
**LOS ANGELES COUNTY
HIV PREVENTION PLANNING COMMITTEE (PPC)
A Select Committee of the Commission on HIV Health Services
600 South Commonwealth Avenue, 6th Floor- Los Angeles CA 90005-4001**

MEETING SUMMARY
Thursday, December 6, 2001
1:00 p.m.-5:00 p.m.
St. Anne's Foundation Conference Room
155 North Occidental Boulevard-Los Angeles, CA

MEMBERS PRESENT

Mario Perez	Jeff Bailey
Richard Zaldivar	Chi-Wai Au
Sergio Avina	Ricky Bluthenthal
Gordon Bunch	Tony Bustamante
Sandra Cargill	Mark Etzel
Ramon Flores	Edric Mendia
Veronica Morales	Vicky Ortega
Keisha Paxton	Ricki Rosales
Gail Sanabria	Vanessa Talamantes
Kellii Trombacco	Nancy Wongvipat

ABSENT

Danielle Glenn-Rivera
Juan Carlos Ledesma
Cleo Manago
James Miller
Emma Robinson

STAFF PRESENT

Elizabeth Escobedo	Dean Goishi	Oscar Garcia
Gabriel Rodriguez	Darren Roberts	Delia Sandoval

ROLL CALL - Roll call was conducted. A quorum was present. Ricky Bluthenthal asked if we are supposed to be taking roll call at 1:00 p.m.? It was clarified that it was an oversight today.

CHIPTS COLLOQUIA SERIES – Social Discrimination & Health: The Case of Latino Gay Men and HIV Risk by **Dr. George Ayala**. Copies of slides are available by request.

Next month Trista Bingham from HIV Epidemiology Program and Dr. Lee Klosinski will be presenting on The Los Angeles Bathhouse Study.

APPROVAL OF AGENDA - The Committee approved the agenda.

APPROVAL OF MEETING SUMMARY

The Committee approved the Meeting Summary for November 1, 2001. Under the Colloquia Series from Emory University should read from the "UCLA School of Nursing" (Delete Emory University).

PUBLIC COMMENT

Kathy Watt stated that there has been no money for an increase in treatment dollars for HIV positive or people with AIDS. There is a huge need and there are unspent MSM prevention funds. How do we bridge that gap? She also commented that many people who use steroids also use syringes. She believes that we are setting ourselves up for a huge escalation for the possibility of HIV transmission because it takes a strong person who has syringes to use them just for what they are supposed to be used for.

Deon Claiborne announced the following: Los Angeles HIV Research Network meeting on January 16, 2002 from 8:30 a.m. to 10:30 a.m. at AIDS Research Alliance. The conference is designed to bring together people who recruit for behavioral, treatment, medical research and members of the community to provide a bridge and a link between the two communities. The AIDS Latino Conference on April 13, 2002 from 8:00 a.m. to 5:00 p.m. will

be held at the Hyatt Regency, Los Angeles. The UCLA Community Advisory Board and the Care Clinic extends an invitation to their open house on December 11, 2001, from 5:00 to 8:00 p.m. at the CARE clinic. Flyers were provided.

OAPP REPORT

CDC Application

CDC Material Review Process

Mario Perez commented that there appears to be increased pressure nationally around the CDC material review process. At the request of congress there has been attention placed on materials developed by the Stop AIDS Project in San Francisco. Congressional leaders have requested a response from the CDC. There has been an inspector general review of the program in San Francisco and a request to interview a program in Wisconsin. There appears to be a group of community advocates in San Francisco who alerted conservative congressional members about the extent to which specific prevention interventions were either being supported or funded through these programs. In one instance there was an intervention called Booty Call that some thought was obscene. Their interpretation was that the programs were encouraging sexual activity in particular encouraging homosexual activity. There was a lot of concern at the congressional level about those programs. In addition to the Office of Inspector General report, it is also expected that the CDC will be doing some review of prevention activities funded through CDC. That includes the bulk of the prevention programs that we have in Los Angeles County. It has not been articulated so far, but there is some interest at the congressional level to look at the effectiveness of our HIV prevention programs. They want to make sure review panels are performing their duties as described by the CDC guidance. Two letters were included in the packet with detailed information on the San Francisco issue. It was stated that we are not sure how far reaching this is going to be. Currently this issue involves agencies developing materials with CDC funds. They may expand it to all materials that are being utilized by an agency whether the materials were created with CDC funds or not.

