



The time is now.

Ending
the
HIV
Epidemic

October 12th Agenda

“One Word” Video Update

Approve Date for Stakeholder Events

Brainstorm Strategies in PREVENT Pillar



The time is now.



Ending
the
HIV
Epidemic

One Word

What **one word** comes to mind when you hear the phrase
“ending the HIV Epidemic?”

Record yourself saying that **one word** and send to
emuttilo@communitysolutions.com by October 9, 2020

You can send a video clip of yourself, an audio clip (with no
image) or a video clip of your voice and any image that
represents your **one word**.

Tips for a good video:

- Record in a quiet space
- Light source should be in front of you
- Center yourself in the frame
- Turn your phone sideways (horizontal) to record.

Video clips will be combined into a montage to be used for Cuyahoga County Ending the HIV Plan

We're going to use Padlet!

The screenshot shows a Padlet board interface with a dark red background. At the top left, the word "padlet" is visible. In the top right corner, there are icons for a heart, a square labeled "REMAKE", an arrow labeled "SHARE", a gear, and a plus sign. Below the top bar, the user "ecampbell87" is listed with a "1m" timestamp. The main title of the board is "PREVENT Cuyahoga Ending the Epidemic".

The board is organized into four columns, each with a white header box and a circular plus sign below it:

- MAINTAIN**: Header box with three vertical dots on the right.
- EXPAND/ RESTART**: Header box with three vertical dots on the right.
- CREATE/PILOT**: Header box with three vertical dots on the right.
- OTHER/ NOT SURE**: Header box with three vertical dots on the right.

To the right of these columns is a grey button labeled "ADD COLUMN".

In the "OTHER/ NOT SURE" column, there is a note titled "Education" with a dark grey header box containing edit, delete, and more options. The note text reads: "Education should be an overarching strategy. It's relevant to all of the pillars." Below the text are icons for a thumbs up (0) and a speech bubble (0), and a "Add comment" button with a plus icon.

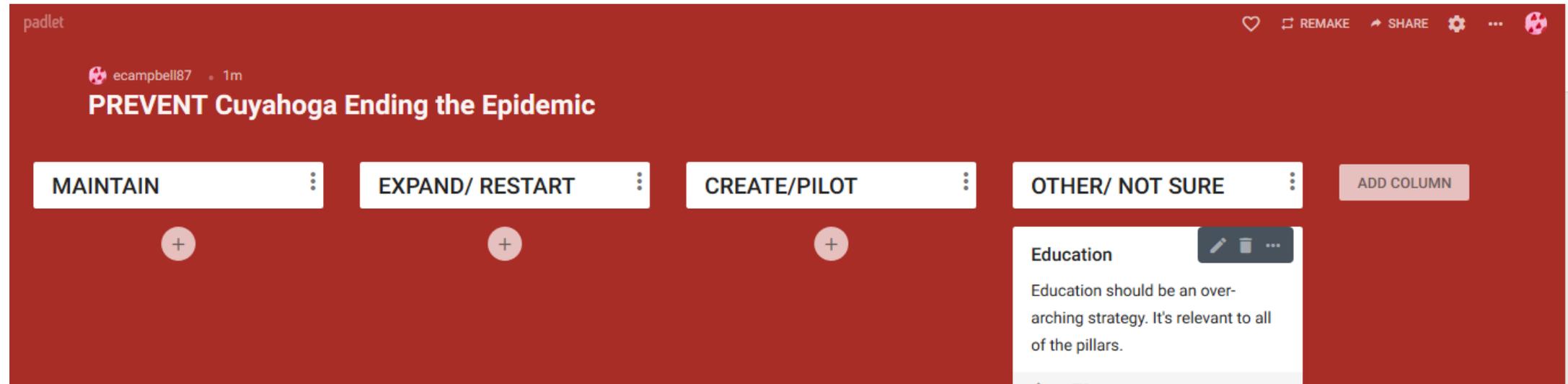
At the bottom center of the board, there is a circular plus sign for adding new notes.

We're going to use Padlet!

- Virtual sticky-note board
- Click **+** to add a new topic
- Click  to like someone's topic
- Add comments to an existing topic

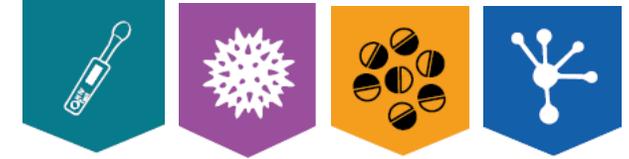


FOCUS ON STRATEGIES



- **MAINTAIN** (exists, is working well, few changes needed)
- **EXPAND/ RESTART** (either exists now or did in the past, should be brought back or brought to scale)
- **CREATE/ PILOT** (brining something new to this community, from elsewhere or developed)

