



**African American** 

# HV/ADS WORKING FORIM

**To Address Capacity Building Strategies Summary Report** 

#### Introduction

On October 18, 2005 the AIDS Institute of the New York State Department of Health held The African American HIV/AIDS Working Forum to Address Capacity Building Strategies at the Poughkeepsie Grand Hotel in Poughkeepsie, New York. The event was attended by 207 people from across New York State, including AIDS Institute staff, other governmental employees, representatives from HIV/AIDS service providers that primarily serve African American populations, critical community advocates, and consumers of HIV/AIDS services. The Forum brought together the AIDS Institute and members of the African American community to discuss steps to enhance collaboration and efforts to address the HIV/AIDS epidemic in African American communities. Continuing to build and develop the partnership between the AIDS Institute and the community is particularly important at this time. The Forum provided another opportunity for the AIDS Institute to hear from the African American community about what community members perceive as intervention opportunities and for community members to hear from each other about available community knowledge and resources. This document summarizes the creation and development of the Forum, themes that emerged from participant discussions, and the initial component of the Forum evaluation.

# **Background**

In 2002, the Communities of Color workgroup, an advisory body of the AIDS Institute comprised of staff of color, recommended the AIDS Institute convene a community meeting to discuss and respond to the 2001 National Alliance of State and Territorial AIDS Directors (NASTAD) report, "HIV/AIDS: African American Perspectives and Recommendations for State and Local AIDS Directors and Health Departments." Given recent HIV/AIDS data that document the continuing disproportionate impact of the epidemic on African Americans, the purpose of the meeting was to further identify needs and opportunities to develop capacity, strategize action steps, and foster conversations with the AIDS Institute about community concerns around the rising HIV epidemic within the African American community. An overarching goal of the Forum was to build on work already undertaken by the AIDS Institute to address HIV and AIDS in New York's most heavily impacted communities, in particular communities of color.

The Forum was developed collaboratively between the AIDS Institute's Communities of Color workgroup members, and staff representing all bureaus and units of the AIDS Institute. The AIDS Institute contracted with the African American Capacity Building Initiative (AACBI) of the Harm Reduction Coalition. AACBI is a Centers for Disease Control and Prevention (CDC) -funded initiative that provides technical assistance to community-based organizations and local and state health departments to develop capacity to better serve African American communities, reduce HIV infection rates, and increase HIV testing and access to care. AACBI provided technical assistance and support in the development, implementation, and evaluation of the Forum.

#### **Forum Development Process**

From the outset, the Forum Planning Committee recognized the importance of community collaboration and input in planning. Community focus groups were held throughout New York State and within the AIDS Institute to foster community buy-in, and to help inform the process and design of the Forum. Community focus groups were held in Harlem, Brooklyn, Rochester, Albany, and Buffalo. Focus groups convened over 80 HIV service providers, community stakeholders, and consumers in eight focus group sessions. Regional Ryan White CARE Network Coordinators identified participants and meeting sites, and either served as facilitators or recorders. Internal focus groups were held in New York City and Albany, convening 40 staff from across all bureaus and units within the AIDS Institute.

In addition to identifying points for AIDS Institute consideration, focus group results contributed to the design of the Forum. The format selected for the Forum was a "mini-focus group," assembling at each table a cross-section of AIDS Institute-funded HIV service providers and those not currently receiving AIDS Institute funding, other community stakeholders, and consumers. Questions posed to Forum participants emerged through the community focus groups held earlier, and discussions on the day of the Forum were facilitated by AIDS Institute staff or invited participants.

### **Participant Selection Criteria**

Resources and space limitations required the Forum Planning Committee to develop an objective methodology to identify a critical mass of salient Forum participants. These persons were stakeholders who are committed to HIV prevention and treatment for HIV infected and affected members of the African American community. The Forum Planning Committee invited participants by: compiling lists of AIDS Institute funded agencies; requesting AIDS Institute Bureau Directors to nominate staff; identifying local, state, and federal government representatives; seeking critical community advocates and stakeholder names from Planning Committee members and others; and soliciting names of consumers and stakeholders from Ryan White CARE Network Coordinators representing regions throughout New York State.

AIDS Institute-funded contractors whose client base was greater than 50 percent African American were invited to participate. AIDS Institute Bureau Directors were also asked to nominate staff to attend the Forum and staff that attended were assigned tasks at the Forum. Local, state, and federal government representatives and community advocates and stakeholders who are not formally connected to HIV/AIDS treatment or prevention programs, but are impacted by the epidemic and involved in the fight against HIV/AIDS at the community level were invited, as were critical community advocates.

