



When Two Pandemics Meet: HIV & COVID-19 in the Hispanic LGBTQ Community

Cuando Dos Pandemias se Cruzan: el VIH y COVID-19 en la comunidad LGBTQ Hispana

December 1, 2020
4 PM – 5 PM EDT
www.NHMAmd.org

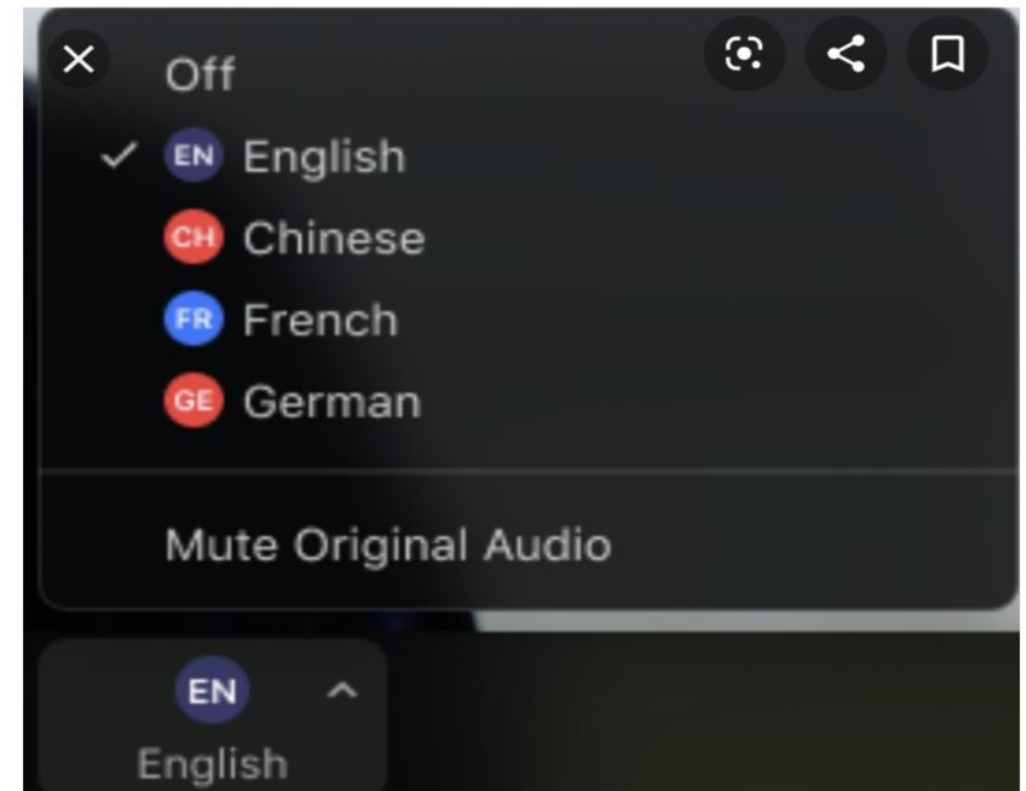
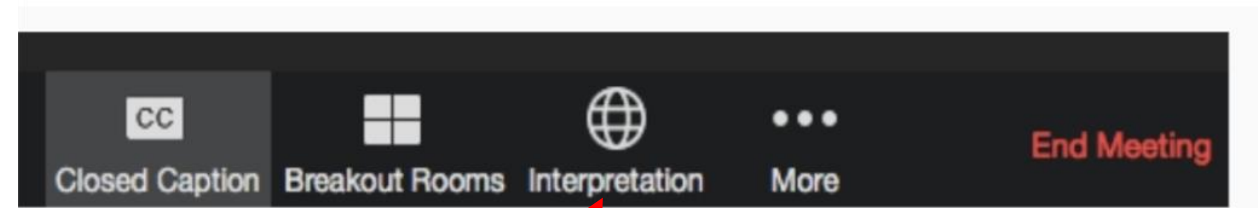


Para activar la interpretación, haz clic en “Interpretation” donde ves el ícono de un globo terráqueo.

To activate interpretation, click “Interpretation” where you see the globe icon.

Seleccione el idioma en que prefieres escuchar. También puedes hacer clic en “Mute Original Audio” para solo escuchar la interpretación.

Select the language you are most comfortable listening in. You can also click “Mute Original Audio” if you only want to hear the interpreter’s voice.



Welcome

Judith Flores, MD, FAAP, CHQM

Immediate Past President

National Hispanic Medical Association

Housekeeping

- Presentations to be followed by a moderated discussion
- Microphones will be muted
- Type questions in chat box
- Recording available next week at www.NHMAmd.org

When Two Pandemics Meet

Arthur Fitting, BSN, RN

Director

VNSNY LGBTQ Program & Community Outreach

World AIDS Day

December 1, 2020

VNSNY at a Glance



VNSNY is the largest not-for-profit home and community-based health care organization in New York, serving New Yorkers for 127 years.

