



the circle

Fall/Winter 2008, N° 25

leading lines advocacy outreach community

SURVIVING AND THRIVING!

by John Hatchett

Welcome to another issue of *The Circle*. Along with economic crises and the final phase of a hugely important national election, it's been a very busy time for the LTI program since our last issue, and there's a lot of information we want to share with our community.

First, we're very excited to announce the LTI's first-ever promotional video! It's only 3 minutes long, but it introduces people to the LTI and includes images of LTI staff, CAB members and some graduates. Executive producer for the video was our own CAB member Gina Healy from New York City; videographer Stephen Dirkes and photographer Tal Shpantzer co-produced and donated their time and talent (plus a lot of equipment!) to the project. The result can be viewed on the Emmy-award-winning web site [scribemedi.org's Reporting AIDS](http://www.scribemedi.org/shows/reporting-aids) page (www.scribemedi.org/shows/reporting-aids), as well as on the LTI web page (www.cicatelli.org/lti). Many thanks to Gina, Tal and Stephen!

Another exciting development this summer was the design and delivery of the LTI's first-ever leadership workshop for HIV+ young people. Nineteen young adults, ages 17-25, took part in a 3-day training in August. They came together from all areas of the state to participate in the first of a 3-workshop series, to discuss the PWA self-empowerment movement, HIV health care & self-management skills, transitioning from

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Ryan White Part B HIV Care Network Initiative

by Humberto Cruz, AIDS Institute Director and Georgette Beal, Director Ryan White Care Network Initiative

What are RW HIV Care Networks and what purpose do they serve?

Ryan White HIV Care Networks were established in New York State in 1991 to improve the availability and organization of health care and support services for individuals with HIV/AIDS and their families. The Networks are local associations of health care providers, community-based organizations, community leaders, and persons infected and affected by HIV/AIDS. **The mission of the Ryan White Part B HIV Care Networks is to promote a coordinated community response that results in improved access to care and supportive services for those infected with HIV/AIDS.** The vision of the Networks is a comprehensive continuum of high quality services that is responsive to the needs of people infected with HIV/AIDS. Although amendments to the CARE Act in 1996 eliminated the requirement that states establish a system of consortia, New York State Department of Health AIDS Institute continues to support the concept and funding of Care Networks throughout the state. It recognizes the importance of the role of localities in identifying and addressing regional needs and the value of the Networks as a mechanism for community input and a voice for individuals living with HIV/AIDS.

Why were the Networks changed?

The AIDS Institute contracts with Lead Agencies across the state to provide programmatic, administrative and fiscal oversight of Networks. These Lead Agencies

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LTI Community Advisory Board

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credits

The PWA LTI is a program of Cicatelli Associates Inc., supported by a unique collaboration between the New York City Department of Health and the New York State Department of Health, AIDS Institute.

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RYAN WHITE PART B

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provide guidance to committees in accomplishing work plan goals and objectives and hire individuals to staff the Networks and ensure their operation. Lead agency contracts were last re-solicited in 1995. The need to re-solicit the Network Initiative presented an opportunity to assess the impact and effectiveness of the Networks and to build upon their strengths and successes. A Request for Funding Applications (RFA) was finally developed and issued in August 2007. Through this solicitation, the number of Networks was changed from 16 to 11 and their role and responsibilities refined to better respond to the changing epidemic, address organizational structure, assure more geographic distribution, provide better clarification on the purpose of the Networks and address funding issues and limitations. Eleven new lead agency contracts were awarded through this competitive process.

How do they operate?

The Network structure and operation includes a Lead Agency, Network Coordinator, Program Assistant and Network membership. Network activities are guided by an Executive Committee and are carried out by standing and ad-hoc committees that focus on specific local concerns. Participation and guidance provided by PLWH/A is an integral component of the Networks. Each Network is required to have four standing committees, including an Executive Committee, Consumer Involvement Committee, Care Coordination Committee, and Policy Advisory/Education Committee.

The program objectives of the Networks are to:

- Ensure representation on the Network by entities/individuals who are representative of the full

complement of regional stakeholders.

