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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

➤ **The Medical Monitoring Lazarus Project**

In 2004, the **Medical Monitoring Project (MMP)** started as a facility-based sampling-based survey of people living with HIV (PLWHIV) in 28 sites nationwide. The data has been invaluable in determining where limiting HIV funding should go. In 2015, MMP switched to a randomized sampling methodology to include PLWHIV who were out of care, not linked to any facility. After 21 years, the current administration cut federal funding to many HIV prevention programs disrupting over two decades of data collection, MMP included.

On April 1, 2025 (April Fool’s Day) MMP was eliminated – it was not a joke. The Centers for Disease Control and Prevention (CDC) staff received reduction-in-force notices, were placed on administrative leave, and were unable to communicate with the project areas, including OA. The MMP sites continued to collect data independent of federal guidance until funding was discontinued in June 2025.

MMP’s funding eventually returned, however contract staff were let go or redirected, and a year of data collection was lost. Today, MMP is funded -- but not functional. As a result of court case reversals, we are happy to share, last month OA received a new sample for the 2026 cycle starting June 1, 2026. MMP is officially back! Hence the “Lazarus Project” reference.



Onika



Tony



MMP



Nabeeh

The loss of staffing and institutional knowledge has posed many challenges compared to prior cycles. Currently, CDC is 50% staffed after losing its team. OA has managed to retain 3 of our original staff, the Project Investigator, Nabeeh Hasan, the Project Coordinator, Onika Chambers, and the lead Data Collector, Tony Gonzales.

We will be using redirected staff to complete the team. We are happy to be back in action in service to our communities, and we will be reaching out to all our external and internal partners soon!

COMMUNITY PARTNER SPOTLIGHT

➤ HIV & Women/VIH y Mujeres Infographic

OA, in collaboration with the **Women's Subcommittee of the California Planning Group (CPG)**, has released an updated HIV and Women Infographic, in both [English](#) and [Spanish](#). This resource highlights 2023 data on new HIV diagnoses among cisgender and trans women, and includes important information on PrEP and U=U.

Designed for use by local health departments and community-based organizations, the infographic is a valuable tool for education and awareness. We encourage community partners to help share this resource by posting it on social media, displaying it in waiting or exam rooms, incorporating it into support groups or provider training, or using it during routine HIV testing efforts.

HIV AWARENESS

➤ National Youth HIV/AIDS Awareness Day

April 10 is National Youth HIV/AIDS Awareness Day (NYHAAD). This day is observed annually to highlight the impact of HIV on young people. HIV stigma continues to discourage young people from getting testing, this day highlights HIV prevention, treatment and education. It is important to educate young people of the various testing and prevention methods available. Knowledge will help develop and maintain healthy sexual practices and help end the epidemic of HIV.

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

➤ National Transgender HIV Testing Day

April 18th is National Transgender HIV Testing Day (NTHTD). NTHTD is observed to highlight the importance of HIV testing, prevention, and treatment among transgender and non-binary communities. This year, the focus is on providing tailored affirming healthcare to improve health outcomes. Transgender people, especially trans women of color, face disproportionately high rates of HIV due to significant barriers to culturally competent affirming healthcare.

CDPH is committed to ensuring its Transgender and non-binary people have access to information, prevention, and treatment services. For more information, please visit our [OA Transgender Community Health in California webpage](#).

➤ National Fentanyl Awareness Day

April 29th is National Fentanyl Awareness Day. This day aims to raise awareness about the dangers of illicitly manufactured fentanyl and counterfeit pills. Nearly half of U.S. teenagers are unaware that fake prescription pills sold on the street and via social media platforms, are made with fentanyl.

National Fentanyl Awareness Day is about spreading awareness about the dangers of Fentanyl and educating young people about naloxone (Narcan) and how to use it to reverse overdoses. Song for Charlie (SFC), a national family-led nonprofit, encourages young people to choose healthy coping mechanisms in lieu of self-medication. SFC offers the film *Real Talk About Fake Pills*, a valuable resource for educators and peer groups, featuring real stories and insights to encourage dialogue about safety and prevention.

For more information and resources about Fentanyl awareness, please visit the [National Fentanyl Awareness Day webpage](#).

GENERAL UPDATES

➤ Mpox

OA continues its commitment 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.

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

Also, please refer to the [DCDC website](#) to stay informed of mpox updates.

➤ OA's HIV Laws Webpage

We wanted to mention again that OA has updated its [HIV Laws webpage](#) in an effort to improve awareness of important legislative information relating to HIV. This page contains organized links to state laws and regulations, as well as associated fact sheets and letters, all relating to OA's programs on HIV prevention, treatment, care, surveillance, and harm reduction. OA will continue to update this webpage with new links and resources in-line with the passage of new legislative bills.