In addition, all Ryan White CARE Network Coordinators were invited to participate. Network Coordinators were also asked to nominate two consumers from their region who would enrich the discussion by sharing their experiences and actively participating in the strategy planning process. Of note, 25 percent of Forum participants were consumers.



Mr. Jagadisa-devasri Dacus

### **Forum Goals and Objectives**

- To provide participants with the opportunity to voice their concerns about the rising HIV/AIDS epidemic in the African American community
- To increase participants' awareness of HIV/AIDS related issues specific to the African American community
- To increase participants' awareness of non-traditional intervention strategies (i.e., non-traditional stakeholders and venues) that will help stem the HIV/AIDS epidemic in African American communities
- To facilitate the development of new alliances and potential partnerships that will mutually enhance capacity to build effective HIV/AIDS prevention and care strategies

#### **The Forum Program**

The African American HIV/AIDS Working Forum to Address Capacity Building Strategies was held on October 18, 2005 at the Poughkeepsie Grand Hotel, Poughkeepsie, New York. With participants traveling from across the state, a welcoming reception was held on Monday, October 17, the evening before the Forum. Dr. Guthrie Birkhead and Ms. Barbara Devore, Director and Executive Deputy Director of the AIDS Institute, gave welcoming remarks, and participants enjoyed culturally relevant events and a discussion of the video trailer, "House on Fire," led by the filmmaker, Mustapha Khan. The reception was an opportunity to network and also served to establish a rapport among participants. From the beginning, the Forum Planning Committee conceptualized participants bringing their "total selves," to the Forum, and not just their roles as administrators, government officials, or service providers. As members of the African American community, invited participants experience the HIV/AIDS epidemic in a unique and profoundly personal way. In order to maximize this opportunity and allow for honest, critical, and meaningful dialogue between and among the community and the AIDS Institute, a "safe" environment was necessary. The welcoming reception was a culturally relevant opportunity for participants to establish trust and express themselves, which led to the ultimate success of the event.

The format for the Forum was influenced by the focus group configuration. Forum participants were assigned to one of twenty-six circular tables. At each table of ten there were two consumer representatives, community stakeholders, an AIDS Institute staff person, a designee from an AIDS Institute-funded community-based agency, as well as a person representative of an organization not funded by the AIDS Institute (religious, civic, educational, etc.). The table discussion was guided by a set of predetermined questions, and moderated by a facilitator. Prior to the meeting, the facilitators received training through the AACBI and had the opportunity to review questions to be used.

The speakers for the Forum were carefully considered. They represented African Americans who are widely recognized for their leadership roles in

the community and in the field of HIV/AIDS. Each speaker was uniquely qualified, learned, and respected nationally. They all had a deep conviction of the need for African Americans to unite and collaborate in mind, spirit, and body to impact this epidemic. A copy of the Forum program can be found in Appendix A, and a list of speakers is in Appendix B.

The speakers and the structure of the Forum provided a unique conference environment. It was the collaborative effort between speakers and participants, and the varied representation at each table that provided rich discussion and an exchange of ideas, experiences, and wisdom. The speakers informed the participants and reiterated the purpose and charge of the gathering. The participants informed each other, the facilitators guided the process, and recorders noted the content.

AIDS Institute staff person, Sallie Perryman, was responsible for contacting and coordinating the appearance of each of the speakers, and must be commended for her extraordinary efforts. Ms Perryman's personal relationship with each speaker, and their respect for her, influenced their acceptance and appearance at the Forum. The Forum Planning Committee and the Communities of Color Workgroup acknowledges her outstanding contribution in this effort.



Candles which represent shedding light on the HIV/AIDS epidemic and relighting the commitment to ending HIV/AIDS

# **Forum Response Themes**

Members of the Forum Planning Committee and Communities of Color Workgroup, with assistance from the AIDS Institute's Office of Program Evaluation and Research (OPER), reviewed and analyzed the responses from each table. Every effort was made to ensure a standardized process to facilitate a comparative analysis of responses. Trained facilitators were assigned to each table, and questions were universal for all participants. Below is a summary of major themes derived from responses to each question.

#### **DISCUSSION QUESTION 1**

How can we work collectively, as a community, to stop the spread of HIV/AIDS and/or stop the increase of HIV infection rates among African Americans in New York State?

- A) HOW CAN WE DO SO AS PEOPLE AT THE TABLE?
- B) How can we do so as individuals or service providers?

