1001 Champions Gathering at Bridgewaters

APICHA’s benefit event, *A Thousand and One Champions*, will be held this year at Bridgewaters—the South Street Seaport venue with spectacular views of the East River and New York City skyline. Save Monday evening, September 26 and put it in your appointment book now so you don’t forget it.

To support its comprehensive HIV/AIDS programs, APICHA must raise funds from every source possible. As APICHA’s Board Development Committee Chair Suki Terada Ports puts it, “It is very expensive to run programs in New York City, especially those which provide services for populations as diverse as our Asian and Pacific Islander (A&PI) communities. The addition of our medical unit makes it even more expensive.” The contributions not only impact the clients who get services from APICHA but their ripple effect helps our communities at large. By creating partnerships in fund raising, we send a message that HIV is everyone’s important healthcare issue. Our efforts are a reminder that the stigma surrounding HIV must end so that everyone can access HIV healthcare.

“A Thousand and One Champions is a meaningful way for APICHA to promote the benefits of its programs to our communities, and the need for financial and moral support for them,” adds Executive Director Therese R.

Fighting HIV/AIDS Through Prevention

When it comes to fighting HIV/AIDS, our first line of defense is awareness. Part of prevention is dealing with stigma, which means getting communities involved. The more the Asian and Pacific Islander communities become involved, the better are our chances of containing the spread of the disease. Ongoing education is not optional for it is an essential part of our arsenal of defenses against HIV infection. As our children enter their teens and become sexually active, they need to be educated. As new immigrants settle in our city, they need to be educated. Even those of us who are already knowledgeable about the disease, regardless of our HIV status, need to reinforce on an ongoing basis our commitment to safe-sex adherence and avoidance of risky behaviors, such as having sex without protection or sharing needles.

To remind ourselves of the importance of prevention, we dedicate this issue of APICHA News primarily to programs that are in the frontlines of prevention work. We take you behind the scenes of the Women’s Project, Young People’s Project, and the Gay, Bisexual, Transgender Project to get to know what the staff and peers are doing to fight stigma in our communities, convince those who are at high risk for infection to be tested, and train marginalized individuals to be self-assured and efficacious.

At a time when half of new infections in the U.S. are among the youth, we are encouraged by the increasing involvement of youth in our programs. After graduating from our leadership training, many of them move on to jobs with more responsibilities, as staff members at APICHA or its allied agencies and in colleges and universities. Others volunteer to raise money, as narrated in a guest report on young people in action during the AIDS Walk written by YPP peer Tiffany Wong and volunteer Ly K. Tran.

In addition to prevention work, articles on our HIV Primary Care Clinic, Counseling and Testing Services
HIV Primary Care Clinic Expands STD Services

Recent reports of rare Chlamydia infection and increases in the number of other sexually transmitted diseases (STD) are causes of concern among the city’s healthcare providers. This development has been of particular concern among men who have sex with men, the population group primarily at risk for Chlamydia and syphilis.

Responding to those concerns, APICHA’s HIV Primary Care Clinic expanded its services in April this year by offering STD screening and treatment to individuals who are not living with HIV. “We have been seeing patients who have come in for HIV testing but conveyed their worries (about STD) to their testing counselors,” explained Dr. Victor Inada, the clinic’s staff physician in charge of the service. “There is real reason for their anxiety, STD being co-factors of HIV. In both cases, one factor that usually figures in an individual’s mind is stigma.”

Stigma is a heavy burden on patients who are often viewed as immoral by their families and friends. For immigrants who have little or no social support network, being shunned by people close to them can trigger destructive feelings of isolation. To avoid dealing with their health issues, at-risk A&PIs delay accessing health care. Stigma effectively sets up barriers to care. Thus, addressing the issue in our communities has been one of APICHA’s main program goals. Dr. Inada says, “It is satisfying to able to bring over right away those who seek screening and give them a welcoming, non-judgmental service.”

In two months 19 patients were screened – 63% were males, 37% females—indicating there is a demand for the service. Fortunately, none of the clients were identified positive. In addition to Chlamydia and syphilis, the clinic also screens for Hepatitis A, B, and C and immunizes for A and B. Fees are on sliding scale based on income.

Clinic hours are: Mondays, Thursdays and Fridays – 2 to 6 P.M.; Tuesdays - 1 to 5 P.M.; and Wednesdays – 3:30 to 7:30 P.M. An appointment can be made by calling (212) 334-6029.

APICHA Floats Down 5th Avenue

It has become a tradition. That is, APICHA’s participation in the annual Gay Pride Parade and the counseling and testing messages the participants promote. Every year, more and more people march with APICHA’s contingent. Thus, on June 26 this year, our contingent surpassed 60 members. Peers, staff, clients and volunteers, dressed in colorful native costumes and APICHA T-shirts – and the most beautiful float of the parade – floated down 5th Avenue, drawing applause and resounding cheers along the way. Over 5,000 APICHA Safe Sex Kits were distributed that day.

