HELLO EVERYONE

This is another day and year that we all have come this far by faith. I would like to take this time to thank you for reading the Red Ribbon.

Everyone is Different

We all have gifts and qualities that are different according to the grace that is given to us — don’t feel bad if you can’t do like other people. We all are made differently and God has a plan for each one of us. God loves us all no matter what. You have to stand before God for yourself, not anyone else; Only God can judge you. God has the master plan for us and he has the last say. May God grant you peace, love and happiness.

Thank you for your time.
Ira Darnell Westbrook

PLANNING COUNCIL CHAIR PROFILE

Current Planning Council Chair for 2016-2017 is Patricia Boyette. Ms. Boyette is a Florida native and has resided in Orange County for more than 30 years. Trained as a registered nurse, Ms. Boyette holds a bachelor’s in Nursing, a master's in Health Sciences Administration and is a Board Certified Nursing Executive. Currently, Ms. Boyette is the director of Operational Performance Improvement for Orlando Health. In this role, she is focused on improving patient care outcomes and patient safety. Ms. Boyette has many ties with the Central Florida Community and is committed to focusing her efforts with the Planning Council to meet the needs of the Ryan White HIV/AIDS consumer.

CMWP PROFILE

The Center for Multicultural Wellness and Prevention (CMWP) envisions a Central Florida without health disparities and 100 percent access to social and healthcare services for all Floridians. It is the mission of CMWP to enhance the health, wellness and quality of life for diverse and ethnic populations in Central Florida by addressing health disparities, promoting health equity and encouraging behaviors that facilitate positive health outcomes. CMWP has more than 20 years of serving Central Florida Residents in areas such as HIV, Asthma, Cardiovascular Disease, Breast Health and Physical Activity.

Current projects at CMWP include but are not limited to:
1) Coordinated Approach to Child Health (CATCH), a Mayors Matching Grant project;
2) PROJECT CONNECT, an Asthma education initiative funded by the CHIC Foundation;
3) Minority AIDS Initiative/Antiretroviral Treatment Access Services (MAI/ARTAS);
4) Heart & Soul Project;
5) Ryan White Part A Services – Medical Case Management, Non-Medical Case Management & Psychosocial Support (PEER) Services; and
6) Housing Opportunities for People with AIDS (HOPWA).
The AIDS epidemic had reached uncontrollable proportions by this time and obituaries lined the pages of every Castro Valley newspaper. Burials had become all too common, yet, life went on. Now, after a long battle with AIDS, Tony had died. Another beautiful young man emaciated and completely destroyed by complications associated with this unstoppable disease. The funeral had been the previous day, and John, who was Tony’s partner, Greg, our close friend, Mark, my lover and I all toiled with heavy hearts, as we performed the task of packing Tony’s personal belongings which were to be removed from the third floor dwelling.

Not a word was spoken; and there were no more tears to be shed as we worked, every one of us depleted, defeated and shocked. For now, we had lost one of our own, a member of our immediate pack, the pack with which we ran. Countless friends and casual lovers of us all, were stricken, many bed-ridden, some had died, but Tony was one of us, and now, any one of the four, or all of us would most likely succumb to the virus we called The Plague. How long would it be before someone else got sick? The emotional trauma was in itself devastatingly unbearable. San Francisco, the perfect world, created for the perfect life, had crumbled at our feet.

On the wall in Tony’s room were framed pictures of magazines he had modeled for, Colt, Honcho, Playgirl and other publications which exploit beautiful men. One by one, I helped John remove the photos until all were wrapped and stored in a box. It appeared to be a reenactment of the memorial service from the previous day, as together we gently sealed the lid on the box which contained the remnants of Tony’s life.

Gathered now in the living room were the piled boxes and scattered pieces of furniture waiting for the movers to arrive. Exhausted, both mentally and physically, the four of us found chairs and sat in a circle facing one another. I clung tightly onto Mark, rubbing his thigh and then the back of his head and neck, never wanting to let go. For a long, long while we sat in silence, studying one another’s faces and thinking of Tony, the way he once was; then, one by one, we began to speak. Comfort was restored within us by relating stories of how Tony, a young boy from West Virginia, moved to San Francisco, the Promised Land, and like us all, changed his life. We spoke candidly about the pack of wolves we ran with, the endless warehouse parties south of Market that lasted till dawn and beyond; the playful weekends and the extravagant poolside gatherings at Drums, a gay resort nestled in the heart of The Russian River. We reminisced freely about the after gym meet-ups at Welcome Home, the Castro’s infamous greasy-spoon; the round table that was always ours because Lucia, the owner, loved her boys.

