



## San Francisco Department of Public Health

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### San Francisco on the road to zero new HIV infections

#### HIV annual report 2016 shows drop in new infections among all groups, progress closing disparities gap

##### *Report gives insights into the City's HIV positive population*

*The new report will be presented to the San Francisco Health Commission on Tuesday Sep 19 at 4pm, at 101 Grove Street, Room 300.*

*Supervisor Jeff Sheehy to hold press conference today at 10am at the San Francisco AIDS Foundation, 1035 Market Street*

FOR IMMEDIATE RELEASE

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SAN FRANCISCO (September 15, 2017) – New HIV infections in San Francisco are continuing to decline among all groups, and the disparities gap for new infections in African American and Latino men is starting to close, a new report by the San Francisco Health Department shows. The report's insights into the people living with HIV in San Francisco include that people are living longer, resulting in an aging population, and that challenges persist in improving outcomes for homeless patients.

San Francisco's Getting to Zero Consortium, ([www.gettingtozerosf](http://www.gettingtozerosf)) a multi-sector initiative involving community-based organizations, providers, researchers, health department and government officials, industry and activists, has been working since 2014 toward the goals of zero new HIV infections, zero HIV-associated deaths, and zero stigma and discrimination. This report reflects the progress that has been made by the group's efforts, as well as challenges that must be addressed to Get to Zero.

"New HIV infections in San Francisco are declining at a faster rate than ever, and the City continues to do better than the nation in reducing new infections," said **Barbara Garcia**, Director of Health. "Better yet, new infections are dropping among all groups,

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including African American and Latino men, and we are starting to close the disparity gap. It is essential that we focus on disparities in order to Get to Zero.”

The Centers for Disease Control and Prevention reported an 18 percent reduction nationally in new HIV infections over six years (from 2008 to 2014), while San Francisco reports a 16 percent reduction last year alone, and a 49 percent reduction in the past four years (from 2012 to 2016).

In addition to the drop in new infections, San Franciscans diagnosed with HIV are getting linked to care more quickly and initiating treatment sooner. More of them are virally suppressed within the first year and the survival rate continues to improve.

“We are realizing these improvements due to the hard work and dedication of countless individuals, from the clinicians and researchers at the Department of Public Health and UCSF to community advocates and our steadfast City officials,” said **Mayor Edwin M. Lee**. “To sustain this progress we need to maintain this momentum and commitment. Focused efforts like increased services and outreach for specific populations are keeping us well on our way to Getting to Zero.”

New HIV diagnoses in San Francisco declined from 265 cases in 2015 to a record-low of 223 in 2016, down from a high of 2,332 at the peak of the epidemic in 1992. Among men, the annual rate of new HIV diagnoses for all racial and ethnic groups continued a 10-year decline.

African American men have the highest HIV diagnosis rate in San Francisco, at 96 cases per 100,000 population, compared to a rate of 39 per 100,000 among white men in 2016. However, in 2015 the rate for African American men was 140 per 100,000, an indication that the rate is dropping. Latino men in San Francisco have a new HIV diagnosis rate of 77 per 100,000 population, down from 85 in 2015.

“Never have there been more people living with HIV in San Francisco, yet we continue to see sharp drops in new transmissions. San Francisco’s Getting to Zero model is being replicated around the world. However, with 13 percent of all newly diagnosed persons homeless -- a proportion that is increasing over time—and only 31 percent of homeless persons living with HIV virally suppressed, we are clearly failing to address health and housing disparities. San Francisco can be the first city to Get to Zero, but only if we continue to deploy the necessary resources for core services and new initiatives for those most in need,” said **Supervisor Jeff Sheehy**, San Francisco’s first openly HIV-positive Supervisor and a co-founder of the Getting to Zero Consortium.

While there is still significant work to do to close the disparities gap, the Getting to Zero initiatives to expand PrEP (pre-exposure prophylaxis) education and outreach among communities with the highest HIV infection rates, implement city-wide rapid linkage to care for all people newly diagnosed with HIV, and improve re-engagement in care for the most vulnerable populations appear to be making a difference.

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“In addition to highlighting our successes, data from this report will be used to guide and focus future efforts,” said **Dr. Susan Scheer**, Director of the Health Department’s HIV epidemiology unit and lead author of this report.

As people with HIV are living longer, it follows that the City’s HIV positive population is aging. Today, 63 percent of people living with HIV in San Francisco are over the age of 50, and 26 percent are more than 60 years old.

“People living with HIV in San Francisco are living longer and healthier lives,” said **Dr. Susan Buchbinder**, Director of the Health Department’s Bridge HIV division. “That is great news, but also presents new challenges, as this aging population needs comprehensive services to ensure their ongoing health and longevity.”

San Francisco is developing new models to provide health care for this population as they become middle aged and elderly. The Golden Compass program, which opened in January 2017 at Zuckerberg San Francisco General Hospital’s Ward 86, in collaboration with UCSF, specializes in multi-disciplinary medical care and social support for HIV positive patients over 50.

Another challenge highlighted in the report is that homeless people with HIV continue to do worse than other groups. Over time there has been little change in the proportion of newly diagnosed cases who are homeless, which is holding at approximately 13 percent. Homeless people also are lagging behind in viral suppression, at 31 percent compared to 73 percent overall for HIV positive people in San Francisco.

Efforts of the Health Department’s LINCS (Linkage, Integration, Navigation and Comprehensives Services) teams are showing promise. This program works to help vulnerable patients connect or re-connect to care. Among homeless clients of the LINCS program in 2015, 77 percent were virally suppressed.

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### **HIV Epidemiology Annual Report 2016**

Find the full report here

<https://www.sfdph.org/dph/comupg/oprograms/HIVepiSec/HIVepiSecReports.asp>

#### **Successes and Improvements**

- **New HIV diagnoses** declined 16% from 265 diagnoses in 2015 to 223 in 2016.
- **Among men, the annual rate of new HIV diagnoses** continued to decline for all racial/ethnic groups between 2006 and 2016.
- Overall, 93% of people living with HIV are **aware of their infection**.

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- **Survival** with AIDS has steadily improved overtime; for people diagnosed, the survival probability is 90% at 3 years and 87% at 5 years.
  - Now 63% of people living with HIV in San Francisco are **over the age of 50**; 26% are **over 60 years**.
  - The proportion of **late diagnoses** (progressing to AIDS within 3 months of HIV diagnosis) declined from 21% in 2012 to 16% in 2015. Nationally the proportion of late testers is 22%.
  - Only 6% of **people living with HIV** are **people who inject drugs** (PWID—non MSM) and 9% of the **new diagnoses** were among PWID due to the success of long-standing syringe access programs in San Francisco.
  - **Linkage to care** within 1 month of HIV diagnosis has increased among newly diagnosed people; in 2016, 84% linked within 1 month of diagnosis compared to 77% in 2012.
  - **Viral suppression** within 1 year of diagnosis has increased among newly diagnosed people; in 2015 77% were virally suppressed within 1 year of diagnosis compared to 68% in 2012.
  - **Time to ART (Antiretroviral Therapy) initiation** after HIV diagnosis has improved from a median time (when 50% initiated ART) of 8 months in 2009 to 1 month in 2015.
  - **Time to viral suppression** after HIV diagnosis has improved; median time to viral suppression improved from 11 months in 2009 to 3 months in 2015.