Our Mission



To improve the health and well-being of people through high-quality, cost effective healthcare in the home and community

Our Vision



To be the leading payer and provider of integrated, cost effective home and community-based healthcare

Powerful Dualities of Capabilities

As a Provider



We bring 127 years of clinical expertise and experience

As a Health Plan



With deep understanding of managing and financing care for complex conditions

VNSNY by the Numbers

12,000

Employees, including: 1,500 nurses, 400 rehab therapists, 400 social workers, and 7,500 home health aides

44,000

Patient lives touched every day

50

Languages spoken collectively by our staff members

\$2+
BN

Annual revenues

\$39M

Provided in 2019 in charitable care and community benefit programs to **under and un-insured individuals**



VNSNY and the LGBTQ+ Community



- Provided care at the forefront of the AIDS epidemic
- LGBTQ+ Community Outreach
- Gender Affirmation Program for patients undergoing gender-affirming surgery
- Platinum status credentialling from SAGE
- SOGI language training for VNSNY's EMR
- Participation in AIDS Walk and Pride events across NYC
- LGBTQ+ Employee Resource Group: Out@vnsny



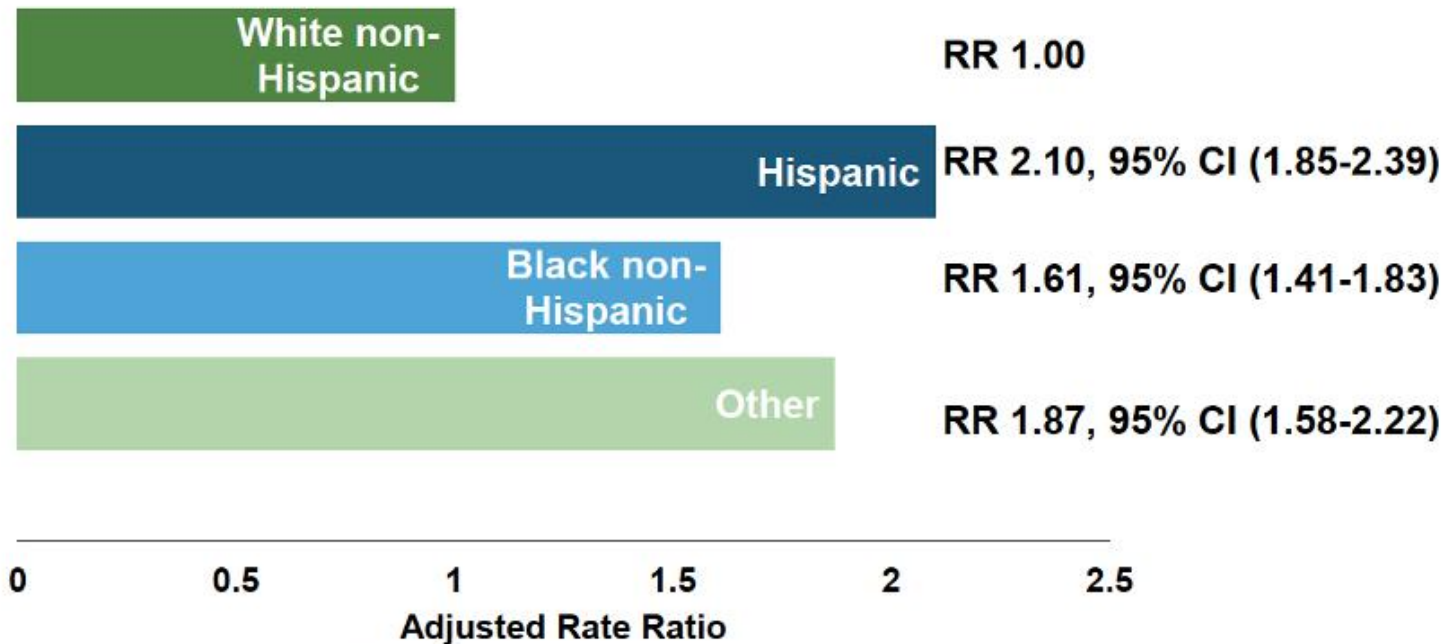
COVID-19 and HIV

- New York's public health disparities were especially evident when COVID hit
- Many clinics and health centers focused on HIV patients were turned into COVID testing and care centers
- Hospitals suspended routine care and barred visitors and outside staff, including staff from HIV-support organizations



COVID-19 Diagnoses, Hospitalizations, and Mortality Among People Living With & Without Diagnosed HIV in NYS

Predictors of COVID-19 diagnosis among persons living diagnosed HIV infection (PLWDH)



n=2,988 COVID-19 diagnoses among PLWDH

model adjusted for age, region of residence, race/ethnicity, HIV Transmission risk, and Stage at last test before 03/01/2020, viral load at last test before 03/01/2020

COVID-19 Impact on Caregivers and VNSNY Clinicians



- Family and friend caregivers were unable to help
- VNSNY clinicians and home health aides put themselves at risk to do their jobs
- Dealing with the special challenges of New York
- Urgent remote training was required on PPE
- Supplies and PPE were sent to HHAs' homes



Supporting our Clinicians with CERT



In March VNSNY established the Clinical Expertise Response Team (CERT), with phones staffed by RNs seven days a week from 8 AM to 5 PM



- Answer field clinicians' questions about symptoms and exposure
- Provide telephonic outreach to HHAs on use of PPE
- Develop educational material and videos
- Track and trend data related to COVID-19 for management

How VNSNY Helped New York's Hospitals Cope



VNSNY provided home care for COVID-19 patients as soon as medically possible to open up hospital beds for more COVID-19 patients

VNSNY CHOICE Health Plans Quickly Adjusted to Help Keep Members Safe



- **VNSNY CHOICE Total** brings together Medicare and Medicaid benefits in an all-in-one plan for people who need long-term help with daily activities
- **VNSNY CHOICE MLTC** is a Medicaid Managed Long Term Care (MLTC) Plan for New Yorkers in need of community-based care who can remain safely at home with ADL Assistance
- **SelectHealth** is a specialized Medicaid plan for people living with HIV, individuals of transgender experience or gender non-conforming, or homeless individuals, regardless of HIV status



