

Idaho Advisory Council



IDAHO DEPARTMENT OF
HEALTH & WELFARE

IACHA Orientation Guide

IACHA Mission Statement

Idaho will become a place where new HIV infections are rare and when they do occur, every person, regardless of age, gender, race/ethnicity, sexual orientation, gender identity or socio-economic circumstance, will have unfettered access to high quality, life-extending care, free from stigma and discrimination.

IACHA Purpose and Function

IACHA uses a community planning process to develop a comprehensive statewide HIV care and prevention written plan. Ultimately, the plan identifies HIV-related care and prevention needs, available resources and the steps necessary to improve HIV prevention and care programs in Idaho.

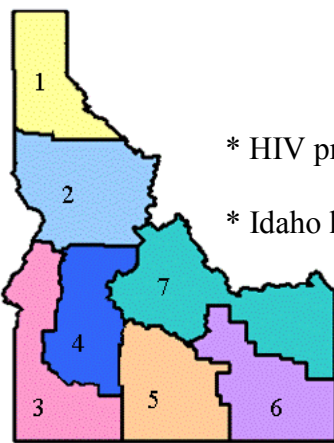
Integral to the community planning process is the involvement of state and local agencies, non-governmental organizations, and representatives of communities and groups at risk for HIV infection and/or already infected.

IACHA leadership and group policy ensures that every member is equally included in meeting discussions and decision-making.

HIV and AIDS in Idaho

Source: Idaho HIV/AIDS 2010 Epidemiologic Profile

- 1,254 individuals are presumed living with HIV or AIDS in Idaho as of 2010
- The majority of Idaho HIV/AIDS cases are male
- Whites were 76% of diagnoses during 2004–2009, (this race category also experienced a 75% increase in diagnoses during 2004–2009, while other race categories remained relatively level)
- MSM continues to be the most reported mode of exposure (49%) during 2004–2009
- Among women diagnosed during 2005–2009, the majority identified exposure risk as partners of high-risk males. A high proportion (25%) were Hispanic.



* HIV prevention and care services exist in each of Idaho's seven health districts.

* Idaho has two HIV specialty clinics (Districts 4 and 6).

IACHA History

To help understand IACHA as it currently functions, it may help to review the group's history.

In 1994, Idaho embraced a community planning process to assist in the development of a plan targeting HIV prevention efforts to those populations at greatest risk for HIV transmission. At this point, the HIV prevention group was known as the Idaho Prevention Planning Group.

In 2003, this group expanded to address the care-related needs of people living with HIV and AIDS and changed their name to the Idaho Care and Prevention Council. Though the goal was to integrate care and prevention planning, after several years under this model, care and prevention still remained separate sections of the overall structure of the group.

A more concerted effort began in 2007 to better integrate the spectrum of concerns and issues related to HIV and AIDS. Changes were made to the structure of the group, allowing for better adaptation to the constantly evolving prevention and care planning needs. The name was changed again to clarify the group's purpose and populations served.

Thus, Idaho has one statewide community planning group addressing the diverse needs of HIV and AIDS: the Idaho Advisory Council on HIV and AIDS (IACHA).

IACHA Responsibilities

In regards to HIV prevention, members work in partnership with the state program lead to complete the following:

- Assess prevention needs in the state
- Determine populations most at-risk of HIV infection
- Recommend effective prevention strategies to reach these populations

Addressing the needs of HIV/AIDS care in Idaho, IACHA members work with the state program lead to complete the following:

