

PENNSYLVANIA HIV PREVENTION AND CARE NEWS BULLETIN

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First Edition

Welcome Readers!

Welcome to the first issue of the Pennsylvania HIV Prevention and Care News Bulletin. We are excited to launch our quarterly news bulletin to inform you about the activities of Pennsylvania's HIV Planning Group (HPG) and other HIV prevention and care efforts in the Commonwealth of Pennsylvania.

We appreciate your attention and invite you to share this news bulletin with friends and colleagues. To help us ensure the content of this news bulletin best meets its intended purpose, we welcome suggestions and ideas for future issues. Send comments and subscribe or unsubscribe requests to news@stophiv.org.

HIV Care Continuum Initiative

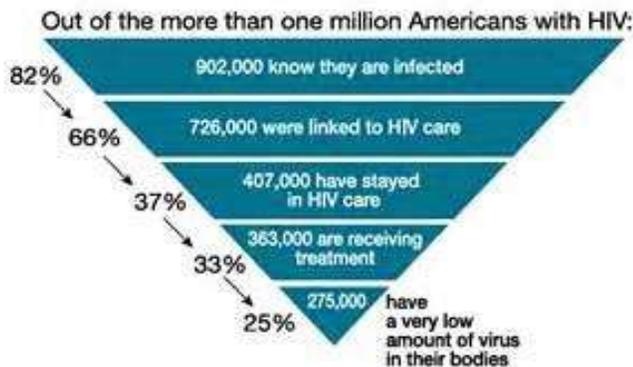
Accelerating Improvements in HIV Prevention and Care in the United States

In July 2010, President Obama released the first comprehensive National HIV/AIDS Strategy. The HIV Care Continuum Initiative calls for coordinated action in response to data that has been released since the strategy showing that only a quarter of people living with HIV in the United States have achieved the treatment goal of controlling the HIV virus. To address this need, the HIV Care Continuum Initiative mobilizes federal efforts in line with recent advances in our understanding of how best to prevent and treat HIV infection. It supports further integration of HIV prevention and care efforts; promotes expansion of successful HIV testing and service delivery models; encourages innovative approaches to addressing barriers to accessing testing and treatment; and ensures that federal resources are appropriately focused on implementing evidence-based interventions along the HIV care continuum in relation to other scientifically proven approaches to combatting HIV.

Scientific advances since the strategy's release highlight the importance of accelerating efforts to increase HIV testing, services, and treatment along the continuum:

- Federal guidelines now recommend antiretroviral treatment for all adults and adolescent living with HIV in the United States.
- Treatment reduces the risk of HIV transmission.
- Screening for HIV is now recommended for all persons 15-65 in the United States.

The HIV Care Continuum Initiative will be overseen by the Office of National AIDS Policy. A workgroup including key federal agencies is charged with implementing the Initiative.



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Syphilis Rates Rising

Among Pregnant Women

The Pennsylvania Department of Health (PADOH) is providing the following update in response to a significant increase in the annual rate of reported syphilis in the female population since 2010. Special testing precautions for all pregnant women are to be taken in the following counties: Delaware, Allegheny, York, Berks, Lycoming, Luzerne, Dauphin, Lancaster, Schuylkill, Fayette, Lackawanna, Lehigh, Erie, Blair, Franklin, Montgomery, Bucks, Beaver and Butler.

PADOH is recommending pregnant females in the impacted counties be offered a test for syphilis in the following situations:

- At the third trimester of pregnancy;
- At the delivery of a child; or
- At the delivery of a stillborn child.

This notice is in addition to the statewide requirement for syphilis testing contained in 28 Pa Code § 27.89 (a)(1)(i) that directs a physician who attends, treats or examines a pregnant woman for conditions relating to pregnancy to offer the woman a test for syphilis at the time of first examination. If a pregnant woman does not object, the test shall be performed in accordance with 28 Pa Code §27.89.

If a pregnant woman objects, the regulation requires the person attending the woman to explain to her the need for the test. With respect to the woman who has given birth, information relating to the test or the objection to the test is to be recorded in both the woman's medical record and in the record of the newborn, as regulation states.

