

INSIDE:

APICHA Rolls Out Patient-Centered Health Home Services.....2

Taking Action against Meningococcal Meningitis.3

A Lesson on Trans* Health at SUNY Downstate.....4

What's in a Name?6

APICHA Hosts World AIDS Day Photo Exhibit.....8

LGBT Youth Have a Ball at APICHA9

APICHA Holds Testing Event, Fundraiser at Stonewall...10

Spotlight on MCCNY Charities11

Dr. Murayama Urges LGBT Folks to "Demand Good Care!"12

Honoring Tom Duane12

APICHA's mission is to improve the health of our community and to increase access to comprehensive primary care, preventive health services, mental health and supportive services. We are committed to excellence and to providing culturally competent services that enhance the quality of life.

APICHA advocates for and provides a welcoming environment for underserved and vulnerable people, especially Asians and Pacific Islanders, the LGBT Community and individuals living with and affected by HIV/AIDS.

We Made It!

APICHA Community Health Center has achieved an important milestone: as of October 1, 2012, APICHA is an FQHC Look-Alike (FQHC-LA), as designated by Health Resources and Services Administration (HRSA). This designation serves as a stepping stone towards becoming a fully-designated FQHC, our finish line. It also demonstrates our commitment to serving the low-income community of the Lower Eastside and Chinatown neighborhoods of Manhattan, as well as our core target populations residing throughout New York City including people living with HIV/AIDS

(PLWHA), Lesbian, Gay, Bisexual and Transgender (LGBT) individuals, Asians & Pacific Islanders, Hispanics or Latinos, immigrants and other people of color. Individuals from these communities are often marginalized from mainstream health care providers. APICHA is a safety net and safe space for them.

APICHA's successful effort to win this designation comes at time when America's health care environment is rapidly changing. Recent advancements in HIV prevention and treatment have shifted the focus of government-funded programs to medical approaches and targeting populations at highest risk for HIV. The medicalization of HIV/AIDS led to the categorization of HIV/AIDS as a

Continued on page 7

CEO Speaks on Sexual Health at New York State Department of Health



"The U.S. government's approach to sexual health has historically been set back by Victorian moral values that permeate American society," CEO Therese Rodriguez told her audience at the AIDS Institute's World AIDS Day commemoration.

APICHA's Chief Executive Officer Therese R. Rodriguez joined a panel of leading HIV experts at the World AIDS Day commemoration for the New York State Department of Health, AIDS Institute (NYSDOH AI). The event, "Drugs, Sex, & HIV: The Elephants in the Room," aimed to dispel taboos in HIV medical care and took place on December 3, 2012 at the NYSDOH's office in Lower Manhattan. "The U.S. government's approach to sexual

health has historically been set back by Victorian moral values that permeate American society," Ms. Rodriguez told an audience of health professionals. "[These same values] have set back the government's response to the AIDS crisis."

Ms. Rodriguez's powerful speech focused on the history of sexual health in the U.S., particularly the challenge of getting medical providers

Continued on page 3

APICHA Rolls Out Patient-Centered Health Home Services

"I really need your help— I don't understand these American terms!" exclaimed Lee (a pseudonym). Lee, a 71 year old man from China, immigrated to the United States three years ago to be with his daughter who lives in Sunset Park, Brooklyn. Lee was eager to transition to the U.S., but his host of medical ailments— diabetes, high cholesterol, hypertension – were difficult to manage in a new country and new language. In his hometown, common practice was to tend to health needs in the emergency room— preventive care was largely uncommon practice—and Lee carried this mentality to the U.S., visiting the ER every time he experienced pain, fatigue, or other side effects from his health condition. But then, thankfully, he met Xiaona.

Xiaona, a case manager at APICHA, learned of Lee through Maimonides Medical Center, which was alarmed by Lee's frequent ER visits and lack of primary care provider. Maimonides contacted APICHA to provide case management to Lee to ensure that his medical needs are met by a doctor before they reach a point of needing emergency medical attention. With three years of experience offering case management and fluency in Fuzhounese, Lee's native tongue, Xiaona was a perfect fit to help Lee get the health care he needed.

For over 15 years, APICHA Community Health Center has offered case management to hundreds of HIV-positive clients from in and around New York City. But when Congress passed the Patient Protection and Affordable Care Act in 2010—creating an optional Medicaid State Plan benefit for states to coordinate care for Medicaid recipients with chronic conditions such as HIV, diabetes, mental health, and substance abuse – APICHA began to restructure its case management program to align with a new model mandated by this legislation: Health Home. This model was created to address shifts brought upon by the PPACA and targets Medicaid enrollees who 1) have two or more chronic conditions, 2) have one chronic condition and are at risk for a second, or 3) have one serious and persistent mental health condition. With the arrival of Health Homes came the closure of COBRA Targeted Case Management, the HIV/AIDS-specific model that guided APICHA's case management for many years prior.

New York has a number of designated

Health Homes around the state, and APICHA works as a care management provider under three board members of new Health Home entities in each borough: The Brooklyn Health Home under Maimonides; Community Care Management Partners under Visiting Nurses Services; and Community Healthcare Network, which is known as QCOMP in Queens. These organizations provide APICHA with regular lists of Medicaid clients to visit, most of who have high utilization of Medicaid – which includes emergency room and inpatient care— and/or do not regularly see primary care providers. At these visits, APICHA staff gets to know the needs of the client, and assist them with ac-

"Health Homes are based on the philosophy that increased communication among a client's health care providers can help them stay out of the emergency room and long-term institutional care."

cessing medical care, housing, or a number of other health and social service needs.

The Health Home system takes a "team" approach to health care by encouraging communication between a client's providers, and contact is maintained between these providers in large part through the Regional Health Information Organization (RHIO), which is designed to transfer electronic medical records among the stakeholders of a particular region's health care system. With a RHIO, a patient's therapist, for example, can input a patient's medical records in a database that can be seen by that same patient's doctor, case manager, or other care provider at their respective work locations. "Health Homes are based on the philosophy that increased communication among a client's health care providers – primary care providers, therapists, case managers,

etc. – can help them stay out of the emergency room and long-term institutional care," explains Venus Vacharakitja, APICHA's Associate Director of Client Services who has taken leadership in transitioning APICHA's COBRA Targeted Case Management services into the Health Home system. "In keeping a patient's providers in close, fluid contact, providers are better able to ensure that all needed medical care are carried out, that they are not duplicated, and that health outcomes improve in the populations they serve."

