GLOSSARY of TERMS - Portland TGA Ryan White programs

Accountability: The framework to determine how a group and its members will be responsible to itself and the community as it carries out its mission.

ADA (Americans with Disabilities Act): The ADA is a civil rights law passed by Congress in July of 1990 to protect people with disabilities from discrimination in public and private services and accommodations. Since HIV disease is considered a disability, the ADA protections apply to persons living with HIV/AIDS.

ADAP (AIDS Drug Assistance Program): A program authorized and primarily funded under Part B of the CARE Act that is administered by State agencies for providing FDA-approved medications to low-income individuals with HIV disease who have limited or no coverage from private insurance or Medicaid. Oregon's ADAP is referred to as CAREAssist and provides medications through the mechanism of providing health insurance.

Ad hoc: For the specific purpose or situation at hand. (For example, an ad hoc committee.)

Administrative or Fiscal Agent: Organization (e.g., public health department, community-based organization) that functions in political jurisdictions within Part A EMAs and TGAs to assist the grantee in carrying out administrative activities (disbursing program funds, developing reimbursement and accounting systems, developing Requests for Proposals (RFPs), monitoring contracts, etc.) Not all grantees use a separate administrative or fiscal agent.

 Multnomah County Health Department is the administrative agent for the Portland TGA, and the Chair of Multnomah County's Board of Commissioners is the Chief Executive Officer.

Advocacy: Representing and supporting the needs of a particular community. This can involve education of health & social service providers, local policy makers, elected officials and the media.

AETC (AIDS Education and Training Center): A network of 15 regional centers that conduct targeted, multidisciplinary HIV education and training programs for health care providers. The mission of these centers is to increase the number of health care providers who are educated and motivated to counsel, diagnose, treat, and manage individuals with HIV infection and to assist in the prevention of high-risk behaviors that may lead to infection. AETCs are administered by the Health Resources and Services Administration (HRSA).

AIDS (Acquired Immunodeficiency Syndrome): The last stage of the disease caused by the human immunodeficiency virus (HIV).

AIDS Clinical Trials Group (ACTG): A network of medical centers around the country in which federally-funded clinical trials are conducted to test the safety and efficacy of experimental treatments for AIDS and HIV infection. These studies are funded by the National Institute of Allergy and Infectious Diseases (NIAID).

AIDS Data: Presents information on people who are living with AIDS and those who have died from AIDS-related illnesses.

AMFAR (American Foundation for AIDS Research): Non-profit organization that supports AIDS Research, AIDS prevention, public information, and advocacy of AIDS-related public policy.

Antiretroviral: A substance that fights against a retrovirus, such as HIV. (See Retrovirus)

ASO (AIDS Service Organization): An organization that provides medical or support services primarily or exclusively to populations infected with or affected by HIV disease.

Average: A way of describing the typical value or central tendency among a group of numbers, such as average age or average income; three commonly used types of averages are **mean, median**, and **mode** (See each in the Glossary).

Bar Chart or Bar Graph: A visual way to show and compare scores or values for different categories of variables; for example, a bar chart might be used to show the number of reported AIDS cases who are from each major racial/ethnic group; the taller the bar, the larger the number of AIDS cases.

BHRD (Bureau of Health Resources Development): Bureau within the Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, which is responsible for administering the CARE Act's Part A, Part B, and SPNS, among other programs.

Biopsychosocial: A comprehensive picture of a person containing information about his/her physical (bio), psychological and social health.

CADR: Care Act Data Report The Ryan White CARE Act Data Report (CADR) is the annual reporting instrument that must be completed by agencies and organizations receiving funds to describe: 1) characteristics of their organization; 2) the number and characteristics of clients they served; 3) the types of services provided; 4) the number of clients receiving these services; and 5) the number of client visits by type of service.

CAEAR: The Communities Advocating Emergency AIDS Relief (CAEAR) Coalition represents 420 grantees under Part A and Part C of the Ryan White CARE Act, including the 56 major metropolitan areas most adversely affected by the HIV/AIDS epidemic, as well as providers and consumers of CARE Act-funded services. The CAEAR Coalition also advocates for adequate funding for the AIDS Drug Assistance Program (ADAP) in Part B of the CARE Act.

Calendar Year: January 1 through December 31, most commonly used to clarify the period for reports or data.

CAP: Cascade AIDS Project, an AIDS Service Organization.

Capacity Building: Developing the abilities and knowledge of individuals or groups so that they may fully participate in a process or organization.

CAREAssist: see ADAP

CAREWare: A scalable software application for managing and monitoring HIV care, developed by HRSA HIV AIDS bureau

CARE Act (Ryan White Comprehensive AIDS Resource Emergency Act): The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act is Federal legislation that addresses unmet health needs of people living with HIV/AIDS by funding primary health care and support services that enhance access to and retention in care. The CARE Act is administered by the Health Resources and Services Administration (HRSA).

Carryover: Funding which is unspent from one year, requested for use in a following year.

CBO (Community-Based Organization): An organization that provides services to a locally defined population, which may include populations infected with or affected by HIV disease.

CCR5: Chemokine receptor 5 (CCR5) is a protein on the surface of some immune system cells. It is one of two co-receptors that HIV can use along with the CD4 receptor to bind to and enter host cells (the other co-receptor is CXCR4).

See Also: CD4 Receptor Co-Receptor CXCR4

CD4 or CD4+ Cells: Also known as helper T cell or CD4 lymphocyte. A type of infection-fighting white blood cell that carries the CD4 receptor on its surface. CD4 cells coordinate the immune response, signaling other cells in the immune system to perform their special functions. The number of CD4 cells in a sample of blood is an indicator of the health of the immune system. HIV infects and kills CD4 cells, leading to a weakened immune system.

See Also: CD4 Cell Count CD4 Receptor

CD4 Cell Count: A measurement of the number of CD4 cells in a sample of blood. The CD4 count is one of the most useful indicators of the health of the immune system and the progression of HIV/AIDS. A CD4 cell count is used by health care providers to determine when to begin, interrupt, or halt anti-HIV therapy; when to give preventive treatment for opportunistic infections; and to measure response to treatment. A normal CD4 cell count is between 500 and 1,400 cells/mm3 of blood, but an individual's CD4 count can vary. In HIV-infected individuals, a CD4 count at or below 200 cells/mm3 is considered an AIDS-defining condition. See Also: CD4 Cell

CD4 Receptor: A specific molecule present on the surface of a CD4 cell. HIV recognizes and binds to a CD4 receptor and a co-receptor to gain entry into a host cell.

