Purpose: The New Jersey HIV/AIDS Planning Group’s (NJHPG) HIV/AIDS Issues Committee (Issues Committee) held a series of six Town Hall meetings throughout the State in June 2010. The purpose of these meetings was to gather input from individuals in regional forums to address the Health Resource Services Administration’s (HRSA) mandate of early identification of individuals living with HIV/AIDS, which coincided with the tenants of the “Greater Than AIDS” campaign.

- **HRSA Mandate:** The mandate, disseminated in December 2009, calls for Part A Planning Councils to develop strategies for identifying those with HIV/AIDS who do not know their status, making them aware of their status and referring them into care. As early identification of persons who are unaware of their HIV status is linked with HIV prevention activities, HRSA called for collaboration with existing planning bodies to develop a strategy that will make persons aware of their HIV status. As part of the gap analysis required by the Centers for Disease Control and Prevention (CDC), the NJHPG implemented regional Town Hall meetings to address the mandate for statewide planning purposes.

- **“Greater Than AIDS” Campaign:** The campaign is a collaboration among a broad coalition of public and private sector partners. It was developed by the CDC to help re-focus attention on HIV/AIDS in the United States. The Kaiser Family Foundation provides strategic direct and day-to-day management of the project, as well as overseeing the production of the media campaign. The campaign seeks to respond to the AIDS crisis in the United States; paying particular attention to the severe and disproportionate epidemic among Black Americans.

The campaign is targeted at communities heavily affected by HIV/AIDS. The Issues Committee and the New Jersey Department of Health and Senior Services, Division of HIV/AIDS Services (NJDHSS, DHAS) incorporated the roll out of the campaign into the Town Hall meeting format.

**Methodology**

The methodology of the NJHPG Town Hall meetings was implemented to identify barriers to accessing HIV testing and care and treatment services.

**Locations:** The NJHPG held two Town Hall meetings in each of the three geographic regions of New Jersey:

- Northern Jersey (Newark and Hackensack);
- Central Jersey (New Brunswick and Trenton); and
- Southern Jersey (Atlantic City and Camden)
Recruitment: Recruitment for the Town Hall meetings was aimed at two populations identified in the HRSA mandate: (1) individuals who do not know their HIV status and (2) individuals who are HIV+ but are not currently accessing HIV care. To recruit from these populations, the NJHPG marketed the Town Hall meetings through distribution of fliers (in English and Spanish) to non-HIV service providers, homeless shelters, soup kitchens, municipalities and county agencies. NJHPG members from each of the regions took the lead in recruitment efforts. The NJHPG also requested that brochures and fliers from agencies providing HIV counseling and testing, Ryan White care and treatment services, syringe exchange services and HIV prevention services throughout the state be available for distribution at the meetings.

Town Hall Meeting Questions: Over the course of several months, the Issues Committee developed the following questions to address the HRSA mandate:

1. Why do you think people do not go for HIV Testing?
2. Where would you send folks to get HIV tested and other health information? For example: HIV Care, SEP, STI, TB, etc.
3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?
4. Do you have any ideas how to help us get people HIV tested and into HIV care?

The questions were translated into Spanish and Spanish language interpreters were available at each Town Hall meeting.

Meeting Format: At the beginning of every meeting, Loretta Dutton from NJDHSS, DHAS (and NJHPG State Vice-Chair) gave a short presentation on the “Greater Than AIDS” Campaign. She provided an overview of the campaign, explained how it tied into the Town Hall meetings and passed out We>AIDS buttons to participants.

Moderation: NJHPG Support Staff from Rutgers University, Edward J. Bloustein School of Planning and Public Policy, HIV Prevention Community Planning Support and Development Initiative (HPCPSDI) moderated the Town Hall meetings. HPCPSDI staff recorded the discussions and took minutes.

Summary: An abstract of the information obtained from the Town Hall meetings is included in the Executive Summary, followed by a detailed report of participant responses at each Town Hall meeting.
EXECUTIVE SUMMARY

Stigma Continues to be a Barrier for HIV Testing and Care

Contributing Factors:
- Specific sites are known as places where people with “AIDS” go for service.
- Lack of agency staff to provide services in the community.
- Stigma exists within some HIV service agencies and as a result, clients are not treated with dignity and respect.
- Misconceptions in the community surrounding HIV positive individuals still exist. People are afraid that once diagnosed they would lose home, job, friends and family.