The implication for us is that we need to take a close look at our own CDC material review process. Our prevention providers are required to submit for approval to OAPP materials that are going to be used in connection with prevention programs. A review panel facilitated by Ernesto Hinojos, Director of Education, reviews these materials. Subsequently a letter of approval or denial for the use of those materials is sent to the prevention provider. The potential implications for federal review of the local review process is that there is some possibility that materials we now have in place that we think are community relevant to the groups we work with could be impinged upon. There is some concern that if resources are not being used appropriately funding can be jeopardized. Additional cuts in funding locally would not be something that is prudent. We need to make sure that as a community planning body we are more involved and more integrated in our community materials review process that our community partners use.

Ernesto Hinojos commented that we now have to supply the CDC with actual documentation of HIV prevention written materials that the material review panel signed acknowledging that the material is appropriate. About thirteen hundred pieces of material will be reviewed and the appropriate documentation will be submitted to the CDC. Currently there are five people on the review panel reviewing the last thirteen hundred pieces of documentation. They have been reviewing materials from 1999, 2000 and 2001. For the last couple of months OAPP staff has worked to ensure that the documentation has been reviewed by the Review panel and is submitted to CDC. It took them about six weeks. CDC is asking for documentation from every review panel. CDC has asked others across the country to also supply documentation. Previously this type of documentation was not sent to CDC. In the past the process has been when CDC came to Los Angeles to monitor they would summons our files and ensure that documentation was on file. The review panels have not rejected materials in Los Angeles County, but they have given comments and suggestions of possible changes and the agencies have made the changes.

The guidelines for review of materials are not very clear. It is open to interpretation. They went to court and could not find what is obscene. A proposal will be brought to the PPC to ask that PPC members can partake in this review process.

Mario Perez stated that we have a number of options. We can make sure that our congressional representatives are aware of the community needs and we also need to provide some assurance that the materials we develop locally are relevant to the communities we serve. Their interpretation of obscene is not always consistent with our interpretation. We take a pride in how we shape prevention programs that address health education and HIV prevention issues, and other social factors. We have not made any modifications to the review process. Local providers will still be expected to submit materials for approval.

There was a lengthy discussion on the materials review process and several comments were made. Some of the comments are:

- A member of the public, commented that when we approach the legislators we should articulate that we work with BRGs and that involves sex. He commented that we should not get so tied up in what we call the workshops but whether or not they are effective for our communities.
- **Jeff Bailey** stated that he recently attended a CDC meeting. The CDC recommended that we educate our legislators about HIV prevention. Most of the legislators do not understand what health education is about. It is best to inform them what works and what is needed for the specific behavioral risk groups.
- **Mark Etzel** commented that if there is going to be increased scrutiny, and if the panels may be expanded to include PPC representation that it may be prudent to develop a protocol to outlined the process.
- **Jeff Bailey** commented that a Social Marketing protocol was being developed. It was mentioned that Gunther Freehill was involved in the development of the protocol. That protocol has not been shared with the PPC. It was mentioned that it would be advantageous to view that protocol.
- **Mark Etzel** commented that the protocol described the Social Marketing process. It identifies who, when, and where initiatives would be developed. That protocol and the review panel criterion would be good tools. He suggested the possibility of providing to the PPC information and feedback such as who is on the review panel. By articulating questions, discussion and dialogue where constructive feedback is given that can lend credibility to what is being done on this topic within the PPC. So that if PPC members are collectively called to task, they can say this is how it has been done.
- **Mario Perez** commented that we need to be very strategic in how we advocate for or against some of the issues that are arising. It is important to lessen the attention that we place on material review process. To the extent things can remain status quo for us locally, that would be the best way to go. We need to be vigilant and make sure that these interpretations and rulings do not get out of hand. It appears that the CDC has been asked to develop a web advisory for all of the web sites to address HIV prevention. There has been a draft web advisory issue developed by the CDC.

