

Virginia HIV Community Planning Committee Meeting Summary

Members Present: Dan Alvarez, Odile Attiglah, Heather Bronson, Bill Briggs, Dr. Rosalyn Cousar, Hugo Delgado, Gregory Fordham, Caroline Fuller, Richard Hall, Robert Hewitt, Martha Lees, Elaine Martin, Nicholas Mattsson, Ruth Royster, Edward Strickler, Bruce Taylor, Silvia Villacampa

Members Absent: Rhonda Callaham (represented); Vontrida Custis (represented); Diane Gaillard; Robert Rigby

Other Attendees: Kathleen Carter, Pierre Diaz, Jennifer Flannagan, Ted Heck, Khalid Kheirallah, Shelley Taylor-Donahue of the Virginia Department of Health; Doris Lakey (representing Rhonda Callaham); Justine Annis (representing Vontrida Custis)

Total of 25 attendees

Welcome and Introductions

The meeting was called to order by Elaine Martin at 8:30 AM.

Old Business

➤ **Revised membership application/bylaws** - Jennifer Flannagan lead the discussion for revising the membership application to incorporate care and prevention. Elaine asked for suggestions for expanding the name to include "care" or to change the name to Community Planning Group, which would correspond with the acronym (CPG) used most often to identify the committee. Discussion then moved to revising the application. A motion was made to adopt the application as amended; the motion passed with one abstention.

New Business

- **New PEMS Coordinator** - Effective December 29, 2008, Ayana Andrews-Joseph joined the HIV Prevention team as the PEMS/Evaluation Coordinator. Ayana had served as the counseling and testing data manager in Health Informatics and Integrated Surveillance Systems since March 2008. She can be reached at the "PEMS" phone number (804-864-8017) or at Ayana.Andrews-Joseph@vdh.virginia.gov.
- **Part-time position to focus on MSM** - The request for approval of procurement has been approved for this position and the money has to be obligated by

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December 31, 2009. Elaine asked committee members to identify young black gay men to apply (ages 16-24) for the part-time (20 hours per week) position and for the advisory group. Anyone interested is asked to contact Jennifer Flannagan at jennifer.flannagan@vdh.virginia.gov. Once the position is filled, an advisory committee will be formed to work with this position. Elaine indicated that an advertisement should be going out this month to hire for this position and she will send out the date for the first meeting of the advisory committee. The decisions made by the advisory group will be reported back to the committee.

- **RFP Comprehensive Services to Inmates** – The Comprehensive HIV/AIDS Resources and Linkages for Inmates (CHARLI) grant program is a collaborative effort with HIV Care Services. The purpose of this program is to provide a continuum of services across the HIV prevention and care spectrum for incarcerated persons, prior to and after their release and covers all phases of case management. The proposals, which will be paid out of state funds, will be scored soon and Elaine Martin will announce the awards at February meeting.
- **Article on HIV reduction in the U.S.** - The following is an excerpt from a recent CDC Dear Colleague letter: *Analysis Shows an 89% Decline in HIV Transmission: Prevention Works!* “In early 2009, the Journal of Acquired Immune Deficiency Syndromes (JAIDS) will publish a research letter authored jointly by researchers at Johns Hopkins University and the Centers for Disease Control and Prevention (CDC). The letter will provide an updated estimate of the HIV transmission rate in the United States from 1977 through 2006 and offers an innovative way to measure the success of HIV prevention efforts nationwide. The on-line version of this letter can be found at www.jaids.com in the Publish Ahead of Print section for November 22, 2008.

...The analysis found that the rate of HIV transmission has declined by 89% since the peak of the epidemic and just in this past decade, the transmission rate has declined by 33%. This represents major successes in HIV testing and prevention that have resulted in reductions in the percentage and number of persons with undiagnosed HIV infection. It also likely reflects the effects of evidence-based behavioral interventions with people living with HIV and the increased availability of life-saving highly active antiretroviral therapy (HAART). These data provide further evidence that prevention does work when we apply what we know, and underscore the need to make HIV testing and effective interventions available to those who are living with HIV and at-risk for contracting the virus.”

- **National Black HIV/AIDS Awareness Day is February 7.** The theme for 2009 is “Black Life Is Worth Saving!” This annual observance day was created to raise awareness among African Americans about HIV/AIDS and its devastating impact on African American communities. NBHAAD is part of a national mobilization effort to get African Americans to learn more about

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the threat posed by the disease and to get educated, get tested, get involved, and get treated. VDH will soon be publishing statistical data as well as an event submission form to ensure that planned activities throughout the state are made public. For additional information, contact Ann Verdine-Lewis at 804-864-8008. To learn national information, visit www.blackaidsday.org.