See Also: CD4 Cell Co-Receptor

CDC (Centers for Disease Control and Prevention): The Federal agency within the U.S. Department of Health and Human Services (DHHS) that administers HIV/AIDS prevention programs, including the HIV Prevention Community Planning process, among other programs; responsible for monitoring and reporting of infectious diseases; administers AIDS surveillance grants and publishes epidemiological reports such as the HIV/AIDS Surveillance Report.

CEO (Chief Elected Official): The official recipient of Part A CARE Act funds within the EMA\TGA, usually the mayor or chair of the county board of supervisors. The CEO is ultimately responsible for administering all aspects of the CARE Act in the EMA\TGA and ensuring that all legal requirements are met.

Children's Health Insurance Program (CHIP): The Federal program that gives money to States to expand access to health insurance to children. Also called the State Children's Health Insurance Program (S-CHIP).

Chronic Care Model (CCM): First developed by E.H. Wagner in 1998, the Chronic Care Model (CCM) identifies the essential elements of a health care system that encourage high-quality chronic disease care. These elements are the community, the health system, self-management support, delivery system design, decision support and clinical information systems. Evidence-based change

concepts under each element, in combination, foster productive interactions between informed patients who take an active part in their care and providers with resources and expertise.

CLHO/HIV (Conference of Local Health Officials/HIV): Subcommittee of the Oregon Conference of Local Health Officials (CLHO), a state-legislated decision-making body. Members, who are representatives of local health departments, make recommendations to CLHO regarding public health policy and issues related to HIV.

Client Acuity: A measure of a client's severity of need. Acuity takes into account a broad spectrum of client needs, from basic necessities and life skills, to medical adherence. Acuity can be measured repeatedly over the course of service provision, and may act as a marker to determine whether services are having an impact on a client's health and life.

Closed-Ended Questions: Questions in an interview or survey format that provide a limited set of predefined alternative responses; for example, a survey might ask PLWH respondents if they are receiving case management services, and if they say yes, ask "About how often have you been in contact with your case manager for services during the past six months, either in person or by telephone?" and provide the following response options: Once a week or more, 2-3 times a month, about once a month, 3-5 times, 1-2 times, not at all.

Coding: The process of "translating" data from one format to another, usually so the information can be entered into a computer to be tabulated and analyzed; often, coding involves assigning numbers to all the possible responses to a question, such as Yes = 1, No = 2, Not Sure = 3, No Response = 0.

Co-morbidity: A disease or condition, such as mental illness or substance abuse, co-existing with HIV disease.

Community-Based Dental Partnership Program: The CARE Act program that funds dental schools, postdoctoral dental education programs, and dental hygiene education programs to partner with community-based dentists to provide oral health services to PLWH in rural and urban unserved and underserved areas, and to train additional numbers of dental providers to manage the oral health care of PLWH.

Comprehensive Planning: The process of determining the organization and delivery of HIV services; strategy used by a planning council, consortium or coalition to help make better decisions about services and to develop and maintain a continuum of care for PLWHs. A Comprehensive Plan builds on epidemiological and needs assessment information to set long-term goals to guide the community's system of care.

Confidentiality: The process of keeping private information private. Information given by a client to a service provider will be protected and will not be released to a third party without the explicit written permission of the client or his/her representative. Information may be released only in the following circumstances: (1) When a written release of information is signed by the client; (2) When there is a clear medical emergency; (3) When there is a clear and imminent danger to the client, case manager or others; (4) Where there is possible child or elder abuse; and (5) When ordered by a court of law.

Conflict of Interest: A conflict between the private interests and the public obligations of a person in an official position. It can be defined as an actual or perceived interest by the member in an action which results - or has the appearance of resulting - in personal, organizational, or professional gain.

Consortium (plural=consortia): A regional planning entity established by many state grantees under Part B of the CARE Act to plan and sometimes administer Part B services; an association of

public and nonprofit health care and support service providers that develops and delivers services for PLWHs. See Oregon HIV Care Coalition.

Contingency: a possible but unlikely or unplanned event; a possibility that must be prepared for; a future emergency

Continuum of Care: Coordinated delivery system, encompassing a comprehensive range of services needed by individuals or families with HIV infection to meet their health care and psychosocial service needs throughout all stages of illness.

Contractor: An organization/agency/individual who enters into a binding agreement which is legally enforceable, to provide certain goods or services.

Co-Receptor: A protein on the surface of a cell that serves as a second binding site for a virus or other molecule. Although the CD4 protein is HIV's primary receptor, the virus must also bind either the CCR5 or CXCR4 co-receptor to get into a host cell. See Also: CCR5

CD4 Receptor CXCR4

Cost Effective: Economical and beneficial in terms of the goods or services received or the outcomes achieved for the money spent.

Council Year: The council year is defined as September 1 through August 31.

Criteria: Definition of specific, measurable outcomes expected from a standard.

Cultural Competency: Refers to whether service providers and others can accommodate language, values, beliefs and behaviors of individuals and groups they serve.

Culturally Defined Communities: "Culturally Defined Communities" is a term used in current comprehensive planning processes to include groups of people whose cultural status may be determined by birth, choice, or other societal factors. Culturally defined communities often express specific norms, values, language, and customs unique to them. Members of culturally defined communities may face prejudice, discrimination, or marginalization within the prevailing social structure. The term includes (but is not limited to) women, sexual minorities, Native Americans, African Americans, Asian Americans, Pacific Islanders, Latinos, homeless people, disabled persons, youth, refugees, undocumented immigrants, and residents of rural areas.

CXCR4: Chemokine receptor 4 (CXCR4, also known as fusin) is a protein on the surface of some immune system cells. It is one of two co-receptors that HIV can use along with the CD4 receptor to bind to and enter host cells (the other co-receptor is CCR5). See Also: CCR5

CD4 Receptor Co-Receptor

Cytomegalovirus (CMV): A herpesvirus that can cause infections, including pneumonia (infection of the lungs), gastroenteritis (infection of the gastrointestinal tract), encephalitis (inflammation of the brain), or retinitis (infection of the eye), in immunosuppressed people. Although CMV can infect most organs of the body, HIV-infected people are most susceptible to CMV retinitis.

See Also: Cytomegalovirus Retinitis Herpesviruses **Cytomegalovirus Retinitis:** An infectious eye disease caused by cytomegalovirus (CMV). People with CMV retinitis can lose their vision, and CMV retinitis is the most common cause of blindness among people infected with HIV. See Also: Cytomegalovirus

Data: Factual information that is used for a particular purpose. Data analysis is a careful, rigorous study of data; usually involves studying various elements of information and their relationships.

