

Date: March 16, 2022

Location: Zoom (virtual meeting)

Time: 11:20 a.m. – 12:35 p.m.

Attendance: See last page for attendance

Meeting Accomplishments

1. Dante Gennaro announced a vacancy in the PPCT co-chair position.
2. The group discussed the PPCT campaign development poll results.
3. The group discussed campaign development strategies.

Identified Tasks

1. PPCT members will review the previous month's meeting summary before attending the monthly meeting to confirm their accuracy.
2. PPCT leaders will promote the PPCT chair vacancy and solicit applications.
3. PPCT leaders will discuss moving the PPCT meeting from the third Wednesday of the month to the second Monday of the month.
4. Should future meetings take place in-person, PPCT will coordinate trainings provided by Gilead.
5. PPCT leaders will coordinate an action plan with workgroup members to develop a campaign proposal.
6. Dante Gennaro will coordinate a meeting with Cecil Tengtenga to discuss program and intervention evaluation data.

Next Meeting: Wednesday, April 20, 2022, @ 11:00 am via Zoom

PPCT Co-Chair(s):

CT DPH: Dante Gennaro (dante.gennaro@ct.gov)

Recorders: Ken Plourd & David Reyes

A. GETTING STARTED & CHAIRS' WELCOME

- Department of Public Health [DPH] Liaison and CHPC co-chair Dante Gennaro welcomed everyone to the Positive Prevention Connecticut (PPCT) group meeting.
 - Mr. Gennaro administered and reviewed the results of an introductory poll with the attendees.
 - PPCT is a U.S. Centers for Disease Control and Prevention (CDC)-funded workgroup dedicated to creating HIV Prevention messaging focused on Connecticut populations at the highest risk of infection. Those populations are men of color who have sex with men, transgender folks, people who use drugs, and heterosexual women of color.
- Mr. Gennaro requested that the February meeting summary be displayed for attendees to review for accuracy.
 - The group quickly reviewed the February meeting summary and approved its accuracy.

B. PPCT UPDATES

- Mr. Gennaro reviewed some of the changes that the PPCT workgroup has undergone. The PPCT has become a sub-committee of the CHPC. The group's work will contribute to the statewide Integrated HIV Prevention and Care Plan for 2022 to 2026.
- Mr. Gennaro discussed the departure of former PPCT chair Taylor Edelmann. Mr. Edelmann has accepted a position with the National Harm Reduction Coalition and can no longer occupy his former role as PPCT chair. Despite his departure from PPCT, Mr. Edelmann will likely collaborate with PPCT. He has joined a team where he is charged with organizing harm reduction groups and organizations that serve lesbian, gay, bisexual, transgender, and gender non-conforming (LGB/TGNC+) people. Mr. Edelmann's departure leaves a vacant PPCT chair position. The CHPC is actively looking for an individual to fill the position. Mr. Gennaro will serve as interim chair and take on the associated responsibilities.
- Mr. Gennaro proposed an adjusted PPCT meeting date, time, and format (an in-person meeting) that will better accommodate the schedules of both former and current members. Mr. Gennaro suggested that the workgroup revert to its former meeting date/time and format, an in-person meeting every second Monday of the month. Mr. Gennaro explained that the former meeting format drew more members and resulted in more fruitful meetings.
- The group members welcomed the idea, then discussed the following considerations.
 - Mr. Gennaro recommended an in-person location in central Connecticut to minimize the average commute of folks throughout the state.
 - Doug Janssen offered up the Community Health Center's training space in Middletown as an option, and indicated that he would research whether the space was available on the second Monday of the month.
 - Joe Norton shared that A Place to Nourish your Health (APNH) in New Haven may have space available. He indicated that he would research whether the room was available on the second Monday of the month.
 - Angel Ruiz shared that a space with UCONN Health called '385' was available.

- John Gardner said that Gilead would book a hotel space as an alternative meeting space if they are doing a presentation, and said Gilead is also able to offer refreshments along with the presentations.
- Angel Ruiz expressed that a proposal to change the meeting format may encounter pushback from the CHPC.
- Mr. Gennaro answered that the workgroup meeting needs to function as best as it can for its members, and this proposed format would provide the group the form it needs to be successful. Mr. Gennaro shared that he would clarify CHPC committee attendance requirements for CHPC members. Specifically, he would advocate expanding the attendance requirement for CHPC members so that those folks who attended the PPCT meetings at a new date/time would meet the committee meeting attendance requirement.
- Mr. Gennaro reviewed the results from the poll that occurred during the March CHPC meeting. Table 1 and Table 2 show the results of the two poll questions.

Table 1.

Question: Positive Prevention CT is interested in your feedback on its first campaign for the CHPC. Goal 4 of the Integrated Plan is to Achieve Integrated Efforts Among All Partners. Which of the remaining 3 goals should this campaign focus on?		
	Number	Percent
Goal 1: Reduce new HIV infections	17	44%
Goal 2: Improve HIV-related health outcomes of people living with HIV	5	13%
Goal 3: Reduce HIV-related disparities and health inequities	17	44%

Table 2.