- Identify populations and subpopulations of individuals and families with HIV disease, particularly those experiencing disparities in access and services and those who reside in underserved communities.
- Develop and implement strategies to assess service needs of people living with HIV disease and identify barriers to care and gaps in services, propose solutions and, where possible, implement strategies to coordinate community resources and identify new resources.
- Develop and implement mechanisms to identify emerging issues in the region affecting services for people living with HIV disease and develop a community response.
- Develop a service plan describing populations living with HIV/AIDS in the region (particularly those experiencing disparities in access or services and who reside in underserved communities), regional service needs, gaps and emerging issues. The service plan must address the needs of families with HIV/AIDS and be updated for inclusion in the Statewide Coordinated Statement of Need (SCSN).
- Promote consumer involvement by increasing and retaining the proportion of consumers actively participating in the Network for the purposes of informing HIV/AIDS policy, sharing realities of living with HIV/AIDS, identifying gaps in services and effecting change.
- Develop, promote and implement HIV/AIDS educational programs and trainings and/or refer providers and consumers to trainings that result in an improved understanding of the HIV/AIDS service delivery system and advances in care and treatment; inform stakeholders (government and community, state, federal and local) of regional needs and stimulate

action to address needs.

- Serve as a clearinghouse for updated regional HIV/AIDS information including information on resources that are available, local and state epidemiologic data and other pertinent information. Facilitate flow of information to service providers and community members regarding local, state, and federal initiatives, resources and activities targeted to the HIV/AIDS community.
- Provide input to the Ryan White Statewide Coordinated Statement of Need (SCSN) and participate in SCSN activities.
- Communicate and collaborate with the AIDS Institute on a regular basis and participate in SASDC to identify emerging needs and offer policy recommendations.

Is consumer involvement supported?

Consumer involvement in the Networks is vital. Lead agencies are expected to promote PLWH/A participation throughout all levels of Network operations and must strive for at least 25% active participation of persons living with HIV/AIDS within the Network and its subcommittees. Lead agencies are required to dedicate a portion of the Network budget to the support and maintenance of consumer participation in the Network. These expenses can include reimbursement for transportation and/or child care expenses, support for attendance at domestic conferences, the development of peer mentorship programs and/or other peer stipend programs. Other strategies that may be employed to ensure active consumer participation include the provision of refreshments at meetings, ensuring the availability of translation services, the implementation of flexible attendance policies due to illness or disability, and establishing convenient meeting times. Networks are also encouraged to develop a peer component which may include mentorship, stipend and

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other employment opportunities with the Network. Peers can assist with administrative duties necessary for Network functioning or conduct outreach to other consumers, especially in large rural areas.

In large regions, transportation presents an onerous challenge to Network participation. In addition to reimbursement for transportation expenses, Lead Agencies are implementing innovative strategies to address this potential barrier. These strategies include developing smaller regional bodies where consumers can participate locally, rotating meeting locations, and using video and teleconference equipment to ensure geographic coverage and reach consumers in the entire region or borough.

What role can I play?

There are many different ways consumers can become involved in the Networks. Consumers are encouraged to become members of the Executive Committee which serves as the governing body of the Network and is responsible for overall Network operations. Consumers can also start off by becoming members of the Consumer Involvement Committee. The ultimate goal of this committee is to promote consumer involvement in the region, provide a venue for consumers to share the realities of living with HIV/AIDS, identify gaps in services, raise community awareness, and provide a mechanism where consumers can participate in the development of policies and other strategies to address their needs. By participating on and becoming members of the Care Coordination Committee, consumers can play a vital role in reducing barriers to services. The Care Coordination Committee is responsible for assessing needs, identifying barriers, developing and implementing service plans,

developing universal practices, and offering trainings on relevant and emerging issues. Finally, consumers can have a voice by becoming part of the Policy Advisory/Education Committee. This committee is charged with informing legislative, government and community leaders at the local and state levels of regional needs and emerging issues related to HIV/AIDS, and with promoting a coordinated response to address these issues.

What next?

A list of the new lead agencies and Network regions is provided on page 6. Your active participation in these important planning bodies will help to ensure a comprehensive continuum of HIV care and services throughout the State. Make your voice heard and get involved today! If you are not currently a member of a Network, or belonged to one of the former Network areas that changed, contact the Network Coordinator or Lead Agency staff person covering your region and ask for a membership application. ●

SURVIVING AND THRIVING

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adolescent to adult HIV health care, dealing with HIV stigma and disclosing one's HIV status to others. At this training, the LTI staff trainers were joined by Shahdae Holland, an HIV+ young African American woman from Philadelphia, who made a wonderful addition to the training team. Part 2 in the series is scheduled for the end of October, with part 3 coming early in 2009.

