



NASTAD Releases Trauma-Informed and Status Neutral Resources

NASTAD recently released two new resources:

- The **Trauma-Informed and Whole Person Approaches Video**, and
- The Trauma-Informed Approaches Toolkit’s newest appendix, Trauma-Informed Approaches to Status Neutrality. This is available in **English** and **Spanish**.

The video highlights a conversation among health department and community-based HIV program staff, both who are at different points in their trauma-informed approach (TIA) journeys. They reflect on what it means, and what it takes, to provide whole person care and services. The video features **Imani Butler** who leads DDP’s Trauma Informed Healing Centered Approaches project.

NASTAD created the TIA toolkit appendix to encourage and support status neutrality. The appendix can help partners consider how they can approach services. All the while taking into consideration, “the HIV prevention continuum.” The appendix provides overviews of how TIA can inform each state of the continuum. The addition of this appendix builds on **existing tools from NASTAD**, geared towards:

- HIV care and treatment programs,
- HIV prevention programs, and
- other related community and clinical programs and organizations.

NASTAD encourages the sharing of these resources to funded agencies and community partners. Please contact **Mahelet Kebede** at NASTAD with any questions on the resources.

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APPENDIX G
Trauma-Informed Approaches to Status Neutrality

INTRODUCTION
Status Neutral HIV prevention and care is a whole person approach to HIV prevention and care that emphasizes high-quality care to engage and retain people in services regardless of the services are for HIV treatment or prevention. A status neutral approach continually addresses the healthcare and social service needs of all people affected by HIV so that they can achieve and maintain optimal health and well-being. – Centers for Disease Control and Prevention

NASTAD’s Trauma-Informed Approaches (TIA) Toolkit is funded by the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) is intended for all Ryan White HIV/AIDS Program (RWAP) administrators and providers who deliver and fund services for people with HIV. To encourage and support status neutrality, NASTAD developed this appendix to the TIA Toolkit as an inclusion to consider how programs can take a comprehensive approach to their services across the “HIV prevention continuum” (see infographic below). TIA acknowledges that trauma may be actively present or historically experienced by people receiving HIV prevention services or those working in service settings. A status neutral approach includes TIA.

Below you will find brief overviews of how TIA can inform each stage of the [HIV prevention continuum](#). Every stage is paired with reflection questions to help you and your organization envision how to incorporate status neutrality when interacting with clients and developing prevention programming.

Please note that the language we use to support people in remaining HIV negative is part of an ever-evolving ecosystem of care. We strongly encourage you to check the CDC website for the most up-to-date terminology when discussing HIV prevention strategies.

VHARCC Training Calendar



Order Mpox Print Materials

Report Mpox Activities

DDP Resources

- [DDP Website](#)
- [Community Partners Page](#)
- [Health Professionals Page](#)
- [Communications Resources](#)
- [Find a Service Provider](#)

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Mpox Updates

JYNNEOS Commercialization

JYNNEOS has started transitioning to the commercial market and providers should order JYNNEOS through their typical vaccine wholesaler.

- Existing mpox vaccine providers enrolled in the Health Partner Ordering Portal (HPOP), may submit ad hoc requests for JYNNEOS until July 30, 2024 at 12 p.m. eastern time through HPOP and may be approved on a case-by-case basis.
- Providers are prohibited from billing the cost of the vaccine for Federal Government supplied JYNNEOS but are able to bill for the cost of administration.

For questions, please email pharmacy@vdh.virginia.gov.

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JYNNEOS Standing Order

CDC issued Standing [Orders for Administering JYNNEOS \(Mpox\) Vaccine by Subcutaneous Injection to Persons 18 Years of Age and Older](#), which replaces the [previous recommendations](#) for routine use of mpox vaccine in people aged 18 years and older at risk of exposure to mpox.

- It addresses subcutaneous administration of the JYNNEOS vaccine series.
- It does not address the alternative intradermal route that was authorized when JYNNEOS was in short supply, which is no longer routinely recommended.

As a reminder, JYNNEOS may still be administered by subcutaneous injection to children and adolescents under 18 years of age determined to be at high risk for mpox under the [Emergency Use Authorization \(EUA\)](#) issued by the US Food and Drug Administration. For more information visit the [VDH Mpox Healthcare Provider Vaccine website](#).

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New CDC Correctional Health Newsletter

The Centers for Disease Control and Prevention (CDC) has released a new communication: the CDC Correctional Health Newsletter. It was first released on June 26, 2024 and will be published every other month. The newsletter seeks to inform partners on correctional health activities. Content will include:

- CDC resources
- Upcoming events
- Stories from the field/past events
- Opportunities to engage
- Updates about current emergency response activities
- Funding Opportunities
- Publications



Collaborations with others outside of CDC and other public health resources may also be included.

You can visit the [CDC Correctional Health website](#) for resources. Also, [be sure to sign up](#) to get the newsletter when it is released. Any feedback or suggestions on the newsletter are welcomed to correctionalnews@cdc.gov.

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2023 HIV/AIDS Annual Report Available

DDP has released the new HIV/AIDS Annual Report for 2023.

The report can be found on the [DDP Data/Reports page](#).

You can also access the report through the [annual report's direct link](#).

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Personnel

Farewell

Alyson Scullin accepted a program coordinator position with the Cancer Action Coalition of Virginia. Her last day with DDP was July 3. Alyson was the Viral Hepatitis Testing Coordinator and gave DDP seven years of service. DDP thanks Alyson for everything she did to improve health and well-being in the Commonwealth. DDP wishes her all the best in her next steps in life. If you have questions or needs related to viral hepatitis testing, training, and contracts that Alyson would have previously coordinated, please contact **Colin Dwyer** at colin.dwyer@vdh.virginia.gov or (804) 613-8228.

Emily Schreer left DDP on July 5 to pursue a master's degree in urban and regional planning at Virginia Commonwealth University. There she will also work as a Wilder Graduate Scholar Fellow within the Research Institute for Social Equity (RISE). Emily gave DDP two years of service as the Viral Hepatitis and Harm Reduction Project Administrator. DDP wishes Emily all the best on her next steps in life and thanks her for her contributions to disease prevention in the Commonwealth. If you have questions or needs related to viral hepatitis and harm reduction contracts that Emily would have previously coordinated, please contact **Colin Dwyer** at Colin.Dwyer@vdh.virginia.gov or (804) 613-8228, or **Tiona Bowman** at antiona.bowman@vdh.virginia.gov or (804) 584-8415.

Employment Opportunities

Employment opportunities are listed on jobs.virginia.gov. Additionally, current contract positions are listed on the [DDP website](#).

Please visit either site to see detailed information for available positions.

- [Position Opportunity Highlight: Funding Compliance Analyst](#)

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