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HCS Newsletter

A NOTE FROM LEADERSHIP

Spring has sprung!

During this time of year, the hours of the night and day are equal but as the season progresses, daytime increases while nighttime decreases.

The beauty of spring is that the winter cold has dissipated while the summer heat is not yet scorching. It's generally a very pleasant time of the year. Spring is a highly symbolic time of the year, with many symbols representing the season. Spring is the time of new beginnings, characterized by blooming flowers, the awakening

of animals from hibernation to nest and reproduce, the migration of birds towards warmer climates, and the planting season.

For HCS it brings the start of the new Ryan White year, which is time to reflect on the past year and move with intention into the new.

This issue has articles on hep C, LGTBQ health, Arianna's Trans-healthcare Journey, and a BIPOC-focused vaccination clinic. For me, the connection between all these stories is the understanding that Health Care should be a human right. "The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition". Almost 70 years after these words were adopted in the Constitution of the World Health Organization, they are more powerful and relevant than ever.

So as we roll into spring, I hope that we all recommit ourselves to this foundational concept.



~2023~

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Cascade AIDS Projects
New Deputy Director

Acknowledgements



In our last issue we failed to acknowledge Beau Finan as a contributor of providing HIV prevention in rural Washington. Beau, is the Prevention Services & Data Coordinator at Cascade AIDS Project. Thank you for submitting such a brilliantly written article!

Welcome!

Nicole West: STI Surveillance Coordinator

Jacundo Ramos: Equity Peer Navigator

Mafe Gonzalez: Minority AIDS Initiative Coordinator

> Marcus L Taylor: Health Services Consultant 2

Melody Yu: Drug User Health Epidemiologist

Hepatitis C & LGBTQ+ Health



About hepatitis C:

Hepatitis C (hep C) is a serious, but curable liver disease. It is caused by the hep C virus. It can survive on surfaces and equipment for up to 6 weeks. Very often, people don't have any symptoms. The only way to know your hep C status is to get tested. People who are LGBTQ+ are not at any greater risk for hep C than anyone else. Activities and how someone engages in these, is what matters when considering how hep C is contracted and transmitted, not a person's sexual orientation or gender.

Ways people get and spread Hep C

People get hep C by coming into contact with the blood of someone who has the virus. This can happen in several different ways:

- Reusing and sharing of needles and other injection equipment (cookers, vials, cotton, waters, etc.), including equipment to inject silicone, drugs, hormones or vitamins.
- Sharing of sex toys or equipment, like whips or chargers.
- Sharing drug snorting or smoking equipment, like straws, bills, and glass pipes.
- Condomless anal sex or fisting while hep C isn't easily spread through sex, people living with HIV and other sexually transmitted infections (STIs) are at increased risk of getting hep C through sex.
- Parent (with hep C) to new-born child during childbirth.

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Hepatitis C & LGBTQ+ Health continued...

Tips to prevent the spread of hep C

If you inject hormones, silicone, drugs, or vitamins:

Avoid sharing supplies and get new equipment from a local syringe service program or pharmacy.

If you snort or smoke drugs:

Avoid sharing straws, bills or pipes – blood can get on these items.

If you get tattoos, body piercing, body art, or permanent cosmetics:

Use a professional shop licensed by the Washington State Department of Licensing.

If you are sexually active:

- Get tested regularly (every 3 to 6 months) for sexually transmitted infections (STIs). Sores and warts
 from herpes and syphilis can be a point of entry for hep C. If you tested positive and have sores and
 warts, give your body time to heal completely before any sexual activity.
- Get tested for hep C. Everyone should get tested for hep C at least once in their lifetime. People who inject substances should test for hep C every year.
- If you are not living with HIV, consider taking PrEP. This medicine works by preventing you from getting HIV or passing it to others if you already have it.
- Practice safer sex. Wear latex or polyurethane condoms and gloves and change into new, unused
 ones for each new partner. Avoid sharing sex equipment or sex toys with others. If you decide to
 share, cover the equipment with condoms and/or wash it completely before sharing. Pay attention to
 cuts on hands, fingers, and bleeding cuticles.

If you are living with HIV:

Know your hep C status. It will allow you to seek treatment, get cured, and prevent the spread of hep C to others.

If you are living with hep C:

- Avoid alcohol or cut back on the amount you drink. Alcohol is hard on the liver.
- Get vaccinated for the hepatitis A and B viruses. Having hep C and other types of hepatitis can overwhelm your liver and cause other problems.
- Hep C can be treated and cured in 8 to 12 weeks, even if you have HIV. Talk to your doctor about hep C medication. Everyone has the right to be treated and cured.

