



SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH  
**HIV Health Services**  
**HIV/HCV/STI Prevention**

**Board of Supervisors**  
**Budget & Finance Committee**

Bill Blum, HHS Director

Tracey Packer, CHEP Director

May 4, 2022

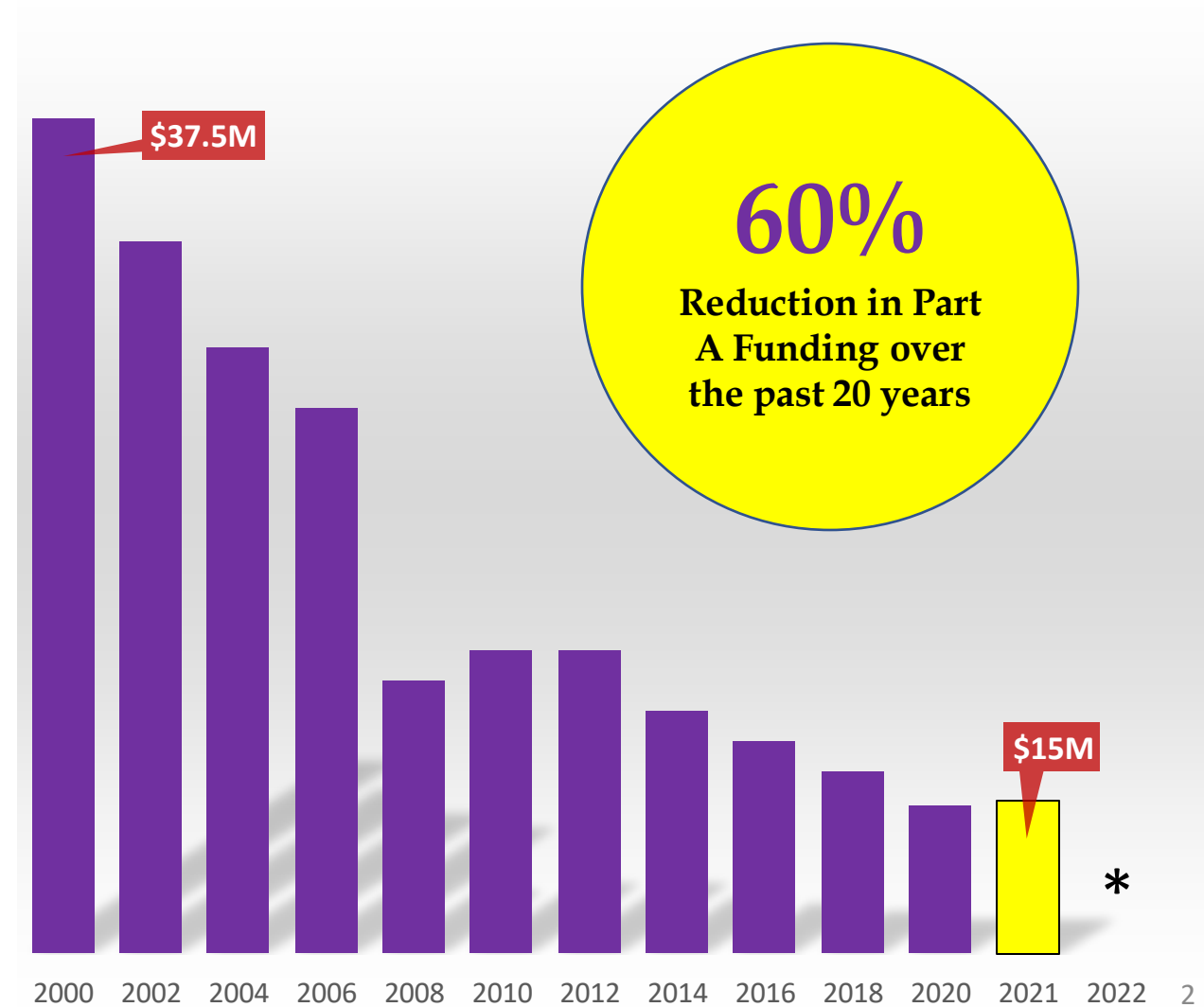
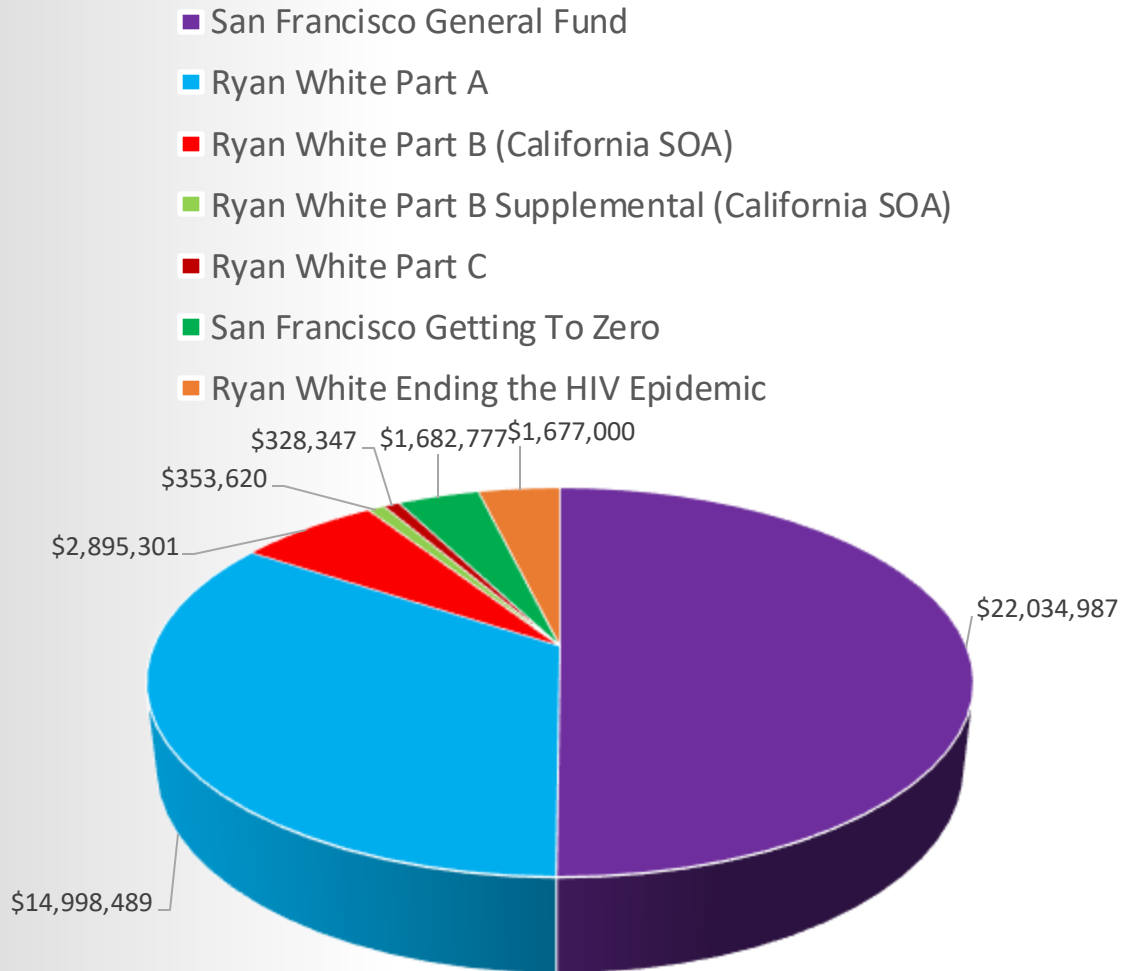


