

Cuyahoga Regional HIV Prevention and Care Planning Council

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties

Deairius Houston, Chair

HIV Prevention Committee Minutes

Wednesday, December 6, 2023

4:00 pm to 5:30 pm



Start: 4:01 pm

End: 5:31 pm

Facilitator: D. Houston

Moment of Silence

Welcome and Introductions

Approval of Agenda: December 6, 2023

Motion: S. Manhoff

Seconded: K. Dennis

Vote: In Favor: All

Opposed: 0

Abstained: 0

Approval of the Minutes: September 6, 2023

Motion: K. Dennis

Seconded: C. Taylor

Vote: In Favor: All

Opposed: 0

Abstained: 0

Prevention Program Summary – Recipient Report –M. Kolenz, Prevention Program Supervisor, CCBH

The HIV Prevention grant was extended until May 21, 2024, the Ending the HIV Epidemic Community Health Worker program is currently taking applications, and in September we hired a new Prevention Program Manager, Danielle LaGallee, formerly Ryan White Program Coordinator.

***Question: J. Patterson** - Will you have a competitive RFP for the next go round?

***Response: M. Kolenz** -We're expecting a competitive one but will update as we know more.

Prevention Program Highlight- Ending HIV Epidemic - Cederick Taylor, Community Health Workers as Prevention

As a community health worker, this information is a basic overview of several programs currently operating that contribute to the community health worker process: AVOC (A Vision of Change), CSU (Cleveland State University), and CFAR (Center for AIDS Research).

A Vision for Change - A grass roots organization receiving county funding to initiate outreach projects.

OUTREACH	LINKAGE TO CARE	FORWARD VISION
Conversation Corridor A community forum that welcomes everyone and works to promote Prevention outreach and provide information.	HIV Testing Involves partnerships with Central Outreach and We Think 4 A Change in getting the word out in the community.	Processional Workshops Finding ways to capitalize on current community outreach and education programs.
Theatre of the oppressed w/Karamu House This project incorporates community work, in collaboration with Karamu House, the oldest black theatre in the U.S, to ramp up Prevention outreach in the community.	PrEP Navigation Partnership with MetroHealth through Community Outreach Navigation	Stigma Mixers Ongoing efforts of finding ways to make Prevention fun as it relates to community engagement.

Cleveland State University (CSU) – CHW-HIV Peer Navigation Programming

EDUCATION	COMMUNITY HOURS	LICENSED CHW
Fifteen (15), Sat classes, 9AM-3PM, CSU Main Campus - CPR and Vital Signs Training, Chronic Disease Self-Management (CDSM) Certificate Training, four (4) days, 8Am-4PM), Fri-Sat	130 Service Hours Conversation Corridor Wellness Pop-Ups	Resume Building Employment Recertification Community Leadership

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CSU Community Health Worker (CHW) Program

We are thankful to the CCBH in helping push the Cleveland State Community Health Worker programming and we're continuing this process into January, when the next cohort begins. There are currently two different cohorts happening. One is the general process and the other is the CSU Navigation piece. The CHW portion is licensed through the Department of Nursing and jobs are needed for that, as the idea is for participants to become employed in grass roots, community work. For new cohorts, we will be adding a few enhancements to the education piece, such as linkage to care and blood pressure checks. We also pay licensure for the first year, in which the programming focuses on developing the 'hands-on' components in the training process.

The Cleveland State University School of Nursing certified Community Health Worker Certification Program begins Saturday, January 27, 2024.

Offered since 2016, the CSU CHW Certification Program is appropriate for anyone interested in an entry-level position in health care, who would like to make a difference in the health of their community. The program is a rigorous combination of 15 full-day classroom sessions. The 4-day Chronic Disease Self-Management Certificate Training, and an additional 130 service hours in the community.

Deadline for application and essay is December 30, 2023

The program includes:

Fifteen (15) classes, 9am-3pm on CSU Main campus
CPR and Vital Signs Training
Chronic Disease Self-Management (CDSM) Certificate Training
130 Service Hours
Assistance with final certification from Ohio Board of Nursing
Requirements for Admission and Full Scholarship Funding
At least 18 years of age with a high school diploma or GED
Substance Test and Background Check
Copy of State ID and Proof of Medical/Health Insurance
All health info and required docs due before start of program
Go to 'Steps to Apply' on the CSU website

CFAR (Center for AIDS Research) RUSTBELT

Ending the HIV Epidemic Strategic Working Group (EHE SWG)

This project relates to the research on the back end where we utilize those knowledgeable on data, research, and that can provide concrete information.

