

This newsletter is organized to align the updates with Strategies from the ***Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan*** (Integrated Plan). The [Integrated Plan](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf) is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf.

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HIV Awareness:

September 18th is National HIV/AIDS and Aging Awareness Day (NHAAD). NHAAD is celebrated to bring awareness to the growing number of people living long and full lives with HIV. It also brings attention to issues related to aging with HIV such as other health conditions that can complicate HIV treatment, social needs, and address new infections among older adults. As people age, they are less aware of their HIV risk factors and are less likely to get tested. To find a list of resources for additional information about NHAAD, testing options and awareness day events visit [National HIV/AIDS and Aging Awareness Day](#) #HIVandAging.

National Gay Men's HIV/AIDS Awareness Day (NGMHAAD) is recognized on September 27th. NGMHAAD is observed to raise awareness of HIV among gay and bisexual men. Testing and learning of varied prevention options is highly encouraged and promoted on NGMHAAD. CDC's *Let's Stop HIV Together* campaign has [many resources](#) for gay and bisexual men.

General Office Updates:

COVID-19

OA is committed to providing updated information related to COVID-19. We have disseminated a number of documents in an effort to keep our clients and stakeholders informed.

Please refer to our [OA website](http://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx) at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

Monkeypox (MPX)

OA is committed to providing updated information related to MPX. We have partnered with the Division of Communicable Disease Control (DCDC), a program within the Center of Infectious Diseases, and have disseminated a number of documents in an effort to keep our clients and stakeholders informed. Please refer to the [DCDC website](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/monkeypox.aspx) at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/monkeypox.aspx>, to stay informed.

Please Note Effective Immediately: Due to concerns about stigma with the name monkeypox, California Department of Public Health (CDPH) is using the acronym MPX (or Mpox when spoken) to refer to the virus until a new name is established by the World Health Organization.

On August 16, (Northern CA), 17, (Southern CA), and 18, (Central CA), CDPH held regional stakeholder listening sessions about Monkeypox (MPX) in California. Community Based Organizations, Local Health Departments, and Community Advocates were invited to participate. The purpose of these listening sessions was to provide updates about the current status of MPX and what CDPH is doing,

what the regions need to know, and provide a Q & A/listening session for the regions. The listening sessions were held in English and Spanish.

CDPH would like to thank everyone who registered and those who attended.

The meeting recordings for all three listening sessions can be accessed at the following links:

8/16/22

[Spanish](https://vimeo.com/740580683) - <https://vimeo.com/740580683>

[English](https://vimeo.com/740606019) - <https://vimeo.com/740606019>

8/17/22

[Spanish](https://vimeo.com/741014075) - <https://vimeo.com/741014075>

[English](https://vimeo.com/741012697) - <https://vimeo.com/741012697>

8/18/22

[Spanish](https://vimeo.com/741018492) - <https://vimeo.com/741018492>

[English](https://vimeo.com/741017193) - <https://vimeo.com/741017193>

The password for all sessions is: **CDPH**
Please see links below for additional resources and updates.

- [Monkeypox Communications Toolkit](#) (CDPH)
- [Monkeypox Information and Resources](#) (CDC)
- [Frequently Asked Questions](#) (CDC)

Racial Justice and Health Equity

The Racial & Health Equity (RHE) workgroup aims to gain insight and understanding of racial and health equity efforts throughout CDPH and take next steps towards advancing RHE in our work. The workgroup has formed subcommittees to address community stakeholder engagement challenges, improve OA policy and practices to support RHE and increasing OA knowledge and attitude on RHE among leadership and staff.

The workgroup convened in August to hold discussion on our understanding and experiences of white privilege, how it is used to cause harm and enforce and maintain racial inequities.

HIV/STD/HCV Integration

As the lead state department in the COVID-19 response, CDPH has re-directed hundreds of staff to this effort. Because of this, the integration efforts of the OA, STD Control Branch, and Office of Viral Hepatitis Prevention are postponed indefinitely. Please refer to our [OA website](#) at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

Ending the Epidemics Strategic Plan



CDPH-OA/STD Control Branch are pleased to report that the roll-out of the **California Strategic Plan** to address the syndemic of HIV, HCV and STIs continues August through September as we review all of the community stakeholder input from our provider needs assessment, community survey and regional listening sessions. We have reached a diversity of stakeholders including consumers, advocates, public health, and CBO staff. Thank you for your ideas about how to drill down into our **30 strategies** organized across **six social determinants of health**. Also, thanks to Facente Consulting for leading this community engagement effort.

