



CONNECTICUT HIV
PLANNING CONSORTIUM

FALL 2025

The CHPC is an integrated, statewide prevention and care planning group comprised of diverse partners– including persons living with HIV.



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MISSION STATEMENT:

To create a coordinated state-wide prevention and care system in which the rate of new HIV infections is reduced, and those who are living with and affected by HIV/AIDS are connected to appropriate care and support services.

CHPC MEMBER SPOTLIGHT

Reggie Knox's Story: Resilience, Advocacy, and the Power of Healing

An interview with Ken Plourd

Reggie, now 74, was diagnosed with HIV in 1986 at the beginning of the epidemic. His doctor delivered what felt like a death sentence when explaining Reggie would most likely live for 18 months. "I was expecting to die," Reggie recalls. "But I didn't."

Over time, Reggie transformed his pain into purpose. He began speaking at schools and community events, sharing his personal story to educate and inspire others. "If I can help one person with my story, I feel like I've accomplished something," he says. "I talk to kids about the choices they make, about how trauma can shape you, and about how healing is possible."

Reggie holds "OG" status with the CHPC as a trusted voice in the community, and a powerful advocate for people aging with HIV. Reggie lived through the height of the epidemic, losing close friends daily and witnessing firsthand the neglect and stigma people with HIV faced in the community and in healthcare settings. He uses his wisdom and knowledge to help change the world on issues such as stigma, trauma, and healing at the intersection of public health and social justice.

Ken: *"How did you handle taking care of others while expecting to die yourself?"*

Reggie: "I wasn't really handling it. I was weak too. I thought I'd be next. But we had each other. Our little group of friends became our only support. Their families weren't there. Society wasn't there. We were it."

"When I told my mother, the first thing she said was, 'Did you tell anybody?' Not 'Are you okay?'" That response, he explains, wasn't cruelty, rather it reflected deep-rooted norms in many African American families where silence and secrecy around illness, sexuality, and trauma were common forms of self-protection. "We were taught to keep things in the family, to never air our business," Reggie says. "It hurt, but I understood it. That's just how we were raised."

Reggie reflects that, "Some nurses would not even touch patients. You had to bring your own linens. Nobody wanted to get close." He recalls the heavy burden placed on family members and friends as they sat vigil as the disease progressed. Reggie recalls how simple words of "thank you" from his dying friend completely broke him down.

"People in the world need to hear our stories. If I can help one person think differently, make better choices, or maybe break the cycle, it is worth it."

- Reggie Knox

CHPC MEMBER SPOTLIGHT

Reggie Knox's Story: Resilience, Advocacy, and the Power of Healing

An interview with Ken Plourd

Ken: "What made you decide to finally start medication?"

Reggie: Reggie witnessed the devastating impact of AZT, the only HIV treatment available at the time. "I saw what it did to my friends. It wasn't an option for me. I refused to take it." It wasn't until 2015, nearly 30 years after his diagnosis, that Reggie began HIV treatment in Connecticut, under the care of a provider he trusted deeply. "He was more than a doctor. He treated me physically and emotionally," Reggie says. "He saw me. My T-cells were dropping. I trusted my doctor. He wasn't just prescribing meds. He sat with me, talked to me. He cared. I was also getting older. My body was giving me signs – kidney issues, mini-strokes, infections. It was time for me to be more open to medication."

Ken: "Why do you keep doing this advocacy work and speaking engagements?"

Reggie: "People in the world need to hear our stories. If I can help one person think differently, make better choices, or maybe break a cycle, it is worth it. My life has more meaning knowing others will not have to experience what I have gone through."

As CHPC Member, Reggie advocates for a more compassionate, informed HIV response. He uses storytelling to promote routine testing and rapid treatment. He emphasizes the transformative role a healthcare provider can play by listening, caring, and meeting the patients where they are at. He hopes to help chip away at the stigma through intergenerational education and linking people to care in communities still impacted by silence and inequity.

