

Memorandum of Understanding
(MOU)

CONTRACTOR: County of El Dorado

CONTRACT NUMBER: 04-35346, A02

PROGRAM: HIV Prevention Program

MOU NUMBER: PREV 04-09, A02

In that certain agreement made and entered into July 1, 2004 between the Department of Health Services/Office of AIDS and the County of El Dorado:

1. Provision 2 (MAXIMUM AMOUNT PAYABLE) on the face of the original Memorandum of Understanding is amended to read as follows:

The maximum amount payable by the STATE to the CONTRACTOR under this MOU shall not exceed the following:

- A. \$65,382 for the budget period of July 1, 2004 to June 30, 2005.
- B. \$24,277 129,150 for the budget period of July 1, 2005 to June 30, 2006.
- C. \$24,277 for the budget period of July 1, 2006 to June 30, 2007.
- D. \$413,936 218,809 for the entire MOU term.

2. Exhibit 2, A01, entitled "Scope of Work, " Year 2 is amended to delete Goal #4: Prevention With Positives in it's entirety.

3. Provision 3 (MOU EXHIBITS) on the face of the original Memorandum of Understanding is amended to add four pages to Exhibit 2, A01, entitled "Scope of Work," Year 2 and shall read as follows:

Exhibit 2, A01, entitled "Scope of Work," Year 2 consisting of 44 18 pages.

4. Provision 3 (MOU EXHIBITS) on the face of the original Memorandum of Understanding is amended to add Exhibit 5, A02, entitled "Budget," Year 2 consisting of one page. All further references to Exhibit 5, A01 in the body of this agreement or any attachments thereto shall be deemed to read Exhibit 5, A02.

5. The effective date of this amendment shall be July 1, 2005.

6. All other terms and conditions shall remain the same.

STATE OF CALIFORNIA:

COUNTY OF EL DORADO:

Mary Taitenberg
Signature

James R. Sweeney
Signature

Michael Montgomery, Chief
Office of AIDS

JAMES R. SWEENEY
Chairman, Board of Supervisors
Printed/Typed Name and Title

2/13/2004
Date

1-31-06
Date

ATTEST: CINDY KECK, Clerk
of the Board of Supervisors

By [Signature]
DEPUTY
1-31-06

Exhibit 2, A01
Scope of Work – Year 2
July 1, 2005 to June 30, 2005

Goal #4A: HEC will recruit EDC HIV-positive residents, primarily gay/MSM using drugs/alcohol, to participate in the L.I.F.E. online program for rural people living with HIV/AIDS. The L.I.F.E. Program is a “prevention with positives” program containing a variety of integrated interventions designed to guide HIV-positive clients in developing increased motivation and enhanced skill sets for adhering to sexual and/or needle-use safety

Objective #4A: By June 30, 2006, 20-30 HIV-positive EDC residents, primarily gay/MSM and using drugs/alcohol, will be recruited by various means to actively participate in the L.I.F.E. Online program for rural people living with HIV/AIDS. Additionally, 10 to 15 of the PLWHIV participating in L.I.F.E. Online will be recruited into face-to-face HIV prevention services, including individual, couples, and/or group sessions.

Intervention Description for Objective #4A:

a. Summary: The major objectives of a short 1-year intervention (with 3 month start up) would be to:

a.1 Demonstrate that innovative health websites can be used to attract and retain HIV-positive rural individuals into engagement with Internet-based services that protect their anonymity;

a.2 This engagement with the online health website could lead to engagement with face-to-face services. The website would be built to induce a natural flow (including incentives) to have them add face-to-face prevention services to their HIV-care.

b. Types of Intervention: Individual Level Intervention; possible Group Interventions if participants request face to face meetings.

c. Risk Population/Target Size: We propose to provide “prevention with positives” services for HIV-positive individuals living in El Dorado County, including all of the Western Slope (WS) (from Echo Summit in Tahoe to the Sacramento County border), SLT, and “The Divide” (Georgetown, Cool, Coloma, Garden Valley). It is estimated that 200-300 HIV-positive people reside in El Dorado County’s growing total population of about 170,000 people. Caseload demographics from the SFAF indicate that their EDC caseload is approximately 75 percent MSM, primarily white and middle-aged, with some Latino MSM (mostly in SLT); the remaining 25 percent are heterosexual men and women (mostly men).

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Scope of Work – Year 2
July 1, 2005 to June 30, 2005

d. Key Activities:

Promotion of Program: Promotional activities will be conducted by the El Dorado County HEC.

d.1 L.I.F.E. Online will be promoted and advertised via email lists, and by brochures and palm cards located in medical and health dept offices where HIV-positive folks receive medical services.

Promotional materials will be distributed in the geographical areas described above; additionally, it is proposed that promotional materials and activities be conducted in Sacramento at CARES, given the likely presence there of HIV-positive individuals actually residing in our target rural counties.

d.2 The HEC will coordinate with SFAF Service Coordinators, CARES, and SGMN to link interested clients/patients with "L.I.F.E. Online".

d.3 Program promotion and recruitment will be primarily conducted through ongoing associations with the service coordinators of SFAF and CARES, who maintain confidential relationships with individuals unknown to the Health Department. The agency service coordinators will contact appropriate HIV-positive clients of their agencies by phone, email, agency newsletters, and direct mailings of L.I.F.E. information.

d.4 Local media, including local newspapers and radio, will be contacted to do feature stories about L.I.F.E., with information on how to become involved.

d.5 Additional social marketing of the L.I.F.E. Online program will be conducted through SGMN website and their monthly newsletter, which reaches over 300 gay men in EDC. Referrals will be made to the LIFE webmaster (who begins work Oct.1 2005).

Implement Program:

d.6 Design and implement a specialized "prevention with positives" add-on to the existing L.I.F.E. website (see www.shanti.org). This portion of the website would be password protected, and available only to those who register via the password provided to them by a case manager or other service provider in EDC. The "L.I.F.E. in the Country" section of the website will be designed as an interactive health management website, where clients can complete questionnaires and surveys online, and then receive their personal results.

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Scope of Work – Year 2
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Each will receive their own L.I.F.E. Cofactor Profile that indicates issues that are strong and supportive of health and those that are weak and need to be improved. The website will not in any way ask for or utilize any names.

All access is accomplished via a unique password ID system, where each time they sign on they are asked a series of questions that only they know.

d.7 Provide the L.I.F.E. Online members with an online community, in which a member could go online, access the L.I.F.E. Online Community, and talk with other HIV positive individuals in El Dorado County, California cities, and also L.I.F.E. members in cities nationwide (St Louis, Kansas City, Miami, Miami Beach, Ft Lauderdale, and Boston).

d.8 Provide for each L.I.F.E. Online member a graphic profile showing their strong and weak points with respect to cofactors, and provide them with guidance on how they could improve their cofactor performance and support their immune system and health;

d.9 Train the EDC Health Education Coordinator to be a certified L.I.F.E. Health Counselor in order to provide L.I.F.E. individual health counseling sessions for those online members who decide to augment their experience with health counseling.

d.10 Provide interested HIV positive individuals with L.I.F.E. health counseling – to be conducted by the EDC Health Education Coordinator.

e. Evaluation:

e.1 The number of contacts made to all self identified gay/MSM clients of the SFAF and CARES staff by phone, email, agency newsletters, and direct mailings will be reported to the HEC monthly. The LIFE webmaster will keep track of those referrals who actually register for the program.

e.2 The number of L.I.F.E. Online members who register from El Dorado County can be counted because within the unique ID system there is a code for their location (e.g., one of the questions will be “where are you taking the L.I.F.E. Online Program?” One of the drop-down answers will be “El Dorado County”.

e.3 The number of L.I.F.E. Online members who, after participation in L.I.F.E. Online, decide to continue by registering for face-to-face L.I.F.E. health counseling and/or other EDC HIV services.

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Scope of Work – Year 2
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e.4 Conduct outcome data collection prior to beginning online services and then conduct again at 3, 6 and 12 months, in order to evaluate program effectiveness. These L.I.F.E. outcome measures have already been developed, and can be loaded into the “L.I.F.E. in the Country” portion of the website.

Outcome measures include psychological functioning, risk behavior, adherence to health routines (including medication protocols), and HIV symptoms and physical health.

Exhibit 5, A02

Budget

Year 2

July 1, 2005 to June 30, 2006

	<u>Original Budget</u>	<u>This Amendment</u>	<u>Amended Total</u>
A. PERSONNEL	\$19,280	\$42,120	\$61,400
B. OPERATING EXPENSES	\$1,269	\$12,541	\$13,810
C. CAPITAL EXPENDITURES	\$0	\$2,000	\$2,000
D. OTHER COSTS	\$1,800	\$44,000	\$45,800
E. INDIRECT COSTS	\$1,928	\$4,212	\$6,140
TOTAL BUDGET	\$24,277	\$104,873	\$129,150



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CONTRACT NUMBER: 04-35346, A01

PROGRAM: HIV Prevention Program

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1. Provision 2 (MAXIMUM AMOUNT PAYABLE) on the face of the original Memorandum of Understanding is amended to read as follows:

The maximum amount payable by the STATE to the CONTRACTOR under this MOU shall not exceed the following:

- A. \$ 65,382 for the budget period of July 1, 2004 to June 30, 2005.
 - B. ~~\$ 65,382~~ \$ 24,277 for the budget period of July 1, 2005 to June 30, 2006.
 - C. ~~\$ 65,382~~ \$ 24,277 for the budget period of July 1, 2006 to June 30, 2007.
 - D. ~~\$196,146~~ \$113,936 for the entire MOU term.
2. Provision 3 (MOU EXHIBITS) on the face of the original Memorandum of Understanding is amended to add Exhibit 2, A01, entitled "Scope of Work," Year 2 consisting of 14 pages and Exhibit 3, A01, entitled "Scope of Work," Year 3 consisting of 14 pages. All further references to Exhibit 2 and Exhibit 3 in the body of this agreement or any attachments thereto shall be deemed to read Exhibit 2, A01 and Exhibit 3, A01.
 3. Provision 3 (MOU EXHIBITS) on the face of the original Memorandum of Understanding is amended to add Exhibit 5, A01, entitled "Budget," Year 2 consisting of one page and Exhibit 6, A01, entitled "Budget," Year 3 consisting of one page. All further references to Exhibit 5 and Exhibit 6 in the body of this agreement or any attachments thereto shall be deemed to read Exhibit 5, A01 and Exhibit 6, A01.
 4. The effective date of this amendment shall be July 1, 2005.
 5. All other terms and conditions shall remain the same.

STATE OF CALIFORNIA:

Chris Nelson

Signature

Michael Montgomery, Chief
Office of AIDS

Date

5/16/05

COUNTY OF EL DORADO:

Charlie Paine

Signature

Charlie Paine, Chairman
El Dorado County Board of Supervisors

Printed/Typed Name and Title

Date

5-11-05

ATTEST: CINDY KECK, Clerk
of the Board of Supervisors

By *[Signature]*
DEPUTY 5-11-05

Exhibit 2, A01
Scope of Work – Year 2
July 1, 2005 to June 30, 2006

I. CLIENT SERVICES

GOAL #1: The AIDS Education and Prevention Program (E&P) staff will continue with over sixteen years of efforts to help men who have sex with men (MSM), whether gay/bisexual identified or not, to reduce social isolation and improve their access to health care in this large rural and generally gay unfriendly county. It is generally accepted that continued isolation leads to depression and increased high-risk behavior that may result in increased HIV and sexually transmitted infections. Our goal is to assist 100 to 200 El Dorado County (EDC) gay/bisexual men and other MSM to connect socially and through recreational activities on the Western Slope and South Lake Tahoe (SLT).

Objective #1A: By June 30, 2006, the Health Education Coordinator (HEC) will assist ~~two~~ one volunteer editor to publish ~~two~~ one newsletter and ~~increase their~~ continue distribution from ~~approximately~~ to 200 - 300 gay identified men and other MSM in and around EDC.

Objective #1B: The HEC will communicate weekly with the webmaster to support resources and prevention education to be included in the expansion of the Sierra Gay Men's Network (SGMN) through the internet. This cyber targeted prevention activity is effective for many closeted local MSM of various ages and will include continued networking with organizations in surrounding rural counties, Sacramento, and Reno.

Intervention Description for Objective #1A and #1B:

a. **Summary:** ~~Elevation 6250 FT is a tolerance and diversity focused monthly newsletter distributed in and around SLT.~~ The SGMN monthly newsletter is targeted to gay men living in and around EDC. SGMN's newsletter is distributed in both hardcopy and via the SGMN web site. The web site, www.sgmnet.org, has many connections to various search engines, resource links, and has received over 50,000 hits and 2,500 visits between November, 2003 and April, 2004, according to the web statistics.

b. **Type of Intervention:** Health Communication/Public Information

c. **Risk Population/Target Size:** Approximately 300 white and Latino gay/bisexual/MSM

d. **Key Activities:**

d.1 HEC and volunteers will continue to maintain and expand contacts with other rural targeted prevention workers. Through networking and combined collaborative efforts, new and improved strategies will be encouraged and implemented to encourage safer sex and harm reduction messages through newsletters, chat rooms, and emails with men cruising the web for sex and for relationships.

d.2 El Dorado County Public Health Department (EDCPHD), Health Promotions Division (HP), Alcohol/Drug Programs Division (ADP) will continue to financially support the production and distribution of the SGMN and

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~~Elevation 6250 FT~~ newsletter, SGMN web site, message boards, chat rooms, and other future e-based or printed communications to gay/bisexual/MSM in EDC. Staff will assist in providing education, prevention information, and linkages, but will not assume editorial privilege.

d.3 ~~HP staff~~ **HEC** will use these mediums to invite comments and direction to further E&P targeted prevention activities for MSM, as well as recruit new members, and encourage participation in local implementation group (LIG) meetings.

d.4 Upcoming gatherings to reduce isolation for gay/bisexual/MSM will be advertised via newsletters, web site, chat rooms, message boards, and phone calls utilizing key contact people.

e. Evaluation:

e.1 Individuals choose to be added or retained on the mailing list after receiving complimentary issues of the newsletters. If the subscription list remains the same or increases, this would be a measure of success.

e.2 Documented increased hits on the web site indicates growing awareness of its existence and value to web surfers.

e.3 Responses to the editors by email, letters, phone calls, and face-to-face conversations, indicate that individuals are reading the newsletters and visiting the web site.

e.4 People may (or may not) show up for the gatherings to reduce isolation (especially depending on who's coming or if it's Gay Pride month in the big cities). If the number of people attending isolation reduction events remain constant or increases, the event is likely to continue over time. This would be considered a success.

e.5 The newsletters are supported at the rate of \$75.00 per month for each newsletter for health advertising in each issue. The web site, www.sgmn.org, is supported through similar URL advertising links to the EDCPHD web site. HEC staff time for research, referrals, phone calls, emails, and face-to-face visitation occurs weekly and varies by issue and deadlines.

e.6 Various newsletters and hotlines targeting MSM in EDC have come and gone over the last decade. The current newsletters will only be sustained if the readership approves and encourages them. The last year has shown great success as measured by increased distribution and web statistics and the number of hits on www.sgmn.org.

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Scope of Work – Year 2
July 1, 2005 to June 30, 2006

Objective #1C: Health Needs of Gay/MSM

The HEC and ~~Community Services Program Assistant (CSPA)~~ will increase the marketing of EDCPHD clinical services to uninsured gay/MSM to meet more of their health needs. This includes hepatitis A virus and hepatitis B virus inoculations, HIV prevention counseling and testing, STD exams, smoking cessation, education and referrals, and condom/lube distribution to increase the number of gay/MSM from ten to 25 who receive medical services through the EDCPHD Placerville and SLT clinics.

Intervention Description for Objective #1C:

- a. **Summary:** This intervention is tied to continued and expanded high-risk behavior change campaign in both the newsletters and the web site, and includes advertising of Health Department (HD) services, with direct URL links to the EDCPHD web site and printed advertisements of HD services and phone numbers. Key informants, and opinion leaders, relay needs and complaints to E&P staff, who then have face-to-face interviews with clinic staff to improve and increase services. On-going provider monitoring helps to ensure that appropriate, high quality services are being delivered and course corrections implemented.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** 20 to 40 white and Latino Gay/MSM, especially those who are uninsured
- d. **Key Activities:**
 - d.1 HEC and volunteers will continue to create monthly advertisements and articles related to gay men's health issues in ~~Elevation6250FT~~ and SGMN newsletter and web site.
 - d.2 ~~HP-staff~~ **HEC** will continue with one-on-one, as well as group, discussions with local MSM regarding their medical needs. HEC will meet informally with clinic staff periodically to access their experiences and needs in working with gay male patients. Verbal and printed information will be given to clinicians.
 - d.3 ~~HP-staff~~ **HEC** will continue informal monthly discussions with HD clinical staff to improve their understanding of gay lifestyles and attitudes in expectation of improving their comfort level in working with gay/MSM patients. If requested by staff, some local gay men have volunteered to talk with them during a scheduled staff meeting.
- e. **Evaluation:**

NOTE: There is no current way to track sexual orientation demographics through EDCPHD reporting, except through Office of AIDS HIV testing Client Information Forms report.

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e.1 Gay/MSM individuals will verbally report to ~~HP~~ **HD** staff or newsletter editors that they have accessed services at the EDCPHD as a result of reading about services through the newsletters, web site, and paid advertisements.

e.2 The HEC will continue to work closely with epidemiologists, laboratory, and clinical staff at EDCPHD, and Office of AIDS to note the following indicators of increased risk behaviors, especially unprotected sex:

1. Increased syphilis seroprevalence detected in men, especially MSM.
2. Increased HIV seroprevalence detected in men, especially MSM.

Objective #1D: ~~HP staff~~ **The HEC** will support the planning and advertising of local monthly gatherings to reduce isolation for gay/bisexual men at private and public places in EDC and surrounding counties to encourage new isolation reduction opportunities, increase communication, and reduce high-risk behavior. Staff and volunteers will assist in the advertising through the distribution of newsletters by mail, web site, hand delivery, emails, and personal invitations to increase MSM/gay/bisexual men's awareness of these isolation reduction events in and around EDC.

Intervention Description for Objective #1D:

- a. Summary:** Monthly potlucks are ~~regularly scheduled for second Saturdays~~ at various parks and homes in EDC, and are advertised through SGMN newsletters, web site, as well as Yahoo Groups. These events are social, and may include videos and discussions that will result in a reduction in high-risk behavior and provide an opportunity to engage in HIV harm reduction education.
- b. Type of Intervention:** Health Communication/Public Information
- c. Risk Population/Target Size:** Approximately 200 to 300 white and Latino Gay/MSM
- d. Key Activities:**
 - d.1** ~~HP staff~~ **The HEC** will help plan advertising and agendas for monthly isolation reduction gatherings by working with newsletter editors and other volunteers to write and distribute flyers, emails, and mailings. Condoms, condom key chains, and lubricants are supplied by staff for distribution to attendees by volunteers.
 - d.2** Other events, such as private screenings of the documentary video *The Gift*, will be discussed, planned, and advertised in newsletters and via the internet.
- e. Evaluation:**
 - e.1** The number of people that show up, interact, converse, have a good time, and bring friends will increase.

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Scope of Work – Year 2
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- e.2 People network, coordinate, and collectively plan more events, and the future events are well attended.

GOAL #2: Teaching Tolerance in conjunction with Gay Straight Alliance (GSA) and Parents, Families and Friends of Lesbians and Gays (PFLAG)

This goal is focused on ending sexual orientation discrimination on high school campuses in EDC. The EDCPHD HEC will continue six years of networking and collaborative efforts with the local PFLAG Placerville chapter, to educate EDC school staff and students about homophobia and tolerance for alternative lifestyles. There is a correlation between constant harassment regarding sexual identity and low self-esteem. People with low self-esteem do not care about the consequences of their behavior.

