



Bridge Counseling

And

Why do we need it?



Priorities for HIV Care

- **Link to medical care and supportive services**
 - Assure attendance at first appointment
- **Link to medication or resources**
 - ADAP, PAPs
- **Return to care**
 - Bridge counselors reaching out

Care = Prevention

- **Recent UNC study 052: HIV medication reduces transmission by 96%**
- **↓viral loads, ↑CD4s = people less able to transmit virus to partners**
- **Targeted testing for at-risk people**
- **Identifying the 19% who are “unaware”**
 - 7,000 in NC are unaware they are HIV+
- **Stat treatment for acute infections**
 - Reduces unknowing transmission

Bridge Counseling serves the critical role of linking and keeping people in care



Many methods of Bridge Counseling

- **State Bridge Counselors, in collaboration with DIS and**
- **Regional Bridge Counselors and**
- **County Bridge Counselors**

Work to assure that newly diagnosed clients are linked to care, attend appointments, assisted back into care when they fall out

