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This newsletter is currently organized to align 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

OA would like to congratulate **Mindy McFall** on her promotion to the Health Program Specialist I position in the Support Branch's Business Operations & Compliance Section. In this position she will serve as our CDC grant specialist.

Mindy has been with OA for two years working as a fiscal analyst in the Support Branch. During that time, she provided administrative support for invoice processing, reconciliation, federal fund drills, and encumbrances. She also initiated and implemented several process improvement efforts that streamlined the encumbrance management process, reports for the Center of Infectious Diseases (CID) briefings, enhancements to the invoice trackers, and the STD 215 revision process. Prior to working in OA, Mindy was a senior business analyst for Intel, and also owned and managed a fitness studio in Folsom. Mindy has over 15 years of analytics and business experience that has been used to improve the efficiency of Support Branch activities and processes.

Outside of work, Mindy enjoys hanging with family, competing in endurance races, cheering on the Sacramento Kings, and snuggling with her bearded dragon, Chili.

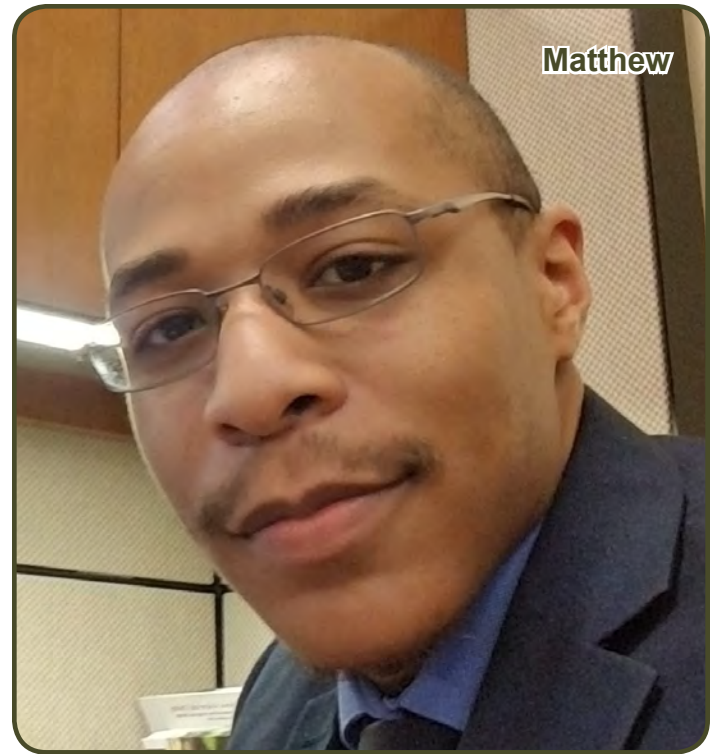
Additionally, please join us in congratulating **Jordan Folster**. She has been promoted within

Mindy



the OA Support Branch to the Staff Services Manager II (Section Chief) position overseeing the Business Operations and Compliance Section.

Jordan has over 9 years of experience as a Human Resources Manager. She is well trained and experienced in providing guidance related to the Family and Medical Leave Act, California Family Rights Act, Pregnancy Disability Leave, Workers' Compensation, Reasonable Accommodations, and more. Her knowledge and experience in human resources, project management, policy and procedure



development, benefits, leave, training, employee development, and payroll administration will be a valuable asset to our team. For the past year she has led the Personnel and Operations Unit in the Support Branch where she has worked with the Personnel Liaisons to facilitate the Request for Personnel Action (RPA) process and responded to inquiries from OA management regarding the hiring process, redirections, position tracking, reorganizations, and other RPA-related processes that pertain to OA's staffing needs in addition to providing direction related to memorandums, policies, and procedures from the Human Resources Division. Jordan has also assisted on multiple special projects and contributed to grant and audit activities.

We'd also like to congratulate **Matthew Brown**. Matthew accepted a promotion as Care Business Unit Chief in the Care Branch's Care Program Section.

Matthew joined the Care Business Unit three years ago as a Fiscal Analyst. He helped innovate many of the tools in the unit such as the budget/expenditure "Master Tracker," providing feedback to help build the new HIV Care

Connect data system, and the personnel salary budget tool to assist our subrecipients build their budgets. Matthew is a Georgia native and spent most of his childhood growing up in Brunswick and Atlanta, Georgia. He attended Delaware State University and received a bachelor's degree in aviation management. He is currently pursuing a master's degree in video game development at the Academy of Art University based in San Francisco. He plans to open his own indie video game company and create Christian video games that teach people about salvation and the good news of Jesus Christ. He is an avid video gamer, he loves reading all types of books from fantasy to leadership development, and he enjoys traveling around the world. He is always down for a new food adventure, and a dream of his is to spend one year living in Japan.

