



Research & Evaluation Committee

MEETING SUMMARY

Monday, October 18, 2021 from 10:00 AM to 11:27AM
 Teleconference: (929) 205 6099 / Meeting ID: 952 7127 5360#

PRESENT	EXCUSED	UNEXCUSED
1. Ann Bagchi, PhD/DNP (Chair) 2. Kasny Damas 3. Corey DeStefano (Vice-Chair) 4. Debbie Mohammed 5. Natalie Muhammad 6. Warren Poole 7. Sharon Postel (Non-Voting) 8. Providencia Rodriguez	9. Summer Brown (Secretary)	10.

Guests: Denise Brown

PC Support Staff: Tania Guaman; Unnati Guru

1. Welcome and Moment of Silence

Dr. Bagchi called this meeting to order at 10:00AM. A moment of silence was observed for those who have passed on from HIV and COVID-19, as well as those living with both viruses.

2. Roll Call

Guaman conducted the roll call. Quorum was established later during the meeting.

3. Public Testimony

There was no public testimony at this meeting.

4. Review Action Steps

<u>Action Steps</u>	<u>Responsible Party</u>
1. Email CIA meeting notes, 2022 – 2026 Integrated Plan Guidance documents, Summary of Key Considerations for the PSRA to the committee for review	Support Team
2. Schedule a call with Dr. Johnson, Joann, and Ann to discuss budget needs for the Integrated Plan	Support Team

The above action steps were completed.

5. Approval of the Meeting Summaries from September 20, 2021

The August 16th meeting summary was approved last month as distributed.

The September 20th meeting summary was sent via email in advance for review.

Motion: Dr. Bagchi asked for a motion to approve the meeting summary as distributed. Poole motioned to approve. DeStefano seconded. The vote passed unanimously.

6. Updates from other Committees

- **Continuum of Care (COC)** – Support Staff provided the COC report.

Approved by the REC with edits on November 15, 2021.

- The last COC meeting was held on October 14.
 - The committee reviewed the Medical Nutrition Therapy and Psychosocial service standards. Per recommendation of the committee, both standards will be sent to organizations funded to provide these services for review and feedback. The committee will review any feedback provided at the November COC meeting and finalize these documents.
 - Committee members also will provide feedback to the Support Team via email regarding the 2022-2026 Integrated Health Guidance for the Situational Analysis.
 - The Support Team also shared information about the upcoming October 27 HRSA webinar on the Integrated HIV Prevention and Care Plan.
 - The COC committee will meet again on November 11 at 10am via Zoom.
- **Comprehensive Planning Committee (CPC)** – Support Staff provided the CPC report.
 - The CPC met on October 8; the following occurred at that meeting:
 - There was one recommendation for the needs assessment topic to review the capacity of aging service providers, such as nursing homes and hospice centers, to increase their capacity and understanding of HIV and the unique needs of this population as they age.
 - For the Integrated Plan, the CPC recommends taking into consideration the State's priority populations outlined in Ka'leef Morse's (State of New Jersey's Executive Director of HIV Services) RFP and aligning the chosen priority populations with the jurisdiction's as noted on the NEMA Ryan White RFP.
 - The CPC also recommends that each committee consider what work has been done that fulfills the requirements of the Integrated Plan, what else is needed, and what resources are needed to support the committees in doing their work.
 - The next CPC meeting will be held on November 12, 2021 at 9:30AM via Zoom.
 - **Community Involvement Activities Committee (CIA)** – Support Staff provided the CIA report.
 - The CIA met on September 22; the following occurred at that meeting:
 - Allison Modica from Gilead provided a presentation on HIV and Aging.
 - Some of the consumers in attendance reported feeling overwhelmed having to take medications for so long. For some, building a routine or some consistency helped them take their medication continuously. For instance, one person diagnosed over 50 years ago takes their medication at 1:30 am daily to help them avoid disturbances from their social life.
 - Modica shared some wellness practices to keep a healthy body. One attendee recommends "listening to your body". Modica also recommends saying a positive statement out loud when taking pills. "I am taking charge of my body" or "I am stopping this virus".
 - The next CIA meeting will be held on October 27, 2021 at 5PM via Zoom.

7. Old Business

- **Annual 2021 Epidemiologic Update by Sharon Postel, PC Consultant**
 - For the first time in years, the HIV epidemic decreased by 40 from 13,830 (2019) to 13,790 (2020) in the Newark EMA. This is in contrast with the statewide trend, with PLWH in NJ increasing slightly by 82 from 38,069 (2019) to 38,151 (2020).
 - BY GENDER: The percent of Female PLHW continues to decline within the total epidemic: 40% in 2009 and 37% in 2014-2017, to 36% in 2018-2020.
 - BY RACE/ETHNICITY: There has been a decline amongst the African American population, from 70% to 64% between 2010 and 2020. There was an increase in the Hispanic/LatinX PLWH population, from 16% to 23% in 2010-2020.