And with APICHA's transition into a Health Home provider not only comes administrative changes, but changes among our clientele as well. "Under our previous case management system we were exclusively serving a population living with HIV/AIDS," explains Xiaona, APICHA Case Manager and Health Home team member. "Since the eligibility requirements for Health Home are broader and encompass chronic illnesses beyond HIV/AIDS, clients can come into our care or into that of another primary care provider with a mental illness and diabetes, or substance abuse and heart disease. These are all things we have dealt with in the past but that we are now seeing at higher rates." Vacharakitja adds, "We're also seeing clients from a wider range of countries that speak more languages. Our cultural competency has increased in the last year for sure."

To ensure that we are able to continue providing services that reflect the needs of our clients—and an anticipated higher volume of people accessing our services— APICHA is expanding its Client Services Department, hoping to double the number of case managers and care coordinators to 50 over the next two years. With this influx of new clients, we want to ensure that the diversity of the staff reflects their diversity, which entails hiring a number of additional African American and Spanish-speaking people. At present, our staff speaks approximately 20 languages, including Spanish and a number of Asian and Eastern European languages. APICHA's Client Services staff attends regular trainings on topics like substance abuse or mental health disorders to address the growing diversity of the health issues faced by clients. "If you have worked in Client Services for a long time—like many of our staff— then you're already familiar with

Continued on page 3

Taking Action against Meningococcal Meningitis

Starting in January of this year, APICHA Community Health Center began receiving assistance from the New York City Department of Health and Mental Hygiene (DOHMH) to respond to the outbreak of invasive meningococcal disease—commonly known as meningococcal meningitis—in New York City. In this partnership, the DOHMH provides vaccines at no cost to APICHA's uninsured patients as well as patients with insurance that does not cover the vaccine. This effort is a much-needed relief to those who are at risk for infection, particularly men who have intimate contact with men they meet through websites, digital applications, or at bars or parties.

APICHA's partnership with the DOHMH came about after Dr. Murayama, Chief Medical Officer, reached out to Dr. Jane Zucker, DOHMH Assistant Commissioner, to highlight the importance of having the DOHMH's support in APICHA's fight against the emerging epidemic. In an email chain started on January 3, 2013, he emphasized the increasing number of uninsured, minority gay men who walked through APICHA's doors that are unable to pay the prohibitive cost of the vaccine—\$100—which moved Dr. Zucker to provide vaccines for APICHA patients who lacked access to it. Dr. Murayama also notes that few doctors obtain the vaccine for their patient because of concerns

regarding reimbursement and cost.

Reports of the meningococcal meningitis outbreak first emerged in New York City in 2011; twenty-two cases have been reported here since then, seven of which have been fatal. According to the Centers for Disease Control, symptoms of infection include fever, headache and stiff neck, altered consciousness, vomiting, an inability to tolerate light or loud noises, and in some cases, a rash. The most recent cases of meningitis in New York City have affected men-who-have-sex with men (MSM). The disease is spread by close contact with an infected person—such as prolonged kissing and other intimate contact—thus it is sensible that the disease would affect individuals within a particular sexual population after gaining access to it. Beyond MSM, according to the DOHMH fact sheet, people living with HIV/AIDS (PLWHA) “are at greater risk than the general population of acquiring the infection that causes invasive meningococcal disease.” In fact, 42% of PLWHA who acquired meningococcal meningitis died of it.

The DOHMH states that immunity to meningitis may decrease within 5 years of getting vaccinated; thus at-risk individuals—particularly MSM and PLWHAS—are encouraged to receive another dose if 5 or more years have passed since their last vaccination. ■

APICHA Rolls Out Patient-Centered Health Home Services

Continued from page 2

these issues,” says Vacharakitja. “But these trainings are especially useful for new staff that comes on board. They help prepare new hires to be mindful of what to expect when they first meet and continue to meet with clients.”

In addition to the challenge of increasingly diverse clients, APICHA has had to keep up with the seemingly light-speed pace of transition from paper to electronic charts. “Because of all of the changes that are happening, we recently had to transfer all of our hard-copy client records from 2012 into electronic form. All in just one month!” explains Padma Doobay, Case Manager. “At that time, we really had to buckle down and get it done—and we did.”

But despite the growing pains APICHA staff has faced in settling into the Health Home system, they already see a lot of promise in what it can offer our clients and how it can impact their health. And Lee is one of these clients. With Xiaona's help, he has been enrolled in primary care for three months with a Chinese doctor near his residence in Sunset Park and receives translating services as necessary. “He is doing really well,” explains Xiaona. “He has been making all of his appointments and takes all his medication. He even tried to convince his daughter's mother-in-law to sign up for our case management because he knows how much she would benefit from the services we provide. The Health Home program is still young, but based on my experience with clients like Lee, I have confidence that it will benefit hundreds of patients to come.” ■

CEO Speaks on Sexual Health at New York State Department of Health

Continued from page 1

to acknowledge the importance of providing sexual health services to improve a person's overall health and well-being. APICHA, she asserted, grew from a response to the sexual health needs of the community, and today, we integrate sexual health care and messaging into all aspects of our services and programs to help our patients live the healthiest life possible.

“You are a trailblazer, a true hero and champion,” wrote Humberto Cruz, Director of the AIDS Institute, in a letter to Ms. Rodriguez. “Your participation in the commemoration, as with your past HIV/AIDS efforts gave a voice to many, raised our awareness and reminded us of the work that still has to be done.”

“Your participation in the commemoration, as with your past HIV/AIDS efforts gave a voice to many, raised our awareness and reminded us of the work that still has to be done.”

The other guests on the panel were Catherine Hanssens, Executive Director at the Center for HIV Law and Policy; Dr. Charles John Gonzalez, Associate Medical Director for Science and Policy/OMD NYSDOH AIDS Institute; Stacey S. Latimer, Minister at Love Alive International and Sanctuary of Praise-Worship Center of New York City, Inc.; and Gabrielle Lazzaro, a leader in Project K.I.S.S. There were also welcoming speeches by Humberto Cruz, Director, NYSDOH AI; Sue Kelly, Executive Deputy Commissioner, NYSDOH; Celeste M. Johnson, Associate Commissioner, NYSDOH; and Dan O'Connell, Deputy Director, NYSDOH AI. ■

A publication of APICHA
Community Health Center
400 Broadway
New York, NY 10013
Entrance on 70 Walker St.

