

**Philadelphia HIV Integrated Planning Council**

**Positive Committee**

**Meeting Minutes**

**October 16, 2017**

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

Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 320, Philadelphia, PA 19107

**Present:** PH (19), PA (1), NJ (3)

**Guests:** None.

**Staff:** Nicole Johns, Stephen Budhu

**Call to Order/Moment of Silence/Introductions:** K. Carter called the meeting to order at 12:03p.m. A moment of silence followed. Those present then introduced themselves and participated in an icebreaker activity.

**Approval of Agenda:** K. Carter presented the agenda for approval. **Motion:** J.W. moved, M.W. seconded to approve the agenda. **Motion passed:** All in favor.

**Approval of Minutes (September 11, 2017):** K. Carter presented the minutes for approval. **Motion:** M.W. moved, J. W. seconded to approve the minutes. **Motion passed:** All in favor.

**Report of Chair:** K. Carter apologized for his absence recently, and informed the committee he would be in attendance going forward.

**Report of Staff:** N. Johns informed the committee that A. Boone is out on medical leave, and he will hopefully return to work in the next few months. She stated in the interim she will be filling in.

N. Johns stated the CDC recently acknowledged those who are undetectable and in anti-retroviral treatment pose no risk of sexual transmission of HIV. N. Johns presented two videos to the committee. The first was a short excerpt from Dr. Fauci, the Director of NIAID. He commented on the new finding undetectable equals untransmittable. The second video was a longer video; it showed the responses from people living with HIV/AIDS to the PARTNER<sup>1</sup> study. The PARTNER study, as explained in the video, was a large cohort study that followed couples where one member of the couple was HIV positive and the other was not HIV-positive. The partner study found that there was no evidence of transmission of HIV in any of the couples. At the conclusion of the videos the committee shared their feelings relating to each. M.W. stated he was pleased Philadelphia was well represented in the video. M.C. stated the video did not include all races and demographics of those with living with HIV, he also stated he was unsure if the video was trying to say there is no longer any risk of transmission by an undetectable HIV positive individual.

N. Johns reiterated to committee the CDC said there is no risk of sexual transmission for those who are undetectable and in active anti-retroviral treatment. N. Johns did note that being undetectable is not a permanent status, and it takes a strict adherence to treatment.

1. The PARTNER study reported zero HIV transmissions from a positive partner on ART to their negative partner. This was after couples in the study had sex more than 58,500 times without using condoms.

The committee agreed with N. Johns and explained being intimate with someone who is HIV negative is delicate. The committee discussed how trust is important for conversations and decisions around sexual risk. N. Johns noted that this finding by the CDC is in direct contrast of past thoughts and misconceptions about HIV. She stated PLWH could be confused about the magnitude of this finding because of past stigmas, and information about HIV. She explained with this new information PLWH have different options with their personal lives. The committee shared personal anecdotes pertaining to living with HIV, and how hard it is revealing status to those who are not HIV-positive. N. Johns suggested the new CDC information about being undetectable could be a topic in the winter newsletter.

#### Action Items

- **Co- Chair Elections**

K. Carter reminded the committee co-chair elections would be taking place in today's meeting. He informed the committee from the last meeting 3 candidates, D.G., J.M., and M.W. were selected for nominations. He pointed out one of the candidates was not present. D.G. stated he was respectfully declining his nomination. The committee inquired if co-chair elections had to be conducted today or if the election could be tabled until all candidates were present. N. Johns replied that is at the discretion of the committee. K. Carter motioned that the committee should conduct a vote to hold co-elections. J. W. seconded the motion. The Committee conducted the voting process.

Vote 8 for having co-chair elections today,

6 against, 2 abstentions.\*

N. Johns distributed index cards to committee members to write down the initials of the candidate they were voting for. Votes were tallied by OHP staff and K. Carter. In total 21 ballots were casted and two members of the committee abstained from voting. By majority ruling the committee nominated J.M. to assume the co-chair position going forward.

