



HEALTH + WELLNESS E D I T I O N

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SPECIAL COVERAGE: HIV/AIDS

Knowing your status is just a CHIP call away at Le Bonheur

Sheila Smith: Happy and Living with HIV

AIDSVu: A look at Tennessee HIV/AIDS — by the numbers

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The Opioid Problem • Heart Health • Getting your exercise in

Knowledge is power — if you act on it

Getting and staying healthy starts with having good information and then acting on that information. For instance, knowing what nutrient-dense foods to eat won't improve your waistline, blood sugar or blood pressure numbers if you don't actually EAT them.

So with that in mind we bring you this year's special TSD Health and Wellness Edition.

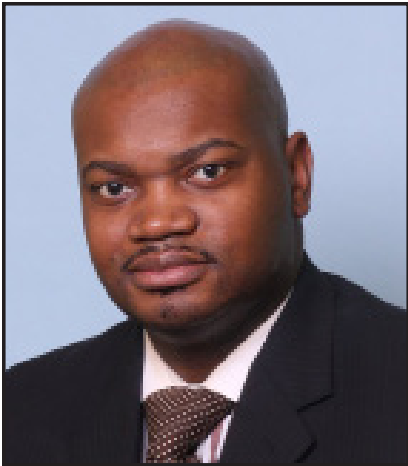
This year, our special focus is on HIV and AIDS awareness. Our friends at Le Bonheur Children's Hospital have an initiative designed to help more Memphians get tested. Shelby County has more people living with HIV than almost any other county in the state, so let me be explicit: If you don't know

your status, read our story about Le Bonheur's CHIP program, and then get tested. Lives are at stake so don't take any chances. We also have the inspiring story of a woman who has lived with HIV for years, and other health information you can use.

But whatever you do, get informed about your health. Be inspired to get even healthier. And remember: when enough of us take action together, we can elevate our communities and our city!

Here's to your health!

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Your HIV status is a CHIP call away

Le Bonheur uses CDC grant to help raise awareness, reduce risk

by Johnesha Harris

Special to The New Tri-State Defender

As for as the Comprehensive High Impact Prevention (CHIP) team is concerned, everyday is a good day to get tested for the HIV virus, especially for those at the highest risk.

Buffeting the CHIP team's resolve is that Shelby County is number one among Tennessee's 95 counties with new and outstanding HIV cases.

Lowering the number of HIV cases in the Shelby County area is what CHIP is all about. Funded through the U.S. Centers for Disease Control and Prevention (CDC), the program is run through Le Bonheur's Community HIV Network and serves African American and Hispanic men and women between the ages of 13-34.

At its core, CHIP is designed to deliver free prevention to those at the highest risk for HIV. That involves testing, risk reduction counseling and other prevention services in communities with the highest prevalence of HIV.

Dana Moore, who took over as CHIP supervisor in April, works with a team that is constantly in outreach mode to connect with those who need the program's help.

"The first and most important part of HIV education is getting tested," she said. "If you know your status, then you know that you need to use condoms. Or, if you're positive, then you should be getting treatment and taking your medicine to prevent yourself from giving it to any future partners."

The deadly seriousness of HIV is something Moore knows personally. Her uncle contracted the virus and died. She urges people to get educated, stressing that more is known about HIV today than ever. Now that doctors have research and methods on how to beat the virus, CHIP's focus is on what people know.

"Ask your partner what is their status," Moore said.

"In our community, we could put our health in the hands of our partners because we feel we can trust them. We need to make it our responsibility to get tested and to ask our partners to get tested or to use condoms."



Dana Moore (far right), along with her CHIP team at Le Bonheur, works to help Mid-Southerners know their HIV status

(Courtesy photo)

'It affects everybody'

HIV transmission is tied to specific high-risk behaviors that are not exclusive to any one sexual orientation.

The CDC has reports showing that 1.2 million people are living with HIV in the United States; approximately 40,000 were diagnosed in 2015 alone. And in 2013, gay and bisexual men accounted for 55 percent of the people living with HIV.

"There's a stigma and resistance towards HIV (education) because the virus is commonly referred to as 'gay man's disease' but it's not; it affects everybody," Moore said. "Our program was implemented for high risk heterosexuals."

