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Center for Interdisciplinary Research on AIDS
at Yale University

Yale MACMILLAN CENTER

A Special World AIDS Day Event

***"Addressing HIV/AIDS in Humanitarian Crises:
Perspectives from Lebanon"***

A Virtual Symposium

Join researchers and practitioners in a virtual symposium to discuss current research and practice related to HIV/AIDS testing, linkage, and retention in care among refugees and displaced populations in Lebanon, and the impact of multiple crises on service and care delivery.



Monday, December 7, 2020

8:30 am – 10:30 am EST

Register Now: <https://bit.ly/3niUoQm>

For more information about the event, contact dini.harsono@yale.edu.

Organized by:

Center for Interdisciplinary Research on AIDS (P30MH062294, PI: Trace Kershaw, PhD)

With the support of the Edward J. and Dorothy Clarke Kempf Memorial Fund
and the Council on Middle East Studies at the Yale MacMillan Center

"Addressing HIV/AIDS in Humanitarian Crises: Perspectives from Lebanon"

Monday, December 7, 2020

8:30 am-10:30 am EST

3:30 pm-5:30 pm EET

9:30 pm-11:30 pm MYT

Register Now: <https://bit.ly/3niUoQm>

BACKGROUND

The goal of the symposium is to bring together researchers, practitioners, and all interested communities to discuss current research and identify knowledge gaps related to HIV/AIDS testing, linkage, and retention in care among refugees and displaced populations in Lebanon, including the impact of economic, political, and COVID-19 crises on service and care delivery.

This event is part of a symposium series with an overarching goal of developing a research agenda to identify research priorities and collaborative opportunities focused on refugees and displaced populations at risk for HIV and/or living with HIV.

The symposium series is organized by the [Center for Interdisciplinary Research on AIDS](#) at Yale University (P30MH062294, PI: Trace Kershaw, PhD) with the support of the Edward J. and Dorothy Clarke Kempf Memorial Fund and the Council on Middle East Studies at the [Yale MacMillan Center](#). In partnership with the Council on African Studies; Program on Refugees, Forced Displacement, and Humanitarian Responses; and Yale Institute for Global Health.

SYMPOSIUM PROGRAM

(Event is scheduled in Eastern Standard Time.)

8:30-8:45 am

Welcome and Introductory Remarks

8:45-9:15 am

Opening Keynote

9:15-9:50 am

Session 1: Research on HIV Risk, Prevalence, and Access to Care among Refugees and Forcibly Displaced Populations

9:50-10:20 am

Session 2: Perspectives from the Field: HIV Testing, Linkage, and Retention in Care

10:20-10:30 am

Wrap-Up and Next Steps

KEYNOTE SPEAKER

Adeeba Kamarulzaman, MBBS, FRACP, FAMM, FASc, HonLLD Monash, DPMP
Dean of Medicine, Professor of Infectious Diseases, Faculty of Medicine, University of Malaya
Adjunct Associate Professor, Yale School of Medicine
President, International AIDS Society

Professor Kamarulzaman trained as an Infectious Diseases physician and is presently the Dean of the Faculty of Medicine, University of Malaya and an Adjunct Associate Professor at Yale University. Professor Adeeba has played a leading role in the response to the HIV epidemic in Malaysia and globally, particularly in the area of HIV prevention for people who use drugs. She was a key member of Universiti Malaya's Nipah Investigative Team and was a member of the Malaysia's Health Advisory Council from 2018-2020. She is currently the President of the International AIDS Society and a member of the UNAIDS Advisory Group. Her achievements have been recognised through several national and international awards including a Honorary Doctor of Laws from her alma mater, Monash University, for her contributions to medicine and as a health advocate.