HIV AWARENESS

December 1st marks the 35th commemoration of World AIDS Day, and this year's theme is, "Remember and Commit." It's a time to

remember the early years when illness and death were common, as well as remember the amazing strides that transformed HIV infection to a chronic manageable disease when HIV medications are taken regularly, and the virus is suppressed to undetectable levels. Those living with HIV who are undetectable optimize their health and cannot infect others. Undetectable Equals Untransmittable. Of the 141,001 people living with diagnosed HIV infection in 2021, 73.0% were in HIV care and 64.4% achieved viral suppression. The Ending the HIV Epidemic in the United States goals are to increase linkage to care and viral suppression to 95% by 2025. New infections continue, and as of 2020, more than 14,000 individuals are infected with HIV but unaware of their status. HIV health disparities in California are decreasing but are still present, especially within the Latinx and African American communities. Therefore, we commit to continuing to address the syndemic of HIV, STIs, and HCV by confronting structural and systemic health disparities fueled by racism, homophobia and transphobia, sexism, ableism, xenophobia, social and economic inequality, homelessness, and identity-based discrimination and stigma. OA and the STD Control Branch are guided by an integrated Strategic Plan for California, which was created from extensive community input from people with lived experience, as well as input from state agencies, local health jurisdictions, and healthcare- and community-based organizations. Innovations have increased access to HIV, STI, and HCV screening through home collection kits available for free, telehealth has broadened the ability for people to interact with their health care and other support providers, and the PrEP Assistance Program removes the financial barrier to accessing PrEP. Guided by ongoing community input, the OA is committed to continuing on the path of decreased new infections, increase the percentage of people living with HIV who have sustained viral suppression, and coordinating with other resources to ensure those vulnerable to HIV infection obtain the services and

resources needed to live healthy, dignity-filled lives free of stigma. Therefore, on this World AIDS Day we commit ourselves to working with you to work and eliminate health inequities among those most affected by HIV, HCV, and STIs in California. Co-create the California we want to live in together and we will make our work and continued progress the best way to honor those who we have lost.

– Dr. Marisa Ramos, Chief, State Office of AIDS



➤ World AIDS Day Resources

- Visit the [World AIDS Day webpage](#) to review general resources for World AIDS Day.
- Share the [HIV.gov theme announcement blog](#), which includes remarks from senior domestic and global leadership. Also, watch for the White House World AIDS Day proclamation.
- Watch and share [Harold Phillips' FYI video](#), (Lead of the Office of National AIDS Policy) where he shares why we should pause and reflect on the day's importance.

ENDING THE EPIDEMICS STRATEGIC PLAN OA/STD

Implementation of the **Ending the Epidemics Strategic Plan**, which replaces our *Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan* (Integrated Plan), is continuing.

Thank you to the California Planning Group (CPG) for hosting a discussion about the **Implementation Blueprint**, which is a supporting document to our *Ending the Epidemics Strategic Plan*, at their in-person meeting in November. The CPG and other Planning Councils, Commissions and Groups across California have been integral partners in the review, improvement, and implementation of our *Strategic Plan*.

The *Strategic Plan* has 30 strategies organized over six social determinants of health and our



Implementation Blueprint helps us drill-down into these strategies. Please continue to use and share these two documents.

CDPH has also made technical assistance available to counties that want to customize the *Implementation Blueprint* for their communities.

For technical assistance and more information about our ongoing community engagement, please visit [Facente Consulting's webpage](https://facenteconsulting.com/cdph-technical-assistance-request-portal/) at <https://facenteconsulting.com/cdph-technical-assistance-request-portal/>.

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.

[Mpox digital assets](#) are 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 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

Now that the Emergency Declaration has ended and the COVID-19 response is winding down, we are reinitiating 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!

