



2020: RISING ABOVE THE CHALLENGE

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LOS ANGELES COUNTY
COMMISSION ON HIV



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 **Ending
the
HIV
Epidemic**



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VISION AND MISSION STATEMENTS

VISION

A comprehensive, sustainable, accessible system of prevention and care that empower people at risk, living with or affected by HIV to make decisions and to maximize their lifespans and quality of life.

MISSION

The Los Angeles County (LAC) Commission on HIV (COH) focuses on the local HIV/AIDS epidemic and responds to the changing needs of people living with HIV/AIDS (PLWHA) within the communities of Los Angeles County. The COH provides an effective continuum of care that addresses consumer needs in a sensitive prevention and care/treatment model that is culturally and linguistically competent and inclusive of all Service Planning Areas (SPAs) and Health Districts (HDs).

ROLES AND RESPONSIBILITIES

The Los Angeles County Commission on HIV (COH) serves as the local planning council for the planning, allocation, coordination and delivery of HIV/AIDS and Sexually Transmitted Diseases (STD) services.

The COH is composed of 51 members appointed by the Board of Supervisors (BOS) and represent a broad and diverse group of providers, consumers, and stakeholders. Thirty-three percent of the membership are people living with HIV who are consumers of the federally funded Ryan White Program.

As an integrated planning body for HIV/STD prevention and care services in Los Angeles County, through its five standing committees (Executive, Operations, Planning, Priorities and Allocations (PP&A), Public Policy, and Standards & Best Practices (SBP), the COH is responsible for:

- Setting care/treatment priorities/allocations
- Developing a comprehensive prevention and care plan
- Assessing the administrative mechanism of service delivery
- Evaluating service system effectiveness
- Service coordination
- Conducting needs assessments
- Setting minimum service standards/outcomes
- Defining ways to best meet the needs
- Resolving service system grievances
- Promoting the availability of services
- Evaluating other streams of funding
- Advising the BOS on all County HIV and STD funding
- Policy development and advocacy work
- Advising the Board on other HIV and STD-related matters



2020: RISING ABOVE THE CHALLENGE

2020 was a year like no other in the recent history of mankind. The year was marked by several global challenges, leading with the devastating impact of the novel coronavirus (COVID-19) pandemic and the nation's reckoning with the ills of racism anti-Blackness in America and beyond. COVID-19 laid bare before our eyes what the HIV movement has recognized as the biggest wall preventing our victory over HIV - racism is the root cause of health and social disparities. The same communities of color who have overwhelmingly shouldered the burden COVID-19 infections, deaths, and hospitalizations, are the same communities that suffer from HIV and STDs the most. At the end of 2018, approximately 0.6% of the 10.3 million Los Angeles County (LAC) residents were living with HIV. The group with the plurality of people with HIV (PWH) are Latinx cisgender men who have sex with men (~40%), followed by White cisgender men who have sex with men (26%), followed by Black/African-American cisgender men who have sex with men (23%).¹ The balance of males with HIV are injection drug users of multiple racial/ethnic groups as well as cisgender American Indian/Alaskan Native, Asian or Pacific Islander men who have sex with men. Black/African American males, female and transgender persons and American Indian/Alaskan Native males are disproportionately impacted with HIV compared to their share of the LAC population.

Despite the unprecedented events of 2020, the COH rose above the challenges of the pandemic and made notable accomplishments in moving closer to ending the HIV epidemic, once and for all. The Commissioners showed exemplary leadership in their courageous counter-response to the novel coronavirus. In the midst of the COVID-19 pandemic, the fight to end the HIV/AIDS pandemic which started in the 1980s, continues to ravage communities. With the biomedical and treatment advances accrued over the years to fight HIV, we can no longer excuse another day and another case of HIV. We have the tools to prevent HIV and keep those living with HIV, healthy and thriving. The COH 2020 Annual Report reflects upon its key 2020 accomplishments in acknowledgement of the core values that have sustained the HIV movement.

