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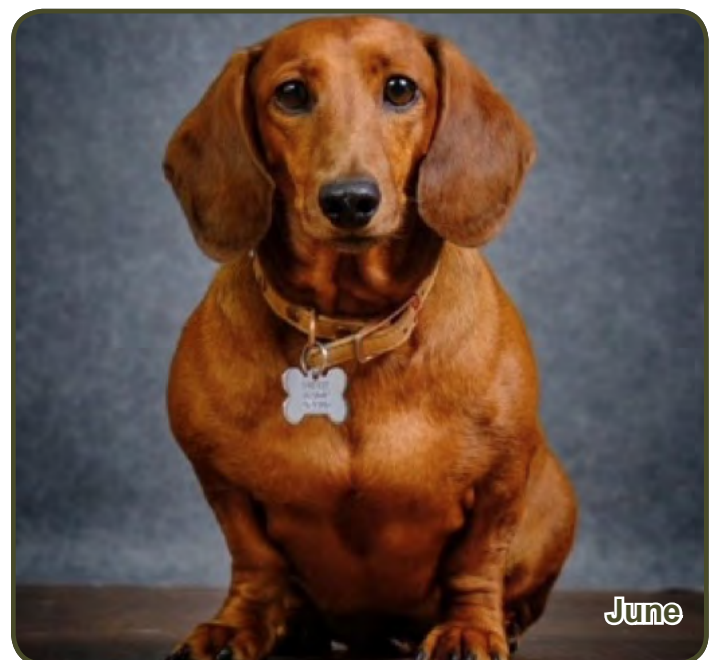
This newsletter is organized to align with the six Social Determinants of Health found in the *Ending the Epidemics Integrated Statewide Strategic Plan*, addressing the syndemic of HIV, HCV, and STIs in California. More about the *Strategic Plan* is available on the [Office of AIDS \(OA\) website](#).

STAFF HIGHLIGHT

OA would like to congratulate **Anna-Katrina Rasmussen** on her promotion. Anna-Katrina began her career in State service at CA Department of Education as the Executive Secretary to the Director in the career and college transition division, and in February 2020 promoted to Staff Services Analyst at CA Department of Parks and Recreation. In November 2021, she joined OA, Program Support Branch, Procurement and Purchasing Unit working with the AIDS Drug Assistance Program (ADAP) Branch on their contracts. June of 2024, she promoted and joined the ADAP Branch Team as the Contracts and Grants Manager.

Prior to State service, she worked in the private sector for Dunlop manufacturing (guitar accessories) for international orders-artist relations and customer service, Truro University as the Purchasing Agent, and Caltronics business systems as their Solano/ Napa sales representative. Outside of work, she enjoys racing her race champion sausage dog, Benny the Jet, and rescued another sausage dog, June.

Anna-Katrina also enjoys riding her bike, painting, crafting, playing music, and trying out new activities that catch her eye and is always taking an adventure with the hot dogs to the beach and on other vacation spots! She loves trying out new eateries and breweries around the Sacramento and surrounding areas.



HIV AWARENESS

August 31 is International Overdose Awareness Day (OAD). This day is observed to provide an opportunity for people to collectively mourn loved ones lost to overdose and help inform people about overdose prevention and support services available. The theme this year is #TogetherWeCan, aimed at highlighting the strength of coming together in addition to supporting those connected to the tragedy of overdose. OAD also is acknowledged to send a message to current and former people who use drugs that they are valued and supported.

GENERAL UPDATES

> Mpox

OA is committed to providing updated information related to mpox. We have partnered