Potential Solutions:
- Increased education and training opportunities for agency/hospital staff and the general public.
- Train providers to help combat stigma and promote HIV testing and HIV care and treatment in their own communities.
- Organizations and groups that encourage stigmatization should be challenged by citizen groups and governmental agencies.
- Disseminate information into the community that taking HIV medication will not cause death (as happened in the early days of the epidemic when there were fewer HIV medications and people were diagnosed in the later stages of AIDS).
- Use patient navigators to help individuals through the HIV testing process and walk them through potential barriers within the HIV care system.
- Provide better signs at testing and care and treatment facilities to help individuals navigate through the building.
- Provide alternate hours and locations for HIV testing.
- Put the HIV/AIDS hotline number on bus and train schedules to market HIV testing.

No Statewide HIV Testing Marketing Plan to Make People Aware That Rapid Testing only Takes 20 Minutes

Contributing Factors:
- There is no statewide marketing plan to advertise rapid testing.
- HIV is no longer considered an “emergency” and does not attract media attention.

Potential Solutions:
- Develop a statewide marketing plan to advise people that HIV testing is easy, confidential and FREE.
• Develop a general media campaign in the state to make communities aware of HIV care and treatment services.
• Develop and promote culturally competent HIV education and testing events.
• Develop media messages for private MDs about HIV testing sites in their area as well as promoting universal HIV testing as part of routine care.

General Lack of Consumer Education on HIV Transmission and Subsequent Services

**Contributing Factors:**
• The general public still fears people who are HIV positive.
• People are afraid of knowing their HIV status and are fearful about what treatment entails.

**Potential Solutions:**
• Use HIV positive individuals in providing education to consumers.
• Dispel fears of HIV testing and treatment. Staff should be trained and knowledgeable in newest medication regimens and treatment advances. Provide bi-lingual HIV testing services by culturally competent staff.

STD Clinics and HIV Testing Sites have Lines for Services and Attract Public Attention

**Contributing Factors:**
• Only a limited number of people can be brought into the building at one time to be tested in some of the STD clinics and health departments.
• Lines often form outside of buildings that provide HIV testing.

**Potential Solutions:**
• Conduct HIV testing at satellite sites, other than mobile vans, in the evening hours (after 5:00 p.m.) in locations that are convenient for the consumer.
• Use case managers or patient navigators to assist in alleviating “red tape” which causes delays in service provision.
Perceived Lack of Confidentiality

Contributing Factors:
- At each Town Hall meeting, participants described their city as a “small community” where family and friends are part of the HIV testing staff or work in clinics where testing occurs.
- Community agency staff members encourage testing and care outside of New Jersey when clients indicate they are afraid their confidentiality will be breached.

Potential Solutions:
- Build collaborations that support interagency team building and highlight the importance of consumer confidentiality.

Quality Assurance Measures are Lacking

Contributing Factors:
- Some staff appear judgmental to clients.
- Programs are not aware of the barriers that clients face when accessing their services.

Potential Solutions:
- Create surveys or forms that consumers can use to provide input regarding the services they receive.
- Create a “report card" for services based on consumer surveys and assessment tools.
Southern New Jersey Town Hall Meeting #1  
June 2, 2010  
Dooley House  
129 Market Street  
Camden, New Jersey 08102  

The NJHPG members who coordinated the Camden Town Hall meeting were Georgett Watson and Leslie Roca-Soto.  

There were 13 individuals in attendance.  

1. Why do you think people do not go for HIV Testing?  

Lack of Education  
- The community still thinks HIV/AIDS is a deadly disease. They do not want to find out if they are infected.  
- There is not enough HIV/AIDS education in the community.  
- There is not a Speaker’s Bureau that is funded to educate groups about HIV/AIDS.  
- Youth and Seniors need more education about why getting tested is essential.  
- Youth do not see HIV testing as a priority in their lives.  