MOTION: Mark Etzel made a motion that in light of these comments that there may be utility in putting forth that the PPC be able to work with OAPP around reviewing the current process and guidelines for material review and help implement a system that is responsive to this new issue. The motion was seconded.

There was a discussion about whether to assign a committee or a group to work on this issue. A suggestion was made that a committee work with OAPPs Director of Education to look at the current guidelines for reviewing materials and offer input on those guidelines and get them in a written format.

Dean Goishi recommended that the PPC instruct OAPP to provide a presentation on the current guidelines and the process to the PPC next month. He stated that PPC members need more details of the exact criteria. He also suggested that PPC members begin to think about whom would want to join the Materials Review panel.

Mark Etzel withdrew the motion and accepted Dean Goishi's recommendation.

Revised CDC Counseling and Testing Guidelines

Mario Perez, the Counseling and Testing Guidelines are available on the CDC web site (www.calc.gov). He will try to report highlights back to the PPC.

Jeff Bailey attended the CDC syphilis elimination meeting in Dallas. There was quite a bit of discussion among the syphilis people about how they interview individuals, and how the HIV people don't do a very good job at Partner Counseling and Referral Services. He just wanted to let them know. In the new guidelines for HCT, that is a mandated guideline now that you provide Partner Counseling Referrals.

HIV Counseling and Testing Provider Training

Mario Perez announced that OAPP will be hosting one of a series of community partner trainings for all the HCT and HERR contracted providers. The purpose is to review new contract requirements, including evaluation and quality assurance plans, also to review some of the new Partner Counseling Referral Service components that OAPP is funding in connection with some of the HCT services. We are now migrating to the use of the HIV-5 form countywide. There will also be an HIV-5 form training provided by the State of California this next Monday.

OAPP Prevention Division has been working to wrap up the eighty budgets. There have been a number of delays with the negotiation of the HCT contracts. We have limited resources and have made it a point based on the HIV Prevention Plan recommendations to make sure that we use our resources to target the most at risk individuals. There were some challenges getting the HERR programs to be responsive to our BRG models. There have also been serious reservations about having our providers target their HCT services to the BRGs identified by the PPC. That has had some impact in our ability to effectively negotiate some of the contracts. When the PPC makes decisions to target resources and there is some reservation at the provider level, then we are not fulfilling the recommendations by the PPC. As challenging as the fee-for-service structure may be, it is one strategy that we will rely on to make sure that HCT services are targeted.

Approximately 120,000 tests are conducted in this county. About 40,000 tests involve people who have no reportable risk. We cannot continue in Los Angeles County to fund 40,000 tests for persons who do not report an HIV risk. This is one reason for the fee-for-service structure that emphasizes BRG. We need to make sure that the post test services that are so important for persons to know their status are in place. On average during the last couple of years there have been about 24,000 people tested in Los Angeles County who have not returned for their results. We are making significant investments on the front end and do not have tools in place to make sure that people know their results. He mentioned all this to shed light to the reason for the delays in HCT. He reminded the PPC and the community that the delays have not been entirely as a result of OAPP's delays or hesitancy to move forward with that process.

The Board package should be prepared to leave the office in the next couple of weeks. It takes about thirteen weeks from the time it leaves OAPP. Normally it takes about eight weeks to cover the entire contract negotiation process internally. We have gone beyond the contract negotiation timeline that we have allotted ourselves. Many providers have requested in person meetings, this normally does not take place with contract negotiations so he wanted to provide details of the last four months activities

Currently HCT services are in place through June 2002. We do not expect any interruption in testing services in Los Angeles County. There will be delays in implementation for the newly funded testing programs. We understand the challenges involved in only targeting HCT services to one BRG and in multiple BRGs. Providers have been allowed some flexibility. This year our intent is to make sure that our providers are at least targeting most of their HCT services to the BRGs.

