

**Ryan White Planning Council (RWPC) of the Philadelphia Part A (Title I) EMA  
Positive Committee Meeting Minutes  
Monday, April 13, 2009  
12 p.m. - 2 p.m.  
Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 203, Philadelphia, PA 19107**

**Present:** 13(PH), 1(PA), 1(NJ)

**Staff:** Nicole Johns, Briana Morgan

**Call to Order/Mission Statement/Introductions/Moment of Silence:**

M. White called the meeting to order at 12:17 p.m. Reading of the mission statement, a moment of silence, and introductions of those present followed.

**Member Check In:**

M. White stated that this would be a new section of the agenda to share anything going on in consumers' lives. A.W. stated that she was getting settled into a new home and setting up her computer. T.U. stated that he was about to move and that he was looking for some free furniture. T. Stancil stated that her daughter had passed a test in school. A community member stated that he had had a brain aneurysm nine years prior, and that the case manager he had was only able to help him with his HIV and not his brain injury. He explained that he lost his home and his tax refunds, and that he was currently working with a law project in New Jersey to get his money back. He went on to say that people need to be able to get the information that would help them. M. White suggested that this community member pick up a resource guide. A community member stated that he had gotten a new phone. B. Langley stated that he was a new member of the Planning Council, and that he knew a place where T.U. could get new furniture. A.W. stated that a case manager should be able to give T.U. a listing of where he could get furniture. T.U. stated that his case manager did not have this information. A.W. stated that he could get this information at BEBASHI.

**Approval of Agenda:**

M. White presented the agenda for approval. The agenda was approved by general consensus.

**Approval of Minutes (9 March 2009):**

M. White presented the March 9, 2009 minutes for approval. The minutes were approved by general consensus.

**Report of Co-Chair:**

M. White stated that there had been great turnout at the town hall meetings, although Philadelphia's town hall had had poor attendance. He went on to say that consumers could lose their services if they did not keep them strong and healthy like their minds, bodies, and spirits. He went on to say that the group would be doing a skills-building exercise in their meeting today.

**Report of Staff:**

N. Johns stated that she supports the Positive Committee and does community outreach, and asked those present to let her know about any support groups, health fairs, or other events so

she could get information out about the Positive Committee and the Ryan White Planning Council. She noted that she could be reached at the Office phone number at x108, or by nicole.johns@gmail.com. She added that she had printed out fact sheets about the Ryan White program and ADAP that would be available in the conference room. She pointed out the two new agenda items, explaining that the check out would be in regard to anything that had come up during the meeting time.

### **Discussion Items:**

- **Review of Brainstorming Notes from February Meeting**

M. White asked those present to review the brainstorming notes and select items that they would like to see in the near future (*see – attached handout*). T. McCoy stated that there are a great number of people that participate in the Positive Committee meeting but not Planning Council meetings, and asked what would make consumers want to get involved in the planning process. A community member stated that she was new and would like more information. T. McCoy explained that there is funding that comes into the Philadelphia area to pay for services for those not covered by insurance, and that the Planning Council determines which categories get this funding. He went on to say that they want to reach out to the community and educate people so they can participate in the process. He asked those present how they thought they could get people to participate in the Positive Committee on a consistent basis. A community member suggested focusing on the people that have already been to the meetings, and having them teach community members about the process. She went on to say that many people do not know about the Office. T. McCoy stated that there are many people that use the funding but do not know about it or where it comes from. A community member stated that she came here because she saw a flier, and that a lot of people see the fliers, but they do not come to the meetings. She went on to say that someone from the Office should be at every single organization in the city each week. T. McCoy stated that public speaking would be a great skill to build by having consumers stand up and explain the process at their meetings.

N. Johns stated that it would be important to look at what they have been doing and see how that had worked and had not worked. She explained that most people do not have experience in public speaking or talking about this complicated process, so they would need training. T. McCoy asked if they could look at this meeting more like a support by creating rules on not judging each other and making a comfortable and safe environment. M. White stated that they had previously talked about a code of conduct, and that it had been rejected since they are all adults. N. Johns replied that it was standard practice for everyone to agree to a basic set of ground rules. She explained that they could post a list of rules up for every meeting and briefly review it. T. McCoy stated that many people that attend this meeting come with substance abuse or mental health issues, and that they need to understand that. T. Stancil stated that they could not get anyone to regularly attend the meeting if they are not committed. She explained that people have stopped her on the street and knocked on her door to ask her for information. She went on to say that they could not expect people that do not even go to the doctor regularly to attend Positive Committee meetings on a consistent basis. She noted that R. Hayward invites people at BEBASHI to come to meetings as well.

