Ending the Epidemic Task Force Recommendation Form



COMPLETE

Collector: Web Link (Web Link)

Started: Friday, November 21, 2014 1:36:44 PM Last Modified: Friday, November 21, 2014 2:14:43 PM

Time Spent: 00:37:59 **IP Address:** 159.123.253.1

PAGE 1

Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name Jennifer

Last Name Irwin

Affiliation Mount Sinai Beth Israel
Email Address jeirwin@chpnet.org

Q2: Title of your recommendation

Adolescents/young adults

Q3: Please provide a description of your proposed recommendation

I want to make sure that young people have a voice, both on the task force itself and in the listening sessions and in all steps along the way. It is also imperative that the needs and priorities of young women/women of color be at the forefront in terms of prevention and care, as well as widening the conversation/services/solutions to include issues of domestic violence, structural inequality, mental health issues, abuse and trauma and poverty and their impact in young women's lives putting them at heightened risk for HIV/AIDS and negatively impacting thier ability to manage living with HIV/AIDS. We must address gender and power imbalance that continues to silence young women's voices and puts their needs as low priority in the fight to end AIDS.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Identifying persons with HIV who remain undiagnosed and linking them to health care

,

Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

,

Facilitating access to Pre-Exposure Prophylaxis (PrEP) for high-risk persons to keep them HIV negative

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply) Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grantfunded services that engage in both secondary and primary prevention.

,

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

,

Housing and Supportive Services Committee:
Develop recommendations that strengthen
proven interventions enabling optimal
engagement and linkage and retention in care for
those most in need. This Committee will
recommend interventions that effectively address
complex and intersecting health and social
conditions and reduce health disparities,
particularly among New York's low-income and
most vulnerable and marginalized residents.
These interventions will diminish barriers to care
and enhance access to care and treatment
leaving no subpopulation behind.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Other (please specify)
This needs both changes to existing programs and policies.

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Permitted under current law

Ending the Epidemic Task Force Recommendation Form

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

Q9: What are the perceived benefits of implementing this recommendation?

Ending AIDS in 2020 is unrealistic without young women/women being an integral part of the policymaking and program development.

Q10: Are there any concerns with implementing this recommendation that should be considered?

Nο

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Respondent skipped this question

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Respondent skipped this question

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

young people society/families in NYC and beyond juvenile justice system welfare system employment foster care system education system youth programs/CBOS

Just to name a few...we all benefit from society where we have happy, healthy adol/young adults who can be productive members of society.

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Happy to think this through with other folks who work with young people....have many ideas. This warrants discussion.

Q15: This recommendation was submitted by one of the following

Advocate