COVID-19 and the Move to Telehealth

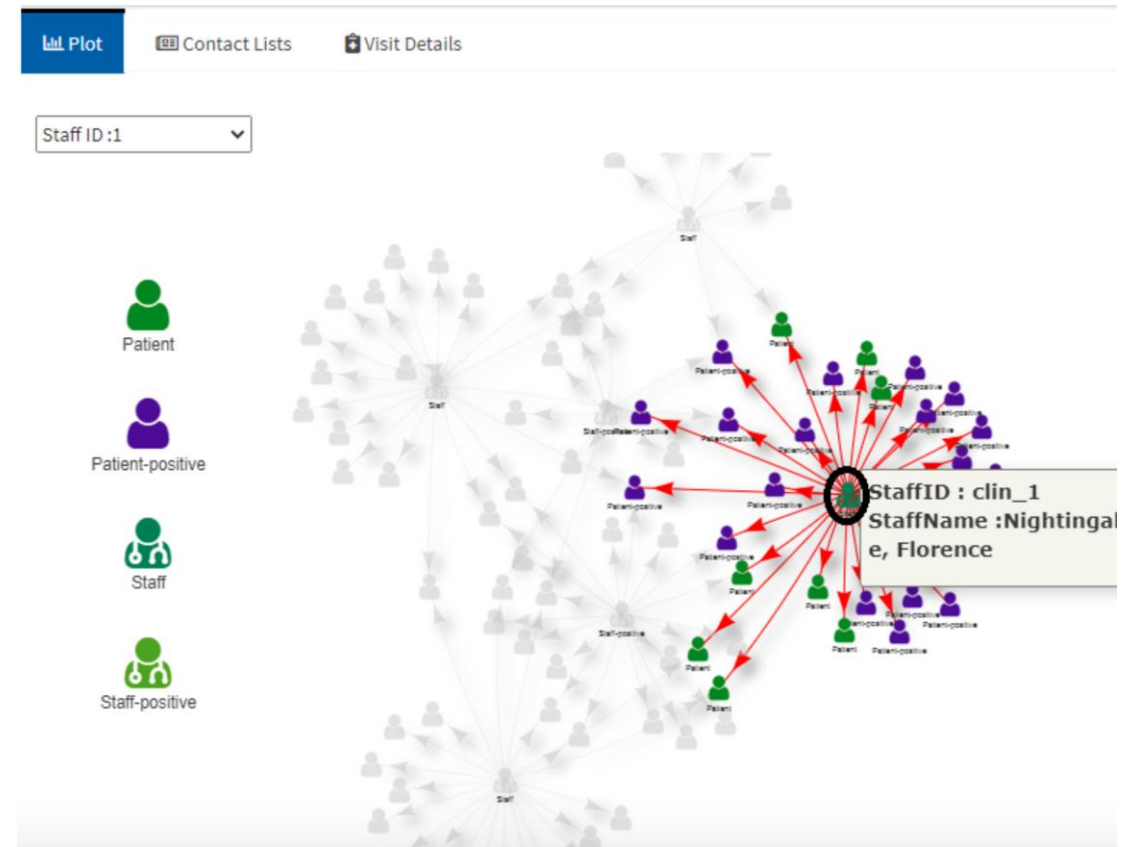


- VNSNY quickly moved to Telehealth/virtual visits with as many patients as possible
- Many patients opted for Telehealth over in-person visits
- Virtual visits don't work for the poor and elderly if they don't have or can't handle the technology
- VNSNY began mailing medications with larger prescriptions and supplies to patients

VNSNY's Contact Tracing Tool



- VNSNY developed its own contact tracing tool, VisitContactTrace
- It's open source and free for use by any organization that delivers community-based healthcare



To access the tool, Google “VisitContactTrace” for instructions on the tool’s Github site.

Looking Ahead



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When Two Pandemics Meet: HIV and COVID-19 in the Hispanic LGBTQ Community- Research with Hispanic MSM

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Acknowledgements

EI CENTRO

elcentro.sonhs.miami.edu

Miami Center for AIDS Research (CFAR)

<https://med.miami.edu/centers-and-institutes/center-for-aids-research>

Center for Latino Research Opportunities (CLaRO)

<https://claro.fiu.edu>

Center for HIV and Research in Mental Health
(CHARM)

charm.miami.edu

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HIV Infection and COVID-19 Commonalities

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A word cloud on a light green background. The words are arranged in a vertical cluster. The largest word is 'TreatmentControversy'. Other large words include 'Stigma' and 'Disparities'. Smaller words include 'TreatmentConfusion', 'Fear', 'Discrimination', 'Isolation', 'Denial', 'Blame', 'Inequalities', and 'InadequateResponse'.

TreatmentConfusion
Stigma
Fear
Discrimination
Isolation
TreatmentControversy
Denial Blame
Inequalities
InadequateResponse
Disparities

(Harris et al., 2020; Inserro, 2020)

A Tale of Two Cities: El Paso, TX and Miami, FL

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	El Paso, TX	Miami, FL
Population	~850,000	~2.8 million
Hispanic population	82.9%	71%
HIV cases diagnosed and trends	16.3/100,000 slight ↑	14.3/100,000 steady
COVID19 cases and deaths as of 11/28/2020	85,318 1,068 1.3%	226,000 3,823 1.7%

The Impact of HIV Infection and COVID-19

↑ Physical health burden

+ ↑↑↑ Mental health burden



Impact on Social Determinants of Health (SDoH):

- Economic stability
- Education
- Healthcare access and quality
- Neighborhood/environment
- Social/community context



(USDHHS, 2020)



Research with Hispanic MSM

- ~ 15 years of research with Hispanic MSM
- Mixed-methods approaches
- Focused on the intersection of HIV/HIV risk and mental health



El Paso Team



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Research with Hispanic MSM with HIV Infection

Three separate research studies in Miami and El Paso found that these men:

