Expanding PrEP Access and Implementation in San Francisco

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Medical Director, SF City Clinic

San Francisco Health Commission
June 21, 2016
Overview of the Population Health Division

Health Commission

Director of Health

Finance
Information Technology
Human Resources
Compliance
Policy & Planning
Public Information

San Francisco General Hospital
Laguna Honda Hospital
Managed Care
Transitions
Ambulatory Care
Primary Care
Behavioral Health
Maternal, Child and Adolescent Health
Jail Health

Environmental Health
Community Health Equity & Promotion
Disease Prevention & Control
Public Health Emergency Preparedness & Response
Emergency Medical Services

Office of Equity and Quality Improvement
Office of Ops., Finance & Grants Mgmt.
Center for Learning & Innovation
Applied Research, Community Health Epidemiology & Surveillance
Bridge HIV

PHA Domain Categories
Governance, Administration and System Management
Assessment and Research
Policy Development
Assurance
**PUBLIC HEALTH ACCREDITATION DOMAIN CATEGORY: ASSURANCE DISEASE PREVENTION & CONTROL (DPC)**

<table>
<thead>
<tr>
<th>STRATEGIC DIRECTION</th>
<th>Assurance of healthy places and healthy people</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGY 4</td>
<td>Lead public health system efforts to create an upstream approach to ensuring healthy people and healthy places.</td>
</tr>
<tr>
<td>PERFORMANCE MEASURES</td>
<td>PERFORMANCE MEASURE 4.1: Establish community-centered approaches that address the social determinants of health and increase population well-being.</td>
</tr>
<tr>
<td></td>
<td>PERFORMANCE MEASURE 4.2: Sustain and improve the infrastructure and capacity to support core public health functions, including legally mandated public health activities.</td>
</tr>
<tr>
<td>DESCRIPTION</td>
<td>Disease Prevention and Control (DPC) oversees public health clinical services including treatment and biomedical prevention, public health laboratory testing and broad communicable disease investigation (DIS) services. DPC performs many of the legally mandated activities intended to protect public health and therefore serves everyone in San Francisco. This Branch is also responsible for informing and guiding San Francisco clinicians in best practices for communicable disease prevention, control and treatment including during outbreaks and is a resource for expert clinical and laboratory consultation. Within SFDPH, DPC staff work closely with the San Francisco Health Network to optimize clinical policies.</td>
</tr>
</tbody>
</table>
Disease Prevention and Control Sections

• STD Prevention and Control
• Communicable Disease Control and Prevention
• TB Prevention and Control
• Public Health Laboratory
DPC is part of a citywide effort to support PrEP implementation

• Getting to Zero PrEP Initiative
  • Community Partners, including...
  – San Francisco AIDS Foundation
  – API Wellness
  – Alliance Health Project
  – Project Inform
  – Shanti
  – Center for AIDS Prevention Studies
  – AIDS Education Training Center
  – HIV/STD Prevention Training Center

• Health Care Providers and Systems
  – Kaiser
  – UCSF
  – One Medical Group
  – HIVE
  – HealthRight 360
  – Many private providers throughout SF

• San Francisco Health Network (SFHN)
  • Ward 86 PrEP program
  • Multiple SFHN Clinics

• Population Health Division
  • Funded community based PrEP navigators
  • City Clinic PrEP program
  • California HIV/AIDS Research Program (CHRP) funded transgender PrEP demo project
  • Project PrIDE
    – Social Marketing
    – Popular Opinion Leaders
    – Citywide PrEP navigation
    – “Data to PrEP”
    – Communities of Practice
    – Public Health Detailing
2016 GTZ PrEP Goals and Priorities

• Create a **sustainable** city-wide model of delivery
  – Build capacity
  – Enhance funding
  – City-wide PrEP Navigators

• Reach those populations that are currently **underserved**
  – Youth, transwomen and men, MSM of color, people who use drugs, incarcerated
  – Help coordinate social marketing campaigns
  – Reach into neighborhoods and community organizations

• **Monitor** our progress and use data to inform strategies and decisions
  – Integrate data from diverse sources
Highlights of GTZ PrEP Efforts

• Launched PrEP ambassador program
• >10 PrEP navigators funded across clinics and Community-Based Organizations (CBOs)
• PrEP delivery sites expanded to >30 clinics
• >100 clinical providers and >50 HIV test counselors trained on PrEP delivery and referrals/navigation
• Citywide PrEP Navigator Group Established
Welcome to the California PrEP Provider Directory!

Visit PrEP Directory

PrEP Ambassadors outreach at Folsom Street Fair

www.pleaseprepme.org
Launched June 2015
PrEP IS A PILL FOR PEOPLE WHO ARE HIV NEGATIVE. IT PROTECTS YOU FROM HIV.

