



Annual Progress Report

December 2019

In the 3rd year

since launching the End HIV Oregon initiative, the Oregon Health Authority (OHA) and its many community partners moved forward towards our shared goal of eliminating new HIV transmissions in Oregon. The following describes some key activities initiated by OHA and its partners. For additional information, please visit www.EndHIVOregon.org




1

HIV Testing.

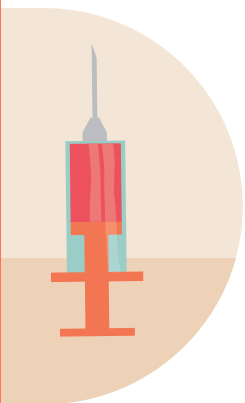
Testing is easy, but too few Oregonians know their HIV status. In 2019, we took the following steps to increase HIV testing and quickly link people who are positive to HIV medical care:

MAKING TESTING EVEN EASIER:



Oregon has been experiencing epidemics of syphilis and gonorrhea — infections that can increase the spread of HIV. Testing people for HIV, syphilis, gonorrhea, and chlamydia at the same time — and testing all sites on the body where someone may be infected — reduces missed opportunities to find and treat infections. In 2019, OHA began funding **integrated testing** for HIV, syphilis, gonorrhea, and chlamydia in the 7 counties with the highest incidence of HIV in the state. In addition, we've promoted integrated testing to private medical providers through updated guidelines and through hands-on training and technical assistance by our partner, the Oregon AIDS Education & Training Center (AETC). Data also shows infection with rectal gonorrhea and chlamydia substantially increases the risk of HIV transmission.* In 2019, we expanded our rectal gonorrhea project from three counties to statewide. The service provides free rectal chlamydia and gonorrhea screening at local health departments through Oregon State Public Health Lab for gay, bi, and other men who have sex with men (MSM) who are uninsured or underinsured.

Data source: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5481158/>



Coming soon: **Dried blood spot testing** is an even lower-barrier way to test, as it doesn't require a blood draw and can be used for self-testing by a person at home. In 2019, OHA established a new contract with a vendor to provide integrated dried blood spot testing and it's being used in Multnomah County. In 2020, we will expand use of this technology beyond the Portland metropolitan area—for example, to increase capacity to quickly respond to disease outbreaks or clusters.

BRINGING TESTING TO THE COMMUNITY, LINKING TO CARE:

13 Oregon counties and the Confederated Tribes of Siletz Indians receive augmented funding for **HIV early intervention services & outreach (EISO)**. This project provides HIV and STI testing and quick linkage to care for people who test positive, as well as outreach, health education and referral services. EISO funds are helping to modernize Oregon's public health system, supplementing funding for communicable disease control and helping ensure that new resources reach vulnerable communities who need the services most. A full report detailing 2019 program outcomes will be released in April 2020.





SPOTLIGHT:

New funding provides more testing, identifies more cases

In the first 6 months of 2019, Lane County Public Health, in partnership with HIV Alliance, held 102 outreach testing events and expanded their clinic-based testing hours, yielding a total of 1,222 people tested — a 58% increase compared to the same time period in 2018.

These efforts helped identify and treat 4 people with HIV, 31 with syphilis, and 55 with rectal gonorrhea. All 4 new HIV cases were linked to HIV medical care within 30 days of diagnosis and the vast majority of EISO clients (90%) received additional service referrals.

Lane County Public Health staff say that having a grant-funded Disease Intervention Specialist (DIS) available to focus on outreach has made a huge difference in reaching hard-to-reach and unhoused people. Lane County's DIS regularly works in the field, looking for cases and contacts at the Eugene Service Station, a "one-stop shop" for homeless adults to receive services and build community, and by making visits to homes and other community locations to conduct interviews and blood draws. New partnerships with the Lane County Jail and with Looking Glass Clinic have yielded several success stories of houseless individuals being tested and treated. Closer partnerships with long-time allies like Planned Parenthood, University of Oregon and Lane Community College Health Centers, and for-profit health systems, have also helped improve interagency communication and linkage to care for patients.

2

Preventing New Infections.

Prevention works. In 2019, OHA worked to expand access to behavioral and biomedical prevention resources throughout the state of Oregon.

