

Houston Area HIV Services Ryan White Planning Council

Affected Community Committee Meeting

12 noon, Monday, March 20, 2017

Meeting Location: 2223 West Loop South, Room 240
Houston, TX 77027

AGENDA

- I. Call to Order Rodney Mills and
Tana Pradia, Co-Chairs
 - A. Welcome and Introductions
 - B. Announce who will be chairing the meeting
 - C. Moment of Reflection
 - D. Adoption of the Agenda
 - E. Approve the Minutes

- II. Public Comment
(NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up on the clipboard at the front of the room. No one is required to give his or her name or HIV/AIDS status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV/AIDS status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person with HIV/AIDS", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization. If you work for an organization, but are representing your self, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting.)

- III. Training: The Ryan White How To Best Meet the Need (HTBMN) Process Tori Williams
 - A. Sign Up for HTBMN Workgroup Meetings

- IV. Training: Staffing a Ryan White Booth

- V. Old Business
 - A. Road 2 Success Proposal
 - 1. Select partners for summer classes
 - 2. Determine topics
 - B. Assessing Needs of Transgender Community

- VI. New Business Tori Williams
 - A. Proposed Meeting: Tx. HIV Medication Program: 2 pm, May 18, 2017

- VII. Announcements
No committee meeting in April so that members can participate in the HTBMN training and workgroup meetings

- VIII. Adjourn

- IX. Members meet with committee mentor Teresa Pruitt

Houston Area HIV Services Ryan White Planning Council

Affected Community Committee Meeting

12 noon, Monday, February 27, 2017

Meeting Location: 2223 West Loop South, Room 532, Houston, TX 77027

MINUTES

MEMBERS PRESENT	MEMBERS PRESENT	OTHERS PRESENT
Rodney Mills, Co-Chair	Isis Torrente	Tash Traylor, RWGA
Tana Pradia, Co-Chair	Alex Moses	
Curtis Bellard		
Skeet Boyle	MEMBERS ABSENT	
Denis Kelly	Amber David	
Allen Murray	Herman Finley – excused	Office Of Support
John Poole	Arlene Johnson - excused	Tori Williams
Teresa Pruitt	Jacob Sandler	Rodriga Avila

Call to Order: Mills called the meeting to order at 12:05 p.m. and asked for a moment of reflection.

Adoption of the Agenda: **Motion #1:** *it was moved and seconded (Pruitt, Bellard) to adopt the agenda. Motion carried unanimously.*

Approval of the Minutes: **Motion #2:** *it was moved and seconded (Pruitt, Bellard) to approve the November 22, 2016 minutes. Motion carried. Abstentions: Kelly, Poole and Torrente.*

Nuts and Bolts for New Members: Williams reviewed the attached documents: *Nuts and Bolts for New Members, Open Meetings Act* and a memorandum regarding *End of Year Petty Cash Procedures*.

Public Comment: Committee members reviewed written public comment from Heather Keizman, see attached, which points out that consumers at local events have been asking to be referred to as “clients” instead of “patients” during presentations and in HIV-related documents. Since the Texas Department of State Health Services (DSHS) is currently looking for input into their proposed Standards of Care, **Motion #3:** *it was moved and seconded (Kelly, Allen) to recommend that the Council ask DSHS to use the word “client” instead of “patient” throughout the new Standards of Care. Motion carried.* Williams stated that this motion will move forward to the Quality Improvement Committee and be combined with other related motions made by the Quality Improvement Committee since they are reviewing the proposed Standards of Care.

New Business: Williams outlined the purpose of the Council, Public Hearings and Health Fairs, see attached power point slides. She also reviewed the purpose of the committee, see attached.

Road 2 Success Proposal: After reviewing and discussing the attached *Road 2 Success Proposal*, **Motion #4:** *it was moved and seconded (Pruitt, Torrente) to approve the proposal which expands Road 2 Success to five classes within a twelve month period and makes the initiative the responsibility of the Affected Community Committee. Motion carried unanimously.* Because the proposal was approved, the committee adjusted the *List of Monthly Topics and Off Site Locations*, the *2017 Critical Timeline* and the

2017 Monthly Meeting Dates and Times accordingly.

Community Events: Committee members signed up to assist with the AIDS Walk on March 5, 2017.

