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Red Pump Event

National Women and Girls HIV/AIDS Awareness Day

By Penina Faustin, Prevention Specialist

On March 10th and throughout the month of March, National Women and Girls HIV/AIDS Awareness Day is observed to promote the conversation about women and girls health, and the impact of HIV on their lives. According to the 2011 fact sheet, the CDC estimates approximately one in four people living with HIV infection in the United States are women. Most new HIV infections in women are from heterosexual contact (84%). An estimated 88% of women who are living with HIV are diagnosed, but only 32% have the virus under control. For every five women who tested positive for HIV, four women tested for HIV, Hepatitis C, Chlamydia and Gonorrhea. Red was the theme of the day and those who attended wore their red polish and their red pumps with pride. A manicurist was on site to offer a free manicure in different shades of red as a talking piece in an effort to start the conversation about women and girls health, to know their HIV status, and to continue the effort of reducing those numbers.

The event’s main goal was to get women talking about their health, to know their HIV status, and to continue the effort of teaching their peers about risk reduction and testing. Several women tested for HIV, Hepatitis C, Chlamydia and Gonorrhea. Red was the theme of the day and those who attended wore their red polish and their red pumps with pride.

Among those other agencies present were: Sisters United in Health, Planned Parenthood, the MTA, ABBVIE and Island Harvest.

Sisters United in Health tabled at the event and provided breast health education, breast cancer screening techniques, referrals for free mammograms and free giveaways to the women who attended the event and to the community at large. Planned Parenthood provided referrals for free gynecological exams, risk reduction, women’s health as well as birth control pills at no cost. A representative of the MTA was present and screened those who qualified for referrals for free or reduced fares. United Healthcare representatives were on site to offer health insurance to uninsured people who qualified for their programs. Island Harvest tabled and provided free food for the community and to the women who attended. A pharmaceutical representation from ABBVIE provided free snacks and information regarding Hepatitis C treatment and a hotline number for people who test positive for Hepatitis C. A manicurist was on site to offer a free manicure in different shades of red as a talking piece in an effort to start the conversation about HIV testing. LIAAC provided free condoms, risk reduction education and free confidential testing.

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PEP AND PREP SERVICES ON LONG ISLAND

By Sophia L. Noel, MPH

In 1983 the CDC established the routes of transmission of AIDS and these remain unchanged to date. Once transmission routes were established and confirmed, public health professionals were challenged with creating effective prevention strategies. Since the means of transmission involved lifestyle choices, any prevention strategy would have to incorporate both behavioral and biomedical interventions. For the first decade prevention strategies were mainly behavioral, including condom use, access to clean needles and education on how to clean needles. Since then, several biomedical prevention strategies have been adapted.

Vaccines are the most common form of biomedical intervention. Researchers have been working hard to create a vaccine that would block transmission of the human immunodeficiency virus with no success to date. The treatment of STIs to reduce the risk of HIV transmission is one example of a biomedical intervention which has been adapted. In 1990 the drug zidovudine was approved for use as a Post-Exposure Prophylaxis (PEP) for occupational exposure. PEP, when taken as prescribed, can reduce the risk of contracting HIV by 90%. The administration of antiretroviral treatment to pregnant mothers has reduced mother-to-child transmission by more than 95%. Treatment as Prevention (TAP) was adapted as a prevention strategy in 2011. Based on the belief that testing, early detection and treatment substantially reduces the risk of transmitting the virus, TAP encourages linkage to and retention in care as well as adherence to antiretroviral therapy. Studies indicate that having an undetectable HIV viral load reduces the risk of transmission by at least 96%.

Pre-Exposure Prophylaxis (PrEP) is another biomedical prevention option for persons at high risk of contracting HIV. PrEP protocol, when properly adhered to is expected to reduce new HIV infection transmission rates by 92%. The goal of the PrEP protocol is to prevent the acquisition of the virus by HIV-negative individuals. It is not treatment for individuals who are already positive. The protocol involves frequent testing for HIV, screening for other STIs, continuous safe sexual practices and risk reduction counseling and education, and one Truvada pill taken once daily. The pill needs to be taken for at least 7 days before protection starts and must be taken every day for protection to continue. It will not protect against other STIs and safe sex practices should be continued while on PrEP.

