

July 26, 2001

Neal L. Cohen, M.D., Commissioner of Health
New York City Department of Health
125 Worth Street
New York, New York 10013

Dear Dr. Cohen:

We are writing on behalf of the New York City Communities of Color HIV/AIDS Coalition (NYCCOCHAC) to request a meeting regarding the \$5 million that NYCCOCHAC procured and City Council allocated this year for HIV/AIDS prevention and care services to address the growing AIDS cases in communities of color. The NYCCOCHAC Coalition is comprised of over 30 HIV/AIDS and social service organizations of color and people of color living with HIV and AIDS.

We have several concerns about the allocation of these hard-won and desperately needed dollars. In particular, we are disturbed by the possibility that should NYCDOH become the master contractor for this new \$5 million dollar HIV/AIDS Communities of Color Initiative these dollars will not be RFP'd as intended but will be used to enhance already existing contracts. This would not only be a violation of the entire intent of this initiative, but would also serve to exacerbate the existing disparities in funding that work against communities of color.

As Commissioner of the Department of Health, you are well aware of the ravaging effects AIDS continues to have on communities of color here in New York City. You also know that increasing rates of HIV infection in communities are not only alarming but threatens a whole new generation of men, women and children of color. Our belief is that if this money goes to organizations that fit the criteria outlined below, we too may begin to see a decline in HIV infection rates in communities of color that will parallel those in the white community.

To address this and other concerns, we are requesting that a meeting be convened as soon as possible between yourself and members of NYCCOCHAC. We also request that Maria Favuzzi, NYCDOH's Director of HIV Prevention Programs and JoAnn Hilger, NYCDOH's Director of Ryan White CARE Services be in attendance at this meeting.

Below we offer the following guidance to expedite the allocation process for the \$5 million Communities of Color HIV/AIDS Initiative and to ensure that the resources reach the organizations this initiative was intended to support. NYCCOCHAC recommends:

1. That the term "Communities of Color" always be inclusive of the following populations: Black, Latino/a, Asian and Pacific Islander, and Native American communities;
2. That to be eligible for funding an organization must meet all of the following criteria:
 - a) Board of Directors – minimum of 51% people of color
 - b) Key Management Staff – minimum of 51% people of color
 - c) Client Population -- minimum of 51% people of color
 - d) Organizations must be indigenous to the community, providing culturally and linguistically competent services to the community.

This criteria is modeled after the federal Congressional Black Caucus (CBC) and the Centers for Disease Control (CDC) language for the allocation of discretionary HIV/AIDS funding streams to communities of color-run organizations. Public health officials and researchers have long recognized that organizations staffed and run by affected populations most effectively deliver AIDS prevention, education and supportive health care services. Enhanced investment in community of color-run organizations delivering HIV/AIDS services will increase the effectiveness of New York's fight against the AIDS epidemic in communities of color. If we fail to make such investments, the dramatic racial disparities in AIDS-related health indicators will only grow worse.

3. We recommend that clear directions be given to contract administrator regarding the content of the categories prioritized. The \$5 million should be equally divided between prevention and services (\$2.5 million for prevention, \$2.5 million for services) in order to care for the growing needs of people of color living with HIV and AIDS and to prevent future transmission. The following distribution represents the community consensus regarding the fairest and most effective use of these resources:

- **Funding for Prevention (\$2.5 Million)**

Prevention dollars to be distributed as follows

32% of \$2.5 million:

\$800,000 for Syringe Exchange

17% for each of the remaining categories:

\$425,000 for Gay Men of Color/Men Who Have Sex with Men (MSMs) of Color

\$425,000 for Women of Color

\$425,000 for Youth of Color

\$425,000 for Immigrants (including but not limited to immigrants who are not DASIS eligible)

- **Funding for Services (\$2.5 Million)**

Service dollars to be directed in the following areas:

Emergency Housing and Transitional Services -- \$833,333.33

This category would include: rental start-up and short-term rental assistance and should be used to augment the allocations to the Sustainable Living Fund.

Support Services -- \$833,333.33

This category would include: transgender services, harm reduction case management, food and nutrition services, peer counseling, transportation, mental health services, and treatment adherence programs.

Advocacy Services -- \$833,333.33

This category would include: custody planning, legal services, peer advocacy programs, and public benefits advocacy programs.

4. That the applications and proposals submitted to contract administrator for the \$5 million initiative be reviewed by panels comprised of a significant percentage of men and women of color living with HIV and AIDS with some experience in proposal review. In addition, a percentage of this panel should be comprised of consumers of HIV/AIDS services.
5. That the RFP released by the contract administrator take into consideration the relative size and capacity of the organizations submitting proposals. Due to the scarcity of development resources, many smaller, community-based organizations (CBOs) providing quality, culturally and linguistically competent services may be at a disadvantage in the competition for funding. The reviewers of the RFP should recognize that this disadvantage does not reflect the programmatic capacity or quality of such organizations.

6. That the contract administrator implement a simplified RFP process modeled after the Pre-Application for New Continuum of Care Programs RFP created by the NYC Coalition on the Continuum of Care and the NYC Department of Homeless Services. A copy of the Pre-Application is enclosed with this mailing.
7. That there should be a New York State funding match to pay the contract administrator for the administration of the contract. This ensures that the full \$5 million dollars can be used to provide crucial services to communities of color that have for years bore the brunt of funding inequities.

We look forward to having this discussion with you to ensure that this \$5 million initiative reaches those organizations of color that desperately need the wherewithal to provide culturally competent and effective HIV/AIDS prevention and care services within their communities.

We will be calling your office to arrange for a meeting in the near future. If you require further information, please contact: terri smith-caronia (212) 966-0466, ext 296, Hilda Melore (718) 266-4206, Soraya Elcock 212-803-2890, or Dennis DeLeon 212-675-3288, ext. 202.

Sincerely,

The New York City Communities of Color HIV/AIDS Coalition

CC Errol Chin-Loy, Citywide Coordinator of AIDS Policy, Mayor's Office of AIDS Policy Coordination
Marjorie Hill, Associate Commissioner of HIV Prevention Services, NYCDOH
Victor Robles, Majority Whip, New York City Council and Chairperson, NYCC Health Committee