

INSIDE:

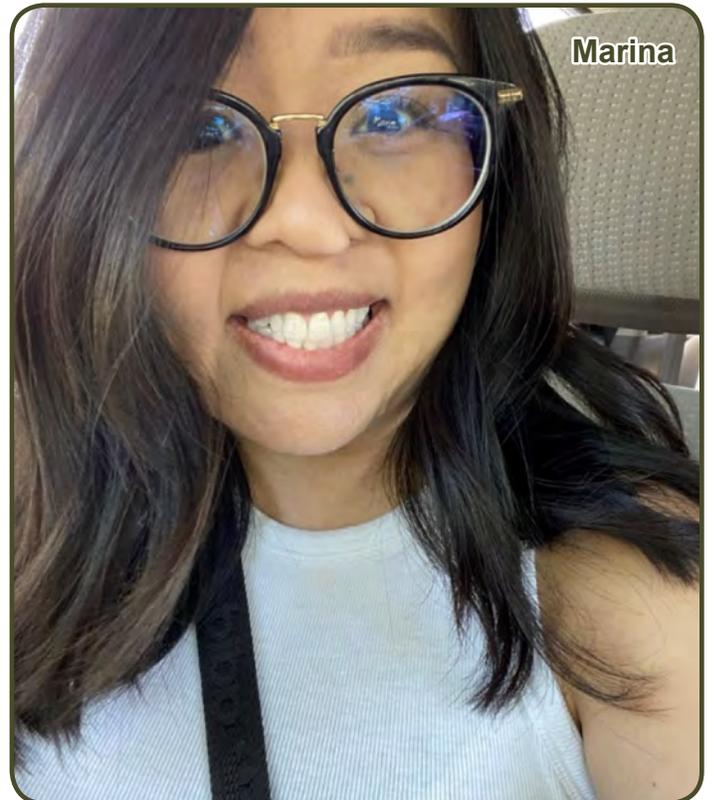
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This newsletter is organized to align the updates with Strategies from the ***Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan*** (Integrated Plan). The [Integrated Plan](#) is available on the Office of AIDS' (OA) website.

STAFF HIGHLIGHT

Congratulations to **Marina Chinn**, our new Quality Assurance and Training Coordinator/ Associate Governmental Program Analyst (AGPA) within the AIDS Drugs Assistance Program (ADAP) Branch's Quality Assurance and Training (QAT) Unit. Marina has been a Contracts Manager/AGPA for the Program Integrity and Operations Section/Contracts and Grants Unit of the ADAP Branch for the last three years. During this time, she oversaw the contracting of ADAP and Pre-Exposure Prophylaxis Assistance Program (PrEP-AP) Enrollment sites, Clinical Provider sites, and processed scopes of work, budgets, exhibits, and invoices. She has also led the ADAP Team Building Workgroup for the past two years, helping to organize team building events and initiatives for ADAP staff. Prior to joining ADAP, Marina spent 16 years in the education sector, including five years as a Safety Committee Member and Safety Coordinator for the CA Montessori Project, where she created annual trainings for new and existing staff, assisted in training both staff and students, and coordinated staff meetings. This work eventually led Marina to the start of her State service with Department of Education as a Contracts Analyst, before she found her home in ADAP, where she is able to combine her love of training with the deeply meaningful mission of the OA.

In her free time, Marina enjoys crafting, creating



Marina

custom keychains and silverware through metal stamping, and loves to bake cookies and bread!

COMMUNITY PARTNER SPOTLIGHT

Rachel Anderson, co-founder of SANE, one of California's longest running syringe services programs (SSPs) passed away recently. Rachel was an executive director, researcher, trainer, and a voice for people who use drugs



and their vital roles as leaders of California’s harm reduction and health justice movements.

While working in HIV research at UC Davis in the early ‘90s, Rachel saw the need for a syringe exchange program in Sacramento and launched the Sacramento Area Needle Exchange (SANE, now called Safer Alternatives through Networking and Education) in 1993. She boldly navigated a hostile law enforcement climate, finally receiving legal authorization from the City of Sacramento after more than 15 years of frontline, “underground” work.

Rachel’s philosophy of empowerment for people who use drugs had a profound influence on policy throughout the entire state. She spent many hours with the OA Community HIV Planning Group, helping to write the guidance OA uses for funding SSPs, as well as the regulations in CA law. Her work on the California Syringe Exchange Programs (CASEP) research study in the early 2000s laid the groundwork for passage of laws that over the past 20 years have legalized syringe exchange, permitted possession of syringes for personal use, and allowed state funds to be used to support syringe services programs. OA extends our condolences

to Rachel’s many loved ones, colleagues and mentees, and our gratitude for her many contributions to our collective work.

