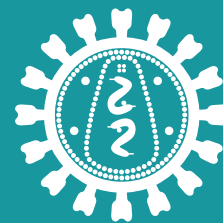


Alameda County

Ending the HIV Epidemic Summary

Centers for Disease Control and Prevention PS19-1906



Introduction

This plan describes Alameda County's bold and innovative plan for ending the HIV epidemic in the county. HIV efforts in the county are led by the Alameda County Public Health Department (ACPHD) in collaboration with the Oakland Transitional Grant Area (OTGA) Planning Council and East Bay Getting to Zero (EBGTZ), and in consultation with its regional partner counties, Contra Costa and San Francisco. ACPHD and its community and clinical partners are part of an extensive network of HIV prevention, care, and treatment services in the county. The current baseline activities, and the infrastructure that supports them, are critical for reducing and ultimately eliminating new HIV infections and optimizing the health of people living with HIV, but they are not sufficient – hence the need for this *Ending the HIV Epidemic (EtHE)* plan. This *EtHE* plan does not replace the other plans; instead, based on the current state of HIV in the county, it expands on them by describing the additional innovative efforts needed.

Current State of HIV in Alameda County

Overall, new HIV diagnoses in Alameda County have been declining slightly, with a six percent drop

in the number of new diagnoses between 2014 and 2018. However, new diagnoses have recently been rising slightly among Latinx residents and have continued to hold steady or decline slightly for other ethnic groups. The city of Oakland is disproportionately affected, accounting for 58 percent of new HIV diagnoses from 2015-2017. Key to ending the HIV epidemic is increasing access and utilization of HIV services for Black/African American (B/AA) and Latinx men who have sex with men (MSM), especially those under age 30, the transgender community, current and formerly incarcerated people, and women of color. Structural and interpersonal racism, discrimination, trauma, stigma, and the historical impact of marginalization and inequity that create barriers to accessing services are common among all the aforementioned groups. Services to end the HIV epidemic must address these barriers. **Exhibit 1** below provides a summary of a few key features of Alameda County's HIV epidemic in 2018.

Community Engagement

The county's *EtHE* plan was developed with the help of community and partner engagement in collaboration with EBGTZ and endorsed by the OTGA Planning Council. However, the COVID-19 pandemic and response has affected Alameda

Exhibit 1: Key Features of Alameda County's HIV Epidemic (2018)



6,129
of people living with diagnosed HIV



200
of new HIV diagnoses



83
% linked to care \leq 30 days



69
% virally suppressed \leq 6 months

Exhibit 2: Key Considerations for Ending the HIV Epidemic in Alameda County, From Community Engagement Processes



Social Determinants of Health, including HIV provider cultural competency, PrEP-related stigma, medical mistrust and structural racism impact access to services.



Mental Health Services are critically needed, especially given COVID-19. The Planning Council has prioritized a mental health needs assessment in FY 2020.



Secure Housing is key to supporting health and well-being for people living with HIV (PLWH); continued efforts to support people who are unhoused are needed.



Substance Use, particularly stimulant and opioid use, is on the rise, with substance use treatment as a major unmet need.

County's ability to implement in-person outreach and face-to-face community engagement for most of the months allocated to the PS 19-1906 accelerated planning year. ACPHD implemented and partnered with others to implement substantive community engagement activities before the onset of COVID-19 by tapping multiple sources of funding including HRSA 20-078. Those activities were leveraged for this planning process.

Selected Findings

The information presented above in **Exhibit 2** sheds light on some prevailing issues and conditions of the priority populations sited in community engagement events. These findings provide early insights to structural barriers and provide a foundation for the development of impactful strategies and interventions.