Another notable development has been the increased enrollment in our New York City "Planning Council Training" series—four workshops that focus on information and skills to enhance PWHA participation in the NYC Ryan White Part A Planning Council and its committees. These trainings are being offered again several times through February 2009 (see the calendar on p. 5.), and are open to any PWHA in New York City and Westchester, Putnam and Rockland counties, even if they've never taken an LTI training before! ●

In June, Georgette Beal left the AIDS Institute to serve as the Senior Vice President for HIV/AIDS Grants Management for the United Way.

The PWA community throughout New York State would like to thank Georgette for all her work and support of the LTI program, and we wish her much success in her new position.

ALL TRAINED UP AND NOWHERE TO GO?

There are many chances to use your LTI experience to help our communities plan, strategize and set priorities for services for PWHA. Also, every region of the state has a Ryan White Part B HIV Care Network, and several regions are also Ryan White Part A designated EMAs or TGAs, with their own **Planning Councils** and **PWHA Advisory Groups**. If prevention is your passion, check out the city or state **Prevention Planning Groups**.

In other words, there are lots of opportunities for our involvement in different kinds of groups all around New York State. All of these groups depend on our contributions and expertise as PWHA, and some are actively recruiting members right now!

Please directly contact any of the groups below for more information or for schedules of their open public meetings.

DUTCHESS COUNTY HIV SERVICES PLANNING COUNCIL

Call: (845) 452-8805
 Contact: Chris Lee
www.hivplanningdutchess.org
info@hivplanningdutchess.org

NASSAU/SUFFOLK HIV HEALTH SERVICES PLANNING COUNCIL

United Way of Long Island
 Contact: Jennifer Coup
 (631) 940-3716
jcoup@unitedwayli.org

NEW YORK CITY HIV HEALTH AND HUMAN SERVICES PLANNING COUNCIL

Call: (212) 788-2734
 Staff Liaison: Darryl Wong
dwong@health.nyc.gov

TRI-COUNTY RYAN WHITE PART A STEERING COMMITTEE

Contact: Tom Petro
 Tel: 914-813-5047
tjp1@westchestergov.com

NEW YORK STATE HIV PREVENTION PLANNING GROUP (PPG)

General Number: (518) 473-8484
 Staff Liaison: Barry Walston

NEW YORK CITY DOH HIV PREVENTION PLANNING GROUP (PPG)

Call: (212) 788-4180
 Staff Liaison: Linda Battle
dohmhppg@health.nyc.gov

Ryan White Part B HIV Care Network Directory

REGION	NETWORK CONTACT INFORMATION
BROOKLYN	Gail Greenidge Kings County Hospital Center Tel: 718-245-2820 Fax: 718-735-4165 Email: gail.greenidge@nychhc.org
BRONX	Socrates Caba Montefiore Medical Center Tel: 718-231-3296 Ext. 25 Fax: 718-655-3763 Email: Scaba@montefiore.org
CENTRAL NEW YORK <i>(14 counties: St. Lawrence, Jefferson, Lewis, Herkimer, Oneida, Oswego, Onondaga, Cayuga, Cortland, Madison, Chenango, Broome, Tioga, Tompkins)</i>	Stephen E. Waldron Coordinator, Central New York HIV Care Network Tel: 315-472-8099 Ext. 15 Fax: 315-472-8033 Email: sewaldron@cnyhsa.com
FINGER LAKES <i>(9 counties: Monroe, Wayne, Ontario, Livingston, Yates, Seneca, Steuben, Schuyler, Chemung)</i>	Pat Zacharias Finger Lakes Health Systems Agency Tel: 585-461-3520 Ext. 102 Fax: 585-461-0997 Email: patzacharias@flhsa.org
HUDSON VALLEY <i>(7 counties: Sullivan, Ulster, Dutchess, Orange, Putnam, Rockland, Westchester)</i>	Barbara Bennet AIDS Related Community Services (ARCS) Tel: 914-785-8275 Fax 914-785-8265 Email: bbennet@arcs.org
LONG ISLAND <i>(2 counties: Nassau, Suffolk)</i>	Anthony Sanchez United Way of Long Island Tel: 631-940-3735 Fax: 631-940-2551 Email: asanchez@unitedwayli.org
MANHATTAN	Jose Martin Garcia Orduña Union Settlement Association, Inc. Tel: 212-828-6143 Fax: 212-360-5914 Email: jorduna@unionsett.org
NORTHEASTERN NEW YORK <i>(17 counties: Franklin, Clinton, Essex, Hamilton, Warren, Fulton, Saratoga, Washington, Montgomery, Schenectady, Rensselaer, Schoharie, Albany, Greene, Columbia, Otsego, Delaware)</i>	Michael Broderick Northeastern New York HIV Care Network Tel: 518-689-0880 Fax: 518-689-0753 Email: michaelb@caresny.org
QUEENS	Robert Steptoe AIDS Center of Queens County (ACQC) Tel: 347-952-4943 Fax: 718-739-2552 Email: Rsteptoe@acqc.org
STATEN ISLAND	Karina Ryan Community Health Action of Staten Island Tel: 718-808-1414 Fax: 718-808-1391 Email: karin.ryan@sihealthaction.org
WESTERN NEW YORK	Andrew Kiener AIDS Network of Western New York, Inc. Tel: 716-882-7840 Fax: 716-882-2139 Email: aidsnet@pce.net