2017 Committee Goals: Williams reviewed the attached, recommended *2017 Committee Goals*. **Motion #3:** *it was moved and seconded (Pruitt, Bellard) to approve the 2017 Committee Goals as presented.* **Motion carried unanimously.**

Greeters: Volunteers signed up to be greeters at monthly Council meetings, see attached.

Elect Committee Vice Chair: Boyle agreed to serve as the Committee Vice Chair.

Announcements:

Guest, Tracy Gorden, thanked members for helping recruit applicants for Project LEAP 2017.

Adjourn: The meeting adjourned at 1:36 p.m.

Submitted by:

Approved by:

Tori Williams, Director Date

Committee Chair Date

What is the “How To Best Meet the Need” process?

Council members use data from needs assessments, client utilization reports, alternative funding sources and more to design services that are within HRSA guidelines and best meet the needs of the local consumers.

- ⌘ MARCH 20: The Affected Community Committee hosts a training for consumers and others on the How To Best Meet the Need process.
- ⌘ APRIL 13: Members of all committees are invited to come together to review information about service needs and alternative funding sources. The training starts at 1:30 pm, immediately after the April Council meeting adjourns.
- ⌘ **NEW:** APRIL 17: In 2016, the Council will host two special workgroups to address issues of concern that impact many services. At 10 am there will be a special workgroup to discuss the possibility of reinstating the *Emergency Financial Assistance* service category. At 1 pm there will be a special workgroup to look at ways to *Make Services More Accessible to the Transgender Community*.
- ⌘ APRIL 25 and 26: The Quality Assurance Committee hosts workgroups where all members of the community are invited to review each Ryan White funded service and recommend:
 - If the service should be funded with Ryan White dollars.
 - If the service needs to be changed so that it will better meets the needs of local consumers.
 - The financial eligibility for that service.

Over.... for the How To Best Meet the Need workgroup schedule.

All who attend the workgroup meetings must declare their conflict of interest and, although agencies can send more than one staff person to participate in the workgroup, only one agency representative can vote. No one can vote on a particular service category if they have a conflict of interest with that service category.

EXAMPLE OF A HRSA SERVICE CATEGORY:

Substance abuse services outpatient is the provision of medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting, rendered by a physician or under the supervision of a physician, or by other qualified personnel.

FY 2018 HOW TO BEST MEET THE NEED WORKGROUP SCHEDULE (Revised 03/07/17)
Houston Ryan White Planning Council, 2223 W. Loop South; Houston, TX 77027

TRAINING FOR ALL PARTICIPANTS:
1:30 p.m. ~ Thursday, April 13, 2017 ~ 2223 West Loop South, Room 532

SPECIAL WORKGROUPS:
Monday, April 17, 2017
10:00 a.m. Emergency Financial Assistance
1:00 p.m. Making Services More Accessible to the Transgender Community
2223 West Loop South, Room 532

All workgroup packets are available online at www.rwpcHouston.org on the calendar for each date below (packets are in pdf format and are posted as they become available).

