

Date:	Wednesday, February 19, 2025	Type:	Virtual Zoom
Start Time:	10:15 a.m.	End Time:	11:45 a.m.
Leaders	Anthony Santella (Co-chair) Mitchell Namias (CT DPH Resource Liaison)		
Participants:	11	Next Meeting:	March 19, 2025

WELCOME AND INTRODUCTIONS

Anthony Santella opened the meeting by welcoming all participants and facilitating introductions.

APPROVE NOVEMBER MEETING SUMMARY

The group approved the summary of the January meeting. Ken Plourd took the opportunity to remind everyone about the new process for distributing meeting materials. Going forward, meeting agendas will be posted on the CHPC website (<https://www.cthivplanning.org/needs-assessment-projects>) one week prior to the meeting, and meeting summaries will be available one week after the meeting. Additionally, an email reminder will be sent one-week post-meeting, directing attendees to the summary on the website.

RYAN WHITE PART B NEEDS ASSESSMENT SURVEY 2025

Mitchell Namias led the discussion by presenting a working draft of the PWH (People with HIV) Needs Assessment Survey for the group to review and provide feedback. He explained that this was a modified version of a previously used survey. The survey is structured into the following categories:

- HIV Care and Satisfaction
- Stigma and Discrimination
- Knowledge and Education on HIV Topics
- Demographics and Sexual Behavior

Key Discussion Points from the Group:

Housing Insecurity and Homelessness

- The current survey includes questions about housing stability, such as feeling safe in current housing, risk of losing housing in the next 3-6 months, and anticipated homelessness.
- However, it does not explicitly ask if someone is currently homeless.
- A suggestion was made to add a direct question: “Are you currently experiencing homelessness?” with clarification for those who may be couch-surfing, living under a bridge, or staying temporarily with others.

Stigma and Discrimination Assessment

- Some members expressed concern that adding too many stigma-related questions could make the survey too long.
- The NAP group had previously agreed to use the 10 stigma questions adopted by other states, such as Oregon, to allow for national comparisons.

- While there was a discussion on modifying the wording for clarity, members acknowledged that changing the phrasing would make comparisons with other jurisdictions more difficult.
- The group ultimately agreed that the stigma-related questions should remain unchanged to ensure consistent data collection across different regions.

Demographics and Sexual Behavior

- Adjustments were suggested to race and ethnicity categories to align with Census standards.
- A discussion arose regarding how to phrase questions about sexual behavior and identity, focusing on whether to ask about identity or sexual partners. Two main options were considered:
 1. Identity-based question – “Which of the following best represents how you think of yourself?” (Options: gay, straight, bisexual, etc.)
 2. Behavior-based question – “Who do you have sex with?” (Options: men, women, transgender individuals, or no sexual activity).
- Some members pointed out that identity and behavior do not always align. For example, some men may have sex with men but not identify as gay or bisexual.

Mitchell thanked the group for their feedback and stated that this discussion would be revisited next month for further review.

OPEN LETTER TO MEDICAL PROVIDERS UPDATE

Mitchell said he was meeting with Mark Nickel (Cross Sector Consulting) later in the week to finalize any remaining edits or approvals.

OTHER BUSINESS/ANNOUNCEMENTS

Anthony Santella reminded the group that he is stepping out of his role as NAP co-chair. The group thanked him for his leadership over the past three years. Ken stated that NAP co-chair applications are available on the CHPC website. <https://www.cthivplanning.org/>

ATTENDANCE

Attendance records are kept on file with the CHPC support staff.

ADJOURN

The committee meeting ended at 11:45 a.m.