

Antelope Valley: A Community Rising to End HIV

A World AIDS Day Event sponsored by
Supervisor Kathryn Barger and the
Los Angeles County Commission on HIV

Bartz-Altadonna Community Health Clinic
Lancaster, CA 93535

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HIV Research to Practice in Los Angeles County

3rd National EHE Partnerships for Research Meeting
University of California at Los Angeles
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Mario J. Pérez, MPH
Director, Division of HIV and STD Programs
Los Angeles County Department of Public Health





Key Takeaways

We must end multiple epidemics to End the HIV Epidemic.

We must transform healthcare delivery systems and adapt to changes in health care consumption patterns (beyond health care settings); we can't expect our priority pops to adjust to these systems.

We must start a 10-year national MH/SW/SUD Specialist workforce recruitment, development and training program (e.g., Teach for America, Peace Corps). HIV is increasingly concentrated among persons MH and SU disorders.

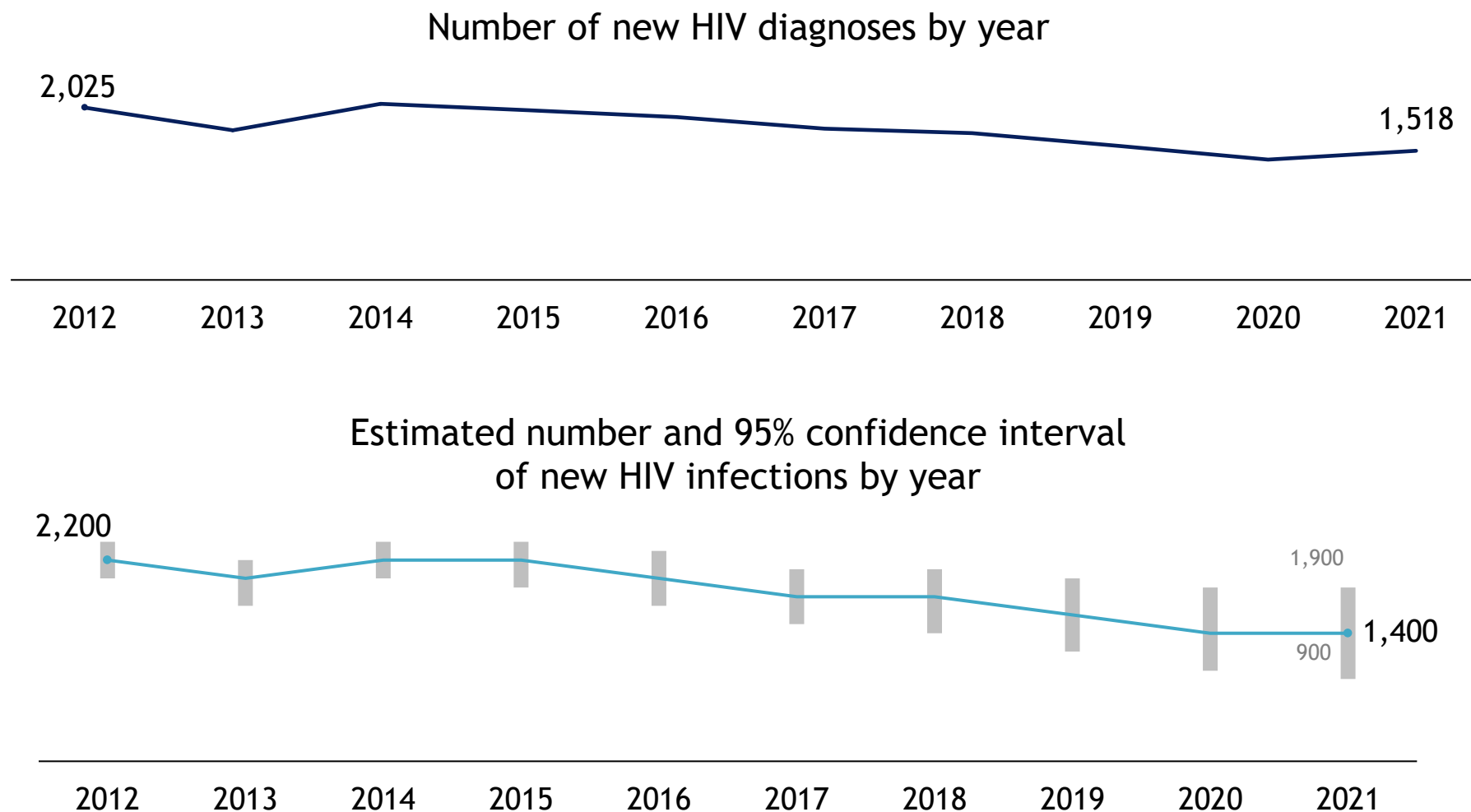
We must change the way we collect data, use data (integrated surveillance systems), and share data with frontline providers (e.g., D2C).

We must expand partners, train partners (detailing, learning collabs, action kits), retain partners.

We must change financing schemes, broaden list of allowable expenses (e.g., CM, EFA, GBI) and coordinate categorical investments and performance expectations between local, State and federal partners. We must push boundaries and disrupt dysfunctional systems of care.