#STRONGERTOGETHER: RAPID MOBILIZATION AND RESPONSE TO THE COVID-19 PUBLIC HEALTH EMERGENCY

The COH cancelled its March 13, 2020 in-person meeting out of abundance of caution due to the growing cases of the novel coronavirus. Commissioners, staff, and stakeholders swiftly mobilized to care for themselves and connected with friends and community members to ensure their safety and access to essential supplies for the duration of the shelter in place order. Commissioners affiliated with medical clinics, acted quickly to protect their staff, and maintain critical services for PWH and communities at risk for HIV, STD, and COVID-19. Collectively, the Commission contributed to a stronger public health response as evidenced by the following key accomplishments:

- The COH, in partnership and consultation with the DHSP and local HIV service organizations, developed a letter to the community offering medical advice and resources to help promote and protect the health and safety of people living with HIV (PLWH) in response to the novel coronavirus pandemic. The letter, published in English and Spanish, was much needed and reached over 6,000 individuals through the COH's listserv, website and social media platforms. (Novel Coronavirus, COVID-19 and People Living with HIV A Message to the Community and Our Partners March 16, 2020)

¹ Division of HIV and STD Programs, Department of Public Health, County of Los Angeles. HIV Surveillance Annual Report, 2019. Published May 2020. <http://publichealth.lacounty.gov/dhsp/Reports.htm>. Accessed 1/5/21.

- Service calls for maintaining access HIV medicines and care increased around the initial rounds of shelter in place orders. In response, staff reorganized the COH and HIV Connect websites to publish a series of COVID-19 information bulletins to keep the community informed of critical resources, such as medical care, social services, and other public health messages. ([Information and Resource Updates from the Commission on HIV: Sustaining the HIV Movement Amidst the COVID-19 Public Health Emergency](#))
- Rapidly transitioned from in-person to virtual meetings using WebEx. Staff and Commissioners are to be commended for quickly learning and adapting to the WebEx videoconferencing platform. Despite technical challenges, the COH saw an increase in meeting participants due to the ease of participating through videoconferencing technology.
- The COH's number of GovDelivery subscribers grew from 6,000 to over 14,000 by the end of 2020, an indication of increased community participation in the Commission's work and activities.
- Answering the call for duty, COH staff served as Disaster Service Workers (DSWs) to support the COVID-19 contact tracing teams, Project Room Key, food delivery calls for seniors, and the general elections. Staff maintained full business operations and responded to calls for service referrals while teleworking and with staff deployed to DSW assignments.

COMPASSION IN TIME OF COVID-19

Without question, COVID-19 has affected people from all walks of life and with even more profound impact on communities of color and people experiencing poverty and homelessness. Many individuals have lost their jobs, social support networks, and access to care. In response, the COH used its Board-directed charge and resources to demonstrate compassion in the following ways:


- Increased stipends for unaffiliated consumer members from \$100 to \$150 as allowed by the COH bylaws in recognition of the economic hardships faced by PWH due to the pandemic.
- In collaboration with DHSP, the COH conducted a communitywide bilingual COVID-19 Impact Survey to assess and understand the impact of the novel coronavirus on Commissioners, PWH, service providers, and individuals at high risk for HIV and STDs. The survey was administered mid-March to May and nearly 300 individuals responded. Of those, 219 were PLWH, and 12% completed the survey in Spanish. Service providers reported transitioning most clinical services to telehealth and working longer and more intense hours to balance work and family commitments. Some indicated that they had been furloughed at the time of the survey and feared losing their jobs. In addition, service providers reported challenges of being supportive from a distance, lack of personal protective equipment (PPE), and surge capacity (resources and staffing). For consumers, they reported feelings of anxiety, isolation, and stress. Some reported complete loss of income. Consumers and providers reported an increase in demand for food, ride sharing transportation, financial assistance, mobile phones, mental health services, childcare, home delivered food and medicines. For some, their housing situation became more unstable. Lack of access to high-speed and broad band internet and reliable computers was also reported. To respond to these community needs, the COH worked with DHSP to increase food pantry services, ensured that access to HIV medications and core medical services were maintained, and PPE kits were made widely available PWH using a network of HIV service sites throughout the County.