Occasionally we hear about the challenges of engaging bisexual men in Los Angeles County. Those are important concessions that we need to make in order for us to make progress. We are comfortable with developing very targeted outreach plans that encourage targeted HCT services.

Gordon Bunch asked how does the HIV-5 form address women who often cannot identify her risk? Mario Perez responded that is an excellent question. That is where we rely on our community partners to be able to engage their clients in open honest pretest counseling sessions to elicit that information. Looking at the HIV-5 form, the State's interpretation of risk for women is fairly generous. It is not always going to be a case where the woman needs to identify some other associated risk for their male partner, but if a woman has multiple sex partners that already puts them in the Women At Sexual Risk category. The HIV-5 form does have some inconsistencies with how we interpret things. We have made a decision in almost every case to go with the interpretation that favors the HCT provider. No one is being turned away from testing. Mr. Perez stated that it is imperative that if we are to meet the objectives of our 3 year HIV Prevention Plan, that we target HCT services to those individuals who we know are most at risk for infection and who are testing positive at the highest rates.

Mario Perez stated that OAPP is working to develop a strategy to ensure that the SPAs in the county who have been under funded in the MSM category are allocated resources evenly based on impact over the 8 SPAs. We have a very clear resource allocation model that indicates the proportion of HIV impact in each of our 8 SPAs and based on the 6 BRGs. SPA 6 is under funded for MSM prevention services. OAPP is working to make sure that we are able to invest the appropriate level of resources in SPA 6 to make sure that we are targeting gay and bisexual, African American men. There is some slight underspending in SPA 2, and we will also be developing some strategy for that SPA.

We need to ensure that the funded within those SPAs crafts and shapes their prevention efforts to meet emerging needs. OAPP is more than willing to review what prevention disparities exist and to see what other resources exist

in those SPAs within those communities and make modifications as necessary. Mr. Perez also stated there are some communities in SPA 7 that feel like prevention services are not getting to them. They have identified some high-risk individuals in very specific communities and we need to make sure that our providers planning to provide services in SPA 7 are aware of those prevention needs and that we respond accordingly.

Mario Perez commented that OAPP is working closely with the Sheriffs Department to make sure that we expand HCT services and some other risk reduction services. The office is planning on releasing an RFP to have two additional HCT providers work within the county jails. It is important for our office to make sure that we have community partners within the jails to provide the important linkage upon release for individuals who either are negative and high risk and in need of prevention services or are testing positive and in need of medical care and also prevention services.

Gabriel Rodriguez commented that OAPP did report that we were releasing funds that were targeted to provide HCT services within the jails. OAPP is planning to release those funds as well as additional funding for the Jails Demonstration Project. It will include peer education and support, risk reduction counseling. These are part of a larger Corrections Demonstration Initiative that includes transitional case management, staff training and support for staff, and materials development. All these things are part of the larger Demonstration Initiative that we are working on implementing. Three of those components are being put out to bid and we are working very hard to develop the programmatic elements and descriptions that will help our community partners respond to this RFP. It is hoped to be release before the end of the year. Other components of this demonstration project are moving forward, especially the main component that is funded by the State, which is the Transitional Case Management piece of that initiative.

Mario Perez commented that last month there was a discussion about OAPP identifying a consultant to develop a condensed version of our HIV Prevention Plan. The office has engaged a consultant who had provided a bid. The bid does seem to be quite unreasonable. He will make sure that the Youth Leadership committee is aware of the details. The office remains committed to making sure that we have tools in place that encourage youth to be more actively engaged in our community planning process. OAPP is interested in identifying two youth leaders in Los Angeles County to attend the Ryan White Youth Conference in Washington DC on behalf of Los Angeles County. Two persons have been recommended. One is David Zucker who is actively involved in the Youth Leadership sub-committee. It is hoped to also include the youngest commissioner on the CHHS.

