



CONNECTICUT HIV  
PLANNING CONSORTIUM  
866.972.2050

## MARCH 2022

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.

### NEWSLETTER COMMITTEE

Victor Acevedo  
Brian Datcher  
Stephen Feathers  
Carl Ferris

## 2022-2026

# Integrated HIV Prevention and Care Plan: JOIN US TO MAKE YOUR VOICE HEARD!

## What in the World is a **SYNDEMIC** and *Why* is it Important?

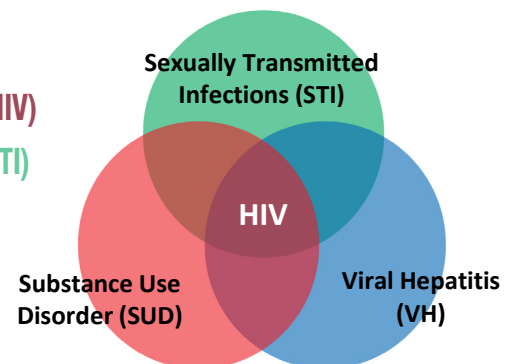
The term "syndemic" isn't brand new. It was coined by medical anthropologist Merrill Singer of the University of Connecticut in the mid-1990s to describe the way epidemics can overlap with one another. An epidemic is a widespread occurrence of an infectious disease in a community at a particular time.

By Gina D'Angelo, *Ending the Syndemic* Coordinator,  
CT Department of Public Health



A syndemic, therefore, is two or more epidemics that are connected, negatively interact with one another, and contribute to a higher burden of disease in a population or community. Connecticut's syndemic focuses on four epidemics:

- 1) **Human Immunodeficiency Virus (HIV)**
- 2) **Sexually Transmitted Infections (STI)**
- 3) **Substance Use Disorder (SUD)**
- 4) **Viral Hepatitis (VH).**



### CHECK OUT THE TOP TEN REASONS CONNECTICUT IS TAKING A SYNDEMIC APPROACH TO ENDING THE HIV EPIDEMIC:

- 1) Federal guidance recommends it
- 2) Other states have embraced it
- 3) These four conditions often affect the same people/communities
- 4) Resources are thin, but providers serve the same people
- 5) Increased integration and collaboration among planners and providers can lead to seamless service delivery
- 6) Innovative service delivery models can ensure fewer missed opportunities
- 7) Increased opportunities for simultaneous prevention, screening, diagnosis, and treatment efforts
- 8) Mottos like "no wrong door" and "everyone leaves with a service" make for better service delivery
- 9) Broader community engagement on multiple issues affecting people and communities is good
- 10) Maximizing Connecticut's resources will help us develop the best 2022-2026 Integrated HIV Prevention and Care Plan possible

It is time to scale up Connecticut's efforts to: End the HIV Epidemic, Slow the Spread of Sexually Transmitted Infections, Address Substance Use Disorder, and Eliminate Viral Hepatitis. Together, we can develop a plan to End the Syndemic!  
For more information visit: [End the Syndemic in CT \(endthesyndemicct.org\)](https://endthesyndemicct.org).

# CONNECTICUT HIV PLANNING CONSORTIUM UPDATE

The time is now.

Ending  
the  
HIV  
Epidemic



This newsletter contains several great articles related to the Integrated HIV Prevention and Care Plan for 2022 to 2026 that will represent the CHPC's primary focus in 2022.

**Here are some key items from the federal guidance on the Integrated Plan:**

- **The planning process must engage "a wide range of stakeholders** including people at risk for HIV and people with HIV." For the CHPC, this will include a more formal process to increase collaboration with Connecticut's Ryan White Part A Planning Councils.
- **The Plan should reflect priorities detailed in the HIV National Strategic Plan** and the implementation strategies in the Ending the HIV Epidemic in the U.S. (EHE) initiative while reflecting Connecticut's "vision, values, and needs."
- **The Plan should feature strategies that reduce new HIV infections by 90% by 2030**, including "the implementation of activities that will diagnose all people with HIV as early as possible, treat all people with HIV rapidly and effectively to reach sustained viral suppression, prevent new HIV transmissions by using proven interventions,

and respond quickly to potential outbreaks to get needed prevention and treatment services to people who need them."