Phone: 212.334.7940
Fax: 212.334.7956
Healthcare Services: 212.334.6029

EDITORIAL BOARD

Therese R. Rodriguez
Chief Executive Officer

Aleli Alvarez
Executive Assistant to the CEO

Yumiko Fukuda
Chief Operating Officer

Daniel Goldman
Deputy Director of Development

Robert Murayama, M.D., MPH
Chief Medical Officer

Gertrudes Pajaron
Chief Development Officer

BOARD OF DIRECTORS

Marcelito Custodio, M.D.
Chair

Jaime S. Huertas, MPH
Vice Chair

German B. Compas
Secretary

David A. Boyd

Alexander Chan, Esq.

Edward Kai Chiu, M.D

Donald Credle

Stephan Davis

Simona Chung Kwon, DrPH, MPH

Eliza Eng, M.D., MPH

Lou Madigan

Barbara McCambry

Yoshiyuki John Oshima

Michael Yusingbo

Therese R. Rodriguez,
Ex Officio, CEO

Special thanks to Rafael Flores for his contributions in writing articles for this issue of APICHA News.

A Lesson on Trans* Health at SUNY Downstate

“Does sex at birth determine one’s gender?” asked Cecilia Gentili, APICHA’s Trans* Health Care Coordinator. This question was posed at her lecture titled, “Differences between Gender, Sexual Orientation, Romantic Attraction, Sex at Birth, Appearance, and Their Interactions,” which was delivered to students at the SUNY Downstate School of Public Health on February 6, 2013.

“I tried to give the students a better understanding of gender and sexual identities, the many ways they can interact, and how these identities relate to different health outcomes,” explains Gentili, who has years of experience educating people

“[Medical providers] must learn how to handle that respectfully. It’s very important when you do public health work that you understand and learn from the people and communities with whom you’re working.” The students in Dr. LaRosa’s class are pursuing higher degrees in public health, and many of them will enter professional public health positions in the coming years.

Ms. Gentili’s lesson was preceded by a talk from APICHA CEO Therese R. Rodriguez, who spoke on the challenges that transgender patients face when seeking medical care – the failure of providers to acknowledge their preferred gender pro-



PHOTO CREDIT: APICHA NEWS

The students from Dr. Judie LaRosa’s (standing, right) “Sex, Gender, Race, and Ethnicity” class at SUNY Downstate School of Public Health pose for APICHA News after hearing from Cecilia Gentili (standing, left) about understanding sexual and gender identity.

around issues of gender and sexuality through her involvement with the Lesbian, Gay, Bisexual, and Transgender Community Center in New York City and the Mazzone Center’s Trans Health Conference in Philadelphia. “I wanted these students to understand why it’s necessary to have health providers who understand LGBT issues and what the LGBT community often wants from their providers.”

Since APICHA opened its Trans* Health Clinic in November 2011, our staff has reached out to a number of local schools and organizations to educate them on issues around trans* health and other aspects of trans* experience, such as how they—and many others—perceive the separation of biological sex, sexual orientation, and gender identity. At SUNY Downstate, Ms. Gentili created diagrams of how sexual and gender identities intertwine and shared examples of how the lifestyles, behaviors, and treatment of people from different identity groups require specific prevention strategies and medical treatments.

“At one point Ms. Gentili spoke to the class about how a transwoman might go into a hardware store, buy silicone, and inject it,” noted Dr. LaRosa, the professor of the School of Public Health course “Sex, Gender, Race, and Ethnicity.”

noun, for example – and the need for the government to fund more transgender health programs. She also highlighted APICHA’s competence in providing culturally-sensitive services to patients of trans* experience and emphasized APICHA’s role in passing pro-LGB, pro-trans* legislation such as the Gender Expression Non-Discrimination Act (GENDA), which protects individuals from discrimination based on their gender identity or expression.

“From the receptionists to the medical provider we understand, for example, why it might be difficult for a transmale patient, who has spent a lifetime denying his femininity, to have a pap smear,” exclaimed Ms. Rodriguez. “We always ask one’s preferred gender pronoun and preferred name. We also facilitate legal support around immigration and name changes, and help patients access entitlements if they need them.”

Dr. LaRosa noted that Ms. Gentili and Ms. Rodriguez’s talks were well-received, and that they are invited to return to speak with another group of students this summer. “Both presentations brought an important perspective,” she said. “They brought knowledge and wisdom and guided our students in better understanding LGBT health.” ■