Special thanks must go to Peer Educator Joey Akima for designing the float and coordinating the group and to our volunteer Mike Cheng for helping execute the project. For the second consecutive year, Joey created a stunning décor using motifs from the Pacific Islands. His first design garnered a nomination for Outstanding Float Award. This year, he subverted the rigid, monotonous lines of the float by hanging butterflies on the sides. Although the Outstanding Float Award will not be given by the parade organizers this year, we declare ours the best.

Fighting HIV/AIDS…

and Case Management Services are also found inside. The interconnections among our services and how access to HIV healthcare is facilitated are illustrated in the article, Case Managers: Human Bridges to Care and Support.

Through these articles, we hope our readers will get a broad picture of our prevention work and the role it plays in the overall effort to stop the spread of HIV/AIDS and to promote healthy, productive lives for A&PIs living in New York City.
Training Women to Look After Their Health

Much of the focus of HIV work in the city since the beginning of the epidemic has been among men, among gay men in particular. However, APICHA has managed to set aside a small portion of its limited resources to address women and HIV since 1991. It established and nurtured its Women’s Project, one of the first A & PI-focused HIV programs for women in the nation. The goal of the project is to give women the health information they need so that they can protect themselves from HIV and other sexually transmitted infections while helping to empower them to take control of their health and reproductive lives. That might not sound like a difficult thing to do for some women, but for immigrant women it can be a real challenge.

Yoshita Pinnaduwa, APICHA’s Women’s Project coordinator, with the help from peer educators, uses a combination of approaches such as multi-session individualized counseling and workshops to serve A&P women. The Women’s Project also partners with and recruits women from the New York Asian Women’s Center, SAKHI for South Asian Women, the support group for South Asian domestic workers AWAAZ, and Sanctuary for Families. They speak at schools, colleges, health fairs, conferences, and at various agencies.

Every six months, Yoshita chooses a diverse group of five or six women above the age of 25 to become peer educators. These women are trained to speak on and answer questions about general health issues, male and female anatomy, reproductive health, HIV and other sexually transmitted infections (STI), domestic violence and other socio-cultural barriers to healthcare. The project emphasizes individualized counseling to help women change risky behaviors and get tested for STD and HIV.

The effectiveness of this approach is measured, among others, by counting the number of participants who decides to get tested. During the first half of 2005, 89% of the women who were individually counseled decided to get tested.

After the peers are trained, they are ready to go out into their respective communities and educate other women. (For an example of the women peers’ work, see the article on the Sex Worker Outreach Team in this issue.) They begin by inviting women they know, such as members of their family and friends, to come to a RAP (Real AIDS Prevention) session, an informal group discussion on health topics and HIV prevention. Usually the sessions take place in someone’s home, but they also take place in restaurants, in a private corner at a Starbucks’s, or in APICHA’s meeting rooms.

Peer educators are also trained to facilitate workshops, where participants learn basic information about the male and female sexual anatomy and sexual health. These are topics that are often not taught in schools or discussed in many A&P cultures. Words for sexual organs do not exist in some Asian societies, and talking about sex and sexuality is taboo. Yoshita says that while there is a lot of nervous laughter, for most of the women, even women who already have children, these frank discussions are enlightening because no one has ever really explained these issues to them before. As the discussions continue, they talk about OB/GYN exams, STI, and they demonstrate how to use the male and female condom, and how to negotiate condom use and practice safer sex with their partners. Eventually the discussion gets around to APICHA and HIV. They are taught about the difference between HIV and AIDS, the immune system, continued on page 4

Sex Worker Outreach Team Scores One

The Centers for Disease Control and Prevention classifies sex workers among the population groups that are at highest risk for HIV infection. This information piqued the interest of the Women’s Project to form an outreach team specifically targeting sex workers. During the formation of the team, Cherry Ng played a proactive role in organizing a pilot project in Chinatown.

Cherry graduated from APICHA’s Peer Training Institute (PTI) in December 2004 and moved on to become an advanced peer educator in 2005. In addition to Cherry, current members of the team include: Yuki Isokado (peer mentor); Luna Ranjit and Fatema Khatun (advanced peer educators); Alta Batsukh, Carla Lee and Laurel Turbin (interns); Kana Okuno and Eugina Davis (peer educators); Misty Das, Yuri Shoji and Bhavana Nancherla (volunteers), and Women’s Project Coordinator Yoshita Pinnaduwa who heads up the team. The outreach project was launched last spring.

“Cherry brought Chinese language newspapers and pointed out to us how the sex trade is being advertised in the newspapers.” Yoshita said. Sex ads are abundant in the city. In the Village Voice, for example, there are pages of sex ads complete with photos of women in provocative poses. In the Chinese newspapers, the ads are discreet, no photos are displayed. Patrons must read between the lines to get to the right places. The ad may simply say, “Student. Serves One Person.” The hours listed also give a hint: “Overnight” or “10 to 2 AM”.

Cherry’s knowledge of Chinatown and connections with friends who volunteered information on possible outreach locations has helped create a viable project.

Before the team set out to the community, members received continued on page 4
Training Women… (continued from page 3)

transmission, prevention, and eventually getting an HIV test at APICHA. Another difficult issue that often needs to be discussed is domestic violence. It can be difficult to talk about condom use, safer sex, and HIV and STI prevention when a woman is with an abusive partner. Women are encouraged to seek help for domestic violence, and are taught how to successfully negotiate safer sex and to protect themselves from being infected with HIV or an STD.

