

This newsletter is organized to align with the six Social Determinants of Health found in the <u>Ending</u> <u>the Epidemics Integrated Statewide Strategic</u> <u>Plan</u>, addressing the syndemic of HIV, HCV, and STIs in California. More about the <u>Strategic Plan</u> is available on the Office of AIDS (OA) website.

INSIDE:

- Community
- Awareness
- Updates
- Strategic Plan
- Health Access for ΔII
- Racial Equity
- Mental Health & Substance Use

STAFF HIGHLIGHT

Each year, the California Department of Public Health (CDPH) hosts a Department-Wide employee recognition ceremony, called the **PHAME Awards**. PHAME stands for Public Health Acknowledging My Efforts. Awardees are honored by various categories that include Beyond the Call of Duty, Leadership, Empowering Professional Growth and Development, and Public Service, to name a few.

Please join us in celebrating and acknowledging OA's PHAME Award recipients in Leadership and Public Service categories, respectively.

> Leadership

Linda Lewis is a Research Scientist Manager, with over a decade of work experience in infectious diseases, a doctor in veterinary medicine, and an MPH. Despite her impressive background and resume, she respects her staff's expertise through active listening and welcoming their inputs and feedback. She actively participated in staff trainings, picked up process tasks, and has worked late to learn and become the great asset she is today. It is her passion, dedication, humble demeanor, and quick intelligence that makes the staff respond positively and enabling them to take pride in doing so. Linda entered our team when there



was high turnover, many vacancies, limited documentation, and challenging dynamics. This was a complex leadership role needing to lead a team of research scientists, evaluating high profile projects aimed at HIV drug expansion and adherence, and be the product owner for a system that captures AIDS Drug Assistance Program Services provided. In less than a year, while also partially working on mpox, Linda became proficient in our team's work reflected in her timely decisions made to improve efficiencies, increase transparency, and accountability.



▶ Public Service

The OA Harm Reduction Unit (HRU) -Alessandra Ross, Marjorie Katz, Leslie Knight, Loris Mattox and Pike Long serves some of the most marginalized people in California. The HRU manages the OA Syringe Services Authorization Program and has guided more than 20 community-based organizations, health clinics and local health departments through the complex process of becoming authorized as syringe services programs. Syringe services programs (SSPs) were originally established in California over 30 years ago to prevent HIV and hepatitis C among people who inject drugs, which is still central to their mission of harm reduction. But now SSPs are also on the frontline of the response to overdose epidemic, distributing naloxone and training their program participants in how to prevent and reverse overdoses. Although SSPs are not controversial in the scientific, medical, or public health fields, they can still be politically controversial in some areas of the state. The HRU is highly skilled at responding when objections to harm reduction are spotlighted,

answering questions and concerns, negotiating with local law enforcement and other local officials, and helping SSPs navigate potential pushback as they usher these entities through the authorization process. In the last six months, however, HRU has gone above and beyond their normal duties and delivered stellar support to SSPs, local stakeholders, CDPH and the CA Health and Human Services Agency by rapidly and precisely responding to new demands that required long hours, careful analyses, and quick answers. These conditions came about when a California appeals court issued a new set of requirements for the CDPH SSP authorization program. These requirements included a broader approach to stakeholder involvement, meticulous documentation of stakeholder outreach efforts. a full legal analysis of the authorizations already completed, and a process of reauthorization for existing SSPs to meet the new standards. The HRU staff led the OA and CDPH response through this ruling and, in a matter of months, redesigned our entire program to meet the new standards.

Congratulations and thank you for all you do!

COMMUNITY PARTNER SPOTLIGHT

June is PRIDE Month! During this month various events are held to recognize and celebrate the influence Lesbian, Gay, Bisexual, Transgender, Queer/Questioning and Plus (LGBTQ+) people have made around the world. During PRIDE we celebrate diversity, allyship, and reflect on the progress made in the fight for social justice, equity, inclusion, and the freedom to be exactly who you are. Also, PRIDE Month provides an opportunity to raise awareness of current issues effecting the community while reaffirming to do more to support LGBTQ+ rights.

On May 29th **Tiffany Woods**, OA's Transgender Health Manager, was invited to speak at the Raising the Flag Ceremony at Sacramento's City Hall. We'd like to share a portion of her speech:

This is the first PRIDE flag raising for Sacramento as a Transgender Sanctuary city, a seismic act of intentional inclusion. representation, and support that goes beyond flag raising or other symbolic gestures at a dangerous time in our nation when courageous action is needed. It places Sacramento as a national beacon of hope, support, and inclusion and a roadmap of what can be possible not just for other cities, but for State departments as well. For several years, the Office of AIDS have been leading inclusion and representation efforts at CDPH by implementing internal Transgender Culturally Responsive and Racial Justice Trainings, creating an LGBTQ+ Inclusive Language Guide for programs, having LGBTQ+ staff lead statewide projects, and working with human resources to ensure our departments hire more diverse staff representing the great diversity of Californians we serve!