Reggie recalls, the healing power of the human connection with a story about a chance encounter with a woman offering him a ride to vote. This ride led him to enter a spiritual discussion group. "That's when I started looking inward," he says. "I forgave myself. I started to heal. I started to believe that I'm worthy."

Reggie's story reminds us that individuals are more than a medical condition. He reminds us that HIV lives with him and does not define him. Through honesty, faith, and community, he continues to uplift others while rewriting what it means to live and age with HIV. His voice is a reflection of the past and a powerful guide for the future.

Reggie's *Recommendations*



Go to comfort food: Lemon meringue pie or fried chicken



Favorite type of music: House music



Favorite movie: Now, Voyager



Quote to live by: "All things come together for the Lord" Romans 8:28



GET INVOLVED WE'RE GROWING!

The CHPC is looking for new members – particularly people from Tolland County and young people (under 29) – who are committed to the CHPC's HIV care and prevention mission and can attend meetings from 9:00 am to 12:30 pm on the third Wednesday of each month. Applicants are encouraged to **ATTEND** a CHPC meeting before joining. CHPC members who are not employed are paid for their time.

CLICK OR SCAN BELOW TO LEARN MORE!

Visit cthivplanning.org or check out our outreach card on page 7 for more information!



CONNECTICUT HIV PLANNING CONSORTIUM OUTREACH

Ending
the
HIV
Epidemic

The time is now.



UPCOMING CHPC Meeting

November 19th 9:15 AM - 2:15 PM
Chrysalis Center - 255 Homestead Avenue,
Hartford, CT, 06112

**Click or scan here for more
information**



PLANNING IN ACTION: HOW CHPC HELPS COMMUNITY VOICES DRIVE CHANGE

By CHPC Staff

Advocacy can take many forms. It might be a bold protest, a heartfelt petition—or a story shared in a small group, a question during a meeting, or a new idea in a brainstorm.

At the Connecticut HIV Planning Consortium (CHPC), these moments drive the work. Recognized by the Connecticut Department of Public Health (DPH) as the state's primary HIV planning body, CHPC brings together people living with HIV, service providers, healthcare workers, and community members to shape a stronger, more equitable response. Through this work, CHPC helps DPH and its partners review trends, identify gaps, and update the Statewide HIV Plan—a living roadmap for addressing the epidemic.

"This isn't just planning—it's advocacy in motion."

CHPC's four main committees are where much of this work happens. Each one offers a unique way for members to contribute their voice and expertise:

- **Needs Assessment Project (NAP):** Gathers feedback on barriers and gaps in care and prevention services to inform the Statewide Plan.
- **Quality and Performance Measures (QPM):** Ensures that prevention and care indicators reflect statewide goals and helps track progress over time.
- **Ending the Syndemic (ETS):** Connects efforts to address HIV, hepatitis, sexually transmitted infections (STIs), and substance use disorders (SUDs) as interrelated health challenges.
- **Public Awareness & Community Engagement (PACE):** Focuses on outreach, mentoring, and sharing strategies that center the needs of communities most affected by HIV.

The result? A plan and a process that reflect real people's needs—not just statistics.



Inclusive Language in HIV Prevention & Care

words matter

By Jenny Bobadilla-Pincos, CT DPH Community Engagement Coordinator

WHY IT MATTERS



People with HIV who experience stigma are up to **2.5x more likely to delay care**



Non-affirming language is one of the top reasons **LGBTQ+ youth avoid health services**



Staff who use people-first terms report **better client relationships and improved quality of care**

Sources:

- **Sayles, J.N., et al. (2009).** The association of stigma with self-reported access to medical care and antiretroviral therapy adherence in persons living with HIV/AIDS. *Journal of General Internal Medicine*, 24(10), 1101-1108.
- **GLSEN National School Climate Survey (2021).** The experiences of LGBTQ youth in schools and how inclusive policies and practices make a difference.
- **Centers for Disease Control and Prevention (CDC).** (2020). Training resources on stigma reduction and inclusive communication. Retrieved from [cdc.gov](https://www.cdc.gov).