For these larger group sessions, they try to recruit participants of different ages, nationalities, cultures, and educational backgrounds. Since some of these women have limited knowledge of English, peer educators are used as interpreters.

Another way the Women’s Project helps to empower women is by helping them to get a job, earn money, and become independent from a partner who might be abusing them. APICHA refers all their peer educators to Ciccatelli Associates, its collaborating agency, where they can take workshops in resume writing, computer training, and other classes that help them to enhance their job search skills. Qualified peer educators graduating from the Women’s Project are often hired as advanced peer educators or are referred to openings at collaborating community-based organizations.

If you are interested in learning more about our Women’s Project or wish to become a peer educator, intern or volunteer, contact Yoshita at (212) 334-7940 ext. 220.

Outreach Team (continued from page 3)

training on their legal rights and related issues from Juhu Tukral, a lawyer who is the director of Sex Workers Project at the Urban Justice Center. They also heard from APICHA InfoLine/ HIV Testing Counselor Kit Sasa Tang about the dynamics of the sex industry – how some “girls” (the sex industry refers to these women as girls) have no control over the money paid for their services, where to find women in sex work, and about the danger of violence from clients or the police. The team also learned why some women choose sex work. According to Sasha, “If a woman is undocumented, she can’t get a regular job, so she may prefer to engage in sex work instead of working for an underpaid job.” Many transgender individuals opt for sex work because they are often not accepted in mainstream jobs.

Brothels, the team found out, run legitimate businesses during the day. At some of these locations, however, one must ring a doorbell to get in, indicating that something irregular might be going on. Getting the manager or owner to open the door is one of the main challenges for the team. They found out soon enough that when the person answering the bell sees a group of people, he/she gets scared. The team immediately changed tactics and sent in one peer to ring the bell while the others waited nearby until the manager/owner would allow them in.

That the outreach must be culture-specific is another challenge for the multi-ethnic team. For instance, only peers who have Chinese features and speak Mandarin or Cantonese can approach the business venues. When the peer convinces the manager/owner to open the door for the group, the other members follow. Once allowed inside, the team presents its case: that it is in the interest of the business to have the women tested for HIV and have them use condoms. The team reports that some brothels already require condoms but, unfortunately, most women have never been tested. The team hands out brochures and a supply of safer sex kits, and encourages the managers to schedule an appointment for HIV testing for their employees. One actually did; however, the women did not show up on the testing day. Yoshita reports that five or six outreach attempts resulted in the distribution of female and male condoms and workshop brochures.

Although the team has yet to have these women at APICHA for testing, getting one manager to consider testing is a minor victory. The team has not given up. From our experience, it takes repeated encounters before individuals decide to be tested. “The group will follow up until the women are won over,” Yoshita said with conviction. Meanwhile, the team is evaluating its work, discussing the possibility of adding a male volunteer or peer to the team, and the potential of doing outreach among Japanese and South Asian sex workers.

HIV and AIDS in Asia: The numbers at a Glance*

The rapid spread of the epidemic around the globe and its impact on our work here in the U.S. concern us. The comparative figures below show the alarming levels of increase of HIV infections in Asia.

<table>
<thead>
<tr>
<th>Year</th>
<th>Adults and children living with HIV</th>
<th>Number of women newly infected with HIV</th>
<th>Adults and children living with HIV</th>
<th>Adult and child deaths due to AIDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>2004</td>
<td>8.2 million [5.4-11.8 million]</td>
<td>2.3 million [1.5-3.3 million]</td>
<td>1.2 million [720,000-2.4 million]</td>
<td>540,000 [350,000-810,000]</td>
</tr>
<tr>
<td>2002</td>
<td>7.2 million [4.6-10.5 million]</td>
<td>1.9 million [1.2-2.8 million]</td>
<td>1.1 million [540,000-2.5 million]</td>
<td>470,000 [300,000-690,000]</td>
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Making Connections: Queer A&PI Film Series

The lights dim. The audience quiets down. As the film rolls a story unfolds, one that is often quite familiar to the people who are in the audience. Take for example the story in Summer In My Veins, a documentary by the Indian gay filmmaker Nish Saran. The film chronicles his travels across America with his family while visiting from India. During the journey, he struggles to come out to them. He was tested for HIV before he left for the trip and will not receive his results until they return. Under the threat of terminal illness made very real by an unsafe encounter with an HIV-positive man, the filmmaker explores the dynamics of secrecy and love that mark this very close family. Pushing the limits of personal documentary every moment, every achingly intimate moment—including coming out to his mother—is caught on tape.

Throughout the showing, the audience and the characters on screen are wrapped in a shared experience that refl ects A& PI culture, speaks of security and identity. Not only are we able to discuss the content brings us together as a community. The mutual experience and the audience discussion.

