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Perspectives on Moving

By Ding Pajaron, Director of Development

APICHA moved into its new home at the end of December 2006, a milestone in a process that began almost three years ago. The following articles report on two perspectives of the project. Therese R. Rodriguez, Executive Director, views the move from capacity building and strategic planning while Aleli Alvarez, Media and Community Relations Manager, takes us back to Day One of the move. Aleli is part of the relocation team.

Making Smart Moves under the Gun

The business of moving is not simply a matter of filling boxes and moving furniture. It is about making strategic decisions under pressure and building needed organizational capacity. APICHA's move to 400 Broadway is such a case.

In May 2005, APICHA's Board of Directors held a weekend retreat. It was the second meeting called by the Board as part of a strategic planning process. "The leadership of APICHA's Board transitioned from Kevin Huang-Cruz to Errol Chin-Loy," recalls Therese. "During the transition, the Board began

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APICHA's new home at 400 Broadway, entrance at 70 Walker St.

Envisioning APICHA's Client-Centered Care

By Victor Inada, MD, Medical Director

When we moved from the 6th floor of 150 Lafayette Street to an entire building at 400 Broadway, we left behind a location that had served us well in providing healthcare services such as rapid HIV testing, HIV primary care, STD screening and treatment, case management, acupuncture, nutrition counseling, mental health assessments, and supportive counseling. This relocation has given us an oppor-

tunity to rethink and restructure how we deliver our services to our clients as well as the central role of the clinic in the short and long term sustainability of the entire agency.

Over the last 18 years, APICHA has gradually added services and programs as we successfully competed for grants and contracts from federal, state, and city agencies as well as private foundations. Each one has increased our ability to meet our communities' needs. But the unintended consequence is some fragmentation between units even though we have coordinated our services and programs in order to address the needs of our clients. For instance, we have different enrollment and data collection tools to satisfy the reporting requirements of every funding agency.

As we gained experience in operating an HIV Primary Care Clinic, we realized that Client-Centered Care (CCC) must be just that. Instead of clients moving around APICHA for appointments with different service providers, Yumiko Fukuda, MSSW, Director

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APICHA's new Health Care Services floor - complete with 4 exam rooms and 5 HIV counseling and testing rooms.

No Longer Alone: Disclosure of HIV Status through Healthy Relationships

By Yu-Kang Chen, Case Manager Team Leader

Disclosure of an HIV positive diagnosis can be an overwhelming task for clients, especially for those whose families are still living overseas. A decision to disclose HIV status to many clients may also mean disclosing their sexual orientation. Strong stigma of HIV and homosexuality factors significantly in this difficulty. Managing disclosure therefore requires social support, best if given by those who are in a similar situation. Healthy Relationships Group (HRG), a prevention intervention model recommended by the Centers for Disease Control and Prevention (CDC), was adapted by APICHA in 2005 to do just that.

A Japanese male client stated that “mostly, I liked to talk, all of us openly ... we could share each experience which was good and understood each other.” Participants are also able to find and create a community of mutual support and understanding. A male Filipino client stated that HRG was beneficial because “I felt that I was not alone in this ... emotionally and psychologically, I feel more balanced.”

Three times a year, a group of people living with HIV/AIDS (PLWH/As) gather weekly, over a 5 week period, in one of APICHA's conference rooms for two hours and effectively build a support system for each other. They have dinner, watch movie clips, and share their life experiences. The goal of HRG is to develop the skills needed to make decisions regarding whether, when, and how to disclose a positive HIV diagnosis to family, friends, and sexual partners. Additionally, it also teaches participants strategies to build healthier and safer sexual relationships. The workshops are conducted in 5-week cycles. Four cycles focused

on Men Who Have Sex with Men (MSM) have been completed. Thirteen clients have completed the 5-session workshops.

Since we began implementing this intervention in 2005, we have encountered and met many difficult challenges. The first challenge was to develop a set of Asian and Pacific Islander (A&PI) movie clips appropriate to MSM audiences. In HRG, a movie excerpt is used as a tool to generate discussion about safer sex and illustrate skills. The original selections for HRG are from popular American movies, none of which included A&PI characters. Since our HRG will be delivered to A&PIs, we felt it was important to choose A&PI movie clips although the intervention model does not require culturally specific examples. This was a daunting task. We purchased and reviewed more than 30 A&PI movies. Staff chose what they deemed appropriate scenes and asked APICHA MSM clients to review them. After our internal review, we sent the movie excerpts to the CDC review board for approval. Participants' feedback have been generally warm and positive, pointing out that the movie excerpts have made it easier for them to openly discuss difficult topics such as safe sex and disclosure of serostatus.

There are other challenges we are facing. The HRG requires a “closed group,” which means that the same participants must attend all 5 sessions. Many of our clients are

unfamiliar with the “closed group” concept. Also, some are forced to drop out after a few sessions because of changes in their personal lives including work schedules, vacations, and illness episodes. Our community's diversity also makes HRG difficult but exciting. For example, during our 3rd cycle, we had three participants who spoke three different primary languages.

HRG is APICHA's first prevention program for HIV positive individuals. We are planning to extend this valuable prevention program

to women and heterosexual men living with HIV/AIDS. In addition, we would also like to create more A&PI-specific movie clips for different A&PI cultures. We hope this unique prevention program can

effectively empower our APICHA clients with skills that will enable them to have healthier and happier lives.

APICHA is one of the few agencies to have successfully developed and integrated culturally appropriate and relevant movie clips in the intervention. In May 2007, I was invited to Boston to share our HRG experiences in the “Moving Beyond Boundaries: Culturally Appropriate Evaluation of HIV Prevention Programs for Asian, South Asian, and Pacific Islander” conference held by the Massachusetts Asian and Pacific Islanders for Health.

HRG is funded by the CDC under Program Announcement 04064.

“I felt that I was not alone in this ... emotionally and psychologically, I feel more balanced.”

— Male Filipino Client

World AIDS Day

APICHA commemorated World AIDS Day 2006 with a solemn ceremony that included prayers by the Venerable Shi Zhi Kon (Buddhist Association of New York, Pu Chao Temple), Imam Abdus Salam Musa (Islamic Center of North America) who was represented by Hasan Raza, Community Training Coordinator, Reverend Tony Bastaman (Set Free Church, Los Angeles), and Father Norberto Cordovez (The Chapel of the San Lorenzo Ruiz). Attendees were able to remember loved ones who have passed away or are living with HIV/AIDS by placing ribbons on the Wall of Courage.