MEET THE CAB, GREET THE CAB

Victor Benadava – New York City

Work Affiliation: Holistic Health Counselor; Reiki Master

Advocacy and Volunteer Involvement:

- Volunteer at GMHC in the kitchen and as an ADS (Acupuncture Detoxification Specialist) for the last couple of years; past Co-chair of the GMHC Client Advisory Board
- Board Member of Aspiring Dreams in Louisiana
- Member of Today Help Ethiopia Corp., a non-profit organization to help PWA's in Ethiopia
- Member of NAPWA (National Association of People With AIDS)
- Member of the New York City Prevention Planning Group (PPG)
- Member of the New York State Consumer Advisory Committee
- Member of the New York HIV Health and Human Services Planning Council Consumers Committee and alternate Planning Council member

Hobbies/interests: I love horses, sports, Holistic Health, laughing, eating, enjoying life.



Gerald DeYoung – New York City

Work Affiliation: Inactive Army Reserves

Advocacy and Volunteer Involvement:

- Co-Chair of the Bklyn HIV Care Network and Steering Committee of Positive Health Management Office of Wyckoff Height Medical Center (WHMC)
- Peer Educator for Family Services Network and WHMC
- Won a scholarship to attend the National Conference on African Americans and AIDS from Positive Health Management Office of WHMC
- Volunteer for God's Love We Deliver on Sundays

Hobbies/interests: Singing, dancing, passion for Astronomy and Egyptology, reading and watching old films



PWA LEADERSHIP TRAINING INSTITUTE

A Program of Cicatelli Associates Inc.

“Self-Management: Becoming Your Own Health Care Advocate”

(open to any HIV+ New York State resident)

Lunch provided!

This training is designed for individuals who want to better manage their HIV health care. Medical information, communication skills building and peer support are combined in an interactive educational experience created by and for PWHA.

↳ **Albany**—October 22-24, 2008 (W-F)

↳ **New York City**—November 12-14, 2008 (W-F)
January 14-16, 2009 (W-F)

↳ **Long Island**—November 20-22, 2008 (Th-Sa)

↳ **Hudson Valley**—December 4-6, 2008 (Th-Sat)

NYC “HIV Planning Council” Training Series

(open to HIV+ residents of NY City, and Westchester, Rockland and Putnam Counties)

Lunch and Metro Cards provided!

These four workshops explain the federal Ryan White program and its mandate for communities to identify local needs and set priorities for funding. The trainings are designed to build knowledge and skills for PWHA who are currently active in the NYC HIV Planning Council's processes, as well as those who are interested in learning more about the Council and its opportunities for PWHA participation.

↳ **Community Planning: Focus on Planning Councils and Policy Bodies**

November 13-14 (Th-F), January 8-9, 2009 (Th-F)

↳ **Understanding Data**

November 24-25 (M-Tu), January 22-23, 2009 (Th-F)

↳ **Setting Priorities & Distributing Funds**

November 20-21 (Th-F), January 29-30, 2009 (Th-F)

↳ **Working Effectively in Groups**

October 27-29 (M-W), December 8-10 (M-W)
February 18-20, 2009 (W-F)

To register for trainings, or for more information, please call Aanchal Dhar at 212-594-7741 ext. 231



State Board Training Consortium's

Achieving Excellence in Governance

▲ **FREE** training series designed for Board Members of Qualifying Nonprofit Organizations

Coming soon to a Community near you!

