

## ABLC Meeting September 25, 2018: 10:00 – 11:00 AM Atlantic

**In Attendance:** Larry Baxter (Community), Donna Bulman (UNB), Julie Dingwell (Avenue B), Jacquie Gahagan (Dal), Lois Jackson (Dal), Susan Kirkland (Co-Chair, Dal), Michael Liddell (Community), Jo-Ann MacDonald (UPEI), Jeannine McNeil (PHAC), Caroline Ploem (AIRN), Cybelle Rieber (PEERS Alliance), Dena Simon (ACNS), and Gerard Yetman (Co-Chair, ACNL).

**Regrets:** Marni Amirault (CAAN & AHA Centre), Diane Bailey (Mainline), Stacey Burns-MacKinnon (PEI DHW), Greg Harris (MUN), Karen Pitts (Hep NS), Michelle Proctor-Simms (NSACA), and Julie Thomas (HON)<sup>1</sup>.

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## MINUTES

### 1) Welcome and Post-Summer Check-in (All) (Susan)

- Susan welcomed everyone back, and asked members to check-in with any summer updates and/or any burning issues.
- Larry – Summer went so quickly that he feels he missed it; no burning issues – just keeping things moving for the fall.
- Michael – Also mourning the loss of summer but looking forward to the fall. Will fill the group in when providing his update. No burning issues.
- Donna – Just back to work after sabbatical.
- Gerard – ACNL just launched their PHAC Harm Reduction Fund project aimed at expanding services to Central Newfoundland and to Labrador. Have just hired staff and are in the program planning stage. Other updates: PrEP is now covered by the provincial government; gearing up to launch the provincial STBBI strategy; and just launched their first I-Track research project through PHAC.
- Dena – ACNS hosted some training in June with CATIE around HIV and aging for service providers and the general public. They were unsuccessful in hiring a Fund Development Coordinator this summer and had to cancel the AIDS Walk. Other news: received a 12K grant from Viiv Healthcare; just launched a strategic planning process to sort out how they will redefine themselves and survive in light of diminished PHAC funding.
- Jeannine – Has spent much of the summer trying to work with regional stakeholders to mitigate frustrations around the Harm Reduction Fund (HRF). The HRF has been led by the national PHAC office with limited involvement from the region. She finds it difficult not to be able to answer the questions that ASOs in the region have.
- Cybelle – The PEER Alliance had another showing of *The Stairs* this summer and is continuing to do outreach with PWUD. This has been very challenging because they are not a needle exchange, and their PHAC HRF LOI was not accepted. More positively, they did receive a number of smaller grants – e.g. 15 week LGBTQ community building project; development of an STBBI prevention tool by and for PEI youth (CANFAR); and a 6-month capacity building project for CBOs integrating harm reduction with trauma informed care, which aligns with their development of online modules on trauma-informed care. They also held a hepatitis C pop-up clinic this summer with Health PEI (35 people tested) and are planning for another for the fall/early winter in Summerside. Sustainability

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<sup>1</sup> ACNL=AIDS Committee of Newfoundland and Labrador; AHA Centre=Aboriginal HIV & AIDS Community-Based Research Collaborative Centre; AIDS SJ=AIDS Saint John; CAAN=Canadian Aboriginal AIDS Network; Dal=Dalhousie University; HepNS= Hepatitis Outreach Society of Nova Scotia; HON=Healing Our Nations; MUN=Memorial University of Newfoundland; NSACA= Nova Scotia Advisory Commission on AIDS; PHAC=Public Health Agency of Canada; UPEI=University of Prince Edward Island.

is their burning issue and they continue to search for funding to continue what they are building.

- Lois – Began with an update on two projects. (1) *Additional Harm Reduction Services in two Sites in Nova Scotia* (funded by REACH): Finished data collection in Feb-Mar/18; have been analyzing the data and starting some KT activities; a poster will be presented at the Stimulus Conference in Edmonton next week.

(2) *Critical Role of Addiction Treatment Services* (funded by CIHR; co-led with Cindy MacIsaac ): Busy getting the project set-up and going through the multiple ethics boards (REBs) across Atlantic Canada. They have received REB approval from Dalhousie and MUN, but waiting for approval from others before they can start data collection. Holly Mathias has been hired as Research Coordinator, and several members from AIRN are part of the Research Team.

There was a panel discussion last week in Halifax around a potential Overdose Prevention Site (OPS). Panelists included Cindy MacIsaac, San Patten, and Archie Kaiser who talked about human rights and access to services for PWUD. Two members of HANDUP also spoke, and there was a discussion with community members. While there were a few people in the room with “NIMBY” views, there was a lot of support overall and good comments about the importance of OPS (e.g. enhancing and saving lives; linking folks to other health and social services; fewer used needles discarded in the community).

