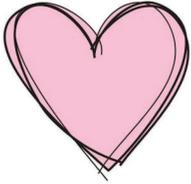


Trauma-informed prevention



Research has found that experiences of childhood trauma (abuse, neglect and family dysfunction) are strongly linked with a wide range of mental and physical health problems throughout life. These experiences are common, and they impact our efforts to promote sexual health.

In fact, the majority of Oregonians report experiences of trauma. Among a representative sample of adult Oregonians surveyed in 2011, 62% reported at least one traumatic childhood experience.

Studies have shown that people with a greater number of traumatic experiences are more likely to have had more sex partners, to have been diagnosed with a sexually transmitted infection and to have injected drugs. Just like education,

condoms, and testing may help reduce risk behavior, the same may be true of efforts to prevent and address trauma. In fact, trauma may be a root cause of risk behavior for some clients.

For people who have experienced trauma, new experiences that are similar or related to the traumatic event may trigger an emotional response (e.g., anger, fear, resistance). This can be confusing to staff, who may interpret the client's actions as unreasonable and problematic.

How can you help? Consider using trauma screening tools. Ensure your agency has a strong system for linking clients to mental health services.

Learn more:

- Watch a TED Talk: <http://bit.ly/traumaTED>.
- Read a CD Summary: <http://bit.ly/traumaCD>.
- Explore www.traumainformedoregon.org.

STD Program transition

The OHA STD Program is continuing to partner with local public health authorities (LPHAs) to increase capacity to notify partners of people recently diagnosed with a sexually transmitted infection (STI) of their potential exposure and link them to testing and treatment.

This spring, you can expect a number of new resources from the STD program, including:

- Detailed resource guides to help staff manage new HIV, syphilis and gonorrhea cases from start to finish.
- Updated Expedited Partner Therapy (EPT) guidelines and patient education materials, which will address EPT for gonorrhea
- A half-day pre-conference session at the OR-Epi conference for LPHA staff (May 19)

Existing tools to help increase capacity of LHDs include:

- A brief, introductory, online Partner Services training (<http://bit.ly/trainSTI>)
- A thorough online Partner Services training (www.learnpartnerservices.org), plus an in-person training in Portland this June.
- Oregon Disease Investigative Guidelines available at <http://bit.ly/InvGuides>. Note that the syphilis guidelines and reactor grid have been updated.
- Ongoing opportunities to shadow experienced state DIS conducting casework and providing Partner Services, including observations of field work.

Rapid syphilis test pricing

Syphilis Health Check™ is the first rapid syphilis test approved for use in non-clinical settings. Trinity Biotech has made the test available to public health agencies and partners at a discounted price of \$12 per test and \$27 per control kit.

To purchase kits, contact Greg Garcia at 503-201-8240 or greg.garcia@trinityusa.com. To learn more about Syphilis Health Check™, watch a webinar recording from the National Coalition of STD Directors at <http://bit.ly/SyphWeb>.

Upcoming events

Syphilis town hall: A call to action! (Portland)

March 2 from 6:30–8:00 p.m.

Learn more at <http://bit.ly/TH-March2>.



Women and Girls HIV/AIDS Awareness Day

March 10

Learn more at <http://1.usa.gov/RVs2M>.

National Native HIV/AIDS Awareness Day

March 20

Learn more at <http://bit.ly/nnhaad12>.

STD Awareness Month

April

Learn more at <http://1.usa.gov/SAM12>.

Sexual Assault Awareness Month

April

Learn more at <http://bit.ly/8L7oJw>.

National Youth HIV and AIDS Awareness Day

Apr. 10

Visit <http://bit.ly/NYHAAD>.

Medicare HIV test coverage

The federal Centers for Medicare and Medicaid Services (CMS) has proposed to broaden Medicare coverage to include routine HIV screening for people 15–65 years of age, in alignment with recommendations from the U.S. Preventive Services Task Force.

Under the proposal, Medicare would cover the

cost of one, annual voluntary test for beneficiaries between the ages of 15 and 65, without regard to perceived risk. An annual test also would be covered for people at increased risk for infection outside this age range.

CMS will finalize its decision by the end of April. For more information, visit <http://bit.ly/CMS-HIV>.

Community input and planning

Broad and meaningful input is key to the success of our programs. That's where the Oregon HIV/ Viral Hepatitis/STI Integrated Planning Group (IPG) comes in. The IPG is an advisory group to the HIV/STD/TB Section of the Oregon Health Authority that is diverse in geographic residence, race/ethnicity, housing situation, age, HIV status and sexual orientation. The group meets at least three times per year to assist with developing a statewide plan for providing prevention and care services for HIV, viral hepatitis and other STIs.

In 2015, IPG meetings will focus on three key questions that reflect the largest gaps in Oregon's

continuum of care cascade:

- 1) How can we increase HIV testing among people with undiagnosed infection?
- 2) How can we improve viral suppression among people who are receiving HIV care?
- 3) How can we better address STIs and viral hepatitis among people living with HIV?

We are thankful for IPG members' many contributions, and we look forward to another productive year!

To learn more about the IPG, please visit www.healthoregon.org/ipg.