BREAK

CO-CHAIRS REPORT

Recruitment

Sandra Cargill explained that the Operations sub-committee revised the Policies and Procedures based upon the CDC requirements. She explained that they went through the PPC composition requirements as specified in the Policies and Procedures. They looked at the existing membership to identify and assess what our PPC membership composition should be, to assess where we are at in terms of our representation, and then to make recommendations to fill those gaps. The Operations sub-committee accomplished several tasks and is still working on this process. They will be reviewing the existing pool of applicants that did not get selected but did not get rejected. They will also review the new applications. The Recruitment criteria is four youth representatives, one representative from every SPA, ethnically balanced that matches the epidemiology profile that is used to determine where the epidemic is. They will look at the contribution that an individual can make, and the level of commitment. It is important to note that a person can participate in this committee and its sub-committees without being a member. After the selection process those recommendations will be forwarded to the Executive Committee.

The Operations sub-committee identified the need to recruit approximately 8 members including from other health departments. The PPC is required to have representatives in certain areas of expertise. They met all of the SPA requirements. They have decided that the recruitment process for the next couple of months will be ongoing instead of conducting a mass mailing one time a year. Applications for Membership to the PPC were included in the packets last month and this month. The goal is to have an ongoing pool of applicants. It is hoped to bring in new members in time to attend the retreat in February 2002. It is hoped to have the Orientation in January 2002.

There was a lengthy discussion about the recruitment process and the recruitment of youth. Several questions were asked and concerns expressed. Sandra Cargill was asked to restate the recruitment process. Some questions and concerns were; If you have two youth for each SPA how do you choose between them? Do we need to recruit more youth? How do those 5-Health Department seats fall into any of those categories? Are you going to fill 3 or 4 youth vacancies or stay with the existing youth representatives? If they are going to put the PPC membership application in the packet every month maybe they could include a list specifying what seats the PPC is trying to fill.

The following clarifications were made:

Sandra Cargill commented that she would like our outreach to be more open rather than restrict it to a specific gap. She would not want someone who might become a vital member of this committee not to apply because they do not see their specific category on a list. Those interested should apply. She explained that we are going through the recruitment process now and that anyone is invited to join the Operations Sub-committee and participate in the process. Right now we have three youth that joined last year. She stated that the committee is looking at the issue that as youth members turn 24 years old they are no longer qualified to represent youth. The Operations sub-committee will be looking at that requirement.

Gordon Bunch reassured youth that when a person joins the PPC they are members for three 2-year consecutive terms.

Richard Zaldivar reassured young people that we are not removing young people from the Youth Leadership sub-committee. One of our goals of having a Youth Leadership Sub-committee is to try to recruit youth on an ongoing basis, and to keep the young people that are already experienced and have strong leadership skills to continue to be part of the prevention effort. He also commented that after the review of the applications the Operations Sub-committee submits their recommendations to the Executive Sub-committee, then they are voted on by the PPC body, and finally forward to the OAPP Director for appointment.

It was recommended that PPC members should read the Policies and Procedures to understand the process. PPC members were encouraged to participate in the Operations Sub-committee.

Gabriel Rodriguez commented that at the last Operations sub-committee meeting they discussed that rather than doing a mass mailing that has turned out to be very ineffective in reaching qualified and interested people to the PPC, that a new approach be used, to do a more targeted and more focused recruitment of members based on our contacts with the community in Los Angeles County. The county is very large but the community and the people that are doing HIV prevention work, the people who have the expertise to do this work, is a smaller group. With some focused efforts by this membership and by the community that attends the PPC, we can identify some qualified people. That is the reason that the PPC membership application is included in the packets. The Operations sub-committee feels that you will be more effective in identifying some qualified people through your contacts, and through your professional interactions, than through a mass mailing of 3,000 letters that waste a lot of county resources. Mr. Rodriguez stated that the committee was hoping to get the applications in for review so those new members could be selected and participate in the February preretreat, orientation, and the PPC Retreat.

Mario Perez clarified that the City of Pasadena and the City of Long Beach both receive resources for prevention directly from the State of California, which is the reason those two Health Departments have been invited to this table. The other two areas where there is a vacancy is for a representative from the ADPA and TB Control which historically have participated in the PPC. Letters have been drafted for the co-chairs to review.

