



# COMMUNITY NEWSLETTER

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April 2026



**Friends For All Clinic in Memphis to Expand HIV Prevention, Treatment, and Whole-Person Care Through Mission-Aligned Transition**



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## FRIENDS FOR ALL CLINIC IN MEMPHIS TO EXPAND HIV PREVENTION, TREATMENT, AND WHOLE-PERSON CARE THROUGH MISSION-ALIGNED TRANSITION

**Memphis, TN** — Friends For All today announced a clinic transition designed to expand access to HIV prevention and treatment, strengthen continuity of care, and ensure the long-term sustainability of high-quality clinical services for the Memphis community at a time of rising need. This decision reflects Friends For All’s proactive leadership in responding to growing HIV-related needs in the Memphis community and its commitment to ensuring continuity of high-quality care for patients.

In recent years, Shelby County has seen a concerning increase in HIV cases, particularly among young people aged 15–34, highlighting persistent disparities and the critical importance of accessible medical care and preventive services. Data from public health reporting show HIV rates in Shelby County have risen significantly over the past five years, with notable increases among adolescents and young adults, reinforcing the urgency of collaborative and community-centered solutions.

“With Memphis experiencing one of the most significant public health needs in the nation, Friends For All reached out to a trusted partner with a shared mission

and deep Tennessee roots to bring expanded access to trusted HIV care for our patients and families,” said Diane Duke, CEO and President of Friends For All.

The partnership between Friends For All and Nashville CARES dates back to the earliest years of the HIV epidemic in Tennessee in the 1980s. Drawing on this longstanding relationship, Friends For All approached Nashville CARES — which recently launched a comprehensive care clinic, CARES 360, in Nashville — to explore ways to bring world-class HIV care and expanded access to Memphis. Friends For All selected Nashville CARES because of its aligned mission, values, community understanding, and experience providing high-quality clinical care.

“This transition is about patients and access,” said Amna Osman, MPA, CEO. “Building on the good work the Friends For All team has done over the last 40 years, we agreed that to serve the expanded needs, Memphis deserves expanded clinical capacity, streamlined access to services, and a clinic model built around whole-person care. The Friends For All Clinic will now be CARES 360; it will remain open, and patients will continue receiving services from the team they know and trust without interruption.”

Friends For All provides stigma-free, coordinated care that integrates medical services and wraparound support. The transition will enable expanded capacity and strengthen pathways to care for people living with HIV, those at risk, and other underserved populations.

As part of this transition, Nashville CARES will operate the clinic through its CARES 360 model, which was launched to deliver world-class HIV prevention, treatment, and clinical care across Tennessee. CARES 360 is designed to expand access, streamline care delivery, and meet patients where they are. As the model has grown, Nashville CARES has remained focused on thoughtful, mission-aligned partnerships. Partnering with Friends For All represents the next logical step — extending a proven clinical approach in close collaboration with a trusted Memphis-based organization, while prioritizing continuity of care and patient stability.

Nashville CARES and Friends For All have worked closely to optimize the retention of essential clinic roles that support continuity of care for patients. As part of this transition, there will be minimal reorganization aligned to clinic operations and service expansion. The transition is designed to enhance care access without disruption.

## About Friends For All

For nearly 40 years, Friends For All has provided compassionate care to the Memphis community. Originally focused on HIV and AIDS services, we now offer various low-to-no-cost health and social services, including free HIV and low-to-no-cost STI testing, behavioral health support, and living assistance. Through outreach and support services, Friends For All aims to address the social determinants of health affecting health and wellness in Memphis and the Mid-South.

## About Nashville CARES

Nashville CARES is a leading nonprofit healthcare organization dedicated to ending the HIV/AIDS epidemic in Tennessee. Through comprehensive education, advocacy, and compassionate healthcare services, Nashville CARES supports more than 20,000 individuals each year—whether they are at risk for or living with HIV. The organization offers culturally competent care, rapid access to treatment and prevention tools like PrEP, wraparound social services, and a fully staffed clinic specializing in whole person HIV Prevention, Care, and Treatment with comprehensive, inclusive care including robust case management and follow-up. For more information, visit [www.nashvillecares.org](http://www.nashvillecares.org).