Workgroup 1	Workgroup 2	Workgroup 3	Workgroup 4
10:30 a.m. Tuesday, April 25, 2017 Room #416	1:30 p.m. Tuesday, April 25, 2017 Room #416	3:00 p.m. Wednesday, April 26, 2017 Room #416	11:00 a.m. Tuesday, May 17, 2016 Room #240
Group Leaders:	Group Leaders:	Group Leaders:	Group Leaders: Nancy Miertschin & Curtis Bellard
<u>SERVICE CATEGORIES:</u> Clinical Case Management Non-Medical Case Management (Service Linkage at Test Sites) Vision Care Outreach Services Ambulatory/Outpatient Medical Care (includes Local Pharmacy Assistance, Medical Case Management and Service Linkage) – Adult and Rural Ambulatory/Outpatient Medical Care (includes Medical Case Management and Service Linkage) – Pediatric Only	<u>SERVICE CATEGORIES:</u> Health Insurance Premium & Co-pay Assistance Home & Community-based Health Services (Adult Day Treatment) [‡] Hospice Linguistic Services [‡] Medical Nutritional Therapy and Supplements Mental Health Services (Professional Counseling) [‡] Oral Health – Rural & Untargeted [‡] Substance Abuse Treatment/ Counseling	<u>SERVICE CATEGORIES:</u> Early Intervention Services (Incarcerated) [‡] Transportation (Van-based – untargeted & rural)	<u>SERVICE CATEGORIES:</u> Blue Book

Part A categories in **BOLD** print are due to be RFP'd.

[‡] Service Category for Part B/State Services only; Part B/State Services categories are RFP'd every year. **To confirm information for Part B/State Services, call 713 526-1016.**

FY 2016 Houston EMA/HSDA Ryan White Part A Service Definition Substance Abuse Services - Outpatient (Revision Date: 03/03/14)	
HRSA Service Category Title: RWGA Only	Substance Abuse Services Outpatient
Local Service Category Title:	Substance Abuse Treatment/Counseling
Budget Type: RWGA Only	Fee-for-Service
Budget Requirements or Restrictions: RWGA Only	Minimum group session length is 2 hours
HRSA Service Category Definition: RWGA Only	<i>Substance abuse services outpatient</i> is the provision of medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting, rendered by a physician or under the supervision of a physician, or by other qualified personnel.
Local Service Category Definition:	Treatment and/or counseling HIV-infected individuals with substance abuse disorders delivered in accordance with State licensing guidelines.
Target Population (age, gender, geographic, race, ethnicity, etc.):	HIV-infected individuals with substance abuse disorders, residing in the Houston Eligible Metropolitan Area (EMA/HSDA).
Services to be Provided:	Services for all eligible HIV/AIDS patients with substance abuse disorders. Services provided must be integrated with HIV-related issues that trigger relapse. All services must be provided in accordance with the Texas Department of Health Services/Substance Abuse Services (TDSHS/SAS) Chemical Dependency Treatment Facility Licensure Standards. Service provision must comply with the applicable treatment standards.
Service Unit Definition(s): RWGA Only	<p>Individual Counseling: One unit of service = one individual counseling session of at least 45 minutes in length with one (1) eligible client. A single session lasting longer than 45 minutes qualifies as only a single unit – no fractional units are allowed. Two (2) units are allowed for initial assessment/orientation session.</p> <p>Group Counseling: One unit of service = 60 minutes of group treatment for one eligible client. A single session must last a minimum of 2 hours. Support Groups are defined as professionally led groups that are comprised of HIV-positive individuals, family members, or significant others for the purpose of providing Substance Abuse therapy.</p>

Financial Eligibility:	Refer to the RWPC's approved <i>FY 2016 Financial Eligibility for Houston EMA/HSDA Services</i> .
Client Eligibility:	HIV-infected individuals with substance abuse co-morbidities/disorders.
Agency Requirements:	<p>Agency must be appropriately licensed by the State. All services must be provided in accordance with applicable Texas Department of State Health Services/Substance Abuse Services (TDSHS/SAS) Chemical Dependency Treatment Facility Licensure Standards. Client must not be eligible for services from other programs or providers (i.e. MHMRA of Harris County) or any other reimbursement source (i.e. Medicaid, Medicare, Private Insurance) unless the client is in crisis and cannot be provided immediate services from the other programs/providers. In this case, clients may be provided services, as long as the client applies for the other programs/providers, until the other programs/providers can take over services. All services must be provided in accordance with the TDSHS/SAS Chemical Dependency Treatment Facility Licensure Standards. Specifically, regarding service provision, services must comply with the most current version of the applicable Rules for Licensed Chemical Dependency Treatment. Services provided must be integrated with HIV-related issues that trigger relapse.</p> <p>Provider must provide a written plan no later than 3/30/16 documenting coordination with local TDSHS/SAS HIV Early Intervention funded programs if such programs are currently funded in the Houston EMA.</p>
Staff Requirements:	Must meet all applicable State licensing requirements and Houston EMA/HSDA Part A/B Standards of Care.
Special Requirements: RWGA Only	Not Applicable.

