



PUBLIC HEALTH

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HEALTHIER WASHINGTON**

HIV and Adult Viral Hepatitis Prevention

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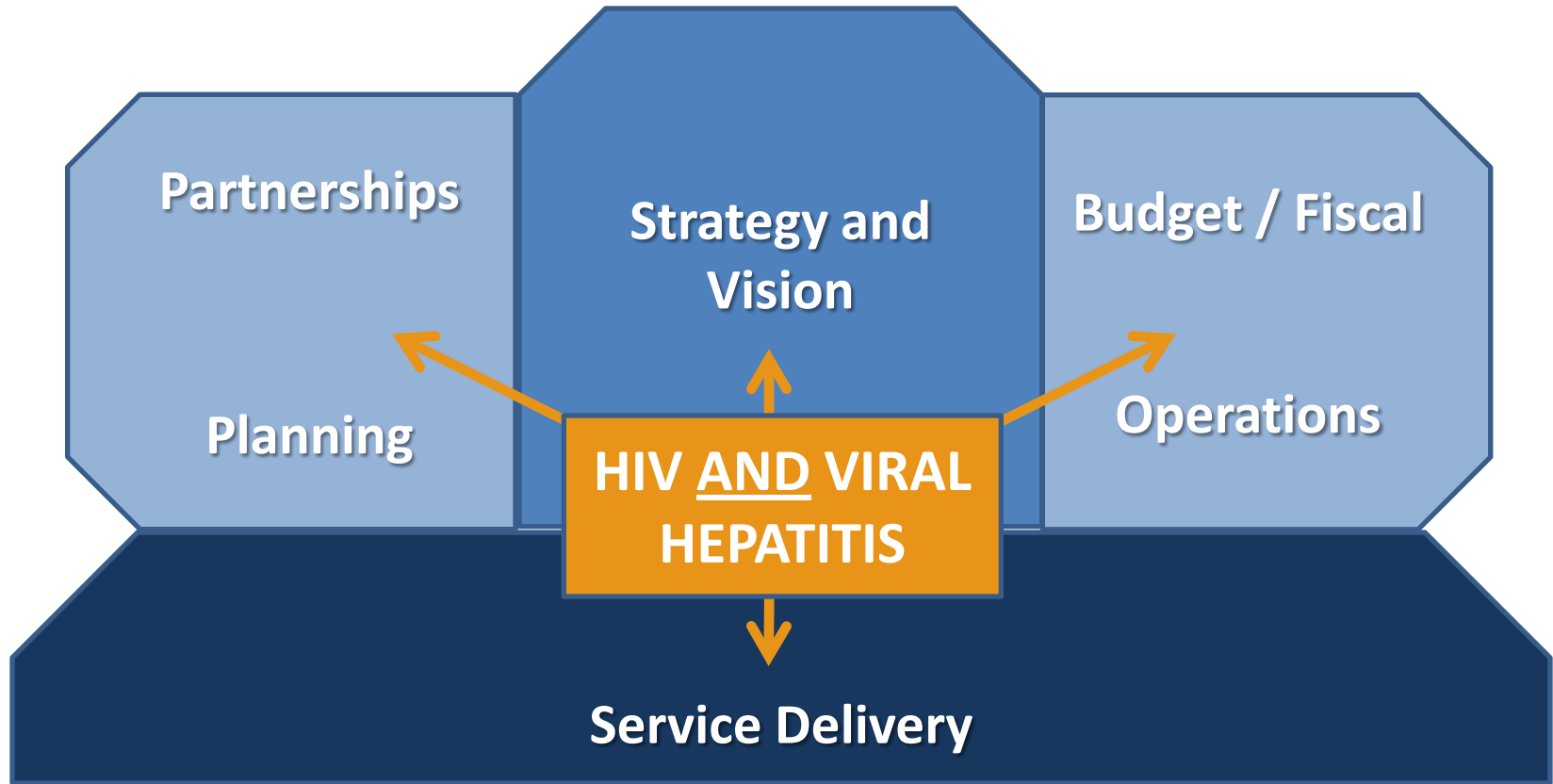
Overview

- History
- Current organizational structure and funding
- Successes
- Challenges and Lessons Learned

History

- Washington gets a Hepatitis Coordinator.
- Adult Viral Hepatitis (AVH) Prevention Program moves to the newly formed HIV and Adult Viral Hepatitis Prevention Section (2009).
 - AVH and HIV prevention staff function relatively independently.
- HAVHS restructures to increase cross-program collaboration and service integration (2011).