Lack of HIV Testing Sites and Waiting Lines for Services  
- Testing is only available at one site in both Gloucester and Burlington counties.  
- People who want to get tested are those who are engaging in high-risk behaviors. When they come in for testing, services need to be available immediately.  
- Testing at the Health Department is first come, first serve. They only take the first eight clients per day. It is stigmatizing when people have to line up to be tested outside of the building.  
- Testing is not offered on days and times that are outside the traditional 9-5 work day.  

Stigma  
- People do not want to go to Cooper Hospital because they feel that everyone knows why they are there when they go to the 5th floor for services.  
- Stigma is very real, especially in a small town like Camden.
2. Where would you send folks to get HIV tested and other health information? 
   For example: HIV Care, SEP, STI, TB, etc.
   • Mobile van does HIV testing in Camden. The Van is also parked outside of the Syringe Exchange Program during their hours of operation.
   • Health Department on Federal Street in Camden
   • Cooper Hospital in Camden
   • Kennedy Health Systems in Cherry Hill
   • Virtua Health in Voorhees

3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?

Fear of Lack of Confidentiality
   • People feel that they have to get treatment outside of Camden because that is the only way their business is kept confidential.

Stigma
   • Stigma makes people feel unwelcome and thus they do not seek out treatment.

Other Factors
   • Mental health issues
   • Substance abuse issues
   • Family dynamics
   • Transportation
   • Housing and homelessness

4. Do you have any ideas how to help us get people HIV tested and into HIV care?

Finding Services for Clients Where They Feel Comfortable
   • Service providers should call around to find a comfortable place for clients to get tested or receive treatment.
   • Create a “Report Card” where Consumers can rate the friendliness and accessibility of HIV testing and treatment sites.

Combat Stigma
   • In order to attack stigma, clients have to be comfortable requesting and receiving the services that they are entitled to in Camden, and not automatically go to other cities and/or states.
   • Providers can help clients deal with their fears about stigma.
   • Providers should challenge agencies to change practices that lead to stigmatization.
• Providers must make sure that all agencies treat their clients with respect and humanity.
• When providers hear that clients have not been treated well at an agency, they need to report it; rather than never sending clients back to that agency.
• Individuals need to know that there is no shame associated with being tested or receiving services. It is their right to receive services and good healthcare.
• Work with community on how to fight stigma.

Collaboration with Other Agencies for Outreach and Education
• Providers need to work together to educate the community.
• Providers need to reach out to other area institutions to change how people are being treated when they get HIV tested.
• Providers can work together to use social networking tools (Facebook and Twitter) to educate the community on testing and care and treatment.
• Education needs to be provided by people who are reflective of the target population.
• Get individuals educated on getting tested, and then educate them on care and treatment.
The NJHPG members who coordinated the Atlantic City Town Hall meeting were Georgett Watson and Leslie Roca-Soto.

There were 20 individuals in attendance.

1. **Why do you think people do not go for HIV Testing?**

   **Don’t Want to Know Results**
   - Many individuals are scared to find out they might have HIV.
   - People don’t see testing as a priority in their lives if they are struggling to meet basic needs.

   **Lack of Education**
   - Many people minimize their potential risks or are not aware of their risk.
   - People are afraid that testing is expensive.
   - People think that AIDS is a death sentence.
   - People think that AIDS is a manageable disease and may not see a doctor unless they are ill.
   - AIDS is no longer in the forefront in the media so there is a publicity issue surrounding education about the disease.

   **Fear of Lack of Confidentiality**
   - Worried about lack of confidentiality if they are seen going in for a service.
   - Worried about privacy as they do not know who has access to their health care information and if those individuals will act professionally and keep it private.
   - Atlantic City is a small town and everyone knows each other and “their business.”

   **Lack of Services for Individuals Who Speak Spanish**
   - It is difficult to find testing sites with employees that speak Spanish.
   - Undocumented individuals fear that they have to fill out forms which will lead to deportation.
Length of Time It Takes for Testing
- It takes a long time to get tested. It often takes two hours to get a 20 minute HIV test.
- Some testing centers are only able to take eight patients per day for STI and HIV testing.
- At testing centers, individuals have to stand in line in order to be one of the first eight admitted for testing.
- Those who are IDU do not want to wait for services.

