



COMMUNITY NEWSLETTER

October 2026



**USING A SYRINGE SERVICE PROGRAM-BASED
COMMUNITY ADVISORY BOARD TO EXPAND HIV
TESTING, OVERDOSE PREVENTION, AND PREP
LINKAGE IN A SOUTHERN BLACK NEIGHBORHOOD**



TABLE OF CONTENTS

Page 3 - Using a Syringe Service Program-Based Community Advisory Board to Expand HIV Testing, Overdose Prevention, and PrEP Linkage in a Southern Black Neighborhood

Page 6 - Tennessee CFAR Events

Page 8 - External Events

Page 11 - Recent Findings & Discoveries

Page 14 - HIV Awareness Days

Page 15 - Opportunities to Enroll in Research Studies



USING A SYRINGE SERVICE PROGRAM-BASED COMMUNITY ADVISORY BOARD TO EXPAND HIV TESTING, OVERDOSE PREVENTION, AND PREP LINKAGE IN A SOUTHERN BLACK NEIGHBORHOOD

Researchers and community partners, including one collaborator of the Tennessee Center for AIDS Research, worked together to explore how HIV and overdose prevention services could better reach Black communities in Memphis in a recent publication in the Journal of Racial and Ethnic Health Disparities entitled “Using a Syringe Service Program-Based Community Advisory Board to Expand HIV Testing, Overdose Prevention, and PrEP Linkage in a Southern Black Neighborhood.” Although the South accounts for about 38% of the U.S. population, it accounts for more than half of new HIV diagnoses. The challenge is particularly clear in Shelby County, Tennessee, which includes Memphis. Shelby County has only about 13% of Tennessee’s population but accounts for 39% of the state’s new HIV diagnoses, and Black residents are especially affected (representing more than 80% of new HIV cases in Memphis). At the same time, the region has been heavily affected by opioid and other drug-related overdoses. Syringe service programs offer new, sterile syringes and provide an important opportunity to conduct HIV testing, link individuals to pre-exposure prophylaxis (PrEP) programs, provide naloxone to reverse opioid overdoses, and make connections to medical and social services. Yet the Memphis syringe service program studied here was reaching relatively few Black residents: during one six-month period, only 10% of its 621 clients were Black, despite the high burden of HIV and overdose in the Black community.

The researchers therefore asked an important practical question: How can harm

reduction services be redesigned to be more accessible, relevant, and trusted by Black communities in Memphis? Rather than having researchers develop solutions on their own, the project placed community members at the center of the process. The team created a 12-member Community Advisory Board that included people with professional or lived experience in HIV prevention, substance use, overdose prevention, healthcare, public health, and community services. Over the course of a year, the board worked to identify barriers and develop solutions. The researchers also held two focus groups, including one with women who engaged in sex work and substance use and another with residents and community leaders from a predominantly Black Memphis neighborhood with high rates of HIV and overdose. Participants repeatedly identified mistrust, stigma, safety and privacy concerns, and a desire for services that addressed overall health rather than focusing narrowly on HIV or syringe use.

The community process produced several concrete recommendations. Because most program staff were White and could be viewed as outsiders, the community advisory board recommended “Lunch-and-Learn” meetings with organizations already working in Black communities to build relationships, cultural understanding, and trust. The board also recommended making services more broadly useful by offering different incentives for HIV testing and creating a new Health & Wellness Resource Guide covering HIV prevention, overdose prevention, substance use treatment, and other community resources. Perhaps most importantly, the group recommended bringing services directly to a predominantly Black neighborhood via a small, discreet mobile van parked near a trusted Black-owned barbershop. The existing site was also redesigned to provide greater privacy, basic nursing services, and a “Health & Wellness” area rather than a tent labeled specifically for HIV testing. These changes were

intended to make it possible for someone to seek help without feeling labeled or judged.

This study has an important message for HIV prevention throughout Tennessee and the Southeast: having effective medical tools is not enough if the people who could benefit from them do not feel comfortable accessing them. PrEP, HIV testing, naloxone, and harm reduction services can prevent infections and save lives, but where services are located, how they are described, who provides them, and whether communities trust the organizations offering them can determine whether they are actually used. The authors emphasize that Memphis is unique and that other communities should not simply copy these specific solutions. Instead, they recommend replicating the process: bringing together people with lived experience, trusted community leaders, prevention organizations, and researchers to identify local barriers and design locally appropriate solutions.



