AETC Program Mental Health Committee

January 27, 2014, 2 pm – 3 pm ET

Meeting Room: <http://aetc.adobeconnect.com/johnnelson3/>

Conference Call #: 1-888-394-8197, Participant Passcode: 600617

**Present**: John Nelson (NRC), Michael Noss (TX/OK), Melissa Grove (TX/OK), Marla Corwin (MT/PL), Tiffani Pestotnik (MT/PL), Jeff Beal (FL/CARIB), Debbie Cestaro-Seifer (FL/CARIB), Lisa Baker (MATEC), Kevin Roeder (MATEC),Phil Meyer (PACIFIC), Larry McGlynn (PACIFIC), Linda Frank (PA/MA), Fran Cournos (NY/NJ), Sanjay Sharma (SEATEC)

I. **Introductions** – we had 14 multidisciplinary participants from 8 of 11 regions; represented disciplines included: psychiatry, medicine, social work, psychology, and nursing.

II. **Why a do we need a Mental Health Committee**?

* High levels of mental health “needs” in persons living with HIV/AIDS (PLWHA)
* What are “best practices” in meeting the mental health needs of PLWHA
* How do we share “centers of excellence” in mental health care of PLWHA
* Focus is commonly only on presenting Depressive D/O, Anxiety D/O, Substance Use D/O . . . less so on Personality D/O and overall mental health issues (living with stigma 24/7)
* Mental health needs of PLWHA are often “forgotten” – focus is mainly on medical management (VL suppression)
* Fragmentation of care; minimal mental health workforce trained, experienced, and comfortable working with PLWHA
* Reimbursement of mental health services
* Rural vs. urban PLWHA mental health access issues
* Education of mental health providers on including HIV disease in differential diagnosis
* AETC Program needs to expand to include psychology and social work in targeted audiences
* Meeting mental health needs is a priority – in order to reduce non-HIV morbidity and mortalities as well as possibly allowing better health care follow-up
* Fear of non-mental health providers in dealing with (screening, addressing, referring . . . ) mental health issues
* Biopsychosocial aspects of mental health care – working with team to bring more holistic approach to working with PLWHA (and all persons!)
* Lack of HIV-related research and national conference presentations regarding mental health of PLWHA

III. **What are goals committee members would like to accomplish**?

* Presentation at national conferences by members
* Research collaborations
* Graduate training programs for mental health providers (SW, psychology, psychiatry, nursing mental health CNS and NP)
* Mental Health Workgroup history (what was usage of those resources developed)
* State wide conferences; professional organization conferences
* Publication of opinion piece for journal
* Pull together available resources on mental health and HIV; then decide next step

IV. **Committee logistics**: How often should we meet and when?

* Meet Monday, February 24th at 2 – 3 pm ET, then decide on next meeting frequency

V. **Comments, suggestions, questions**: Agreement was made to record future meetings and to provide the link on the AETC NRC website for persons not able to join that meeting.