PANELISTS

Kaveh Khoshnood, PhD, MPH
Associate Professor of Epidemiology (Microbial Diseases), Yale School of Public Health

Kaveh Khoshnood, PhD is an Associate Professor and Director of Undergraduate Studies at the Yale School of Public Health and executive committee member at Yale Council on Middle East Studies. He is co-founder of Yale Violence and Health Study Group and a faculty member of the Program on Conflict, Resiliency and Health at the Yale MacMillan Center. Dr. Khoshnood is trained as an infectious disease epidemiologist and has more than three decades of domestic and international experience in HIV prevention research among people who use drugs and other at risk populations. Dr. Khoshnood's research interests include: 1) epidemiology and prevention of HIV/AIDS, 2) research ethics and 3) humanitarian health. His projects are primarily in China, Lebanon and Bhutan. Dr. Khoshnood teaches courses on public health ethics and global health and is developing a new course on humanitarian health.

Luke Davis, MD, MAS
Associate Professor of Epidemiology, Yale School of Public Health
Associate Professor in Pulmonary and of Medicine, Yale School of Medicine

Luke Davis, MD, MAS is an epidemiologist and pulmonary/critical care physician whose research employs implementation science to improve the diagnosis, treatment, and prevention of tuberculosis (TB), the leading cause of infectious death in low- and middle-income countries. Dr. Davis serves as scientific advisor for the Center Interdisciplinary Research on AIDS (CIRA)'s international research activities and as a member of CIRA's Implementation Science Advisory Committee. Dr. Davis is associate faculty member of the Center for Implementation and Prevention Science at the Yale School of Public Health and of the Yale Center for Implementation Science at the Yale School of Medicine.

Frederick Altice, MD, MA

Professor of Medicine (Infectious Diseases) and of Epidemiology (Microbial Diseases)

Yale School of Medicine and Yale School of Public Health

Frederick (Rick) L. Altice is a professor of Medicine, Epidemiology and Public Health and is a clinician, clinical epidemiologist, intervention and implementation science researcher at Yale University School of Medicine and School of Public Health. Dr. Altice's primary research focuses on interventions and implementation science at the interface between infectious diseases and addiction and he has conducted research in several global health settings. He has a number of projects working in the criminal justice system, including transitional programs addressing infectious diseases, medications for opioid use disorder (methadone, buprenorphine, extended release naltrexone), mental illness, homelessness and social instability. His work has emerged primarily with a global health focus with funded research projects internationally in Malaysia, Ukraine, Moldova, Armenia, Kyrgyzstan, Peru, and Indonesia. He has participated in projects through the National Institute on Alcohol Abuse and Alcoholism, the National Institute on Drug Abuse, Centers for Disease Control and Prevention, Substance Abuse and Mental Health Services Agency, Special Projects of National Significance with HRSA, and the Center for Substance Abuse Treatment. He is currently also collaborating on projects with the WHO, UNAIDS, USAID, PEPFAR and UNODC. Current internationally funded projects in dedicated research sites that are being conducted in Malaysia, Ukraine, Moldova, Azerbaijan, Armenia, Kyrgyzstan and Peru. His research and training sites in Malaysia (2005), Peru (2010) and Ukraine (2005) are dedicated training and research sites for the Global Health Equity Scholars Fogarty Training Program and the Doris Duke International Fellowship program. He is currently the director for two International Implementation Science Research and Training Centers with collaborations between Yale University and the University of Malaya and Sichuan University.

