

- Updates
- Health Access for All
- Strategic Plan
- Racial Equity

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

COMMUNITY PARTNER SPOTLIGHT

On **Sunday, June 15th**, OA, the Sexually Transmitted Diseases Control Branch (STDCB), their families, and friends proudly participated in the **Sacramento Pride March** for the second year running. The contingent marched alongside many other participants with creatively-decorated floats, while music and dancing assured a fun and successful event.

The annual Pride March is a means of activism through demonstration, celebrating the progress made in the fight for justice, equity, and inclusion.

In the current climate, OA/STDCB wanted to demonstrate their commitment to the LGBTQ+ Community and confirm their continued pursuit of health equity for all.

The Pride March also provided a wonderful opportunity to conduct HIV/STI prevention outreach. Condoms, packets of lube, and stickers for free mpox and HIV home-testing kits were handed out to adults, and Pride flags, stickers, and beads were given to kids. Lastly, participation in the Pride March provided an opportunity to interact, educate, and foster community relationships.

OA/STDCB took pride in celebrating this year and look forward to participating in the years to come!



OA/STDCB - Sacramento Pride

GENERAL UPDATES

➤ Centers for Disease Control and Prevention (CDC) Funding for PS24-0047

We are pleased to announce that the Year 2 Notice of Award for the High-Impact Prevention and Surveillance Programs for Health Departments Grant (PS24-0047) has been released. Thank you so much for your patience and continued dedication! We will be drafting award letters to each of our funded jurisdictions and hope to get those out to you all as soon as possible. We would like to note that the award period is now **June 1, 2025, through May 31, 2026**.

➤ California Planning Group (CPG) – Spring 2025 Meeting Recap

The CPG and OA hosted the Spring In-Person CPG Meeting from May 28–30. The meeting's theme was *Rooted in Resilience: Turning Challenges into Collective Action*.

On May 28, OA hosted a two-part CPG Leadership Academy skills and capacity building day, which focused on navigating change during uncertain and ever-changing times. The first session was a training presentation which included an interactive activity that allowed members to embrace concerns that are in their span of control and influence and recognize the concerns that are not. It also included a grounding activity that connected CPG members through their origin stories and was followed by an artistic activity. Additional presentations focused on cluster detection and response by Brett AugsJoost; Jaylen Hibbert and Jeremiah Givens from REACH LA on social media campaigns and strategies for navigating uncertain times; Dr. Philip Peters about research updates on long acting injectables for treatment and prevention; and Herlyne Das on *The Use of Antidepressants in People Living with HIV Before vs After COVID*.

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 learning. Thank you to Community Co-Chairs John Paul Soto and Yara Tapia as well as the CPG Host Committee for their work in planning, hosting, and facilitating the meeting!

➤ 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.

Digital assets continue to be available for LHJs and CBOs on DCDC's [Campaign Toolkits](#) website.