- Informal child care provided by a neighbor, family member, or other person (with the understanding that existing federal restrictions prohibit giving cash to clients or primary caregivers to pay for these services)

Program Guidance:

The use of funds under this service category should be limited and carefully monitored. Direct cash payments to clients are not permitted.

Such arrangements may also raise liability issues for the funding source which should be carefully weighed in the decision process.



Emergency Financial Assistance

Description:

Emergency Financial Assistance provides limited one-time or short-term payments to assist the RWHAP client with an emergent need for paying for essential utilities, housing, food (including groceries, and food vouchers), transportation, and medication. Emergency financial assistance can occur as a direct payment to an agency or through a voucher program.

Program Guidance:

Direct cash payments to clients are not permitted.

It is expected that all other sources of funding in the community for emergency financial assistance will be effectively used and that any allocation of RWHAP funds for these purposes will be as the payer of last resort, and for limited amounts, uses, and periods of time. Continuous provision of an allowable service to a client should not be funded through emergency financial assistance.

See AIDS Drug Assistance Program Treatments, AIDS Pharmaceutical Assistance, and other corresponding categories

Food Bank/Home Delivered Meals

Description:

Food Bank/Home Delivered Meals refers to the provision of actual food items, hot meals, or a voucher program to purchase food. This also includes the provision of essential non-food items that are limited to the following:

- Personal hygiene products
- Household cleaning supplies
- Water filtration/purification systems in communities where issues of water safety exist

Program Guidance:

Unallowable costs include household appliances, pet foods, and other non-essential products.

Service Category	<p>Is this a core service?</p> <p>If no, how does the service support access to core services & support clients achieving improved outcomes?</p>	<p>How does this service assist individuals <i>not in care</i>* to access primary care?</p> <p><i>*EIIHA: Early Identification of Individuals with HIV/AIDS</i> seeks to identify the status-unaware and link them into care</p> <p><i>*Unmet Need:</i> Individuals diagnosed with HIV but with no evidence of care for 12 months</p> <p><i>*Continuum of Care:</i> The continuum of interventions that begins with outreach and testing and concludes with HIV viral load suppression is generally referred to as the Continuum of HIV Care or Care Treatment Cascade.</p>	<p>Documentation of Need</p> <p>(Sources of Data include: 2014 Needs Assessment, 2012-2014 Comp Plan, 2013 Outcome Measures, 2013 Chart Reviews, Special Studies and surveys, etc.)</p>	<p>Identify non-Ryan White Part A or Part B/ non-State Services Funding Sources</p> <p>(i.e., Alternative Funding Sources)</p> <p>Is this service typically covered under a Qualified Health Plan (QHP)?</p>	<p>Justify the use of Ryan White Part A, Part B and State Services funds for this service.</p> <p>Is this a duplicative service or activity?</p>	<p>Service Efficiency</p> <p>Can we make this service more efficient? For:</p> <p>a) Providers</p> <p>b) Clients</p> <p>Can we bundle this service?</p> <p>Has a recent capacity issue been identified?</p>	<p>Recommendation(s)</p>
<p>Part 1: Services offered by Ryan White Part A, Part B, and State Services in the Houston EMA/HSDA as of 03-14-15</p>							
<p>Ambulatory/Outpatient Primary Medical Care (incl. Vision):</p>							
<p>CBO, Adult – Part A, Including LPAP, MCM & Svc Linkage (Includes OB/GYN) <i>See below for Public Clinic, Rural, Pediatric, Vision</i></p>	<p><input checked="" type="checkbox"/> Yes ___ No</p>	<p><input type="checkbox"/> EIIHA <input type="checkbox"/> Unmet Need <input type="checkbox"/> Continuum of Care</p>		<p>Covered under QHP? <input checked="" type="checkbox"/> Yes ___ No</p>			

‡ Service Category for Part B/State Services only.

