

Positively Palm Beach



Treasure Coast Health Council

September- October
Volume 2, Issue 2

Continuing Our Commitment to Prioritizing HIV/AIDS

By Jeffrey S. Crowley, M.P.H., Director, Office of National AIDS Policy

Today, the Obama Administration is taking new action to prioritize support for Federal HIV/AIDS prevention and care programs. We are sending to the Congress an amendment to the President's FY 2011 budget request to increase HIV/AIDS funding by \$65 million. This is comprised of a requested \$35 million increase for HIV prevention in order to continue exciting new HIV prevention activities described below to support the National HIV/AIDS Strategy and a \$30 million increase for State AIDS drug assistance programs to respond to the ongoing crisis States are facing in operating these essential programs. These resources come on top of proposed increases for HIV prevention and care at the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA) that were included in the original budget submission. Ultimately, the Congress will enact a budget that will establish Federal funding levels for the fiscal year that begins on October 1st.

Last month, the Obama Administration released the National HIV/AIDS Strategy. This was the product of a robust dialogue with the HIV community and other members of the public and identifies a small set of priority action steps for moving the Nation forward in responding to the domestic HIV epidemic. On the evening of July 13th, the President hosted a reception for the HIV community at the White House where he spoke about the Strategy and his commitment to fighting HIV/AIDS. He said the following,

Now, I know that this strategy comes at a difficult time for Americans living with HIV/AIDS, because we've got cash-strapped States who are being forced to cut back on essentials, including assistance for AIDS drugs. I know the need is great. And that's why we've increased Federal assistance each year that I've been in office, providing an emergency supplement this year to help people get the drugs they need, even as we pursue a national strategy that focuses on three central goals.

We recognize that times are tough and there are significant challenges faced by people living with HIV/AIDS and other Americans that must be addressed. The Federal government cannot tackle these problems alone, but we can do our part.



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HIV/AIDS/STD PREVENTION DEMONSTRATION PROJECTS FOR HISTORICALLY BLACK COLLEGES AND UNIVERSITIES AND OTHER MINORITY-SERVING INSTITUTIONS

T



he cultural diversity of communities of color is to be celebrated. We have overcome adversity and barriers at every turn with the hope of change. With this same determination, we face the HIV/AIDS epidemic. Communities of color disproportionately

account for an alarming number of HIV/AIDS cases. As an Afro-Latina, HIV/AIDS prevention advocate, and public health professional, I am very familiar with our challenge. The statistics and numbers constantly run through my head: African Americans account for almost half the number of people living with HIV; Latino/Hispanics account for 17% of new HIV infections in the U.S. in 2006; rates for new infection among Native American/Alaskan Natives are higher than whites, though American Indians and Alaska Natives make up 1.5% of the total U.S. population. There is much work to be done.

Minority-serving Institutions (MSIs) of Higher Education (e.g. Historically Black Colleges and Universities, Hispanic Serving Institutions, and Tribal Colleges and Universities) have a vital role in the response to HIV/AIDS since persons of color between the ages of 13-24 are one of the groups most affected by the epidemic. Also, this demographic is increasingly communicating online. According to the Pew Internet & American Life Project, 93% of young adults are online, 72% use social network sites, and more than 93% own a cell phone. With respect to young people of color, young African Americans and Hispanics are not only more likely to use cell phones than whites, but are also more likely to access the Internet from their phones. We've begun working with MSIs to provide training and technical assistance about effectively using new media in response to HIV/AIDS. Institutions like Alabama A&M University's student organization CODE 3 Awareness and Albany State University's HIV/AIDS peer educator program continue to inspire me to learn and do more.

In addition to our new media efforts, the Department of Health and Human Services (HHS) has partnered with MSIs to reduce HIV/AIDS disparities. There have been a number of funding opportunities for MSIs that address the health gaps racial and ethnic minority communities face. Various HHS agencies, including Centers for Disease Control and Prevention (CDC), Sub

stance Abuse and Mental Health Services Administration (SAMSHA), and the Office of Minority Health (OMH), have funded HIV prevention initiatives. In order to learn more, I spoke with Timothy Harrison,

Program Analyst at the Office of HIV/AIDS Policy (OHAP).