Objective# 2A: The HEC will continue to support the volunteer efforts of the Placerville PFLAG chapter, especially in their targeted prevention activities to Gay/Bisexual/Lesbian/Questioning (GBLQ) youth in EDC high schools. The HEC will meet with students at the local high school GSA and become involved in a partnership for tolerance education.

Intervention Description for Objective #2A:

- a. **Summary:** This objective is really about assisting EDC school districts' enforcement of California law AB 537 (Chapter 587, Statutes of 1999) by high school administrators and teachers. The goal is to reduce harassment and cease violence directed toward gay or perceived gay students. Success in this venture will be observed by reduced incidences of verbal name calling (i.e., fag, queer) on campus, and decreased reports of violence toward Gay/Bisexual/Lesbian/Queer/Questioning/Intersex (GBLQQI) youth and perceived gay students.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** GBLQQI Youth in all eight EDC high schools (frequently closeted; number unknown)
- d. **Key Activities:**
- d.1 The HEC will continue the following activities with PFLAG:
 - d.2 Maintain phone and personal contact with PFLAG members.
 - d.3 Go to monthly PFLAG meetings, including Executive Committee meetings.
 - d.4 Give individuals appropriate referrals to PFLAG volunteers.
 - d.5 Advertise PFLAG services, through school presentations and support for more interactive web site development and, as funding permits, assist in purchasing educational materials.

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PFLAG Volunteers will:

d.6 Monitor the Placerville PFLAG hotline (621-6700).

d.7 The chapter plans to continue to have an information booth at all the EDC high schools that host Senior Health Days.

d.8 PFLAG volunteers will continue their advocacy for GBLQ youth within EDC high schools by meeting with counselors and administrators.

d.9 HEC, PFLAG, and other gay volunteers will support the three GSA chapters on local high school campuses by attending meetings, serving as resources, talking with youth individually or in small groups.

d.10 Continue seeking gay local adult role models to meet with gay/bisexual/lesbian youth in order to reduce their sense of isolation and improve self-esteem and plans for the future.

d.11 Wherever possible, serve as (or recruit) advocates for youth who are suffering from emotional, verbal or physical abuse because they are gay or are perceived as being gay.

~~**d.12** PFLAG volunteers will continue their advocacy for GBLQ youth enrolled in EDC high schools by meeting with counselors and administrators.~~

e. Evaluation:

Success in this venture will be observed by:

e.1 Reduced incidences of verbal name calling (i.e., fag, queer) on campus.

e.2 Decreased reports of violence toward gay and perceived gay students. This will include review of individual school district reports and possible hate crime reports by EDC Sheriff's Department.

e.3 Increased number of students who report to GSA students, advisors; school counselors; and/or teachers, that they are out among their peers.

Objective #2B: Schedule performances of The Other Side Of The Closet in EDC high schools during school year 2005-06.

Intervention Description for Objective #2B:

a. Summary: Continue with five years of effort to bring the Youth Aware Troupe of the New Conservatory Theatre (NCT) of San Francisco to EDC to perform "The Other Side of the Closet" at new high school campuses. Group discussions between the audience and the actors follow each performance. Additional discussions may continue in the classrooms. Teachers are given lesson plans for follow-up discussions developed by NCT staff.

Exhibit 2, A01
Scope of Work – Year 2
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- b. Type of Intervention:** Health Communication/Public Information
- c. Risk Population/Target Size:** GBLQ youth and heterosexual youth in EDC high schools; 400 to 500 youth and school staff
- d. Key Activities:**
- d.1** Throughout the school year, the HEC will secure support from teachers, administrators, students, GSA chapters, local citizens, and local community based organizations (CBOs) to insure the success of multiple performances in October/November, 2005, of the NCT production of *The Other Side of the Closet* on various Western Slope high school campuses during the school day, as approved by the individual school principals. An information table will also be set up to disburse information on HIV/AIDS prevention/education. from PFLAG.
- d.2** The HEC and EDCPHD Public Information Officer will work with local newspapers to develop human interest stories about the difficulties gays experienced growing up in the closet. PFLAG will encourage local newspapers to do articles profiling successful individuals who are out, as well as gay partnerships and families.
- d.3** The HEC and volunteers will recruit gay and lesbian adults and youth to speak on a local radio talk show or to groups of school teachers about being gay, coming out, slurs, tolerance, etc.
- d.4** The HEC will advertise the production and recruit volunteers and donations through the EL6250ft and SGMN newsletter and web site. "Would you help young gay youth avoid what you experienced as a teenager?" is a theme that often brings older gays in to volunteer.
- e. Evaluation:**
- Success will be measured in the following ways:
- e.1** Two of four high school principals in the El Dorado Union High School District have agreed to have the play on campus during the 2005-2006 school year. These will be at least one daytime performance (with parent permission), or a voluntary attendance performance in the evening.
- e.2** Collect written comments from youth attending the performance. Publish these in local newspapers and newsletters.
- e.3** Encourage youth in GSA, or someone doing a senior project, to conduct a follow-up on their campus to assess the impact of the play after one to two months and again at the end of the school year. Did name calling, harassment, or beatings decrease?

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GOAL #3: Male And Female Incarcerated Population

Continue 16 years of cooperative and collaborative work with the EDC Sheriff's Department in the Placerville and SLT county jails doing HIV, hepatitis, and STD prevention education through the drug education program, Health Education Addiction Recovery Through Self-Responsibility (HEARTS). Also, work with the California Forensics Medical Group (CFMG) staff and correctional officers to conduct HIV prevention, counseling, and testing sessions with inmates who request it.

Objective #3A: On-going STD/HIV/Hepatitis Education, Referrals, and Testing

By June 30, 2006, 200 male and female EDC jail inmates enrolled in HEARTS will participate in STD, hepatitis, and HIV educational forums, and develop a personal plan to implement specific harm reduction techniques when they are on the outside. HIV prevention, counseling, and testing services will be offered to all inmates following group education classes.

Intervention Description for Objective #3A:

- a. **Summary:** Inmates volunteer, or are court mandated, to participate in the drug education program, HEARTS, which includes HIV/hepatitis/STD education every 12 weeks. The classes are separated by sex, and the class size varies from four to 16. The classes involve many questions and answers, discussions about street myths, harm reduction techniques, testing inside and out of incarceration, window period, risks with different kinds of sex, safer needle use, and personal plans after discharge. HIV-positive inmates are rarely seen in EDC jails and are usually in medical isolation by personal choice.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Incarcerated men and women, estimated at more than 90 percent substance users; Placerville Jail, Average Daily Log, 230 inmates; South Lake Tahoe Jail, Average 120 inmates
- d. **Key Activities:**
 - ~~d.1~~ ~~The bilingual CSPA will continue meeting with Spanish-speaking inmates in the SLT jail. Many incarcerated Latinos express fears about HIV testing in jail, so they are referred to the clinic when they are released. The CSPA offers private and individual counseling to Spanish named inmates in the SLT facility because they are not housed by which language they speak.~~
 - d.21 The HEC meets bi-weekly with English speaking inmates in the Placerville jail who request individual HIV counseling and testing.
 - d.32 Referrals for STD exams are made to the CFMG staff based on active symptoms, and/or to the local Health Department clinicians, and the appropriate service providers upon release.

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d.43 The HEC is now doing HIV education through HEARTS in the women's pod in the Placerville facility instead of the classroom. All the women in the pod are invited to join, and this offer has doubled the attendance. The Inmate Services Officer has been strongly supportive of this new venture, and frequently sits in during the class. In educational sessions and discussions, their drug and alcohol use is addressed, especially their methamphetamine use (smoking, snorting, and/or injection), and practical harm reduction techniques. Hepatitis education remains important due to their reported and/or projected high incidence of hepatitis C virus. Referrals will be made to EDCPHD and other clinics for STD and women's health services, as well as hepatitis B inoculation.

d.54 The HEARTS program in the Placerville jail is taught by a counselor from Progress House; in the SLT jail, the program is coordinated by Sierra Recovery Center. The HEC will continue to assist the two HEARTS Drug Education Program Coordinators in the Placerville and SLT facilities by conducting quarterly interactive AIDS, STD, and hepatitis education sessions with men and women during each 12 week cycle of education.

d.65 The HEC will continue to support HEARTS graduates as they continue in both inpatient and outpatient treatment at Progress House and Sierra Recovery Center. The HEC may continue these relationships through work at the Alcohol and Other Drugs CBOs for up to a year or more.

d.76 Inmates are referred to their local health departments for STD workups through the PACT (Family Planning Access Care Treatment) program, which will then qualify them for hepatitis B virus inoculations. Through a new program at the EDCPHD, any adult can request hepatitis A virus inoculation for a fee of \$26.00. HEC will continue to press for hepatitis C virus testing at the EDCPHD.

e. Evaluation:

e.1 Numbers of inmates educated.

e.2 Feedback from inmates and drug counselor(s).

GOAL #4: Targeted Prevention Activities To Latino Youth And Adults

~~The goal is to provide basic education about sexuality, HIV and other diseases, and self-protection in schools, English as a Second Language (ESL) classes, and other places where Spanish-speaking people gather. Many Spanish-speaking people in SLT have emigrated from Mexico and have limited education (sixth to eighth grade). This target group is in need of basic information about human biology, anatomy, sexuality, and reproduction, as well as information about STDs. Cultural and religious beliefs are often strong and must be respected as information about SIDA (Spanish for AIDS) is taught. Traditionally, the men have all the authoritative power and the women must not speak about sex and health related concerns. Issues of empowerment and harm reduction techniques are challenging subject to discuss.~~

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Intervention Description for Objective #4A:

- a. Summary:** ~~By June 30, 2006, the bilingual CSPA will meet with 100 to 150 Spanish-speaking people in SLT through Women, Infants and Children (WIC), ESL classes, and informal street targeted prevention activities to teach about SIDA and how to protect themselves from STDs, hepatitis, and HIV infections. Referrals to EDCPHD will be made as needed.~~
- b. Types of Intervention:** ~~Group Level Intervention~~
- c. Risk Population/Target Size:** ~~New immigrant Spanish-speaking youth and adults in SLT (Total population estimated 10,000 to 12,000 Hispanic residents of South Shore)~~
- d. Key Activities:**
- d.1** ~~The HIV CSPA will visit South Tahoe Middle School and South Tahoe High School ESL classes each semester to do presentations on family planning, HIV, STDs, and hepatitis.~~
- d.2** ~~Targeted prevention activities to adults enrolled in ESL classes each semester at Lake Tahoe Community College and Family Resource Center which will include STD, HIV, and hepatitis education, prevention, and testing, as well as referrals to the clinic for birth control, inoculations, and other services. These students will be encouraged to talk to their friends and family, and refer at-risk individuals for HIV testing at Family Resource Center, EDCPHD SLT clinic, or elsewhere by private arrangement with the CSPA.~~
- d.3** ~~The CSPA will meet quarterly with other on-going groups at Family Resource Center including ESL classes, Mothers' Support group, computer classes, and present information about SIDA, answer questions about sexuality, STDs, and refer to the local health department services.~~
- d.4** ~~The CSPA will meet quarterly with Spanish-speaking parents enrolled in SLT WIC, present information about SIDA, and answer questions about sexuality, STDs, and health department services.~~
- d.5** ~~The CSPA will provide HIV information and referral services at ski resort health and hiring fairs during the ski season. As available, the CSPA will provide an interactive information booth at the following annual events: South Tahoe High School Senior Health Fair, Barton Hospital Health Fair, and casino employee health fairs.~~
- e. Evaluation:**
- e.1** ~~Increased numbers for HIV testing of Hispanic SLT residents.~~
- e.2** ~~Increased numbers of Hispanic patients at EDCPHD SLT.~~

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~~e.3 — No increase in new HIV/STD infections of Hispanic SLT residents.~~

~~e.4 — Increased numbers attending the information presentations.~~

GOAL # 54: Prevention With Positives

The HEC and CSPA will coordinate with Sierra Foothills AIDS Foundation (SFAF) Service Coordinators, **the Jail Inmate Services Officers, and residential drug treatment providers** to work with HIV-positive individuals and couples (~~and possibly small groups~~) to help them develop plans for reducing their risks of infecting their sexual and needle sharing partners. The focus will be on helping individuals decide how to make incremental changes in their thinking and behavior in order to minimize the spread of HIV.

Objective #54A: By June 30, 2006, the HEC and CSPA will meet and work with SFAF's Service Coordinators, **the Jail Inmate Services Officers, and residential drug treatment providers** to develop plans for ~~45 to 20~~ **5-10** HIV-positive clients to help them develop or improve their risk reduction plans in order to decrease the chance of infecting others. The focus will be on communication, commitment, accessing local resources, and the impact of drugs, alcohol, and depression on those plans.

Intervention Description for Objective #54A:

a. **Summary:** Working in a large rural community, where most gays and HIV-people remain closeted, presents different challenges than the well funded Best Practices program developed in metropolitan areas. Many of the HIV-positive people in EDC are isolated, depressed, closed to others talking to them about HIV, and distrustful of government funded personnel. Therefore, most of this work will be conducted through the HEC and CSPA's long association with the Service Coordinators of SFAF, **the Jail Inmate Services Officers, and residential drug treatment providers**. The Service Coordinators meet regularly with about 80 EDC clients who are living with HIV. Newly discovered HIV-positive residents are immediately referred to SFAF Service Coordinators. The Service Coordinators are always working with clients on personalized risk reduction goals. Both Service Coordinators have been trained to use client centered counseling methods. Both Service Coordinators regularly work with clients on harm reduction techniques, review of barriers and contingencies, and identifying supporters for helping them decide how to make incremental changes in their behavior in order to reduce the risks of infecting their partners. Due to confidentiality limitations, HD staff cannot meet with these clients unless the clients request to do so. ~~To date, no clients have responded to multiple offers to meet for any reason, either individually or in groups.~~

b. **Types of Intervention:** Individual Level Intervention
(We may not be able to document this, due to Confidentiality, and the already high number of clients and forms that Service Coordinators must manage)

c. **Risk Population/Target Size:** Estimate 100 HIV-positive people in EDC
Primarily white, middle aged, MSM; some MSM Latino, most in SLT

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d. **Key Activities:**

d.1 While respecting issues of confidentiality, the HEC and CSPA will continue to meet or talk with the SFAF Ryan White CARE Service Coordinators on a ~~weekly or~~ monthly basis.

~~**d.2** Some new relationships with the HEC may be developed through HIV-positive people volunteering to attend Ryan White Services Committee/Local Implementation Group (LIG) meetings. Historically, very few SFAF clients attend.~~

d.32 Continue notification of regional HIV services and education planning meetings by select confidential mailing lists (including mailings to clients by SFAF Service Coordinators), email, newsletters, word of mouth, and face-to-face encounters.

d.43 HIV-positive individuals and discordant couples have historically declined all offers to meet by phone or in person with staff from the AIDS E&P team to discuss their beliefs, feelings, addictions, and behaviors that put their sex partners and/or needle-sharing partners at risk for HIV infection. This harm reduction effort is continued monthly by the SFAF Service Coordinators, and will be supported, as needed, by AIDS E&P staff.

d.54 The AIDS E&P staff will work with the staffs of SFAF, Progress House, El Dorado Council on Alcoholism Lifeskills Program, Sierra Resource Center, Gates Recovery, and the jail correctional officers and juvenile hall counselors, as well as the CFMG medical staff, to meet HIV-positive clients and inmates.

d.65 The AIDS E&P staff and the SFAF Service Coordinators are all trained HIV prevention counselors. ~~HIV testing is conducted at SFAF offices, among many other alternative sites.~~

d.76 The HEC and CSPA will assist with HIV testing and counseling of drug treatment clients and staff, as well as inmates enrolled in the HEARTS drug treatment program, and inmates in the general population. This on site testing will provide an opportunity to discover unknown HIV-positive people. All newly diagnosed people will be connected with SFAF Service Coordinators in SLT and Placerville for complete assessments and appropriate referrals while they are still in jail or drug treatment.

d.87 The HEC will work with SFAF Service Coordinators, as needed, in conducting support groups for newly diagnosed clients, or other groups that may be created from expressed need or interest of other clients.

~~**d.9** A local HIV-positive man has recently attempted to start a group, and found only three people interested. The HEC will work with him to specifically~~

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~~target more HIV-positive individuals and advertise activities that may be attractive to them. Their transportation needs will also be addressed.~~

NOTE: DRUG TREATMENT PROGRAMS EDCPHD AIDS E&P staff have been collaborating with the court mandated drug treatment and voluntary outpatient programs for over 16 years, and have excellent relationships with the staff of each agency. The AIDS E&P staff has discontinued all outpatient classes, but will continue working with residential clients and staff at Progress House and Sierra Recovery Center under a mix of Substance Abuse Prevention and Treatment Basic Training Grant (SABTBG) funding, HIV Prevention Counseling and Testing, and AIDS E&P. Staff of all EDC drug treatment programs will be updated on HIV, STD, and hepatitis at their request. The HEC coordinates and instructs HIV Prevention Counseling and Testing classes for drug treatment counselors. ~~Tahoe Youth and Family Services is resuming HIV testing of clients, and the new staff will be trained, supplied with materials for testing, and supported in working with difficult or HIV-positive clients.~~

GOAL #65: School Targeted Prevention Activities

By June 30, 2006, approximately 300 to 400 EDC youth will participate in interactive expanded HIV education. This will include encouraging STD and HIV testing, seeking effective birth control methods as appropriate, developing buddy systems, safer decision making especially when loaded, choosing sexual partners carefully, being abstinent, and realistic harm reduction techniques.

a. Key Activities:

~~a.1~~ Continue participation with the local CBOs, at the Senior Health Fair at South Tahoe High School in February, 2006, and Black Oak Mine School District, Golden Sierra High School, with an information table, handouts, and interactive activities. PFLAG and volunteers from the two Hepatitis C support groups also participate, as well as other HD staff.

~~a.2~~ Develop a Senior Health Fair at the other schools within the El Dorado Union High School District (4 high schools) as support within the schools and as time allows. Continue to talk to local CBOs, private service providers, health committees, school nurses, and health teachers in other high schools about scheduling Health Fairs during the second semester of the school year as a refresher for graduating seniors.

~~a.3~~ Conduct HIV/STD/hepatitis education each semester in Human Sexuality classes at Folsom Lake College campus, El Dorado Center in Placerville and the Folsom campus, and Lake Tahoe Community College in SLT.

~~a.4~~ As possible, assist at educational booths on various college campuses at annual events, such as Day of Diversity, World AIDS Day, Valentine's Day, etc.

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II. ~~OTHER SERVICES~~

~~GOAL:~~ Community planning; to increase the effectiveness of HIV prevention activities in El Dorado County.

~~Objective:~~ By June 30, 2006, the EDC health jurisdiction will conduct quarterly regional implementation group meetings with Placer and Nevada counties to develop, review, and assess the HIV education/prevention activities.

~~a. Key Activities:~~

~~a.1~~ — Announcements of the quarterly meetings will be advertised through SFAF mailings to clients by Case Managers, SGMN newsletters and web site, EL6250FT newsletter, emails, message boards, word of mouth, and general mailings.

~~a.2~~ — The location of each meeting will rotate from city to city to enable more consumers to attend.

~~a.3~~ — Opinions of concerned EDC citizens is solicited at local drug treatment programs, jails, high schools, especially GSA clubs, PFLAG meetings, HCV Task Force meetings, Perinatal Council meetings, HD staff meetings, and via key informants and opinion leaders to assist the EDC program representatives in providing the best services possible.

~~a.4~~ — Member recruitment is on going, mail and e-mail lists are expanded at each quarterly meeting as new community members attend.

~~a.5~~ — People who cannot attend meetings are asked to phone or email their ideas and opinions to others who will speak for them at the meetings.

~~b. Evaluation:~~ Member and guest sign-in sheets will be maintained, as well as minutes of the meetings. Email lists will be updated after each meeting. The overall effectiveness of the community planning process will be evaluated by the number of members attending the Spring quarterly meeting.

NOTE: The AIDS Education and Prevention Program (E&P) operates within the Health Promotions Division (HP) Alcohol/Drug Programs Division (ADP) of the El Dorado County Public Health Department (EDCPHD). There are no subcontractors.