Every two months APICHAs Gay Bisexual Transgender (GBT) Project sponsors a film night, featuring stories about gay, bisexual, transgender, queer, or questioning A&PIs. Between 20 and 50 people attend each show. The films are shown at venues such as Two Boots Den of Cin and the Millennium Film Theatre, both located in the East Village. To search for the right films, our staff and peers have worked in partnership with LGBT groups like 3rd-I New York, FIERCE, the International Gay & Lesbian Human Rights Commission, the South Asian Lesbian & Gay Association, the Gay Asian & Pacific Islander Men of New York, and independent filmmakers. The films they choose are not likely the same as the ones you see at your local neighborhood multiplex or at Blockbuster Video. While some may be mainstream hits, most of them are rare foreign and/or independent films. The series has included both feature length and short films. Each film program is approximately three hours long and is followed by an audience discussion.

Jih-Fei Cheng, former Coordinator of the GBT Project said, “Our goal is to screen films that reflect A& PI culture, speak frankly about sexuality, especially homosexuality, and build a sense of security and identity. Not only do we want to entertain the audience but we also want to make them think about real life issues. After the film ends and the lights come back up, you realize all the people have had this incredible shared emotional experience together. The mutual experience of watching these films and being able to discuss the content brings us together as a community.”

Some other intriguing film titles that have been screened are, “The Anonymous, might be the place for you. ASIANS is a space where A&PI GBTQ men can talk about their feelings regarding sexuality, dating, relationships, safer sex, risk taking activity, homophobia, stereotypes, and how they can empower themselves to manage these often difficult issues in their lives. It is also a space where they can find a network of supportive individuals and get important prevention messages.

Not your typical 12-step program, ASIANS is an empowerment gathering, where discussions on social issues are facilitated and workshops on safer sex are conducted. The meetings are held on a Saturday or Sunday at a location that is kept confidential. Only those who inquire and are deemed eligible to participate are given the address of the gathering site. In the past, the program has been able to arrange meetings at hotels. Each session lasts for five hours and is limited to a group of 15 participants to create a sense of intimacy and to allow ample time for discussions which can become emotionally intense.

In the past few years, over 12 sessions have been held, garnering over 100 participants. Monthly follow-up activities at APICHAs are available to those who attend the initial gathering. These follow-up activities include workshops on stress management, anal and sexual health, body image and eating concerns, sexually transmitted infections, and drop-in group discussions. Fabulous food is served and free gifts are distributed to all who attend the gathering. The program is free of charge. If you would like more information about ASIANS, contact the GBT Project at (212) 334-7940 ext. 221.

### HIV Testing at APICHAs

<table>
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<tr>
<th>Total clients tested from July 2004 to June 2005: 1334</th>
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<tr>
<td>Male: 896 (67.2%)</td>
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<tr>
<td>Female: 438 (32.8%)</td>
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**Number of HIV+ Results:** 29 (2.2%)
Coming Of Age:
Young People’s Project

Did you know that half of all new HIV infections in the U.S. are among people between the ages of 15-24? That by this time next year 20,000 new young people will be infected? AIDS is the health threat of the century, so how do we get this message home to our youth? Get them while they are young, educate them about risky behaviors and how best to protect themselves, and then send them out into the world to educate other young people.

AIDS first appeared in the U.S. in 1981. Today’s young people were either infants or not born yet. Unlike the previous generations, today’s youths don’t know what the world was like without AIDS, condoms, and safer sex. They don’t see people they know get very sick and die in the prime of their lives because of miracle drugs, while not able to cure the disease, extend the lives of many people with HIV/AIDS and help them lead productive lives. However, among our youth, the absence of grim reminders can breed complacency about AIDS.

To help sort through this difficult life for young people, the Young People’s Project (YPP) offers HIV/AIDS and sex education, individualized counseling, group workshops and activities, and a safe space in which program participants can flourish. There are two main components of YPP—the Peer Training Institute and the Young Men who have Sex with Men (YMSM).

There are two main components of YPP—the Peer Training Institute (PTI) and the Young Men who have Sex with Men (YMSM).

The Peer Training Institute is funded through contracts with the New York City Department of Health and Mental Hygiene and the Department of Social Services/Human Resources Administration. The trainings are conducted in two six-month cycles per year; only five youths are chosen to participate in each cycle. This program has become very popular so that as many as 60 youths apply for the 5 slots available for each cycle. To be selected, participants go through an interactive group interview in which applicants talk about their experiences, feelings, social consciousness, the communities where they can do outreach, and how open minded they are about issues involving sex, sexuality, and other related issues. Peers who are recent graduates of PTI work with YPP Coordinator Diana Roygulchareon to choose the 5 applicants. The selection panel looks for individuals who are outgoing and committed to working hard to lead the battle to stop the spread of AIDS among young A&PIs and ensures group diversity.

The first three months of the cycle involves intensive training in skills building, emphasizing HIV/AIDS prevention, public speaking, team and community building, becoming a leader, learning how to multi-task, and building a strong camaraderie with the other people in the group.

At the end of the three months, the peers are ready to go out to test their skills. They go to high schools, colleges, health fairs, and other venues armed with HIV prevention materials, including brochures and condoms, and they give talks and answer questions about HIV/AIDS and the risks of contracting the virus. Peers also participate in policymaking meetings. For example, they have participated in discussions conducted by the New York City Prevention Planning Group, the body that makes HIV program recommendations to the city, regarding the new HIV curriculum that is currently being created for use in the city’s public school system.