# How much federal HIV care funding does San Francisco DPH HIV Health Services (HHS) receive? And has this changed?

**Federal Funding: \$17,003,836    State Funding: \$3,348,921    San Francisco General Fund: \$22,034,987    Total HHS Funding: \$42,287,744**

## HHS Funding – 2021

\* No finalized award yet for 2022 Part A or ETHE



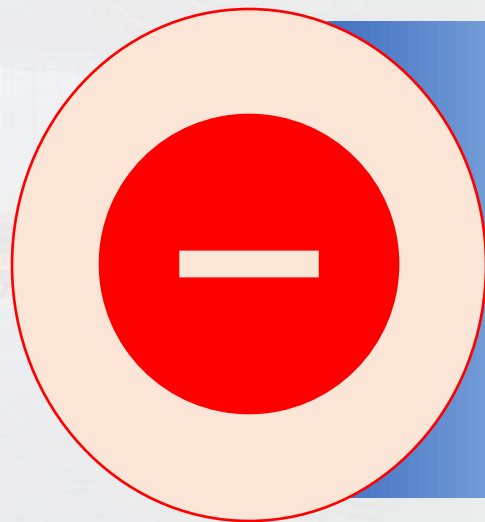
# What changes in HIV care funding have occurred?



**No reductions  
in funding to  
the DPH HIV  
Health Services  
programs since  
2010**



- HRSA Ending The HIV Epidemic
- San Francisco General Fund Getting to Zero
- San Francisco Board of Supervisors Backfill of grant reductions and Addback for new funding for behavioral health for long term survivors

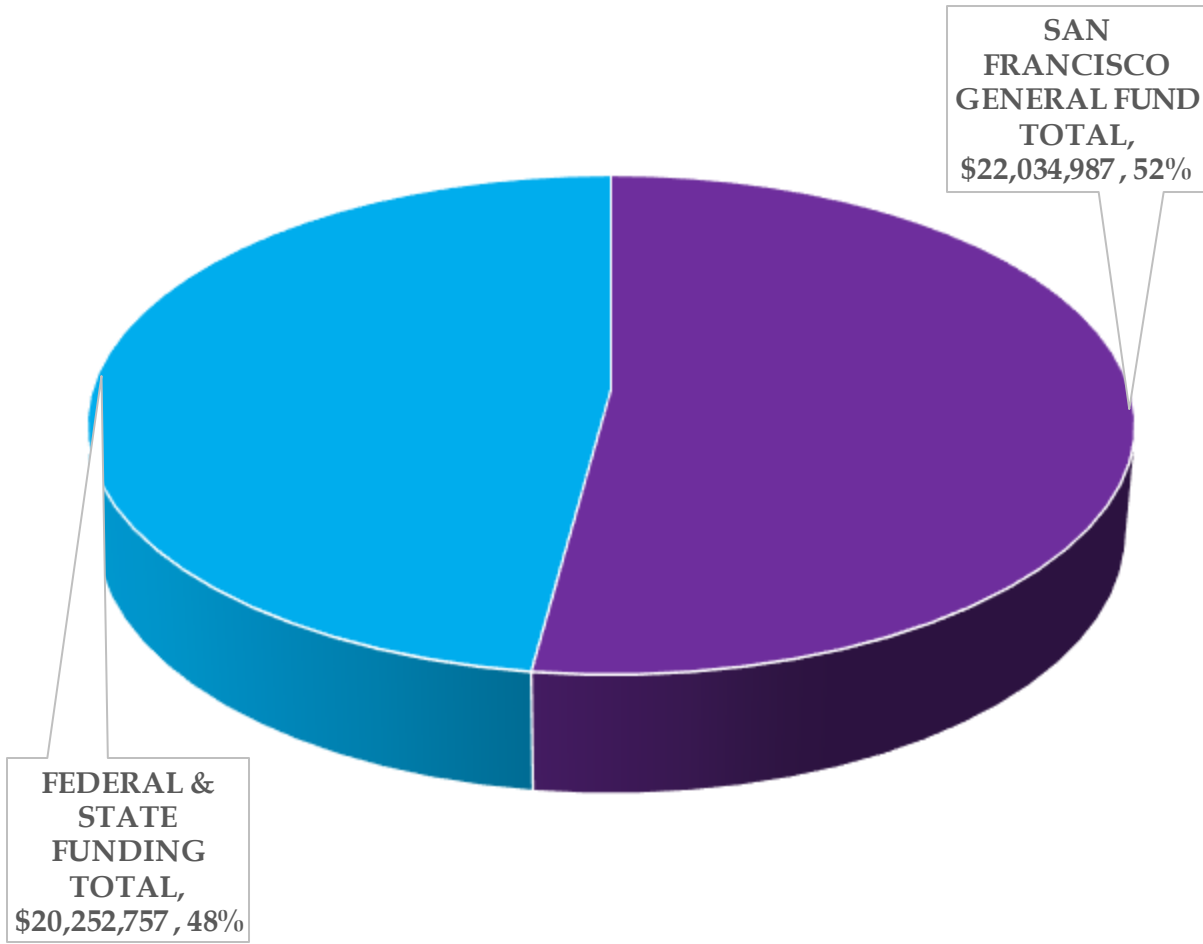


- 60% of HRSA Ryan White Part A funding in 20 years
- \$9.1M reduction in 2007 resulting in elimination of service categories:
  - Adult day health care; complimentary therapies; congregate meals; transportation; HIV detox; companion services; child care