Question: Based on the selected goal, which of the following populations should this campaign focus on? (select 2)		
	Number	Percent
Gay, bisexual, and other men who have sex with men (MSM)	22	50%
Black women	20	45%
Black men	18	41%
People who use drugs	11	25%
Youth ages 13-24	9	20%
The transgender community	8	18%

- Mr. Norton suggested that the group review surveillance data on the MSM population to determine their age and where they are throughout the state. This data would guide where the workgroup would implement a campaign.
- Mr. Ruiz asked whether and how PPCT will incorporate community data in the campaigns.
- Mr. Gennaro said PPCT would use data to determine emerging priority populations for campaigns, and that messaging campaigns could be more generalized to ensure that the messages can be easily adapted to various target populations.
- Mr. Norton suggested that the poll results may not be an accurate or reliable depiction of community priorities because the CHPC represents a small number of stakeholders in the state. He recommended that the poll be re-administered to a more representative group and that the workgroup ensure that its campaigns are amenable or adjustable to several populations.

- Mr. Gennaro discussed lessons learned while developing campaigns for a comprehensive suicide prevention project. For example, the popularity of video content on TikTok and Instagram indicates that we should move away from static multimedia and embrace video/audio forms of media.
- Mr. Gennaro shared and discussed some of the products from the comprehensive suicide prevention project he worked on. The takeaway points included: a) The videos weren't inherently gendered or targeted to a specific population, meaning they could be easily adapted to various populations; b) Audio tracks can easily be redone to the receptiveness of the audience; and c) Create media that incorporates knowledge of social media usage trends.
- Cecil Tengtenga asked if the issue is utilization of services or lack of awareness of services, and said that, if the issue is a lack of awareness, the workgroup's videos may increase awareness, but they may not effectively increase the utilization of services. If utilization is down, then we need to prioritize this issue. Although factors that influence utilization are multifaceted, there exist studies that provide recommendations for increasing service utilization. Mr. Tengtenga offered to share these studies with the workgroup. Mr. Tengtenga offered to try to send these evaluation papers to Mr. Gennaro and shared that the goal at his lab is to provide access to data and share valuable evaluation studies that could inform Connecticut program strategies.
- The group brainstormed the themes of messages that mobilized action.
 - Mr. Janssen said that the more poignant messages might be more likely to inspire action. He asked if there are data on multimedia messaging that gets turned into action, and if there are studies that look at marketing strategies that change folks' health behavior or preventative health practices.
 - Mr. Gennaro discussed his previous work with multimedia campaign consultants, and suggested running focus groups among the service population to determine what may be holding the service population back from utilizing services.
 - Mr. Tengtenga expressed that Connecticut is employing the most innovative sexual healthcare strategies. He highlighted the following:
 - Sam Bowens in Waterbury has done creative service utilization work.
 - Robert Jetmore in New London has done interesting program evaluation work.
 - Mr. Norton shared that testimonial video campaigns work well a la 'U=U' and that he is interested in pursuing campaigns that make use of poignant testimonials.
 - Mr. Gennaro shared Mr. Norton's interest in testimonial-based campaigns, and said that the campaigns should be guided by and reflect the voices of the people that we are trying to serve. And that the messaging we are looking for is raw and in narrative form. Mr. Gennaro added that the testimonials should include both people who are HIV positive and people who are getting on pre-exposure prophylaxis (PrEP).

C. ADJOURNMENT

- Mr. Gennaro asked the group if there was anything that folks wanted to share.
- Mr. Gennaro recapped next steps, thanked everyone for their participation, and adjourned the meeting at 12:35 pm.

PPCT 2022 MEETING ATTENDANCE

Member	Agency	Jan	Feb	Mar
Kim Adamski	HGLHC	X		
Whitney Allen	Yale		X	
Sam Bowens	Waterbury Health Dept	X	X	X
Atiba DeCruise	Stamford Cares			X
Michael Diaz	Gilead Sciences	X	X	
Alix Dittmore	CT Harm Reduction Alliance	X	X	
Taylor Edelmann	Apex Community Care	X	X	
John Gardner	Gilead Sciences	X	X	X
Dante Gennaro, Jr.	CT DPH	X	X	X
Charles Hardy	CHPC Member	X	X	
Doug Janssen	CHC		X	X
Reggie Knox	CHPC Member	X		
Tayla Moore	Community Health Svc	X	X	
Kay Muñoz	Sen. Murphy's office	X		
Joe Norton	APNH			X
Marie Raynor	Hartford Planning Council	X	X	
Carlos Rodriguez	CT DPH	X		
Beverly Reyes	Family Centers		X	
Angel Ruiz	UConn/CT Children's	X	X	X
Benjamin Saldana	National Network for Youth	X		
Ketia Similien	GBAPP			X
Keith Taylor	Staywell Health Center	X	X	X
Cecil Tengatenga	Yale Public Health			X