As soon as it is complete, we will be releasing a blueprint draft for community input based on what we learned. There will be a comment period and a road show to present this document to our partners.

Below is the [website that documents our work](#) including the draft roadmap, the recording our Statewide Town Hall, and the list of completed regional listening sessions:

- <https://tinyurl.com/CDPHStratPlan>

Ending the HIV Epidemic (EHE)

In August, EHE counties attended a special training offered by the Keck School of Medicine about the Street Medicine Model to help strengthen their mobile services especially aimed at people experiencing homelessness. Thanks to all the EHE counties that continue to implement their EHE plans to help accelerate the end of HIV in California.

Strategy A: Improve Pre-Exposure Prophylaxis (PrEP) Utilization

PrEP-Assistance Program (AP)

As of August 31, 2022, there are 184 PrEP-AP enrollment sites covering 178 clinics that currently make up the PrEP-AP Provider Network.

A [comprehensive list of the PrEP-AP Provider Network](https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878cd5b2) can be found at <https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878cd5b2>.

[Data on active PrEP-AP clients](#) can be found in the three tables displayed on page 4 of this newsletter.

Strategy B: Increase and Improve HIV Testing

OA's HIV home-testing distribution demonstration project continues through Building Healthy Online Communities (BHOC) in the six California Consortium Phase I Ending the HIV Epidemic in America counties. The program, [TakeMeHome®](https://takemehome.org/), (<https://takemehome.org/>) is advertised on gay dating apps, where users see an ad for home testing and are offered a free HIV-home test kit.

In the first 23 months, between September 1, 2020, and July 31, 2022, 3566 tests were distributed. This month, mail-in lab tests (including dried blood spot tests for HIV, syphilis, and Hepatitis C, as well as 3-site tests for

gonorrhea and chlamydia) accounted for 130 (66.0%) of the 197 total tests distributed.

Of individuals ordering a test in July, 31.5% reported never before receiving an HIV test, and 53.8% were 18 to 29 years of age. Among individuals reporting race or ethnicity, 38.2% were Hispanic/Latinx, and of those reporting sexual history, 58.9% indicated 3 or more partners in the past 12 months. To date, 404 recipients have completed an anonymous follow up survey, with 94.1% indicating they would recommend TakeMeHome HIV test kits to a friend. The most common behavioral risks of HIV exposure reported in the follow up survey were being a man who has sex with men (73.5%) or having had more than one sex partner in the past 12 months (62.1%).

Strategy D: Improve Linkage to Care

Since 2007, the Center for Quality Improvement and Innovation recognizes organizations and individuals who make exemplary progress in improving their Ryan White-funded services. One of 2022 award winners is Team VIDA at Santa Rosa Community Health Center (SRCHC) in Sonoma County. Team VIDA includes programmatic staff, case managers, clinicians, pharmacy staff, and a quality coordinator who provides back-up to providers or RNs for any positive result notifications, as well as provides linkage to care for positive patients.

In the fall of 2020, OA began a quality improvement (QI) initiative to increase the number of Ryan White HIV/AIDS Program clients receiving comprehensive healthcare coverage (CHC). Team VIDA increased the number of clients receiving non-medical case management who are enrolled in CHC from 58% to 93%, well surpassing the statewide goal of 85%, in just six months. They accomplished this by reviewing and restructuring their data collection efforts to ensure that underserved clients (uninsured and those that may need a follow up) were being identified. They also established an Access

Active PrEP-AP Clients by Age and Insurance Coverage:

Current Age	PrEP-AP Only		PrEP-AP With Medi-Cal		PrEP-AP With Medicare		PrEP-AP With Private Insurance		TOTAL	
	N	%	N	%	N	%	N	%	N	%
18 - 24	346	9%	---	---	---	---	41	1%	387	10%
25 - 34	1,091	29%	1	0%	---	---	280	7%	1,372	37%
35 - 44	875	23%	---	---	3	0%	191	5%	1,069	29%
45 - 64	561	15%	1	0%	20	1%	127	3%	709	19%
65+	28	1%	---	---	165	4%	7	0%	200	5%
TOTAL	2,901	78%	2	0%	188	5%	646	17%	3,737	100%

