



Chicagoland Syndemic (HIV, STI, Viral Hepatitis, TB, Mpox) Advisory Council

2023 Membership Application

APPLICATIONS MUST BE COMPLETED IN FULL AND SUBMITTED VIA SURVEYMONKEY OR RECEIVED BY RAVI JAKKULA, PUBLIC HEALTH ADMINISTRATOR FOR SYNDEMIC INFECTIOUS DISEASE PLANNING, AT RAVI.JAKKULA@CITYOFCHICAGO.ORG ON OR BEFORE 4/11/2023 FOR CONSIDERATION.

CDPH will host two virtual question and answer sessions regarding the application and the Chicagoland Syndemic (HIV, STI, Viral Hepatitis, TB, Mpox) Advisory Council:

- **3/28/23 from 10AM to 1130AM**
- **4/4/23 from 10AM to 1130AM**

If you are interested in participating in these question and answer sessions, please send an email to Ravi Jakkula at ravi.jakkula@cityofchicago.org, stating that you would like to participate in the question and answer session on 3/28, 4/4, or both. Ravi will then invite you to the requested session(s) via Teams.

Please save the date of Wednesday, April 26, 2023 from 8:30AM to 12PM for an in-person orientation session for this Council. The orientation will be open to all individuals who apply for membership.

The first meeting of selected members of the Council, which will be an open meeting in which anyone may attend, will be held Wednesday, May 31st.

About the Council

The Chicagoland Syndemic (HIV, STI, viral hepatitis, TB, mpox) Advisory Council (Council) is responsible for providing oversight and guidance regarding syndemic infectious disease service priorities and the allocation of federal syndemic infectious disease funding through the Chicago Department of Public Health (CDPH), including the Health Resources and Services Administration Ryan White HIV/AIDS Program and the Centers for Disease Control and Prevention Divisions of HIV Prevention and Viral Hepatitis. The Council's immediate focus will be to review existing funding and programming in the jurisdiction, allocate percentages of funding to Ryan White Part A and Minority AIDS Initiative (MAI) service categories, and provide concrete programmatic recommendations, including, but not limited to, priority populations and geographic areas. The CDPH Syndemic Infectious Disease (SID) Bureau will use decisions of the Council to fund Healthcare Access Programs which prevent, diagnose, provide care for, and successfully treat syndemic infectious diseases including HIV, sexually transmitted infections (STIs), and mpox (formerly monkeypox) virus.

Syndemic Definition

A syndemic is made up of synergistically interacting epidemics that are exacerbated by social and institutional inequities and systemic barriers. In other words, syndemic infectious diseases can be described as a group of diseases which are connected by population, how the diseases are spread, how the diseases are prevented and treated, and the underlying conditions within which the diseases exist.

CDPH's SID Bureau manages the local response to HIV, STIs, mpox (formerly known as monkeypox and mpv), hepatitis B virus (HBV), hepatitis C virus (HCV), and tuberculosis (TB).

The syndemic approach is effective because:

- Similar behaviors and conditions lead to risk for multiple diseases. For example, sexual contact is connected to HIV, STI, HBV, HCV, and mpox, and sharing injection equipment is connected to HIV and HCV.
- Diseases have reciprocal and interdependent factors, meaning they influence one another and, to some degree, get worse or better based on what is happening with other diseases.
 - When a person with HIV has an STI, there is a greater chance of transmitting HIV to sexual partners. Similarly, a HIV-negative person who has one or more STIs has an increased chance of acquiring HIV.
 - HIV is a risk factor to TB progression. TB, which is an HIV opportunistic infection, accelerates HIV disease progression.
 - Advanced HIV disease increases risk for severe mpox.
 - HBV/HCV co-infection makes HIV management more challenging.
- Common conditions and circumstances suggest common solutions across syndemic infectious diseases.
- Multiple disease conditions are often managed by the same institutions and experienced by the same individuals and communities.

The goal of managing each syndemic infectious disease is to “end” or “eliminate” transmission of the disease. That is, similar to [Getting to Zero Illinois](#) (the state’s plan to get to functional zero new cases of HIV in Illinois by 2030), there are national strategies to end and eliminate HIV, syphilis, mpox, viral hepatitis, and TB.

Additionally, similar actionable goals exist across diseases, i.e., regardless of disease, we strive to diagnose infections, provide treatment, prevent new infections, reduce health disparities/inequities, and promote integrated and coordinated efforts. And, for all syndemic infectious diseases, appropriate supportive services and resources can improve our ability to help keep people healthy and well.

Syndemic Planning

The Chicagoland Syndemic (HIV, STI, viral hepatitis, TB, mpox) Advisory Council, as mandated by the federal Ryan White HIV/AIDS Program, will provide guidance on the local allocation of Ryan White Part A and MAI funding issued by the Chicago Department of Public Health (CDPH) for medical care and supportive services for people with HIV by deciding the percentage of Part A and MAI funding awarded to the jurisdiction that will be allocated to each Part A HIV Care Service Category. Ryan White Part A and MAI funding inherently covers services for other syndemic infectious diseases among persons with HIV, including screening, treatment, vaccination, and expedited partner therapy for STI; screening, treatment, and vaccination for viral hepatitis and mpox; and screening and treatment for TB.