➤ HIV/STI/HCV Integration

On October 16, 2025, the position announcement for the new Chief of the Division of HIV, HCV, and STIs was released with a final closing date of November 15, 2025. This position can be based out of Sacramento or Contra Costa Counties. Both MDs and PhDs with relevant experience were encouraged to apply.

We anticipate you won't see many immediate changes or impacts to existing contracts/ grants or points of contacts from this first step and that more changes will unfold as planning continues.

As we begin planning for further integration, we will rely on the expertise of our teams to inform the direction and pace of our changes and also see opportunities for our many partners to weigh-in on the integration of our teams as well.

We are excited for the accomplishment of this huge milestone and are committed to continuing to align our services in a coordinated syndemic manner to better serve individuals at risk of acquiring HIV, STIs, and HCV.

As always, we will continue to keep you apprised on our journey as we move forward and more information develops.

ENDING THE EPIDEMICS STRATEGIC PLAN OA/OSH

The [visual at the top of page 4](#) is a high-level summary of our *Strategic Plan* that organizes 30 Strategies across six Social Determinants of Health.

OA and OSH 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 Social Determinants of Health 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

ENDING THE EPIDEMICS
STI·HIV·HEPC

OA/OSH
STRATEGIC PLAN

RACIAL EQUITY

- 1 Leadership & Workforce Development
- 2 Racial/Ethnic Data Collection & Stratification
- 3 Equitable Distribution of Funding & Resources
- 4 Community Engagement
- 5 Racial & Social Justice Training

HOUSING FIRST

- 1 Data Collection & Use
- 2 Infrastructure Changes
- 3 New Models of Housing Access
- 4 Street Medicine Strategies
- 5 Low-barrier Housing Options

HEALTH ACCESS FOR ALL

- 1 Redesigned Care Delivery
- 2 Trauma-Informed & Responsive Services
- 3 Fewer Hurdles to Healthcare Coverage
- 4 Culturally & Linguistically Relevant Services
- 5 Collaboration & Streamlining

MENTAL HEALTH & SUBSTANCE USE

- 1 Overdose Prevention in Correctional Settings
- 2 Mental Health & Substance Use Disorder Treatment Through Telehealth
- 3 Build Harm Reduction Infrastructure
- 4 Expand Low-Threshold SUD Treatment Options
- 5 Cross-Sector Collaboration

ECONOMIC JUSTICE

- 1 Workforce Development
- 2 Employment for People with Lived Experience
- 3 Equitable Hiring Practices & Fair Pay
- 4 Leadership Development
- 5 Universal Hiring & Housing Policies

STIGMA FREE

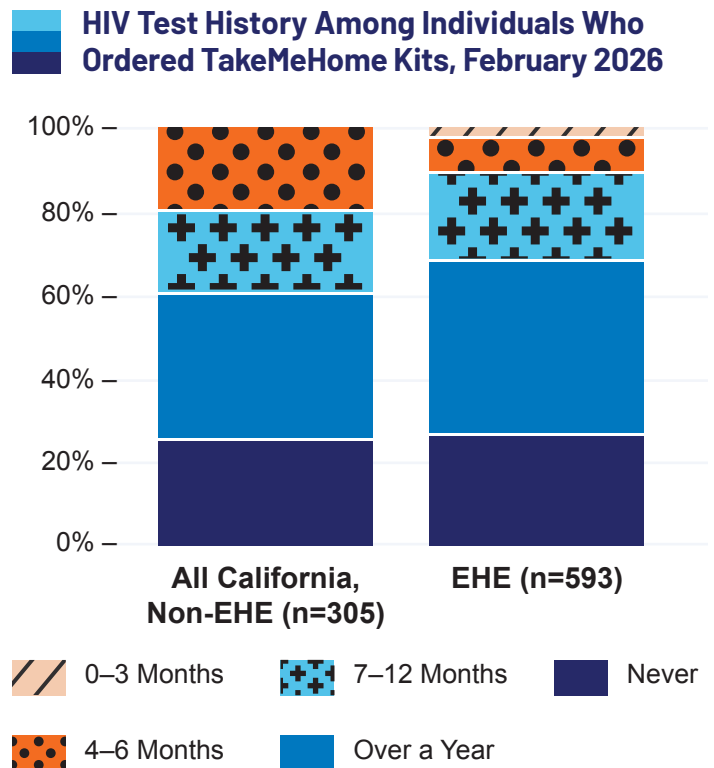
- 1 Nothing About Us Without Us
- 2 Reframe Policies & Messaging
- 3 Positive, Accurate Information
- 4 Acknowledge Medical Mistrust
- 5 Ongoing Partnerships

TAKEMEHOME

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 February, 305 individuals in 40 counties ordered self-test kits, with 233 (76.4%) 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 February 28, 2026, 21,876 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 450 (75.9%) of the 593 total tests distributed in EHE counties. Of

those ordering rapid tests, 109 (76.2%) ordered 2 tests.