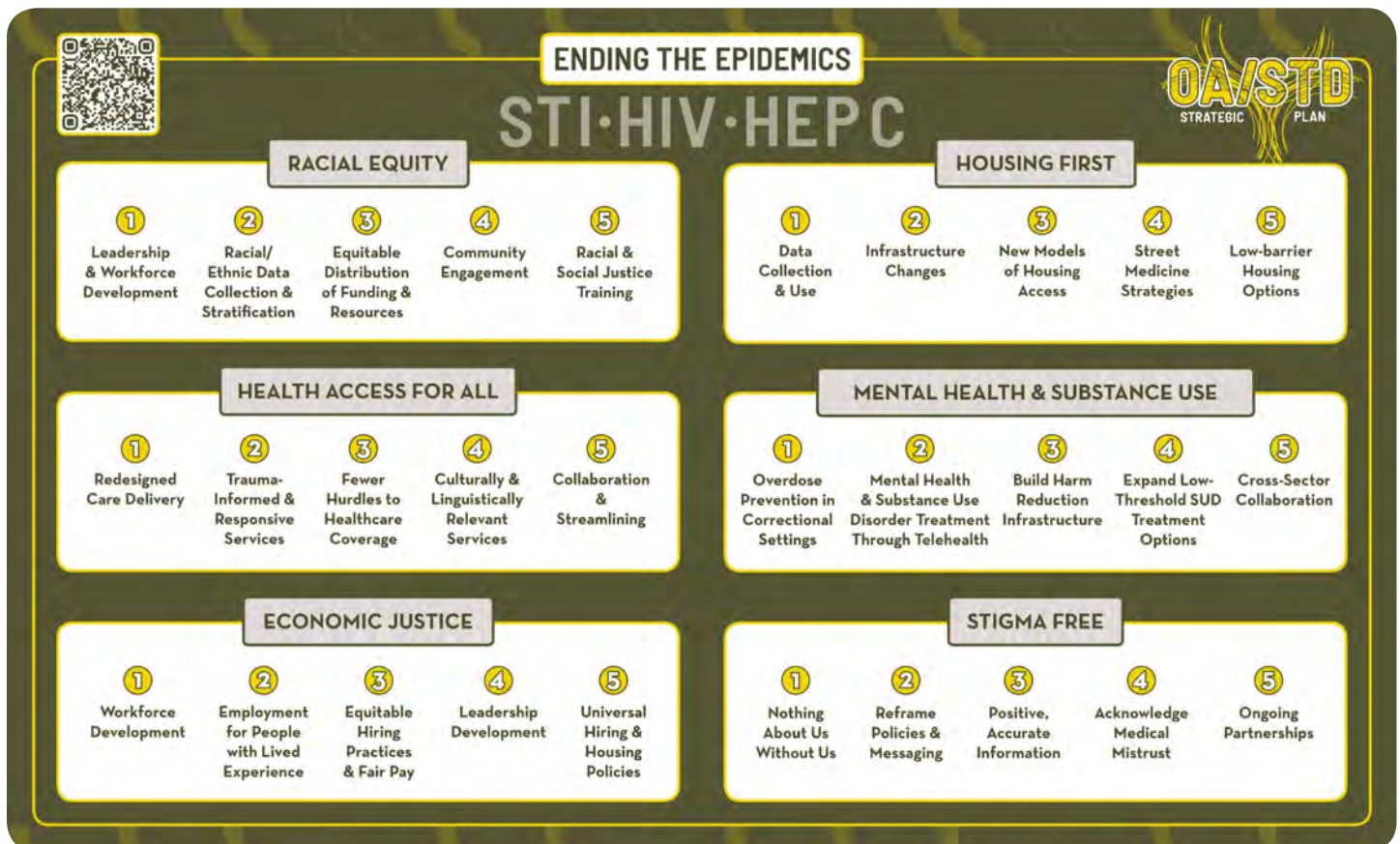
with the Division of Communicable Disease Control (DCDC), a program within the Center of Infectious Diseases and have disseminated a number of documents in an effort to keep our clients and stakeholders informed. Please refer to the [DCDC website](#) to stay informed.

Mpox digital assets are available for LHJs and CBOs on DCDC's [Campaign Toolkit](#) website.

> HIV/STD/HCV Integration

We are re-initiating 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!

The **visual below** 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

Since April 1, 2024, the Mpox vaccine, JYNNEOS, became available on the commercial market. While the California Department of Public Health (CDPH) will work to ensure access to vaccine through LGBTQ+ Pride season (starting as early as May 2024), access to vaccine for people who are uninsured/underinsured in a local jurisdiction may be impacted once the state supply is phased out. In light of these circumstances, please consider using the state's turnkey resource (Optum Serve) to bolster vaccination efforts at large community or Pride events this Summer, particularly those that would serve a large under/uninsured population.

