

EHE Community Planning Committee  
Meeting Notes for May 27, 2020  
10:00-11:00 a.m.

Registrants: Ana Santos-Diaz, Shey Thorn, Dr. Ritalinda Lee, James Duke, Jacky Snell, Kim Love, Emma Kay, Marvellus Prater, Tia Gilbert, Warren O'Meara Dates, Dr. Laurie Dill, Steve Dellinger, Martha Robinson, Kimberly Edwards, Ana Santos-Diaz, Christa DeVaughn, Joel Reed, Danita Crear, Brittney Brooks, Julie Hope, Billy Kirkpatrick, Melissa Parker, Barbara Lowery, Jora White, Shakina Wheeler-Cox, Adrinda Carter, Diane Glass, Kathie Hiers, Ka'Laun Hambrite, Josh Bruce, Barbara Lowery, Dr. Pamela Foster, Karen Johnson, Tony Christon-Walker, LaTeisha Elliott (35)

This month's meeting focused on CDC's Pillar IV- "Respond". Discussion questions were provided on the meeting agenda that was distributed to the membership several weeks before the meeting date. LaTeisha Elliott opened the meeting at 10:00 a.m. and gave a brief review of the April meeting. Danita Crear offered a working definition of "cluster" for our discussion: An increase in number of HIV cases in a geographical area. If viral RNA is linked as shown in genomics, that is a molecular cluster.

#### Important points made concerning outbreaks and clusters

- Only positive tests are reported so it is difficult to know where testing is and is not happening.
- Real-time testing data is not available from ADPH
- HIPAA and lack of consent prevents data sharing
- We are often relying on qualitative data (word of mouth) to find clusters

#### Useful interventions mentioned

- Revive awareness and education campaigns for schools, churches, etc. In rural areas, people have the same information we had in 1989.
- We spend too much time with the medical model and not enough time with participant models.
- Getting PrEP to all who need it.
- Interventions that help with risk perception for individuals and their medical providers
- Effective (theory-based) interventions—like Popular Opinion Leader
- Market PrEP for all target audiences and not just one group of people
- Opt-Out testing

#### Barriers to responding to outbreaks

- Lack of information about them
- Stigma, being "outed", fear of being identified on social media
- Activities covered under grants are not sustainable once funds have been expended
- Opposition to molecular surveillance

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