Data Analysis: Careful, rigorous study of data; usually involves studying various elements of information and their relationships.

Decimal Places: Number of digits to the right of the decimal point, which separates numbers with a value greater than one from numbers with a value of less than one; the more numbers or decimal places used, the more precise the number; for example, 34.03 has two decimal places.

Demographics: The characteristics of human populations and population segments (e.g. race/ethnicity, age, gender, geographic location, etc.)

Department of Health and Human Services (HHS): The part of the Federal government that is responsible for health care and other issues. The head of the Department is the Secretary, who is a member of the President's cabinet.

Department of Housing and Urban Development (HUD): The part of the Federal government that is responsible for housing issues. HUD administers the Housing Opportunities for People With AIDS (HOPWA) program.

Efficacy: Power or capacity to produce a desired effect; effectiveness. If a program has efficacy, it has been successful in achieving what it was intended to do.

Eligible Services: Care-related services that are allowable for funding under the CARE Act, such as medical care and case management.

Eligible Metropolitan Area (EMA): A geographic area eligible to receive Part A Ryan White Program funding because it is disproportionately affected by the AIDS epidemic. To be an eligible EMA, an area must have reported at least 2,000 AIDS cases in the most recent 5 years and have a population of at least 50,000. Some EMAs include just one city, other EMAs are composed of several cities and/or counties; and some EMAs extend over more than one state. With the Ryan White HIV/AIDS Treatment Modernization Act of 2006 several EMAs were redefined as Transitional Grant Areas (TGAs) When the first Part A grants were awarded in FY 1991, there were 16 EMAs. Today, 22 EMAs and 34 TGAs receive funding.

EMO: Ecumenical Ministries of Oregon

Enzyme-Linked Immunosorbent Assay (ELISA): The most common test used to detect the presence of HIV antibodies in the blood, which are indicative of ongoing HIV infection. A positive ELISA test result must be confirmed by another test called a Western Blot.

Epidemic: The spread of an infection disease through a population of geographic area.

Epidemiologic Profile: A description of the current status, distribution, and impact of an infectious disease or other health-related condition in a specified geographic area.

Epidemiology: The branch of medicine and public health that deals with the study of factors associated with the causes, distribution, and control of disease (e.g. HIV, tuberculosis) in populations. Epidemiologists' data shows which populations, age groups, ethnic groups, etc. are affected by HIV in a defined area.

Evidence-Based: In planning, based on evidence that is collected from scientific data, such as reporting of AIDS cases to health departments, and needs assessments conducted in a scientific manner.

Evaluation of Administrative Mechanism: The process of evaluating how efficiently providers are selected and paid and how well their contracts are monitored.

Exposure Category or Transmission Category: In describing HIV/AIDS cases, how an individual may have been exposed to HIV, such as injecting drug use, men who have sex with men, and heterosexual contact.

Financial Status Report (Form 269): A report that is required to be submitted within 90 days after the end of the budget period that serves as documentation of the financial status of grants according to the official accounting records of the grantee organization.

Fiscal Year: A twelve-month period set up for accounting purposes; for example the Part A federal (HRSA grant) grant year runs from March 1 though February 28.

FDA (Food and Drug Administration): The public health service agency responsible for ensuring the safety and effectiveness of drugs, biologics, vaccines, and medical devices used in the diagnosis, treatment, and prevention of HIV disease. The FDA also works with the blood-banking industry to safeguard the nation's blood supply.

Focus Group: An open-ended discussion and interview process to determine attitudes and opinions and to test new ideas among a small number of people who share common knowledge of the subject being discussed.

Formula Grant Application: The application used by EMAs/TGAs and states each year to request an amount of CARE Act funding which is determined by a formula based on the number of reported AIDS cases in their location and other factors. The application includes guidance from HRSA on program requirements and expectations.

Forum: A meeting or other outlet that provides an opportunity to share ideas and concerns on a particular topic.

Frequency Distribution: A tally of the number of times each score or response occurs in a group of scores or responses; for example, if 20 women with HIV provided information about how they were infected with the virus, the frequency distribution might be 8 = injection drug use, 5 = heterosexual contact with an injection drug user, 3 = other heterosexual contact, 1 = blood transfusion, and 3 = don't know.

Generalizability: The extent to which findings or conclusions from a sample can be assumed to be true of the entire population from which the sample was drawn; findings can be generalized only when the sampling procedure and the data meet certain methodological standards.

Genotypic Assay: A test which analyzes a sample of the HIV virus from the patient's blood to identify actual mutations in the virus that are associated with resistance to specific drugs.

Grandfathered: (Grandfather clause) a clause creating an exemption based on circumstances previously existing

Grant: The money received from a funding agency for a specific program or purpose. Applying for a grant is usually a competitive process that involves detailed explanation of why there is a need for the money and how it will be spent.

Grant Year: The Ryan White Part A grant year runs March 1 through end of February.

Grantee: The recipient of CARE Act funds responsible for administering the funds.

Grievance: Any complaint or dispute about the priority that reached the stage where the affected party seeks a formal approach to its resolution.

Grievance Procedures: A set of rules that allow applicants and recipients of CARE Act funding to dispute grant awards or other aspects of the application process if they were denied a grant or if they believe that they were treated unfairly. For planning councils, grievance procedures must cover the process of establishing priorities (including any language regarding how best to meet the established priorities), allocating funds to those priorities, and any subsequent process to change the priorities or allocations.

Group Coverage: The most common type of health insurance coverage for persons with private insurance. Group coverage refers to insurance policies that cover a specific group of people. Groups often are made up of all employees of a company or members of a labor union. The laws and rules that control how health insurance is sold and administered are different for group coverage and individual coverage.

Guidance: specific instructions to the Grantee re geographic, demographic coverage or specific focus of the service. The guidance allows the Council to shape the care system in specific ways.

HAART (Highly Active Antiretroviral Therapy): Aggressive anti-HIV treatment usually including a combination of protease and reverse transcriptase inhibitors whose purpose is to reduce viral load to undetectable levels.

Harm Reduction: Behavior changes that reduce the chance of hurting oneself or another person; making changes in action to improve health and well being.

HCV (Hepatitis C Virus): The virus that causes hepatitis C, an inflammation of the liver that can lead to liver damage and liver cancer. HCV is primarily spread through contact with the blood of an infected person. There is no vaccine for HCV, and the only current treatment for hepatitis C is a combination of the drugs peginterferon and ribavirin.