#### **Major Themes**

- Start discussions at churches and fraternities/sororities
   "If churches can get out the vote, they can get out the word..."
- Communication with each other
- Commit to operationalize personal HIV education and knowledge
- "Return to each one, teach one...."
- Take responsibility for education of self and others
- "We need more mentoring, rights of passage, and self-esteem programs."
- Work collectively with providers
- Share information and discuss issues with family and friends
- Stress the importance of values at home

#### **DISCUSSION QUESTION 2**

BASED ON YOUR KNOWLEDGE OF THE AIDS INSTITUTE, WHAT DO YOU THINK THE AIDS INSTITUTE IS DOING WELL TO AFFECT THE HIV/AIDS EPIDEMIC IN THE AFRICAN AMERICAN COMMUNITY?

- A) WHAT CAN BE DONE TO INCREASE THE EFFECTIVENESS OF THE AIDS INSTITUTE?
- B) WHAT CAN YOU/YOUR AGENCY DO TO IMPROVE COLLABORATION WITH THE AIDS INSTITUTE?

#### **Major Themes**

#### What The AIDS Institute Is Doing Well

Provides HIV/AIDS information/epidemiological data and community education

**Examples: Centers of Expertise, AIDS Institute-sponsored training, HIV education materials and resources** 

Convenes forums/conferences

**Examples: Past Statewide AIDS Conferences, the African American** Forum, other forums/conferences

Involves Consumers

Examples: Promoting agency consumer advisory boards, Prevention Planning Group, World AIDS Day activities



Dr. Marjorie Hill

# How can the AIDS Institute better address the HIV epidemic in the African American community?

- Working closely with contractors to provide technical assistance
   Examples: More agency follow-up and technical assistance regarding
   service implementation and effectiveness
   "Map AIDS service providers in a community...and encourage
   partnering to increase efficiency."
- Increasing the capacity of community-based organizations
   Examples: Grant writing, alternate funding options, agency-to-agency mentoring, program evaluation
- Increase hiring of African Americans in management/leadership
  positions within the AIDS Institute
   Examples: AIDS Institute leadership should compliment
   community/reflect epidemic, groom internal staff/external candidates
   (PPG) for AIDS Institute leadership



Dr. Adelaide L. Sanford and AIDS Institute Staff Members

# What Can You/Your Agency Do to Improve Collaboration with the AIDS Institute?

- Increase/improve communication/collaboration between the AIDS
   Institute and community-based organizations/community
   Examples: Sister to Sister collaboration, improve and expand relationships between community-based organizations and AIDS
   Institute contract managers, encourage AI staff to promote collaboration, provide data to help providers understand the epidemic
- Increase collaboration between community-based organizations
   Examples: County and regional conferences, encourage community-based organizations to collaborate in RFA development to decrease competitiveness, AIDS Institute contract managers promote collaboration, community-based organizations share best practices



Mr. Michael Dunham and Mr. Cornelius Baker

#### **DISCUSSION QUESTION 3**

Who are the non-traditional service providers and stakeholders, what are their venues, and what roles can they play in the delivery of HIV prevention and care in the African American community?

WHAT VENUES CAN BEST IMPACT THE DELIVERY OF HIV/AIDS PREVENTION AND CARE IN THE AFRICAN AMERICAN COMMUNITY?

#### **Major Themes**

 Engage businesses in the African American community to: incorporate HIV/AIDS messages in their interaction with consumers and provide HIV/AIDS educational awareness including distributing materials and condoms in shops/stores

Examples: Beauty and barber shops, launderettes, clothing and shoe stores, check cashing venues, grocery stores, supermarkets, banks, law offices, pawn shops, butchers, nail salons, liquor stores, bars/clubs, fast food restaurants, bodegas, hotels/motels

- "Engage businesses that make money in African American communities to do HIV education and outreach ... why not a game with HIV prevention messages?"
- "Incorporate HIV education in barber/beautician training and certification."

 Collaborate with members of Faith organizations to: Provide health care services, testing, sex education, counseling, and mental health services, and offer partnerships with community-based organizations

Examples: Churches, mosques, temples, faith communities, clergy, church membership, ministries, church events, and meetings. "Support and publicly promote ministers and churches that are doing good HIV prevention and education work."

 Educate members of social organizations to effectively communicate HIV/AIDS messages within their social networks
 Examples: Sororities, Fraternities, Masons, Elks, LINKS, Girl/Boy Scouts, 100 Blacks in Law Enforcement, senior community centers. "Bring all national black organizations [together] to commit to a national agenda to stop HIV."