Raising the PRIDE flag demonstrates a city's statement of values, honors diversity and inclusion, and officially kicks-off PRIDE Month!





We are also excited to share that OA and the Sexually Transmitted Disease Control Branch (STDCB) will be marching in the **Sacramento PRIDE March and Parade** on Sunday, June 9th for the first time! The event is both a demonstration of activism in pursuit of equity and justice and a celebration of the progress made. OA is proud to celebrate PRIDE Month and continues to work diligently to ensure everyone enjoys the full promise of equity, dignity, protection, and access to quality health services throughout California. We are looking forward to supporting and uplifting our LBGTQ+ co-workers and community!

HIV AWARENESS

June 5 is HIV Long-Term Survivors
Awareness Day (HLSAD). On this day, we recognize and honor long-term survivors of the epidemic. It is a day of remembrance, reflection, and is also recognized to raise awareness of the needs, issues, and the journey long-term survivors have endured and continue to face.

On June 27 we observe National HIV Testing Day (NHTD), a day meant to encourage people to get tested for HIV, know their status and empower people to prioritize their sexual health. Knowing your HIV status helps you choose options to keep yourself and others healthy and linked to care and treatment options. There are many places to get an HIV test, find one near you at AIDSVu or for self-testing visit TakeMeHome.

GENERAL UPDATES

> 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.

Mpox digital assets are available for LHJs and CBOs on DCDC's <u>Campaign Toolkit</u> website.

As we mentioned previously, on April 1, 2024, the mpox vaccine, JYNNEOS, became available on the commercial market. While CDPH will work to ensure access to vaccine through LGBTQ+ PRIDE season (starting as early as May 2024), access to vaccine for people who are uninsured/ underinsured in a local jurisdiction may be





impacted once the state supply is phased out. In light of these circumstances, please consider using the state's turnkey resource (Optum Serve) to bolster vaccination efforts at large community or PRIDE events this Summer, particularly those that would serve a large under/uninsured population.

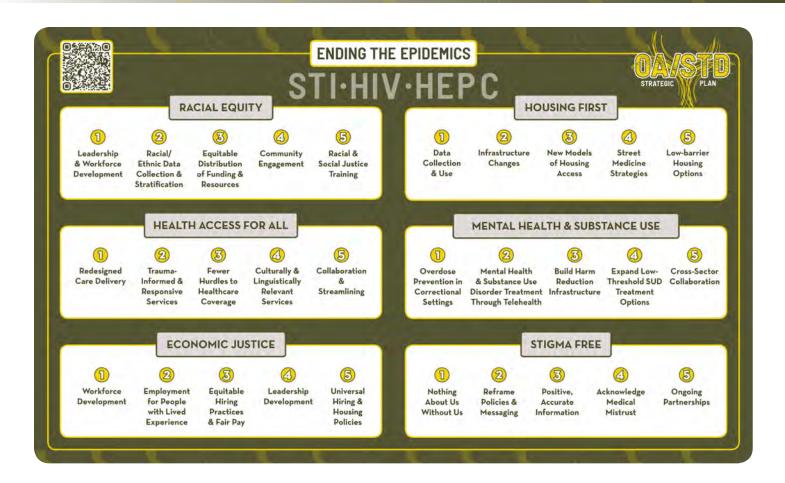
The Turnkey Program can deploy teams to indoor and outdoor sites and are equipped with all the necessary materials and supplies (except the vaccines themselves which would be provided by the local health jurisdiction).

If you know a local jurisdiction is interested in using the Mpox Turnkey Program and/or for more information, please contact <u>Brenda Meza</u>, (brenda.meza@cdph.ca.gov) and <u>Justin Garcia</u> (justin.garcia@cdph.ca.gov).

Mpox flyers and stickers for PRIDE can be found in the PRIDE Toolkit, now available on the <u>LGBTQ+ webpage</u>.

► HIV/STD/HCV Integration

We are re-initiating our integration discussions and moving forward with the necessary steps to integrate our HIV, STI, and HCV programs into a single new Division. We will continue to keep you apprised on our journey!



The **visual above** is a high-level summary of our *Strategic Plan* that organizes 30 Strategies across six Social Determinants of Health (SDoH).

CDPH OA and STD Control Branch would like you to continue to use and share the <u>Strategic</u>

<u>Plan</u> and the <u>Implementation Blueprint</u>. These documents address HIV as a syndemic with HCV and other STIs, through a SDoH lens.