Health Care Financing Administration (HCFA): The DHHS agency that is responsible for administering the Medicaid, Medicare, and Child Health Insurance Programs.

Health Resources and Services Administration (HRSA): The agency of the U.S. Department of Health and Human Services that is responsible for administering the CARE Act.

Herpesviruses: A family of viruses containing several individual members, including herpes simplex viruses 1 and 2 (HSV-1 and -2), cytomegalovirus (CMV), varicella zoster virus (VZV), Epstein-Barr virus (EBV), and Kaposi's sarcoma herpesvirus (KSHV or HHV-8). Each of these viruses can cause disease in humans.

HIV (Human Immunodeficiency Virus): The virus that damages the immune system and causes AIDS.

HIV Care Consortium: (Oregon HIV Care Coalition)a statewide planning body consisting of community volunteers, health professionals and consumers of services. The coalition provides recommendations and input to the HIV Care & Treatment Program's planning and delivery of services to Oregonians living with HIV/AIDS. OHCC has four committees that meet regularly between general meetings: Housing, CAREAssist (Oregon's AIDS Drug Assistance Program), Case Management and Quality Management. The coalition is administered by the Office of Health Services (State of Oregon). See *Consortium.*

HIV Data: Presents data (reported or estimated) on HIV infected person who have not developed AIDS. HIV case surveillance better describes populations more recently diagnosed with HIV and is a more reliable indicator of the current and future status of the epidemic.

HIV Disease: The entire course of the disease, including initial or acute infection, asymptomatic and symptomatic stages, and AIDS.

HIV Services Planning Council: See Planning Council.

HIV/AIDS Bureau (HAB): The bureau within the Health Resources and Service Administration (HRSA) of the U.S. Department of Health & Human Services that is responsible for administering Ryan White CARE Act. HAB is one of many bureaus within HRSA..

HIV/AIDS Dental Reimbursement Program: The CARE Act program that assists accredited dental schools, post-doctoral dental education programs, and dental hygiene education programs with uncompensated costs incurred in providing oral health care to PLWH.

HIV/EIS (HIV Early Intervention Services): Applied in the outpatient setting, HIV/EIS assures a continuum of care which includes: (1) identifying persons at risk of HIV infection and offering to them counseling, testing, and referral services, and (2) providing lifelong comprehensive primary care for those living with HIV/AIDS.

Hold Harmless: a provision which limits a potential loss in an EMA's/TGA's formula award to a specific percentage of the amount awarded in the previous year.

Home- and Community-Based Care: A category of eligible services that States may fund under Part B of the CARE Act.

HOPWA (Housing Opportunities for People with AIDS): A program administered by the U.S. Department of Housing and Urban Development (HUD) which provides funding to support housing for PLWHs and their families.

IDU/IVDU: Injection drug user; intravenous drug user; term used to refer to a people who inject drugs (typically illicit) directly into their bloodstreams using a needle and syringe.

IGA (Intergovernmental Agreement): A written agreement between a governmental agencies to govern the use of funds across jurisdictions and agencies.

Incidence: The number of new cases of a disease that occur during a specific time period.

Incidence Rate: The number of cases of a disease per population per specified time period often expressed per 100,000 population (AIDS rates are often expressed this way).

Indigenous Organization: A service organization generally recognized and accepted as being an organization located in and/or primarily serving members of a distinct cultural community or group (e.g. African American, American Indian/Alaskan Native, Asian/Pacific Islander, Hispanic, Gay).

Individual Coverage: The type of health insurance policy that an individual or family purchased directly from an insurance company. Because it often costs more money or has more limitations, individual coverage is often purchased by people who are unable to qualify for group coverage.

Insurance: Public or private health care coverage where a purchaser (such as an employer, a government, or an individual) buys coverage for future health care needs from an insurance company. By charging monthly payments called premiums, the insurer agrees to provide a specific set of covered services whenever a health care provider decides that the individual needs them.

Key Informant: Key Informants are informed community leaders who are actively involved in and understand the issues related to services and care for those infected with the HIV virus. Their opinions and perceptions are helpful in the decision-making process.

LCHD: Local County Health Department

Lead Agency: The agency responsible for contract administration for Part B funds within a consortium region; also called a fiscal agent. An incorporated consortium sometimes serves as the lead agency.

MAC (Mycobacterium Avian Complex): An infection caused by two bacteria found in soil and dust particles. The infection can be limited to a specific area or can spread throughout the body. This life-threatening disease is extremely rare in people who are not infected with HIV, and MAC is considered an AIDS-defining condition in HIV-infected people.

Maintenance of Effort: The Part A and Part B requirement to maintain expenditures for HIV-related services/activities at a level equal to or exceeding that of the preceding year.

Managed Care: A type of health insurance program that is intended to both provide people with better health care and save money by eliminating wasted health care expenditures.

MCHD (Multnomah County Health Department): MCHD is the TGA's administrative agent, also called "grantee".

Mean: Arithmetic average, calculated by adding up all the values or the responses to a particular question and dividing by the number of cases; for example, to determine the mean age of 12 children in a pediatric AIDS program, add up their individual ages and divide by 12.

Measurable Objective (or Outcome): An intended goal that can be proved or evaluated.

Median: A type of average which calculates the central value, the one that falls in the middle of all the values when they are listed in order from highest to lowest; for example, if the annual incomes of seven families were \$37,231, \$35,554, \$30,896, \$27,432, \$24,334, \$19,766, and \$18,564, the median would be \$27,432.

Medicaid: A public health insurance program that is jointly operated by the Federal government and the States. Medicaid provides health insurance coverage to roughly 40 million low-income people. Medicaid is the single largest source of health care coverage for PLWH.

Medical Case Management: a range of client-centered services that link clients with health care, psychosocial, and other services. The coordination and follow-up of medical treatments is a component of medical case management. These services ensure timely and coordinated access to medically appropriate levels of health and support services and continuity of care, through ongoing assessment of the client's and other key family members' needs and personal support systems. Medical case management includes the provision of treatment adherence counseling to ensure readiness for, and adherence to, complex HIV/AIDS treatments. Key activities include (1) initial assessment of service needs; (2) development of a comprehensive, individualized service plan; (3) coordination of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic re-evaluation and adaptation of the plan as necessary over the life of the client. It includes client-specific advocacy and/or review of utilization of services. This includes all types of case management including face-to-face, phone contact, and any other forms of communication.