HIV AWARENESS

April 10th is National Youth HIV/AIDS Awareness Day (NYHAAD). HIV education is paramount to awareness and prevention. NYHAAD is meant to raise awareness and help promote conversations about the impact of HIV on young people. Engaging in such conversations provides increased knowledge of HIV prevention techniques, helps one develop and maintain safe behaviors, in addition to helping reduce stigma against those living with HIV.

California Department of Public Health (CDPH) is committed to ensuring its youth have access to information, prevention and treatment services. For more information visit the [OA Youth Community Health in California](#) webpage.

GENERAL 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](#) to stay informed.

> Mpox

OA is committed to providing updated information related to mpox. 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](#) to stay informed.

Update: [Spanish mpox digital assets](#) are now available for LHJs and CBOs.

➤ **Racial Justice and Health Equity**

The Racial & Health Equity (RHE) workgroup aims to gain insight and understanding of racial and health equity efforts throughout the 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.

➤ **HIV/STD/HCV Integration**

Please refer to the [OA website](#) to stay informed.



OA and the 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 in April as we prepare to release our phase-2 *Implementation Blueprint*, the accompanying document to our plan. The activities in this customizable *Implementation Blueprint* were the result of community input from across all regions of California and they help us drill down into specific goals under our 30 strategies organized over 6 social determinants of health: racial equity, health access for all, housing first, mental health and substance use, economic justice, and stigma free. Once we release the final document, we will host a series of webinars that will help local health jurisdictions customize this plan for their communities.

The [URL below documents our work](#), including the phase-1 roadmap, the recording of our Statewide Town Hall, and the list of completed regional listening sessions:

- <https://facenteconsulting.com/work/ending-the-epidemics/>

Thank you for engaging with this strategic planning process and helping us make it better.

In addition, we'd like to thank the Sacramento HIV Health Services Planning Council, who hosted a Strategic Plan and Implementation Blueprint discussion during their March HIV Health Services Planning Council meeting!

➤ **Ending the HIV Epidemic (EHE)**

We appreciate the ongoing work of the six counties funded through the EHE Initiative: Alameda, Orange, Riverside, Sacramento, San Bernardino, and San Diego. As a group the counties have expanded routine opt out and focused testing, home delivered HIV/HCV/STI integrated testing, enhanced status-neutral linkages to care and prevention services and implemented special intervention-pilots focused on EHE priority populations at intersections of mental health, substance use and housing security. OA wishes to applaud their efforts and progress made in the most difficult of circumstances. Common to their work in March has been their efforts to launch EHE-focused social media campaigns.

OA has selected Peregrine Media, a contractor with national expertise that has worked with Emory University and the Center for Disease Control and Prevention (CDC), on social media implementation and metrics. Peregrine Media is providing services to the six California Consortium Phase I Counties to implement tailored social media campaigns, utilizing the CDC's "Let's Stop HIV Together" media campaign materials. Information on the outcomes of these campaigns will be reported in future editions of the *OA Voice*.

STRATEGY A

Improve Pre-Exposure Prophylaxis (PrEP) Utilization:

➤ PrEP-Assistance Program (AP)

As of March 29, 2023, there are 203 PrEP-AP enrollment sites covering 189 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 5 of this newsletter.

STRATEGY B

Increase and Improve HIV Testing:

OA has expanded its Building Healthy Online Communities (BHOC) self-testing program to allow for rapid OraQuick test orders in all jurisdictions in California. 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 February, 326 individuals in 36 counties ordered self-test kits, with 255 individuals ordering 2 tests. Most individuals ordering tests identify as cisgender men (80.6% of those sharing gender) and Hispanic/Latinx (47.1% of those sharing race or ethnicity). Twenty-one (6.4%) orders came in through the Spanish language portal. One-quarter of participants reported never having tested for HIV before (25.8%); another third had not tested for HIV in

at least one year (36.2%). OA is excited to help make HIV testing more accessible through this program.

OA's existing TakeMeHome Program continues in the six California Consortium Phase I Ending the HIV Epidemic in America counties. In the first 30 months, between September 1, 2020, and February 28, 2023, 4955 tests have been 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 158 (72.8%) of the 217 total tests distributed.

Of individuals ordering a test in February, 40.0% reported never before receiving an HIV test, and 48.39% were 18 to 29 years of age. Among individuals reporting race or ethnicity, 40.7% were Hispanic/Latinx, and of those reporting sexual history, 40.1% indicated 3 or more partners in the past 12 months. To date, 546 recipients have completed an anonymous follow up survey, with 94.7% 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 (72.2%) or having had more than one sex partner in the past 12 months (63.7%).

