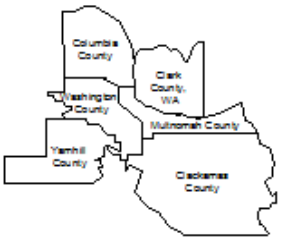
Portland Area HIV Services Planning Council

Advocacy and planning for people affected by HIV in the Portland metro area

Ryan White Program, Part A



Hybrid: Join Zoom meeting»
Call-in: (253) 215-8782
Meeting#: 931 1735 8512
Passcode: 12777501

Meeting Minutes

June 2nd, 2026

Approved by Planning Council: July 8, 2026

Grantee: Multnomah County Health Department

Multnomah County

Portland Area HIV Services Planning Council
MEETING MINUTES

Tuesday, 6/2/2026 , 3:00 – 6:00 pm
Hybrid meeting

AGENDA

Item	Discussion, Motions, and Actions
Welcome/Meeting Logistics (virtual)	Nick reminds folks that we have microphones in the room, so please limit side chats. This public meeting will be recorded and we will be keeping notes.
Candle Lighting Ceremony	Greg honors Bruce Bills, a guy you didn't forget. He had a traumatic brain injury so he had a limp, but didn't let it stop him, even completing a 1997 climb of Mt. Saint Helens with a group of people living with HIV. Never saw determination like that. Some of us in mid-90s were not undetectable and couldn't try the drug combos. Bruce had those and eventually died and didn't quite make it to protease inhibitors.
Introductions	Connect with members, learn how to support access needs, and share a key reflection.
Announcements	Announcements: ● Candlelight vigil on June 5th to honor the 45th anniversary of the AIDS pandemic and addressing HR1 impacts. SW Harvey Milk and 12th at 8:00 pm. ● RW National Conference has a PC track this year ● HGAP received a LEAP cohort award for keeping clients at the heart of every decision. Lorne notes that we are trying to do innovative services, it's why we take so long to make decisions. Shows our resilience. ● Received May 15th response to the funding inquiry memo. Ops will review and respond. Didn't share the data that was requested, but continuing to inquire. Shared a bit of info about statewide prevention services. ● OHP is accepting NARA patients. Could ask them to present about American Indian/Alaska Natives who are HIV+. It's been years in the making. ● Darcelle plaza has a ribbon cutting on 5/18. ● Chautauqua drag event/fundraiser on July 15th at Darcelle's. ● June 27th at 7:30 is the Portland Gay Men's Chorus presents "Transformations."

Item	Discussion, Motions, and Actions
	● Heather, Bee, Jamal and Barry have all left the Council over the past few months. ● September new members have been recruited. Edith and Eric are with us today. Neko has attended meetings. Eric was previously with the Behavioral Health Advisory Council.
Agenda & Meeting Minutes	April meeting minutes reviewed and made updates per feedback. May meeting minutes reviewed. ● Motion to accept April by Julia and second by Scott. Approved by consensus as modified. ● Motion to accept May by Diane and second by Shaun. Approved by consensus as modified.
Public Testimony	No public testimony this month. Time to allow community members to share feedback as a public board. Provides feedback on unmet needs and priority as well. Tend to allow 3 minutes- encourage your community members to provide testimony.

Concurrence Vote on Integrated Plan

Scott shares that the Integrated Plan was returned with inclusion of some community input/feedback. The required plan on a variety of STI and HIV issues. Allowed some clarifications and other rejections. Aubrey shared notation of those edits. Likely need some discussion.

Recommendations will be shared. Tomorrow the Oregon State Planning Group (OSPG) will be holding a 3 hour meeting where PC members and others can meet with that group on issues that have arisen when presented to PC last week.

DISCUSSION
Options: Nick states PC can either concur, not concur, or concur with reservations

Scott M. outlined issues of concern with plan (e.g., Concurrence with reservations)

- Demographic info on MSM and trans people, those with disabilities, etc. OHA said they will not be mention those; will not report it to federal funder.
- Early Intervention Services and decision to move funds from high prevalence areas to creating a statewide system where every county has some level of capacity to track and monitor HIV and STI to respond.
    - In the past, the funding was mainly to high prevalence counties.
- Cooperation and integration of PC and OSPG with a better understanding of how things get done. Plan states a lot of integration, several folks who attend both, but no formal reporting between each meeting.

Item	Discussion, Motions, and Actions

Reminders:

- Integrated Plan is for 5 years and could potentially be updated.
- What is written versus what we do as a community are different things. We want this approved and to get our funding for our state.

Initial OHA response- concerned if they make certain changes to the plan that it will be federally rejected. OHA has determined they will proactively comply. Washington State, California, others have adopted a different philosophy so this is a point of disagreement.

Q: What about the dissolution of Diversity, Equity, and Inclusion (DEI)?
Scott M: This was part of the Executive Orders, not a law.

Q: Could we clarify the impact of incomplete demographics? Funding impacts?
Julia: Not sure if this affects the funds.
Scott M: Integrated Plans started maybe 10 years ago. We had to fight to get trans and non-binary racial data in there for populations that were being left out. Got some detailed things into the plan that ends in 2026.
Scott M: OHA doesn't want to risk the funds but there's a potential risk if we leave out specific groups and continue to fund tailored programming.