The **CFAR RUSTBELT (Cleveland, OH and Pittsburgh, PA)**, in collaboration with community programs and health departments, is designed to establish and implement strategies to reduce new HIV infections in Cuyahoga County, initiate effective and innovative community prevention research programs to high-priority sites in Cuyahoga County, and establish an inter-institutional HIV prevention and implementation research training structure linking junior investigators with senior investigators.

CFAR Mission: To provide administrative and shared research support to synergistically enhance and coordinate high quality HIV/AIDS research projects through support core facilities.

The **EHE SWG** will expand academic, community, and practitioner partnerships to develop research programs that identify gaps driving the local epidemic, specifically diagnosis, treatment, and prevention. Response to these gaps will be identified by the EHE SWG.

Community Health Update –Prevention Program Highlight – PrEP for All, Kenyon Farrow, LGBT Board President

PrEP is medicine taken to prevent getting HIV, and it is highly effective for preventing HIV when taken as prescribed. As PrEP (Pre-Exposure Prophylaxis) has been around for a while, this presentation provides information on who may benefit from its use.

Who Can Benefit From PrEP?

Various clinical trial studies have proven PrEP works in HIV-negative individuals who are: cisgender men who have sex with men, heterosexual cisgender men and women, people who inject drugs, and transgender women. Although clinical trials have not included transgender men, PrEP has been approved for transgender men at risk for acquiring HIV.

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In looking at the charts below, part of what is happening is that there is a wide disparity in PrEP use among the black population, which increases their vulnerability to the disease. While data shows black have more HIV risks, it is not shown to be due to individual risk factors like drug use and sex partners, but more because of social determinants and factors such as: lack of health care, Medicaid expansion, transportation, etc. These things fuel the risks for those susceptible to HIV, and using old standards of applying individual risk factors in data finding, that has actually proven to be a major barrier in people gaining access to PrEP.

PrEP Use By The Numbers

Black people represent 14% of PrEP users, but 42% of new HIV diagnoses nationally.
In Georgia, 57% of PrEP users were white in 2020, while only 34% were black.
Almost 72% of HIV diagnoses in GA were among black people in 2019, compared to 15% of new cases for white people.
Of Black Americans who can benefit from PrEP, 91% have not received a prescription.

Barriers to PrEP: SGL Men

HIV stigma and lack of sex-positive approaches
Mistrust of historically problematic medical systems as well as medical biases
Societal barriers such as racism, poverty, and homophobia
One in eight black SGL men in the south live 30-36 minutes away from a PrEP provider
Inconsistencies on how providers determine HIV risk indicators

Barriers To PrEP: Transgender/NGC People

Lack of education about interactions between hormones and PrEP
For a community often under-employed and underinsured due to discrimination, accessing PrEP as it is currently dispensed may be very difficult to sustain.

Barriers To PrEP: Cisgender Women

According to research, only about 10,000 cisgender women in the U.S. are using PrEP.
A 2018 study of ciswomen in the south demonstrated 246 women were screened for PrEP eligibility but only 72 were found to meet previous CDC guidelines, (recently changed in 2021) and again due to individual risk factors such as ineligible due to having only one partner, married, in good health, etc.
A 2018 study in Philadelphia also found that only 33% believed PrEP would work, 44% were concerned with cost, 39% concerned about potential side effects.

Progress In HIV Prevention Has Stalled – Despite Large Advances In Prevention Technology

HPTN 052 Published	F/TDF PrEP FDA Approved	START/Temprano RCT Results Published- “Hit Hard, Hit Early”
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The HIV Epidemic Is Disproportionately Concentrated in Non-Medicaid Expansion States

- New diagnosis rate is 65% higher in non-Medicaid expansion states
- New diagnosis rate (2012-2019) dropped by 29% in Medicaid expansion states compared to 9% in non-Medicaid expansion states – a more than three-fold difference

Systemic Challenges To PrEP Use

PrEP Implementation was slow
Even today, no federal programs exist that cover the continuum of PrEP care for uninsured individuals.
Insurance companies are STILL charging patients for PrEP services, against the 2021 rule from the Department of Labor and Center for Medicare & Medicaid Services.
Lack of national PrEP campaigns inclusive of black SGL, transgender people, and heterosexual cisgender men and women.