- **Connecticut must submit its Integrated Plan to the federal funders by December 9, 2022.**

In other CHPC news, the Getting to Zero Committee changed its name to the **Ending the Syndemic (ETS) Committee** to reflect the syndemic focus of the new Integrated Plan (see the newsletter cover story), and the **Positive Prevention CT (PPCT)** group has begun to operate as a "team" of the Membership and Awareness Committee (MAC).

Finally, the CHPC welcomed six new members in January: **Wallace Daniels, Justin Gabino, Charles Hardy, Luis Irizarry, Anthony Santella, and Lisa Weeks!**



**UPCOMING VIRTUAL  
CHPC Meetings**

**March 16<sup>th</sup> | April 20<sup>th</sup> | May 18<sup>th</sup> | 9:10 am**

**Click here for the Meeting Link**



## COMMITTEES



### RESEARCH & DEVELOPMENT CHAIR

**Alix Dittmore**

*Greater Hartford Harm Reduction Coalition (GHHRC)*

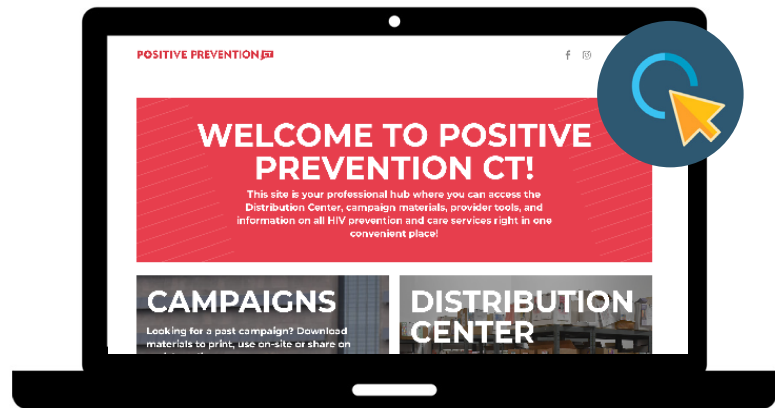
Examines effective HIV Prevention messaging from around the globe & decides what campaign ideas & promotional materials PPCT produces



### COMMUNICATIONS CHAIR

**Taylor Edelmann**

*Apex Community Care*  
Disseminates PPCT materials & campaigns via social media



POSITIVE PREVENTION CT (PPCT) revealed a new website, <https://positivepreventionct.org>, during the last CHPC subcommittee meeting. The decision to revamp the site was made to reflect a shift in PPCT's focus to primarily serve as a resource to frontline staff. The website includes several resources to further train and educate both new and existing staff at partner agencies and will continue to feature PPCT's social media campaigns as they roll out going forward.

The site boasts a number of resources to make it easy to find HIV testing sites, care services, and prevention programs while still providing a link to the Connecticut Community Distribution Center to get all the supplies your agency needs!

The most significant change is the addition of Provider Tools, a portion of the site dedicated to preparing frontline staff in all areas of their job. Staff can access training on things like HIV/AIDS, sexually transmitted infections (STIs), Hepatitis C, drug user health, and much more, in addition to connecting staff to the various HIV planning bodies around the state. There is even a section to download HIV prevention documents, policies, and procedures to make this a one-stop-shop!

PPCT encourages its members and CHPC members and public participants to give continuous feedback on the site to make sure it is best-suited to meet the needs of all frontline staff. To provide feedback, please email: [endingthesyndemicct.info@ct.gov](mailto:endingthesyndemicct.info@ct.gov). Our goal is to ensure our HIV workforce feels well-supported and prepared to provide the highest quality care to those we serve.

**Check out the new PPCT website by visiting:**

**[WWW.PPCT.INFO](http://WWW.PPCT.INFO)**



## UPCOMING MEETINGS

PPCT, which was recently absorbed into the CHPC under the Membership and Awareness Committee,

**Now MEETS @ 11:00am on the third Wednesday of every month.**

This change was made to highlight the work PPCT is doing as well as to encourage more input on what HIV Prevention and Care messaging should look like in the state.