It was mentioned that the PPC is looking for representatives from.

- ◆ Communities of faith.
- ◆ The City of Pasadena, the City of Long Beach, ADPA, and TB Control
- ◆ Youth
- ◆ Two vacancies that could meet a number of the criteria and fit into a particular category based on demographic information.

Jeff Bailey clarified that presently there is one youth seat open. He commented that even though a person may not be selected as a PPC member they are encouraged to participate in the sub-committees. He stated that we could make PPC membership vacancy announcements at the PPC meetings.

Syphilis

Tony Bustamante reported that year to date the early syphilis cases is 156 cases versus 111 cases that were reported in all of the year 2000. He just got the recent summary of the data for the syphilis elimination conference that Jeff attended last week. A copy of the recent summary of the syphilis elimination was provided. You will notice in the data that the incidence of syphilis is at an all time low. That is why the syphilis elimination initiative was released 5 years ago in hope that syphilis would be eliminated in the U.S. by the year 2005. However, you will see that there are eleven counties that have had an increase in syphilis rather than a decrease and Los Angeles County ranks number nine. The CDC released a short article why STD detection and treatment is a good HIV prevention tool as well. He provided those articles for interested individuals.

Jeff Bailey commented that there is a Syphilis Outreach Working Group that has been convened by a number of providers and is very well attended. The coordinators of that prevention group had requested to all the providers that do outreach to men who have sex with men in the bars, the clubs, and the sex clubs and bath houses, to submit a calendar. In order to avoid duplication of efforts, the calendar should indicate the time and place of those efforts. Unfortunately, not everyone has responded. It would be very helpful to the working group for those agencies providing outreach to MSM in Los Angeles County to ensure that those calendars are submitted. He mentioned that later this month there will be the initial beginning of the syphilis campaign targeting MSMs and there will be some collateral material available that will go into the clubs specifically on New Years eve. A year ago New Years eve was a contact point for many men.

Vanessa Talamantes asked about the shigellosis bacteria? Mario Perez responded that there appears to be an increase in Shigella among gay men in Los Angeles County. OAPP has once again responded and helped produce some education materials. A flyer is available on our web site, (lapublichealth.org). The county is paying close attention and wants to make sure that gay men in Los Angeles County are informed of its mode of transmission, which appears to be most commonly through fecal contact. There appears to be a significant rise in cases.

Executive Briefing

Richard Zaldivar thanked Prototypes who sponsored a very successful Executive Briefing. He thought it was very powerful to have such a great morning of discussion and activity. The budget cuts from the State of California were discussed. They are also looking at the projected budget cuts from the State of California and its affect in our jurisdictions. From that meeting the following game plan is being worked on:

1. To respond to those budget cuts by organizing community based organizations throughout communities in Los Angeles County to create a telephone campaign to call the legislators about our concerns;
2. To conduct a letter writing campaign to ask our volunteers and our clients to do a letter writing campaign; and go into our communities our neighborhoods and our barrios to get support for this campaign; and
3. To organize visits to members of the State senate and State assembly.

A number of organizations made a verbal commitment to get involved. They identified agency liaisons and the coordinators for the telephone campaign, the letter writing, and the office visit campaign. He stated that for those who were not present this morning that there is no greater need than now.

UCHAPS

Mario Perez reported that UCHAPS is engaged with both NASTAD and the CDC in ongoing discussion on materials review. Another area that will be discussed is the concern for persistent flat funding of prevention programs; the extent to which the CDC allocates resources to directly funded CBOs is often inconsistent with our local prevention planning efforts. There is concerns about addressing the social cultural issues that influence HIV on a national scale and the call for CDCs more proactive response in addressing issues such as homophobia, poverty and access issues. Congressional representatives will be informed of those concerns through a UCHAPS Urban Agenda document that will be developed. UCHAPS participants are the six CDC directly funded jurisdictions. They are San Francisco, Chicago, Los Angeles, Houston, Philadelphia, and New York. The combined six jurisdictions account for over three fourths of the AIDS cases in the country.

