SUPPORTING EFFECTIVE INTERVENTIONS, ADVOCACY AND POLICY WORK ON BEHALF OF YOUNG BLACK MSM LEADERS

Valond Octave 6-16-15

Artel:

The HIV epidemic is devastating black men who have sex with men. HIV prevalence is estimated at 32% among BMSM.

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A strategic convening with young black MSM leaders was held June 14-16, 2015, at the Columbia University Mailman School of Public Health in New York City.

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To give some background, in June of 2014, the M•A•C AIDS Fund supported the Mailman School of Public Health at Columbia University to conduct a desk review of the context of the HIV epidemic among black men who have sex with men (BMSM) in the United States. The review was based on interviews, analysis of research, and government philanthropic interventions. It indicated that there were particular leadership access and advocacy issues for young men aged 35 and younger. As a result of this review, a convening was held a year later, June 14-16, at the Mailman School of Public Health. The convening was a collaboration between 24 YBMSM leaders from throughout the United States, the M•A•C AIDS Fund, the Mailman School of Public Health at Columbia University, and The Foundation for AIDS Research (amFAR).

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I'm Sabrina Artel, and I spoke with some of the young leaders at the convening. The 24 young leaders all work on HIV/AIDS advocacy in some

capacity. This includes direct services provision, research, policy work, organizing, grants management, the arts, and faith-based work.

[00:01:30]

Valond Octave is a well-respected HIV/AIDS advocate, educator and community organizer. He grew up in pre-Katrina New Orleans, and it was that experience that made him become invested in the fight to neutralize HIV/AIDS-related stigmas and join organizations advocating for social justice, rights and equity among the black LGBT community.

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In 2011, he helped develop A.M.E.R.I.C.A.N Men; a grassroots initiative focused on addressing the many social justice issues within the Black LGBT community in New Orleans. Through his work with Brotherhood, he was able to build a rapport through outreach with the NO/AIDS taskforce of New Orleans.

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As a Health Specialist, through the MPowerment Project, he was able to engage and re-engage over thirty young Black MSM into care. Valond is currently employed as a Behavioral Intervention Specialist for the Houston Area Community Services (HACS) and remains dedicated to the eradication of the HIV/AIDS epidemic. [00:02:21]

Octave:

My name is Valond Octave. I'm born and raised in New Orleans, Louisiana. I've lived there for about 26 years of my life. And then I recently moved to Houston, Texas, 2 years ago. And so, my advocacy work in HIV prevention started in New Orleans, and it started because I had a lot of my social circle to become affected, and a lot of people that were close to me did not know how to handle that ... I mean, they were very stereotypical. I heard a lot of negative talk around HIV and people living with HIV in my community around my peers.

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And so, I became interested because I didn't want to be affected, nor did I want to be one of those individuals talked about, and I wanted to disseminate the

information around HIV and how to prevent that, and how to help people like me get into care ... and that's how my work started in HIV prevention.

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And since I was well-connected in the community, it was easy for me to make connections with those individuals.

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Artel:

How was that connected to social justice issues?

Octave:

So, back home, social justice issues within the African American community — it's pretty high. There are a lot of convictions that shouldn't be. And especially when we talk about young black gay men in New Orleans who are being marginalized or ... or, not marginalized, but who are pretty much being discriminated against and picked on just because of the way they carry themselves. If you're on a corner, they assume that you're doing something, and so they pull you over, they stop you, they take you to jail for unnecessary reasons. And it relates to HIV because these people have no direct contact to care.

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I had some close friends ... and New Orleans is very small, and so the community is very close-knitted. And so, one thing happens, and pretty much everybody knows about it.

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I lost some friends, to be honest, to HIV, and it was then when I realized, "This is really close to home. I don't want to be one of those individuals, and I don't want to see other close people to me fall under that category." And so, that's what kind of pushed my efforts into trying to eliminate some of that stigma and some of those barriers that prevent healthy living.

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Artel:

And with the work that you've been doing in New Orleans, what would you say are the many facets of the social justice issues within the black LGBT community? What are those intersections?

Octave:

So, when I was doing social justice work in New Orleans, that's how I met Terry. And so, it was a grant that was not very concise, and so I had to figure out ways to meet those deliverables. And it was geared towards trying to figure out what were those issues in New Orleans. So, I did surveys and I found out that some of those issues were just stereotypes – being stereotyped, and just due to your look, being picked on by the police. New Orleans police were very corrupt to me. I was picked on, and I never knew why because I know that I don't carry myself in a ... Like, I carry myself in a certain demeanor, and I never understood why I was always picked up.