While the Council's responsibility is to prioritize and allocate Ryan White Part A and MAI funds, which are restricted to serving individuals with HIV, CDPH will use the guidance of the Council to create and, as much as possible, to allocate other funding to clinical and supportive service providers that include people vulnerable to HIV and/or people living with and vulnerable to other syndemic infectious diseases.

The Council will also review other funding sources coming into the jurisdiction for clinical care and supportive services for people with HIV to ensure that Ryan White Part A and MAI funds are being allocated to support clinical and supportive services not supported by other funds. The group will review service delivery information from CDPH-funded Healthcare Access Programs, partially funded with Ryan White Part A and MAI funds, assess gaps in services, and gather input from other bodies, organizations, planning groups, networks, and other stakeholders. All funding decisions must comply with federal funding guidelines and restrictions. Funding is ultimately approved and allocated by CDPH's SID Bureau.

To limit conflicts of interest and to comply with federal funder requirements, the Council's recommendations and decisions will focus on broad population groups, geographic areas, and service categories and/or interventions. The Council is not a governing body for CDPH's SID Bureau, does not make programmatic decisions, and is not a space for advocacy. The Council's deliberations will not consider specific agencies and organizations that provide services in the Chicago Eligible Metropolitan Area. The Council does not monitor agencies funded by the CDPH SID Bureau. With the exception of mandated seats, council membership is appointed to the individual and not to an organization or agency and remains with the individual regardless of employment changes.

Future Vision

In future years, CDPH will foster collaboration between the Council and other networks/planning groups/organizations/stakeholders in the jurisdiction to create a Collaborative Syndemic Planning Network. The Network will review existing data; existing national, state, and local "end"/"eliminate" plans; and best/promising practices to develop strategies and plans to "end" or "eliminate" the five syndemic conditions. In addition to setting aspirational and actionable goals and objectives, these collected efforts will provide guidance to optimize investments for each condition, including integrated services where possible and appropriate. This Network will consider multiple systems of care (governmental public health, hospitals, federally qualified health centers, other healthcare institutions, community organizations, and others); priority populations; and priority geographic areas. The Network will discuss other co-occurring conditions, such as mental health, substance use, women's health, and immigrant/refugee/migrant health, as appropriate.

Planning Commitment

Selected members will serve a two-year term on the Council. Members are expected to attend, in person, monthly meetings of the Council, estimated to last three hours each. Should the Council decide to create committees, members will be expected to participate in their assigned/selected committee for the duration determined by the Council. In addition, the Council may elect to hold additional meetings to address short-term needs. These additional meetings will be announced at least one month in advance of the meeting. All meetings are open to the public.

- With the exception of mandated seats, Council membership is appointed to individuals and not organizations or agencies. Membership remains with the individual regardless of changes to employment.

- If applicable, prospective members should secure approval from employers to ensure they are able to fully participate in required meetings.
- All full Council meetings will be held in-person. Additional meetings may be held virtually, based on the decisions of the Council.
- Please make sure that you have easy access to a personal email account, as this is how most communication will take place outside of the meetings. If you need assistance in setting up an email account or accessing an email account, please reach out to Ravi Jakkula (ravi.jakkula@cityofchicago.org) for assistance.
- Additional policies and procedures to govern Council business will be codified through bylaws after the full Council has been seated.

Chicagoland Syndemic (HIV, STI, Viral Hepatitis, TB, mpox) Advisory Council

Applicant Information:

Name: _____

Preferred Phone Number _____

Preferred pronoun:

She/Her		He/Him		They/Them		Other (Please specify)	
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Email address (Personal email is preferred as professional emails may change. Membership is not with you as an employee of an organization, but with you as an individual)

Date of Birth _____

Address of residence:

Street Address **City** **State** **Zip**

Demographics

Do you consider yourself to be of Hispanic, Latino/a/x/e, or Spanish origin?

Yes		No		Don't know		Refuse to answer	
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If "yes", which of the following described your Hispanic, Latino/a/x/e, or Spanish origin? You may choose more than one option.

Mexican		Puerto Rican		Cuban		Dominican	
Another Hispanic, Latino/a/x/e, or Spanish origin		Don't know		Refuse to answer			

What racial group or groups do you consider yourself to be in? You may choose more than one option.

American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian or Other Pacific Islander	
White		Don't know		Refuse to answer			

How do you describe your current gender identity? You can choose more than one answer.

Woman		Transgender Woman		Transfeminine		Man	
Transgender Man		Transmasculine		Nonbinary/Nonconforming		Intersex	
Don't know		Refuse to answer		Gender Queer		Androgynous	
Two Spirit		Questioning		A gender not listed here			

If you currently identify as a gender not listed here, please specify.

What was your sex assigned at birth?

