



HIV ZERO STRATEGIC PLAN



THEN...

THE NEW YORK TIMES
FRIDAY, JULY 3, 1981

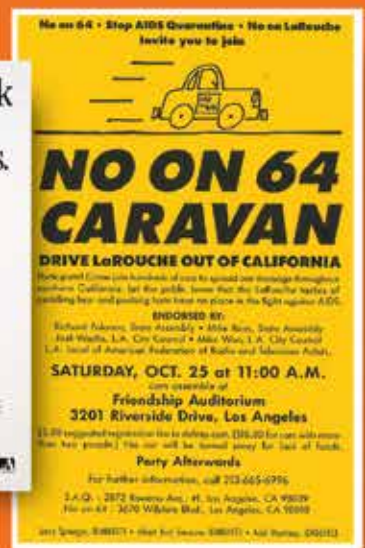
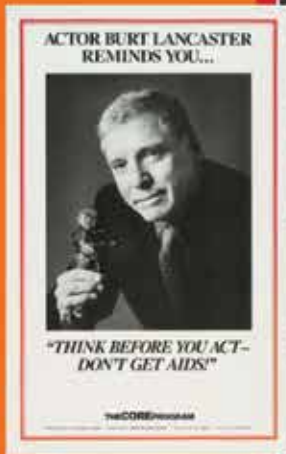
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RARE CANCER SEEN IN 41 HOMOSEXUALS

Outbreak Occurs Among Men
 in New York and California
 —8 Died Inside 2 Years

By LAWRENCE K. ALTMAN

Doctors have diagnosed 41 cases of a form of cancer less than a year ago that was made known to the public by the



HIV ZERO STRATEGIC PLAN

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MESSAGE FROM West Hollywood City Councilmembers

We are at a moment in the HIV epidemic that so many have worked so tirelessly, and so long, to achieve. Today, after decades of direct action, political organizing, and strategic prevention and programmatic efforts, we have the bio-medical interventions to stop new HIV infections, and help those who are HIV-positive reduce their viral loads to undetectable.

We are proud of the role that the City of West Hollywood has played in addressing the HIV/AIDS epidemic. In the 1980s, as gay men in our community were getting sick and dying all around us, the City responded with resources, creativity, and most importantly, with the deepest wells of compassion and commitment.

Certainly, the faces of HIV have changed over the past 32 years, but in West Hollywood, those who are most impacted remain gay and bisexual men. Over the years, treatment, politics, prevention and service delivery have changed, but one thing has remained solid and true – the City’s unwavering dedication to bring an end to this disease, while at the same time serving and supporting those who are living with it.

Our West Hollywood HIV Zero Strategic Plan spells out our current efforts – along with a clear plan – to get to zero on many fronts. Zero new infections. Zero progression of HIV to AIDS. Zero discrimination. Zero stigma.

These aren’t easy goals, but they are possible when we bring to bear the resources of the City and our community partners. This plan – and our collective ongoing work – will help guide us to that day we’ve all dreamed of. The day when we can say, once and for all, HIV/AIDS is over.

With our most sincere commitment,

Mayor **John J. Duran**
Mayor Pro Tempore **John D’Amico**
Councilmember **Lauren Meister**
Councilmember **John Heilman**
Councilmember **Lindsey Horvath**



BACKGROUND

At its meeting on January 20, 2015, the West Hollywood City Council directed City staff to work with social service providers, local medical providers, the Los Angeles County Department of Public Health's Division of HIV and STD Programs, the Los Angeles County Commission on HIV, the U.S. Centers for Disease Control, the Office of National AIDS Policy, and the offices of West Hollywood City Councilmembers John D'Amico and John Duran to develop a strategic plan and marketing campaign aimed at reducing to zero HIV/AIDS infection and conversion rates in the City of West Hollywood.

Since its incorporation in 1984, the City of West Hollywood has been at the forefront of efforts to confront the HIV/AIDS epidemic. Throughout the City's history, its leadership has directed tens of millions of dollars to fund HIV/AIDS direct services, education, and public awareness efforts.

Nationally and globally recognized as a model city for its response to the AIDS crisis, West Hollywood was one of the first cities to establish an ordinance prohibiting discrimination against people living with HIV and AIDS and to provide grant funding to local HIV/AIDS service organizations.

