities and Educator Keys

The next four documents are *Handouts 3.1* and *3.2*; *Activity 3.2*; one possible option for the annual costs incurred by an HIV positive person in *Activity 3.1*; and one possible option for filling out the chart in *Activity 3.2*.

Why us? Curriculum



Handout 3.1



Fees for Basic Services - Effective 1/1/2011

These fees are for services you receive at HealthCare Partners Medical Group offices. HealthCare Partners Independent Physician Associations (IPAs) have their own fee schedules. Fees may change. Your actual out-of-pocket costs may be less, depending on your insurance coverage. Looking for the fees for other services? Please call the HealthCare Partners Patient Support Center at 800.403.4160.

Wellness Care

Pediatric Wellness Care (through age 17)					
AGE	SERVICE	FEE	AGE	SERVICE	FEE
< 1 year	Well Child Exam (New)	\$160	5-11 years	Well Child Exam (New)	\$165
	Hepatitis B Vaccine ^{1,2}	\$49		DTaP Vaccine ^{1,2}	\$34
	Hep-HIB Combo (Comvax) Vaccine ¹	\$60		IPV Vaccine ¹	\$36
	DTaP Vaccine (Daptacel) ^{1,2}	\$34		PPD (TB Test)	\$30
	IPV Vaccine ¹	\$36		MMR Vaccine ¹	\$94
	Rotateq Vaccine ^{1,2}	\$128		Varivax Vaccine ¹	\$163
	Plevnar Vaccine 13 ^{1,2}	\$248		Gardasil Vaccine ^{1,2}	\$246
Flu Vaccine ¹	\$20				
1-4 years	Well Child Exam (New)	\$170	12-17 years	Well Child Exam (New)	\$180
	DTP- HIB Combo (Trihibit) Vaccine ¹	\$57		Menactra Vaccine ¹	\$197
	IPV Vaccine ¹	\$36		Gardasil Vaccine ^{1,2}	\$246
	Plevnar Vaccine ^{1,2}	\$248		Adacel Vaccine ¹	\$75
	PPD (TB Test)	\$30			
	Hepatitis A Vaccine ¹	\$45			
	MMR Vaccine ¹	\$94			
Varivax Vaccine ¹	\$163				
Adult (Female) Wellness Care			Adult (Male) Wellness Care		
AGE	SERVICE	FEE	AGE	SERVICE	FEE
18-39 years	Physical Exam (New)	\$180	18-39 years	Physical Exam (New)	\$180
	Gardasil Vaccine ^{1,2}	\$246		PPD (TB Test)	\$30
40-64 years	Physical Exam (New)	\$190	40-64 years	Physical Exam (New)	\$190
	Mammogram	\$182		Chest X-ray	\$72
	Colonoscopy (facility fee additional)	\$854		EKG	\$46
	Dexa-Scan	\$200		Adacel Vaccine ¹	\$75
	Chest X-ray	\$72		Colonoscopy (facility fee additional)	\$854
	EKG	\$46		Prostate Screening	\$60-64
65+ years	Adacel Vaccine ¹	\$75	65+ years	Physical Exam (New)	\$220
	Physical Exam (New)	\$220		Flu Vaccine ¹	\$20
	Chest X-ray	\$72		Chest X-ray	\$72
	EKG	\$46		EKG	\$46
Flu Vaccine ¹	\$20				
Special Physicals					
All Adults	Sports Physical				\$50
	DMV Physical				\$85

Travel Immunizations

Travel Immunizations (Fees are per dose.)		
All Ages	Hepatitis A ¹	\$102
	Typhoid ¹	\$120
	Typhoid Capsules ¹	\$54
	Yellow Fever	\$130

Illness and Injury Visits

Illness and Injury Visits (at Medical Office, After-Hours, and Urgent Care)		
New Patient	Office Visit	\$68 - \$315
Established Patient	Office Visit	\$35 - \$221

Miscellaneous Services

Miscellaneous Services		
All Ages	Blood Drawing for Outside Laboratory Services	\$6
	Completion of Patient-Supplied Forms	\$15
	Copying of Medical Records	Ask

¹ Fees for administration of vaccination apply: First vaccine = \$38.00, each additional vaccine at same visit = \$20.00

² These immunizations/vaccinations are part of a series. Fees listed are for each vaccine in the series.