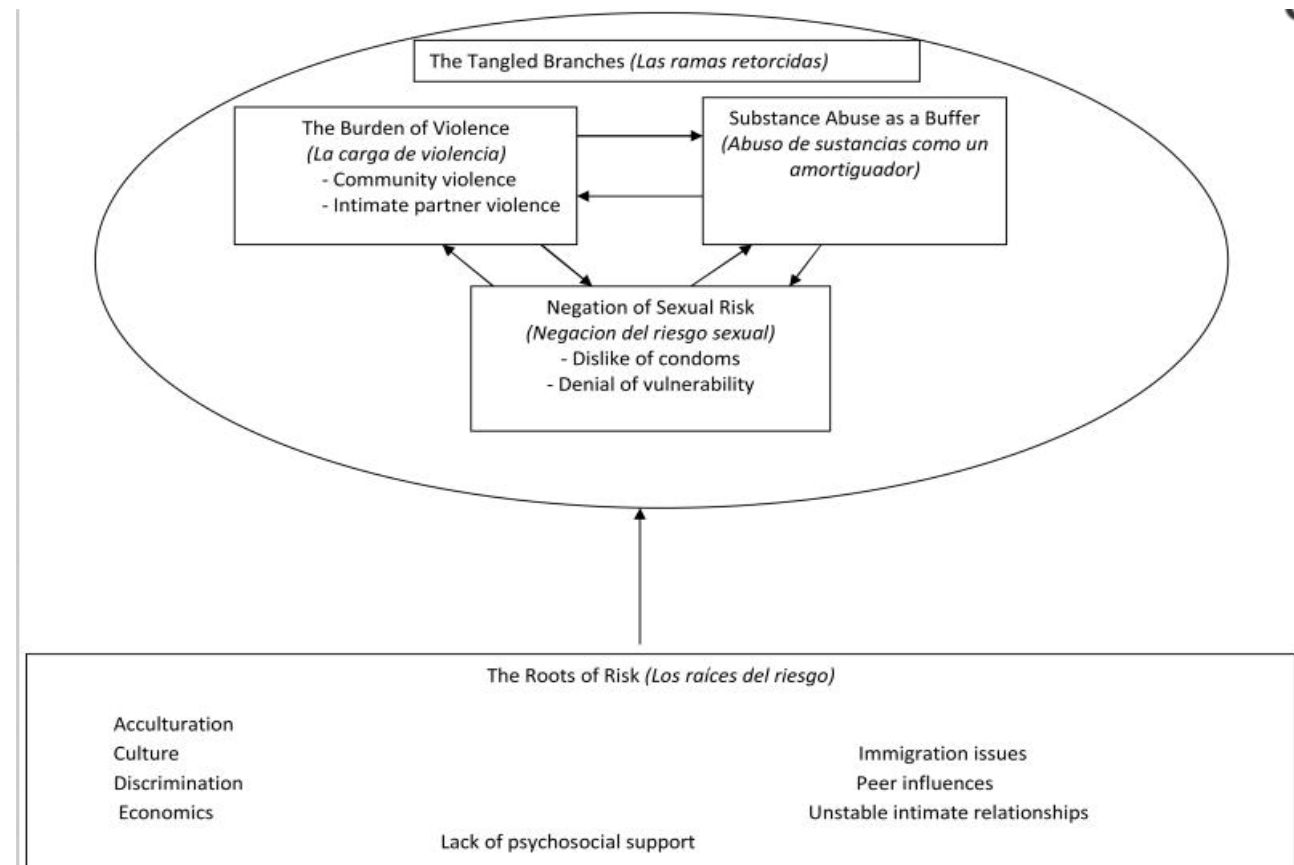
- Were at high risk for depression and substance use ^{1,2}
- Reported histories of child/adult violence ^{1,2}
- Reported high levels of stress ^{1,2}
- HIV infected men had lower levels of social support and higher levels of drug use when compared to those not infected with HIV. Men who were not aware of HIV status had more sexual partners when compared to those aware of HIV status ³

(De Santis, Gonzalez-Guarda & Vasquez, 2012 ¹; De Santis, Provencio-Vasquez, Mata & Martinez, 2016 ²; Valdes, Salani & De Santis, 2020 ³)



Risk Factors for HIV Infection among Hispanic MSM

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(De Santis, Gonzalez-Guarda, Provencio-Vasquez, & Deleon, 2014)

Research on HIV Risk among Hispanic MSM

A study of 125 Hispanic MSM in Miami, FL investigated the influence of parental reaction to sexual orientation on depressive symptoms and sexual risk behaviors. Findings indicated that:

- Rejection due to sexual orientation by either mother, father, or both resulted in more depressive symptoms
- Parental reaction to sexual orientation did not influence sexual risk behaviors.



Research on HIV Risk among Hispanic MSM

Two qualitative research students with Hispanic MSM at risk for HIV infection in Miami, FL found that these men:

- Had difficulty in sexual decision-making because of competing or conflicting information from various cultures: Hispanic, gay and health.¹
- Had difficulty with sexual negotiation.²

(De Santis, Quidley-Rodriguez, Valdes, Alves & Provencio-Vasquez, 2018¹;
De Santis, Quidley-Rodriguez, Mathurin, Valdes, Leblanc, Provencio-Vasquez, & Martinez, 2020²)



Research on HIV Risk among Hispanic MSM (cont.)

A study of 150 middle-aged Hispanic in Miami, FL found that these men reported unprotected anal sex (UAS) was related to:

- Low levels of social support.
- Increased loneliness.
- Increased depressive symptoms

(Valdes, Gattamorta, Jones, Fenkl & De Santis, 2019)



Research in Progress

The S3 Study (Sleep, Sex and Stress) surveyed 150 Hispanic MSM in El Paso, TX and 150 Hispanic MSM in Miami, FL. Participants completed measures of:

- Adverse Childhood Experiences (ACEs) in Miami only.
- Mental health (anxiety, depression, behavioral control)
- Sleep
- Impulsivity
- Sexual compulsivity
- PTSD
- Sexual risk behaviors



Summary

- HIV infection and COVID-19 have the potential to affect Hispanic MSM.
- HIV infection and COVID-19 may result in depressive symptoms, decreased social support, and increased loneliness that could lead to risk for violence, increased stress, worsening mental health, increased substance use, and high risk sexual behaviors.
- More research is needed with Hispanic MSM to understand how both pandemics affect physical and mental health.