Robert Heimer, PhD

Professor of Epidemiology (Microbial Diseases) and of Pharmacology

Yale School of Public Health

Dr. Heimer's major research efforts include scientific investigation of the mortality and morbidity associated with injection drug use. Areas of investigation include syringe exchange programs, virus survival in syringes, hepatitis B vaccination, hepatitis C transmission risks, overdose prevention and resuscitation, and pharmacological treatment of opiate addiction. His research combines laboratory, operational, behavioral, and structural analyses to evaluate the effectiveness of intervention programs in preventing the negative medical consequences of injection drug use. Dr. Heimer is a member of Yale's Center for Interdisciplinary Research on AIDS (CIRA) and former Director of its Interdisciplinary Research Methods Core. His current work focuses on the contexts and consequences of the opioid crisis in CT and the systemic of HIV, viral hepatitis, and injection drug use nationally and globally. Dr. Heimer previously served as Principal Investigator of the Yale office of the Connecticut Emerging Infections Program. This Centers for Disease Control and Prevention-funded program is one of ten programs nationwide that seek to assess, through population-based surveillance, the public health impact of emerging infectious diseases and to evaluate methods for their prevention and control in the community. Dr. Heimer received his training in molecular biology and pharmacology at Columbia College (BA) and Yale University (MA, PhD). He began his work on the prevention of HIV among injection drug users in 1990 with an evaluation of the city-run New Haven needle exchange program and his work on emerging infections in 1995 with studies of the tick-borne agent of human ehrlichiosis.

Nesrine Rizk, MD
Assistant Professor

American University of Beirut, Lebanon

Dr. Rizk is an Assistant Professor of Infectious Diseases and an HIV/AIDS expert at the Faculty of Medicine of the American University of Beirut. She joined the Division of Infectious Diseases at AUB in July 2012. Her clinical practice is focused on infectious diseases with a special focus on HIV and AIDS medicine and her patients include people with HIV from Lebanon and the Middle East. She has contributed to several publications on HIV/AIDS and metabolic complications of treatment, as well as inflammation. Her research interests include the epidemiological aspects of the HIV epidemic in Lebanon and the Middle East, the treatment cascade, in addition to retention in care. She received the IAS award for "Doing The Right Thing" in 2018.

Elie Aaraj, MS, RN

Executive Director

Middle East and North Africa Harm Reduction Association (MENAHR)

Mr. Aaraj is the founder and former director of the Association Soins Infirmiers et Développement Communautaire-SIDC, established in 1987. Holder of a Maitrise degree in Community Health at St Joseph University, and a BS Nursing at the Lebanese University in 1982. He worked in 2 hospitals in Lebanon, before becoming the Director of the Nurse-Aid Technical School. Founding President of the Order of Nurses in Lebanon Council member of the Municipality of Sin El Fil for 2 terms (1998 & 2004). Co-founder and Executive Director of MENAHR. President of the Regional/Arab Network Against AIDS-RANAA (2008 – 2018). He has undertaken more than ten major pieces of research on HIV, Harm Reduction and the role of civil society organizations. Holder of "Medaille Marcelle Hochar" Award (2005) from the Lebanese Red Cross Nursing Association, the National Rolleston Award (2011) from Harm Reduction International. He received the "Kim Mo Im" Award for policy innovation and Impact, International Council of Nursing (2019).

Dini Harsono, MSc

Assistant Director, Clinical and Health Services Research Core

Center for Interdisciplinary Research on AIDS, Yale School of Public Health

Dini Harsono is the Assistant Director of the Clinical and Health Services Research (CHSR) Core and Research Associate at Yale University's Center for Interdisciplinary Research on AIDS (CIRA). She is responsible for implementing and tracking deliverables of CHSR Core activities and supporting CIRA scientists conducting clinical and health services research on HIV and comorbidities. Working with CIRA faculty, she co-directs CIRA's international research initiatives and the International Visiting Fellow Program that supports collaboration between international HIV scholars and Yale faculty. As a research associate, she has over 15 years' experience of conducting HIV and substance use research in the US and globally and managing day-to-day research coordination including data collection, analysis, and write-up. Her research interest lies in the engagement of multi-level stakeholders to facilitate the uptake of evidence-based practice and research grounded in implementation science to improve the delivery and outcomes of HIV prevention, psychosocial, and health services.

PRESENTATION ABSTRACTS

Keynote Presentation: “The Intersection of HIV and COVID-19 among Refugees and Displaced Populations”

Adeeba Kamarulzaman, MBBS, FRACP, FAMM, FASc, HonLLD Monash, DPMP

Abstract is forthcoming.