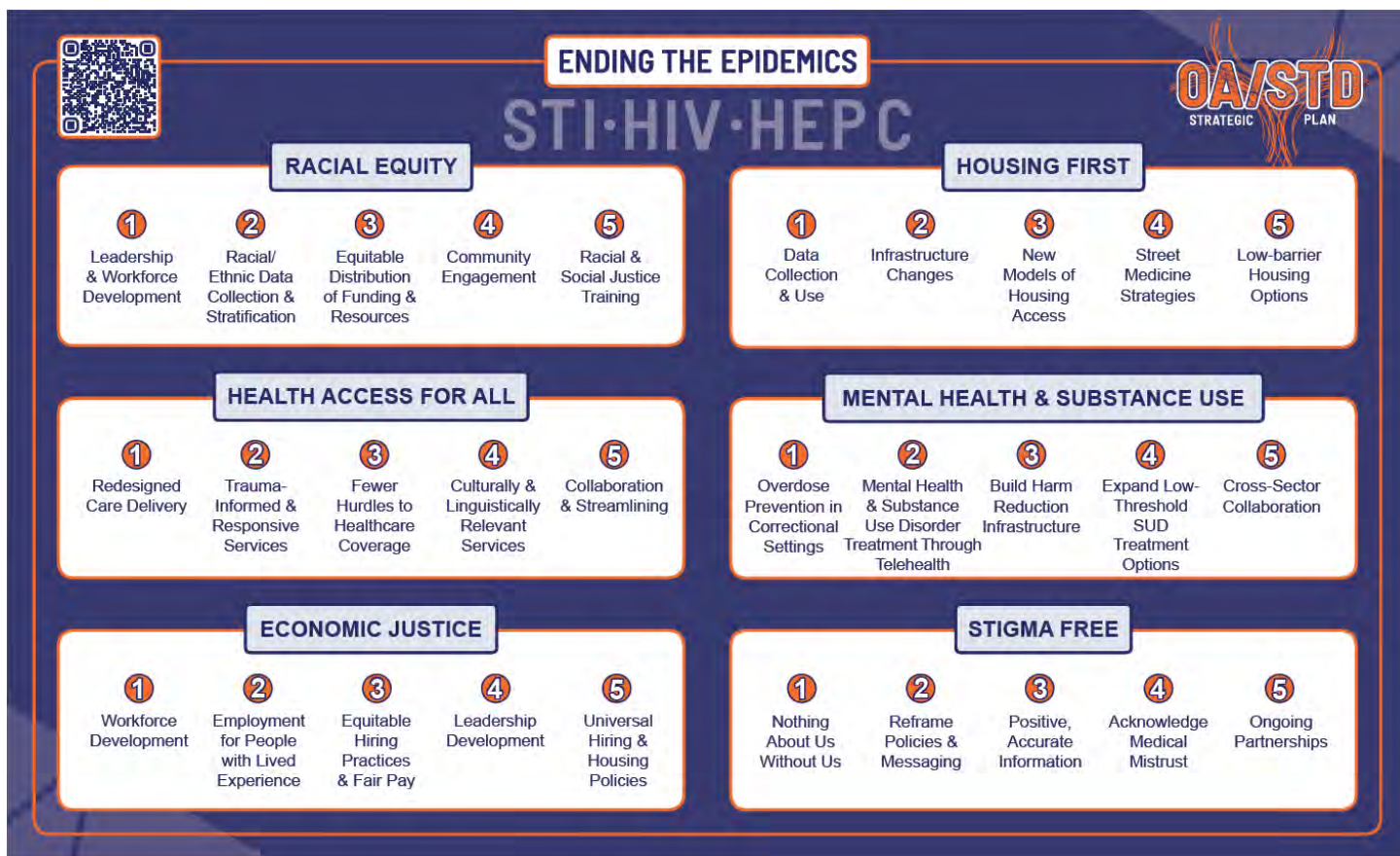
➤ HIV/STI/HCV Integration

We continue to move 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 as new information comes in.

ENDING THE EPIDEMICS STRATEGIC PLAN OA/STD

The [visual at the top of the next page](#) is a high-level summary of our *Strategic Plan* that organizes 30 Strategies across six Social Determinants of Health (SDoH).

OA and STD Control Branch would like you to continue to use and share the [Strategic Plan](#) and the [Implementation Blueprint](#). 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 visit [Facente Consulting's webpage](#).

HEALTH ACCESS FOR ALL

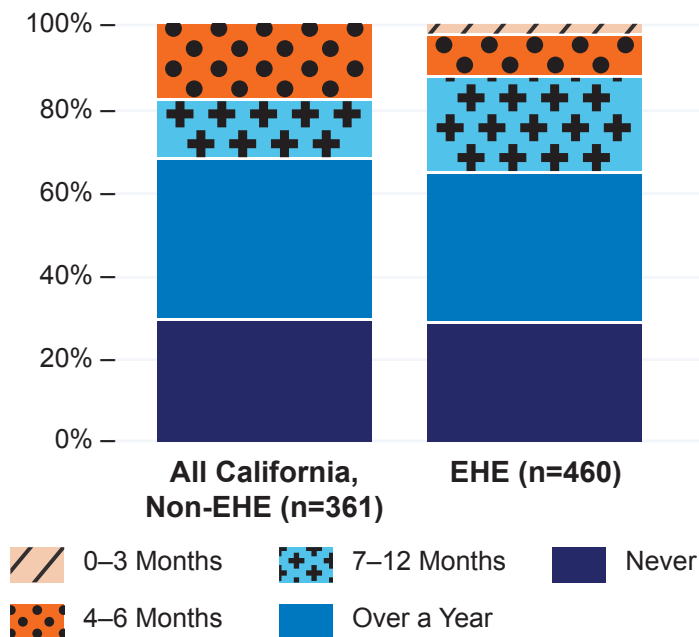
➤ Strategy 1: Redesigned Care Delivery

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**, is advertised on gay dating apps, where users see an ad for home testing and are offered a free HIV-home test kit.

