



CONNECTICUT HIV
PLANNING CONSORTIUM

MARCH 2021

The CHPC is an integrated, statewide prevention and care planning group comprised of diverse partners—including persons living with HIV.



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MISSION STATEMENT:

To create a coordinated statewide prevention and care system in which the rate of new HIV infections is reduced, and those who are living with and affected by HIV/AIDS are connected to appropriate care and support services.

HIV/AIDS Planning News & Notes

STRESS RELIEF with Tibetan Singing Bowls



By **Kelvin Young**, RSS,
Community Health Worker
& Certified Sound Healer,
InterCommunity HealthCare

For many years, I struggled with depression, anxiety, and drug addiction, and I found myself in and out of prison. While incarcerated, I learned about meditation. I did not see a lot of people that looked like me - people of color - practicing meditation, so I did not think it was for me. At first, it was very difficult to sit in silence and focus on my breath.

Then I found out about Tibetan singing bowls. The meditative sounds relaxed me and kept me focused and in the present moment.

Once I was released from prison, I wanted to learn all about these singing bowls, which are used in sound healing to promote deep relaxation and to relieve muscle tension, anxiety, chronic stress, depression, anger, sleep disorders, and other stress-related chronic health conditions. Tibetan singing bowls and their unique tones are also used to stabilize blood pressure and stimulate the immune system.

Utilizing singing bowls - along with eating nutritious food, exercising, journaling, being in nature, drinking plenty of water, spending quality time with loved ones, and seeing my therapist - has helped me sustain my recovery from alcohol and other drug addiction for over 11 years. Today, I speak to people from all walks of life about mental health, addiction recovery, and healing. I also facilitate group and individual sound healing sessions across the United States with Tibetan and crystal singing bowls, gongs, and other healing instruments.

During these stressful times, you can listen to many Tibetan singing bowl meditations, for free, in the comfort of your home on YouTube and on apps like Insight Timer, Calm, and Headspace. I recommend trying it out for yourself if you want to calm your mind, relax your body, and nourish your soul.



CONNECTICUT HIV PLANNING CONSORTIUM UPDATE

The time is now.

Ending
the
HIV
Epidemic

In 2021, the CHPC will develop Connecticut's 2021-2025 plan to end the syndemics - HIV, sexually transmitted infections (STI), and Hepatitis C. Although the federal government has yet to issue specific guidance for development of new 5-year plans, the "**Ending the HIV Epidemic: A Plan for America**" lays out bold goals to end the HIV epidemic in the United States within 10 years.

CONNECTICUT WILL ORGANIZE ITS PLAN AROUND THESE FIVE PILLARS:

- 1. DIAGNOSE** all people as early as possible after infection
- 2. TREAT** infections rapidly and effectively to achieve sustained viral suppression
- 3. PREVENT** new transmissions using proven interventions
- 4. RESPOND** quickly to potential outbreaks with needed prevention and treatment services
- 5. DEVELOP** workforce competencies to achieve the goals

Connecticut's planning process involves assessing needs and resources, identifying gaps, establishing priorities and goals, developing measurable objectives, monitoring progress, and striving for continuous quality improvement.

Dante Gennaro has begun his tenure as the Connecticut Department of Public Health (CT DPH) CHPC Co-Chair designee, as former Co-Chair Gina D'Angelo shifts her focus to the Getting to Zero Committee and supporting

development of the 5-year plan. Dante thanked Gina "for doing such an amazing job leading this planning body for so many years" and expressed his excitement about "working alongside our partners to improve the unification of our funders, stakeholders, and consumers to enhance our HIV Care and Prevention services and bring us one step closer to ending this epidemic."

THE CHPC WELCOMES 10 NEW MEMBERS IN 2021:

Melanie Alvarez, Erma Benedetto, Gigi Chaux, Martina De La Cruz, Natalie DuMont, Taylor Edelmann, Tawana Guadarrama, Marcelin Joseph, Debra Lombardo, and Peta-Gaye Nembhard. New members bring unique knowledge, skills, abilities, and lived experiences that will benefit the CHPC immensely. New members receive mentoring support from experienced CHPC members.

UPCOMING VIRTUAL CHPC Meetings

March 17th | April 21st | May 19th | 9:30 am

[Click here for the Meeting Link](#)

The March 17th presentation will be on sex positivity. Join us!

