



## **CONSUMERS' COMMITTEE**

Tuesday, July 21, 2015, 1:00 – 3:00 PM

LGBT Community Center, 208 West 13<sup>th</sup> Street, Rm 101, New York, NY

**Planning Council Members Present:** David Martin (Co-Chair), Billy Fields (Co-Chair), Randall Bruce (Consumer At Large), Saul Reyes, Kim Watson

**Planning Council Members Absent:** Lotus Blackman, Altirik Harper, Harry Jackson, Jesus Maldonado, Carlos Rosario

**Appointed Community Members:** Jose Colon-Beredecia, Yves Gebhardt, Ron Joyner, Glen Phillip

**Guests:** Mark Browne, Russell Stevens, John Schoepp

**NYCDOHMH:** Jan Carl Park, Lucia Torian, Ph.D., Darryl Wong

### **MEETING MATERIALS DISTRIBUTED:**

- Meeting Agenda;
- April 21, 2015 & June 16, 2015 Meeting Minutes;
- Steps to Care Overview, Educational Development Corporation, July 2015;
- Announcement of New York State Regional ETE Discussions, Summer/Fall 2015;
- Announcement of New York State ETE Summer/Fall Webinar Series 2015;
- Ending the Epidemic in NYC – Project Fiscal Impact, Housing Works/TAG, March 2015;
- HIV Among Transgender Persons in NYC, 2009-13, NYCDOHMH, February 2015;
- HIV Among Transgender Persons in NYC, 2008-12, NYCDOHMH, March 2014;
- HIV Among Transgender Persons in NYC, 2005-09, NYCDOHMH, February 2011;
- Characteristics of Transgender Women Living with HIV Receiving Medical Care in the US; Mizuno, Frazier, Huang and Skarbinski, CDC, LGBT Health, Vol 2, No. 0, 2015;
- Behavioral and Clinical Characteristics of Persons Receiving Medical Care for HIV Infection, Medical Monitoring Project, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, Division of HIV Prevention, Centers for Disease Control & Prevention, United States, 2010;
- Findings of a Comparative Analysis, NYCDOHMH HIV Among Transgender Persons, 2005-09, Private communication, June 2015;
- Know the Difference, Teaching Tolerance;
- HIV Workforce Lack Science & Treatment Knowledge to End the HIV/AIDS Epidemic, adapted from the Black AIDS Institute, Feb 5, 2015;
- Measuring HIV Stigma & Discrimination Among Health Facility Staff, Comprehensive Questionnaire, Washington, D.C>, Future Group, Health Policy Project;
- A brief, standardized tool for measuring HIV-related stigma among health facility staff: results of field testing in China, Dominica, Egypt, Kenya, Puerto Rico, St. Christopher & Nevis, Journal of the International AIDS Society, 16 (Suppl 2)-18718, 2013;
- NYCDOHMH HIV/AIDS Bi-Weekly Update, July 14, 2015;
- July 2015 Meeting Evaluation;
- August 2015 HIV Planning Council Calendar; and
- POZ Magazine, July/August 2015.

## **WELCOME/INTRODUCTIONS/REVIEW OF MINUTES**

*David Martin and Billy Fields, Co-Chairs of the Committee* opened the meeting, followed by participant introductions. A moment of silence was observed in honor of friends and colleagues who have passed recently. The meeting agenda and meeting packet contents were reviewed. The April 2015 and June 2015 minutes were accepted by acclamation. Due to missing June 2015 meeting evaluations, the summary evaluation for that meeting was not included in the meeting packets.

**PUBLIC COMMENT:** There was no public comment.

## **NY PLANNING COUNCIL /CONSUMER COMMITTEE UPDATES**

The Rules and Membership Committee is continuing its discussions on the absorption of the Tri County Steering Committee and has reviewed nearly two dozen applications for appointment to the Planning Council and has completed interviews with candidates vetted by the Committee. The recommended slate of appointments will be brought to the Executive Committee for approval and then will be forwarded to the Mayor's Office on Appointments for further vetting and final approval.

An educational video, *Steps to Care*, produced by the Educational Development Corporation, was viewed by the Committee. *Consumers' Committee* Co-Chair David Martin appeared in the video, underscoring the importance of coordination of the three major strategies employed by the Care Coordination model: Patient Navigation, Care Team Coordination and HIV Self-Management. The client is that the center of STEPS to Care. Through working with their patient navigators and the rest of the care team, clients learn to take charge of their own health outcomes. The video may be viewed at [www.stepstocare.edc/overview/strategies.com](http://www.stepstocare.edc/overview/strategies.com)

*The PSRA Committee* will review the entire portfolio and the service category ranking system in the Fall of this year. The committee has also begun the discussion regarding the establishment of L-PAPs, or local Pharmacy Assistance Programs for persons who are living with HIV and are also co-infected with Hepatitis C and are eligible, under current clinical guidelines, to receive the new class of recently-approved antiviral medications to treat and cure Hep C. However, current fiscal and logistic barriers have prevented ADAP from including these medications in their formulary for co-infected persons. The FY16 application spending plan and PSRA ranking of service categories will be included in the Committee's report to the Executive Committee on July 23.

*Needs Assessment Committee* Co-Chair H. Daniel Castellanos has suggested that a meeting be arranged between the consumers and members of the NAC to discuss data-related needs, including more user-friendly informational fact sheets and briefings targeting consumers as the audience.