In May, 361 individuals in 36 counties ordered self-test kits, with 255 (70.6%) individuals ordering 2 tests. Additionally, OA's existing

TAKEMEHOME

HIV Test History Among Individuals Who Ordered TakeMeHome Kits, May 2025



TakeMeHome Program continues in the six California Consortium Phase I Ending the HIV Epidemic in America counties. Between the program's initiation in September 1, 2020, and May 31, 2025, 17,600 tests have been distributed. This month, mail-in lab tests (including dried blood spot tests for syphilis, and Hepatitis C, as well as 3-site tests for gonorrhea and chlamydia) accounted for 127 (27.6%) of the 460 total tests distributed in EHE counties. Of those ordering rapid tests, 256 (76.9%) ordered 2 tests.

Additional Key Characteristics	EHE	All California, Non-EHE
Of those sharing their gender, were cisgender men	53.1%	52.7%
Of those sharing their race or ethnicity, identify as Hispanic or Latinx	32.5%	40.7%
Were 17-29 years old	40.9%	42.4%
Of those sharing their number of sex partners, reported 3 or more in the past year	40.0%	41.6%

Survey Highlights	EHE	All California, Non-EHE
Would recommend TakeMeHome to a friend	94.6%	94.5%
Identify as a man who has sex with other men	47.9%	52.0%
Reported having been diagnosed with an STI in the past year	8.4%	9.7%

Since September 2020, 1,936 test kit recipients have completed the anonymous follow up survey from EHE counties; there have been 832 responses from the California expansion since January 2023.

➤ Strategy 1: Redesigned Care Delivery

Request for Applications (RFA) Announcements:

HIV PrEP and PEP Navigator Projects, RFA #25-10048

OA will award grants in the amount of \$1.76 million annually in local assistance funds to fund the development of six demonstration projects focused on establishing, integrating, and strengthening PrEP and PEP navigation services within the funded agency and making low-barrier PrEP and PEP available to specified priority populations. Each award will be \$290,000 annually, and award allocations will be distributed over three years. Eligible applicants were required to demonstrate the capacity to fulfill the program and administrative requirements outlined in this RFA and included: 1) any local health department (LHD) in California, and 2) any community-based organization (CBO) located within any local health jurisdiction (LHJ) in California.

After evaluating the applications that were submitted, OA has selected and hereby intends to award grants to the following applicants:

- AltaMed Health Services Corporation
- Central Valley Gender Health & Wellness
- St. John's Community Health
- Asian American Drug Abuse Program
- Mercy Health
- WestCare California, Inc.

For more information, please visit our [RFA #25-10048 webpage](#).

Rapid Antiretroviral Therapy (ART) Projects, RFA #25-10047

OA will award grants in the amount of \$2 million annually in local assistance funds to fund the development of up to four innovative, stigma-free, culturally and linguistically competent, evidence-based demonstration projects that will deliver rapid ART to people living with HIV. Each award will be \$500k annually and award allocations will be distributed over two years. Eligible entities include organizations that have the capacity to fulfill the program and administrative requirements outlined in this RFA, and include: 1) any LHD in California, and 2) CBO located within any LHJ in California. County-owned or affiliated system emergency departments were also eligible to apply.

After evaluating the applications that were submitted, OA has selected and hereby intends to award grants to the following applicants:

- DAP Health
- City of Long Beach DHHS
- TruEvolution
- Stanislaus County Health Services Agency

For more information, please visit our [RFA #25-10047 webpage](#).

