

# HARTLINE

AIDS Project Hartford

Winter/Spring 2010

## World AIDS Day 2009: Hope and Promise

World AIDS Day provides an opportunity to reflect upon the impact that AIDS has had on millions of people worldwide including those infected with and affected by the pandemic. The sobering statistics are these: 35 million individuals worldwide are living with AIDS. More than 2 Million people die annually from AIDS-related causes. The hopeful fact is this: people, many in our own community, have taken note of these statistics and are keeping the spotlight on this cause. AIDS Project Hartford staff and volunteers were busy on December 1, 2009 filling all of the requests from local schools and organizations seeking World AIDS Day speakers. Health educators Latoya Tyson and Kaye White staffed an AIDS information table during the day and participated in a panel discussion in the evening at the University of Hartford. The activities on campus were coordinated by Univer-

sity of Hartford staff advisor Matt Blocker and a committee of dedicated student volunteers. Latoya Tyson was also joined by two APH clients. All three participated in a panel discussion at Central CT State University that dealt with HIV and Women. The activities at CCSU were coordinated by the campus Women's Center. APH Program Director Ed Paquette and APH volunteer Cindy Kershaw spoke with a group of two dozen Bank of America employees in Farmington about the history and impact of HIV in Connecticut. Activities at the Connections Wellness Center included the screening of a short film that profiled a group of HIV-positive youth from around the world. The event was attended by a Hartford city councilor and a Connecticut State representative. Finally, students at Bulkeley High School in Hartford, Hall High

School in West Hartford and Marianapolis Preparatory School in Thompson coordinated World AIDS Day fundraisers. The proceeds were donated to AIDS Project Hartford. Our challenge as AIDS advocates is to make sure that HIV remains in the forefront during the entire year. It is heartening to know that so many individuals from so many walks of life are supporting this effort.



Bulkeley High School Community Service Club students and Faculty Advisor Ms. Shah (far right) present APH Case Manager Michelle Fredericks (far left) with a World AIDS Day donation.

## APH Expands Syringe Exchange Program

AIDS Project Hartford, with the support of the New Britain Health Department, will begin offering Syringe Exchange services in the City of New Britain. Services will be delivered from a mobile van on Tuesdays and Thursdays from 8:30am-1pm beginning Tuesday, March 23, 2010. The van will be parked by the Friendship Center on Arch Street from 8:30-10am and behind the New Brite Shopping Plaza on Clark Street from 10:30am-1pm. The SEP will also offer Drug Treatment Advocacy, HIV Counseling & Testing, HIV Prevention Education, hygiene kits and referrals to an array of medical, support and social services. During the initial months of service, Yale University will be testing a random selection of syringes to develop a baseline prevalence of HIV among the SEP clients. This is the first expansion of SEP services in Connecticut in over a decade.

## Federal Govt Lifts Ban on Syringe Exchange Funding

On December 16, 2009, the twenty-year old ban on using federal funds for syringe exchange services (SEPs) was lifted. This is an historic action in the fight against AIDS and is one that has the potential to further reduce HIV infections among inject drug users and their sexual partners. HIV prevention efforts among injection-drug users (IDUs) have achieved significant successes over the past three decades. The number of new HIV

infections among IDUs has declined by over 80% since the late 1980s. Yet, persons who inject drugs still account for a disproportionate number of new HIV infections. Access to federal funds will increase the number, accessibility, and capacity of programs that supply new, sterile syringes and other injection equipment as part of comprehensive HIV prevention services. These HIV prevention services help IDUs reduce their risk of acquiring and

transmitting HIV and other significant blood-borne infections, such as Hepatitis. Studies show that SEPs are associated with a reduction of 30% or more in new HIV infections. Moreover, research has consistently shown that SEPs achieve those reductions in HIV transmission without increasing the use of illegal drugs and without adding to the overall cost of healthcare. SEPs can play a pivotal role in a comprehensive HIV prevention strategy, as

they can provide IDUs with important links to other prevention interventions, education, testing, and substance abuse treatment. AIDS Project Hartford has operated the largest SEP in Connecticut for more than fifteen years. Research studies and program evaluations have borne out the success of the Hartford program at reducing HIV transmission and successfully linking SEP clients to critical services.

