Storytelling is an essential but underutilized public health tool that can greatly reduce health and identity related-stigmas, build resilience, support communication, increase effective community engagement and outreach, and promote behavior change among multiple stakeholders. Leveraging lived experience in the development and implementation of public health innovation has become increasingly recognized as a human-rights based approach to health; and storytelling is one method for doing so. Storytelling, in its many forms, also offers the opportunity to break down hierarchical barriers between communities, healthcare organizations, and government institutions through conversation and “affords special opportunities for building more ethical relationships” centered around social justice, health equity, and lived experience. Storytelling has been used as a strengths-based approach within mental health and HIV related fields to combat stigma and engage community in social justice and health equity platforms with a goal of addressing racial/ethnic, sexual and gender identity disparities in health. Storytelling and narrative-based innovations have also been supported by a diverse body of entities – from grassroots organizations to federal agencies, including the Centers for Disease Control and Prevention (CDC).

Health disparities, especially across race/ethnicity, sexual and gender identities, are particularly stark in New York City (NYC). Though the NYC Annual HIV Surveillance Report demonstrates a steady decline in new HIV diagnoses, it also highlights profound HIV disparities across these same categories, in large part, due to institutional mechanisms of racism, sexism, classism, homophobia, transphobia, and other systems of oppression that persist in United States and affect health and healthcare systems, including the field of HIV prevention and care. In addition to the disproportionate effect of HIV among specific sub-populations of LGBTQ persons of color (especially those who are Black and/or Latino/a/x), these individuals’ identities lie at the...
intersection of multiple oppressed identities and are impacted by poverty and discrimination. As such, recommendations have emerged from multiple recent community engagements with these communities which indicate that HIV prevention interventions must move upstream, towards dismantling stigma, building resilience, and creating more non-traditional, inclusive community spaces and venues. Addressing social determinants of health, including assuring the emotional well-being of LGTBQ communities of color (among other non-medical needs, like housing and employment), also emerged as a priority. Accordingly, the NYC Department of Health and Mental Hygiene’s Bureau of HIV/AIDS Prevention and Control (BHIV) recognizes that LGBTQ persons of color may benefit from storytelling and narrative-based innovations.

Aimed at responding to the community and the points above, this solicitation sought a consultant to coordinate the development and implementation of a Community Storytelling Initiative by and for LGBTQ persons of color. The consultant will be responsible for the following deliverables:

1. Establish a Storytelling Initiative Community Workgroup
2. Facilitate the Storytelling Initiative Community Workgroup
3. Facilitate Storytelling Initiative Planning
4. Submit a Storytelling Initiative Proposal
5. Launch and Implement the Storytelling Initiative
6. Finalize the Storytelling Initiative Follow-up

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**Contract Award**

Charlie Vazquez Consulting

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