



RYAN WHITE QUARTERLY

Q1 | VOL 2 ISSUE 1
MARCH 1, 2022

THE OFFICIAL NEWSLETTER OF THE RYAN WHITE
PLANNING COUNCIL OF DALLAS, TX



Thank You

All New Members:

- Chris Walker
James Kleitches-
Leadership Appointment
- Naomi Green-
Leadership Appointment



A Letter from Office of Support...

Greetings, we are excited to enter the new year with new ideas, education, connection, and advocacy. Thank you for supporting the Ryan White Planning Council of Dallas to extend our reach.

Best,

Office of Support Staff

UPCOMING RWPC MEETINGS



MARCH 2, 2022 @ 2PM
EXECUTIVE COMMITTEE MEETING

MARCH 9, 2022 @ 9AM
RWPC
COMMITTEE MEETING

MARCH 15, 2022 @ 2PM
NEEDS ASSESSMENT COMMITTEE MEETING

MARCH 16, 2022 @ 9AM
PLANNING & PRIORITIES COMMITTEE MEETING

MARCH 22 @ 3PM
EVALUATION COMMITTEE MEETING

MARCH 24 @ 12PM
CONSUMER COUNCIL COMMITTEE MEETING

MARCH 28 @ 5:15PM
ALLOCATIONS COMMITTEE MEETING



*take a look-
WHAT HAVE WE BEEN WORKING ON?*

Executive

Review Committee Deliverables

Evaluation

Assess AAM

RWPC

Review and Approve Allocations Committee Recommendations

CCC

Forum Planning/ Consumer Education

Needs Assessment

FY 2022 Needs Assessment Timeline

Planning & Priorities

FY 2022 Standards of Care

Allocations

FY 2021-22 Resource Allocations



Every year on March 10 — and throughout the month of March — local, state, federal, and national organizations come together to shed light on the impact of HIV and AIDS on women and girls and show support for those at risk of and living with HIV. This year marks the 16th annual observance of National Women and Girls HIV/AIDS Awareness Day (NWGHAAD).

We continue to make progress towards eliminating HIV and AIDS in the U.S., but women remain vulnerable to infection — especially black or African-American and Hispanic women. Black women accounted for the largest share of new HIV diagnoses among women in the U.S. in 2018. Poverty, stigma, medical mistrust, and fear of discrimination often prevent some women from getting tested or from seeking care.

An estimated 14% of transgender women have HIV.

Transgender women experience stigma and discrimination and often encounter healthcare providers or clinics lacking knowledge of transgender issues or proper inclusive language. These all pose obstacles to HIV testing, prevention, and care that can be addressed among transgender women.

We can help change these statistics!

The 2021 NWGHAAD theme, “You. Me. WE. Changing the face of HIV, highlights the role that everyone can play in HIV prevention- individuals, community organizations, health care professionals, businesses, faith institutions, and so many others. There are steps we can all take to protect ourselves, our partner, our family, and our neighbors. By working together, we can help eliminate HIV and improve the quality of treatment and care for people currently living with HIV.

To learn more, visit [What every woman needs to know about HIV](#), [What every girl needs to know about HIV](#), or the [National Women and Girls HIV/AIDS Awareness Day fact sheet](#).



HIV Treatment hotline Resources

PERINATAL HIV HOTLINE

Provides clinicians with around-the-clock advice on indications and interpretations of HIV testing in pregnancy, and consultation on antiretroviral use during pregnancy, labor and delivery, and the postpartum period.

1-888-448-8765 | 24 hours, seven days a week

PEPline

Provides expert guidance in managing health care worker exposures to HIV and hepatitis B and C. Clinicians receive immediate post-exposure prophylaxis (PEP) recommendations.

1-888-448-4911 | Occupational PEP: 11 am to 8 pm EST, seven days a week | Non-occupational PEP: 9 am to 8 pm EST, Monday through Friday; 11 am to 8 pm EST, weekends and holidays

PrEPline

Provides expert guidance on considerations for providing pre-exposure prophylaxis (PrEP) to people who don't have HIV as part of an HIV prevention program.

1-855-448-7737 | 9 am to 8 pm EST, Monday through Friday

LET'S TALK ABOUT PrEP



What is PrEP?

PrEP, or pre-exposure prophylaxis, is medicine people at risk for HIV take to prevent getting HIV from sex or injection drug use. PrEP can stop HIV from taking hold and spreading throughout your body.

Currently, there are two FDA-approved daily oral medications for PrEP. A long-acting injectable form of PrEP has also been approved by the FDA. PrEP is highly effective at preventing HIV when taken as indicated.

PrEP reduces the risk of getting HIV from sex by about 99% when taken as prescribed. Among people who inject drugs, it reduces the risk by at least 74% when taken as prescribed. PrEP is much less effective when it isn't taken consistently.