- When asked what people could do to help, Cindy suggested writing letters to the Minister and/or Deputy Minister of Health. Is this something AIRN might want to do as a collective? Members of the ABLC agreed that it was a good idea.

#### **ACTIONS:**

- ✓ *Caroline and Susan will draft a letter re. the benefits of an OPS in Halifax on behalf of the ABLC and circulate for feedback. We will ask Cindy if it should go to the Minister and/or Deputy Minister and whether we should also send it more widely (e.g. Minister of Justice; MLAs).*

- Jacquie – Is in the process of wrapping up a CIHR grant on social and ecological factors impacting access to POCT and wondering if there is an opportunity to hold a webinar or in-person meeting in conjunction with AIRN this fall. She has presented a number of times on this issue, but would like to bring it back to AIRN. The ABLC agreed that it was a good idea and that AIRN could host a webinar or a live-streamed face-to-face lunch and learn.

Jacquie also submitted an LOI to PHAC’s HRF this summer aimed at doing an Atlantic-wide social marketing campaign around PWUD and increasing awareness about the risks and about testing options. She did not receive any specific feedback about why the LOI was not successful, but the generic letter stated that there would be another call in the spring of 2019 and that they can resubmit.

- Being invited to resubmit without any specific feedback as to what, if anything, should be changed in the LOI is not helpful — i.e. Is it a funding capacity issue? Does something in the proposal need to change, or is completely out of the ballpark? Cybelle’s experience has been the same, and she has requested a meeting for feedback with PHAC. She has not yet heard back.
- Jeannine noted that she has no more information about the feedback than those who applied. She does know that there were no specific regional allocations, and that PHAC received more applications than they were able to fund. Jeannine and her regional colleagues are also following up with the national office to encourage specific feedback to applicants.

As a separate update item, Jacquie reported that she recently met with biomedical and clinical folks around the CIHR Team Grant application that Sean Rourke is submitting with government and industry partners. Jacquie wants to ensure that, if a national testing proposal is funded, the unique needs of the Atlantic region are taken into consideration.

Jacquie asked whether there was interest in the region to submit an Operating Grant to CIHR around testing. She recently met with the Scientific Director of MedMira and he indicated that, while multiplex

testing is not approved for use by Health Canada, he could make it available for research purposes.

She noted that Debbie Kelly's follow-up grant application re. POCT in community pharmacies was not approved; we need to think creatively as to whether this is worth doing as an Atlantic Operational Grant and, if so, what angle would we like to take. Given that testing is one of the key pillars in PHAC's STBBI Framework, this could be particularly timely for the region.

### **Related Discussion**

Talk turned to the increase in reported cases of HIV in Nova Scotia, and that we don't have the necessary baseline information. Are the higher numbers due to an increase in people being tested or simply an increase in incidence of HIV?

ACNS is talking to Trevor Arnason (MOH) about relaunching the successful "Check Me Out" campaign. ACNS took part in the "Sex Now Survey" this summer, resulting in 200 HIV tests in one day.

There has been very strong advocacy for access to PrEP in Nova Scotia and it is a great win, but there are insufficient opportunities to test people. Is the increase in diagnoses related to the people having to get baseline testing done before starting PrEP? Testing is such an integral part of all of this work, and while there is a real push for PrEP access provincially, there is not the same focus on testing.

Several years ago, Jacquie worked with PHAC to develop a sexual health assessment tool to get a baseline snapshot of the sexual health of Canadians. It is a validated tool but has not been used nationally. Jacquie is wondering if the ABLC would be interested in using this tool to get a baseline snapshot of 16-24 years olds in Nova Scotia to determine as to where there are issues with sexual health which could lead to more targeted testing initiatives.

There was support from the ABLC to implement the tool across the Atlantic, with Susan, Gerard, Cybelle, and Donna voicing their support for moving forward across all four provinces.

- In the process of doing a webinar around POCT, we should talk about ramping up of next phase. With the PHAC action plan on STBBIs, the timing may be really good as to why we need this baseline snapshot across the four Atlantic provinces.
- It could be a 3-pronged, 3-year project: (1) Baseline snapshot of youth sexual health; (2) Targeted social marketing campaigns around testing based on the snapshot results; and (3) Scaling up the testing intervention.

The group agreed that the webinar should be both informative and setting the stage for our thinking moving forward (i.e. Webinar + Working Meeting).

### ***ACTIONS:***

- ✓ *Caroline and Susan will work with Jacquie to set something up for a webinar this fall. It will include a one-hour presentation plus a one-hour discussion about how to move forward.*
- Julie reported that New Brunswick is also participating in an I-Track study and are looking at interviewing over 200 people who have injected drugs within the past 6 months; they have started their peer navigation project. She also reported that there have been 16 new cases of HIV in New Brunswick since Jan/19, mostly in Fredericton. Some are new to the province, others are among MSM.
- The New Brunswick Community Alliance just completed two surveys leading into the I-Track study – i.e. STBBI testing accessibility survey and a harm reduction survey. They are just waiting for their summaries to be translated and will forward to AIRN once ready.