Male		Female	
Don't know		Refuse to answer	

Sexual Orientation

Lesbian		Gay		Bisexual	
Pansexual		Heterosexual		Queer	
Questioning		Two Spirit		Same-Gender Loving	
Asexual		Prefer not to disclose		Other	

How did you hear about the Chicago Healthcare Access HIV Planning Council? Please mark all that apply:

Supervisor		Case Manager/Service Provider		Online		Elected Officials	
Social Media		Word of Mouth		Co-Worker		Friend/Family	

Employment Status

Not employed		Employed Full-Time		Employed Part-Time		Volunteer		Consultant	
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Current employer _____

Work phone _____

Work email address _____

Position Title _____

How long have you been in this position? _____

Membership Inclusion

All individuals are encouraged to apply for membership in the Chicagoland Syndemic (HIV, STI, viral hepatitis, TB, mpox) Advisory Council. To help ensure that the body fully represents the diversity of the Chicago Eligible Metropolitan Area and the populations that are most impacted by syndemic infectious diseases, please answer the following questions. Identifying information will not be shared outside the application review process.

Please check all that apply:

I am a person with HIV	
I am a person with (or previously with) hepatitis C	
I am a person with hepatitis B	
In my lifetime, I have been diagnosed with an STI	
In my lifetime, I have been diagnosed with mpox	
In my lifetime, I have been diagnosed with TB	
I am currently a person who is eligible for HIV PrEP	
In the last five years, I have been prescribed HIV PrEP	
In my lifetime, I have injected illicit drugs	
In my lifetime, I have used non-injection illicit drugs (other than marijuana)	
In my lifetime, I have been diagnosed with mental illness	
In my lifetime, I have been incarcerated	
In the last five years, I have been prescribed HIV PrEP	

Please check all of the categories which you represent:

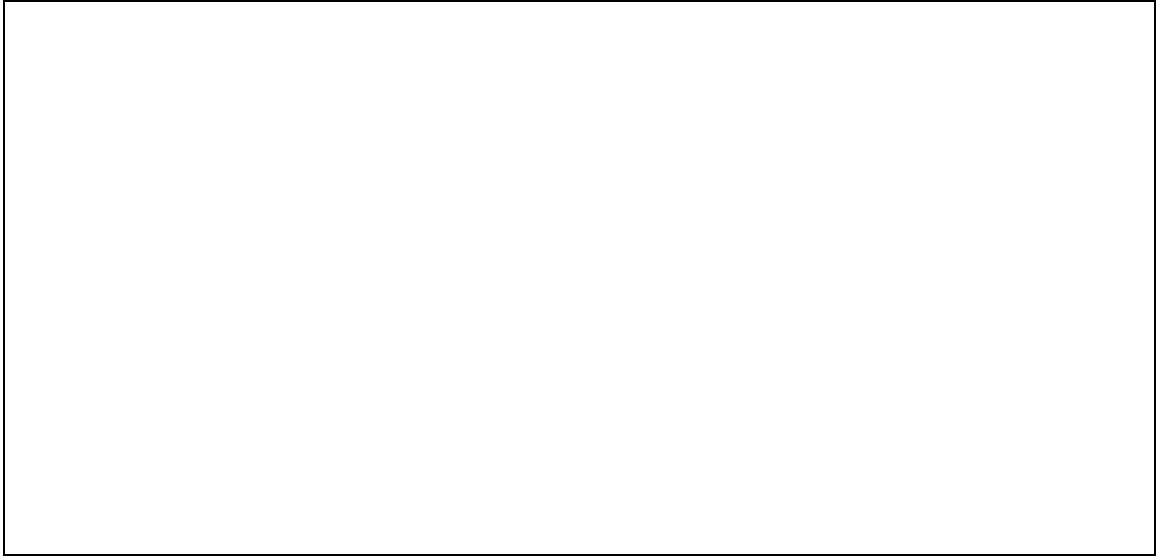
Healthcare provider (e.g., hospital, federally qualified health center)	
Pharmacy provider	
Community-based or social service provider serving populations impacted by HIV	
Housing or services for people experiencing homelessness provider	
Mental health provider	
Substance use disorder treatment provider	
Harm reduction services provider	

Planning agency for a hospital or healthcare system	
Non-elected community leader (Please explain on the line below)	
County or local government	
Illinois government (including Ryan White Part B)	
Recipient of Ryan White Parts C or D funding	
Recipient of direct funding from the Centers for Disease Control and Prevention for HIV prevention services	
Representative of person who are currently or formerly incarcerated	

PLEASE ANSWER THE FOLLOWING 3 (three) ESSAY QUESTIONS:

1. What do you hope to get out of or achieve through your participation in the Chicagoland Syndemic (HIV, STI, viral hepatitis, TB, mpox) Advisory Council (Council)?

2. How will your professional and life experiences contribute to the Council's work? In your response, please describe your experiences with HIV, STIs, mpox, viral hepatitis, and TB.



- 3.** How will you share the activities of the Council with others (colleagues and/or community connections)? How will you share the perspectives of others with the Council?