Another long silence fell; fear began to pervade the room once again. A bewildered John looked out the window to the patio. There was a small potted plant on the now barren patio floor. It caught the attention of us all and vigilantly we moved towards it. Picking up the tiny plant, John cradled it in his arms, as if it were Tony himself. Still puzzled, he looked at me and asked, “What should I do with it?” As if I were thinking aloud, I said, “Leave it behind. Leave something living behind for the next people who move here. John, leave a reminder that life will continue to flourish for those who follow.” For the first time in months, I saw that glazed-over stare leave John’s eyes. It was if he realized there would be life again one day, and shaking his head with assurance said, “You know, that’s a good idea, that’s exactly what I’m going to do.” And that tiny plant, the lone piece of a young man’s existence was placed back upon the floor.

As the four of us got ready to leave, we took one last look around the apartment where our friend Tony’s life had centered. We all hugged one another, and my hand was once again rubbing the back of Mark’s neck. Shutting off the lights, we headed to the door, and for whatever reason, I turned for yet one more look.

The interior of that humble dwelling was dark now, all was still. Then, for a moment, I focused my eyes upon that tiny plant, lying peacefully upon the patio floor, lit only by the California sun. The indelible image forever burnt itself within my mind. That small plant, ever so healthy, ever so strong, proved to be the symbol of hope I needed for which to face the days and trying years ahead.

Steve Addona
Revised, December 1st, 2016, WORLD AIDS DAY

NATIONAL BLACK HIV AWARENESS DAY

On Saturday, February 11, 2017, The Planning Council participated in the National Black HIV/AIDS Awareness Day Event, which was held at the Jack Center in the heart of Downtown Orlando. There were over a hundred patrons and we had the opportunity to perform over thirty (30) HIV test at this year’s event. The Planning Council was fortunate enough to participate in the National Black HIV/AIDS Awareness Day Event and provide vital information to event participants, describing how the Council plays a significant role in the services provided to the Orlando EMA. The African American community’s perspective is essential in properly planning for the Central Florida community. I am hopeful our involvement will spark the interest of the African American community and get more individuals involved with the planning council process.

Angus L. Bradshaw, Jr.
Executive Director at Miracle of Love
GINA QUATTROCHI, WHO HELPED PROVIDE HOUSING FOR AIDS PATIENTS, DIES AT 63

By WILLIAM GRIMES

Gina Quattrochi, who turned Bailey House into the nation’s largest provider of housing to people with AIDS and a model for similar organizations around the United States, died on Dec. 13 in Manhattan. She was 63.

The cause was multiple myeloma, Priscilla Lenes, her former partner, said.

Ms. Quattrochi (pronounced kwa-TROH-key) became involved in the AIDS crisis in the mid-1980s while serving as the associate general counsel for the New York State Nurses Association, a union with 30,000 members at the time.

“I was doing that job for a number of years and started losing a number of friends to the AIDS epidemic,” she said in a 2010 interview with the website Dot 429. “I really felt that I wanted to do something to change the course of the epidemic that was affecting a lot of my friends.”

In 1986 she became a board member of the AIDS Resource Center, founded three years earlier to provide housing and other support for homeless people with AIDS. She led the negotiations with the city to acquire the former hotel on Christopher Street in the West Village that became Bailey House (later renamed Bailey-Holt House), the first group residence for people with AIDS.

Five years later, she left the nurses’ association to become the AIDS Resource Center’s chief executive, a position she held for the next 25 years.

“I was well over my head quickly,” Ms. Quattrochi told Albany Law magazine in 2008. “I thought I knew everything as a lawyer, but running an organization that served people with AIDS was a whole other undertaking. I learned to be humble.”

Under her leadership, the organization, renamed Bailey House in 1995, grew from a small housing agency with an annual budget of $3.5 million into an organization with an annual budget of $18 million, serving 1,800 people in New York living with H.I.V. or AIDS and providing a wide variety of services.