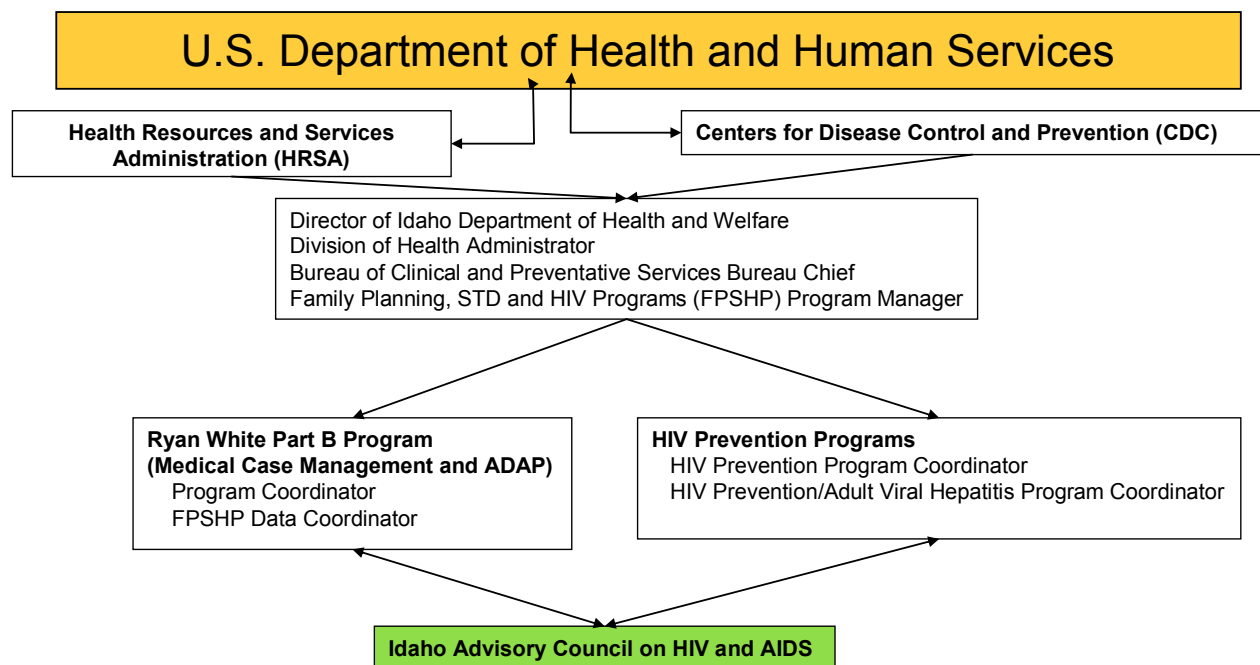
- Assess care needs in the state
- Identify service gaps for people living with HIV/AIDS
- Prioritize resource allocation

IACHA's decisions are based on several sources of data including, but not limited to the following:

- Epidemiological profiles of those infected in Idaho
- Population and community-specific needs assessments
- Scientifically proven prevention interventions
- Number of clients in HIV care
- Rates of mental health, substance use and other STDs among people living with HIV/AIDS
- Rates of poverty and health insurance coverage among people living with HIV/AIDS
- Unmet need calculation

Funding Sources

The following hierarchal flow chart describes the federal, state and local efforts supporting HIV care and prevention programs in Idaho.



IACHA Membership

IACHA membership is limited to 26 people with membership terms of three years and the option to reapply. Ideally, IACHA membership includes the following:

- Persons infected with HIV/AIDS
- Persons representing populations most at risk for HIV
- HIV care and prevention providers
- Health department representatives
- Educators
- Persons with expertise in behavioral science, substance abuse, corrections, health planning, epidemiology and evaluation.

New members are provided an online orientation, assigned a mentor and given a membership manual to assist them in understanding the workings of IACHA.

IACHA Structure

The Community Co-Chair is elected by the members; the state Co-Chair is appointed by the state office.

IACHA meets in Boise three times per year for two-day sessions.

IACHA has five standing committees: Membership Committee, Data Committee, Research Committee, Finance Committee and the Administrative Committee.

Contact Information

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Helpful Websites

Mountain States Group IACHA Site:

www.mtnstatesgroup.org/IACHA.htm

Family Planning, STD and HIV Programs:

www.safesex.idaho.gov

www.nakedtruth.idaho.gov

Glossary of Terms and Acronyms

ADAP (AIDS Drug Assistance Program)– The state’s program that funds HIV medication for people who are HIV+ and unable to pay for medications

CDC (Centers for Disease Control & Prevention)– The CDC, in the U.S. Department of Health and Human Services, is the lead federal agency for protecting the health and safety of the people of the United States. The CDC provides most of the funding for HIV prevention and HIV surveillance activities in Idaho.

Epidemiologic Profile (Epi Profile)– A document that describes the HIV/AIDS epidemic in various populations and identifies characteristics both of HIV-infected and HIV-negative persons in defined geographic areas. The Epi Profile serves as the scientific basis from which HIV prevention and care are needs are identified and prioritized for a jurisdiction.

HRSA (Health Resources and Services Administration)– The federal agency within the Department of Health & Human Services that administers and oversees the Ryan White Care Act

HRH (High Risk Heterosexual)– An HIV risk group

IACHA (Idaho Advisory Council on HIV and AIDS)– Community planning group in Idaho

IDU (Injection Drug Users)– An HIV risk group

MSM (Men who have Sex with Men)– An HIV risk group

PIR (Parity, Inclusion, and Representation)– CDC mandate which requires IACHA to ensure membership reflects the Epi Profile, all members are provided the opportunity to speak and all members voice the views of the groups they represent

FPSHP (Family Planning, STD and HIV Programs)– The section within the Idaho Department of Health & Welfare responsible for administering the Title X Family Planning Program, the STD Prevention Program, Ryan White Part B and AIDS Drug Assistance Programs, and the HIV Prevention Program.