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Alameda County Links Up

There has been much talk lately about Test and Treat and the positive effects it can have on the spread and impact of the HIV epidemic. Identifying new cases and treating many to decrease the overall viral load in a community continues to be studied as a promising tactic against the disease. However, without effective linkages and retention in care, the promises of that model may not come to fruition.

In addition to finding those in our communities who are unaware of their HIV infection, it is just as important to reach those who are aware of their status but are not in care. It has

been estimated that 30-50% of newly infected individuals in the United States fail to establish care within 6 months of diagnosis. It has also been established that missed medical visits are highest among those struggling with poverty, drug use, stigma and other conditions that compete for priority in the lives of many HIV positive people.



Similarly, there are data that demonstrate effective linkages and retention in care are associated with higher rates of suppressed viral loads, immune function and survival. Along with the positive effects of a decreased viral load on transmission of the virus, it has also been shown that clients active in their care have a decrease in risky behaviors.

Several elements within the Alameda County system of HIV care are preparing to come into action to increase the effectiveness of care linkages as well as retain those who have been in care and may have fallen out. The Alameda County Office of AIDS Administration (OAA) recently hired a Care Linkage Coordinator to follow up on those clients who have missed appointments and may have fallen out of care.

For the first time ever, the Community Collaborative Planning Council (CCPC) has allocated funds for Early Intervention Services focusing on linking newly diagnosed clients into care. These program funds are now part of the recently released OAA Request for Proposals, with the expectation that the program(s) will begin on March 1, 2011.

The Family Care Network is currently working

on plans to implement a program to both assist with linking and retaining clients in care. The Bay Area Network for Positive Health (BANPH) is also working to keep clients engaged in care and bring back those who have fallen out of medical care.

Coordination of these efforts are already underway to assure the appropriate management of these vital resources and to prevent gaps in coverage.

Recent Study Shows HIV Medications Reduce Risk of Infection

Data from the iPrEx study published in the New England Journal of Medicine last month show that HIV medications taken by uninfected persons reduce the risk of HIV infection. The study, funded by the National Institutes of Health and conducted by Gladstone Institutes, studied the use of a daily pill that contains tenofovir plus emtricitabine (brand name Truvada) as preexposure prophylaxis (PrEP).

The average reduction in risk of infection was about 44% compared to those taking a placebo pill. For those study participants who took the pill almost every day, the reduction in risk was closer to 73%.

The study recruited 2,499 men and transgender women who have sex with men who are at high risk for HIV infection in eleven sites in six countries around the world. In addition to the HIV medications, participants also received comprehensive prevention services that included condoms, HIV testing, safer sex counseling, and treatment and care for sexually transmitted infections

While these results are encouraging, there are several cautions to point out. No one should attempt PrEP on their own. There is no evidence that taking PrEP intermittently or before sex can reduce the risk of infection. Everyone should

continue to use other prevention methods, such as condoms, especially because PrEP does not protect against other sexually transmitted infections. Lastly, the iPrEx study's results cannot predict the effect of PrEP in other populations. Other studies are currently underway with heterosexual persons, serodiscordant couples and injection drug users. Furthermore, research is needed on how risk behaviors may change for those individuals taking PrEP.

For more information, check out the following sites:

www.gladstone.ucsf.edu/gladstone/site/gweb1/ www.projectinform.org www.cdc.gov/hiv





The National HIV/AIDS Strategy: A Synopsis – Part II

by Kabir Hypolite

The National HIV/AIDS Strategy has three primary goals: 1) reduce new HIV infections; 2) increase access to care and improve health outcomes for people living with HIV; and 3) reduce HIV-related disparities and health inequities. This Director's Corner commentary is discusses the Strategy's second goal.

Increase Care Access & Improve Health
Outcomes

Many people living with HIV face continuing barriers to care and treatment services. High treatment costs, lack of insurance, homelessness and poverty, mental health and isolation, stigma and discrimination, linguistic and cultural bias all undermine an HIV+ person's ability to access and remain in care and result in poor treatment outcomes. The Strategy establishes three benchmarks for 2015 to aim resources squarely at these barriers and to reduce them.

Benchmark #1 calls for a "seamless system" that within three months of diagnosis links 85% (up from 65%) of HIV+ individuals to continuous and coordinated quality care. Co-location of testing and care services in substance use treatment facilities and non-traditional sites like community centers, mental health centers, and faith institutions to provide HIV screening and referral services. OAA will engage community

partners to assess ongoing linkage to care efforts and work with them to meet this benchmark.

Benchmark #2 aims to link 80% of HIV+ individuals in local health jurisdictions to continuous care. This year OAA initiated a strategy to find the estimated 3000 HIV+ County residents who are out of care and link them back to quality care. We will evaluate our progress.

Benchmark #3 focuses support for those living with HIV who experience barriers to meeting their basic needs. Currently, our Ryan White Programs utilize their resources to assist clients to surmount barriers (i.e. access to housing, food, dental, transportation, child care and emergency financial assistance, and other support services) and OAA is working to coordinate efforts more effectively through our newly launched CAREWare data system.

