

Treasure Coast Health Council, Inc., 4152 West Blue Heron Blvd., Suite 228, Riviera Beach, Florida, 33404

Forging a Future: The HIV-Positive Ex-Offender

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Excerpts from HRSA CAREAction July 2007 www.hrsa.gov

Reentry programs help HIV-positive ex-offenders build alternatives and show them that although hope may be hard to come by, it is not impossible to find.

"Our thing is to break the cycle," says Ronnie Snyder, an HIV-positive ex-offender. Snyder is director of the Re-adjustment and Re-entry (RARE) Program at the Center for Health Justice in Los Angeles, California, where he says the recidivism rate is around 84 percent. RARE and programs like it give ex-offenders access to resources for overcoming disparities and leading healthy, stable lives.

Typical components of such programs include building a relationship with the prisoner prior to release through HIV education and prevention classes and, sometimes, one-on-one HIV counseling and discharge planning. After release, the programs provide services or referrals for many

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of the following needs: housing; comprehensive health care that includes specialty care for diagnoses such as hepatitis C, substance abuse, and mental health disorders; employment and life skills training; and, in some cases, legal and parole support.

Reentry programs do not have the luxury of dealing with these issues in sequence. "Programs that are not designed with a prison focus- addressing issues like parole, the stigma of incarceration-just don't cut it," says Rivera. Moreover, programs must consistently follow through with clients to gain trust and develop a relationship that is strong enough to keep the ex-offender in care.

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Letter from the Editor

The past few years have been stressful for the HIV/AIDS community. We have endured extreme reductions in funding. In addition, we are in the process of transition, as we strive to incorporate the new federal mandates for the Ryan White program.

The Ryan White program was enacted in 1990. The program was established to assist people living with HIV/AIDS and their families temporarily; as an emergency fund for the last years of the infected person's life. There have been major strides in the medical care and prescription drugs over the years. Now many people infected with HIV can live a long and healthy life. The Ryan White program has now adjusted the directives of the funding to focus mainly on providing quality medical care for persons living with the HIV virus. While the program continues to offer other wrap around services, the bulk of the direct services dollars (75%) must be spent on medical care.

People living with the virus, as well as people working in the HIV/AIDS arena are aware of the absolute necessity of supportive services, such as housing, food, transportation, case management,



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SHARE PROGRAM SEPTEMBER 2007 MENU BASIC PACKAGE \$18.00

*1 lb. Ham Steak (bone in)
*1 lb. Boneless Pork Chops
*1 lb. Ground Beef (80/20)
*8 oz. Sliced Hard Salami
*2.45 lbs. Chicken Roaster Drums
*12.8 oz. Beef Patties
Plus a selection of fruits and vegetables

*Indicates 1 of each item in the "Double Meat" package offered at Basic sites ONLY.

SEPTEMBER SPECIALS Tyson Party Pack \$11.50

1 Meatballs & Marinara Sauce (2.75 lbs.) 1 Popcorn Chicken & BBQ Sauce (2.75 lbs.)

Mexican Fiesta Box \$15.50

4~6 oz. Bean & Cheese Burritos, 4~6 oz. Beef & Bean wraps, 24 oz. Package of Tortillas, 1 lb. Chicken for Fajitas , 16 oz. mild Green Chile Sauce

Combo Pack 11.50

2~5 oz. Sirloin Steaks, 2~4 oz. Boneless Pork Chops, 2~4 oz. Chicken Breasts, 4~4 oz. Hamburger Patties

For more information call 561-355-4775

financial and legal assistance. These services are vital to keeping people in medical care.

In order to meet the needs of the community, it is more critical than ever before to work together as a team. There is so much work to be done; no one agency or person can do it all alone.

Each one of us should also work toward becoming educated advocates; knowledgeable on the issues within the HIV/AIDS community, so that we can communicate the needs effectively.

There are many resources and ways to get involved. Through volunteering at a local organization, or attending a planning body meeting, being present and letting your voice be heard can make a difference! ■

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Look Who's Talkin'

Johnathan Dawkins Counselor/Co-facilitator United Deliverance Community Resource Center, Inc.

Johnathan Dawkins has been working with United Deliverance Community Resource Center (UDCRC) for the past four years. Each day he would see people come to UDCRC in need of assistance and leave the agency with a smile. He wanted to be a part of that; he wanted to give back to the community.

Johnathan is originally from Fort Myers, and has lived in the Palm Beach County area for the past several years. He is 31 years old. Over the years he saw something that was needed in the community, and he says that God led him to work at UDCRC.

After being a secretary at UDCRC for a year the desire to be more involved with the community continued to grow. He then started working with prevention programs for both HIV positive and negative participants. It was a great opportunity for participants to learn more about HIV and learn more about living with the disease.