The **Turnkey Program** can deploy teams to indoor and outdoor sites and are equipped with all the necessary materials and supplies (except the vaccines themselves which would be provided by the local health jurisdiction).

If you know a local jurisdiction is interested in using the Mpox Turnkey Program and/or for more information, please contact [Brenda Meza](mailto:brenda.meza@cdph.ca.gov), (brenda.meza@cdph.ca.gov) and [Justin Garcia](mailto:justin.garcia@cdph.ca.gov) (justin.garcia@cdph.ca.gov).

OA continues to implement its **Building Healthy Online Communities (BHOC)** self-testing

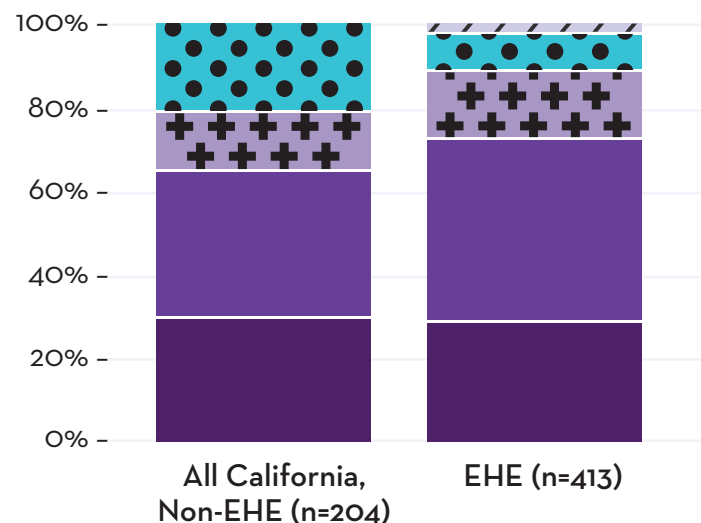
TAKEMEHOME



program to allow for rapid OraQuick test orders in all jurisdictions in California. The program, **TakeMeHome**[®], (<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 June, 204 individuals in 35 counties ordered self-test kits, with 134 (65.7%) individuals ordering two 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 46 months, between September 1, 2020, and June 30, 2024, 12,300 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 225 (54.5%) of the 413 total tests distributed in EHE counties. Of those ordering rapid tests, 144 (76.6%) ordered two tests.

HIV Test History Among Individuals Who Ordered TakeMeHome Kits, June 2024



Additional Key Characteristics	EHE	All California, Non-EHE
Of those sharing their gender, were cisgender men	54.9%	58.6%
Of those sharing their race or ethnicity, identify as Hispanic or Latinx	38.2%	38.6%
Were 17-29 years old	47.2%	41.7%
Of those sharing their number of sex partners, reported 3 or more in the past year	47.4%	42.9%

Since September 2020, 1,400 test kit recipients have completed the anonymous follow up survey from EHE counties; there have been 497 responses from the California expansion since January 2023.

Survey Highlights	EHE	All California, Non-EHE
Would recommend TakeMeHome to a friend	94.2%	94.2%
Identify as a man who has sex with other men	51.7%	54.5%
Reported having been diagnosed with an STI in the past year	8.5%	9.7%

➤ Strategy 3: Fewer Hurdles to Healthcare Coverage

As of August 2, 2024, there are 212 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 page five of this newsletter.

As of August 2, 2024, the number of ADAP clients enrolled in each respective [ADAP Insurance Assistance Program](#) are shown in the chart at the top of page 6.

RACIAL EQUITY

➤ Strategy 3: Equitable Distribution of Funding and Resources



Project Empowerment Request for Applications (RFA) 2024-2028, No. 24-10049

As previously announced, CDPH/OA will award contracts in the amount of \$4.5 million annually in local assistance funds to fund the development of 18 demonstration projects focused on providing innovative, comprehensive HIV prevention and control activities to Black/ African American and Latinx populations. Award allocations will be distributed over four years and funding amounts are based on the selected tier of this RFA.