Societal barriers such as stigma and discrimination, insufficient funding for public health programs and ideological oppositions to common sense prevention policies combine to make it especially difficult for many trying to turn the tide against the epidemic.

Here – and there– for you

If CHIP were a person, then those in need would be dealing with a good listener committed to going where and when called and familiar with working people who don't want to be judged.

"As far as the younger ages go, the best thing we can do for them is to listen," Moore said, providing context for a CHIP privacy policy – nothing relayed by a client in confidence is shared without permission – that has been a pathway to many who later decided to get tested.

"Once they start opening up, due to trust that is built, we can move on to getting the test done. We provide an avenue for any age to come to us because people will not do anything if it is forced upon them.

"We can only access whatever barriers you have and meet you where you are," she said. After that, it is up to the person to decide if they are ready to hear more or not."

CHIP's outreach is mobile. Team members respond readily to community requests for information, seizing each opportunity to get the program's overall message across.

SEE CHIPS ON NEXT PAGE



CHIPS

CONTINUED FROM PREVIOUS PAGE

A call to the program’s center from those who want help getting tested triggers the dispatch of two educators, whose jobs are not done until they detail follow-up steps.

“We have tested husbands and wives, friends, mothers and daughters, really any and everybody that come to us for assistance,” Moore said.

“Our test takes 15-20 minutes, but after July 1 we will have new kits that will only take a minute to get results back. We can meet you in any place you deem comfortable for you. We have gone up to jobs, churches, even in-home visits.”

Got the results, now what?

Positive. Negative. Either way, the CHIP team has a going-forward plan after HIV test results are known.

If negative, CHIP offers risk reduction programs. Clients are linked to programs such as PrEP (preexposure prophylaxis) Access, which connects them to the once-a-day pill Truvada that has been

approved as a prophylactic against HIV infection.

Other available programs include: Family Care Program (FCP), Social Network Strategy (SNS), Ryan White Part A and the Chronic Disease Self-Management Program.

For those who test positive, educators call in a linkage coordinator to conduct a counseling session. The coordinator shares information on risk reduction and links to a medical provider and insurance policies.

“There is an asymptomatic stage where you can live with the virus for 10-12 years and show no signs, which can add to the denial that most get after tests come back positive,” Moore said.

“You can’t let fear cripple you and eventually cause more damage. You can still live a full and healthy life with HIV if you do what you are supposed to do.”

(For more information on CHIP and testing, contact Dana Moore at 901-287-4768 or dana.moore@lebonheur.org. For general questions about other programs, contact CHN Manager Andrea Vincent at 901-287-4764 or andrea.vincent@lebonheur.org.)

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† Joan Lunden, journalist, former host of Good Morning America and senior living advocate.

'Happy and living with the virus'

by Johnesha Harris

Special to The New Tri-State Defender

Twenty-nine.

That's how old Sheila Smith was when she got the diagnosis: HIV positive.

Seventeen.

That's how many years Smith kept her status a secret before seeking out several doctors to get more tests to make sure the original diagnosis was correct.

Today, she helps the Comprehensive High Impact Prevention (CHIP) program reach Shelby County residents. Her job: tell the story of discovering HIV positive status and how she got to where she is today.

"When I speak to people I start by telling a little background about myself," Smith said. "I want them to know me so that they know that I am an everyday person."

She got the HIV virus through sexual transmission. Testimonies such as hers are among the outreach tools that Healthcare providers and various organizations use to get people invested in their personal health status relative to the virus that the Centers for Disease Control reports 1.2 million people are living with in the United States.

Finally fortified with confidence, Smith stepped out of the darkness of secrecy.

"It was very difficult for me to open up and tell those I love that I was living with HIV," Smith said. "I told my mom,

dad, sisters, one of my brothers and a couple cousins and the reaction was beyond my expectations.

"They fully supported me," she said. "One of my sisters threw me a 'celebration of life' party to show that they were all behind me and ready to help me move forward with my life."

Smith knew that there were more people like her living with the disease and doing nothing about it. She started taking her medicine, and sharing her story with close family and friends. Many have asked the same questions:

Do you know the person who gave you HIV?

How do you feel?