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Let's Stop HIV Together and HIV Nexus

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Let's Stop HIV Together

and HIV Nexus

Continuing Medical &
Nursing Education to
Support Ending the HIV
Epidemic

2020



Ending
the
HIV
Epidemic



Let's Stop HIV Together (Detengamos Juntos el VIH)

■ Consumers



■ Providers



Let's Stop HIV Together: Website

Let's Stop HIV Together

Spanish



Together we can stop HIV. Looking for information on [HIV testing](#), [prevention](#), [treatment](#) and [stigma](#)? Click on a topic below to find out more. *Let's Stop HIV Together* is part of the national [Ending the HIV Epidemic \(EHE\)](#) initiative.



Let's Stop HIV Together

HIV Testing +

HIV Prevention +

HIV Treatment +

HIV Stigma +

Clinician Resources

Search All Resources

Partner With Us +

Social Media Toolkits +

More HIV Topics

[HIV Basics](#)

[Nexus: Clinical HIV Information](#)

[HIV Partner Resources](#)

[HIV Resource Library](#)

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[About the Division of HIV/AIDS Prevention](#)

Detengamos Juntos el VIH

inglés (English)



Juntos podemos detener el VIH. ¿Busca información sobre [pruebas del VIH](#), [prevención](#), [tratamiento](#) y [estigma](#)? Haga clic en un tema a continuación para obtener más información. *Detengamos Juntos el VIH* es parte de la iniciativa nacional Poner fin a la [Epidemia del VIH](#) (EHE por sus siglas en inglés).



Detengamos Juntos el VIH

Prueba del VIH +

Prevención del VIH +

Tratamiento del VIH +

Estigma del VIH +

Encuentre Recursos Para la Prevención del VIH

Recursos Clínicos

Buscar todos los recursos

Conviértase en organización social +

Más temas sobre el VIH

[Información básica sobre el VIH](#)

[Biblioteca de Recursos](#)

[HIV in English](#)

English: <https://www.cdc.gov/stophivtogether/>

Spanish: <https://www.cdc.gov/stophivtogether/spanish/>

Let's Stop HIV Together for Clinicians

- Clinicians are the front line for preventing new HIV infections and inspiring healthier outcomes for all patients.
- The Centers for Disease Control and Prevention's (CDC's) campaign, ***Let's Stop HIV Together***, offers free resources and tools for health care providers and their patients on HIV screening, prevention, and treatment.



HIV Nexus: A New Clinical Resource

<http://www.cdc.gov/HIVNexus>

- ***HIV Nexus* is a comprehensive website** from the CDC that provides the latest scientific evidence, guidelines, and resources on:
 - Screening for HIV.
 - Preventing new HIV infections by prescribing pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP).
 - Providing treatment to people with HIV to help improve health outcomes and stop HIV transmission.\



COVID-19 and HIV

www.cdc.gov/hivnexus

- Media buys focus on self-testing and PrEP services via telemedicine




COVID-19 and HIV

www.cdc.gov/hivnexus

- Self-testing and PrEP one-pager for health care providers
- Social media focused on patients with HIV, self-testing, and PrEP services via telemedicine

What are the TOP 3 THINGS

HIV care providers need
to know about COVID-19?



HIV Testing and PrEP Services During COVID-19 Guidance for Health Care Providers

The coronavirus disease 2019 (COVID-19) epidemic has made it more difficult to access traditional settings where HIV testing and pre-exposure prophylaxis (PrEP) are provided, such as clinic-based testing sites, community-based organizations, and health care settings. Given the unprecedented challenges and demands that health care providers face during the COVID-19 pandemic, the Centers for Disease Control and Prevention (CDC) has issued guidance to help ensure continued access to critical HIV testing and prevention services.

HIV Self-Testing

CDC recommends that people at risk for HIV infection get tested in ways that are compliant with stay-at-home orders and social distancing practices, including self-testing. Providers of clinical HIV testing services can expand their support for HIV self-testing services by using the [U.S. Food and Drug Administration \(FDA\)-approved self-test](#) and are encouraged to provide residents in their service areas with HIV self-test kits by having the kits shipped to residents' homes or other locations. If a patient's test is positive, they should receive information on linkage to care, which is included in the FDA kit.

Practice Tips for Health Care Providers

- Provide your patients at risk for HIV with HIV self-test kits by shipping kits directly to their homes or other locations. If a patient's test is positive, provide them with information on linkage to care.
- Ensure the availability of PrEP for patients newly initiating PrEP and patients continuing PrEP use.
- Continue quarterly HIV testing for patients taking PrEP, with lab-only visits, to help ensure their safety. If lab visits are not available, consider:
 - Home specimen collection kits for HIV and sexually transmitted disease (STD) tests.
 - Oral swab-based HIV self-tests (least preferred).
- Consider providing a prescription for a 90-day supply of PrEP medication for your patients to minimize trips to the pharmacy and to facilitate PrEP adherence.
- If clinic or PrEP services are suspended, refer your patients to other clinics, telemedicine services, or pharmacies to retain your patients in PrEP care.

