



VOLUME II

COMMUNITEA

A Look from the Inside

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FUNDACION
LATIONAMERICANA
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SOCIAL, INC.

The Power of ADVOCACY

ELIA CHINO

Fundacion Lationamericana de
Acción Social, Inc. (FLAS)

Houston, Texas

EHE Jurisdiction: Houston, Texas



A Michoacán-born immigrant, Elia Chinó has called Houston home for over 34 years. During that time, she has forged a reputation as a determined health and wellness advocate who works tirelessly to educate people about preventable diseases, behavioral health and mental illness. After losing many close friends to HIV, Elia Chinó decided to take action. The result of her desire to help end the devastation wrought by this disease in the Latino community was the founding of the Fundación Latinoamericana de Acción Social, Inc.. Ms. Chinó is a former member of the City of Houston's Community Planning Group (CPG) and the former chair of the City's Latino HIV Task Force. Ms. Chino currently is the founder and chief executive officer of FLAS, Inc.

Ms. Chinó has been recognized repeatedly for her tremendous efforts in working to create a healthier environment for members of the Latino community in Houston. She was invited to be a guest speaker on Sabado Gigante, a TV program broadcast internationally on Univision, and was named an "Anonymous Hero" by the host Don Francisco in 2006. In 2009, she was chosen Telemundo's "Heroes Hispanos" and Sheriff Adrian Garcia honored her with a nomination of Deputy Sheriff for Harris County. In 2016 she was nominated



“My dreams and hopes are that together, we decrease the health disparities in Houston and surrounding areas.”

by OutSmart's magazine Top LGBTQ Latino Leader. Also, in 2016 she was nominated by the federal government of México and received the "Premio Revolución" (Revolution Award). Finally, in 2016 she was nominated "Angeles De Nuestra Comunidad" (Angels of Our Community) and received the Jefferson Foundation Award in recognition of outstanding public service.

As Founder and Executive Director, her primary role is to administer and manage over 2 million dollars each year in federal, state, and local funding for integrated program services, including HIV/STD prevention and testing, community-based prevention services and

program evaluation. Under her leadership, significant growth and improvement have occurred including in these areas: program effectiveness, creation of quality standards for prevention services, and the doubling of the annual operating budget to support community-based strategies. Elia continues to be a sought-after consultant and presenter due to her reputation for excellence in HIV/STD and viral hepatitis prevention. Finally, Ms. Chinó brought in approximately \$20 million in funding for behavioral health and education services over the last 10 years to the City of Houston. Elia states, "My dreams and hopes are that together, we decrease the health disparities in Houston and surrounding areas."



“I found my passion for health and advocacy and worked tirelessly to educate others about preventable diseases”

Q Tell me a little bit about yourself and your organization.

A My name is Elia Chino. I was born in April 1962 in a little village in Mexico. I have been calling Houston my home for the last 35 years. During that time, I found my passion for health and advocacy and worked tirelessly to educate others about preventable diseases such as HIV, behavioral health, and mental illness. After losing so many friends from complications of HIV, I decided to act and established Fundacion Latinoamericana de Accion, Inc. (FLAS) in 1994. My desire was to help those who were suffering because of stigma, fear, ignorance, phobia, and discrimination in the Latino culture. The devastation in this disease, particularly in the LGBTQ+ community, drove me to establish FLAS. FLAS is committed to enhancing behavioral health and wellness services for the Latino community. I believe God gave me this life to provide hope and services to marginalized communities not only in Houston, but around the world.

Q What is the history of your organization? What inspired you or your organization to do the work you do?