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I. CLIENT SERVICES

GOAL #1: The AIDS Education and Prevention Program (E&P) staff will continue with over sixteen years of efforts to help men who have sex with men (MSM), whether gay/bisexual identified or not, to reduce social isolation and improve their access to health care in this large rural and generally gay unfriendly county. It is generally accepted that continued isolation leads to depression and increased high-risk behavior that may result in increased HIV and sexually transmitted infections. Our goal is to assist 100 to 200 El Dorado County (EDC) gay/bisexual men and other MSM to connect socially and through recreational activities on the Western Slope and South Lake Tahoe (SLT).

Objective #1A: By June 30, 2007, the Health Education Coordinator (HEC) will assist ~~two~~ volunteer editors to publish ~~two~~ one newsletters and ~~increase their~~ continue distribution from ~~approximately to~~ 200 - 300 gay identified men and other MSM in and around EDC.

Objective #1B: The HEC will communicate weekly with the webmaster to support resources and prevention education to be included in the expansion of the Sierra Gay Men's Network (SGMN) through the internet. This cyber targeted prevention activity is effective for many closeted local MSM of various ages and will include continued networking with organizations in surrounding rural counties, Sacramento, and Reno.

Intervention Description for Objective #1A and #1B:

a. **Summary:** ~~Elevation 6250FT is a tolerance and diversity focused monthly newsletter distributed in and around SLT.~~ The SGMN monthly newsletter is targeted to gay men living in and around EDC. SGMN's newsletter is distributed in both hardcopy and via the SGMN web site. The web site, www.sgmnet.org, has many connections to various search engines, resource links, and has received over 50,000 hits and 2,500 visits between November, 2003 and April, 2004, according to the web statistics.

b. **Type of Intervention:** Health Communication/Public Information

c. **Risk Population/Target Size:** Approximately 300 white and Latino gay/bisexual/MSM

d. **Key Activities:**

d.1 HEC and volunteers will continue to maintain and expand contacts with other rural targeted prevention workers. Through networking and combined collaborative efforts, new and improved strategies will be encouraged and implemented to encourage safer sex and harm reduction messages through newsletters, chat rooms, and emails with men cruising the web for sex and for relationships.

d.2 El Dorado County Public Health Department (EDCPHD), Health Promotions Division (HP) Alcohol/Drug Programs Division (ADP), will continue to financially support the production and distribution of the SGMN and

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Elevation6250FT newsletters, SGMN web site, message boards, chat rooms, and other future e-based or printed communications to gay/bisexual/MSM in EDC. Staff will assist in providing education, prevention information, and linkages, but will not assume editorial privilege.

d.3 HP staff HEC will use these mediums to invite comments and direction to further E&P targeted prevention activities for MSM, as well as recruit new members, and encourage participation in local implementation group (LIG) meetings.

d.4 Upcoming gatherings to reduce isolation for gay/bisexual/MSM will be advertised via newsletters, web site, chat rooms, message boards, and phone calls utilizing key contact people.

e. Evaluation:

e.1 Individuals choose to be added or retained on the mailing list after receiving complimentary issues of the newsletters. If the subscription list remains the same or increases, this would be a measure of success.

e.2 Documented increased hits on the web site indicates growing awareness of its existence and value to web surfers.

e.3 Responses to the editors by email, letters, phone calls, and face-to-face conversations, indicate that individuals are reading the newsletters and visiting the web site.

e.4 People may (or may not) show up for the gatherings to reduce isolation (especially depending on who's coming or it's Gay Pride month in the big cities). If the number of people attending isolation reduction events remain constant or increases, the event is likely to continue over time. This would be considered a success.

e.5 The newsletters are supported at the rate of \$75.00 per month for each newsletter for health advertising in each issue. The web site, www.sgm.org, is supported through similar URL advertising links to the EDCPHD web site. HEC staff time for research, referrals, phone calls, emails, and face-to-face visitation occurs weekly and varies by issue and deadlines.

e.6 Various newsletters and hotlines targeting MSM in EDC have come and gone over the last decade. The current newsletters will only be sustained if the readership approves and encourages them. The last year has shown great success as measured by increased distribution and web statistics and the number of hits on www.sgm.org.

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Objective #1C: Health Needs of Gay/MSM

The HEC and ~~Community Services Program Assistant (CSPA)~~ will increase the marketing of EDCPHD clinical services to uninsured gay/MSM to meet more of their health needs. This includes hepatitis A virus and hepatitis B virus inoculations, HIV prevention counseling and testing, STD exams, smoking cessation, education and referrals, and condom/lube distribution to increase the number of gay/MSM from ten to 25 who receive medical services through the EDCPHD Placerville and SLT clinics.

Intervention Description for Objective #1C:

- a. **Summary:** This intervention is tied to continued and expanded high-risk behavior change campaign in both the newsletters and the web site, and includes advertising of Health Department (HD) services, with direct URL links to the EDCPHD web site and printed advertisements of HD services and phone numbers. Key informants, and opinion leaders, relay needs and complaints to E&P staff, who then have face-to-face interviews with clinic staff to improve and increase services. On-going provider monitoring helps to ensure that appropriate, high quality services are being delivered and course corrections implemented.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** 20 to 40 white and Latino Gay/MSM, especially those who are uninsured
- d. **Key Activities:**
 - d.1 HEC and volunteers will continue to create monthly advertisements and articles related to gay men's health issues in ~~Elevation6250FT~~ and SGMN newsletters and web site.
 - d.2 ~~HP staff~~ HEC will continue with one-on-one, as well as group, discussions with local MSM regarding their medical needs. HEC will meet informally with clinic staff periodically to access their experiences and needs in working with gay male patients. Verbal and printed information will be given to clinicians.
 - d.3 ~~HP staff~~ HEC will continue informal monthly discussions with HD clinical staff to improve their understanding of gay lifestyles and attitudes in expectation of improving their comfort level in working with gay/MSM patients. If requested by staff, some local gay men have volunteered to talk with them during a scheduled staff meeting.
- e. **Evaluation:**

NOTE: There is no current way to track sexual orientation demographics through EDCPHD reporting, except through Office of AIDS HIV testing Client Information Forms report.

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- e.1 Gay/MSM individuals will verbally report to HP HD staff or newsletter editors that they have accessed services at the EDCPHD as a result of reading about services through the newsletters, web site, and paid advertisements.
- e.2 The HEC will continue to work closely with epidemiologists, laboratory, and clinical staff at EDCPHD, and Office of AIDS to note the following indicators of increased risk behaviors, especially unprotected sex:
 - 1. Increased syphilis seroprevalence detected in men, especially MSM.
 - 2. Increased HIV seroprevalence detected in men, especially MSM.

Objective #1D: ~~HP staff~~ HEC will support the planning and advertising of local monthly gatherings to reduce isolation for gay/bisexual men at private and public places in EDC and surrounding counties to encourage new isolation reduction opportunities, increase communication, and reduce high-risk behavior. Staff and volunteers will assist in the advertising through the distribution of newsletters by mail, web site, hand delivery, emails, and personal invitations to increase MSM/gay/bisexual men's awareness of these isolation reduction events in and around EDC.

Intervention Description for Objective #1D:

- a. **Summary:** Monthly potlucks are ~~regularly scheduled for second Saturdays~~ at various parks and homes in EDC, and are advertised through SGMN newsletters, web site, as well as Yahoo Groups. These events are social, and may include videos and discussions that will result in a reduction in high-risk behavior and provide an opportunity to engage in HIV harm reduction education.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Approximately 200 to 300 white and Latino Gay/MSM
- d. **Key Activities:**
 - d.1 ~~HP staff~~ HEC will help plan advertising and agendas for monthly isolation reduction gatherings by working with newsletter editors and other volunteers to write and distribute flyers, emails, and mailings. Condoms, condom key chains, and lubricants are supplied by staff for distribution to attendees by volunteers.
 - d.2 Other events, such as private screenings of the documentary video *The Gift*, will be discussed, planned, and advertised in newsletters and via the internet.
- e. **Evaluation:**
 - e.1 The number of people that show up, interact, converse, have a good time, and bring friends will increase.

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- e.2 People network, coordinate, and collectively plan more events, and the future events are well attended.

GOAL #2: Teaching Tolerance in conjunction with Gay Straight Alliance (GSA) and Parents, Families and Friends of Lesbians and Gays (PFLAG)

This goal is focused on ending sexual orientation discrimination on high school campuses in EDC. The EDCPHD HEC will continue six years of networking and collaborative efforts with the local PFLAG, Placerville chapter, to educate EDC school staff and students about homophobia and tolerance for alternative lifestyles. There is a correlation between constant harassment regarding sexual identity and low self-esteem. People with low self-esteem do not care about the consequences of their behavior.

Objective# 2A: The HEC will continue to support the volunteer efforts of the Placerville PFLAG chapter, especially in their targeted prevention activities to Gay/Bisexual/Lesbian/Questioning (GBLQ) youth in EDC high schools. The HEC will meet with students at the local high school GSA and become involved in a partnership for tolerance education.

Intervention Description for Objective #2A:

- a. **Summary:** This objective is really about assisting EDC school districts' enforcement of California law AB 537 (Chapter 587, Statutes of 1999) by high school administrators and teachers. The goal is to reduce harassment and cease violence directed toward gay or perceived gay students. Success in this venture will be observed by reduced incidences of verbal name calling (i.e., fag, queer) on campus, and decreased reports of violence toward Gay/Bisexual/Lesbian/Queer/Questioning/Intersex (GBLQQI) youth and perceived gay students.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** GBLQQI Youth in all eight EDC high schools (frequently closeted; number unknown)
- d. **Key Activities:**
- d.1 The HEC will continue the following activities with PFLAG:
 - d.2 Maintain phone and personal contact with PFLAG members.
 - d.3 Go to monthly PFLAG meetings, including Executive Committee meetings.
 - d.4 Give individuals appropriate referrals to PFLAG volunteers.
 - d.5 Advertise PFLAG services, through school presentations and support for more interactive web site development and, as funding permits, assist in purchasing educational materials.

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PFLAG Volunteers will:

d.6 Monitor the Placerville PFLAG hotline (621-6700).

d.7 The chapter plans to continue to have an information booth at all the EDC high schools that host Senior Health Days.

d.8 PFLAG volunteers will continue their advocacy for GBLQ youth within EDC high schools by meeting with counselors and administrators.

d.9 HEC, PFLAG, and other gay volunteers will support the three GSA chapters on local high school campuses by attending meetings, serving as resources, talking with youth individually or in small groups.

d.10 Continue seeking gay local adult role models to meet with gay/bisexual/lesbian youth in order to reduce their sense of isolation and improve self-esteem and plans for the future.

d.11 Wherever possible, serve as (or recruit) advocates for youth who are suffering from emotional, verbal or physical abuse because they are gay or are perceived as being gay.

~~**d.12** PFLAG volunteers will continue their advocacy for GBLQ youth enrolled in EDC high schools by meeting with counselors and administrators.~~

e. Evaluation:

Success in this venture will be observed by:

e.1 Reduced incidences of verbal name calling (i.e., fag, queer) on campus.

e.2 Decreased reports of violence toward gay and perceived gay students. This will include review of individual school district reports and possible hate crime reports by EDC Sheriff's Department.

e.3 Increased number of students who report to GSA students, advisors; school counselors; and/or teachers, that they are out among their peers.

Objective #2B: Schedule performances of The Other Side Of The Closet in EDC high schools during school year 2006-05.

Intervention Description for Objective #2B:

a. Summary: Continue with four years of effort to bring the Youth Aware Troupe of the New Conservatory Theatre (NCT) of San Francisco to EDC to perform The Other Side of the Closet at new high school campuses. Group discussions between the audience and the actors follow each performance. Additional discussions may continue in the classrooms. Teachers are given lesson plans for follow-up discussions developed by NCT staff.

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- b. Type of Intervention:** Health Communication/Public Information
- c. Risk Population/Target Size:** GBLQ youth and heterosexual youth in EDC high schools; 400 to 500 youth and school staff
- d. Key Activities:**
- d.1** Throughout the school year, the HEC will secure support from teachers, administrators, students, GSA chapters, local citizens, and local community based organizations (CBOs) to insure the success of multiple performances in October/November, 2006, of the NCT production of *The Other Side of the Closet* on various Western Slope high school campuses during the school day, as approved by the individual school principals. An information table will also be set up to disburse information on ~~HIV/AIDS prevention/education~~ from PFLAG.
- d.2** The HEC and EDCPHD Public Information Officer will work with local newspapers to develop human interest stories about the difficulties gays experienced growing up in the closet. PFLAG will encourage local newspapers to do articles profiling successful individuals who are out, as well as gay partnerships and families.
- d.3** The HEC and volunteers will recruit gay and lesbian adults and youth to speak on a local radio talk show or to groups of school teachers about being gay, coming out, slurs, tolerance, etc.
- d.4** The HEC will advertise the production and recruit volunteers and donations through the ~~EL6250ft~~ and SGMN newsletters and web site. "Would you help young gay youth avoid what you experienced as a teenager?" is a theme that often brings older gays in to volunteer.
- e. Evaluation:**
- Success will be measured in the following ways:
- e.1** Two of four high school principals in the El Dorado Union High School District have agreed to have the play on campus during the 2006-2007 school year. These will be at least one daytime performance (with parent permission), or a voluntary attendance performance in the evening.
- e.2** Collect written comments from youth attending the performance. Publish these in local newspapers and newsletters.
- e.3** Encourage youth in GSA, or someone doing a senior project, to conduct a follow-up on their campus to assess the impact of the play after one to two months and again at the end of the school year. Did name calling, harassment, or beatings decrease?

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GOAL #3: Male And Female Incarcerated Population

Continue 16 years of cooperative and collaborative work with the EDC Sheriff's Department in the Placerville and SLT county jails doing HIV, hepatitis, and STD prevention education through the drug education program, Health Education Addiction Recovery Through Self-Responsibility (HEARTS). Also, work with the California Forensics Medical Group (CFMG) staff and correctional officers to conduct HIV prevention, counseling, and testing sessions with inmates who request it.

Objective #3A: On-going STD/HIV/Hepatitis Education, Referrals, and Testing

By June 30, 2007, 200 male and female EDC jail inmates enrolled in HEARTS will participate in STD, hepatitis, and HIV educational forums, and develop a personal plan to implement specific harm reduction techniques when they are on the outside. HIV prevention, counseling, and testing services will be offered to all inmates following group education classes.

Intervention Description for Objective #3A:

- a. **Summary:** Inmates volunteer, or are court mandated, to participate in the drug education program, HEARTS, which includes HIV/hepatitis/STD education every 12 weeks. The classes are separated by sex, and the class size varies from four to 16. The classes involve many questions and answers, discussions about street myths, harm reduction techniques, testing inside and out of incarceration, window period, risks with different kinds of sex, safer needle use, and personal plans after discharge. HIV-positive inmates are rarely seen in EDC jails and are usually in medical isolation by personal choice.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Incarcerated men and women, estimated at more than 90 percent substance users; Placerville Jail, Average Daily Log, 230 inmates; South Lake Tahoe Jail, Average 120 inmates
- d. **Key Activities:**
 - ~~d.1~~ The bilingual CSPA will continue meeting with Spanish speaking inmates in the SLT jail. Many incarcerated Latinos express fears about HIV testing in jail, so they are referred to the clinic when they are released. The CSPA offers private and individual counseling to Spanish named inmates in the SLT facility because they are not housed by which language they speak.
 - d.21 The HEC meets bi-weekly with English speaking inmates in the Placerville jail who request individual HIV counseling and testing.
 - d.32 Referrals for STD exams are made to the CFMG staff based on active symptoms, and/or to the local Health Department clinicians, and the appropriate service providers upon release.

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d.43 The HEC is now doing HIV education through HEARTS in the women's pod in the Placerville facility instead of the classroom. All the women in the pod are invited to join, and this offer has doubled the attendance. The Inmate Services Officer has been strongly supportive of this new venture, and frequently sits in during the class. In educational sessions and discussions, their drug and alcohol use is addressed, especially their methamphetamine use (smoking, snorting, and/or injection), and practical harm reduction techniques. Hepatitis education remains important due to their reported and/or projected high incidence of hepatitis C virus. Referrals will be made to EDCPHD and other clinics for STD and women's health services, as well as hepatitis B inoculation.

d.54 The HEARTS program in the Placerville jail is taught by a counselor from Progress House; in the SLT jail, the program is coordinated by Sierra Recovery Center. The HEC will continue to assist the two HEARTS Drug Education Program Coordinators in the Placerville and SLT facilities by conducting quarterly interactive AIDS, STD, and hepatitis education sessions with men and women during each 12 week cycle of education.

d.65 The HEC will continue to support HEARTS graduates as they continue in both inpatient and outpatient treatment at Progress House and Sierra Recovery Center. The HEC may continue these relationships through work at the Alcohol and Other Drugs CBOs for up to a year or more.

d.76 Inmates are referred to their local health departments for STD workups through the PACT (Family Planning Access Care Treatment) program, which will then qualify them for hepatitis B virus inoculations. Through a new program at the EDCPHD, any adult can request hepatitis A virus inoculation for a fee of \$26.00. HEC will continue to press for hepatitis c virus testing at the EDCPHD.

e. Evaluation:

e.1 Numbers of inmates educated.

e.2 Feedback from inmates and drug counselor(s).

GOAL #4: Targeted Prevention Activities To Latino Youth And Adults

~~The goal is to provide basic education about sexuality, HIV and other diseases, and self-protection in schools, English as a Second Language (ESL) classes, and other places where Spanish-speaking people gather. Many Spanish-speaking people in SLT have emigrated from Mexico and have limited education (sixth to eighth grade). This target group is in need of basic information about human biology, anatomy, sexuality, and reproduction, as well as information about STDs. Cultural and religious beliefs are often strong and must be respected as information about SIDA (Spanish for AIDS) is taught. Traditionally, the men have all the authoritative power and the women must not speak about sex and health related concerns. Issues of empowerment and harm reduction techniques are challenging subject to discuss.~~

Exhibit 3, A01
Scope of Work – Year 3
July 1, 2006 to June 30, 2007

Intervention Description for Objective #4A:

- a. ~~Summary:~~ By June 30, 2007, the bilingual CSPA will meet with 100 to 150 Spanish-speaking people in SLT through Women, Infants and Children (WIC), ESL classes, and informal street targeted prevention activities to teach about SIDA and how to protect themselves from STDs, hepatitis, and HIV infections. Referrals to EDCPHD will be made as needed.
- b. ~~Types of Intervention:~~ Group Level Intervention
- c. ~~Risk Population/Target Size:~~ New immigrant Spanish-speaking youth and adults in SLT (Total population estimated 10,000 to 12,000 Hispanic residents of South Shore)
- d. ~~Key Activities:~~
- d.1 ~~The HIV CSPA will visit South Tahoe Middle School and South Tahoe High School ESL classes each semester to do presentations on family planning, HIV, STDs, and hepatitis.~~
- d.2 ~~Targeted prevention activities to adults enrolled in ESL classes each semester at Lake Tahoe Community College and Family Resource Center which will include STD, HIV, and hepatitis education, prevention, and testing, as well as referrals to the clinic for birth control, inoculations, and other services. These students will be encouraged to talk to their friends and family, and refer at-risk individuals for HIV testing at Family Resource Center, EDCPHD SLT clinic, or elsewhere by private arrangement with the CSPA.~~
- d.3 ~~The CSPA will meet quarterly with other on-going groups at Family Resource Center including ESL classes, Mothers' Support group, computer classes, and present information about SIDA, answer questions about sexuality, STDs, and refer to the local health department services.~~
- d.4 ~~The CSPA will meet quarterly with Spanish-speaking parents enrolled in SLT WIC, present information about SIDA, and answer questions about sexuality, STDs, and health department services.~~
- d.5 ~~The CSPA will provide HIV information and referral services at ski resort health and hiring fairs during the ski season. As available, the CSPA will provide an interactive information booth at the following annual events: South Tahoe High School Senior Health Fair, Barton Hospital Health Fair, and casino employee health fairs.~~
- e. ~~Evaluation:~~
- e.1 ~~Increased numbers for HIV testing of Hispanic SLT residents.~~
- e.2 ~~Increased numbers of Hispanic patients at EDCPHD SLT.~~

Exhibit 3, A01
Scope of Work – Year 3
July 1, 2006 to June 30, 2007

~~e.3 — No increase in new HIV/STD infections of Hispanic SLT residents.~~

~~e.4 — Increased numbers attending the information presentations.~~

GOAL # 54: Prevention With Positives

The HEC and CSPA will coordinate with Sierra Foothills AIDS Foundation (SFAF) Service Coordinators, the Jail Inmate Services Officers, and residential treatment providers to work with HIV-positive individuals and couples (~~and possibly small groups~~) to help them develop plans for reducing their risks of infecting their sexual and needle sharing partners. The focus will be on helping individuals decide how to make incremental changes in their thinking and behavior in order to minimize the spread of HIV.