CHEN WEI (MIKE) WU

More People Get HIV Tests at the APA Heritage Festival

By Bric Bernas, Counseling, Testing and Referral Project Manager

APICHA once again participated in the annual Asian Pacific American Heritage Festival, held at Union Square on May 6, 2007, by providing HIV testing. More people accessed the services, our event tally shows. A total of 33 individuals were tested, up by 18% from last year.

To enhance service delivery, a mobile van was rented and parked in close proximity to APICHA's tent. Providing a van is a first for APICHA since it began HIV testing at the festival. In fact it was the first ever mobile van for medical services at an APA Heritage Festival. Although the cost of the testing event increased by \$2,000 due to van rental and parking fees, it was well worth it. Three confidential spaces were set up in the van for clients being tested for HIV. Moreover, in order for HIV testing counselors to focus on risk reduction and the actual HIV test, we added client navigators, who obtained informed consent for HIV testing, to our team. Client navigators explained anonymous and confidential testing. This service can take up 15 minutes or longer for first time testers. After obtaining consent, they would accompany clients to the van for their HIV test.

In previous years, we conducted HIV testing, including discussions of informed consent and pre-test counseling, behind free-standing screens to ensure confidentiality. However, both staff and clients voiced the need for improvements to this set up. Noise filtering through the screen is difficult to control, making it hard for staff and clients to focus during counseling.

CTR staff worked tirelessly with the Coalition of Asian and Pacific Americans (CAPA), the organizer of the event, and the NYC Parks



At the end of the day, it was well worth it. APICHA's health fair team posed in front of the mobile van marking another successful event at the Asian Pacific American Heritage Festival.

Department to get approval for the mobile van. After numerous meetings, letters, and phone calls, a permit was issued.

In addition to HIV testing, we also conducted outreach and provided information and literature on HIV. Prevention peers and volunteers handed out safer sex kits while the

clinic offered health screenings (i.e. glucose and blood pressure). This event is a great example of how APICHA's programs are working closely together for the benefit of our communities. The event has been made possible by grants from CDC and the New York City Council Communities of Color Initiative. 🦋



One of four newly outfitted exam rooms in the Health Care Services floor.

Envisioning APICHA's Client-Centered Care

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of Programs, and I envision clients remaining in a single location while service providers move to where clients are located to provide them various services. In addition, we also realized that APICHA's policies, procedures, and personnel must be realigned and repositioned to better reflect our goal of bringing a holistic client experience to all those who come to us for support.

With this in mind, we worked closely with the architect and made certain that the fourth floor is not just an HIV Primary Care Clinic but a Healthcare Services floor that exudes warmth and tranquility. Ensuring client confidentiality was also equally important. We now have 4 exam rooms (two of which are for medical and two for complementary therapies), 5 HIV counseling and testing rooms, and a spacious

and comfortable reception area for clients and visitors. Aside from the physical and space requirements of the CCC approach, we are moving towards a new level of service integration. We are in the midst of planning and developing a single enrollment form that will assist us in identifying points of entry and appropriate client flow throughout the agency.

Our human resources are also being utilized more effectively. For example, all Prevention Unit staff are now certified to conduct HIV testing, which has significantly increased our capacity to provide more HIV tests. More importantly, the Prevention and Counseling, Testing, and Referral (CTR) units have become more interconnected as illustrated by the implementation of the Client Navigation project. The steps we are taking now will ensure that APICHA remains one cohesive organization with one vision as we move into the future.

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A Perilous NYCDOHMH/MHRA Funding Policy

APICHA lost out in a recent HIV prevention grant competition issued by the New York City Department of Health (NYCDOHMH) and Medical and Health Research Association (MHRA), the agency contracted by NYCDOHMH to administer the grants. As a result of NYCDOHMH/MHRA's decision, our program for adult Asian & Pacific Islander (A&PI) men who have sex with men—the only program in New York City for this group—had to close.

The criteria used in rating applications placed APICHA in a disadvantageous position from the get go. NYCDOHMH/MHRA's approach to service delivery by ZIP Code or by geographic neighborhood undermines organizations indigenous to A&PI communities. A&PI communities are not bounded by geography; rather, these communities are connected by cultural and linguistic ties. A&PIs belong to 49 ethnicities from 20 countries and speak over 100 different languages and dialects. Seventy-eight percent of A&PIs in New York are foreign-born, and 49% have limited English proficiency (LEP) compared to 24% for all New Yorkers. Aside from LEP, many serious barriers to care and HIV education arise out of cultural norms and taboos, and lack of knowledge of HIV (as many immigrants come from regions in Asia and the Pacific Islands where HIV information is not available). All these factors influence an individual's decision whether or not to get tested and/or where to get HIV/AIDS services. APICHA developed its prevention program infrastructure based on these realities.

NYC DOHMH/MHRA also excluded outreach from their list of direct services. This is a critical component of all of APICHA's prevention programs. HIV continues to be highly stigmatized among A&PIs which is partly due to the misinformation regarding the disease. In order to address these issues, APICHA's peer outreach teams seek out the most vulnerable members of our community – often in high risk venues located in neighborhoods that are not considered target areas by NYCDOHMH/MHRA. They provide important and accurate HIV information in a culturally and linguistically appropriate way as well as link people into care. Peer educators also establish trust which leads to people accessing services. Although APICHA's way of delivering services may not fit the ZIP Code scheme, our approach has been effective.

The rejection of our prevention application arrived soon after NYCDOHMH discontinued the Peer Training Institute, the program which allowed us to train many young A&PIs and immigrant women to become effective HIV peer advocates. It saddens us to announce that the city is not funding any of APICHA's HIV prevention programs.

Infrastructure for programs and services are not

built overnight. Therefore, these cannot be closed or revived depending on what funding is available at any given moment.

Community based organizations such as APICHA, in partnership with its funders including NYCDOHMH, invest considerable resources to develop health care assets so that they are available to the communities they serve. It is not in the best interest of New Yorkers to have such valuable assets destroyed.

If NYCDOHMH/MHRA pursues this flawed funding policy, it is heading down a perilous path. It has already signaled that primary prevention now must take a back seat to mass testing and other reactive approaches to fighting the disease. Although identifying undiagnosed HIV infections is critical in our fight against HIV/AIDS, it cannot be the sole solution. By itself, HIV testing will not prevent or eradicate HIV/AIDS.