A For the last twenty-seven years, I have been working tirelessly. I started from nothing and establishing FLAS was not easy as a member of the LGBTQ+ community, an immigrant, and a transgender woman. I struggled for six years without any money at all. I was dedicating all my time to establishing FLAS, so I lost my job, apartment, car, and everything. The only thing I did not lose was my faith. I established FLAS because there was a need for services in Spanish that were not being provided. Twenty years ago, there was not much information in Spanish for the Latino community, so there were many misconceptions about HIV. At the beginning of FLAS, the health department was giving me literature and condoms. In the middle of the night, I would go to bars, nightclubs, and pass out information and condoms. I spoke with the business owners about HIV and how they could help, but I was met with resistance from some owners due to the stigma and misconceptions. I went to Texas Southern University and they helped me immensely by



providing space to work and helped me write my first grant. We established quality comprehensive HIV prevention for Latino youth ages 12-21 in different areas of Harris County. I worked at the university for seven years as a research assistant, but I never stopped working to establish FLAS. During my time at the university, I learned to use the computer, write grants, and other activities to help start FLAS. In 1999, I received a letter from Harris County Housing and Urban Development (HUD) that I was awarded a grant for \$100,000. With that money, I opened FLAS. We started with just three rooms, and I shared an office with the accountant. Our first office was only 600 square feet. Right now, our offices are over 6,000 square feet.

Q How do you define community? How do you see yourself and/or your organizations as part of the community that you have defined?

A The community has changed immensely since FLAS began. When I first started, many assumed that those who worked in HIV must have been living with HIV. I was very hurt and felt that I lost my reputation, family, and friends who assumed I had HIV because of my work. I now find that the community is more open and accepting now, but stigma still exists in the Latino community and LGBTQ+ community. In the LGBTQ+ community, we know about HIV. However, we are getting tired of being targeted in HIV messaging and being told to constantly get tested and hearing messages that HIV only affects our community and not others. I have

been working to educate everyone that HIV affects everyone. When I first started FLAS, it was called the Latin American Foundation Against AIDS. We experienced that individuals were afraid to call FLAS because of the reference to AIDS in our name, so in 2013, we changed the name of FLAS to the Latin American Foundation for Social Action.

Q What communities does your organization serve?

A We primarily serve the Latino community. As a transgender woman, many people assume that FLAS is an LGBTQ+ organization when we are not. Our doors are open for everyone and we are working to change minds and show that FLAS serves everyone who needs services.

Q Tell me about your organization's engagement work with your community and how you support community.

A We support our community by providing sexual health screenings, linkage to care, and mental health counseling to help individuals come to terms with HIV diagnoses. We also make appointments for our clients, provide transportation, assist in completing forms, provide translation services, accompany persons to appointments, and assist in the navigation of the health system. I established a food bank to assist our community. We assist with the Gold Card, which is used for health insurance

“Everyone in the city who has a voice needs to be at the table to end the HIV epidemic.”

last twenty years and how much we have contributed to bettering the Latino community in Harris County.

Q Why is community important to the work within Ending the HIV Epidemic (EHE)?

A To truly end the HIV epidemic, we need to involve everyone: the city leaders, pharmacies, apartment complexes, businesses, teachers,

in Harris County. We have also provided substance abuse treatment since 2012. We provide outreach activities to the community and work closely with the Mexican Consulate and the criminal justice system in Harris County. We hold a PrEP clinic monthly with AIDS Foundation Houston to help the Latino community access PrEP. I work very closely with immigration lawyers to provide support letters for those suffering from domestic violence, discrimination, transphobic crimes, hate crimes, and help them obtain visas. I advocate for the LGBTQ+ community. We have support groups, and there is even a greater need for support with the COVID-19 pandemic.

Q What are some successes your organization has had with outreach and engagement?

A FLAS has gained community trust, which is so important to continue providing services. The collaboration we have with other organizations, the community, and the consulates have been key to our success with gaining community trust. Besides the local and national awards we have won for our work, I am most proud of how FLAS has grown over the



doctors, lawyers, news organizations, etc. Everyone in the city who has a voice needs to be at the table to end the HIV epidemic, not only in Houston but also around the country. We need to focus on collaborating with each other and with the community to end this epidemic. We need to push towards including HIV testing in regular preventative health screenings and normalize testing for everyone. We need to break down that stigma and fear of getting tested so we no longer have individuals dying of HIV-related complications because they never got tested. We need to do more PrEP education and provide that as an option for everyone. We have a lot of work to do, and we cannot end the HIV epidemic without involving everyone.

provide education and condoms to the community. I was the founder of the Latino HIV Task Force at Houston's Health Department in 1998. I always assisted them with their surveys and recruiting participants for focus groups for their needs assessments and have participated in many of the health department's meetings and trainings. I have a long history of working with the Houston Health Department.