“Addressing Disparities in HIV Testing and Care among Displaced Males who Have Sex with Men (MSM)”

Robert Heimer, PhD

More than one million people have been displaced to Lebanon by the civil war in Syria. The vast majority lives amongst the five million Lebanese and interact with them daily. During this period, we have conducted two studies to examine the lives and HIV status of MSM living in Lebanon. The first, conducted in 2014-15, recruited 290 MSM in the Beirut area, 25% were born in Syria. These men experienced more discrimination and abuse, were more likely to exchange sex for drugs, money, or goods, and less likely to have ever been tested for HIV than their Lebanese-born counterparts. We identified 36 cases of HIV (12.3% seroprevalence); only one was Syrian. Among the 32 individuals already aware of their infection, 32 were in treatment and receiving antiretroviral therapy. The second study, conducted in 2018-19 was designed to recruit a larger sample and biased towards having a larger percentage of Syrian-born and civil war displaced MSM. The focus again was on experiences and HIV among both Lebanese- and Syrian-born MSM, but with more data collected on mental health, experienced and internalized stigma, and, specifically for the Syrian-born MSM, experiences of displacement. We recruited 608 participants about equally divided between Syrian and Lebanese. The overall HIV prevalence of 4.2% (25/598) was lower than in the previous study and lower still among the Syrian-born MSM (7/281; 2.5%). On the other hand, Sixty-three percent of Syrians met criteria for depression compared to 43.8% of Lebanese participants ($p < 0.001$); 21.3% of Syrians met criteria for severe anxiety compared to 13.1% of Lebanese participants ($p < 0.05$); and 33.0% of Syrians met criteria for posttraumatic stress disorder compared to 18.4% of Lebanese participants ($p < 0.001$). Among Syrian MSM and transgender women, socio-demographic characteristics, displacement-related stressors, and stigma-related stressors all served as determinants of psychiatric morbidity.

“Rapid Assessment and Response to Substance Use and Risk of HIV and Other Blood-Borne Infections among Lebanese Nationals and Displaced Populations in Lebanon”

Kaveh Khoshnood, PhD, MPH

Background: The dual problems of substance use (SU) and risk of blood-borne infections among the over 1 million violent conflict-driven displaced populations (mostly Syrians and Iraqis) in Lebanon is a neglected area of public health.

Methods: We conducted a situational assessment of the current situation of SU and risk of blood-borne infections (particularly HIV, HBV and HCV) among Lebanese and displaced populations in the larger Beirut area of Lebanon. Individual semi-structured interviews using convenient sampling took place with Lebanese and displaced populations (n=80) and key stakeholders such as service providers, academics, and policy makers (n=10). Data were analyzed utilizing a grounded theory inductive framework.

Results: The most common substances consumed among displaced populations were cannabis, captagon, painkillers, and heroin; among Lebanese, the range was broader and included MDMA, acids, meth, and cocaine. For Lebanese respondents, the most significant barrier to seeking treatment for SU was cost; for displaced populations, it was the lack of services in the tent settlement. 82.7% of displaced respondents had never been tested for HIV, HBV, or HCV, compared to 16.7% of Lebanese respondents. Results from stakeholder interviews showed that economic, social, political instability, and homophobia are systemic driving factors of substance use within the country. Substances in Lebanon are normalized among youth, LGBTQ, and incarcerated populations and are highly available both inside and outside of Beirut, but there is both a lack of acknowledgement from the Lebanese government and prison systems.

Discussion: Substance use was found to be specific to sexual orientation, incarceration status, displacement status, and social class, and therefore interventions should be adapted to specific groups. Respondents recruited in Beirut were clients of harm reduction NGOs and as a result exhibited a higher rate of testing for blood-borne infections, knowledge of transmission dynamics and prevention measures, and SU treatment-seeking behavior, compared to respondents living in a tent settlement. These results highlight the importance of connection to services and the need for an expansion of harm reduction and widespread treatment programs in Beirut and Lebanon at large, as well as policy and programmatic responses to address the service gaps in tent settlements.