Training for Staffing a Ryan White Booth at a Health Fair or Other Event
Questions for Role Playing
(as of 02-24-15)

1. Who is Ryan White?

ANSWER: See the attached description of Ryan White.

Key words: Indiana teenager
Hemophiliac with AIDS
Not allowed to attend school because of his AIDS status
Became a celebrity by asking for respect, compassion & the chance to live normally
Died in 1990 - the year Congress named the CARE Act after him

2. What does the Ryan White Program do?

ANSWER: The Ryan White Program is a Federal law that provides funds for local communities to develop and pay for core medical services for people already infected with HIV.

Key words: Law created by Congress/Federal law
\$20 million/year for the Greater Houston area (Harris and surrounding counties)
Provides medical services for people living with HIV/AIDS
Services include: primary medical care, drugs, dental care, mental health care, substance abuse treatment and case management.

3. What does the Ryan White Planning Council do?

ANSWER: The Planning Council is a group of 39 volunteers appointed by Judge Ed Emmett who are responsible for:

- a.) Assessing the needs of PLWH/A (Needs Assessment & special studies)
- b.) Deciding which services are the most important (prioritizing services)
- c.) Creating a community plan to meet these needs (Comprehensive Plan)
- d.) Deciding how much money should be assigned (allocated) to services funded by Ryan White Parts A and B and State Services money.

Key words: Design the system of care for people who are living with HIV/AIDS
Allocate funds to address the medical needs of PLWHAs

4. How much money can I get?

ANSWER: If you get medical care, drugs or case management services from places like Thomas Street Health Center, Legacy Community Health Services, HACS, or St. Hope Foundation then Ryan White dollars are probably paying for those services.

Key words: You get it through the services you receive.

5. Why did the Council take away or cut back on the _____ program, etc?

ANSWER: In 1990, Congress was not as strict about how Ryan White funds could be used. AND, people were also dying within six months of diagnosis. Now, because the drugs are better, more people are living longer and they have a better quality of life. But, the drugs are expensive and Congress is not allocating enough money to keep

up with the number of people who are newly coming into care or living with the disease 10, 20 years. The purpose of the Ryan White Program has always been to get people into medical care. In the last couple of years Congress has become more restrictive in the use of the funds. The Council risks losing funds if they do not allocate 75% of all the money to core medical services (drugs, primary care, dental care, mental health care, substance abuse treatment and case management) and they must allocate the other 25% of the funds to things like transportation to and from medical appointments.

Key words: People with HIV/AIDS are living longer
Fewer dollars available to care for more and more people
Purpose of the money is to provide MEDICAL care

6. Are you positive?

ANSWER: That is a personal question and I don't talk about my personal health with strangers (people I don't know well). OR, if I am, does it matter? OR, Why is it of interest to you? The important thing is for all people to be tested and know their own status.

Key words: None of your business OR
I do know my status, do you know yours?

7. Where do I get help?

ANSWER: The Blue Book lists services available to people with HIV/AIDS in the 10-county area. Let's look up case management and I will show you where someone can go to get a social worker that will help a PWA get services they are eligible for.

Key words: The Blue Book

8. How can I sign up to be an HIV/AIDS volunteer?

ANSWER: 1.) If you want to work one-on-one with PLWHAs, look in the Blue Book under "Volunteer Opportunities" (page 86) and call any of the agencies listed.