Hepatitis C & LGBTQ+ Health continued...

If you once had hep C, but got cured:

- Get tested for hep C as needed. Remember that is possible to get re-infected. Since your body will always test positive for the hep C antibodies, ask for a PCR or RNA test. These tests look for the actual virus in your body, not the antibodies.
- Continue doing what you need to do to take care of yourself.

Resources and information

- Visit the Centers for Disease Control and Prevention (CDC) to get Hep C materials and information about Hepatitis C.
- Know More Hepatitis The CDC recommends all adults get tested for hep C.
- Hormone Injection Instructions (Howard Brown Health)
- Syringe Service Programs in Washington (Washington State Department of Health)

Some of the information provided above is adapted with permission from End Hep C SF's <u>SEX-C brochure</u> by Andrew Reynolds. We are grateful for the shared wisdom.

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Welcome!

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Jeremie Neuville: Sexual Health & Prevention Navigator

Leah Wainman Equity Health & Assessment Manager

Mikayla Schwing Administrative Assistant 3

Kimberly Matteson
Health Services Consultant
3
Peter Cubean
Health Services Consultant

2

DOH Milestones & Congratulations:

Julie Zinc: 15 Years!

Summer Wurst: 20 YEARS!!

Patrick Dinwiddie: 5 Years!

Chris Wukacsh: 5 Years!

Nathan Markiewickz 12 Years!

If you are new to DOH and would like to share your hobbies, interests, or be featured in the newsletter, please reach out to Vanessa Grandberry

Thanks!

Community Voices

I met Arianna at a tenants union meeting held at El Centro De La Raza in Seattle. After the meeting was over, anyone who wanted to engage in conversation with other attendee's could do so. Arianna and I talked about community work and activism which shifted to her self-advocacy for her sex-reassignment-surgery (SRS). When she shared her experiences with the healthcare system, I said, people who work in healthcare need to know these stories so the same things don't keep happening. Thankfully, Arianna has given me permission to share her journey.

My Trans-Healthcare Journey



My name is Arianna; I moved from Virginia across the country, eventually landing in Seattle seeking gender-affirming healthcare and general healthcare free from anti-trans discrimination. Before coming to Washington State, I faced being refused primary healthcare care due to my gender identity. While living in Michigan, I even struggled to get an inhaler prescription. Broken arm syndrome was a regular part of my healthcare.

When I got to Washington State, I was a disabled person living on social security. I had a goal to get off social security once I settled. In my first year in Seattle, someone told me to see a therapist and get a letter for a hormone prescription. At this point in my life, I had been transitioning for eight years and had a form of bottom surgery. My body no longer produced testosterone, so to go without estrogen was to go without any hormone and risk rapidly aging my body.

Getting Hormone Replacement Therapy (HRT) was a fight because there was a six-month waiting list for

therapy, so I had to make a huge fuss and search for someone willing to write me a prescription, thinking I would have to pay out of pocket. Thankfully a catholic medical center came in clutch. They called my insurance, gave me a complete medical exam, and explained the situation. I got my HRT in three months; it was like an episode of the Twilight Zone; coming from the South, I would never have expected such humane treatment from the catholic medical center; from this point, I applied for gender-affirming surgeries with Medicaid. I remember going into my consultation for laser hair removal and having pictures taken of my face. The images were sent to a board of old men who denied me gender-affirming care despite multiple doctors recommending the care. This process took four months; when I called and asked why the board rejected the surgery, I was literally told it was determined that I was "Too Pretty.

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My Trans-Healthcare Journey continued...

"...a week before my surgery, the governor canceled non-necessary medical procedures due to COVID; I almost blew my brains out."

I rushed through school and got a job baking with PCC; they were super progressive, and I thought a private provider would approve the care. I figured my life would matter more if I didn't count as disabled. I was right Aetna approved my care within two weeks. However, they only covered half of the bottom surgery, leaving you with certain parts of the anatomy down there unfinished. To get the complete surgery was tens of thousands of dollars, and it was the exact same doctor Medicaid covered.

So, I left PCC and got a job in the cannabis industry under Uncle Ikes. They provided healthcare when hired and funded 100% of the monthly premiums. Surgery was approved again within two weeks, this time by Kaiser Permanente, and I began the 2-year long process for electrology. The insurance didn't cover it upfront but on a refund system that took 12 weeks. So every two weeks, I would cough up half my paycheck for an electrologist, and not see that money back for three months.

