Tennessee
CFAR CENTER FOR AIDS RESEARCH

COMMUNITY NEWSLETTER

September 2025

Dear Friends and Partners,

We are thrilled to launch the first edition of the Tennessee Center for AIDS Research (CFAR) Community Newsletter, aimed at sharing updates and collaboration opportunities in the fight against HIV.

Since the first cases were recognized in the U.S. in 1981, significant progress has turned HIV into a manageable condition. However, over one million people in this country, and 40 million globally, still live with HIV today, and health inequities continue to affect access to prevention, testing, and care.

The Tennessee CFAR leads research efforts to prevent the spread and support those living with HIV, combining the strengths of Vanderbilt University Medical Center, Meharry Medical College, the Tennessee Department of Health, and Nashville CARES.

Community partnerships have been essential in advancing testing, treatment, and support, pushing us closer to ending the HIV epidemic. This newsletter will strengthen connections, share research updates, spotlight community voices, and highlight ways to get involved. Together, we can build a healthier future for all.

John Koethe, MD

Tennessee CFAR CENTER FOR AIDS RESEARCH

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ABOUT THE **TENNESSEE CFAR**

The Tennessee Center for AIDS Research (CFAR) is a team of four important partners. These are Vanderbilt University Medical Center, Meharry Medical College, the Tennessee Department of Health, and Nashville CARES.

Each group brings its own unique strengths, including teaching, research, health services, and community outreach. Together, they work to stop the spread of HIV and help people living with it, both in Tennessee and around the world.
Even though scientists have made substantial progress in understanding HIV, there are still challenges. The largest number of people living with HIV reside in the Southern United States, where more than half of new HIV cases occur. The Tennessee CFAR is dedicated to supporting individuals in this region and ensuring that research has a tangible impact on people's lives.

The Tennessee CFAR has several major goals. First, it provides cutting-edge research laboratories and other services to support the work being done at all four partner organizations. Second, it helps bring scientists together to work as a team, even if they study different things. Third, it supports young researchers, enabling them to become leaders in the fight against HIV. Fourth, it creates more research opportunities for Meharry Medical College. And finally, it ensures that community priorities shape the research direction so that the results benefit real people.

ABOUT THE **TENNESSEE CFAR**

To reach these goals, the Tennessee CFAR has several special teams, called "cores." The Administrative Core organizes the CFAR services and coordinates its day-to-day activities. The Developmental Core provides small grants to support new projects and helps train early-career scientists. The Clinical Sciences Core helps researchers work with patients and collect samples, such as blood or saliva, for studies. The Laboratory Science Core provides lab tools and special tests that help scientists study HIV more closely, like looking at the virus's genes. The Data Sciences Core helps scientists use math, computers, and statistics to better understand the spread of HIV and how it affects health across the state and across the world. The Implementation Science Core helps transform new discoveries into programs that benefit individuals and the wider community.

All of these groups work together to support HIV research, bring in new scientists, and make sure the work helps real people. The Tennessee CFAR is helping to create a future where HIV is no longer a threat.

UPCOMING **EVENTS**

ART-Associated Weight Gain: Perspectives from Regional, National, and Global HIV Cohorts

Presented by:

Kassem Bourgi, MD

Assistant Professor of Clinical Medicine
Division of Infectious Diseases
Vanderbilt University Medical Center

Wednesday, September 10th, 2025 | 3:00 pm - 4:00 pm ct

CFAR-Wide Seminar Series presented by Tennessee CFAR

Piloting Project FAITH

Rahel Behailu, MPH
Program Executive, Health Equity
Health and Social Services Center of Excellence
YMCA of Greater Seattle

Sponsored in part by:

Thursday, September 18th, 2025 | 3:00 pm - 4:00 pm ct

Inter-CFAR FSRC Monthly Working Group Meeting

CUTTING OUT STIGMA

Cutting Out Stigma (COS) is a community-based health education and multimedia intervention focused on promoting men's sexual health and wellness and combating HIV stigma in the Black community in Tennessee, supported by the Tennessee CFAR. On May 12 of 2025, Cutting Out Stigma (COS) hosted a Celebration and Community Forum. After the reception, opening remarks were made by Aima Ahonkhai MD, MPH and Sharon Hurt Med, LHD. They summarized key findings from the project and then transitioned into a panel discussion.