Visit the CHPC website at www.cthivplanning.org

The website has information about upcoming CHPC meetings, news and events, meeting documents, resources and partners, and membership applications.



COMMITTEES



CREATIVE CHAIR

Christian Brooks
Advancing CT Together (ACT)
Creates the content that goes into PPCT materials and campaigns



RESEARCH & DEVELOPMENT CHAIR

Alix Dittmore
Greater Hartford Harm Reduction Coalition (GHHRC)
Examines effective HIV Prevention messaging from around the globe & decides what campaign ideas & promotional materials PPCT produces

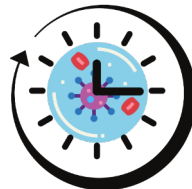
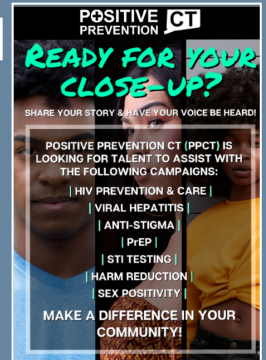


COMMUNICATIONS CHAIR

Taylor Edelmann
Apex Community Care
Disseminates PPCT materials & campaigns via social media

FEATURED CAMPAIGN

PPCT is winding down both our #RequestTheTest and #WhatsYourStoryCT campaigns to make way for our new anti-stigma video campaign. The campaign uses storytelling to shed light on HIV/STIs, PrEP/PEP and routine testing with the intention of normalizing the way these topics are thought about. We expect the video to be out next month!



BEST PRACTICES

This section highlights best practices from agencies across the state to help you level up!

COVID has forced us all to rethink the way we provide services. Although stressful and confusing at times, it ultimately compelled us to find innovative ways to keep our communities healthy and safe. When it comes to HIV testing, many agencies have expanded services to fulfill the need.

In past PPCT newsletters, we've mentioned our #RequestTheTestCT campaign, which encourages folks to request HIV take-home tests. Since COVID started, A Place to Nourish Your Health (APNH) in New Haven has been giving its clients the opportunity to request a test kit by filling out a form on their website. APNH now offers clients the ability to video conference with a staff person during the test to ensure the client feels supported throughout the process - and especially to help manage the stress and aggravation that could come along with a reactive test result. Their hard work has certainly paid off, as they've sent out nearly 400 take-home tests since March 2020!

The INSTI test has completely changed the HIV testing game. BioLytical, the makers of the INSTI test, boast results in as little as 60 seconds - much quicker than traditional HIV Rapid tests. Like the OraQuick test, the INSTI has up to a three-month window period (the time between exposure to HIV and when the body has produced enough antibodies for the virus to be detected by the test). Apex Community Care utilizes INSTI tests - which require a fingerstick - while conducting street outreach. Alyssa Ramos, Apex Harm Reduction & Prevention Manager, had this to say: "As part of our Syringe Services Program (SSP), we provide the INSTI tests to individuals who use injection drugs because we hope this removes the barrier of getting tested. The INSTI provides a quick and efficient test so folks can know their status in very little time."



UPCOMING MEETINGS

MARCH 8th | APRIL 12th

MAY 10th | JUNE 14th

PLEASE NOTE:

Meetings are virtual until further notice.



Use the QR code to fill out the **PPCT SOCIAL MEDIA SURVEY** and qualify for a **\$5 DUNKIN' GIFT CARD** while supplies last!

If you or your agency has an initiative or practice you'd like to share in the next PPCT Providers' Corner, please let us know by contacting tedelmann@apexcc.org



Has the Pandemic Impacted Social Determinants of Health for People Living With HIV?

By Idiana Velez, RW Medical Case Manager, Fair Haven Community Health Care



The U.S. Centers for Disease Control and Prevention (CDC) defines social determinants of health (SDOH) as “conditions in the places where people live, learn, work, and play that affect a wide range of health and quality-of-life-risks and outcomes.” In the 16 years I have worked in the HIV prevention and treatment field, we have always looked towards SDOH to remove barriers so people living with HIV (PLWH) can have a better quality of life. So how has the COVID-19 pandemic impacted SDOH for PLWH?