Timothy Harrison, Office of HIV/AIDS Policy (OHAP)

Mr. Harrison told me about a stakeholder meeting that was held with MSIs to better understand what prevention activities are happening with Federal agencies and offices with existing MSI programs. A second meeting included Federal agencies, MSIs, community-based organizations (CBOs), and AIDS service organizations (ASOs) to discuss HIV prevention program elements and components of a funding announcement. The two stakeholder meetings were crucial to help shape this funding opportunity known as the Minority Serving Institution (MSI) HIV Prevention Sustainability Demonstration Initiative (PDF 152 KB). OHAP hopes this initiative encourages MSIs to think critically and creatively about HIV/AIDS/STD prevention on college and university campuses.

Mr. Harrison noted that between five to eight colleges and universities will be funded. Applicants will be asked to develop a sustainable HIV/AIDS/STD prevention program, implement the program, and document the entire process. He expects the initiative to further increase Federal agency collaborations and opportunities to share lessons learned about prevention programs on MSI campuses. Selected programs will focus on sustainability beyond the timeframe of Federal funding (for more information about the announcement, please email Dr. Chanza Baytop at chanza_baytop@abtassoc.com).

As a graduate of a Historically Black University, I am well aware of the opportunities and need for HIV prevention programs on campus. AIDS.gov is looking forward to working with HBCUs and other Minority-serving Institutions of Higher Education on new media initiatives. Do you have any examples of Historically Black Colleges and Universities using new media to address the HIV/AIDS epidemic? We would love to hear from you.

By Naima Morales Cozier, AIDS.gov Training Adviser

AIDS.GOV SHARES COMMUNITY NEWS: COALITION FOR A NATIONAL AIDS STRATEGY TO HOLD UPCOMING WEBINARS

The Coalition for a National AIDS Strategy will host two upcoming, identical webinars to assist community advocates in learning more about the National HIV/AIDS Strategy (NHAS) unveiled by President Obama on July 13, 2010.

Presenters will highlight key themes of the Strategy, current implementation efforts, and community advocacy needed around the Strategy.

Identical webinar sessions will be held on: Thursday, September 2, 1:00 - 2:30 p.m. EST, with moderator Rebecca Haag of AIDS Action

Tuesday, September 7, 6:00 - 7:30 p.m. EST, with moderator Naina Khanna of Women Organized to Respond to Life-threatening Disease (WORLD) and the Positive Women's Network (PWN)

Both webinars will feature the same agenda and panel of expert presenters:

National HIV/AIDS Strategy Highlights Gregorio Millett, MPH, Senior Policy Advisor for the White House Office of National AIDS Policy

Federal Implementation Efforts Ronald Valdiserri, MD, MPH, Deputy Assistant Secretary for Health for Infectious Diseases for the U.S. Department of Health and Human Services

Community Reactions and Efforts to Leverage the Strategy for Advocacy David Ernesto Munar, Vice President, AIDS Foundation of Chicago

Next Steps in Implementation Advocacy Chris Collins, Vice President and Director, Public Policy, amfAR Judy D. Auerbach, PhD, Vice President, Science & Public Policy, San Francisco AIDS Foundation

There will be a 25-minute open discussion following the presentations for advocates to share ideas on how to help achieve the Strategy's goals.

The Coalition for a National AIDS Strategy will post a recording of the webinars on their website

By David Munar, Vice President for Policy, AIDS Foundation of Chicago

Meeting the Need

Games for Health 2010

We attended the Games for Health 2010 conference in Boston, Massachusetts to learn more about how video games and virtual worlds are being used to increase physical activity, train health care providers, and advocate HIV/AIDS information and prevention methods among youth. Now in its 6th year, the three-day conference was developed in partnership with the Robert Wood Johnson Foundation to convene public healthcare professionals and providers with game developers to bring innovative solutions to everyday issues in public health.