This Panel Discussion was comprised of COS barbers including KG Anderson (Fade Doc Barbershop), DeJuan Conley (Anointed Handz), Rashad Donaldson (Urban Class Barbershop), Corey Robinson (Executive Barber Lounge), and Aric Standard (Fade Doc Barbershop). This panel was also facilitated by Nathaniel King (Luxury Mobile Barbering & COS Barber Investigator) and Steven Nelson (Distinguished Gentlemen COS Barber Investigator).

If you are interested in learning more about Cutting Out Stigma, please visit their website at cuttingoutstigma.com

PCORI GRANT **AWARDEES**

L. Lauren Brown and Amna Osman Awarded $2.1 Million by Patient-Centered Outcomes Research Institute (PCORI) for a Study on Advancing the Science of Engagement: Trauma-informed Research Co-production to End the HIV Epidemic

A research team from Meharry Medical College and Nashville CARES has been awarded $2.1 million by the Patient-Centered Outcomes Research Institute (PCORI) to improve the quality of research in the Southern United States. The project, spearheaded by Dr. Lauren Brown and Amna Osman, will use a unique model that pairs an academic researcher with a community-based researcher in eight different cities to develop inclusive and psychologically safe strategies for producing community-led research to end the epidemic in the Southern U.S.

If you are interested in learning more - [Click Here]

The Beginning of the HIV/AIDS Epidemic

The history of HIV/AIDS is not just a medical timeline—it is also a record of fear, resilience, and activism that reshaped public health, science, and society. What began as a series of mysterious illnesses among young men in the early 1980s quickly escalated into one of the most devastating epidemics of the modern era.

The earliest reports signaled a crisis that no one yet understood. Doctors and researchers noticed rare infections and cancers in otherwise healthy individuals, suggesting a profound collapse of the immune system. Communities—particularly gay men, people who use drugs, and later women and children—were the first to experience the brunt of the epidemic, often facing both illness and stigma.

Below is a timeline of the first crucial year, 1981, when the medical world and the public first began to grapple with what would later be known as AIDS (Acquired Immunodeficiency Syndrome). These early milestones reveal how quickly the epidemic unfolded and how urgently health officials, researchers, and communities tried to respond.

1981: The First Reports

On June 5, the Centers for Disease Control and Prevention (CDC) published an article in its Morbidity and Mortality Weekly Report describing five young gay men in Los Angeles with Pneumocystis carinii pneumonia (PCP), a rare lung infection. All showed signs of severe immune failure; two were already dead and the rest would soon follow. That same day, New York dermatologist Dr. Alvin Friedman-Kien reported cases of Kaposi's Sarcoma (KS), a rare cancer, among gay men in New York and California. Within days, national newspapers covered the story, and similar cases began surfacing across the country.

In response, the CDC quickly established the Task Force on Kaposi's Sarcoma and Opportunistic Infections. By July 3, a second reported 26 cases of KS and PCP, while The New York Times ran the headline "Rare Cancer Seen in 41 Homosexuals," introducing the term "gay cancer." Soon after, San Francisco's Bay Area Reporter warned its readers about what it called "Gay Men's Pneumonia."

As panic spread, communities began organizing. On August 11, writer Larry Kramer convened more than 80 gay men to discuss the crisis, raising over $6,000 for research—the only new funding for the epidemic that year. By the end of August, the CDC had documented 108 cases, with nearly half already fatal.

Medical institutions also began mobilizing. On September 15, the National Cancer Institute and CDC hosted the first scientific meeting on the new syndrome. Days later, San Francisco doctors Marcus Conant and Paul Volberding opened the nation's first Kaposi's Sarcoma clinic. Meanwhile, pediatric immunologist Dr. Arye Rubinstein identified similar immune deficiency in infants, though his warnings went largely ignored.

On December 10, San Francisco nurse Bobbi Campbell became the first patient to publicly disclose his KS diagnosis, writing a column called Gay Cancer Journal and posting photos of his lesions to raise awareness.

By year's end, 337 cases of severe immune deficiency had been reported in the United States, including 16 children. Of those, 130 people had already died. The epidemic had begun, but it remained nameless, mysterious, and frightening.

To learn more about the history of HIV/AIDS - Click Here