N. Johns suggested that the group discuss training. She explained that they had previously had LEAP Training, which explains HIV, Ryan White, language used in community planning, ways to be a part of community planning or advocacy, issues surrounding disclosure, and other topics. She stated that there is no funding for that training anymore, but that she has all of the materials. She went on to say that this would speak to the basic ground level of understanding, and that she had gotten permission to conduct this training. She noted that they could do this in smaller segments or in a full two-and-a-half day program. The group agreed that this would be a good program. M. White added that they ought to include acronyms in that training. N. Johns replied that they would.

A community member stated that his family was not aware of his status, and that he was not comfortable sharing this in the community. N. Johns noted that these meetings were open to the public, which was an issue addressed in the LEAP Training. J.M. stated that the Philadelphia Gay News had a front-page article on the "DL syndrome," and that PLWHA would need to start disclosing their status so the spread of HIV would not be hidden. He explained that he believes this contributes to the secrecy associated with the disease. He went on to say that this would be an important decision to make in the times to come, so that community members could understand more about the presence of HIV. A community member replied that he had been positive for 14 years, and that his family does not know about his status. He explained that he would still share resources with other consumers, but that he did not want to go announce his status to the public. He went on to say that the right to confidentiality was very important.

N. Johns asked the group if they would like to have a conversation around disclosure in the future. T. McCoy replied that he thought that this was a good conversation, and the group agreed that they would like to do this. T. Stancil stated that they would have to have a conversation about disclosure, and that there is a way to discuss these issues discreetly. She explained that they might approach someone they know from a support group differently, perhaps just nodding in the grocery store. B. Langley stated that he had a female friend move in with him, and that she had read newsletters with his name in them as an activist. M. White stated that this was a very personal journey. T. McCoy stated that it was best for the most people to be out in the world, but that people need to do what is best for them and their comfort level. He explained that they should all be conscious of how they acknowledge each other at all times. He asked what bill R. Goldfein had referred to in a previous RWPC meeting. N. Johns explained that there were issues with laws surrounding two consenting adults engaging in sex when one person is HIV positive, and that this can be prosecuted as a felony. She went on to say that there were new people running for District Attorney in Philadelphia, and that R. Goldfein had said that this would be an important question to ask of them. J. M. stated that status is a very important issue when cohabitating with anyone, and that there are legal issues that arise.

N. Johns stated that they would definitely complete training around acronyms as a part of LEAP Training as well as separately. She explained that they would most likely complete the LEAP Training separately from the Positive Committee meetings, and open to the community. She stated that she would bring more information about this back to the committee. She went on to say that they would also complete trust-building exercises in the future, and that this would encourage regular participation as well. She noted that

they would have a discussion about ground rules the next month, and that they would also look at disclosure and stigma and how that affects individuals and the community.

- **Discussion on Possible Committee Name Change**

M. White asked the group if they would like to possibly change the name of the committee to something more welcoming. He explained that this might allow them to state their involvement with the committee without disclosing their status. K.M. stated that they should keep the name the same since people in Delaware County know this committee as the Positive Committee. T. McCoy stated that people might be intimidated by the term “committee” because it seems like a large commitment. He suggested a name like “Positive Voices.” K.M. stated that there was already a group by this name. J.W. stated that she thought a change in the name could get more people to attend the meeting. A community member stated that Positive Committee sounds like it means HIV+, but a different name might make Positive sound like it is about something else. T. Stancil stated that she thinks that Positive is a strong word, but that they need a better word than Committee. She went on to say that they would need a fair to draw more participants. N. Johns replied that the Office was working on doing an open house during AIDS Education Month, and that she would report back with more information in the future.