For technical assistance in implementing the *Strategic Plan*, California LHJs and CBOs can vist <u>Facente Consulting's webpage</u>.

HEALTH ACCESS FOR ALL

Strategy 1: Redesigned Care Delivery

OA continues to implement 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/) is advertised on gay dating apps, where users see

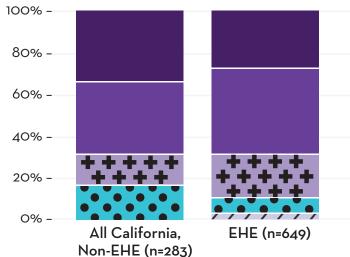
an ad for home testing and are offered a free HIV-home test kit.

In April, 283 individuals in 43 counties ordered self-test kits, with 192 (67.8%) individuals ordering 2 tests. Additionally, OA's existing TakeMeHome Program continues in the six California Consortium Phase I Ending the HIV Epidemic in America counties. In the first 44 months, between September 1, 2020, and April 30, 2024, 11,363 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 395 (60.9%) of the 649 total tests distributed in EHE counties. Of those ordering rapid tests, 183 (72.1%) ordered 2 tests.

TAKEMEHOME

HIV Test History Among Individuals Who Ordered TakeMeHome Kits, April 2024



	, ,,	
// 0-3 Months	7-12 Months	Never
4-6 Months	Over a Year	

Survey Highlights	EHE	All California, Non-EHE
Would recommend TakeMeHome to a friend	94.3%	94.6%
Identify as a man who has sex with other men	52.6%	56.4%
Reported having been diagnosed with an STI in the past year	8.4%	90%

Additional Key Characteristics	ЕНЕ	All California, Non-EHE
Of those sharing their gender, were cisgender men	49.7%	53.9%
Of those sharing their race or ethnicity, identify as Hispanic or Latinx	36.7%	35.8%
Were 17-29 years old	45.6%	48.1%
Of those sharing their number of sex partners, reported 3 or more in the past year	42.7%	39.9%

Since September 2020, 1,292 test kit recipients have completed the anonymous follow-up survey from EHE counties; there have been 445 responses from the California expansion since January 2023.

Strategy 3: Fewer Hurdles to Healthcare Coverage

As of May 30, 2024, there are 212 PrEP-AP enrollment sites and 231 clinical provider sites that currently make up the <u>PrEP-AP Provider network</u>.

<u>Data on active PrEP-AP clients</u> can be found in the three tables displayed on the next page of this newsletter.

As of May 30, 2024, the <u>number of ADAP clients</u> enrolled in each respective ADAP Insurance

<u>Assistance Program</u> are shown in the chart at the top of page 8.

Active PrEP-AP Clients by Age and Insurance Coverage:											
	PrEP-A	AP Only	PrEP-A Med		—	AP With icare	PrEP-A	AP With	TOTAL		
Current Age	N	%	N	%	N	%	N	%	N	%	
18 - 24	370	10%					25	1%	395	11%	
25 - 34	1,267	34%					181	5%	1,448	39%	
35 - 44	923	25%			2	0%	154	4%	1,079	29%	
45 - 64	431	12%			18	0%	109	3%	558	15%	
65+	26	1%			224	6%	8	0%	258	7%	
TOTAL	3,017	81%	0	0%	244	7%	477	13%	3,738	100%	

Active	Active PrEP-AP Clients by Age and Race/Ethnicity:																	
Current	American Indian or Latinx Alaskan Native		Asian Afr		nck or Prican Pacific Prican Islander		White		More Than One Race Reported		Decline to Provide		TOTAL					
Age	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
18 - 24	209	6%	1	0%	45	1%	18	0%	3	0%	74	2%	1	0%	44	1%	395	11%
25 - 34	827	22%	3	0%	132	4%	89	2%	11	0%	281	8%	11	0%	94	3%	1,448	39%
35 - 44	621	17%	5	0%	97	3%	52	1%	6	0%	233	6%	6	0%	59	2%	1,079	29%
45 - 64	299	8%			55	1%	18	0%	2	0%	145	4%	2	0%	37	1%	558	15%
65+	24	1%			4	0%	6	0%			212	6%			12	0%	258	7%
TOTAL	1,980	53%	9	0%	333	9%	183	5%	22	1%	945	25%	20	1%	246	7%	3,738	100%

