Ending the HIV Epidemic (EHE) Regional Learning Collaborative

Alameda, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego, and San Francisco Counties







Session 2: Strategies for Community Engagement and Mobilization













Session Agenda

EHE and Community Engagement: Introduction and County Efforts

- Leroy Blea, Senior Public Health Consultant, Facente Consulting
- Q&A to follow

Community Engagement and Mobilization Panel

- Dr. Sophy Wong, Director, East Bay Getting to Zero
- David Coleman, Social Support Coordinator, Black AIDS Institute
- Reyna Perez, Program Manager, CAL-PEP
- Dr. Toni D'orsay, Director of Transgender Services, Borrego Health
- Karla Torres, Associate Director of HIV Services, San Ysidro Health

Q&A

EHE Community Engagement: Introduction and County Efforts

Leroy Blea, Facente Consulting

CHIPTS EHE Regional Collaborative Meeting

November 17, 2020

Introduction: California Consortium EHE Plans

- Community Engagement
- Epidemiological Snapshot
- Situational Analysis
- EHE Plan: Innovative/Disruptive

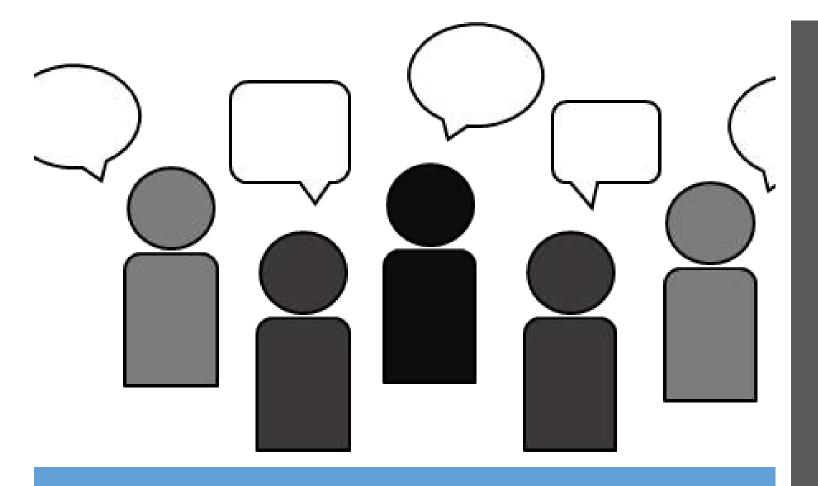
Ending the HIV Epidemic: A Plan for America HHS is proposing a once-in-a-generation opportunity to eliminate new HIV infections in our nation. The multi-year program will infuse 48 counties, Washington, D.C., San Juan, Puerto Rico, as well as 7 states that have a substantial rural HIV burden with the additional expertise, technology, and resources needed to end the HIV epidemic in the United States. Our four strategies - diagnose, treat, protect, and respond - will be implemented across the entire U.S. within 10 years. HHS will work with each community to establish local teams GOAL: on the ground to tailor and implement strategies to: 75% Diagnose all people with HIV as early as possible. reduction in new HIV Treat people with HIV rapidly and effectively to reach sustained viral suppression. infections in 5 years and at least Prevent new HIV transmissions by using proven interventions, including 90% pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs). reduction in 10 years. Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them The Initiative will target our resources to the 48 highest burden counties, Washington, D.C., San Juan, Puerto Rico, and 7 states with a substantial rural HIV burden. Geographical Selection: Data on burden of HIV in the US shows areas where HIV transmission occurs more frequently. More than 50% of new HIV diagnoses* occurred in only 48 counties, Washington, D.C., and San Juan, Puerto Rico. In addition, 7 states have a substantial rural burden - with over 75 cases and 10% or more of their diagnoses in rural areas. Ending the www.HIV.gov ___ HIV *2016-2017 data Epidemic

lung 2019

Community Engagement Focus

 What should we do to end the HIV epidemic in our community?

How should we do it?

