

***HIV Prevention Planning Council (HPPC)
and HIV Health Services Planning Council***

**Points of Integration between Prevention & CARE
Tuesday, September 19, 2006
3:30 – 5:30 PM**

Minutes

Members Present: Tracey Packer, Ed Byrom, Thomas Knoble, Ken Pearce, Michelle Bakken, Billie-Jean Kanios, Matt Jennings, Colin Partridge, John Melichar, Derrick Mapp, Angie Baker

Absent: William Blum, William Bland

Staff present: Vincent Fuqua (HPS), Michael Paquette (HPS) Joseph Cecere (DPH), Aimee Crisostomo (Harder+Co.), and Joe Lynn (note taker)

Guests: Michael Discepola, Tim Vincent (California STD/HIV Prevention Training Center), Doug Sebesta (Disclosure Initiative), Buzz Bense (Disclosure Initiative)

1. Welcome, Introductions, and Announcements

Committee Co-chair Ed Byrom called the meeting to order at 3:32.

Prevention with Positives conference will be held in Ontario, California in October. There was a discussion of the conference's usefulness and its goals. PWP providers have been invited to attend.

2. Public Comment

Doug Sebesta and Buzz Bense spoke on behalf of the new Disclosure Initiative. Doug gave an update on the pilot trainings for the disclosure initiative. He encouraged committee members to participate in the pilot trainings and give feedback to improve future trainings. The next pilot trainings are scheduled for September 25 and October 2 for prevention providers. He also encouraged providers to bring their clients to the trainings as they may also provide good input.

3. Approval of minutes from 8/1/06 meeting (vote)

Motion (Baker/Pearce) to approve the minutes from 8/1/06 passed unanimously with Baker abstaining.

4. Committee Business:

- **Report from HIV Prevention Planning Council (HPPC)**

Co-Chair Byrom reported on the steering committee. There is a climate problem at the Quaker meeting house and there was discussion around having dogs or pets at HPPC meetings; both items will have a resolution at the next Steering Committee meeting. There was also a

discussion about having a moment of silence at meetings and the resolution was to have one as needed and as appropriate.

IPR was discussed and the questions that the council asked were answered and the narrative was approved.

- **Report from HIV Health Services Planning Council (HSPC)**

The next Care Council meeting would include presentations from the Centers of Excellence. The annual summit had reprioritized summit on the basis that no change would be made in the governing rules. Any anticipated cuts would take into account protecting small agencies. The Mayor's task force on HIV housing would study diversion of funding streams so to minimize any disruption. Council Chair Randy Allgaier was stepping down, and a new chair would be elected.

5. Follow-up on Disclosure (vote)

- **Present draft Motion**

RECOMMENDATION 1. Disclosure services, as a vital part of HIV prevention in San Francisco, should be client-centered, culturally competent, and incorporate a harm reduction approach.

The Points of Integration between Prevention & Care Committee (POI) recommends to the Health Department that it incorporates disclosure services, also known as partner notification, as a vital part of HIV prevention. Disclosure services funded by the San Francisco HIV prevention section should adhere to guidelines and principles of the HIV Prevention Plan. As such, disclosure services should be client-centered, culturally competent, and incorporate a harm reduction approach.

Disclosure services are to be made available to both HIV-positive and HIV-negative individuals. These services should provide a broad range of approaches that support both individuals who are interested in disclosure as well as those who are not interested or not ready to disclose their HIV status. A component on risk reduction strategies should be incorporated that may include, but not limited to, safer sex negotiation and safety enhancement practices. The POI Committee believes that this support of HIV status communication will greatly impact both the mental and physical health of individuals and the well being of communities impacted by HIV.

RECOMMENDATION 2. Provider training and agency guidance should be a requisite for implementation of a broad range of disclosure services.

The POI committee recommends to the Health Department that it provides guidance for agencies and adequate training for providers on disclosure services to ensure that 1) agencies have the resources to implement disclosure services; and 2) providers have the skills to incorporate broad approaches to disclosure with their clients.

RECOMMENDATION 3. Disclosure services should be included in the HIV Prevention Plan.

Motion (Pearce/Partridge) to approve the recommendations passed unanimously.

There was a discussion afterwards that reflected the committee's understanding that the recommendations included not disclosing status as an option.

6. Follow-up Draft motion based on Recommendations from late & non-testers

Documents were distributed reflecting earlier discussions. Aimee Crisostomo reported that the needs assessment was in progress and that the documents reflected the expertise gathered in committee. Council Member Thomas Knoble wanted the recommendations drafted so that they were not based on shame or fear. He wanted a clear message that the committee understood the issues involved in getting tested were complicated and an assurance to those dealing with those issues that "we are with you." Thus, our marketing should address not the reasons to be

tested but the availability of help for those dealing with the concerns of being tested. In addition, questions should be addressed in how to make testing services available in a smarter fashion.

There was an agreement that language concerning Late Testers should also include Nontesters.

There was discussion about tailoring language involving women of color and Latinas to the populations defined by the data. Ms. Crisostomo would review that data to ensure that the language captured the populations. There was also discussion of whether it was wise to target populations for testing which will be receiving less money for testing. It may be difficult to justify testing in populations that have a high incidence of testing negative. Some believed it was important to specifically include incarcerated populations. Ms. Crisostomo reminded the committee of the specific discussion of the issue by the San Francisco Leadership initiatives.

Some also questioned the draft recommendations' use of the term "explore" as being possibly too vague. There was also a discussion of how to fold in the eventual results of the needs assessment with late-testers currently being conducted by Harder+Co. There was the view that the committee can still present its work and recommendations on late-testers in November at full council while awaiting the findings from the needs assessment.

7. Presentation by Tim Vincent

Mr. Vincent outlined training that his group had designed for providers. They had developed a survey to plan for better trainings that would meet identified needs. They were hoping to improve provider skills and competency in dealing with HIV+ clients. They were addressing issues around the cultural divide with HIV+ clients and the stigmas that may be associated. It was a strength based approach to build these skills. The upcoming state October conference would discuss these guidelines including effective interventions on individual, group, agency, and structural levels. It was hoped that the conference could form the beginning of a networking structure for future action.

8. Planning for next meeting

- **Review revised work plan**

The discussion of these issues was not taken up separately

9. Evaluation and closing

Next Meeting: Tuesday, October 17, from 3:30-5:30 p.m., Room 330A

The meeting adjourned at 5:32 PM.

* These minutes were prepared by Joe Lynn and reviewed by Aimee F. Crisostomo, Vincent Fuqua, Eileen Loughran, William Blum, and Ed Byrom.