How open are you about telling people?

And the most asked question: How does your family treat you?

"I don't look like I am HIV positive, but it's there living with me every day," Smith said. "When I talk to anyone about their situation I know they fear that I will go back and tell someone but I am mostly focused on making sure that everyone is out there protecting themselves and creating a safe environment for themselves and others."

Two years ago, she aligned herself with CHIP.

"Dana Moore (CHIP program supervisor) and I have had lunch plenty of times to discuss the events and get to know each other better since we are working so closely. I like that they want to help all the people who are afraid or just don't know."

With a forward focus, Smith

"When I speak to people I start by telling a little background about myself. I want them to know me so that they know that I am an everyday person."

— Sheila Smith, living with HIV



advocates not being afraid, telling those she encounters to embrace the changes that come in life.

"I enjoy the work I do with CHIP because more people get to see a person that is happy and living with the virus," Smith said.

"My advice to anyone living with the HIV is to go get counseling, pray so that you can keep looking forward and, most importantly, know that you have worth and are of importance to someone; so don't give up."

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Breaking HIV down piece by piece

by Johnesha Harris

Special to The New Tri-State Defender

As National HIV Testing Day (June 27) dawned, Emory University's Dr. Patrick Sullivan and AIDSVu – an interactive online map illustrating the prevalence of HIV in the United States – painted a picture of Memphis as one of the cities most impacted by HIV in the U.S.

Here's the snapshot:

* As of 2014, 5,936 people in Memphis were living with HIV or AIDS and 274 new cases were diagnosed in 2015.

* 83 percent of people newly diagnosed with HIV between 2011 and 2015 were African American.

* 74 percent of people newly diagnosed with HIV between 2011 and 2015 were men.

At Emory, a private research university anchored in metropolitan Atlanta, Sullivan is the lead researcher for AIDSVu. He's done work with the Latino and Hispanic communities in the Atlanta area and is looking to help at risk areas with the same demographics as those in the Atlanta area.

"In the last five years, African and black Americans made up 83 percent of the population diagnosed with HIV," Sullivan told *The New Tri-State Defender*.

"As of 2015, Memphis is ranked 8th in the US for cities with the most unknown HIV positive cases in the country. Today 1 in every 7 persons (in the U.S.) is living with HIV and don't know they have it."

Sullivan stressed the need for HIV positive people to start their treatment as early as possible to avoid harming themselves and/or spreading the disease.