Quick Tips for Inclusive Language

Say This	Not That
Person with HIV	HIV-infected person
Person who uses drugs	Addicts / drug abusers
Person who has been incarcerated	Ex-con / felon
Person who is unhoused	Homeless person

Sources:

- **National Institutes of Health. (2025, June 13).** Person-first and destigmatizing language. NIH Style Guide. Retrieved from <https://www.nih.gov.nih-style-guide/person-first-destigmatizing-language>.

Language shapes perception.

And perception shapes access to care, trust, and dignity. In HIV prevention and care, the words we choose have real impact. A single word can help someone feel respected and seen—or push them away.

Inclusive language is evolving.

It reflects our collective learning. Sometimes it means replacing outdated terms, other times it means listening when someone tells us how they want to be addressed. Language evolves, and so must we.

It's not about being perfect.

It's about being intentional and open. Inclusive language means thinking about how our words land. It asks us to pause, reflect, and adjust. This small shift helps build trust with clients, colleagues, and communities.

Words can carry weight.

Even well-meaning language can be rooted in systems of stigma or bias. When we use people-first and affirming language, we help reshape those systems. We foster safety. We make room for dignity.

We can all do our part.

Every conversation is an opportunity. Whether you're delivering a training, completing an intake form, or chatting with a colleague, your words matter. And when we use them with care, we help build more just, inclusive systems of care.

“

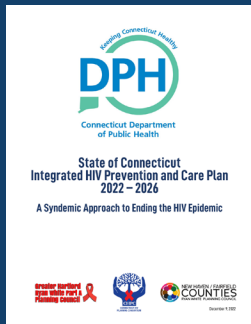
Our words should reflect the people we serve, not just the systems we work in.

”



The Four Pillars: Connecticut's Statewide Strategy to End the HIV Epidemic

DIAGNOSE • TREAT • PREVENT • RESPOND



The **Connecticut Integrated HIV Prevention and Care Plan 2022-2026** is our roadmap for ending the HIV epidemic across the state. Created with deep community involvement and guided by up-to-date data, it lays out a bold vision for reducing new infections and improving the lives of those affected by HIV. This Plan covers 2022-2026 and provides a flexible framework for organizations, partners, and communities to align their work. The Plan centers on four pillars that build the foundation for coordinated action across the continuum of prevention and care.

Click or scan here to review the Integrated Plan Summary



DIAGNOSE

- Expand HIV testing in clinics and community spaces
- Use status-neutral approaches
- Link newly diagnosed individuals to care quickly



TREAT

- Support same-day access to care and ART
- Promote viral suppression and long-term retention
- Track care engagement using shared quality measures



PREVENT

- Promote PrEP, PEP, condoms, and sexual health education
- Expand access to STI screening and harm reduction tools
- Invest in community-driven prevention



RESPOND

- Use real-time data to spot and respond to clusters
- Support interagency collaboration
- Adjust strategies as new trends emerge

WHERE DO YOU FIT IN?

The Plan doesn't live in a vacuum—it needs people like you. Whether you're someone with lived experience, a new provider, or a community advocate, your insight helps shape statewide HIV efforts.

- Join a CHPC meeting or committee meeting
- Share your story or complete a community survey
- Help distribute resources in your network
- Talk to others about HIV testing, care, and support

CONNECTICUT HIV PLANNING CONSORTIUM OUTREACH

Ending the HIV Epidemic



UPCOMING CHPC MEETINGS

Click here or scan below for more information



SCIENCE IN ACTION



Strengthening Prevention Through Testing, Treatment, and Education

Insights from Dr. Michael Virata, MD, FACP, FIDSP, CHPC Member

PREVENTION STRATEGIES AT A GLANCE

Strategy: Three-Site STI Testing

Why It Matters: Helps catch asymptomatic infections and avoid missed diagnoses

Strategy: DoxyPEP

Why It Matters: Adds protection for high-risk individuals, especially for syphilis and chlamydia

Strategy: Long-acting PrEP options

Why It Matters: Improves adherence and offers flexibility in prevention

Strategy: Provider education

Why It Matters: Builds trust and increases patient access to care

"Education, both for patients and providers, is key. It shifts prevention from a prescription to a conversation."