Richard Zaldivar reported that he attended the UCHAPS meeting in Philadelphia. It was a two-day meeting. One of the by-products was to come up with a list of issues UCHAPS is going to be supporting. He tried to obtain a copy of those issues to provide to PPC members but was not able to. He asked Mr. Henry for a copy for the next PPC meeting.

ACTION: Richard Zaldivar will obtain copy of the list of UCHAPS recommendations.

Strategic Planning

Mark Etzel commented that there was discussion about the new work groups that are being formed from both the Commission and the PPC. They have discussed linking some of our existing committees with this process. He encourages people to become involved. It is an opportunity for our body to be represented and work through an ambitious process. It is very important that all sub-committees begin to participate in the Strategic Planning efforts. It is important that efforts are channeled through a central place. He is working with Tracy Cummings to make sure she knows what each sub-committee is focusing their efforts on.

SUB COMMITTEE REPORTS

Evaluation

Edric Mendia reported that significant changes have been made to their work plan to ensure that it meets the commitments that have been submitted in the CDC application. At their last meeting the majority of the discussion centered on the CRAS survey. There are no questions on domestic violence. There was also some concern that the existing questions on injection drug use were not adequate to assess barrios. Normally the CRAS survey goes to IRB in December and the community partners administer it in May. The consensus of the group was that to delay CRAS by a month or so to do it correctly. At their next meeting they will be reviewing the changes that will be recommended by OAPP. He commented that if anyone needed information on ELI to contact him. A comment was made that the issue was not focused on domestic violence but broader on violence.

Youth Leadership

Sergio Avina reported that the meeting was held at Bienestar La Casa. The next meeting will be held at the Wall Las Memorias. The meetings are being co-facilitated by youth interested in becoming members in the core group. Pre-sub-committee meetings are held to orient the co-facilitators on the agenda. They have received about six applications for membership to the sub-committee. The deadline is December 12, 2001. They are working on an award ceremony to honor youth or youth service providers for the work in the community. They also discussed orientation schedules to be held in March and September 2002. Gordon Bunch was thanked for a donation to provide cake and punch. OAPP was also thanked for providing a consultant to work with them.

Kellii Trombaco the Minority AIDS Project has a very effective youth program. The person that you can contact is Tracy Kennedy.

Best Practices

Kellii Trombaco reported that they are continuing the extensive review of literature search. They are going to cancel the December meeting. They will meet in January.

Operations

Sandra Gargill commented that their committee has responsibility to consolidate the community input that was provided this year and bring back recommendations as to how obtain and utilize feedback from the community. That was tabled for the committee to work on membership. She encouraged all to recruit PPC members. Sandra was commended for her work.

Joint Public Policy (PPC and Commission)

Mark Etzel reported that the Joint Public Policy committee met in November and they focused on the CHHS policy work plan. The CHHS had their first retreat. The December meeting will be cancelled. The issue about transgender and sex work is still being worked on.

Jeff Bailey commented that it was just recently announced that the Sheriffs Department is now allowing condom distribution in County jail. He thought that it might be appropriate for the PPC to write a letter thanking the Sheriffs and the Department for that change in policy.

ACTION: A motion was made, seconded and approved that a letter be drafted and sent to the Sheriffs and the Department thanking them.

Richard Zaldivar commented that Juan Carlos Ledesma was to provide the Commission update, but he was not present. A letter of warning was sent to him that he would be removed from the PPC.

Commission

Vanessa Talamantes reported that the Commission had its retreat on November 23 and 24, 2001. They got a lot of work done and many people made it a point to include prevention issues during that retreat. It is really important for PPC members to attend the CHHS.