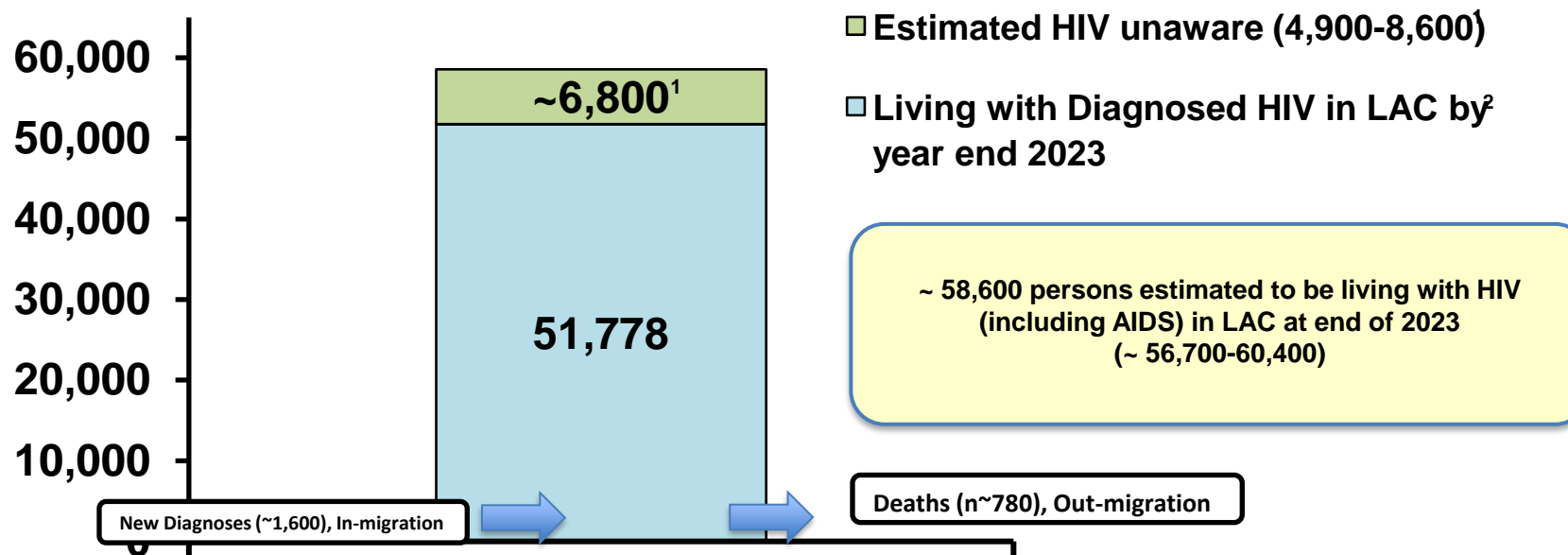
Number of persons newly diagnosed with HIV compared with the estimated number of persons with new HIV infection among PLWH aged ≥ 13 years, LAC 2012-2021^{1,2}



Abbreviation: PLWH = persons living with HIV

¹ Estimates based on the CD4-Based Model v4.1 developed by CDC, which derived by using HIV surveillance and CD4 data for persons aged ≥ 13 years at diagnosis. Estimates rounded to the nearest 100 for estimates of $>1,000$ and to the nearest 10 for estimates of $\leq 1,000$ to reflect model uncertainty.

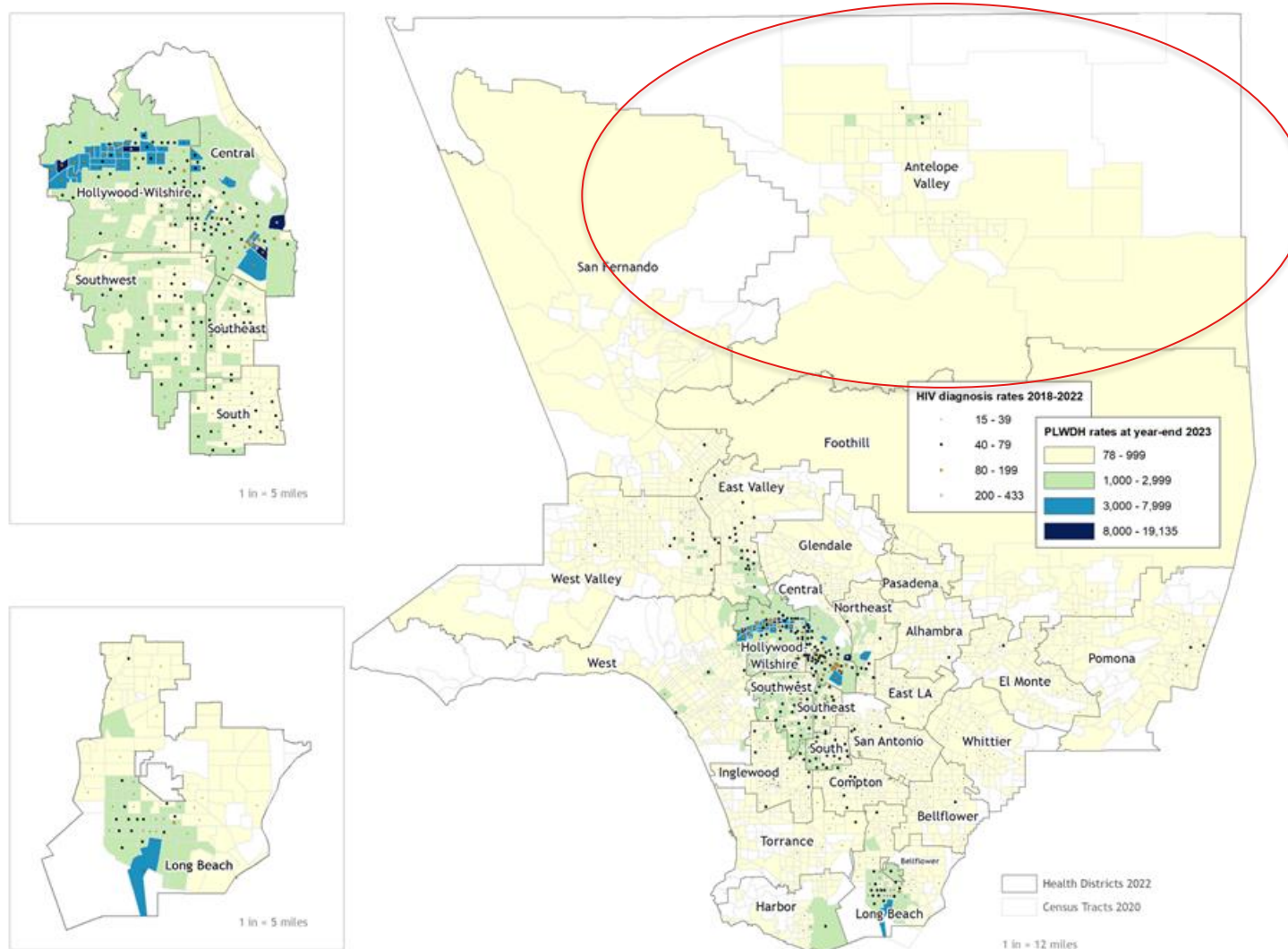
Estimated Number of Persons aged 13+ years Living with HIV in LAC at Year end 2023