NYCDOHMH/MHRA's decision means that by July 1, 2007, New York City will not have an HIV prevention program for adult A&PI MSM. This is a daunting situation—especially for those who are not yet acculturated or ready to navigate a complex medical system yet are in desperate need of critical HIV/AIDS services. We believe that such neglect of those at highest risk for HIV infection is unacceptable and sets a bad precedent for public health policy. Accordingly, we have registered our protest of the decision with NYCDOHMH/MHRA in writing and voiced our concerns during a face-to-face meeting. This issue, as of this writing, has not been resolved.

In the contract closing report questionnaire, NYCDOHMH/MHRA required us to list organizations to whom we plan to refer our adult A&PI MSM clients. Unfortunately, we could not identify another agency that provides the services that we do. Most of our clients come to APICHA because to them it is a safe space—sexual orientation, ethnic identity, and limited English language skills pose no barriers to accessing services.

A recent study published in *Medical Care* (November 2006) has calculated that the lifetime cost of medical care for HIV-infected adults (discounted to the time of infection) using current antiretroviral therapy is \$385,200. This figure does not include case management or support services. Yet our city's guardian of public health has deemed our programs too costly. With a budget of only \$4 million, APICHA is providing life-saving medical, supportive, and prevention programs to A&PIs residing throughout New York City.

APICHA would like to be assured that NYCDOHMH/MHRA's funding policy will not bring about a health crisis in the A&PI communities such as those that have visited other communities of color.

NYCDOHMH/MHRA's approach to service delivery by ZIP Code or by geographic neighborhood undermines organizations indigenous to A&PI communities.

APICHA Rolls Out New Prevention Programs

By Sung Won Park, Associate Director of Prevention

The past 12 months have brought many challenges and opportunities to the Prevention Unit - from implementing 4 new programs, having all project coordinators complete HIV proficiency training, to launching a number of joint testing events with the Counseling, Testing and Referral (CTR) unit. We also won APICHA's contest for the most garbage bags filled during our move!

The launch of 4 new programs in a single year is a huge challenge for any organization, especially if 3 of them are diffusion of effective behavioral interventions (DEBIs). DEBIs are at the cornerstone of the Centers for Disease Control and Prevention's (CDC) national strategy to reduce HIV infections through positive behavior changes (e.g. safer

sex). APICHA is currently providing: (1) Street Smart for A&PI young men who have sex with men (YMSM) funded by the CDC; (2) SISTA for A&PI women; and (3) Community Promise for youth. Both SISTA and Community Promise are

We have increased our capacity in a number of ways such as linking outreach with HIV testing off-site, offering more A&PI languages, and having more female counselors

supported by a grant from the NYS Department of Health, AIDS Institute (NYSDOH AI). Client navigation is another new initiative, jointly implemented by the Prevention and CTR units. Although the program period is short (funding from the NYC Communities of Color is scheduled to end in June 2007), its significance is magnified in view of the decision by the New York City Department of Health and Mental Hygiene not to fund APICHA to provide HIV prevention services tailored to the specific needs of adult A&PI MSM.

As part of the overall integration of the agency and to deepen ties between Prevention and CTR, all Prevention staff became proficient in HIV testing. Project coordinators attended a NYSDOH AI training program. They learned how to provide streamlined pre-test counseling including risk assessments, deliver HIV test results, and link newly diagnosed HIV positive patients into care. They were also given proficiency training by CTR so that they could observe and practice their new skills. As a result, we have increased our capacity in a number of ways such as linking outreach with HIV testing off-site, offering more A&PI languages, and having more female counselors.

We have already seen the impact of expanding the skills of Prevention staff on joint testing events. Since May, Prevention and CTR have collaborated in a number of events including the APA Heritage Festival, Queens Pride, Filipino Independence Day Parade and Brooklyn Pride. We have seen significant increases in HIV testing at all events.

New Frontiers for Social Marketing

By Tristan Vizconde, Community Health Education Coordinator

Every year since 2004, APICHA has launched a media campaign targeting Asian & Pacific Islander Young Men who have Sex with Men (A&PI YMSM) in the New York City Subway system, funded by the Centers for Disease Control and Prevention (CDC). Each year the campaign has succeeded in bringing new clients for HIV testing, even several months after the campaign has ended. Clients would inform us that they had seen the poster while riding the subway.

Reaching high risk A&PI YMSM and getting them to care are two of our major objectives. To achieve this, we must be attuned to their interests. Historically, APICHA has quickly adopted new technologies that are preferred by potential clients. We have used chat rooms to disseminate information about HIV and critical services. Recently, MySpace.com and YouTube.com have become important sources of both entertainment and information for young people, including A&PI YMSM. Accordingly, we are using these popular websites as an innovative way to outreach to this vulnerable population. We are in the midst of developing a public service announcement (PSA) that will be broadcasted on our webpage at MySpace.com (www.myspace.com/ymsmpc) and YouTube.com. Movie theaters are another important venue to reach YMSM. We will be debuting APICHA's own animated theatre advertisement slides in August 2007.

Similar to the subway posters, the PSA and animated slides will focus on and highlight APICHA services geared to A&PI YMSM. These services include HIV testing, EquAsian (a support group for YMSM) and our new health workshop series modeled after Street Smart, an HIV prevention intervention endorsed by CDC. The health workshop series provides basic HIV information, risk reduction, and in-depth HIV counseling. The goal of the series is to ensure that A&PI YMSM can and will protect themselves and have healthier lives.



2006 Subway Ad Campaign Poster

APICHA Kicks Off Gift of Caring Campaign

By Ding Pajaron, Director of Development

In September 2006, APICHA launched the Gift of Caring Campaign to raise \$1.6 million for the relocation project over a 3-year period. The campaign is one of the key strategies being implemented by APICHA to finance its relocation to 400 Broadway. Funds raised by the campaign will help pay for construction and outfitting costs as well as the increases in rent and other operating costs resulting from the move (see Perspectives on Moving for details). The renovation of the new space is now largely complete, thanks to APICHA's successful negotiation for cash settlement from its former landlord. A successful Gift of Caring Campaign will facilitate a smooth transition into the new space and ensure that culturally competent HIV/AIDS services will continue to be available to our communities.