Objective #54A: By June 30, 2007, the HEC and CSPA will meet and work with SFAF's Service Coordinators to develop plans for ~~15 to 20~~ **5-10** HIV-positive clients to help them develop or improve their risk reduction plans in order to decrease the chance of infecting others. The focus will be on communication, commitment, accessing local resources, and the impact of drugs, alcohol, and depression on those plans.

Intervention Description for Objective #54A:

a. **Summary:** Working in a large rural community, where most gays and HIV-people remain closeted, presents different challenges than the well funded Best Practices program developed in metropolitan areas. Many of the HIV-positive people in EDC are isolated, depressed, closed to others talking to them about HIV, and distrustful of government funded personnel. Therefore, most of this work will be conducted through the HEC and CSPA's long association with the Service Coordinators of SFAF, the Jail Inmate Services Officers, and residential treatment providers. The Service Coordinators meets regularly with about 80 EDC clients are living with HIV. Newly discovered HIV-positive residents are immediately referred to SFAF Service Coordinators. The Service Coordinators are always working with clients on personalized risk reduction goals. Both Service Coordinators have been trained to use client centered counseling methods. Both Service Coordinators regularly work with clients on harm reduction techniques, review of barriers and contingencies, and identifying supporters for helping them decide how to make incremental changes in their behavior in order to reduce the risks of infecting their partners. Due to confidentiality limitations, HD staff cannot meet with these clients unless the clients request to do so. ~~To date, no clients have responded to multiple offers to meet for any reason, either individually or in groups.~~

b. **Types of Intervention:** Individual Level Intervention
(We may not be able to document this, due to Confidentiality, and the already high number of clients and forms that Service Coordinators must manage)

c. **Risk Population/Target Size:** Estimate 100 HIV-positive people in EDC
Primarily white, middle aged, MSM; some MSM Latino, most in SLT

Exhibit 3, A01
Scope of Work – Year 3
July 1, 2006 to June 30, 2007

d. Key Activities:

d.1 While respecting issues of confidentiality, the HEC and CSPA will continue to meet or talk with the SFAF Ryan White CARE Service Coordinators on a ~~weekly or~~ monthly basis.

~~**d.2** Some new relationships with the HEC may be developed through HIV-positive people volunteering to attend Ryan White Services Committee/Local Implementation Group (LIG) meetings. Historically, very few SFAF clients attend.~~

d.32 Continue notification of regional HIV services and education planning meetings by select confidential mailing lists (including mailings to clients by SFAF Service Coordinators), email, newsletters, word of mouth, and face-to-face encounters.

d.43 HIV-positive individuals and discordant couples have historically declined all offers to meet by phone or in person with staff from the AIDS E&P team to discuss their beliefs, feelings, addictions, and behaviors that put their sex partners and/or needle-sharing partners at risk for HIV infection. This harm reduction effort is continued monthly by the SFAF Service Coordinators, and will be supported, as needed, by AIDS E&P staff.

d.54 The AIDS E&P staff will work with the staffs of SFAF, Progress House, El Dorado Council on Alcoholism Lifeskills Program, Sierra Resource Center, Gates Recovery, and the jail correctional officers and juvenile hall counselors, as well as the CFMG medical staff, to meet HIV-positive clients and inmates.

d.65 The AIDS E&P staff and the SFAF Service Coordinators are all trained HIV prevention counselors. ~~HIV testing is conducted at SFAF offices, among many other alternative sites.~~

d.76 The HEC and CSPA will assist with HIV testing and counseling of drug treatment clients and staff, as well as inmates enrolled in the HEARTS drug treatment program, and inmates in the general population. This on site testing will provide an opportunity to discover unknown HIV-positive people. All newly diagnosed people will be connected with SFAF Service Coordinators in SLT and Placerville for complete assessments and appropriate referrals while they are still in jail or drug treatment.

d.87 The HEC will work with SFAF Service Coordinators, as needed, in conducting support groups for newly diagnosed clients, or other groups that may be created from expressed need or interest of other clients.

~~**d.9** A local HIV-positive man has recently attempted to start a group, and found only three people interested. The HEC will work with him to specifically~~

Exhibit 3, A01
Scope of Work – Year 3
July 1, 2006 to June 30, 2007

~~target more HIV-positive individuals and advertise activities that may be attractive to them. Their transportation needs will also be addressed.~~

NOTE: DRUG TREATMENT PROGRAMS EDCPHD AIDS E&P staff have been collaborating with the court mandated drug treatment and voluntary outpatient programs for over 16 years, and have excellent relationships with the staff of each agency. The AIDS E&P staff has discontinued all outpatient classes, but will continue working with residential clients and staff at Progress House and Sierra Recovery Center under a mix of Substance Abuse Prevention and Treatment Basic Training Grant (SABTBG) funding, HIV Prevention Counseling and Testing, and AIDS E&P. Staff of all EDC drug treatment programs will be updated on HIV, STD, and hepatitis at their request. The HEC coordinates and instructs HIV Prevention Counseling and Testing classes for drug treatment counselors. ~~Tahoe Youth and Family Services is resuming HIV testing of clients, and the new staff will be trained, supplied with materials for testing, and supported in working with difficult or HIV-positive clients.~~

GOAL #65: School Targeted Prevention Activities

By June 30, 2007, approximately 300 to 400 EDC youth will participate in interactive expanded HIV education. This will include encouraging STD and HIV testing, seeking effective birth control methods as appropriate, developing buddy systems, safer decision making especially when loaded, choosing sexual partners carefully, being abstinent, and realistic harm reduction techniques.

a. Key Activities:

a.1 Continue participation with the local CBOs, at the Senior Health Fair at South Tahoe High School in February, 2007, and Black Oak Mine School District, Golden Sierra High School, with an information table, handouts, and interactive activities. PFLAG and volunteers from the two Hepatitis C support groups also participate, as well as other HD staff.

~~**a.2** — Develop a Senior Health Fair at the other schools within the El Dorado Union High School District (4 high schools) as support within the schools and as time allows. Continue to talk to local CBOs, private service providers, health committees, school nurses, and health teachers in other high schools about scheduling Health Fairs during the second semester of the school year as a refresher for graduating seniors.~~

~~**a.3** — Conduct HIV/STD/hepatitis education each semester in Human Sexuality classes at Folsom Lake College campus, El Dorado Center in Placerville and the Folsom campus, and Lake Tahoe Community College in SLT.~~

~~**a.4** — As possible, assist at educational booths on various college campuses at annual events, such as Day of Diversity, World AIDS Day, Valentine's Day, etc.~~

Exhibit 3, A01
Scope of Work – Year 3
July 1, 2006 to June 30, 2007

II. ~~OTHER SERVICES~~

GOAL: ~~Community planning; to increase the effectiveness of HIV prevention activities in El Dorado County.~~

Objective: ~~By June 30, 2007, the EDC health jurisdiction will conduct quarterly regional implementation group meetings with Placer and Nevada counties to develop, review, and assess the HIV education/prevention activities.~~

a. Key Activities:

a.1 ~~Announcements of the quarterly meetings will be advertised through SFAF mailings to clients by Case Managers, SGMN newsletters and web site, EL6250FT newsletter, emails, message boards, word of mouth, and general mailings.~~

a.2 ~~The location of each meeting will rotate from city to city to enable more consumers to attend.~~

a.3 ~~Opinions of concerned EDC citizens is solicited at local drug treatment programs, jails, high schools, especially GSA clubs, PFLAG meetings, HCV Task Force meetings, Perinatal Council meetings, HD staff meetings, and via key informants and opinion leaders to assist the EDC program representatives in providing the best services possible.~~

a.4 ~~Member recruitment is on going, mail and e-mail lists are expanded at each quarterly meeting as new community members attend.~~

a.5 ~~People who cannot attend meetings are asked to phone or email their ideas and opinions to others who will speak for them at the meetings.~~

b. Evaluation: ~~Member and guest sign-in sheets will be maintained, as well as minutes of the meetings. Email lists will be updated after each meeting. The overall effectiveness of the community planning process will be evaluated by the number of members attending the Spring quarterly meeting.~~

NOTE: The AIDS Education and Prevention Program (E&P) operates within the Health Promotions Division (HP) Alcohol/Drug Programs Division (ADP) of the El Dorado County Public Health Department (EDCPHD). There are no subcontractors.

Exhibit 5, A01
Budget
Year 2
July 1, 2005 to June 30, 2006

	<u>Original Budget</u>	<u>This Amendment</u>	<u>Amended Total</u>
A. PERSONNEL	\$46,500	(\$27,220)	\$19,280
B. OPERATING EXPENSES	\$13,082	(\$11,813)	\$1,269
C. CAPITAL EXPENDITURES	\$0	\$0	\$0
D. OTHER COSTS	\$2,200	(\$400)	\$1,800
E. INDIRECT COSTS	\$3,600	(\$1,672)	\$1,928
TOTAL BUDGET	\$65,382	(\$41,105)	\$24,277

**Exhibit 6, A01
Budget
Year 3**

July 1, 2006 to June 30, 2007

	<u>Original Budget</u>	<u>This Amendment</u>	<u>Amended Total</u>
A. PERSONNEL	\$46,500	(\$27,220)	\$19,280
B. OPERATING EXPENSES	\$13,082	(\$11,813)	\$1,269
C. CAPITAL EXPENDITURES	\$0	\$0	\$0
D. OTHER COSTS	\$2,200	(\$400)	\$1,800
E. INDIRECT COSTS	\$3,600	(\$1,672)	\$1,928
TOTAL BUDGET	\$65,382	(\$41,105)	\$24,277



Memorandum of Understanding (MOU)

CONTRACTOR: County of El Dorado
PROGRAM: HIV Prevention Program

CONTRACT NUMBER: 04-35346
MOU NUMBER: PREV 04-09

1. MOU TERM:

The term of this MOU shall be from July 1, 2004 through June 30, 2007.

2. MAXIMUM AMOUNT PAYABLE:

The maximum amount payable by the STATE to the CONTRACTOR under this MOU shall not exceed the following:

- A. \$ 65,382 for the budget period of July 1, 2004 to June 30, 2005.
- B. \$ 65,382 for the budget period of July 1, 2005 to June 30, 2006.
- C. \$ 65,382 for the budget period of July 1, 2006 to June 30, 2007.
- D. \$196,146 for the entire MOU term.

3. MOU EXHIBITS:

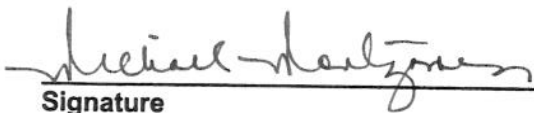
The following attached exhibits are incorporated herein, and made a part hereof by this reference:

- A. Exhibit 1, entitled "Scope of Work," Year 1 consisting of 14 pages.
- B. Exhibit 2, entitled "Scope of Work," Year 2 consisting of 14 pages.
- C. Exhibit 3, entitled "Scope of Work," Year 3 consisting of 14 pages.
- D. Exhibit 4, entitled "Budget," Year 1 consisting of one page.
- E. Exhibit 5, entitled "Budget," Year 2 consisting of one page.
- F. Exhibit 6, entitled "Budget," Year 3 consisting of one page.

4. MOU EXEMPTION:

The Master Agreement (MA) as referenced by the contract number shown above, its terms and conditions, as executed, is incorporated herein and made a part hereof by this reference. The STATE hereby certifies that this agreement and any MOUs thereto are exempt from review or approval by the Department of General Services as Office of AIDS contracts are exempt from the Public Contract Code. The CONTRACTOR hereby accepts this MOU and shall administer it in accordance with the terms and conditions referenced in the MA.

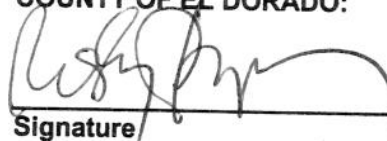
STATE OF CALIFORNIA:


Signature

Michael Montgomery, Chief
Office of AIDS

12/29/04
Date

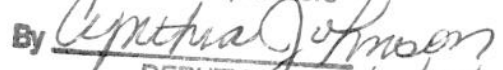
COUNTY OF EL DORADO:


Signature

Rusty Dupray, Chairman
El Dorado County Board of Supervisors
Printed/Typed Name and Title

12/14/04
Date

ATTEST: CINDY KECK, Clerk
of the Board of Supervisors

By 
DEPUTY 12/14/04

5. PROGRESS REPORT SCHEDULE AND OTHER REQUIREMENTS:

A. The CONTRACTOR shall complete and submit each progress and final report by the due dates specified below. The content of these reports will include, but not be limited to: progress accomplished on agreement objectives; progress on activity schedules; major problems encountered and proposed resolutions to those problems; issues requiring contract monitor consultation; and data on client services. A final report shall be cumulative. Progress Report due dates are as follows unless Contractor obtains prior written approval from the State:

<u>PROGRESS REPORT</u>	<u>PERIOD</u>	<u>DUE DATE</u>
YEAR 1		
FIRST	07/01/2004-12/31/2004	02/15/2005
SECOND	01/01/2005-06/30/2005	08/15/2005
YEAR 2		
FIRST	07/01/2005-12/31/2005	02/15/2006
SECOND	01/01/2006-06/30/2006	08/15/2006
YEAR 3		
FIRST	07/01/2006-12/31/2006	02/15/2007
SECOND	01/01/2007-06/30/2007	08/15/2007

B. Progress reports shall be submitted in accordance with the prescribed format provided by the STATE and any revisions thereto. If the CONTRACTOR does not submit acceptable progress reports in a timely manner, their invoices may be withheld from payment until acceptable reports are received. If a final report is submitted more than ninety days after expiration of the agreement term, the final invoice may not be honored unless the CONTRACTOR has obtained prior written approval from the STATE.

6. PROJECT REPRESENTATIVES:

The project representatives during the term of this MOU will be:

Department of Health Services Shirley Franklin HIV Education and Prevention Services Branch Office of AIDS MS 7700 P.O. Box 997426 Sacramento, CA 95899-7426 Telephone: (916) 449-5795 Fax: (916) 449-5800	County of El Dorado Chuck Newport Health Education Coordinator EDCPHD Health Promotions 929 Spring Street Placerville, CA 95667 Telephone: (530) 621-6148 Fax: (530) 626-4277
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Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

I. CLIENT SERVICES

GOAL #1: The AIDS Education and Prevention Program (E&P) staff will continue with over sixteen years of efforts to help men who have sex with men (MSM), whether gay/bisexual identified or not, to reduce social isolation and improve their access to health care in this large rural and generally gay unfriendly county. It is generally accepted that continued isolation leads to depression and increased high-risk behavior that may result in increased HIV and sexually transmitted infections. Our goal is to assist 100 to 200 El Dorado County (EDC) gay/bisexual men and other MSM to connect socially and through recreational activities on the Western Slope and South Lake Tahoe (SLT).

Objective #1A: By June 30, 2005, the Health Education Coordinator (HEC) will assist two volunteer editors to publish two newsletters and increase their distribution from approximately 200 to 300 gay identified men and other MSM in and around EDC.

Objective #1B: The HEC will communicate weekly with the webmaster to support resources and prevention education to be included in the expansion of the Sierra Gay Men's Network (SGMN) through the internet. This cyber targeted prevention activity is effective for many closeted local MSM of various ages and will include continued networking with organizations in surrounding rural counties, Sacramento, and Reno.

Intervention Description for Objective #1A and #1B:

a. **Summary:** Elevation6250FT is a tolerance and diversity focused monthly newsletter distributed in and around SLT. The SGMN monthly newsletter is targeted to gay men living in and around EDC. SGMN's newsletter is distributed in both hardcopy and via the SGMN web site. The web site, www.sgmnet.org, has many connections to various search engines, resource links, and has received over 50,000 hits and 2,500 visits between November, 2003 and April, 2004, according to the web statistics.

b. **Type of Intervention:** Health Communication/Public Information

c. **Risk Population/Target Size:** Approximately 300 white and Latino gay/bisexual/MSM

d. **Key Activities:**

d.1 HEC and volunteers will continue to maintain and expand contacts with other rural targeted prevention workers. Through networking and combined collaborative efforts, new and improved strategies will be encouraged and implemented to encourage safer sex and harm reduction messages through newsletters, chat rooms, and emails with men cruising the web for sex and for relationships.

d.2 El Dorado County Public Health Department (HDCPHD), Health Promotions Division (HP), will continue to financially support the production and distribution of the SGMN and Elevation6250FT newsletters, SGMN web site,

Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

message boards, chat rooms, and other future e-based or printed communications to gay/bisexual/MSM in EDC. Staff will assist in providing education, prevention information, and linkages, but will not assume editorial privilege.

d.3 HP staff will use these mediums to invite comments and direction to further E&P targeted prevention activities for MSM, as well as recruit new members, and encourage participation in local implementation group (LIG) meetings.

d.4 Upcoming gatherings to reduce isolation for gay/bisexual/MSM will be advertised via newsletters, web site, chat rooms, message boards, and phone calls utilizing key contact people.

e. Evaluation:

e.1 Individuals choose to be added or retained on the mailing list after receiving complimentary issues of the newsletters. If the subscription list remains the same or increases, this would be a measure of success.

e.2 Documented increased hits on the web site indicates growing awareness of its existence and value to web surfers.

e.3 Responses to the editors by email, letters, phone calls, and face-to-face conversations, indicate that individuals are reading the newsletters and visiting the web site.

e.4 People may (or may not) show up for the gatherings to reduce isolation (especially depending on who's coming or if it's Gay Pride month in the big cities). If the number of people attending isolation reduction events remain constant or increases, the event is likely to continue over time. This would be considered a success.

e.5 The newsletters are supported at the rate of \$75.00 per month for each newsletter for health advertising in each issue. The web site, www.sgm.org, is supported through similar URL advertising links to the EDCPHD web site. HEC staff time for research, referrals, phone calls, emails, and face-to-face visitation occurs weekly and varies by issue and deadlines.

e.6 Various newsletters and hotlines targeting MSM in EDC have come and gone over the last decade. The current newsletters will only be sustained if the readership approves and encourages them. The last year has shown great success as measured by increased distribution and web statistics and the number of hits on www.sgm.org.

Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

Objective #1C: Health Needs of Gay/MSM

The HEC and Community Services Program Assistant (CSPA) will increase the marketing of EDCPHD clinical services to uninsured gay/MSM to meet more of their health needs. This includes hepatitis A virus and hepatitis B virus inoculations, HIV prevention counseling and testing, STD exams, smoking cessation, education and referrals, and condom/lube distribution to increase the number of gay/MSM from ten to 25 who receive medical services through the EDCPHD Placerville and SLT clinics.

