

CONNECTING CARE PODCAST // EPISODE #20 // TRANSCRIPT

Season Recap

Alex:

Nearly two years and 19 episodes later, we're wrapping up the Connecting Care podcast. Our Boston Medical Center and Strengthening Systems of Care Project teams have really appreciated the opportunity to invite experts to help us dig into important topics related to providing compassionate and person-centered care for people with HIV and opioid use disorder. We are grateful for the time and the platform to think out loud about the challenges and opportunities faced by our patients, as well as the broader systems of care that we all experience. I know Sim, Jess and I learned a lot. We hope that each episode left you with something new, a new perspective, a new approach, or maybe even just some new language. During this final brief episode, Jess, Sim and I talk about some of our favorite episodes and why they meant so much to us. Sim and Jess, it is hard to believe that is our last episode. I've really enjoyed doing this with you. We've had 19 episodes.

Jess:

Can I ask each of you, which was your favorite episode that we did?

Sim:

My favorite was the episode with Jessie Gaeta. I think I just loved hearing in an unfiltered kind of earnest way about what it's like to provide care for people in this drug scene, in this open air drug scene. And there were a lot of kind of both public policy, public health, clinical insights that just struck me and that I think a lot about when I'm taking care of patients. Particularly I think about malnutrition so much more after hearing her talk about how she started to diagnose iron deficiency anemia in people who are housed because there's just enough stability to kind of scratch the surface there.

Alex:

That's a great example. So that's episode 17. Caring for People Living in Open Drug Scene Encampments, Challenges and Opportunities. Because I'm obsessed with methadone, I think of the episode with Hiawatha from New York City, episode six. Hiawatha Collins is the Community Mobilization Coordinator at the National Harm Reduction Coalition and the board chair for Vocal New York. So I think that might have been one of the few episodes where we had somebody with lived experience who talked about their lived experience. And so, for that reason, that was important. I think we could do a whole podcast series with either our patients or the people we've gotten inspiration from who have lived it and are living it every day.

Jess:

So I think this is where I get to admit that it's really hard for me to listen to a recording of my own voice. So I have listened to the audio of very few of our podcasts. I read all the transcripts, obviously. But I think one that I would highlight as a favorite that I did listen to was a week that I was away, which was when both of you spoke to Greg Dorchak, our Assistant US Attorney, about what the Americans with Disabilities Act means for people with substance use disorders. I highlight that because I think Greg is so

gifted at breaking down what are really incredibly complex legal and regulatory issues into something that I as a physician can understand, someone with no legal background.

And really he's someone whose work has activated me around advocacy in a way that I was not activated in the past and actually made me feel confident in being able to support my patients in getting things that they not just deserve, which they certainly do, but are actually entitled to under federal or state law. So if anyone is struggling with seeing people be denied placement in a nursing facility or be denied housing on the basis of their substance use disorder, be denied medications in a correction setting that are the standard of care, I really encourage you to listen to this podcast and just think about some of the advocacy levers that already exist and that as physicians, as public health practitioners, as other people involved in this work, we can really dock into improve our systems.

Alex:

I was thinking of that one also, Jess and I feel the same way about Greg. It was episode 14, What the Americans with Disabilities Act Means for People with HIV and Opioid Use Disorder I'm not sure if we've said it on the podcast, but I'm on sabbatical this year, and so that means I'm not seeing patients or working as much at the Health Department. Sim's been helping me out with that. But I did go to this conference in Glasgow, Scotland in October called the International Network for Health and Hepatitis in Substance Users. And the person that I got to spend time there with was Maggie Beiser, who is a sort of leader of Hep C expertise at the Boston Healthcare for the Homeless. And that podcast was one that I really liked. It was episode nine, Holistic Care for Hepatitis C: Experiences from Boston Health Care for the Homeless Program.

Maggie is a real champion who has remained laser focused on hepatitis C care in the midst of many other issues going on. And what I realized hanging out with her at that conference was that much of the world are, sort of developed countries as well as developing countries outside of the United States, are talking about eliminating Hepatitis C. And I think Maggie has been sort of a champion for that message. She brought it during the podcast, but it's something that... I think that's something we actually can do to make public health and the lives of people with opioid use disorder and HIV better. And we have the technology, we have the systems, we just need to have the will to do it. Everything is known in that setting. So anyway, when I went to that conference and spent time with her, I thought back on that episode and that scenario where I'm really glad we covered. We had two episodes on Hepatitis C, episode eight and episode nine.

Jess:

I'll throw out one more. Clearly, we loved all of our episodes as we get talking. I'll throw out episode four for anyone who's thinking about HIV prevention and people experiencing homelessness and who inject drugs. And that's where we heard from our colleagues at Healthcare for the Homeless. Again, Dr. Jen Brody and Meagan Sonderegger, who have really been doing street outreach based HIV prevention work for many years and have not just done the work, but also created data sets that really show that this work is possible and really provide an answer to any naysayers or people who make assumptions about our ability to deliver interventions like PrEP to people who have these really profound structural barriers. And just overall, one of the joys in this podcast for me and probably for both of you, has been getting to invite people to come join us and talk that we are really inspired by and really admire. And so it's a nice chance to get to look through this list and just think about so many great conversations.

Alex:

Episode four, Meeting clients where they are: providing HIV prevention and treatment on the frontline. I think we could go through every single episode, but I'm not sure how interesting that will be for the

listeners. I think they should go to Apple Podcasts, to anywhere where they get their podcast, search for Connecting Care and you should be able to subscribe and download the episodes and listen.

Sim:

Thank you so much for joining us.

Alex:

It's really been fun. Thank you all very much.

Jess:

Thanks, Alex.

Alex:

You're listening to Connecting Care. Our program was produced today by JSI and Boston Medical Center. Connecting Care is supported by the HRSA funded project, Strengthening Systems of Care for People with HIV and Opioid Use Disorder. The project aims to enhance system level coordination and networks of care among Ryan White, HIV, Aids program recipients and other federal, state and local entities. You can learn more about the project and find resources at www.ssc.jsi.com.