APICHA kicked off the campaign with a \$100,000 challenge grant from an anonymous donor. Grants and gifts totaling over \$250,000 have been received or pledged in response to the challenge grant. The challenge grant requires APICHA to more than double the amount by September 7, 2007.

Friends old and new have responded to APICHA's appeal. The **New York State AIDS Institute** awarded a \$100,000 grant. From the private foundation sector, the **Tiger Baron Foundation, Broadway Cares/Equity Fights AIDS**, and the **Orisha Foundation** awarded a combined grant total of \$60,000. Major gifts were also received from individuals, including **Lou Madigan, Therese Rodriguez and Lourdes Marzan, Dr. Mars and Cora Custodio, David Husch, Kristy Illuzi, John-John Manlutac and James Jaeger, Frederick Seguritan, and Tommy Tam.**

You can help by sending a gift today.

By Mail: APICHA
Attention: Gift of Caring Campaign
400 Broadway
New York, NY 10013

Making Smart Moves Under the Gun

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to develop a strategic plan for APICHA for the next three to five years. A weekend retreat dedicated to vision casting was held in September that year."

Therese said that the process began in a typical fashion—meetings were facilitated, stories of the past told, and visions of the future shaped. The Board tackled a number of key questions concerning the organization's future: What direction should APICHA's health services take? What other health needs must be addressed? Organizational assessment, program enhancement and development, and the steps needed to address sustainability were discussed. But one item, the space and facilities issue, had to be detailed out and implemented as soon as possible given that APICHA was faced with a possible relocation.

Prior to the May meeting, APICHA learned that 150 Lafayette was slated for conversion into condominiums. The urgent, unexpected news made APICHA's strategic planning a living process, Therese pointed out, noting that the situation called for a shift away from traditional planning templates. "We had to drop the script and improvise because we were facing the real world—New York's extremely competitive real estate market."

APICHA was not ready to move. It moved into 150 Lafayette in June 2001; six years remained on its 10-year lease there. Having used up its reserve fund to build the space, APICHA needed to recover from the impact of that move.

APICHA's management considered staying on until the lease ended. However, upon weighing the pros and cons of this option, it became clear APICHA had to move and do so quickly. The building's services deteriorated as months went by. The elevators broke down frequently. On several occasions, there was no heat. Client appointments had to be canceled for their safety. When demolition work began in early 2006, environmental issues came up as APICHA was operating in a construction site—literally. Planning meetings were repeatedly interrupted because of flooding in the facility or evacuations due to the fire alarm. The problem with the fire alarm continued throughout 2006.

One night in December, a Board meeting was interrupted by a fire alarm while an important strategic decision was being made. The Board needed to resolve whether or not the storefront of the new space was going to be rented out. Board members waited and were prepared to continue their work as soon as it was safe to get back into the premises. Unfortunately, they could not return to APICHA's office that night. The fire department shut down the elevators. Stairway access was locked as well. The Board, with nowhere to go at that time of night, resumed the meeting in the lobby.

Despite the frequent interruptions, work never stopped. Services were provided to clients. Programs were created to respond to the changes in

service delivery paradigms. Grants were pursued to ensure the organization's core services remained intact. The newly licensed HIV primary care clinic also needed attention in all aspects of operation—including staff recruitment; client outreach; and data collection, monitoring, and management.

Therese explained: "Under these conditions strategic planning had to go from template to actual implementation in real time. Milestones and timelines measured in years had to be completed in weeks and months. Major decisions, strategic thinking had to be made at every turn, from the moment we set out to search for a new space. There was very little room for errors and indecision."

To drive home her point, she cited several questions that had to be answered in connection with our search for a new space: How best do we serve our clients and communities? How much space is needed considering APICHA's growth in three to five years? Which area of the city is suitable for APICHA?

Answering those strategic questions, however, did not provide solutions to some real estate issues. For instance, spaces are typically built exclusively either for office or clinic use. APICHA's hybrid office-clinic space needs do not fit well with that scenario. In addition, some landlords view an HIV/AIDS organization with a clinic as a risk.

"It took almost two years to complete this phase—countless brokers and owners had to be met and 60 spaces were seen to get to the three that would accept APICHA's proposal," Therese said.

Throughout the long search period, APICHA's management had to keep in mind the owner's offer of cash settlement. More strategic questions had to be answered. How long will APICHA be able to stay without weakening its bargaining power, the lease? What will be the cost of construction? Scenarios were created and examined to develop the initial cost projections.

A team composed of the fiscal and the development units, the search team, and a legal consultant immediately set out to work on a budget. When the initial expenditure projection was completed, it became clear that APICHA would need to negotiate not only for the bricks and mortar but also for moving expenses, rent abatement, and intangible assets such as rebuilding visibility in the new space. Thus, when the project financing plan was developed, getting a substantial cash settlement from 150 Lafayette was a key element. APICHA was able to begin construction with funds from the settlement. We hired the architectural firm, Thomas MacGregor LLC, because of their extensive experience in preserving the historic integrity of landmark buildings.

Subleasing the storefront space, fundraising from private and government sources, and a loan are the other approaches being used to finance the project. To bridge the gap in revenues, APICHA took a \$1.5 million loan from Citibank. Each element of the plan brought different strategic questions and sets of actions. What type of fundraising campaign is suitable for APICHA? How will subleasing impact our pro-



One of two large conference rooms located in the Wall of Honor floor.

grams? How do you manage a rental space?

Even in the course of discussing which space could be rented out in order to supplement our revenue, calculated risks were taken. When program staff argued the basement was needed for community activities to enhance our prevention programs, APICHA management decided to set aside the entire basement for program even though this meant the pool of potential tenants would be narrowed down because many merchants need basement space for storage.

Similarly, a developer in Queens offered APICHA the amount of space it needed, some help to build it out, and rent at a lower rate compared to what was available in Manhattan. "It was difficult to walk away from a deal that would allow APICHA to put away one million dollars in the bank," Therese exclaimed. "But we have to answer the question, do we move to Long Island City even though clients have already expressed they will not go there?" she asked referring to focus groups conducted as part of the planning process. In the end, it was decided the new space must be located in an area that is easily accessible by public transportation, a vital factor in breaking down the barriers to HIV/AIDS care.