IMPROVING SYSTEMS OF CARE TO PROMOTE PREVENTION, INCREASE ACCESS TO PrEP:

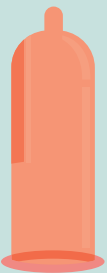
OHA, Oregon AIDS Education & Training Center (AETC), local public health authorities, private medical providers, and community partners like Cascade AIDS Project and HIV Alliance are working together to provide education and link people to HIV prevention information and pre-exposure prophylaxis (PrEP), the daily pill to prevent HIV. Specifically,

- OHA and AETC launched a **public health detailing program** to provide tailored trainings to medical providers around the state on taking a sexual history, screening for HIV and sexually transmitted infections (STI), and prescribing PrEP for patients who need it. AETC provided 19 public health detailing sessions and 52 group trainings for providers in their 2018-19 contract year, as well as facilitating 6 statewide PrEP Workgroup meetings and launching a statewide post-exposure prophylaxis (PEP) needs assessment. There are now more than 300 medical providers on the PrEP directory, 55% practicing outside of the Portland metro area.
- All 36 Oregon counties have access to **PrEP navigation services**—one-on-one help for people to learn whether taking a daily pill to prevent HIV is right for them, and, if so, how to get and use the medications. In the first 6 months of 2019, PrEP Navigators reached more than 4,000 people at over 40 in-person outreach events and connected with more than 300 people through online outreach. A total of 222 people completed PrEP Access Plans and 95 began using PrEP. Navigators also logged 378 follow-up contacts to check-in with individuals about adherence.

PREVENTING INFECTIONS AMONG PEOPLE WHO INJECT DRUGS:

Seventeen Oregon counties now offer **syringe exchange programs**, including six that started in 2019. Dedicated funding to purchase supplies to operate syringe service programs more than doubled in 2019. Additionally, the HIV Prevention and Viral Hepatitis programs collaborated with the national Harm Reduction Coalition and San Francisco Department of Public Health to host two capacity-building trainings in coastal Oregon designed to build capacity to implement harm reduction programs.

Coming soon: In early 2020, **Oregon Reminders**, our free phone and text-based service that provides medication, appointment, and testing reminders, will begin offering **free mail-order condoms and lubricant**. This service will help Oregonians who want to take responsibility for their health but don't have access to these services from a clinic or community-based agency.





SPOTLIGHT:

HARM REDUCTION IN RURAL AND FRONTIER OREGON

Harney County, in southeastern Oregon, is known for its wide-open spaces. Covering more than 10,000 square miles, it is home to about 7,000 people. But public health challenges exist wherever people live: a recent Harney County community health assessment identified substance abuse as their number one problem.

In response, public health staff spent significant time building relationships with community partners from law enforcement, education, medical care, and local and tribal governments; with community support, they began a syringe exchange program in mid-2019. The program has started small, with one 90-minute block of time per week scheduled for exchange. So far, the program has served 6 clients at the on-site syringe exchange, providing clean needles, HIV and hepatitis C (HCV) testing, and distribution of condoms, sharps containers, and other prevention supplies. Most clients are secondary exchangers (people who exchange syringes on behalf of others in their community), which means the effect of the program is amplified beyond those directly served. In addition, the health department maintains a sharps drop box outside the office for 24-hour safe and confidential syringe disposal.

Nationally, only 20% of syringe services programs operate in rural locations, making these areas vulnerable to outbreaks of diseases related to substance misuse, like HIV and HCV. Harney County's proactive response to substance misuse is a strong step towards protecting the health of their community.

3

HIV Treatment as Prevention.

HIV treatment saves lives. People living with HIV (PLWH) who take daily HIV antiretroviral medicine, as prescribed, and maintain an undetectable viral load have no risk of sexually transmitting the virus to an HIV-negative partner. In 2019, we took the following steps to support viral suppression among PLWH:

HOUSING PEOPLE LIVING WITH HIV:

In 2019, OHA launched an initiative to **expand housing options** for PLWH, especially those with behavioral health needs. OHA has partnered with HIV service providers across the state to develop and enhance programs providing low-barrier housing assistance coupled with in-home, wrap-around supports. OHA has obligated \$10 million to fund these programs over the next five years.