### ***ACTIONS:***

- ✓ *Julie will forward the document from the New Brunswick government re. increases in HIV diagnoses to Caroline who will forward to the ABLC members and all AIRN listserv members.*
- ✓ *Julie will forward the results of their survey summaries once they ready for distribution.*

## 2) Review and Approval of Current Agenda and Minutes from April 12th

- In the interest of time, we skipped the review of the agenda and the minutes.

### **ACTIONS:**

- ✓ *ABLCL members to let Caroline know if any changes are needed to the minutes.*

## 3) Establishing a Regular Monthly Meeting Schedule

- Susan asked if the second Thursday of the month (10 – 11 AM) will work for folks moving forward.
- There was some discussion as to whether calls should be 1.5 hours instead. We agreed that we would try to stick to 1.0 hour, but be flexible if we think meeting agendas will take longer. It is very important to learn about the important issues going on in each province, and the timing of that is hard to gauge.

### **ACTIONS:**

- ✓ *Caroline will send an email to the ABLCL to see if the second Thursday of the month from 10–11 AM will work for members this year.*

## 4) National Organization Updates

### a) PHAC update (Jeannine)

- Despite the challenges, there is some good news to report. The first phase of the HRF was a directed solicitation, and projects are moving forward in 3 of 4 provinces.
- There were only two projects in the Atlantic under Phase 2 of the HRF invited to move forward (i.e. John Howard Society in NB and Direction 180). Having no harm reduction projects on PEI is a big concern for the region.
- While the two projects invited to move forward will have to write a proposal, there is no absolute guarantee that they will be funded. The chances are very good though, and they may be able to get support writing the proposals, as opposed to the open and competitive process. Jeannine will keep folks posted as she learns more.

### b) AHA Centre/CAAN update (Marni)

- Marni was not on the call, so no AHA Centre/CAAN update was available.

### c) CPPN update (Michael)

- Michael was selected as the CPPN representative for the PANACHE (i.e. **P**references **and** **N**eeds for **A**ging **C**are among **H**IV **E**lders) Study. He will be going to Toronto next week for a national meeting on most important issues facing aging people with HIV in Canada.
- CPPN held a 2-day event June 23-24 in collaboration with AIRN. CPPN hosted a one-day symposium on the first day, and AIRN held a workshop on the second day aimed at building capacity for moving the HIV Stigma Index forward in the region.

### d) REACH update (Caroline)

- There have been some staff changes and transitioning at REACH, with Sonia having left in September for a job at Mount Sinai.
- There will be an in-person leadership meeting Oct 18-19 in Toronto facilitated by Ron Rosenes. The main topics of discussion will be the independent evaluation of REACH 2.0, and the development of the proposal for REACH 3.0, which is due in Dec/18. REACH 3.0 is likely to have a main focus on testing and linkage to care, as well as a continued focus on stigma, both of which work really well with AIRN's priorities.

### e) Action Hepatitis Canada - AHC (Cybelle)

- Are soon hoping having a face-to-face steering committee meeting.

## 5) HIV Stigma Project (Susan)

- We are very pleased that our capacity building REACH proposal was funded.
- As Michael mentioned, AIRN held a workshop in conjunction with CPPN in June. There were close to 35 people present (including 26 PLWHIV from the region) and the evaluation was very positive.
- The AIRN workshop was focused on setting the stage for the Stigma Index. We had been working with a small Core planning Team, and we opened it up to greater involvement at that time. We also released the job ad for the HIV Stigma Project Coordinator.

Michael Liddell was the successful job interview candidate and was recently hired as Project Coordinator. A workshop report is almost complete and will be circulated ASAP.

- The 6-month project is focused on creating the context for implementing the HIV Stigma Index in the Atlantic Region (e.g. building networks, training people interested in being peer researchers).

## 6) Resuming Potential for AIRN Webinar on Trauma-Informed Care & Harm Reduction? (Susan)

- AIRN will hold two webinars this year. The first will be on POCT testing (this fall); the second will be on trauma-informed care and harm reduction (this spring).
- We will resume a discussion around potential speakers, dates, venues, other logistics, and next steps this winter.

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**Note: As time for the meeting was coming to an end, items 7-11 below were not directly addressed.**

Caroline noted that the eduCATIE online sessions, HIV and hepatitis C Courses for Service Providers, did not make it to the agenda, and encouraged members to spread the word. The information was shared on the AIRN Listserv - <https://bit.ly/2E5U9Xd>

Susan noted that the next CAHR Conference will be held in Saskatoon in May 2019. See <https://www.cahr-acrv.ca/conference/> for more information.