It expanded its operation to East Harlem, opening the East Harlem Services Center on Park Avenue near 122nd Street, in 1999, and Schafer Hall, a 91-unit housing center on East 118th Street, in 2001.

She was particularly effective in convincing policy makers of the connection between homelessness and the risk of H.I.V. infection, and the importance of stable housing in any effort to tackle AIDS and H.I.V.

“The work is important,” she told Albany Law magazine. “The battles change and the political climate changes. The epidemic still rages in many parts of the country, including New York City and all over the world.”

Continued on page 7...
Our Impact

As a 20 year survivor of HIV, Scott Miller has had to overcome challenges that extend beyond his health. His struggle to find affordable housing, a lack of income and not having reliable transportation made it difficult to attend doctor’s appointments to make his HIV treatment a priority. Despite these obstacles, Scott is now healthy and adherent to his medical treatment thanks to Ryan White services, which are often his only resource. He is enrolled in a transitional housing program that provides counseling support and is able to utilize bus passes to visit with his doctor and refill his life-saving medication. Scott is an 18 year client turned advocate and determined to stay healthy. Proudly serving as a local Planning Council member, he credits services offered by Ryan White for providing him the support he needs to continue raising awareness for Persons Living with HIV/AIDS (PLWHA) and entering their senior years.

The Numbers

As of 2015, there are 13,040 persons living with HIV/AIDS in the Orlando Service Area (Lake, Orange, Osceola, Seminole, and Brevard Counties). Although, the virus does not discriminate, HIV/AIDS disproportionately affects gay and bisexual men, young Black gay and bisexual men, and Black women in the Central Florida area.1 According to new data from the Center for Disease Control (CDC), Orlando ranks sixth2 in the nation for rates of new infections, despite being the 24th largest metropolitan area3.

Orange County is third highest in the state for new HIV infections and home to approximately 43 percent of the population of the Orlando Service Area (OSA). 66% of PLWHA are under the age of 45, with 16% between 13-24 years. Based on CDC calculations, an estimated 2,973 people in the OSA are living unaware of their HIV+ status, or about 12 percent of the population.

Barriers to Care

Although the OSA has a community input process that provides consumers with the opportunity to provide written feedback about their services and the system of care, significant barriers exist that affect the testing, linkage to, retention in, and re-engagement with care and prevention of transmission. Clients in the Ryan White system of care tend to have lower employment rates, live in poverty, have unstable housing, and higher than average rates of poverty. Despite growing incidence and prevalence of HIV, Florida has experienced nearly flat annual funding for HIV programming. This stagnation in funding has resulted in a shrinking healthcare workforce and a lack of specialty care and primary care providers, especially in rural counties.

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1 Source: Florida Department of Health, Bureau of Communicable Disease, HIV/AIDS Section
2 CDC, 2015 HIV Surveillance Report
3 U.S. Census Bureau, 2015 American Community Survey
Continuum of Care

The HIV Care Continuum is a diagnosis-based model developed by the Florida Department of Health for identifying issues and opportunities related to improving the delivery of services to high-risk uninfected individuals. The model illustrates steps that can be taken to get individuals with HIV into care and virally suppressed (unlikely to transmit the virus).

Integrated HIV Prevention and Care Plan

The Integrated HIV Prevention and Care Plan ("The Plan") for the Orlando Service Area follows the guidance set forth by the Centers for Disease Control and the Health Resources and Services Administration (HRSA) and will accelerate reaching the goals in the National HIV/AIDS Strategy. By the end of 2021, The Plan will address the following goals: Goal 1: Reduce New HIV Infections Goal 2: Increase Access to Care and Improve Health Outcomes for People with HIV Goal 3: Reduce HIV-related Disparities and Health Inequities Goal 4: Achieving a More Coordinated Local Response to the HIV Epidemic

Addressing Disparities in Care

The Plan was developed to address disparities that include strategies for medication and treatment adherence for disproportionately impacted/underserved communities. This plan aims to reduce the disparity in access to care for HIV+ minority consumers in the rural counties of the Orlando Service Area by:
• Increasing access to culturally appropriate medical services • Continuing to allocate funding in the OSA to core medical services, especially for African-Americans and Hispanic/Latino Americans

Community Viral Load

The OSA has engaged in several activities to ensure Persons Living with HIV/AIDS (PLWH/A) are linked to care in addition to retaining them in care. By removing barriers and eliminating gaps in care, the OSA plans to decrease the number of people not receiving medical care, which will increase the number of people prescribed Antiretroviral Therapy (ART) and the number of people with a suppressed viral load, ensuring a seamless system for all individuals regardless of their status.