The Notice of Intent to Award for Project Empowerment was released on the RFA website in July. Congratulations to the 18 awardees and thank you everyone who applied! Please visit the RFA website for a [full list of awardees](#).

➤ Strategy 4: Community Engagement

The CPG and OA hosted the Spring In-Person

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	10%	---	---	---	---	25	1%	415	11%
25 - 34	1,250	34%	---	---	---	---	178	5%	1,428	38%
35 - 44	905	24%	---	---	2	0%	156	4%	1,063	29%
45 - 64	427	11%	---	---	15	0%	110	3%	552	15%
65+	26	1%	---	---	226	6%	7	0%	259	7%
TOTAL	2,998	81%	0	0%	243	7%	476	13%	3,717	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	226	6%	1	0%	49	1%	12	0%	2	0%	78	2%	1	0%	46	1%	415	11%
25 - 34	801	22%	4	0%	141	4%	93	3%	9	0%	280	8%	10	0%	90	2%	1,428	38%
35 - 44	600	16%	5	0%	97	3%	55	1%	5	0%	237	6%	5	0%	59	2%	1,063	29%
45 - 64	295	8%	---	---	56	2%	21	1%	2	0%	143	4%	1	0%	34	1%	552	15%
65+	25	1%	---	---	4	0%	5	0%	---	---	212	6%	---	---	13	0%	259	7%
TOTAL	1,947	52%	10	0%	347	9%	186	5%	18	0%	950	26%	17	0%	242	7%	3,717	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	68	2%	---	---	6	0%	8	0%	1	0%	15	0%	---	---	6	0%	104	3%
Male	1,737	47%	9	0%	319	9%	173	5%	17	0%	904	24%	17	0%	217	6%	3,393	91%
Trans	118	3%	---	---	13	0%	5	0%	---	---	11	0%	---	---	4	0%	151	4%
Unknown	24	1%	1	0%	9	0%	---	---	---	---	20	1%	---	---	15	0%	69	2%
TOTAL	1,947	52%	10	0%	347	9%	186	5%	18	0%	950	26%	17	0%	242	7%	3,717	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: 07/31/2024 at 12:01:39 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	538	0.00%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,461	- 0.27%
Medicare Premium Payment Program (MPPP)	2,071	- 1.56%
Total	8,070	- 0.59%

Source: ADAP Enrollment System



CPG Meeting from June 10 – 12 in Sacramento. The theme of the meeting was Innovation Through Integration: Synergizing Health for HIV, STI, and HCV Challenges. It included presentations related to the syndemics of HIV, STI, and HCV, and it spotlighted OA's Clinical Quality Management Program and the new HIV Care Connect Data System.

Again, 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. Huge thank you to Community Co-Chairs Rafael Gonzalez and Yara Tapia as well as the CPG Host Committee for their ongoing work and support in helping to plan for this meeting. 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.

For more information about CPG, please visit our website at https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_CPG.aspx.



Dear Ending the Syndemics Partners,

Please save the dates for the virtual **Ending the Syndemic Symposium 2024 Annual Meeting** taking place **September 30th**, from 12:00 – 4:00 PM, **October 1st**, from 9:00 AM – 12:00 PM, and **October 2nd**, 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.

Each day of the *Symposium* will have a particular theme we are asking speakers and panelists to address. The theme of day one is

“Racial Equity”, one of the Social Determinants of Health on which our work in California is organized (Page 11 in the [Ending the Epidemics Integrated Statewide Strategic Plan](#)). Speakers on day one will highlight how addressing Racial Equity directly will lead to better health outcomes in California and across the country.

This *Symposium* is free and open to any partner working to end the syndemic of HIV, STIs and HCV in California. Simultaneous Spanish translation will be available at all sessions.

Information about how to register will be released soon, and we look forward to seeing you at the *Symposium*!

➤ Strategy 5: Racial and Social Justice Training

Capacity Building Assistance

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 preventions 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](mailto:CBA@cdph.ca.gov) at CBA@cdph.ca.gov.

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