¹ Estimates derived from CDC's CD4 depletion model, Song R, Hall HI, Green TA, SzwarcwaldCL, PantazisN. Using CD4 data to estimate HIV incidence, prevalence, and percent of undiagnosed infections in the United States. *J AcquirImmune DeficSyndr*2017;74(1):3-9. doi:10.1097/QAI.0000000000001151. Estimate is for 2021 but is being used until the 2023 estimate is available.

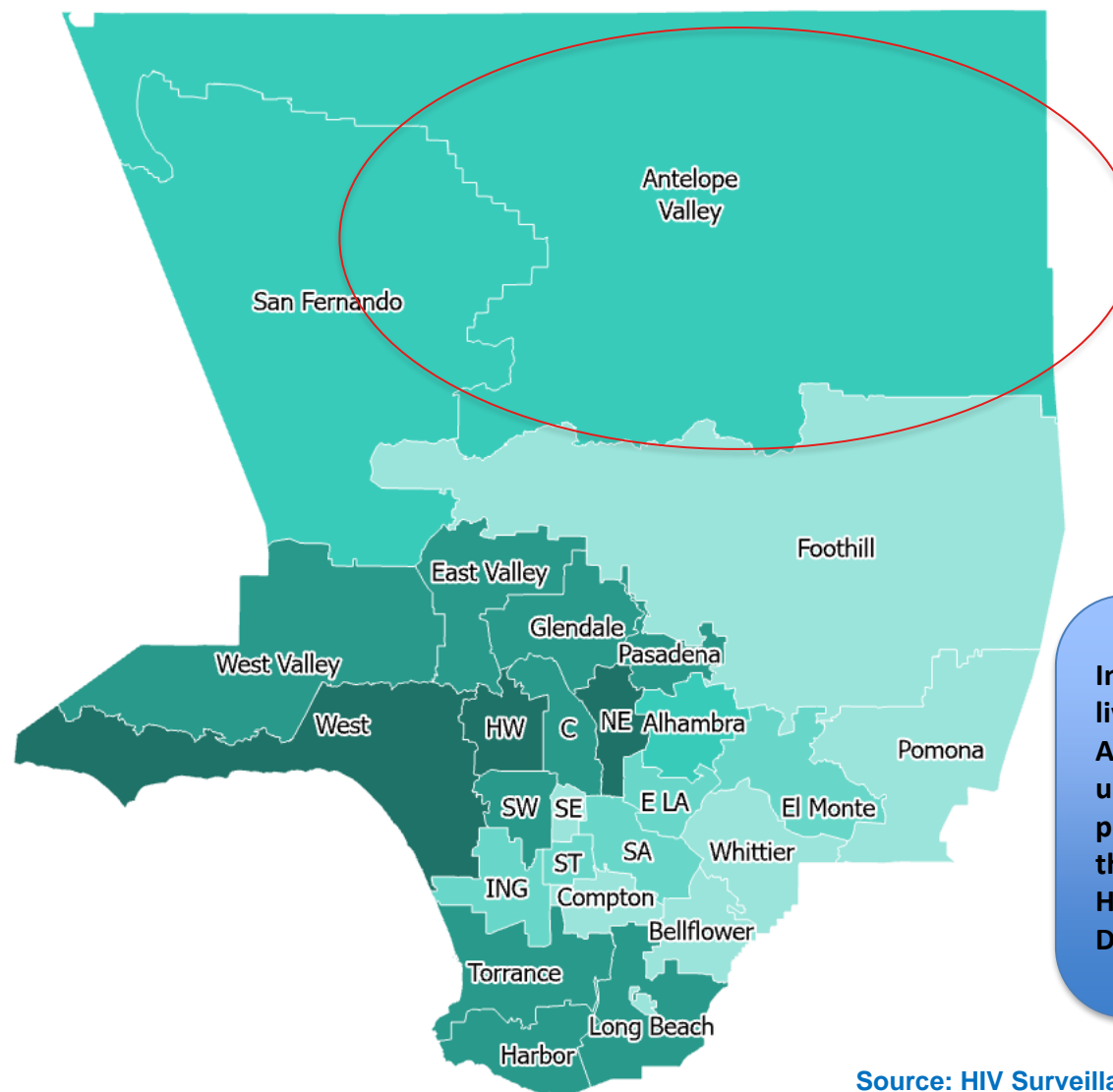
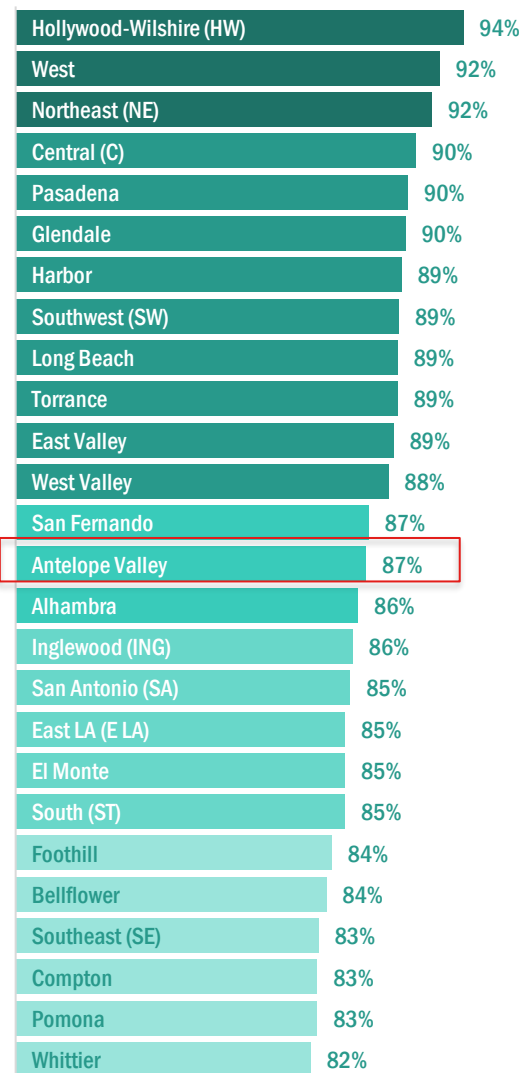
² Includes persons diagnosed with HIV and living in LAC based on most recent known address as of 12/31/2023.