The approach to caring for people living with HIV and those at high risk for acquiring it is incredibly important. Emphasizing STI screening and providing education on prevention addresses a key factor in reducing HIV transmission. The relationship between STIs and HIV is well-documented, and ensuring that patients are tested regularly, informed about prevention, and have access to effective treatments can go a long way in reducing new cases.

Routine STI screening, especially when it includes three-site testing (genital, rectal, and oropharyngeal), is crucial in identifying asymptomatic infections that might otherwise go unnoticed. This proactive approach in primary care is vital in reducing rising STI rates and, in turn, lowering HIV transmission risk.

Expanding the Prevention Toolbox

The broader use of doxycycline as post-exposure prophylaxis (doxyPEP) adds an important tool to our HIV and STI prevention strategies. It provides an extra layer of protection, especially for people at higher risk for syphilis and chlamydia, both of which are known to increase susceptibility to HIV. Educating both clinicians and patients about doxyPEP's benefits could significantly reduce STI rates and prevent HIV among individuals engaging in higher-risk behaviors.

The introduction of long-acting agents like cabotegravir and lenacapavir further enhances prevention efforts. These treatments, especially when used as part of pre-exposure prophylaxis (PrEP), offer major advantages in terms of adherence and ease of use. Their potential, combined with other prevention strategies, could be transformative in efforts to end the HIV epidemic, offering patients more options and improving outcomes.

Education—both for patients and providers—remains a key part of this work. By creating awareness and fostering open dialogue about STI testing, prevention strategies, and new treatment options, we can help shift the approach to HIV care and prevention toward a more comprehensive and accessible model.

SPREAD THE WORD. BUILD COMMUNITY. SHARE CHPC.

YOUR VOICE MATTERS



Join The Connecticut HIV Planning Consortium (CHPC)

The CHPC meets on the third Wednesday of most months, gathering individuals from across our state to provide an opportunity for people to:

- ▶ Influence HIV Care and Prevention in Connecticut
- ▶ Be part of a diverse, supportive community
- ▶ Make a difference for those affected by HIV



VISIT CTHIVPLANNING.ORG
OR SCAN THE QR CODE
TO LEARN MORE

English Version - Front

RESOURCES IN CONNECTICUT



REGIONAL SUPPORT & CARE



The e2Linkage Map is designed to help locate Ryan White Providers throughout Connecticut, as well as prevention and STI resources to assist in finding services. Scan QR Code to learn more.



MEDICATION & INSURANCE SUPPORT



Connecticut AIDS Drug Assistance Program (CADAP) provides eligible low-income residents with essential medications for the treatment of HIV, related conditions, and other comorbidities, as well as health insurance assistance. Scan QR Code to learn more.



Find testing locations near you at gettested.cdc.gov. Scan QR Code to learn more.



STAY CONNECTED
#CHPCWednesday
#YourVoiceMattersCT
Scan QR Code to learn more.



English Version - Back

CHPC's outreach cards are a tool for **community connection**. They're designed to help spread awareness of CHPC's work, highlight statewide HIV resources, and invite people to get involved. Whether you're tabling at an event or adding to your clinic's display, these cards help put the mission in people's hands.

Want to distribute cards at your site?

Cards are available in **English and Spanish**, and work best when shared through:

- Community events and tabling
- Clinic or office displays
- Outreach folder or mailing inserts

To request a **bulk order**, email **David Reyes** - reyes@xsector.com

For digital versions visit the CHPC website at cthipvplanning.org

TU VOZ IMPORTA



Únete Al Consorcio De Planificación Del VIH De Connecticut (CHPC)

El CHPC se reúne el tercer miércoles de la mayoría de los meses y reúne a personas de todo el estado para brindar un espacio donde puedan:

- ▶ Influenciar la atención y prevención del VIH en Connecticut
- ▶ Ser parte de una comunidad diversa y solidaria
- ▶ Contribuir a mejorar la vida de las personas afectadas por el VIH



VISITA CTHIVPLANNING.ORG
O ESCANEA EL CÓDIGO
PARA MÁS INFORMACIÓN

Versión en Español - Frente

PROGRAMAS EN CONNECTICUT



APOYO Y ATENCIÓN REGIONAL



El Mapa de Enlaces e2 (e2Linkage Map) te ayuda a localizar proveedores del programa Ryan White en todo Connecticut, así como recursos de prevención y servicios para ETS (enfermedades de transmisión sexual). Escanea el código QR para más información.