Certainly, the faces of HIV have changed over the past 32 years, but in West Hollywood, those who are most impacted remain gay and bisexual men. Over the years, treatment, politics, prevention and service delivery have changed, but one thing has remained solid and true – the City's unwavering dedication to bring an end to this disease, while at the same time serving and supporting those who are living with it.

Over its 30-plus year history, the City has continued to play a leadership role in the fight against HIV/AIDS by committing tens of millions of dollars in social service contract funding to HIV/AIDS service organizations; developing web-based series and videos aimed at men who have sex with men (MSM) to provide information on HIV and STDs; supporting condom distribution programs and efforts organizing educational community forums to help increase public awareness of HIV/AIDS services and programs; and developing creative, innovative, and affirming HIV/AIDS prevention campaigns.

Still at the vanguard of HIV-related policies, West Hollywood is launching one of its most ambitious and hopeful campaigns to date.

Though some of the prevention messages and support strategies mirror those from earlier in the epidemic, the central goal of West Hollywood's new campaign is bolder in a different way. The opportunity to end the AIDS epidemic has never been greater – buoyed by biomedical interventions, such as PEP (post-exposure prophylaxis) and PrEP (pre-exposure prophylaxis), the Affordable Care Act, and the National HIV/AIDS Strategy – the City, in collaboration with its community partners, is looking to make HIV/AIDS history by becoming an HIV Zero City.

WEST HOLLYWOOD AND ITS PLACE IN THE EPIDEMIC

“HIV Zero” is not just a slogan. Today, we are armed with solid research that supports the viability of this plan. We have the tools to end the AIDS epidemic as we know it, and many of the efforts described in this plan are already being implemented within West Hollywood and Los Angeles County.

Achievement of these goals is contingent upon the provision of ongoing outreach and education, treatment and intervention programs, and services currently offered by a variety of existing organizations as well as enacting new and innovative strategies, bringing on new partners and investing sufficient resources. As previous experience in the response to the HIV/AIDS epidemic has demonstrated, having targeted goals drives progress, promotes accountability, and unites diverse stakeholders in a shared vision. The interventions discussed in this strategic plan are a testament to the City’s continued commitment to the fight against HIV/AIDS until we get to zero.

As one of the most sprawling metropolitan areas in the country, Los Angeles has been said to lack a center. Yet, West Hollywood is not only the literal geographic central point of the region, but is also one of the key centers in the history of HIV/AIDS in the greater Los Angeles area. This plays out in terms of the large number of residents infected and affected by HIV/AIDS, as well as those who come from outside of the city to receive HIV-related services, due to the plethora of programs available.

West Hollywood is also an LGBT cultural center, known for its reputation as a safe place for the lesbian, gay, bisexual, and transgender (LGBT) community. The City annually welcomes tens of thousands of people from around the globe who travel to the City to enjoy its climate, retail and dining opportunities and, of course, its nightlife.

Although the primary mandate of the City is to serve West Hollywood-identified individuals, the City is a leader in the provision of HIV care services for its constituency and is mindful of its role in prevention and education for the larger LGBT community.

To that end, West Hollywood’s “HIV Zero” strategic plan will primarily be focused on L.A. County Public Health Department surveillance data related to West Hollywood residents in order to determine our success in meeting epidemiological benchmarks. However, progress will also be informed by data sources that may expand beyond West Hollywood’s literal city boundaries. Statistical analysis of data – available through L.A. County Public Health data, our “HIV Zero” partner organizations, and other sources – will help us to better understand the impact of the “HIV Zero” efforts in the greater West Hollywood area.



WeHo is PrEPared is a current campaign developed by the City of WestHollywood to provide education and resources regarding Pre-Exposure Prophylaxis (PrEP).