Dr. Patrick Sullivan

AIDSVu: AT A GLANCE

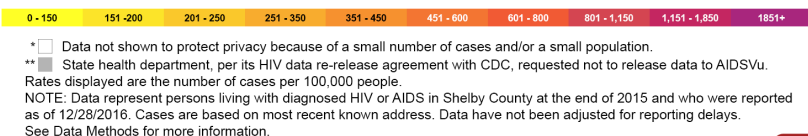
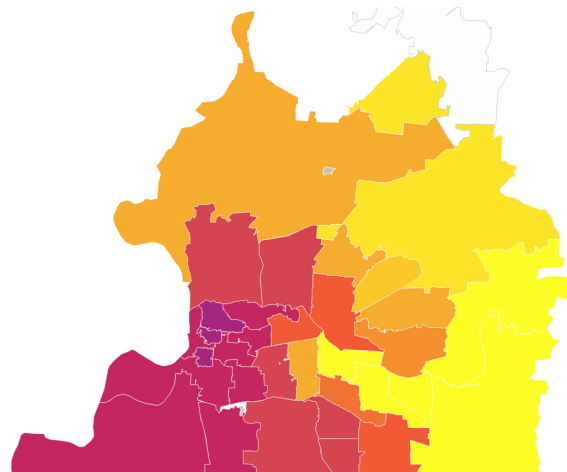
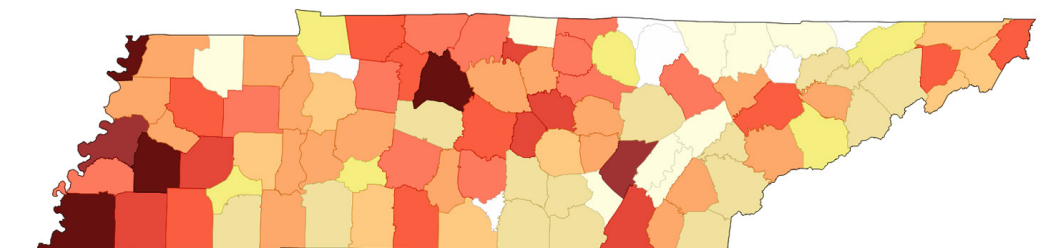
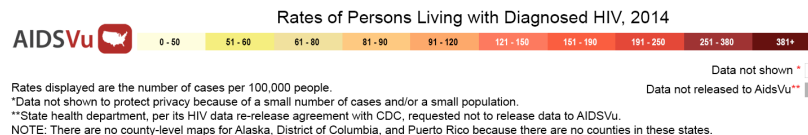
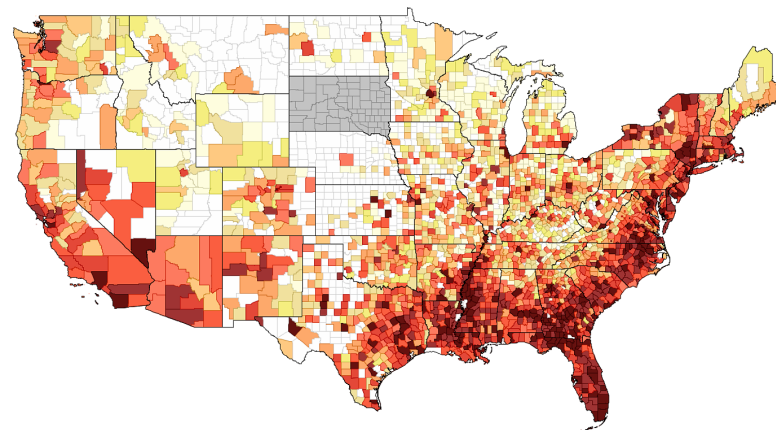
*** AIDSVu is presented by Emory University's Rollins School of Public Health in partnership with Gilead Sciences, Inc. and the Center for AIDS Research at Emory University (CFAR). The project is led by Patrick Sullivan, PhD, professor of Epidemiology and co-director of the CFAR Prevention Science Core. Dr. Sullivan worked in HIV/AIDS surveillance for 12 years at the U.S. Centers for Disease Control and Prevention (CDC), including five years as a branch chief overseeing HIV/AIDS surveillance activities.**

"The more we've learned, the more it's clear that people living with HIV need to move to the next steps in their journey to fight more quickly," Sullivan said. "The chances of giving the virus to someone else goes down once they start to accept their diagnosis and get treatment."

After holding steady for several years, the numbers of people in Memphis contracting the virus is on a steady decline, said Sullivan.

"Testing is your first and most important step," he said. "Anyone between the ages of 13 and 64 should get tested. A person getting tested is not based upon their fears of recent behaviors but a part of a routine checkup that can be done while at the doctors."

Places that provide testing and medical care can be found by accessing aidsvu.org and clicking on the locator tab. Other useful devices on the site include statistics for particular area, help with using aidsvu.org and resources.





BlueCross BlueShield report probes opioid use in Tennessee

**Data show 32 percent
of Tenn. members
with opioid use disorder
received medication-assisted
therapy in 2016**

CHATTANOOGA – BlueCross BlueShield of Tennessee reports that nearly 24 percent of its commercially insured members in Tennessee filled at least one opioid prescription in 2015, compared to 21 percent nationally, according to a new study by the Blue Cross Blue Shield Association (BCBSA).

Data also show 5.5 percent of Tennessee members were on a long-duration opioid regimen in 2015, compared to 3.8 percent nationally, and 32 percent of members with opioid use disorder received medication-assisted therapy in 2016, compared to 37 percent nationally. There are 16.5 per 1,000 members who are diagnosed with opioid use disorder in Tennessee, compared to 8.3 nationally.

The report, “America’s Opioid

Epidemic and Its Effect on the Nation’s Commercially Insured Population,” represents a comprehensive study of national medical claims from Blue Cross and Blue Shield (BCBS) members using opioid painkillers, as well as those diagnosed with opioid use disorder over a seven-year period. (Members diagnosed with cancer or who were undergoing palliative or hospice care were excluded from this analysis.)