National Asian & Pacific Islander HIV/AIDS Awareness Day {MAY 19, 2013}

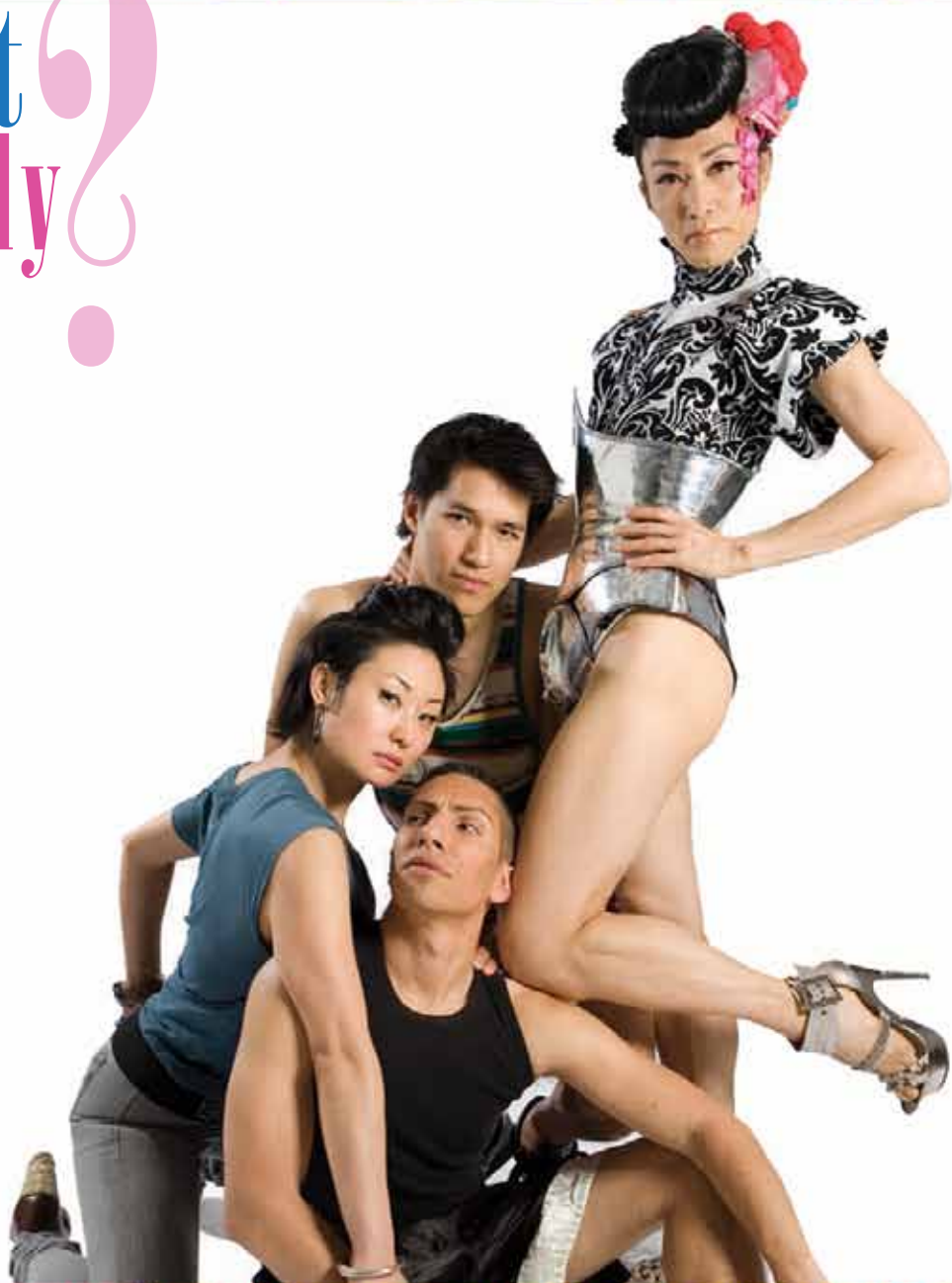
DONE it lately?

Get checked for: ●

- HIV
- STDs
- Hepatitis
- Diabetes
- Hypertension

APICHA
Community Health Center


AMIDA CARE
ABOVE AND BEYOND FOR YOU



Get Informed.
Get Tested.
Get Care.

เพราะเราใส่ใจ 我們關心您 Chung Tòì Quan Tâm हम आपके रक्षा करे
僕たちはあなたの事を気にかけています。 Kita Peduli Nosotros Te Cuidamos
Mahal Ka Namin E Malama আমরা আপনাকে নিয়ে ভবি। 我们关心你 We Care
We Care 我们关心你 Mahal Ka Namin 언제나당신과 함께 합니다 E Malama
Chung Tòì Quan Tâm हम आपके रक्षा करे เพราะเราใส่ใจ 我們關心您

What's in a Name? APICHA Helps Trans* Patients with Legal Name Changes

Most people don't question their birth name. But for many people in the transgender community, like Carla, it never really quite fits.

Carla was born Carlos Antonio in Peru. Although Carla is a woman, she was born with a man's body, or, as she puts it, she was born "androgynous." "I never had a beard or mustache. No Adam's apple. Wide pelvis. Everything is feminine about me except my genitals."

For Carla, and many other transgender-identified people, legal name changes are a wondrous, if scary option to harmonize their name with who they feel they are. The process – which requires legal aid, copious paperwork, and a modest but necessary sum of money – can be burdensome, confusing, and/or seemingly out of reach. Luckily for Carla, she found support to change her name through our Trans* Health Clinic, which opened in 2011 and provides a range of medical, mental health, and support services to improve the health and well-being of transgender people.

"We talked a lot about how changing her name would be good as an affirmation of her gender identity," explains Cecilia Gentili, APICHA's Trans* Health Care Coordinator, who worked closely with Carla to change her name. "Her friends and family had already known her as Carla for many years, but changing her name legally would just strengthen her identity as a woman—she wouldn't have to deal with people questioning who she was when she used her passport to travel, for example, or when she got a driver's license. We just didn't want her to feel uncomfortable or that she had to hide."

With Cecilia's help, Carla approached the Transgender Legal Defense and Education Fund (TLDEF) for legal support. TLDEF, a New York City-based organization committed to ending discrimination based on gender identity and expression, strives for equality for transgender people through public education, legal services, and public policy efforts. "We are so

grateful to TLDEF," says Gentili. "They found us a lawyer – a great lawyer – who filed the petition for a name change and got us a court appointment within weeks." At the court hearing, Carla was almost immediately granted a court order to have her name changed. After about three months of work – talking to lawyers, completing seemingly endless forms, and handling a new level of emotional pressure—Carla describes the process, grinning: "It was very easy."

As name changes become more popular among transgender people, the process has grown more attractive—and attainable—for a younger generation. Destiny, a 19-year old transgender woman who has been receiving medical services at APICHA since last sum-

mer, she'll be able to do the same. Otherwise, there is no way she would be able to pay for them." Cross-gender hormone therapy for transwomen costs upwards of \$500 per year plus copay, and for most transwomen who haven't changed their gender marker or who do not have insurance – and many do not— this annual cost can last for a number of years, if not for life. For Destiny, access to these hormones is essential. "I feel comfortable as a girl, like I am myself," she explains. "The hormones are gonna help me with my appearance."

For most trans* people, changing one's gender marker is a relatively simple process. All they need is a document from their primary care provider stating their correct gender, which they take to the Department of Motor

Vehicles for processing. Cecilia hopes the process will wrap up quickly so that Destiny can access free hormones and ease the financial burden of therapy as soon as possible. For now, however, Destiny is buying hormones from a pharmacy in Queens, which offers them at a reduced rate compared to most other pharmacies in New York City. "We went to the end of the world to find cheaper hormones!" exclaims Gentili.