Medicare: A public health insurance program of the Federal government that provides health care coverage to retired workers (people over age 65) and working people who become disabled. Medicare is the second largest source of health care coverage for PLWH.

Membership Category: 15 membership categories that must be represented on the planning council. They include:

- A. Health care providers, including federally qualified health centers;
- B. Community-based organizations serving affected populations and AIDS service organizations;
- C. Social service providers, including providers of housing and homeless services;
- D. Mental health and substance abuse providers [considered two separate categories];
- E. Local public health agencies;
- F. Hospital planning agencies or health care planning agencies;
- G. Affected communities, including people with HIV disease and historically underserved groups and subpopulations;
- H. Non-elected community leaders;
- I. State government (including the State Medicaid agency and the agency administering the program under part B) [Title II] [considered two separate categories];
- J. Grantees under subpart II of part C [Title III];
- K. Grantees under section 2671 [Title IV], or, if none are operating in the area, representatives of organizations with a history of serving children, youth, women, and families living with HIV and operating in the area;
- L. Grantees of other Federal HIV programs, including but not limited to providers of HIV prevention services; and
- M. Representatives of individuals who formerly were federal, state, or local prisoners, were released from the custody of the penal system during the preceding 3 years, and had HIV disease as of the date on which the individuals were so released.

Memorandum of Understanding (MOU): Written agreement between various parties about their roles and responsibilities.

Metropolitan Statistical Area (MSA): includes at least: one city with 50,000 or more inhabitants, or a Census Bureau-defined urbanized area (of at least 50,000 inhabitants) and a total metropolitan population of at least 100,000 (75,000 in New England). Additional "outlying counties" are included in the MSA if they meet specified requirements of commuting to the central counties and other selected requirements of metropolitan character. In New England, the MSA's are defined in terms of cities and towns rather than counties.

Minority AIDS Initiative (MAI): A national HHS initiative that provides special resources to reduce the spread of HIV/AIDS and improve health outcomes for people living with HIV disease within communities of color. Enacted to address the disproportionate impact of the disease in such communities. Formerly referred to as the Congressional Black Caucus Initiative because of that body's leadership in its development.

Minority Provider: A service organization in which a majority of Board members and staff are minorities based on national population trends and definitions (e.g. African American, American Indian/Alaskan Native, Asian/Pacific Islander, Hispanic).

Mode: A type of average which identifies the most frequently occurring value; for example, suppose a prevention project included 13 youth of the following ages: 16, 16, 15, 14, 14, 14, 14, 13, 13, 12, 12, 11, 10; the mode would be 14, which occurs four times.

Name-Based Reporting: HIV surveillance technique where names of HIV-positive persons are reported to State surveillance. Oregon adopted name-based reporting for HIV in 2006.

NASTAD (National Alliance of State and Territorial AIDS Directors): Founded in 1992, NASTAD represents the nation's chief state health agency staff who have programmatic responsibility for administering HIV/AIDS healthcare, prevention, education, and supportive service programs funded by state and federal governments.

Needs Assessment: A process of collecting information about the needs of persons living with HIV (PLWH) availability of services to meet those needs, and determining what gaps in care exist.

NIH (National Institutes of Health): The federal agency that includes 24 separate research institutes and centers, among them the National Institute of Allergy and Infectious Diseases, National Institute of Mental Health, and National Institute of Drug Abuse. Within the Office of the NIH Director is the Office of AIDS Research, which is responsible for planning, coordinating, evaluating, and funding all NIH AIDS research.

Notice of Grant Award (NGA): Each applicant that submits a successful application receives a written notification in the form of an NGA from HRSA. This document specifies detailed information unique to each grant funded by HRSA.

NNRTI (Non-Nucleoside Reverse Transcriptase Inhibitor): A class of antiretroviral agents (e.g., delavirdine, nevirapine). NNRTIs stop HIV production by binding directly onto an enzyme (reverse transcriptase) in a CD4+ cell and preventing the conversion of the HIV virus' RNA to DNA.

NRTI (Nucleoside Reverse Transcriptase Inhibitor), also called Nucleoside Analog: The first effective class of antiviral durgs (e.g., AZT, ddi, ddC, d4T). NRTIs act by incorporating themselved

into the HIV DNA, thereby stopping the building process. The resulting HIV DNA is incomplete and unable to create new virus.

OCHA: Oregon Council for Hispanic Advancement.

OHD (Oregon Health Division): A division of the State of Oregon's Department of Human Resources – this division is now called **PHD (Public Health Division)**, and is the grantee for Part B funds

OHP (Oregon Health Plan): Oregon's Medicaid Program: A federal- and state-funded program that helps cover the cost of health insurance for low-income people.

OHSU: Oregon Health and Sciences University.

OMAP (Office of Medical Assistance Programs): This office is now called **DMAP (Division of Medical Assistance Programs).** Oregon agency that administers the Oregon Health Plan, among other programs.

OMB (Office of Management and Budget): The office within the executive branch of the federal government which prepares the President's annual budget, develops the federal fiscal program, oversees administration of the budget, and reviews government regulations.

OMIP (Oregon Medical Insurance Pool): Health Insurance coverage for high-risk people who can't qualify for private insurance.

Open-Ended Questions: Questions in an interview or survey format that allow those responding to answer as they choose, rather than having to select one of a limited set of predefined alternative responses.

Opportunistic Infection (OI): An infection or cancer that occurs in persons with weak immune systems due to AIDS, cancer, or immunosuppressive drugs such as corticosteroids or chemotherapy. Karposi's Sarcoma (KS), pneumocystis pneumonia (PCP), toxoplasmosis, and cytomegalovirus are all examples of opportunistic infections.

Oregon HIV Care Coalition: A state-wide planning body staffed by the Oregon Health Division. The Coalition advises the Part B grantee on the development and implementation of the state-wide HIV Continuum of Care.

Outcome Evaluation: Evidence of whether an intervention has resulted in the intended effects.

Overrepresentation/Underrepresentation: Terms often used to indicate that a particular subpopulation makes up a larger proportion- or a smaller proportion- of a particular group than would be expected, given its representation in the total population; for example, Hispanics and African American are both overrepresented among AIDS cases, compared to their percentage in the U.S. population, while Asians/Pacific Islanders are underrepresented.

Oversampling: A procedure in stratified random sampling in which a larger number of individuals from a particular group (or stratum) are selected than would be expected given their representation in the total population being sampled; this is done in order to have enough subjects to permit separate tabulation and analysis of that group; for example, minorities are often oversampled to permit separate analysis of data by racial/ethnic group as well as comparisons among racial/ethnic groups.