FREE TO BOARD MEMBERS OF NON-PROFITS SUPPORTED BY THESE STATE AGENCIES:

- *NYS Department of Health*
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- *NYS Office of Mental Health*
- *NYS Office of Children & Family Services*

TESTIMONIALS:

- ✦ *"Unbelievable! This was really the best training I have received."*
- ✦ *"Attending this training has helped me be a more effective board member."*
- ✦ *"Very helpful workshop. Gave me a better understanding of various aspects of fiscal accountability and what is required of board and administration."*

The New York **State Board Training Consortium (SBTC)** is a collaborative effort between four state agencies to improve governance of state-funded non-profits by providing a comprehensive series of trainings to board members of these organizations. SBTC trainings are conducted by the Council of Community Services of New York State (CCSNYS).

The SBTC's *Achieving Excellence in Governance* Training Series is intended to empower board members of non-profit organizations throughout the state with the information and tools necessary to carry out their very important responsibilities and obligations. Whether you are an experienced board member or just beginning your volunteer service, on a board for a larger established agency or a newer smaller one, there is a SBTC training that can meet your needs.

To register for a training visit
WWW.CCSNYS.ORG
or call
800.515.5012 x126

"All LTI Graduates that serve on the Board of Directors and/or a Community Advisory Board for a not-for-profit organization are encouraged to register for the trainings listed below."

WORKSHOPS INCLUDE:

- *Duties and Responsibilities of Nonprofit Boards*
- *Doing the Right Thing: Board Members as Ethical Leaders and Decision Makers*
- *Fund Development for Nonprofit Boards*
- *Human Resource Issues for Nonprofit Boards*
- *Nonprofit Accounting Basics for Board Members*
- *Recruiting, Developing and Retaining a Motivated Board of Directors*
- *Strategic Planning: Setting the Course for a Successful Future*
- *The Independent Audit: A Critical Tool for Governance*
- *Understanding Your Legal Obligations as a Nonprofit Board Member*



FEDERAL MEDICAID CUTS LOOMING

Reprinted from *New York AIDS Coalition (NYAC)*, *News From DC*, July 30, 2008

Readers of "News from DC" may recall NYAC highlighting serious problems with the Bush Administration's proposed Medicaid regulations. The impact of the Medicaid regulations on New York State alone was projected to exceed \$1.5 billion in the first year. As a result of activism from the HIV/AIDS, disability, and Medicaid community, Congress passed a one-year moratorium on six of the seven proposed regulations. However, Congress did not stop one regulation, which impacts on Medicaid reimbursement for hospital outpatient and community based services. The fiscal impact of this one regulation on state Medicaid programs, including New York's, will be significant.

The Governor's office predicts this regulation will cost New York State at least \$350 million dollars.

The remaining regulation is extremely complex, but in summary would appear to limit Medicaid reimbursement for hospital outpatient and community-based services to only those services covered by Medicare, and ensure that reimbursement is similar to the Medicare rate. This would essentially prohibit federal Medicaid matching dollars for services that Medicare does not cover, such as methadone maintenance services, renal dialysis, family planning services, and some mental retardation and developmental disability services, to name a few. Considering that Medicaid and Medicare generally serve entirely different groups of individuals with very different needs, NYAC is extremely puzzled behind the logic of matching up Medicaid with Medicare reimbursement. It makes no sense.

Governor Paterson's Washington DC office recently generated a memo that describes the impact of this one Medicaid regulation on New York. The Governor's office predicts this regulation will cost New York State at least \$350 million dollars. These regulations would

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Medicaid Managed Care for People With HIV May Be Mandatory Soon

Reprinted from *New York AIDS Coalition (NYAC)*, *News From Albany* July 30, 2008

HIV/AIDS advocates have begun to learn that the [NY] State Department of Health may soon announce plans to begin requiring persons living with HIV/AIDS on Medicaid to enroll in managed care plans. Up until now, persons living with HIV have been exempt from requirements to enroll in either an HIV Special Needs Plan (HIV SNP) or standard managed care. This process may begin as early as January 2009, only six months away. From what NYAC has learned, mandatory enrollment of PLWHAs on Medicaid into managed care plans will begin in New York City first. Whether it will expand beyond NYC is not known yet.