The partnership between the UW/Fred Hutch CFAR investigators and MAPC demonstrate important strategies used to support local EHE prevention efforts in Memphis”

said Dr. Latrice Pichon, Professor of Social and Behavioral Sciences at the University of Memphis and a member of the Tennessee CFAR Executive Committee,

“building the local CAB to brainstorm ideas proved effective in making tangible changes in MAPC outreach approaches.”

TENNESSEE CFAR **EVENTS**

CFAR-Wide Seminar Series presented by Tennessee CFAR

BST-2 Restriction and Viral Counteraction

Wednesday, Oct 14th, 2026 | 3:00 PM - 4:00 PM CST



[Scan to Register](#)

Xinhong Dong, Ph.D

Professor

Department of Microbiology, Immunology, and Physiology
Meharry Medical College



tn-cfar.org

TENNESSEE CFAR **EVENTS**

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

Shifting the Narrative: Re-Storying HIV in Faith Communities

Thursday, Oct 15th, 2026 | 2:00 PM - 3:00 PM CST



SPEAKER:

STACY W. SMALLWOOD, PHD, MPH

Executive Director, Faith COMPASS Center
Visiting Associate Professor of Religion & Public Health
Wake Forest University School of Divinity
Winston-Salem, NC



Join the meeting now
Meeting ID: 249 764 264 720
Passcode: Sr2Bp9TH



Sponsored in part by:



TENNESSEE CFAR **EVENTS**

Tennessee CFAR | Implementation Science Core Seminar
Series

Building Equitable Partnerships: Assessing Readiness for Academic– Community Collaboration

Wednesday, Oct 21st, 2026 | 3:00 pm - 4:00 pm CST



[Register](#)



Leslie Pierce, DrPH, MPH

Research Director
Nashville CARES



tn-cfar.org

EXTERNAL EVENTS



24TH



FREE UNITY MARKET & DAY PARTY

SATURDAY, OCTOBER 10, 2026 / THE FORUM: 705 RIVERGATE PARKWAY, 37072



Join us for our 24th annual in-door gathering!

**Small Businesses, Crafters, Retail, Cultural Merchandise,
Specialty Products, Body & Beauty, Fashion & More!**

VENDOR FEES:

\$50 Non-Profit/Individual - Information/Distribution only

\$75 For Profit Business - Information Only (non-food)

\$100 Sales Non-Profit (non-food)

\$125 Sales For Profit Business



nashvilleblackpride.org/vendors



EXTERNAL EVENTS

A promotional poster for 'Hoodies for Hope' featuring a dark background with geometric shapes and a city skyline at the bottom. The top has a horizontal bar with blue, purple, red, and yellow segments. The text is centered and uses various colors (white, red, yellow) for emphasis. Icons for donating, helping, and making impact are at the bottom.

TODAY'S HOPE PRESENTS


HOODIES
FOR
H**PE**

HELP US SPREAD WARMTH AND HOPE!

Starting **October 1st to November 7th**, we are collecting coats, sweaters, and jackets in support of our unhoused neighbors this season

LEADING UP TO OUR

GRAND REOPENING

SATURDAY - NOVEMBER 7
10:00AM TO 2:00PM

1326 STE. B, ROSA L PARKS BLVD
NASHVILLE, TN 37208

 **DONATE**
JACKETS &
HOODIES

 **HELP**
KEEP OUR
COMMUNITY WARM

 **MAKE**
A REAL
IMPACT

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.

CNS Immune Architecture and Cognition in People With HIV

<https://pubmed.ncbi.nlm.nih.gov/42296122/>

This study looked at how HIV and the immune system affect the brain in people whose HIV was well controlled with treatment. Researchers studied brain and blood samples as well as cognitive test results from 12 people with HIV who had passed away. They found that the amount of HIV remaining in the brain was not linked to memory or thinking abilities. Instead, differences in immune cells located in specific brain regions were more closely associated with thinking performance, including memory, attention, and movement. These findings suggest that immune activity in different parts of the brain may have a greater

impact on brain health than the amount of HIV that persists during long-term treatment.

Trauma, Resilience, and Professional Quality of Life in HIV Service Staff

<https://pmc.ncbi.nlm.nih.gov/articles/PMC13391221/>

This study looked at how resilience and trauma affect burnout in people working at an HIV service organization in Tennessee. Researchers surveyed 114 staff members about their mental well-being and work experiences. Staff with higher resilience were less likely to have burnout or compassion fatigue and were more likely to enjoy their work. Older staff also reported lower levels of burnout and compassion fatigue. The results suggest that improving resilience may help reduce burnout and support the well-being of HIV care workers.