The YMSM component primarily offers individualized counseling for young people who need the space to talk about their feelings, ideas and experiences they are going through as adolescents or young adults. It is funded by the Centers for Disease Control and Prevention. Sunny Kam, a graduate of YPP, currently coordinates YMSM. It is open to all young people between the ages of 14-24, including Men who have Sex with Men (MSM), straight men, and women.

Situated within YMSM is EQUASIAN, a youth-led social
support group for people between the ages of 14-22 who are grappling with issues about coming out of the closet and other issues involving sexuality, identity and community. It is open to lesbians, gays, bisexuals, transgenders, intersex, queers, or people who are questioning their sexuality.

Last summer EQUASIAN held a Youth Health Retreat at the YMCA's Camp Mason in Hardwick, N.J. Twenty participants (18 young people and 2 staff), from New York City, Boston, and Philadelphia, spent 3 days in a rural setting without television or cell phones. They worked together to build trust through team and skills building and talking about issues like coming out, their relationships with family and friends, sexuality, global HIV/AIDS, and youth issues. They also had a lot of fun swimming, playing volleyball, archery, rowing on a lake, eating good food, and getting to know and trust each other. At night they sat a round a campfire and one night they had a drag walk with costumes created from items that were available at the camp. Living conditions were very close. Two people were randomly assigned to each room, which encouraged people who might not know or like each other to live together. It also built camaraderie and a feeling of family. To ensure the safety of all involved, no sex, drugs, or alcohol was permitted.

On August 17 through 19, this year’s batch of EQUASIAN participants will meet in YMCA Camp Greenkill in Huguenot, New York.

For more information about these programs contact Diana at (212) 334-7940 ext. 219 or Sunny at (212) 334-7940 ext. 222.

This year’s AIDS WALK was an inevitable success for APICHA’s AIDS WALK team. Wading through a throng of fellow AIDS Walkers from other organizations, members of APICHA’s team found their way to the meeting station where chockfull of coffee, donuts and warm welcomes awaited them. Excitement settled in the air. The damp weather brought on a sense of restlessness and determination as walkers started to march proudly through Central Park, banner and spirits soaring high.

This year’s APICHA participation could not have occurred without an immense amount of preparation beforehand. Young People’s Project (YPP) Coordinator Diana Roygulchareon and her staff of peers and volunteers organized this year’s participation in GMHC-sponsored AIDS WALK. The team recruited 111 walkers—from GAPIMNY (Gay Pacific Islander Men of New York), local religious groups, APICHA staff and volunteers, and a great deal of students from local high schools. The team went to somewhat ridiculous lengths to pull it all together—holding a raffle at the kick off party (also a success) in order to raise money for the AIDS WALK breakfast. Remarked Diana: “We were hoping to pump up the walkers, thank them, and raise money for AIDS WALK breakfast, which we did!”

Donations from walkers and sponsors alike reached an incredible amount exceeding $4,600 dollars, a huge accomplishment compared to last year’s $2,500. This money will go directly towards APICHA’s general support fund, helping to sustain the different HIV/AIDS programs.

Despite the great accomplishments, a major issue remains unsolved: APICHA team members’ inability to walk together as a group during the 6.2 mile strut. Naturally, some people walk faster than others and some slower, some are ahead and some are behind. As a result, a sense of unity was lost, and many have expressed concern about the situation. “We could tie everyone together with a string,” Diana offers a solution in jest. If you have serious ideas, please direct them to Diana at 1866-APICHA9 ext 219.

Among our esteemed walkers APICHA counseling and testing counselor Lawrence J. Tantay, who is known for his notoriously bad allergies, made it through the walk. We are all very proud of Larry and hope that fellow walkers can look up to his endurance as an inspiration. “It’s important for us to support our community no matter what,” states Larry. From participating in the walk many walkers, including us, discovered their lack of physical fitness. “We need to get fit,” says Tiffany, with a look of exasperation on her face. Valuable lessons seem to have been learned all around, adding to the amazing success.

APICHA thanks all team members and donors for making this year’s AIDS WALK participation the most memorable in recent years. See you again next year.
Case Managers: Human Bridges

You get the nerve to go to APICHA to get an HIV test. After checking in at the front desk, a testing counselor escorts you into a counseling room, where they explain what an HIV test means, they administer the test, and then you return to the waiting room to await your result. After 30 minutes, you are escorted back into the room to get your test results. The door is shut and the counselor, with great sensitivity to your needs, gives you the bad news that you are HIV positive. At this point, a thousand thoughts and emotions flood through your brain - When am I going to die? How am I going to deal with this? I have no medical insurance so how can I pay for medical care? What about prescription drugs? How can I tell my family? Will they disown me? What about my friends? I’m undocumented and what if the government finds out? Will I be deported? What if I’m too sick to pay my rent? Will I become homeless?

The point is, after receiving a positive diagnosis, most people panic. The testing counselor’s job is to calm you down and help you clarify the options. Then he/she brings in the case manager.

