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National Alliance of State and Territorial AIDS Directors

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Addressing the Epidemic in Communities of Color

This month, NASTAD focuses on programs that address the epidemic in communities of color, including profiles of NASTAD activities, as well as the work of partners and others in the field. Addressing racial/ethnic disparities in the HIV/AIDS and viral hepatitis epidemics is an overarching strategic priority for NASTAD, with activities underway across all programs. NASTAD collaborates with many partners on these activities, to maximize impact and connect health department efforts and needs with these additional resources.

Among the lessons NASTAD has learned is that while much effort is still needed to address the disproportionate impact on communities of color, collaboration can effect change, leadership is essential, and sharing local experiences, strategies, and successes is very important.

NASTAD urges you to share your stories with NASTAD, the National Prevention Information Network, the Centers for Disease Control and Prevention (CDC), the Office of Minority Health (OMH), other federal partners, policymakers, and most importantly, each other.

NASTAD's African American Advisory Committee: Activities and Priorities

In anticipation of the one-year anniversary of the release of NASTAD's "Call to Action," [A Turning Point: Confronting HIV/AIDS in African Americans](#), NASTAD convened its African American Advisory Committee (AAAC) on October 22-25 in Atlanta to assess its 2006 portfolio of activities and efforts underway across the country, as well as to establish strategic priority areas for 2007. The African American Advisory Committee (AAAC) is comprised of African American AIDS directors and senior African American HIV program staff who are sensitive to issues regarding HIV/AIDS and related health disparities in African American communities. The "Call to Action," released on November 15, 2005 at a Congressional Briefing co-sponsored by the [Congressional Black Caucus Health Braintrust](#), underscores the devastating impact of HIV/AIDS in African American communities, raises awareness among African American leaders, and supports a comprehensive agenda to combat HIV/AIDS in African American communities.

The strategic priority areas for 2007 include:

- **African American (Men who have Sex with Men) MSM:** Support NASTAD activities in response to the results of a health department survey focused on African American MSM, including targeted interviews with representatives from a subset of states to determine greater insight into state and community-level responses to the HIV crisis among African American MSM, as well as the facilitators and barriers to effective interventions. This is a follow-up to NASTAD's [Black MSM Issue Brief No. 1: Black Men Who Have Sex with Men \(MSM\)](#), released this past February.
- **African American Women:** Reinvigorate the focus on African American women. The AAAC and NASTAD staff will work aggressively to establish a cogent initiative targeting African American women, particularly barriers to prevention and access to care and treatment. In order to develop such an initiative, an understanding of the level of investment by various jurisdictions directed toward this population must be identified.
- **African American Youth:** African American youth are disproportionately impacted by HIV/AIDS, and will be a priority in efforts to share information about effective strategies to reach African American communities.
- **Corrections:** More than one in ten African American men in their twenties and thirties are incarcerated in U.S. prisons and jails, where inmates are at high-risk for HIV infection in the system. The AAAC has prioritized further attention to this population, particularly barriers to collaboration with departments of corrections and other stakeholders.

Moving forward, the AAAC urges examining and acknowledging the myriad of issues impacting African Americans (e.g. racism, homophobia, stigma, economics, sexism, etc.) that have placed them at the crossroads of the domestic HIV epidemic. NASTAD's 2001 monograph, [African American Perspectives and Recommendations for State and Territorial AIDS Directors and Health Departments](#), explores the historic underpinnings impacting HIV/AIDS risk among African Americans.

This monograph also investigates several key issues that remain integral to a sustained national response to combat HIV/AIDS among African Americans. At the core is a persistence of critical gaps in research to address the disproportionate impact of HIV/AIDS among African Americans. The need for targeted, cutting-edge research is even more critical for African American MSM, women, and youth. As expressed in 2001, greater levels of advocacy around the participation of African Americans in vaccine research and other scientifically and ethically sound research must be achieved.

With recommendations from the AAAC, NASTAD is updating the 2001 monograph for an anticipated re-release in December. The update will include an analysis of activities executed since 2001, as well as examples of successful strategies from across the country.

For more information, contact [Terrance Moore](#).

Partnering to Address Asian and Pacific Islanders

NASTAD is working with the [Asian and Pacific Islander American Health Forum \(APIAHF\)](#) on policy recommendations for health departments, as well as strategies that address the HIV/AIDS and viral hepatitis epidemics among Asians and Pacific Islanders. APIAHF is a CDC-funded capacity building

assistance provider that works with communities to strengthen organizational infrastructure and community planning. A report outlining these policy recommendations currently is under development. NASTAD and APIAHF have also convened workshops at national conferences to highlight key findings from this collaboration, most recently at the HIV Prevention Leadership Summit in Dallas this past June.

