

- Awareness
- Updates
- Strategic Plan
- Health Access for All
- Mental Health & Substance Use
- 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](#).

STAFF HIGHLIGHT

➤ Hillary Chiginsky Garcia

OA is pleased to congratulate **Hillary Chiginsky Garcia** on her promotion to Staff Services Manager I in the Special Programs Section in the HIV Care Branch! As the Care Housing Unit Chief, Hillary will oversee the Housing Opportunities for Persons with AIDS (HOPWA) Program.

Hillary has been with OA for the past several years as a Health Program Specialist I in the Care Program Section, working on numerous projects involving policy development, and serving as an OA representative on various stakeholder groups, including the California Planning Group and the Oakland Transitional Grant Area Planning Council.

Prior to joining OA, Hillary completed her bachelor's degree at Sacramento State, worked for over three years as a vendor consultant in CDPH's Women, Infants, and Children Program and for two years in the Department of Health Care Service's Third-Party Liability and Recovery Division.

➤ Maria Contreras

OA is pleased to welcome **Maria Contreras** to OA! Maria is the new HIV Policy Specialist in



the Special Programs Section within the HIV Care Branch. She will be working in the Medi-Cal Waiver Program (MCWP), leading policy development and ensuring compliance is met for two major Centers for Medicare and Medicaid Services (CMS) MCWP projects including the Home- and Community-Based Services (HCBS) Access Final Rule (AFR) and California Electronic Visit Verification (CalEVV).

Maria comes to us from CDPH's Office of School Health in the Center for Healthy Communities,



Maria

where she served as a Communication Specialist focusing on implementing youth voice and input to create campaigns and awareness for issues such as fentanyl, mental health, and STIs.

Prior to joining CDPH, Maria earned her Bachelor of Science degree with an emphasis in Public Health from San Diego State University and a Master of Public Health with a specialization in Health Promotion. She also has extensive experience developing, implementing, and assessing health promotion efforts, and leading dynamic workshops involving culturally diverse populations.

➤ **Rebekah Hughes**

We are pleased to announce **Rebekah Hughes** has accepted a promotion to Research Scientist III in the Care Evaluation and Monitoring (CEM) in ADAP and Care Evaluation and Informatics Branch (ACEI) Branch. As the senior research scientist in our section, she will work on supporting the new HIV Care Connect (HCC)



Rebekah

system, improving HCC and Tableau reporting database, as well as federal reports and program evaluations.

Rebekah started her career with CDPH as a Research Scientist I in OA's SuPER branch working on various projects involving surveillance data and data sharing, then as an RSII as the data manager of the California Medical Monitoring Project. Prior to working at OA, Rebekah received an MPH in Epidemiology from Columbia University, where she worked on studies aimed at curbing the HIV/AIDS epidemic in the Democratic Republic of the Congo and completed a project focused on gaining an understanding of the effect the COVID-19 pandemic had on the mental health and wellbeing of healthcare providers in the New York City area.

Outside of work, Rebekah enjoys getting outdoors for hiking. She also enjoys reading, knitting, yoga, and baking.

Rebekah is excited for the opportunity to work in the ACEI Branch, and we are very excited to

have her join CEM as well. Congratulations on your promotion, Rebekah!

HIV AWARENESS

August 31 is International Overdose Awareness Day (OAD). This day is observed to honor lives lost to overdose and help reduce the stigma associated with drug-related death. OAD is also recognized to inform people about overdose prevention, support services and resources available, and bring awareness that overdose death is preventable.

Naloxone is a life-saving medication used to reverse an opioid overdose, including heroin, fentanyl, and prescription opioid medications. It can be given through nasal spray (Narcan) or through auto-injector into the outer thigh. Those at risk for opioid overdose to include those taking a high-dose opioid medication, should carry naloxone.

Through overdose awareness, education, and resources, countless lives can be saved. Naloxone or other harm reduction resources can be found at the [National Harm Reduction Coalition website](#).

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.

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.