The study also finds that:

- * Opioid use disorder diagnoses nationally among BCBS commercially insured members spiked 493 percent from 2010 through 2016, according to BCBSA.

- * Among those 45 and older, women have a higher rate of opioid use disorder than do men. Among people younger than 45, men have

higher rates of opioid use disorder than women. Women fill more opioid prescriptions than males across all age groups.

- * Long-duration prescription opioid use and opioid use disorder overlap by region, with the highest rates in the South and the Appalachian Region.

- * The 65 percent rate of increase in the use of medication-assisted treatments lags behind the 492 percent rate of increase in opioid use disorder diagnoses from 2010 through 2016.

- * States that have experienced the greatest growth in the use of medication-assisted treatments are not necessarily the areas most impacted by opioid use disorders. High rates of treatment relative to opioid use disorder occur in New

England, and lower rates occur in the South and parts of the Midwest.

“Opioid abuse and misuse is one of the most pressing public health concerns in our state, and we feel a responsibility to do our part to address this issue,” said Dr. Andrea Willis, chief medical officer of BlueCross BlueShield of Tennessee.

BlueCross BlueShield of Tennessee has taken action against the escalating opioid crisis on several fronts. Efforts include implementing medical policy changes to require more stringent prior authorization limits and prescription quantity limits, and increasing communication with providers about prescribing pattern issues.

SEE OPIOID ON NEXT PAGE

OPIOID

CONTINUED FROM PAGE 7

The company's Health Foundation invested \$1.3 million in community outreach, including expanding the Coffee County Anti-Drug Coalition's Count It! Lock It! Drop It! program to all 95 Tennessee counties. In addition to placing secure drug drop boxes in each county, efforts have included the hosting of drug take-back events, funding first-responder training and opioid overdose antidote kits for law enforcement, and a statewide public awareness campaign.

The BCBS Health IndexSM identifies substance use disorder as the fifth most impactful condition affecting the health of commercially insured members in the U.S.

(For more information, visit www.bcbs.com/healthofamerica.)

'Opioid abuse and misuse is one of the most pressing public health concerns in our state, and we feel a responsibility to do our part to address this issue.'

**— Dr. Andrea Willis
Chief Medical Officer
BlueCross BlueShield of Tennessee**

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Dr. Jamie provides four tips for guarding your heart

by Dr. Jamie Hardy

Special to The New Tri-State Defender

As The Lifestyle Pharmacist, I am on a mission to help women just like you eat healthier, effectively manage stress, and exercise more so that you can be fit, fabulous and fulfilled without prescribed pills.

Here are some alarming but accurate statistics from the American Heart Association about cardiovascular disease in African-American women:

♥ Cardiovascular disease is the leading cause of death for African-American women, killing over 48,000 annually.

♥ Of African-American women ages 20 and older, 48.3 percent have cardiovascular disease.

It's important to understand that being young does NOT make a woman exempt from developing heart disease. Heart disease can happen at any age, so it's important to start developing a lifestyle that will minimize your risk TODAY!

Here are four tips for guarding your heart against heart disease:

1. Don't smoke and avoid secondhand smoke – According to a U.S. Surgeon General report, nonsmokers are up to 30 percent more likely to develop heart disease or lung cancer from secondhand smoke exposure. If you are a smoker, it is important that you start taking steps to kick your cigarette habit.

2. Drink in moderation. Heavy drinking can cause an increase in your blood pressure. Remember that

for women, moderate drinking is no more than one drink per day, which translates to one 4 oz. glass of wine, 1 cocktail, or 1 beer.

3. Reduce your stress. Long-term stress is BAD for your health. It raises your heart rate and blood pressure both of which can damage the walls of your arteries. The use of stress management techniques to soothe your mind and body are critical. Try deep breathing, yoga, massage, journaling or even get a manicure and pedicure. The point is to do something EVERYDAY to destress.

4. Don't skimp on self-care. Life is challenging and fast paced, especially when juggling a business, relationship and a career. Be sure that you resist the urge to put yourself last to save time. Getting physical activity



Dr. Jamie Hardy
The Lifestyle Pharmacist

for 150 minutes per week, getting a full night's sleep and eating healthy are absolute MUSTS.

