PART III
Florida’s Ending the HIV Epidemic Plan

October 23, 2020
Florida’s Ending the HIV Epidemic (EHE) Plan

SESSION III AGENDA

Day 2 — Friday, October 23, 2020

AGENDA TOPIC

1. Welcome
   1:00 PM– 1:05 PM

   • Duval County
   1:05 PM– 3:00 PM
Florida’s Ending the HIV Epidemic (EHE) Plan

TODAY’S SESSION WILL HELP YOU TO:

• Learn about the community engagement actions conducted in **Duval County** to-date.

• Gain understanding of the locally approved activities and strategies that align with Florida EHE Plan for a ‘Unified Approach’ in accordance with the EHE pillars.
Total Population: 971,842

Social Determinants of Health

- Access-No Insurance coverage, 12.7% Census.gov
- Employment-uninsured, 15.7% Census.gov
- Poverty, Percentage of individuals below the poverty level: 15.5% FL Charts
HIV Prevalence and Diagnoses
Duval County, 2019

• Number of People with HIV (PWH), **6,489**
• Rate of PWH per 100,000 population, **667.7**
• Linkage to HIV Medical Care (within 30 days) **75.0%**
• Number of New HIV Diagnoses **284**

Data from FDOH Surveillance Office,
## The Epidemic in Jacksonville MSA

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2019</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>1,520,177</td>
<td>1,523,820</td>
<td>2.1% increase</td>
</tr>
<tr>
<td>Diagnosed HIV Cases</td>
<td>338</td>
<td>331</td>
<td>2.1% decrease</td>
</tr>
<tr>
<td>Diagnosed AIDS Cases</td>
<td>142</td>
<td>150</td>
<td>5.6% increase</td>
</tr>
<tr>
<td>Pediatric AIDS Cases Diagnosed</td>
<td>0</td>
<td>0</td>
<td>0.00% change</td>
</tr>
<tr>
<td>Perinatal HIV Cases</td>
<td>3</td>
<td>0</td>
<td>100.0% decrease</td>
</tr>
<tr>
<td>People Diagnosed Living with HIV (Prevalence)</td>
<td>7,455</td>
<td>7,565</td>
<td>1.5% increase</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Duval 2019</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>971,842</td>
<td>284</td>
<td></td>
</tr>
<tr>
<td></td>
<td>126</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6,489</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
HIV/AIDS Cases by Sex Diagnosed in 2019, Duval County

HIV N=284

- Female: 24.30%
- Male: 75.70%

AIDS N=126

- Female: 28.60%
- Male: 71.40%
HIV Cases by Race/Ethnicity Diagnosed in 2019, Duval County

Number of cases

- Black: 167
- Hispanic: 20
- White: 88
- Other: 9
HIV Diagnoses, by Age, 2019, Duval County

- 13-19: 14
- 20-29: 41
- 30-39: 49
- 40-49: 66
- 50-59: 98
- 60+: 49

Total: 226
Area 4 Top Priority Populations\(^1\) for Primary HIV Prevention in 2019

<table>
<thead>
<tr>
<th>Population</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black Heterosexual</td>
<td>30%</td>
</tr>
<tr>
<td>Black MSM</td>
<td>30%</td>
</tr>
<tr>
<td>White MSM</td>
<td>18%</td>
</tr>
<tr>
<td>White Heterosexual</td>
<td>9%</td>
</tr>
<tr>
<td>Hispanic/Latino MSM</td>
<td>5%</td>
</tr>
<tr>
<td>White IDU</td>
<td>4%</td>
</tr>
<tr>
<td>Hispanic/Latino Heterosexual</td>
<td>3%</td>
</tr>
<tr>
<td>Black IDU</td>
<td>1%</td>
</tr>
<tr>
<td>Hispanic/Latino IDU</td>
<td>5%</td>
</tr>
</tbody>
</table>

\(^1\)MSM=(MSM and MSM/IDU Diagnoses) and IDU=(IDU and MSM/IDU Diagnoses), therefore the data are not mutually exclusive.
Persons with HIV (PWH) in Duval along the HIV Care Continuum in 2019

- **PWH**: 7,565 (100%)
- **In Care**: 6,275 (82.90%)
- **Retained in Care**: 5,605 (74.10%)
EHE Planning Committee
Community Engagement Efforts

Activities to Date:

• Targeted Focus groups (Transgender, YLGTBQ, Hispanic Women, MSM,)
• Surveys-multiple provider locations
• Listening sessions
• Presentations during community planning meetings
• Faith based workshop
Ending The HIV Epidemic: Common Themes

Themes:
* Systemic Advocacy and Change
* Funding
* Stigma
* Education
* Client Centered Services

* Best Practice
* Priority Groups
* Marketing/Advertising
* Accessibility
Duval County’s Ending the HIV Epidemic Plan
Activity 1.1: Increase the number of medical providers in Duval county who offer routine HIV screening

Action Items:  
- Work with local medical associations to provide education on routine HIV screening
- Work with individual providers and Emergency Departments to implement HIV screening programs
Activity 1.2: Increase the number of priority testing locations in Duval county