New Voices

Based on HIV surveillance data and the experience of key stakeholders within ACPHD, the OTGA Planning Council, and EBGTZ, Alameda County identified the following priority populations as **critical voices** that will be the focus of EtHE work:

- **B/AA MSM and Latinx gay men and other MSM, especially those not identifying as gay**

or bisexual have high rates of HIV incidence yet are not sufficiently served by existing services;

- **Young people (age 30 and under), particularly young Gay/MSM of color** make up a disproportionate proportion of new HIV diagnoses;
- **Transgender women and transgender men** made up 2 percent of the new HIV diagnoses in 2018 and cases are likely undercounted;
- **PrEP eligible women, especially B/AA cisgender and transgender women** are critical to reach with PrEP services;
- **People who use drugs** do not experience the same successes across the HIV continuum of care than other groups do;
- **People who are incarcerated** do not have universal access to routine testing or PrEP;
- **People experiencing homelessness** have critical barriers to health care;
- **Older adults (ages 50+)** are more likely to be late HIV testers;
- **Asian and Pacific Islander people** are also more likely to be late HIV testers; and

- **Hispanic/Latinx people** are a higher proportion of late diagnoses.

Situational Analysis

Exhibit 3 below summarizes what Alameda County must do to reach EtHE goals. A full situational analysis by pillar including gaps and assets can be found in the *EtHE* plan.

Alameda’s Plan to End the HIV Epidemic

Alameda County has identified seven innovative efforts that when focused on those populations experiencing disproportionate HIV burden will accelerate the ending of the HIV epidemic. New

EtHE activities are described in full detail in the *EtHE* plan and will work across all four EtHE pillars and will support the outcomes identified by the CDC in PS19-1906. In addition, ACPHD has adopted key values to guide its ongoing community engagement and workforce development. These include being antiracist and centered in health equity, trauma-informed, sex positive; healing; people first/community driven, as well as being data and science driven. Community engagement in collaboration with EBGZ and workforce development of those most impacted by HIV will create an engine to help reach EtHE goals.

All interventions are funded through CDC 20-2010 unless otherwise specified.

Exhibit 3: High-level Summary of What is Needed to End the HIV Epidemic in Alameda County