Retreat Ad Hoc

Vanessa Talamantes reported that they are planning to invite at least one co-chair from each sub-committee of the CHHS, and the CHHS co-chairs. The PPC Retreat will be held on February 21 and 22, 2002, at the Manhattan Marriott Beach Hotel. PPC members completed a confirmation survey. Dinner will be held at Reeds Restaurant. The PPC February meeting will include a preretreat. The Policies and Procedures will be discussed. She encouraged the co-chairs of all the sub-committees to attend the Retreat ad hoc meetings to help with the agenda for the retreat and some of the items that pertain to the workplans of each sub-committee. The retreat ad hoc co-chairs will be meeting with Mr. Henry and Diane Burbie, the Retreat Facilitator to discuss the agenda items. The next Retreat Ad Hoc meeting will be December 17, 2001 from 10:00 a.m. to 12:00 p.m. at OAPP. Dean Goishi will be working with the Operations sub-committee and the Retreat ad hoc committee to coordinate the logistics about the PPC Orientation and the PPC pre-retreat.

ANNOUNCEMENTS

Jeff Bailey stated that with regards to materials review, some press is already started being wary of things that are going into their publications. He just wanted to keep that in your radar especially for those agencies that provide services in Orange County, because Orange County refused an ad from an agency saying that it was too controversial. The agency refused to do anything about it because their Board tends to be a little bit more conservative and they agreed with the newspaper. I just wanted you to be cognizant of the fact that those things are already happening.

Mark Etzel announced that next Thursday the UCLA AIDS Institute is hosting its annual Scientific Symposium, Looking Beyond The First Twenty Years. There is going to be a basic clinical and social behavioral track. It is a free event. On January 17, 2001, OAPP and CHIPTS will be conducting skills building training on prevention strategies for men of color and their partners. It is a one-day event. Information will be mailed soon. MSM Symposium is scheduled for January 17, 2002. Information was made available.

Nancy Wongvipat on December 10, 2002, APLA will open a site in West Hollywood. It is located on Fairfax, one block south of Melrose. Their focus is prevention. Free meeting space for the community is available. If interested contact her.

Mario Perez commented that Eduardo Alvarado has joined the Prevention Division in the capacity of Epidemiologist. He will be working closely with Magdalena Esquivel in the development of the PHIP evaluation plan and subsequently will be working on identifying tools and methods to assess data that comes through OAPP with respect to counseling and testing and HERR activities. He welcomed Sophia Rumanes. She will be managing a team of program managers within the Prevention Division.

Gordon Bunch brought copies of a recent Morbidity and Mortality Weekly Report (MMWR). This issue describes HIV testing among racial ethnic minorities.

Tiffany Horton the LAGLC is still offering free syphilis testing. No appointment is necessary from 11:30 a.m. to 3:00 p.m. They schedule appointments 24 hours in advance. A clinician is available with 24-hour advance appointment. The clinic starts at 5:00 p.m.

On December 10, 2001, the LAGL center is starting the first phase of their comprehensive program on addressing HIV, STDs, and mental health called the SPOT. They will be open from 10:00 a.m. to 8:00 p.m. at 745 N. San Vicente, the old location next to Cal Fed. They are starting their first phase with youth services and outreach and STD services.

Orrenda Warren thanked everyone that spoke at the Minority AIDS Project World AIDS Day event. They had over 300 youth in attendance and many were tested. She thanked OAPP for their support. The Second District HIV Community Coalition is moving its location to the Unity Fellowship Social Justice Center as of January 1, 2002. The address is 5149 W. Jefferson, and the meeting is going to be held at 9:00 a.m.

Sergio Avina discussed a prevention effort that he has been involved with for about three years. He coaches and plays in a softball team that is involved in creating awareness around HIV to the community. It consists of 16 predominately Latino players. They are working on creating a web site for prevention efforts and expanding efforts towards linking with CBOs and agencies. In November 2002, they went to a tournament in Palm Springs and brought back first place.

Jeff Bailey announced the annual Club Freedom event in West Hollywood, on Monday December 31, 2002. It is an alcohol tobacco free event. It is free to the public.

ADJOURNMENT

The PPC stood for a moment of silence in memory of **Paul Stark**. Paul was an employee of Being Alive in Los Angeles

The second roll call was conducted. The meeting was adjourned.

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