All Other Counties: Please note that physicians in all other counties not listed are still required to offer pregnant women a test for syphilis at the time of first examination for conditions related to pregnancy in accordance with 28 Pa Code § 27.89 (a)(1)(i).

Among Men Who Have Sex with Men

The PADOH in conjunction with the Allegheny County Health Department (ACHD) has documented an alarming increase in syphilis cases, primarily among men who have sex with men (MSM). As of September 10, 2014, the ACHD has reported 67 cases of early syphilis -- this exceeds the total of 63 cases reported in

all of 2013. Here is a breakdown of the data:

- Fifty-four percent of reported cases are individuals under the age of 30.
- Ninety-six percent of the cases reported were male.
- Seventy-five percent of the male cases reported risk factors (had sex with other men).
- Thirty-nine percent of the male cases were co-infected with HIV.

As a result of the uptick in syphilis cases, it is recommended that all sexually active MSM get a syphilis test. The PADOH and the Centers for Disease Control both recommend that all sexually active MSM receive full STD screening (including HIV) annually.

Syphilis may not present any symptoms. The only way to know you're infected is with a simple blood test.

In addition, all individuals presenting with any of the following symptoms should be immediately tested for syphilis:

- A macular and/or papular rash on the palms of the hands or on the soles of the feet;
- A generalized rash that may be macular, papular, or papulosquamous on the back, chest, or stomach;
- A lesion in the genital, rectal, or oral area;
- Moist papules in the anogenital region or the mouth;
- Sudden "Moth-eaten" scalp alopecia with a typical onset at the back of the head;
- Loss of eyelashes and the lateral third of the eyebrows;
- Generalized lymphadenopathy; or
- Malaise.

Additional information on the treatment and follow-up of syphilis is also available by consulting the CDC's "2015 STD Treatment Guidelines," available on the Internet at www.cdc.gov/std/treatment/.

About the Pennsylvania HIV Planning Group

The Pennsylvania HIV Planning Group (HPG) is organized and sponsored by the Pennsylvania Department of Health (Department), Bureau of Communicable Diseases, Division of HIV. The planning body functions as an advisory group to the Department to assist in meeting legislative requirements and expectations, reviews best practices for use in Pennsylvania, and accomplishes all HIV planning activities for the commonwealth

VISION / MISSION / VALUES

VISION: The vision of the Pennsylvania HPG is to ensure that all persons living with HIV and those identified most at risk have access to current prevention, treatment and care, interventions, and services through a continuum of engagement that includes testing, linkage and maintenance in the health care and supportive system.

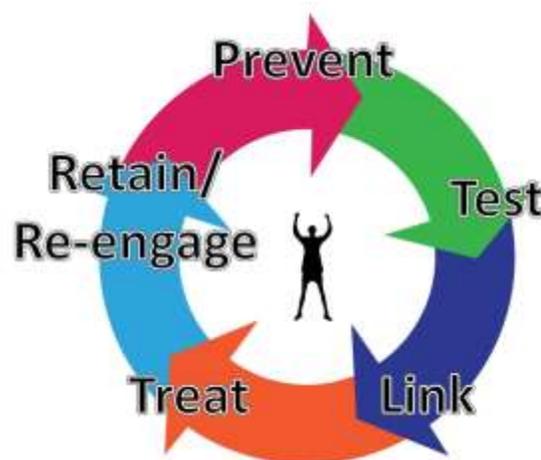
MISSION: The purpose of the Pennsylvania HPG is to provide a forum for key stakeholders across the commonwealth to formally provide input to the Department on issues related to HIV/AIDS care, prevention, and testing in order to address goals of the National HIV/AIDS Strategy.

VALUES: The Pennsylvania HPG embraces these values in achieving our vision and mission:

- Parity, -- which means equal participation in carrying out tasks or duties in the planning process; an equal voice.
- Inclusion, -- which is defined as meaningful involvement in decision making to insure that the needs of the affected community and care providers are actively included.
- Representation, -- which means defined as the act of serving as an official member reflecting the perspective of a specific community. A representative should truly reflect that community's values, norms, and behaviors (members should have expertise in understanding and addressing the specific HIV needs of the populations they represent).
- Reflectiveness, -- which means that overall membership and consumer members reflect Pennsylvania's epidemic in such factors as race, ethnicity, and age, as well as geographic diversity, including urban and rural areas.