• Find better ways to engage stakeholders

Examples: Offer financial incentives and free condoms; provide educational materials: literature, videos, safe sex kits, information specific for each community; and treat them with respect. "Mentor someone..."



Dr. Adelaide L. Sanford and Mr. Edwin Peggott

#### **DISCUSSION QUESTION 4**

IN ORDER TO EFFECT CHANGE WITH REGARD TO HIV/AIDS IN THE AFRICAN AMERICAN COMMUNITY, WHAT KIND OF SUPPORT, OTHER THAN FUNDING, DO YOU NEED AS A:

- A) SERVICE PROVIDER?
- B) STAKEHOLDER IN THE COMMUNITY?

# **Major Themes**

 Increase education about sexuality and HIV/AIDS, case management, gaining access to foundations for resources/support, establishing school linkages, removing/reducing stigma/discrimination

Examples: Educate parents around sexuality; increase consumer involvement around prevention education; reduce stigma and discrimination, especially in the churches

"We need more positive HIV prevention messages, 'thank you for keeping it safe...."

 Provide additional technical assistance, including: funding, program development, fiscal management, and grant writing

**Examples: Provide infrastructure and fiscal guidance/technical assistance** 

Convene regional forums, trainings, and meetings

Examples: Allow stakeholders to have a voice; hold forums to share their ideas with others

Increase community involvement and support

Examples: Support people living with HIV/AIDS and make them a part of the process; hold more family oriented community events; seek corporate sponsorship for events

#### **DISCUSSION QUESTION 5**

BASED ON THE INFORMATION PRESENTED BY THE SPEAKERS, AND CONSIDERING OUR MORNING DISCUSSION, WHAT ARE SOME NEXT STEPS AS:

- A) TRADITIONAL AND NON-TRADITIONAL SERVICE PROVIDERS
- B) MEMBERS OF THE AFRICAN AMERICAN COMMUNITY
- C) THE AIDS INSTITUTE
- D) INDIVIDUALS (WHAT CAN I DO?)

# **Major Themes**

• Identify and seek non-traditional stakeholders and create forums to facilitate and foster collaboration among these groups

Examples: Social organizations, sororities, fraternities, beauty/barber shops, churches, soup kitchens "Infuse HIV/AIDS into non-HIV/AIDS organizations."

• Educate family and community

Examples: Reduce language restrictions when developing prevention messages and materials; develop relevant prevention materials

- "...tap into non-traditional funding sources to remove language/content barriers."
- Take leadership role within one's own community
   "[Institute] Fried Fish Fridays to re-establish a sense of family and community and create an opportunity for collaboration, networking, and education."
- Promote HIV testing

Examples: Incorporate testing into routine health care; increase access to testing in the community; increase testing availability

#### **Forum Evaluation**

The AIDS Institute's Office of Program Evaluation and Research (OPER), in collaboration with the Forum Planning Committee, developed an evaluation survey to gather feedback from participants on the following aspects of the event: 1) forum venue, format, and activities; 2) forum goals and objectives; and 3) take-home messages and topics to be included at future forums. Detailed results from the evaluation are presented in Appendix D. One hundred and sixty-one people completed the survey, representing a response rate of 78 percent. Overall, the Forum was rated very highly by the participants. Ninety percent rated the small group discussions as "good," or "excellent." Speakers were rated as "good" or "excellent" by 88% of participants. Eighty-nine percent rated the venue and format of the day positively. The networking opportunities were also scored as "good" or "excellent" by 89% of the attendees.

Forum goals and objectives received high ratings as well. On average, eighty-five percent of participants indicated that the event increased their awareness of different HIV/AIDS-related issues specific to the African American community and of non-traditional intervention strategies. Ninety-one percent indicated that the Forum provided participants with the opportunity to voice their concerns about the rising HIV/AIDS epidemic in the African American community. Partnership development was also rated highly, as 94% of respondents indicated that the event facilitated the development of new alliances and potential partnerships that will mutually enhance capacity to build effective HIV/AIDS prevention and care strategies.

Four major themes were cited by participants as the take-home messages of the event: 1) the need for and continuation of collaboration, networking, and partnerships; 2) responsibility, involvement, ownership and empowerment over the epidemic; 3) the urgent need for action; and 4) the need to work with non-traditional stakeholders.