Currently, there are several programs that Johnathan works with at UDCRC. One is the CRCS (Comprehensive Risk Counseling Services) program. This program is a prevention program in which he assists persons and their partners living with HIV how not to spread the disease.

The other program he works with is Healthy Relationships. This program is also for people that are infected with HIV. The program helps the participants develop disclosure skills, and reduce stress.

During the Healthy Relationship group sessions the participants share their experiences with each other. Johnathan believes the advice and information provided during these sessions make a greater impact when it comes from someone else that is infected. Therefore, he organizes and facilitates the group sessions, but allows the participants to learn from each other.

"The participants involved, many times are dealing with a lot of issues including, mental health issues like depression; homelessness; and, poverty. Stress reduction is the key to maintaining their health. "When you have HIV you have to start your life over again.", Johnathan says. In this program people gain an appreciation for life. They begin to realize that if they do not learn to deal with stress then the virus will take a toll on their health.

Johnathan says, "People shut down when they first find out they are infected with HIV, but once they get over the idea of stigma then the smiles start coming out. Our programs works on helping people deal with the stigma."

The participants are in medical care now, but they have all struggled with falling out of care. Johnathan thinks that people stop going to the doctor many times from lack of education. He says, "I always say that it is not HIV that kills people but the opportunistic infections. Our participants are encouraged to stay in care, because people can live a long time with the virus." Often Johnathan meets people that tell him that they have been positive for 15 or 20 years. From Johnathan's experiences working with people living with HIV, he feels that many times people are not in care because they do not know the system. People go through a lot trying

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Establishing a Continuum of Health Care

Many inmates' first adult encounter with the health care system occurs during incarceration, and many more struggle to find and access health care upon release.^{15,16} Reentry programs often help people cement a relationship with a health care provider prior to release. For example, Project Bridge, which begins working with clients 6 months in advance of their release, is affiliated with Providence's Miriam Hospital, the provider of HIV care during and following incarceration. Thus, patients become comfortable with their doctors before reentering the community. This approach eases transition for clients- and for the physician, who becomes familiar with clients' medical histories and care needs before they enter the unpredictable world on the outside.

Once released, Project Bridge implements an 18month intervention that focuses on retaining the client in health care and linking him or her with other services needed to build a life outside incarceration. To help clients navigate the choppy waters of the health care and social services system, Project Bridge uses a cognitive behavior model, in which a caseworker and an outreach worker demonstrate the behavior needed to successfully seek those services. "Then, little by little, we start giving the client more control to do it themselves," says Leah Holmes, director of Project Bridge. "And at the end, they are doing it all on their own."

This approach pays off. According to Holmes, "100 percent of people leaving the program have been in care for the last 6 months; 85 percent are still in care 6 months later."

Offering a Place to Live and Make a Living

A home and a job are top concerns of people leaving incarceration, yet they can be the hardest to come by. Lydia Camacho says that her small one-bedroom apartment- housing arranged by Project Bridgewas the main thing that kept her on the path to recovery and out of prison. "It's just a small corner," she says with a shrug, "but it's my home. It's somewhere to put my keys. That's what I needed for my life to be complete.

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BONUS RECIPE

Some of our readers were disappointed that a recipe was not included in the last issue of the newsletter; therefore this issue includes an additional recipe.

Mocha Cappuccino Pudding Cake

1 ¼ cups all purpose flour
 1 ¾ cups sugar
 4 tbsp baking cocoa
 1 tbsp instant espresso coffee (dry)
 1 ½ tsp baking powder
 ½ tsp salt
 ½ cup fat-free milk
 2 tbsp canola oil
 1 tsp vanilla
 1 tsp instant espresso coffee (dry)
 1 ½ cups very warm fat-free milk
 1. Heat oven to 350°. Mix flour, ¾ cup of

1. Heat oven to 350°. Mix flour, ³/₄ cup of sugar, 2 tbsp of cocoa, 1 tbsp espresso coffee, baking powder and salt in bowl. Stir in ¹/₂ cup milk, butter and vanilla until well blended. Spread in un-greased square pan 9x9x2 inches.

 Mix remaining 1 cup sugar, remaining 2 tbsp cocoa, and 1 tsp espresso coffee in bowl. Sprinkle over cake batter. Pour 1 ¹/₂ cups very warm milk over sugar mixture.
 Bake 35 to 45 minutes or until center is set and firm to the touch. Place sheet of aluminum foil cookie sheet on lower oven rack under cake to catch any spills. Spoon warm cake into dessert dishes. Serves 12.

