



**Illinois Department of Public Health**

**Illinois HIV Planning Group/Ryan White Advisory Group Integrated HIV Planning Meeting Minutes**

**Date: October 27, 2015**

**Hotel: Hilton Hotel      Address: 700 East Adams, Springfield, IL 62701      Phone Number: (217) 789-1530**

**2-6:00 p.m. Illinois Room, Mezzanine Level**

<b>Agenda Item</b>	<b>Time</b>	<b>Presenter</b>	<b>Purpose and Objectives</b>
Call to order	2 pm	Integrated Steering Committee Co-Chairs	The meeting will be called to order.
<i>The meeting was called to order at 2:00 pm.</i>			
Welcome, Introduction and Moment of Silence; Review Meeting Agenda and Objectives; Integrated Steering Committee Update; Review principles of respectful engagement	2-2:30 pm	Integrated Steering Committee Co-Chairs	<ul style="list-style-type: none"> <li>• Moment of silence acknowledged for people with HIV</li> <li>• Define clear goals for meeting and guidelines for meeting process</li> <li>• Review agenda and meeting materials</li> <li>• Introduce steering committee members and review goals of committee</li> </ul>
<p><i>The co-chairs welcomed everyone to the meeting and sent the microphone around the room for introductions. A moment of silence for people past and present living with HIV and working in HIV prevention, care, and policy was acknowledged. Janet reminded the group that everyone's comments and input are valuable and that we will follow the rules of meeting engagement and be respectful of that feedback. Janet relayed that there was a last minute change to the agenda. Maxx Boykin had emailed Janet to say his care had broken down and he would be unable to attend. Janet said that she had conferred with Jessica Gerdes and Lacey Rosenbaum, the presenters for the Youth presentation. They had been planning to do a condensed version of their presentations, in the interest of time. Since we now have more time, each will present their full presentations. Lacey is in training until 4 pm; however, so we will have Jessica present first, then have Lacey present after the break. Janet stated that understanding youth issues is key to developing a comprehensive integrated plan for HIV care and prevention.</i></p> <p><i>Jeffrey provided an update on the work of the Integrated Planning Steering Committee and recognized each of the members present. That group has cross representation from both care and prevention and has been instrumental in guiding the content and structure of the integrated meetings, designing meeting agendas and developing meeting and discussion topics, and preparing for the first draft of the integrated plan. The consultant working on development of the plan met with the Steering Committee at its last meeting and provided an overview of the outline and structure of the plan and solicited feedback from the members. She will have a first draft of the plan to Jeff and Janet by the end of October.</i></p>			
Results of Illinois YRBS	2:30-3:30 pm	Jessica Gerdes, MS, RN, NCSN, Principal Consultant, Illinois State Board of Education	<ul style="list-style-type: none"> <li>• Provide overview of most recently released IL YRBS survey results.</li> </ul>
Q&A, Input and Discussion	3:30-3:45 pm		
<p><i>Illinois State Board of Education (ISBE) is in the 3<sup>rd</sup> year of its involvement in working with priority school districts on collaborations with local public health departments to address LGBTQ issues in the schools. Jessica stated that she handles the surveillance portion of ISBE's Division of Adolescent School Health (DASH) grant with CDC. The Youth Risk Behavioral Surveillance (YRBS) survey is for grades 9-12. ISBE conducts a survey of students in schools outside of Chicago. The Chicago Public School District administers its own. The overall data is compiled by CDC then shared with the jurisdictions. The surveys are administered in the Spring of odd years and the results released in the Spring of even years. Jessica provided several flash drives which had the complete data sets in case users want to do their own correlations of the data. In addition, principals and primary teachers are randomly selected to survey. Jessica presented to survey results, which demonstrated increased sexual activity, increased experience of sexual violence, increased experience of bullying and harassment, increased feelings of depression and suicidal thoughts, and increased risk taking behaviors among LGBTQ. Jessica stated that comparisons had been done looking at data over the last 10-15 years and we continue to see these trends.</i></p> <p><i>Jessica was asked about any legislative or policy changes that have occurred. She stated that Chicago Public School District schools have been providing condoms to students. She also relayed that because of the state law passed in August of this year, schools are now able to carry opioid overdose treatment on site. This is not required, but is opt-in. School staff must be trained prior to having this on hand and all uses of the treatment must be reported to the school district. Jessica referenced Anne Marie's Law, which was enacted as a suicide prevention measure as a result of a girl who committed suicide after enduring electronic bullying by her school mates.</i></p>			



Jessica was asked how many schools and students participated in the Illinois (outside the city of Chicago) survey -43 schools and 2800 students were randomly drawn from a cross-section of the population. Jeffery Erdman commented that we need to use this needs assessment data for development of the Joint Plan, possibly looking at cross-tabulations among those who received sex education and any sexual risk taking behavior change in those students. It was also recommended that we look to see if there was an increased report in suicide attempts by youth who identify as LGBTQ.