Regarding health insurance, the Affordable Care Act (ACA) expands access for HIV+ individuals through creation of temporary high insurance pools in each state for the uninsured with chronic health conditions. On January 1, 2014, individuals enrolled in high risk pools will be transitioned to qualified health plans through state health insurance exchanges. Also in 2014, Medicaid's (MediCal) eligibility threshold will be lowered to 133% of the Federal poverty level. Uninsured individuals with incomes up to \$400% of the Federal poverty level can claim Federal tax credits and purchase private insurance through exchanges. Important consumer protections that prohibit insurance industry practices such as pre-existing conditions clauses and health status exclusions also go into effect in 2014.

To learn more about or to share your comments on the White House National HIV/AIDS Strategy and Federal Implementation Plan please call or email the White House Office of National AIDS Policy at: (202) 456 4533 or AIDSpolicy@who. eop.gov. Or visit ONAP's website at: www.whitehouse.gov/onap.



Teen Date Violence Prevention

Youth Radio Community
Engagement Manager
Maeven McGovern

arlier this year, SB 1300 was introduced to the California Senate. This bill proposed to link Sexual Education with Teen Dating Violence (TDV) Prevention education in schools, meaning all TDV prevention workshops would include a sex education component. Advocates and direct service providers were extremely alarmed by the implications this held for the accessibility and prevalence of TDV prevention and awareness education because it would create the space for parents to "opt-out" their children and it would mean that schools receiving the federal abstinence-only education funding would not be able to present this life-saving information to their students.

TDV prevention direct service providers and advocates mobilized concerned parties within California and generated enough momentum to defeat the bill. As someone with a decade of experience in TDV prevention, as well as having a background in HIV/AIDS prevention and awareness work. I found the "victory" to be bittersweet. I am well aware of the challenges in convincing teachers, parents and school administrators that making time and space in an extremely impacted, standardized schoolcurriculum for workshops around issues that are seen as unrelated to academics; like TDV and HIV/AIDS. Most individuals in our society receive more training on driving a car than being in a healthy relationship, even though unhealthy relationships yield unstable home lives and often create a cycle of abuse and violence which is passed down from one generation to the next. I have seen that understanding the difference between healthy and unhealthy relationships (and having the capacity to implement healthy

expectations of romantic partners) can, and does, save lives and I am well aware of the urgency around undermining the creation of more barriers between individuals and this information.

Given that many youth who contract HIV do so through unprotected sex, it seems to me that we need to be supporting our youth in having open, respectful conversations with their partners about protecting themselves and each other from HIV/AIDS, in addition to STI's and unwanted pregnancies. society's discomfort with sex has led us to separate sex from relationships, when in truth we know sex, and the pressure to be sexually active, is an extremely significant aspect of all romantic relationships, and teen relationships in particular. It is my hope for the next generation that we are able to move beyond the current compartmentalizing of these issues and begin to both cultivate an understanding of sex as a natural, healthy act when it occurs in the context of a caring, respectful, consensual relationship and provide our young people with the tools they need to have healthy, supportive, respectful relationships and open communication with their sexual partners.



2010 OAA Community Service Awards

December 1, 2010 marked the 22nd annual celebration of World AIDS Day, which began in 1988, as a way of raising money, increasing awareness, fighting prejudice, improving HIV education. This day serves as a reminder that HIV has not gone away, and that there is still a great deal of work that needs to be done.

December 1, 2010 also marked the 16th year the OAA has celebrated Worlds AIDS Day and presented its Community Services Awards to individuals who have made a notable contribution to the fight against HIV/AIDS in Alameda County. This year's honorees were:



Left to Right
Lisha Wilson M.D., Trailblazer
Theodora Marzouk, Caregiver (front)
Tiffany Woods, Education & Prevention (back)
Anthony Sillemon Psy. D., Care & Treatment (back)
Myrtis Nell Davis, Volunteer (front)
Francisco Zepada, Youth
Adriann McCall, Non-Traditional Community Partner

Each of the honorees was presented with an engraved glass award commemorating their outstanding and individual contributions in the fight against HIV/AIDS.

The more than 100 attendees to this year's celebration, which was held at the Jack London Aquatic Center, were treated to an entertaining and touching event in celebration of this year's World AIDS Day, "Universal Access & Human Rights".

This year's theme was highlighted by Doctor Lisha Wilson, from AIDS Healthcare Foundation as she accepted the Trailblazer award and shared her personal challenges at the beginning of her medical career serving HIV positive clients. She shared how she overcame the religious prejudices of her upbringing to grow to love and passionately embrace the work that she does and how she has learned compassion, tolerance and acceptance from those she serves.

The OAA congratulates Lisha Wilson all of this year's honorees and their continued contributions to HIV/AIDS services in Alameda County.

Transgender Day of Remembrance

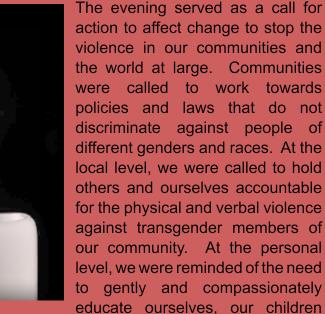
November 20, 2010 was the 12th Annual International Transgender Day of Remembrance. On that day, we remember all the transgender people who have died in the last year from violence or HIV.