➤ Ending the HIV Epidemic

The *Ending the HIV Epidemic (EHE) in the US Initiative* counties of Alameda, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco and Los Angeles have all completed another calendar year of work. Thank you for expanding services for HIV testing, PrEP and linkage to HIV medical care to EHE priority populations. [More information about the EHE Initiative.](#)

STRATEGY A

Improve Pre-Exposure Prophylaxis (PrEP) Utilization:

➤ PrEP-Assistance Program (AP)

As of November 29, 2023, there are 217 PrEP-AP enrollment sites and 187 clinical provider sites that currently make up the [PrEP-AP Provider network](#).

[Data on active PrEP-AP clients](#) can be found in the three tables displayed on page 7 of this newsletter.

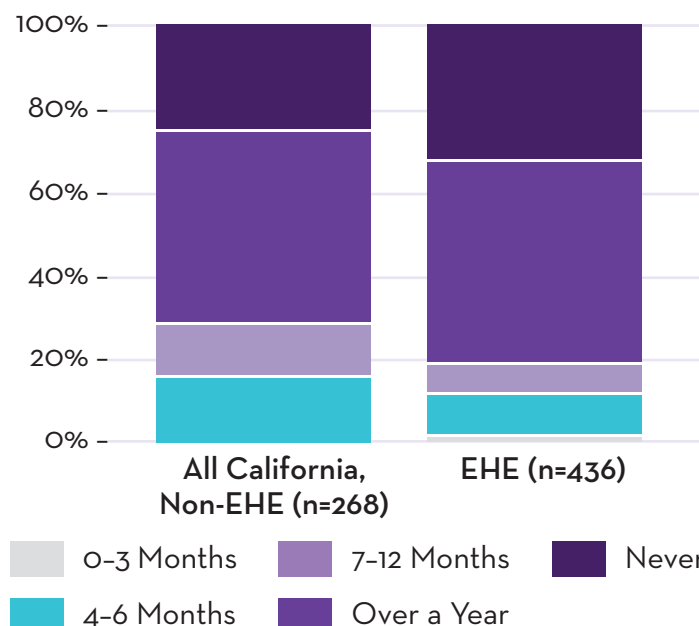
STRATEGY B

Increase and Improve HIV Testing:

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/), (<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 October, 268 individuals in 31 counties ordered self-test kits, with 215 (80.2%) 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 38 months, between September 1, 2020, and October 31, 2023, 7895 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 275 (63.1%) of the 436 total tests distributed in EHE counties.

HIV Test History Among Individuals Who Ordered TakeMeHome Kits, Oct. 2023



STRATEGY F

Improve Overall Quality of HIV-Related Care:

The Clinical Quality Management (CQM) Program is thrilled to announce the release of the [2023 CQM Program presentation](#) on the OA CQM webpage. This comprehensive document outlines the goals and strategies of the CQM program, providing valuable insights into the program's mission to enhance quality care for people living with HIV (PLWH).

STRATEGY J

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

As of November 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 8.

STRATEGY K

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

The Federal Substance Abuse and Mental Health Services Agency (SAMHSA) has a new Housing and Homelessness Resource Center that issues a monthly newsletter with information, upcoming webinars, and more. This month's highlights include [Thinking About Starting a Supportive Housing Program?](#) [Recommendations and Considerations for the Planning Process](#), a resource developed by the National Association of State and Territorial AIDS

(continued on page 8)

Additional Key Characteristics	EHE	All California, Non-EHE
Of those sharing their gender, were cisgender men	48.1%	62.7%
Of those sharing their race or ethnicity, identify as Hispanic or Latinx	37.3%	43.8%
Were 17-29 years old	50.7%	40.7%
Of those sharing their number of sex partners, reported 3 or more in the past year	49.7%	40.7%

Since September 2020, 890 test kit recipients have completed the anonymous follow up survey from EHE counties; there have been 281 responses from the California expansion since January 2023. Highlights from the survey results include:

	EHE	All California, Non-EHE
Would recommend TakeMeHome to a friend	94.5%	94.3%
Identify as a man who has sex with other men	60.7%	61.9%
Reported having been diagnosed with an STI in the past year	8.7%	9.6%