➤ Strategy 1: Redesigned Care Delivery

The highly anticipated **Lenacapavir brand name Yeztugo, a long-acting injectable medication, has received FDA approval for use as PrEP.**

This groundbreaking development represents a significant advancement in our ongoing efforts to end the epidemic, aligning with the Ending the Epidemics Integrated Strategic Plan. Yeztugo notably addresses several social determinants of health and aligns with our strategic goals, providing a new and effective option for HIV prevention. Yeztugo offers several benefits:

- **Long-acting protection:** With just two injections per year, Yeztugo provides

continuous protection against HIV, making it a convenient option for individuals who may struggle with daily pill regimens.

- **Improved adherence:** The long-acting nature of Yeztugo reduces the burden of daily medication, potentially improving adherence and overall effectiveness.
- **Enhanced accessibility:** By reducing the frequency of dosing, Yeztugo may be more accessible to individuals with limited access to healthcare services.

The timeline for Yeztugo's rollout is as follows:

- **FDA approval:** June 19, 2025.
- **Initial availability:** Following FDA approval, Yeztugo will be made available to healthcare providers and patients.
- **Wider distribution:** Over the next few months, efforts will be made to ensure Yeztugo is widely accessible to those in need.

This new option for HIV prevention is a significant step forward in our mission to end the epidemic and improve the health and well-being of our communities.

For more information on Yeztugo, check out the [Yeztugo Patient Brochure](#) and Gilead's [Advancing Access Patient Support Program](#).

➤ Strategy 3: Fewer Hurdles to Healthcare Coverage

As of June 30, 2025, there are 288 PrEP-AP enrollment sites and 231 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 the next page of this newsletter.

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	308	11%	---	---	---	---	9	0%	317	11%
25 - 34	984	35%	---	---	---	---	128	4%	1,112	39%
35 - 44	692	24%	---	---	2	0%	109	4%	803	28%
45 - 64	384	13%	1	0%	5	0%	84	3%	474	17%
65+	31	1%	---	---	109	4%	5	0%	145	5%
TOTAL	2,399	84%	1	0%	116	4%	335	12%	2,851	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	173	6%	3	0%	42	1%	23	1%	1	0%	38	1%	4	0%	33	1%	317	11%
25 - 34	615	22%	3	0%	99	3%	87	3%	5	0%	224	8%	6	0%	73	3%	1,112	39%
35 - 44	473	17%	4	0%	68	2%	49	2%	2	0%	162	6%	7	0%	38	1%	803	28%
45 - 64	253	9%	---	---	34	1%	13	0%	1	0%	125	4%	1	0%	47	2%	474	17%
65+	13	0%	---	---	5	0%	5	0%	---	---	114	4%	---	---	8	0%	145	5%
TOTAL	1,527	54%	10	0%	248	9%	177	6%	9	0%	663	23%	18	1%	199	7%	2,851	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	54	2%	---	---	4	0%	13	0%	1	0%	6	0%	---	---	10	0%	88	3%
Male	1,397	49%	9	0%	223	8%	161	6%	7	0%	636	22%	17	1%	172	6%	2,622	92%
Trans	63	2%	---	---	16	1%	1	0%	1	0%	11	0%	1	0%	2	0%	95	3%
Unknown	13	0%	1	0%	5	0%	2	0%	---	---	10	0%	---	---	15	1%	46	2%
TOTAL	1,527	54%	10	0%	248	9%	177	6%	9	0%	663	23%	18	1%	199	7%	2,851	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: 06/30/2025 at 12:00:52 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 May
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	574	-3.37%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,744	-2.23%
Medicare Premium Payment Program (MPPP)	2,299	0.09%
Total	8,617	-1.70%

Source: ADAP Enrollment System

As of June 30, 2025, the number of ADAP clients enrolled in each respective ADAP Insurance Assistance Program are **shown in the table above**.

RACIAL EQUITY

➤ Strategy 4: Community Engagement

Announcement: Annual Ending the Syndemic Symposium

Dear Ending the Syndemics Partners,

Please save the dates below for the virtual *Ending the Syndemic Symposium 2025 Annual Meeting*.

- September 23rd, from 12:00 – 4:00 PM
- September 24th, from 9:00 AM – 1:00 PM
- September 25th, from 12:00 – 4:00 PM

The *Ending the Syndemic Symposium* is sponsored by CDPH/OA and will offer an opportunity for California Counties and their funded Community Programs to share best practices and innovations in serving the communities most impacted by HIV, HCV, and STIs.

More information on the meeting will be provided next month.

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