Parity: Equality, as in amount or status.

Part F: The part of the CARE Act that funds AIDS Education and Training Centers (AETC), Special Projects of National Significance (SPNS) and the HIV/AIDS Dental Reimbursement Program.

Participatory Planning: The process of identifying needs and making decisions through the broadbased involvement of a wide range of viewpoints, wherein differences in background, perspective and experience are essential and valued.

Payer of Last Resort: A term for the CARE Act which indicates that CARE Act funds only can be used to pay for health care services for People with no other source of care or coverage. Any type of insurance coverage would be required to pay for all eligible services before CARE Act funds could be used.

PDES (Program Design and Evaluation Services): a joint State and Country program that provides program planning, evaluation and data analysis services.

Percent: Literally, per hundred; a proportion of the whole, where the whole is 100; percent is calculated by dividing the part of interest by the whole, and then multiplying by 100; for example if you want to know what percent of recently reported AIDS cases in women, take the number of women AIDS cases (the part of interest), divide by the number of total AIDS cases (the whole), and multiply by 100; if your community has a total of 70 recently reported AIDS cases and 14 are women, divide 14 by 70 (=.2) and multiply by 100, and you get 20%.

Percentage Point: One one-hundredth; term used to describe numerical differences between two percents without comparing relative size; for example, if 16% of AIDS cases are Hispanic and 32% are African American, the difference is 16 percentage points (32-16).

Phenotypic Assay: A procedure whereby a sample DNA of a patient's HIV is tested against various antiretroviral drugs to see if the virus is susceptible or resistant to these drugs.

PHS (Public Health Service): An administrative entity of the U.S. Department of Health and Human Services. HRSA is an operating division of PHS.

Planning Council: The planning body mandated by the CARE Act and appointed by the CEO of the EMA/TGA, whose basic function is to establish a plan for the delivery of HIV care services in the EMA/TGA and establish priorities for the use of Part A CARE Act funds.

Planning Process: Steps taken and methods used to collect information, analyze and interpret it, set priorities and prepare a plan for rational decision making.

PLWH/A (Persons Living with HIV Disease/AIDS): Person living with HIV disease or AIDS.

Population Count: Data which describe an entire population and were obtained from that entire population without sampling; the U.S. Census conducted every ten years is a population count since it attempts to obtain information from everyone living in the United States.

Positive Self-Management Program (PSMP): a workshop for people with HIV, facilitated by trained leaders, designed to enhance regular treatment and HIV-specific education by giving people the skills to coordinate all the things needed to manage their health, as well as to help them keep active in their lives.

Prevalence: The total number of persons living with a specific disease of condition at a given time.

Prevalence Rate: The proportion of a population living at a given time with a condition or disease (compared to the incidence rate, which refers to new cases).

Primary Medical Care for HIV Disease: The provision of care that is consistent with U.S. Public Health Service guidelines for the treatment of HIV/AIDS. Such care must provide access to antiretrovirals and other drug therapies, including prophylaxis and treatment of opportunistic infections and combination antiretroviral therapies.

Primary Source Data: Original data that you collect and analyze yourself.

Priorities: A set of functions listed in order of importance by decision of the planning council; may include eligible services, planning body support and program support. Available funds are then allocated to these priorities.

Priority Setting: The process used to identify and prioritize service categories to ensure consistency with locally identified needs and to address how best to meet each priority.

Private Insurance: Health insurance that is not operated by the government. Private sector health insurance is frequently purchased by employers for their employees. Thirty-two percent of PLWH who receive health care services on a regular basis are believed to have private insurance.

Probability: The likelihood that a particular event or relationship will occur.

Probability Value: The probability that a statistical result -- an observed difference or relationship -- would have occurred by chance alone, rather than reflecting a real difference or relationship; statistical results are often considered to be significant if the probability or p value is less than .05, which means that there is less than a 5% chance -- 5 out of 100 -- that the result would have occurred by chance alone.

Procurement: The process of selecting and contracting with providers, often through a competitive request for proposal process. For Part A, this is a responsibility of the grantee, not the planning council.

Program Goal: A broad statement about the ultimate purpose of a program.

Program Support: Program areas or activities such as needs assessment, capacity building, evaluation, or quality assurance projects identified for support by the planning council.

Prophylactic Treatment: Treatment to prevent the onset of a particular disease (primary prophylaxis) or recurrence of symptoms in an existing infection that has been brought under control (secondary prophylaxis).

Proportion: A number smaller than one, which is calculated by dividing the number of subjects having a certain characteristics by the total number of subjects; for example, if 35 new AIDS cases have been reported in the community in the past year and 7 of them are women, the proportion of female AIDS cases is 7 divided by 35 or 1/5 (.2).

Protease: An enzyme that triggers the breakdown of proteins. HIV's protease enzyme breaks apart long strands of viral protein into separate proteins constituting the viral core and the enzymes it contains. HIV protease acts as new virus particles are budding off a cell membrane.

Protease Inhibitor: A drug that binds to HIV protease and blocks it from working, thus preventing the production of new, functional viral particles.

Providers: Individuals or agencies that provide service(s).

Public Health Surveillance: An ongoing, systematic process of collecting, analyzing and using data on specific health conditions and diseases (e.g. Centers for Disease Control and prevention surveillance system for AIDS cases).

Public Insurance: Health insurance that is offered by the government. Major federal government programs are Medicaid, Medicare, and S-CHIP.

Public Testimony: A forum through which the public is given an opportunity to speak to a subject matter often before decisions are made by a board, council, or other decision making group.

QA (Quality Assurance): A broad spectrum of evaluation activities aimed at ensuring compliance with minimum quality standards.

QI (Quality Improvement): Activities aimed at improving performance.

QM (Quality Management): a broad term describing a program of evaluating the quality of care using a variety of methodologies and techniques, which encompasses both quality assurance and quality improvement.

Qualitative Information Gathering: Aims to understand subjective meanings, and the range of community members' experiences and perspectives. ("Stories, not numbers.")

Quantifiable: Referring to the ability to measure; if an action or program has an outcome that can be measured in terms of numbers or statistics, it is quantifiable.

Quantitative: Aims to understand average levels of some behavior, attitude, or knowledge within a group and to understand how much the group varies in its behaviors, attitudes and knowledge. ("Numbers, not stories.")