Suggested topics for future forums include: 1) special populations and high-risk groups such as youth; the elderly; women; prisoners; immigrants and the foreign-born; people living with HIV/AIDS; men who have sex with men/gay men; and faith groups; 2) education, outreach, and prevention needs that are innovative, creative, focused on sexuality, culturally appropriate, citizen and community driven; and peer education; and 3) stigma and discrimination reduction.

Overall, 99% of participants stated they would consider coming back for a future HIV/AIDS forum based on this experience. Similarly, the importance of follow-up and an interest in how the information collected will be utilized was also expressed. A lack of time for discussion was the only part of the Forum that people cited as a significant concern.

To ensure the inclusion of many significant voices, the committee established a control group comprised of individuals who were invited, but, because of scheduling issues, could not be present at the Forum. These individuals received survey questions similar to those posed at the Forum. The result of these surveys will test the reliability of Forum questions. It will also serve as an indication of the commonality and validity of responses and recommendations among African American community members.



Dr. Beny J. Primm

### **Appendix A: Forum Agenda**

#### Monday, October 17, 2005

6:00pm - 7:30pm Reception

7:30pm — 8:00pm Welcome / Purpose / Charge

Barbara Devore, M.P.A.

Guthrie S. Birkhead, M.D., M.P.H.

8:00pm – 9:00pm Networking

#### Tuesday, October 18, 2005

8:50am - 8:55am Invocation

Adelaide L. Sanford, Ph.D.

8:55am — 9:00am Negro National Anthem

**Stephanie Robinson** 

9:00am - 9:20am Welcome/Opening Remarks/Epidemiological Presentation

Guthrie S. Birkhead, M.D., M.P.H.

9:20am — 9:40am Candle Lighting Ceremony

Beny J. Primm, M.D.

9:40am — 10:00am Purpose & Charge, Presentation of Forum Questions

for Participants

Robert E. Fullilove, Ed.D.

10:00am – 12:00pm Facilitated Discussions in Response to Forum Questions

Marjorie J. Hill, Ph.D.

1:10pm – 1:25pm Forum Re-Charge

**Cornelius Baker** 

1:25pm — 1:40pm Presentation of Diffusion of Evidence Based Initiatives (DEBIs)

Jagadisa-devasri Dacus, L.M.S.W.

1:40pm – 2:45pm Facilitated Discussions in Response to Forum Questions

**Cornelius Baker** 

3:00pm – 4:00pm Strategies Informing Session/Group Reports

Gina M. Brown, M.D.

4:00pm – 4:15pm Important Next Steps

George W. Roberts, Ph.D.

4:15pm — 4:30pm Closing Candle Lighting Ceremony

Adelaide L. Sanford Ph.D. and Edwin Peggott

4:30pm- 4:45pm Evaluation and Closure

Guthrie S. Birkhead, M.D., M.P.H.

Adelaide L. Sanford, Ph.D.: is Vice Chancellor of the New York State Board of Regents. She has won numerous awards for a lifetime of proactive leadership. Among them are the Humanitarian Award from the Congressional Black Caucus, Distinguished Alumna Award from Brooklyn College, the First Distinguished Black Alumna Award of Wellesley College, the Ellen Lurie Award, and the Josephine Shaw Lowell Award.

Hon. Adelaide L. Sanford provided an opening using an African American tradition of invocation to our elders and to all those present to invoke their presence, wisdom, and the understanding and guidance we would need to work collectively. She shared with the participants the cultural barriers innate to African Americans and their history that would make that population more susceptible to becoming infected. She was joined by a youth, Edwin Poggett. In the closing, each participant's candle was lit to symbolize the passing of the torch to the youth, and of the renewing of the commitment of all present. Dr. Sanford passionately used her role as a mentor, an educator, a mother, and a wife in her rally against the forces that challenge African Americans as people. She empowered us to remember who we are and to tap the power within us, individually and collectively, for the sake of our youth and our community's future.

Cornelius Baker: served as the Executive Director of Whitman-Walker Clinic, the leading provider of prevention, treatment, research and social services to people living with HIV in the Washington, D.C. metropolitan area. From 1996-2000, Mr. Baker served as the Executive Director of the National Association of People with AIDS (NAPWA). Mr. Baker joined NAPWA in 1992 as the organization's first director of public policy. In 1994, he co-chaired the U.S. Public Health Service Minority AIDS Conference. He is currently a member of the U.S. Department of Health and Human Services' Panel on Clinical Practices in the Treatment of HIV. Mr. Baker is a native of Central New York and received his undergraduate degree at Eisenhower College/Rochester Institute of Technology.

