

EIIHA Workgroup Motions: FY 2018 EIIHA Target Populations
09/21/2017

The EIIHA Workgroup met on September 21, 2017. Participants included representatives from prevention and care, community members, and consumers. The Workgroup reviewed the FY 2018 guidance from HRSA, adopted selection criteria, and selected the FY 2018 target populations.

Item: FY 2018 EIIHA Plan Target Populations

Recommended Action: Motion: Approve the following target populations for the FY 2018 EIIHA Plan:

1. African Americans
2. Hispanics/Latinos age 25 and over
3. Men who have Sex with Men (MSM)

Office of Support is to include information on HIV and aging in the EIIHA section of the HRSA application.

Recommended Action: Motion: Office of Support is to include a statement in the EIIHA section of the HRSA application recognizing that currently available epidemiologic data do not portray the need for testing, referral, and linkage in at-risk populations such as among those who are transgender, intersex, homeless, or those released from incarceration.

The only change from the FY 2017 EIIHA Plan target populations is the inclusion of Hispanics/Latinos ages 25-34 into the second populations, which was formerly Hispanics/Latinos age 35 and over. The EIIHA Workgroup determined this inclusion was necessary as, while ages 35 and over were indicated through late diagnosis data, individuals within this data element likely acquired HIV in the 25-34 age range. Creating and supporting initiatives intended to reduce late diagnoses and increase early identification would need to include this age range as well.

The Comprehensive HIV Planning Committee will meet on Thursday, September 28, 2017 at 11:00 a.m. to review and approve the FY 2018 EIIHA Plan target populations.

All are welcome to provide public comment at the September 28th Comprehensive HIV Planning Committee meeting. Those unable to attend are encouraged to provide input via phone, email or fax to Amber Harbolt no later than Thursday, September 28, 2017 at 9:00 a.m. Those submitting input via email or fax are encouraged to call to confirm receipt.

Input can be submitted via:

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