For Destiny and Carla, having their names and gender markers legally changed will help them realize their dreams—and they have many. In the coming months Carla hopes to marry her partner of 11 years as a woman.

Carla wanted to marry him years ago, but was unable to do so since their partnership was considered homosexual and gay marriage was not legal in New York until the Marriage Equality Act passed in 2011. Destiny, on the other hand, wants to explore a number of dreams. "I want to be a speech therapist, or do forensic science. Or I want to be a professor of dance and theater or cosmetology."

But while Destiny is hopeful and excited for her future, she anticipates facing challenges along the way: "It gets ugly before it gets pretty. You have to go through something to learn. It's helpful, though, to have an organization like APICHA to get you through it." ■



Destiny "decided to be a girl 24/7" on her birthday last year.

mer, has also spent the past several months with Cecilia to change her name as well as her gender marker on legal documents such as her birth certificate and social security card. But unlike Carla, who has been presenting herself as a woman for decades, Destiny "decided to be a girl 24/7" on her birthday last year and did not begin cross-gender hormone therapy to aid in her physical transformation – widen her hips, enhance her breasts – until last month.

"Changing her name and gender marker is the only way we can get her affordable hormones for therapy," explains Gentili. "Women who need hormones can simply request them from insurance companies. If we change Destiny's gender in the eyes of the law, then

We Made It!

Continued from page 1

chronic disease. Furthermore, the Obama Administration developed the country's first ever National HIV/AIDS Strategy (NHAS), which among many directives, calls for the integration of HIV primary care into general primary care. NHAS was followed by the passage of the Patient Protection and Affordable Care Act (PPACA), another monumental policy that is widely impacting health care delivery and reimbursements in this country. The law also addresses the inordinate number of currently uninsured people by mandating the expansion of Medicaid and the establishment of Health Benefit Exchanges. While these policies provide directions for HIV-focused organizations, they also present enormous challenges. Many HIV providers, including several in New York City, have closed their doors because of lack of prevention funding for programs that no longer aligned with the direction of NHAS and PPACA. APICHA grappled with the changes and set in motion its plan for a new direction.

In addition to NHAS and PPACA, a national discourse on LGBT and immigrant issues has been propelled to the forefront. Marriage equality is gaining support throughout the country every day. Health and Human Services Secretary Kathleen Sebelius has issued a policy statement directing federal agencies to collect data on LGBT health issues and prioritize studies that will reduce health disparities. At this writing, a comprehensive immigration bill is being hammered out in Congress, generating much attention and energy from immigrant communities and their allies, including mechanisms to obtain citizenship and access to health care coverage.

"The momentum is on our side. APICHA has a great opportunity to pursue our mission of serving more people in need. In designating APICHA as a FQHC-LA, HRSA has demonstrated that it is in step with the mandates of the NHAS and the PPACA and has its ears on the ground about the needs of medically underserved and marginalized communities

that need more help," said CEO Therese R. Rodriguez.

What It Took To Get Here

Achieving this important milestone was a rigorous process that required strong and persistent advocacy efforts by APICHA and its allies to articulate the needs of its target populations. APICHA's advocacy efforts were crucial

to its FQHC-LA designation, which required an in-depth analysis of the patients we serve (e.g., race/ethnicity, income, housing, health status, etc.). Countless research illustrates that the LGBT community is at an increased risk for a number of health issues including cancer, mental illness, and substance use due to factors such as lack of health insurance, harassment, stigma, and a lack of cultural competency in the health care system. Similarly, PLWHA –

due to socioeconomic and other factors – are widely recognized as being at an increased risk for diseases such as cancer, hepatitis, diabetes and cardiovascular disease, hypertension and depression. Our own community needs assessment shows that residents of our service area have above average rates of HIV, diabetes, cardiovascular disease, low physical activity.

We used the results of the analysis and the needs assessment to articulate health disparities experienced these communities to policy makers, government officials and other supporters. Effectively demonstrating the needs of our patients to policy makers and community leaders validates APICHA's expansion into a community health center. APICHA also had to overcome FQHC regulations that govern the HRSA health center program. Specifically, one regulation requires FQHC applicants to define

a geographic service area. While APICHA has always served the Chinatown and Lower Eastside neighborhoods, areas that are medically underserved, APICHA's patients come from all over the city to find a safe space where they can access services.

The FQHC-LA designation is remarkable given active opposition from one existing FQHC in our service area who view us as a threat, not as a partner.

What This All Means

Becoming a FQHC-LA has its advantages but comes with responsibilities. As an FQHC-LA, APICHA is able to preserve our core HIV-services and expand our services to other medically underserved populations, particularly those living in our service area. We are able to do this with some of the benefits extended to FQHC-LAs by the federal government, including enhanced Medicaid and Medicare reimbursements, expanded discounted drug program (340B), and access to National Health Service Corps Providers who provide care in health professional shortage areas across the country. Operationally, FQHC-LAs must comply with all 19 HRSA's Health Center Program Requirements. Many of these are extremely demanding.

For APICHA, that has meant transforming its Board to have at least 51% consumer members who must meet every month. The Board must also be trained on their responsibilities, including the review and approval of health center grant applications and budgets, various policies and procedures, and sliding fee scale. Additionally, APICHA must invest in training, from front desk staff to Board members, to run a successful FQHC. This includes competency in the use of electronic health records, billing and collection practices, monitoring and reporting

of extensive clinical and financial performance measures, data analysis and evaluation, and business and strategic planning. It also meant revising our mission to reflect the new direction of the agency and changing our legal

"The momentum is on our side. APICHA has a great opportunity to pursue our mission of serving more people in need."

While APICHA has always served the Chinatown and Lower Eastside neighborhoods, areas that are medically underserved, APICHA's patients come from all over the city to find a safe space where they can access services.

Continued on page 10

APICHA Hosts World AIDS Day Photo Exhibit

In honor of World AIDS Day 2012, APICHA Community Health Center hosted a photography exhibit featuring the work of famed Filipino artist and HIV activist Niccolo Cosme. The exhibit, which adopted the UNAIDS theme of “Getting to Zero: Zero new HIV transmissions. Zero deaths from AIDS-related illness. Zero discrimination” took place on November 29, 2012 in the Lower Level of APICHA’s facility at 400 Broadway.