#### Discussion Items:

- **Winter Newsletter**

N. Johns stated the newsletter would be completed by December. She invited the committee to write excerpts for the newsletter, and she asked the committee if there were any topics that should be included. D.G. suggested the newsletter should include a page about Benephilly<sup>2</sup>, so committee members will know what resources are available to them. K. Carter suggested the newsletter should include the undetectable equals untransmittable finding by the CDC. J.W. suggested the newsletter should include open enrollment for the Affordable Care Act. M.W. suggested the HIV pipeline<sup>3</sup> updates should be included. N. Johns agreed with M.W. and stated other local research opportunities would be good to include as well. S.T. suggested the newsletter should cover those who were incarcerated and HIV Positive. He explained those in prison systems don't necessarily have access to care. He noted those with Hepatitis-C were not getting treatment/receiving treatment late due to the cost. N. Johns agreed that HEP-C treatment in prisons can be delayed due to cost. N. Johns informed the committee the goal is to have the newsletter completed for

- AT the time of voting, 22 committee members were present, however; 6 did neither vote nor abstain.
- 2. Benephilly is an initiative from the Department of Health and Human Services designed to connect low income seniors to benefits. For more information visit  
<http://www.bdtrust.org/location/benephilly-enrollment-center/>
- 3. The pipeline is in reference to the 2017 Pipeline Report by the Treatment Action Group. The report encompasses Drugs, Diagnostics, vaccines, preventative technologies, CURE research, and immune-based gene therapy. For more information visit  
<http://www.pipelinerreport.org/sites/default/files/2017%20Pipeline%20Report%20Final.pdf> to view the pdf.

World AIDS Day, December 1, 2017. She stated the Positive Committee's suggestions will be incorporated into the newsletter.

### **HIV Timeline**

N. Johns introduced of the HIV timeline to the committee. The timeline is as follows:

1. June 5, 1981 CDC publishes report describing cases of PCP<sup>4</sup>
2. 1984 Human Immunodeficiency Virus identified as cause of AIDS
3. 1987 FDA approves AZT, AIDS quilt displayed first time on the National Mall
4. 1990 Ryan White dies CARE Act is passed
5. 1993 Philadelphia is released and Angels in America wins the Tony and Pulitzer
6. 1996 AIDS Memorial Quilt displayed on the National Mall for the last Time
7. 2002 FDA approves first rapid HIV test
8. 2006 CDC recommends routine testing for everyone 13-64
9. 2010 ACA becomes law, NHAS released, PrEP is proven effective (iPrEX)<sup>5</sup>
10. 2017 CDC announces that undetectable equals untransmittable.

After sharing the timeline with the committee, N. Johns invited the committee to share two personal events to add to the HIV timeline. N. Johns handed out post-it notes to the committee to write down their personal events. N. Johns requested that committee members include the year of the event so she could arrange them chronologically in the timeline. After the new timeline was arranged N. Johns shared the events with the committee and they shared their personal connection to their events. N. Johns thanked the committee for their participation in the group timeline.

### **History of Positive Committee**

N. Johns asked the committee if they would like to participate in a group project that honored the history of the Positive Committee. She suggested the committee could share their experiences and memories about past members and their past experiences. J.M. reminded the committee some of the past members of the Positive Committee were very involved in the community and he felt that those members should be included/honored. N. Johns suggested the committee could have a remembrance section in the newsletter. N. Johns noted since OHP does not photograph during meetings, including pictures in the newsletter would be challenging. M.W. agreed and suggested members' birthdays could also be included. J.M. suggested former staff at OHP should be included as well. The committee did not reach a decision.

**Old Business:** None

**New Business:** None

**Announcements:** D.G. stated he distributed a flyer at the beginning of the meeting about a sexual health conference, and he invited all committee members to attend.

4. Pneumocystis carinii pneumonia (PCP) is a serious infection that causes inflammation and fluid buildup in your lungs. It's caused by a fungus that's spread through the air, and is treatable. Those who have compromised immune systems are especially susceptible to PCP.

5. The iPrEX study was the first randomized controlled trial of PrEP in humans. The iPrEx (Pre-exposure Prophylaxis Initiative) trial found that the HIV infection rate in HIV-negative gay men who were given a daily pill containing two HIV drugs was reduced by 44%, compared with men given a placebo.

N. Johns stated building management does not want anyone to smoke in front of the building or the side entrance. She noted building management may fine those who are caught smoking.

N. Johns explained the building lighting has changed, and it is noticeably dimmer. She urged everyone to be cautious while exiting the building

D.T. inquired about HIPC membership. N. Johns replied the nominations committee has just recommended 7 applicants for HIPC membership in September. N. Johns explained D.T. could apply for HIPC membership appointments in February 2018.

**Adjournment:** The meeting was adjourned by general consensus at 1:42p.m.

Respectfully submitted by,  
Stephen Budhu, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- September 11, 2017 Meeting Minutes
- Positive Committee News Letter
- OHP Calendar