## Donor Acknowledgements

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Marianapolis Preparatory School

United Way of Central and NE CT

University of Hartford—Spectrum

Wellpoint Giving Campaign

West Hartford Yoga

## CALENDAR OF EVENTS

### Upcoming Events:

Hall H.S. Coffeehouse & Silent Auction for APH

Tuesday, April 13, 2010 from 7pm-9pm

Pond House at Elizabeth Park, West Hartford

Travelers Invitational Golf Tournament

Birdies for Charity fundraiser for APH

Check [www.aphct.org](http://www.aphct.org) for more details

### Ongoing Activities:

Acupressure

Wed- 9:30-Noon

Connections, 146 Wyllys St., Hartford

Group-Anger Management

Tues- 10am-Noon

Connections

Group-Employment Resources

Thur- 11:30-12:30

Connections

Group-Exploring Change

Wed- 10:30-11:30

Connections

Group-HIV Education

3rd Wed- 5:30-8pm

MANA, 64 Church St., Manchester

Group-HIV Supp for Gay Men

Tues- 7pm-9pm

APH, 110 Bartholomew Ave., Hartford

Group-HIV Support for Men

Thur- 10am-11am

Connections

Group-HIV Supp for Women

Tues- 10am-11am

Connections

HIV Counseling & Testing

2nd & 4th Mon- 3-5pm

East Hartford Community Health Center

HIV Counseling & Testing

Tues- 9am-Noon

Burgdorf Clinic, 181 Coventry St., Htfd

HIV Counseling & Testing

Thur- 6am-10am

Manchester Wellness Recovery Center

HIV Counseling & Testing

Fri- Noon-4pm

Comm Health Services, 500 Albany Ave.

Mental Health Counseling

M/W- 9:30-11:30

Connections

Substance Abuse Counseling

Mon-Thur- 8:30-11:30

Connections

For more information about the events listed above, call (860) 951-4833 or visit our website at [www.aphct.org](http://www.aphct.org).

## APH News Briefs

AIDS Project Hartford has experienced its own version of a baby boom recently. Congratulations to Medical Case Managers Mario Florez, Peyton Milner and Yessenia Santiago who all became first-time parents. Congratulations are also in order for Technical Assistant Calvin Ware who welcomed his second child in February and Connections Program Manager Julie Janiszewski who became a first-time grandmother (at a much too young age!)

Syringe Exchange Program Manager Greg Rivera has been chosen as a member of the North American Syringe Exchange Network's (NASEN) Advisory Board. NASEN, a nationally recognized organization, is dedicated to the creation, expansion and support of syringe exchange programs as a proven method of stopping the transmission of blood-borne pathogens in the injecting drug using community.

The Connections Wellness Center offers an array of services including support, education and thera-

peutic groups, medical case management, medication adherence support, advocacy, meals and more. The services are funded through the Ryan White program but the Center is funded exclusively through AIDS Project Hartford. In late 2009, AIDS Project Hartford received a transitional operating grant from the Hartford Foundation for Public Giving. The grant allows AIDS Project Hartford to fund the Connections Wellness Center through the end of 2010 thus ensuring that services will remain intact at that site for at least one more year.

Congratulations to Aurelio Lopez, Jr. who was recently promoted to the position of Prevention Program Manager. Aurelio has been a health educator at APH since 2007.

**AIDS Project Hartford would like to remember the following friends who recently passed away:**

**Antonio M. (1959-2009)**

**John I. (1950-2009)**

**Carlos T. (1953-2010)**

**Nelson P. (1965-2009)**

**Charles L. (1957-2009)**

**Rodney L. (1965-2010)**

**Eugene C. (1957-2009)**

**Sylvester D. (1958-2009)**



Longtime APH volunteer Loretta Dyson was recently honored by APH staff on her special day. Loretta has volunteered at APH in various capacities for almost two decades. She is also an active volunteer with Tabor House and Mercy Housing & Shelter Corp.