The process of taking out a loan was another major undertaking. How much money should be borrowed? From whom should we borrow and why? APICHA looked to two potential lenders—a not-for-profit entity and a commercial bank. APICHA applied to Primary Care Development Corporation but was unsuccessful because the nascent clinic could not show enough revenue to support a loan. Citibank, where APICHA had a contact, was approached. Citibank reviewed APICHA's overall potential and approved a loan of \$1.5 million.

To accomplish all that was needed to be done, especially those tasks related to the construction of the HIV Primary Care Clinic and the application for a Certificate of Need from

the New York State Department of Health, we hired the services of consultants. "We had to have consultants whose expertise ranged from financial feasibility studies, securing financing, to project management, construction oversight and compliance. We also had to hire a real estate lawyer to negotiate with real estate brokers and landlords. That is what is required in real life to meet the requirements of delivering our services and programs in the specific reality of New York City."

APICHA needed all the resources that capacity-building programs could offer. "Kevin understood the strategic implication of APICHA's relocation project," Therese said referring to the Kevin Huang-Cruz, formerly APICHA Board Chair who later joined APICHA's staff as Capacity Building Specialist until his resignation in May. Kevin recruited real estate consultants and played a key role in the relocation project. He enrolled APICHA as a client in the capacity building assistance program, for which APICHA is a subcontractor with the West Coast-based Asian Pacific Islander American Health Forum (API-HF). Because APICHA is a CDC-funded community-based organization, it was able to access technical assistance for strategic planning and the move. APICHA's relocation experience, from Therese's perspective, is a case study for capacity building service providers. "What does a capacity building provider do when the problem at hand does not fit the technical assistance model being used for a client?" she asks.

Strategic planning continues today as APICHA settles into 400 Broadway. As the final phase of the construction work winds down, the planning process is gearing up. The planning process this time focuses on the need to further integrate APICHA's programs and services. Envisioned to emerge from the intensive planning activities are truly holistic, client-centered programs and services for our communities, and a stronger APICHA.

"I Would Not Say Never Again"

Q&A with Aleli Alvarez

Early morning on Thursday, December 28, 2006, boxes upon boxes were piled up in APICHA's big conference room. The cubicles were empty. No APICHA staff member was around, except for Aleli Alvarez and Kevin Huang-Cruz who were entrusted to coordinate the construction-related activities and with planning and organizing the physical move.

The day was significant but uneventful: The movers went about their work systematically according to the color of the labels posted on each box—a result of months of preparation by staff, peers and volunteers.

APICHA News (AN): *What's your role in APICHA's relocation project?*

Aleli Alvarez (AA): I am the staff point person assigned to receive all communication in terms of construction and the physical move. Kevin was my team partner. My role involves monitoring construction expenditures and progress to ensure that we would be able to get out of the old space and move into the new one. I communicate with Therese and the senior management team. For the move we did all the planning for facility security, communication, and garbage disposal—all the aspects that make the building run, since facility management is now part of APICHA's responsibility. We interviewed at least 3 vendors for every major ticket item we plan to purchase. We talked to other community-based organizations (CBOs) that have set up a new facility and sought their recommendations. We also negotiated for better contracts. Planning for the physical move to the new space was also part of my role.

AN: *How did you prepare for the physical move?*

AA: Months before the appointed date, the moving company informed us how to do it, that is when should people start packing based on the actual date of the move. They helped us determine how much time it would take to pack. Our negotiated settlement with the former landlord established that January 15, 2007 would be our last day at 150 Lafayette. The staff had a scheduled one-week break during the last week of December. Therefore, we had to finish packing by December 21. We recruited a relocation committee from the different units and prepared a packing schedule unit by unit because our office did not have room to hold all the packing materials and filled boxes. In fact, we had to close off the conference room in order to have an assembly point.

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Q&A *continued from page 7*

The moving company set up the system of how to mark the boxes and where the boxes should go. Each box was color coded according to the destination floor and unit so that, on the day of the move, boxes were carted by floor assignment. Boxes containing materials for immediate use were color coded differently from boxes meant for storage so that boxes for immediate use were waiting in staff offices for set up.

AN: *How long did it take to move the entire facility?*

AA: Moving the boxes took one day. There were 350 boxes all in all and furniture. The moving company had a team of 10 at 150 Lafayette and another team of 5 at 400 Broadway. They started work at 8:30 and finished by 6 P.M. But after the boxes, we had to arrange for the phone and the IT companies to remove and transfer the equipment. This part required close coordination with

the construction company to make sure all the electrical and phone wiring were ready. Kevin was in charge of that. He saw to it that the computers, phone and other equipment would be set it up in a timely fashion and with minimal interruption.

AN: *Were there surprises?*

AA: That the move went smoothly was a surprise. Kevin and I did not have any experience moving an office; it was nice that everything worked out. Of course there were glitches. Some people experienced some difficulty in accessing their e-mail or files when they reported for work but these issues did not paralyze the office.

AN: *Any lessons learned?*

AA: Planning, planning, and planning. Our planning work began as soon as we signed the contract with the architect. We checked out all references submitted by each vendor. We also sought advice and resources from other CBOs who had

just moved or set up a new facility such as Community Resource Exchange, Callen Lorde, and Gay Men's Health Crisis. They were very helpful. They shared errors made or things they missed.

AN: *Now that APICHA has moved, what else need to get done?*

AA: Moving forward, we are developing a space utilization plan. Part of the vision for the space is to have it available to other community groups for workshops and meetings at affordable rates.

AN: *Will you take on this type of responsibility again?*

AA: It was a nice experience. Kevin and I had complementary skills—he has had training in architecture, which helped in dealing with construction issues, and I am detail-oriented, which is important in managing the numerous requirements of the project. It was a lot of work but a pleasant experience. Yeah, I would not say never again. 

Grants and Gifts Make Our Program Go 'Round

By Melissa S. Nibungco, Development Associate/Grants Writer

We would like to acknowledge the private foundations, governmental agencies, and individuals that gave APICHA support, both new and continued, in the last 18 months.

One of the biggest challenges for any organization is to find sources of general operating support (GOS) grants. The Washington, D.C.-based **Public Welfare Foundation** is one funder that recognizes the importance of GOS to an organization's ability to deliver programs and services. APICHA has been fortunate to be among the recipients of Public Welfare's generous support. The Foundation has seen APICHA grow from its beginnings as a grassroots organization providing prevention education to a one-stop shop of HIV/AIDS services. We are saddened to report that after more than 10 years of support, Public Welfare gave its last grant to APICHA in 2006. To ease the transition, the Foundation challenged us to find new or additional monies from local sources. We are happy to announce that the **C. J. Huang Foundation**, and the **H. van Ameringen Foundation** are among those who have responded to our appeal. Also, we welcome the **Giant Steps Foundation Fund of the Tides Foundation** to our GOS funders.