Intervention Description for Objective #1C:

a. Summary: This intervention is tied to continued and expanded high-risk behavior change campaign in both the newsletters and the web site, and includes advertising of Health Department (HD) services, with direct URL links to the EDCPHD web site and printed advertisements of HD services and phone numbers. Key informants, and opinion leaders, relay needs and complaints to E&P staff, who then have face-to-face interviews with clinic staff to improve and increase services. On-going provider monitoring helps to ensure that appropriate, high quality services are being delivered and course corrections implemented.

b. Type of Intervention: Health Communication/Public Information

c. Risk Population/Target Size: 20 to 40 white and Latino Gay/MSM, especially those who are uninsured

d. Key Activities:

d.1 HEC and volunteers will continue to create monthly advertisements and articles related to gay men's health issues in Elevation6250FT and SGMN newsletters and web site.

d.2 HP staff will continue with one-on-one, as well as group, discussions with local MSM regarding their medical needs. HEC will meet informally with clinic staff periodically to access their experiences and needs in working with gay male patients. Verbal and printed information will be given to clinicians.

d.3 HP staff will continue informal monthly discussions with HD clinical staff to improve their understanding of gay lifestyles and attitudes in expectation of improving their comfort level in working with gay/MSM patients. If requested by staff, some local gay men have volunteered to talk with them during a scheduled staff meeting.

e. Evaluation:

NOTE: There is no current way to track sexual orientation demographics through EDCPHD reporting, except through Office of AIDS HIV testing Client Information Forms report.

Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

e.1 Gay/MSM individuals will verbally report to HP staff or newsletter editors that they have accessed services at the EDCPHD as a result of reading about services through the newsletters, web site, and paid advertisements.

e.2 The HEC will continue to work closely with epidemiologists, laboratory, and clinical staff at EDCPHD, and Office of AIDS to note the following indicators of increased risk behaviors, especially unprotected sex:

1. Increased syphilis seroprevalence detected in men, especially MSM.
2. Increased HIV seroprevalence detected in men, especially MSM.

Objective #1D: HP staff will support the planning and advertising of local monthly gatherings to reduce isolation for gay/bisexual men at private and public places in EDC and surrounding counties to encourage new isolation reduction opportunities, increase communication, and reduce high-risk behavior. Staff and volunteers will assist in the advertising through the distribution of newsletters by mail, web site, hand delivery, emails, and personal invitations to increase MSM/gay/bisexual men's awareness of these isolation reduction events in and around EDC.

Intervention Description for Objective #1D:

a. Summary: Monthly potlucks are regularly scheduled for second Saturdays at various parks and homes in EDC, and are advertised through SGMN newsletters, web site, as well as Yahoo Groups. These events are social, and may include videos and discussions that will result in a reduction in high-risk behavior and provide an opportunity to engage in HIV harm reduction education.

b. Type of Intervention: Health Communication/Public Information

c. Risk Population/Target Size: Approximately 200 to 300 white and Latino Gay/MSM

d. Key Activities:

d.1 HP staff will help plan advertising and agendas for monthly isolation reduction gatherings by working with newsletter editors and other volunteers to write and distribute flyers, emails, and mailings. Condoms, condom key chains, and lubricants are supplied by staff for distribution to attendees by volunteers.

d.2 Other events, such as private screenings of the documentary video *The Gift*, will be discussed, planned, and advertised in newsletters and via the internet.

e. Evaluation:

e.1 The number of people that show up, interact, converse, have a good time, and bring friends will increase.

Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

- e.2 People network, coordinate, and collectively plan more events, and the future events are well attended.

GOAL #2: Teaching Tolerance in conjunction with Gay Straight Alliance (GSA) and Parents, Families and Friends of Lesbians and Gays (PFLAG)

This goal is focused on ending sexual orientation discrimination on high school campuses in EDC. The EDCPHD HEC will continue six years of networking and collaborative efforts with the local PFLAG, Placerville chapter, to educate EDC school staff and students about homophobia and tolerance for alternative lifestyles. There is a correlation between constant harassment regarding sexual identity and low self-esteem. People with low self-esteem do not care about the consequences of their behavior.

Objective# 2A: The HEC will continue to support the volunteer efforts of the Placerville PFLAG chapter, especially in their targeted prevention activities to Gay/Bisexual/Lesbian/Questioning (GBLQ) youth in EDC high schools. The HEC will meet with students at the local high school GSA and become involved in a partnership for tolerance education.

Intervention Description for Objective #2A:

- a. **Summary:** This objective is really about assisting EDC school districts' enforcement of California law AB 537 (Chapter 587, Statutes of 1999) by high school administrators and teachers. The goal is to reduce harassment and cease violence directed toward gay or perceived gay students. Success in this venture will be observed by reduced incidences of verbal name calling (i.e., fag, queer) on campus, and decreased reports of violence toward Gay/Bisexual/Lesbian/Queer/Questioning/Intersex (GBLQQI) youth and perceived gay students.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** GBLQQI Youth in all eight EDC high schools (frequently closeted; number unknown)
- d. **Key Activities:**
- d.1 The HEC will continue the following activities with PFLAG:
 - d.2 Maintain phone and personal contact with PFLAG members.
 - d.3 Go to monthly PFLAG meetings, including Executive Committee meetings.
 - d.4 Give individuals appropriate referrals to PFLAG volunteers.
 - d.5 Advertise PFLAG services, through school presentations and support for more interactive web site development and, as funding permits, assist in purchasing educational materials.

Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

PFLAG Volunteers will:

d.6 Monitor the Placerville PFLAG hotline (621-6700).

d.7 The chapter plans to continue to have an information booth at all the EDC high schools that host Senior Health Days.

d.8 PFLAG volunteers will continue their advocacy for GBLQ youth within EDC high schools by meeting with counselors and administrators.

d.9 HEC, PFLAG, and other gay volunteers will support the three GSA chapters on local high school campuses by attending meetings, serving as resources, talking with youth individually or in small groups.

d.10 Continue seeking gay local adult role models to meet with gay/bisexual/lesbian youth in order to reduce their sense of isolation and improve self-esteem and plans for the future.

d.11 Wherever possible, serve as (or recruit) advocates for youth who are suffering from emotional, verbal or physical abuse because they are gay or are perceived as being gay.

d.12 PFLAG volunteers will continue their advocacy for GBLQ youth enrolled in EDC high schools by meeting with counselors and administrators.

e. Evaluation:

Success in this venture will be observed by:

e.1 Reduced incidences of verbal name calling (i.e., fag, queer) on campus.

e.2 Decreased reports of violence toward gay and perceived gay students. This will include review of individual school district reports and possible hate crime reports by EDC Sheriff's Department.

e.3 Increased number of students who report to GSA students, advisors; school counselors; and/or teachers, that they are out among their peers.

Objective #2B: Schedule performances of The Other Side Of The Closet in EDC high schools during school year 2004-05.

Intervention Description for Objective #2B:

a. Summary: Continue with four years of effort to bring the Youth Aware Troupe of the New Conservatory Theatre (NCT) of San Francisco to EDC to perform The Other Side of the Closet at new high school campuses. Group discussions between the audience and the actors follow each performance. Additional discussions may continue in the classrooms. Teachers are given lesson plans for follow-up discussions developed by NCT staff.

Exhibit 1
Scope of Work – Year 1
July 1, 2004 to June 30, 2005

- b. Type of Intervention:** Health Communication/Public Information
- c. Risk Population/Target Size:** GBLQ youth and heterosexual youth in EDC high schools; 400 to 500 youth and school staff
- d. Key Activities:**
- d.1** Throughout the school year, the HEC will secure support from teachers, administrators, students, GSA chapters, local citizens, and local community based organizations (CBOs) to insure the success of multiple performances in October/November, 2004, of the NCT production of *The Other Side of the Closet* on various Western Slope high school campuses during the school day, as approved by the individual school principals. An information table will also be set up to disburse information on HIV/AIDS prevention/education.
- d.2** The HEC and EDCPHD Public Information Officer will work with local newspapers to develop human interest stories about the difficulties gays experienced growing up in the closet. PFLAG will encourage local newspapers to do articles profiling successful individuals who are out, as well as gay partnerships and families.
- d.3** The HEC and volunteers will recruit gay and lesbian adults and youth to speak on a local radio talk show or to groups of school teachers about being gay, coming out, slurs, tolerance, etc.
- d.4** The HEC will advertise the production and recruit volunteers and donations through the EL6250ft and SGMN newsletters and web site. "Would you help young gay youth avoid what you experienced as a teenager?" is a theme that often brings older gays in to volunteer.
- e. Evaluation:**
Success will be measured in the following ways:
- e.1** Two of four high school principals in the El Dorado Union High School District have agreed to have the play on campus during the 2004-2005 school year. These will be at least one daytime performance (with parent permission), or a voluntary attendance performance in the evening.
- e.2** Collect written comments from youth attending the performance. Publish these in local newspapers and newsletters.
- e.3** Encourage youth in GSA, or someone doing a senior project, to conduct a follow-up on their campus to assess the impact of the play after one to two months and again at the end of the school year. Did name calling, harassment, or beatings decrease?

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GOAL #3: Male And Female Incarcerated Population

Continue 16 years of cooperative and collaborative work with the EDC Sheriff's Department in the Placerville and SLT county jails doing HIV, hepatitis, and STD prevention education through the drug education program, Health Education Addiction Recovery Through Self-Responsibility (HEARTS). Also, work with the California Forensics Medical Group (CFMG) staff and correctional officers to conduct HIV prevention, counseling, and testing sessions with inmates who request it.

Objective #3A: On-going STD/HIV/Hepatitis Education, Referrals, and Testing

By June 30, 2005, 200 male and female EDC jail inmates enrolled in HEARTS will participate in STD, hepatitis, and HIV educational forums, and develop a personal plan to implement specific harm reduction techniques when they are on the outside. HIV prevention, counseling, and testing services will be offered to all inmates following group education classes.

Intervention Description for Objective #3A:

- a. **Summary:** Inmates volunteer, or are court mandated, to participate in the drug education program, HEARTS, which includes HIV/hepatitis/STD education every 12 weeks. The classes are separated by sex, and the class size varies from four to 16. The classes involve many questions and answers, discussions about street myths, harm reduction techniques, testing inside and out of incarceration, window period, risks with different kinds of sex, safer needle use, and personal plans after discharge. HIV-positive inmates are rarely seen in EDC jails and are usually in medical isolation by personal choice.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Incarcerated men and women, estimated at more than 90 percent substance users; Placerville Jail, Average Daily Log, 230 inmates; South Lake Tahoe Jail, Average 120 inmates
- d. **Key Activities:**
 - d.1 The bilingual CSPA will continue meeting with Spanish-speaking inmates in the SLT jail. Many incarcerated Latinos express fears about HIV testing in jail, so they are referred to the clinic when they are released. The CSPA offers private and individual counseling to Spanish named inmates in the SLT facility because they are not housed by which language they speak.
 - d.2 The HEC meets weekly with English speaking inmates in the Placerville jail who request individual HIV counseling and testing.
 - d.3 Referrals for STD exams are made to the CFMG staff based on active symptoms, and/or to the local Health Department clinicians, and the appropriate service providers upon release.

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d.4 The HEC is now doing HIV education through HEARTS in the women's pod in the Placerville facility instead of the classroom. All the women in the pod are invited to join, and this offer has doubled the attendance. The Inmate Services Officer has been strongly supportive of this new venture, and frequently sits in during the class. In educational sessions and discussions, their drug and alcohol use is addressed, especially their methamphetamine use (smoking, snorting, and/or injection), and practical harm reduction techniques. Hepatitis education remains important due to their reported and/or projected high incidence of hepatitis C virus. Referrals will be made to EDCPHD and other clinics for STD and women's health services, as well as hepatitis B inoculation.

d.5 The HEARTS program in the Placerville jail is taught by a counselor from Progress House; in the SLT jail, the program is coordinated by Sierra Recovery Center. The HEC will continue to assist the two HEARTS Drug Education Program Coordinators in the Placerville and SLT facilities by conducting quarterly interactive AIDS, STD, and hepatitis education sessions with men and women during each 12 week cycle of education.

d.6 The HEC will continue to support HEARTS graduates as they continue in both inpatient and outpatient treatment at Progress House and Sierra Recovery Center. The HEC may continue these relationships through work at the Alcohol and Other Drugs CBOs for up to a year or more.

d.7 Inmates are referred to their local health departments for STD workups through the PACT (Family Planning Access Care Treatment) program, which will then qualify them for hepatitis B virus inoculations. Through a new program at the EDCPHD, any adult can request hepatitis A virus inoculation for a fee of \$26.00. HEC will continue to press for hepatitis c virus testing at the EDCPHD.

e. Evaluation:

e.1 Numbers of inmates educated.

e.2 Feedback from inmates and drug counselor(s).

GOAL #4: Targeted Prevention Activities To Latino Youth And Adults

The goal is to provide basic education about sexuality, HIV and other diseases, and self-protection in schools, English as a Second Language (ESL) classes, and other places where Spanish-speaking people gather. Many Spanish-speaking people in SLT have emigrated from Mexico and have limited education (sixth to eighth grade). This target group is in need of basic information about human biology, anatomy, sexuality, and reproduction, as well as information about STDs. Cultural and religious beliefs are often strong and must be respected as information about SIDA (Spanish for AIDS) is taught. Traditionally, the men have all the authoritative power and the women must not speak about sex and health related concerns. Issues of empowerment and harm reduction techniques are challenging subject to discuss.

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Intervention Description for Objective #4A:

- a. Summary:** By June 30, 2005, the bilingual CSPA will meet with 100 to 150 Spanish-speaking people in SLT through Women, Infants and Children (WIC), ESL classes, and informal street targeted prevention activities to teach about SIDA and how to protect themselves from STDs, hepatitis, and HIV infections. Referrals to EDCPHD will be made as needed.
- b. Types of Intervention:** Group Level Intervention
- c. Risk Population/Target Size:** New immigrant Spanish-speaking youth and adults in SLT (Total population estimated 10,000 to 12,000 Hispanic residents of South Shore)
- d. Key Activities:**
- d.1** The HIV CSPA will visit South Tahoe Middle School and South Tahoe High School ESL classes each semester to do presentations on family planning, HIV, STDs, and hepatitis.
- d.2** Targeted prevention activities to adults enrolled in ESL classes each semester at Lake Tahoe Community College and Family Resource Center which will include STD, HIV, and hepatitis education, prevention, and testing, as well as referrals to the clinic for birth control, inoculations, and other services. These students will be encouraged to talk to their friends and family, and refer at-risk individuals for HIV testing at Family Resource Center, EDCPHD SLT clinic, or elsewhere by private arrangement with the CSPA.
- d.3** The CSPA will meet quarterly with other on-going groups at Family Resource Center including ESL classes, Mothers' Support group, computer classes, and present information about SIDA, answer questions about sexuality, STDs, and refer to the local health department services.
- d.4** The CSPA will meet quarterly with Spanish-speaking parents enrolled in SLT WIC, present information about SIDA, and answer questions about sexuality, STDs, and health department services.
- d.5** The CSPA will provide HIV information and referral services at ski resort health and hiring fairs during the ski season. As available, the CSPA will provide an interactive information booth at the following annual events: South Tahoe High School Senior Health Fair, Barton Hospital Health Fair, and casino employee health fairs.
- e. Evaluation:**
- e.1** Increased numbers for HIV testing of Hispanic SLT residents.
- e.2** Increased numbers of Hispanic patients at EDCPHD SLT.

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- e.3 No increase in new HIV/STD infections of Hispanic SLT residents.
- e.4 Increased numbers attending the information presentations.

GOAL # 5: Prevention With Positives

The HEC and CSPA will coordinate with Sierra Foothills AIDS Foundation (SFAF) Service Coordinators to work with HIV-positive individuals and couples (and possibly small groups) to help them develop plans for reducing their risks of infecting their sexual and needle sharing partners. The focus will be on helping individuals decide how to make incremental changes in their thinking and behavior in order to minimize the spread of HIV.

Objective #5A: By June 30, 2005, the HEC and CSPA will meet and work with SFAF's Service Coordinators to develop plans for 15 to 20 HIV-positive clients to help them develop or improve their risk reduction plans in order to decrease the chance of infecting others. The focus will be on communication, commitment, accessing local resources, and the impact of drugs, alcohol, and depression on those plans.

Intervention Description for Objective #5A:

a. Summary: Working in a large rural community, where most gays and HIV-people remain closeted, presents different challenges than the well funded Best Practices program developed in metropolitan areas. Many of the HIV-positive people in EDC are isolated, depressed, closed to others talking to them about HIV, and distrustful of government funded personnel. Therefore, most of this work will be conducted through the HEC and CSPA's long association with the Service Coordinators of SFAF. The Service Coordinators meets regularly with about 80 EDC clients are living with HIV. Newly discovered HIV-positive residents are immediately referred to SFAF Service Coordinators. The Service Coordinators are always working with clients on personalized risk reduction goals. Both Service Coordinators have been trained to use client centered counseling methods. Both Service Coordinators regularly work with clients on harm reduction techniques, review of barriers and contingencies, and identifying supporters for helping them decide how to make incremental changes in their behavior in order to reduce the risks of infecting their partners. Due to confidentiality limitations, HD staff cannot meet with these clients unless the clients request to do so. To date, no clients have responded to multiple offers to meet for any reason, either individually or in groups.

b. Types of Intervention: Individual Level Intervention
(We may not be able to document this, due to Confidentiality, and the already high number of clients and forms that Service Coordinators must manage)

c. Risk Population/Target Size: Estimate 100 HIV-positive people in EDC
Primarily white, middle aged, MSM; some MSM Latino, most in SLT

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d. Key Activities:

d.1 While respecting issues of confidentiality, the HEC and CSPA will continue to meet or talk with the SFAF Ryan White CARE Service Coordinators on a weekly or monthly basis.

d.2 Some new relationships with the HEC may be developed through HIV-positive people volunteering to attend Ryan White Services Committee/Local Implementation Group (LIG) meetings. Historically, very few SFAF clients attend.

d.3 Continue notification of regional HIV services and education planning meetings by select confidential mailing lists (including mailings to clients by SFAF Service Coordinators), email, newsletters, word of mouth, and face-to-face encounters.

d.4 HIV-positive individuals and discordant couples have historically declined all offers to meet by phone or in person with staff from the AIDS E&P team to discuss their beliefs, feelings, addictions, and behaviors that put their sex partners and/or needle-sharing partners at risk for HIV infection. This harm reduction effort is continued monthly by the SFAF Service Coordinators, and will be supported, as needed, by AIDS E&P staff.

d.5 The AIDS E&P staff will work with the staffs of SFAF, Progress House, El Dorado Council on Alcoholism Lifeskills Program, Sierra Resource Center, Gates Recovery, and the jail correctional officers and juvenile hall counselors, as well as the CFMG medical staff, to meet HIV-positive clients and inmates.

d.6 The AIDS E&P staff and the SFAF Service Coordinators are all trained HIV prevention counselors. HIV testing is conducted at SFAF offices, among many other alternative sites.

d.7 The HEC and CSPA will assist with HIV testing and counseling of drug treatment clients and staff, as well as inmates enrolled in the HEARTS drug treatment program, and inmates in the general population. This on site testing will provide an opportunity to discover unknown HIV-positive people. All newly diagnosed people will be connected with SFAF Service Coordinators in SLT and Placerville for complete assessments and appropriate referrals while they are still in jail or drug treatment.

d.8 The HEC will work with SFAF Service Coordinators, as needed, in conducting support groups for newly diagnosed clients, or other groups that may be created from expressed need or interest of other clients.

d.9 A local HIV-positive man has recently attempted to start a group, and found only three people interested. The HEC will work with him to specifically

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target more HIV-positive individuals and advertise activities that may be attractive to them. Their transportation needs will also be addressed.

NOTE: DRUG TREATMENT PROGRAMS EDCPHD AIDS E&P staff have been collaborating with the court mandated drug treatment and voluntary outpatient programs for over 16 years, and have excellent relationships with the staff of each agency. The AIDS E&P staff has discontinued all outpatient classes, but will continue working with residential clients and staff at Progress House and Sierra Recovery Center under a mix of Substance Abuse Prevention and Treatment Basic Training Grant (SABTBG) funding, HIV Prevention Counseling and Testing, and AIDS E&P. Staff of all EDC drug treatment programs will be updated on HIV, STD, and hepatitis at their request. The HEC coordinates and instructs HIV Prevention Counseling and Testing classes for drug treatment counselors. Tahoe Youth and Family Services is resuming HIV testing of clients, and the new staff will be trained, supplied with materials for testing, and supported in working with difficult or HIV-positive clients.