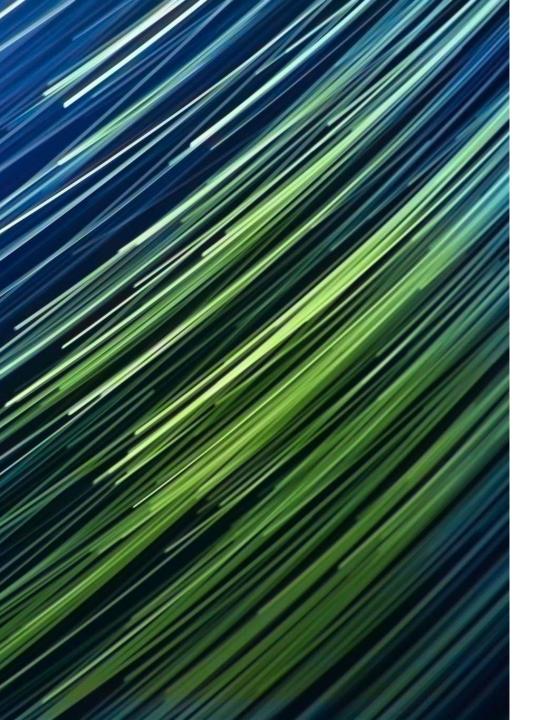


Community Engagement before and during COVID-19

- Engaged Planning Councils
- Leveraged existing partnerships
- Early community engagement
- Connected to new partners and new voices
- Selected interventions with input from key stakeholders
- Pivoted to virtual community engagement after COVID-19 response

Selected Community Engagement Methods

Alameda County	PrEP Network Listening Sessions- established collaborative East Bay Getting to Zero Collaborative
Orange County	Community EHE Town Hall – community and providers Online Survey- Spanish Speakers
Riverside County	Community Caucuses – reflected community narratives –Spanish Speakers Community EHE Summit- multi-sector forum
Sacramento County	Community EHE Forums- community and providers Online Survey- social networks
San Bernardino County	Community Caucuses- reflected community narratives- Spanish Speakers Community EHE Summit- multi-sector forum
San Diego County	Community EHE Summit/Getting to Zero Project/Consumer Voices Survey PrEP Listening Session- new network of PrEP navigators



Selected Resulting Interventions

Mobile Vans

- Deployed to parts of the counties with lack of services infrastructure
- Brick and mortar collaborations

Testing expansion

- ROOT
- Focused testing on priority populations
- Home-delivered tests HIV/STI

PrEP expansion

- Building capacity of providers to offer PrEP
- Building capacity to link clients with providers-PrEP navigators

Linkage to Care

- Whole person-health services
- Rapid StART
- Peer navigators/Technology solutions

Next Steps



Build out interventions linked to priority populations



Continue community engagement-share and learn new media methods



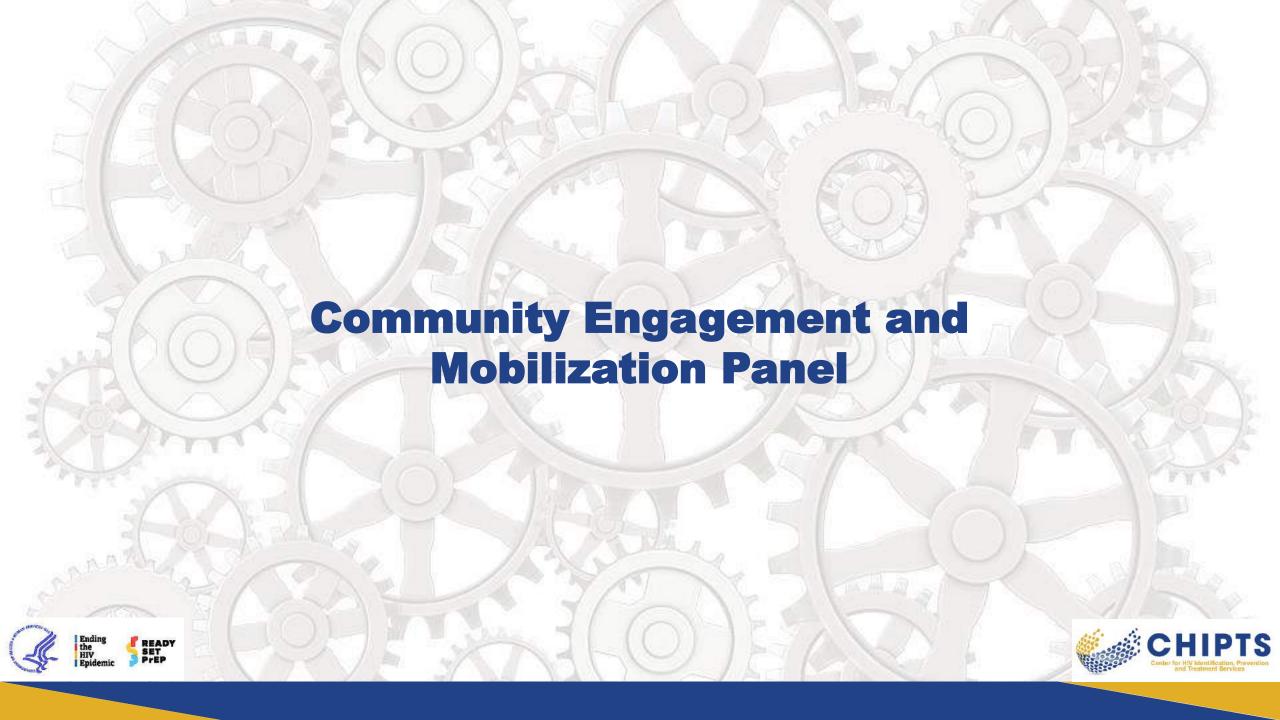
Update the EHE plans as we know more



Share best practices across regions

THANK YOU.