1. HEALTHCARE: Telemedicine has shifted many medical appointments to virtual, which allows less of a personal, face-to-face connection with the provider. Telemedicine also removes a reason to get out of the house, which can be important for mental health. Because of stigma and discrimination, PLWH already face isolation, avoidance, depression, anxiety, and stress, making in-person interaction especially important.

2. EDUCATION: The prevalence of hybrid and distance learning for school-aged children has placed extreme stress on many working parents. Distance learning has also led to social isolation for adults attending higher education programs by removing in-person interaction with classmates.

3. SOCIAL AND COMMUNITY INTERACTIONS:

Many PLWH depend on support groups to cope with stigma, discrimination, or trauma, but support groups are now virtual or have a limited number of in-person attendees. This, along with many public parks being closed, limits social communication and interaction and impacts mental health.

4. FINANCIAL STABILITY:

The pandemic has left many people without jobs or with reduced hours. This has led to housing issues (e.g., back rent, eviction), food insecurity, and difficulty meeting other primary and basic needs.



COVID has impacted SDOH in PLWH in other ways: Some have relapsed as they have fallen back on drugs or alcohol to cope with stress and loneliness. Fear of getting COVID - especially because of their immunocompromised state - has made some PLWH avoid public transportation and pay more for other transportation. Although some changes due to COVID have had silver linings for some PLWH - being able to see their provider without having to leave home, for example - I believe the overall impact has been negative.

I hope to see the end of this pandemic soon - and a huge improvement in the SDOH of PLWH.

HIV AND THE COVID-19 VACCINES



At the January Connecticut HIV Planning Consortium (CHPC) meeting, **DR. JUAN C. SALAZAR**, *Physician-in-Chief and Executive Vice President of Academic Affairs at Connecticut Children's*, presented on **HIV, COVID-19, and vaccinations**. Dr. Salazar told participants how messenger RNA vaccines work, described the four phases of clinical vaccine trials, and explained how the COVID-19 vaccine development timeline was accelerated while adhering to the same safety standards as all vaccines.

Dr. Salazar debunked several myths about the vaccine:

- Approval of the COVID-19 vaccines were **not** 'rushed,' so their safety has been demonstrated
- Severe reactions to the COVID-19 vaccines **are not** common
- You **cannot** get COVID-19 from the vaccines
- The vaccines **cannot** change your DNA
- The vaccines **do not** cause infertility
- It **is** important for people who have already had COVID-19 to get vaccinated
- People who have been vaccinated **should** continue to practice masking, social distancing, and hand washing
- People **should** get vaccinated the first chance they get
- The vaccines **do not** suppress the immune system, but rather stimulate an immune response

COVID-19 VACCINE SIDE EFFECTS

- 1.** A warm glow inside from knowing you are making your neighbors, friends and family safer
- 2.** A feeling of doing your part to stop a pandemic



Dr. Salazar encouraged everyone - including people living with HIV - to get vaccinated, and said that addressing public skepticism about vaccination by debunking myths will be critical to controlling the spread of COVID-19. Dr. Salazar's presentation appeared to alleviate many meeting participants' concerns, as the percentage of participants (among those not already vaccinated) saying they wanted to get vaccinated as soon as they are eligible increased from 44% before the presentation to 66% after the presentation.

For details on how to register for vaccination when you are eligible, visit ct.gov/covidvaccine

Easy Chicken & Rice Soup



Adapted from iowagirleats.com

INGREDIENTS

- 1/2 onion, finely chopped
- 2-3 medium-sized carrots, *peeled then thinly sliced*
- 2 cloves minced garlic
- 1-1/2 Tablespoons extra virgin olive oil
- Salt and pepper
- 2 chicken breasts, cut into bite-sized pieces
- 8 cups chicken broth
- 1 cup long grain white rice

DIRECTIONS

1. Heat olive oil in a large soup pot over medium heat. Add onion and carrots, season with salt and pepper, and stir to combine. Cover the pot with a lid then sauté until vegetables are very tender, 5-7 minutes, stirring occasionally. Add garlic and sauté without the lid on for 30 seconds.
2. Turn heat up to high then add chicken broth and bring to a boil. Add rice then stir to combine. Season chicken with salt and pepper then add to the broth and stir to combine. Turn heat down to medium then simmer uncovered until rice is tender, 15-20 minutes. Remove the pot from the heat then place a lid on top and let sit for 5 minutes. Taste then add more salt and/or pepper to taste, then ladle into bowls and serve.