(For even more lifestyle tips from Dr. Jamie and to connect with other FABULOUS women on the journey to developing a heart healthy lifestyle, visit www.myfabsquad.com and join in on the fun.)

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Summer exercise is great . . . just be careful out in the heat

Courtesy of blackdoctor.org

Warmer, sunny days are finally here — which means you're more likely to take your workout outdoors. Only, during a hot and humid day, running, biking, hiking, even walking can feel overwhelming. So, we've compiled a list of tips to help you get summertime fine in the heat — safely!

Invest in lightweight, breathable gear: Wicking clothes are a must! By absorbing moisture from your body, the fabric allows you to feel cooler and refreshed.

Drink up: Staying hydrated will help prevent some of the symptoms you may experience while exercising in the heat and humidity, such as dizziness, stomach cramps and headaches.

Be flexible: No one said you have to exercise during peak heat hours. Keep an eye on good ole mother nature and hit the trail during low-temp hours — such as early morning or dusk.

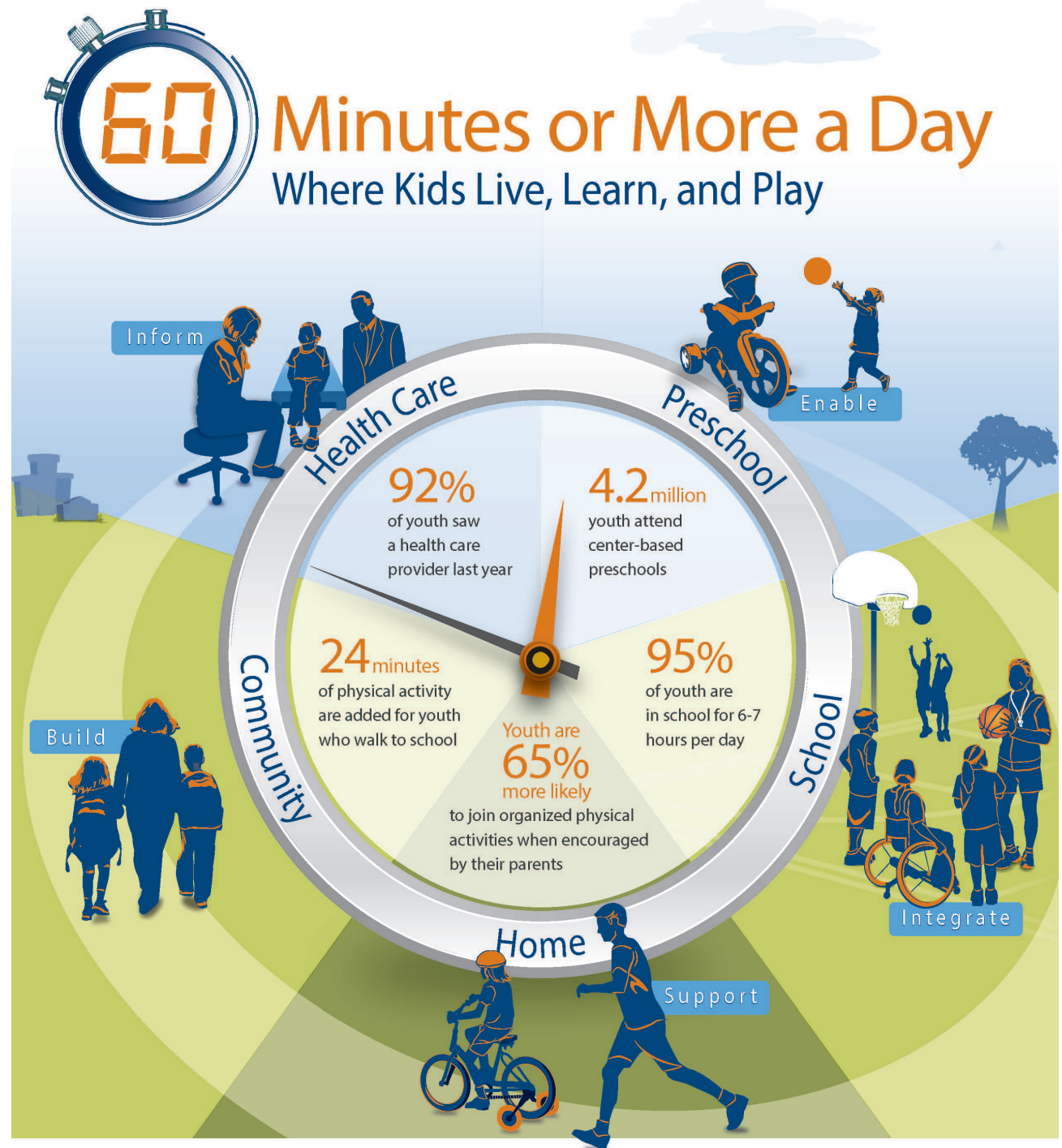
Switch it up: On more hot and humid days, choose cooler cardio activities like biking in the wind or swimming. That's right! All those hours spent splish-splashing around is helping you trim down. According to Health Magazine, lap swimming burns a respectable 476 calories per hour.