APOYO PARA MEDICAMENTOS Y SEGURO MÉDICO



El Programa de Asistencia para Medicamentos contra el SIDA de Connecticut (CADAP) brinda medicamentos esenciales a residentes elegibles con bajos ingresos para el tratamiento del VIH, condiciones relacionadas y otras comorbilidades, además de apoyo con seguros médicos. Escanea el código QR para más información.



Encuentra sitios de pruebas cercanos en gettested.cdc.gov. Escanea el código QR para más información.



MANTENTE CONECTADO
#CHPCWednesday
#TuVozImportaCT
Escanea el código QR para más información.



Versión en Español - Atrás



We are pleased to announce on behalf of the CT Department of Public Health

Crimson Table Talk: Where every person has a seat at the table



Join us for future conversations



DATES:
20 NOV 2025



TIME:
10:30AM - 11:45PM

Feel free to forward this invite to your Ryan White colleagues. Have a seat. Be heard.
Crimson Table Talk is for you!

For questions, contact Africka Hinds, CT DPH at Africka.Hinds@ct.gov

PREVENTION POWER HOUR

HIV Prevention Feedback for the State of Connecticut Integrated HIV Prevention and Care Plan
01.13.2026 at 1 PM

Register Here

For questions, contact Susan Major, CT DPH at Susan.Major@ct.gov

WORD SEARCH

INSTRUCTIONS

Find all the words listed. They can appear in any direction (horizontal, vertical, diagonal).

Words may overlap or appear backwards.

- CHPC
- PACE
- Equity
- Prevention
- Advocacy
- Outreach
- Coalition
- Community
- Connecticut
- DPH
- Storytelling
- Campaign
- Engagement
- Youth
- Empower
- Allies
- HIV
- PrEP
- PEP
- Testing
- Diagnosis
- Treatment
- Viral Load
- Suppression
- Transmission
- Undetectable
- Condom
- Consent
- STI
- Safe
- Support
- Wellness
- Clinic
- Education

P S D P O Q T Y V M S S N P E P L V I H B S Z
Y A U P R U W U X X C T N A T N E M T A E R T
A T C P H E T C S I U O O A D H T U O Y M T Y
X R U E P Q V R A U P G N R V P E R P A P I C
G A E N K R X E E M P U M N Y I U I B Q O H A
N N C D D C E M N A P P C C E T G D K W W J C
I S H E I E O S E T C A O O O C E A C W E K O
T M T R Q A T M S D I H I R A N T L T V R O V
S I I W A U G E M I U O A G T L S I L O J Y D
E S H Y L B I N C U O C N I N Z I E C I R X A
T S F N L U C T O T N N A O J J U T N U N X W
S I C L I N I C Y S A I E T D P J A I T T G C
A O X Y E R D A A V I B T V I R A L L O A D P
F N Q I S Y C Z T O R S L Y W O A K F D N W H
E K O J E C O N D O M O W E X Q N I S T I A C
V S S S E N L L E W K E N G A G E M E N T K F



CONNECTICUT HIV
PLANNING CONSORTIUM
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NEWSLETTER COMMITTEE

Angel Ruiz
Reggie Knox
Jenny Bobadilla-Pincos
Danielle Warren-Dias
Carl Ferris
Dante Gennaro

Visit the CHPC website at
www.cthivplanning.org

The website has information about upcoming CHPC meetings, news and events, meeting documents, resources and partners, and membership applications.

