## MPOX COMMUNITY PANEL + UPDATE Friday, September 6, 2024 UCLA HHIPP

- On recognizing the Queer and LGBTIA2S+ community for mobilizing to stop and prevent mpox
  - Some degree of mpox awareness comes from social media, for example from following health-related Instagram accounts.
  - The community deserves recognition, because it wasn't even necessarily from health officials that people were accessing information about mpox. Rather, it was people in the community educating and supporting one another.
- How to approach people who are transgender and different scenes and subcultures in the LGBTQ+ community, like drag, leather, etc.
  - An unsaid barrier exists between health professionals and people in the transgender community. There isn't much education on how the former ought to engage with someone who is transgender.
  - The entryway into different communities is to ask who you know that's already in those spaces. To talk to community members on the ground and spread the word, we need events and opportunities to network with one another and engage people one-on-one.
  - When engaging with people, particularly people who are transgender, be respectful, ask for pronouns, and do a bit of homework or research. That applies to both community members and health professionals.
  - Within the kink and leather community, certain sexual practices need to be discussed with one's health professional. The latter are encouraged to engage in dialogue to gain understanding, meet people where they are, and do some research on their own. If one doesn't understand, the first instinct isn't necessarily to ask someone but to do some research beforehand. *And then ask*, "I've read something, what is your experience?"
  - $\circ$   $\;$  Expect to hear a lot of different responses because people's experiences aren't alike.
  - $\circ$   $\;$  You may hear something that you dislike. It's okay to sit and be uncomfortable with it.
  - Really listen, because people may say something out of being excluded and some people may be angry. Do not take it as a personal attack, if community members ask, "Why are all the white men getting all the vaccines or why is all the marketing going to this group?"
- On how to craft messaging that will catch people's attention and which kinds of messaging have resonated with outreach work in the community and in the nightlife scene
  - Relatability and being trendy are effective ways to grab attention. Right now, for example, the BRAT summer is trending. Plant anything on a bright green background and people will notice it.
  - Apart from that, the best way to catch people's attention is to draw on real-life experiences and try to relate to people. Aside from using infographics, consider putting real people on flyers, images, and videos.
  - Put more black and brown people on these materials, so they know we are thinking of them and that these services and resources are for them.

- On research about the durability of the immune response for special populations like people with HIV and older adults, etc.
  - The good news: For people living with HIV who have undetectable viral loads and high Tcell counts, we have not seen any differences in vaccine efficacy or vaccine waning.
  - It is hard to provoke an immune response in someone who has advanced HIV and low T-cell counts. Honestly, we see a horrific and the worst synergy between untreated HIV and mpox—where someone comes to the hospital with untreated HIV and mpox, and the mpox creates the situation where the person fails to respond to HIV meds. This is how deaths have occurred in our communities.
  - So, it's important to renew the call to get people into HIV testing and treatment.
  - We don't see differences by age or any demographics. It appears if you have a healthy immune system, the vaccine is efficacious at least in the short term.
  - Whether immunity persists over the years is a very open question that we don't know the answer to.
- On whether people who have already contracted mpox need to be vaccinated again? Does immunity wane for people that have been infected with mpox and do they need to be revaccinated?
  - The CDC says people who have gotten mpox previously do not need to be vaccinated, because there is very strong immunity post-infection.
  - There are, however, already examples in the US of reinfection. Reinfections have been known to occur.
  - In a webinar in 2022 featuring a healthcare provider in the DRC, they recounted a person who was infected with mpox, a healthcare worker, three times in 5 years. It's an extreme and very rare example of a person not getting immunity after infection.
  - The vaccine is very safe. <u>The CDC says you don't need it</u>. Stay well informed and make your own decision.
- On vaccine commercialization
  - The vaccine has been commercialized, which means it is covered by health insurance and has become more widely available at a local pharmacy like CVS. One no longer has to go to a clinic run by a public health organization.
  - $\circ$   $\;$  The issue we are working on is access for people who don't have health insurance.
- Closing Thoughts
  - Maurice M: Be an advocate for yourself. You are your own best advocate. I had to stand up and almost make a scene to be taken seriously, which I hated having to do. But sometimes that's what you must do to get access to the care that you need.
  - Victor HM: Let's get to work. Hit up the people you know to come to events and get vaccinated. Remember people in the niche communities, such as ballroom, drag, punk, the leather scene. Let's make sure we get our community vaccinated, because at the end of the day, we keep each other safe and we take care of each other.
  - Chichi N: Collaboration is key and we're all in this together. We should pay attention to differences, meaning the type of health care that is required and how that may differ for different people. But when discussing something that can affect all of us, we must make sure that all of us are being included in the conversation. Be that advocate within your community. If someone doesn't say anything about an issue, it's going to go unsaid.

Otherwise, nobody's fighting and having that conversation for trans people, trans people who have HIV, those who may be at high risk. The last thing is to get involved with organizations, including those that are doing the political work, whether it's the local neighborhood council or a Commission. Find those places to make your voice heard.

- Joseph O: The folks who have been talking in this panel are not community outreach workers. They're community experts. And we need to empower community experts – who know where the vaccine vans need to go, where the shots need to go, and the people who haven't had them. And for the people in public health on this call, it's about partnership with these people in the community, with us.
- Ian H: Information is power, and these meetings are about giving people information and the ability to make the best choice for their health. For those who know people who haven't yet been vaccinated, get vaccinated, remember that it's two doses. People with health insurance should be able to get the vaccine at Walgreens, CVS, etc. It's great that community access points will be more available. But we also need to take care of our uninsured community members and many of the participants on this call are working hard on that.
- Latest information <u>here</u> from the CDC