Case managers are professionally trained to advocate for clients’ needs and to make sure the clients do not slip through the cracks of society. At APICHA, case management is one of the many services offered by its Direct Client Services Unit, which is under the supervision of Shu-Hui Wu. Ms. Wu holds a masters degree in social work. Yu-Kang Chen is the case management team leader. He holds a masters degree in counseling.

There are currently three case managers, namely: Bi-Jeng Cheng (Mandarin); Kazuko Ko (Japanese and Korean), and Shefali Rowshan (Bengali, Hindi, and Urdu).

Three bilingual assistants support the team. They are Kit Seng Chow (Cantonese and Mandarin), Noreen Daniel (Hindi and Gujarati) and Mary Hashimoto (Japanese).

Last year, APICHA’s remarkable case management team served 146 clients.

The first thing case managers do with newly diagnosed people is to calm them down and bring them into our HIV Primary Care Clinic for a joint consultation with Niru Somasundaram, our full-time registered nurse. Niru explains the need to confirm the Ora-Quick results by using the more comprehensive Western Blot test. The Western Blot requires a tube of blood. After the test is taken, clients are given an appointment to return for those results in a week. If the Western Blot is also positive, an appointment is made with APICHA’s staff physician, Dr. Victor Inada.

Most people who find out they are positive are vulnerable, in a panic, and not thinking straight. The first question they usually ask is, “Am I going to die now?” It is important for the staff to empathize with their pain. Our medical and social service staff work together to provide clients with essential information that will help understand HIV and AIDS, how to manage their care, and the services that are available to them. Although there is still no cure, for most people, HIV/AIDS is now a manageable disease because the meds that became available in the late 1990’s have extended people’s productive life.

Case managers gather basic information about the client at the initial interview, including where they live, if they have access to medical care, have a job, family, friends, a support system, a medical doctor, and health insurance. Many of APICHA’s clients are monolingual and speak little or no English. Some are immigrants and are undocumented. To gather this information, the case manager must be able to gain the respect and trust of the client. The answer to all of those questions helps the case manager to determine what the client needs. If needed, the case manager brings in a bilingual peer who can assist with interpretation.

It is important to make sure clients have culturally and linguistically competent HIV medical care. If they don’t have a private doctor, they are informed of options for

APICHA’s Case Management Team. (Left to Right) Front row – Michie Sato (intern), Shefali Rowshan, Kazuko Ko, Bi-Jeng Cheng. Back Row – Kit Seng Chow, Shu-Hui Wu, Wei Chen and Yu-Kang Chen. Not shown in the photo are Bilingual Assistants Noreen Daniel and Mary Hashimoto.
healthcare including APICHA HIV Primary Care Clinic. The case manager makes the necessary referrals to connect the client with medical care immediately.

If the client does not have insurance, the case manager must ascertain whether or not they qualify for Medicaid or the AIDS Drug Assistance Program (ADAP). Both of these are government-funded programs with specific income and health requirements. Most low-income clients qualify for Medicaid, provided they can prove permanent residency or citizenship. Moderate or middle-income clients, who are uninsured and possibly working, qualify for ADAP. New York State’s ADAP program is the most generous in the nation. It pays for medical visits, lab tests, and prescription drugs. Also, ADAP clients can have an annual income of up to $44,000.

Case managers work with the client and government agencies to enroll them in these and other government assistance programs.

The case manager also helps clients obtain supportive services. For example, if the client is nutritionally at risk, the case manager refers him/her to the food and nutrition program for assessment and counseling. Food and nutrition staff works with case managers to ensure that a client who qualifies can avail of the fresh food and workshops offered under the program. The case manager keeps regular follow up contact with each client throughout the year. The case manager may also escort the client, if the client is not very ill, to the hospital or emergency room to interpret, advocate, and help navigate the system to ensure that the client is getting the care he/she needs.

Some clients, however, have problems other than HIV. They might have alcohol or substance abuse problems that might affect whether or not they miss appointments with their doctor, stick to a complicated drug regimen, eat and sleep properly, and generally take care of themselves. Clients who are employed may find it difficult to comply with their drug regimen because the side effects of medications make it difficult for them to conceal their illness. Stigma of HIV/AIDS brings up in PLWH/As fear of losing their jobs or of becoming isolated from their co-workers. Another scenario finds clients who begin to take their drugs, feel better, and decide to stop – a situation that spells trouble, for it can make them very sick, and can create a drug resistant strain of the HIV virus which makes treatment very difficult.

Successful case managers, therefore, must build personal rapport with their clients, lend empathetic ears, and must possess the capability to deal with the varied situations that can negatively impact clients’ medical care.

Helping build a support system is part of a client empowerment process. The case manager plays a central role in that process. Cultural and language differences and not having family or friends as a support system can make a difference in whether or not a person can successfully live with HIV or AIDS. Some clients speak and read little or no English so they depend on their case managers to accompany and interpret for them when visiting a doctor, attorney, government agency, and other service providers. As well, many of our immigrant clients are alone in this country. They work long hours to support themselves and, in many cases, spouses or relatives back home. The case managers help clients to reexamine their social network to build a support system, and introduce them to other clients who can be part of that network.