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September

Monday	Tuesday	Wednesday	Thursday	Friday
24 6:30 p.m. NA Meeting Compass 7:30 p.m. Quilting Bee Compass	25 3 pm-6 pm FREE HIV Testing Compass	26	27 6:00 p.m. Circle of Hope HIV+ Women 629 5 th St, WPB 5pm-9pm FREE HIV Testing Compass 7:30 p.m. BrothasSpeakSupport Group Compass 8:00 p.m. Positive Living Support Group Compass	28

October

	Monday	Tuesday	Wednesday	Thursday	Friday
1	6:30 p.m. NA Meeting Compass 7:30 p.m. Quilting Bee Compass	2 3 pm-6 pm FREE HIV Testing Compass	3	4 6:00 p.m. Circle of Hope HIV+ Women 629 5 th St, WPB 5pm-9pm FREE HIV Testing Compass 7:30 p.m. BrothasSpeakSupport Group Compass 8:00 p.m. Positive Living Support Group Compass	5
8	6:30 p.m. NA Meeting Compass	9 3 pm-6 pm FREE HIV Testing Compass	10	11 6:00 p.m. Circle of Hope HIV+ Women 629 5 th St, WPB 7:30 p.m. 7:30 p.m. BrothasSpeakSupport Group Compass 8:00 p.m. Positive Living Support Group Compass 5pm-9pm FREE HIV Testing Compass	12
15	6:30 p.m. NA Meeting Compass	16 3 pm-6 pm FREE HIV Testing Compass	17	18 11:30 a.m. Client Education Series Compass 6:00 p.m. Circle of Hope HIV+ Women 629 5 th St, WPB 7:30 p.m. BrothasSpeakSupport Group Compass 8:00 p.m. Positive Living Support Group Compass 5pm-9pm FREE HIV Testing Compass	19
22/29	6:30 p.m. NA Meeting Compass 7:30 p.m. Quilting Bee Compass	23/30 3 pm-6 pm FREE HIV Testing Compass	24/31	25 6:00 p.m. Circle of Hope HIV+ Women 629 5 th St, WPB 7:30 p.m. BrothasSpeakSupport Group Compass 8:00 p.m. Positive Living Support Group Compass 5pm-9pm FREE HIV Testing Compass	26

*Treasure Coast Health Council, 4152 West Blue Heron Blvd. Ste 228, Riviera Beach. All meetings are subject to change. Please see www.carecouncil.org or call 844-4430 ext. 28.

September/October 2007 HOTLINES

A.G. Holley State Hospital TB Hotline	
CDC Info Hotline	
Crisis Line (Center Line)	
Drug Abuse Hotline	
Florida HIV/AIDS Hotline	
Gay and Lesbian Hotline	I-888-843-4564
Medicare Hotline	
National Deaf AIDS Line	I-800-AIDS-TTY
Project Inform Treatment Hotline	I-800-822-7422
STD Hotline	I -800-227-8922

EDUCATION/INFORMATION

Accessible Life Saving Education for at Risk Teens (ALERT American Foundation for AIDS Research (AMFAR)	. I -800-392-6327 . I -800-448-0440
Children with AIDS Project of America Children's Case Management Org., Inc	
Clinical Trials Information	I-800-Trials-A
Farmworker Coordinating Council of PBC	533-7227
Florida AIDS Action Council	
Glades Health Initiative, Ind	
National Minority AIDS Council	. 1-202-483-6622
PBC Health Department	540-1300
PBC HIV CARE Council	
Red Cross, American	
Senior HIV Intervention Project (SHIP)	

HIV/AIDS TESTING

Compass, Inc* Comprehensive AIDS Program (CAP)	533-9699
West Palm Beach*	472-2466
Delray Beach*	
Riviera Beach*	
Belle Glade*	
Glades Health Initiative, Inc.	
Drug Abuse Treatment Association (DATA)	844-3556
Hope House of the Palm Beaches, Inc.	697-2600
PBC Health Department	
West Palm Beach Health Center	514-5465
Delray Beach Health Center	
Lantana Health Center	
C.L. Brumback Health Center	
Planned Parenthood of GMPBTC	
West Palm Beach	683-0302
Lake Worth	
Riviera Beach Family Resource Center	840-1888
True Fast Ministries	659-4500
United Deliverance Resource Center*	
*Rapid HIV Testing Available	

DENTAL CLINICS

C.L. Brumback Health Center	996-1636
Delray Beach Health Center	274-3111
Riviera Beach Health Center at 45 th Street	541-5306
West Palm Beach Health Center	514-5310

BioScrip Specialty Pharmacy (Spanish speaking) 683-0001

PHARMACIES

Department of Health	
Belle Glade	
Delray Beach	
Riviera Beach	
West Palm Beach	
Commcare Pharmacy	
PieSerin Specialty Pharmacy (Spanish speaking)	692 0001