For more information, you can visit our [website](#) or call us at 713-772-2336. You can also find us on [Facebook](#) and [Twitter](#).

Q How do you collaborate with your health department to engage and support community in EHE?

A My first collaborator when I started FLAS was with the health department, and we have never stopped working together. They helped me in the beginning to provide information and condoms to the community. The first program we did together was called "Cover Up," a condom distribution program in 2004 where we worked with business owners to



MIRACLE OF LOVE, INC.

Serving with HEART AND PURPOSE



ANGUS
Bradshaw, Jr.

Miracle of Love, Inc.

Orlando, FL

EHE Jurisdiction: Orange County, FL

Angus L. Bradshaw, Executive Director of Miracle of Love, Inc. (MOL) in Orlando, Florida (FL), is a thriving nonprofit leader serving Central Florida. A native of Central Florida, Mr. Bradshaw graduated with a bachelor's degree in Business Administration from Florida Agriculture & Mechanical University (FAMU). He began his love for community-oriented care after surviving childhood cancer himself. This experience led Mr. Bradshaw to involve himself in his community through routine volunteerism and philanthropy at the young age of 14.

Mr. Bradshaw has been supporting the MOL's mission, an HIV/AIDS service organization, since 2003. Angus became the Executive Director for Miracle of Love, Inc. in 2016 after working there for 13 years. Since becoming the Executive Director, Mr. Bradshaw has grown the organization's operating budget by nearly 50% (to \$3M) and has increased the workforce by more than 40%.

He is the recipient of a Health Equity Hero Award, was recognized as a Man of the Year in 2019, and was recognized by the Florida House of Representatives as a Distinguished Leader in Central Florida for Pride Month in 2020. As a member of the LGBTQ+ community and everyday advocate for the rights of members of the LGBTQ+ community and those living with or affected by HIV, Angus is committed to the equity and equality of all individuals.

Q Tell me a little bit about yourself and your organization.

A My name is Angus Bradshaw, Jr., and everyone who knows me knows that I am die-hard for MOL. I have been at MOL since 2002, and I am in love with our mission and helping the community, which is why I joined. Our mission is to provide comprehensive, multicultural HIV/AIDS care, education, and prevention services that are effective and responsive to the Central Florida communities. This has been my only real job. I took a passion to working for MOL because when I started, I was young and running the streets, and HIV was a big topic but wasn't focused on the minority community much. Lowell Stafford, our founder, used to have information sessions at his home to provide HIV 101

and after the first session, I was fascinated. I did some volunteer work and at that time, MOL was the Black HIV agency. I had a few friends who worked there, so I was at MOL all the time. Eventually, Lowell asked if I wanted a job, and I went through the interview process and was hired to do education at the jail. I knew at that point that this is what I am meant to do. I enjoyed teaching about HIV and doing outreach amongst my community. It was enjoyable to me, so this is what I have done for the last eighteen years of my life. This work is part of every area of my life, whether providing condoms to family members or receiving calls from my church asking for education or testing.

MOL was founded in 1991 and is the oldest minority-serving organization in Central Florida. We provide prevention services, Ryan White case management, HOPWA case management, TOPWA (Targeted Outreach for Pregnant Women Act) case management, support groups, and more throughout Central Florida. We serve individuals in Orange, Lake, Seminole, and Osceola counties. We have a LGBTQ+ drop-in space called Stafford House, which houses our support groups and is a safe and available space for our community. We also provide testing and linkage services out of Stafford House. MOL's mission is to provide comprehensive, multicultural, HIV/AIDS care, education and prevention services that are effective and responsive to the Central Florida communities.