APICHA’s case managers are very dedicated to the clients they serve. When they are able to solve a difficult problem or they share some tears or get a hug from a client, they feel a great deal of satisfaction and pride in their work. They are the human bridges connecting people living with HIV/AIDS not only with their healthcare needs but also with their own individual lives.

Although there is no cure for AIDS, for most people, the disease is manageable. Clients can pursue productive lives with assistance from case managers.
City Council Member John C. Liu, New York City’s first and only Asian American elected official representing the 20th City Council district in Queens, visited APICHA on Tuesday, October 12, 2004. Although Council Member Liu had attended APICHA’s functions in the past, this was his first visit to the organization’s clinic and offices in Lower Manhattan.

APICHA’s Executive Director Therese R. Rodriguez, former Chair of the Board Kevin Huang-Cruz, and Founder and Board Member Suki Terada Ports welcomed CM Liu upon his arrival. All the members of the staff and nearly a dozen members of the local and international Asian media, including three TV camera crews, photographers, and newspaper reporters were also there to greet him. The atmosphere was full of excitement.

The members of the staff each introduced themselves, the nation they were born in, the languages they speak, and their job title and function. The ethnic diversity and language skills of the staff gave the Council Member and media a true picture of APICHA’s ability to serve the unique needs of people who come here for services, no matter where they come from or what languages they speak. Many of our clients are monolingual and speak little or no English.

Ms. Rodriguez thanked Council Member Liu for his support in getting APICHA a City Council allocation of $150,000 in the 2004 city budget. In his remarks the Council Member praised APICHA’s work, and shared credit with Council Speaker Gifford Miller and Council Member Alan Jay Gerson, the representative for Lower Manhattan, for working with their other Council colleagues to secure this funding. The money is being used to update the agency’s computer system and operate our multilingual, toll free Infoline, for people who contact APICHA for HIV/AIDS information and an appointment for an HIV test.

The Council Member discussed the problems that all New Yorkers, especially new immigrants have in getting affordable medical information and care. He praised APICHA for being able to serve the special needs of the community, including being sensitive to cultural diversity and the ability to communicate in the many different languages spoken by people from Asia and the Pacific Islands. After the brief meeting, he toured our HIV primary care clinic and offices.

New York State Assembly Member Richard Gottfried visited us on Friday, September 10, 2004. He represents the 64th Assembly District, which includes Chelsea, Clinton, Midtown, part of the Lincoln Center area in Manhattan, an area which includes the largest number of people living with HIV/AIDS in New York State. He is also the chair of the Assembly Health Committee in which health and AIDS related legislation and budget issues are discussed. He was accompanied by his liaison to the LGBT community, Eliyanna Kaiser. They were given a briefing on APICHA’s services, introduced to our staff, and given a tour of our offices and HIV primary care clinic.

Visits from New York State AIDS Institute (AI): Dan O’Connell and Bethsabeth Justiniano, the director and assistant director respectively, of the Division of HIV Prevention finally met all of APICHA’s staff members and toured our premises when they came visit on June 20, 2005. We have known both of them over the years as they moved up the AI bureaucracy but, until this visit, they had not seen the scope of APICHA’s operation. Mr. O’Connell commended APICHA for its services to the LGBT community, immigrants, and undocumented individuals – people who are typically unpopular with government. Last year, on August 18, 2004 (one week before she retired after many years of service at AI), Gloria Maki, Deputy Executive Director dropped by. She was accompanied by then incoming Co-Deputy Executive Director Humberto Cruz, then Assistant Director for the Bureau of Community Based Services Peter Laqueur, and former Program Officer Wesley Badillo. The group met with our staff, toured our offices and clinic, and shared a dim sum lunch. It was a bittersweet visit because of Ms. Maki’s decision to retire. She will be sorely missed for her dedication and hard work on behalf of people living with HIV/AIDS throughout New York State.

Friends of APICHA, led by Gregory Huang-Cruz, organized a reception on April 22, 2005 to welcome Dr. Scott Kellerman, recently appointed assistant commissioner for HIV/AIDS services of the New York City Department of Health and Mental Hygiene. Attendees included members of the HIV Planning Council and several A&P community leaders. APICHA’s HIV Primary Care Clinic staff physician, Dr. Victor Inada, gave him a special tour of the clinic.

Daphne Hazel, Associate Vice President for Project Street Beat, and a member of the New York State HIV Prevention Planning
Noteworthy

Report on Immigrant South Asian Women Released

In conjunction with the first National Asian and Pacific Islander HIV/AIDS Awareness Day on May 19, 2005, APICHA released the first ever report on the perceptions, knowledge and risk of HIV/AIDS for immigrant women in the South Asian community. There are about 251,724 Asian Indians, 20,269 Bangladeshis, 32,692 Pakistanis and 2,692 Sri Lankans living in New York State, with the majority living in New York City.

The report provides recommendations to the community and to policy makers on the key issues South Asian women face when addressing HIV/AIDS.