HEALTH ACCESS FOR ALL

➤ Strategy 3: Fewer Hurdles to Healthcare Coverage

As of March 31, 2026, there are 308 PrEP-AP enrollment sites and 232 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 March 31, 2026, the number of ADAP clients enrolled in each respective ADAP Insurance Assistance Program are shown in the [table on the top of page 7](#).

STIGMA FREE

➤ Strategy 2: Reframe Polices & Messaging

In honor of STI Awareness week, on April 14th, the Association of State and Territorial Health Officials will hold a Storytelling Webinar featuring the OA Real Talk Docuseries. This webinar will explore how storytelling can strengthen public health communication by making complex or stigmatized topics more relatable, engaging and memorable for diverse audiences. Tiffany Woods, OA's State Transgender Health Manger who spearheaded the Real Talk docuseries or CDPH, is one of the featured panelists. [Registration is required for this engaging webinar](#).

Additional Key Characteristics	EHE	All California, Non-EHE
Of those sharing their gender, were cisgender men	43.9%	45.0%
Of those sharing their race or ethnicity, identify as Hispanic or Latinx	34.1%	42.9%
Were 17-29 years old	39.1%	35.7%
Of those sharing their number of sex partners, reported 3 or more in the past year	39.8%	44.4%

Since September 2020, 2,299 test kit recipients have completed the anonymous follow up survey from EHE counties; there have been 1,019 responses from the California expansion since January 2023.

Survey Highlights	EHE	All California, Non-EHE
Would recommend TakeMeHome to a friend	95.1%	94.7%
Identify as a man who has sex with other men	45.1%	49.1%
Reported having been diagnosed with an STI in the past year	8.1%	9.4%

(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	257	10%	---	---	---	---	6	0%	263	10%
25 - 34	862	32%	---	---	---	---	100	4%	962	36%
35 - 44	755	28%	1	0%	---	---	99	4%	855	32%
45 - 64	390	15%	1	0%	3	0%	84	3%	478	18%
65+	24	1%	---	---	68	3%	7	0%	99	4%
TOTAL	2,288	86%	2	0%	71	3%	296	11%	2,657	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	151	6%	1	0%	28	1%	19	1%	---	---	40	2%	4	0%	20	1%	263	10%
25 - 34	576	22%	2	0%	85	3%	63	2%	5	0%	173	7%	9	0%	49	2%	962	36%
35 - 44	548	21%	5	0%	59	2%	61	2%	2	0%	138	5%	5	0%	37	1%	855	32%
45 - 64	293	11%	1	0%	28	1%	19	1%	1	0%	112	4%	2	0%	22	1%	478	18%
65+	15	1%	---	---	5	0%	4	0%	---	---	71	3%	---	---	4	0%	99	4%
TOTAL	1,583	60%	9	0%	205	8%	166	6%	8	0%	534	20%	20	1%	132	5%	2,657	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	46	2%	1	0%	1	0%	14	1%	1	0%	13	0%	---	---	6	0%	82	3%
Male	1,465	55%	7	0%	187	7%	150	6%	6	0%	495	19%	18	1%	108	4%	2,436	92%
Trans	66	2%	---	---	15	1%	2	0%	1	0%	18	1%	1	0%	5	0%	108	4%
Unknown	6	0%	1	0%	2	0%	---	---	---	---	8	0%	1	0%	13	0%	31	1%
TOTAL	1,583	60%	9	0%	205	8%	166	6%	8	0%	534	20%	20	1%	132	5%	2,657	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: 03/31/2026 at 12:01:32 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	564	-0.70%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	6,290	-0.27%
Medicare Premium Payment Program (MPPP)	2,605	1.80%
Total	9,459	0.82%

Source: ADAP Enrollment System

RACIAL EQUITY

➤ Strategy 4: Community Engagement

California Planning Group (CPG) – Spring 2026 Meeting Announcement

The CPG and OA will host the Spring In-Person CPG Meeting from May 12–14. Attendance will be by invitation only. The meeting will include a state-led presentation on access to and coverage of long-acting injectables as well as a capacity building session on navigating change during uncertain times. It will also have dedicated time for committee work, including a group assignment on PrEP gaps, extended breakout session, and team-building activities. For more information, visit our [CPG webpage](#).

➤ Strategy 5: Racial and Social Justice Training

The Centers for Disease Control and Prevention (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! 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.