Q What is the history of your organization? What inspired you or your organization to do the work you do?

A MOL was founded in 1991 by Lowell Stafford, and is the oldest minority-serving organization in Central Florida. It was initially started to house individuals who were dying from AIDS and to give them a better place to be and live while they prepared to transition. At that time, people were scared and did not know how to handle anyone living with HIV or AIDS, so Lowell Stafford opened his home and started an assisted living facility. This eventually





“I am inspired by people feeling comfortable enough to approach me to ask for those resources when I’m out in the community.”

morphed to include education at a local jail. Most of these things Lowell did, he did without getting paid. He was receiving disability at the time and used that money to run MOL. Education

at the jail started with no contract and no financial gain; it was just him doing it out of the kindness of his heart. Shortly after, he received a CDC contract and was paid to do education at the jail. From there, they expanded to Ryan White case management, which is MOL’s oldest and longest contract. Many years after that, they expanded to HOPWA. The organization stayed small during that time and had support groups running, most of which were not funded. Most of the staff provided case management, and there was a small prevention team that provided testing and education at the jail. MOL still has all those teams, but now our prevention team is just as big as our care team. Since we have a drop-in space, Stafford House, prevention is now a huge part of MOL. Stafford House was named after Lowell because the LGBTQ+ population was his

mission. He originally started this work to help young minority LGBTQ+, so we opened the Stafford House in his honor to support Central Florida’s LGBTQ+ population. In the last few years, we have engaged more with transgender individuals across all teams for case management and prevention. In 2016, our TOPWA team began, and they work with pregnant women who are living with HIV or who are high-risk. The TOPWA team engages these women into care and rewards them for remaining in care. They have been very successful and we have found that other counties are mimicking the program because of the great work they do. It not only helps these women access care, but they can also be connected to housing regardless of HIV status.

Lowell died in 2003 and after he passed away, Nicola



Norton was Executive Director of MOL until 2016. She did a great job of keeping us in the community and keeping us afloat. We have had two great leaders prior to me, and I hope I am continuing their great work and leadership. My personal connection to this community inspires me. I live and play in this community, and people know that. When I walk into a club, people know that I am with MOL and feel free to speak with me or call me and ask for resources. That is what drives me, being available and accessible for my community. I am inspired by people feeling comfortable enough to approach me to ask for those resources when I’m out in the community. I think our agency’s mission drives us and our front-line staff to be great. They have a passion for their work and how they serve their community inspires me as a leader. The front-line

is what keeps our agency going because they are working with our community and touching lives. Our mission drives us because it is so personal, and when Lowell died, we all felt inspired and felt driven to keep his work going and to continue working towards our mission.

Q How do you define community? How do you see yourself and/or your organizations as part of the community that you have defined?

A I define community as us all working together towards a mission. I wish Central Florida would do a better job of working together as a community, because we do tend to work in silos. I think we were on the right path after the Pulse tragedy, but then we slowly went back to our old ways. For me, community is involving everyone and making sure that the community has what it needs. We need to make sure we are all at the table and working together to address our community’s needs. MOL staff is from the community, and we bring a lot of expertise about what is happening in Black and Brown communities in Central Florida.

Q What communities does your organization serve?

A We serve all communities, but primarily Black and Brown communities since we are known as a minority-serving organization. We do a lot of work with our transgender community through Divas in Dialogue, a transgender partnership through MOL, as well as young gay and bisexual Black men through the Bros in Convo Initiative. Through Latidos, we serve monolingual Spanish speaking men living with HIV. Those three communities, we have more

“Community must be included in our planning and activities to make sure that we are effectively reaching them.”



intentionally worked with through those programs in recent years. We also serve pregnant women living with or at risk for HIV through our TOPWA program.

Q Tell me about your organization’s engagement work with your community and how you support community.