The **Asian American Federation of New York (AAFNY)**, the **National Minority AIDS Council (NMAC)**, the **Paul Rapoport Foundation**, and the **Verizon Foundation** provided funds to increase our capacity in a number of ways. Funds from **AAFNY's Asian Community Fund** will be used to plan for the further

integration of all of APICHA's units, thereby, ensuring a holistic experience for APICHA clients. The **Paul Rapoport Foundation** renewed its support for our newly established Data Management and Evaluation Unit. In an outcome-driven program environment, these grants helps APICHA staff monitor and evaluate programs effectively. The **Verizon Foundation** has enabled the agency to start an on-line domestic violence initiative, which is part of the agency's new and enhanced website (www.apicha.org). APICHA clients and peers can view the website on a new computer provided by **NMAC's Equal Access Initiative Computer Grant Program**. **Abbott Laboratories** sponsored an HIV awareness night at Cendrillon Restaurant in conjunction with Ma-Yi Theatre's performance of Keo Woolford's *I Land*. **Broadway Cares/Equity Fights AIDS** continued its long-time support of the agency with an increased emergency financial assistance grant and a special grant to the Gift of Caring Campaign. Emergency funds help pay for rent, legal fees, and other emergency needs of clients living with HIV/AIDS.

Government contracts fund many of APICHA's core programs and services. Several contracts were resolicited last year. We successfully applied for multi-year grants from the **New York State Department of Health, AIDS Institute (NYSDOH AI)** and the **Centers for Disease Control and Prevention (CDC)**. **NYSDOH AI** funded peer delivered prevention services for A&PI youth under 24 years old

and women while the **CDC** awarded APICHA funds to adapt Street Smart, a diffusion of effective behavioral intervention (DEBI), for A&PI YMSM. The **NYC Council Speaker's Office** provided funds to offset the impact of funding rescissions on HIV counseling, testing, and outreach activities. A grant from the **NYC Council Communities of Color** funded a 6-month client navigation project targeting high risk A&PI MSM. This funding filled a service gap (albeit for only 3 months) created by the unfortunate closure of our HIV prevention program for A&PI adult MSM in New York City. The **New York State Legislature**, through its Communities of Color Initiatives and Sexuality-Related Programs provided supplementary operating support.

A number of individuals responded to our appeals as well. Staff and volunteers have organized events. **David Polanco** and his NYC Fireworks Production held a performance of "A Playground Twist." A big snowstorm did not stop 40 dedicated friends from attending the show. The **NYU Chinese Students Association** donated the proceeds of their Expo 2007 to APICHA, thanks to the group's Executive Officers and to the event's Executive Producer **Tricia Roy**. APICHA's Board member **Lou Madigan** hosted a Halloween Party while the dynamic **APICHA AIDS Walk Team** hit the streets along with thousands of walkers who support the annual AIDS Walk event. 

Please visit APICHA's new and enhanced website at www.apicha.org.

Kick the Habit!: A Smoking Cessation Program

By Larry Tantay, HIV Testing Counselor

If asked, most people probably would not think of smoking as a drug addiction. As an HIV Testing Counselor at APICHA, I have spoken with people who have abused various drugs, including heroin. For many of them, smoking has been the hardest habit to break. Smoking dramatically increases the risk for developing a number of health problems, including lung cancer and heart disease. For other vulnerable populations, particularly people living with HIV / AIDS, smoking can prove more immediately life-threatening, debilitating their already compromised immune systems. APICHA joined NYC's Smoking Cessation Program to help A&PI communities deal with this health issue. Along with acupuncture, the food pantry, and nutritional counseling, the smoking cessation project is designed to promote holistic wellness.

According to the NYC Bureau of Tobacco Control, there are 1.17 million smokers in New York City; each day, smoking related diseases will kill 25 New Yorkers. Asians are significantly at risk. The American Heart Association reports that in the United States, an alarming 24% of Asians are smokers.

Although about 70% of smokers in New York City are interested in quitting, the task can be difficult. The NYC Bureau of Tobacco Control, through its Smoking Cessation Program, has provided free nicotine patches to eligible participants in all five boroughs. Patches help smokers lessen their dependency on nicotine by reducing the physical craving gradually.

Since the beginning of January 2006, APICHA has been an active partner of the Bureau of Tobacco Control, working with them to develop APICHA's own smoking cessation program. It has been integrated into all our units including the HIV Primary Care Clinic, Client Services, Prevention, and Counseling, Testing and Referral (CTR). We have distributed 95 kits of nicotine patches at tabling and testing events (e.g. Japan Day and at Borough of Manhattan Community College) since last year. We also make them readily available at the office.

It is very easy to receive nicotine patches. You need to be interested in quitting and meet basic eligibility requirements (e.g. over 18

years of age and smoke 10 or more cigarettes a day). APICHA staff will follow up on your progress at 1 month and 6 months after you are given patches.

Here are a few quick tips if you want to stop smoking:

- Get rid of anything that makes you think of cigarettes (such as ashtrays, caffeinated coffee, or alcohol).
- Try and fill your time with positive activities, like exercising or reading more.
- You may want to stay away from areas where people are smoking or from activities with people actively smoking.
- There are also a number of free smoking cessation groups or free individual smoking cessation counseling sites throughout New York City.

For more information on APICHA's Smoking Cessation Program, you can call our Infoline at 1-866-APICHA-9 (1-866-274-2429). If you'd like information on smoking cessation counseling or for other methods of quitting, visit the Bureau of Tobacco Control's website at <http://www.nyc.gov/html/doh/html/smoke/smoke.shtml>.



DING PAJARON

Acupuncture at APICHA

APICHA is one of the few organizations that offers full body acupuncture for pain management to clients living with HIV/AIDS. Dr. Wen-Chiang Pai is a licensed acupuncturist in CT, NJ and NY. He has an MD from China Medical College in Taiwan and is a professor at New York College of Chinese Medicine and Pacific College of Oriental Medicine. Dr. Pai treats patients twice a month. Aside from acupuncture, he has expertise in traditional Chinese herbology. APICHA's full body acupuncture has been funded by the New York State Department of Health, AIDS Institute for many years (NYSDOH AI). However, due to changes in Ryan White Title II funding, it is unclear how much longer NYS DOH AI can continue its support.