2. Where would you send folks to get HIV tested and other health information?
For example: HIV Care, SEP, STI, TB, etc.
- Atlantic City Health Department
- Oasis Drop-In Center
- Area hospitals
- South Jersey AIDS Alliance
- John Brooks Recovery Center

3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?

Fear of Lack of Confidentiality
- If seeking care, someone might see them and know they are HIV positive.
- Fear of being "outed" because of stigmatization by others.

Lack of Services in Spanish
- There is a lack of services directed toward Spanish speakers. Many Spanish speakers are afraid to see a doctor if the “environment” is not friendly (i.e. no Spanish reading materials and staff that does not speak Spanish).

Fear of Medical Care
- Many people are afraid of what HIV medicines will do to them in the long run.

Difficulty in Navigating the Medical System
- The system is hard to navigate and it is difficult to get all needed services in the same place.
- Many clients do not want to wait for specialist referrals.
- The medical system has too much red tape to get through to get services. Many people may give up before ever getting services.
4. Do you have any ideas how to help us get people HIV tested and into HIV care?

Changes to Service Provision and Marketing
- Extend hours for testing and care and treatment past 5:00 p.m.
- Provide services in both Spanish and English.
- Use a satellite building to do testing outside of the normal venues.
- Use mobile vans to provide testing.
- Provide education and information through PSAs on Spanish radio stations.
- Advertise that HIV testing is free (in both English and Spanish).
- Develop and promote culturally competent HIV education and testing events.
- Develop and implement a short survey (five questions) about barriers to testing and treatment and use answers to reduce and/or eliminate barriers to service.

Combat Stigma
- Providers need to help clients confront their fear of testing and treatment in order to overcome it.
- Providers need to make sure that they (and those that they refer their clients to) treat their clients with humanity and respect.
- Providers need to report agencies that are not caring for clients properly.
- Providers need to emphasize a harm reduction model in treatment clinics.

Community Involvement
- Hold community events in areas of high drug use.
- Locate community gatekeepers to help clients get tested, get into services and stay in services.
- Find ways of getting clients to participate in their care.
- Target HIV testing events at young people. Use the incentive of getting into an event, such as basketball games or hip hop concerts, for free if the individual gets HIV tested.
The NJHPG members who coordinated the New Brunswick Town Hall meeting were Roseann Marone, Sal Susino and Chas White.

There were 50 individuals in attendance.

Surveys were distributed to those individuals who could not attend the Town Hall Meeting. Forty-two people completed the survey. Their responses are attached, beginning on page 24.

1. Why do you think people do not go for HIV Testing?

Lack of Education
- People may not know where to go for HIV testing.
- Some people are scared of the results and feel that “no news is good news.”
- Some people do not believe that their high-risk behaviors put them at risk for HIV infection.
- People still view having HIV as a death sentence.
- Some people believe that their lack of insurance keeps them from getting HIV tested.

Stigma
- Stigma stops people from testing when they think HIV is transmitted through casual contact.
- People do not want to be judged by others’ perceptions of transmission modes.
- Fear of having family members reject them because of their HIV status.
- Fear of losing a job because an employer finds out a person’s HIV status.
- Fear that their partners will leave them if they test positive.

Other Factors
- When people are into their addictions, they are only thinking about getting high and not about taking care of themselves.

2. Where would you send folks to get HIV tested and other health information?
For example: HIV Care, SEP, STI, TB, etc.
- Elijah’s Promise in New Brunswick
- Hospitals
- Hyacinth (office and mobile van)
- Chandler Clinic in New Brunswick
3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?

Lack of Education
- People are afraid there are no treatment services available for undocumented individuals.

Fear of Treatment
- Some individuals have a fear of seeing a doctor and being put on medication.
- Some people question seeking HIV treatment because they think they’re going to die anyway.
- People are afraid of the number of pills in the drug cocktail.

4. Do you have any ideas how to help us get people HIV tested and into HIV care?

Provide Education
- Have people who are in treatment talk to others about the benefits of getting and staying in care.
- Provide education in public schools on the dangers of engaging in high-risk behaviors.

Increase Outreach and Testing Efforts
- Provide outreach and testing on the street in high-risk areas (drug areas, strolls, areas of high poverty).
- Use PLWHAs as outreach workers to talk to people about the importance of HIV testing and care.
- Have outreach workers talk about testing and care and treatment as one “package.”