Prevent New HIV Infection

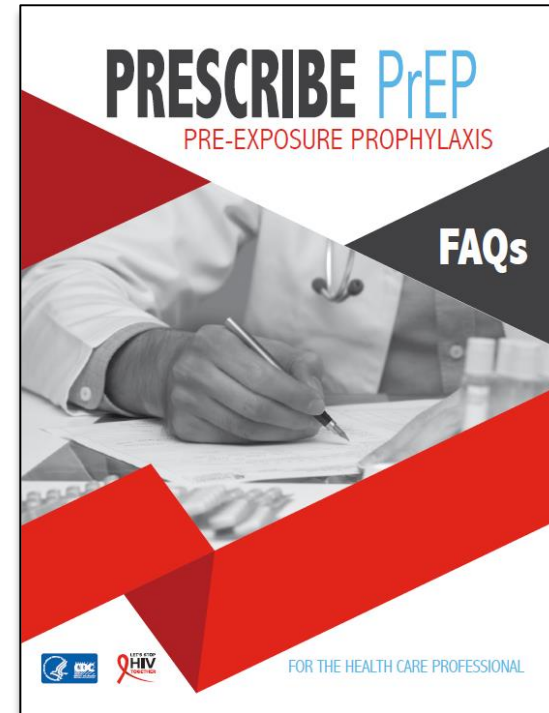
- **PrEP is a powerful tool** for preventing HIV infection.
 - Daily use reduces risk of getting HIV from sex by ~**99%**.¹
 - < **25%** of the more than 1 million people in the U.S. who could benefit from PrEP are using it.²
 - African American adults account for about **40%** of persons who may benefit from PrEP but are prescribed PrEP at **one-sixth** the rate of Caucasian adults.³
- **PEP has been shown to reduce transmission of HIV.**
 - An **81%** reduction in odds of HIV transmission among health care workers with percutaneous exposure to HIV⁴
 - Underutilized as a biomedical prevention tool.⁵
- **CDC recommends prescribing PrEP and PEP for patients at risk for acquiring HIV.**



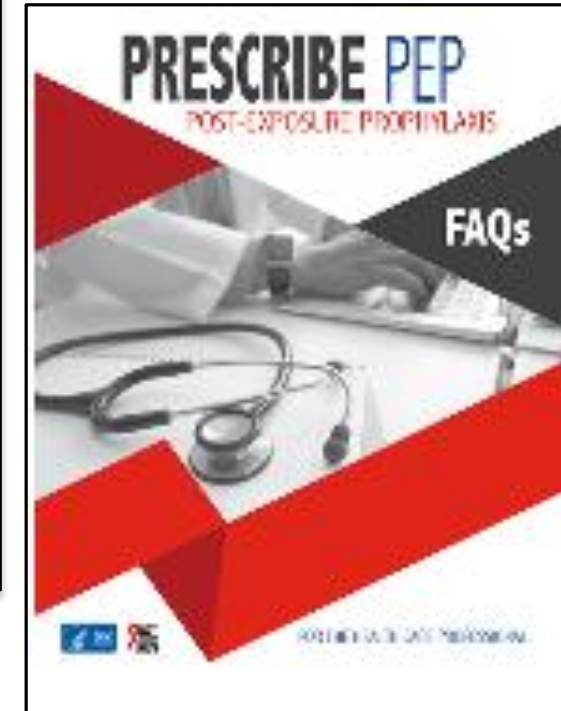
Prevent New HIV Infection Resources

www.cdc.gov/hiv/clinicians/prevention

- The ***Prescribe HIV Prevention Primary Care Providers Resource Kit*** from the CDC includes:
 - Updated PrEP and PEP frequently asked questions (FAQs).
 - A clinician's guide to discussing sexual health.
 - Waiting room posters on PrEP.
 - Patient brochures on PrEP and PEP in English and Spanish.
- Download or order free materials at website above



<https://www.cdc.gov/stophivtogether/library/prescribe-hiv-prevention/brochures/cdc-lsht-php-brochure-prep-faq.pdf>



<https://www.cdc.gov/stophivtogether/library/prescribe-hiv-prevention/brochures/cdc-lsht-php-brochure-pep-faq.pdf>



Ending
the
HIV
Epidemic

HIV Screening

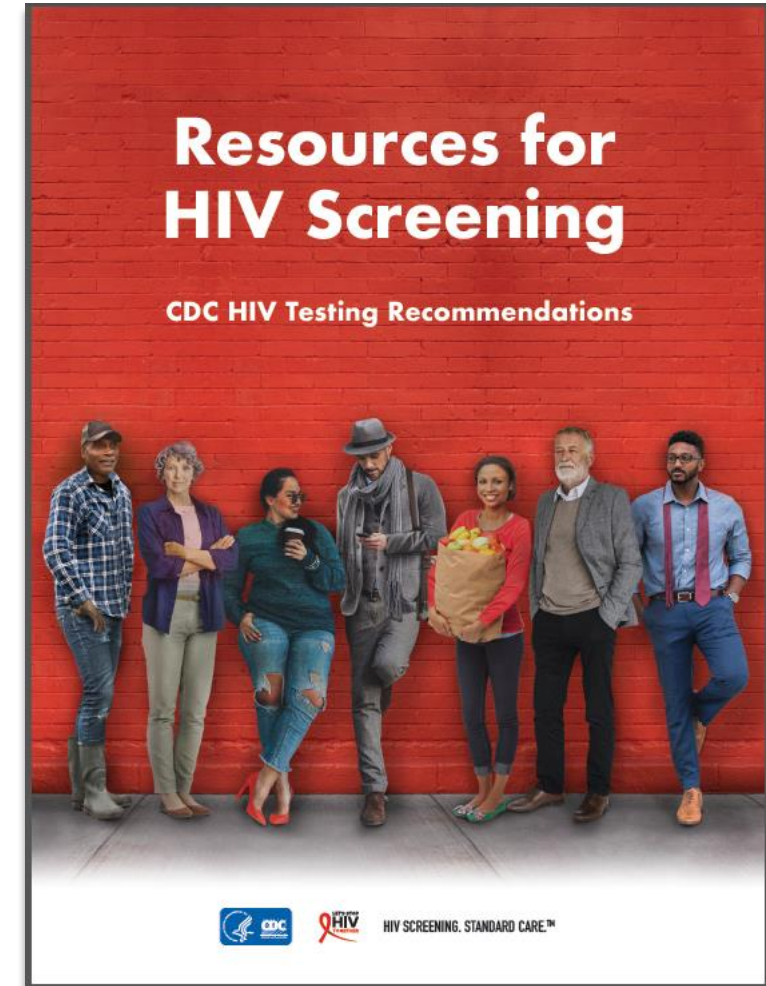
- It is imperative that providers make HIV screening the standard of care.
 - Approximately **1 in 7 people** with HIV in the U.S. don't know they have the virus.⁶
 - In 2018, male-to-male sexual transmission accounted for most **(70%)** of HIV diagnoses, followed by heterosexual transmission among females **(16%)** and males **(8%)**.⁷
 - In 2018, about **2 in 5 people** in the U.S. who received an HIV diagnosis were already at the most advanced stage.⁸
- The CDC recommends
 - HIV screenings for all patients ages 13–64 in all health care settings, and
 - that those at greater risk for HIV get tested more frequently.⁹