2.) To apply to become a member of the Ryan White Planning Council you can:

- a.) Fill out a yellow application form to become an external committee member. If there is a vacancy and you are assigned to a committee, you will be asked to attend a meeting approximately once a month.
- b.) Fill out a green application form to apply to become a member of the Planning Council. If there is a vacancy and Judge Emmett appoints you to the Council you will have to attend monthly Council meetings and at least one monthly committee meeting. It can take many years to be appointed to the Council and sometimes there are not enough vacancies to appoint an applicant. So, we recommend that you apply for both and get to know how the Council works through your involvement on a committee.

Key words: Do you want to work one-on-one with clients or design the system that serves 11,000 clients?

Who was Ryan White?

Ryan White was born December 6, 1971 in Kokomo, Indiana. At three days old he was diagnosed with severe Hemophilia and doctors began treating his condition with a new clotting medication that was made from blood. In December 1984, while in the hospital with pneumonia, Ryan was diagnosed with AIDS – at some point he had been infected with HIV by a tainted batch of medication. His T-cell count was 25.

When his health improved he wanted to return to school, but school administrators voted to keep him out for fear of someone getting AIDS. Thus began a series of court battles lasting nine months, while Ryan attended class by phone. Eventually, he won the right to attend school but the prejudice was still there. He was not welcome anywhere, even at church.

The controversy brought him into the spotlight and he became known as the ‘AIDS boy’. Many celebrities supported his efforts. He made numerous appearances around the country and on television promoting the need for AIDS education to fight the stigma faced by those infected by the disease; his hard work resulted in a number of prestigious awards and a made for TV movie.



Ryan on ABC News
with Ted Koppel



Ryan at home with his
mother, Jeanne, in 1987

For the most part, Ryan was a normal, happy teenager. He had a job and a driver's license, he attended sports functions and dances and his studies were important to him. He looked forward to graduating high school in 1991.

On April 8, 1990, Ryan passed away at Riley Hospital for Children in Indianapolis. He was 18 years old.

In honor of this courageous young man, the United States Congress named the federal law that authorizes government funds for medical care to people living with HIV and AIDS the Ryan White Care Act.

Since 1990, the Houston area has received over \$300 million in Ryan White Program funds.

Project L.E.A.P.

Learning, Empowerment, Advocacy and Participation

What is Project L.E.A.P.? Project LEAP is a free 17-week class that teaches people how they can help plan for and design the HIV prevention and care services that are provided in the greater Houston area. The class is open to everyone, especially those who are HIV positive.

The goal is to train people living with HIV/AIDS so that they can participate in local HIV/AIDS planning activities by serving on a planning body, such as the Ryan White Planning Council or the City of Houston HIV Prevention Community Planning Group (CPG).

What will I Learn?

Some of the topics covered in class include:

- Parliamentary Procedure (Robert's Rules of Order)
- HIV 101
- The History of HIV in the Houston Area
- HIV trends in the Houston area for populations such as African Americans, Hispanics, Women, Youth, Heterosexuals, Transgender, etc.
- HIV trends in the Houston area and available services for people with mental health issues, substance abuse issues, the homeless and the incarcerated/recently released.
- HIV and Co-infections, HIV and Chronic Diseases, HIV and Stigma
- Designing HIV Services
- The Ryan White Program Service Prioritization and Funding Allocation Process
- HIV Prevention in the Houston Area

Additional class activities may include:

- Attend a Ryan White Planning Council and Committee meeting.
- Attend an HIV Prevention Community Planning Group (CPG) Meeting.
- Attend a community meeting of your choice.
- Leadership skills and team building.
- Introduction to National, State, and Local HIV plans.
- Class Needs Assessment project and presentation to the Planning Council.

When Does the Class Meet? Wednesdays, 10:00 am – 2:00 pm OR 5:30 pm – 9:30 pm

Lunch or dinner will be provided. Assistance with transportation and child care is available.

How Do I Apply?

A brief application and in-person interview are required. Applications are available by mail, fax, email, and can also be picked up in person or completed online.

If you have questions about Project L.E.A.P. or the application process, please contact the Ryan White Planning Council Office of Support at 713-572-3724 or visit www.rwpcHouston.org

2017 Road 2 Success/Camino hacia tu Salud

(Affected Community Committee Approved 02-27-17)

Proposed change: Move Road 2 Success/Camino hacia tu Salud under the auspices of the Affected Community Committee.