Enlist More Ministers in HIV Education Efforts
- Use ministers to address HIV/AIDS issues with parishioners, including the importance of testing and care and treatment.
The NJHPG members who coordinated the Trenton Town Hall meeting were Eileen Birk, Patricia Tate and Phoenix Smith.

There were 30 individuals in attendance.

1. Why do you think people do not go for HIV Testing?

Lack of Education
- People may be unaware of HIV testing locations.
- People do not know what services are available to them.
- People don’t know that testing is free and it takes only 20 minutes.
- College-age kids may be educated about HIV, but don’t think their behaviors put them at risk.

Social Stigma
- People may be embarrassed and afraid to learn of their status because they are afraid of being stigmatized.
- People think that they are alone in their fears about stigma and HIV. They do not get tested, nor do they receive counseling to help alleviate their fears.
- People are afraid that they would not be loveable if they had HIV.
- So many people are told “they can’t do something” because of the social stigma surrounding HIV.
- People feel that people with HIV are not normal.

Fear of Lack of Confidentiality
- People may not want to go to Trenton STD clinic for testing because they may be related to a worker or know someone who is.

Barriers Due to Substance Abuse
- People who are doing drugs do not make healthy decisions, like getting tested.

Lack of Resources
- People know where to get tested but do not have the resources to get there.
2. Where would you send folks to get HIV tested and other health information? For example: HIV Care, SEP, STI, TB, etc.
   • Health Department
   • STD clinics

3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?

   Fear of Lack of Confidentiality
   • People are still fearful that someone will see them coming out of a treatment facility.

   Lack of Trust in Medical Provider
   • If an individual does not trust caregivers or the medical system, they will not seek care and treatment and/or not stay in care for any length of time.

   Misinformation from Peers
   • Some people listen to their peers’ opinions on medication side effects; and thus, become fearful and do not seek treatment.

   Not Wanting to Change Lifestyles and Behaviors
   • For some individuals, being diagnosed with HIV is not a priority when dealing with other life challenges.
   • Some people do not want to give up behaviors that put them at risk and change their lifestyles to look after their health.
   • Many women do not focus on themselves and their health, as they are taking care of others before they take care of themselves.

   Hopelessness
   • Some people think, “What good will it do (to get into care)? Am I going to become sick and then die…like someone with cancer?”

   Learning to Deal with the Medical and Social Service System
   • Once a person is in the medical system, they have “to do a lot to stay alive.” They must learn to take medicine, make appointments, eat right when taking their medicine, etc. Some people find this too difficult to stick with for the rest of their lives.
4. Do you have any ideas how to help us get people HIV tested and into HIV care?

Provide Resources
- Give clients resources (bus tickets or incentives) to get them to a testing site.
- Work with NJ Transit to provide bus tickets to testing sites.

Change the Way Services Are Provided
- Providers need to understand that HIV is not a 9 to 5 disease. To impact the community, agencies must change their hours for service provision.
- Provide HIV testing at other social service offices (WIC, social security, unemployment, etc.).
- Develop a sub-culture of trainers in the community such as barbers, stylists and nail techs, who can deliver the message about HIV testing and care and treatment.
- Train HIV counselors to ensure that correct information about risk behaviors, exposure to HIV and how often one should be HIV tested is disseminated to clients.
- Provide rapid testing in more sites around the community.
- Set up testing systems to triage clients based upon services needed so that those who request and HIV test are seen before those with multiple service needs.

Change Prevention Messages
- Develop a message that is inclusive of everyone in the community. The message needs to emphasize that “we all need to get tested,” rather than “you need to be tested.”

Provide Education
- Advertise that the rapid test only takes 15 minutes.

Make HIV Testing a Part of Routine Medical Care
- Make testing a part of one’s yearly physical
The NJHPG members who coordinated the Newark Town Hall meeting were Danielle Bush and Eddie Jumper.

There were 80 individuals in attendance.

1. Why do you think people do not go for HIV Testing?

Lack of Education
- Lack of knowledge in the community about testing and how often you should get tested.
- People are still uncomfortable talking about HIV.
- People are not aware that HIV testing can be done in 20 minutes.