ADVANCING HEALTH EQUITY & HEALING





Community engagement activities

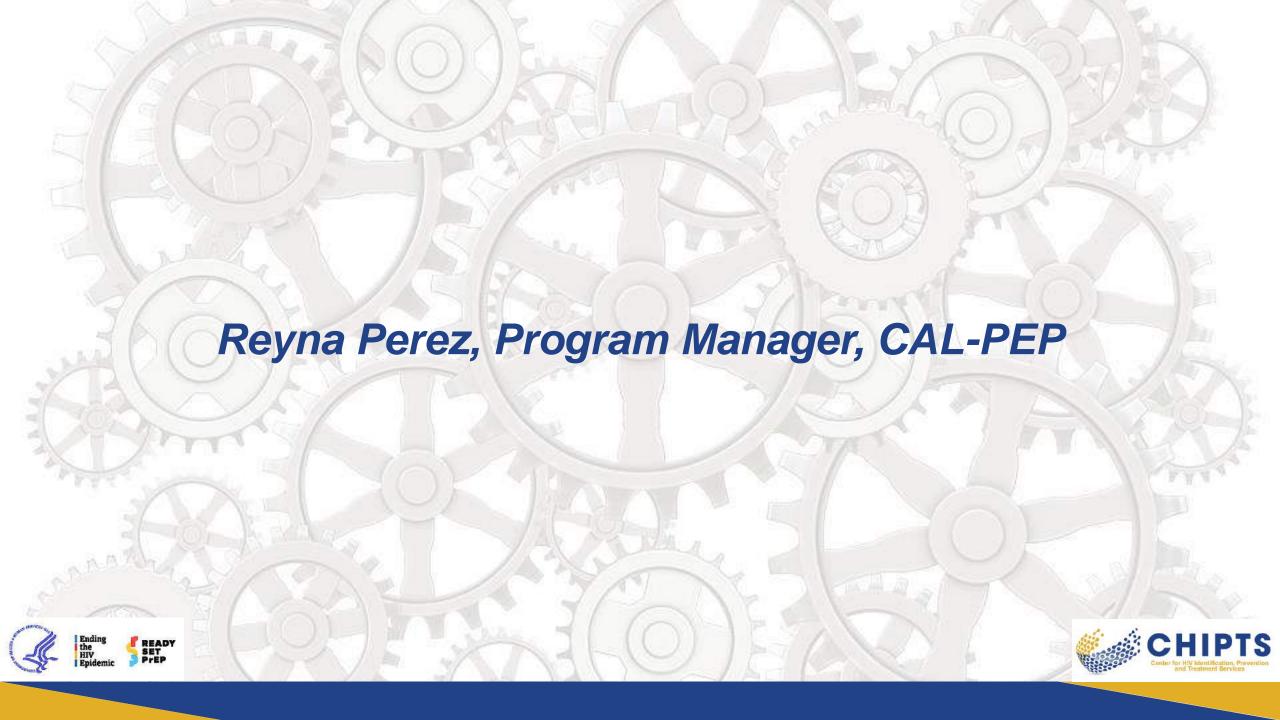


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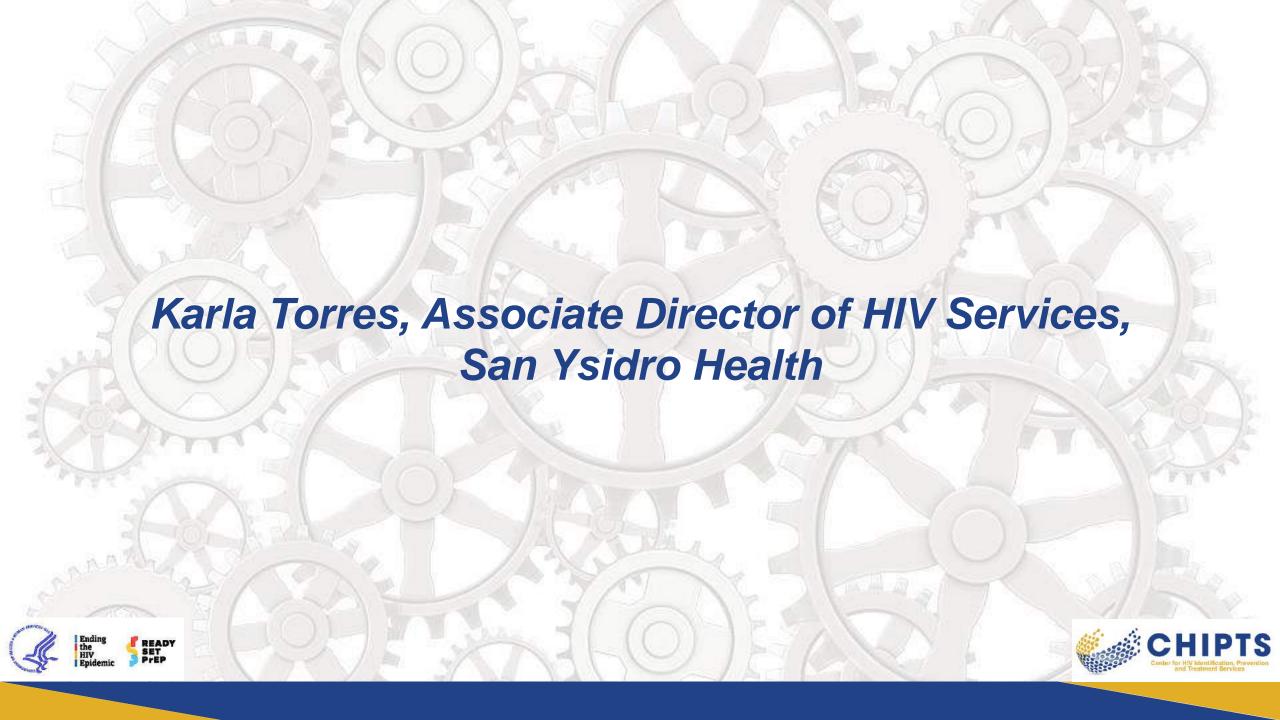
- 4 live workshops for content development: 3 in English, 1 in Spanish
- All draft documents posted on <u>our website</u>: <u>www.EBGTZ.org</u>
- Feedback anytime using this form or via email.
- Live community town hall event to present first draft on December 4th.
- Second draft posted online for broad community review/input in January.
- "Living" plan shared widely online with feedback form people can use at any time starting in February 2021 with schedule for live review/updates at least every 6 months.





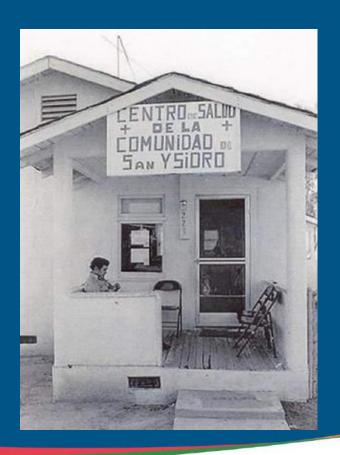






San Ysidro Health: HIV Care at the US-Mexico Border

Karla L. Torres
Director of HIV and LGBTQIA+ Services





San Ysidro Health





- Established in 1969 in the San Ysidro US-MX border community by seven "founding mothers", activists for healthcare access
- Now a large Federally Qualified Health Center (FQHC), serving over 100,000 patients in multiple regions of San Diego County
- We serve diverse and historically underserved communities with high rates of poverty, uninsured and non-English speaking households (40%)
- 71% Latinx, 7% Asian and Pacific Islander, 5% African American/Black, 17%
 White. 89% below 200% of Federal Poverty Level, 24% Uninsured

The mission of San Ysidro Health is to improve the health and well-being of the communities we serve with access for all.



SYHealth HIV Program History

- 1990s South Bay AIDS Project (HIV social services)
- 1999 SYHC opens first HIV clinic in the south bay (4hr/wk)
- 2001-today: Services expand to fill community need, currently operating 2 full-time Ryan White HIV clinics
- HIV Department currently has 50 staff members and multiple programs across Southern San Diego County
- One of the largest HIV programs in San Diego County
- The only HIV specialty program in the San Diego South Bay region

<u>Mission</u>: To provide a continuum of culturally sensitive medical, social and supportive services free of charge that enhance the health and enrich the quality of life of people living with HIV/AIDS and their families



SYHealth HIV Program Today

Serving over 1300 clients

3 HIV **Clinical** locations: integrated primary care, HIV specialty care, transgender care, health education, treatment adherence, routine HIV Testing, and HIV prevention services.







ART Rapid Start is standard of care. PrEP services co-located.





2 HIV **Social Services** sites: case management, mental health services, insurance enrollment, peer advocacy, support groups, food and housing assistance, transportation, legal services, substance use and addiction counseling, and much

more...

Community **Outreach and Testing** program with linkage to HIV Care, PrEP/PEP and social support services.

Research, Medical Education, Community Engagement and Advocacy