VISION STATEMENT & GOALS

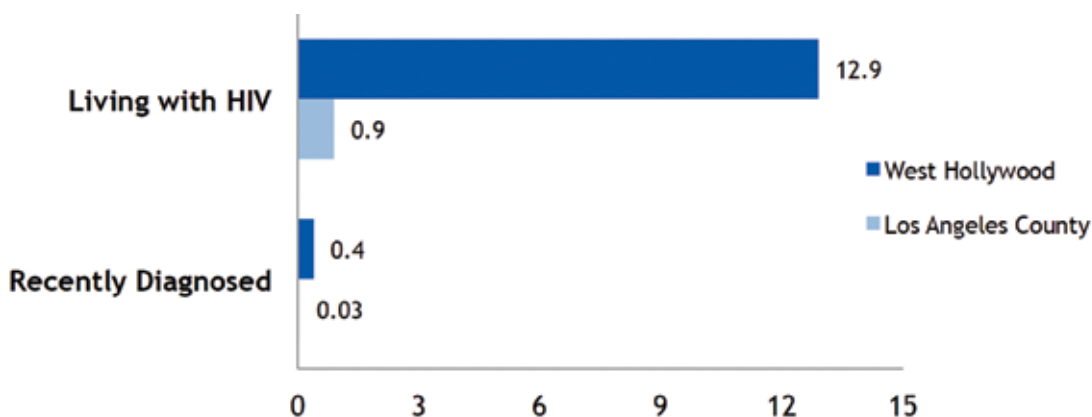
The City of West Hollywood is committed to being a place where people living with HIV have easy access to comprehensive healthcare and social support services; and, a place where no members of the community have an elevated risk for acquiring HIV or encounter discrimination based on HIV status, sexual orientation or gender identity. This is West Hollywood's HIV Zero Initiative, which will be accomplished by focusing on four goals:

1. Expand access to healthcare for people living with HIV and people currently at an elevated risk for acquiring HIV
2. Reduce new HIV infections
3. Reduce HIV-related disparities and health inequalities, and
4. Slow disease progress from HIV to Stage 3 (AIDS).

HIV & AIDS IN WEST HOLLYWOOD

As of 2014, the City of West Hollywood (City) has a population of 35,053. The median age is 40.8 years, the sex ratio is 130.9 males to every 100 females, and Whites make up 75% of residents. These population characteristics translate to the HIV epidemic in the City. Among the 2,522 people living with HIV (PLWH), 87% are over 35 years old, 99% are male, and 68% are White. New HIV diagnoses are concentrated almost exclusively among men who have sex with men; and, although the number of annual HIV diagnoses among men (N=75) may appear small, it is disproportionate when compared to the population of men (N=19,294). For men in West Hollywood, the number of recently diagnosed per 100 (0.4) and living with HIV per 100 (12.9) is extremely high compared to Los Angeles County, where HIV diagnoses is 0.03 per 100 men and living with HIV is 0.9 per 100.2. Figure 1 highlights these differences, and underscores the increased likelihood of acquiring HIV or living with HIV for men in West Hollywood. These disparities help clarify why the West Hollywood HIV Zero Initiative is so timely and critical.

Figure 1: Men Living with HIV & Recently Diagnosed (per 100), West Hollywood vs. Los Angeles County, 2014



ORAL



Check it out. WeHoLife.org

WeHo Life is funded by the City of West Hollywood and the County of Los Angeles, Department of Health Services, Office of AIDS Programs and Policy.

GETTING TO HIV ZERO

Aligning with President Barack Obama’s National HIV/AIDS Strategy for 2020, as well as with the vision of UNAIDS, and other local and statewide efforts to eliminate HIV, West Hollywood’s initiative will be one of the first to coalesce a community of stakeholders to end HIV as we know it.

We must use caution and care when we speak of “getting to zero” and “ending the epidemic” in West Hollywood. Several thousand residents in our city are living with HIV/AIDS, and any effort to achieve our goals is inclusive of ensuring that those currently living with HIV/AIDS are not made invisible or stigmatized.

“THE END OF THE EPIDEMIC” IN WEST HOLLYWOOD

West Hollywood defines the end of the epidemic as the point in time when new infections dip and stay below the number of AIDS-related deaths. This ambitious vision requires on-going commitments of resources, coordination with service providers and collaboration with the Los Angeles County Department of Public Health and private healthcare entities such as Cedars Sinai and Kaiser Permanente. Key elements such as public acceptance of health services and the adoption of tools to prevent HIV transmission are also crucial in fulfilling the “HIV Zero” vision.