PROVIDING LIFE-SAVING MEDICINE:

Oregon's CAREAssist (AIDS Drug Assistance) Program pays for insurance premiums and pharmacy co-pays to **ensure that PLWH have all the medications they need** to stay healthy and to prevent the spread of HIV to others. Enrollment in the CAREAssist Program continues to grow. By the end of 2019, CAREAssist will have served an estimated 4,000+ clients— about 10% more than in 2016.





SPOTLIGHT:

SHARING STORIES, FINDING SUPPORT

Stories matter. Understanding one's own story and listening to the stories of others helps us access our common humanity and connects people across boundaries created by illness, isolation, and social constructs of difference. In 2018-19, two organizations, Our Bold Voices and Write Around Portland, received End HIV Oregon Sponsorship awards to build community among people living with HIV through the power of art. Our Bold Voices produced 3 storytelling events in 2018-19. Each event featured people living with HIV, who received coaching to shape their stories into compelling performances. A total of 282 individuals attended the events, including 92 long-term survivors of HIV, who received free tickets. *"The productions are uplifting,"* said one recipient, *"to hear so many speak out about the positive ways their lives are improving in spite of AIDS is like music to my ears."*

Write Around Portland provided a 10-week writing workshop for people living with HIV, in partnership with Multnomah County Health Department's HIV Health Services Center. The workshop, provided at no cost to participants, created a space for 10 PLWH to write in community, develop relationships, and share stories in a respectful environment. Opportunities to publish their work in a professionally-designed anthology and to participate in a public reading further amplified the voices of people living with HIV. According to one participant, *"It was transformative. I was able to read my story in front of people for the first time."*

Both projects used the arts to build social support and decrease HIV-related stigma – which, ultimately, can lead to better quality of life and better health for people living with HIV.

4

Better Health for All

Testing is easy. Prevention works. Treatment saves lives. But not all Oregonians are benefiting equally from the resources available. In order to end new HIV transmissions in Oregon, we must eliminate HIV-related health disparities. In 2019, OHA worked with community partners to help all Oregonians achieve better health related to HIV and STI:

PREVENTING LATE DIAGNOSIS AMONG LATINOS/LATINX PEOPLE:

In 2019, OHA shared data related to late diagnosis among Latinos with community groups, worked to build new partnerships, developed a project plan for moving forward with community input, and funded three testing and education projects focused on Latino/Latinx communities.

SUPPORTING COMMUNITY-IDENTIFIED SOLUTIONS:

More than half of the 13 End HIV Oregon Sponsorship Project grants OHA awarded in 2018-19 focused on providing health education and increasing HIV testing among communities experiencing disparities. These projects included Black and Latinx communities, transgender individuals, partners of people living with HIV, incarcerated individuals, people with disabilities, and behavioral health clients.





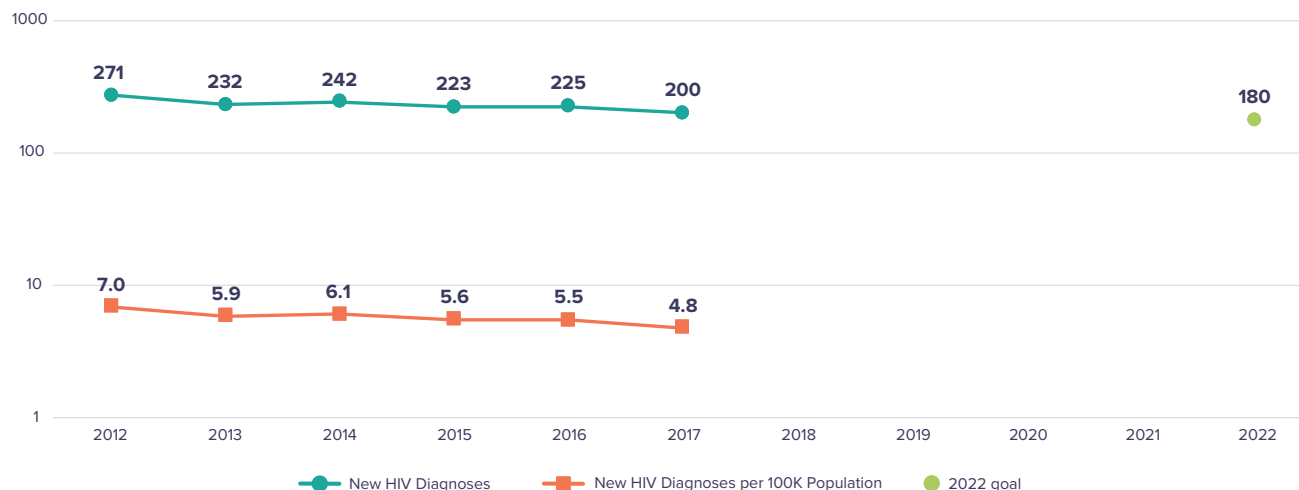
SPOTLIGHT:

END HIV SPONSORSHIP SUPPORTS OUTREACH AND TESTING IN LATINO COMMUNITIES

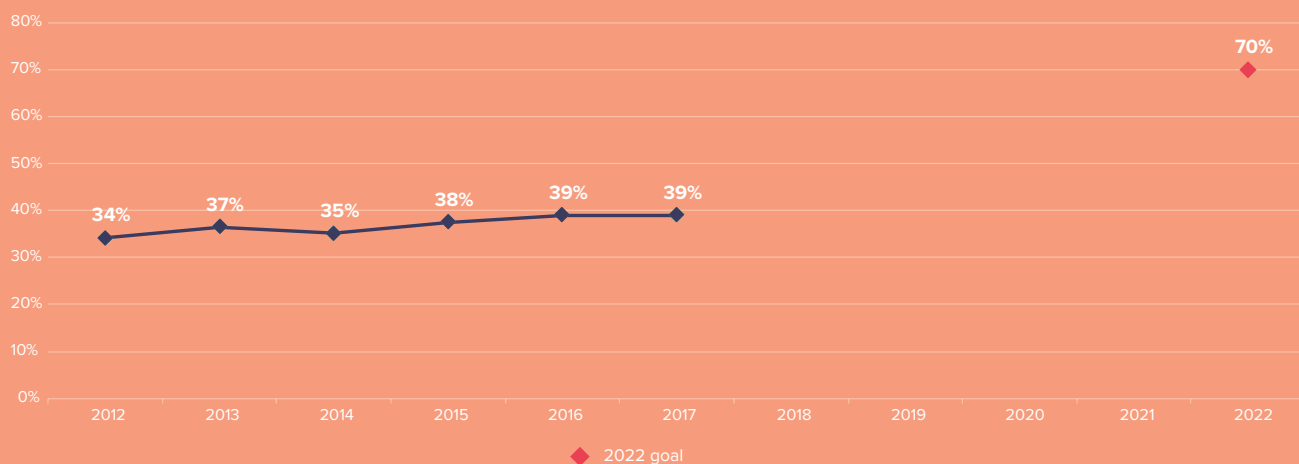
As a Latino-based organization, Edúcate Ya provides a safe place where Latinos can share information about HIV, sexuality, and other issues that are considered culturally taboo in many parts of the community. With the support of an End HIV Oregon Sponsorship award, Edúcate Ya trained 25 bilingual peer educators to deliver culturally-sensitive information on HIV/STI to 150 Latinos at 12 events in the Portland metropolitan area, migrant camps, and rural and farmworker communities. They also tested 30 individuals for HIV.

In Oregon, 40% of Latinos with HIV are diagnosed late—about 10 years after they are infected. Most say they didn't believe they were at risk for HIV and only got tested when they became very sick. Testing late means people don't have the opportunity to benefit from life-saving HIV medications and may be spreading the infection to others. According to Edúcate Ya director, Rafael Arellano, training peer educators is an ongoing investment, as peers not only deliver education at formal events, but also connect organically with people in the community who may not consider themselves at risk. Once trained, health educators continue spreading the message “*es mejor prevenir que lamentar*,” (better safe than sorry) helping to destigmatize HIV and support more community members getting tested as part of regular preventive health care.