The recommendations include the need for improvements in data collection and reporting; community involvement; multilevel and multi-strategy approach to HIV education, prevention and treatment programs, and the need to consider gender throughout the design, implementations and evaluation of HIV/AIDS programs. The report also recommends for the community to draw upon its own strengths and use cultural and structural factors to foster support rather than isolation for those living with HIV/AIDS.

The study was jointly funded by APICHA and the US Department of Health and Human Services, HIV/AIDS Policy Unit, which is headed by Chris Bates, the director and a longtime friend of APICHA’s. Dr. Margaret Abraham, professor of sociology at Hofstra University, was the primary investigator and co-author.

To obtain a copy of the report, please contact Kevin Huang-Cruz at (212) 334-7940 x 217.

First National A&PI HIV/AIDS Awareness Day Observed

A panel discussion to raise awareness of the growing HIV/AIDS epidemic among A&PIs and reduce stigma of the disease was held on May 19 to mark the 1st National A&PI HIV/AIDS Awareness Day. The event was held at the New York University School of Medicine’s Schwartz Lecture Hall. The panel was composed of Therese R. Rodriguez (APICHA), Dr. Margaret Abraham of Hofstra University, Sumon Chin of the Chinese American Planning Council, Dr. David Ho of the Aaron Diamond AIDS Research Center, Dr. Ezer Kang of Columbia Presbyterian Medical Center, New York Council Member John C. Liu and Suki Terada Ports of the Family Health Project.

APICHA Collaborates with ImaginAsian

On June 17, 2005, APICHA and Cable Positive helped to launch ImaginAsian Theater’s New York Asian Film Festival. The program featured the New York premiere of Ethan Mao, a film by Quentin Lee, and an exhibition of “Asian and Masculine” a collection of photos by Troy Phillips. Troy’s work invites discussion about stereotypes, sexuality, and racism, redefining definitions of “masculinity” between Eastern and Western cultures.

Grants and Gifts... (continued from back cover)

at 212-334-7940. The next dance may be just around the corner. Each person was asked to donate $12 for the lessons. The group raised $500 for APICHA.

APICHA Online. APICHA is pleased to announce that beginning

September 1, 2005, donors will be able to process their gifts online, thanks to the generosity of Verizon. Having online service will improve the efficiency of the donation process, especially during peak fundraising periods.

From the People Republic of China, we hosted Dr. Hua Jiang, director of Chengdu Gay Community Care Organization who visited on March 15, and Dr. Zhao Hongwei, director of the Infectious Disease Department of Heilongjiang Provincial Hospital on March 28. Both guests were interested in our prevention and social marketing activities and APICHA was pleased have the exchange of knowledge and expertise with colleagues from other countries.

Shown in the photo (left to right are Dr. Victor Inada, Dr. Kellerman, Dr. Moubali Das-Douglas, Suki Terada Ports, Therese Rodriguez, and Yumiko Fukuda.
Grants and Gifts
Make Our Programs Go ‘Round

2005 Grant Award News—A five-year grant award of $453,311 per year was received in March from the Ryan White Title III Early Intervention Services program of the federal Health Resources and Services Administration. The grant supports APICHA’s HIV Primary Care Clinic, ensuring that A&PIs will have access to high quality HIV medical care. From the private funding sector, we received from Broadway Cares/Equity Fights AIDS $5,000 for emergency client support, $15,000 for general operating expenses from the The Paul Rapoport Foundation Inc. and a $7,000 matching grant from the Asian American Community Fund Asian American Federation of New York.

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Wall of Honor Kick-Off Party—On March 21, as winter gave way to spring, supporters of APICHA’s Wall of Honor fundraising initiative gathered to mark the project’s official kick off. Delicious hors d’oeuvres and elegant flower arrangements transformed APICHA’s public spaces into a parlor-like setting. Our honored guests who came to see the Wall were pleasantly surprised to see our beautiful, flexible space.

“The Wall was created to ensure that APICHA’s vital programs for A&PIs are available for as long as the epidemic exists,” declared APICHA Board Chair Errol Chin-Loy. Early supporters of the project include Robert Ackart, Broadway Cares/Equity Fights AIDS, Carr Business Systems, Gino Damasco, Tom Hennes, Lou Madigan, N. Cheng and Company and Jorge Ortoll. Over $25,000 dollars were committed and pledged as of that night. Hosts were Errol Chin-Loy, Jean Lobell, and Suki Terada Ports.

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And we danced [almost] all night...

Yes, folks, some of us had our first taste of Country and Western dance when the Manhattan Mustangs organized a dance benefit for APICHA on April 7, 2005.

“Charity Is The Beat We Dance To” is the Mustangs’ slogan. Indeed they have done so since 1997. By two-stepping and line dancing, they have found a unique and effective new way for LGBT and LGBT-friendly groups to raise money to help others, and have a great time as well. “APICHA’s outstanding commitment and support to the Asian and Pacific Islander community in the face of the HIV/AIDS crisis was a natural fundraising choice for the Mustangs Annual Spring Cotillion,” said Founder and Chairperson Dean Clarke Taylor.

If you are someone who has been dreaming of a dance lesson, call the APICHA development office

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