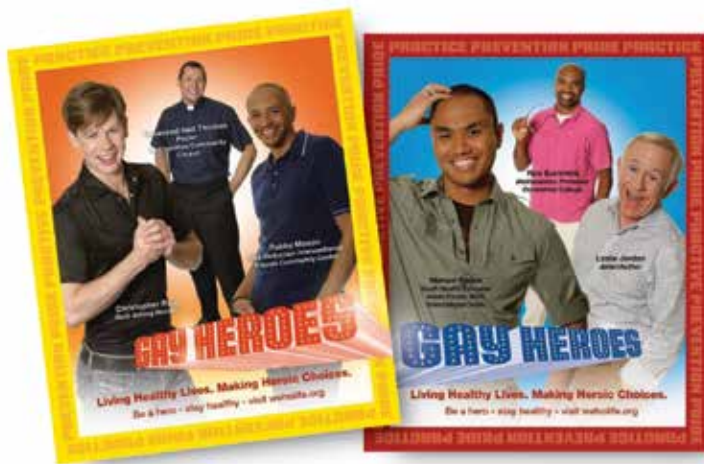


HIV MYTHS was a campaign in 2004 that initially featured teaser images that said BIG, ORAL and TOP followed by a second round that addressed larger questions including: **HIV IS NO BIG DEAL? ORAL SEX IS SAFE? A TOP CANT GET HIV?**

HIV ZERO INDICATORS OF PROGRESS

The HIV Zero Initiative goals will be achieved by supporting local service providers that employ a combination of evidence-based and innovative approaches to serve our community. Consistent with the National HIV/AIDS Strategy updated to 2020, we have developed 7 indicators of progress, with a date to achieve the indicators by December 31, 2018.


- 1. HEALTHCARE COVERAGE:** Increase primary healthcare coverage enrollment by 6 percent among men aged 18 to 44 years from 77% at baseline to 81%.
- 2. HIV DIAGNOSES:** Reduce the number of new infections by 15% from 77 per year at baseline to no more than 66 per year.
- 3. LINKAGE TO CARE:** Increase the percentage of newly diagnosed persons linked to HIV medical care within 1 month of their diagnoses from 92% at baseline to 95%.
- 4. RETENTION IN CARE:** Increase the percentage of persons with diagnosed HIV infection who are retained in HIV medical care to 75% from 60%.
- 5. VIRAL SUPPRESSION:** Increase the percentage of persons with diagnosed HIV infection who are virally suppressed to 75% up from 69%.
- 6. STAGE 3 DIAGNOSES:** Reduce the percentage of persons diagnosed with Stage 3 (AIDS) to no more than 2% of the HIV positive population without a Stage 3 diagnoses. ⁱ
- 7. STIGMA:** Reduce the rate of HIV diagnoses by 15% for young MSM (15-34 years). ⁱⁱ



GAY HEROES was a campaign in 2008 that featured successful members of the community and served to inspire individual and community response to address issues around HIV prevention, substance abuse, self esteem, general health, sense of community and healthy lifestyles.

ⁱ In 2014, out of the 2,469 people with diagnosed HIV, 1,135 had Stage 3 and 1,134 did not. There were 28 Stage 3 diagnoses, which is 28/1,134 or 2.5%.