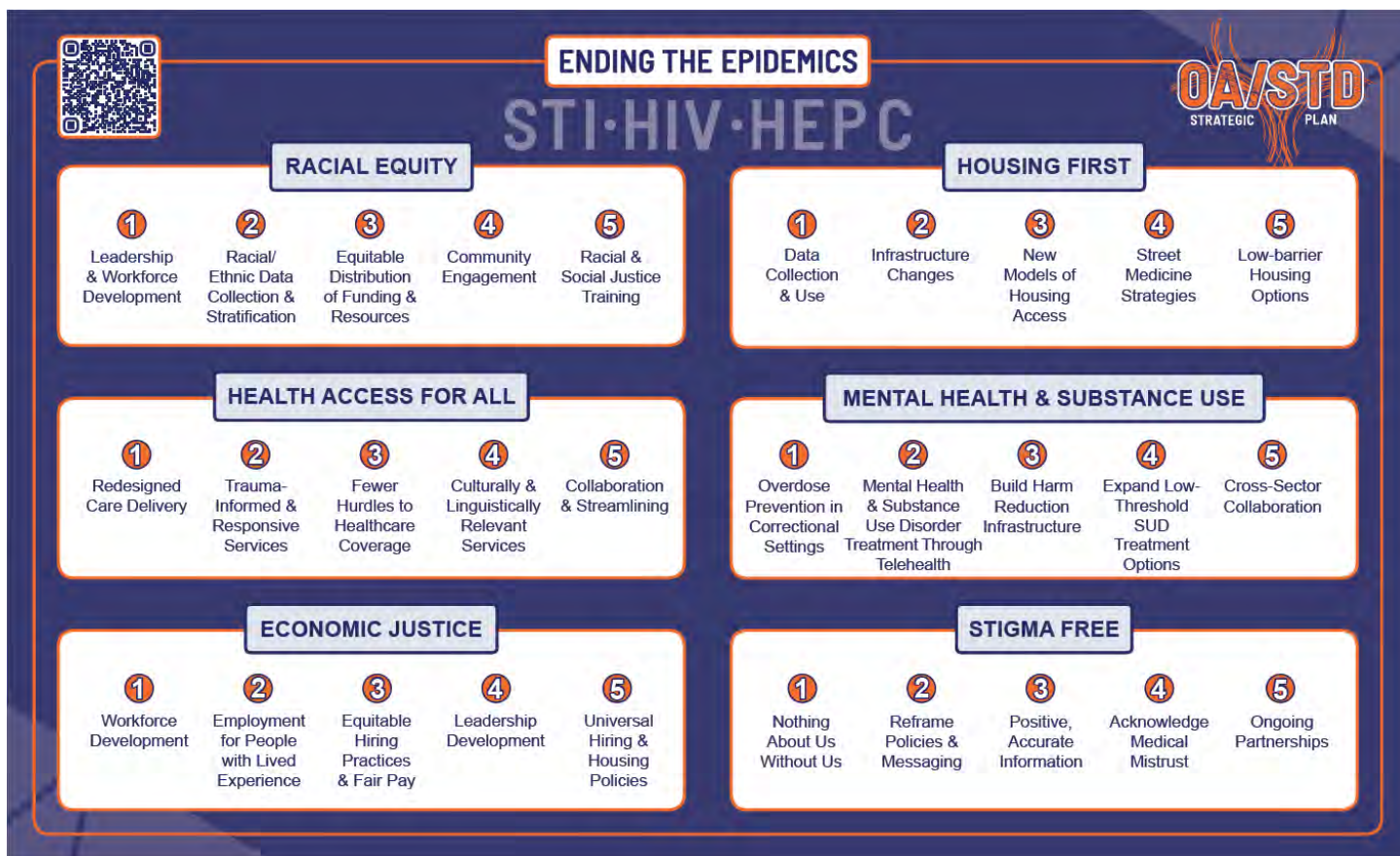
For technical assistance in implementing the *Strategic Plan*, California LHJs and CBOs can visit [Facente Consulting's webpage](#).

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.

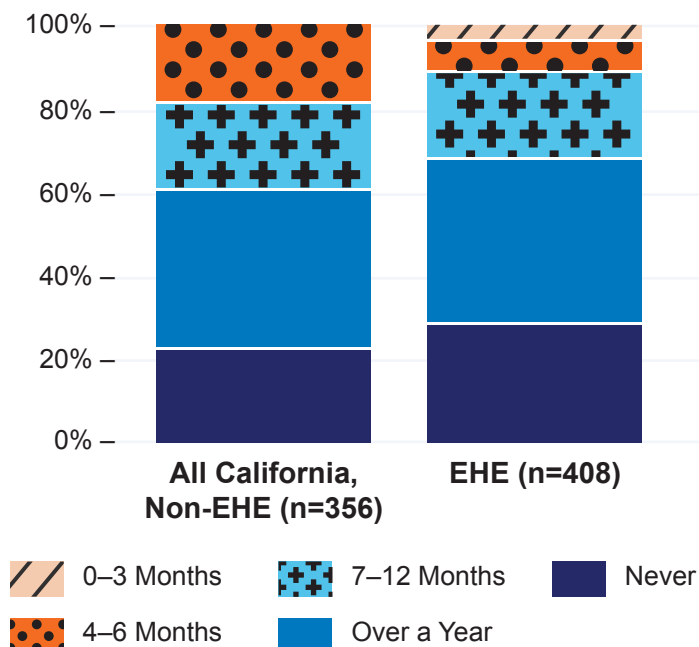
In June, 356 individuals in 35 counties ordered self-test kits, with 249 (69.9%) individuals



ordering 2 tests. Additionally, OA's existing TakeMeHome Program continues in the six California Consortium Phase I Ending the HIV Epidemic in America counties. Between the program's initiation in September 1, 2020, and June 30, 2025, 18,008 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 145 (36.5%) of the 408 total tests distributed in EHE counties. Of those ordering rapid tests, 206 (79.5%) ordered 2 tests.