Key issues addressed in the collaborative document include the need to recognize the diversity across API communities, strengthen efforts to collect and report HIV/AIDS data for Asian and Pacific Islander communities, and increase access to linguistically and culturally competent services for specific API communities. Links to related diseases that disproportionately impact API communities, such as viral hepatitis, also must be addressed.

One way to increase awareness of HIV/AIDS and viral hepatitis risk is [National API HIV/AIDS Awareness Day](#) held in May, which is recognized as Asian American Awareness Month, as well as Viral Hepatitis Awareness Month. APIAHF is a partner in the series of national activities for this event, and NASTAD released a [statement](#) related to the event, drawing attention to the HIV/AIDS needs of API communities.

For more information, contact [Federico Gutierrez](#) at NASTAD or [Ed Tepporn](#) at APIAHF.

NASTAD's Latino Advisory Committee: Activities and Priorities

The NASTAD Latino Advisory Committee (LAC), established in 2001, brings state and local health departments together to discuss and address health disparities and other issues related to providing HIV prevention and care services in Latino communities. The LAC is comprised of AIDS directors and program staff from state health departments and the six CDC funded local health departments. The committee aims to bridge programmatic concerns and policy challenges impacting prevention and care services for Latino communities throughout the U.S. and its affiliated jurisdictions. In 2003, NASTAD produced [Latino Perspectives & Policy Recommendations](#), outlining a set of key policy issues for health departments to consider when addressing Latino communities.

On June 21-22, 2006 the NASTAD LAC met in Washington D.C to further discuss issues confronting Latinos, including the complexity of addressing HIV/AIDS in such a heterogeneous and diverse culture. The LAC also developed an action agenda with discrete focus areas for NASTAD staff and committee members to address in the coming year.

Over the two-day meeting, LAC members outlined their chief concerns for addressing the epidemic among Latinos: the increasing national attention on immigration issues, which may create a barrier to HIV/AIDS prevention; inadequate treatment and care in Latino communities; culturally competent strategies for effectively addressing HIV/AIDS in Latino lesbian/gay/bisexual/transgender (LGBT) communities; the need for more effective prevention interventions designed for and developed by Latinos; strategies for effective collaboration and partnerships; and developing Latino leadership.

To address these concerns, the LAC's action agenda focuses on:

- Improving access to prevention, care, and treatment services for Latinos, regardless of their immigration/citizenship status;
- Developing an epidemiologic profile depicting the impact of HIV/AIDS along the U.S./Mexico border;
- Developing Latino leadership in health departments;
- Organizing Latinos to work with various entities in their communities of origin; and
- Drawing attention to the need for more research on the HIV/AIDS impact on Latinos.

This action agenda builds upon the framework of *Latino Perspectives & Policy Recommendations*, and serves as a road map for work in the coming year. Following are profiles of two of these agenda items:

Development of U.S./Mexico Border Epidemiologic Profile

With the assistance of the LAC, NASTAD is helping to coordinate the development of an epidemiologic profile along the U.S./Mexico border. This is a truly bi-national partnership between NASTAD, epidemiologists from the state health departments from the four U.S. states bordering Mexico, the Instituto de Servicios de Salud en el Estado de Baja California (ISESALUD), and the Centro Nacional para la Prevención y el Control del VIH-Sida (CENSIDA) from Mexico. This effort stemmed from a meeting of AIDS directors from Arizona, California, New Mexico, and Texas in San Diego this past February, to discuss possible areas of collaboration. All participants agreed on the need for greater understanding of the epidemic along the U.S./Mexico border region and recommended that an epidemiologic profile be collaboratively developed by U.S. state health department staff and Mexican colleagues across the border.

The overarching goal of the Border Epidemiologic Profile is to increase understanding of the impact of HIV/AIDS on communities in this region. It will be used to inform service providers on programmatic strategies to address the epidemic among these communities. A preliminary draft is expected in early 2007.

New Resource for Addressing Health Disparities Among Latinos

To ensure that the general public understands health disparities affecting Latinos as they impact not only their HIV/AIDS risk, but other health conditions as well, NASTAD has developed a training designed to describe the following areas relating to Latinos:

- The makeup of the Latino population in the U.S. (according to U.S. Census figures);
- The health and social indicators impacting access to health care;
- The HIV/AIDS impact on Latinos; and
- Potential service provider strategies that may decrease barriers to care by Latinos.