Geographic distribution of rates per 100,000 population for PLWDH aged ≥ 13 years at year-end 2023 and persons newly diagnosed with HIV in 2018-2022, LAC



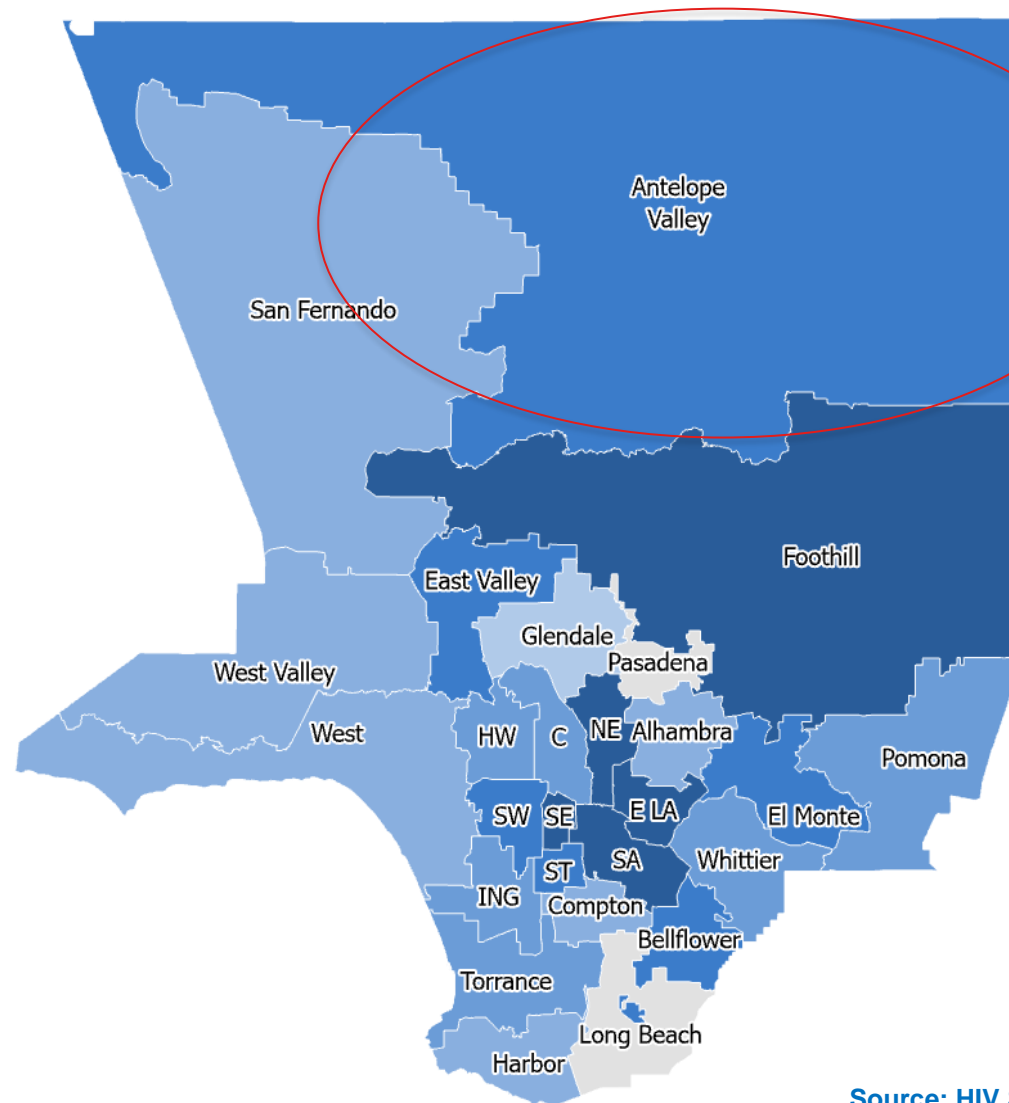
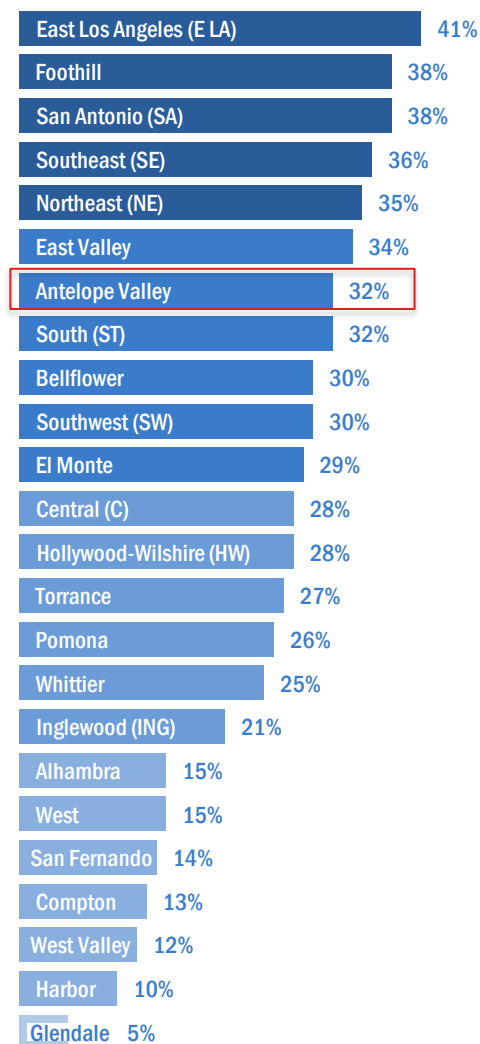
2023 Rates of PLWDH in Antelope Valley HD are markedly lower compared with the LAC HDs with the highest HIV rates (Antelope Valley HD: 358/100,000 vs Hollywood Wilshire HD 2,138/100,000)