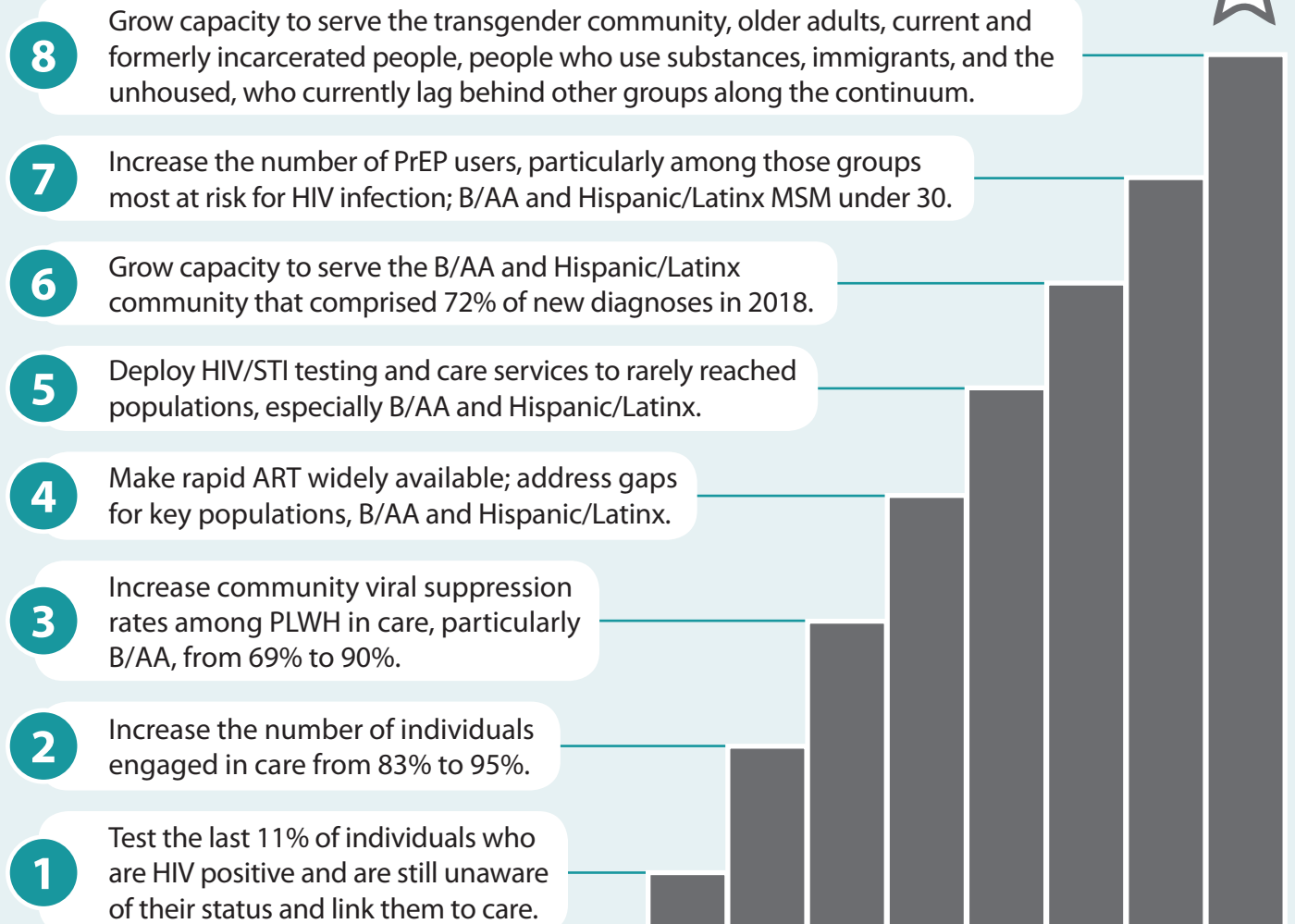


Exhibit 4: Activities and Descriptions



DIAGNOSE TREAT PREVENT RESPOND

1	<p>Enhanced Testing will increase routine opt-out testing in health care settings, increase focused testing among priority populations and will offer self-testing through home-delivered kits.</p>				
2	<p>Data to Care/Data to PrEP will use HIV surveillance data to identify newly diagnosed persons for linkage and partner services and people previously diagnosed who are not in care to reengage them in care.</p>				
3	<p>Same Day PrEP. This program will provide same-day PrEP to B/AA and Latinx MSM, young MSM of color, the transgender community, sexual and substance using partners of PLWH, and women at high risk for HIV.</p>				
4	<p>Augmentation over Baseline Initiative will strategically increase the stability of HIV services and will be focused on supporting PLWH, especially those who are most affected by systemic racism and its outcomes: unemployment, police violence, and trauma. <i>Funded by HRSA</i></p>				
5	<p>Capacity Building and Innovations Fund (CBIF) will create an iterated pathway and technical assistance resources to empower new small, emerging and/or existing provider organizations and to build their capacity to provide new and innovative services to EtHE priority groups. <i>Funded by HRSA</i></p>				
6	<p>Project Empowerment will fund the Oakland LGBTQ Community Center, UCSF Benioff and Bay Area Community Health to reach B/AA and Latinx gay and bisexual cis and transgender men and women with innovative, culturally appropriate, and peer-based services and linkage to appropriate HIV prevention and treatment options in their own language and from their own perspective, while addressing personal and social barriers to health equity and self-sufficiency. <i>Funded by CDPH-OA prevention dollars</i></p>				
7	<p>Strategic Rapid Antiretroviral Therapy will fund Alameda Health System, Asian Health Services, Bay Area Community Health, La Clínica de la Raza, and LifeLong Medical Care to provide stigma-free, trauma informed, culturally/linguistically competent and innovative demonstration projects to administer and deliver strategic rapid ART services to PLWH. <i>Funded by State prevention dollars</i></p>				

Summary References

California Department of Public Health. *Alameda County Epi Profile: Final 2018 Data*. California 2020.

California Department of Public Health. *Ending the HIV Epidemic: California Consortium for CDC PS19-1906*. California 2020.