Cornelius Baker recharged the participants after lunch and gave direction to the audience on the afternoon's activities. He thanked the participants for their hard work, encouraged them regarding the importance of their engagement in a discussion about capacity building, and for providing recommendations for implementation of those strategies. He shared that certain tables would be asked to report back on specific Forum questions because of time limitations, but assured participants that all responses would be reviewed by AIDS Institute staff and management.

Guthrie S. Birkhead, M.D., M.P.H.: is Director of the AIDS Institute and the Center for Community Health, New York State Department of Health. He joined the Department in 1988. Dr. Birkhead is a graduate of CDC's Epidemic Intelligence Service and Preventive Medicine Residency programs, is board certified in internal medicine and preventive medicine, and has a Masters degree in Public Health. He is co-author of many publications, and is Associate Professor of Epidemiology, School of Public Health, State University of New York at Albany.

Dr. Birkhead welcomed the participants using Swahili words for "hello," "welcome," and "thank you." He shared current epidemiological information and stressed the importance of community buy—in of strategies to improve HIV testing, care, and treatment. Dr. Birkhead shared that his primary role and the role of staff would be to listen and learn what can be done to change the impact that HIV/AIDS is having on this population.

Gina M. Brown, M.D.: is the Medical Director of Cicatelli Associates where she currently provides education to clinicians as part of the HRSA-funded New York and New Jersey AIDS Education and Training Centers (AETC). She previously served as the chairperson of the National Institute of Health's Office of AIDS Research Advisory Committee (OARAC). Dr. Brown is an obstetrician-gynecologist who has spent her clinical career at Columbia Presbyterian Medical Center providing care to HIV-positive women. Dr. Brown facilitated the report back portion of the afternoon round table discussion groups.

Edwin Peggott: was a representative of the African American youth community. He shared his frustrations as a youth working in the field of HIV with the community apathy he encountered. He stated that attending this forum helped him realize that the issues fueling the HIV epidemic in this community are multifold. He was overwhelmed by the realizations that youth as well as adults have some of the same issues and challenges concerning their sex, sexuality, and the impact race and poverty have on health care for African Americans in this country.

Marjorie J. Hill, Ph.D.: is the Director of the Women's Institute, a newly formed department of Gay Men's Health Crisis (GMHC). Dr. Hill

has served as an Assistant Commissioner for NYC Department of Health and Mental Hygiene, Bureau of HIV/AIDS. She formerly served as the Commissioner for the New York State Workers' Compensation Board and as the Director of the NYC Mayor's Office for the Lesbian and Gay Community.

Dr. Hill shared her personal experience with a friend who, early in this epidemic, died of AIDS. She acknowledged the impact of that personal relationship and how it spurred her willingness to serve in countering this epidemic. Her role was to facilitate the responses to the discussion questions presented by Dr. Fullilove.

George Roberts, Ph.D.: is the Associate Director for Prevention
Partnerships in the Division of AIDS Prevention of the Centers for Disease
Control and Prevention (CDC). He has worked tirelessly to build stronger
linkages between government and community-based programs. Dr.
Roberts received a Ph.D. in psychology at the State University of New York
at Stony Brook. Prior to joining the CDC, he was a professor of African
American Studies and Psychology at the SUNY - New Paltz.

Dr. Roberts was asked to compare and contrast the concepts and strategies presented during the Forum with his knowledge and expertise of capacity building activities at the national level, and advise the group on necessary next steps. Dr. Roberts shared how business and entrepreneurs in other areas had been approached and collectively promoted HIV testing simultaneously in a given area, but he applauded this level of community response and its potential. He further suggested that this Forum be written up and submitted to the CDC as a model by which state, community, and nontraditional stakeholders can be accessed to promote HIV/AIDS interventions in the African American community.

Jagadisa-devasri Dacus, L.M.S.W: is the Director of the African American Capacity Building Initiative at the Harm Reduction Coalition. Mr. Dacus collaborates effectively with the CDC, overseeing a highly competent team that provides capacity building assistance services to community-based organizations and health departments that provide HIV prevention interventions to African American communities in the northeast and U.S. Caribbean territories.

Mr. Dacus discussed the Diffusion of Evidence Based Initiatives (DEBIs), including what they are and how they can be used to build capacity within the African American community.