Lack of Services in Spanish
- Many illegal immigrants do not access care because they fear having to fill out paperwork that might get them deported.
- Many of the HIV testing messages are in English and not in Spanish. People who speak Spanish may not know the basic facts about HIV and how the disease can be managed.
- Spanish speakers may not know where they can access HIV testing services with Spanish-speaking staff.

HIV Testing is Not a High Priority
- HIV is no longer responded to as an “emergency” because it is seen as a manageable disease.
- Testing is not a priority when people are struggling to get other needs met.

Denial
- People may be in denial and think that HIV “isn’t that bad” or that “it can’t happen to them.”

Fear of Lack of Confidentiality
- People do not want anyone else to know that they are having an HIV test because they don’t want others to think they are at risk for contracting HIV.
2. Where would you send folks to get HIV tested and other health information? For example: HIV Care, SEP, STI, TB, etc.
   - Health Department
   - Hospitals
   - AIDS Service Organizations

3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?

   Lack of Media Awareness
   - There are very few media messages about getting into treatment for HIV. More media attention is needed to raise awareness of the importance of HIV treatment.

   Lack of Education
   - People are unaware of how HIV treatment services can benefit healthier living when diagnosed with HIV.

4. Do you have any ideas how to help us get people HIV tested and into HIV care?

   Change Prevention Messages
   - Messages must be culturally appropriate.
   - Create testing messages that target black men (straight black men and black men on the down low).
   - Advertise that rapid testing is available and takes only 20 minutes.
   - Provide more information about HIV testing in Spanish.
   - Develop educational campaigns that feature people who are HIV negative to show positive examples of how to avoid HIV infection.

   Make HIV Testing Routine
   - Educate people that HIV testing is part of their routine medical care.
   - Educate physicians to offer testing as part of routine medical care.

   Provide Education to Communities
   - Amplify the voices of HIV positive individuals and encourage them to speak to their communities about living with HIV.
   - Provide educational messages targeted at the Latino community to alleviate their fear of deportation as a result of seeking medical services.
   - Educate communities that early detection and entrance into care have positive outcomes.
Develop Collaborations
• Agencies must partner with each other to provide a comprehensive approach to the dissemination of information on HIV.
• Collaboration helps stretch funding dollars and ensures that HIV prevention and care and treatment messages are presented effectively to communities.

Develop Innovative Marketing Techniques
• Conduct a “Hip Hop Testing Month” event using celebrities to promote testing. To get a ticket to the concert people must take an HIV test.
• Use social networking to get the message out about HIV testing and care and treatment services (Facebook, Twitter, My Space, etc.).

Enlist Churches in HIV Prevention Messages
• Churches need to encourage people who are getting married to get tested for HIV.
• Agencies should train pastors to be comfortable talking about sex and HIV transmission when doing pre-marital counseling.
Northern New Jersey Focus Group #2  
June 28, 2010  
Housing, Health and Human Services Center  
120 South River Street  
Hackensack, New Jersey 07601  

The NJHPG members who coordinated the Hackensack Town Hall meeting were Steve Scheuermann and Charlotte Tobias.

There were 52 individuals in attendance.

1. Why do you think people do not go for HIV Testing?

Lack of Education
- Some people think they are going to die faster if they know their HIV status.
- People do not know there is free testing.
- People fear having to wait for test results.
- People fear needles so they don’t get tested.
- People don’t know testing only takes 20 minutes.
- People don’t know that the test is painless (just a finger prick).

Social Stigma
- There are people who believe that if others know they have HIV, they would lose their homes, jobs, families and friends.
- People have heard stories of those who “were sorry” they received their HIV test results because of the social stigma they endured.

Fear of Lack of Confidentiality
- Some people fear that there is a lack of confidentiality when getting tested, because they see the same people over and over in the doctor’s (or clinic’s) waiting room.

Denial
- Many people don’t believe that HIV can happen to them because they do not think they are engaging in risky behaviors.
- Some people are not willing to live a healthier lifestyle if they find out they have HIV.

2. Where would you send folks to get HIV tested and other health information?  
For example: HIV Care, SEP, STI, TB, etc.
- Hospitals
- Clinics
- ERs
3. Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?