HIV and AVH Prevention Organization (2011)

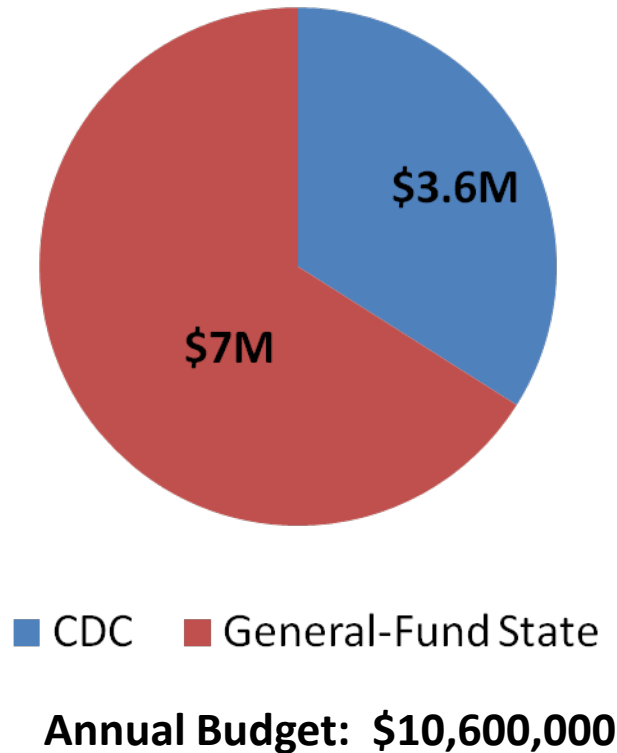


HIV and AVH Prevention Organization

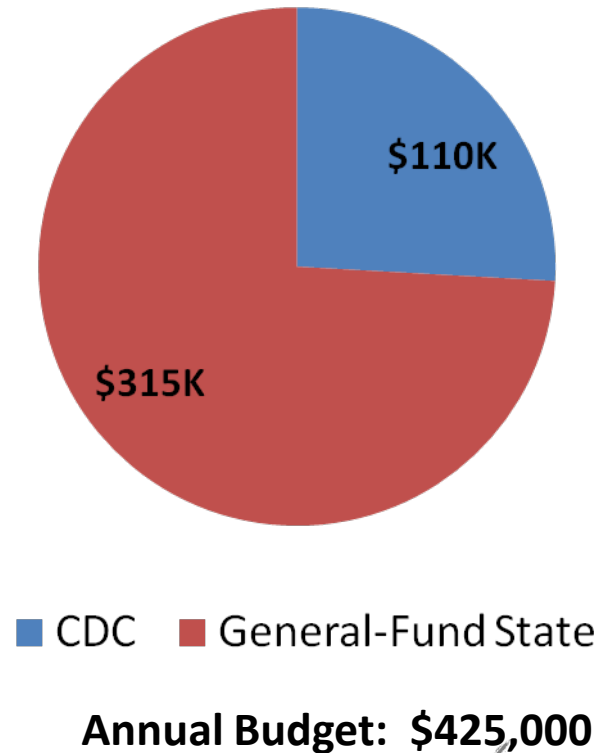
- AVH integrated across all HAVHS functions.
- AVHPC tasked with an expanding role to focus on partnerships for both HIV and AVH prevention.
- Direct oversight for AVH and HIV prevention services combined under a single service delivery team.
- HIV prevention planning group identified a standing seat for AVH representation.