A We engage primarily by being out and present in the community. A lot of our engagement recently has been on a club scene level and engaging community one-on-one, even during the pandemic. Our social media guru has done a great job of keeping us very visible and keeping us connected to community through social media. Face-to-face engagement decreased during the beginning of COVID when most businesses were closed, but we immediately went back once they reopened. Our face-to-face engagement has been increasing as vaccinations have opened and more individuals are comfortable being out and about.

Q What are some successes your organization has had with outreach and engagement?

A The response from the community and how they have been receptive to us doing outreach in their settings (like nightclubs) and being willing to come to our office for services has been a huge success. Before, that was not happening. Our prevention team is incredibly effective in meeting the community where they are and encouraging them to access services. We have seen increases in PrEP, condom usage, as well as on our care side with Ryan White and HOPWA. Our priority populations have been Black and Brown communities, so when we do our club outreach, we go on minority nights.

Q Why is community important to the work of Ending the HIV Epidemic in the U.S. (EHE)?

A Community is who we are serving, and if they are not part of what we do, then what are we

really doing? If they are not a part of our goals and activities, we are not going to accomplish anything. Community must be included in our planning and activities to make sure that we are effectively reaching them. That way they can let us know what needs to be done and what is not working. If they are not at the table and part of the conversation when planning a project or activity, it will not be effective at all.

Q How do you collaborate with your health department to engage and support community in EHE?

A We have been funded for two EHE projects: we received funding to provide testing during nontraditional hours to gay and bisexual men, and Divas in Dialogue has two components of EHE funding. We plan to take our expertise in those communities and provide that support to the health department. Any time funding opens for a community that we serve and have expertise in, we

will apply to help the health department reach those EHE goals in those communities.

For more information, visit our [website](#), or you can follow us on social media. We are on [Facebook](#), [Instagram](#), and [Twitter](#). You can also call our office at 407-843-1760.

On the Ground in the NATION'S CAPITOL

**DeMarc
HICKSON**

Us Helping Us, People Into Living, Inc.

Washington, D.C. and Landover, Maryland

EHE Jurisdictions: Washington, D.C. and Prince George's County, Maryland



Dr. DeMarc A. Hickson currently serves as the Executive Director of Us Helping Us, People Into Living, Inc. (Us Helping Us), an experienced, community-based AIDS-service organization with two locations in the greater Washington, DC area and that works tirelessly to achieve health equity for underserved and marginalized populations including Black gay and bisexual men, other sexual and gender minorities (e.g., transgender women), people living with HIV/AIDS, and persons with substance abuse and mental health disorders. Prior to onboarding at Us Helping Us, DeMarc served as Associate Professor of Biostatistics (tenure track) in the Department of Epidemiology and Biostatistics in the newly established School of Public Health at Jackson State University as well as Chief Operating Officer at My Brother's Keeper, Inc. Dr. Hickson was part of the team that opened Open Arms Healthcare Center, the first LGBT primary healthcare center in the state of Mississippi.

Trained as a biostatistician and social epidemiologist, his work includes the development and integration of evidence-based and evidence-informed strategies into public health practice, community-based participatory research, advocacy and environmental and policy systems changes that shifts paradigms and addresses the salient lifecourse, psychosocial and multilevel factors that impact HIV/AIDS, cardiovascular disease and other conditions. These conditions

chronically and disproportionately impact racial and sexual minorities, including Black gay and bisexual men and transgender women. He develops and implements community-based care coordination models to improve access to and utilization of culturally appropriate and relevant clinical, behavioral and social services among people living with and at high-risk for HIV. His research experiences are in interdisciplinary research and focus on understanding the role of social and physical neighborhood features and psychosocial factors on the aforementioned health outcomes. His research has contributed to our understanding of the socio-cultural determinants of health and health disparities among racial, sexual, and gender minorities. Dr. Hickson has published over 100 scientific manuscripts in peer-reviewed journals, including the American Journal of Public Health, American Journal of Epidemiology, and AIDS & Behavior, and serves on several Boards, including Advisory Boards for ViiV Healthcare and Gilead Sciences.