Among the objections to the use of PrEP is the cost of the Truvada pills which run about $200-$500 per year. In New York State, most private insurance companies will cover the cost of the drug. Some individuals who use the state-run health plans are eligible for the drug and others will have to meet deductibles before qualifying for coverage. Individuals on Medicaid are covered for PrEP drugs as well as related labs and office visits.

Gleaen, the makers of Truvada, has programs to provide assistance to patients who cannot afford the drug. New York State also has in place a PrEP Assistance Program (PrEP-AP) that is similar to ADAP and provides assistance to the uninsured and underinsured. This program is accessible to undocumented individuals as well. The Patient Access Network Foundation (PAN) also offers assistance to patients who meet certain eligibility criteria.

AIDS Institute staff provides navigation and support services to individuals within Nassau and Suffolk counties to help them locate service providers. Clients have reported that it is difficult to find PEP and PrEP service providers on Long Island. In particular, men who have sex with men (MSM) clients have stated that medical providers are reluctant to talk about sexual health and PrEP, and are often rude and judgmental. In an effort to better serve our clients, and find a working solution to this problem, staff members reached out to Dr. Joseph McGowan, Medical Director at the Center for AIDS Research and Treatment (CART). Dr. McGowan and his knowledgeable and professional staff provide a full range of HIV services including PEP and PrEP at CART Monday to Friday. In addition clients can access their services at the Dolan Family Health Center on Monday and Friday afternoons. In addition, the New York State PEP and PrEP Provider Voluntary Directory helps with navigation of HIV services.

The Blueprint – which can be found at: http://on.ny.gov/1TRtcSu – includes recommendations to address the three-point plan announced by the Governor in June 2014 to decrease new HIV infections by:

1. Identifying people with HIV who remain undiagnosed and linking them to care;
2. Linking and retaining people diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and receive further transmission; and
3. Providing access to Pre-Exposure Prophylaxis (PrEP) for high-risk people to keep them HIV negative.

The Blueprint’s recommendations in support of the Governor’s plan to bend the curve include:

1. Make routine HIV testing truly routine
2. Expand targeted testing
3. Address acute infection
4. Improve referral and engagement
5. Continuously act to monitor and improve rates of viral suppression
6. Incentivize performance
7. Use client level data to identify and assist patients lost to care or not virally suppressed
8. Enhance and streamline services to support the non-medical needs of all persons with HIV
9. Provide enhanced services for patients within correctional and other institutions and specific programming for patients returning home from correctional or other institutional settings
10. Maximize opportunities through the Delivery System Reform Incentive Payment (DSRIP) process to support programs to achieve goals related to linkage, retention and viral suppression
11. Undertake a statewide education campaign on PrEP and nPEP
12. Include a variety of statewide programs for distribution and increased access to PrEP and nPEP
13. Create a coordinated statewide mechanism for persons to access PrEP and nPEP and prevention-focused care
14. Develop mechanisms to determine PrEP and nPEP usage
15. Increase momentum in promoting the health of people who use drugs
16. Ensure access to stable housing
17. Reduce new HIV incidence among homeless youth through stable housing and supportive services
18. Enhance access to health, housing, and human rights for LGBT communities
19. Institute an integrated comprehensive approach to transmission reduction and care
20. Provide expanded Medicaid coverage for sexual and drug related health services to targeted populations
21. Establish mechanisms for an HIV peer workforce
22. Ensure access to care for residents of rural, suburban and other areas of the state
23. Ensure equitable funding where resources follow the epidemic
24. Remove disincentives related to possession of condoms
25. Promote treatment as prevention information and awareness
26. Provide funding for services to persons with mental illness
27. Promote treatment as prevention information and awareness
28. Provide HCV treatment to persons with HIV and remove restrictions to HCV treatment access based on financial considerations for individuals co-infected with HIV and HCV
29. Implement the Compassionate Care Act in a way most likely to improve HIV viral suppression
30. Remove disincentives related to possession of condoms
31. Enhance and expand the use of data to track and report progress
32. Increase access to opportunities for employment and employment/vocational services

*Additional information is available at health.ny.gov/etsa.
CHEF’S SECRETS

CELEBRATING 10 YEARS OF FUNDRAISING FOR COMMUNITIES ON LONG ISLAND

By Maria Baccari

On November 2, 2014 Chef’s Secrets was once again held at the elegant de Seversky Mansion in Old Westbury. This year’s event was especially important since it celebrated the 10th anniversary of this groundbreaking fundraising event.