In summary, this information shows that progress in HIV Prevention has stalled despite large advances in Prevention Technology, and that while in the last 10-15 years we have had breakthroughs on what works for

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Prevention, it has not been the science or education that has failed to bring about change, but rather systematic problems that should have by now, greatly reduced HIV diagnoses and made things better for people.

Momentum Towards A National PrEP Program

President Biden in his proposed fiscal year 2023 budget, promised to funnel additional funds into efforts to combat the nation's HIV epidemic. The budget commits to a 75% percent reduction in HIV infection by 2025 and promises \$9.8 billion for a 10-year nationwide PrEP delivery program.

Advocate for Funding in Congress

PrEP 4 All and many organizations have formed a coalition to advocate for Congress to allocate \$\$\$ for this program. The \$10B national program is a difficult sell based on political dynamics, and while we have gotten some House and senate leaders to champion efforts to get this in the budget, the advocacy continues.

Principles for a National PrEP Program

Creating a more cost-efficient system is the only way to generate the savings that can be re-invested into equitable distribution of PrEP, as the demand is for making PrEP something that people will want to take. This must include providing new opportunities to effectively raise awareness and combat stigma by enrolling and educating new and broad networks of providers and building community-led campaigns that connect people, as the public in general is unaware of what PrEP is about, how to get it, and in what way it can be useful to them.

PrEP in Black America

This group still exists and is for people to come together in communities to discuss areas in PrEP and develop a program to spread awareness and address disparities. We also invite other folks such as HBCU's, (Historically Black Colleges and Universities), the black media, and others who want to be in the room to discuss local PrEP access and other issues.

***Question: V. (guest)** – At MATEC (Midwest AIDS Training and Education Center) in Cincinnati, we are looking to collaborate in doing outreach programming, specifically on teenagers getting PrEP without parental consent. What are efforts here on PrEP with that population? (See MATEC at: <https://matec.info/>).

***Response: K. Farrow** - Young people are part of the plan around a national PrEP program, as young people have challenges, especially under age 18. One issue is if they are still at home and on their parent's health plan, the explanation/bill for any medical services they may receive, is sent to their home address where parents become notified of all the medical services provided in those statements. We worked on this in New York, looking at trying to create some small way around this for young folks under 18. Maybe outside insurance plans could help.

***Comment: D. Houston** – We have also run into this and are now looking at an option for folks 18-24 on parent insurance to have a separation of benefits, where the person who holds the policy will get a report that just notes the insurance was run to do a test, not listing any specifics or details of the transaction. This can also be tricky, as there has to be confirmation that the insurance company did process the claim. Also, Central Outreach has an office in Columbus and maybe that team can connect with folks in Cincinnati to help with this.

***Comment: V. (guest)** - This is very difficult because many won't show up until they're very sick.

***Comment: D. Houston**- Also most public schools don't allow these conversations. It's usually charter schools.

***Comment: K. Dennis** – Yes. We go in schools here in Cleveland but it's a challenge and very few allow us to visit.

***Comment: K. Farrow** - There is also an online school system curriculum on this.

***Comment: J. Patterson** – Speaking with folks on a national PrEP program, many advocates here in Cleveland are shut out of the conversations.

***Response: K. Farrow** - We did lot of talk with affiliates, and some things that worked in their area was leading with about the Opioid crisis, as a way of getting in the door for maybe other conversations.

***Comment: A. Rollins** - Maybe we could have some best practices sharing, especially on youth issues.

D. Houston - Thanks for sharing this information and hopefully you can bring this to the Midwest.

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Committee Business Identifying Topics for 2024

L.J. Sylvia - Below is a list of agenda topics for Prevention in 2024, as shared by the committee.