Percentage of PLWH aged ≥ 13 years who were aware of their HIV-positive status by Health District, LAC 2022



In 2022, 13% of persons living with HIV in the Antelope Valley were unaware of their HIV-positive status, over double the percent unaware in the Hollywood-Wilshire Health District (6%).

Percentage of persons newly diagnosed with HIV aged ≥ 13 years who had syphilis in the same calendar year as HIV diagnosis by Health District, LAC (excluding Long Beach and Pasadena) 2022



In 2022, in the Antelope Valley, nearly 1 in 3 persons newly diagnosed with HIV was also diagnosed with syphilis, compared to only 1 in 20 persons in the Glendale Health District.

Early Syphilis Rates by Health District and SPA Los Angeles County, 2021

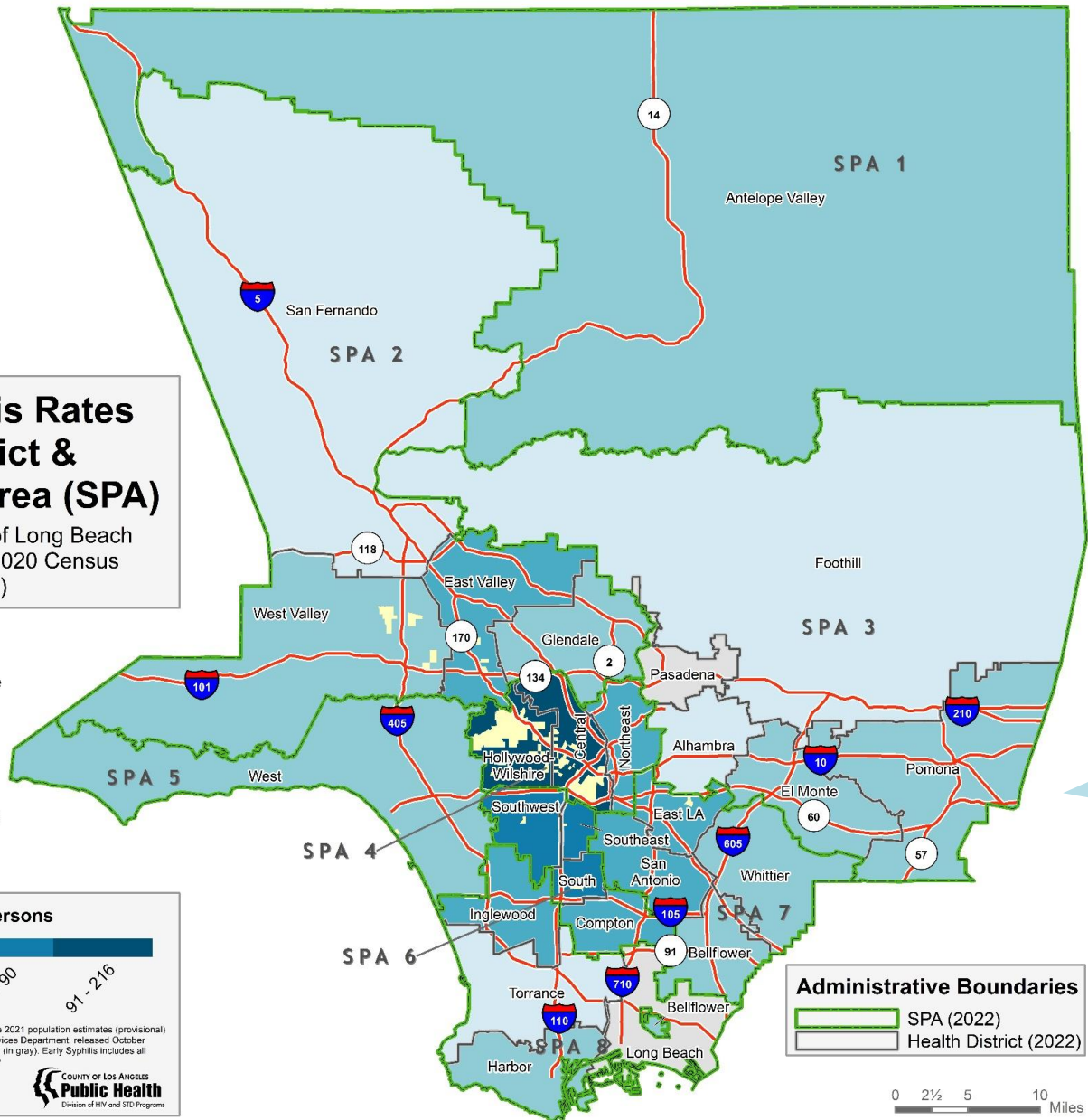
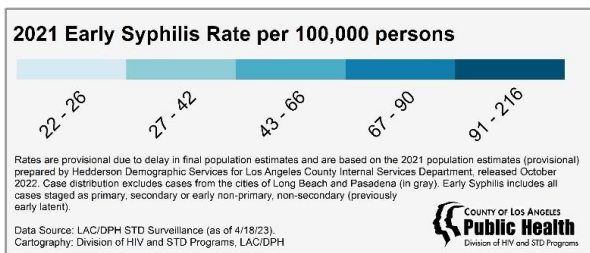