This year’s festivities started off with a VIP Cocktail Party for our generous event sponsors. The hour began with LIAAC’s CEO, Dr. Gail Barouh addressing the crowd. The air was filled with a celebratory flair as the sponsors mingled and enjoyed served hors d’oeuvres and wine. As the crowds arrived for the main event, they were invited to taste an array of savory foods and tempting desserts, carefully crafted by eleven of Long Island’s most talented culinary masters. The food was perfectly paired with Long Island’s finest wine and beverage selections presented by local distributors. These generous Long Islanders donated their time and talent by graciously preparing and serving their mouth-watering signature dishes, desserts and beverages to the hundreds of guests in attendance.

The evening wouldn’t have been complete without the highly anticipated raffles and auctions where guests had the opportunity to try their luck at winning fabulous prizes, while highly anticipated raffles and auctions where guests had the opportunity to try their luck at winning fabulous prizes, while

TIP 1: PLAN TO BE SAFE.
Risk: Food poisoning peaks in the summer months when warmer temperatures cause foodborne germs to flourish.
Tip: Check foods on recall list when planning your grill fest. When shopping, buy meat and poultry last, right before checkout. Separate raw meat and poultry from other food in your shopping cart. To guard against cross-contamination, put packages of raw meat and poultry into individual plastic bags.

TIP 2: KEEP IT CLEAN. STOP THE GERMS.
Risk: Dirty hands and prep surfaces can carry germs.
Tip: Wash hands, kitchen work surfaces, and utensils with soap and water immediately after they have been in contact with raw meat or poultry. Also, fill a spray bottle with water and one tablespoon of bleach to wipe off surfaces and utensils.

TIP 3: GROOM YOUR GRILL AND TOOLS.
Risk: Wire bristles from grill cleaning brushes may dislocate and stick into food on the grill.
Tip: Use a moist cloth or paper towel to clean the grill surface before cooking. If you use a wire bristle brush, thoroughly inspect the grill’s surface before cooking.

TIP 4: CURB CO-MINGLING.
Risk: Raw meat juices can spread germs to cooked food.
Tip: Place cooked meats on a clean plate and discard marinades and sauces that have come in contact with raw meat juices.

GRILLED PINEAPPLE CHICKEN

Portions: 4 • Serving Size: 3 chicken breast

INGREDIENTS: • 1 cup dry sherry • 1 cup pineapple juice • 1 tablespoon reduced-sodium soy sauce • 1/2 pound skinless, chicken breast, bone-in • 4 pineapple rings

Preparation: Place all ingredients except pineapple into a zip-lock style bag.
Refrigerate and marinate overnight.
Place chicken on a barbecue grill and cook until chicken reaches 165° F.
Discard unused marinade.
During the last few minutes, place pineapple on grill top for 2 minutes each side to heat. Serve on top of each chicken breast.
Thank you to our generous supporters

Proceeds from LIAAC’s events provide the backbone for the development and continuation of innovative programs not funded by government or other sources. LIAAC acknowledges the kindness of individuals and businesses who have demonstrated powerful commitment to the fight against HIV/AIDS.

Support LIAAC Help change the lives of those in need MAKE A DONATION TODAY!
Visit us online at LIAAC.ORG or call 1-631-385-2451

LIAAC employment opportunities
LIAAC is always looking for talented individuals to join their staff. If you are interested in employment with LIAAC please mail or fax your resume to us for consideration and review. All resumes must be accompanied by a cover letter. We will keep your resume on file and if your qualifications match any open positions we will contact you. Please check our website at www.liaac.org for current open positions and services and follow us on Facebook.

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