Is PrEP Right for You?

PrEP may benefit you if you test negative for HIV and

- you have had anal or vaginal sex in the past 6 months, and you:
- have a sexual partner with HIV (especially if the partner has an unknown or detectable viral load),
- have not consistently used a condom, or
- have been diagnosed with an STD in the past 6 months.

Or

- you inject drugs and
- have an injection partner with HIV, or
- share needles, syringes, or other injection equipment.

Or

- you've been prescribed PEP (post-exposure prophylaxis) and you
 - report continued risk behavior or
 - have used multiple courses of PEP

If you are a woman and have a partner with HIV and are considering getting pregnant, talk to your doctor about PrEP. PrEP may be an option to help protect you and your baby from getting HIV while you try to get pregnant, during pregnancy, or while breastfeeding.

What Drugs Are Approved for PrEP?

There are two oral medications approved for daily use as PrEP. They are combinations of two anti-HIV drugs in a single pill:

- Truvada® is for all people at risk for HIV through sex or injection drug use. Generic products are also available.
- Descovy® is for sexually active men and transgender women at risk of getting HIV. Descovy® has not yet been studied for HIV prevention for receptive vaginal sex.

A long-acting injectable form of PrEP, Apretude®, has also been approved by the FDA. It is administered by a health care provider every two months instead of daily oral pills.

Is PrEP Safe?

PrEP is safe. No significant health effects have been seen in people who are HIV-negative and have taken PrEP for up to 5 years.

Some people taking PrEP may have side effects, like nausea, diarrhea, headache, fatigue, and stomach pain. These side effects are usually not serious and go away over time. If you are taking PrEP, tell your health care provider if you have any side effect that bothers you or that does not go away.

And be aware: PrEP protects you against HIV but not against other sexually transmitted infections (STIs) or other types of infections. Combining PrEP with condoms will reduce your risk of getting other STIs.

How Do You Get PrEP?

If you think PrEP may be right for you, visit your doctor or health care provider. PrEP is only available by prescription. Any health care provider licensed to write prescriptions can prescribe PrEP; specialization in infectious diseases or HIV medicine is not required.

If you don't have a doctor, you can use the HIV Services Locator to find a PrEP provider and other HIV services near you. You can visit many community health centers for a PrEP consultation. More than 190 health centers in the 57 jurisdictions prioritized in the Ending the HIV Epidemic initiative are providing PrEP services. Many health centers in other jurisdictions also provide PrEP services. Because PrEP is for people who are HIV-negative, you'll have to get an HIV test before starting PrEP and you may need to get other tests to make sure it's safe for you to use PrEP.

If you take PrEP, you'll need to see your health care provider every 3 months for repeat HIV tests, prescription refills, and follow-up.

LET'S TALK ABOUT PEP



What is PEP?

PEP, or post-exposure prophylaxis, is a short course of HIV medicines taken very soon after a possible exposure to HIV to prevent the virus from taking hold in your body.

You must start it within 72 hours (3 days) after a possible exposure to HIV, or it won't work. Every hour counts!

PEP should be used only in emergency situations. It is not meant for regular use by people who may be exposed to HIV frequently.

How Do You Know If You Need PEP?

PEP may be right for you if you are HIV-negative or don't know your HIV status, and you think you may have been exposed to HIV in the last 72 hours:

- During sex (for example, you had a condom break with a partner of unknown HIV status or a partner with HIV who is not virally suppressed)
- Through shared needles, syringes, or other equipment used to inject drugs, or
- Through sexual assault

Contact your health care provider immediately or go to an emergency room or urgent care clinic right away.

Your health care provider or emergency room doctor will evaluate you, help you decide whether PEP is right for you, and work with you to determine which medicines to take for PEP.

In addition, if you are a health care worker, you may be prescribed PEP after a possible exposure to HIV at work, such as from a needlestick injury.

How Long Do You Need to Take PEP?

PEP is effective in preventing HIV infection when it's taken correctly, but it's not 100% effective. The sooner you start PEP after a possible HIV exposure, the better.

While taking PEP, it's important to use other HIV prevention methods, such as using condoms the right way, every time you have sex and using only new, sterile needles and works when injecting drugs

Does PEP Cause Side Effects?

PEP is safe, but the HIV medicines used for PEP may cause side effects like nausea in some people. In almost all cases, these side effects can be treated and aren't life-threatening.

If you are taking PEP, talk to your health care provider if you have any side effect that bothers you or that does not go away.

PEP medicines may also interact with other medicines that a person is taking (called a drug interaction). For this reason, it's important to tell your health care provider about any other medicines that you take.

Can You Take PEP Every Time You Have a Potential Exposure to HIV?

No. PEP should be used only in emergency situations. It is not intended to replace the regular use of other HIV prevention methods. If you feel that you might be exposed to HIV frequently, talk to your health care professional about PrEP (pre-exposure prophylaxis).