Ratio: A combination of two numbers that shows their relative size; the ratio of one number to another is simply the first number divided by the other, with the relation between the two numbers expressed as a fraction (X/Y) or decimal (X.Y/1), or simply the two numbers separated by a colon (X:Y); for example, the ratio of minority to white pediatric AIDS cases in a community with 75 total cases, 45 among Hispanic and Black children and 30 among white children, would be 45/30 (45:30), 3/2 (3:2), or 1.5:1.

Raw Data: Data that are in their original form, as collected, and have not been coded or analyzed; for example, if a woman participating in an HIV nutrition workshop is tested to determine her knowledge of nutrition needs and gets a score of 11, that is her raw score; if the score represented 11 correct answers out of 20, then the score could be converted to 11 divided by 20 times 100 or 55%, which is no longer a raw score.

Reallocation: A share that has been allocated again. Within the planning and allocations, refers to the process by which unspent or unused funds previously allocated to specific services are redistributed to other services.

Reauthorization: The legislative process whereby Congress reviews and either renews, terminates or amends existing acts or programs.

Reimbursement: Payment for expenses. Planning bodies may pay back transportation expenses, or example for PLWH members.

Reliability: The consistency of a measure or question, in obtaining very similar or identical results when used repeatedly; for example, if you repeated a blood test three times on the same blood sample, it would be reliable if it generated the same results each time.

Representative: Term used to indicate that a sample is similar to the population from which it was drawn, and therefore can be used to make inferences about that population.

Resource Allocation: The Part A planning council responsibility to assign CARE Act amount or percentages to established priorities across specific service categories, geographic areas, populations, or subpopulations.

Retrovirus: A type of virus that, when not infecting a cell, stores its genetic information on a singlestranded RNA molecule instead of the more usual double-stranded DNA. HIV is an example of a retrovirus. After a retrovirus penetrates a cell, it constructs a DNA version of its genes using a special enzyme, reverse transcriptase. This DNA then becomes part of the cell's genetic material.

Reverse Transcriptase (RT): A uniquely viral enzyme that constructs DNA from an RNA template, which is an essential step in the life cycle of a retrovirus such as HIV. The RNA-based genes of HIV and other retroviruses must be converted to DNA if they are to integrate into the cellular genome.

RFP (Request for Proposals): An open and competitive process for selecting providers of services (sometimes called RFA or Request for Application).

Rounding: Presenting numbers in more convenient units; rounding is usually done so that all numbers being compared have the same level of precision (one decimal place, for example); usually numbers under 5 are rounded down while 5 and over are rounded up; for example, you would round 3.08 to 3.1 and 4.14 to 4.1.

RWCA: Ryan White Comprehensive AIDS Resources Emergency Act. See CARE Act.

RWH/ATMA (Ryan White HIV/AIDS Treatment Modernization Act): The Ryan White HIV/AIDS Treatment Modernization Act was passed in 2006 and provides the Federal HIV/AIDS programs in the Public Health Service (PHS) Act under Title XXVI flexibility to respond effectively to the changing epidemic by changing how Ryan White funds can be used.

Salvage Therapy: A treatment effort for people who are not responding to, or cannot tolerate the preferred, recommended treatments for a particular condition. In the context of HIV infection, drug treatments that are used or studied in individuals who have failed one or more HIV drug regimens, including protease inhibitors. In this case, failed refers to the inability to achieve or sustain low viral load levels.

Sample: A group of subjects selected from a total population or universe with the expectation that studying the group will provide important information about the total population.

SAMs (Self-Assessment Modules): Self-assessment tools used by planning councils and consortia to evaluate specific activities. (The Planning Council office has copies of these booklets.)

SAMHSA (Substance Abuse and Mental Health Services Administration): Entity within the U.S. Department of Health and Human Services that administers alcohol, substance abuse and mental health programs.

SCSN (Statewide Coordinated Statement of Need): A written statement of need for the entire State developed through a process designed to collaboratively identify significant HIV issues and maximize CARE Act program coordination; the SCSN process is convened by the Part B grantee, with equal responsibility and input by all programs; representatives must include all CARE Act parts, providers, PLWH, and public health agency(s).

Secondary Source Data: information that was collected by someone else, but which you can analyze or re-analyze.

Secondary Analysis: Re-analysis of data or other information collected by someone else; for example, you might obtain data on AIDS cases in your metro area from the Centers for Disease Control and Prevention, and carry out some additional analysis of those data.

Seroconversion: Development of detectable antibodies to HIV in the blood as a result of infection. It normally takes several weeks to several months for antibodies to the virus to develop after HIV transmission. When antibodies to HIV appear in the blood, a person will test positive in the standard ELISA test for HIV.

Seroprevalence: The number of persons in a population who test HIV positive based on serology (blood serum) specimens; often presented as a percent of the total specimens tested or as a rate per 100,000 persons tested.

Seroprevalence Report: A report that provides information about the percent or rate of people in specific testing groups and populations who have tested positive for HIV.

Serosorting: The practice of deliberately selecting partners of the same HIV status, most often documented in the selection of sexual partners of the same HIV status among gay men.

Service Category: The list of possible services divided up under specific categories that are eligible to receive CARE Act funding (e.g. outpatient medical care, dental care, etc.)

Service Gaps: The difference between services available and services needed.

Service Priority: Service areas that are most critical to be funded by Part A money. A service category's priority is not necessarily related to how much money that item receives. Some high-priority services can be provided at low cost, while a lower priority service may be very expensive and thus be allocated more money. The amount of money a service receives from Part A can also be affected by other resources in the community to supply that service.

Service Utilization Report: Summarizes information by service category and provides information about service goals, the number of client served, and the amount specific services are provided during the years. Tracks the number of clients served with a service category.

Social Network: A social structure made of nodes (which are generally individuals or organizations) that are tied by one or more specific types of interdependency, such as values, visions, idea, financial exchange, friends, kinship, dislikes, conflict, trade, web links, sexual relations, disease transmission, etc.

SPNS (Special Projects of National Significance): AIDS services research and evaluation program, within Part D of the CARE Act, that funds and evaluates demonstration programs involving specific populations and types of services.

SSD (Social Security Disability): Federal program for low-income, disabled people who have paid Social Security taxes.

SSI (Supplemental Security Income): Federal program for all low-income, disabled people, and can supplement Social Security Disability.

Stakeholders: Those individuals/groups who have a major interest and involvement in a process; participants in the planning process.

Standard: Authoritative statements by which a profession describes the responsibilities for which its practitioners are accountable. A rule or basis of comparison in measuring or judging capacity, quantity, content, extent, value and/or quality.