“As an organization with over two decades of experience providing HIV/AIDS services in New York City, we wanted to create a space for staff, patients, and the community at large to reflect on the significance this day might have

for them,” explains APICHA Chief Executive Officer Therese R. Rodriguez. “We also wanted to provide the community with information on the latest approaches to HIV/AIDS treatment and prevention, and to describe the work we do to combat the epidemic.”

The 30 photos in the exhibit served as part of Cosme’s “Project Headshot Clinic,” an international campaign that photographs hundreds of advocates who are committed to raising awareness around HIV/AIDS in their community. In addition to having their pictures displayed in our exhibit, all campaign participants were asked to post their portraits on their personal social media outlets such as Facebook on the

days surrounding World AIDS Day, December 1, 2012. This online aspect of the campaign was intended to amplify promotion of World AIDS Day, to encourage people to get tested for HIV, and to inspire folks to learn more about the disease in countries around the world.

“Taking part in this project was really empowering for me” exclaimed Jason Wu, one of 30 advocates who volunteered to have his picture taken and displayed for the exhibit. “It gave me a voice in the global movement to end HIV/AIDS at a time when we have more resources than ever to make real change. How cool is that?” ■

“Taking part in this project was really empowering for me. It gave me a voice in the global movement to end HIV/AIDS,” says Jason Wu, one of 30 participants in APICHA’s photo campaign for World AIDS Day 2013.



Thank You, Humberto Cruz!

APICHA’s Board of Directors on May 7, 2013 passed a resolution to present a special appreciation to Humberto Cruz, former director of the New York State Department of Health, AIDS Institute. Mr. Cruz retired from AI in April this year. The resolution reads:

Whereas, after almost six extraordinary years as the Director of the New York State Department of Health’s AIDS Institute (AI) and over two decades of public service, our beloved friend and fellow HIV/AIDS advocate, Humberto Cruz, has retired from public service;

Whereas, Humberto dedicated the span of his career fighting to improve the lives of people living with HIV/AIDS in New York City and affected the lives of millions of people across the United States.

Whereas, under the leadership of Humberto, AI implemented innovative and effective care programs throughout New York State including prevention and care targeted to communities disproportionately affected by HIV/AIDS and comprehensive harm reduction services to people who use illicit drugs – programs that serve as a model of public health for the United States;

Whereas, Humberto unwaveringly supported APICHA Community Health Center in times of need, ensuring that our doors remained open to the most vulnerable and marginalized Asians and Pacific Islanders and other people of color in New York City. ■

LGBT Youth Have a Ball at APICHA

Hot on the heels of Valentine's Day, APICHA Community Health Center hosted the "Love Hangover Ball," a house ball-cum-HIV/STI testing event targeting LGBT youth of color. The event, which took place on February 15, 2013 at APICHA's facility at 400 Broadway, welcomed a crowd of over 100 attendees throughout the evening to participate in a rousing house ball in the Lower Level and to receive HIV and STI screening in APICHA's fourth-floor clinic. The affair was organized by APICHA's LGBT Program in partnership with the Hetrick-Martin Institute.

"We wanted local LGBT youth of color to learn the importance of HIV testing and to have a space to let loose," explains Chris Quarles, APICHA's Prevention Associate, the main organizer of the event. "At these balls, kids come with all their frustration from the hardships of school, family, life, and they use it to do good for their community—to engage their peers in HIV awareness and to put on a show!"

House balls regularly bring together LGBT youth of color around New York City—many who face issues of homelessness and poverty – to compete for trophies and prizes. At the Love Hangover Ball, individuals competed in a series of categories – Performance, Realness, Best Dressed, and Face – to show off their expertise in dance, style, and posing. The winner of the night's primary competition, Runway, was a young man named Jojo, who according to Quarles, "brought the exuberance that he needed to win over the judges." The judges for the competitions were leaders from the ball community who for their generosity received complimentary sex toys from Babeland, a sex-positive sex shop in Soho.

"We wanted to let local youth know that there's a space in the city that belongs to them," says

Larry Tantay, Young Men Who Have Sex with Men (YMSM) Coordinator, who helped plan the event. "After this ball, we hope these youth feel comfortable coming to APICHA for primary care and HIV and STI screening, as well as to work with us in changing risky sexual behavior they might engage in."

At this ball, APICHA tested 21 individuals for HIV, Hepatitis C, pharyngeal gonorrhea and Chlamydia, and syphilis. Of these folks, 13 had never been tested for STIs. "Once the ball started, we saw a rush of people wanting to get tested," exclaims Tantay. "It's great, though—it showed that we were really getting our name out to this demographic that's a huge part of YMSM in New York City. It also showed a demand from the community for testing services, and affirmed our need to provide them."

The ball was photographed by The Dusty Rebel, a professional street photographer who has documented a variety of urban scenes in cities around the world for over a decade. In addition to covering Love Hangover Ball, he plans to photograph participants from the event for future ball promotion and to showcase the energy of LGBT youth in New York City.

"It took a village to put this all together," says Quarles. "But it was an important effort to raise our profile in a community that has historically lacked access to adequate health services, and to let them know that they can turn to APICHA to get these services in a safe space." ■



Jojo, the winner of Love Hangover Ball's runway competition, won over the judges with his exuberance.

APICHA Holds Testing Event, Fundraiser at Stonewall



Yuhua Ou

PHOTO CREDIT: JAMES ROEBUCK

Ring in the New Year with good health and a hearty dose of glitter, APICHA's LGBT Program partnered with one of New York's most celebrated drag queens, Yuhua Hamasaki, for a fundraiser-meets-testing event at the historic Stonewall Inn. The event, which featured a high-glam drag show, a host of raffle prizes, and on-site HIV/STI testing, took place on January 21, 2013.

"It's good to give back," exclaims Hamasaki, who conceived the event and helped raise money from the show for APICHA. "People from the community have supported me for so many years by coming to my shows and cheering me on. This event was my way of giving back to the community and helping other people who might really need it."