HIV and AVH Prevention Funding

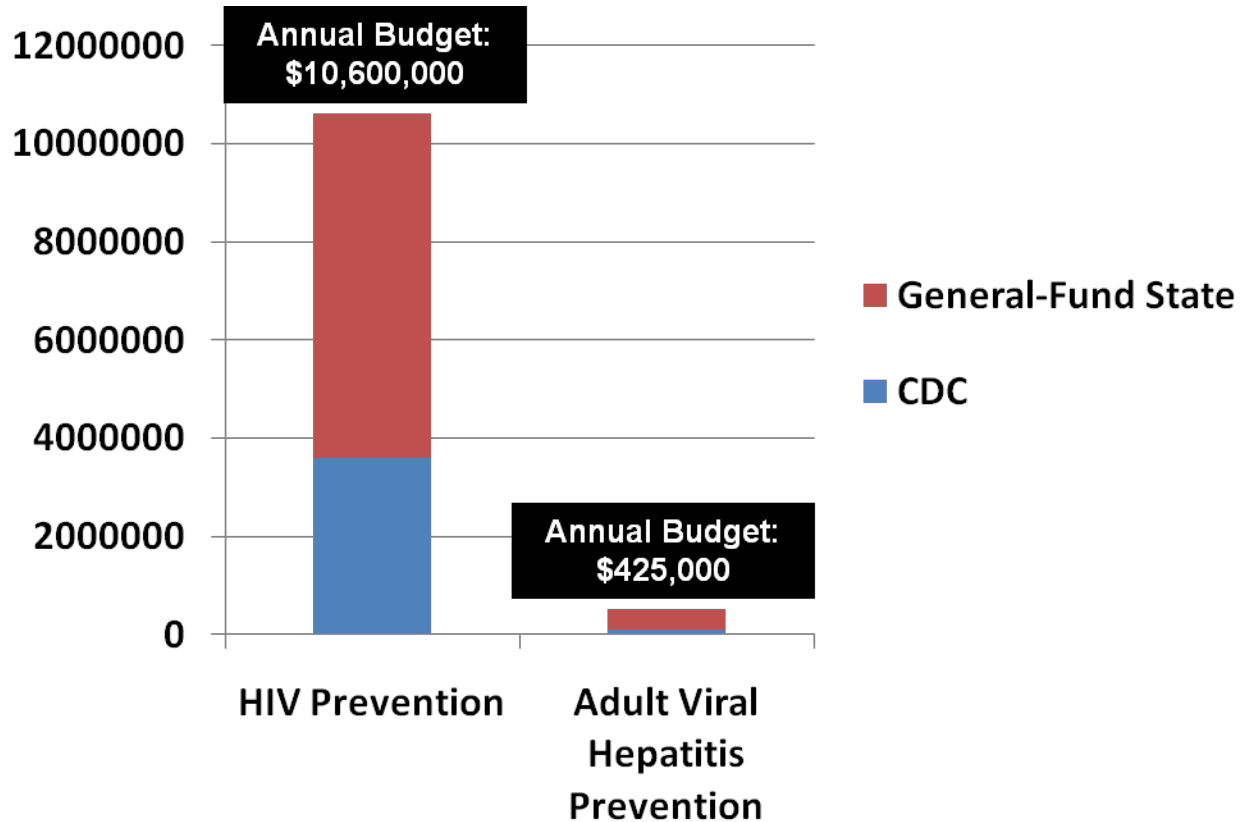
- HIV Prevention



- Adult Viral Hepatitis Prevention



HIV and AVH Prevention Funding



HIV and AVH Prevention Funding

- **HIV Prevention**

- Annual reports: **560**
- Annual funding: **\$10,600,000**
- Funding / annual report:

~\$19,000 per HIV case

- **Adult Viral Hepatitis Prevention**

- Annual reports (chronic HBV): > 1,400
- Annual reports (chronic HCV): > 6,000
- Annual reports (chronic total): > **7,400**
- Annual funding: **\$425,000**
- Funding / annual report:

< \$60 per HCV/HBV case

Successes

- HIV and AVH exist within an integrated team.
- AVH integrated at the client level in ALL DOH-funded HIV prevention programs statewide (July 2011).
- HAV / HBV vaccination and HCV test kits purchased with HIV prevention resources.
- Integrated Assessment Unit (surveillance) leveraged to improve case reporting and analyses.
- Standing AVH seat on the newly formed HIV Prevention Planning Group.

Successes

- Increased focus on partnerships for both HIV and AVH (UW, CHCs, LHJs).
- Joint HIV / HCV project to address the needs of incarcerated individuals (in development).
- Multiplex testing of specimens at the State Public Health Lab (in development).
- MANY AVH-specific successes (collaboration with UW-Project ECHO and DOH Immunization Program, leadership in the state HBV Coalition)

Challenges and Lessons Learned

- Limited State AVH funding
 - **State HIV prevention funding used to purchase HAV / HBV vaccine and to support integrated AVH services.**
- Limitations on CDC HIV prevention funding (e.g., vaccine purchase)
 - **CDC DHAP funding used to purchase HCV test kits.**
- Internal DOH capacity (2 dedicated positions within HAVHS team)
 - **Entire HAVHS team now charged with advancing HIV and AVH goals.**

Challenges and Lessons Learned

- Limited external capacity
 - **DOH-funded HIV prevention programs building the capacity to provide AVH services.**
 - **External partnership strengthening and development a key focus.**
- Limited history of support for integration
 - **IDRH and HAVHS leadership supportive of integration, as are many local partners**
 - **Continued acknowledgement of the importance of integration coming from federal level.**
 - **HIV prevention planning group integrating AVH into work.**

Challenges and Lessons Learned

- Incomplete case reporting (and associated infrastructure concerns)
 - **DOH-funded HIV prevention programs poised to increase pressure on local providers to report AVH cases.**
 - **IDRH working closely with the DOH Communicable Disease Program to strengthen data collection systems.**
- No overlap between some populations living with HBV/HCV and HIV
 - **Coverage of AVH prevention services provided for all populations at risk for HIV.**
 - **Partnerships with the HBV community strengthened to address HBV-specific populations.**

QUESTIONS?

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