Revised: 7/24/2023

2021 Early Syphilis Rates by Health District & Service Planning Area (SPA)
(excludes data from the cities of Long Beach and Pasadena and includes 2020 Census Tracts of interest*)

* Census tracts with ≥ 12 cases and a population > 100 are symbolized by pale yellow. These areas in SPA 4, 2 and 6 should be prioritized when designing geographic-based interventions.

Census tract with stable rates (Range: 198 - 1,948 per 100,000 persons)



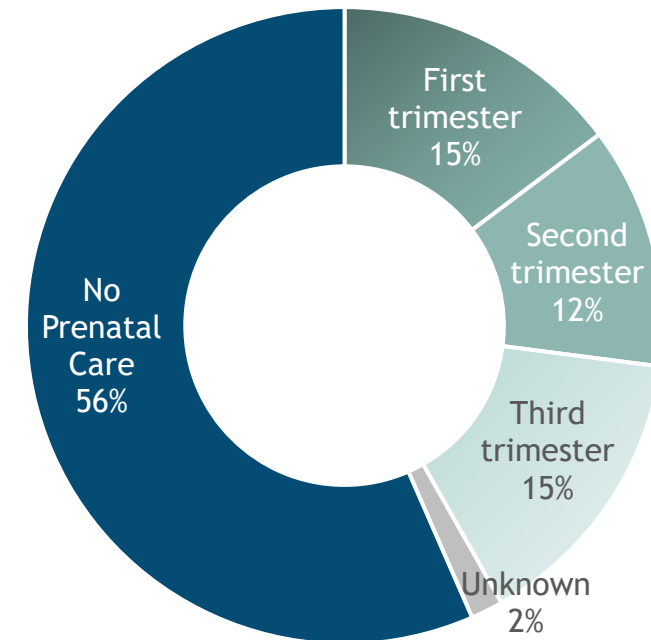
During 2021, rates of early syphilis were highest in Hollywood-Wilshire, Central, South, and Southwest.

Administrative Boundaries
 SPA (2022)
 Health District (2022)



- 124 Congenital syphilis cases
 - 18 stillbirths
- 40% reported unstable housing
- 34% history of incarceration
- 62% reported substance use
 - methamphetamine most common
- >2/3 had late or no prenatal care