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But I also had some other friends and very close contacts, and I've heard stories that they were abused; they were incarcerated for no reason ... made-up reasons; and I wanted to at least be a voice for those individuals. Whatever that looked like, I just wanted to be at the table and be a voice for those people that could not make it to the table.

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In Houston, I work for Houston Area Community Services, and it's a nonprofit organization that focuses on providing HIV medications and other health services. And when I first moved to Houston I did HIV prevention for the Houston area, and then that's when I moved to housing case management under HOPWA, working with housing people living with HIV and AIDS. And so, what I do there is case management work. I meet with individuals one on one directly in their space, their home, and I assess how well they're doing due to this illness. And a lot of times I realize that my clients, when they're diagnosed with HIV, they're automatically diagnosed with depression or something geared toward that, and it's not necessarily that they're depressed. It sounded like, "Oh, I'm just going

to throw this diagnosis on you because you're HIV+, and I assume that this is going to happen to you."

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And so, when I meet with these clients, I have a passion for what I do because they open up to me. I like to assess their issues, and so what I do is, I try to motivate them to be better, where they feel that they have been blocked.

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Artel:

What do you think is needed now?

Octave:

Honestly, right now my passion is focusing on the mental health aspects of things and how it relates to HIV. And so, I want to see more work being done in the mental capacity – how does depression affect HIV; how does faith-based religion affect your behavior change – and things like that. And so, I believe that it's not enough effort being put into the mental aspects of things, especially in the African American community, because we're stigmatized by therapists and psychology, for whatever reason ... not stigmatized by they have their stereotypes in our community. We prefer not seeing psychologists; we prefer not seeing therapists. And the reality is, we need it – we need someone to let those emotions out to. And so, that's what I want to see more of in the Houston area.

Artel:

Would that look like some sort of network, or you'd be looking for funding, or convenings, or ...?

Octave:

Convenings would be good – local convenings of young black MSM, trans, or whatever, just to come to the table and address certain issues that they may have so that we can know on a local level, "What do we need to fight for? What do I need to present at the table – at a higher table?" I would also like to see other behavior interventions that focus around mental health capacity, because I don't

see a lot of those. Everything gets based on behavioral health; everything gets based on HIV prevention. But we don't focus on how do mental instabilities affects your behavior.

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There is an epidemic of mental health disparities and instabilities in the Houston area, not just for young black MSM, but also for heterosexuals, because I encounter both in my case management load. And we both share similar issues. And so, I feel like even though we fight for the MSM community, I feel like as an African American male I need to fight for the African American community.

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I did empowerment work as well, and what that was geared toward is empowering young black men to accept themselves – accept their identity and embrace it and vocalize it – whether that was through action or words, whatever it was.

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And so, what I did was create activities, and I had young black gay men of interest create and form activities that they felt the community would be impacted by, and that they felt would bring them closer together with other like individuals. And so, that was a passion of mine; I really enjoyed doing that, which geared me toward trying to start NOLA Masquerade, which is Gay Black Pride in New Orleans. I started it for 2 years. I was proud of what I did, but it wasn't a success to me, and so I stopped; and now, after being in here with all of my peers and constituents and stuff, I realize that I need to push forward with my passion. And if my passion is getting NOLA Masquerade off the ground, then that's what I need to do. So, that's my next project.

Artel:

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And, what is the connection between housing issues, homelessness, that you have been working with in Houston within the black HIV community?

Octave:

Well, housing ... I think housing plays a big part. It's like life skills, right?

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So then, I'm definitely not worrying about my status. I'm not worrying about my health. I am worrying about a roof over my head and protection and stability. And so, I think that there are a lot of barriers there.

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And so, we deal with homelessness; we deal with ... In Houston, homelessness is at a high rate. And what I realized is, the HOPWA program, everyone who has been admitted or accepted into that program was homeless at one point. And so, we assess how being housed has been beneficial to better living, better choices, and attainment in HIV care. And so, what I realize is that when people don't have housing stability, then their priorities are not focused on health; their main priority is everyday living; everyday survival. And so, that's what the issue and the comparison to me is – being houses stably and HIV.

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My message to the next individuals is, "Never allow someone else to bring you down. Know your own confidence. And take a stand for what you believe in, because that's what matters."

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So, I can be reached by e-mail, and it's valond.octave@gmail.com.

Artel:

Thank you, Valond.

Octave:

Thank you.

[END OF INTERVIEW]