- The Aging Task Force (ATF) developed the recommendations to the COH, DHSP, and other County and City partners to address the unique needs of older adults (individuals who are aged 50 and older) population. According to the Health Resources and Service Administration (HRSA), the Ryan White program client population is aging. Of the more than half a million clients served by Ryan White program, 46.1 percent are aged 50 years and older and this continues to grow. While Ryan White clients in LAC show higher engagement and retention in care, and viral suppression rates, within the 50+ population there exists disparities by racial/ethnic, socioeconomic, geographic, and age groups stratification. The ATF recommendations were centered around the core issues of ongoing research and needs assessment, workforce and community education and awareness, and expansion of HIV/STD prevention and care services for older adults.
- Under the leadership of the Planning, Priorities and Allocations (PP&A) Committee, the COH worked with DHSP to allocate and shift funding as appropriate, to critical medical and support services including but not limited to emergency financial assistance, housing, and mental health. PP&A continued to lead the COH's multi-year priority setting and resource allocation process to avoid interruption of care for PWH.
- A most notable achievement for the COH was the accelerated pace at which the service standards for the **Emergency Financial Assistance (EFA)** was completed and approved. In June 2020, the COH, approved the EFA service standards and requested that DHSP move expeditiously to put in place the contractual mechanisms to implement EFA services especially during these economically challenging times. The Standards and Best Practices (SBP) Committee worked diligently with providers, consumers, subject matter experts, and DHSP staff to develop the EFA standards. EFA provides limited one-time or short-term payments to assist a Ryan White Part A client with an urgent need for essential items or services due to hardship. The purpose of EFA is to ensure clients can pay for critical services that play a role on whether a client is able to stay engaged in medical care and/or adhere to treatment. By the end of 2020, DHSP implemented training for Medical Care Coordination (MCC) teams on how to provide EFA to eligible clients and enacted contracts with 2 agencies to administer the program. The COH continues to work with DHSP to troubleshoot, improve the program, and minimize barriers to services.
- The COH updated and approved the **psychosocial support** services standards in September to keep PWH in care and maintain their quality of life. The purpose of psychosocial support services is to remove or lessen barriers to care and treatment through counseling services and mental health support. The implementation of psychosocial services would help in meeting the increase in demand for mental health services and social support during the pandemic and the recovery phase of the County's emergency response.
- COVID-19 has deeply impacted women and families with school-aged children. To support women living with HIV, the SBP Committee updated the childcare service standards and harnessed feedback from key partners such as local HIV providers that serve a large number of women of child-bearing age and the Women's, Consumer, and Transgender Caucuses. The childcare standards are slated for approval in early 2021.

COMMITMENT TO ALLYSHIP AND RACIAL JUSTICE: TO END HIV, WE MUST END RACISM

Institutionalized racism affects general health care as well as HIV/AIDS health intervention and services in communities of color. The overrepresentation of Black individuals in various disease categories, including HIV/AIDS/STDs, is rooted in racism. To accelerate an end to HIV, communities from across the County and the nation must build alliances dedicated to ending racism. While the COH has grappled with its own stance and discomfort in addressing privilege and manifestations of implicit bias in the body, there continues to be willingness for members to be more self-reflective and engage in trainings. While these steps may seem small, they are a starting point for engaging in the lifelong journey of unlearning and undoing racism.

- On February 12, the Black/African American Community Task Force (BAAC TF) in commemoration of the National Black HIV/AIDS Awareness Day led a [panel](#) composed of Black/African American medical providers who shared their experiences and best practices in serving Black/African Americans impacted by HIV/AIDS and STDs in LAC, how to address barriers and social determinants of health that disproportionately affect Black/African Americans, and solutions in ending the HIV epidemic.
- Under the leadership of the BAAC TF, the COH released a [Statement Solidarity](#) to acknowledge that the Black community shoulders the unequal and unacceptable burden of HIV and STDs. Racism is the root cause health, social, economic and inequities, injustice and generational trauma in the United States. The unacknowledged history of the colonization of Native Americans, slavery, and the sustained forms of structural racism in the United States, continue to manifest in police brutality, generational poverty and trauma, and anti-Blackness. The COH joined the Board of Supervisors, Department Directors, and leaders across the country in condemning the killing of George Floyd and the far too many Black men, women, and children that have perished in the hands of police for engaging the daily rituals of life and for simply breathing and living.
- The BAAC TF submitted recommendations aimed at expanding access to the County's contracting process to Black-led organizations to [Prosper LA](#). The Task Force advocated for an inclusive contracting process to identify agencies who have a track record of proven and effective grassroots/community empowerment efforts that reach specified Black/African American audiences. A strong network of County-funded organizations that are Black-led and serve the Black community would improve trust, outreach, linkages to care, retention in care, and other interventions that are effective in reducing new HIV cases.
- Under the leadership of the Public Policy Committee, the COH's 2020 Policy Priorities sought to advance health equity, reduce HIV-related stigma, and address social determinants of health such as poverty, education, violence, substance use, food insecurity, and transportation in order to improve health outcomes for PLWHA and special populations at highest risk for contracting HIV. The PP Committee worked with the BAAC TF, Transgender Caucus and other subgroups of the COH to facilitate more cross-collaborations on policy actions.
- The COH submitted comments to the Housing and Urban Department (HUD) opposing a proposed rule change that would deny affordable housing to transgender individuals and leave them even more vulnerable to HIV disease acquisition and progression. In LAC, transgender individuals shoulder a disproportionate burden of HIV, with poorer health outcomes across the HIV continuum.