# TENNESSEE CFAR **EVENTS**

CFAR-Wide Seminar Series hosted by Tennessee CFAR

## **Using Alcohol Biomarkers to Understand and Intervene on the Role of Alcohol Use on HIV, TB, and Liver Disease**

**April 8th, 2026 | 3:00 pm - 4:00 pm CST**



[Scan to Register](#)

**Judy Hahn, PhD, MA**

Professor of Medicine  
Division of HIV, Infectious Diseases, and Global Medicine  
Department of Medicine  
University of California, San Francisco



[tn-cfar.org](http://tn-cfar.org)

# UPCOMING EVENTS

Inter-CFAR Faith & Spirituality Research Collaborative  
Monthly Working Group Meeting

## Faith and ART: A Qualitative Study of Religion/Spirituality and HIV-Related Intersectional Stigma Among Black Women Living with HIV in Washington, DC



**Tamara Taggart, PhD, MPH**

Associate Professor  
Department of Urban-Global Public Health  
Perry N. Halkitis Endowed Chair for Advancing LGBTQ+ Public Health  
Director Rutgers Institute for Sexual and Gender Minority Health  
Rutgers School of Public Health



**Khadijah Abdullah, MPH**

Founder  
Reaching All HIV+ Muslims in America (RAHMA)  
National Faith HIV Awareness Day (NFHAAD)  
[www.haverahma.org](http://www.haverahma.org)

**April 16th, 2026**  
**2:00 pm - 3:00 pm CST**



[Join the meeting now](#)  
Meeting ID: 249 764 264 720  
Passcode: Sr2Bp9TH

Dial in by phone  
[+1 615-601-3460](tel:+16156013460)  
conference ID: 942 701 068#



Sponsored in part by:



# EXTERNAL EVENTS

NASHVILLE PRIDE PRESENTS

MARTINIS & JAZZ  
**Casino Night**  
An Evening Full of Chance and Mystery

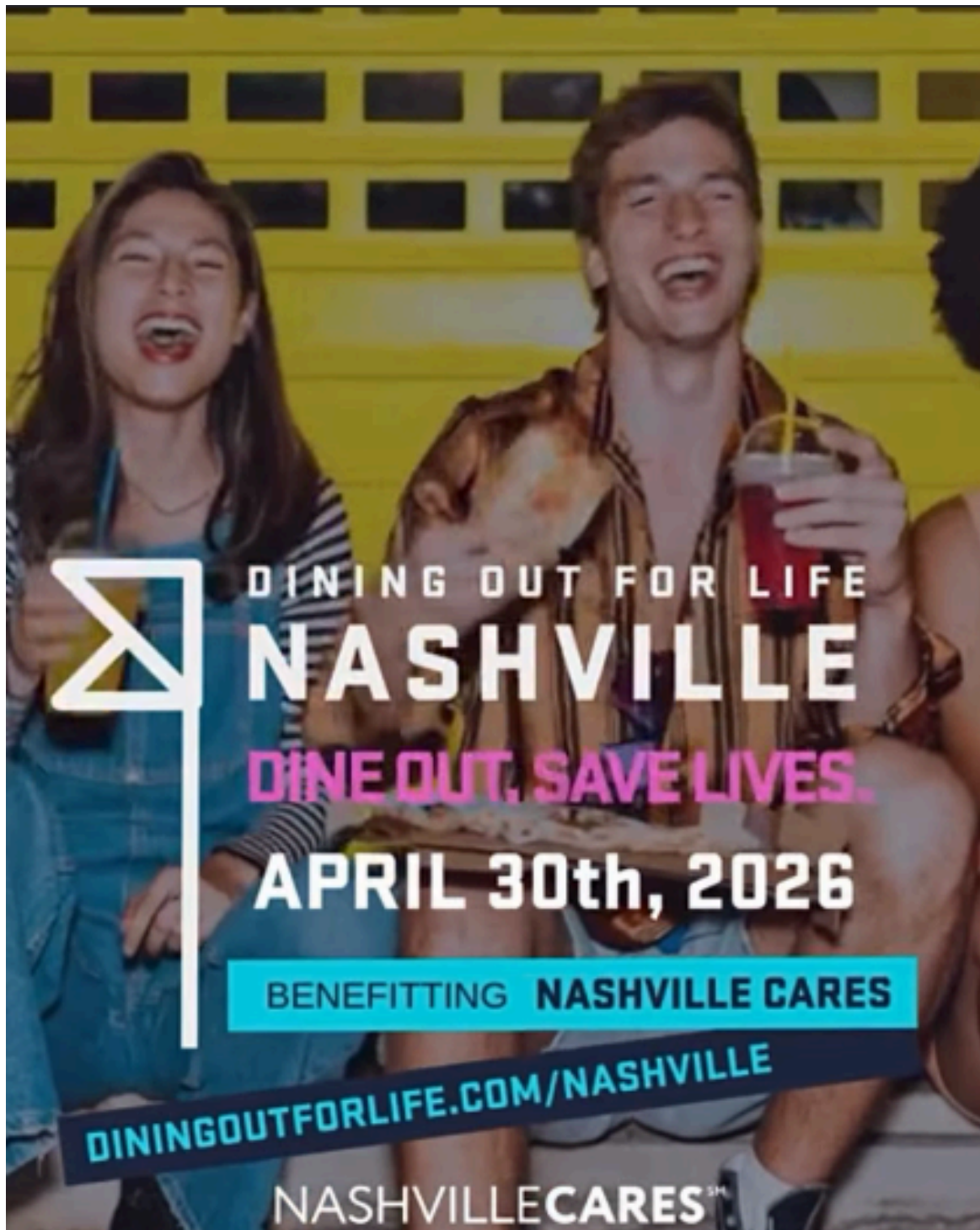
APRIL 15<sup>TH</sup>, 6-9 PM  
CENTER 615 615 MAIN STREET

SILENT AUCTION  
WINE AND MORE!  
PULL

FOOD & DRINK | GIVEAWAYS | PRIZE FOR BEST DRESSED

**[Get your tickets here](#)**

# EXTERNAL EVENTS



**DINING OUT FOR LIFE**  
**NASHVILLE**  
**DINE OUT, SAVE LIVES.**  
**APRIL 30th, 2026**

BENEFITTING **NASHVILLE CARES**

[DININGOUTFORLIFE.COM/NASHVILLE](https://DININGOUTFORLIFE.COM/NASHVILLE)

**NASHVILLE CARES™**

# EXTERNAL EVENTS



## MEMPHIS **PRIDE FEST**

THE MOST COLORFUL WEEKEND OF THE YEAR

**SAVE THE DATE**  
JUNE 4TH-7TH

**SEE YOU THERE!**



# EXTERNAL EVENTS



**SAVE THE DATE**

**SATURDAY  
JUNE 27, 2026**

**BICENTENNIAL  
CAPITOL MALL  
STATE PARK**

# RECENT FINDINGS & DISCOVERIES

Our CFAR researchers are all kinds of HIV experts like physicians, nurses, mental health professionals, epidemiologists, mathematicians, community members, and scientists. We study a range of HIV topics spanning all the way from how cells and the virus work to how communities can improve their support for people living with HIV.



## **IMPORTANT and THANK YOU!**

Our work isn't possible without our volunteers: People living with HIV throughout Tennessee. THANK YOU to our research participants and community advisors. We appreciate you.

## **A Major New Study Shows Changing HIV Medications Does Not Lead to Weight Loss**

Over the past several years, people living with HIV have been living longer and healthier lives thanks to effective treatment. However, doctors and researchers began to notice a new concern: some people were gaining more weight than expected after starting certain HIV medications. In particular, weight gain appeared more common with a class of drugs called integrase inhibitors (INSTIs), especially when combined with a medication called tenofovir alafenamide (TAF). This raised concerns because excess weight can increase the risk of other health problems, such as diabetes and heart disease. In response, researchers working in the Advancing Clinical Therapeutics Globally (ACTG) network designed a study to learn whether changing HIV medications could help people lose weight or improve their overall health.