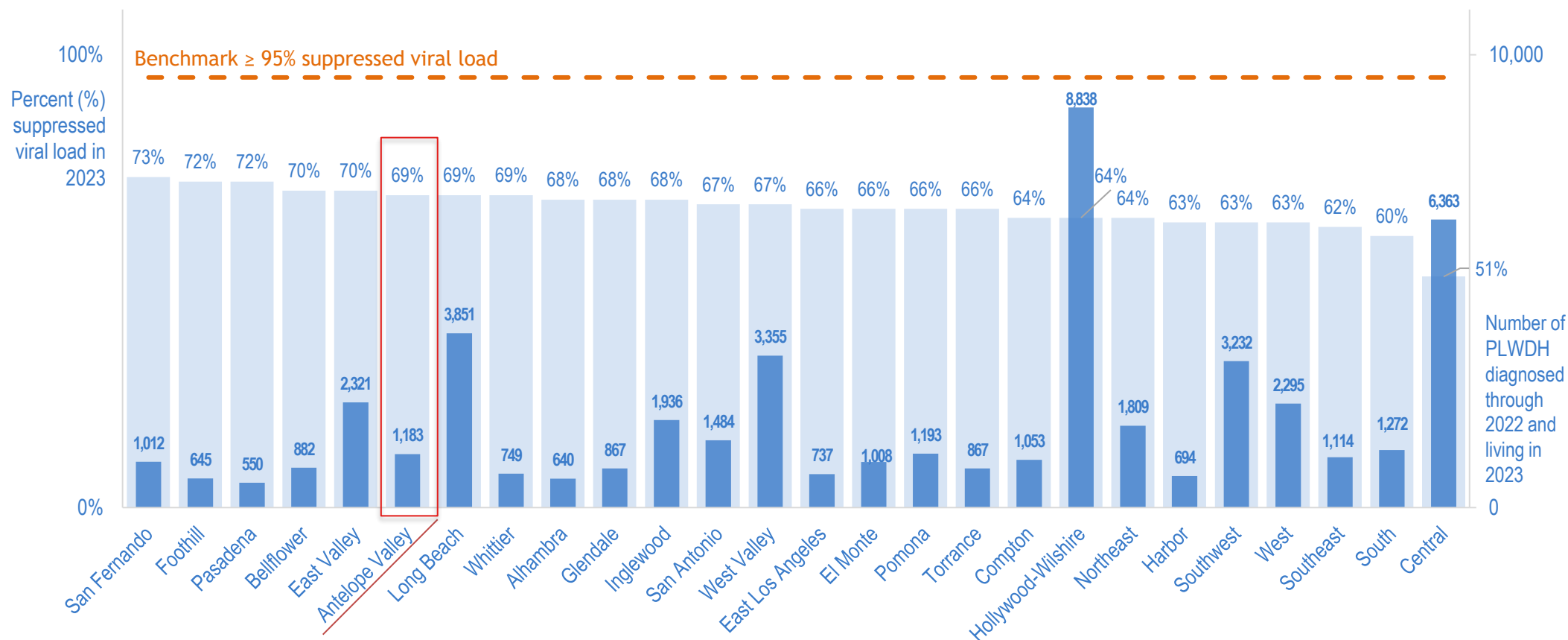
Entry into Prenatal Care



- Interventions must extend beyond healthcare settings



Suppressed viral load by Health District among persons aged ≥ 13 years diagnosed through 2022 and living in LAC at year-end 2023,^{1,2} LAC 2023



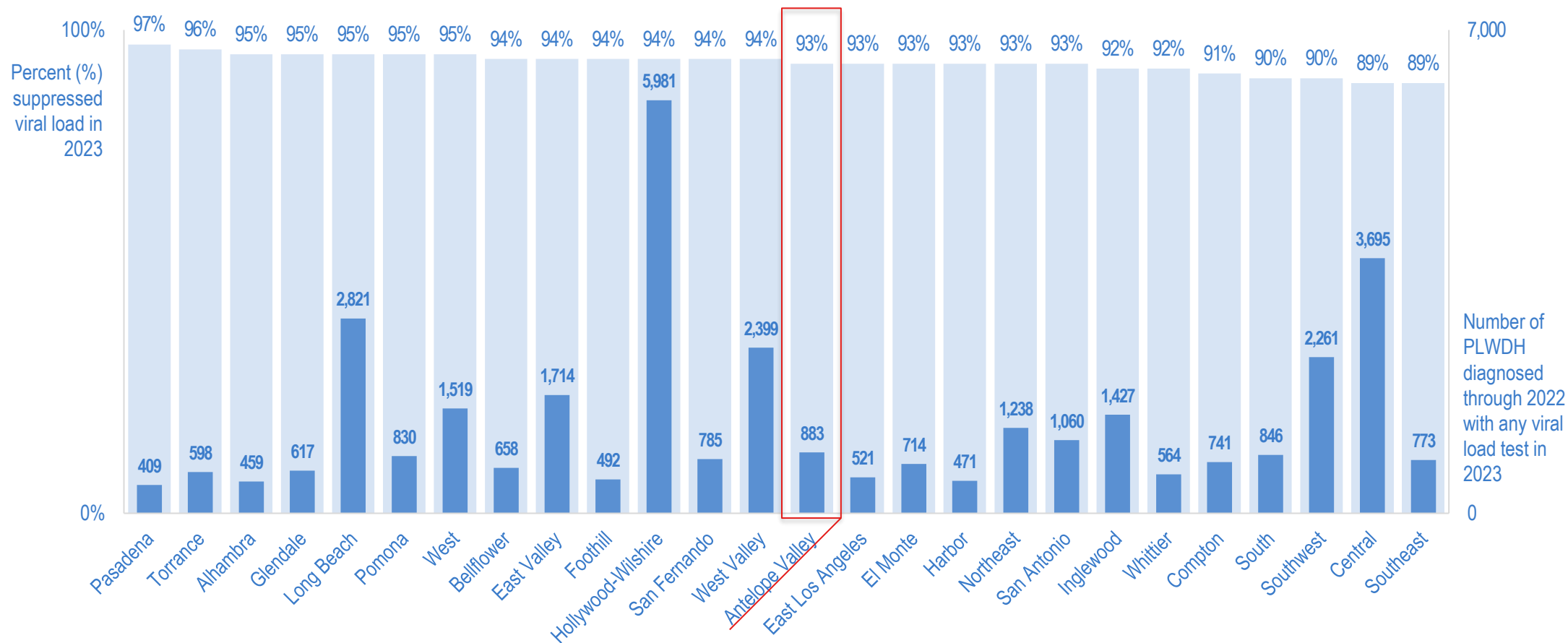
Abbreviation: PLWDH = persons living with diagnosed HIV

¹Suppressed viral load: numerator includes PLWDH whose last VL test in 2023 was suppressed (HIV-1 RNA < 200 copies/mL); denominator includes PLWDH diagnosed through 2022 and living in LAC at year-end 2023 based on most recent residence. PLWDH without a VL test in 2023 were categorized as having unsuppressed viral load.