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- The COH supported community mobilization efforts that led to the passage of AB2218 Transgender Wellness and Equity Fund. AB2218 opens the way for the California Department of Public Health to establish funding grants to organizations serving people that identify as transgender, gender nonconforming, or intersex (TGI), to create or support TGI-specific housing programs and partnerships with hospitals, health care clinics, and other medical providers to provide TGI-focused health care, and related education programs for health care providers.

COMMUNITY ENGAGEMENT

One of the hallmarks of the HIV movement is sustaining a robust community engagement in ending HIV. Throughout 2020, the COH worked diligently to convene virtual spaces for meaningful deliberations and forums about ending HIV in the context of COVID-19.

- In an effort to continue community engagement and connect individuals to services during the COVID-19 pandemic, the COH launched the **Virtual Lunch and Learn (VLL)** series to hear from service providers how the public health crisis has affected services and programs they offer, and share challenges, successes and lessons learned during these unprecedented times. In addition, the series provided a virtual space for participants to share insights and recommendations on how to sustain the HIV movement in LAC amidst the COVID-19 pandemic. From May through November, the COH held 11 virtual panels and educational series featuring speakers and experts in the HIV field and community health. Approximately 300 individuals attended these series and provided a critical space for community support in time of physical distancing and sheltering in place.
- The Operations Committee led the recruitment efforts and training for new and returning Commissioners. The community interest in serving on the COH remained strong as evidenced by the recruitment of 11 new Commissioners. **Six virtual training sessions** were completed between September through November with strong participation including members of the public.
- The COH launched the Mentorship/Peer Collaborator Program in October and held a virtual orientation for participants in November. The goal of the program is to nurture leadership by providing one-on-one support for each new Commissioner. Peer collaboration fosters a culture of understanding and decision making where each member appreciates their unique contribution to the group.
- Young gay and bisexual men, especially those who come from Black, Latinx, and Native communities, are disproportionately represented in the HIV epidemic. Active and sustained involvement is an integral part of an inclusive community planning process. To that end, the COH engaged with youth serving organizations and youth receiving HIV/STD prevention and care services in developing recommendations for outreach, engagement and retention on the COH and HIV community advisory boards. Consultations with youth stakeholders led to the development of youth-friendly social media content for the COH's Facebook and Twitter messages.

ENDING THE HIV EPIDEMIC IN THE CONTEXT OF COVID-19

The U.S. Department of Health and Human Services has set a national agenda, the [Ending the HIV Epidemic \(EHE\)](#): A Plan for America initiative to reduce new HIV cases by at least 90% by 2030. The 2020 theme for World AIDS Day (WAD) was “Ending the HIV/AIDS Epidemic through Resilience and Impact”. The theme was especially poignant as the HIV community had been newly challenged by, and often led the response to, COVID-19 in communities around the globe. COVID-19 not only forced us to adapt our response to HIV/AIDS in communities to ensure continuity of services, but also reinforced the urgency of ending the HIV/AIDS epidemic in the U.S. and around the world. The theme was a reminder of what we can achieve together when we focus on impact by using data to deliver high quality, people-centered HIV prevention and treatment services to those most in need, tackling stigma and discrimination, and empowering communities. It reaffirmed the essential role of resilience, which enables individuals and communities to meet the challenge of HIV/AIDS even in times of adversity.

- The COH forged ahead with its commitment to ending HIV by hosting several meetings for ongoing community input in shaping local strategies aimed at addressing HIV health inequities and elevating consumer voices in all aspects of service delivery, community planning, and policy development.
- Promoted the DHSP EHE Townhall meetings in English and Spanish in September and October and reached over 6,000 subscribers to the COH information network. The townhalls aimed to engage the community at large in developing the local EHE plan. COH created a standing agenda item at meetings to ensure ongoing flow of communication and feedback on the plan and ideas for service enhancements. The COH formally submitted recommendations on the draft EHE plan to DHSP during the public comment period.