The overall goal of this session is to provide a better understanding of how poor social indicators, coupled with poor health indicators, result in poor health outcomes for Latinos. This newly-developed session recently was presented at the Iowa 9th Annual HIV/AIDS Conference in October.

For more information, contact [Federico Guitierrez](#).

NASTAD Office of Minority Health Project: Addressing Communities of Color in El Paso, TX

In 2004, NASTAD received a three-year cooperative agreement from the Department of Health and Human Services (HHS) Office of Minority Health (OMH), to work with AIDS directors across six states on formative needs assessment activities to understand barriers to prevention and care confronting communities of color, and to assist jurisdictions in addressing findings. The project's three main objectives include: increasing health department knowledge of barriers and challenges to access prevention and care services faced by African Americans and Latinos; providing an opportunity for communities of color to share perspectives and recommendations with health department staff; and providing an opportunity for health department staff and consumers to come together and participate in a forum to share and discuss findings. Forums also provide a mechanism for training area providers on topics identified by focus group participants.

This year, NASTAD worked with the Texas Department of Health and the Planned Parenthood Center of El Paso-Administrative Agency in El Paso, to increase service provider knowledge of barriers and challenges faced by Border communities in accessing HIV/AIDS prevention and care services. In August, NASTAD conducted four focus groups in El Paso. Planned Parenthood staff recruited focus group members by reaching out to organizations in the region that provide direct HIV/AIDS services. The focus groups were conducted in locations considered "neutral" and accessible to clients receiving services in the area. Three focus groups were conducted with area care services consumers and one focus group was conducted with service providers in the region. Service providers included individuals responsible for direct delivery of care to clients or those who administer programs in agencies where clients access services.

After the focus groups were completed, a one-day forum entitled "*Trabajando Juntos (Working Together)...* *Eliminating Barriers to HIV Care*" took place for service providers and consumers in the area, to learn about the focus group results. A plenary session allowed a consumer panel to voice their concerns and perspectives with providers in the region, about such matters as medication adherence, HIV/AIDS-related

stigma, and barriers to service delivery. The day-long meeting also received local television media coverage.

As part of the forum, NASTAD worked with service providers in a breakout session to begin developing an Action Plan to address concerns raised by focus group participants, and outline recommendations for area providers. Over 24 individuals took part in the session, representing over 15 community based organizations. Area providers worked in small groups to develop strategies to decrease the gaps in services.

Participants recommended that providers:

- Increase knowledge about available resources in the community for their clients;
- Increase access to care and coordination of services to avoid duplication and gaps in service;
- Increase collaboration between providers to strive towards an integrated model of services;
- Increase provider networking in the provision of services; and
- Develop a mechanism to include PLWHA as stakeholders in the process of service delivery and/or as advocates of change.

NASTAD recently returned to the region to meet once again with area providers and members of the Planned Parenthood, to assist in the development of objectives that may be translated into programmatic components. It is the hope that findings from this work will increase the knowledge, understanding, and capacity of area organizations in the delivery of services.

For more information, contact [Federico Gutierrez](#).

Correction: "Promotores" Story in Oregon

The October 2006 HIV Prevention Bulletin included a story entitled, Benton County (TX) Health Department's Promotores de Salud HIV Integration Project. The program referred to in the story is located in Benton County, Oregon, not Texas. NASTAD apologizes for the error. For more information on the program and Benton County, Oregon, contact [Michaela Lindahl](#), MPH, Health Promotion Program Manager.

First Native HIV/AIDS Awareness Day

March 21, 2007 will mark the first-ever Native HIV/AIDS Awareness Day. Dubbed "A Celebration of Life: Native HIV/AIDS Awareness Day," this commemoration event became a reality through conversations that took place at the [Embracing Our Traditions North American HIV/AIDS conference](#) last May.

Three agencies, ITCA, the Center for Applied Studies in American Ethnicity at Colorado State University, and the National Native American AIDS Prevention Center, are coordinating the Native HIV/AIDS Awareness Day and local events. Excerpts from these agencies' promotional materials articulate the need for this national awareness day:

"The four seasons are very sacred and highly respected in many cultures, perhaps because they so closely represent the cycle of life, the cycle of man. They are often reflected in the four directions and sometimes in the representation of the medicine wheel. Each of the four seasons hold special meaning, but Spring represents a time of very powerful points of equality and balance. Many Native groups believe that this equality or balance occurs physically, emotionally, intellectually, and spiritually. It is a time of profound change, new beginnings, cellular regeneration, and birth. The balance that occurs during the Beginning of Spring is reflected very tangibly by the occurrence of equal day and equal night - perfect balance."