Jacquie is meeting with folks from the CAHR Conference committee and showing them some spaces at Dalhousie in the hopes of getting the conference back to Halifax by 2021.

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## 7) Grants in Development

- Project PEER Catalyst Grant [Oct 2/18] Uncovering the Impact of GIPA/MEPA and the Wise Practices of Informal and Formal Supports [Greg]
- CIHR STBBI Testing Team Grant [Jacquie]
- REACH 3.0

## 8) Grants Recently Funded/Pending

### Decisions (since May 18)

- Eliminating Hepatitis in Nova Scotia – Gilead Inc. (L. Barrett) [Funded]
- REACH HIV Stigma Project Funding: Building Capacity for the Stigma Index Implementation in Atlantic Canada” (S. Kirkland & L. Baxter) [Funded]
- CIHR Project Grant Spring 2018
  - “Mobilizing Indigenous Community-led HIV to Increase Impact and Advance New Knowledge” (CAAN/AHA Centre) [Funded]
  - “APPROACH 2.0 – A Scaled-Up "APPROACH" to HIV & Other STBBI Testing through Pharmacies” (D. Kelly) [Declined]
  - Atlantic Regional Project on Stigma Reduction and Testing for PWUD [PHAC HR Fund] (J. Gahagan/MOSH) [Declined]

## 9) Ongoing Research Projects

- “Preventing the spread of HIV: The critical role of addiction treatment services” (L. Jackson)
- “New Technologies & Chem Culture: Examining Deployment and Effects among MSM” (M. Numer)
- The **PANACHE** study (**P**references **A**nd **N**eeds for **A**ging **C**are among **H**IV **E**lders in **C**anada)” (S. Walmsley & K. Murzin)
- “Harm reduction and addictions interventions among people hospitalized with injection drug use-associated infective endocarditis” (T. Brothers)
- Canadian Blood Services “ACB and MSM – it’s not an oxymoron” (O. Dryden)
- “Project PEER (People living with HIV Engaged in Employment Roles): Uncovering the Impact of GIPA/MIPA and the Wise Practices of Informal and Formal Supports” (G. Harris)
- “Additional Harm Reduction Services in two Sites in Nova Scotia: An Exploration of Advantages, Community Interest, and Methods of Delivery” (L. Jackson & D. Bailey)
- “The Canadian HIV Stigma Index CBR Project” (F. Ibáñez-Carrasco)
- Ending HIV Stigma in Canada: Adapting & Applying Contact-Based Interventions (S. Rourke)
- “Halifax Area Network of Drug Users Stands Up” (HANDUP Stands Up) (C. MacIsaac)
- Catalyst Grant: “Moving Beyond Piloting POCT” (J. Gahagan)

## 10) Recently Held and Upcoming Events (June – Sept )

- [Global Hepatitis Summit 2018](#) — June 14-17 [Toronto]
  - [PHAC Webinar: Harm Reduction Fund LOI Training](#) — June 22
  - [Realize Forum 2018 Translating HIV, Aging & Rehabilitation into Practice](#) — June 15-16 [Toronto]
  - [CATIE Webinar: Hepatitis C treatment in the new DAA era: frontline implications](#) — June 29
  - [Webinar: Barriers and Facilitators to Hepatitis C Virus Screening and Testing](#) — July 12
  - [AIDS 2018, 22nd International AIDS Conference](#) — July 23-27 [Amsterdam]
  - [Overdose Awareness Day](#) — Aug 31 [Various]
  - [CATIE Webinar: Peer health navigation and the scope of practice, roles and responsibilities](#) — Aug 23
  - [PHAC Webinar: Estimates of HIV incidence, prevalence and Canada’s progress on meeting the 90-90-90 HIV targets, 2016](#) — Sept 6
  - [Addressing the Opioid Crisis: Lessons Learned from the United States - Sept 14](#) [Halifax]
  - [CAAN/AHA Centre Skills Building Workshops & Annual AGM](#) — Sept 17-20 [Toronto]
  - [D180 & Mainline Overdose Prevention Site Community Consultation](#) — Sept 20 [Halifax]
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- [Stimulus Conference](#) — Oct 3-5 [Edmonton]
  - [REACH Leadership Meeting](#) — Oct 18-19 [Toronto]
  - [CATIE Webinar: Eliminating hepatitis C among people who use drugs: The latest research and its implications for the front lines](#) — Oct 30
  - [CRISM Atlantic 2nd Symposium](#) — Nov 20 [Moncton]
  - [Health Canada Consultation on strengthening Canada’s approach to substance use issues: Updating the Canadian Drug and Substances Strategy \(CDSS\)](#) — Sept 5 to Dec 4 [Online]

## 11) Other Items

## 12) Next Meetings