Q: What are you prepared to do if funding gets denied?

- Scott M: I don't fully understand, we haven't crossed every step. We worked hard for this. We know trans women need to be protected, and we have one of the largest populations in the country. If we just pretend they are men, they will be lost. Hardest to house and keep in care to stay safe. We need viral suppression. We wouldn't do this to any other demographic, against our mission/vision.
- Our Attorney General is involved in lawsuits against the government.

Chris: Every agency is having to scrub based on the feds right now.
We are not in a normal space now so it shifts the process to maybe not push back.

- WashCo bleached our contracts, cannot say gender. People facing the clients day-to-day, no change in approach as long as you keep the money.
- We need to recommit to how we treat people. Same human beings that love their work and clients even if the contracts look horrible.

Nick: Struggle with the tradeoffs as the Health Services Center is affected as a grantee.

- Stuck because AETC has limits about presentations now; Cannot include gender even if speaking about education on trans folks.

Item	Discussion, Motions, and Actions
	• Integrity about how to approach and work with trans clients. • Is it reasonable now to keep trading off? • AETC is dealing with the same challenges at a conference. • Presenters had to drop out due to limitations. Slides reviewed and corrected. [Scott M. left the meeting.] How do we solve this in future, if signing off on it now? We end up agreeing on the core of it, how do we draw a line? • As suggested, there's an option to concur with reservations. What needs to be documented we can keep locally and share with OHA/partners. • Trans community is affected quite a bit. Wouldn't we go with the flow and make sure we have the funds to support the community? Member shared being involved in a creative writing program in prison, pushed back and they eliminated all funding for creative writing. If we push back, we lose way more funding than what we gain on the philosophical win. What matters is what happens on the ground. Q: Can we vote differently than concur with or without reservations? Could we bring up issues again; idea to revisit the choice and change at a certain time. This is complex and challenging work. Will send proposals to PC. Lean into your community liaisons at this time. We can do a lot. (e.g., Merck, Gilead, etc. can do education and informing. Trauma informed care, cultural humility, etc.)
	Annual Report - HIV Epidemiology **Describes characteristics of who in our region is living with HIV, being newly diagnosed**
	HIV Epidemiology Annual Report 2025 Slides (first half) Grace presents most recent epidemiology data Will not cover everything today, reach out. Look at it on your own. Noting inclusion from visualaids.org This is different because we can share data of interest to us, and compare to OHA surveillance data. Growth in Multco clients seems to be partly because we ended Clark County contract and merging of duplicates. Q: Dollars for disability- we don't have access to the source. Indicate the source of income in CW but in an uploaded document, not something that we can download.

Item	Discussion, Motions, and Actions
Clients. Services, and Outcomes Annual Report 2025 Slides (second half) Grace shares the client data and demographics from our service network.	
DINNER BREAK	
Client Experience Survey Data Learn about the quantitative results from this year's client experience survey	Britt presents on CES Successes: generally respect, lab understanding, and could get the help they need. Challenges: talk about medication adherence, additional services available.
Setting FY27-28 Service Priorities	Brief small group discussion. Aubrey shared back the pre-vote of PC members for priorities. Vote for proposals will start up after Ops via email at the July longer PSRA meeting.
Eval & Closing Next meeting dates	Thanks everyone and please submit your evaluation forms. Meeting adjourned at 6:03pm.

ATTENDANCE

Members	Present	Absent*	Members	Present	Absent*
Jamie Christianson, she/they	**X**		Sean Mahoney, he/him		
Chautauqua Cabine, she/her	**X**		Robert Middleton, all pronouns		**L**
Eric Cockley	**X**		Scott Moore, he/him (Co-chair)	**X**	
Steven Davies	**X**		Troy Preble		**L**
Carlos Dory, him/his	**X**		Diane Quiring, she/her	**X**	
Michelle Foley, they/them	**R**		Tessa Robinson, she/her	**R**	
Greg Fowler, he/him	**X**		Adie Steckel, they/them		**E**
Jeffrey Gander, he/him	**R**		Scott Strickland, he/him	**X**	
Kris Harvey, he/him	**X**		Nick Tipton, he/him (Co-chair)	**X**	
Shaun Irelan, he/him	**X**		Bee Velazquez, she/her/ella		**E**
Lorne James, he/him	**R**		Barry Walden	**R**	
Chris Keating	**X**		Jeffery Wells	**X**	
Julia Lager-Mesulam, she/her	**X**		Abrianna Williams, she/her	**R**	
Robb Lawrence, he/him					
HGAP Staff			**Guests**		
Sandra Acosta Casillas	**X**		ASL Interpreters	**X**	
Aubrey Daquiz, she/her	**X**		Edith Duku (joining in Sept)	**R**	
Grace Walker-Stevenson, they/them	**X**		Dale Sattergren	**R**	
April Kayser, she/her	**X**		Vaness Leja	**X**	
Britt Sale, she/her	**R**		Eric Gray (joining in Sept)	**X**	
Derek Smith, he/him	**X**				
County Staff					
Kirsten Aird	**R**				

* R = Attended Remotely (for an in person meeting); A = Unexcused Absence; E = Excused Absence; L = On Leave