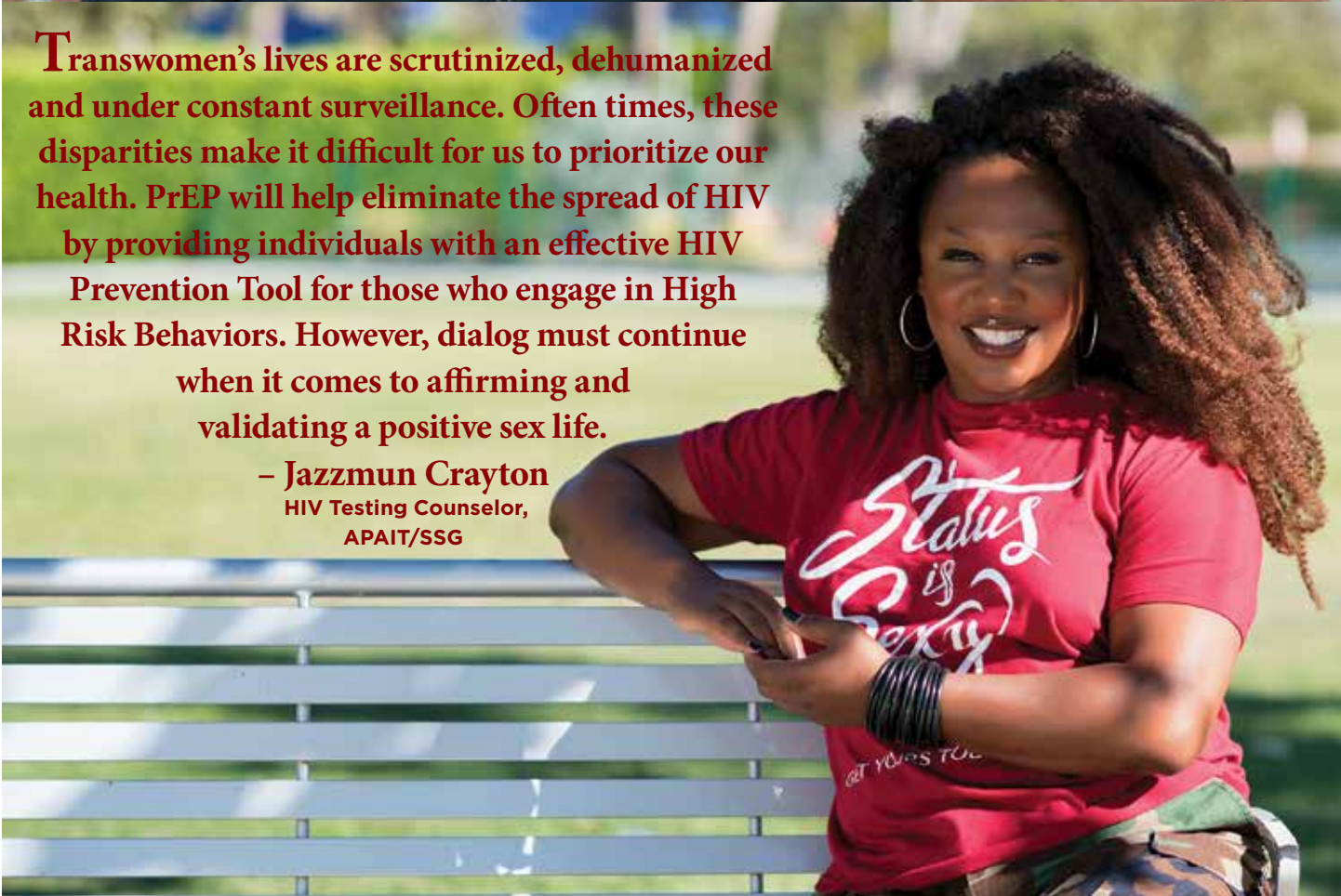
ⁱⁱ Comparing the four-year timeframes 2007-2010 to 2011-2014, males aged 15-35 years had a 22% decline in rate of HIV diagnoses, where all other age groups experienced a reduction of 34-35%.

A portrait of Jaime Alvarez, a man with short dark hair, glasses, and a goatee, wearing a black button-down shirt. He is standing in front of a red brick wall.

We have all of the knowledge, skills and resources necessary to bring HIV to its knees. Allies and all members from every community can play a part in eradicating this epidemic.

– Jaime Alvarez

Director of Programs, Friends Research Institute, Inc.

A portrait of Jazzmun Crayton, a Black woman with long, curly hair, wearing a red t-shirt with the text "Status is Sexy" and "GET YOURS TOO". She is sitting on a white metal bench outdoors, smiling.

Transwomen’s lives are scrutinized, dehumanized and under constant surveillance. Often times, these disparities make it difficult for us to prioritize our health. PrEP will help eliminate the spread of HIV by providing individuals with an effective HIV Prevention Tool for those who engage in High Risk Behaviors. However, dialog must continue when it comes to affirming and validating a positive sex life.

– Jazzmun Crayton

**HIV Testing Counselor,
APAIT/SSG**

UNDERSTANDING THE INDICATORS OF PROGRESS

1. HEALTHCARE COVERAGE: We believe men connected to health providers are more likely to have access to biomedical interventions and other tools to reduce the chances of acquiring or transmitting HIV. Based on this premise, we intend to connect men at a heightened risk of acquiring HIV to healthcare coverage. In West Hollywood, men make up 99% of new HIV diagnoses; and, as shown in Figure 2, the primary mode of transmission is male-to-male sexual contact. In addition to being concentrated among men who have sex with men, young men (44 years and younger) are driving new diagnoses. Figure 3 shows that men aged 0-34 and 35-44 account for 78% of new diagnoses. In West Hollywood, 81% of men have healthcare coverage. However, only 77% of younger men (18-44 years) have healthcare coverage. ⁴ The goal is to increase healthcare coverage of younger men to be at parity with the average.