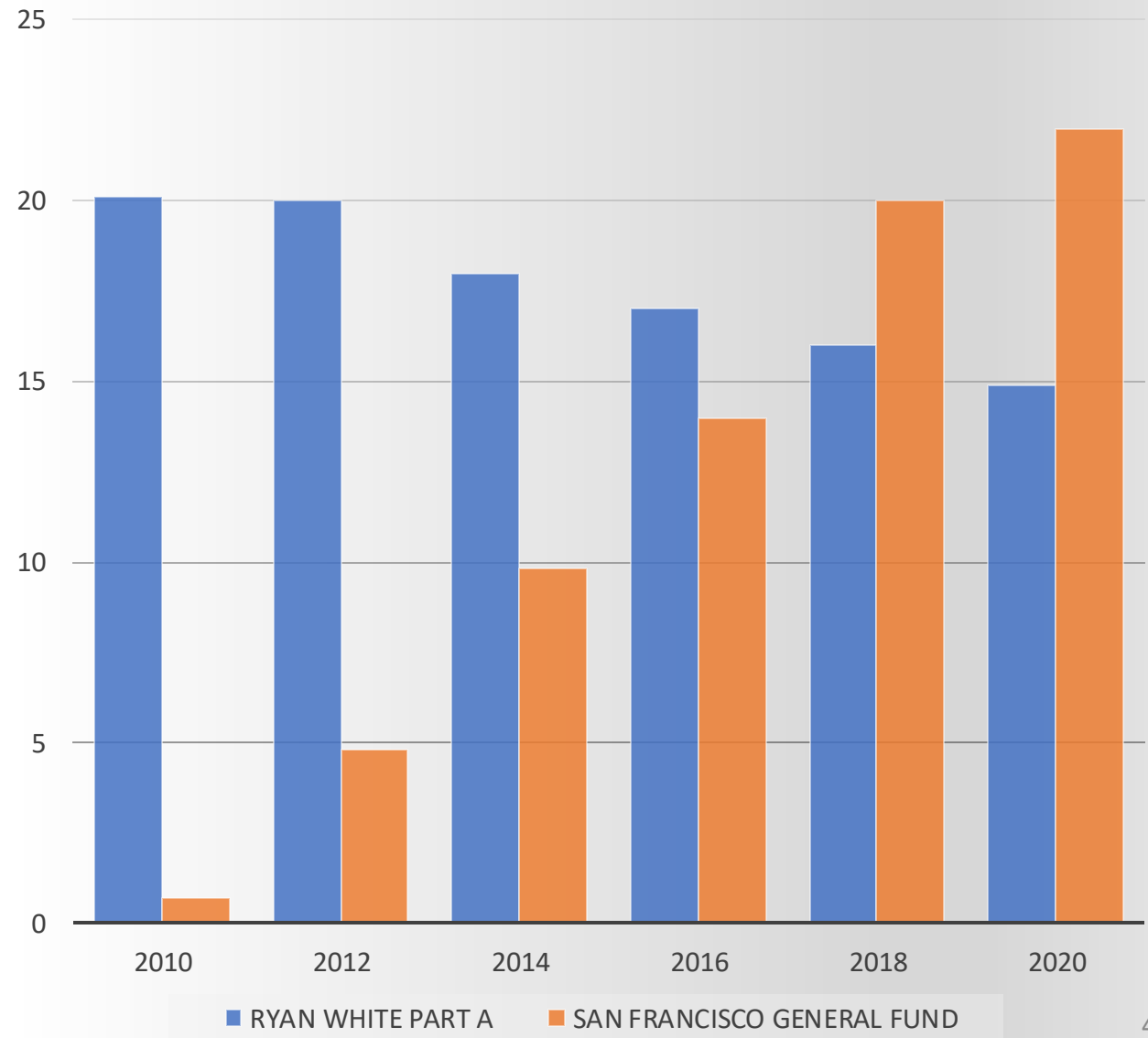
# How much San Francisco General Fund is used to supplement or expand federal-funded programs for HIV care?

## HHS TOTAL FUNDING - 2021

- SAN FRANCISCO GENERAL FUND TOTAL
- FEDERAL & STATE FUNDING TOTAL



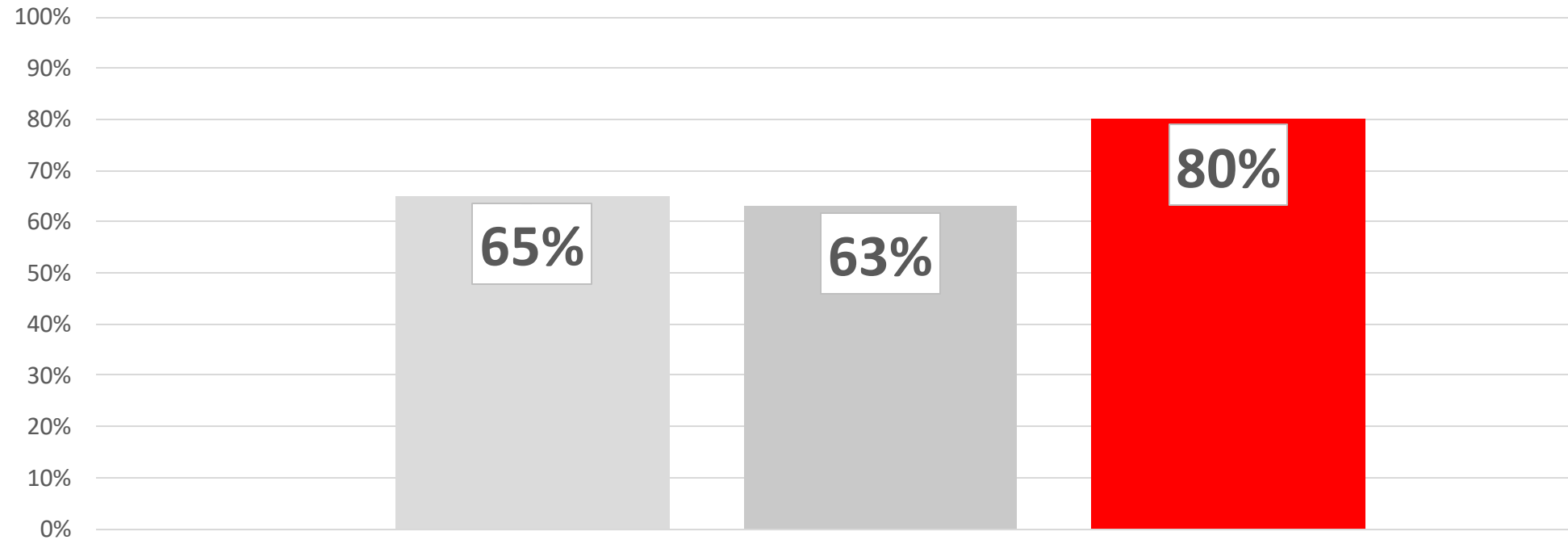
## HHS PROGRAMMATIC FUNDING (\$M)



# How are we meeting the challenges of HIV treatment for SFDPH patients?

Source: HRSA Surveillance Reports\*; California State Office of AIDS Surveillance Reports\*\*; ARIES Data System (4/28/2022)\*\*\*

## HIV Viral Suppression



**2020**

- Viral Suppression USA\*
- Viral Suppression California\*\*
- Viral Suppression receiving primary medical care funded by HHS\*\*\*



# Demographics changes of who is living with HIV/AIDS in San Francisco receiving funding through DPH

Source: ARIES Data System (4/28/2022)