Stakeholders and Partners Who Are Needed

The OSA’s partners work hard to utilize and manage resources dedicated to the care and prevention of HIV in Central Florida, as evidenced by the support and commitment to this strategic plan. Community stakeholders will play a key role in the success of The Plan, and further input is needed from community partners to more effectively improve outcomes across the HIV Care Continuum, especially from PLWH/A. Stakeholders may contribute by participating in the Statewide Needs Assessment, on focus groups, serving on Consumer Advisory Boards, as well as participating in the Stakeholder meetings for each of the five counties that will be affected by the plan. Some of the community partners who are still needed include: Public Officials • Medical Providers • Education Providers • Clergy Members • Nurses • Legislators • Non-Profit Organizations • Hospitals • Clinics • Business Owners • Residents • Developers • Commission Members • Neighborhood Leaders • Youth Organizations • Faith-based Groups • Mental Health • Law Enforcement • Employers • Funders • Legal • Housing • Caregivers • Concerned Community Members

About Us

The Orlando Service Area is responsible for assuring that quality services are being delivered in tandem with our network of service providers. This service area incorporates the counties of the Orlando Eligible Metropolitan Area, or EMA (Lake, Orange, Osceola and Seminole), and the Part B Consortium of Area 7 (Orange, Osceola, Seminole and Brevard). The planning bodies, which are primarily responsible for identifying gaps and needs and planning specific responses, are also responsible for the priority setting and resource allocation processes. Through planning processes by the Planning Council and the Consortium, members help ease the financial burden of costly medications, health insurance, and medical care for People Living with HIV/AIDS. Approximately 85% of service dollars are allotted to core medical services in the Orlando Service Area.
What does World AIDS Day mean to you? Many people have different ideas about what this day means, and sometimes wonder why we are still recognizing this day. To many, the day is about remembrance, while to others it is about the victories and the fight ahead. World AIDS Day can carry both of these meanings, and many more. As we keep moving forward in this fight against HIV, it’s important to remember the history of the epidemic and the breakthroughs that have come to both treatment and prevention.

World AIDS Day is an opportunity for people worldwide to come together and UNITE in the fight against HIV. Founded in 1988, World AIDS Day was the first global health day established. Each year, individuals gather all over the world on the first day of December as a reminder that HIV is here and affecting our communities, and as a way to pay respect and remember those who have passed away from HIV/AIDS. It is one of the largest HIV Awareness Days each year.

On Thursday, December 1st, members from the Central Florida community gathered at the Orange County Regional History Center for the 28th World AIDS Day event. This year’s event looked different from all the other years! As 2016 was the 35th anniversary of the first documented HIV cases, the Central Florida AIDS Planning Consortium (CFAP) wanted to make this year’s commemoration larger than ever before. The event included: a video featuring some of Orlando’s HIV advocates, a quilt making project, food, a photo booth, stigma fighting artwork and some testimonies for why we as advocates and activists are continuing to recognize this important day.

So why were these things done? After discussing for a long time about “What does World AIDS Day mean to you?” we wanted to encapsulate many different people’s perspectives. The video that was generously created by Heart of Florida United Way set the scene of the HIV timeline and had different interviews that touched on the themes of “Get Tested”, “Know Your Status”, and a discussion on the AIDS Quilts. Many individuals, especially from the younger generation, do not know anyone who has passed away from this virus or have had the opportunity to commemorate someone through a quilt panel. This year’s World AIDS Day event helped include everyone. There were approximately 150 individuals that attended this year’s event, a record turnout. After the programs activities, a special viewing of the “Pride and Prejudice” exhibit was opened to the event’s guests. The exhibit included pieces from the Pulse Vigil and a history of the LGBT movement in Central Florida.

