

Washington Syndemic Planning Group Meeting
Notes/Minutes
Date/Time: September 23, 2025 6:00pm – 7:30pm (PDT)



Washington Syndemic Planning Group General Meeting
Notes/Minutes
Tuesday September 23, 2025
Virtual Meeting Via Zoom Conference Call

WSPG Members Attendance:

Name	Present	Away
Ann Mumford	✓	☐
Christina Jackson	✓	☐
Elsa Daly	✓	☐
Hexe Fey	✓	☐
Howard Russell	✓	☐
James Tillett	✓	☐
Jsani Henry	✓	☐
Kathleen Wilcox	☐	✓
Lara West	☐	✓
Lisa Al-Hakim	✓	☐

Name	Present	Away
Nia Sipili (Fania)	✓	☐
Omero Perez	✓	☐
Ray Gregson	☐	✓
Tamara Foreman	✓	☐
Tyrell Jackson	✓	☐
Tanaya Davis	✓	☐
Victor Loo	✓	☐
Walter McKenzie	☐	✓
William Harrison	✓	☐
Yob Benami	✓	☐

MEMBERS of the PUBLIC PRESENT:
DOH SUPPORT STAFF PRESENT: Shana Ferguson

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TOPIC	FINDINGS, CONCLUSIONS & RECOMMENDATIONS	ACTIONS & DUE DATES	PERSON RESPONSIBLE
I. Call to Order/ Welcome by Tri-Chairs and member check and connect (10 mins)	• Meeting called to order at 6:05 PM • Agenda reviewed and approved • Community agreements of focus tonight: ▪ Centering community ▪ Leave stories, take learnings		
II. DOH/WSPG member updates (20 minutes)	• Stipend month: ▪ Starleen to send invoice packets out, review for accuracy. Reach out if anything needs changed or updated. Return by the end of the month by September 30. • Ann and James attended Ryan White HIV/AIDS Program meeting. What they took away: ▪ What providers are doing as partnerships, innovation, techniques, community engagement etc. ▪ Challenges and barriers. Engaging patients out of care or undiagnosed. ▪ Mental health issues, language, unhoused, substance use, immigration issues, stigma in BIPOC communities, lack of housing, large staff turnover. ▪ Questions about this session? ○ Did they bring up quality of current care or deliverables? Or anything like that. ❖ Wanting to find out what's worked what hasn't where they are finding new partnership and what outreach styles are beneficial for consumer. ○ Did they have specific plans to reengage people out care? ❖ Street programs. Had a lot of feelings around that. There were a lot of responses in that area. Feel like outreach programs are going away and coming in with street health models or mobiles out in the community. ❖ Did talk a lot about inmate population for people getting in direct services before exiting jails. Also finding areas where sex work is high for folks to get reengage with care. Also talked about homeless outreach for folks who are unhoused. ○ HHS Region 10 HHS.gov ○ Wondering if any of the cities stood out or people representing cities that stood out that we can learn from.		

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	❖ Hawaii was first to speak out about sex work and meeting basics needs to encourage participation. ○ Are you seeing what we are doing in the state, are we comparing to what we are doing as work group? ❖ Washington state there is a lot of comparable work from what we have heard about, especially from west side of state. There are some things that could be brought up as far as way to access more rural areas. ○ Who were these engagement bribes funded by? ❖ Certain incentives can be provided with federal funds, like Ryan White funds. Generally, they cannot be cash incentives, but they can be things like gift cards. ○ Were they talking about funding for mobile outreach for rural areas in other states? ❖ They talked about piggy backing off other medical services.		
III. DOH Updates (60 minutes)	• Integrated Infectious Disease Testing/Viral Hepatitis Prevention/Drug User Health presentation – Emalie Huriaux ▪ Integrated Infectious Disease Testing and Linkage to Care and Condom Distribution: ○ STI/HIV/HCV Testing Expertise ○ Provision of Resources and Supplies ○ Laboratory Connections and Contracts ▪ Who Does DOH/OID Partner with for Testing? ○ Syndemic Testing Contractors ○ SSP CBOs ○ LHJs – many with SSPs ▪ FY 2025 (July 1-August) Preliminary Syndemic Testing Data DOH Partners ○ Total HIV Tests – 14,763 ❖ Total positive results- 105 ❖ Newly diagnosed vs. previously diagnosed not finalized ○ Total Syphilis Tests – 12,499 ❖ Newly identified infections - 237 ○ Total Gonorrhea Tests – 11,527 ❖ Total positive results - 545 ○ Total Chlamydia Test – 11,519 ❖ Total positive results-440		DOH Staff