We talked to Lynn Fiellin, M.D., Associate Professor of Medicine at the Yale University School of Medicine. Dr. Fiellin is Principal Investigator for a NIH-funded project to develop a behavioral changing HIV prevention video game. We asked her to tell us about her project, why she chose video games as an intervention for HIV and what advice she had for the HIV/AIDS community.

"The goal of our project is to provide young teens the opportunity to practice and acquire skills in order to avoid or reduce their risk behavior. The hope is that this reduction in risk would then translate to preventing new cases of HIV. In order to accomplish this goal we are developing and will ultimately test a video game that will be specifically designed to present risky situations to the player so that they can rehearse refusal and negotiation skills that help them to make better decisions in real life.

We decided to use a video game as a "vehicle" for our HIV risk reduction and prevention intervention because it has become abundantly clear that young teens (as well as many other age groups) are already engaged in video game play. If this is where they are, then they are a captive audience and why not bring the intervention to them as opposed to requiring them to come to the intervention? Video games possess several advantages as a method of delivering an intervention including that they are engaging, they allow the player to repeatedly practice or rehearse a new skill, and they are transportable—potentially traveling with the player via cell phone or some other mobile device.

I think there are enormous opportunities for the HIV community in the realm of gaming—both in terms of optimizing prevention efforts and improving treatment outcomes. Through video games we can impact the players' knowledge and skills around HIV prevention as well as potentially improving HIV treatment by targeting behaviors such as antiretroviral medication adherence or secondary prevention. There are also myriad potential applications of gaming for improving HIV outcomes in international settings. Given that in developing countries where the HIV epidemic continues to have a particularly significant impact on morbidity and mortality the majority of individuals have cell phones, there are opportunities to transport a video game about HIV prevention or medication adherence to a large segment of the population in order to impact HIV outcomes."

What do you think about using video games and virtual worlds to increase awareness or change behaviors in the fight against HIV/AIDS? Do you know of any groups or organizations that are working with games to do just that? Let us know your thoughts.

By Michelle Samplin-Salgado, AIDS.gov New Media Strategist



Last week, CDC awarded \$42 million to community-based organizations (CBOs) in cities and communities across the nation to support HIV prevention efforts. This funding puts resources directly in the hands of those with cultural knowledge and local perspective—those who have the best chance to reach people who might otherwise not access HIV testing or other prevention services.

These partnerships are a vital part of CDC's fight against HIV. Community-based organizations are part of the daily fabric of our lives and a critical link to providing HIV prevention services where we live, work, and play.

Funding of CBOs is also consistent with the new National HIV/AIDS Strategy, released on July 13, 2010, by the White House. This strategy outlines three critical steps that we must take to reduce HIV infections, including intensifying HIV prevention efforts in communities where HIV is most heavily concentrated; expanding targeted efforts to prevent HIV infection using a combination of effective, evidence-based approaches; and edu-

cating all Americans about the threat of HIV and how to prevent it.

The 133 CBOs directly funded by CDC will help address those critical steps. First, they are tasked with implementing effective HIV prevention programs for individuals living with HIV and those at high risk of infection. Next, the CBOs will also use the funding to increase HIV testing and knowledge of status in the communities that they serve—some of the areas hardest hit by the HIV epidemic. Lastly, a limited portion of the funding will be given to some CBOs to assist in monitoring program impact and behavioral outcomes.

CDC also funds hundreds of CBOs indirectly through funding provided to state and local health departments. CDC provides capacity building assistance to all directly and indirectly funded CBOs to ensure the delivery of effective services to communities in need. These efforts are a part of CDC's tiered approach to HIV prevention that prioritizes intensive, evidence-based interventions.

As part of the tiered approach, CDC is focused on community-level interventions in those areas hardest hit by the HIV epidemic. CDC and its funded partners are working to ensure widespread condom availability, syringe access, targeted HIV testing programs,

social marketing for behavior change, and social marketing to foster supportive community norms, like safer sex. For HIV positive and very high risk individuals, HIV testing is the first critical step to the prevention of new infections and is a key component of the National Strategy's goal of reducing HIV infections.