## Remembering Rodney

Rodney L. was a relatively young man when I first met him in the mid-1990s. I was a new case manager at AIDS Project Hartford and Rodney was one of the first clients assigned to my caseload. While we shared many outward similarities including age, race and gender, we were worlds apart in most other ways. Rodney came with an array of problems that included a long history of substance abuse and severe, persistent mental illness. HIV was not a priority in his life except insofar as it provided him with access to housing, food and support services. In this sense, Rodney was not very different than many of the individuals that are served by APH. What struck me about Rodney, even during our initial meetings, was how tortured he was. He was trapped in a vicious cycle where his addiction would not let go of him long enough to keep the symptoms of his mental illness at bay. HIV treatment was usually an afterthought. Rodney experienced delusions, paranoia and was prone to extreme outbursts of anger. He could also be exceptionally warm and personable and was often ready with a pat on the back or an awkward hug. I frequently felt drained after interacting with him when he was experiencing a particularly manic episode. I can only imagine how such episodes must have affected him and his outlook on life. At times I marveled that he didn't simply collapse from exhaustion given how fast his body and mind were racing. I believe the true personality that lay at his core underneath the addiction and the

mental illness was as much a mystery to Rodney as to those of us who worked with him. Many of us wondered who would emerge if Rodney's demons were stripped away. What great potential was being smothered? Like many of our clients, Rodney lived for the moment. He simply could not comprehend taking steps today that might lead to a better tomorrow. This is one of the most challenging and frustrating traits that a case manager witnesses in a client. There were services available that could have significantly improved the quality of Rodney's life. Indeed, Rodney was linked with most of these services at some point. But he just wasn't able to see them through from start to finish. Maybe that is the inevitable result of chronic addiction. Or maybe it says more about the shortcomings of social services when we haven't figured out how to reach people like Rodney. Rodney died shortly after the New Year, presumably from an overdose. It's unclear if it was intentional or not. He was entering middle age at the time of his death. It would be presumptuous to say that his death was a release from a tortured existence. But that was my first reaction upon hearing the news—relief that his long struggle had finally come to an end. For every client like Rodney, there are dozens with happier endings. But it is the clients like Rodney that stick with us. And that, ultimately, is his legacy. What we do with it is now up to us. Godspeed Rodney.

**Ed Paquette**

## New HIV Treatment Guidelines Issued

An expert panel commissioned by the Federal Government recently issued updated HIV medical treatment guidelines. The Panel recommends initiating antiretroviral therapy in all patients with a history of an AIDS-defining illness or with a CD4 count of less than 350. The Panel also recommends initiating antiretroviral therapy in all HIV+ patients who are pregnant or experiencing HIV-associated nephropathy or are co-infected with and being treated for Hepatitis B. The panel was split over the urgency of initiating antiretroviral therapy for patients with a CD4 count between 350 and 500. Further, the Panel was split over the effectiveness of initiating antiretroviral therapy for patients with CD4 count greater than 500. The panel recommends genotype testing to guide treatment options for patients who experienced suboptimal or no results while on their first or second antiretroviral regimens. Phenotype testing is generally preferred for persons with known or suspected drug resistance mutation patterns, particularly to protease inhibitors. Patients initiating antiretroviral therapy should be willing and able to commit to lifelong treatment and should understand the benefits and risks of therapy and the importance of adherence. The Panel recognizes the need to defer therapy in some cases due to unique clinical and/or psychosocial factors. For instance, in patients whose untreated mental illness or substance abuse may effectively guarantee non-compliance with an antiretroviral regimen.

***We're on the web:  
www.aphct.org and  
at Facebook.com***



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