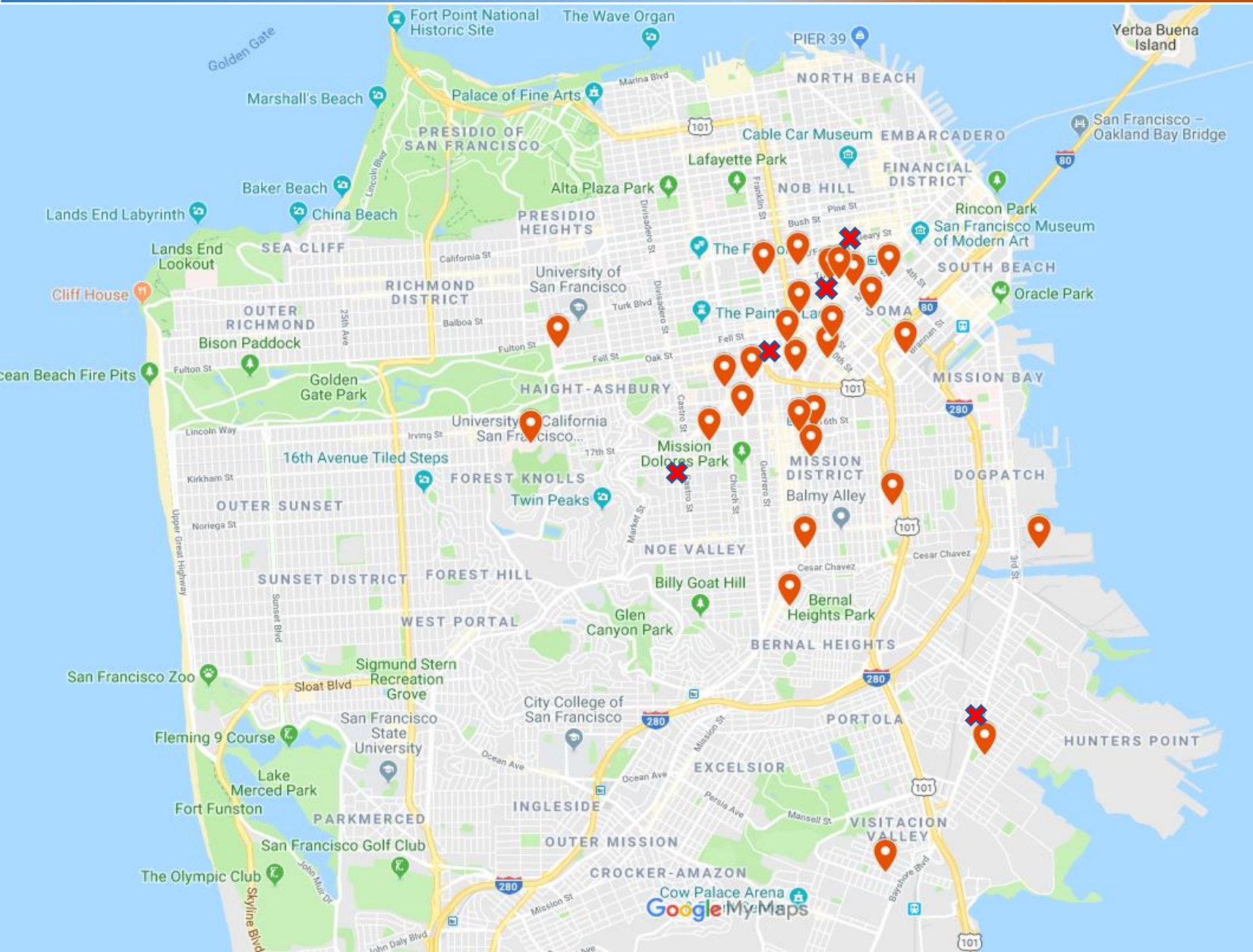
SFDPH HHS provided services to **5,845 individual clients** and primary medical care services to **3,231 clients in 2020**



OVER THE AGE OF 65	CIS & TRANS WOMEN	IDENTIFY AS A PERSON OF COLOR	NO STABLE / PERMANENT HOUSING	POVERTY LEVEL <200% of FPL
7.8% 2010	14.2% 2010	48.7% 2010	20.4% 2010	82.9% 2010
16.2% 2020	15.7% 2020	54.6% 2020	26.0% 2020	85.8% 2020

# Is our strategy meeting the needs of changing demographics?

*Map of DPH funded HIV Service Providers - Meeting clients where they reside*



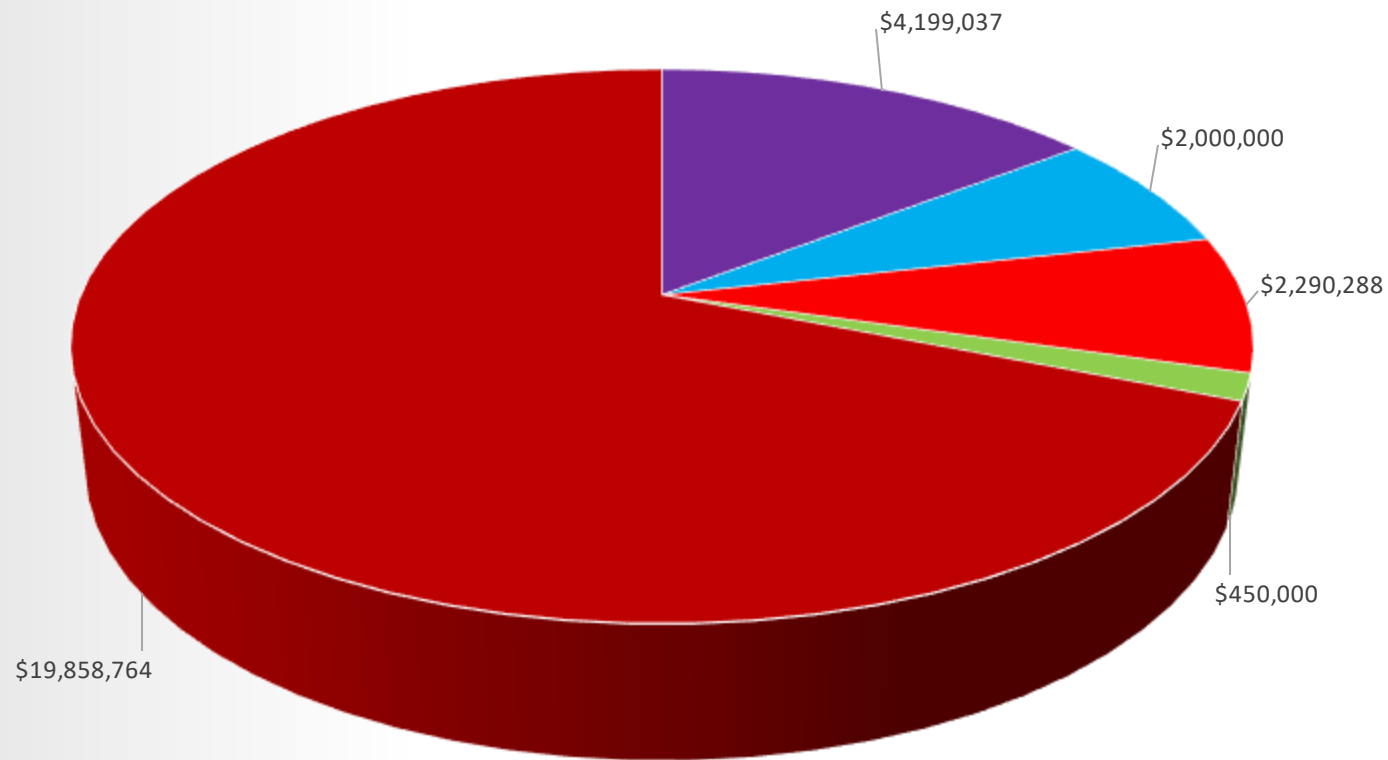
- AGUILAS
- AIDS Legal Referral Panel
- Alliance Health Project
- BAART
- Bayview Hunter's Point Foundation
- Castro-Mission Health Center
- Catholic Charities (multiple sites)
- City Clinic
- Community Awareness & Treatment Services
- Dolores Street Community Services
- Glide
- Harm Reduction Coalition (Oakland Headquarters)
- Health Right 360
- HIV Integrated Services
- Instituto Familiar de la Raza
- Larkin Street Youth Services
- Lutheran Social Services
- LYRIC
- Mission Neighborhood Health Center
- Native American Health Center
- Positive Resource Center
- Project Open Hand / AIDS Emergency Fund
- Rafiki Coalition
- San Francisco AIDS Foundation
- San Francisco Community Health Center
- Shanti
- South Van Ness Behavioral Health Services
- Southeast Health Center
- St Mary's - Dignity Health
- Tom Waddell Urban Health Center
- UCSF, Men of Color Program/PCC
- UCSF, Positive Health Program
- University of Pacific, School of Dentistry
- Westside Community Services