Figure 2: People living with HIV infection by transmission category, 2014 (N=2,522)

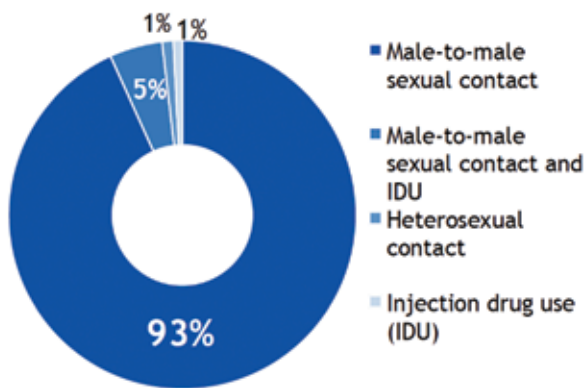
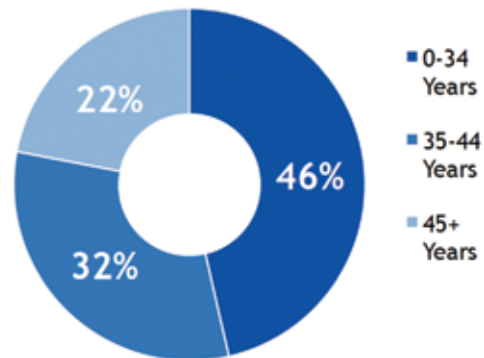


Figure 3: Diagnoses of HIV among males by age, 2011-2014 (N=291)



2. HIV DIAGNOSES: The fastest way to curb the proliferation of HIV is to halt new infections. The National HIV/AIDS Strategy 2020 aims to reduce HIV diagnoses 25% by 2020. West Hollywood endeavors to exceed this goal by the end of 2020. Since our progress is monitored in 2018, we have established a reduction of 15% as the indicator of progress.

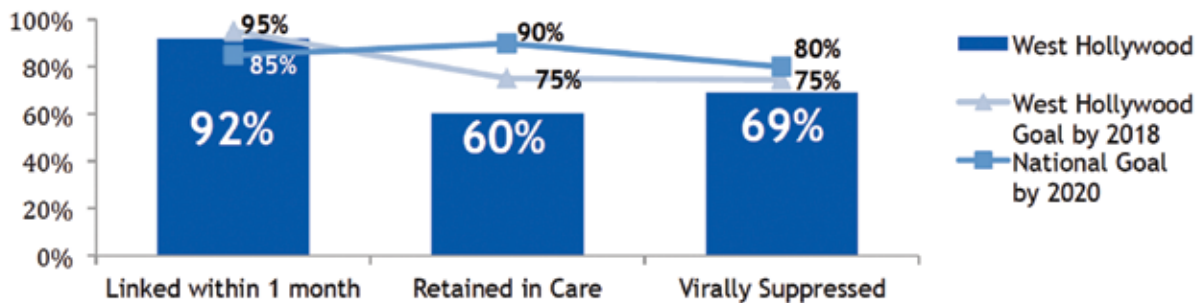
3. LINKAGE TO CARE: Recent studies demonstrate that a virally suppressed person living with HIV can reduce their capacity to transmit HIV up to 99%. The first steps to achieve viral suppression are to identify people living with HIV through HIV testing, and link them to medical care. Figure 4 on page 11 demonstrates that West Hollywood links 92% of people diagnosed with HIV to care within 1 month. This percent exceeds the National goal for 2020, set at 85%. We established the goal of 95% linkage to care to encourage greater linkage.

UNDERSTANDING THE INDICATORS OF PROGRESS

4. RETENTION IN CARE: On-going care is critical to achieve viral suppression. Retention in care is achieved when a person has at least two tests for viral load, CD4+ T-cells, or genotype within a 12-month period. As illustrated by Figure 4, the percent of PLWH retained in care is 60%. This is above the percent retained nationally (50.9%) and in Los Angeles County (51%); however, West Hollywood plans to do better. By 2018, West Hollywood aims to retain in care 75% of PLWH. This allows us to be on track to achieve the national indicator of 90% by 2020.

5. VIRAL SUPPRESSION: A person is considered virally suppressed when their viral load test demonstrates no more than 200 copies of HIV per milliliter of blood. As previously mentioned, viral load suppression is key to reducing HIV transmission, as well as reinforcing the overall health of a person living with HIV – to minimize the chances of succumbing to opportunistic illness. Sixty-nine percent of PLWH in West Hollywood are virally suppressed. This is higher than the percent of PLWH who are virally suppressed nationally (43.4%) and in Los Angeles County (50%). As Figure 4 displays, West Hollywood needs to increase the percent of PLWH who are virally suppressed by 8% to achieve its 2018 goal of 75%.