T. McCoy suggested “community involvement,” “positive leadership,” “community leadership,” or “advocate” as possible words they could use. K.M. stated that there is a group called ACDC that has information about everything going on in Delaware County and Philadelphia, and that those present could attend on the third Thursday of the month. He explained that they would get their participants to come to Philadelphia if those in Philadelphia came to Delaware County. He went on to say that he had a group called Brothers to Brothers that started with five members out of his home, and that they now have fifty-five members. T. McCoy stated that they had given flyers out to ACDC to remind people about the Positive Committee.

N. Johns asked the group for more input about a possible name change, explaining that they would not have to make a final decision during the current meeting. She stated that she would put their list aside and bring it back the next month so that everyone there could think about it between the meetings.

- **Self-Inventory Exercise: Skills Assessment**

The group began by reviewing the strengths inventory and taking a moment to complete the exercise (*see – attached handout*). M. White explained that these skills could help those present both inside and outside of meetings. N. Johns added that the group would use their answers from the first worksheet to complete the “building my skills” worksheet in their groups (*see – attached handout*). Those present then split into two groups to review and discuss their answers. J.W. stated that she had wanted to work on listening, caring about people with HIV, and speaking out. T. Stancil stated that most of her group had been comfortable with their HIV status. K.M. stated that everyone was positive about the situation, most of his group takes responsibility for themselves, and they are about attitude and caring about other people.

- **Review of Positive Committee Brochure Draft**

*Tabled.*

- **Members' Comments About Positive Committee**

**Old Business:**

None.

**New Business:**

K.M. stated SmartLink is a free phone that is available for those on Medicare or SSI/SSD. He explained that this is a great resource, and that many people cannot get cell phones otherwise. He noted that those present could call 1-800-977-3768 for more information. T. McCoy then suggested "A Positive Link" for the name of the committee.

**Announcements:**

None.

**Member Check Out:**

A community member said that he liked the idea of the LEAP Training and discussing disclosure, and that he is not very educated so it can take him a while to grasp concepts. He went on to say that it is easiest for everyone to follow along when they make things very simple. Another community member said that he learned a great deal of things that he needs to work on about himself. Another community member stated that he also would like to know more about the LEAP Training. N. Johns replied that she would bring more information about the LEAP Training back to the committee at their next meeting.

N. Johns asked those present to write positive things down about the Positive Committee on index cards to be used in the newsletter and brochure. She requested that they write comments on why they come to meetings and what they get out of them. R.L. stated that he had been having problems getting life insurance, and two of those present offered to speak with him about this after the meeting.

**Adjournment:**

The meeting was adjourned at 2:04 p.m. by general consensus.

Respectfully Submitted by,

Briana L. Morgan, Staff

**Handouts distributed at the meeting:**

- Meeting Agenda
- Meeting Minutes from March 9, 2009
- Brainstorming Notes from February 2009 Positive Committee Meeting
- Strengths Inventory Worksheet
- Building My Skills Worksheet
- OHP Calendar

RYAN WHITE PLANNING COUNCIL (RWPC)

**Positive Committee**

Meeting Agenda

Monday, April 13, 2009

12:00p.m.-2:00 p.m.

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Mission Statement- The Positive Committee supports and enhances the role of people with the HIV infection to empower their participation in the decision-making process of the Ryan White Part A Planning Council and the Community Planning Group.

**Call to Order/Moment of Silence**

**Introductions**

**Member Check In**

*(Time to share news, problems, successes, etc. Please keep your comments brief to allow everyone a turn to share.)*

**Approval of Agenda**

**Approval of Minutes**

**Report of Chair**

**Report of Staff**

**Discussion Items**

Review of brainstorming notes from February meeting  
Discussion about possible committee name change  
Self-Inventory Exercise: Skills Assessment  
Review of Positive Committee Brochure Draft  
Members' comments about Positive Committee

**Old Business**

**New Business**

**Announcements**

**Member Check Out** *(Time to share thoughts about the meeting.)*

**Adjournment**

**Please turn Phone to Silent or Vibrate**

**Don't forget to sign in if you need tokens. Thanks!**

Please RSVP at 215.574.6760 to ensure that there are enough lunches.