# How much federal funding does San Francisco receive? And has this changed?

Federal Funding: \$8,939,325    San Francisco General Fund: \$19,858,764    Total HIV Prevention Funding: \$28,798,089

## CHEP HIV Prevention Funding - 2021

- CDC Core Funding (Comp A)
- CDC Demonstration (Comp B)
- CDC Ending the Epidemic Comp A
- CDC Ending the Epidemic Comp C
- SF General Fund

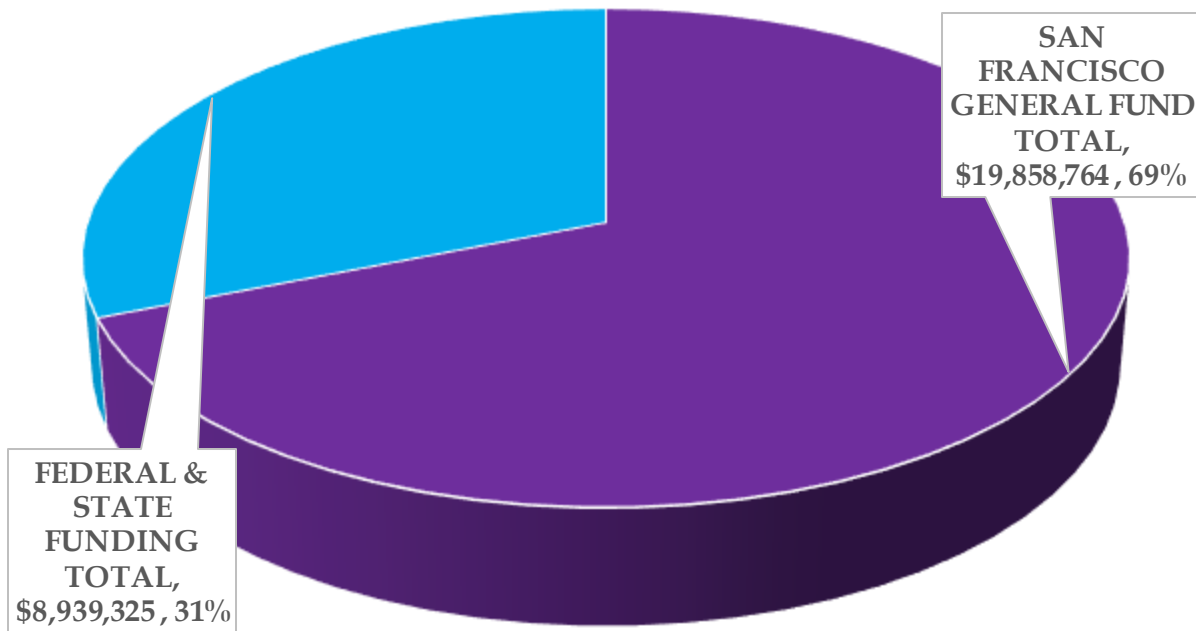




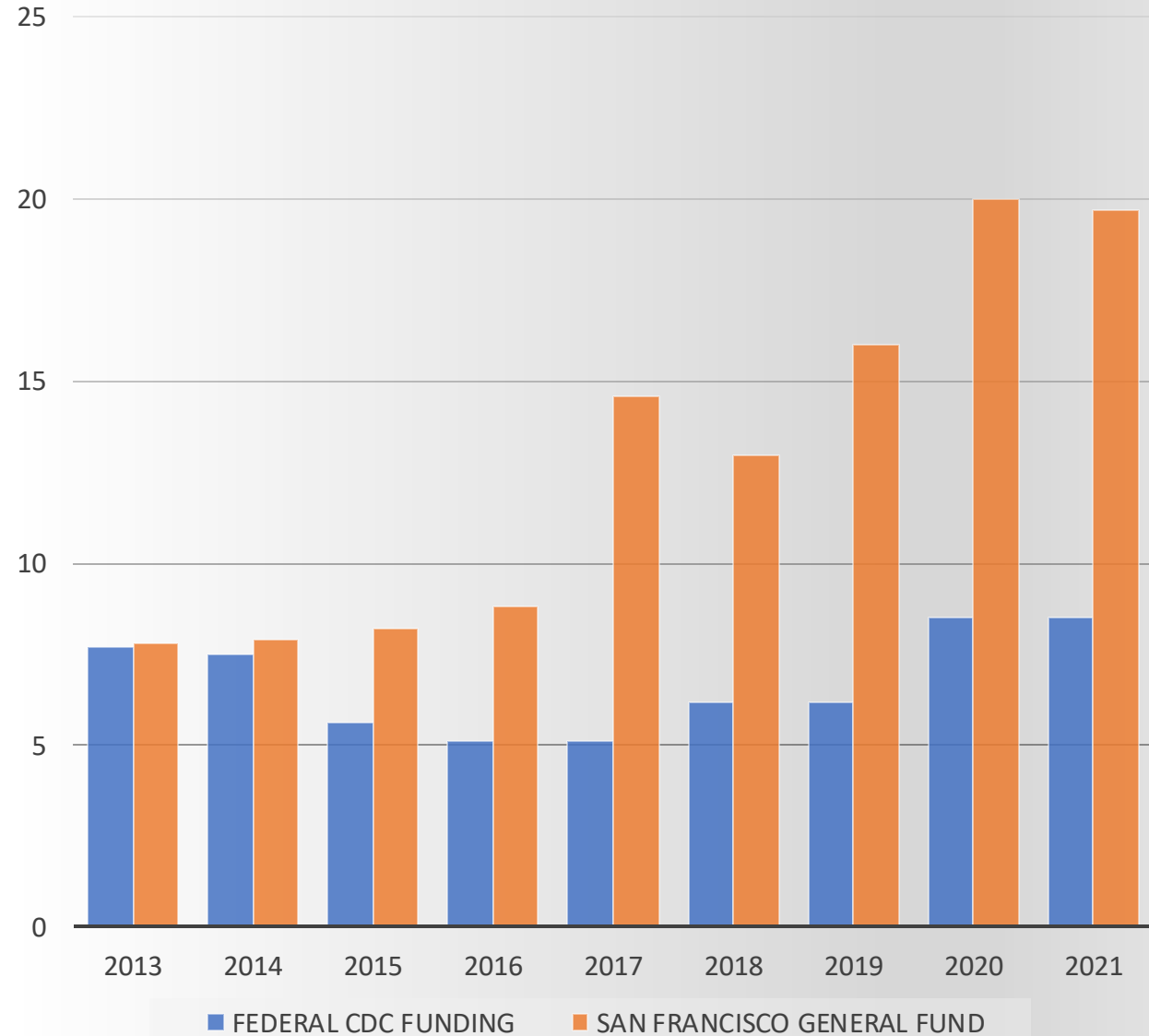
# How much San Francisco General Fund is used to supplement or expand federal-funded programs?

## CHEP TOTAL FUNDING - 2021

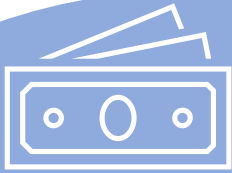
- SAN FRANCISCO GENERAL FUND TOTAL