The affair was part of a long series of drag shows at Stonewall called "Invasion." Every Sunday, the popular West Village bar brings together the finest drag queens from around the city to put on a show, and at times, to raise money for local organizations that support LGBT causes. For the Invasion benefitting APICHA, Hamasaki called on her gal pals Sabel Scities, Angelina Lee Mac, Nikki Fierce, Starla Starshine, and Jade – other renowned drag queens – to join her onstage and to belt out (read: lip synch) hits from megadivas like Mariah Carey and Adele.

While Invasion at Stonewall is promoted as a

drag party of sorts, the name "Invasion" has roots in a time when the drag community faced immense discrimination. "'Invasion' is a term that came from LGBT history on Fire Island," explains Yuhua. "For many years, drag queens were made fun of for being there, so drag queens fought back by getting on a boat and 'invading' the island every Fourth of July." Over the years, Fire Island warmed up to the annual invasions, and Invasion at Stonewall pays homage to this change of heart, particularly among gay men.

Throughout the night, with Yuhua and her girls entertaining onstage, APICHA's LGBT Program worked the crowd – spreading the word on APICHA's services, passing out condoms, and inviting patrons to get tested for HIV, Hepatitis C, and pharyngeal gonorrhea and Chlamydia on the Lower Level.

Overall, the event was a great success, providing HIV/STI tests to high-risk individuals, and raising over \$400 for APICHA. "It all could not have happened without Yuhua's help and connections in the community," explained Jesus Baez, APICHA's Men's Health Coordinator. "Working with her brought in more Asian and Pacific Islanders, drag queens, and trans* people for testing, and introduced our primary care services to these populations. She also raised money to help us continue to provide needed services to the community." ■

We Made It!

Continued from page 7

name to APICHA Community Health Center from Asian & Pacific Islander Coalition on HIV/AIDS. Lastly, APICHA must fulfill a FQHC requirement to serve residents of its service area. This means developing and implementing an outreach and marketing plan to increase visibility in the community and recruit patients into our clinic.

The Finish Line

APICHA's Board approved 2011-2013 Strategic Plan that includes a central strategy to become a fully-designated FQHC by 2014. To accomplish this, APICHA must receive a New Access Point (NAP) award, a necessary step that must be taken before a health center can become a full FQHC. APICHA submitted its first NAP application in 2010 but was unsuccessful. Another application was submitted in April 2013; the result of this application cycle is expected in August 2013. The NAP application is a highly competitive process, but we are hopeful that our current FQHC-LA designation will give us one leg up compared to other applicants. According to knowledgeable sources, we are in a good position. In addition to benefits extended to FQHC-LAs, full FQHCs receive annual grants of up to \$650,000 for the provision of medical services. Full FQHCs also benefit from coverage of medical malpractice under the Tort Claims Act for its medical providers. Operationally, there are very few differences between a FQHC-LA and a full FQHC.

We could not have achieved this milestone alone. We thank our friends and partners who helped us get to this point in our quest to become a full FQHC. Many serve as mentors, wrote letters of support and cheered us on. See you at the finish line. ■

Spotlight on MCCNY Charities

Just blocks away from the Hudson River on 39th street, a haven for some of the city's most vulnerable communities has taken root for almost three decades. MCCNY Charities, the social service branch of the Metropolitan Community Church of New York (MCCNY)—the largest LGBT denomination in the world—has provided a host of social services to the homeless and hungry of New York City since 1985, with a focus on people living with HIV/AIDS and lesbian, gay, bisexual, transgender, queer, and intersex (LGBTQI) youth.

"At the core of what we do is inclusion," explains Frances Wood, MCCNY Charities' Administrator. "Because of that inclusion, the level of diversity among the people we serve is like nothing I've ever experienced. We have our doors open really wide!"

The organization offers a range of programs to fill gaps in needed social services, but MCCNY's physical space—two floors flanking MCCNY Church—largely centers around Sylvia's Place, a homeless shelter for New York City's LGBTQI youth in crisis. Sylvia's Place is one of the few shelters in the city that accepts youth directly off the street and that prioritizes the LGBTQI youth aged

18 to 24, including transgender and intersex youth, youth experiencing trauma, and youth living with HIV/AIDS. Residents are allowed to stay at Sylvia's Place for up to 90 days, a period during which MCCNY Charities hopes they use to get back on their feet and perhaps find long-term housing. If they need housing past this period, their stay is either extended or they are connected to other transitional housing programs. "So many of our people have had bad experiences elsewhere—at other shelters or whatnot," explains Wood. "It's great that MCCNY is able to be the alternative—the place where they have a good experience that moves their lives forward."

Another major component of MCCNY Charities' work is HIV testing, which they conduct in partnership with APICHA. All intakes at Sylvia's Place are offered free and confidential rapid HIV testing, and beyond that, testing is available to anyone who walks through

MCCNY Charities' doors seven days a week, including late nights and weekends. If an individual tests positive, APICHA staff conducts a confirmatory test and the individual is introduced to APICHA's clinic services—or clinic services at another agency if they prefer—to make an appointment with a primary care provider. The partnership is APICHA's first with MCCNY Charities, and grew from a request for applications released by the Centers for Disease Control that was designed to increase HIV testing and referral services for men-who-have-sex-with-men and transgender adults of

bringing in a number of men who have sex with trans* women." Wood adds, "There is still a lot of stigma around HIV and testing, and with being associated with certain high-risk populations. We have tested a number of partners of trans* women recently, and some have come to us from upstate (New York) because they're afraid of being associated with a trans* person by people in their community." To combat the stigma associated with HIV and HIV testing, MCCNY Charities is launching a health promotion campaign with the slogan, "It doesn't matter who you're with—you need to get tested!" The campaign will feature various couples to emphasize that everyone is at risk regardless of ethnic, sexual, or gender identity—or the identities of their partners.

In addition to HIV testing, MCCNY Charities partners with a number of other local health and social service organizations for the Super Duper Clinic every Thursday. At this clinic, which takes place from 3-9pm, the public has access to a number of health services at no cost, such as mental health counseling, substance abuse intervention, Medicaid enrollment, mental health first aid, housing assistance, psychiatric nurse services, and expanded syringe access, among others. Furthermore, through its Queer Elder Spirit Program, MCCNY Charities matches

LGBTQI elders with LGBTQI home health aides and personal care aides to assist homebound individuals with personal care, rehabilitation support, household tasks, and more. In addition, through Trans* in Action – an advocacy and empowerment group for transgender runaway and homeless youth—MCCNY Charities develops new ways of addressing discrimination and exclusion directed toward people of trans* experience, such as advocating for the rights of incarcerated transgender people and improving media representation of transgender people.