²Health Districts are based on 2022 boundaries. Persons are assigned a Health District using their geocoded residence at diagnosis joined to census tract 2020, followed by their ZIP Code if no valid residence at diagnosis was available. The correspondence tables were provided by LAC DPH Information Management and Analytics Office, Office of Health Assessment and Epidemiology, GIS Unit team.



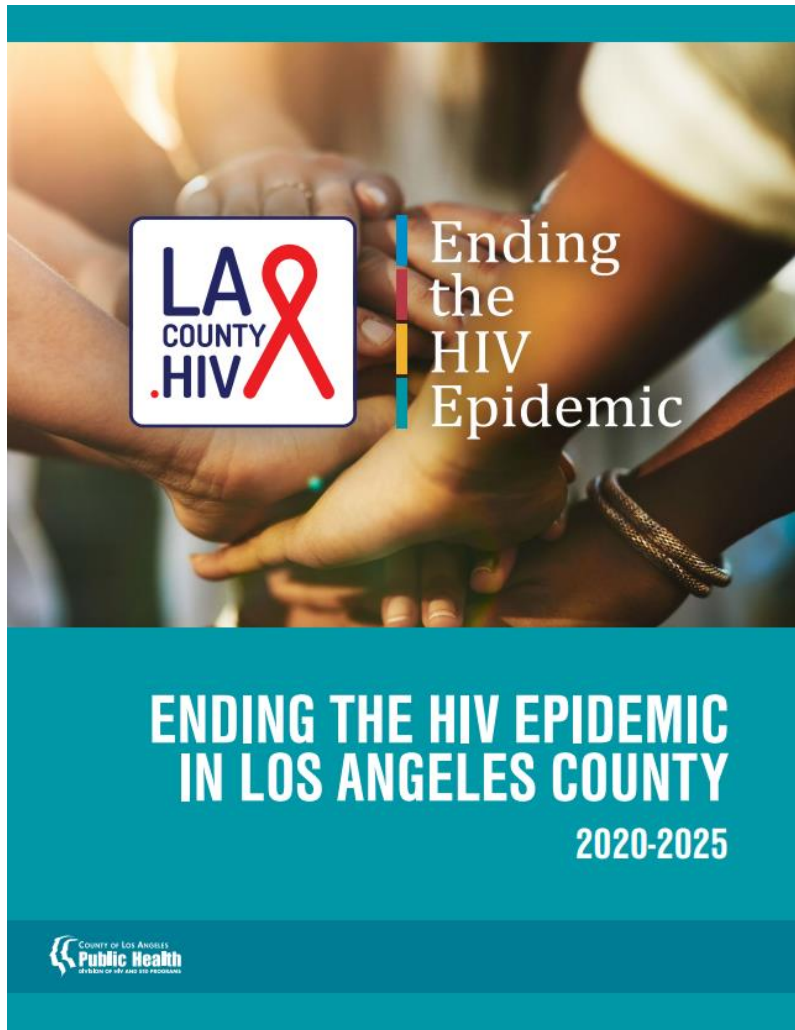
Suppressed viral load among persons aged ≥ 13 years receiving HIV care and who had any viral load test in 2023 by Health District, LAC 2023^{1,2}



Abbreviation: PLWDH = persons living with diagnosed HIV

¹Suppressed viral load: numerator includes PLWDH whose last VL test in 2023 was suppressed (HIV-1 RNA < 200 copies/mL); denominator includes PLWDH diagnosed through 2022 and living in LAC at year-end 2023 based on most recent residence who had any viral load test in 2023. PLWDH without a VL test in 2023 were categorized as having unsuppressed viral load.

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Priority Populations

- Black/African American men who have sex with men (MSM)
- Latinx MSM
- Ciswomen of color
- People who inject drugs and/or with substance use disorder
- People of trans experience
- Youth under 30 years of age

EHE website: www.LACounty.HIV

Snapshot of EHE Strategies and Programs



Diagnose

- HIV self-testing
- Increased HIV testing in non-healthcare settings
- Routine testing in healthcare settings



Treat

- Rapid and Ready Program
- iCARE Program (Contingency Management)
- Mental health/trauma informed services
- Intensive case management for pregnant persons with HIV
- Evidence based interventions



Prevent

- Expand PrEP service delivery
- TelePrEP
- Provider education
- Media campaigns
- Pharmacies as PrEP access points



Respond

- Cluster Detection and Response
- Statewide Community Advisory Board
- Data to Action efforts
- Community Health Ambassador Program

Cross
Cutting
Strategies

- Community mobilization and engagement
- Social media influencer partnerships
- HIV workforce development (skills building, leadership development, self-care)
- Mini-grants & Innovation awards
- Financial assistance programs

Antelope Valley Community-Based Partner Overview



Tarzana Treatment Centers

- Substance Abuse Transitional Housing: 1 house
- MCC Services: Palmdale
- AOM Services: Palmdale



Wesley Health Centers (also known as JWCH Institute)

- Oral Health: Lancaster and Palmdale
- Biomedical HIV Prevention
- Data to Care (EHE)

Antelope Valley Community-Based Partner Overview (continued)



AHF (AIDS Healthcare Foundation)

- AOM Services: Lancaster
- MCC Services: Lancaster



Bartz-Altadonna Community Health Center

- Ending the HIV Epidemic (EHE) Innovation Grant: Lancaster



Thank You!