- FEDERAL & STATE FUNDING TOTAL



## CHEP HIV PREVENTION FUNDING (\$M)



# What has changed due to prevention funding shifts and treatment and prevention advances?



## Impact of Changes

- Improved HCV and HIV treatment, testing, U=U, PrEP
- Opportunities for integration of HCV/STI
- Improved health outcomes
- Persistent inequities
- Need for intensive efforts towards “high acuity” populations to test, link, and maintain in care
- Workforce

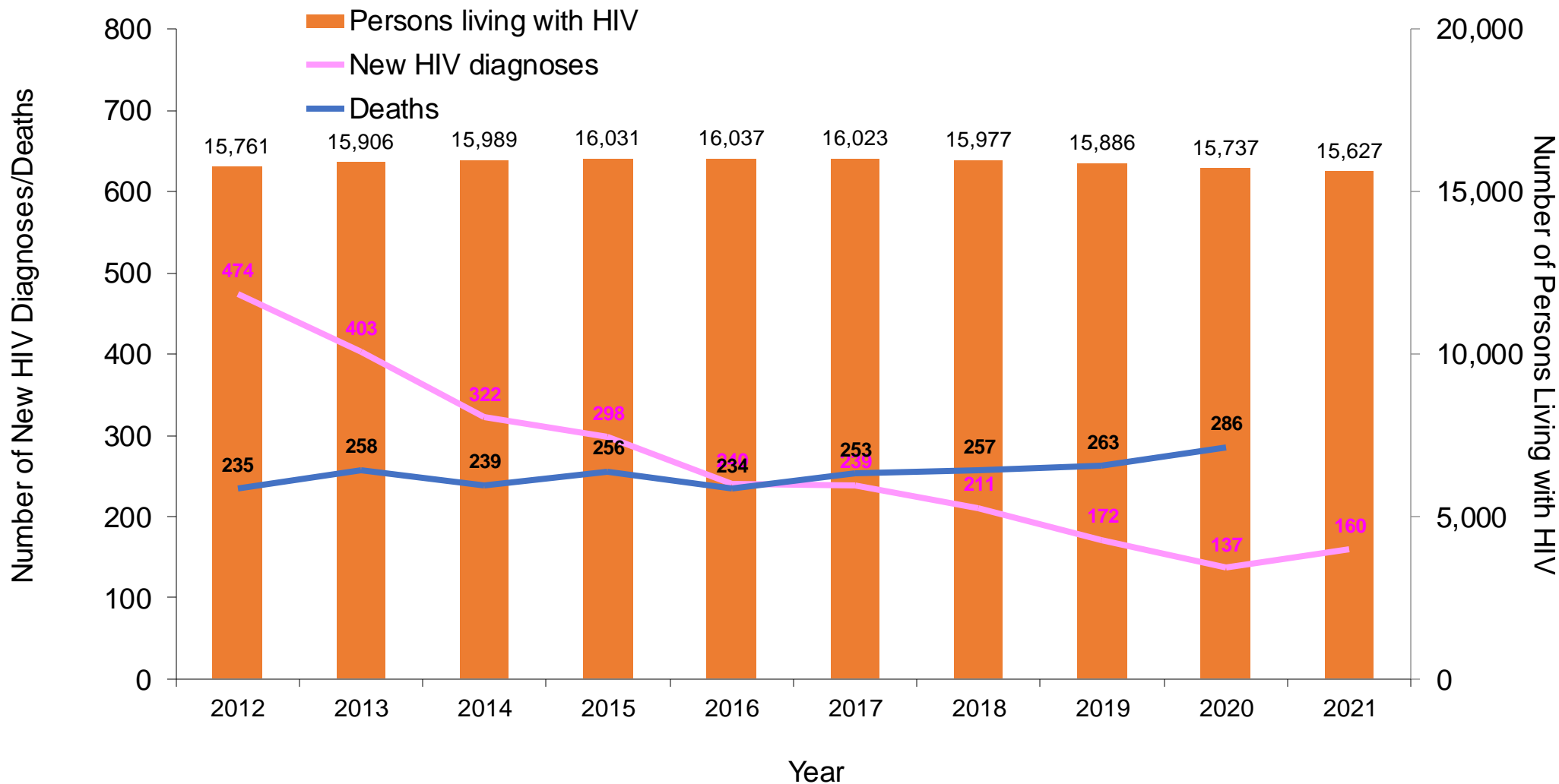


- **Ending The Epidemics Funding**
- **CDC Comp B (ends 12/31/22)**
- **San Francisco General Fund Getting to Zero**
- **San Francisco Board of Supervisors Backfill**