Goal: Increase participation in Road 2 Success by:

- Hosting 2 two- hour Road 2 Success meetings in partnership with other consumer groups between February and October 2017. These meetings will be held at the location where the partner typically hosts meetings with consumers. Example: a large support group, community advisory group (like Thomas Street Advisory Council), HIV housing complex, etc.
- In November 2017 and January 2018 the Committee will host 3 four-hour Road 2 Success events. Advertise to those who attended the shorter classes, as well as the general HIV community, to increase participation and build momentum for the half day classes. The location for the four-hour classes could continue to be the Montrose Center and the Leonel Castillo Community Center.

Format for the two-hour Road 2 Success meetings:

Hour 1: A speaker and a consumer will team up to present information that is relevant to the partner group.

Hour 2: A focus group in which consumers can talk about barriers to their care and ways to improve services. The Health Planner for the Office of Support and the Project Coordinator for Ryan White Grant Administration will facilitate the focus group portion of the class. The findings from the focus groups and the *We Are Listening* class will be reported to the Affected Community Committee in February of each year so that the findings can be used in the How To Best Meet the Need process and to develop content for future Road 2 Success/Camino classes.

Affected Community Committee Meeting Schedule:

See page 2.

(OVER)

PROPOSED

2017 Affected Community Committee Meeting Schedule

January - 2 four-hour Road 2 Success Classes (*Camino* and *We Are Listening*)

February – Committee orientation and training.

March - Training for the How To Best Meet the Need process (HTBMN).

April - No meeting so members can participate in HTBMN training & workgroups.

May – Organizational meeting for 2 two-hour Road 2 Success Classes

June – FIRST 2-HOUR ROAD 2 SUCCESS CLASS @ Thomas St. Health Center?

July – SECOND 2-HOUR ROAD 2 SUCCESS CLASS in Spanish @ Chris Escalante's support group?

August - Standards of Care Training

September - Consumer-Only Workgroup on Standards of Care

October - Organizational meetings for December and January Classes

November – One 4-hour Road 2 Success/Camino Classes

December – One 4-hour Road 2 Success/Camino Classes - in Spanish?

January - One 4-hour Road 2 Success Class (*We Are Listening* format)

250 Sites Participated In Listening Session With The Transgender Community

December 21, 2016 • By [Caroline Talev, MPA, Public Health Analyst, Office of HIV/AIDS and Infectious Disease Policy, U.S. Department of Health and Human Services](#)



The HHS Office of HIV/AIDS and Infectious Disease Policy (OHAIDP) recently convened a community listening session to hear about the ways that the [Secretary's Minority AIDS Initiative Fund \(SMAIF\)](#) might help to further improve HIV prevention and care for transgender women of color. Transgender women of color have extremely high rates of HIV that are driven and compounded by other health issues, socioeconomic barriers,

transphobia, discrimination, and other challenges. Too often, the community's needs are overlooked or addressed in ways that are not optimal.

The SMAIF promotes innovation, addresses critical emerging issues, and has established new collaborations across federal agencies to improve the national response to HIV and to create lasting changes in programs that improve the quality, efficiency, and impact of HIV programs that serve racial and ethnic minorities. The listening session provided an important opportunity to hear from community members about their recommendations for how they believe SMAIF might leverage existing resources to improve the response to HIV and AIDS among transgender women of color. Leaders from a variety of organizations from across the nation volunteered on a first-come, first-served basis to answer the following questions:

1. What are the most important barriers to improving HIV prevention and care for transgender women of color that you think the SMAIF might help address?