- BY AGE: The EMA continues to reflect an aging epidemic, with 48% of PLWH at age 55 or older, and 72% of PLWH at age 45 or older. There was a slight change in the composition of age categories in 2019, so it is not possible to make a direct comparison.
- BY MODE OF TRANSMISSION: The mode of transmission for males has changed dramatically in the Newark EMA: the 3rd leading cause (IDU) has decreased from 23% (2010) to 15% (2018). On the opposite end, the leading mode of transmission of MSM has significantly increased from 27% (2010) to 39% (2020). Heterosexual sex is still the leading mode of HIV transmission.
- BY GEOGRAPHY: Prevalence of HIV in the general population is still higher in the EMA's 5 largest cities (69.8% of the Newark EMA's HIV epidemic). The City of Newark makes up for 15% of the State's HIV epidemic. HIV continues to disproportionately affect the Black/African American and Hispanic/LatinX populations, which are higher in Newark EMA compared to New Jersey as a whole.
- According to estimates, in the Newark EMA about 14% of people living with HIV are unaware of their HIV status. These individuals have not been tested.
- The number of people with late HIV diagnosis (with AIDS) is declining from 32% in 2018 to 18% in 2020.
- The full report will be available on the Planning Council website under Community Reports for public access.

- **Unmet Need Presentation by Sharon Postel, PC Consultant**

- There have been some changes with respect to Ryan White data measurement. HRSA developed the new Unmet Need Framework in 2021, which includes three parts or measures:
 - (1) late diagnoses,
 - (2) unmet need (individuals who have not had a CD4 viral load test in 1 year), and
 - (3) in care, but not virally suppressed.
- NOTE: Because the estimates of unmet need are intended to reflect the status of the epidemic nationwide, estimates are derived from HIV Surveillance data, rather than data collected through the Ryan White program. Table A shows baseline numbers that were submitted to HRSA on the Ryan White Part A application.
- Following review of the Unmet Need report by the grantee and consultant, the following age groups were selected as the three Newark Unmet Need Target populations:
 - 13-24
 - 25-34
 - 35-44
- Based on State's HIV surveillance data, there were 13,790 people diagnosed with HIV in the Newark EMA as of December 31, 2020. At the same time, there were 9,771 people in a five-year average of individuals verified to have a viral load test from 2015 to 2019, according to State's estimates.
- The Unmet Need Framework presentation will be posted on the NEMA website for public access.

- **Continue the discussion of tentative topics for the Full 2022 Needs Assessment**

- Various committees and data sources have provided input for the development of the 2022 needs assessment topic. The committee reviewed notes from the last meeting where discussions were held about STIs, disparities among Limited English Proficiency individuals, mental health issues, feedback from CIA meetings, and CPC input.

- The committee felt that mental health was an important topic to research, particularly because of the effects of the COVID-19 pandemic. In addition, Corey shared NJCRI's experience in gathering feedback from consumers who expressed feelings of isolation, anxiety, coming back out again and other mental health issues caused by the COVID-19 pandemic.
- After a thorough discussion, the committee decided that the Needs Assessment topic would be the following: What barriers prevent PLWH from receiving Mental Health services in the Newark EMA?
- This will include subtopics such as:
 - o Problems PLWH have accessing services
 - o The adequacy of delivery of care systems, such as telehealth
 - o The specific needs of people with limited English proficiency and those with co-occurring substance use disorders
- The methodology of data collection will be discussed at the November meeting.
- **Planning for the 2022-2026 HIV Prevention and Care Plan**
- Continue review of section 3 Contributing Data Sets and Assessments
- Due to time constraints, this item was tabled for the next meeting.

8. New Business

There was no new business.

9. Administrative Issues

- Support Staff asked to discuss the request for bids for the 2022 needs assessment. The activities to be completed by the Consultant were outlined and will be used to develop the bid for part 1 of the 2022 Needs Assessment.

10. Announcements

- The Community Involvement Activities Committee (CIA) will meet on Wednesday, September 22 at 5PM via Zoom.
- Poole and Dr. Bagchi will connect offline to discuss their collaboration work for the implementation of the 2022-2026 Integrated Health Plan.

11. Next Meeting

The next REC meeting will be held on November 15, 2021, at 10AM via Zoom.

12. Adjournment

Dr. Bagchi asked for a motion to adjourn the meeting. Damas motioned to adjourn. Muhammad seconded. The vote passed unanimously. The meeting was adjourned at 11:27AM.