### PLEASE NOTE:

Meetings are virtual until further notice.

Contact David Reyes at [reyes@xsector.com](mailto:reyes@xsector.com) for a meeting invite!

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 [dante.gennaro@ct.gov](mailto:dante.gennaro@ct.gov)



# COVID UPDATE

**AS YOU READ THIS, WE ARE ENTERING YEAR 3 OF THE COVID-19 PANDEMIC.** Remember when this all started in the spring of 2020, when our lives were turned upside down but the phrase “We’re all in this together” was everywhere? Most people seemed to think we would all do our part - isolate, home school, and work from home - and things would quickly go back to normal.

Most of us were shocked when former President Trump and Dr. Anthony Fauci said there could end up being between 100,000 and 200,000 COVID-related deaths and millions of cases in the U.S. Yet here we are two years later, with almost 1 million COVID-related deaths in the U.S. and nearly 80 million cases. And rather than uniting us, it sometimes feels like COVID has given us more reasons to divide - on things like masking and vaccines. And life still feels far from normal.

This has created phenomena including **“PANDEMIC FATIGUE”** (the exhaustion brought on by months of pandemic-related challenges), **“COVID BURNOUT”** (emotional and physical exhaustion brought on by this prolonged period of stress), and even **“PANDEMIC NOSTALGIA”** (longing for the unity and innocence of the early days of the pandemic).

Whether you are experiencing any of these phenomena or not, **HERE ARE A FEW HELPFUL REMINDERS AND RESOURCES:**

- **Read the excellent Coping with COVID - Part 2 article** (on page 5) by long-time “HIV veteran and warrior” and CHPC community member Rev. Alexander Garbera.
- **Understand the protection that COVID-19 vaccines provide.** For the week beginning January 30, unvaccinated people in Connecticut had a 15.2 times greater risk of dying from COVID-19 as compared to fully vaccinated people. (CT Department of Public Health)
- **Know that COVID-19 vaccines are safe for people with HIV,** as the vaccines meet “rigorous scientific standards for safety, effectiveness, and manufacturing quality and people with HIV were included in vaccine clinical trials.” (U.S. Centers for Disease Control and Prevention)
- **Visit Connecticut’s vaccine portal** ([portal.ct.gov/Vaccine-Portal](https://portal.ct.gov/Vaccine-Portal)) for answers to questions about vaccines and to find a vaccine provider near you.
- **Visit [covidtests.gov](https://covidtests.gov) to order free at-home COVID-19 tests.**



For details on how to **REGISTER FOR VACCINATION** when you are eligible, visit: **[ct.gov/covidvaccine](https://ct.gov/covidvaccine)**

# COPING WITH COVID PART 2



*Reverend Alexander R.  
Garbera, MA, MSC, DD*

Chöygam Trungpa, author of Shambhala: The Sacred Path of the Warrior, said

*"either you learn to ride  
the donkey, or the  
donkey rides you."*

As HIV veterans and warriors, we know the deadly effects of apathy and giving up. We have learned how to skillfully ride the HIV donkey, even though many of us, including yours truly, have fallen off a few times along the way.

Riding that donkey is also about navigating the treacherous cliffs of co-morbidities (substance use, housing instability, food insecurity, and many other disparities associated with poverty and race), dodging hurdles, jumping barriers, and dealing with a few jackasses in our path. HIV has prepared us to deal with COVID, but it also added stress, isolation, and anxiety for those of us who are already battle worn and weary, forcing us to relive past trauma and grief.

An important way to deal with anxiety related to past trauma and inoculate ourselves against future triggers is getting in touch our resilience: our confidence that we are safe, resourced, and capable of dealing with whatever arises. So, while it's vital to get a booster shot to protect against COVID-19 mutations, we also inoculate ourselves with resilience and confidence that we can deal with whatever comes our way.

HIV itself does not put us at increased risk for complications with COVID-19. Common comorbidities for people living with HIV (such as, but not limited to, high blood pressure, diabetes, and chronic lung and liver issues) cause COVID complications, however. Taking good care of ourselves and having quality health care is essential.