CFAP is currently working on the plans for this year’s World AIDS Day so that we can ensure that Central Florida continues to have an event that can impact everyone, and raise more awareness about the HIV epidemic.

For more information on 2016’s World AIDS Day event or for input on 2017’s event, please contact Nicole Elinoff at Nicole.elinoff@flhealth.gov

What to Do If You Have a Problem with Drugs: For Adults (Part 4 of a 4-part Series)

What To Do If You Have a Problem With Drugs: For Adults
(Part 4 of a 4-Part Series)

What if I want to participate in research studies?
To read some general information about being a part of NIH research studies, see NIH Clinical Trials and You.
To search for a clinical trial that might be right for you, check out clinicaltrials.gov.

How can I talk to others with similar problems?
Self-help groups can extend the effects of professional treatment. The most well-known self-help groups are those affiliated with Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and Cocaine Anonymous (CA), all of which are based on the 12-step model. Most drug addiction treatment programs encourage patients to participate in a self-help group during and after formal treatment. These groups can be particularly helpful during recovery, as they are a source of ongoing communal support to stay drug free. Support groups for family members of people with addictions, like Al-anon or Alateen, can also be helpful.

There are other groups in the private sector that can provide a lot of support. To find other meetings in your area, contact local hospitals, treatment centers, or faith-based organizations.

Where can I find information on specific drugs?
The main NIDA site also has information on specific drugs, including their effects on the body, brain, and behavior.
NIDA also has an Easy-to-Read website with information about many drugs.

People have told me I shouldn’t use drugs and drive, but I feel fine when driving. Can I trust my
judgment on driving?

The most responsible thing you can do is stop driving while using drugs. This can be inconvenient, but it will show loved ones you are serious about getting better. Specific drugs act differently on the brain, but all impair skills necessary for the safe operation of a vehicle. These include motor skills, balance and coordination, perception, attention, reaction time, and judgment. Even small amounts of some drugs can have measurable effects on driving ability. Drugs also impact your ability to tell if you are impaired, so you should not trust your own judgment on driving until you receive an evaluation and treatment

Where can I find more information on treatment and recovery?

More information on what to expect in treatment and recovery is in NIDA’s publication on the science behind addiction, called Drugs, Brains, and Behavior - The Science of Addiction, written by NIDA scientists based on many years of research.

There is more information on the Substance Abuse and Mental Health Administration’s resource page on treatment, prevention, and recovery.

You might also want to check out the websites of some other NIH Institutes:

- National Institute on Alcohol Abuse and Alcoholism
- Treatment for Alcohol Problems: Finding and Getting Help
- National Institute of Mental Health

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**Ryan White Part A Manages HOPWA**

*Susan Heiskell HOPWA Program Manager*

On October 1, 2016, Orange County Health Services assumed the Grantee role for the HOPWA (Housing Opportunities for Persons with AIDS) Program in this EMA (Eligible Metropolitan Area) that serves the counties of Orange, Osceola, Lake, and Seminole Counties. Susan Heiskell, formerly the Director of HIV Services at Aspire Health Partners, is now the HOPWA Grant Manager.

The HOPWA program was created in 1992 in response to the unique and varied housing needs of people living with HIV/AIDS. The program, housed in the Office of Community Planning and Development in the U.S. Department of Housing and Urban Development (HUD), directly addresses the housing and service needs of people living with HIV/AIDS. The housing needs of each individual or family vary and this is why there are numerous housing services funded through the local Project Sponsors.

There are 6 Project Sponsors that provide HOPWA services in this area. The following list includes the names of the providers, their phone number, and the HOPWA services for which they are funded:

- **Aspire Health Partners (d.b.a. CENTAUR)** – Short-term Supported Housing, Short-term Rent, Mortgage, Utilities, Tenant Based Rental Assistance, Permanent Housing Placement, Facility-Based Housing, and housing Case Management. Phone: 407-245-0014 x284

- **Catholic Charities of Central Florida/Pathways To Care** – Facility Based Housing and Case Management. Phone: 407-388-0245

- **Center for Multicultural Wellness and Prevention (CMWP)** – Short-term Supported Housing, Short-term Rent, Mortgage, Utilities, Tenant Based Rental Assistance, Permanent Housing Placement, Facility-Based Housing, and housing Case Management. Phone: 407-648-9440

- **Homeless Services Network (HSN)** – Tenant Based Rental Assistance only (Case Management services will be provided by a Project Sponsor who receives funding for that category) Phone: 407-893-0133

- **Miracle of Love (MOL)** – Short-term Supported Housing, Short-term Rent, Mortgage, Utilities, Tenant Based Rental Assistance, Permanent Housing Placement, and housing Case Management. Phone: 407-843-1760

- **St. Francis House of Hospitality** – Facility-Based Housing only (intake must originate at an agency that provides Case Management services).