Overarching



Issue	Explanation
Representation Matters	A consistent theme identified that touches all pillars is to include PLWHA in all aspects of the work. Representation of race, gender, sexual orientation, ethnicity and other characteristics is important.
Systemic Racism impacts all aspects of HIV/AIDS	Systemic racism is present throughout the medical system including in HIV/AIDS care. Racism creates health disparities for BIPOC people.
Stable Housing is important	Stable housing allows people to care about being diagnosed, stabilizes treatment and can aid in prevention. Without stable housing, obtaining and managing the medication to reach undetectable status is incredibly difficult.
Intimate Partner Violence impacts PLWHA	PLWHA have additional barriers to leaving an abusive situation. They fear their status being outed, fear criminalization laws, fear violence within a shelter system. These fears are in addition to the dynamics at play in relationships with intimate partner violence

Overarching



Issue	Explanation
Instability of workforce	Professionals working the HIV/AIDS field have stressful jobs and are often not paid enough to stay in these positions long term. Passion does not pay the bills. PLWHA doing peer led work are often expected to do so without compensation.
Stigma	Internalized and anticipated stigma exist in each pillar. "Stigma is both pernicious and persistent." Building relationships and developing trust moves people through stigma into diagnosis, treatment and prevention efforts.
Criminalization laws	Criminalization laws touch each pillar resulting in fear and an unwillingness to know their status and share their status.
GENERAL SEXUAL HEALTH EDUCATION	

Prevent



Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs)

Issue	Explanation	Existing Response
Condoms work.	Nearly all of the PLWHA interviewed identified condoms as an important prevention tool. Most bars gladly distribute free condoms when made available to them.	Condoms are available.
Harm reduction is an important prevention tool.	Safe injection sites and syringe service programs have reduced risk of transmission among drug users and provide access to testing where people already visit.	Programs exist and are effective.
Schools in Ohio do not consistently offer comprehensive sex education that includes HIV awareness. They need to be LGBTQ inclusive	Many are concerned about the lack of education youth receive around HIV/AIDS and sexual health in general. Young people are often not aware of how HIV is transmitted.	There are programs but not uniform; funding fluctuates.
Marketing Campaigns that bring awareness to HIV are important and should be prioritized.	People would like to see the public more generally aware of HIV/AIDS. In recent years, public interest and concern about HIV has taken a back seat to other health issues. Billboards and social media were mentioned often.	There are some campaigns but because they are often targeted (given funding) the general public can be left behind in awareness/info. CCBH (EHE) is investing in multiple campaigns in 2021-, focused on U=U and re-engagement in care.

Issue	Explanation	Existing Response
Messaging is most effective when tailored to the audience.	Messaging created by members of the group being targeted is more likely to effectively reach that group. LGBTQIA, Black, MSM, Women, Youth populations vary in what will resonate with them.	There have been targeted campaigns on select topics - mainly PrEP. CCBH/EHE plan to develop several campaigns on different topics targeted at different audiences.
The concept of U=U is not well known in the community.	Many people felt having more community awareness about U=U would enhance prevention efforts and acceptance of PLWHA	It can be found in some places (web sites).
Younger generations do not view HIV as life altering disease. As a result they are less concerned about preventing HIV.	Younger generations have seen people live with HIV for years and manage with it through medication. There is a need to communicate the seriousness of the disease without using fear tactics.	Sex education in schools typically covers this, when it is comprehensive. You development programs do not. Adolescent medicine? Nothing in social marketing.
Primary care doctors are not prepared to discuss PrEP.	PrEP is more well known than U=U, thanks in part to mainstream commercials. Yet primary care providers are not generally prepared to talk about PrEP with patients and address concerns.	Equitas Institute and AETC conduct trainings for providers. Expanded PrEP/testing programs coming at Signature, Circle Health and Care Alliance (EHE).
Normalizing conversations about safe and healthy sex is valuable to prevention efforts and missing, especially among youth.	Youth especially expressed a need to be able to talk to peers about sexual practices, sober sex, consent and HIV. Conversation leads to a comfort level that can influence behavior.	Not systematically, but sometimes in schools.

Issue	Explanation	Existing Response
PEP is not well known in the community.	The community does not have information about PEP, know how to access PEP and what resources are available to help pay for it.	PEP is generally available in the County. It is not widely discussed or promoted.
CDC process isn't prioritizing sexual health outside of biomedical interventions.	We may lose approaches that have worked in the past in favor of new biomedical responses. Intersectionality is often missed – both/and.	There are elements being implemented by different programs, e.g., ARTAS for L2C.

Prevent: Strengths, Weaknesses, Opportunities, Threats:

Helpful

Harmful

Internal

- We do a good job meeting them where they are (SSP) and there is broad service accessibility.
- Many resources available for those who need them, e.g. PrEP navigators, PAPI, SSPs.

