

IPG Meeting Notes

July 18, 2018, 9:00 a.m. – 4:00 p.m.

800 NE Oregon St., Portland, OR, Room 1B

Syringe Services Program (SSP) Activities

- OHA staff shared information about harm reduction principles and interventions, policies related to syringe access, syringe services programs in Oregon, and future plans to build capacity by OHA and by the Harm Reduction Coalition.
- Topics of discussion included the need to involve pharmacies in efforts to improve syringe access, as well as the need to involve rural SSP providers in capacity building efforts.

Oregon HOPE

- HIV Alliance staff discussed the HOPE study, which focuses on Hepatitis C surveillance and treatment, indicators of a potential HIV outbreak, and Opioid Use Disorder treatment and prevention. OHSU received a NIDA/CDC grant that funds the study (2017-2022) and involves many community partners. The project serves Lane and Douglas counties and hopes to expand to 8 counties along the coast.

HIV Medical Monitoring Project: Data about people living with HIV in Oregon

- Program Design and Evaluation Services staff presented data from Oregon's Medical Monitoring Project. Each year, staff conduct approximately 400 interviews and review the medical records of people living with HIV (both in care and not in care). The project assesses met vs. unmet service needs.
- Key findings include:
 - Dental care is the largest unmet need.
 - The majority of participants were very satisfied with the quality of care received in the past 12 months.
 - 4/5 of participants had sustained viral suppression.
 - Stigma (internalized and externalized) among PLWH in Oregon is common. Higher stigma scores were found among certain groups (e.g., females, heterosexuals, younger people, people with anxiety or depression, people living in poverty).
 - 1/4 of participants reported a new sex partner in the past 12 months.
 - 1/6 of participants have or had hepatitis C.



End HIV Oregon Sponsorship Award Presentations

- OHA awarded 8 small contracts that support the End HIV Oregon initiative.
 - The African American AIDS Awareness Action Alliance (A6) has been working with faith organizations to increase health literacy and HIV testing in African American and black communities. Five churches are hosting forums where they will offer testing and promote cards containing important health information.
 - The Association of Oregon Centers for Independent Living (AOCIL) is working to remove barriers to testing, reduce stigma, and promote health equity among people with disabilities by 1) surveying their consumers to about their perceptions and needs related to HIV testing and other health care services, 2) creating brochures and videos describing local resources and 3) developing new intake questions related to HIV and STI testing and treatment.
 - Educate Ya is training health educators to discuss sexual health with people in Latino communities and other communities.
 - The Hepatitis HIV/AIDS Project (HAP) is expanding culturally specific activities in Western Oregon correctional institutions, including materials, travel, and food for World AIDS Day events.
 - Let's Kick ASS (AIDS Survivor Syndrome) is expanding its reach to communities in the Willamette Valley and rural areas of the state in order to improve social and health outcomes among PLWH. Efforts include telephone support, online resources, and storytelling events that focus on issues facing long-term survivors.
 - The Lane County Branch of the National Alliance on Mental Illness (NAMI) is forming support groups for LGBT people and for PLWH to improve social support and reduce stigma.
 - The Partnership Project is purchasing and promoting home test kits, which will be distributed to transgender clients and partners of clients living with HIV.
 - Quest Center for Integrative Health is launching a pilot program supporting opt-out HIV testing within a broader sexual wellness initiative. The pilot program will focus first on mental and behavioral health clients.
- OHA is continuing to accept new applications, which are available at endHIVoregon.org.

End HIV Oregon Ambassador Kits

- OHA has kits that include End HIV Oregon handouts, posters, lanyards, and other materials that communicate the vision and goals of the initiative.
- If you would like materials, you can email Shelley.M.Pearson@state.or.us.
- Sponsors get access to an online kit that is co-branded, which includes videos and social media content.
- Using #EndHIVOregon on social media is another simple action anyone can take to promote the initiative.



AETC: Resources for Oregon

- The AIDS Education and Training Center (AETC) trains health care providers on a variety of topics, such as sexual history taking, PrEP, and HIV treatment.
 - About 3/4 of AETC trainings in Oregon are conducted outside the Portland metro area.
 - People can request trainings by visiting oraetc.org.
- AETC wants to pilot an opt-out STI screening intervention.
- Public health detailing is a new AETC initiative (launched July 1) involving brief one-on-one, clinician- to- clinician interventions (e.g., 10-minute sessions.) These brief conversations seek to improve clinical knowledge and practices related to PrEP, nPEP and other sexual health topics. Knowledgeable providers will be asked to serve as End HIV Oregon champions. The long-term goal is to have 300 provider encounters per year.

PrEP Grows Up: What's Next?

- Josh provided an overview of PrEP, its role in Oregon's Integrated HIV Prevention and Care Plan and in the End HIV Oregon initiative, and its ability to help prevent new infections.
- Barriers to PrEP use include cost, access to providers, provider knowledge, adherence, insurance challenges, and refill challenges.
- Who's using PrEP? Chime In data suggest approximately one in four MSM in the Portland metro area use PrEP. PrEP use has grown substantially among males, but not females.
- Oregon has seen new HIV cases among people with a past history of PrEP use. Why and when did they stop?
- PrEP should be taken consistently. Low levels of PrEP use can contribute to drug resistance (among people who acquire HIV while using PrEP intermittently).
- The Oregon Health Plan now covers PrEP and more frequent STI screening if warranted based on a risk assessment.
- The group discussed in pairs and provided written responses to the following questions:
 - What elements are needed for a PrEP navigation/case management system?
 - How might PrEP navigation differ in urban and rural parts of the state? Among different risk groups?
 - Are there other things OHA should keep in mind as it prepares to put out resources for PrEP navigation?
- If interested in joining a statewide PrEP/nPEP workgroup, please contact Joseph Campbell at OR AETC at joseph@oraetc.org.