Barbara Devore, M.P.A.: is Executive Deputy Director of the AIDS Institute. She has served the Institute as both Director and the Assistant Director of the Bureau of Community Based Services, Director of Chronic Care, and as a contract manager. Ms. Devore thanked participants for coming and for their willingness to help guide the AIDS Institute as it continues to address the epidemic in the African American Community. Ms. Devore noted that it was the role of the AIDS Institute staff present at this Forum to listen to participants, and to take back new strategies that will help us do our work. Lastly, she noted that many participants in the audience had not previously attended AIDS Institute meetings but are working in HIV prevention and care in their communities. She said the mix of audience participants will allow for dialogue and exchange of ideas.

Robert E. Fullilove, Ed.D: is Associate Professor for Community and Minority Affairs and Professor of Clinical and Socio-medical Sciences at the Mailman School of Public Health, Columbia University. He and his wife, Mindy Thompson Fullilove, M.D., are co-directors of a newly formed degree program in urban and community health. Dr. Robert Fullilove is chairperson of the Advisory Committee on HIV and STD Prevention at the Centers for Disease Control and Prevention and a member of the National Advisory Council for the National Center for Complimentary and Alternative Medicine at the National Institutes of Health.

Dr. Fullilove presented the purpose of the working Forum and gave the charge to participants. He presented the discussion questions that had been developed through focus groups, and informed the group of their role and responsibilities and expected outcomes of the Forum. He stressed the importance of full and active participation from everyone in attendance.

1. Participants were asked to rate the following elements on a 5-point scale (1=Poor, 5=Excellent). A summary of the percentage of *positive responses*, indicated by a rating of 4 or 5, is presented below.

General Questions	% Good/Excellent
Opening with the Invocation & National Negro Anthem	93%
Candle lighting opening and closing ceremonies	90%
Format of the day	86%
Format of discussions	90%
Forum environment (location, space, set up, etc.)	91%
Meals: Breakfast & Lunch	85%
Morning Working Session	% Good/Excellent
Welcome/Opening Remarks/Epidemiological P	resentation
Speaker (Dr. Guthrie Birkhead)	88%
Content of Presentation	90%
Purpose & Charge/Presentation of Forum Quest	tions
Speaker (Dr. Robert Fullilove)	92%
Content of Presentation	90%
Facilitated Discussion Session and Report Back	
Small Group Facilitator	96%
Content of Discussion	91%
Content of Discussion	

Afternoon Working Session	% Good/Excellent	
Presentation of the Diffusion of Evidence Based Initiative (DEBIs)		
Speaker (Mr. Jagadisa-devasri Dacus) Content of Presentation	80% 83%	
Forum Re-Charge Speaker (Mr. Cornelius Baker) Content of Presentation	90% 89%	
Facilitated Intervention in Response to Foru	ım Questions	
Small Group Facilitator Content of Discussion Report Back from Groups	90% 90% 83%	
Important Next Steps		
Speaker (Dr. George Roberts) Content of Presentation	90% 89%	
Closure		
Speakers (Dr. Guthrie Birkhead & Ms. Barbara Devore) Content of Presentation	89% 91%	

2. Participants were asked to rate the following elements on a 4-point scale (1= strongly disagree, 2=disagree, 3=agree, 4=strongly agree). A summary of the percentage of *positive responses*, indicated by a rating of 3 or 4, is presented below.

Forum Goals and Objectives	% Agree/Strongly Agree
The goals and objectives of the forum were clearly explained and understood.	early 95%
This event provided me with the opportunity to concerns about the rising HIV/AIDS epidemic African American community.	•
This event increased my awareness of the diff related issues specific to the African American	
This event increased my awareness of non-tra intervention strategies (i.e., non-traditional st and venues) that will help stem the HIV/AIDS in African American communities.	akeholders
This event facilitated the development of new potential partnerships that will mutually enhabilid effective HIV/AIDS prevention and care	ance capacity to
I would consider coming back for a future HIV based on this experience.	//AIDS Forum 99%

- 3. Participants were asked the following open-ended questions. A summary of their responses is presented below.
- What do you feel is the "take-home" message of the event?
- Please list any topics you feel should be included in future HIV/AIDS forums
- Comments

# What do you feel is the "take-home" message of the event?

#### **Major Themes**

- The need for and continuation of collaboration, networking, and partnership, both generally and on several levels: 1) between the African American community and the State, 2) among agencies themselves, and 3) between agencies and the State. Some of the driving factors behind this theme were related to decreasing funds and the need to use resources efficiently and the competition between providers for funds. Collaboration with specific populations was also mentioned, i.e., PLWHAs, youth, and non-traditional stakeholders.
  - "... In light of diminishing funds, CBOs in partnership with the AIDS Institute need to develop more tailored prevention strategies that directly impact the African American community and pool resources to strengthen relationships to provide success."