As Executive Director, Dr. Hickson aims to continue Us Helping Us' legacy as a community-based leader that strives to improve the overall health and well-being of racial, sexual and gender minorities and other disadvantaged groups in the greater Washington, DC area as well as expand its clinical, behavioral and social support services in the greater Washington, DC area and beyond. His current mantra is #ONWARD #UPWARD. Zero New Infections!



Q Tell me a little bit about yourself and your organization

A My name is DeMarc Hickson, and I am the Executive Director of Us Helping Us, People Into Living, Inc. I have been in this capacity since June 19, 2017. I am originally from Aiken, South Carolina. I was born in Miami but moved to Aiken as a child. I did my undergraduate work at Norfolk State University and my degree was in Applied Mathematics. I am formally trained as a biostatistician and have a Ph.D. in Biostatistics from Emory University. While in graduate school, I worked at CDC and got involved with HIV work. I started as a biostatistician in the Division of HIV/AIDS Prevention at CDC. I relocated to Jackson, Mississippi (MS), where I worked with the Jackson Heart Study, the largest cardiovascular epidemiological study amongst African Americans. My work focused on the social determinants of health and how it impacts cardiovascular health. After being there for seven years, I started working at a local non-profit, My Brother's Keeper, as their Director of Evaluation. I was engaged and involved in community-based work and HIV work in MS. I was in MS for 11 years before transitioning to Us Helping Us, People Into Living, Inc. Us Helping Us was founded in 1985 as a self-help support group for Black gay and bisexual men living with with HIV early in the epidemic. We later incorporated in 1988. Since then, we have expanded and deepened our footprint in the greater D.C. area, where we provide a wealth of behavioral health and social support services, including integrated HIV, STD, and Hepatitis C testing, PrEP, and primary care. We

began our PrEP program in February 2019 and in those two years, we have had 124 people who initiated PrEP and 87 individuals who are actively on PrEP. We provide medical and non-medical case management services, housing case management, behavioral interventions, emergency financial assistance, food assistance,

transportation assistance, and status neutral support groups and support groups for individuals living with HIV. We have two offices in the greater D.C. area. Our D.C. office is located about a mile north of

“That commitment, drive, and work keeps us going because we serve a community with a wealth of needs and work to address those needs the best that we can.”

Howard University and our Maryland office includes our drop-in center for young Black gay men and young Black transgender women and is located in Prince George's County. We have historically been in D.C. and expanded into Maryland in 2011. We are open six days a week, Monday-Friday from 8 am-5 pm and Saturday from 10 am-4 pm. Our standard hours after winter are Monday-Saturday 8 am-7 pm. We are committed to improving the health and well-being of communities of color through innovative programs and services and – through a vision of inclusiveness – to reducing the impact of HIV/AIDS in the entire Black community.

Q What is the history of your organization? What inspired you or your organization to do the work you do?

A What inspires me is seeing how HIV and other sexually transmitted diseases and other health disparities impact the Black community, particularly with HIV and its impacts on Black gay men. We know that we are already at a disadvantage because of the color of our skin. The staff we have are very committed to community and improving community health. We continue to provide our services throughout the pandemic, even when it first started. We know sex didn't stop happening during COVID-19, so we were providing testing and treatments by appointment only. Not all our clients had the resources to go virtual so we remained open to the community. That commitment, drive, and work keeps us going because we serve a community with a wealth of needs and work to address those needs the best that we can.

Q How do you define community? How do you see yourself and/or your organizations as part of the community that you have defined?

A Community is made up by networks. We have our social networks, our religious networks, our sexual networks, our physical networks, and there are a number of communities in which we interact and which intersect. We provide different support and help to address different needs. For us, our community is anyone who navigates through

D.C. We do a lot of work with DC Black Pride since thousands of Black LGBTQ+ folks come to D.C. and that is our community. Our communities are our priority populations (Black gay men and transgender women), but we also provide services to people living with HIV/AIDS, cisgender folks, those experiencing homelessness or food insecurity, and people who inject drugs. We try to specify our communities a bit more regarding the services that we provide. Those of us at Us helping Us are part of the community. We are a Black gay-led serving organization. There are members of the communities that we serve represented on staff from individuals who were formerly incarcerated, those who previously experienced homelessness, or who had a substance use disorder. We reflect the communities we serve.