Active PrEP-AP Clients by Gender and Race/Ethnicity:																		
	Lati		American Indian or Alaskan Native			Black or African American Pacific Islander			Wh	More Than One Race Reported			Dec to Prov	0	TOTAL			
Gender	N	%	N	%	N	%	N	%	N	%	Ν	%	N	%	Ν	%	N	%
Female	65	2%			4	0%	7	0%	2	0%	19	1%			10	0%	107	3%
Male	1,766	47%	8	0%	307	8%	168	4%	20	1%	893	24%	20	1%	212	6%	3,394	91%
Trans	123	3%			16	0%	6	0%			13	0%			7	0%	165	4%
Unknown	26	1%	1	0%	6	0%	2	0%			20	1%			17	0%	72	2%
TOTAL	1,980	53%	9	0%	333	9%	183	5%	22	1%	945	25%	20	1%	246	7%	3,738	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: 05/31/2024 at 12:01:10 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 April
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	529	+ 0.37%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,505	- 2.04%
Medicare Premium Payment Program (MPPP)	2,092	- 0.42%
Total	8,126	- 1.49%

Source: ADAP Enrollment System

RACIAL EQUITY

> Strategy 4: Community Engagement



The California Planning Group (CPG) and OA will be hosting the Spring In-Person CPG Meeting from June 10 – 12 at the Holiday Inn Sacramento Downtown-Arena (300 J Street, Sacramento, CA 95814). Except for June 10, each meeting day will be open to the public. On June 10, we will host a CPG Leadership Academy, which focuses on skills and capacity building for our current CPG members only. A public comment period will be held on June 11 and 12.

The meeting's theme is *Innovation Through Integration:* Synergizing Health for HIV, STI, and HCV Challenges. It will be focused on addressing the syndemics of HIV, STI and HCV and will include presentations related to all three topics. It will also spotlight OA's Clinical Quality Management Program as well as the new HIV Care Connect (HCC) Data System.

CPG and OA welcomes the participation and input of the public. We highly encourage you to join us at the spring meeting and learn about

how we can bring our communities together to continue to forge new pathways in addressing the syndemics!

For more information about CPG, please visit our website at https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA CPG.aspx.

➤ Strategy 5: Racial and Social Justice Training

The Local Capacity Building and Program Development Unit has developed a new, fillable form to be used for all capacity building assistance (CBA) requests. The CDC offers free CBA through training, technical assistance, and other resources to reduce HIV infection and improve health outcomes for people with HIV in the United States. Its CBA Provider Network provides CBA on a vast variety of HIV preventions related topics, including enhancing cultural competency for a successful HIV program, cultural responsiveness and humility for people who inject drugs (PWID), diversity, equity, and inclusion, motivational interviewing, planning a condom distribution program, and so much more!

Women in the Central Valley HIV Prevention and Care Webinar Series:

In March 2024, the CPG Women's Committee

partnered with Denver Prevention Training Center and Pacific AIDS Education & Training Center on a 3-part webinar series focused on improving HIV prevention and care among women in the Central Valley. In the first webinar, we learned about the socio-environmental factors, healthcare landscape, HIV epidemiologic factors, and lived experiences that impact viral suppression among women in the Central Valley. In the second webinar, we learned about PrEP & PEP as a key prevention strategy for women and heard professional and lived experiences about HIV prevention and sexual health. In the third webinar, we learned about creating responsive and compassionate HIV care systems for women in the Central Valley. To watch the recording of each session, please register for the webinars. The link to watch the recording will be sent automatically upon registration.

See the links below for registration and more information:

- The Impact of HIV in California's Central Valley: The Data and the Experiences of Women
- HIV Prevention and Sexual Health for Women in California's Central Valley
- <u>Creating Responsive and Compassionate</u>
 <u>HIV Care Systems for Women in California's</u>
 Central Valley

to overdose prevention and response, drug treatment provisions and navigation through grants to harm reduction services providers. The California Overdose Prevention and Harm Reduction Initiative (COPHRI) is part of a massive state effort to address the opioid overdose crisis and will fund frontline staff at up to 72 SSPs through June 2027.

The Center at Sierra Health is the fiscal agent for this grantmaking process and executed the contracts to award COPHRI funds to previously supported SSPs last month. In April, The Center released the RFA to authorized SSPs not previously funded to apply for COPHRI awards and applications are currently under review. A third wave of funding will be made available to emerging SSPs in 2025.

To get more information about the next round of funding, you can e-mail harmreduction@ sierrahealth.org.

To <u>learn more about SSPs in California</u>, please visit our webpage at https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_needle_exchange_syringe.aspx.

For <u>questions regarding The OA Voice</u>, please send an e-mail to angelique.skinner@cdph. ca.gov.

MENTAL HEALTH & SUBSTANCE USE

➤ Strategy 3: Build Harm Reduction Infrastructure

UPDATE: California Overdose Prevention and Harm Reduction Initiative

The 2023 Budget Act included \$61million over four years to support staff and costs related