"By choosing this day for the raising of awareness of HIV and AIDS among Native people we can use the gift of that earth spirit in a positive way - we, as Native people, must work together to bring

about balance and healing of our communities. HIV continues to increase among Native people as it has over the past decade - this day will challenge us to work together, in harmony, to create a greater awareness of the risk of HIV/AIDS to our Native communities, to call for resources for testing and early detection and to seek support for increasing our options for treatment, and thereby to eventually decrease the occurrence of HIV/AIDS among Native people - Native Americans, Native Alaskans, and Native Hawaiians. Protect our future, 'Protect Our People,' and Celebrate Life!"

Organizers are currently developing a postcard and other promotional resources. NASTAD will include updates in future *Bulletin* issues.

NCSA's Native Americans Profiles Project

The [National Coalition of STD Directors \(NCSA\)](#) has contracted with [JSI Research and Training Institute \(JSI\)](#), in partnership with the [Northern Plains Tribal Epidemiology Center \(NPTEC\)](#) of the Aberdeen Area Tribal Chairmen's Health Board (AATCHB), to conduct assessments and produce jurisdictional two-page fact sheets for use by STD directors, to better understand the Native American communities impacted by STDs in their jurisdictions. Representatives from the Indian Health Service (IHS), as well as STD directors, are included in NCSA's advisory group. Approximately two-thirds of the profiles are completed and under review.

For more information, contact JSI researcher [Natalie Haddock](#) (303) 262-4321.

Native American CBA Profile: Center for Applied Studies in American Ethnicity

The Center for Applied Studies in American Ethnicity (CASAE) at Colorado State University receives funding from CDC for its *Advancing HIV/AIDS Prevention in Native Communities Project*. The project offers HIV/AIDS Capacity Building Assistance (CBA) to community based organizations (CBOs), state health departments, Indian Health Service regional offices, and Hawaiian Health Services that provide HIV/AIDS prevention/services to Native people (American Indians, Alaska Natives, and Native Hawaiians). CASAE's goal is to collaborate with those communities in an effort to increase their capacity to provide HIV/AIDS prevention services, as well as to increase testing and early detection, using the Community Readiness Model. The Community Readiness Model builds capacity to provide community members with a working knowledge of the concept of readiness, to ensure implementation of appropriate strategies with a higher success potential and more cost-effectiveness.

Community Readiness CBA:

- Lays a stronger groundwork for chosen Diffusion of Effective Behavioral Interventions (DEBI) or other effective behavioral interventions (EBI);
- Facilitates community-based change using local resources and local strengths;
- Uses a nine-stage, multi-dimensional model;
- Is community-specific as well as issue-specific;
- Provides a step-by-step guide for prevention/intervention; and
- Builds cooperation among systems and individuals.

CASAE's CBA goals include readiness assessments, developing community readiness, sharing a Readiness Diagnostic with the community, and strengthening community capacity and social marketing strategies.

Request CASAE CBA from your project officer or the [CBA CRIS request system](#). For more information, contact [CASAE](#) (800) 642-0273.

HIV Prevention for Youth: Circle of Life HIV/AIDS Prevention Pilot Program for Native American Youth

Since 1992, Boys & Girls Clubs of America (BGCA) has partnered with Native American tribes, as well as government, corporate, and non-profit partners, to expand health and youth development programming for

Native American youth. Its target audience includes over 125,000 youth from 86 American Indian, Alaska Native, and Native Hawaiian communities, with services in over 200 clubs, and more than 15 clubs-in-progress in 24 states.

The Indian Health Service (IHS), National Congress of American Indians (NCAI), ORBIS Associates, and FirstPic, Inc. have partnered to create the *Circle of Life* pilot program to help prevent the spread of HIV/AIDS in Native American communities.

The after-school curriculum was adapted from the *Circle of Life K-8 Curriculum*, originally developed by CDC, Indian Health Service, and the Bureau of Indian Affairs. The curriculum's primary objective is to promote the development of the overall spiritual, emotional, physical, and mental wellness of youth, while providing factual information about preventing HIV/AIDS and other sexually transmitted infections.

The program addresses topics such as communicable vs. non-communicable diseases, the *Circle of Life* symbol, facts about HIV/AIDS, adolescence and puberty, and making healthy choices. The curriculum adheres to a holistic health promotion model designed for Native American youth participating in after-school programs.

This year, ten pilot sites received a pass-through grant from NCAI to fund program operations for six months, training, and ongoing technical assistance in order to support implementation of the HIV/AIDS Prevention Program.