LET'S FACE IT: as the pandemic drags on into its second year, we could all use some chicken soup for warmth and comfort. This recipe is easy to make, has healthy ingredients, can be made on a budget, and you may even have all the ingredients in your pantry and fridge.

Stay Safe & Stay Well

We Will Be Back Together Again Soon!





SYRINGE SERVICE PROGRAM (SSP) INSTITUTE: SMASHING THE SILOS



Dante Gennaro

On December 10-11, 2020, the City of Hartford and DPH offered **SMASHING the Silos**, a Connecticut Syringe Service Program (SSP) virtual institute on HIV and HCV in Connecticut. The summit was the product of months of work by the City of Hartford's DeLita Rose-Daniels and Angelique Croasdale-Mills and DPH's Dante Gennaro, with support from the New York City Department of Health and Mental Hygiene (NYC DOHMH) and the Primary Care Development Corporation (PCDC).

Hartford Senator Douglas McCrory opened the summit by expressing his support for the HIV/HCV Care and Prevention fields and commending participants for their hard work in their communities. Paul A. Santos of NYCDOHMH then led the opening session on *Creating and Maintaining Partnerships*, followed by an amazing panel discussion on the State of Prevention and Care Through Harm Reduction & SSP Efforts in Connecticut, during which panelists shared their knowledge and lived experiences related to harm reduction and SSP. Day 1 wrapped up with a presentation titled *Addressing Cultural Humility in HIV and HCV Care*, in which Brandon A. Harrison of PCDC helped move participants past cultural stereotypes and biases to offer client-centered services with cultural humility.

Day 2 kicked off with a virtual presentation on *Understanding Drug-Related Stigma* by Emma

Roberts and her colleague from the National Harm Reduction Coalition. This session explored how stigma and discrimination impact people who use drugs, reviewed different forms and elements of drug-related stigma, and discussed how harm reduction and SSP reduce stigma-related barriers to engagement into services. PCDC's Ronica Mukerjee and Brandon Harrison then moderated a discussion titled *Incarceration and Policing Effects on Health including HIV and HCV* that addressed how racist policing and incarceration policies affect health disparities - including HIV and HCV care - and impact health outcomes. The summit closed with a panel discussion on *Enhancing Hep C Client Experience in Clinical and Non-Clinical Healthcare Settings* that offered examples of successes, challenges, lessons learned, and recommendations for delivering affirming care and services across healthcare settings.

Overall, the summit was a smashing success, with a 97% participant approval rating. To request the event slides, **contact Dante Gennaro at dante.gennaro@ct.gov**. DPH plans to host the virtual summit on CT Train by spring for anyone who missed the event.

**DPH is an equal opportunity provider.
Call 860.509.7801 if you require
aid/accommodation to participate
fully and fairly.**

**Visit www.ct.gov/dph for requests for
proposals and other DPH information.**



I Got My #ShotOfHope

By Michael J. as told to Debra Lombardo LPN, MCM



I walked into the small nursing home where I work in the kitchen/dining room, and hanging above the time clock was a flyer with a signup sheet to receive the COVID-19 vaccine. I had to reread it to make sure I was reading it correctly and that I, Michael J, was eligible to be vaccinated in the first phase! Because of my HIV status, I had been following the news regarding this vaccine, and I was anxious to receive it along with my fellow support group members.

I was humbled and felt very privileged by this good fortune. Good things do not usually come my way. It immediately came to mind to check with my Medical Case Manager (MCM) Debi Lombardo, who is not only my MCM, but also a nurse. When I called her, Debi was so happy that I was being offered the vaccine. She told me she had received her first dose of the Moderna vaccine in late December and was scheduled for her second dose 28 days later. We discussed the pros and cons of receiving the vaccine, and Debi was able to address all my questions and concerns. Feeling well-informed, I went to work the next day and signed up!

Since then, I have received both doses of the Pfizer vaccine 21 days apart and had minimal side effects. I continue to be COVID-tested twice a week per the protocol at my job, and I have always tested negative.

I hope my family and friends and everyone reading this article are offered the opportunity to receive the COVID-19 vaccine real soon. Until then, wash your hands, wear your mask, and BE SAFE!



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