GOAL #6: School Targeted Prevention Activities

By June 30, 2005, approximately 300 to 400 EDC youth will participate in interactive expanded HIV education. This will include encouraging STD and HIV testing, seeking effective birth control methods as appropriate, developing buddy systems, safer decision making especially when loaded, choosing sexual partners carefully, being abstinent, and realistic harm reduction techniques.

a. Key Activities:

a.1 Continue participation with the local CBOs, at the Senior Health Fair at South Tahoe High School in February, 2005, and Black Oak Mine School District, Golden Sierra High School, with an information table, handouts, and interactive activities. PFLAG and volunteers from the two Hepatitis C support groups also participate, as well as other HD staff.

a.2 Develop a Senior Health Fair at the other schools within the El Dorado Union High School District (4 high schools) as support within the schools and as time allows. Continue to talk to local CBOs, private service providers, health committees, school nurses, and health teachers in other high schools about scheduling Health Fairs during the second semester of the school year as a refresher for graduating seniors.

a.3 Conduct HIV/STD/hepatitis education each semester in Human Sexuality classes at Folsom Lake College campus, El Dorado Center in Placerville and the Folsom campus, and Lake Tahoe Community College in SLT.

a.4 As possible, assist at educational booths on various college campuses at annual events, such as Day of Diversity, World AIDS Day, Valentine's Day, etc.

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II. OTHER SERVICES

GOAL: Community planning; to increase the effectiveness of HIV prevention activities in El Dorado County.

Objective: By June 30, 2005, the EDC health jurisdiction will conduct quarterly regional implementation group meetings with Placer and Nevada counties to develop, review, and assess the HIV education/prevention activities.

a. Key Activities:

a.1 Announcements of the quarterly meetings will be advertised through SFAF mailings to clients by Case Managers, SGMN newsletters and web site, EL6250FT newsletter, emails, message boards, word of mouth, and general mailings.

a.2 The location of each meeting will rotate from city to city to enable more consumers to attend.

a.3 Opinions of concerned EDC citizens is solicited at local drug treatment programs, jails, high schools, especially GSA clubs, PFLAG meetings, HCV Task Force meetings, Perinatal Council meetings, HD staff meetings, and via key informants and opinion leaders to assist the EDC program representatives in providing the best services possible.

a.4 Member recruitment is on going, mail and e-mail lists are expanded at each quarterly meeting as new community members attend.

a.5 People who cannot attend meetings are asked to phone or email their ideas and opinions to others who will speak for them at the meetings.

b. Evaluation: Member and guest sign-in sheets will be maintained, as well as minutes of the meetings. Email lists will be updated after each meeting. The overall effectiveness of the community planning process will be evaluated by the number of members attending the Spring quarterly meeting.

NOTE: The AIDS Education and Prevention Program (E&P) operates within the Health Promotions Division (HP) of the El Dorado County Public Health Department (EDCPHD). There are no subcontractors.

Exhibit 2
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I. CLIENT SERVICES

GOAL #1: The AIDS Education and Prevention Program (E&P) staff will continue with over sixteen years of efforts to help men who have sex with men (MSM), whether gay/bisexual identified or not, to reduce social isolation and improve their access to health care in this large rural and generally gay unfriendly county. It is generally accepted that continued isolation leads to depression and increased high-risk behavior that may result in increased HIV and sexually transmitted infections. Our goal is to assist 100 to 200 El Dorado County (EDC) gay/bisexual men and other MSM to connect socially and through recreational activities on the Western Slope and South Lake Tahoe (SLT).

Objective #1A: By June 30, 2006, the Health Education Coordinator (HEC) will assist two volunteer editors to publish two newsletters and increase their distribution from approximately 200 to 300 gay identified men and other MSM in and around EDC.

Objective #1B: The HEC will communicate weekly with the webmaster to support resources and prevention education to be included in the expansion of the Sierra Gay Men's Network (SGMN) through the internet. This cyber targeted prevention activity is effective for many closeted local MSM of various ages and will include continued networking with organizations in surrounding rural counties, Sacramento, and Reno.

Intervention Description for Objective #1A and #1B:

a. **Summary:** Elevation6250FT is a tolerance and diversity focused monthly newsletter distributed in and around SLT. The SGMN monthly newsletter is targeted to gay men living in and around EDC. SGMN's newsletter is distributed in both hardcopy and via the SGMN web site. The web site, www.sgmnet.org, has many connections to various search engines, resource links, and has received over 50,000 hits and 2,500 visits between November, 2003 and April, 2004, according to the web statistics.

b. **Type of Intervention:** Health Communication/Public Information

c. **Risk Population/Target Size:** Approximately 300 white and Latino gay/bisexual/MSM

d. **Key Activities:**

d.1 HEC and volunteers will continue to maintain and expand contacts with other rural targeted prevention workers. Through networking and combined collaborative efforts, new and improved strategies will be encouraged and implemented to encourage safer sex and harm reduction messages through newsletters, chat rooms, and emails with men cruising the web for sex and for relationships.

d.2 El Dorado County Public Health Department (EDCPHD), Health Promotions Division (HP), will continue to financially support the production and distribution of the SGMN and Elevation6250FT newsletters, SGMN web site,

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message boards, chat rooms, and other future e-based or printed communications to gay/bisexual/MSM in EDC. Staff will assist in providing education, prevention information, and linkages, but will not assume editorial privilege.

d.3 HP staff will use these mediums to invite comments and direction to further E&P targeted prevention activities for MSM, as well as recruit new members, and encourage participation in local implementation group (LIG) meetings.

d.4 Upcoming gatherings to reduce isolation for gay/bisexual/MSM will be advertised via newsletters, web site, chat rooms, message boards, and phone calls utilizing key contact people.

e. Evaluation:

e.1 Individuals choose to be added or retained on the mailing list after receiving complimentary issues of the newsletters. If the subscription list remains the same or increases, this would be a measure of success.

e.2 Documented increased hits on the web site indicates growing awareness of its existence and value to web surfers.

e.3 Responses to the editors by email, letters, phone calls, and face-to-face conversations, indicate that individuals are reading the newsletters and visiting the web site.

e.4 People may (or may not) show up for the gatherings to reduce isolation (especially depending on who's coming or if it's Gay Pride month in the big cities). If the number of people attending isolation reduction events remain constant or increases, the event is likely to continue over time. This would be considered a success.

e.5 The newsletters are supported at the rate of \$75.00 per month for each newsletter for health advertising in each issue. The web site, www.sgm.org, is supported through similar URL advertising links to the EDCPHD web site. HEC staff time for research, referrals, phone calls, emails, and face-to-face visitation occurs weekly and varies by issue and deadlines.

e.6 Various newsletters and hotlines targeting MSM in EDC have come and gone over the last decade. The current newsletters will only be sustained if the readership approves and encourages them. The last year has shown great success as measured by increased distribution and web statistics and the number of hits on www.sgm.org.

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Objective #1C: Health Needs of Gay/MSM

The HEC and Community Services Program Assistant (CSPA) will increase the marketing of EDCPHD clinical services to uninsured gay/MSM to meet more of their health needs. This includes hepatitis A virus and hepatitis B virus inoculations, HIV prevention counseling and testing, STD exams, smoking cessation, education and referrals, and condom/lube distribution to increase the number of gay/MSM from ten to 25 who receive medical services through the EDCPHD Placerville and SLT clinics.

Intervention Description for Objective #1C:

- a. **Summary:** This intervention is tied to continued and expanded high-risk behavior change campaign in both the newsletters and the web site, and includes advertising of Health Department (HD) services, with direct URL links to the EDCPHD web site and printed advertisements of HD services and phone numbers. Key informants, and opinion leaders, relay needs and complaints to E&P staff, who then have face-to-face interviews with clinic staff to improve and increase services. On-going provider monitoring helps to ensure that appropriate, high quality services are being delivered and course corrections implemented.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** 20 to 40 white and Latino Gay/MSM, especially those who are uninsured
- d. **Key Activities:**
 - d.1 HEC and volunteers will continue to create monthly advertisements and articles related to gay men's health issues in Elevation6250FT and SGMN newsletters and web site.
 - d.2 HP staff will continue with one-on-one, as well as group, discussions with local MSM regarding their medical needs. HEC will meet informally with clinic staff periodically to access their experiences and needs in working with gay male patients. Verbal and printed information will be given to clinicians.
 - d.3 HP staff will continue informal monthly discussions with HD clinical staff to improve their understanding of gay lifestyles and attitudes in expectation of improving their comfort level in working with gay/MSM patients. If requested by staff, some local gay men have volunteered to talk with them during a scheduled staff meeting.
- e. **Evaluation:**

NOTE: There is no current way to track sexual orientation demographics through EDCPHD reporting, except through Office of AIDS HIV testing Client Information Forms report.

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e.1 Gay/MSM individuals will verbally report to HP staff or newsletter editors that they have accessed services at the EDCPHD as a result of reading about services through the newsletters, web site, and paid advertisements.

e.2 The HEC will continue to work closely with epidemiologists, laboratory, and clinical staff at EDCPHD, and Office of AIDS to note the following indicators of increased risk behaviors, especially unprotected sex:

1. Increased syphilis seroprevalence detected in men, especially MSM.
2. Increased HIV seroprevalence detected in men, especially MSM.

Objective #1D: HP staff will support the planning and advertising of local monthly gatherings to reduce isolation for gay/bisexual men at private and public places in EDC and surrounding counties to encourage new isolation reduction opportunities, increase communication, and reduce high-risk behavior. Staff and volunteers will assist in the advertising through the distribution of newsletters by mail, web site, hand delivery, emails, and personal invitations to increase MSM/gay/bisexual men's awareness of these isolation reduction events in and around EDC.

Intervention Description for Objective #1D:

a. Summary: Monthly potlucks are regularly scheduled for second Saturdays at various parks and homes in EDC, and are advertised through SGMN newsletters, web site, as well as Yahoo Groups. These events are social, and may include videos and discussions that will result in a reduction in high-risk behavior and provide an opportunity to engage in HIV harm reduction education.

b. Type of Intervention: Health Communication/Public Information

c. Risk Population/Target Size: Approximately 200 to 300 white and Latino Gay/MSM

d. Key Activities:

d.1 HP staff will help plan advertising and agendas for monthly isolation reduction gatherings by working with newsletter editors and other volunteers to write and distribute flyers, emails, and mailings. Condoms, condom key chains, and lubricants are supplied by staff for distribution to attendees by volunteers.

d.2 Other events, such as private screenings of the documentary video *The Gift*, will be discussed, planned, and advertised in newsletters and via the internet.

e. Evaluation:

e.1 The number of people that show up, interact, converse, have a good time, and bring friends will increase.

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- e.2 People network, coordinate, and collectively plan more events, and the future events are well attended.

GOAL #2: Teaching Tolerance in conjunction with Gay Straight Alliance (GSA) and Parents, Families and Friends of Lesbians and Gays (PFLAG)

This goal is focused on ending sexual orientation discrimination on high school campuses in EDC. The EDCPHD HEC will continue six years of networking and collaborative efforts with the local PFLAG, Placerville chapter, to educate EDC school staff and students about homophobia and tolerance for alternative lifestyles. There is a correlation between constant harassment regarding sexual identity and low self-esteem. People with low self-esteem do not care about the consequences of their behavior.

Objective# 2A: The HEC will continue to support the volunteer efforts of the Placerville PFLAG chapter, especially in their targeted prevention activities to Gay/Bisexual/Lesbian/Questioning (GBLQ) youth in EDC high schools. The HEC will meet with students at the local high school GSA and become involved in a partnership for tolerance education.

Intervention Description for Objective #2A:

- a. **Summary:** This objective is really about assisting EDC school districts' enforcement of California law AB 537 (Chapter 587, Statutes of 1999) by high school administrators and teachers. The goal is to reduce harassment and cease violence directed toward gay or perceived gay students. Success in this venture will be observed by reduced incidences of verbal name calling (i.e., fag, queer) on campus, and decreased reports of violence toward Gay/Bisexual/Lesbian/Queer/Questioning/Intersex (GBLQQI) youth and perceived gay students.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** GBLQQI Youth in all eight EDC high schools (frequently closeted; number unknown)
- d. **Key Activities:**
- d.1 The HEC will continue the following activities with PFLAG:
 - d.2 Maintain phone and personal contact with PFLAG members.
 - d.3 Go to monthly PFLAG meetings, including Executive Committee meetings.
 - d.4 Give individuals appropriate referrals to PFLAG volunteers.
 - d.5 Advertise PFLAG services, through school presentations and support for more interactive web site development and, as funding permits, assist in purchasing educational materials.

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PFLAG Volunteers will:

d.6 Monitor the Placerville PFLAG hotline (621-6700).

d.7 The chapter plans to continue to have an information booth at all the EDC high schools that host Senior Health Days.

d.8 PFLAG volunteers will continue their advocacy for GBLQ youth within EDC high schools by meeting with counselors and administrators.

d.9 HEC, PFLAG, and other gay volunteers will support the three GSA chapters on local high school campuses by attending meetings, serving as resources, talking with youth individually or in small groups.

d.10 Continue seeking gay local adult role models to meet with gay/bisexual/lesbian youth in order to reduce their sense of isolation and improve self-esteem and plans for the future.

d.11 Wherever possible, serve as (or recruit) advocates for youth who are suffering from emotional, verbal or physical abuse because they are gay or are perceived as being gay.

d.12 PFLAG volunteers will continue their advocacy for GBLQ youth enrolled in EDC high schools by meeting with counselors and administrators.

e. Evaluation:

Success in this venture will be observed by:

e.1 Reduced incidences of verbal name calling (i.e., fag, queer) on campus.

e.2 Decreased reports of violence toward gay and perceived gay students. This will include review of individual school district reports and possible hate crime reports by EDC Sheriff's Department.

e.3 Increased number of students who report to GSA students, advisors; school counselors; and/or teachers, that they are out among their peers.

Objective #2B: Schedule performances of The Other Side Of The Closet in EDC high schools during school year 2005-05.

Intervention Description for Objective #2B:

a. Summary: Continue with four years of effort to bring the Youth Aware Troupe of the New Conservatory Theatre (NCT) of San Francisco to EDC to perform The Other Side of the Closet at new high school campuses. Group discussions between the audience and the actors follow each performance. Additional discussions may continue in the classrooms. Teachers are given lesson plans for follow-up discussions developed by NCT staff.

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- b. Type of Intervention:** Health Communication/Public Information
- c. Risk Population/Target Size:** GBLQ youth and heterosexual youth in EDC high schools; 400 to 500 youth and school staff
- d. Key Activities:**
- d.1** Throughout the school year, the HEC will secure support from teachers, administrators, students, GSA chapters, local citizens, and local community based organizations (CBOs) to insure the success of multiple performances in October/November, 2005, of the NCT production of *The Other Side of the Closet* on various Western Slope high school campuses during the school day, as approved by the individual school principals. An information table will also be set up to disburse information on HIV/AIDS prevention/education.
- d.2** The HEC and EDCPHD Public Information Officer will work with local newspapers to develop human interest stories about the difficulties gays experienced growing up in the closet. PFLAG will encourage local newspapers to do articles profiling successful individuals who are out, as well as gay partnerships and families.
- d.3** The HEC and volunteers will recruit gay and lesbian adults and youth to speak on a local radio talk show or to groups of school teachers about being gay, coming out, slurs, tolerance, etc.
- d.4** The HEC will advertise the production and recruit volunteers and donations through the EL6250ft and SGMN newsletters and web site. "Would you help young gay youth avoid what you experienced as a teenager?" is a theme that often brings older gays in to volunteer.
- e. Evaluation:**
Success will be measured in the following ways:
- e.1** Two of four high school principals in the El Dorado Union High School District have agreed to have the play on campus during the 2005-2006 school year. These will be at least one daytime performance (with parent permission), or a voluntary attendance performance in the evening.
- e.2** Collect written comments from youth attending the performance. Publish these in local newspapers and newsletters.
- e.3** Encourage youth in GSA, or someone doing a senior project, to conduct a follow-up on their campus to assess the impact of the play after one to two months and again at the end of the school year. Did name calling, harassment, or beatings decrease?

Exhibit 2
Scope of Work – Year 2
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GOAL #3: Male And Female Incarcerated Population

Continue 16 years of cooperative and collaborative work with the EDC Sheriff's Department in the Placerville and SLT county jails doing HIV, hepatitis, and STD prevention education through the drug education program, Health Education Addiction Recovery Through Self-Responsibility (HEARTS). Also, work with the California Forensics Medical Group (CFMG) staff and correctional officers to conduct HIV prevention, counseling, and testing sessions with inmates who request it.

Objective #3A: On-going STD/HIV/Hepatitis Education, Referrals, and Testing

By June 30, 2006, 200 male and female EDC jail inmates enrolled in HEARTS will participate in STD, hepatitis, and HIV educational forums, and develop a personal plan to implement specific harm reduction techniques when they are on the outside. HIV prevention, counseling, and testing services will be offered to all inmates following group education classes.

Intervention Description for Objective #3A:

- a. **Summary:** Inmates volunteer, or are court mandated, to participate in the drug education program, HEARTS, which includes HIV/hepatitis/STD education every 12 weeks. The classes are separated by sex, and the class size varies from four to 16. The classes involve many questions and answers, discussions about street myths, harm reduction techniques, testing inside and out of incarceration, window period, risks with different kinds of sex, safer needle use, and personal plans after discharge. HIV-positive inmates are rarely seen in EDC jails and are usually in medical isolation by personal choice.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Incarcerated men and women, estimated at more than 90 percent substance users; Placerville Jail, Average Daily Log, 230 inmates; South Lake Tahoe Jail, Average 120 inmates
- d. **Key Activities:**
 - d.1 The bilingual CSPA will continue meeting with Spanish-speaking inmates in the SLT jail. Many incarcerated Latinos express fears about HIV testing in jail, so they are referred to the clinic when they are released. The CSPA offers private and individual counseling to Spanish named inmates in the SLT facility because they are not housed by which language they speak.
 - d.2 The HEC meets weekly with English speaking inmates in the Placerville jail who request individual HIV counseling and testing.
 - d.3 Referrals for STD exams are made to the CFMG staff based on active symptoms, and/or to the local Health Department clinicians, and the appropriate service providers upon release.

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d.4 The HEC is now doing HIV education through HEARTS in the women's pod in the Placerville facility instead of the classroom. All the women in the pod are invited to join, and this offer has doubled the attendance. The Inmate Services Officer has been strongly supportive of this new venture, and frequently sits in during the class. In educational sessions and discussions, their drug and alcohol use is addressed, especially their methamphetamine use (smoking, snorting, and/or injection), and practical harm reduction techniques. Hepatitis education remains important due to their reported and/or projected high incidence of hepatitis C virus. Referrals will be made to EDCPHD and other clinics for STD and women's health services, as well as hepatitis B inoculation.

d.5 The HEARTS program in the Placerville jail is taught by a counselor from Progress House; in the SLT jail, the program is coordinated by Sierra Recovery Center. The HEC will continue to assist the two HEARTS Drug Education Program Coordinators in the Placerville and SLT facilities by conducting quarterly interactive AIDS, STD, and hepatitis education sessions with men and women during each 12 week cycle of education.

d.6 The HEC will continue to support HEARTS graduates as they continue in both inpatient and outpatient treatment at Progress House and Sierra Recovery Center. The HEC may continue these relationships through work at the Alcohol and Other Drugs CBOs for up to a year or more.

d.7 Inmates are referred to their local health departments for STD workups through the PACT (Family Planning Access Care Treatment) program, which will then qualify them for hepatitis B virus inoculations. Through a new program at the EDCPHD, any adult can request hepatitis A virus inoculation for a fee of \$26.00. HEC will continue to press for hepatitis c virus testing at the EDCPHD.

e. Evaluation:

e.1 Numbers of inmates educated.

e.2 Feedback from inmates and drug counselor(s).