PrEP IS SAFE AND EFFECTIVE. CONDOMS PREVENT OTHER STDS.
PrEP knowledge and use among HIV-negative MSM at SF City Clinic (SFCC) and STOP AIDS Survey (☆) and transgender women (TEACH)(♦)
## PrEP awareness in 2015, by demographics

<table>
<thead>
<tr>
<th>Group</th>
<th>STOP AIDS Survey (n=667)</th>
<th>SF City Clinic Survey (n=5470)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;18</td>
<td>50%</td>
<td>56%</td>
</tr>
<tr>
<td>19-29</td>
<td>85%</td>
<td>82%</td>
</tr>
<tr>
<td>30-39</td>
<td>90%</td>
<td>85%</td>
</tr>
<tr>
<td>40-49</td>
<td>91%</td>
<td>85%</td>
</tr>
<tr>
<td>50+</td>
<td>82%</td>
<td>78%</td>
</tr>
<tr>
<td><strong>Race/ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>84%</td>
<td>74%</td>
</tr>
<tr>
<td>Latino</td>
<td>86%</td>
<td>81%</td>
</tr>
<tr>
<td>Asian</td>
<td>82%</td>
<td>82%</td>
</tr>
<tr>
<td>White</td>
<td>89%</td>
<td>85%</td>
</tr>
<tr>
<td>Other</td>
<td>78%</td>
<td>78%</td>
</tr>
<tr>
<td><strong>Gender identity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td>84%</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td>31%</td>
</tr>
<tr>
<td>Transgender</td>
<td></td>
<td>90%</td>
</tr>
</tbody>
</table>
Demographics of PrEP users should reflect population being newly diagnosed with HIV in SF

- Male: 11%, Black: 3%, Latino: 8%, API: 11%, White: 10%
- Black: 27%, Latino: 10%, API: 18%, White: 28%
- New infections: 13%, Kaiser SF: 9%, SFDPH PC Clinics: 10%, STD clinic: 17%
- Kaiser SF: 45%, SFDPH PC Clinics: 43%, STD clinic: 42%
Crude, preliminary PrEP cascade for MSM in SF

Where is the drop-off occurring?

- HIV-neg MSM: 100%
- Aware of PrEP: 85%
- Want PrEP: 85% of those offered in PrEP Demo
- Offered PrEP: ?
- Can afford PrEP: ?
- PrEP uptake: 29%
- Adherent: 25%

Data from NHBS, PrEP Demo, STOP AIDS, SFCC
HIV and STDs in San Francisco, 2002-2014

![Graph showing the number of HIV and early syphilis cases and gonorrhea cases over the years 2002 to 2014. The graph indicates an increasing trend in gonorrhea and syphilis cases, with a particularly sharp increase in syphilis cases starting around 2012.](image-url)
Nationwide, rates of condomless anal sex increasing

Note: Adjusted increase in concordant condomless sex per every 3 years was for 18-24 years 16% (CI: 12%, 20%), 25-29 years 9% (CI: 5%, 12%), 30-39 years 9% (CI: 5%, 12%) and 40 years and older 7% (3%, 11%).

Paz-Bailey, AIDS 2016
Counseling about STD Prevention in the Biomedical HIV Prevention Era

• “When it comes down to it, it happens. It’s a part of sex...It’s a concern, but I know it’s going to happen, I know the way to treat it, and you move on from there.”

• “It’s just like, go get tested every 2 months or so. If you have something, they’ll treat it right away and then it’s gone and then nothing happened, you know what I mean? There’s like, no change whatsoever. So why worry about it?”

• Engage clients in a conversation about their sexual health goals

• Emphasize that PrEP does not prevent other STDs

• Recommend q3mo STD screening

• Address other drivers of risk, including substance use and mental health issues
Conclusions

- **City-wide efforts** to coordinate PrEP delivery and implementation are **feasible**, can maximize potential impact of PrEP

- **Establishing goals and metrics** and **conducting regular meetings to share best practices** facilitates coordination and implementation

- **Robust strategies** needed to bolster **STD prevention efforts** in the biomedical HIV prevention era

- **Additional outreach** needed to ensure PrEP is reaching all populations at risk for HIV
Acknowledgements

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- Jen Hecht
- Stephanie Goss
- Hyman Scott
- Miranda Nordell
- Shannon Weber
- **Getting to Zero PrEP Committee**
SFCC clients with highest levels of risk are most likely to be on PrEP

April 2014 - Sept 2015 (N=5971)

# receptive anal sex partners without a condom last 3 months

<table>
<thead>
<tr>
<th># partners</th>
<th>N</th>
</tr>
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<tbody>
<tr>
<td>0</td>
<td>1764</td>
</tr>
<tr>
<td>1</td>
<td>2470</td>
</tr>
<tr>
<td>2</td>
<td>725</td>
</tr>
<tr>
<td>3 to 5</td>
<td>666</td>
</tr>
<tr>
<td>6 or more</td>
<td>346</td>
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