This year was the 5th Alameda County memorial at Preservation Park's Nile Hall. At the event, the names of those who died in the past year were read. This year there were over 100 names from around the world. A large number of names came from Latin America, many of those from Brazil. Even more disturbing is the fact that some of the dead were children and others remain unidentified.

Between the reading of names, the standing room only crowd listened to several speakers share their experiences. Victoria Kolakowski,

the nation's first elected transgender official, spoke about her life as a trans woman and the reaction she has received since her election as Alameda Superior Court Judge. She spoke of her hope that her poll victory was a sign that transgendered people can now begin to be judged by their accomplishments and work.

Although the evening was solemn, the messages from the speakers were bold and thoughtful.



and our friends about transgender people to reduce the stigma that can lead to so many of these violent deaths.



OAA Request for Proposals

The OAA is currently awaiting submissions for its recent RFP solicitation. Applications are due in to the OAA office by 12 noon December 15th. Late applications will not be accepted.

Applicants are competing competitively for Ryan White – Part A funding to address the provision of Oral Health Services, Psychosocial Support, Legal Services and Early Intervention Services

in Alameda County.

Proposals meeting all OAA required submission criteria will be reviewed and scored by an independent review panel with final decisions made by the OAA Director. The OAA anticipates award notifications to be made by January 07, 2011 and posted to the OAA's website www. officeofaids.org.

New OAA Staff Member

The OAA welcomes Georgia Schreiber as the Care Linkage Coordinator. She has 6 1/2 years with Alameda County.

Previously, Georgia worked coordinating treatment for clients for the Alameda Public Health's Communicable Disease Section.

She takes a client-centered approach to her

work. "I don't force the clients to do anything. I work in harmony with their needs. I meet them where they are and let them decide if they want my help." Georgia says oftentimes a client that initially refuses her help may later call her back to request it. Most recently, Georgia worked in the AIDS Surveillance Unit, working with providers and laboratories to assure complete reporting of HIV cases which affect HIV/AIDS funding.

Georgia's experience includes work as a patient advocate at a women's health clinic, and she is a volunteer for an organization working to

eliminate human rights abuses in California prisons. She looks forward to working with the network of HIV providers and all of us at the OAA look forward to eating some of the tasty desserts that she bakes.

OAA Website Launch

The OAA's website is in it's finally stages of completion and due to be launched December 15th. Please make sure to visit and support our new website which we are gearing up to be an informative and compressive avenue of information and resources for HIV/AIDS services for Alameda County.

The website will include areasspecific to the needs of individuals seeking information on HIV care and testing. The site will also inclue an area named "For Providers" for OAA funded program providers to house relevant documents and information that will help to support their work. Providers will be able to access invoicing forms, major documents created and commissioned by

the OAA, as well as have a variety of helpful links to other County service providers.

Another key feature of the OAA's new website will be "Ask the Expert", which will feature Alameda County HIV physicians and services providers, lending their knowledge and insights on a wide spectrum of HIV/AIDS related topics, speaking to the concerns and questions of Alameda County's infected and affected HIV/AIDS populations.

We look forward to your support as the OAA continues to develop its use of new media in providing useful and timely information.



'Tis the Season and a Reason to Give

The Food for Life congregate meal program, located at Allen Temple Baptist Church, has been offering more meals to more people since its kickoff in July of this year. Their goal is not only to feed the hungry and to provide health education, job training, GED and Anger Management classes, but to get folks to hang around a little longer even after the meal is served. This will allow the case coordinator to find out more about their needs and introduce them to the other resources and services designed to improve quality of life available at Allen Temple.

The Food for Life has created a wish list of items that would be helpful and greatly appreciated for their program. Items can be either new or gently used.

Large White board
Clothing (especially business wear for job seekers)
TV/DVD
Gift certificates and/or trophies for Health Related Contests
Playing cards
Dominoes
Other Board Games

Thank you for your support.

For donations or more information, please contact Toni Dunbar at (510) 544-8973





OAA News Briefs

- → OAA wants to thank you for all your patience and understanding in regards to the launching of CAREWare. We are making strides in improving the system in all areas.
- → ALL 2010 Care data must be entered by January 21st 2011
- → The deadline for Ryan White Part A budget revisions is December 31, 2010
- → Prevention Mid-year Reports are due January 15, 2010.
- → There is no Planning Council meeting in December. The next full coincil meeting is scheduled for January 26, 2011.

Article or Announcement Submissions

The Office of AIDS Administration encourages community members to submit articles relevant to HIV/AIDS in Alameda County

Approximately 250 words (one double spaced page)
Include contact information
Submit bye email only
Submit as word document or in the body of email
Due to space constraints, not all submitted articles may be published.
For more specific guidelines, contact Lorenzo Hinojosa at Lorenzo.Hinojosa@acgov.org

For a subscription to the OAA Quarterly Newsletter, please send email to Lorenzo.Hinojosa@acgov.org



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