GOAL #4: Targeted Prevention Activities To Latino Youth And Adults

The goal is to provide basic education about sexuality, HIV and other diseases, and self-protection in schools, English as a Second Language (ESL) classes, and other places where Spanish-speaking people gather. Many Spanish-speaking people in SLT have emigrated from Mexico and have limited education (sixth to eighth grade). This target group is in need of basic information about human biology, anatomy, sexuality, and reproduction, as well as information about STDs. Cultural and religious beliefs are often strong and must be respected as information about SIDA (Spanish for AIDS) is taught. Traditionally, the men have all the authoritative power and the women must not speak about sex and health related concerns. Issues of empowerment and harm reduction techniques are challenging subject to discuss.

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Intervention Description for Objective #4A:

- a. Summary:** By June 30, 2006, the bilingual CSPA will meet with 100 to 150 Spanish-speaking people in SLT through Women, Infants and Children (WIC), ESL classes, and informal street targeted prevention activities to teach about SIDA and how to protect themselves from STDs, hepatitis, and HIV infections. Referrals to EDCPHD will be made as needed.
- b. Types of Intervention:** Group Level Intervention
- c. Risk Population/Target Size:** New immigrant Spanish-speaking youth and adults in SLT (Total population estimated 10,000 to 12,000 Hispanic residents of South Shore)
- d. Key Activities:**
- d.1** The HIV CSPA will visit South Tahoe Middle School and South Tahoe High School ESL classes each semester to do presentations on family planning, HIV, STDs, and hepatitis.
- d.2** Targeted prevention activities to adults enrolled in ESL classes each semester at Lake Tahoe Community College and Family Resource Center which will include STD, HIV, and hepatitis education, prevention, and testing, as well as referrals to the clinic for birth control, inoculations, and other services. These students will be encouraged to talk to their friends and family, and refer at-risk individuals for HIV testing at Family Resource Center, EDCPHD SLT clinic, or elsewhere by private arrangement with the CSPA.
- d.3** The CSPA will meet quarterly with other on-going groups at Family Resource Center including ESL classes, Mothers' Support group, computer classes, and present information about SIDA, answer questions about sexuality, STDs, and refer to the local health department services.
- d.4** The CSPA will meet quarterly with Spanish-speaking parents enrolled in SLT WIC, present information about SIDA, and answer questions about sexuality, STDs, and health department services.
- d.5** The CSPA will provide HIV information and referral services at ski resort health and hiring fairs during the ski season. As available, the CSPA will provide an interactive information booth at the following annual events: South Tahoe High School Senior Health Fair, Barton Hospital Health Fair, and casino employee health fairs.
- e. Evaluation:**
- e.1** Increased numbers for HIV testing of Hispanic SLT residents.
- e.2** Increased numbers of Hispanic patients at EDCPHD SLT.

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- e.3 No increase in new HIV/STD infections of Hispanic SLT residents.
- e.4 Increased numbers attending the information presentations.

GOAL # 5: Prevention With Positives

The HEC and CSPA will coordinate with Sierra Foothills AIDS Foundation (SFAF) Service Coordinators to work with HIV-positive individuals and couples (and possibly small groups) to help them develop plans for reducing their risks of infecting their sexual and needle sharing partners. The focus will be on helping individuals decide how to make incremental changes in their thinking and behavior in order to minimize the spread of HIV.

Objective #5A: By June 30, 2006, the HEC and CSPA will meet and work with SFAF's Service Coordinators to develop plans for 15 to 20 HIV-positive clients to help them develop or improve their risk reduction plans in order to decrease the chance of infecting others. The focus will be on communication, commitment, accessing local resources, and the impact of drugs, alcohol, and depression on those plans.

Intervention Description for Objective #5A:

a. **Summary:** Working in a large rural community, where most gays and HIV-people remain closeted, presents different challenges than the well funded Best Practices program developed in metropolitan areas. Many of the HIV-positive people in EDC are isolated, depressed, closed to others talking to them about HIV, and distrustful of government funded personnel. Therefore, most of this work will be conducted through the HEC and CSPA's long association with the Service Coordinators of SFAF. The Service Coordinators meets regularly with about 80 EDC clients are living with HIV. Newly discovered HIV-positive residents are immediately referred to SFAF Service Coordinators. The Service Coordinators are always working with clients on personalized risk reduction goals. Both Service Coordinators have been trained to use client centered counseling methods. Both Service Coordinators regularly work with clients on harm reduction techniques, review of barriers and contingencies, and identifying supporters for helping them decide how to make incremental changes in their behavior in order to reduce the risks of infecting their partners. Due to confidentiality limitations, HD staff cannot meet with these clients unless the clients request to do so. To date, no clients have responded to multiple offers to meet for any reason, either individually or in groups.

b. **Types of Intervention:** Individual Level Intervention
(We may not be able to document this, due to Confidentiality, and the already high number of clients and forms that Service Coordinators must manage)

c. **Risk Population/Target Size:** Estimate 100 HIV-positive people in EDC
Primarily white, middle aged, MSM; some MSM Latino, most in SLT

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d. Key Activities:

- d.1** While respecting issues of confidentiality, the HEC and CSPA will continue to meet or talk with the SFAF Ryan White CARE Service Coordinators on a weekly or monthly basis.
- d.2** Some new relationships with the HEC may be developed through HIV-positive people volunteering to attend Ryan White Services Committee/Local Implementation Group (LIG) meetings. Historically, very few SFAF clients attend.
- d.3** Continue notification of regional HIV services and education planning meetings by select confidential mailing lists (including mailings to clients by SFAF Service Coordinators), email, newsletters, word of mouth, and face-to-face encounters.
- d.4** HIV-positive individuals and discordant couples have historically declined all offers to meet by phone or in person with staff from the AIDS E&P team to discuss their beliefs, feelings, addictions, and behaviors that put their sex partners and/or needle-sharing partners at risk for HIV infection. This harm reduction effort is continued monthly by the SFAF Service Coordinators, and will be supported, as needed, by AIDS E&P staff.
- d.5** The AIDS E&P staff will work with the staffs of SFAF, Progress House, El Dorado Council on Alcoholism Lifeskills Program, Sierra Resource Center, Gates Recovery, and the jail correctional officers and juvenile hall counselors, as well as the CFMG medical staff, to meet HIV-positive clients and inmates.
- d.6** The AIDS E&P staff and the SFAF Service Coordinators are all trained HIV prevention counselors. HIV testing is conducted at SFAF offices, among many other alternative sites.
- d.7** The HEC and CSPA will assist with HIV testing and counseling of drug treatment clients and staff, as well as inmates enrolled in the HEARTS drug treatment program, and inmates in the general population. This on site testing will provide an opportunity to discover unknown HIV-positive people. All newly diagnosed people will be connected with SFAF Service Coordinators in SLT and Placerville for complete assessments and appropriate referrals while they are still in jail or drug treatment.
- d.8** The HEC will work with SFAF Service Coordinators, as needed, in conducting support groups for newly diagnosed clients, or other groups that may be created from expressed need or interest of other clients.
- d.9** A local HIV-positive man has recently attempted to start a group, and found only three people interested. The HEC will work with him to specifically

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target more HIV-positive individuals and advertise activities that may be attractive to them. Their transportation needs will also be addressed.

NOTE: DRUG TREATMENT PROGRAMS EDCPHD AIDS E&P staff have been collaborating with the court mandated drug treatment and voluntary outpatient programs for over 16 years, and have excellent relationships with the staff of each agency. The AIDS E&P staff has discontinued all outpatient classes, but will continue working with residential clients and staff at Progress House and Sierra Recovery Center under a mix of Substance Abuse Prevention and Treatment Basic Training Grant (SABTBG) funding, HIV Prevention Counseling and Testing, and AIDS E&P. Staff of all EDC drug treatment programs will be updated on HIV, STD, and hepatitis at their request. The HEC coordinates and instructs HIV Prevention Counseling and Testing classes for drug treatment counselors. Tahoe Youth and Family Services is resuming HIV testing of clients, and the new staff will be trained, supplied with materials for testing, and supported in working with difficult or HIV-positive clients.

GOAL #6: School Targeted Prevention Activities

By June 30, 2006, approximately 300 to 400 EDC youth will participate in interactive expanded HIV education. This will include encouraging STD and HIV testing, seeking effective birth control methods as appropriate, developing buddy systems, safer decision making especially when loaded, choosing sexual partners carefully, being abstinent, and realistic harm reduction techniques.

a. Key Activities:

a.1 Continue participation with the local CBOs, at the Senior Health Fair at South Tahoe High School in February, 2006, and Black Oak Mine School District, Golden Sierra High School, with an information table, handouts, and interactive activities. PFLAG and volunteers from the two Hepatitis C support groups also participate, as well as other HD staff.

a.2 Develop a Senior Health Fair at the other schools within the El Dorado Union High School District (4 high schools) as support within the schools and as time allows. Continue to talk to local CBOs, private service providers, health committees, school nurses, and health teachers in other high schools about scheduling Health Fairs during the second semester of the school year as a refresher for graduating seniors.

a.3 Conduct HIV/STD/hepatitis education each semester in Human Sexuality classes at Folsom Lake College campus, El Dorado Center in Placerville and the Folsom campus, and Lake Tahoe Community College in SLT.

a.4 As possible, assist at educational booths on various college campuses at annual events, such as Day of Diversity, World AIDS Day, Valentine's Day, etc.

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II. OTHER SERVICES

GOAL: Community planning; to increase the effectiveness of HIV prevention activities in El Dorado County.

Objective: By June 30, 2006, the EDC health jurisdiction will conduct quarterly regional implementation group meetings with Placer and Nevada counties to develop, review, and assess the HIV education/prevention activities.

a. Key Activities:

a.1 Announcements of the quarterly meetings will be advertised through SFAF mailings to clients by Case Managers, SGMN newsletters and web site, EL6250FT newsletter, emails, message boards, word of mouth, and general mailings.

a.2 The location of each meeting will rotate from city to city to enable more consumers to attend.

a.3 Opinions of concerned EDC citizens is solicited at local drug treatment programs, jails, high schools, especially GSA clubs, PFLAG meetings, HCV Task Force meetings, Perinatal Council meetings, HD staff meetings, and via key informants and opinion leaders to assist the EDC program representatives in providing the best services possible.

a.4 Member recruitment is on going, mail and e-mail lists are expanded at each quarterly meeting as new community members attend.

a.5 People who cannot attend meetings are asked to phone or email their ideas and opinions to others who will speak for them at the meetings.

b. Evaluation: Member and guest sign-in sheets will be maintained, as well as minutes of the meetings. Email lists will be updated after each meeting. The overall effectiveness of the community planning process will be evaluated by the number of members attending the Spring quarterly meeting.

NOTE: The AIDS Education and Prevention Program (E&P) operates within the Health Promotions Division (HP) of the El Dorado County Public Health Department (EDCPHD). There are no subcontractors.

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I. CLIENT SERVICES

GOAL #1: The AIDS Education and Prevention Program (E&P) staff will continue with over sixteen years of efforts to help men who have sex with men (MSM), whether gay/bisexual identified or not, to reduce social isolation and improve their access to health care in this large rural and generally gay unfriendly county. It is generally accepted that continued isolation leads to depression and increased high-risk behavior that may result in increased HIV and sexually transmitted infections. Our goal is to assist 100 to 200 El Dorado County (EDC) gay/bisexual men and other MSM to connect socially and through recreational activities on the Western Slope and South Lake Tahoe (SLT).

Objective #1A: By June 30, 2007, the Health Education Coordinator (HEC) will assist two volunteer editors to publish two newsletters and increase their distribution from approximately 200 to 300 gay identified men and other MSM in and around EDC.

Objective #1B: The HEC will communicate weekly with the webmaster to support resources and prevention education to be included in the expansion of the Sierra Gay Men's Network (SGMN) through the internet. This cyber targeted prevention activity is effective for many closeted local MSM of various ages and will include continued networking with organizations in surrounding rural counties, Sacramento, and Reno.

Intervention Description for Objective #1A and #1B:

- a. **Summary:** Elevation6250FT is a tolerance and diversity focused monthly newsletter distributed in and around SLT. The SGMN monthly newsletter is targeted to gay men living in and around EDC. SGMN's newsletter is distributed in both hardcopy and via the SGMN web site. The web site, www.sgmnet.org, has many connections to various search engines, resource links, and has received over 50,000 hits and 2,500 visits between November, 2003 and April, 2004, according to the web statistics.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Approximately 300 white and Latino gay/bisexual/MSM
- d. **Key Activities:**
 - d.1 HEC and volunteers will continue to maintain and expand contacts with other rural targeted prevention workers. Through networking and combined collaborative efforts, new and improved strategies will be encouraged and implemented to encourage safer sex and harm reduction messages through newsletters, chat rooms, and emails with men cruising the web for sex and for relationships.
 - d.2 El Dorado County Public Health Department (EDCPHD), Health Promotions Division (HP), will continue to financially support the production and distribution of the SGMN and Elevation6250FT newsletters, SGMN web site,

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message boards, chat rooms, and other future e-based or printed communications to gay/bisexual/MSM in EDC. Staff will assist in providing education, prevention information, and linkages, but will not assume editorial privilege.

d.3 HP staff will use these mediums to invite comments and direction to further E&P targeted prevention activities for MSM, as well as recruit new members, and encourage participation in local implementation group (LIG) meetings.

d.4 Upcoming gatherings to reduce isolation for gay/bisexual/MSM will be advertised via newsletters, web site, chat rooms, message boards, and phone calls utilizing key contact people.

e. Evaluation:

e.1 Individuals choose to be added or retained on the mailing list after receiving complimentary issues of the newsletters. If the subscription list remains the same or increases, this would be a measure of success.

e.2 Documented increased hits on the web site indicates growing awareness of its existence and value to web surfers.

e.3 Responses to the editors by email, letters, phone calls, and face-to-face conversations, indicate that individuals are reading the newsletters and visiting the web site.

e.4 People may (or may not) show up for the gatherings to reduce isolation (especially depending on who's coming or if it's Gay Pride month in the big cities). If the number of people attending isolation reduction events remain constant or increases, the event is likely to continue over time. This would be considered a success.

e.5 The newsletters are supported at the rate of \$75.00 per month for each newsletter for health advertising in each issue. The web site, www.sqmn.org, is supported through similar URL advertising links to the EDCPHD web site. HEC staff time for research, referrals, phone calls, emails, and face-to-face visitation occurs weekly and varies by issue and deadlines.

e.6 Various newsletters and hotlines targeting MSM in EDC have come and gone over the last decade. The current newsletters will only be sustained if the readership approves and encourages them. The last year has shown great success as measured by increased distribution and web statistics and the number of hits on www.sqmn.org.

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Objective #1C: Health Needs of Gay/MSM

The HEC and Community Services Program Assistant (CSPA) will increase the marketing of EDCPHD clinical services to uninsured gay/MSM to meet more of their health needs. This includes hepatitis A virus and hepatitis B virus inoculations, HIV prevention counseling and testing, STD exams, smoking cessation, education and referrals, and condom/lube distribution to increase the number of gay/MSM from ten to 25 who receive medical services through the EDCPHD Placerville and SLT clinics.

Intervention Description for Objective #1C:

- a. **Summary:** This intervention is tied to continued and expanded high-risk behavior change campaign in both the newsletters and the web site, and includes advertising of Health Department (HD) services, with direct URL links to the EDCPHD web site and printed advertisements of HD services and phone numbers. Key informants, and opinion leaders, relay needs and complaints to E&P staff, who then have face-to-face interviews with clinic staff to improve and increase services. On-going provider monitoring helps to ensure that appropriate, high quality services are being delivered and course corrections implemented.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** 20 to 40 white and Latino Gay/MSM, especially those who are uninsured
- d. **Key Activities:**
 - d.1 HEC and volunteers will continue to create monthly advertisements and articles related to gay men's health issues in Elevation6250FT and SGMN newsletters and web site.
 - d.2 HP staff will continue with one-on-one, as well as group, discussions with local MSM regarding their medical needs. HEC will meet informally with clinic staff periodically to access their experiences and needs in working with gay male patients. Verbal and printed information will be given to clinicians.
 - d.3 HP staff will continue informal monthly discussions with HD clinical staff to improve their understanding of gay lifestyles and attitudes in expectation of improving their comfort level in working with gay/MSM patients. If requested by staff, some local gay men have volunteered to talk with them during a scheduled staff meeting.
- e. **Evaluation:**

NOTE: There is no current way to track sexual orientation demographics through EDCPHD reporting, except through Office of AIDS HIV testing Client Information Forms report.

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e.1 Gay/MSM individuals will verbally report to HP staff or newsletter editors that they have accessed services at the EDCPHD as a result of reading about services through the newsletters, web site, and paid advertisements.

e.2 The HEC will continue to work closely with epidemiologists, laboratory, and clinical staff at EDCPHD, and Office of AIDS to note the following indicators of increased risk behaviors, especially unprotected sex:

1. Increased syphilis seroprevalence detected in men, especially MSM.
2. Increased HIV seroprevalence detected in men, especially MSM.

Objective #1D: HP staff will support the planning and advertising of local monthly gatherings to reduce isolation for gay/bisexual men at private and public places in EDC and surrounding counties to encourage new isolation reduction opportunities, increase communication, and reduce high-risk behavior. Staff and volunteers will assist in the advertising through the distribution of newsletters by mail, web site, hand delivery, emails, and personal invitations to increase MSM/gay/bisexual men's awareness of these isolation reduction events in and around EDC.

Intervention Description for Objective #1D:

a. Summary: Monthly potlucks are regularly scheduled for second Saturdays at various parks and homes in EDC, and are advertised through SGMN newsletters, web site, as well as Yahoo Groups. These events are social, and may include videos and discussions that will result in a reduction in high-risk behavior and provide an opportunity to engage in HIV harm reduction education.

b. Type of Intervention: Health Communication/Public Information

c. Risk Population/Target Size: Approximately 200 to 300 white and Latino Gay/MSM

d. Key Activities:

d.1 HP staff will help plan advertising and agendas for monthly isolation reduction gatherings by working with newsletter editors and other volunteers to write and distribute flyers, emails, and mailings. Condoms, condom key chains, and lubricants are supplied by staff for distribution to attendees by volunteers.

d.2 Other events, such as private screenings of the documentary video *The Gift*, will be discussed, planned, and advertised in newsletters and via the internet.

e. Evaluation:

e.1 The number of people that show up, interact, converse, have a good time, and bring friends will increase.

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e.2 People network, coordinate, and collectively plan more events, and the future events are well attended.

GOAL #2: Teaching Tolerance in conjunction with Gay Straight Alliance (GSA) and Parents, Families and Friends of Lesbians and Gays (PFLAG)

This goal is focused on ending sexual orientation discrimination on high school campuses in EDC. The EDCPHD HEC will continue six years of networking and collaborative efforts with the local PFLAG, Placerville chapter, to educate EDC school staff and students about homophobia and tolerance for alternative lifestyles. There is a correlation between constant harassment regarding sexual identity and low self-esteem. People with low self-esteem do not care about the consequences of their behavior.

Objective# 2A: The HEC will continue to support the volunteer efforts of the Placerville PFLAG chapter, especially in their targeted prevention activities to Gay/Bisexual/Lesbian/Questioning (GBLQ) youth in EDC high schools. The HEC will meet with students at the local high school GSA and become involved in a partnership for tolerance education.