- **Partners for Unlocking Syphilis and HIV (PUSH)** - VDH, Richmond City Health Department and 11 other agencies collaborated on a large-scale syphilis and HIV testing event on December 12th. PUSH was coordinated by Shawn McNulty of Fan Free Clinic in Richmond and media coverage was provided by Channel 12. Outreach, education and testing were provided at nine Richmond metro sites, with each site specifically selected based on cluster analysis techniques to reach the populations most at risk. The collaborative effort resulted in 138 HIV and 97 syphilis tests. There were six new HIV infections identified and referred for care. Multiple persons tested positive for syphilis and follow-up to confirm their diagnoses is still ongoing. A list of the sites, partners and other information can be found on a temporary web site created by Fan Free Clinic at <http://citywidepush.org/>.
- **General Assembly** – The 2009 Regular Session convenes, Wednesday, January 14, at noon. Hotline personnel are currently monitoring bills. For more information about the 2009 session, visit <http://legis.state.va.us>.
- **CDC Releases 2008 Compendium** – CDC has released online the *2008 Compendium of Evidence-based HIV Prevention interventions*. The *2008 Compendium* includes eight additional evidence-based behavioral interventions (EBIs), bringing the total of EBIs to 57. The *Compendium* is central to HIV prevention because it is a single source of information regarding interventions that represent the strongest behavioral HIV interventions in the literature to date. These interventions have been rigorously evaluated and have demonstrated efficacy in reducing HIV or STD incidence or HIV-related risk behaviors or promoting safer behaviors.

Membership

Paul Miller and Milinda Daye have resigned from the committee. Paul wants to devote time to new career opportunities and Milinda has begun a nurse practitioner program. Revised applications combining care and prevention will be mailed in February; new members will be chosen in March and April; new member orientation will take place in late April or early May; and the combined committee will meet at the May 29th meeting.

Unmet Need Estimates Among Virginians Living with HIV/AIDS, 2007 – Khalid Kheirallah

The “unmet need estimate” is a statistical method done annually to determine the approximate number of individuals in Virginia who are HIV-positive (HIV or

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AIDS), know their status, and are not receiving regular medical care. Mr. Kheirallah indicated the method used was comparing those individuals identified as of December 31, 2007 in E-HARS (electronic-HIV/AIDS Reporting System) compared with multiple sources such as the Virginia Client Reporting System (Ryan White Part B database), Medical Monitoring Project, LabCorp, AIDS Drug Assistance Program (Part B medication dispensing database) and others. Demographic estimates were shown by region, race/ethnicity/current age, gender and risk. Results showed a decrease of overall unmet need estimate from 62% in 2006 to 52.6% in 2007. Compared to 2006 data, VDH was able to more accurately determine the level of unmet need for Virginia in 2007 due to development of new data sources and collaborations. In 2009, VDH will continue to develop and expand relationships with other providers of HIV care with the goal of making the unmet need estimate for 2008 even more accurate. For more information, please contact Khalid at 804-864-8042 or khalid.kheirallah@vdh.virginia.gov.

CPG Bylaws/Subcommittees – Jennifer Flannagan

Jennifer explained that the goal today is to create a new set of bylaws instead of revising them, beginning with changing the name to the Virginia HIV Community Planning Group. Also, rework what CDC and HRSA require in the mission statement. Discussion also focused on the election of a care co-chair, prevention co-chair, and health department co-chair. Consensus was to have two community co-chairs, one representing care and the other representing prevention to work with the health department co-chair. Election will take place at the May 29th meeting.

HIV Care Services – Shelley Taylor-Donahue, HIV Care Services Planner

“Update on Statewide Coordinated Statement of Need (SCSN) – Final Survey Data Report” – prepared by Shelley and Oana Vasiliu, Lead Epidemiologist. VDH received 564 responses to the Health Care Needs Survey that was distributed throughout the state to collect input regarding HIV services needs for the SCSN and SCP processes. The SCP Advisory Committee has been meeting frequently to hammer out the goals and objectives for the next three years based on the information obtained from the SCSN surveys and other input. More than 60% of participants included contact information so that a report on how their feedback affected decisions on how VDH provides HIV care services in Virginia can be sent back to them. Shelley thanked all participants for their efforts in helping VDH provide responsive, compassionate and high quality services to people living with HIV/AIDS in Virginia. For more information about the SCP and SCSN, contact Shelley at 804-864-8013 or Shelley.Taylor-Donahue@vdh.virginia.gov.

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Update on Foto-Novela – Elaine Martin

The foto-novela, first developed in Spanish, and then translated to English, addresses stigma and access to care. The award went to Imagine Design in Charlottesville, VA/HMI Associates in DC. The ban on printing has been instituted but a pdf will be available on-line if this project is affected. In the future, Elaine would like to do a radio novella. There will also be no carryover dollars in 2009 from 2008, so there will be no radio ads for National HIV Testing Day. First 2000 copies will be published by Imagine Design so the printing ban will not apply.

