

HIV Planning Group Priority Setting and Resource Allocation Committee

Overall 2023 Key Data Findings Approved July 20, 2023



Co-occurring health conditions, poverty & insurance status

- Persons living with HIV (PLWH) are more likely than general San Diego County populations to experience the following conditions: TB, STDs, hepatitis B & C, mental illness, injection and noninjection drug use, homelessness, poverty & lack of insurance.
- These conditions can complicate adherence and make care more complex and more expensive.
- Co-occurring health conditions make providing medical care more complex, require greater provider expertise, and **increase the cost of care** for PLWH.
- Research also reveals a higher incidence of gastrointestinal diseases, circulatory diseases, endocrine/nutritional/metabolic disease, nervous system diseases and neoplastic diseases such as cancer or lymphoma.
- PLWH greater than 50 years of age, experience an increase in age-related diseases; causes of morbidity and mortality for older PLWH include non-infectious comorbidities, such as cardiovascular disease, hypertension, bone fractures, chronic kidney disease, liver disease, diabetes mellitus and non-AIDS-defining cancers.

Regional availability of Ryan White (RW) Part A/B services

- The fewest RW Part A services are available in East County, followed by South Bay.
- All of the RW services are available in the Central region with the exception of Peer Navigators (Referral to Health and Support Services), which is not available in the Southeast San Diego region.

Service Eligibility Guidelines

- To be eligible to receive Ryan White Parts A/B services in San Diego County, one must:
 - Be a resident of San Diego County
 - Have an income at or below 500% Federal Poverty Level (FPL) (\$72,990 annually or \$6.082/month for a household of one)
 - Have a confirmed HIV diagnosis (except in service categories that permit services to HIVnegative and unaware)
 - Have no other payer for service
- All clients must be reassessed for eligibility every twelve months

HIV epidemiology

- Total number of Persons Living with HIV disease (PLWH) in San Diego County (Prevalent cases) = 14.634.
- Recent cases (2018 2022) = **2,139** (this is a subset of the total or prevalent cases)
- Th majority of people living with HIV disease (PLWH) through year-end 2021 were men who have sex with men (MSM). For women, heterosexual transmission was the largest mode of transmission. Central Region and South Region have the largest proportion of recent HIV disease diagnoses among women (>50% of total women in the two regions).
- The majority of recent HIV disease diagnoses for over ten years were people of color. The proportion of Non-Hispanic White cases decreased over time, while the proportion of Hispanic/Latino cases increased over time. The HIV rate (number/100,000 or 105) was higher for Non-Hispanic Black/African American (40.4/105) than Hispanic/Latino (19.6/105) or Non-Hispanic White (6.8/105) during in 2021.

- Since 2018, the 20 29 years and 30 39 years age groups were the most frequent age groups at diagnosis among recent HIV disease diagnoses (31.0% and 31.1% respectively), while the 50 59 was the most frequent current age for total PLWH (29%), and 60+ years was the second most frequent (28.8%).
- The groups with the highest percentage of simultaneous diagnosis for recent HIV disease diagnoses (2018-2022) were Hispanic/Latino 26.9%, vs. 23.2%)), Persons who inject drugs (PWID) (27.3%) and age groups 40 49 (29.4%), 50 59 (35.7%), and 60+ (45.2%).

Survey of HIV Impact 2020 - 21

- The top 5 ranked services are (in order) **HIV medications**, **HIV primary care**, **Dental care**, **Case management** and **Medical specialist**.
- The top "need but can't get" services are **Dental care**, **Help to pay rent**, **Legal services**, **Counseling/Therapy**, **Peer Advocacy/Navigation**.
- The percentage of respondents who said they "need but can't get" a service *increased* in all top 5 services noted above, since the 2017 survey.