The ACTG A5391 study, also called the “Do-IT” trial, was designed to answer this important question. This was the first large, carefully controlled study to test whether switching HIV treatment could lead to weight loss or better metabolic health in people who already had obesity. The study included 147 participants from 25 sites across the United States. Importantly, about half of the participants were women and Black individuals—groups that are often underrepresented in research but are at higher risk for weight gain on HIV treatment. The study was led by Dr. John Koethe from the Tennessee CFAR, and the Vanderbilt ACTG site, located at the Vanderbilt Comprehensive Care Clinic, was one of the highest-enrolling study sites. Dr. April Pettit, Dr. David Haas, and Beverly Woodward, MSN, RN, from the CFAR Clinical Science Core, were involved in the study.

Participants in the study were already taking an INSTI- and TAF-based regimen. They were randomly assigned to either stay on their current treatment or switch to a different regimen that included a medication called doravirine (DOR), with or without another drug called tenofovir disoproxil fumarate (TDF). Researchers then followed participants for 48 weeks (about one year) and measured many health outcomes. These included body weight, waist size, body fat, cholesterol levels, blood sugar control, bone health, and kidney function.

At the end of the study, the results showed that switching HIV medications did not lead to meaningful weight loss or improvements in metabolic health. On average, weight changes were small, and there were no important differences between those who switched medications and those who stayed on their original treatment. This was true even for groups thought to be at higher risk, such as women, Black participants, and those who had already gained significant weight before the study. The good news is that all participants who switched medications were able to keep their HIV under control, and there were no major differences in side effects, bone health, or kidney function between the groups.

Overall, the A5391 study provides strong evidence that simply changing HIV medications is not enough to reverse weight gain once it has already occurred. Instead, managing weight and reducing health risks for people with HIV will likely require other approaches. These may include healthy eating, regular physical activity, medications specifically designed for weight loss, or even surgical options in some cases. This study helps guide doctors and patients toward more effective strategies for staying healthy while living with HIV.

**[Click here to learn more](#)**



**John R. Koethe**  
MD, MSCI



**David W. Haas**  
MD



**Beverly Woodward**



**April Pettit**  
MD, MPH, FIDSA

# HIV HISTORY 1985

In this pivotal year of the HIV/AIDS crisis, mounting data, scientific clarity, and growing activism reshaped the national response. The CDC reported a dramatic surge in AIDS cases—more in 1985 than all previous years combined—revealing the epidemic’s accelerated pace and the urgent need for action.

Scientific consensus strengthened when international experts officially name the virus Human Immunodeficiency Virus (HIV). At the same time, minority leaders met with the U.S. Surgeon General, marking the unofficial founding of the National Minority AIDS Council and highlighting the epidemic’s disproportionate impact on communities of color.

Public health infrastructure expanded as major foundations and federal agencies launched new programs to deliver coordinated care in hard-hit cities, signaling a shift toward long-term community support. Federal leadership became more visible when the Surgeon General’s Report on AIDS called for nationwide education, early sex-education programs, increased condom use, and voluntary testing. Soon after, the CDC underscored deep racial disparities, especially among children with perinatally acquired AIDS.

The year culminated with an influential Institute of Medicine report urging a large-scale public health campaign, stronger national coordination, and billions in new investment—solidifying the recognition that confronting HIV/AIDS demands both scientific progress and sustained societal commitment.

**[Click here to learn more](#)**

# OPPORTUNITIES TO ENROLL INTO RESEARCH STUDIES

Local CFAR investigators lead studies to improve the lives of people living with HIV, to protect people from acquiring HIV, and other important issues.

Studies are looking for:

- people living with HIV and depression, to study treatment
- people living with or without HIV, to study gum disease
- Black or multiracial women who are sexually active
- people living with HIV who regularly drink alcohol
- people without HIV, to find a vaccine against HIV
- men without HIV, to study long-acting PrEP to prevent HIV

Studies typically provide compensation to participants.