After a couple of months, my job was cut before I could get off social security due to COVID, and I was back on Medicaid and disability once again jobless, I had already had FFS approved twice by private insurers, so I called the HCA. I told them I was approved for this care before, and if they denied it to me again, I would sue them for discrimination under Washington state's new anti-discrimination healthcare law. In my mind, if the care was necessary when I was a working paying person, it was just as needed as a disabled person; disabled lives are just as important as non-disabled lives, and I told them so.

The person I spoke to understood she had been fighting with the system they had established for years. She told me they were reforming the process so they could not deny or approve care based on appearance but had to agree based solely on a doctor's recommendation. I had to choose if I wanted to go through being denied coverage again and have to sue the state or did I want to wait. So I waited four months and refiled my FFS and SRS preauthorizations. They approved my care within four weeks once the reforms went through. I spent a year waiting on the waitlist for FFS; a week before my surgery, the governor canceled non-necessary medical procedures due to COVID; I almost blew my brains out.

I called my doctor and discovered that even though non-necessary medical procedures were shut down, they were rescheduling everyone who had their surgeries canceled back to the end of the year-long waiting list. I really almost blew my brains out! It was very hard news I did not take it well. I threw myself into the work I had started for a housing justice non-profit called Be: Seattle.

A month went by, and one day I got a call from the nurse at the FFS surgeon's office. She asked if I could be available for my two-week surgery. I immediately called my boss, the nurse, on hold and begged to take time off; she totally understood, and I took the spot.

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My Trans-Healthcare Journey continued...

"Healthcare should not require endless hours of bureaucracy and paper pushing but it does, and you cannot let it stop you!"

The governor's shutdown was lifted, and they had a handful of openings. They gave one to me out of the hundreds of girls who had their surgeries canceled; I was one of the handfuls who only had it delayed by a month. It felt like I had won the lottery. The day of the surgery, I found out they had backed out of covering part of it that would address this long scar across my face where I was beaten half to death for being trans. I went under, knowing it would be there when I woke up. But my surgeon Dr. Nuara did the scar removal anyways pro bono; God bless him, and I woke up without that unpleasant reminder.

I finished my surgery prep on November 11th and have my bottom surgery booked for the end of December. I won't believe it will happen until I wake up on the surgery table after the procedure. It took six years after coming to this state, fighting every step to get the authorizations approved and covered. It is finally almost over. I am grateful for the healthcare workers who fight within our broken system. Without them, I would have never made it this far; they bring a much-needed human element to the cold system that we call healthcare. Trans healthcare still has a long way to go. It is a constant fight, but it is worth it, so don't give up.

UPDATE: February 14, 2023.

Arianna had her surgery December 30th. The process took hours of last minute calls and emails to make sure everything came together. "It's very important not to give up and expect roadblocks! Healthcare should not require endless hours of bureaucracy and paper pushing but it does, and you cannot let it stop you," she says.

Contributor: Arianna Laureano is a community organizer and activist in Seattle.

DOH Employee Spotlight: Jacundo Ramos, Equity Peer Navigator



Hi everyone! My name is **Jacundo Ramos** and I just moved to the PNW from Austin, Texas and excited to be here! In my spare time I enjoy playing board games (I have an amazing 1948 Vintage Scrabble Board), playing tennis, all outdoor activities, trying new restaurants because I am a self-proclaimed foodie, and being with family and friends. Working in public health has brought me great joy, a wealth of knowledge and opportunities, and experiences I am extremely grateful for. I started in public health/HIV when I was 21 and 6 years later my career has been full of liberating moments but also confusing and upsetting ones. My main goal in doing this work is to ensure there is

accurate representation of community at the table, advocating for those whose voices are underrepresented and underserved, but most of all making nothing for us without us a reality in the work that we do. I look forward to adding great value to the team and growing within DOH.

Community Partner Events

Grammy-Award Winning Artist BIG Freedia Bounces Back for Seattle Vaccination Clinic

Pacific Northwest Black Pride (BP) and POCAAN (or People of Color Against AIDS Network) welcomed Big Freedia to Seattle on February 10, 2023, for a Seattle-based, BIPOC-focused vaccination clinic. Public Health Seattle King County, along with other local health advocacy agencies, sponsored the one-day clinic that offered vaccine access to more than 400 people in the Seattle community.