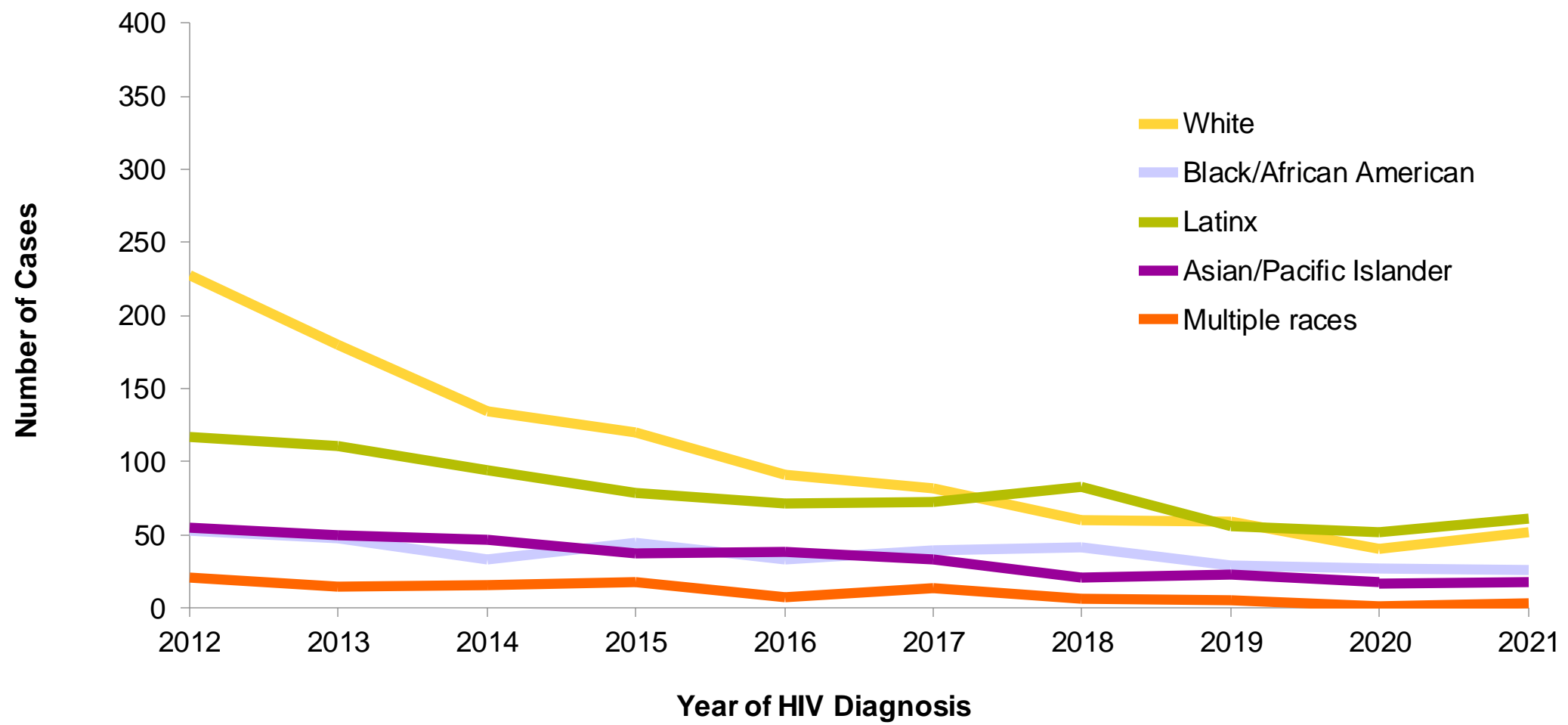
- **Decrease of 50% of CDC HIV Prevention funding in 2012 due to changes in formula**

# New SF HIV diagnoses, deaths, and prevalence, 2012-2021



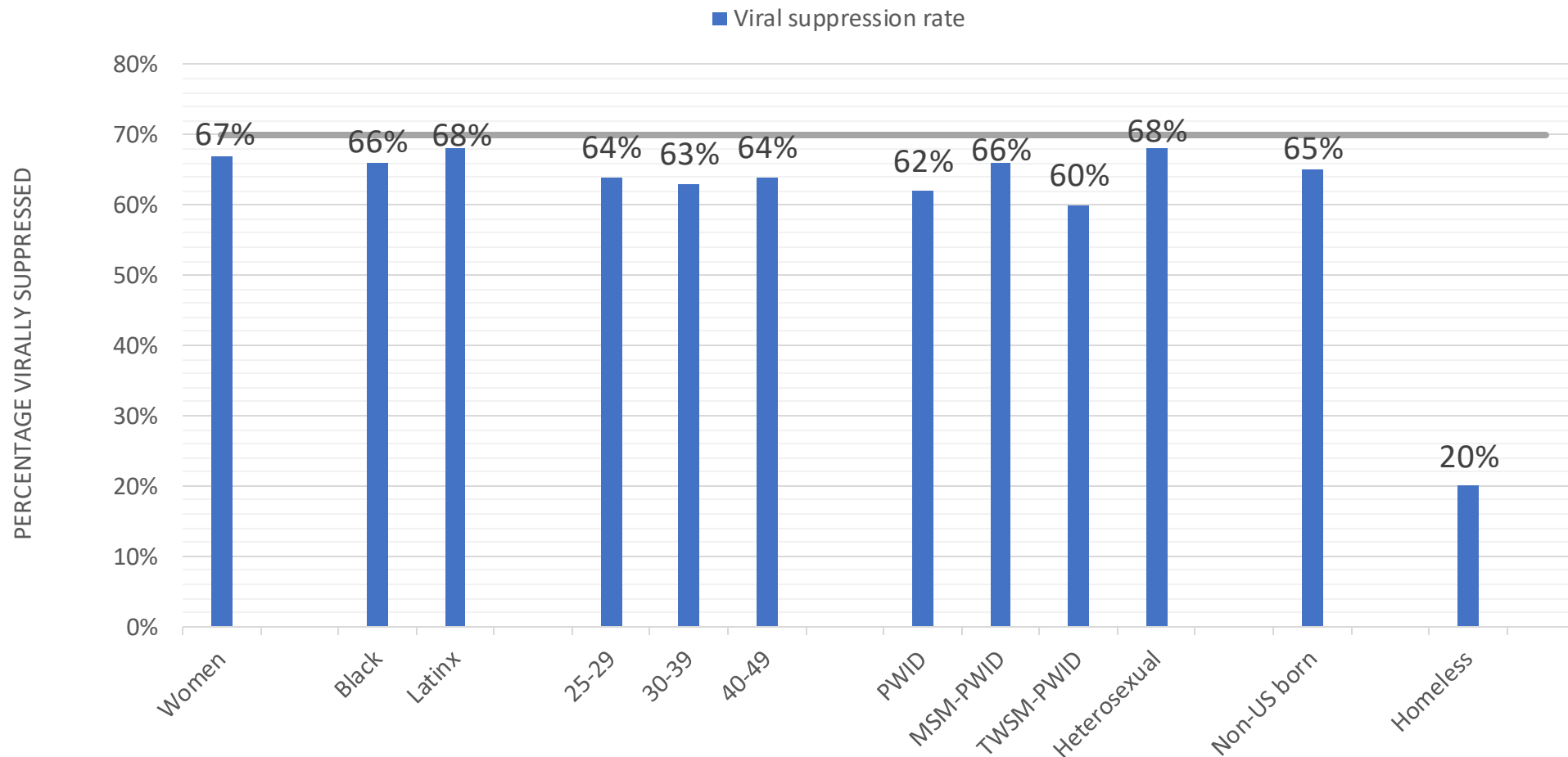
# Have the demographics of people diagnosed with HIV/AIDS changed in San Francisco ?