Standards of Care: The standards of care are the minimum requirements that programs are expected to meet when providing HIV/AIDS care and support services funded by Ryan White Part A. These standards are established by the grantee and outline the minimum standards intended to help agencies meet the needs of their clients.

State Children's Health Insurance Program (S-CHIP): Federal program that gives to states to expand access to health insurance to children. SEE CHIP above.

Statistical Significance: A measure of whether an observed difference or relationship is larger or smaller than would be expected to occur by chance alone; statistical results are often considered to be significant if there is less than a 5% chance -- 5 out of 100 -- that they would have occurred by chance alone.

Statistics: Information or data presented in numerical terms; quantitative data; often refers to numerical summaries of data obtained through surveys or analysis.

Stratified Random Sample: A random sample drawn after dividing the population being studied into several subgroups or **strata** based on specific characteristics. Subsamples are then drawn separately from each of the strata. For example, the population of a community might be stratified by race/ethnicity before random sampling.

STD: Sexually transmitted disease.

STI: Sexually transmitted infection.

Substance Abuse Treatment: Provision of treatment and/or counseling to address substance abuse issues (including alcohol, legal and illegal drugs), provided in an outpatient or residential health service setting.

Supplemental Grant: Funding that supplements the Part A formula grant, and is awarded to EMAs/TGAs on a competitive basis based on demonstrated need and ability to use and manage the resources.

Surrogate Measures: Substitute measures, used to help understand a situation where adequate direct measures are not available; for example, it may be difficult to obtain good HIV surveillance data on teenagers, but incidence rates of sexually transmitted diseases (STDs) among teenagers can be used as surrogate measures of high-risk sexual behavior, since HIV is an STD, and people get STDs when they engage in unprotected sex.

Surveillance: Close observation; the process of collecting information regarding the frequency and distribution of disease or other health conditions among specific populations.

Surveillance Report: A report providing information on the number of reported cases of a disease such as AIDS, nationally and for specific sub-populations.

Survey Research: Research in which a sample of subjects is drawn from a population and then interviewed or otherwise studied to gain information about the total population from which the sample was drawn.

TA (Technical Assistance): Training and skills development which allows people and groups to do their jobs better; this includes education and knowledge development in areas that range from leadership, planning, and communications to creating an effective needs assessment tool and understanding statistical data.

Tabulation of Data: Ordering and counting of quantitative data to determine the frequency of responses, usually the first step in data analysis; typically involves entering data into a computer for manipulation through some form of data analysis program.

Target Population: A population to be reached through some action or intervention; may refer to groups with specific characteristics (e.g. race/ethnicity, age, gender, socioeconomic status, or to specific geographic areas.

Title I: Before 2006, this referred to the part of the CARE Act that provides emergency assistance to localities (EMAs/TGAs) disproportionately affected by the HIV epidemic.

Title II: Before 2006, this referred to the part of the CARE Act that enables states to improve the quality, availability, and organization of health care and support services to individuals with HIV and their families.

Title III: Before 2006, this referred to the part of the CARE Act that supports primary medical care and early intervention services to people living with HIV disease through grants to service organizations.

Title IV, 401: Before 2006, this referred to the part of the CARE Act the supports services for women, children, youth and families and access to research.

Title IV, 402: Before 2006, this referred to the part of the CARE Act that supports dental reimbursement, SPNS grants and AETC.

Transmission Category: A grouping of disease exposure and infection routes; in relation to HIV disease, exposure groupings include injecting drug use, men who have sex with men, heterosexual contact, perinatal transmission, etc.

Transitional Grant Area (TGA): An area with a cumulative total of at least 1,000 but fewer than 2,000 AIDS cases during the most recent 5 years. There are 34 TGAs funded by HRSA in FY 07.

Trend: Movement in a particular direction in the value of variables over time.

Trend Charts: Line charts which show changes or movement in the values of a particular variable over time; usually, values are recorded periodically as points on a graph, and then connected to show how the values are changing; often used to provide comparisons, such as separate lines showing reported AIDS cases among different population groups over time.

Universe: The total population from which a sample is drawn.

Unmet Need: An estimate of PLWH/A in the EMA/TGA who do not receive basic primary medical care, as indicated by CD4 and /or viral load testing.

Utilization: The state of having been made use of. For our purposes, this often refers to the extent to which a service is being used by clients and funds for these services are being expended by providers.

Validity: The extent to which a survey question or other measurement instrument actually measures what it is supposed to measure; for example, a question which asks PLWHs with TB whether they are taking their medication every day is valid if it accurately measures their *actual level* of medication use (as with directly observed therapy programs in which they are observed taking the medication), and it is not valid if they are not giving honest answers, and the question is really measuring the extent to which they realize that they *should* take their medication.

Value: Individual response or score; for example, if people responding to a survey are asked to state their age, each age is a value.

Variable: A characteristic or finding that can change or *vary* among different people or in the same person over time; for example, race/ethnicity varies among individuals, and income varies for the same individual over time.

Viral Load: The amount of HIV RNA per unit of blood plasma. An indicator of virus concentration and reproduction rate, HIV viral load is increasingly employed as a predictor of disease progression. It can be measured by PCR or bDNA tests and is expressed in number of copies of or equivalents to the HIV RNA genome per milliliter of plasma. (Note that there are two RNA copies per HIV infection in a laboratory cell culture.

Viral Load Test: In relation to HIV, a test that measures the quantity of HIV RNA in the blood. Results are expressed as the number of copies per milliliter of blood plasma. This test is employed as a predictor of disease progression.

Viremia: The presence of virus in blood or blood plasma. Plasma viremia is a quantitative measurement of HIV levels similar to viral load but is accomplished by seeing how much of a patient's plasma is required to spark an HIV infection in a laboratory cell culture.

Weighting: A procedure for adjusting the values of data to reflect each group's percent in the total population; for example, suppose for your needs assessment you stratified the community population by race/ethnicity and oversampled minorities so you could compare findings for each group; in order to combine your findings to describe the entire population, you would weight the data to reflect the percentage of the whole population that comes from each racial/ethnic group.

Western Blot: A test for detecting the specific antibodies to HIV in a person's blood. It commonly is used to verify positive ELISA tests. A Western Blot test is more reliable than the ELISA, but it is harder and more costly to perform. All positive HIV antibody tests should be confirmed with a Western Blot test.

Wild Type Virus: HIV that has not been exposed to antiviral drugs and therefore has not accumulated mutations conferring drug resistance.