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	390	11%	---	---	---	---	36	1%	426	12%
25 - 34	1,261	34%	1	0%	1	0%	204	6%	1,467	40%
35 - 44	889	24%	---	---	3	0%	157	4%	1,049	28%
45 - 64	388	11%	1	0%	19	1%	100	3%	508	14%
65+	22	1%	---	---	201	5%	8	0%	231	6%
TOTAL	2,950	80%	2	0%	224	6%	505	14%	3,681	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	235	6%	---	---	44	1%	21	1%	3	0%	78	2%	2	0%	43	1%	426	12%
25 - 34	877	24%	1	0%	129	4%	88	2%	9	0%	276	7%	10	0%	77	2%	1,467	40%
35 - 44	634	17%	4	0%	99	3%	43	1%	4	0%	208	6%	9	0%	48	1%	1,049	28%
45 - 64	291	8%	---	---	43	1%	19	1%	2	0%	131	4%	2	0%	20	1%	508	14%
65+	20	1%	---	---	3	0%	3	0%	---	---	198	5%	---	---	7	0%	231	6%
TOTAL	2,057	56%	5	0%	318	9%	174	5%	18	0%	891	24%	23	1%	195	5%	3,681	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	71	2%	---	---	6	0%	10	0%	1	0%	20	1%	---	---	6	0%	114	3%
Male	1,788	49%	4	0%	291	8%	157	4%	17	0%	844	23%	23	1%	170	5%	3,294	89%
Trans	172	5%	---	---	17	0%	6	0%	---	---	14	0%	---	---	7	0%	216	6%
Unknown	26	1%	1	0%	4	0%	1	0%	---	---	13	0%	---	---	12	0%	57	2%
TOTAL	2,057	56%	5	0%	318	9%	174	5%	18	0%	891	24%	23	1%	195	5%	3,681	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: 11/30/2023 at 12:02:18 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 October
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	501	+ 0.02%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,240	- 0.26%
Medicare Part D Premium Payment (MDPP) Program	2,074	+ 1.02%
Total	7,815	+ 0.10%

Source: ADAP Enrollment System

Directors (NASTAD) along with other partners and informed by conversations with current housing and harm reduction service providers.

[Sign up for the Housing and Homelessness Resource Center newsletter.](#)

STRATEGY N

Enhance Collaborations and Community Involvement:

➤ California Planning Group (CPG)

The Fall In-Person CPG Meeting was held in Sacramento from November 13 – 15, 2023. The theme of the meeting was *Adapting to a Changing Landscape - Advocacy in Community Engagement, Organization and Mobilization*. We want to thank all CPG members and community members for their attendance, active participation and engagement, personal perspectives, and help in creating a safe space for sharing and listening. We also want to thank all Steering Committee members who helped to plan the meeting, support the CPG members, and helped with setting up, running mics, cleaning up, and so much more. Also, much appreciation to the OA and STD Control

Branch Committee Liaisons who continuously support CPG members throughout the monthly committee meetings leading up to and during this event. Without you all, this would not have been possible. We hope you found the meeting informative to our CPG and collective work.

Huge thank you to our facilitator, Eileen Jacobowitz, for her always stellar facilitation and OA Division Chief, Dr. Marisa Ramos, for taking time out of her busy schedule to attend and provide her candid open forum updates. Also, thank you to the OA and STD Control Branch Management Teams for attending the meeting and supporting CPG members. We also want to express a huge thanks to Community Co-Chairs Rafael Gonzalez and Yara Tapia for their ongoing work and support in helping to plan for this meeting. Additionally, a huge thank you to Kevin Ramos and Janet Scott from the CDC for their attendance and participation. And finally, a huge thank you to Rachel Kallett and CSUS for taking care of all our travel and hotel logistics!

Meeting Highlights

During this meeting, Tai Edward Few from the Denver Prevention Training Center hosted our fifth skills and capacity building CPG Leadership Academy on **Day 1**. The Academy was focused



on *Using Racial Equity and Anti-Racist Practices to Advance Community Advocacy*.

On **Day 2** we had presentations by Jax Kelly, President of Let's Kick ASS Palm Springs, with his impactful presentation on the *BEAM Wellness Grant*, and Kevin Sitter, who presented on *The Vital Role of People with Lived Experience in Ending the Syndemic of HIV, HCV, and STIs*.

On **Day 3** we held our first ever Planning Council Roundtable where each nominated member from local planning councils shared their personal work in their respective planning bodies. We also had Pike Long of the OA Harm Reduction Unit

and Ale Del Pinal, Program Director, and Luka Zies with Punks with Lunch present on Harm Reduction in California and Punks with Lunch, Oakland. We thank them all for sharing their time, efforts, and expertise with CPG.

Overall, it was a successful and engaging meeting. We look forward to the next in-person meeting in Southern California in the Spring of 2024!

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