*Please contact the office at least 5 days in advance if you require any special assistance.*

*The next meeting date and time of the Positive Committee is Monday, May 11, 2009, 12-2pm. It will take place at the Office of HIV Planning, 340 N. 12<sup>th</sup> St. Suite 203, Philadelphia PA 19107*

**Ryan White Planning Council (RWPC) of the Philadelphia Part A (Title D) EMA  
Positive Committee Meeting Minutes  
Monday, March 9, 2009  
12 p.m. - 2 p.m.  
Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 203, Philadelphia, PA 19107**

**Present:** 17(PH), 0(PA), 2(NJ)

**Staff:** Nicole Johns, Briana Morgan

**Call to Order/Introductions/Moment of Silence/Mission Statement:**

M. White called the meeting to order at 12:09 p.m. A moment of silence, reading of the mission statement, and introductions of those present followed.

**Approval of Agenda:**

M. White presented the agenda for approval. The agenda was approved by general consensus.

**Approval of Minutes (9 February 2009):**

M. White presented the February 9, 2009 minutes for approval. The minutes were approved by general consensus.

**Report of Co-Chair:**

M. White stated that the Emergency Resources Event had been very well-attended by providers, but not consumers. He explained that there had been a great deal of information available at the event, and that they had hoped for better consumer attendance.

**Report of Staff:**

N. Johns stated that she was the staff support for the Positive Committee meeting, and that she could be reached at the Office at x108. She went on to say that they had had a subcommittee meeting about the newsletter, and that they were planning to release a newsletter in time for AIDS Education Month in June. She stated that there had been a suggestion to include quotes from committee members talking about the committee and their experiences, which they would collect at April and May meetings. She went on to say that other suggestions for newsletter content included the division of funding between core and supportive services, inclusion of commentary on the importance of positive members in the process from the Planning Council co-chairs, and a section of review on the town halls and consumer feedback groups. She welcomed other suggestions as well as help from committee members. She noted that anyone interested in talking about the newsletter could come a bit early before the next meeting, and that any articles would be due at the May Positive Committee meeting.

N. Johns went on to review the Ryan White program (*see – attached slides*). She explained who Ryan White was, as well as the purpose of the program. She pointed out

that these programs were intended to fill gaps not covered by other resources. She stated that HRSA has the lead responsibility for the program, and next reviewed the six parts of the program. She explained Part A in particular, defining Eligible Metropolitan Areas and Transitional Grant Areas as well as reviewing the criteria for EMAs, TGAs, and emerging communities. A.O. asked if emerging communities receive funding under Part A. N. Johns replied that she was not sure, but that she would look into this.

N. Johns continued on to review the difference between formula and supplemental grants. She noted the importance of unmet need in receiving supplemental funding. A community member asked if this funding is for Philadelphia only or split between Pennsylvania and New Jersey. N. Johns replied that the funding is for the entire EMA, and that approximately 10% of total funding goes to New Jersey since they represent approximately 10% of the epidemic in the Philadelphia EMA.

N. Johns next reviewed the responsibilities of the CEO (the mayor), the grantee (AACO), and the Planning Council. She noted that the Planning Council is appointed and established by the CEO, and that they establish a plan for delivery of services and set priorities for the use of Part A funds in the EMA. She went on to discuss a flow chart for Part A decision making and funding. She pointed out that the Planning Council does have legislative authority over its assigned tasks, and continued on to review several membership categories.

N. Johns then discussed the responsibilities of the Planning Council, including needs assessments, priority setting, resource allocation, development of a comprehensive plan, assessment of the grantee's performance, and evaluation of the effectiveness of services. A community member asked if Part A provides housing. N. Johns replied that Part A covers housing counseling rather than actual housing slots.

N. Johns went on to review the distinction between core medical services and supportive services. She explained that supportive services must be used to help support medical outcomes, citing medical transportation and linguistics services as examples. T. McCoy stated that the Philadelphia EMA had put over 85% of their funding in core services the previous year since it had been so long since they had had an increase in funding. N. Johns agreed, and pointed out a pie chart representing the funding for core services in the Philadelphia EMA. J. M. asked if this was reflective of the award changes that M. Ross-Russell had addressed at the previous Planning Council meeting. N. Johns replied that this was based on the allocations from the previous year. T. McCoy stated that this year's process would be similar to the process they went through two years past, where they had received separate awards.

N. Johns next discussed a pie chart that was representative of the supportive services funded in the Philadelphia EMA. She pointed out food bank/home-delivered meals, medical transportation, and housing assistance as the largest portions of funding for supportive services. She went on to show those present a map of the entire Philadelphia EMA.