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	○ Total HCV Ab Tests – 3,664 (EW Partners only) ❖ Total positive results-188 ▪ Viral Hepatitis Prevention: ○ Coordinate Hep C Free WA – Statewide initiative to eliminate the public health threat of HCV by 2023. ○ Partnerships – Financial, in-kind, and capacity building support for LHJS and CBOs working with priority population. ○ Consultant/DIS-Support LHJ perinatal HBV Coordinators and perinatal HBV case investigations. ▪ Governor Inslee issues directive on September 28, 2018 to eliminate Hepatitis C in Washington by 2023. ▪ Hep C Free Washington’s Plan ○ Elimination plan released July 2019 ○ Plan comprised of 15 goals and 90 recommendations ▪ Perinatal HBV ○ Perinatal transmission of HBV can occur during birth ○ More than 80% of infants infected perinatally will have lifelong chronic HBV infection ○ 1 dose of hepatitis B immune globulin and 3-dose hepatitis B vaccine series is 90% effective at prevention perinatal HBV transmission ○ Last perinatal HBV case in WA was 2021 ▪ Drug User Health ○ Harm Reduction Subject Matter – Work closely with sister agency, Health Care Authority, on statewide planning efforts and provide expertise in harm reduction and care coordination with people who use drugs. ○ Partnership with Syringe Service Programs (SSPs) – Capacity-building support for local health jurisdictions (LHJs) and community-based organizations operating SSPs to serve people who inject drugs. ○ Overdose Education and Naloxone Distribution (OEND) Program- Training and capacity-building support for agencies wishing to start OEND services. ▪ Harm Reduction Orientation:		
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	○ Recognizing the racist and xenophobic foundation on which US drug policy is built and how the impacts the public health response to people who use drugs and health equity today. ○ Non-judgmental, anti-criminalization, addressing stigma and shame. ○ Any positive change. ○ Meet people where they are but don't leave them there. ▪ Questions? ○ With the possible Medicaid cuts, what are the mitigation strategies to sustain the services you describe and for those with no Medicaid as well? I am not entirely clear on what the Governor is proposing as a safety net. ❖ I would note services that our office funds, none of those are Medicaid paid for. There is not a direct impact I would say with potential Medicaid cuts, if the state tries to backfill those with state funding, that could indirectly reduce the pot of funding to SSP. ○ With the current political impact and inflation, I am not sure how General Funds are not affected. Are you saying the General Funds is not impacted? ❖ That could be impacted. Since base programs aren't funded with Medicaid, cuts to Medicaid won't directly impact them. If state tries to backfill funding for Medicaid with funding, it could impact us. If general funds get cuts, we will see cuts. We saw cuts in naloxone funding due to cuts with GFS from legislation. It had about 65% naloxone cut during leg session. ▪ Contact Emalie with any questions – Emalie.Huriaux@doh.wa.gov • HIV Network Detection and Response - Nicole West ▪ Objectives: ○ What is HIV Network Detection and Response (NDR)? ○ What is molecular HIV genotype data and how is it used in NDR ○ What does NDR look like in Washington state? ○ Introduction to the molecular epidemiology framework ○ Molecular Epidemiology and Network Detection Workgroup ▪ What is HIV Network Detection and Response (NDR)? ○ Formerly known as Cluster Detection and Response (CDR) ○ NDR work is incorporated into the 4th pillar of EHE initiative: Response ▪ Time-Space Network Detection		
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	○ Routine analysis of HIV diagnosis data ○ Compares most recent year of data to the average for previous years ○ Has been useful for identifying increase in HIV diagnoses among people who inject drugs ▪ Molecular HIV Genotype Data ○ HIV Drug Resistance Testing ❖ Generated when testing for drug resistances ❖ Routinely ordered as part of HIV care to guide selection of antiretroviral therapy (ART) ❖ Detects mutations associated with drug resistance ○ HIV Genotype Reporting ❖ Specific parts of the genetic makeup of HIV ❖ People with similar strains may be part of a group where HIV is spreading rapidly (networks) ▪ Molecular HIV Detection ○ HIV evolves over time ○ Our analysis compares sequences to see how similar or different they are ○ Looks for sequences that are almost the same ▪ How Else Do People Use Molecular Data? ○ Foodborne illnesses ○ Hospital-acquired infections ○ Influenza ○ Hepatitis C ○ Tuberculosis ▪ Reach out to Nicole Adams with any questions – Nicole.Adams@doh.wa.gov • Starleen: Discussion during steering committee last week on having group being involved on feedback and perspectives on development for goals for integrated plan. Steering committee agreed to use their time for whole planning body to attend. Date for this is October 21. Will go from 6-7:30 as steering committee still needs their time. • Claire: Suggestions on how things have went in past or how conversation should go, please reach out to Starleen as co-facilitating. I am excited to get feedback on this planning process.		
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	• Recap on the goals planning activity for the HIV Care and Prevention Integrated Plan. Starleen will send out an optional meeting invite for Tuesday, October 21 to all WSPG members.		
III. Public Comment and other additional updates (5 mins)	• Shared out message from Beth a few weeks ago about Monte passing. Any thought or reflections or wanting to share about Monte. Next year when we have our retreat, we will certainly have some time for that to collectively honor that space. • Lisa: Monte's family just reached out to me, Monte was my mentor for 11 years. They are going to have memorial on 10/4 in Bremerton. Will send to group if anyone wants to come. Some of us from harm reduction community are trying to plan something as well.		Tri-chairs
IV. Closing Thoughts/Adjourn (5 minutes)	• Meeting adjourned at 7:30 PM.		Tri-chairs

Minutes prepared by: Shana Ferguson

Minutes respectfully submitted by: Starleen Maharaj-Lewis

Minutes reviewed and approved by Tri-Chairs: James Tillett, Ann Mumford,