If you know of studies that we missed, please let us know at: [tn-cfar@vumc.org](mailto:tn-cfar@vumc.org)



## **Do you find it hard to enjoy the things you used to love?**

If you are living with HIV and are experiencing depression, you may qualify for a new study.

A research team at Vanderbilt is doing a study to find a better way to treat depression in people living with HIV. The study will compare two different medications. Half of the people who sign up will take a medication that's already commonly used for depression. The other half will take a medication that is used to treat a different condition but that may help with depression in people living with HIV. Our researchers want to learn if the medications improve symptoms of depression without having too many side effects.

Total Compensation for  
completing this trial is \$775



### **Ready to get started?**

Scan the QR CODE to see if  
you are eligible

Approved by Meharry IRB  
Expires on 10/13/2026

## MEHARRY MEDICAL COLLEGE SCHOOL OF DENTISTRY

### Volunteers needed for research project:

### Effect of dental care treatment on gum disease with and without HIV

The purpose of the study is to determine the best way to remove bad bacteria from the mouth and provide better dental treatment

#### Who Is Eligible To Participate?

-Adults that are not pregnant, with or without gum disease

Participants will receive \$50 for each visit

(5 visits): total \$250

Interested?  
Scan QR Code

Complete short survey,  
and the research team will  
contact you



#### If you have questions, please contact

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Email: [eharris@mmc.edu](mailto:eharris@mmc.edu)

## Are you a Black woman living in Middle Tennessee?

Researchers at Vanderbilt University Medical Center are exploring HIV prevention among Black women in Middle Tennessee. Participation includes one brief survey and a one-time interview at a time chosen by you.

### We would love to hear from you if:

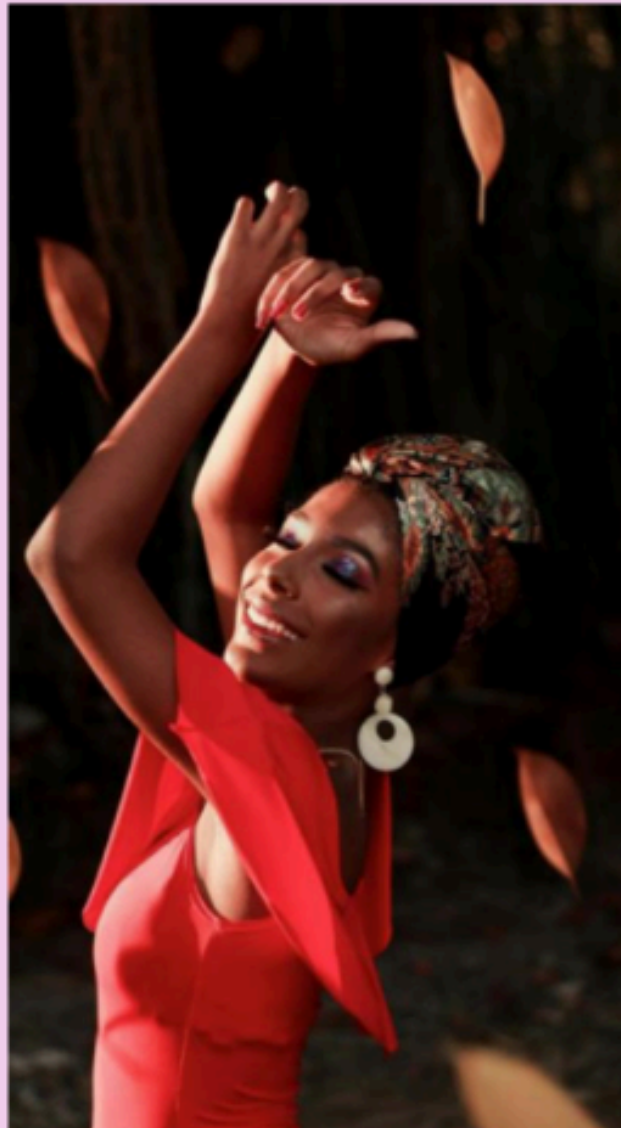
- You are aged 18 years and over
- You are a woman
- You are Black, including multi-racial
- You are or have been sexually active with a man in the past year

Participants are compensated with up to \$50 in e-gift cards for their time and contribution to better understanding preventing HIV in our community.