To qualify for HOPWA-funded assistance, the individual/family income must be at or below 80 percent of area median income and a member of the household must be medically diagnosed with HIV/AIDS. Once an individual and/or family become eligible for assistance, an assessment of the needs of the household will be done to determine the housing service that will best meet those needs.

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**GINA QUATTROCHI**

*By WILLIAM GRIMES DEC. 19, 2016*

...Continued from page 3

Regina Rosaria Quattrochi was born on April 22, 1953, in Queens. Her father, Joseph, was a New York State Supreme Court officer. Her mother, the former Madeleine Kinsler, was a homemaker.

She graduated from Mary Louis Academy, a Roman Catholic school, in 1971, and earned a degree in English from the State University of New York at Albany in 1975 and a law degree from Albany Law School in 1978.

She practiced labor law for four years with Jackson, Lewis, Schnitzler & Krupman, representing employers, before becoming associate general counsel for Cerebral Palsy Associations of New York State. After three years she left to join the nurses’ association.

She helped found the National AIDS Housing Coalition in 1993, serving as president for three years, and in 2011 became a founding member of the 30 for 30 Campaign, which advocates on behalf of women living with and affected by H.I.V., including transgender women. The campaign’s name refers to the number of years that the AIDS crisis had lasted by 2011 and the percentage of women in the total number of AIDS cases.

In 2014, Gov. Andrew M. Cuomo appointed her to a task force with the mission of reducing H.I.V. infection by identifying people with H.I.V. and AIDS, whether diagnosed or not, and linking them with health care providers.

Ms. Quattrochi was an adjunct associate professor at New York University’s Robert F. Wagner Graduate School of Public Service from 1993 to 2006.

She is survived by a daughter, Anna Lenes, and a son, Giovanni Quattrochi, both of whom she raised with Ms. Lenes.
Standing Committees

Membership Committee
Meeting is the first Tuesday of the month
3:00 PM

Planning Committee
Meeting is the first Thursday of the month
3:00 PM

Evaluation Committee
Meeting is the second Wednesday of the month
3:00 PM

Resource Allocation Committee
Meeting is the second Monday of the month
3:00 PM

Executive Committee
Meeting is the Wednesday of the week before the Planning Council Meeting
3:00 PM

Planning Council
Meeting is on the last Wednesday of the month
Meet-N-Greet (5:30 PM)
Meeting (6:00 PM)

Contact Planning Council Support for meeting locations or visit website

Planning Council Support Contact Information

Planning Council Support
Main Phone: 407-254-9390

Planning Council Support Helpline
407-254-9383

Crystal Dunlap, Administrative Specialist
407-254-9384 • crystal.dunlap@ocfl.net

Alelia Munroe, MPH, Health Planner
407-836-8107 • alelia.munroe@ocfl.net

Ryan White Part A Service Providers

AIDS Healthcare Foundation
(888) 716-5889 www.aidshealth.org

ASPIRE Health Partners
407-245-0014 www.aspirehealthpartners.com

Center for Multicultural Wellness and Prevention
407-648-9440 • www.cmwp.org

Dept. of Health in Seminole County

Dept. of Health in Osceola County
407-343-2030 http://osceola.floridahealth.gov/

Dept. of Health in Lake County
352-771-5500 http://lake.floridahealth.gov/

Orange County Medical Clinic Pharmacy
407-246-5356

Miracle of Love
407-843-1760 www.miracleofloveinc.org

N.E.E.D. Inc.
407-661-1300 www.needincfla.org

Turning Point
407-740-5655 www.turningpointcfl.org

Hope and Help Center
407-645-2577 www.hopeandhelp.org

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