Jessica said that you are able to pull up correlations on the CDC website or can do your own analyses of statewide data.

Paula Clark commented that Region 5 has a Sexual Health Action Group that provides parent/teacher training, trainings in the schools, and passes out condoms at the schools.

Jessica was asked and said that no, there is no breakdown of the responses by school district.

Jessica stated that the exact questions are available on the CDC website. All questions were close-ended.

A member of the audience said that the Illinois Department of Human Services also administers an Illinois Youth Survey that has data on things such as youth alcohol and drug use and bullying that can be broken out by state and school district.

There was a question about any thoughts on why we are seeing an increased use in heroin among Hispanic youth. Jessica said she was not sure about that but said that there is a misperception that heroin use is only happening in the urban and suburban areas. There is high media attention in those areas but it is happening in rural areas as well.

Jessica was asked if the survey instrument had been reviewed to be inclusive of transgender populations -The most recent 2015 survey was reviewed and included questions about transgender individuals.

Jessica was asked how frequently CDC reviews and adds questions to the survey. She said that CDC does not encourage a lot of changes so it can look at trends, but that every 2 years states are allowed to suggest changes to the questions.

It was suggested that questions about serious violence at school be added, such as: “Have you ever brought or felt the need to bring a gun to school for protection?” and “Have you ever been absent from school because you feared you would experience violence?”

Break	3:45-4:00 pm		
LGBTQ youth –national perspective	4-4:30 pm	Lacey Rosenbaum M.Ed., Director, Safe and Supportive Schools Project, American Psychological Association	<ul style="list-style-type: none"> <li>• Provide overview of most recently released IL YRBS survey results.</li> <li>• Remarks on LGBTQ youth topics from the national level.</li> </ul>
Q&A, Input and Discussion	4:30		
<p>Lacey spoke about the work being done at the national level for the Safe and Supportive Schools Project (SSSP). Her organization works with 19 state funded agencies on the SSSP, which provides an approach to HIV, STD, and pregnancy prevention. She also spoke about a RESPECT training that her organization is providing to staff in the school districts to empower them to be sensitive to and address the needs of LGBTQ youth, thereby creating a safe and supportive school environment for them.</p> <p>Lacey was asked if there were any plans to adapt the RESPECT training for other agencies such as youth-serving CBOs. She said that researchers in Minnesota are currently discussing doing that. It was also suggested that this would be a great training to provider to parent organizations. Lacey said that organizations could request having the trainings conducted.</p> <p>Lacey was asked about any advocacy on policy her organization had done. She stated that the American Psychological Association had worked with the National Association of School Psychologists on a resolution on gender and sexual orientation diversity in children and adolescents in schools. Among other things, the resolution calls for grades K-12 public schools to be places of safety and support for all students through the following actions:</p> <ul style="list-style-type: none"> <li>• Promoting safe and supportive school policies and legislation for all children and youth</li> <li>• Developing anti-bullying efforts that promote academic success and resiliency</li> <li>• Developing programs to increase school engagement</li> <li>• Promoting cross-agency collaboration to create policies that positively affect the health and well-being of sexual-orientation- and gender-diverse youth</li> <li>• Protecting the right to privacy around sex, sexual orientation, and gender identity</li> </ul>			
Wrap Up: Update on Integrated Meeting Process and Progress on Integrated Plan Development	4:30-4:45 pm	Janet Nuss and Jeff Maras, IDPH Co. chairs, Integrated Planning Steering Committee	<ul style="list-style-type: none"> <li>• Provide update to group on Integrated Meeting process/Integrated Plan development to date</li> </ul>
Q&A, Input and Discussion	4:45-5:00 pm		



*The Co-chairs reminded the members that we have done a good job in compiling the responses generated from the breakout discussions at Integrated Meetings so far this year. We have compiled needs, gaps, and barriers, and have categorized these into themes by client-level, provider-level, etc. At the upcoming meeting in December, we will focus on strategizing and prioritizing action items for inclusion in the Joint Plan. Jeff reminded the Ryan White Advisory Group members that the December 3<sup>rd</sup> meeting of the integrated group will be a day-long meeting. The RW Advisory Group-only meeting has been shortened to accommodate this, since the Integrated Planning Committee felt a need to transition from the needs assessment portion of the Joint Plan to the actual plan portion.*

Community Input/Public Comment Period	5:00 pm	Open to all	Opportunity for public comment and community input about issues relevant to HIV care and prevention planning.
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*Having no requests for public comment or community input, the business portion of the meeting was adjourned. Members were encouraged to get dinner and network with other stakeholders in the room for the networking dinner portion of the meeting.*

Networking Dinner	5:00-6 p.m.	Full Integrated Planning Group	
Adjournment	6:00 p.m.		