Location, location, location: Hit a shady bike trail or take a jog along the beach. It can be 10 or more degrees cooler than hitting your neighborhood paths.

Split up your workouts: Do ONLY what you can, or exercise twice in one day. It's not uncommon for professionals to split up their workouts as they're pressed for time. This is also a great tactic for those working up to exercising in the hot sun. The goal is to avoid overexertion and dehydration.

Ease up: If you're dead set on maintaining your current workout, reduce the intensity or transition to intervals to prevent overheating.

Take a Kit Kat break: Maybe not a chocolate bar — but pick up a piece of fruit or a protein shake to assist in



Physical activity is critical for overall health.

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maintaining energy.

Cold shower: When all is said and done, cool down with a warm to cold shower. Sure, our bodies have built-in cooling systems that help us adjust to heat. That's why we sweat. But

this system can fail if we're exposed to soaring temperatures for too long. A quick, cool rinse should help your body temp cool down at a moderate pace — prevent heat exhaustion.

More importantly, know when to

say NO! Pay heed to the heat. Listen to your body. If at any time you begin to feel weak, light-headed, dizzy, nauseous, or intense cramps, take it inside. Not doing so could result in severe injury or worse, stroke!



Whether you prefer to lace up your sneakers and run or some other choice, move to get the aerobic activity your body needs.
(Courtesy photo/StatePoint)

Top tips for incorporating fitness into your routine

Staying active doesn't just keep a waistline in check, it benefits every part of the body, including the brain.

Now is the time to renew your commitment to staying fit. Here are some top tips to get moving more.

Rethink your commute. Leave the car keys at home and lace up your sneakers instead. Commuting to work by bike is a great way to bookend the workday with some aerobic activity.

Take a walk. Even the most adventurous weekend warriors are sometimes required to sit or stand in place for long stretches in the workplace. If your job keeps you sedentary, break up the day with a brisk walk outdoors during lunch. Throughout the day, stretch your legs with a loop around your workstation. It sounds counter-intuitive, but a short break spent being physically active can help boost your overall productivity.

Get out of town. Skip the gym and plan a day or weekend trip dedicated to physical fitness. Whether it's hiking a nearby trail, kayaking a local river, or doing yoga in the park, there's nothing like getting your exercise fix in nature.

Gear up. New tech gear is helping support people's efforts to get outdoors and stay fit, so consider gearing up before your next adventure. For example, Casio's PRO TREK WSD-F20 Smart Outdoor Watch is water-resistant and equipped with GPS capabilities and a full-color map display. Users can download maps in advance to continue getting navigation guidance even when they are offline or out of range. Vital information, such as travel speed, elapsed time and distance, is close at hand without checking your smartphone – making it a good choice for cyclists. Other tools include a compass, altimeter and barometer.

Try something new. Change up your fitness routine from time to time to avoid hitting a plateau. This will keep things mentally interesting so you don't lose interest in exercise. What's more, a new class or activity may "surprise" your body by working different muscles in a new way.

With a few simple strategies and the right tools, incorporating fitness into your life can be fun and easy.

Source: StatePoint



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