N. Johns continued by reviewing Part B funding. M. White stated that the important distinction between Parts A and B is that Part A is regional funding while Part B is state funding. N. Johns pointed out that Part B consortia have no legislative mandate, but that they do assess services and needs. T. McCoy stated that they were lucky to have a great formulary for ADAP in both Pennsylvania and New Jersey.

N. Johns then reviewed Parts C – F of the Ryan White CARE Act. She explained that SPNS funded under Part F were essentially pilot programs that they hoped would address a national need. She stated that they would discuss more on the Philadelphia EMA Ryan White Part A Planning Council at their April Positive Committee meeting. A community member asked about the information that they had discussed at their previous meeting. N. Johns replied that the comprehensive plan and the epidemiological profile were available on the Office's website at [www.hivphilly.org](http://www.hivphilly.org).

T. Stancil asked if S. Hobbs was still co-chair of the Positive Committee. M. White replied that he was out sick at the moment, but that S. Hobbs hoped to attend the Philadelphia Town Hall the following day.

#### **Discussion Items:**

- **Peer-Led Discussion about Community Planning Experiences**

N. Johns stated that she would like those present to break into three separate groups. She requested that someone act as a leader, recorder, and reporter for each group. The groups took a break to discuss their experiences, and each sent a reporter to the front of the room.

T. Stancil stated that two of their group members were Planning Council members, and that they attended the meetings to learn about the complicated process. She went on to say that they had been uncomfortable because people frequently talk about things that consumers do not understand, but that they had had an overall positive experience. She added that they thought it would be helpful for the consumers to work together before the next meeting. She went on to say that each of the group members would be willing to help mentor new members, and suggested inviting consumers to meetings. T. McCoy stated that the Planning Council meeting could be boring for some consumers, and that lack of food in meetings could be a problem. N. Johns stated that they had difficulty spending money on food due to budget restrictions from the city. She noted that they would always have food at consumer-centered events. T. McCoy added that there is food at the town halls, which helps with attendance. J. M. stated that the regional Ryan White meetings all include food. A.O. stated that it was interesting that Planning Council meetings were not considered consumer-centered events.

J.M. expressed frustration with the designated reporter for his group, as this person had decided that she did not want to give a report before the room. He went on to say that it was the consumers' responsibility to report on their experiences, rather than the staff's responsibility. After a pause in conversation, N. Johns stated that the next group had given her a list of their responses to the questions. She explained that this

group had been to several meetings, and that they have asked questions. She went on to say that they thought that workshops could be better developed using more professionals, community participation, and interfacing with the Office. She pointed out that these group members also volunteered to help with the mentoring program. She then reviewed their ideas for reaching more people, which included television, fliers, churches, and broader marketing.

A. Williams stated that her group had participated in the meetings, and R. Hayward noted that two of the participants were Planning Council members. R. Hayward added that one of the members of the group had also previously been a co-chair for the Positive Committee, and had attended all town hall meetings. A. Williams stated that she had had an "okay" experience, and R. Hayward stated that he had had an uncomfortable experience at meetings. A. Williams suggested studying harder to improve a consumer's experience. R. Hayward suggested having better communication with staff to improve a consumer's experience. He next added that better information and more involvement would help with community planning. A community member suggested mailing information to individuals to inform them of what was going on in community planning. N. Johns replied that the Office does have a mailing list for the Positive Committee, and that anyone interested could opt-in for this list. T. McCoy noted that there was an issue with the Office getting permission to contact consumers. The community member stated that it would help to get buddies that could call to remind each other about meetings as well as support one another.

A. Williams stated that her group would be interested in a mentoring program. R. Hayward stated that some Planning Council members that are also providers do not tell consumers about meetings. N. Johns replied that this was a valid concern, but that she was thinking more of a consumer mentoring program, where consumers mentored other consumers. R. Hayward replied that he did not think that this would work if providers were not getting word out about the meetings in the first place. He went on to say that he thought that they would have to have an orientation outline for the mentoring program to see it would consist of. N. Johns replied that she agreed this would be very important.

T. Stancil stated consumers in Austin helped each other learn. She explained that she and J.W. wanted mentors so that they could go out and help black women in their communities.