OA has published an [infographic](#) describing the implementation of BHOC TMH in California.

STRATEGY J

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

As of March 29, 2023, the [number of ADAP clients enrolled in each respective ADAP Insurance Assistance Program](#) are shown in the chart at the top of page 6.

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	244	7%	---	---	---	---	23	1%	267	8%
25 - 34	1,035	31%	1	0%	---	---	251	7%	1,287	38%
35 - 44	854	25%	---	---	2	0%	185	5%	1,041	31%
45 - 64	438	13%	1	0%	21	1%	105	3%	565	17%
65+	22	1%	---	---	181	5%	10	0%	213	6%
TOTAL	2,593	77%	2	0%	204	6%	574	17%	3,373	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	143	4%	---	---	32	1%	9	0%	1	0%	57	2%	4	0%	21	1%	267	8%
25 - 34	750	22%	---	---	114	3%	87	3%	2	0%	265	8%	5	0%	64	2%	1,287	38%
35 - 44	676	20%	3	0%	84	2%	39	1%	1	0%	193	6%	6	0%	39	1%	1,041	31%
45 - 64	361	11%	2	0%	31	1%	16	0%	---	---	138	4%	---	---	17	1%	565	17%
65+	22	1%	1	0%	4	0%	4	0%	---	---	178	5%	---	---	4	0%	213	6%
TOTAL	1,952	58%	6	0%	265	8%	155	5%	4	0%	831	25%	15	0%	145	4%	3,373	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	175	5%	---	---	2	0%	6	0%	---	---	14	0%	1	0%	2	0%	200	6%
Male	1,604	48%	6	0%	248	7%	147	4%	4	0%	797	24%	11	0%	131	4%	2,948	87%
Trans	160	5%	---	---	15	0%	2	0%	---	---	14	0%	1	0%	3	0%	195	6%
Unknown	13	0%	---	---	---	---	---	---	---	---	6	0%	2	0%	9	0%	30	1%
TOTAL	1,952	58%	6	0%	265	8%	155	5%	4	0%	831	25%	15	0%	145	4%	3,373	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: 02/28/2023 at 12:00:53 AM
Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from February
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	484	- 1.02%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,786	- 2.29%
Medicare Part D Premium Payment (MDPP) Program	1,281	- 14.77%
Total	7,551	- 3.13%

Source: ADAP Enrollment System

STRATEGY K

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

➤ SAVE THE DATE! 2023 Harm Reduction Showcase in San Jose

Join the Santa Clara Department of Public Health, May 4th for an opportunity to learn about their harm reduction services and how local service providers can integrate harm reduction principles and practices into their work. E-mail, harmreduction@phd.sccgov.org for [additional information](#).

Learn more about their [program](https://publichealth.sccgov.org/services/harm-reduction-program) at <https://publichealth.sccgov.org/services/harm-reduction-program>.

➤ End of the X-Waiver: A New Frontier in Addiction Treatment

Wednesday, April 19 | 10:00 am -11:00 pm PT
The recent elimination of the X-Waiver, a requirement that involved additional training for clinicians to prescribe medication for opioid use disorder (MOUD), presents new opportunities for expanding MOUD. Join the [National Overdose Prevention Network](#) (NOPN) for a conversation breaking down the change, what it means

for providers, and steps to take to get more clinicians to prescribe addiction treatment in your community.

[Register](https://nopn.org/webinars/end-of-the-x-waiver-a-new-frontier-in-addiction-treatment) at <https://nopn.org/webinars/end-of-the-x-waiver-a-new-frontier-in-addiction-treatment>

➤ PrEP for People Who Inject Drugs (PWUD): New On-Demand e-Learning Module

[Health HIV](#) released a learning module that aims to educate and motivate clinicians and other providers working in substance use disorder (SUD) centers to increase their clients' awareness of and access to PrEP and counsel PWUD regarding HIV prevention, including PrEP options and comprehensive harm reduction. This module is intended for addiction center clinical staff (MDs, NPs, PAs, RNs), counselors, social workers, case managers, peer educators, peer advocates, medical assistants, and nonclinical office staff.

[Register](https://healthhiv.org/training/bridgeprep/?eType=EmailBlastContent&eld=f77ede37-f397-4b76-a2a2-6004ded9a204) at <https://healthhiv.org/training/bridgeprep/?eType=EmailBlastContent&eld=f77ede37-f397-4b76-a2a2-6004ded9a204>

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