In May, representatives from ten Native American Boys & Girls Clubs convened in San Francisco to participate in implementation training for the new *Circle of Life HIV/AIDS Prevention After School Program*. Guest speakers from the National Native American AIDS Prevention Center (NNAAPC) provided participants an "HIV/AIDS 101" session to enhance their knowledge of HIV in Indian Country.

Over the summer, pilot sites collaborated with local and tribal health partners to implement the curriculum and provide both written and verbal feedback. The information gathered will be used to help strengthen the prevention messages of the program for Native American youth.

Pre- and post-tests were administered to measure changes in participant knowledge and attitudes regarding HIV/AIDS prevention. IHS is currently analyzing data from the 2006 funding cycle.

For more information, contact [Amy Staubs](#) at FirstPic, Inc. (866-NA CLUBS).

Meeting and Planning Calendar

Capacity Building Opportunities

For a searchable database of CDC-supported capacity building trainings and events, visit the Capacity Building Branch's [Group Events Management System](#) site.

November 4-8, 2006

"Public Health and Human Rights," American Public Health Association's 134th Annual Meeting, Boston, MA. For more information, visit the [conference website](#).

November 9-12, 2006

Sixth National Harm Reduction Conference, Oakland, CA. For more information, visit the [conference website](#).

December 1, 2006

World AIDS Day. For more information, visit the [event website](#).

December 6-10, 2006

The 2006 Staying Alive Conference: "*Access Matters*," New Orleans, LA. For more information, visit the [conference website](#).

January 25-28, 2007

National African American MSM Leadership Conference on AIDS, Charlotte, NC. Presented by the National AIDS Education and Services for Minorities, Inc. (NAESM). For more information, visit the [conference website](#).

February 1-2, 2007

"*HIV Care in Arkansas: Expanding the Circle of Compassion*," Third Regional HIV/AIDS Conference organized by the Jefferson Comprehensive Care System, Inc. and geared for Arkansas, Louisiana, Mississippi, and Tennessee. For more information, visit the [conference website](#).

February 1-3, 2007

"*Science and Response 2007*" The 2nd National Conference on Methamphetamine, HIV and Hepatitis, Salt Lake City, UT. For more information, visit the [conference website](#).

February 7, 2007

National Black HIV/AIDS Awareness and Information Day. For more information, visit the [event website](#).

February 17-19, 2007

Ryan White National Youth Conference, Oakland, CA. Sponsored by NAPWA. For more information, visit [NAPWA's website](#).

March 21, 2007

American Indian HIV/AIDS Awareness Day. Designated at the "[Embracing Our Traditions](#)" Conference in Anchorage, AK.

April 5-7, 2007

"*HIV/STD Prevention in Rural Communities: Sharing Successful Strategies V*," the Rural Center for AIDS/STD Prevention national conference, Indiana University, Bloomington, IN. A call for papers will be issued in fall 2006. For more information, visit [RCAP's website](#).

May 19, 2007

National Asian and Pacific Islanders HIV/AIDS Awareness Day. For more information, visit the [event website](#).

May 20-23, 2007

HIV Prevention Leadership Summit (HPLS), New Orleans, LA. For more information, visit the [event website](#).

June 24-28, 2007

CSTE Annual Conference, "*Eliminating Health Disparities: Data to Action*," Atlantic City, NJ. Call for abstracts due December 1, 2006. For more information, visit the [conference website](#).

June 27, 2007

National HIV Testing Day. Sponsored by the National Association of People With AIDS (NAPWA). For more information, visit the [event website](#).

December 2-5, 2007

2007 National HIV Prevention Conference, Atlanta, GA. Sponsored by CDC and other governmental and non-governmental partners. Additional information and a call for abstracts forthcoming in Fall 2006.

Credits, Feedback, and Input

NASTAD's production of the *Bulletin* is made possible through funding provided by CDC's Division of HIV/AIDS Prevention

(DHAP) in the National Center for HIV, STD, and TB Prevention.

If you have an idea or program relative to any of these topics that you would like to include in the *Bulletin*, please contact [Lynne Greabell](#) (202) 434-8090. The NASTAD *HIV Prevention Bulletin* is written and edited by NASTAD staff and participants of community planning and prevention efforts around the country.

LET US KNOW WHAT YOU THINK! NASTAD welcomes feedback to issues presented in our newsletter. To submit commentary, please e-mail us at NASTAD@NASTAD.org.

Visit our [Webpage](#)! Electronic versions of the *Bulletin* are posted along with other information on both NASTAD's prevention and care projects.

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The logo for NASTAD, featuring the word "NASTAD" in a light purple, sans-serif font. To the left of the text is a vertical ellipsis (three dots) of the same color.

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