We are also working to ensure all Americans have access to basic, fundamental knowledge about HIV through CBOs, health departments, partnerships, and national campaigns. We also recommend that all people in the United States aged 14-64 be tested at least once as part of their routine medical care.

In the introduction to the National Strategy, President Barack Obama underscored the need for a more coordinated national response to the HIV epidemic, noting that success will require the commitment of governments at all levels, businesses, faith communities, philanthropy, the scientific and medical communities, educational institutions, people living with HIV, and others. Please join us; together we can stop the spread of HIV.

By Kevin Fenton, M.D., Ph.D., FFPH,
Director, National Center for HIV/AIDS,
Viral Hepatitis, STD, and TB Prevention



Message from the Ryan White Program Manager

[Sonja Swanson Holbrook, MPH](#)
[Ryan White Program Manager](#)
[August 12, 2010](#)

As many of you know, the Florida AIDS Drug Assistance Program (ADAP) implemented a waitlist starting June 1, 2010. In addition, the ADAP formulary was reduced starting August 1, 2010. These cost savings measures are due, in part to a dramatic increase in demand for ADAP services. This is a national trend mainly caused by the economic downturn.

When I first became aware of these changes, at the end of May, I was not sure how we were going to ensure life sustaining medications for PLWHA residing in Palm Beach County, but I knew it was my top priority to figure out a way.

The issue was discussed at the Palm Beach County HIV CARE Council (CARE Council). After reviewing the cost projections for the ADAP shortfall, the CARE Council decided to redirect funds from a new Peer Mentor program into medications. These funds are specifically to assist persons placed on the ADAP waitlist and to cover medications removed from the ADAP formulary.

Working alongside the dedicated Ryan White providers and our local ADAP program we began to formulate a plan. A flow chart displaying how persons on the ADAP waitlist would move through the system was developed with input from the CARE Council, local ADAP program, and Ryan White providers. Priority is given to PLWHA with a low CD4 count, as well as PLWHA who are already on HIV medication.

Since that time I have been amazed at how the community of HIV providers

have come together to ensure PLWHA receive their medications. The ADAP clinics and Health Care District staff have been incredible partners, ensuring that we have the correct data for decision making. They have assisted us in cost projections, as well as the updated number of persons on the ADAP waitlist who are now receiving services through the Ryan White Part A program.

The greatest cost savings measure has been the PAPs (Patient Assistance Programs), whereby pharmaceutical companies provide free medication to qualifying individuals. Case managers, ADAP staff, and CommCare Pharmacy staff member, Amber Lamel, are to be commended for all their hard work getting patients on to PAPs. These efforts may allow the additional funding the CARE Council allocated for medication to stretch through the end of this fiscal year, which ends February 28, 2011.

Since the beginning of the ADAP transition a small group of case managers, ADAP staff, and funders have been meeting every other week. As a community we are all committed to doing our best to ensure that PLWHA residing in Palm Beach County are able to access the medications they need. I am reassured that PLWHA in Palm Beach County who are on the ADAP waitlist and who are impacted by the reduced ADAP Formulary are receiving needed medication.

Sonja Swanson Holbrook may be contacted through the Palm Beach County Department of Community Services, 810 Datura Street, West Palm Beach, FL 33401, 561-355-4730, SHolbroo@pbccgov.org.

“AIDS can destroy a family if you let it, but luckily for my sister and me, Mom taught us to keep going. Don't give up, be proud of who you are, and never feel sorry for yourself.”
Ryan White~

Paws Care, Inc is a non-profit organization dedicated to helping to care for the pets of those affected by HIV/AIDS, Cancer and other Terminal illness. Ran solely on community volunteers and funding, Paws Care is determined to provide a happy, healthy and loving environment for both the pet and its parent.

Paws Care Programs:

- Pet Food Bank-Food Donation
- Pet Accessories and Toy Donations
- In-Kind Veterinarian Services
- Temporary Emergency Boarding
- Rest of Life Adoption



Paws Care believes that our pets are part of our family and tries very hard to provide services to help those in need to keep their pets.