2. What are your recommendations for activities to address these barriers?

The community speakers included:

1. JoAnne Keatley, MSW, Director, Center of Excellence for Transgender Health, University of California, San Francisco (UCSF)
2. Kim Watson, Co-Founder/Vice-President, Community Kinship Life
3. Leo Rennie, Senior Legislative and Federal Affairs Officer, American Psychological Association
4. Cecilia Chung, Senior Strategist, Transgender Law Center
5. Tonia Poteat, PhD, MPH, PA-C, Assistant Professor, Center for AIDS Research, Johns Hopkins University Bloomberg School of Public Health
6. Luis Freddy Molano, MD, Vice President of Infectious Diseases and LGBTQ Programs, Community Healthcare Network
7. Octavia Lewis, MPA, Project Manager, Bronx-Lebanon Hospital
8. Sean Coleman, Executive Director, Destination Tomorrow
9. Danielle Castro, MA, Project Director, Center of Excellence for Transgender Health, UCSF
10. Bamby Salcedo, President and CEO, TransLatin@Coalition

These speakers shared their knowledge, passion, and recommendations during the session. Several themes emerged, including:

- Ensure that HIV providers and staff provide gender-affirming and nondiscriminatory health care and service environments.
- Capture accurate data for the transgender community in CDC surveillance and other data systems.
- Support efforts to address social determinants of health, including mental health services.
- Address disparities of transgender youth, including the risk of bullying and its consequences.
- Increase evidence-based interventions for community-based projects.
- Actively recruit in the transgender community and provide leadership opportunities and training so that transgender people can lead efforts to design and implement programs and policies that serve the transgender community.

Dr. Richard Wolitski, Director of the HHS Office of HIV/AIDS and Infectious Disease Policy (OHAIDP), moderated the session and provided opening remarks. He was followed by Dr. Amy Lansky, Director of the White House Office of National AIDS Policy (ONAP) who spoke about the [NHAS](#) and the transgender community, as well as highlighting the three new developmental indicators that the White House released on [World AIDS Day 2016](#). One of the developmental indicators is to “increase the percentage of transgender women in HIV medical care who are virally suppressed to 90%.” Following Dr. Lansky, Dr. Timothy Harrison, Senior Policy Advisor in OHAIDP, discussed the purpose of [SMAIF](#), its unique role, and the types of projects that have been funded.

The listening session was recorded and the recommendations will be shared with HHS partners, along with written submissions. I encourage you to listen to the session and review the presentation because the data clearly show very high rates of HIV infection among transgender women of color, poorer health care outcomes among women living with HIV, and other disparities. We have the knowledge and effective tools to create a future in which transgender women do not experience these disparities and we can end new HIV infections. The time to act is now.

Download the listening session [recording](#). [MP3 12 MB]

Download the [speakers' slide-presentations-and-other-recommendations-received](#) [PDF 4,331 KB]



[Sign up to receive email updates of AIDS.gov blog posts \(and more!\)](#)



Learn more about
METROLift and other
services by visiting us at
RideMETRO.org, or call
METROLift Customer Service
at **713-225-0119**.

METROLift Feeder Service Pilot Informational Sessions

Learn more about METROLift's
new flexible transportation
option! Ride **FREE** when you
take a METROLift trip from home
to a METRO transit center, Park
& Ride, or METRORail station.

Service starts **January 1, 2017**.



To learn more, please plan to attend one of the following informational sessions:

January 10, 2017

Third Ward Multi-Purpose Center
3611 Ennis St.
Houston, Texas 77004
10 a.m. - 12 p.m.

January 11, 2017

Kashmere Multi-Purpose Center
4802 Lockwood Dr.
Houston, Texas 77026
10 a.m. - 12 p.m.

January 12, 2017

Houston Center for Independent Living
6201 Bonhomme Rd.
Houston, Texas 77036
10 a.m. - 12 p.m.

January 17, 2017

Trini Mendenhall Community Center
1414 Wirt Rd.
Houston, TX 77055
11 a.m. - 1 p.m.

January 19, 2017

West Gray Multi-Services Center
1475 W. Gray
Houston, TX 77019
11 a.m. - 1 p.m.

**For more information call
713-615-6241 to speak with a
customer service representative.**