However, this news is alarming for a number of reasons, and NYAC has several questions/concerns (and this list is not exhaustive):

- It eliminates PLWHAs choices in Medicaid and narrows their health care options.
- To date, the State Health Department has provided no information on how many HIV specialists are in each of the Medicaid managed care plans licensed across the State. There are approximately 67,000 persons living with HIV who rely on Medicaid for their health care in NYS; do each of the standard managed care plans have enough (if any) HIV specialists to treat all of these individuals?
- In areas with high concentrations of persons living with HIV, are there enough providers and HIV providers in each of the plans to care for all the huge influx of PLWHAs?
- As persons are auto-enrolled into managed care plans, what will happen to beneficiaries who suddenly learn they can no longer see the doctor(s) that they have been relying on for years for care? Will each of the plans be prepared to guide each and every beneficiary to appropriate providers experienced in HIV?
- What role will the HIV SNPs play in this mandatory enrollment process? Will persons only be auto-assigned to standard managed care plans, or will the HIV SNPs also be included in any auto-enrollment process?
- What steps will the State Health Department take to monitor the plan's performance for PLWHAs?
- Will NYS DOH provide resources to HIV service organizations so that a widely publicized public awareness campaign and outreach effort will be conducted to ensure that all PLWHAs are aware of their options before the auto-enrollment process begins?

NYAC is coordinating with a number of other organizations to hold a community forum on this issue. Date, time and location will be provided shortly. We are expecting to hold this forum sometime the week of September 8th (week following Labor Day). ●

FEDERAL MEDICAID CUTS

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result in direct reductions in funding to programs all across the state, including to programs at NYC Health and Hospitals Corporation, Narco Freedom, Planned Parenthood, Suffolk County Health Department, Housing Works, Broome County Health Department, AIDS Community Health Center, Daytop Village, Finger Lakes Migrant Health Care Center and many, many more organizations. It would also put in jeopardy the State's proposed reforms to Medicaid, including proposed adjustments to reimbursements for outpatient services.

NYAC and other Medicaid advocacy groups are hoping that a mechanism (such as a must pass budget bill) can be found to pass a Congressional moratorium on this regulation as well. However, the White House has been particularly stern on this issue and will fight any efforts to overturn this regulation. This is an issue that we need to pay particular attention to; in the coming weeks and months NYAC may be calling upon its members to make calls and write letters on this issue. ●

NOW ACCEPTING APPLICATIONS FOR NEW LTI PEER MENTORS FROM NEW YORK CITY, LONG ISLAND AND THE HUDSON VALLEY!

LTI Peer Mentors are HIV-positive individuals who provide encouragement and support to graduates of the LTI's "Self-Management: Becoming Your Own Health Care Advocate" training for 6 months following their graduation from the course. Mentors are volunteers, and they report to the LTI Mentor Supervisor.

QUALIFICATIONS

- Be a graduate of the LTI Core OR have attended at least one 2-3 day LTI training in the past 6 months
- Demonstrated ability to self-manage his/her own HIV health care
- Able to attend 4-day mentor training and participate in monthly supervision via telephone and/or in person
- Available for 2-3 contacts per month with each mentee (no more than 3 per mentor), both in person and by telephone
- Aware of the major issues and concerns facing PWHAs, especially regarding HIV health care
- Energetic and motivated, with excellent interpersonal and communication skills
- Knowledgeable about how to access information resources in the community
- Prepared to discuss basic information about HIV/AIDS health care (labs, meds, etc.) in a one-on-one discussion
- Able to work with diverse populations (i.e. MSM, gay, bisexual, transgender, substance users, various ethnicities and religions, etc.)
- Capable of discussing sexuality and related issues with comfort and confidence
- Committed to achieving the program's mission as part of a team
- Some availability on evenings and weekends may be required

If you fit the above and are interested in becoming an LTI Peer Mentor, please contact Gregory Cruz or Aanchal Dhar for more information: 212/594-7741 or, outside New York City, toll-free at 866/792-5323. ●

Living Positively in the 21st Century

Mark Nowak, (left) LTI CAB member for Western NY, presents an award for "Living Positively in the 21st Century" to fellow LTI graduate Andy Kiener, Executive Director of the Western NY HIV Care Network. The award was given to "an outstanding PLWA nominated by his peers."



Mark presents Dr. Gus Birkhead, former Executive Director of the AIDS Institute, with an award recognizing Dr. Birkhead's contributions to the New York State PLWA community. *Poz* magazine editor Regan Hofmann was also recognized, but was unable to attend due to illness.