Additional key characteristics of individuals ordering TakeMeHome kits are outlined in the table on the following page.

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



Additional Key Characteristics	EHE	All California, Non-EHE
Of those sharing their gender, were cisgender men	56.7%	43.2%
Of those sharing their race or ethnicity, identify as Hispanic or Latinx	38.7%	36.3%
Were 17-29 years old	38.0%	39.0%
Of those sharing their number of sex partners, reported 3 or more in the past year	41.6%	37.1%

Since September 2020, 1,983 test kit recipients have completed the anonymous follow up survey from EHE counties; there have been 861 responses from the California expansion since January 2023.

Survey Highlights	EHE	All California, Non-EHE
Would recommend TakeMeHome to a friend	94.8%	94.5%
Identify as a man who has sex with other men	47.4%	51.5%
Reported having been diagnosed with an STI in the past year	8.3%	9.8%

➤ Strategy 3: Fewer Hurdles to Healthcare Coverage

As of July 31, 2025, there are 294 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.

As of July 31, 2025, the number of ADAP clients enrolled in each respective ADAP Insurance Assistance Program are shown in the [table at the top of page 7](#).

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 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 syringe services programs (SSPs) through June 2027.

(continued on page 7)

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	304	11%	---	---	---	---	11	0%	315	11%
25 - 34	943	34%	---	---	1	0%	136	5%	1,080	39%
35 - 44	686	24%	---	---	2	0%	109	4%	797	28%
45 - 64	379	14%	1	0%	5	0%	86	3%	471	17%
65+	31	1%	---	---	99	4%	8	0%	138	5%
TOTAL	2,343	84%	1	0%	107	4%	350	12%	2,801	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	172	6%	3	0%	42	1%	22	1%	1	0%	39	1%	4	0%	32	1%	315	11%
25 - 34	598	21%	2	0%	97	3%	88	3%	4	0%	213	8%	8	0%	70	2%	1,080	39%
35 - 44	469	17%	5	0%	64	2%	48	2%	2	0%	158	6%	7	0%	44	2%	797	28%
45 - 64	255	9%	---	---	32	1%	15	1%	1	0%	124	4%	1	0%	43	2%	471	17%
65+	12	0%	---	---	5	0%	5	0%	---	---	108	4%	---	---	8	0%	138	5%
TOTAL	1,506	54%	10	0%	240	9%	178	6%	8	0%	642	23%	20	1%	197	7%	2,801	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	40	1%	---	---	2	0%	14	0%	1	0%	8	0%	---	---	11	0%	76	3%
Male	1,393	50%	9	0%	221	8%	161	6%	6	0%	613	22%	19	1%	165	6%	2,587	92%
Trans	62	2%	---	---	13	0%	1	0%	1	0%	10	0%	1	0%	2	0%	90	3%
Unknown	11	0%	1	0%	4	0%	2	0%	---	---	11	0%	---	---	19	1%	48	2%
TOTAL	1,506	54%	10	0%	240	9%	178	6%	8	0%	642	23%	20	1%	197	7%	2,801	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: 07/31/2025 at 12:02:01 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 June
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	583	1.57%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,799	0.96%
Medicare Premium Payment Program (MPPP)	2,321	0.96%
Total	8,703	1.00%

Source: ADAP Enrollment System

The Center at Sierra Health is the fiscal agent for this grantmaking process and has funded 55 SSPs to date through two rounds of funding.

Last month, [The Center released an RFA](#) for a third round of funding with applications due August 8. Authorized SSPs not previously funded through CPHRI are encouraged to apply. This round prioritizes programs located in counties that are not currently funded, organizations that serve BIPOC communities, and whose service delivery aligns with CDPH/OA SSP guidelines and current best practices.

To get [more information about the third round of funding](#), you can e-mail harmreduction@sierrahealth.org.

Webinar: Saving Lives Where They've Lived: Street Medicine & Overdose Prevention in Action

In the past several years, more street medicine outreach teams have formed to bring healthcare directly to the client and out of the clinic. This strategy is effective as it connects with people who may be leery or distrusting of a traditional clinical setting. Street medicine teams have also found this type of outreach to be an effective way to prevent overdose, by offering harm reduction services like naloxone distribution and syringe services to clients.

The Public Health Institute's Center for Health Leadership and Impact is hosting a webinar on the intersection of street medicine and harm reduction on August 26. Attendees will learn strategies taking place across California that are grounded in trust, peer engagement, and direct outreach to people who use drugs. Speakers will showcase community-driven care models and how they build connections beyond traditional settings, including mobile outreach vans that reach people living in encampments, overdose response teams that connect people to treatment, and naloxone distribution during the annual point-in-time survey of people experiencing homelessness.

[Register for the Zoom Webinar.](#)

RACIAL EQUITY

➤ Strategy 5: Racial and Social Justice Training

The CDC offers free capacity building assistance (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

prevention 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! To [submit a CBA request](#), please

contact the Local Capacity Building and Program Development Unit at CBA@cdph.ca.gov.

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