J.M. stated that he had been coming to Positive Committee meetings for a long time, and that this group discussion setting had brought out something different from the personalities of those present. He made a point of informing those present that this meeting is typically run very professionally. He went on to say that anything "childish" ought to be left outside of the room. J.W. replied that this was discrimination, and that J.M. did not consider what other consumers felt.

A. Williams stated that it would be helpful to have consumers attend the meetings regularly. R. Hayward stated that local television channels have community spotlights, and suggested advertising there. He went on to say that they ought to hold the executive directors on the Planning Council accountable for having materials about the Office in their ASOs.

T. McCoy stated that many consumers do not participate in anything unless there is a benefit. He explained that some people come to meetings for food, and some come for the camaraderie. He went on to say that the Planning Council does not have either of those aspects to it. He questioned what would motivate someone to attend the meetings if they did not understand the process when it did not seem like there was anything in it for them. He pointed out that there was not always this kind of anger in the room, but that he thought it was representative of underlying issues. He stated that this was a new year, and they had to look ahead to figure out how to get people in the room for community planning. He concluded that education was the absolute key, and suggested the possibility of having consumer presentations as well as staff presentations.

R.L. stated that he attended the meeting in order to learn about HIV/AIDS, since he had a cousin pass away from the virus. He went on to say that since he had been laid off, he came to the meetings in support of his fiancée. J.M. stated that if they were moving in a different direction, they should consider why this was the case. He requested that people check their problems at the door, and come in to meetings to give constructive comments and criticism. He went on to say that they were not there to judge one another. He emphasized the importance of emulating the professionalism that many of them saw at the National Black HIV/AIDS Conference.

R. Hayward stated that he had been discussing his previous position as co-chair because he had been required to attend all Planning Council meetings to report on the Positive Committee's activities. He went on to say that it would be very important to get executive directors to encourage their clients to attend both Positive Committee and Planning Council meetings. T. McCoy replied that he understood the frustration on this topic, but that these directors have very busy schedule, and that they are a major part of the process. He stated that he agreed that it was important to make the group's suggestions supportive rather than demanding. He explained that they should not take an "us versus them" approach, but rather work together to get the word out about the Planning Council and the Positive Committee.

A.O. stated that she is interested in advocacy and activism as a case manager. She explained that she attends Positive Committee meetings in order to help her clients, but that it is not her responsibility for her job, so they might have a hard time holding people "accountable." A community member explained that a case manager could see two clients during the time it took to attend their meeting. A.O. agreed that she was only able to attend these meetings because she rearranged her schedule. T. McCoy stated that those present could hang fliers up when making their regular visits to their case managers and doctors. N. Johns stated that the staff would be able to

make the materials available for them to do this, and then figure out which areas they were not reaching. She explained that the Office does mail fliers to hundreds of ASOs, and that probably 10% of the fliers actually make it to where clients would see them, for a variety of reasons. She asked for suggestions on which places they had not contacted, and noted that she and M. White had already made a trip to Philadelphia FIGHT. She went on to say that she was willing to help the group, but that she needed input from them as well.

M. White stated that they had had a great healthy discussion that he hoped would help them as they conducted meetings in the future. He went on to say that he had previously heard a suggestion from a consumer on visiting hospitals and ERs, and that he had discussed this with someone at AACO. He stated that he had heard that there is currently not funding available, but that there may be in a few months. He explained that this activity would involve six months of training, so it would require funding.

- **Review of Brainstorming Notes/Planning Activities**  
Tabled.
- **Discussion on Possible Committee Name Change**  
Tabled.

**Old Business:**

None.

**New Business:**

None.

**Announcements:**

None.

**Adjournment:**

The meeting was adjourned at 2:01 p.m. by general consensus.