POCAAN provided on-site HIV testing, flu vaccinations, and additional health-related information while AHF provided Mpox vaccinations. "When we think about social determinants of health and how it impacts communities of color specifically, we see smaller social networks, significantly varied-levels of income, and limited access to drivers of health and equities," said POCAAN Executive Director and BP Co-Founder Steven Sawyer. "When we can provide vaccinations, it allows us to be more proactive in protecting our communities."

"Big Freedia's more than an innovator; she's an advocate for equity, especially in the LGBTQ+ communities."

In addition to drawing out hundreds from our community, Big Freedia received her flowers with BP's Entertainer of the Year award for her innovation as an international ambassador and Queen Diva of New Orleans Bounce music, a hip-hop genre. "Big Freedia's more than an innovator; she's an advocate for equity, especially in the LGBTQ+ communities," Sawyer added. "Her energy and personality are infectious. We're proud to have a living legend of our community."

Just days before the event, Freedia received Grammy honors for her feature on Beyoncé's award-winning best electronic dance recording Break My Soul and best dance/electronic album Renaissance. PNW legends Ladie Chablis and DJ Cheri'Amour entertained attendees as well.

Sponsors of the event included the HIV Vaccine Trials Network, AHF, Public Health Seattle King County, and the space provided by The Comeback Seattle.

Cascade AIDS Projects NEW Deputy Director

I started at Cascade AIDS Project in 2018 as a Housing Navigator as the seventh staff member in a small but growing WA team and moved through many different roles in the last five years. I became CAP's Housing Coordinator in December 2018. I began developing with other members of

the CAP team and the leadership of Kristi Addis, then-Director of SW WA Services, the Longview Housing, and later, the Employment Services Teams.

I moved into a management role in 2019 as CAP's Housing Team Lead, and we began to grow in housing, supporting Clark and Cowlitz County clients, all PLWH receiving medical case management through CAP. During the beginning and peak seasons of the COVID pandemic. I worked with our incredible SW WA team to transition to remote service provision and helped to create systems of connection, advocacy, and support for our clients in need of housing - for those receiving long-term, transitional, and short term/emergency rent, utility, or mortgage assistance, but also developing systems of support within housing navigation for folks in need of medical motels, housing search navigation, and other housing puzzles - and just finding ways to connect to housing case managed clients when we couldn't do that in person.



"...the move is bittersweet because of all the meaningful, life-changing, deeply impactful work that CAP is doing..."

In 2020, I was offered and accepted the Manager of Housing Services role and that later expanded to Manager of Housing & Support Services at CAP, and in 2021 began supporting and stewarding our housing, employment, and peer navigation teams at CAP SW WA under the new leadership of Jasmine Gruenstein, CAP's current Director of SW WA Services. After five years working to support clients and our team of CAP staff in Clark, Cowlitz, Skamania, and Wahkiakum Counties in SW WA, I have accepted the position of Deputy Director of Housing & Support Services in Cascade AIDS Project's largest office in Portland, OR, serving PLWHA and communities affected by HIV/AIDS in the Multnomah County TGA.

I am so excited to move into this role and to serve this neighboring community, but the move is bittersweet because of the meaningful, life-changing, deeply impactful work that CAP is doing in SW WA that I have had the honor of being a part of and being able to help grow. It has been a real honor.

I was asked to include expressed gratitude and congratulations from the DOH Housing Team.

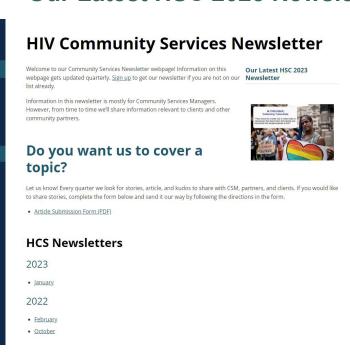
Contributor: Marisa McDowell, Deputy Director of Cascade AIDS Project

Check out our Community Services Newsletter webpage!

Information on the webpage is updated quarterly. Sign up to get our newsletter if you are not on our list already. Information in this newsletter is mostly for Community Services Managers. However, from time to time we'll share information relevant to clients and other community partners.



Our Latest HSC 2023 Newsletter



Do you want us to cover a topic?

Let us know! Every quarter we look for stories, article, and kudos to share with CSM, partners, and clients.

- Visit our Newsletter page and click on "Article Submission Form (PDF)"
- Complete the form and send it our way (follow directions in the form)