Paws Care Services:

- Pet Food Bank
- Pet Accessories and Toys
- Limited Veterinarian Services*
- Temporary Emergency Boarding*
- Rest of Life Pet Adoption.

* services are available in certain areas, please check with Paws Care to see if your area has these services available. All services are based on an approved application.

A financial burden on top of facing a devastating illness is not an easy task. Paws Care works to help provide pet care needs, but we cannot do it without the help of caring people like you. Please help by donating to Paws Care.

Donations are accepted on the web via:

- Pay Pal
- Chip In

Or directly contact Paws Care to provide your donation.

Paws Care, Inc
A Non-Profit Organization
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Phone: 321.217.2703 • Fax: 407.386.3439
Email: help@pawscare.org
www.pawscare.org

Honey, Drag Yourself...to "CAPtivating Divas"

celebrating the

25th Anniversary of the

Comprehensive AIDS Program of Palm Beach County



(West Palm Beach, Fl) Drag out your glitter, glitz and glamour, and mark your calendar for fun on October 24, 2010 as Comprehensive AIDS Program of Palm Beach County Inc., (CAP) celebrates 25 years of serving Palm Beach County. To take place at the Crowne Plaza Hotel in West Palm Beach, CAPtivating Divas will honor CAP's 25th anniversary with a Las Vegas-style show – complete with cocktails, hors d'oeuvres, silent auction and divalicious entertainment.

“Since its inception in 1985, CAP has grown into one of the most successful community-based HIV/AIDS service organizations in the nation,” said Larry Leed, Deputy Executive Director of CAP. “With this fun event, we’re taking a page from the past and honoring this milestone with a star-studded drag show – similar to ones CAP benefited from years ago.”

**“Tastes of the Crowne”,
Silent Auction &
Professional Drag Show**

**Sunday, October 24th,
2010**

6:00 p.m.

**Crowne Plaza Hotel
Ballroom**

1601 Belvedere Road

Tickets \$50 per person

Information

561-472-3022

Event chairs, Tony Jordan and Orlando Chiang and honorary chairs, Fred and Anjette Scheiman and Doug Randolph are leading a committee of enthusiastic supporters to plan the event. The Diva of Palm Beach, “Melissa” St. John is coordinating a star-studded cast of entertainers for the amusement and delight of guests attending. Committee members for the event include, Harold Atchison, Dan Hall, Scott Kent, Cal Miller, Rob Russell, Greg Savarese, Alan Salomon, Charles Capers, Taylor Stevens, Jim Sugarman and Justin Zenko.

CAP provides and promotes education, advocacy and compassion to individuals and families infected and affected by HIV and AIDS through case management, prevention and other support services. CAP works throughout Palm Beach County to provide housing assistance, food, transportation, mental health counseling and emergency assistance to clients and families living with HIV/AIDS.

Since its inception in 1985, CAP has provided educational services to more than 250,000 people in a variety of settings, including prisons, county schools, on the streets in high-risk neighborhoods, in health settings, substance abuse treatment centers, methadone clinics, and others. The local organization has grown into one of the most successful community-based HIV/AIDS service organizations in the nation.

Tickets to the anniversary event are \$50 per person. For more information on CAPtivating Divas and CAP programs, other locations and services please contact the Development Department at 561-472-3022 or email smurphy@cappbc.org. More information is available by visiting www.cappbc.org

PALM BEACH COUNTY DIRECTORY PAGE

HOTLINES

A.G. Halley State Hospital TB Hotline	1-800-402-4536
CDC Info Hotline	1-800-342-2437
Crisis Line (Center Line)	211
Drug Abuse Hotline	662-4357
Florida HIV/AIDS Hotline	1-800-352-2437
Gay and Lesbian Hotline	1-888-843-4564
Medicare Hotline	1-800-636-6033
National Deaf AIDS Line	1-800-AIDS-TTY
Project Inform Treatment Hotline	1-800-877-7472
SIB Hotline	1-800-227-8922

