

Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

1 State of Arkansas  
2 86th General Assembly  
3 Regular Session, 2007  
4

# A Bill

HOUSE BILL 2615

5 By: Representative Hardy  
6  
7

## For An Act To Be Entitled

9 AN ACT TO CREATE AN ARKANSAS HIV-AIDS MINORITY  
10 TASKFORCE; TO COORDINATE STATEWIDE EFFORTS TO  
11 COMBAT THE DEBILITATING EFFECTS OF HIV-AIDS ON  
12 MINORITY ARKANSANS; TO IMPROVE HIV-AIDS  
13 PREVENTION, INTERVENTION, AND TREATMENT PROGRAMS  
14 IN THE MINORITY COMMUNITY; AND FOR OTHER  
15 PURPOSES.  
16

## Subtitle

17 AN ACT TO CREATE AN ARKANSAS HIV-AIDS  
18 MINORITY TASKFORCE AND TO COORDINATE  
19 STATEWIDE EFFORTS TO COMBAT THE  
20 DEBILITATING EFFECTS OF HIV-AIDS ON  
21 MINORITY ARKANSANS.  
22  
23  
24

25 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
26

### SECTION 1. Findings.

27 The General Assembly finds that:

28 (1) The incidence of HIV-AIDS is on the rise in Arkansas among  
29 women, African-Americans, and Hispanics;  
30

31 (2) State and federal funds for HIV-AIDS prevention,  
32 intervention, and service programs for minorities in the State of Arkansas  
33 have decreased;

34 (3) More coalition building between community-based  
35 organizations in the execution of HIV-AIDS intervention and prevention  
36 programs in needed to reduce HIV-AIDS in minority communities and to make



1 more effective use of limited resources; and

2 (4) An HIV-AIDS Minority Taskforce is needed to increase public  
3 awareness of the gravity of HIV-AIDS in minority communities in Arkansas.

4  
5 SECTION 1. Arkansas Code Title 20, Chapter 15 is amended to add an  
6 additional subchapter to read as follows:

7 20-15-1801. Title.

8 This act shall be known and may be cited as the "HIV-AIDS Minority Task  
9 Force Act of 2007".

10  
11 20-15-1802. Arkansas HIV-AIDS Minority Taskforce – Creation.

12 (a) The Minority HIV-AIDS Task Force is created.

13 (b)(1) With consideration given to minority and stakeholder  
14 participation and for diversity of race, gender, geographic location, and  
15 sexual identity, the Governor shall appoint the following members to the task  
16 force:

17 (A)(i) Four (4) members who are affected by or are living  
18 with AIDS or HIV or a family member of someone who is living with HIV or AIDS  
19 as follows:

20 (a) One (1) member who is a woman;

21 (b) One (1) member who is Hispanic;

22 (c) One (1) member who is African-American;

23 (d) One (1) member who represents the a  
24 minority population other than Hispanic or African-American.

25 (ii) At least one (1) member under subdivision  
26 (b)(A) of this section shall be from a different congressional district.

27 (B)(i) Three (3) members who are affiliated with minority  
28 community-based advocacy or service provider organizations as follows:

29 (a) One (1) member who is a woman;

30 (b) One (1) member who is Hispanic;

31 (c) One (1) member who is African-American;

32 (d) One (1) member who represents the a  
33 minority population other than Hispanic or African-American.

34 (ii) At least one (1) member under subdivision  
35 (b)(1)(B) of this section shall be from a different congressional district.

36 (C) One (1) member who represents minority treatment

1 providers;

2 (D) Two (2) members who represent faith-based  
 3 organizations who are involved with groups or individuals who are living with  
 4 HIV or AIDS;

5 (E) One (1) member from the Minority Health Commission;

6 (F) One (1) member to represent a local health department  
 7 that is in a rural area with a high incidence of HIV-AIDS;

8 (G) One (1) member to represent the Fay W. Boozman College  
 9 of Public Health of the University of Arkansas for Medical Sciences;

10 (H) One (1) member to represent Division of Health of the  
 11 Department of Health and Human Services HIV-STD Division;

12 (I) One (1) member to represent that Arkansas Community  
 13 Planning Group;

14 (J) One (1) member to represent the Arkansas Medical,  
 15 Dental, and Pharmacy Associations;

16 (K) One (1) member to represent the medical insurance  
 17 industry;

18 (L) One (1) member to represent entities involved in  
 19 hospice care in primarily minority communities; and

20 (M) One (1) member to represent nursing homes that have  
 21 AIDS patients.

22 (2) The Chair of the Senate Interim Committee on Public Health,  
 23 Welfare, and Labor and the Chair of the House Interim Committee on Public  
 24 Health, Welfare, and Labor shall serve as ex officio members of the task  
 25 force.

26 (b) The members of the task force shall draw lots for their term of  
 27 appointment so that six (6) members serve two-year terms; six (6) members  
 28 serve three-year terms, and seven (7) members serve four-year terms.