- Lack of knowledge from systems/providers around PrEP (process, training).
- Hard to navigate where to go to get PEP with 72 hour window.
- Providing services in a cultural competent manner for LGBT individuals (eg bisexual women being told to be tested) and resistance from providers to adopt better practices.
- Reaching most impacted populations with these prevention resources.
- PrEP/PEP “access” without appropriate supports/ follow up

SWOT

External

- Accessibility for PEP, including a basic internet search, including communities beyond Cleveland.
- Creating access points to receive cultural competency training to be more affirming and accepting of LGBT patients.
- Community support (mostly) for SSPs.
- Promotion of Existing resources

- Ohio law requires 1:1 v. need-based syringe distribution.
- PrEP use isn't easily tracked (data..?)

We're going to use Padlet!

padlet

ecampbell87 · 1m

PREVENT Cuyahoga Ending the Epidemic

MAINTAIN EXPAND/ RESTART CREATE/PILOT OTHER/ NOT SURE ADD COLUMN

Education

Education should be an overarching strategy. It's relevant to all of the pillars.

0 0

Add comment

<https://padlet.com/ecampbell87/EHECuyahogaPrevent>

PASSWORD: EHECuyahoga (case sensitive)

Bar Survey Results (Prevention)

n=20

Ending
the
HIV
Epidemic

PrEP

Answer Choices	Responses
I have never heard of PrEP	20%
I have heard of PrEP but I don't really know what it is.	5%
In the past, the bar I work at has had promotional materials related to PrEP (coasters, posters, postcards, etc)	25%
The bar I work at currently has promotional materials related to PrEP	35%
The bar I work at has never had PrEP promotional materials, but we would be open to having them	10%
The bar I work at has no interest in PrEP promotional materials	5%

U=U

Answer Choices	Responses
I have never heard of U=U	30%
I have heard of U=U but I don't really know what it is.	0%
In the past, the bar I work at has had promotional materials related to U=U (coasters, posters, postcards, etc)	20%
The bar I work at currently has promotional materials related to U=U	15%
The bar I work at has never had U=U promotional materials, but we would be open to having them	30%
The bar I work at has no interest in U=U promotional materials	5%

Condoms

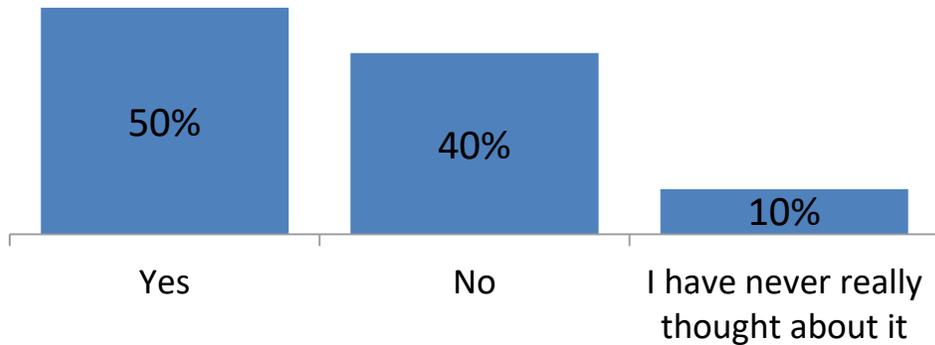
Answer Choices	Responses
The bar I work at does not have condoms available	35%
The bar I work at has condoms available for free	50%
The bar I work at has condoms available for purchase	5%
If the bar I work at were provided condoms for free, we would be willing to distribute them for free	10%

Bar Survey Results

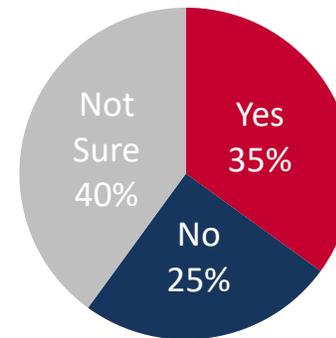
n=20

Ending the HIV Epidemic

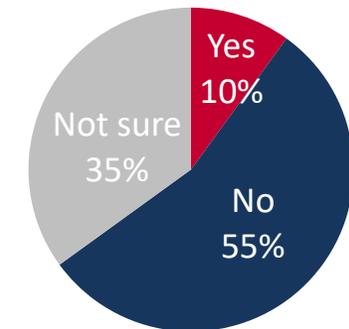
Based on your experience working at a bar, are you **concerned** about your patrons **contracting HIV**?



Based on your experience, do you find patrons of your bar to be **open about their HIV status**?



Based on your observations, are patrons at your bar **treated differently** by other patrons if they **disclose their HIV status**?



Successful Marketing Campaigns

- HIV Equal
- HIV Stigma Campaign in 2010
- PERP (?) at Westside Center
- CCF LGBT Table at Pride

Things to note

- Stigma still here, but not as bad as it was ten years ago
- The need for free condoms and information at the bar is extremely important
- A lot of patrons are open minded and like to learn
- A lot of people will not disclose their status for fear of rejection
- Giving out condoms is a big help