EDUCATION/INFORMATION

Accessible Life Saving Education for at Risk Teens (ALERT)	966-4288
American Foundation for AIDS Research (AMFAR)	1-800-392-6227
CDC HIV/AIDS Treatment Information	1-800-448-0440
Children with AIDS Project of America	1-800-973-4319
Clinical Trials Information	1-800-Trials-A
Employer Coordinating Council of PBC	533-7227
Glades Health Initiative, Inc.	996-0500
National Minority AIDS Council	1-202-493-6622
PBC Health Department	590-1300
PBC HIV CARE Council	844-4430
Red Cross, American	833-7711
Senior HIV Intervention Project (SHIP)	586-4843
Treasure the Children/Charles' Crew Adolescent Speakers, Inc.	790-6291

HIV/AIDS TESTING

Compass, Inc.	533-9695
Comprehensive AIDS Program (CAP)	
Belle Glade*	956-7059
Delray Beach*	274-5400
Riviera Beach*	804-7930
West Palm Beach*	472-2466
Glades Health Initiative, Inc.	996-0500
Drug Abuse Foundation (DAF)	278-0000
Drug Abuse Treatment Association (DATA)	844-3556
Families First Palm Beach County	721-2887
Jesus People Praise Int'l Ministries	368-9044
Minority Development and Empowerment, Inc.	296-5772
PBC Health Department (sliding scale fee)	
C.L. Brumback Health Center	996-1636
Delray Beach Health Center	274-3105
Lantana Health Center	547-5805
Riviera Beach Health Center*	804-7909
West Palm Beach Health Center	514-5310
Riviera Beach Family Resource Center	804-7908
St. James Missionary Baptist	342-5971
United Deliverance Resource Center*	844-7071
Women of Color, Rise Above Your Shame	577-3612

DENTAL CLINICS

C.L. Brumback Health Center	996-1636
Delray Beach Health Center	274-3111
Riviera Beach Health Center	804-7930
West Palm Beach Health Center	514-5310

PHARMACIES

Department of Health	
Belle Glade	996-1637
Delray Beach	274-3107
Riviera Beach	804-7940
West Palm Beach	514-5380
Compass Pharmacy	615-0564
BioScrip Specialty Pharmacy (Spanish speaking)	682-0301

HIV/AIDS SERVICE AGENCIES

Comprehensive AIDS Program, Inc. (CAP)	
West Palm Beach	472-2465
Belle Glade	996-7059
Delray Beach	274-5400
Riviera Beach	804-7965
Pahokee	924-7773

CARE RESOURCE

Carul Gulbes	305-667-9996
East Landerdale	354-567-7441
Maxim	305-573-5411
Compass	533-9699
Youth Line	533-9699
Children's Place of Hope Safe, Inc.	
North/Central Palm Beach County	832-6185
Southern Palm Beach County	993-0990
Formworkers Coordinating Council of PBC	533-7227
Florida Lighthouse	495-1442
Gratitude Guild, Inc.	802-6826
HIV Pastoral Care	1-305-856-4545
Hospice By the Sea	395-5031
Hospice of Palm Beach	846-5200
Integrated Healthcare Systems	586-7400
Latin American Immigrants & Refugee Org.	966-4515
Legal Aid Society of Palm Beach County	655-8744
Minority Development and Empowerment, Inc.	296-5722
Palm Beach County Home	842-6111
Palm Beach Research Center	683-0806
Planned Parenthood	848-6300
Oakwood Center	383-5577 or 383-5777
Social Security Administration	1-800-722-1213
Treasure Coast Health Council, Inc.	844-4220

INFECTIOUS DISEASE PHYSICIANS

Central County	
Riviera Beach Health Center	
Manohar Khajuria, MD	804-7900
Colville E., MD	804-7900
Klappan Almeida, MD (Spanish Speaking)	967-0101
Kenneth Moss, MD	655-8388
Clayemi O. Osiyemi, MD	832-6770
Donald Warren, MD	655-9660
Larry Bush, MD	967-0101
Southern County	
Infectious Disease Consultants	359-3442
Husaid A. Kamalich, MD, Jose E. Villalba, MD	
Jurastov F. Oudryevy, MD, Cesar A. Rindoch, MD, Melvin S. Kahur, MD	
Delray Beach Health Center	
Sampatbha Soman, MD	274-3178
Guadalupe Medical Center (Spanish Speaking)	642-0768
Infectious Disease Associates	
Julio Cardenas, MD, Ines Abago, MD, Susan Saxe, MD, Jill Howard, MD, Sardo Cabu'ar, MD, Karl Weiss, MD	
Delray	496-1095
Boca Raton	393-8224
Western County	
Lyonel Jean Baptiste, MD	952-9216
Jean Carlos Rodon, MD	924-7788