1. Add intros in the chat – share your name, agency, and role (L.J.)
2. Epi Update (Julie)
3. Doxy-PEP (Brooke, Julie)
 - Who's doing it locally?
 - What are the challenges, etc.?
4. DIS/EIS Workers (Julie)
 - A chance to meet people
 - Discuss Early Intervention Services
5. Updates from State folks working on STI and HIV Self-Testing (Julie)
6. People coming in for monthly/bi-monthly appointments, see if this is providing more opportunities for counseling and behavior change. Talk to a provider to hear from them and open up for discussion. (Brooke)
7. Sharing of best practices (Akeem)
 - For example, getting coverage for Apretude
 - Coverage and Navigation for Teens
 - Language Update – stop stigmatizing language
8. Ambassador presence – some sort of PR for the prevention Committee
 - Communication to the community (Cederick)
9. Ongoing updates about testing –maybe a dashboard (Deairius)
 - Where are tests happening?
 - How many tests?
 - Demographics, etc.
10. Seniors – How are we engaging this population about STI and Prevention?

D. Houston - We need a presence across all our committees, as the community doesn't know us. Also, for next year want to know more on what actual tests are being done and data on tests administered, positive vs negatives to see if we need to do more or where to be more present. Maybe build a template.

L.J. Sylvia - Membership is also looking to do a calendar of events. Maybe try and connect with Billy as he is trying to recruit more youth, maybe collaborate on that conversation. Also apps open for folks to join PC.

B. Gayheart – As chair of MRM, invite all who want to discuss anything related to PC. A lot going on both in MRM and other subcommittee. We are all in this together to end the HIV Epidemic.

C. Taylor - We need ambassador presence, or PR work to be vocal in the community, or a commercial on what the committee is doing, how they and get involved, this is what PrEP means, etc. The regular community not understanding us, we should give them a 15-30 second project quarterly to get out in the community.

A. Rollins - To support Cederick's point, each of the grant funded organizations have some budget for marketing. Maybe there's a way we could tap into that funding.

V. (guest) – Conversations on the elderly. Syphilis is on the rise in the elder community. They are being missed, not many aware of HIV. Many have meds to relax, get high (medical marijuana), etc. and a lot knowing they cannot get pregnant, they are uninhibited. Now with current 6-month shot, many won't be seen for months for medical care. These are hot topics in Cincinnati.

Next Steps

The next Prevention Committee meeting is Wednesday, March 6, 2024, from 4:00 - 5:30 pm.

We will look to start mapping out these pieces and ideas and place them throughout the year's agenda, so as to have more productive, effective meetings.

Announcements

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L.J. Sylvia – The Planning Council CLC committee recently updated the consumer survey, and the link for it will be in the chat to complete, if you will. Also, please share this with PLWH you know, as we want this survey to have fresh data for PSRA.

C. Taylor – The Conversation Corridor is hosting an event: “Discovering Freedom within your Journey to Self-Redemption” on former inmates re-entering society. Further info to be provided.

J. Patterson - The Kaiser Family did a ‘Greater than HIV’ campaign and have free things on U-tube at: YouTube @WeAreGreaterThan, and GreaterThan.org/materials.

Adjournment

Motion: K. Dennis

Seconded: J. Patterson

TOTAL ATTENDANCE: 33

PREVENTION MEMBERS PRESENT:

	PREVENTION MEMBERS	Dec 6, 2023	NOTES
1	Deairius Houston, Co-chair	✓	
2	Julie Patterson	✓	
3	Bryan Jones		
4	Tina Marbury		
5	Michelle Jackson-Rollins	✓	
6	Ahlem Zaaed		
7	Jeannie Citerman-Kraeger	✓	
8	Rebecca Strong		
9	Christine Osborne	✓	
10	Cederick Taylor	✓	
11	Akeem Rollins	✓	
12	Rickey Lewis		
13	Holly Phillips		
14	Elizabeth Habat		
15	Kate Burnett-Bruckman		
16	Pam Weiland		
17	Karla Ruiz		
18	James Stevenson		
19	Karen Hill		
20	Joye Toombs		
21	Leander Lovett		

PC Members: B. Gayheart, T. Greene, K. Dennis

Attendees: S. Manhoff, C. Miller, Corryn (Proj LIFT), J. Collier, Vee (guest), A. Falzone, B. Willis, M. Mariner, C. Brady, Bethany (Thrive for Change), S. Davis, J. Garcia, K. Farrow, Prince (guest), M. Jackson-Rollins

Staff: M. Baker, Z. Levar, M. Kolenz, D. LaGallee, L. White, C. Williams, L.J. Sylvia, T. Mallory