Active PrEP-AP Clients by Age and Race/Ethnicity:

Current Age	Latinx		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian/ Pacific Islander		White		More Than One Race Reported		Decline to Provide		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
18 - 24	189	5%	---	---	44	1%	23	1%	---	---	94	3%	9	0%	28	1%	387	10%
25 - 34	787	21%	---	---	130	3%	75	2%	2	0%	300	8%	7	0%	71	2%	1,372	37%
35 - 44	684	18%	3	0%	89	2%	46	1%	1	0%	202	5%	10	0%	34	1%	1,069	29%
45 - 64	472	13%	3	0%	42	1%	20	1%	---	---	155	4%	---	---	17	0%	709	19%
65+	26	1%	1	0%	5	0%	3	0%	---	---	159	4%	---	---	6	0%	200	5%
TOTAL	2,158	58%	7	0%	310	8%	167	4%	3	0%	910	24%	26	1%	156	4%	3,737	100%

Active PrEP-AP Clients by Gender and Race/Ethnicity:

Gender	Latinx		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian/ Pacific Islander		White		More Than One Race Reported		Decline to Provide		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Female	326	9%	1	0%	7	0%	8	0%	---	---	10	0%	1	0%	10	0%	363	10%
Male	1,695	45%	6	0%	284	8%	157	4%	3	0%	881	24%	22	1%	136	4%	3,184	85%
Trans	127	3%	---	---	16	0%	1	0%	---	---	13	0%	1	0%	4	0%	162	4%
Unknown	10	0%	---	---	3	0%	1	0%	---	---	6	0%	2	0%	6	0%	28	1%
TOTAL	2,158	58%	7	0%	310	8%	167	4%	3	0%	910	24%	26	1%	156	4%	3,737	100%

All PrEP-AP charts prepared by: ADAP Fiscal Forecasting Evaluation and Monitoring (AFFEM) Section, ADAP and Care Evaluation and Informatics Branch, Office of AIDS. Client was eligible for PrEP-AP as of run date: 08/31/2022 at 12:01:11 AM
Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

Coordinator role – someone that specializes in AIDS Drug Assistance Program and health insurance for individuals with HIV. This role streamlined the process of linking patients to care in less than one hour (other providers can take days, if not weeks). To continue their efforts, Team VIDA has incorporated QI into their onboarding process for new staff. They even implemented cross-training to fortify their office’s workflow, which proved crucial to staffing during the early days of the COVID-19 pandemic.

When asked if they had any words of wisdom to share for people just starting out on their own QI journeys, HIV Program Manager Paola Diaz said, “We don’t own the project, the team owns the project. We are all responsible to make sure the work gets done the best it can. When everybody felt that they were part of a project, it became easier. If we keep everyone focused on the goal, we get better patient care, we get better results.”

To [learn more about SRCHC’s Team Vida](https://targethiv.org/cqii/cqii-quality-award-program#santarosa), please visit <https://targethiv.org/cqii/cqii-quality-award-program#santarosa>.

Strategy G: Improve Availability of HIV Care

The California Department of Housing and Community Development (HCD) will release its draft of the 2021-22 Consolidated Annual Performance and Evaluation Report (CAPER)

for public comment prior to submittal to HCD. The CAPER reports on specified federal housing and economic assistance allocated by the state, which includes the Housing Opportunities for Persons with AIDS (HOPWA) program, for the period July 1, 2021, through June 30, 2022. The draft will be available on [HCD’s website](https://www.hcd.ca.gov/plans-and-reports) at <https://www.hcd.ca.gov/plans-and-reports>, for a 15-day public comment period starting on August 30 and ending on September 15, 2022 at 5PM. [Questions and public comments](mailto:CAPER@hcd.ca.gov) can be submitted to CAPER@hcd.ca.gov. More information is available on their website.