The *Integration of Care Committee* has approved the Early Intervention Service Directive and was recently approved by the Planning Council. The Legal Services Directive is next in line for review. Since we are able to develop the directive guided by locally determined needs, the IOC committee is meeting tomorrow to finalize and approve, if applicable, this directive. All legal services must be HIV related in nature in order to be included in the directive.

The Finance Committee will be reviewing Base and MAI 4<sup>th</sup> quarter close out reports as well as the Planning Council support budget at the Executive Committee on the 23<sup>rd</sup>.

## **ENDING AIDS 2020 – BLUEPRINT TO ACTION**

The New York State AIDS Institute convened an all-day symposium on July 8 addressing strategies for ending the epidemic. Dan O'Connell, Director of the AIDS Institute at the NYSDOH, Dr. Demetre Daskalakis, Assistant Commissioner of the Bureau of HIV/AIDS Prevention & Control at the NYCDOHMH and Glenda Testone, Executive Director of the LGBT Community Center led a workshop

“Mobilizing for ETE Blueprint Implementation” which outlined the steps each community must take and the roles government, providers, advocates and community will play to translate the ETE Blueprint from recommendations into concrete actions. The video clip, focusing on the City’s role and Dr. Daskalakis recommendations, was screened but members were unable to view it in its entirety due to technical difficulties. The entire video of the event may be accessed at <http://www.totalwebcasting.com/view/?func=VOFF&id=nysdoh&date=2015-07-08&seq=1>

### **PRESENTATION: HIV AMONG TRANSGENDERPERSONS IN NYC, 2009-13**

Darryl Wong introduced Lucia Torian, Ph.D., Deputy Director of HIV Epidemiology & Field Services Program at the NYCDOHMH, who presented the results of the surveillance study of HIV among the Transgender population in New York City from 2009-13. After describing some of the challenges of performing surveillance among populations where there is not uniform disclosure (due to many reasons, including lack of trust on behalf of the client/patient towards the provider) and addressing some of the shortcoming of previous studies, the following points were noted:

- Transgender status, as defined by the NYCDOHMH HIV/AIDS Surveillance Program includes persons whose current gender identity differs from their sex assigned at birth or persons who are classified as transgender can be of any sexual orientation, and may or may not have received hormone therapy or sex re-assignment surgery.
- Transgender status is collected routinely since 2005 for newly reported cases; status must be reported by medical provider as transgender or documented in medical record, either of which may reflect patient report; requires accurate collection of both sex assigned at birth and current gender identity; classifies all transgender persons as one of *Transgender Woman (MTF)*, or male-to-female, male sex assigned at birth and identifies as a woman or *Transgender Man (FTM)*, or female to male, female sex assigned at birth and identifies as a man.
- There were 212 new diagnoses of HIV among transgender person in NYC in 2009-13, of which 210 diagnoses were among transgender women (MTF,99%) and 2 diagnoses among transgender men (FTM, 1%). This figure includes 22 diagnoses of HIV concurrent with AIDS (10%) in 2009-13. Transgender persons comprised 1% of all new HUV diagnoses in NYC in 2013.
- There were 42 new HIV diagnoses in 2013 (42 transgender women - MTF, 100%)/ This figure includes 3 diagnoses of HIV concurrent with AIDS (7%) in 2013; transgender persons comprised 1% of all new HIV diagnoses in 2013.
- Newly diagnosed transgender women (MTF) were predominately in their 20s. Newly diagnosed transgender men (FTM) were in the 20s and 30s.
- About 93% of transgender women (MTF) newly diagnosed with HIV between 2009 and 2013 were black or Hispanic. New- diagnosed transgender men (FTM) were Hispanic and White.
- Sex with a male was the predominant type of HIV risk among newly-diagnosed transgender women (MTF) and men (FTM).
- The Bronx, Brooklyn, Manhattan and Queens were each home to about 20% of newly-diagnosed transgender women (MTF). Newly-diagnosed transgender men (FTM) lived in the Bronx or Brooklyn.
- The highest numbers of newly-diagnosed transgender persons lived in West Queens, Chelsea-Clinton, Bedford Stuyvesant-Crown Heights and Fordham- Bronx Park.

- Among transgender persons new-diagnosed with HIV, 22% were foreign-born (n=47), of whom more than ¾ were from Central America (incl. Mexico) and the Caribbean.
- Among the 210 newly-diagnosed transgender women (MTF), 49% had documentation in their medical record or by their provider of a history of at least one of the characteristics presented above, compared with 31% of non transgender persons.
- Newly-diagnoses transgender persons were more likely than non-transgender persons to be in their teens or 20s and born in the US. Transgender and non-transgender persons were about equally likely to have injected drugs.
- The term “HIV diagnoses” include diagnoses of HIV (non-AIDS) and HIV concurrent with AIDS (AIDS diagnosed within 31 days of HIV) unless otherwise specified; New HIV diagnoses include individuals diagnosed in NYC during the reporting period and reported in NYC.

The complete handout can be accessed at <http://www.nyc.gov/html/doh/html/dires/hivepi.shtml>

#### **PUBLIC COMMENT/NEW BUSINESS/BOROUGH UPDATES**

Co-Chair David Martin announced that he has not submitted an application for re-appointment to the Planning Council and consequently, will be stepping down in his role as Committee Co-Chair for personal and professional reasons. However, he assured members that he will continue to participate in Planning Council activities, committees and other related events.

#### **ADJOURNMENT**

There being no further business, the meeting was adjourned.