Q What communities does your organization serve

A Overall, we serve everyone that seeks services at Us Helping Us, but we have a focus on Black same gender loving men. We also serve Black women (cisgender, lesbian, and transgender). Soon we will be providing women's health services which is a huge leap for us since we have traditionally served Black gay men. We serve people with HIV, older



individuals with HIV, transgender/non-binary and other gender non-conforming youth, and individuals experiencing homelessness and food insecurity. We serve individuals from D.C. to Philadelphia and New York, especially during DC Black Pride. Geographically, our reach is wide.

Q Tell me about your organizations' engagement work with your community and how you support community

A We are on the ground in communities throughout the greater D.C. area with our mobile health units that go to underserved communities and to communities that experience greater disease burdens. We provide outreach, education, and testing to housing authorities, metro stations, LGBTQ+ bars and clubs, and health clubs (also known as bathhouses). We meet people where they are. We engage with DC Black Pride, Capital Pride, Youth Pride, and Trans Pride. We provide educational PSAs on radio stations throughout the DMV area and at different community events. We engaged in the Great American Sleepover that addresses homelessness and other charity activities. Most recently, we started working with different correctional facilities and the D.C. Department

“When we show up in communities, we show that we care.”

of Health for their re-entry program, which trains citizens recently released in different public health skills. When we show up in communities, we show that we care. We also provide space for community, for example, by working with the House Ball community. We allowed a limited capacity to utilize our drop-in center for vogue nights or to practice for an upcoming ball during COVID-19. Our partnerships with community agencies and organizations have been great because we have been able to connect with more communities and there has not been a



competitive aspect that is sometimes seen amongst HIV organizations in terms of numbers and claiming individuals as “my client.”

Q What are some successes your organization has had with outreach and engagement?

A Engaging people in conversations about their sexual health beyond testing and having a sex positive approach has been successful. Our continued success has been our work with the house ball community. We have held weekly skate nights and different ball events where we have engaged over one hundred Black gay men and transgender women into testing, including a few individuals who have been out of care or who are newly diagnosed. We have disseminated over 1,000 COVID-19 prevention kits that include hand sanitizers, gloves, masks, cards and puzzles, journals, and things to keep people occupied while they were at home. Continuing to provide services since the start of the pandemic has been a

success as well and being able to provide our services six days a week has allowed community to continue to seek services. We have also given out over 10,000 clean needles to community members who inject drugs and soon we will be starting wound care.

Q Why is community important to the work of Ending the HIV Epidemic in the U.S. (EHE)?

A Without the community and having continued education within the community, we will never get to zero new infections. One thing that is a disservice to the community is that we constantly preach condoms and PrEP at them and the minute that new infections decrease, we stop. Then the community is left thinking that HIV is no longer a problem and does not hear any further messages, so it is important to have a continued message and not burn out the community. We need to think about our messaging in different ways and keep community aware that HIV is still around and that there have been advancements they can use to protect themselves. We want them to take control of their sexual health and know that they are ways to lessen their risk.

Q How do you collaborate with your health department to engage and support community in EHE?

We sit on all the EHE workgroups in DC, Prince George's County, and Montgomery County, as well as attend the state of Maryland HIV Planning Group meetings. We have relationships with leadership of HIV Care and Prevention in the health departments where we are able to talk about challenges and successes when planning EHE activities. We also partner with them when going for new grant opportunities and other funding resources to find ways to work together to start new and innovative activities.

For more information, you can visit our [website](#) or call us at 202-446-1100. We are also listed on [AIDSVu](#) and D.C. Department of Health's [LinkU](#) as a community resource.