29 (c)(1) The nonlegislative members of the task force shall serve  
 30 without compensation.

31 (2) However, if funds are available, the non legislative members  
 32 shall be reimbursed by the Minority Health Commission for actual and  
 33 necessary expenses incurred in the performance of their duties for the task  
 34 force.

35 (d) If a vacancy occurs, the Governor shall appoint a person who  
 36 represents the same constituency as the member being replaced.

1       (e)(1) The task force shall elect one (1) of its members to act as  
 2 chair for a term of one (1) year.

3       (2) The task force shall elect one (1) of its members to act as  
 4 cochair to serve in the absence of the chair for one (1) year.

5       (f) A majority of the members shall constitute a quorum for the  
 6 transaction of business.

7       (j) The task force shall meet at least quarterly but may meet as  
 8 necessary to further the intent of this subchapter.

9       (k) The Minority Health Commission shall provide office space and  
 10 staff for the task force as resources allow.

11  
 12       20-15-1803. Arkansas HIV-AIDS Minority Taskforce – Powers and duties.

13       (a) The Arkansas HIV-AIDS Minority Taskforce shall:

14               (1)(A) Conduct a series of public forums around the state to  
 15 take public comment and to discuss the incidence of HIV-AIDS and the  
 16 effectiveness of prevention and outreach programs within the minority  
 17 population.

18               (B) One (1) of the public forums required under  
 19 subdivision 9a)(1)(A) of this section shall be held in each of the state’s  
 20 congressional districts.

21               (2) Study ways to strengthen HIV and AIDS prevention programs  
 22 and early intervention and treatment efforts in the state’s African-American,  
 23 Hispanic, and other minority communities;

24               (3) Study ways to address the needs of the state’s minorities  
 25 who have AIDS and their families;

26               (4) Prepare and submit a report of task force findings and  
 27 recommendations to the Governor, the President of the Senate, the Speaker of  
 28 the House of Representatives, and the Division of Health of the Department of  
 29 Health and Human Services on or before November 1, 2008.

30       (b) The report required under subdivision (a)(4) of this section shall  
 31 include:

32               (1) Specific strategies for reducing the risk of HIV and AIDS in  
 33 the state’s minority communities;

34               (2) A plan for exchanging information and ideas among minority  
 35 community-based organizations that provide HIV and AIDS prevention services;

36               (3) The needs of prevention and treatment programs within

1 minority communities and the resources that are available within minority  
 2 communities;

3 (4) Specific strategies for ensuring that minority group members  
 4 who are at risk of HIV infection and AIDS seek testing;

5 (5) Specific strategies for ensuring that minority group members  
 6 with HIV or AIDS are provided with access to treatment and secondary  
 7 prevention services;

8 (6) Specific strategies to help reduce or eliminate high-risk  
 9 behaviors in minority group members who test negative for HIV-Aids but  
 10 continue to practice high-risk behaviors; and

11 (7) A plan to outline the implementation of the recommendations  
 12 of the task force.

13 (c) The task force shall also consider development of the following:

14 (1) Risk reduction and education programs for groups determined  
 15 by the Task Force to be at risk of HIV infection;

16 (2) In consultation with a wide range of community leaders,  
 17 education programs for the public;

18 (3) Pilot programs for the long-term care of individuals with  
 19 AIDS or AIDS-related condition, including care in nursing homes and in  
 20 alternative settings;

21 (4) Programs to expand regional outpatient treatment of  
 22 individuals with AIDS or AIDS-related condition;

23 (5) A program to assist communities, including communities of  
 24 less than five thousand (5,000) population, in establishing AIDS task forces  
 25 and support groups for individuals with AIDS, AIDS-related condition, and HIV  
 26 infection; and

27 (6)(A) A statewide HIV and AIDS prevention campaign directed  
 28 toward minority group members who are at risk of HIV infection.

29 (B) The Minority Health Commission shall assist in the  
 30 development and administration of the campaign.

31 (C) The campaign to be considered under subdivision (5)(A)  
 32 of this section may do any of the following as resources dictate:

33 (i) Use a variety of means of communication,  
 34 including television, radio, outdoor activities, public service  
 35 announcements, and peer-to-peer outreach;

36 (ii) Provide information on the risk of HIV and AIDS

1 infection and strategies to follow for prevention, early detection, and  
2 treatment;

3 (iii) Use culturally sensitive literature and  
4 educational materials; and

5 (iv) Promote the development of individual skills  
6 for behavior modification.

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8 SECTION 2. The work of the Arkansas HIV-AIDS Minority Taskforce that  
9 is developed under this subchapter is in addition to any programs developed  
10 and administered by the Division of Health of the Department of Health and  
11 Human Services.

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13 SECTION 3. The Task Force shall cease to exist on December 31, 2015.