SAVE THE DATE

APICHA Benefit Event *Commemorating 18 Years of Combating HIV/AIDS*
 Thursday, November 1, 2007
 Grand Harmony Restaurant
 94 Mott Street
 New York, New York

Volunteer Profiles

Two APICHA peer educators—who nominated each other—were awarded the Butterfly Award from Living Beyond Belief, a scholarship fund for teen HIV/AIDS peer educators for their work in the HIV/AIDS field. Li Chen (Stuyvesant High School) and Diana Lu (Brooklyn Technical High School) received cash prizes (\$1,500 and \$1,000 respectively) and award plaques. The mission of Living Beyond Belief is to save lives by fostering HIV/AIDS prevention education, raising HIV/AIDS awareness among youth and motivating NYC public high school students to be HIV/AIDS peer educators, activists and advocates by providing them with college grants and recognition for their life-saving work. The peer educators were awarded for their previous volunteer work at APICHA and current peer educator work. Additionally, Li was recognized for her work as a youth leader in the Young Women's Committee of the Young Women of Color HIV/AIDS Coalition and Diana as AIDS WALK - APICHA Team co-captain.

Li and Diana join the ranks of two other APICHA peer educators who have received scholarships. In 2005, Jennifer Li (Colby College) and Altai Chiang (Middlebury College) were awarded Posse Scholarships which includes full tuition scholarships for four years at top-tier universities. *(Reported by Diana Roygulchaeron, Young People's Project Coordinator)*

Diana Lu

By Li Chen

Diana Lu has always dedicated her time, energy, and passion to HIV/AIDS work. Not only did she lead and represent the largest group of volunteers ever at APICHA as head volunteer but she was also co-captain of the APICHA team for AIDS Walk New York 2006. That year, APICHA raised over \$10,000. Diana exemplifies HIV/AIDS youth advocates primarily because she devoted so much love and energy to her work without asking for anything in return. The results of her work were

Continued on opposite page

APICHA Celebrates Immigrant History Week

By Melissa S. Nibungco, Development Associate/Grants Writer

APICHA successfully participated in the 4th Annual Immigrant History Week observed on April 16 to 21 this year. An initiative of the Mayor's Office of Immigrant Affairs (MOIA), its goal is to celebrate and honor the contributions of immigrants to New York City. The week-long, citywide observance drew 50 event partners; APICHA was the only HIV/AIDS organization.

Over 100 people attended APICHA's event which was held on April 21 at its new facility's Wall of Honor (lower-level) floor. A number of guests were drawn to the event as a result of the extensive coverage in mainstream media. It was the first public event held there since APICHA moved to 400 Broadway. The program, centered on the theme "Food, Health and Taking a Bite of the Big Apple," offered short films by up and coming Asian-American independent filmmakers, through the co-sponsorship by the Asian American Film Lab, as well as a taste of various Asian culinary delicacies. The Asian American Film Lab was instrumental in bringing diverse and thought-provoking shorts from their annual 72-Hour Film Shootout competitions. Filmmakers are given 72 hours to write, shoot, edit and produce a short film on a common theme, which is announced only minutes before the shoot begins. As part of APICHA's film screenings, Edward Shieh (Director, Writer and Producer of "No Menus Please") and Tana Sarntorinant (President of the Asian American Film Lab) answered questions from the audience at Q&A sessions.

In the evening, Azadeh Khalili, MOIA's Deputy Commissioner, joined the celebration. Herself an immigrant, she affirmed the vital role community based organizations play in the fight to stop HIV/AIDS in communities of color. She stated "I think that APICHA has played a very important role not just in New York City but also around the country by bringing visibility to a population that was not seen by the establishment."

APICHA's decision to participate in the initiative came naturally. New immigrants from Asia and the Pacific Islands in need of vital HIV/AIDS services come through APICHA's front doors every year. What they find are people who have first hand knowledge of their cultures and fundamentally understand their fears and hopes. APICHA's work is informed by our individual immigrant experiences as well as our collective struggle to deliver services to our communities. Therese Rodriguez, Executive Director, explained to guests that APICHA's health care assets are "APICHA's legacy to our A&PI communities. It is my hope that together we can strengthen these assets so that they will continue to be available to all of us and to our future generations of immigrants and their families."

In true APICHA fashion, food was front and center—quite literally. Banquet tables were placed



Guests enjoying scrumptious dishes prepared by staff and donated by generous sponsors.



Victor Inada, MD., Therese Rodriguez, Deputy Commissioner Azadeh Khalili, Suki Terada Ports, Yumiko Fukuda

in the front room of the Wall of Honor floor. Staff members—namely Joey Akima, Cherry Ng, Sung Won Park, Diana Roygulchaeron, and Tristan Vizconde—cooked a dizzying array of scrumptious dishes the night before the event. Many lost sleep and cajoled roommates, significant others, partners, and friends to pull up their shirt sleeves and help prepare food. Guests especially enjoyed the somen salad, maki sushi, kimchi pancakes, leche flan, grass jelly drinks, and coconut gelatin.

A digital slide presentation illustrated the impact of HIV on A&PI communities as well as how APICHA has responded to their unmet and changing needs. Colorful posters, representing the countries of the 7 largest A&PI ethnic groups in NYC (China, Japan, Korea, India, Pakistan, the Philippines and Viet Nam) also graced our walls with a short demographic description and the most current HIV epidemiological data.

Contributions from Gilead Sciences, Balkh Shish Kebab House, Twin Marquis Inc., and Cendrillon helped make the event possible.

Miss Universe Comes To APICHA

By Melissa S. Nibungco, Development Associate/Grants Writer

"I am honored to be a spokesman for HIV and AIDS awareness. I am not only privileged to be continuing the work and message that others before me have championed, but also excited to start educating my own country, Japan about the effects of this disease." These are the words of Riyo Mori, Miss Universe 2007.

On June 21, APICHA welcomed Ms. Mori, who was accompanied by Esther Swan, Manager of Public Relations, and Roston Ogata, Director of Talent Development from the Miss Universe Organization. Throughout this coming year, she will be traveling extensively to raise awareness about HIV/AIDS as well as women's health and reproductive issues. In order to do so, it is crucial that she learns from those fighting in the front lines.