Needs Assessment Focus Groups 2020 – 21

- The **top 3 concerns** Consumers discussed in the focus groups were:
 - Access to care
 - Mental Health Issues
 - Housing
- The top reasons for not taking HIV medication as prescribed were:
 - Drug use and drug addiction;
 - Forgetting to take the medication;
 - Lack of access to healthcare or resources to get the medication refilled;
 - Experiences of homelessness;
 - o Side effects of HIV medication; and
 - o Experiences of mental health issues, such as depression.

Getting to Zero Community Action Plan Focus Groups 2020 – 21

- **160 community participants** living with or vulnerable to HIV provided input to the following 11 recommendations:
 - Acknowledge and address medical system mistrust. Representation noted as an issue; d
 ensure ongoing recruitment, support, and retention of a workforce representative of those
 living with HIV.
 - 2. Improve communications and outreach strategies for those living with and are vulnerable to HIV who live, work, or participate in historically underserved, Low Information communities.
 - 3. Ensure that all HIV community members have opportunities for equitable access to telehealth appointments and to participation in public meetings, address the digital disparities present for those with lower income who are also living with or vulnerable to HIV.
 - 4. Provide increased mental health and alcohol/substance use treatment opportunities for those living with or vulnerable to HIV.
 - 5. More consistently provide rapid access to basic support services: housing, food, transportation, emergency financial assistance including shut-off & eviction prevention.
 - 6. Continue to expand the opportunities to hire, support and utilize peer navigators, peer health educators, peer outreach specialists, benefits navigators, and housing specialists.
 - 7. Design, integrate, and deploy strategies to address the stigmas faced by HIV community members including: the multiple layers of stigma faced by those living with HIV who are also Black and Latino MSM; Transgender persons; Immigrants who may be underdocumented or undocumented; those struggling with mental health symptoms or alcohol/ substance use challenges or those without stable housing.

- 8. Increase the number of HIV service sites that have the capacity for whole person-whole health services including PrEP, mental health services, substance use treatment services, hormone treatment, case management, and housing resources.
- 9. Design, create and execute improved community engagement and outreach strategies that utilize community organizing principles and personal relationship building.
- 10. Revise and refine the documentation processes that create a barrier to access services for persons living with or at increased vulnerability to HIV.
- 11. Design and deploy a variety of brief, on-line trainings for those living with or vulnerable to HIV.

Care Continuum/Viral Suppression

- In San Diego County, of the total number of people who are infected with HIV, **70%** are **in receipt** of care; **46%** are **retained in care** and **57%** are **virally suppressed**.
- African Americans/Blacks had a significant lower level of viral suppression (50%), compared to all PLWH (56.7%), but not for all RW clients w/VL test (88.7% vs. 91.7%)
- Persons who inject drugs (46%) and persons with no identified risk (50%) had lower percentages of viral suppression compared to all PLWH (56.7%).

Unaware Estimate

- Definition: Persons living with HIV, not aware of their status/has not been tested.
- The estimate of PLWH and unaware of their status in San Diego County in 2021 is 1,272 or 9% (of 14,133 estimated # of PLWH in San Diego County).

Unmet Need Estimate

- Definition: Persons living with HIV disease, but not in medical care.
- The unmet need estimate of PLWH in San Diego County in 2017 is 4,240 or 30% (of 14,133 estimated # of PLWH in San Diego County).

Non-Ryan White Mental Health and Substance Use Disorder Treatment services in San Diego County.

- There are several non-Ryan White mental health and substance use treatment services
 providers in San Diego County (SDC) that have HIV/PLWA/LGBTQ competencies. Some of the
 providers noted also receive Ryan White funds for services and may provide services using nonRyan White funds as well.
- Additionally, all programs operated by, or contracted through the <u>COUNTY OF SAN DIEGO'S BEHAVIOR HEALTH SERVICES (BHS)</u> are required to provide services and supports that respect diverse beliefs, identities, cultures, preference, and represent linguistic diversity of those served. Programs are responsible for evaluating the need for culturally/linguistically specialized services and linking individuals with those services or making appropriate referrals.