Respectfully Submitted by,

Briana L. Morgan, Staff

**Handouts distributed at the meeting:**

- Meeting Agenda
- Meeting Minutes from February 9, 2009
- Ryan White Program Review Slides
- Brainstorming Notes from February 2009 Positive Committee Meeting
- OHP Calendar

Brainstorming Notes from February 2009 Positive Committee  
Future Activities, Training Needs and other Ideas

**Ideas for Educational Presentations and Training at meetings**

(items in red are related to community planning)

Review list of common acronyms (HRSA, CDC, MSM, Etc.)  
Continuing education on community planning and Ryan White – 3/09  
The HIV/AIDS epidemic locally and nationally  
Funding of Ryan White Care Services (how and why services are funded) – 7/09  
Epidemiological Profile review – 6/09  
Public Speaking  
How to use data – 5/09  
LEAP Training  
Employment and Personal Finance (budgeting)  
Global AIDS  
Estate Planning (life insurance, health care proxy, etc.)  
UPENN Dental School on HIV and Dental Care  
SEPTA and other public transportation programs  
Access to Day Care and Respite Care  
Behavioral Health and HIV  
Pharmacology – HIV meds and side effects  
Access to Medications  
Alternative Therapies  
Depression

**Outreach Opportunities**

Sunday Breakfast  
Shelters  
Colours  
Safe Havens and Domestic Violence Organizations  
William Way  
FIGHT's Women's Group  
Recovery Organizations – compile a list

### **Advertising/Publicity**

Redesign committee brochure

Develop recruitment flyer

Newsletter:

Use as an outreach tool

More tidbits of info, not long articles

AIDS Education Month tie-in

Subcommittee formed to work on newsletter

Advertising venues:

Metro

City Paper

Daily News

Inquirer

Philadelphia Weekly

Tribune

Philadelphia Gay News

SEPTA

### **Misc. Ideas/Suggestions**

Fun outing to zoo or other location

Mailing every two months to Pos mailing list about meetings and other events

Copes of the Epi Profile should be available at meetings

Make CD-ROM copies of planning documents

Committee needs to have unity, support for members and co-chairs

## Strengths Inventory

Read the list of strengths and underline the ones that are most like you. Then find someone you trust — your husband or wife, a friend, or your partner — and discuss them. Talk about how these qualities help you understand what it is like for people with HIV/AIDS and how you can use your strengths to help other PLWH.

Now, look at the list again. This time circle the qualities you feel you need to work on to improve. Again, talk with someone you trust about the qualities you circled.

- |   |  |
|---|--|
| I am able to communicate well                           | I am willing to share my life's experiences                        |
| I understand my own health care needs                   | I am accepting of myself and others                                |
| I am committed to improving services                    | I am an outgoing person  |
| I am able to listen well                                | I want to help others  |
| I am organized  | I can speak comfortably about my own situation                     |
| I can work well with others                             | I am willing to learn  |
| I am able to network with other consumers and providers | I can ask for help   |
| I am optimistic   | I am able to share   |
| I am a caring person                                    | I am able to interact with many different kinds of people          |
| I am confident  | I understand the needs of PLWH beyond my own and my family's needs |
| I have experience working with other PLWH               | I am an honest person  |
| I am comfortable talking about my HIV status            | I have an attitude of partnership                                  |
| I am not judgmental                                     | I am able to provide and receive support                           |
| I have a sense of humor                                 |  |

**Building My Skills**

Write each one of the qualities you circled on the Strengths Inventory in the column marked "Skills I Want to Develop." Then think of at least three ideas for improving your skills. Write them in the next column. Talk with your friend about these ideas and then do them! A sample worksheet is presented in Table 4 if you need some ideas.

**Skills I Want to Develop**

**Ways to improve my skills**

A)

1)

2)

3)

B)

1)

2)

3)

C)

1)

2)

3)

**Table 4  
Building My Skills**

**SAMPLE Worksheet**

**Skills I Want to Develop**

**Ways to improve my skills**

A) I am able to communicate well.

1) I can practice saying what I want to before the meetings

(Sometimes I get nervous when I speak in front of a group of people. I am worried I won't be able to speak up during meetings)

2) I can talk to someone I trust about my fears

3) I can prepare by reading all the materials so I'll feel that I know what I am talking about.

B) I can work well with others.

1) I can count to 10 before I respond

(Sometimes I get upset when people say things I don't agree with, or that I think are incorrect)

2) I can talk to the person who upset me after the meeting to tell them how I feel.

3) I can think of two or three reasons why that person might see things differently from me.

You've probably discovered that you already have lots of strengths to bring to a planning body. And you have made a plan for enhancing your skills even more. Over time your inventory of strengths will grow — so will your confidence in yourself!