Lack of Education
- Some people believe that taking medication is going to kill them.
- People feel they should not worry about HIV because if it doesn’t kill them then another virus will.
- People are unaware that HIV treatment services (including medication) are offered free of charge through the Ryan White Care Act. They do not seek out treatment because they don’t have insurance to cover the costs.
- People think they can live a long time without medications.

Stigma
- People may not seek out treatment because of the fear of stigma from their family members.
- HIV is not discussed in many inner city communities. People who try to bring up the topic for discussion may be in danger of being stigmatized and may be provoking others to commit violence against them.

Lack of HIV Services
- There may be misinformation on the street that ADDP and HOWPA services no longer exist due to the lack of federal funding.

Depression
- People become depressed by their HIV status and don’t get into treatment.
- People may become depressed and feel overwhelmed by the amount of things they need to do in order to be compliant with their medications and treatment.

Dislike of Medical Services
- Some people do not like going to the doctor for any health issue.

Fear of Lack of Confidentiality
- People are concerned about the confidentiality of services provided on mobile vans.

4. Do you have any ideas how to help us get people HIV tested and into HIV care?

Make Testing Part of Routine Medical Care
- HIV testing should be advertised as a routine procedure to keep people well.
- Integrate HIV testing and care and treatment into primary care services so that they are not separate.
Change Where Testing is Conducted
• Have testing off-site, in buildings and locations where people are not afraid to go.
• Make testing sites less visible than the “dirty white vans.”
• Have HIV testing where mothers get their children vaccinated.
• Provide transportation to take clients (pick-up program) to places outside of their home communities for HIV testing.

Increase Outreach for HIV Testing
• Increase outreach services to inform people of where testing sites are in their communities.
• Provide outreach to educate people on how often they should be re-tested.

Increase Outreach for Care and Treatment
• Use peer group members as outreach workers to get the word out about the importance of accessing care and treatment services.
• Use “reach and teach” models of outreach in communities.

Use Social Networking for Outreach
• Promote getting tested with a group of friends to alleviate fear.
• Use Facebook and texts to reach youth.
Surveys Completed for the New Brunswick Town Hall Meeting  
Conducted by Donna Frandsen MSW, Director of the  
Intoxicated Drivers Resource Center  
N=42 (38 in English and 4 in Spanish)

1. **Why would you think people do not go for HIV testing?**
   - Fear of learning they are HIV+ (29)
   - Embarrassed to be tested (11)
   - Feel they are healthy and don’t have a problem (5)
   - People don’t think it can happen to them (4)
   - Ignorance
   - Assume use of condoms is enough
   - Don’t care to know
   - They are in a stable relationship
   - Don’t have time to go
   - Don’t know where to go
   - Stigma

2. **Where would you send folks to get HIV tested and other health information? For example: HIV Care, SEP, STI, TB, etc.**
   - Hospital (15)
   - Clinics (13)
   - To doctor for routine testing (10)
   - Planned Parenthood (3)
   - Community Health Center (3)

3. **Why do individuals in your community, who are HIV positive, don’t get treatment for their HIV?**
   - No insurance (7)
   - Ashamed or embarrassed (6)
   - Can’t afford it (5)
   - Scared that others will know (3)
   - Expensive medication (2)
   - They give up hope (2)
   - Don’t know where to go (2)
   - People feel they’ll die anyway (2)
   - They hide, thinking that they can forget (2)
   - They are in denial
   - They are okay living with it
• Scared of the effects of treatment
• Don’t think they have it
• Don’t think HIV is “bad”
• Personal choice

4. Do you have any ideas how to help us get people HIV tested and into HIV care?
   • Give incentives/rewards to get tested (5)
   • Mandatory testing (4)
   • Free clinics to educate on safer sex (3)
   • Offer free testing (3)
   • Make them aware of their options and that life is not over (2)
   • Provide more information (2)
   • Give people insurance (3)
   • Flood media with help numbers and education (2)
   • Discuss confidentiality (2)
   • Advertisements (2)
   • Offer free discreet testing and care
   • More mobile testing units
   • Promote the testing process and the effects of treatment
   • Provide free information
   • Advertisement on trains
   • More public forums to educate people on what is available and what can help
   • Go into a care facility
   • Tell them they need to be responsible for themselves
   • Keep sending the message of help
   • Education