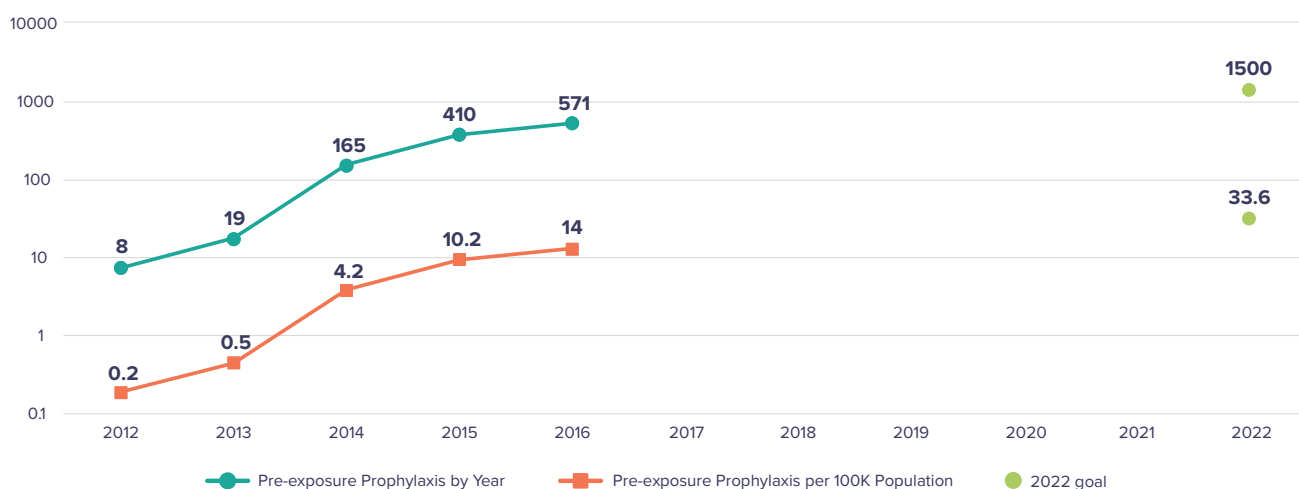
Count and Rate of New HIV Diagnoses by Year, Oregon, 2012-2017



Proportion of Oregon Adults Ever Tested for HIV, 2012-2017



Count and Rate of Pre-exposure Prophylaxis (PrEP) Prescriptions by Year, Oregon 2012-2016

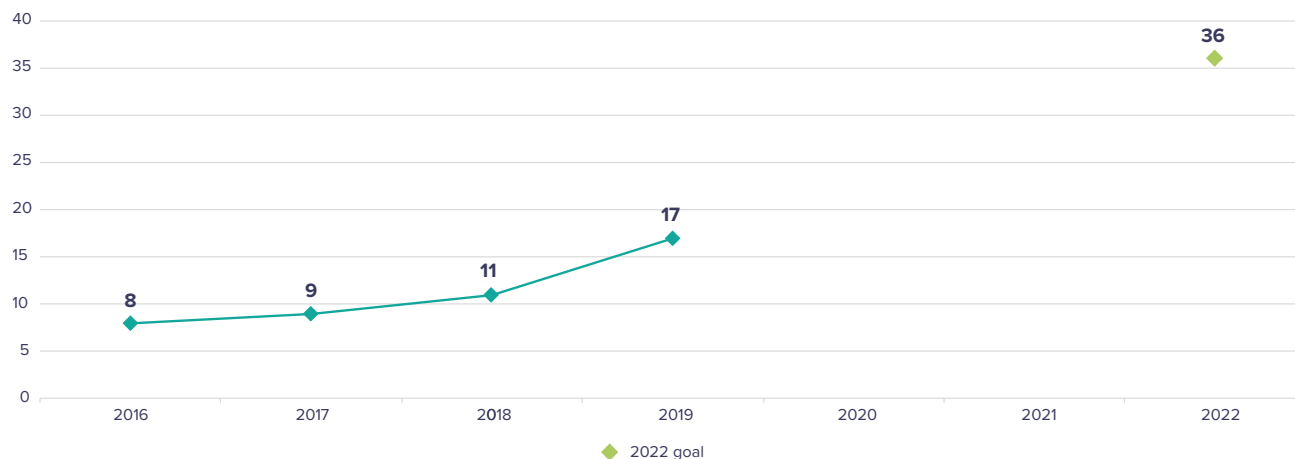


OHA tracks and reports a set of End HIV Oregon measures by race & ethnicity, gender, age, and—where possible and appropriate—other demographics. We use these measures for planning and program monitoring and to track our progress in all areas related to health equity.