**If you are interested in participating, scan the QR code below for more information!**



Date of IRB Approval: 10/14/2025





**META  
HIV CVD**

# IF YOU HAVE HIV, THIS STUDY MAY BE FOR YOU!

## MICROBIOME, METABOLITES, AND ALCOHOL IN HIV TO REDUCE CVD

We're looking for adults ages 18 and older who drink alcohol regularly, are HIV+, and take antiretroviral therapy. We want to see whether taking a supplement called a probiotic can help with some of the gut-related health problems related to alcohol use and HIV.



### Participants will be asked to:

- Come to 5 study visits at Vanderbilt over 1 year
- Complete study phone calls about once a month
- Have their blood drawn
- Provide stool samples

Total compensation for  
completing the entire  
study is \$675

**Take our survey to see if you are eligible!**

**<https://redcap.link/metastudy>**

# HIV VACCINE STUDIES, TO DISCOVER A VACCINE THAT PROTECTS PEOPLE FROM ACQUIRING HIV



In the United States HIV disproportionately affects certain groups and populations; however, HIV can affect anyone. Worldwide there are currently over 40 million people living with HIV. That number is growing.

The Vanderbilt HIV Vaccine Program is looking for healthy adults (ages 18-55) from all walks of life who are not living with HIV to participate in an HIV prevention study.

You cannot get HIV from participating in the study.

Volunteers must be available locally for approximately 12 months. Volunteers will be compensated. You can help fight the HIV/AIDS epidemic

Call 615-936-7327 or email [vic.sorrell@vumc.org](mailto:vic.sorrell@vumc.org) for more information.

In order to develop HIV prevention methods that will work for everyone, we need help from everyone!

ALL RACIAL AND ETHNIC GROUPS ARE ENCOURAGED TO CONTACT OUR PROGRAM.

# EXPRESSIVE

## Together we can help advance HIV prevention research



### Learn about the EXPRESSIVE clinical research study for people who could be exposed to HIV

PrEP (pre-exposure prophylaxis) medications may help people at risk of being exposed to the human immunodeficiency virus (HIV) and lower their chance of becoming infected.

This study is comparing an investigational study medicine to an approved PrEP medicine to assess safety, how the investigational study medicine functions in the body, and any side effects (tolerability).

You may qualify to take part in this study if you are at least 16 years of age and:

- Do not have HIV
- Are a cisgender man (assigned male at birth and identify as male), transgender woman (assigned male at birth and identify as female), transgender man (assigned female at birth and identify as male), or gender nonbinary (assigned any gender at birth and do not identify as exclusively male or female)
- Have had receptive anal sex without a condom in the past year (not counting sex in a committed relationship) and **have at least 1** of these situations:
  - Had receptive anal sex with 2 or more partners in the last 3 months, no matter if you used a condom or not.
  - Had rectal or urethral infections like gonorrhea, chlamydia, or syphilis in the last 6 months.
  - Used any stimulant drugs while having sex in the last 3 months.

There are additional eligibility criteria, which the study team can discuss with you.

**To learn more, including the possible risks and benefits of participation, please contact:**

**Call: 615-327-6353**

**Email: [gstanton@mmc.edu](mailto:gstanton@mmc.edu)**

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April 2026

Thank you to **L. Lauren Brown**, PhD, LCSW, **Tiye U. Link**, Ed.D., MDiv, M.S. MBA, and **Debbie Barnett** for collaborating with us on this issue of the Tennessee CFAR Community newsletter. Your contributions and insights have enriched our content and helped us highlight the incredible work being done across our community. We are grateful for your support and dedication to advancing research and education.

## Contact Us!

**Website** [tn-cfar.org](https://tn-cfar.org)

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