Can You Get Help Paying for PEP?

- If you're prescribed PEP after a sexual assault—You may qualify for partial or total reimbursement for medicines and clinical care costs through the Office for Victims of Crime, funded by the U.S. Department of Justice (see the contact information for each state).
- If you're prescribed PEP for another reason and you cannot get insurance coverage (Medicaid, Medicare, private, or employer-based)—Your health care provider can apply for free PEP medicines through the medication assistance programs run by the manufacturers. These requests can be handled urgently in many cases to avoid a delay in getting medicine.
- If you're a health care worker who was exposed to HIV on the job—Your workplace health insurance or workers' compensation will usually pay for PEP.

LET'S TALK ABOUT ART



What Is HIV Treatment?

HIV treatment involves taking medicines that slow the progression of the virus in your body. HIV is a type of virus called a retrovirus, and the combination of drugs used to treat it is called antiretroviral therapy (ART). ART is recommended for all people living with HIV, regardless of how long they've had the virus or how healthy they are. ART must be taken every day, exactly as your health care provider prescribes.

Why Is HIV Treatment Important?

Getting and staying on HIV treatment because it reduces the amount of HIV in your blood (also called the viral load) to a very low level. This keeps you healthy and prevents illness. There is also a major prevention benefit. People living with HIV who take HIV medication daily as prescribed and get and keep an undetectable viral load have effectively no risk of sexually transmitting HIV to their HIV-negative partners. This is called treatment as prevention.

If left untreated, HIV attacks your immune system and can allow different types of life-threatening infections and cancers to develop. If your CD4 cell count falls below a certain level, you are at risk of getting an opportunistic infection. These are infections that don't normally affect people with healthy immune systems but that can infect people with immune systems weakened by HIV infection. Your health care provider may prescribe medicines to prevent certain infections. HIV treatment is most likely to be successful when you know what to expect and are committed to taking your medicines exactly as prescribed. Working with your health care provider to develop a treatment plan will help you learn more about HIV and manage it effectively.

When Should You Start HIV Treatment?

Treatment guidelines from the U.S. Department of Health and Human Services recommend that a person living with HIV begin ART as soon as possible after diagnosis. Starting ART slows the progression of HIV and can keep you healthy for many years.

If you delay treatment, the virus will continue to harm your immune system and put you at higher risk for developing opportunistic infections that can be life-threatening.

Does ART Cause Side Effects?

Like most medicines, antiretroviral therapy (ART) can cause side effects. However, not everyone experiences side effects from ART. The HIV medications used today have fewer side effects, fewer people experience them, and they are less severe than in the past. Side effects can differ for each type of ART medicine and from person to person. Some side effects can occur once you start medicine and may only last a few days or weeks. Other side effects can start later and last longer.

If you experience side effects that are severe or make you want to stop taking your HIV medication, talk to your health care provider or pharmacist before you miss any doses or stop taking the medication. Skipping doses or starting and stopping medication can lead to drug resistance, which can harm your health and limit your future treatment options.

Some side effects of ART that are most commonly reported include:

- Nausea and vomiting,
- Diarrhea,
- Difficulty sleeping,
- Dry mouth,
- Headache,
- Rash,
- Dizziness,
- Fatigue, and
- Pain.

And be aware; HIV medicines also may cause different side effects in women than men.

Contact your health care provider or pharmacist immediately if you begin to experience problems or if your treatment makes you sick. If side effects make you want to skip taking your medications sometimes or stop taking them altogether, talk to your health care provider or pharmacist right away to find solutions that work for you. Your health care provider may prescribe medicines to reduce or eliminate side effects or may recommend changing your medication to another type of ART that might work better for you. Learn more about the possible side effects of ART and ways to manage them.

What Is HIV Drug Resistance?

Drug resistance can be a cause of treatment failure for people living with HIV. As HIV multiplies in the body, it sometimes mutates (changes form) and produces variations of itself. Variations of HIV that develop while a person is taking ART can lead to drug-resistant strains of HIV.

With drug resistance, HIV medicines that previously controlled a person's HIV are not effective against new, drug-resistant HIV. In other words, HIV medicines can't prevent drug-resistant HIV from multiplying. Drug resistance can cause HIV treatment to fail.

A person can initially be infected with drug-resistant HIV or develop drug-resistant HIV after starting HIV medicines. Drug-resistant HIV also can spread from person to person. Drug-resistance testing identifies which, if any, HIV medicines won't be effective against your specific strain of HIV. Drug-resistance testing results help determine which HIV medicines to include in an HIV treatment regimen.