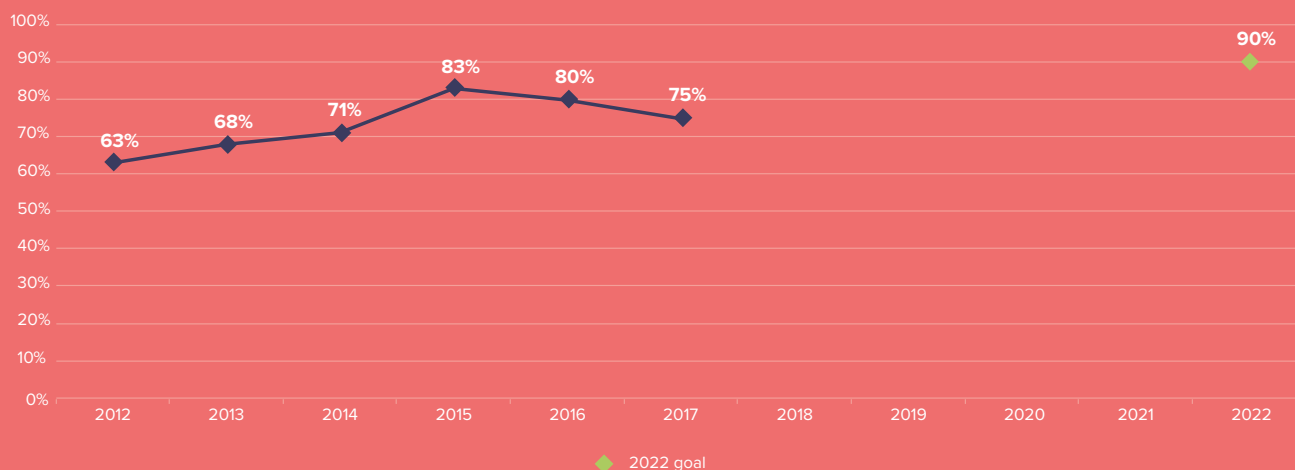
is an Oregon Health Authority and community initiative. EndHIVOregon.org

Number of Oregon Counties with Syringe Services Programs, 2016-2019

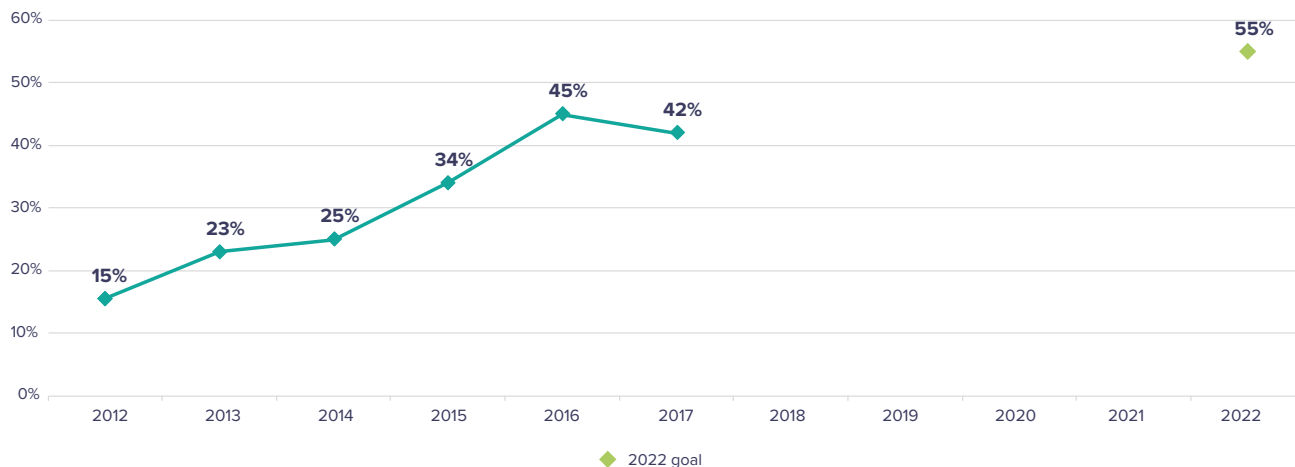


Proportion of People Living with HIV who are Virally Suppressed

(last viral load <200 copies per mL in the past 12 months), Oregon, 2012-2017



Proportion of People Living with HIV who Achieve Viral Suppression within Three Months of Diagnosis, Oregon, 2012-2017