## Diagnosis Trends by Race/ethnicity, 2012-2021



# Which groups are not equally benefitting from prevention and care ?

## Disparities in Viral Suppression – PLWHA 2020



# Community Engagement Process: what prevention and care services are needed to achieve goals?

**Held robust community engagement process, 19 meetings and over 160 participants:**

## **Community-Centered Approach/ Integrated Services**

- Directly address **social determinants of health** (e.g., housing, mental health) among people living with and at risk for HIV/HCV/STD.
- Fully **integrate HIV, HCV, STI, and harm reduction**.
- Ensure that prevention, care, and treatment systems operate with a **racial justice/racial equity** lens.

Ensure **equitable access to services, including low-threshold/low barrier services** for populations experiencing health disparities

Incorporate **workforce development and community capacity-building** efforts into systems and services.

Include **community voices and qualitative lived experience** in all aspects of planning, program design, implementation, and service delivery.

Implement **person-centered** (not disease-centered services) to improve client experience and health outcomes

# **Outcome of Community Engagement Process: Health Access Points (HAP)**

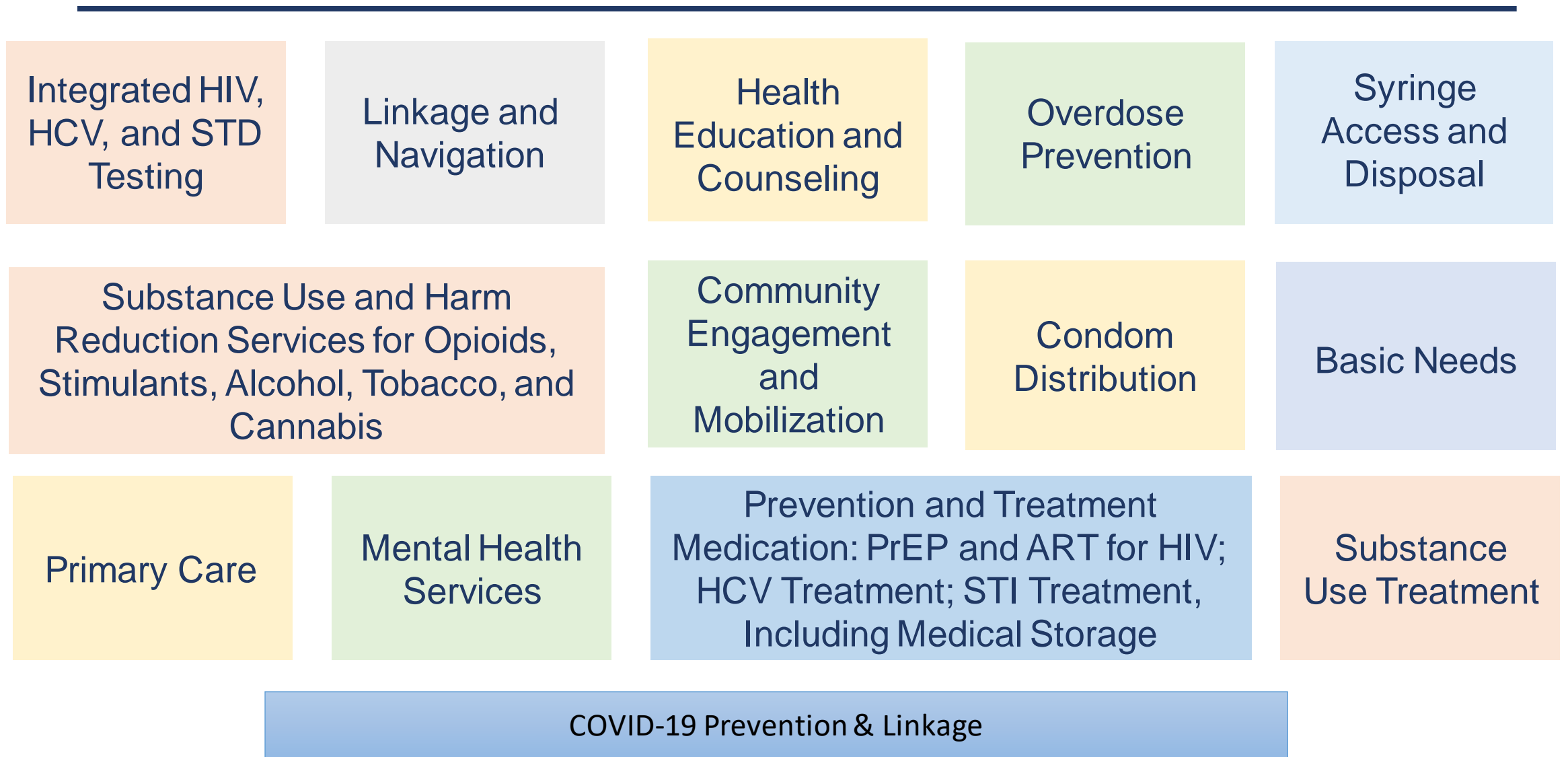
*An Equity Focused, Community Centered, Whole Person Care Approach to Integrated HIV, HCV, and STD Prevention Programs for Affected Communities*

## **Priority Communities:**

- **Latinx**
- **Black/African American**
- **Asian and Pacific Islanders**
- **Gay Men and other MSM**
- **Trans Women**
- **People Who Use Drugs**
- **Youth/Young Adults**

- **Equity focused, community-centered, whole person care approach, addresses stigma, welcoming, and culturally appropriate**
- **Focus on populations with the greatest disparities are that result in disproportionate levels of HIV, HCV, and STI**
- **Integration of HCV and STI with HIV**
- **Increased emphasis on harm reduction services**
- **Low barrier access**
- **Enhanced community engagement**
- **Collaborative approach across all programs and providers**
- **Incorporates COVID-19**

# Health Access Points (HAP) Services





# THANK YOU!