PRIMARY MEDICAL CARE

V.A. 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	274-3103
West Palm Beach Health Center (pediatrics)	514-5300



Mediterranean Tuna Steaks

2 Servings

The Mediterranean flavors of the colorful topping in this recipe are a perfect complement to the flavor and firm texture of the fish. A cast-iron grill pan is best for this dish. Be sure to season a new cast iron pan well before using it for the first time and preheat it each time you use it. Spinach sautéed with garlic is an excellent side dish for this recipe.

Ingredients:

- 2 tuna steaks, 6 ounces each, about 1 inch thick
- 2 teaspoons quality extra-virgin olive oil
- Salt and pepper to taste
- 1 medium ripe tomato, finely diced
- 6 green olives, pitted and chopped
- 1 tablespoon scallions, chopped
- 2 teaspoons capers
- 1 clove garlic, mashed
- Pinch of dried whole oregano

Instructions:

1. Rinse the tuna steaks under cold water and pat dry. Brush them with 1 teaspoon olive oil and season with salt and pepper.
2. Preheat grill or broiler. Meanwhile, mix the remaining ingredients in a small bowl and set aside.
3. Grill or broil the steaks on high heat, about 2-3 minutes per side or until desired doneness.
4. Top the tuna steaks with the tomato-olive mixture.

Nutritional Information:

Per serving:

- 262 calories
- 9 g total fat (1 g sat)
- 76 mg cholesterol
- 4 g carbohydrate
- 40 g protein
- 1 g fiber
- 450 mg sodium

DISCLAIMER: Positively Palm Beach is designed to present information to people living with HIV disease and their concerned families and friends. It is not to be regarded as medical advice. The appearance of information in this publication does not constitute an endorsement of that information by TCHC or its sponsors. Consult your health care providers before undertaking any treatment discussed herein. Views expressed herein are those of the byline author and do not necessarily express the views of TCHC or its staff. Requests by entities to insert materials will be reviewed by the editorial staff prior to acceptance

WE ARE HERE TO HELP

The Palm Beach County HIV CARE council is a community based organization supporting local public participation in the planning for a system of medical and support services for individuals and families living with HIV and AIDS. One of the founding themes of the CARE Council is the belief that people living with HIV/AIDS can live a better, healthier and more productive life with the most current treatments supported by the most practical supports. Thus, we are a partnership of medical and health support service providers, funders of those services as well as people using these services and people who love and care for those living with HIV.

We welcome you to join us in bringing the most effective treatments for HIV/AIDS to those in need, and invite you to work toward providing those services in the most effective compassionate manner.

Responsibilities of the CARE Council are part of the Ryan White HIV/AIDS Treatment Modernization Act. Under this federal legislation areas of the United States which are hit especially hard by the AIDS pandemic receive federal funds to assist in fighting the effects of the disease.

Members of the CARE Council are nominated through a process which is open to public participation. Appointment to the Council is made by the Palm Beach County Board of County commissioners for a two year term. Membership is guided by federal principals guiding participation which reflects the demographic make up of the disease in this county. The majority of the work of the Council is done in committee and brought to the full Council for approval. All meetings of the Palm Beach County HIV CARE Council are open to the public and are run under aspects of Florida's Open Meetings Act, also referred to as the Sunshine Law.

To be removed from our mailing list please contact
Tonya Fowler at 561-844-4220X 15

NOW ACCEPTING MEMBERSHIP APPLICATIONS

Positively Palm Beach is a
Publication of the
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