Semaglutide and Liver Fibrosis in People With HIV

<https://pmc.ncbi.nlm.nih.gov/articles/PMC13220901/>

This study looked at whether semaglutide (a GLP-1 agonist drug) could improve liver health in people with HIV who had liver disease or fibrosis, also known as liver stiffness. Researchers followed 1,850 adults with HIV who started semaglutide for diabetes or weight loss. They found that semaglutide lowered liver fibrosis scores, especially in people with moderate to severe liver fibrosis. The greatest improvements were seen in participants with the most advanced liver disease. These results suggest that the use of a GLP-1 agonist may help reduce liver damage in people with HIV, particularly those with metabolic health conditions.

The Do IT Study: Doravirine in People With HIV and Obesity

<https://pmc.ncbi.nlm.nih.gov/articles/PMC13393121/>

This study looked at whether changing HIV medications could help reduce body weight in people with HIV and obesity. Participants in the trial were randomly assigned to either stay on their current HIV medication or to change to a new HIV regimen. All participants were originally taking HIV medications called integrase inhibitors (INSTIs). People who changed their HIV regimen started taking doravirine with either tenofovir alafenamide (TAF) or tenofovir disoproxil fumarate (TDF). Doing this let the researchers compare weight change on INSTI medications (people who stayed on their original regimens) versus doravirine (a non-INSTI drug) AND also let them measure differences in weight in people who took TDF versus TAF. After 48 weeks, switching medications did not lead to meaningful weight loss or major changes in metabolic health. The results were similar across different groups, including no differences by sex or race. These findings suggest that changing HIV treatment alone may not be enough to reduce weight gain in people taking antiretroviral therapy.

OCT HIV AWARENESS DAYS

National Latinx AIDS Awareness Day #NLAAD



National Latinx AIDS Awareness Day (NLAAD), observed annually on October 15, highlights the importance of HIV awareness, prevention, testing, and access to care within Hispanic and Latino communities across the United States. Established in 2003 by the Latino Commission on AIDS and the Hispanic Federation, the observance serves as an opportunity to recognize the unique challenges these communities face and to promote education, early diagnosis, and equitable access to treatment and support services. By increasing awareness and reducing stigma, NLAAD helps strengthen efforts to improve health outcomes and advance progress toward ending the HIV epidemic.

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:

- peri or postmenopausal women with HIV and hot flashes
- people living with HIV who drink alcohol, 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
- HIV healthcare providers in Tennessee

Studies typically provide compensation to participants.

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

Are you experiencing **hot flashes** or **night sweats**?

You may be eligible to participate in a study!

We are testing an investigational menopausal hormone therapy for hot flashes, night sweats, and other symptoms

We are looking for study participants who are:

- Women living with HIV
- Aged 40–60
- Perimenopausal or postmenopausal
- Experiencing hot flashes or night sweats



The study lasts up to 5 months. Menopausal hormone therapy consists of a transdermal estradiol gel (to be rubbed on skin) and a progesterone pill.

Total Compensation for completing the study is up to \$775.

Interested? Reach us at: **Call (615) 294-3733**





GLIDER GLP-1 Study

VOLUNTEERS NEEDED!



Seeking volunteers for a study testing the effects of a GLP-1 medication on alcohol intake.

You may be eligible if you:

- ✓ Have HIV
- ✓ Drink alcohol
- ✓ Are 18 or older

Study Details:

- Take GLP-1 or placebo for 3 months
- Attend 3 in-person visits at VCCC
- Complete surveys
- Provide blood and stool samples
- Compensation up to \$375
- Participation lasts 6 months

**Scan the QR code to
see if you are eligible
for this study!**



GET IN TOUCH



One Hundred Oaks
719 Thompson Ln, Suite 37189
Nashville, TN 37204

Date of IRB Approval: 03/25/2026

✉ GLIDERStudy@vumc.org

🌐 redcap.link/GL1DER

☎ (615) 421-8235

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

India Menefield, BS
Ph: 615-327-6745
Email: india.menefield@mmc.edu

Dr. Zaid Khoury, DDS, PhD
Ph: 615-327-6551
Email: zkhoury@mmc.edu

Dr. Leela Alluri, BDS, MSD
Ph: 615-327-6360
Email: lalluri@mmc.edu

Dr. Pandu Gangula, PhD
Ph: 615-497-0459
Email: pgangula@mmc.edu

Dr. Alexys Ferguson, DDS
Ph: 615-327-6360
Email: afkelly@mmc.edu

Dr. Ethel Harris, DDS, MPH, FACD
Ph: 615-327-5782
Email: 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:

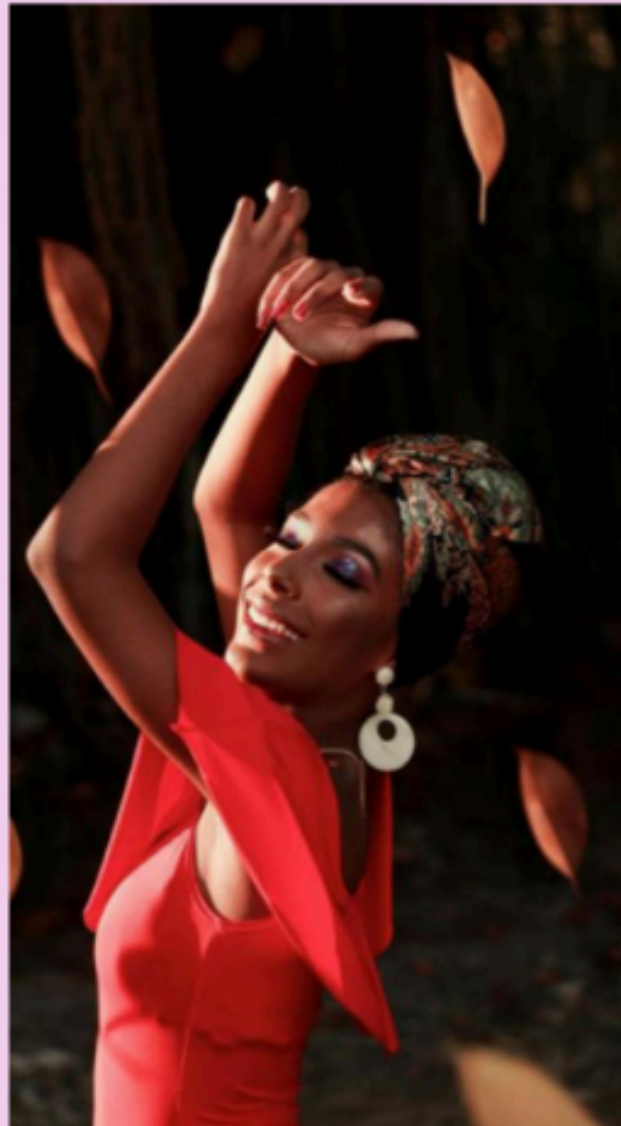
- You are aged 18 years and over
- You are a woman
- You are Black, including multi-racial
- You are or have been sexually active with a man in the past year

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 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

OUR STUDY

- HIV prevention research
- One daily vs. one monthly pill for two years
- Monthly visits
- Compensation for each visit
- Your protection is always our priority

**SCAN QR CODE
FOR MORE
INFORMATION**



CONTACT

- **Principal Investigator :**
 - Dr. Vladimir Berthaud
- **Research Staff | 615-327-6353**

Clinical Research Team, 4th Floor, Old Hospital Building

SHARE YOUR PERSPECTIVE

A RESEARCH STUDY ABOUT HOW HIV CRIMINALIZATION LAWS MAY AFFECT HIV CARE



ARE YOU AN HIV CARE PRACTITIONER?

A doctoral student at the Duke University School of Nursing is recruiting HIV healthcare practitioners to participate in a qualitative research study. The estimated duration of individual practitioner interviews will be between 60 and 90 minutes.

The purpose of this study is to explore HIV healthcare practitioners' knowledge and understanding of state HIV criminalization laws, examine how these laws influence clinical practice and the delivery of person-centered HIV care, and examine practitioners' perspectives across three Southern U.S. states with differing HIV criminalization laws.

Participation is voluntary.

WHO IS ELIGIBLE?

You may qualify if you:

- ✓ are at least 18 years old
- ✓ are a licensed healthcare practitioner (MD, DO, NP or PA)
- ✓ currently provide HIV care in North Carolina, Tennessee, or Texas

PARTICIPANTS WILL RECEIVE

\$75 Amazon e-gift card

LOCATION

Interviews will take place via Zoom

INTERESTED OR HAVE QUESTIONS?

Contact the study coordinator/PI:

Patty Alonso, MSN, RN-BC, AACRN

Email: southerncaresstudy@duke.edu

Text/Phone: (919) 681-0060



DukeHealth

Pro00120082



COMMUNITY NEWSLETTER

October 2026

Thank you to everyone who collaborated 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

Email tn-cfar@vumc.org

Social Media   

**Donate to the
Tennessee CFAR**

