

# Introduction

- Who is NAPWA?
  - Who am I?
- Why am I here?

# Networks

- Positive African American Network (PAAN)

- Salud (health) Accion (action)  
Bienestar (wellbeing) Educacion  
(education) Respecto (respect)  
(SABER)

- Positive Network

# SABER

SABER is a network of coalitions between Latino serving CBO's and local HD's to provide voluntary counseling and testing (VCT) events for Latinos

- Miami, FL
- San Antonio, TX
- San Juan, PR
- Orlando, FL
- New York City, NY
- El Paso, TX
- District of Columbia
- Smyrna, DE
- Columbus, OH
- Los Angeles, CA
- Chicago, IL

## PAAN

Network works with individuals and organizations to increase VCT services and access to African Americans

- Detroit, MI
- Baltimore, MD
- District of Columbia
- Los Angeles, CA
- San Diego, CA
- Cleveland, OH
- New York City, NY
- Tuscaloosa, AL
- Mobile, AL
- Anchorage, AK
- Wilmington, DE

# Positive Network

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- Denver, CO
- Tuscon, AZ
- New York City, NY
- Albuquerque, NM
- New Orleans, LA
- Los Angeles, CA
- Atlanta, GA
- El Paso, TX
- San Francisco, CA
- District of Columbia

# National Association of People with AIDS supports Routinely Offered and Voluntary HIV Counseling, Testing, and Referral Services

- Supports routinely offered HIV-testing.
- Firmly believes HIV testing must remain voluntary, not mandatory.
- Supports counseling and informed, written consent to testing.

# National Association of People with AIDS supports Routinely Offered and Voluntary HIV Counseling, Testing, and Referral Services

- ❑ Calls on Government officials to guard against abuses and breaches of confidentiality in HIV testing settings.
- ❑ Calls on public health officials to develop and pilot new models to expedite and improve voluntary HIV counseling and testing services.
- ❑ Calls on policymakers to create meaningful linkages from testing to available, accessible healthcare.

# Acknowledging Barriers

- ❑ Stigma (is it better not to know?)
- ❑ Fear (what happens next?)
- ❑ Access (testing and care)
- ❑ Reality (is HIV the worst that can happen?)
- ❑ Confidentiality (what does this really mean?)
- ❑ Mental Health (is it ever the right time to get tested?)



# Advocacy

- Funding
- Quality Assurance
- Exposure
- Community Building
- Standardized formula for access

# What are the issues?

- ❑ Current prevention doesn't address stigma.
- ❑ 25 years into the epidemic and programming doesn't speak to need.
- ❑ Fear tactics are still being used instead of appropriate and meaningful HIV education.
- ❑ Mandatory HIV testing is being promoted for populations that are primarily poor and overwhelmingly people of color (e.g. incarcerated).

# What do we know?

- While we both welcome and laud the faith community addressing HIV/AIDS, we need their messages to become more inclusive.
- African Americans are diagnosed at later stages than others, even with increased testing initiatives.
- HIV prevention and education exists across the country yet 40,000 persons are still diagnosed with HIV every year.
- Access to care & treatment are regionally determined. The impact of increased testing must be understood in the local context.

# What do we need to know?

- ❑ We can and should examine new options.
- ❑ Imperative to success is listening to new voices and adopting new strategies.
- ❑ Addressing the stigma in the African-American community is the key to changing HIV within community.
- ❑ One of the most effective strategies for prevention is lubrication and condom distribution.

# Challenges

- HIV activists should consider revamping currently prevention strategies.
- EBI'S Funding should be linked to effective outreach that impacts the larger HIV Community.
- Stigma and homophobia continue to paralyze the African-American Community from getting a grasp on HIV.

# National Association of People with AIDS

[www.napwa.org](http://www.napwa.org)

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