"I have learned a lot from constantly assessing what the need in the community is," says Wood. "To be able to ask how we're doing and if we can be doing it better—I'm really moved by it. It's been really good for me to be here. It keeps me close to what's happening in the city and to these populations that really need support." ■



"At the core of what we do is inclusion. Because of that inclusion, the level of diversity among the people we serve is like nothing I've ever experienced." Photo shows Frances Wood, MCCNY Charities Administrator (left), and Kristen Lovell, MCCNY Charities' Trans In Action Facilitator.*

color aged 18-29.

"Coming together made complete sense," explains Jay Gabor, APICHA's LGBT Program Community Health Manager who liaises with MCCNY Charities. "With our combined resources, everyone who walks through the doors of Sylvia's Place can know their HIV status within days of entry and we can connect seropositive individuals to primary care services at APICHA or other health facilities. The partnership also allows people who test positive to have stable housing while they are receiving care and getting used to their new status."

While the program has been successful in testing scores of LGBT youth, MCCNY is nevertheless aiming to reach a larger volume of high risk individuals. "We are really trying to have people coming through our doors at all times," explains Kristen Lovell, MCCNY Charities' Trans* In Action Facilitator. "We're now doing a lot of outreach through social media, which is

Dr. Murayama Urges LGBT Folks to “Demand Good Care!”

“Demand good care!” exclaimed Dr. Murayama, APICHA Community Health Center’s Chief Medical Officer. This was the mantra for his lecture, “Ten Things LGBT* Folks Need to Discuss with Their Health Care Providers,” which was delivered to an audience of patients, staff, and community members on January 24, 2013 in APICHA’s Lower Level at 400 Broadway. The presentation was an installment in Project Connect’s A Healthier Me! monthly workshop series, which offers adults a safe space to develop new skills, receive information on culturally-competent resources, and build supportive networks.

“Most people – particularly LGBT people – have never gotten support around talking to their medical providers about their health,” explains Vincent Lee, the event’s organizer and APICHA’s Project Connect Coordinator. “With this workshop, we wanted to give attendees the tools and comfort to have informed, honest conversations with their doctors and other primary care providers.”

In his lecture, Dr. Murayama guided the audience through the major health issues impacting lesbian, gay, bisexual, and transgender people, respectively, and illustrated how APICHA’s medical services and programs can lead them to achieve better health. For lesbians, for example, he shared the importance of receiving regular pap smears to detect and prevent the progression of cervical cancer—a service readily available at APICHA. He also discussed the prevalence of HIV/AIDS among gay and bisexual men, listing three methods to help them prevent HIV infection if they are seronegative— such as using condoms when

engaging in anal sex and minimizing substance use— and explaining the importance of adhering to anti-retroviral treatment if they are living with HIV/AIDS. He also warned against the problems associated with injectable silicon amongst transgender individuals, including blood clots, pulmonary embolism tumors, and skin discoloration.

“I only wish he had more time to speak,” exclaimed Nina, an attendee who identifies as a transwoman and has been enrolled in APICHA’s primary care services for six months. “His presentation covered so many topics and was so informative. I even wrote down a list of questions to bring my doctor for my next visit—questions around shots that I need and tests that I should have based on my sexual behavior. For me the whole thing was incredibly interesting and brought up a number of things to think about.”

Project Connect, funded by the New York State Department of Health AIDS Institute, is a program for Asians & Pacific Islanders (APIs) who identify as lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ). LGBTQ individuals experience barriers accessing health services due to a spectrum of factors such as culture, linguistic isolation, and a lack of supportive networks. Initiatives under Project Connect – such as the A Healthier Me! skills building workshop series— are designed to improve the general health and well being, and to increase access to culturally competent health and human services for LGBTQ APIs. In addition to A Healthier Me!, Project Connect offers cultural competency trainings for service providers, and also organizes GAYME, a program that brings together LGBTQ API mentors and mentees to discuss issues faced by LGBTQ API youth.

“Through GAYME, API LGBTQ youth form relationships with mentors who have had much more time to settle into their ethnic and sexual identities,” explains Lee. “At meetings, mentees ask questions that explore the vast experience of being a non-heterosexual API and touch upon issues such as

coming out, family, bullying, dating. It’s really great seeing the mentees connect with the mentors, and to watch them slowly grow into themselves over time.” ■

Honoring Tom Duane

After 13 remarkable years of service as New York State’s first openly gay and first openly HIV-positive senator, our beloved advocate and ally Tom Duane has announced his retirement from office. Over the course of his impressive three-decade long political career,



Tom played a pivotal role in passing significant legislation to defend human rights and dignity for all people, but his work to uphold the rights of LGBT persons stands out as particularly impactful.

He fought passionately for the passage of the Sexual Orientation Non-Discrimination Act (SONDA) in 2002 and the Gender Expression Non-Discrimination Act (GENDA) in his last years in office – two laws that protect countless individuals from discrimination in education, employment, housing, and other arenas for simply being who they are. In 2001, he first introduced New York’s Marriage Equality Act and fervently championed it until its passage and enactment in 2011. In addition to his work around LGBT issues, Tom was instrumental in passing landmark legislation around health care, anti-poverty, gun control, and a myriad of civil rights issues.

Tom has also been an avid supporter of APICHA for many years, particularly our work with people living with HIV/AIDS. In 1999, for example, Tom helped APICHA on a case that split a U.S. citizen from his HIV-positive wife in China. Tom, along with Senator Charles Schumer and Congresswoman Nydia Velasquez, brought public attention to this case and heavily pressured the Chinese government to grant the man’s wife a visa. After five agonizing years of waiting, the woman finally reunited with her husband in the United States in November 1999.

APICHA salutes you, Tom, and thanks you for your courage to fight for the rights of LGBT people, people living with HIV/AIDS, and other marginalized populations in New York and beyond. We wish you all the best in the next chapter in your life and will always think of you as a dear colleague, advocate, and friend to APICHA. ■