[New patient? Find a doctor.](#)

[Immunization Schedules](#)

<http://www.healthcarepartners.com/patients/basicservicefee.asp>



Handout 3.2

HIV Medications How Much Do They Cost?

(adapted from <http://aids.about.com/od/hivmedicationfactsheets/a/drugcost.htm>)

From Mark Cichocki, R.N., former About.com Guide
Updated April 28, 2009

For most people, insurance, drug assistance programs, or community resources pay most of the cost of HIV medications. What about those who are not so fortunate? While we know HIV medications are very costly, not taking them when they are needed can be even more costly. The following table will give you an idea just how pricey HIV medications can be (partial list of available drugs).

COST PER MONTH (estimates)	
Agenerase	\$772
Aptivus	\$1117.50
Crixivan	\$570.96
Emtriva	\$347.11
Epzicom	\$813.55
Fuzeon	\$2315.40
Hivid	\$273.00
Kaletra	\$796.26
Lexiva	\$658.99
Norvir	\$321.46
Rescriptor	\$316.35
Retrovir	\$405.59
Reyataz	\$892.91
Sustiva 600mg	\$499.43
Trizivir	\$1164.35
Videx EC 400mg	\$346.04
Viramune	\$442.45
Zerit	\$385.88
Ziagen	\$466.44

Source: Test Positive Aware Network; Annual HIV Drug Guide® 2006



Activity 3.2

The Path of Two Lives

Brainstorm ways these individuals are likely to experience HIV/AIDS.

Phase of Disease	Individual A: living in poverty conditions. Limited economic resources, limited access to education, no health insurance.	Individual B: living in comfortable economic conditions, access to education, has health insurance
Pre-exposure		
Exposure		
HIV infection		
Full Blown AIDS		
Final Stages of Life		



Key to Activity 3.1

Here is one possible estimate for annual costs for treating an HIV positive person, 18—39 years of age:

One Physical Exam	—				\$ 180.00
23 Office Visits	—	\$ 35— \$ 221 x 23	=		\$ 805.00 — \$ 5,083.00
(The 24 th office visit is the physical exam.)					
Blood drawing 12 times	—	\$ 6 x 12	=		\$ 72.00
Kaletra HIV Medication	—	\$796.26 x 12	=		\$ 9,555.12
Estimated Annual Cost			=		\$ 10,612.12 — \$14,890.12

NOTE: This estimate is one possible option and only takes into account expenses available in *Handouts 3.1* and *3.2*.



Key to Activity 3.2

The Path of Two Lives

Brainstorm ways these individuals are likely to experience HIV/AIDS.

Phase of Disease	Individual A: living in poverty conditions. Limited economic resources, limited access to education, no health insurance.	Individual B: living in comfortable economic conditions, access to education, has health insurance
Pre-exposure	Limited educational programs on HIV/AIDS, how to avoid transmission, safer sex education, etc. May as a result engage in risky behaviors or act from misinformation.	School and community programs on HIV/AIDS education, how to avoid transmission, safer sex, etc. May be less likely to engage in risky behaviors. May engage in behaviors with more protective measures using correct information
Exposure	Limited access to safer sex tools (clean needles, condoms, etc.). Limited access to early detection tools (HIV tests, etc.). Higher risk of infection.	Access to safer sex tools (clean needles, condoms, etc.). Access to early detection tools (HIV tests, etc.). Lower risk of infection.
HIV infection	Infection may not be caught early for medicines to have effect. Retroviral drugs are expensive, and the regimen is extensive. Virus takes hold more quickly, and other people in this individual's life may face an increased risk of infection.	Infection can be caught early so medicines have effect. Retroviral drugs are covered by insurance, and the person has the time and ability to stick to the regimen. Kept in check, and other people in this individual's life face lower risk of infection.
Full Blown AIDS	Lack of regular preventative care makes the person's exposure to other diseases high. Recovery time for frequent illness is high because there is limited access to restorative care.	Regular preventative care makes the person's exposure to other diseases lower. Recovery time for illness that does result is lower because there is limited access to restorative care.
Final Stages of Life	Limited health care access prevents individual from having facilities and caretakers that make the final stages more comfortable. The inability to work cuts off basic resources like food, shelter, and clothing.	Access to health care allows individual to take advantage of facilities and caretakers that make the final stages more comfortable. Hospice care and other insurance-provided services ensure food, shelter, and clothing.