HIV Screening

www.cdc.gov/hiv/clinicians/screening

- The **HIV Screening Resources** from the CDC includes:
 - CDC's HIV testing recommendations.
 - An overview of HIV tests for earlier detection.
 - Patient brochures in English and Spanish.
 - Resources to link patients who test positive for treatment and Partner Services
- Download or order materials at website listed above



Treatment and Care

- Health care providers **play an integral role** in linking their patients with HIV to treatment and care.
- With antiretroviral therapy (ART), **clinicians can help their patients with HIV stay healthy and prevent transmission** to their partners.
 - ART reduces HIV-related morbidity and mortality at all stages of HIV infection, and people with HIV who take ART as prescribed and achieve and maintain an undetectable viral load have **effectively no risk of transmitting HIV through sex**. This is known as treatment as prevention (TasP).^{10,11,12}
- **Clinicians can engage patients with HIV in brief conversations** about the prevention steps they are taking to help them adhere to their treatment regimen so they can live longer, healthier lives.



Treatment and Care

www.cdc.gov/hiv/clinicians/treatment

- The ***HIV Care is Prevention: A Toolkit for Health Care Providers*** from the CDC includes:
 - Provider brochures to help foster discussions with patients about HIV treatment, care, and TasP, including:
 - Starting antiretroviral therapy as soon as possible.
 - Taking HIV medications as prescribed to achieve and maintain viral suppression.
 - Getting and keeping an undetectable viral load to stay healthy and prevent transmission of HIV.
- Download or order materials at above website.



Free Continuing Medical Education Programs

- ***HIV Testing, Prevention, and Treatment: A Stepwise Approach.*** Promotes multidisciplinary coordination of HIV screening, prevention, and care services to address initial and ongoing patient engagement. Provides strategies for the interprofessional care team to engage with patients along the HIV continuum of care.

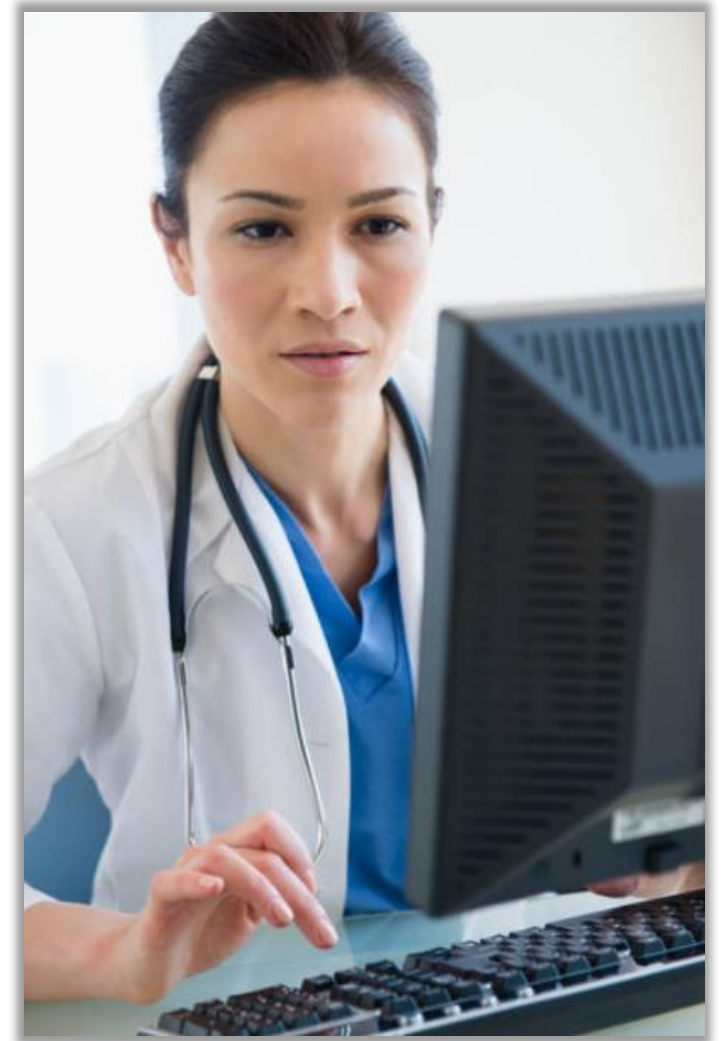
Expires: 6/26/2022

www.medscape.org/viewarticle/932279

- ***Advancing PrEP in Practice: Practical Strategies for Everyday Challenges.*** This program aims to improve primary care providers' recognition of patients who could benefit from HIV PrEP medications.

