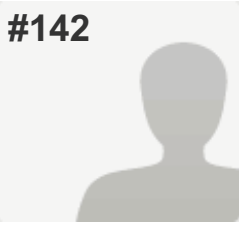


Ending the Epidemic Task Force Recommendation Form

#142



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

First Name	Audrie
Last Name	MacDuff
Affiliation	Empire State Pride Agenda - NYS LGBT Health & Human Services Network
Email Address	amacduff@prideagenda.org

Q2: Title of your recommendation Data Collection for LGBT Individuals

Q3: Please provide a description of your proposed recommendation

At the Empire State Pride Agenda, I work as the coordinator of the New York State LGBT Health and Human Services Network, which connects 54 LGBT-supportive and LGBT-serving organizations throughout the state. The Network reaches all 62 counties in New York and advocates for the sustainability of the crucial services that these non-profits offer.

One project that the Network is passionate about is the data collection efforts currently taking place within New York State agencies. These agencies have been tasked with collecting LGBT-related demographic information from the clients that they serve. In order for us to know what services LGBT individuals access and how, it is of the utmost importance for us to begin collecting and analyzing information.

I recommend that throughout the duration of the work that the Ending AIDS task-force does, there is a meaningfully thought-out process for collecting data on LGBT individuals who are accessing HIV-related care, especially those who are on Medicaid. As we know, LGBT individuals have a disproportionately high amount of health disparities and are in need of culturally competent, inclusive, and affordable health care. Additionally, studies have shown that transgender women of color are contracting HIV at an increased rate. It is crucial that this task-force takes a holistic look at how the epidemic is impacting the aforementioned groups and subsequently implements plans to properly serve the communities. Far too often, transgender individuals, especially transgender women of color, are left out of the discussions that influence their own health and well-being. In order to forge ahead and end this epidemic, the task-force needs to make sure that the voices of these folks are being sought out, listened to, and are an integral part of prevention efforts.

In conclusion, I reiterate the importance of collecting sexual orientation and gender identity information from vulnerable populations and emphasize the vital role it will play in strengthening prevention efforts.

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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

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 grant-funded 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.

Data Committee: Develop recommendations for metrics and identify data sources to assess the comprehensive statewide HIV strategy. The

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Committee will determine metrics that will measure effective community engagement/ ownership, political leadership, and supportive services. It will also determine metrics that will measure quality of care, impact of interventions and outcomes across all populations, particularly identified sub populations such as transgender men and women, women of color, men who have sex with men and youth. In addition, the Committee will evaluate to determine optimal strategies for using data to identify infected persons who have not achieved viral suppression and address their support service, behavioral health, and adherence needs.

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

New policy

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

Permitted under current law

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?

Gaining data on sexual orientation and gender identity will give us additional information about the most at-risk communities and will help guide us in maximizing prevention effort by better understanding how to best serve our target individuals.

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

N/A

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

This project has foreseen costs associated with it.

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

N/A

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

LGBT individuals, especially transgender women of color

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

It will be helpful to reach out to organizations who are already doing this work, especially Nora Yates, who is the Director of the CORE initiative at the Governor's office.

Q15: This recommendation was submitted by one of the following Advocate