The broad scope of the Pennsylvania HPG ties directly to the continuum of HIV services in Pennsylvania and as defined by the Department in the context of prevent, test, link, treat and retain/re-engage.

Pennsylvania Continuum of HIV Services



HPG members from the community are elected for two year terms commencing in January of their first year. Members are expected to be on time and to attend all meetings. Travel and travel reimbursements for HPG members are governed by the Commonwealth of Pennsylvania and updated periodically. A meaningful involvement in the planning process with an active collegial voice in decision-making by all HPG members is essential and encouraged.

The application package can be downloaded from www.stophiv.com. We are particularly interested in applicants who are: living with or at high-risk for HIV; racial and ethnic minorities, especially African-American/Black and Hispanic/Latino that identify or represent risk categories (see list on nominations form); individuals age 13-29; individuals identifying as injection drug user (IDU); individuals identifying as transgender; and individuals with Ryan White Part A, Part C, Part D, or Part F affiliations.

Stakeholder's Corner

A goal of the National HIV/AIDS Strategy is to refocus existing efforts and deliver better results to the American people within current funding levels, as well as make the case for new investments. It is also a new attempt to set clear priorities and provide leadership for all stakeholders to align their efforts toward a common purpose.

To align with the strategy, Pennsylvania's HIV Planning Group is working to engage Pennsylvanians at all spectrums of the HIV care continuum to better understand the needs of the commonwealth. The HPG has included a process that will gather and incorporate stakeholder input into the Integrated HIV Prevention and Care Plan for Pennsylvania.

Residents of Pennsylvania are encouraged to become stakeholders and join the planning process by sending an email to stakeholders@stophiv.org.

A range of social, economic, and demographic factors affect some Americans' risk for HIV, such as stigma, discrimination, income, education, and geographic region. Stakeholders are invited to share their stories about efforts within their community to reduce HIV-related health disparities.



Journey of Acceptance

Journey of Acceptance is a model for telling our stories while working through the impact of stigma in our lives. This model uses an educational map of the HIV care continuum and overlays this with the five stages of grief. The result is a framework that allows people living with HIV/AIDS to explore their own journey and recognize how stigma impacts them along this journey.

In May, the Journey of Acceptance model and process was piloted at the Shepherd Wellness Community, a group networking location for positives in the Pittsburgh area. The purpose of the pilot was to evaluate the model and process for a larger application based on asking individuals to tell their own stories and identify where stigma impacted their lives. Results of this pilot were very favorable, and feedback will be used in future applications. For more information, contact Mike Hellman at mike@alphapittsburgh.org.

High Impact Prevention and Capacity Building

Centers for Disease Control and Prevention (CDC) reports that, while current prevention efforts have helped to keep the number of new infections stable in recent years, continued growth in the population living with HIV will ultimately lead to more new infections if prevention, care, and treatment efforts are not intensified.

To advance the prevention goals of National HIV/AIDS Strategy and maximize the effectiveness of current HIV prevention methods, CDC pursues a high-impact prevention approach. By using combinations of scientifically proven, cost-effective, and scalable interventions targeted to the right populations in the right geographic areas, this approach promises to greatly increase the impact of HIV prevention efforts.

Pennsylvania Department of Health, Division of HIV/AIDS is guided by key considerations when addressing High Impact Prevention. Among Department considerations are:

- Effectiveness;
- Cost feasibility of full-scale implementation;
- Coverage in the target populations;
- Interaction; and
- Targeting prioritization for people living with HIV/AIDS (PLWHA) and populations at highest risk for HIV based on epidemiology data.

Through the Department, the HIV Prevention and Care Project (HPCP) offers capacity building and technical assistance. Central to high impact prevention is attention to the services following key prevention and care areas: linkage to care, adherence, evidenced-based interventions for PLWHA and identified data driven high-risk populations, and support services.

For more information about the types of trainings being offered by HPCP, contact Debra Dennison at dpd2@pitt.edu.

HPCP
HIV Prevention
and Care Project