Expires: 3/25/2021

www.medscape.org/viewarticle/880821



Let's Stop HIV Together Team Approach

HIV Testing, Prevention, and Treatment: A Stepwise Approach

- Free, web-based for PCPs, ID specialists, HIV specialists, nurses, public health & preventive medicine specialists
- Multidisciplinary expert panel
- Examines role of primary care clinicians across various disciplines in preventing HIV infection & optimizing care of people with HIV

Medscape
EDUCATION



Introduction by Paul Sax, MD; Panel:
David Malebranche, MD, MPH; Jason E.
Farley, PhD, MPH, ANP-BC, AACRN,
FAAN; Ariel Watriss, MSN, NP-C;
Sampath Wijesinghe, DHSc, MS, MPAS,
AAHIVS, PA-C



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Epidemic

Free Continuing Medical Education Programs

- ***Treatment as Prevention (TasP).*** The goal of this activity is to inform health care providers about the benefits of TasP for patients with HIV and how to best implement TasP in clinical practice.

Expires: 7/27/2021

www.medscape.org/viewarticle/915551

- ***HIV Treatment and Care: A Focus on Mental Health and Substance Use.*** This course is intended for physicians and nurses who provide care to patients with HIV. The goal of this activity is to improve care of patients with HIV who also have mental health and/or substance use disorders.

Expires: 3/13/2021

www.medscape.org/viewarticle/880901



Transgender Health

www.cdc.gov/hiv/clinicians/transforming-health



- An estimated 1 in 7 transgender women (nearly half who are Black & 1 in 4 who are Hispanic) have HIV.¹³
- Providers can close the care gap by delivering patient-centered HIV care.
- To download or order materials, visit above website

Together Transgender Health Resources

www.cdc.gov/TransformingHealth



A NEW online resource to help providers deliver patient-centered HIV care to their transgender patients



Visit the CDC [TransformingHealth](http://www.cdc.gov/TransformingHealth) website to learn how to:

- Build a patient-centered care environment
- Collect sexual orientation & gender identity information
- Take sexual histories
- Conduct HIV testing
- Discuss risk-reduction strategies
- Provide HIV care



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Join the Conversation



Facebook: [@cdcHIV](#)



Twitter: [@cdc_HIVAIDS](#)



Instagram: [@stopHIVtogether](#)



Email us at: StopHIVTogether@cdc.gov

Thank you!



Ending
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Epidemic

References

1. Centers for Disease Control and Prevention. HIV Risk and Prevention: PrEP.
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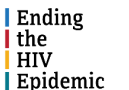
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Q and A

Question 1: What type of adaptations can be made in the context of HIV prevention and care services for the COVID-19 pandemic when providing:

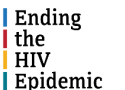
- a) PrEP services**
- b) PEP services**
- c) Chronic disease**



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PrEP visit adaptations during COVID-19 pandemic

- HIV testing – self testing and self-collection options
- Prescriptions- Reduce pharmacy visits by giving 90-day supply
- Clinic/lab visits – Mailed specimen collection kits + telehealth visits
- Patient education-
 - Event-driven PrEP not FDA-approved or CDC recommended
 - If PrEP is stopped for > 1 week, need HIV test before restarting PrEP



PEP visit adaptations during COVID-19 pandemic

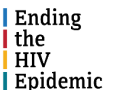
- PEP initiation
 - Recommend patient contact the health care provider to verify if nPEP services are being offered and schedule an emergency visit after an exposure; wear mask for visit
 - Educate the patient to notify the clinic or emergency room receptionist/provider if patient is close to elapsing the 72-hour window period for initiating PEP
 - Provide a PEP starter pack that will provide enough medication until prescription is filled
 - Provide prescription for a 28-day supply of PEP medication to avoid patient having to visit the pharmacy more than once
 - Provide anticipatory guidance regarding potential side effects and how to minimize them
- PEP follow-up
 - Use self-testing options for required follow-up HIV testing or schedule visit to appropriate laboratory for necessary follow-up testing to avoid having to go to clinic setting
 - Set up telehealth visits to monitor adherence to medication and any side effects of medication



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Adaptations for HIV care and care of other chronic conditions

- Offer various clinic visit options: combination of in-person and telemedicine visits
 - Explain risks and benefits of in-person versus telemedicine visits
- In general:
 - Assist patients maintain at least a 30-day supply of medications and preferably a 90-day supply
 - Provide 90-day prescriptions and refills for medications to reduce visits to pharmacy
 - Consider mail-order options for medications to decrease visits to pharmacy
 - Keep Influenza and pneumococcal vaccinations up to date.
- For in-person visits: Take COVID-19 precautions - face masks, hand washing, and social distancing
- For telemedicine visits, consider encouraging patients to use store bought blood pressure cuffs, blood glucose monitoring devices, and scales to self monitor for hypertension, diabetes, and body weight and share results with provider



NHMA Upcoming Events

- **Dec 8:** Twitter Chat: Fight the Flu: 1 PM – 2 PM Eastern. Follow @NHMAmd to participate
- **Dec. 10:** NHMA and *All of Us* Research Program Fireside Chat: Older Adults & the *All of Us* Research Program
<https://bit.ly/NHMAFiresideChats>
- **Jan. 27, 2021:** NHMA COVID-19 Briefing Series: Session 5: Building Vaccine Confidence <https://bit.ly/NHMACOVIDBriefing>
- **Mar. 17-20, 2021:** NHMA 21st Annual Conference
<http://bit.ly/2021NHMA>