Action Items:
- Review current list of testing sites to determine areas of need
- Work with Community/Faith Based Organizations to implement HIV testing programs in areas of need
- Increased comprehensive education when providing HIV testing (reactive and nonreactive)
- Deploy mobile testing units to areas with minimum to no access to testing services
- Review EPI data to access need for additional priority testing service implementation
Pillar 1: DIAGNOSE

Activity 1.3: Implement at home testing program

Action items

Work with Community Based Organizations to develop at home testing tracking/follow-up program

Secure and distribute supply of at home testing kits to test sites for distribution to the community
Activity 2.1: Increase accessibility of medical services in Duval county

Action Items: Deploy mobile medical units in areas of need (testing/medical)

Implement Uber health transportation program to medical and support services

Assist network capacity to provide/expand telehealth services

Increase the availability of providers with non-traditional service hours (evening/weekend)
Activity 2.2: Improve community engagement in HIV services

Action items:

Increase community knowledge of U=U/Treatment as Prevention through educational material and marketing in various languages.

Develop consumer leadership and advocacy skills through workshops, conferences, and coaching.

Provide support for leadership development among providers and people impacted by the issues.

Involve community stakeholders in setting direction and making decisions about funding applications and allocations.
Activity 2.3: Reduce stigma related biases in the Duval County provider network

Action Items
- Implement network wide trainings in Cultural Humility, Cultural Competency and Trauma Informed Care to develop best practice standards and accountability for culturally competent and stigma-busting environments and persons
- Raise awareness and action through self-reflection, and self and organizational assessments
Activity 2.3: Reduce stigma related biases in the Duval County provider network

Action Items

- Funding for positions to promote these initiatives and for Training / Funded Convener and coordinator for this aspect

Partner with the University of North Florida, Jacksonville University Colleges of Health, and University of Florida to present HIV-related anti-stigma presentations to healthcare students

Work with Business Response to AIDS /Faith Response to AIDS partners to provide education and awareness on stigma reducing strategies
Pillar 3: Prevent

Activity 3.1: Increase PrEP/PEP Awareness and Accessibility

Action Items:
- All Counseling Testing Linkage Specialist have a working knowledge of PrEP/PEP and know how to access resources
- Work with local providers to provide/refer for PrEP/PEP services
- Increase PrEP awareness and uptake among Blk females
- Increase PrEP awareness among Blk and Hispanic MSM through community engagement
- Testing information in easy to access, yet private places
- Expand comprehensive PrEP navigation program
Activity 3.2: Increase the number of culturally competent organizations who provide services to our Hispanic Population

Action Items: Secure MOUs with Hispanic based Community Based Organizations

Create funded positions with bi-lingual Spanish language speakers and embed in several provider and community-based programs

Research and implement the use of bilingual material for HIV prevention and treatment including testing, PrEP, TasP, etc.
Activity 3.3: Increase marketing to improve community engagement

Action Items:

- Utilize local and syndicated radio stations to develop a comprehensive marketing plan to include access to TV, radio, periodicals, billboards, gas stations, jumbotron and mass transportation marketing resources (English and Spanish).

- Improve presence on social media sites (Facebook, Instagram, TicToc, Grinder, Jack’d) to promote prevention and care services

- Develop a unified, relative message among community partners (hashtag, phrase)

- Identify 2-3 popular opinion leaders (radio announcers, athletes, etc.) to use HIV as a platform

- Implement regularly scheduled Department of Health sponsored public seminars in community locations, in collaboration with Community Based Organizations and academic institutions.
Activity 3.4: Increase Funding and Resources for Community Based Providers

Action Items

- Support new and emerging providers with technical assistance to build capacity
- Streamline funding applications and processes to move money quickly to CBOs
- Increase funding for community-based providers
- Increase funding/opportunity for provider capacity building for staff, training, incentives, etc.
- Support staff for grant writing; provide training and technical assistance
Pillar 4: RESPOND

Activity 4.1: Support Systemic advocacy and change

Action Items

Organize regular open group counseling for PWH

Implement a One-stop access line for mental health services for PWH.

Support for a leadership development cohort of emerging leaders who are supervisors or on the front lines to attend training or conferences to build greater capacity for systemic advocacy.

Engage CEOs of provider organizations regularly around macro-level advocacy to foster collaboration and resources to addresses systemic change.

Funding for positions to promote these initiatives and for Training / Funded Convener and coordinator for this aspect.
Pillar 4: RESPOND

Activity 4.2: Use all available surveillance data to inform and target a community level cluster response

Action items:

- Mobilize mobile units, both testing and medical units, to areas of need based on zip code level data

- Utilize CAREWare data to engage Linkage to Care staff and Peers to initiate reengagement activities

- Work locally to remove barriers that prevent the comprehensive free flow of information to increase linkage and reengagement in care

- Look to model programs (Houston, New York City, etc.) for coordinated plans and systems of care.
Paula Phillips Burns, MSH, FCCM
Program Administrator, Area 4
Florida Department of Health in Duval County
Paula.Burns2@flhealth.gov
Florida’s Ending the HIV Epidemic Plan

END OF DAY 2

Session will reconvene Tuesday, October 27, 2020 at 10:00 AM

THANK YOU FOR YOUR PARTICIPATION!!