U = U CAMPAIGN

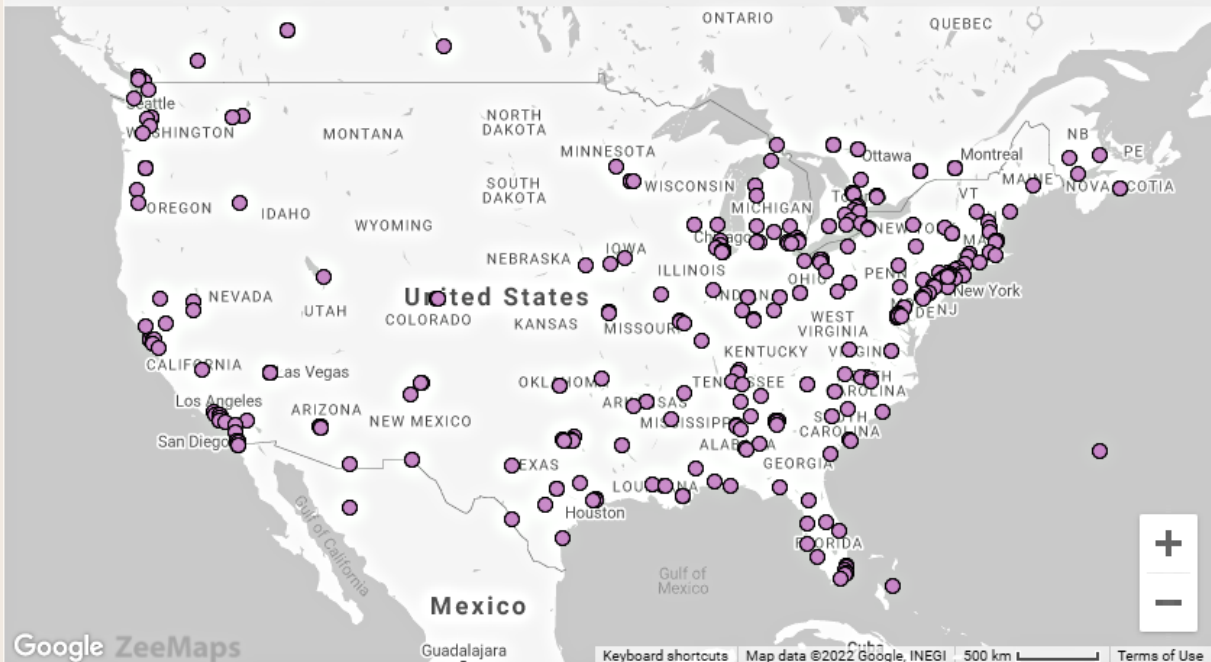
Undetectable = Untransmittable

A person living with HIV who is on treatment and has an undetectable viral load cannot sexually transmit HIV.

Endorsed by the world's leading medical, scientific, and public health institutions including the World Health Organization (WHO), President's Emergency Plan for AIDS Relief (PEPFAR), Joint United Nations Programme on HIV/AIDS (UNAIDS), US Centers for Disease Control & Prevention (CDC), National Institutes of Health (NIH) and many more.

U=U Community Partners as of February 14th, 2022

1,061 organizations from 105 countries have signed on to share the U=U message in ways that engage their communities. Click on the map to learn more. (Best if viewed in desktop mode)





ANNOUNCEMENTS

We need you!

The Ryan White Planning Council is a community group that has been appointed by the County Judge, to plan the organization and delivery of HIV services for the Dallas EMA, HSDA funded by Part A, MAI Part B, & State Services of the Ryan White HIV/AIDS Treatment Extension Act. Each council member is a caring, dedicated volunteer who was carefully selected to represent the general public, persons living with HIV, funded service providers, and other health and social service organizations.

Please contact RWPC Office Of Support at (214) 819-1840 for an application and/or more information.

[Ryan White Planning Council](#) | [Home \(dallascounty.org\)](#)

We'll miss you Nevin...



OFFICE OF SUPPORT
Opportunities

N/A



MARK YOUR CALENDAR

UPCOMING EVENTS

- National Women's and Girl's HIV/AIDS Awareness Day - March 10
RWPC CCC Presents: HIV & Women of Color/ Reproductive Justice - March 11
- National Native HIV/AIDS Awareness Day - March 20
RWPC CCC Presents: The Cultural Effect of HIV- April 8
- FY 2022 Leadership Orientation Training - April 13

Q1 COMMITTEE DELIVERABLES

- Executive*- Orientation and Training
- RWPC- Committee Project Final Approvals
- P&P*- FY 2023 Priority Service Ranking
- Needs Assessment*- FY 2022 Needs Assessment
- Evaluation*- FY 2021 Assessment of the Administrative Mechanism (AAM)
- Allocations*- FY 2023 Resource Allocation
- CCC- Community Forums



*Happy
Birthday*

**TO EVERYONE CELEBRATING IN
JANUARY, FEBRUARY, & MARCH**