In her welcome address, Therese Rodriguez, Executive Director, expressed hope that "with the power of knowledge and the power of celebrity, you [Miss Mori] will be an enduring part of the constellation of individuals, communities and societies in preventing the spread of the epidemic." Therese also pointed out "the cure or the vaccine has not yet been found. In the case of this epidemic, the only known cure is prevention. Prevention requires openness, acceptance and education. This cannot be done in the darkness of ignorance and intolerance."

As a leading A&PI HIV/AIDS organization, APICHA is an important resource to celebrities, policymakers, and others who are interested in breaking the silence surrounding the disease and advocating for a non-judgmental attitude towards persons living with HIV/AIDS. APICHA has extensive experience in directly addressing the needs of people infected and affected by this illness as well as a great deal of knowledge regarding its epidemiology, globally and locally. Cold hard facts about HIV/AIDS in Asia and among Asians in the United States, the challenges and barriers to care faced by clients and individual stories of courage from clients and staff were shared with the guests.

APICHA does not just provide services and prevention education. It works with communities and public figures like Miss Universe 2007 in the battle against stigma associated with HIV/AIDS. Miss Universe 2007 also participated in a mock HIV test so that she can better understand the process and experience what people may feel as they are about to be tested.

Ms. Mori, who is 20 years old, expressed a strong interest in reaching people her own age and is looking forward to learning all she can with the help of APICHA on how she can contribute. 



For Miss Universe 2007 Riyo Mori, learning from those fighting in the front lines is important to fulfilling her role as spokesperson for HIV/AIDS awareness. She is shown in the photo with APICHA HIV Testing Counselor Sunny Shiroma.

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enough to encourage her and many others to continue striving for HIV/AIDS awareness and education among youth.

Currently, Diana is a peer educator at APICHA's Young People's Project. She conducts HIV prevention education to A&PI youth. I have come to appreciate her patience, understanding, dedication and compassion as we have worked together on numerous projects. She is an effective advocate for youth and HIV/AIDS.

Diana will be attending Rochester Institute of Technology in the fall.

Li Chen

By Diana Lu

I first met Li over a year and a half ago when we both volunteered for the Young People's Project at APICHA. She was very open and gave a strong and definitive first impression. Her outgoing personality gave her a friendly aura and made it easy to approach her.

Li has always taken the initiative and is a self-starter. When there is work to be done, you can always count on her to do it. She went from preparing a workshop on HIV 101 to organizing an entire event called the Safer Sex Party at 49 Grove. Li is an active member of our community and currently represents APICHA in the Young Women of Color HIV/AIDS Coalition (YWCHAC). The mission of the YWCHAC is to address the increasing HIV rates among young women of color, aged 13-24 years, through building partnerships with individuals and organizations that serve and empower adolescents. Recently, she drafted a statement regarding the roles and responsibilities of each YWCHAC member and highlighted that commitment to these roles and responsibilities is necessary to accomplish YWCHAC's goal of creating awareness within their respective communities.

She will be attendinginghamton University. She plans to continue her work on HIV/AIDS by becoming a physician.

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Volunteer Profiles

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Gizem Acarlar

By Melissa S. Nibungco, Development Associate/Grants Writer

Gizem Acarlar, who volunteered in the Development Unit from March – May 2007, is an MA candidate in the Department of Psychology at Middle East Technical University in Ankara, Turkey, where she also completed her undergraduate degree with honors. She came to NYC to write her MA thesis, which focuses on organizational psychology and spend time with her fiancé who is an Engineering Ph.D. candidate at Polytechnic University.

Although Gizem was new to NYC, she quickly adapted to life in the Big Apple—taking her daily hour-long commute from Brooklyn in stride. She became an integral part of the Immigrant History Week planning committee and worked over 150 volunteer hours prior to April 21st. She took charge of designing the event program, coordinating the production of posters, reviewing film entries, and setting up the video equipment like a pro. Gizem was always cheerful and her presence added a great deal to the Development Unit. On May 30th, she returned to Turkey to defend her MA thesis.

Without Gizem's hard work and the generosity of staff and other volunteers, our Immigrant History Week event would neither have been as successful nor as much fun. At APICHA, volunteers play an active and vital role and their talents and skills are very much appreciated.

APICHA
400 Broadway
New York, NY 10013
Entrance on Walker St.

Phone: 212.334.7940
Fax: 212.334.7956
Infoline: 1.866.APICHA9
(1.866.274.2429)
Clinic: 212.334.6029

Online: Log on to www.apicha.org

In and Around Our Communities



YU KANG CHEN

Philippine Independence Day Parade

On June 3rd, APICHA participated in the Philippine Independence Day Festival for the first time. Twenty-three people, about half of whom were Filipino, received HIV testing inside our mobile health van. One-third of those tested were young people (24 years old and younger). This marks a significant change in Filipinos' perception of their health; ignorance and stigma may persist, but more and more, Filipinos understand the importance of HIV testing as a routine health examination. APICHA hopes to repeat this success next year and to hopefully open doors throughout the Filipino community.



EVAL SPEIER



RYAN NATIVIDAD

AIDS Walk

On a cold and damp Sunday morning, APICHA's AIDS Walk Team enthusiastically came out to Central Park for the 2007 AIDS Walk New York. They raised over \$5,000. This year, new team captains took over the team's leadership from Diana Roygulchareon. They are Case Management Team Leader Yu Kang Chen, Development Associate/Grants Writer Melissa S. Nibungco, HIV Counselor Larry Tantay and Community Health Education Coordinator Tristan Vizconde. A karaoke party and raffle drawing kicked off the event. Proceeds from ticket sales raised money for the team's breakfast.



APICHA STAFF

Pride

APICHA's participation in gay pride events held throughout NYC in June was very successful in providing information about HIV/AIDS as well as HIV tests to many A&PIs. This year, 108 people were tested at the Brooklyn and Queens Pride events. During the 2007 NYC GLBT Pride March, APICHA's contingent was accompanied by two traditional Korean drum troupes—NYU Rhythmic Impulses (New York University) and Ho-Eup (Columbian University). Tens of thousands of people greeted them with applause and whistles. APICHA peers and volunteers distributed over 7000 condoms, along the parade's route from Midtown to Greenwich Village.



BRIG BERNAS