Positively P	
	HIV/AIDS SERVICE AGENCIES

Comprehensive AIDS Program, Inc. (CAP)	
West Palm Beach	472-2466
Belle Glade	
Delray Beach	
Riviera Beach	
Pahokee	
Care Resource	
Coral Gables	1 305 667 9296
Fort Lauderdale	
Miami	
Compass	
Youth Line	
Children's Place at Home Safe, Inc.	
North/Central Palm Beach County	022 4105
Southern Palm Beach Count7	
Farmworker Coordinating Council of PBC	
Florida Lighthouse Gratitude Guild. Inc.	
HIV Pastoral Care	
Hope House of the Palm Beaches	
Hospice By the Sea	
Hospice of Palm Beach	
Integrated Healthcare Systems	
Latin American Immigrants & Refugee Org.	
Legal Aid Society of Palm Beach County	
Palm Beach County Home	
Palm Beach Research Center	
Planned Parenthood	
Oakwood Center	
Social Security Administration	
Treasure Coast Health Council, Inc.	

INFECTIOUS DISEASE PHYSICIANS

Central County	
Riviera Beach Health Center	
Manochehr Khojasteh, MD	804-7900
Celeste Li, MD	804-7900
Kleper de Almeida, MD (Spanish Speaking)	967-0101
Kenneth Ness, MD	
Olayemi O. Osiyemi, MD	
Donald Watren, MD	
Larry Bush, MD	967-0101
Northern County	
Infectious Disease Associates- Leslie Diaz, MD	776-8300
Southern County	
Infectious Disease Consultants	499-1442
Hamed A. Komaiha, MD, Jose C. Villalba, MD,	
Jaroslav F. Ondrusek, MD, Cesar A. Randich, MD, Melvin S. K	ohan, MD
Delray Beach Health Center	
Snehprabha Samant, MD	274-3178
Guadalupe Medical Center (Spanish Speaking)	642-0768
Infectious Disease Associates	
Julio Cardenas, MD, Ines Mbaga, MD, Susan Saxe, MD, Jill Hov	ward,
MD, Sanda Cebular, MD, Kurt Weise, MD	
Delray	496-1095
Boca Raton	393-8224
Western County	
Lyonel Jean Baptiste, MD	992-9216
Juan Carlos Rondon, MD	924-7788

PRIMARY MEDICAL CARE

VA Medical Center (for veterans only)	422-7522
Palm Beach County Health Department	
Riviera Beach Health Center	804-7900
C.L. Brumback Health Center (Belle Glade)	996-1600
Delray Beach Health Center	274-3100
West Palm Beach Health Center (pediatrics)	514-5300

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to get the services they need, like Medicaid and food stamps.

"They spend time running from place to place to get different documents and then if one box is not checked off the clerk makes them wait in line all over again. People get shot down a couple of times and give up. Sometimes they feel it is easier to quit." Johnathan says.

United Deliverance assists people in filling out the paperwork and making sure that they have all of the documentation that they need before they wait in line.

Another challenge or barrier for people to enter into medical care that Johnathan mentioned is the lack of transportation.

United Deliverance Community Resource Center was started in 1999. There are several programs within this organization. UDCRC is run out of a modest building off of Tamarind Avenue in West Palm Beach. Within those walls there may not be a lot of square footage, but their impact in the community is great.

For more information about the programs United Deliverance offers and/or to enroll in the Health Relationships program, contact Johnathan Dawkins at 561- 659-7988. ■

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I'm not ready to be on the street anymore. I can't afford to fall down again."

Housing is a top issue for almost all HIV-positive people. Providers deal with this issue in many

Im Beach September/October 2007 different ways- often, only as budgets and availability allow.

Along with housing, perhaps the biggest stressor for some of the PLWHA coming out of corrections facilities today is not living with HIV; it's making a living.

Creating Alternatives

Ryan White Program grantees and providers are charged with engaging PLWHA in medical care and sustaining them in care over time. With an HIV prevalence rate that is three times higher than that of the general population, the corrections population is an obvious place to seek out such clients. Filling the gap in services for people being released from incarceration is not easy, and no provider- as experience indicates- should go it alone. A collaborative, mutually beneficial relationship with the corrections system is essential, as are strong relationships with providers of essential services like housing and substance abuse treatment. Strong relationships do not happen overnight.

Relationships, however, are just part of the picture. Supporting people who are returning to the community requires empathy and cultural competency. The employment of ex-offenders in many reentry programs reflects this sensitivity. In addition, successful programs require financial resources and the staying power to reach out over time to a population among whom the rates of falling out of care and recidivism are extraordinarily high.

Ultimately, the solution lies in providing people with alternatives to the way of life that brought them to the prison gate along with supports like housing, education, and health care. Most important, HIV-positive ex-offenders need opportunities that enable them to remain exoffenders.

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