Strategy J: Increase Rates of Insurance/Benefits Coverage for PLWH or on PrEP

As of August 16, 2022, the number of ADAP clients enrolled in each respective ADAP Insurance Program are shown in the ADAP Enrollment System chart below.

Strategy K: Increase and Improve HIV Prevention and Support Services for People Who Use Drugs

Updated National HIV/AIDS Strategy Released

The *National HIV/AIDS Strategy Federal Implementation Plan for 2022—2025* was released in August. Updates include an emphasis on the important roles of harm reduction and syringe services programs in the

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from June
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	548	-1.08%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,914	-0.95%
Medicare Part D Premium Payment (MDPP) Program	2,041	-0.73%
Total	8,503	-0.91%

national response to HIV, as well as to hepatitis C virus infection and substance use disorder.

The strategy also calls on jurisdictions to “enhance the ability of the HIV workforce to provide naloxone and educate people on the existence of fentanyl in the drug supply to prevent overdose and deaths and facilitate linkage to substance use disorder treatment and harm reduction programs”.

The [full plan](https://hivgov-prod-v3.s3.amazonaws.com/s3fs-public/NHAS_Federal_Implementation_Plan.pdf) can be found at https://hivgov-prod-v3.s3.amazonaws.com/s3fs-public/NHAS_Federal_Implementation_Plan.pdf

[Learn how to start naloxone distribution services](https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/Fatal_Overdose_Prevention_for_Social_Service_Providers_FINAL.pdf) at https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/Fatal_Overdose_Prevention_for_Social_Service_Providers_FINAL.pdf

International Overdose Awareness Day 2022

On August 31, International Overdose Awareness Day (IOAD), harm reduction programs across the state honored people who died by overdose and recognized people who use drugs, their families and friends who use naloxone to reverse opioid overdoses and save lives. A collective banner drop and other community events brought awareness to the national public health crisis and called for more funding to reduce overdose deaths.

[Learn more about IOAD](https://www.overdoseday.com/) at <https://www.overdoseday.com/>

[Find your local harm reduction provider](https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_sepdirectory.aspx) at https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_sepdirectory.aspx

Governor Newsom Vetoed Bill to Pilot Overdose Prevention Programs

In August, Governor Newsom vetoed a bill to pilot overdose prevention programs in California. SB 57 would have allowed Los Angeles, San Francisco, and Oakland to pilot safer drug

consumption spaces to prevent overdose death, reduce public drug use and offer linkage to prevention and treatment services. This harm reduction strategy has been offered in cities around the world since the mid-1980s and is proven effective at preventing overdose death.

Strategy M: Improve Usability of Collected Data

The [HIV and Black/African Americans Fact Sheet](#), [HIV and Latinx Fact Sheet](#), and [HIV and Transgender People Fact Sheet](#) are now available on the [OA Case Surveillance Reports webpage](#). These fact sheets include 2010 to 2020 trend data on new HIV diagnoses among Black/African Americans, Latinx, and transgender people. The fact sheets also include demographic characteristics of new HIV diagnoses and health outcomes among Black/African Americans, Latinx, and transgender people compared to the statewide average.

Strategy N: Enhance Collaborations and Community Involvement

California Planning Group (CPG):

The CPG Community and State Co-Chairs will be hosting a four-part virtual fall meeting for all CPG Membership in October/November of 2022. This meeting will be open to the public. To avoid holding these meetings up against a weekend and to ensure there is no overlap with other important conferences and meetings scheduled for October, we have chosen to hold this year’s meeting on October 25 & 27 and November 1 & 3. This meeting will be comprised of four separate Zoom meetings:

- **Day 1:**
Tuesday, October 25, 2022
1:00 PM – 4:00 PM Leadership Academy
(CPG members only)
- **Day 2:**
Thursday, October 27, 2022
12:45 PM – 4:00 PM

- **Day 3:**
Tuesday, November 1, 2022
12:45 PM – 4:00 PM

- **Day 4:**
Thursday, November 3, 2022
12:45 PM – 4:00 PM

Note: October 25 will be a skills-building meeting and will not open to the public; however, there will be a 10-minute public comment period on October 27, November 1, and November 3.

For [questions regarding this issue of *The OA Voice*](#), please send an e-mail to angelique.skinner@cdph.ca.gov.
