

HIV Prevention and Care Board Meeting Minutes

March 30, 2022; 6:30 – 8:00 p.m.

MEETING COMMENCED AT 6:30 P.M.

MEMBERS IN ATTENDANCE: Alicia Belay, Jason Grueneich, Cassandra Plante, Jennifer Pelster, Jordan Beyer, Carsen Beckwith, Randy Woehl, Christopher Wegner, Sonya Abe, Alexi Murphy, Ana Tobiasz, Jason Lane, Gordana Cokrljic, Abiola Fashanu, Tanoa Williams

WELCOME AND CHECK IN

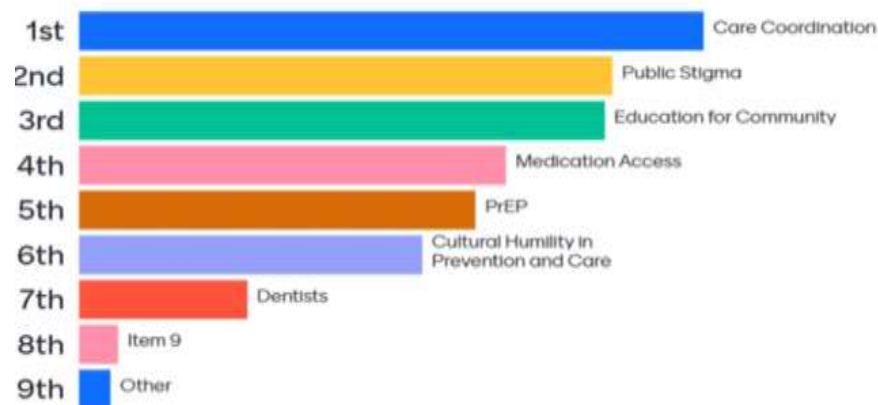
- Thank you for the feedback through office hours and forum. This will be passed to the Department of Health and will update in future
- Canopy is moving forward; clients are engaging with them and with peer navigation

REVIEW OF THE LANDSCAPE

Using Mentimeter and the Teams chat the group was led through an activity reviewing some of the concerns that have come up through conversations with various members of the board.

- Do you know where Ryan White Funds go in the state of North Dakota?
 - 3 Yes; 7 No
 - Discussion: More education would be helpful to learn more about where these funds go in the state
- U=U does not feel like a strong enough campaign; where would you like to see this messaging more?
 - Health care trainings, health classes in high schools, TV, radio, medical offices, public health campaign across the state, advertisement to the target population, addressing of stigma, social media
 - Always looking for ways to be effective with messaging in allowable ways
- Stigma seems to be really prevalent even within healthcare systems. Does this resonate with you? Are others seeing the same experience?
 - 7 Yes, 3 No
 - Discussion: Would training help this resonate? Would this be something the board would be interested in help with developing? Answers seemed to be majority yes so will keep this for further discussion
- Care coordination and medication access were described as the two top concerns to address. Is this accurate? What would you say are the top concerns, if you disagree?

- Top concerns as voted by the board: Care Coordination, Public Stigma, Education for Community, and Medication Access were top 4.



- Discussion: Community education may decrease public stigma, basic information that was given in health classes should be given to general public; those making and enforcing policies should be educated so that what the state says echoes the policies; education in religious communities, religious leaders; transportation, housing, and food are barriers as well; billing and payment issues, care coordination is lacking in ND – looking at getting more Ryan White coordinators in high population areas could assist, evenly distributing client loads, having coordinators that are only Ryan White with no other program pulling their attention

AMBASSADOR ELECTION

- This time will be reserved for the election of an ambassador for the board. Discussion was had regarding the role and the possibility of sharing the role was also presented
 - Candidates: Jason Lane, Cassandra Plante each discussed their thoughts on what being ambassador means to them and ideas for this role
 - Vote was presented in chat; after results Jason Lane and Cassandra Plante will share the role of community ambassadors

LET'S TALK PRIORITIES

- What priorities does the board sees for this time together quarterly?
 - List of board members interested in sharing stories, having conversations with public and providers regarding their care (or lack of care) and treatment, issues surrounding stigma
 - Discussion: Creating videos could help with this, things that can be used in education for nursing/medical schools, etc. This would make this asset more accessible as well. Pamphlets/flyers with personal stories, basic education on transmission. Many people in North Dakota know very little

about HIV so distributing general information to the public would help with educating the population

- Educational pamphlets for the general public and for youth, how we would market these differently
- Informative postcards regarding U=U campaign and what this means
- Distributing information on PrEP
- Education of pregnant individuals, youth
- Getting data on new infection rates to try to form a plan with tangible goals and objectives, focusing on how to reduce stigma
- Timing of meetings was brought up with discussion that these should be more often. Some talk was had about having extra meetings for the different 'deliverables' with smaller groups while keeping this as a quarterly meeting.

FEEDBACK MEETINGS OVERVIEW

- Board members may have seen the meeting invitations for the upcoming feedback sessions for the North Dakota Department of Health integrated plan. The goal of these meetings is to identify goals, objectives, strategies, and activities for each of the pillars under the Ending the HIV Epidemic plans. Please join these meetings if you would like to engage in any of these topics
 - Sections are: Diagnosis, Treatment, Prevention and Response
 - Plan is due in December; NDDoH needs to identify 3 strategies and accompanying activities from the above
 - After the meeting, feedback will be shared with the board at large and updates will be given at quarterly meetings
 - This information will then be brought back to the NDDoH to then work on actions to help bring plans to fruition
 - In the summer, NDDoH will come back to help narrow this to 3 activities, get a draft plan together, and get the integrated plan finalized
 - Discussion was had on getting information for the plan from a wider population of North Dakotans than just the board
- Will have next board meeting after the Make Every Connection Health Equity & HIV Conference on June 20
 - Funds are available for conference travel if interested – information will be sent after this meeting

MEETING CONCLUDED AT 8:00 P.M.

Meeting Notes Transcribed by:
Brandy Chap, Administrative Assistant