Responsibility, involvement, ownership and empowerment over the
epidemic. These themes are grouped together because they represent
interrelated ideas around taking responsibility and getting involved on
a personal level and at the community level. In doing so, the African
American community will take ownership and empower themselves to
influence outcomes.

"We have to stop waiting for someone to organize us. The New York State DOH AI can get us started and support us but we have to lead our own movement."

 The urgent need for action and the need for more work to be done in the field. The Forum was referred to as a good "first step" with much work and urgent action needed to follow.

"Clearly people are frustrated with the fact that we have not significantly reduced rates of HIV/AIDS among African Americans/Blacks. The 'take-home' message is let's stop talking and get the job done!"

 The need to work with non-traditional stakeholders, agencies, businesses, and venues that do not typically provide HIV/AIDS prevention and services. This ties to the major theme of collaboration and the minor theme of the need for innovative approaches.

"To begin immediately [to provide] HIV prevention/intervention in atypical venues, i.e., salons, laundromats, fast food restaurants, movie theatres."

# **Appendix C: Forum Evaluation Results Minor Themes**

• The need for innovative, creative, and culturally sensitive approaches and interventions

"The need for 'real' prevention strategies in African American communities."

 The need to reduce the stigma associated with HIV/AIDS and to use a more positive educational approach

"That HIV is a reality in the Black community and should be discussed through positive mediums of education."

• The need to increase diversity and representation of people of color in decision-making and planning roles re: HIV/AIDS

"To get people of color more involved in planning and service delivery."

· Advocacy, unity, hope, vigilance, testing, communication, strategic planning

# Please list any topics you feel should be included in future HIV/AIDS Forums

#### **Themes**

Special populations and high-risk groups

More frequently mentioned: youth, the elderly, women, prisoners, foreign-born/immigrants/undocumented, PLWHAs, homosexuals/MSM, faith groups

Less frequently mentioned: men, heterosexuals, couples, transgenders, the disabled, gang members, the illiterate, rural community members

• Education, outreach (E/O), and prevention needs

More frequently mentioned: innovative/creative E/O, sexuality E/O, culturally appropriate E/O, citizen/community driven E/O, peer/PLWHA E/O Less frequently mentioned: prevention with positives (PLWHAs), HIV/AIDS in the workplace, women and safe-sex negotiation, State Education Dept. role in HIV/AIDS E/O

• Stigma and discrimination reduction

for PLWHAs, homophobia, and HIV/AIDS in general

- PLWHAs / consumer needs, e.g., keeping PLWHAs in the healthcare system, benefits issues
- Access to resources, e.g., funding, policy, technical assistance, and best practices

#### **Comments**

# **Major Themes**

Positive comments about the Forum, the venue, meals, and cultural elements, i.e., the event was good, great, excellent, well organized, informative, enlightening, facilitated networking
 "Overall this was a good conference - I hope the AIDS Institute will help us to reach our goal of eradicating HIV/AIDS."

"This was a very enlightening forum, the people were great, and the topics were great. And I enjoyed the 2-group interactive collaboration. It allowed more ideas to flow at the table and therefore informally back to our community organizations."

 The need for follow-up, future forums, and action, i.e., next steps need to be determined, how information gathered will be utilized, recommendations need to be implemented, there are requests for future forums

#### **Appendix C: Forum Evaluation Results**

"Plan to implement some of the great ideas and to show results at the next conference/forum."

"This forum should take place at least every one to two years. Thank you for letting me be a part of this."

· Time issues, e.g., more time for discussions was needed

"We need another day to do more, this was a good start but not enough time. Tweaking today's work needs to be done. Excellent one-day forum - we need MORE."

"Event should cover 2 days to have more time for discussion. Also, suggest to develop working committees of forum participants to implement recommendations discussed."

 Various topical recommendations, e.g., more discussion around youth, immigrants and the foreign-born, PLWHAs, stigma, testing, and efficiency of services

#### **Minor Themes**

- The Forum facilitated collaboration; more collaboration is needed
- The Forum fostered renewed commitment to fighting HIV/AIDS

# **Appendix D: Forum Workgroup Members**

#### **Forum Planning Workgroup Members**

Vanessa Buchanan

**Augie Corsi** 

Michael Dunham

lanet Foster

Sheila Irvin

Inez Jones

**Beverly Lanier** 

Sallie Perryman

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**Barry Walston** 

#### **Communities of Color Workgroup Members**

Michael Dunham, Co-Chair

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**Keith Cheung** 

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