Intervention Description for Objective #2A:

- a. **Summary:** This objective is really about assisting EDC school districts' enforcement of California law AB 537 (Chapter 587, Statutes of 1999) by high school administrators and teachers. The goal is to reduce harassment and cease violence directed toward gay or perceived gay students. Success in this venture will be observed by reduced incidences of verbal name calling (i.e., fag, queer) on campus, and decreased reports of violence toward Gay/Bisexual/Lesbian/Queer/Questioning/Intersex (GBLQQI) youth and perceived gay students.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** GBLQQI Youth in all eight EDC high schools (frequently closeted; number unknown)
- d. **Key Activities:**
 - d.1 The HEC will continue the following activities with PFLAG:
 - d.2 Maintain phone and personal contact with PFLAG members.
 - d.3 Go to monthly PFLAG meetings, including Executive Committee meetings.
 - d.4 Give individuals appropriate referrals to PFLAG volunteers.
 - d.5 Advertise PFLAG services, through school presentations and support for more interactive web site development and, as funding permits, assist in purchasing educational materials.

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PFLAG Volunteers will:

d.6 Monitor the Placerville PFLAG hotline (621-6700).

d.7 The chapter plans to continue to have an information booth at all the EDC high schools that host Senior Health Days.

d.8 PFLAG volunteers will continue their advocacy for GBLQ youth within EDC high schools by meeting with counselors and administrators.

d.9 HEC, PFLAG, and other gay volunteers will support the three GSA chapters on local high school campuses by attending meetings, serving as resources, talking with youth individually or in small groups.

d.10 Continue seeking gay local adult role models to meet with gay/bisexual/lesbian youth in order to reduce their sense of isolation and improve self-esteem and plans for the future.

d.11 Wherever possible, serve as (or recruit) advocates for youth who are suffering from emotional, verbal or physical abuse because they are gay or are perceived as being gay.

d.12 PFLAG volunteers will continue their advocacy for GBLQ youth enrolled in EDC high schools by meeting with counselors and administrators.

e. Evaluation:

Success in this venture will be observed by:

e.1 Reduced incidences of verbal name calling (i.e., fag, queer) on campus.

e.2 Decreased reports of violence toward gay and perceived gay students. This will include review of individual school district reports and possible hate crime reports by EDC Sheriff's Department.

e.3 Increased number of students who report to GSA students, advisors; school counselors; and/or teachers, that they are out among their peers.

Objective #2B: Schedule performances of The Other Side Of The Closet in EDC high schools during school year 2006-05.

Intervention Description for Objective #2B:

a. Summary: Continue with four years of effort to bring the Youth Aware Troupe of the New Conservatory Theatre (NCT) of San Francisco to EDC to perform The Other Side of the Closet at new high school campuses. Group discussions between the audience and the actors follow each performance. Additional discussions may continue in the classrooms. Teachers are given lesson plans for follow-up discussions developed by NCT staff.

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- b. Type of Intervention:** Health Communication/Public Information
- c. Risk Population/Target Size:** GBLQ youth and heterosexual youth in EDC high schools; 400 to 500 youth and school staff
- d. Key Activities:**
- d.1** Throughout the school year, the HEC will secure support from teachers, administrators, students, GSA chapters, local citizens, and local community based organizations (CBOs) to insure the success of multiple performances in October/November, 2006, of the NCT production of *The Other Side of the Closet* on various Western Slope high school campuses during the school day, as approved by the individual school principals. An information table will also be set up to disburse information on HIV/AIDS prevention/education.
- d.2** The HEC and EDCPHD Public Information Officer will work with local newspapers to develop human interest stories about the difficulties gays experienced growing up in the closet. PFLAG will encourage local newspapers to do articles profiling successful individuals who are out, as well as gay partnerships and families.
- d.3** The HEC and volunteers will recruit gay and lesbian adults and youth to speak on a local radio talk show or to groups of school teachers about being gay, coming out, slurs, tolerance, etc.
- d.4** The HEC will advertise the production and recruit volunteers and donations through the EL6250ft and SGMN newsletters and web site. "Would you help young gay youth avoid what you experienced as a teenager?" is a theme that often brings older gays in to volunteer.
- e. Evaluation:**
Success will be measured in the following ways:
- e.1** Two of four high school principals in the El Dorado Union High School District have agreed to have the play on campus during the 2006-2007 school year. These will be at least one daytime performance (with parent permission), or a voluntary attendance performance in the evening.
- e.2** Collect written comments from youth attending the performance. Publish these in local newspapers and newsletters.
- e.3** Encourage youth in GSA, or someone doing a senior project, to conduct a follow-up on their campus to assess the impact of the play after one to two months and again at the end of the school year. Did name calling, harassment, or beatings decrease?

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GOAL #3: Male And Female Incarcerated Population

Continue 16 years of cooperative and collaborative work with the EDC Sheriff's Department in the Placerville and SLT county jails doing HIV, hepatitis, and STD prevention education through the drug education program, Health Education Addiction Recovery Through Self-Responsibility (HEARTS). Also, work with the California Forensics Medical Group (CFMG) staff and correctional officers to conduct HIV prevention, counseling, and testing sessions with inmates who request it.

Objective #3A: On-going STD/HIV/Hepatitis Education, Referrals, and Testing

By June 30, 2007, 200 male and female EDC jail inmates enrolled in HEARTS will participate in STD, hepatitis, and HIV educational forums, and develop a personal plan to implement specific harm reduction techniques when they are on the outside. HIV prevention, counseling, and testing services will be offered to all inmates following group education classes.

Intervention Description for Objective #3A:

- a. **Summary:** Inmates volunteer, or are court mandated, to participate in the drug education program, HEARTS, which includes HIV/hepatitis/STD education every 12 weeks. The classes are separated by sex, and the class size varies from four to 16. The classes involve many questions and answers, discussions about street myths, harm reduction techniques, testing inside and out of incarceration, window period, risks with different kinds of sex, safer needle use, and personal plans after discharge. HIV-positive inmates are rarely seen in EDC jails and are usually in medical isolation by personal choice.
- b. **Type of Intervention:** Health Communication/Public Information
- c. **Risk Population/Target Size:** Incarcerated men and women, estimated at more than 90 percent substance users; Placerville Jail, Average Daily Log, 230 inmates; South Lake Tahoe Jail, Average 120 inmates
- d. **Key Activities:**
 - d.1 The bilingual CSPA will continue meeting with Spanish-speaking inmates in the SLT jail. Many incarcerated Latinos express fears about HIV testing in jail, so they are referred to the clinic when they are released. The CSPA offers private and individual counseling to Spanish named inmates in the SLT facility because they are not housed by which language they speak.
 - d.2 The HEC meets weekly with English speaking inmates in the Placerville jail who request individual HIV counseling and testing.
 - d.3 Referrals for STD exams are made to the CFMG staff based on active symptoms, and/or to the local Health Department clinicians, and the appropriate service providers upon release.

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d.4 The HEC is now doing HIV education through HEARTS in the women's pod in the Placerville facility instead of the classroom. All the women in the pod are invited to join, and this offer has doubled the attendance. The Inmate Services Officer has been strongly supportive of this new venture, and frequently sits in during the class. In educational sessions and discussions, their drug and alcohol use is addressed, especially their methamphetamine use (smoking, snorting, and/or injection), and practical harm reduction techniques. Hepatitis education remains important due to their reported and/or projected high incidence of hepatitis C virus. Referrals will be made to EDCPHD and other clinics for STD and women's health services, as well as hepatitis B inoculation.

d.5 The HEARTS program in the Placerville jail is taught by a counselor from Progress House; in the SLT jail, the program is coordinated by Sierra Recovery Center. The HEC will continue to assist the two HEARTS Drug Education Program Coordinators in the Placerville and SLT facilities by conducting quarterly interactive AIDS, STD, and hepatitis education sessions with men and women during each 12 week cycle of education.

d.6 The HEC will continue to support HEARTS graduates as they continue in both inpatient and outpatient treatment at Progress House and Sierra Recovery Center. The HEC may continue these relationships through work at the Alcohol and Other Drugs CBOs for up to a year or more.

d.7 Inmates are referred to their local health departments for STD workups through the PACT (Family Planning Access Care Treatment) program, which will then qualify them for hepatitis B virus inoculations. Through a new program at the EDCPHD, any adult can request hepatitis A virus inoculation for a fee of \$26.00. HEC will continue to press for hepatitis c virus testing at the EDCPHD.

e. Evaluation:

e.1 Numbers of inmates educated.

e.2 Feedback from inmates and drug counselor(s).

GOAL #4: Targeted Prevention Activities To Latino Youth And Adults

The goal is to provide basic education about sexuality, HIV and other diseases, and self-protection in schools, English as a Second Language (ESL) classes, and other places where Spanish-speaking people gather. Many Spanish-speaking people in SLT have emigrated from Mexico and have limited education (sixth to eighth grade). This target group is in need of basic information about human biology, anatomy, sexuality, and reproduction, as well as information about STDs. Cultural and religious beliefs are often strong and must be respected as information about SIDA (Spanish for AIDS) is taught. Traditionally, the men have all the authoritative power and the women must not speak about sex and health related concerns. Issues of empowerment and harm reduction techniques are challenging subject to discuss.

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Intervention Description for Objective #4A:

- a. **Summary:** By June 30, 2007, the bilingual CSPA will meet with 100 to 150 Spanish-speaking people in SLT through Women, Infants and Children (WIC), ESL classes, and informal street targeted prevention activities to teach about SIDA and how to protect themselves from STDs, hepatitis, and HIV infections. Referrals to EDCPHD will be made as needed.
- b. **Types of Intervention:** Group Level Intervention
- c. **Risk Population/Target Size:** New immigrant Spanish-speaking youth and adults in SLT (Total population estimated 10,000 to 12,000 Hispanic residents of South Shore)
- d. **Key Activities:**
- d.1 The HIV CSPA will visit South Tahoe Middle School and South Tahoe High School ESL classes each semester to do presentations on family planning, HIV, STDs, and hepatitis.
- d.2 Targeted prevention activities to adults enrolled in ESL classes each semester at Lake Tahoe Community College and Family Resource Center which will include STD, HIV, and hepatitis education, prevention, and testing, as well as referrals to the clinic for birth control, inoculations, and other services. These students will be encouraged to talk to their friends and family, and refer at-risk individuals for HIV testing at Family Resource Center, EDCPHD SLT clinic, or elsewhere by private arrangement with the CSPA.
- d.3 The CSPA will meet quarterly with other on-going groups at Family Resource Center including ESL classes, Mothers' Support group, computer classes, and present information about SIDA, answer questions about sexuality, STDs, and refer to the local health department services.
- d.4 The CSPA will meet quarterly with Spanish-speaking parents enrolled in SLT WIC, present information about SIDA, and answer questions about sexuality, STDs, and health department services.
- d.5 The CSPA will provide HIV information and referral services at ski resort health and hiring fairs during the ski season. As available, the CSPA will provide an interactive information booth at the following annual events: South Tahoe High School Senior Health Fair, Barton Hospital Health Fair, and casino employee health fairs.
- e. **Evaluation:**
- e.1 Increased numbers for HIV testing of Hispanic SLT residents.
- e.2 Increased numbers of Hispanic patients at EDCPHD SLT.

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- e.3 No increase in new HIV/STD infections of Hispanic SLT residents.
- e.4 Increased numbers attending the information presentations.

GOAL # 5: Prevention With Positives

The HEC and CSPA will coordinate with Sierra Foothills AIDS Foundation (SFAF) Service Coordinators to work with HIV-positive individuals and couples (and possibly small groups) to help them develop plans for reducing their risks of infecting their sexual and needle sharing partners. The focus will be on helping individuals decide how to make incremental changes in their thinking and behavior in order to minimize the spread of HIV.

Objective #5A: By June 30, 2007, the HEC and CSPA will meet and work with SFAF's Service Coordinators to develop plans for 15 to 20 HIV-positive clients to help them develop or improve their risk reduction plans in order to decrease the chance of infecting others. The focus will be on communication, commitment, accessing local resources, and the impact of drugs, alcohol, and depression on those plans.

Intervention Description for Objective #5A:

a. Summary: Working in a large rural community, where most gays and HIV-people remain closeted, presents different challenges than the well funded Best Practices program developed in metropolitan areas. Many of the HIV-positive people in EDC are isolated, depressed, closed to others talking to them about HIV, and distrustful of government funded personnel. Therefore, most of this work will be conducted through the HEC and CSPA's long association with the Service Coordinators of SFAF. The Service Coordinators meets regularly with about 80 EDC clients are living with HIV. Newly discovered HIV-positive residents are immediately referred to SFAF Service Coordinators. The Service Coordinators are always working with clients on personalized risk reduction goals. Both Service Coordinators have been trained to use client centered counseling methods. Both Service Coordinators regularly work with clients on harm reduction techniques, review of barriers and contingencies, and identifying supporters for helping them decide how to make incremental changes in their behavior in order to reduce the risks of infecting their partners. Due to confidentiality limitations, HD staff cannot meet with these clients unless the clients request to do so. To date, no clients have responded to multiple offers to meet for any reason, either individually or in groups.

b. Types of Intervention: Individual Level Intervention
(We may not be able to document this, due to Confidentiality, and the already high number of clients and forms that Service Coordinators must manage)

c. Risk Population/Target Size: Estimate 100 HIV-positive people in EDC
Primarily white, middle aged, MSM; some MSM Latino, most in SLT

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d. Key Activities:

d.1 While respecting issues of confidentiality, the HEC and CSPA will continue to meet or talk with the SFAF Ryan White CARE Service Coordinators on a weekly or monthly basis.

d.2 Some new relationships with the HEC may be developed through HIV-positive people volunteering to attend Ryan White Services Committee/Local Implementation Group (LIG) meetings. Historically, very few SFAF clients attend.

d.3 Continue notification of regional HIV services and education planning meetings by select confidential mailing lists (including mailings to clients by SFAF Service Coordinators), email, newsletters, word of mouth, and face-to-face encounters.

d.4 HIV-positive individuals and discordant couples have historically declined all offers to meet by phone or in person with staff from the AIDS E&P team to discuss their beliefs, feelings, addictions, and behaviors that put their sex partners and/or needle-sharing partners at risk for HIV infection. This harm reduction effort is continued monthly by the SFAF Service Coordinators, and will be supported, as needed, by AIDS E&P staff.

d.5 The AIDS E&P staff will work with the staffs of SFAF, Progress House, El Dorado Council on Alcoholism Lifeskills Program, Sierra Resource Center, Gates Recovery, and the jail correctional officers and juvenile hall counselors, as well as the CFMG medical staff, to meet HIV-positive clients and inmates.

d.6 The AIDS E&P staff and the SFAF Service Coordinators are all trained HIV prevention counselors. HIV testing is conducted at SFAF offices, among many other alternative sites.

d.7 The HEC and CSPA will assist with HIV testing and counseling of drug treatment clients and staff, as well as inmates enrolled in the HEARTS drug treatment program, and inmates in the general population. This on site testing will provide an opportunity to discover unknown HIV-positive people. All newly diagnosed people will be connected with SFAF Service Coordinators in SLT and Placerville for complete assessments and appropriate referrals while they are still in jail or drug treatment.

d.8 The HEC will work with SFAF Service Coordinators, as needed, in conducting support groups for newly diagnosed clients, or other groups that may be created from expressed need or interest of other clients.

d.9 A local HIV-positive man has recently attempted to start a group, and found only three people interested. The HEC will work with him to specifically

Exhibit 3
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target more HIV-positive individuals and advertise activities that may be attractive to them. Their transportation needs will also be addressed.

NOTE: DRUG TREATMENT PROGRAMS EDCPHD AIDS E&P staff have been collaborating with the court mandated drug treatment and voluntary outpatient programs for over 16 years, and have excellent relationships with the staff of each agency. The AIDS E&P staff has discontinued all outpatient classes, but will continue working with residential clients and staff at Progress House and Sierra Recovery Center under a mix of Substance Abuse Prevention and Treatment Basic Training Grant (SABTBG) funding, HIV Prevention Counseling and Testing, and AIDS E&P. Staff of all EDC drug treatment programs will be updated on HIV, STD, and hepatitis at their request. The HEC coordinates and instructs HIV Prevention Counseling and Testing classes for drug treatment counselors. Tahoe Youth and Family Services is resuming HIV testing of clients, and the new staff will be trained, supplied with materials for testing, and supported in working with difficult or HIV-positive clients.

GOAL #6: School Targeted Prevention Activities

By June 30, 2007, approximately 300 to 400 EDC youth will participate in interactive expanded HIV education. This will include encouraging STD and HIV testing, seeking effective birth control methods as appropriate, developing buddy systems, safer decision making especially when loaded, choosing sexual partners carefully, being abstinent, and realistic harm reduction techniques.

a. Key Activities:

- a.1** Continue participation with the local CBOs, at the Senior Health Fair at South Tahoe High School in February, 2007, and Black Oak Mine School District, Golden Sierra High School, with an information table, handouts, and interactive activities. PFLAG and volunteers from the two Hepatitis C support groups also participate, as well as other HD staff.
- a.2** Develop a Senior Health Fair at the other schools within the El Dorado Union High School District (4 high schools) as support within the schools and as time allows. Continue to talk to local CBOs, private service providers, health committees, school nurses, and health teachers in other high schools about scheduling Health Fairs during the second semester of the school year as a refresher for graduating seniors.
- a.3** Conduct HIV/STD/hepatitis education each semester in Human Sexuality classes at Folsom Lake College campus, El Dorado Center in Placerville and the Folsom campus, and Lake Tahoe Community College in SLT.
- a.4** As possible, assist at educational booths on various college campuses at annual events, such as Day of Diversity, World AIDS Day, Valentine's Day, etc.

Exhibit 3
Scope of Work – Year 3
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II. OTHER SERVICES

GOAL: Community planning; to increase the effectiveness of HIV prevention activities in El Dorado County.

Objective: By June 30, 2007, the EDC health jurisdiction will conduct quarterly regional implementation group meetings with Placer and Nevada counties to develop, review, and assess the HIV education/prevention activities.

a. Key Activities:

a.1 Announcements of the quarterly meetings will be advertised through SFAF mailings to clients by Case Managers, SGMN newsletters and web site, EL6250FT newsletter, emails, message boards, word of mouth, and general mailings.

a.2 The location of each meeting will rotate from city to city to enable more consumers to attend.

a.3 Opinions of concerned EDC citizens is solicited at local drug treatment programs, jails, high schools, especially GSA clubs, PFLAG meetings, HCV Task Force meetings, Perinatal Council meetings, HD staff meetings, and via key informants and opinion leaders to assist the EDC program representatives in providing the best services possible.

a.4 Member recruitment is on going, mail and e-mail lists are expanded at each quarterly meeting as new community members attend.

a.5 People who cannot attend meetings are asked to phone or email their ideas and opinions to others who will speak for them at the meetings.

b. Evaluation: Member and guest sign-in sheets will be maintained, as well as minutes of the meetings. Email lists will be updated after each meeting. The overall effectiveness of the community planning process will be evaluated by the number of members attending the Spring quarterly meeting.

NOTE: The AIDS Education and Prevention Program (E&P) operates within the Health Promotions Division (HP) of the El Dorado County Public Health Department (EDCPHD). There are no subcontractors.

**Exhibit 4
BUDGET**

Year 1

July 1, 2004 to June 30, 2005

A. PERSONNEL	\$46,500
B. OPERATING EXPENSES	\$13,082
C. CAPITAL EXPENDITURES	\$0
D. OTHER COSTS	\$2,200
E. INDIRECT COSTS	\$3,600
TOTALS	\$65,382

Exhibit 5

BUDGET

Year 2

July 1, 2005 to June 30, 2006

A. PERSONNEL	\$46,500
B. OPERATING EXPENSES	\$13,082
C. CAPITAL EXPENDITURES	\$0
D. OTHER COSTS	\$2,200
E. INDIRECT COSTS	\$3,600
TOTALS	\$65,382

Exhibit 6
BUDGET
Year 3

July 1, 2006 to June 30, 2007

A. PERSONNEL	\$46,500
B. OPERATING EXPENSES	\$13,082
C. CAPITAL EXPENDITURES	\$0
D. OTHER COSTS	\$2,200
E. INDIRECT COSTS	\$3,600
TOTALS	\$65,382