Report on New Grantees – Community HIV Testing and High Risk Youth and Adults

Community HIV Testing Awards for 2009 – Total Award \$405,600

- ❖ **AIDS/HIV Services Group \$85,000** – ASG and its subcontractors will provide HIV testing in the Northwest region; targeted populations include men who have sex with men (MSM), transgender persons, injection drug users (IDUs), sex workers, incarcerated individuals and veterans with substance abuse disorders; will focus on African Americans and Latinos.
- ❖ **Fan Free Clinic \$126,000** - will continue serving the Greater Richmond area as a testing site targeting high risk heterosexuals, MSM, IDU and their partners.
- ❖ **Council of Community Services \$60,000** - will utilize HIV testing services to continue its established counseling, testing and referral program in the Roanoke Valley area. Targeted populations will be high risk or very high risk MSM, IDUs, non-injection drug users, transgender individuals and incarcerated men.
- ❖ **ACCESS \$107,000** - will partner with Tidewater AIDS Community Taskforce and Williamsburg AIDS Network to continue testing in the Eastern region. The agencies will target homeless, MSM, transgender persons, female sex workers, IDUs, and incarcerated persons. Services will focus on African Americans and Latinos.
- ❖ **Whitman-Walker Clinic \$87,000** - will continue HIV testing services in Northern Virginia. Populations targeted include MSM, IDU, high risk heterosexuals and the homeless. Services will focus on African Americans and Latinos. (Note: Contract has not been sent to Whitman-Walker Clinic; Elaine will be meeting with them. If it falls through, the RFP will go back out in northern Virginia because services must be provided there. Hugo Delgado stated that 800 HIV+ clients will be sent to other CBOs in northern Virginia for services.)

High Risk Youth and Adults Grant Program - Total Award \$350,000

- ❖ **AIDS/HIV Services Group \$55,000** – will target African American women, adults living with HIV/AIDS, and high risk youth in Charlottesville and surrounding counties.
- ❖ **Council of Community Services/The Drop-In Center Roanoke \$60,000** – will target homeless individuals in shelters and on the street and high risk youth in correctional facilities in the Roanoke Valley area.

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- ❖ **K. I. Services \$52,000** – will target high risk African American heterosexual females (particularly women to have, in the past six months, had an STD, unprotected sex in exchange for drugs or money, and/or unprotected sex with multiple partners) in Alexandria and Northern Virginia.
- ❖ **Minority Health Consortium, Inc. \$54,000** – will target people living with HIV/AIDS, high risk adults on probation/parole and incarcerated women in the Richmond metropolitan area.
- ❖ **Northern Virginia AIDS Ministry \$57,000** – will target lesbian, gay, bisexual and transgender youth in Falls Church and Northern Virginia.
- ❖ **Tidewater AIDS Community Taskforce \$72,000** – will target women who trade sex for money or drugs and the partners of these individuals in Newport News, and transgender women who trade sex for money or drugs and the partners of these individuals in Norfolk.

Summary of Regional Awards for HIV Prevention:

Comparison of 2008 HIV/AIDS cases with regional prevention funding - 2009 funding in eastern and northern have dropped; funding in SW, NW and Central increased due to a combination of how well the proposals were written and who applied, looked at HIV/AIDS case rates per 100,000 and 2009 funding levels, then lastly 2007 population size and 2009 funding. Statistics look different each year and Elaine stated she likes to see if there are trends or see if a region is falling behind. She is trying to nurture CBOs in under-funded areas but the problem is there are too few providers in those areas. VDH has fewer contracts now because of a combination of factors: prevention has gotten more complex, more expensive and there are fewer funding dollars available. It is now harder for a new organization to get funded. Areas can be tracked by poverty and unemployment and this might force VDH to look closer at the Southwest region. Also might be affected by vacancies in surveillance at VDH, not as many cases reported (this could be a reporting artifact).

Regional Funding Picture and Comparison – Elaine Martin will e-mail to members.

Subcommittees

Discussion followed that only ad hoc subcommittees should be formed as needed and that the existing subcommittees have served their purpose and should be discontinued. (This section is already in the bylaws and the standing subcommittee section will be deleted).

Global AIDS Program and Zambia – Elaine Martin

NASTAD has been funded through CDC's Global AIDS Program; some staff are in Zambia permanently. Others, like Elaine, go as a TA provider. Zambia's

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HIV/AIDS administration has the same problems as Virginia; Zambia just has them on a larger scale. Program is divided into provinces, districts, communities. Elaine worked at the district level (DATF). Zambia receives PEPFAR (President's Emergency Plan for AIDS Relief) funds. The goal of her visit was to strengthen the district task forces.

Budget Tables for 2006 and 2007 – Elaine Martin

Elaine showed slides of budget tables as VDH submitted them to CDC; they are best estimates. More spending on prevention for positives, less on community planning than ever before; zero dollars for research; decrease of cases among women but not men, especially MSM; should increase spending on Latinos. Elaine talked about fluctuation tendencies, depending on what programs are funded; better targeting now of high-risk populations. Also, VITA costs were reduced last year.

Review of November Meeting Summary

A motion was made to approve the January minutes as written.

Planning for February 27, 2008 Meeting

- ratify the new Bylaws
- update on regional funding
- inmate RFP awards
- update on combined care and prevention in other states - Jennifer Flannagan
- overview of SPAP and ADAP - Shelley Taylor-Donahue
- updated adult treatment guidelines (new glossary) – Silvia Villacampa
- training on Ryan White Part B services

The meeting was adjourned at 4:00 p.m.

Elaine Martin, Health Department Co-Chair Date

Kathleen Carter, Recording Secretary Date