Another vital inoculation is knowledge. Learn about COVID and its mutations and what puts you at risk. The U.S. Centers for Disease Control and Prevention (CDC) publishes frequently asked questions specifically about HIV and COVID-19: <https://www.cdc.gov/hiv/basics/covid-19.html>

Contact your local HIV service organization to find available resources for your physical, mental, and spiritual well-being: <https://uwc.211ct.org/covid19resources/>

**KNOWLEDGE=POWER.  
ACTION=LIFE.**

**#Vaccinate #WashHands  
#SocialDistancing #QualityMasks  
#CommonSense #RiskReduction  
#HaveFaith #ProtectYourself  
#ProtectOthers**

*Rev. Garbera wrote  
"Coping with COVID - Part 1" for the August  
2020 HIV Planning News & Notes.*



# “Nothing About Us Without Us”



## THE IMPORTANCE OF HIV Positive Participation in CHPC Planning

By Brian Datcher

**The Connecticut HIV Planning Consortium (CHPC)** is in the beginning stages of developing Connecticut’s Integrated HIV Prevention and Care Plan for 2022-2026. Persons that HIV live with and are impacted by this plan need to be sitting at the planning table. I want to ask my fellow HIV constituents to please come to the table and be heard. Bring your everyday expertise to the CHPC. Life experience is important to community planning. Your expertise is as valuable - and maybe more valuable - than anyone else’s, so speak up and make sure you are heard.

I want to ask community members to please step up and challenge yourselves, especially since this is a Plan development year. The Membership and Awareness Committee (MAC) does important work, but check out other committees like Quality and Performance Measures (QPM), Needs Assessment Projects (NAP), and Ending the Syndemic (ETS). All committees play a very important part in the development of our new five-year plan.

**Remember, it’s not what you know, it’s what you bring to the table.**

Visit the CHPC website at [www.cthivplanning.org](http://www.cthivplanning.org)

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



# department of public health

corner




Connecticut Department  
of Public Health



Community Planning to End the HIV Epidemic is no easy task. It takes a village to deliver quality prevention and care services while ensuring a competent workforce. At times, it can seem overwhelming, but that's why our **Integrated HIV Prevention and Care Plan** (also known as the 'Integrated Plan') is important.

The CHPC's main focus this year is the development of Connecticut's new **Integrated Plan for 2022-2026**. The Integrated Plan will provide a snapshot of the HIV epidemic in Connecticut, list available resources, detail our plan-of-action to End the HIV Epidemic, and describe our plan to provide the best support possible for those living with the virus.

**BE A PART OF THE PROCESS FOR POSITIVE CHANGE.** We need everyone's input to get this important work done, and you all are welcome at this table. **Attend any of the following CHPC subcommittees to participate in the integrated planning work:** the Quality & Performance Measures (QPM) Team, the Needs Assessment Projects (NAP) Team, the Membership & Awareness Committee (MAC), the newly-integrated Positive Prevention CT (PPCT) Subcommittee, and the Ending the Syndemic (ETS) Committee (formerly Getting to Zero).



**FOR MORE  
INFORMATION ON  
CHPC Committees  
and Teams**  
[CLICK HERE](#)

The Integrated Plan goals and objectives being worked on by each committee align with that committee's typical work. For example, the NAP Team usually implements various needs assessments as required by our federal funders. This year, NAP will conduct a Needs Assessment and review past assessments to ensure that unmet needs and gaps are addressed. NAP will identify specific goals and objectives to be included in the new Integrated Plan. Each committee's work is vital to developing, monitoring, and evaluating Connecticut's progress towards accomplishing our Integrated Plan to End the Epidemic.

We have a lot of work to do in 2022 and we can't do it without your commitment! This plan will help pave the way for better collaboration, better delivery of services, and better health outcomes for Connecticut residents impacted by HIV. That's why it's important all of us to participate - every voice and opinion matters. **PLEASE JOIN US!**

**DPH is an equal opportunity provider.**

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**Visit [www.ct.gov/dph](http://www.ct.gov/dph) for requests for proposals and other DPH information.**