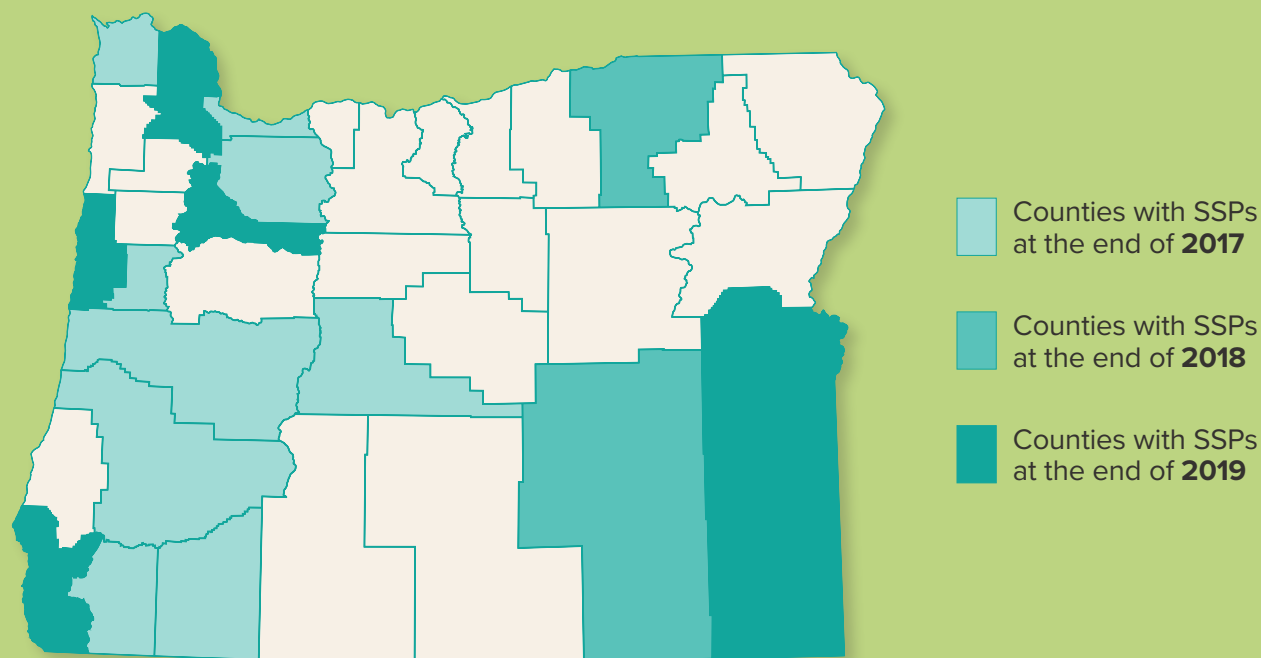


OHA tracks and reports a set of End HIV Oregon measures by race & ethnicity, gender, age, and—where possible and appropriate—other demographics. We use these measures for planning and program monitoring and to track our progress in all areas related to health equity.



is an Oregon Health Authority and community initiative. EndHIVOregon.org

Syringe Services Programs (SSPs) in Oregon as of 2019



SSPs at the end of 2017

Benton
Clackamas
Clatsop
Deschutes
Douglas
Jackson
Josephine
Lane
Multnomah

SSPs at the end of 2018

Benton
Clackamas
Clatsop
Deschutes
Douglas
Harney
Jackson
Josephine
Lane
Multnomah
Umatilla

SSPs at the end of 2019

Benton
Clackamas
Clatsop
Columbia
Curry
Deschutes
Douglas
Harney
Jackson
Josephine
Lane
Lincoln
Malheur
Marion
Multnomah
Umatilla
Washington

Imagine an Oregon where... We end new HIV infections.
Everyone with HIV is healthy. Can you imagine it?

The time is now.



endhivoregon.org