The COH dedicated for community dialogues and presentations around EHE to facilitate information sharing and coordination of services across multiple key stakeholders and service delivery partners.

- The University of California Center for HIV Identification, Prevention and Treatment Services (CHIPTS) presented their EHE-related research at the August COH Meeting. The topics were:
 - 1) Regional Response to HIV Eradication Efforts in California Counties presented by Steve Shoptaw, PhD;
 - 2) Use of Technology-based PrEP Services to Improve Uptake, Adherence, and Persistence presented by Ronald A. Brooks, PhD and Dilara K. Üsküp, PhD; and
 - 3) Preparing for Long-Acting Injectable Treatment for HIV in Los Angeles presented by David Goodman-Meza, MD, MAS.
- The Los Angeles Homeless Services Authority (LAHSA) joined the September COH meeting to provide an update on the County’s Homeless Count, Project RoomKey and permanent housing for PLWH.
- The City of Los Angeles Housing Opportunities for Persons with AIDS (HOPWA) provided information on the \$2.8 million in funding they received under the CARES Act and solicited input from Commissioners and the community on how to use those resources.
- In response to the community’s interest and concerns about the impact of COVID-19 on PLWH, Dr. Eric S. Daar, M.D., Chief, Division of HIV Medicine Harbor-UCLA Medical Center, Investigator, Lundquist Institute discussed the Intersection of COVID-19 and HIV at the October COH meeting.

- The theme for the Annual Meeting, held in November, was “Continuing the Commitment to End HIV, Once and For All” and demonstrated the Commission’s commitment community and engagement to end HIV. Guest speaker, Harold Phillips, Senior HIV Advisor and Chief Operating Officer of Ending the HIV Epidemic: A Plan for America. US Department of Health and Human Services, Office of Infectious Disease and HIV/AIDS Policy (OIDP), shared federal updates on what to expect in 2021 and insights on building an inclusive HIV movement. DHSP colleagues provided an overview of EHE funding awards received by the Division and status of program expenditures. Staff also shared common themes and feedback received from the community on the draft EHE plan. Examples of general feedback include focusing on highly impacted communities and vulnerable populations (communities of color, youth, transgender population, people who inject drugs (PWID)/substance users, people experiencing homelessness, etc.) and creating an overarching strategy or goal specific to anti-racism, supporting communities of color, racial justice.
- Given the importance of prevention and linkage to care, DHSP also provided an overview of the Take Me Home HIV Self-Testing program and their plans to expand the program throughout the County. TakeMeHome is a national platform for ordering home HIV test kits that helps public health departments to expand testing access to community members who might hesitate about walking into a clinic. According to the DHSP 2019 Annual HIV Surveillance Report, among the estimated 57,700 persons aged ≥ 13 years living with HIV at yearend 2017, approximately 11% or 6,400 persons were unaware of their infection. Knowing one’s HIV status is a critical strategy for ending HIV.
- The Annual Meeting also featured Naina Khanna, Executive Director, Positive Women’s Network, USA who presented on how HIV planning councils can engage in more intentional work on achieving health equity. The group’s discussion on racism and privilege elicited an uncomfortable, yet necessary conversation on authentic forms inclusivity and racial and social justice.

Los Angeles County has been a national pace setter in developing and implementing responsive and innovative programs to curb the HIV/STD epidemics. With the continued support and revitalized commitment to ending HIV, resilience and optimism, the COH looks forward to working the Board of Supervisors and County leadership to finally end HIV, once and for all. **THE TIME TO END HIV IS NOW AND TO END HIV, WE MUST END RACISM.**



COMMISSIONERS (JANUARY - DECEMBER 2020)

Alvaro Ballesteros, MBA, Co-Chair, Supervisorial Board Office 1 Representative

Bridget Gordon, Co-Chair, Unaffiliated Consumer, At-Large

Miguel Alvarez, Alternate

Everardo Alvizo, MSW, City of Long Beach Representative

Traci Bivens-Davis, MA, Supervisorial Board Office 2 Representative (resigned 6/16/20)

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