Figure 4: Linkage to care among people with an HIV diagnoses in 2014 (N=77), and Retention in care and Viral Suppression among people living with HIV, 2014 (N=2,467)

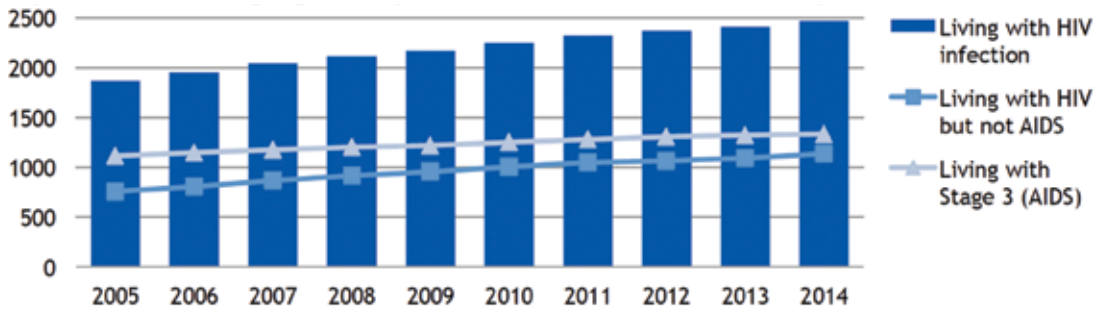


The second phase of the **WeHo is PrEPared** campaign provides expanded education and resource information about Pre-Exposure Prophylaxis (PrEP) to a variety of communities with materials in English and Spanish.

UNDERSTANDING THE INDICATORS OF PROGRESS

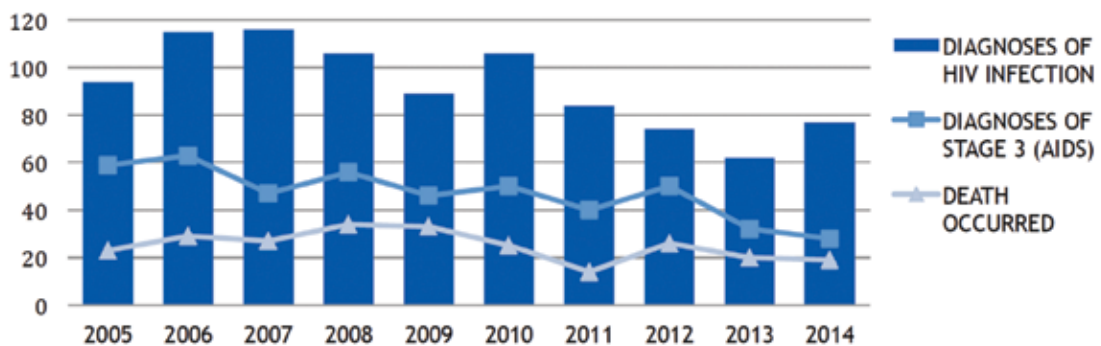
6. STAGE 3 DIAGNOSES: A diagnosis of Stage 3 (AIDS) happens when a person's immune system becomes highly compromised (based on low CD4 cells count), or when a person becomes ill with one of 26 AIDS defining opportunistic infections.⁶ Once a person is diagnosed with AIDS, even if they no longer have the syndromes used to diagnose them, state and federal guidelines stipulate counting them as part of the population living with AIDS. This makes it difficult to determine the proportion of PLWH who are actually living with AIDS. Figure 5 shows over half (54%) of people diagnosed with HIV in West Hollywood are living with AIDS. In LA County, 57.9% of PLWH have an AIDS diagnosis.⁷ As West Hollywood continues to make strides to End HIV, reducing the percentage of the people living with AIDS is essential. This includes more coordinated care management to help people living with HIV slow and avoid progressing to a diagnosis of AIDS. We intend to reduce the proportion of PLWH with AIDS by focusing on limiting the percentage of persons diagnosed with Stage 3 annually to no more than 2 percent of the HIV positive population without a Stage 3 diagnosis. Figure 6 on page 14 shows West Hollywood had 28 Stage 3 diagnoses in 2014. This equals 2.6% of the number living with HIV without a Stage 3 diagnosis (N=1,134) in 2013.

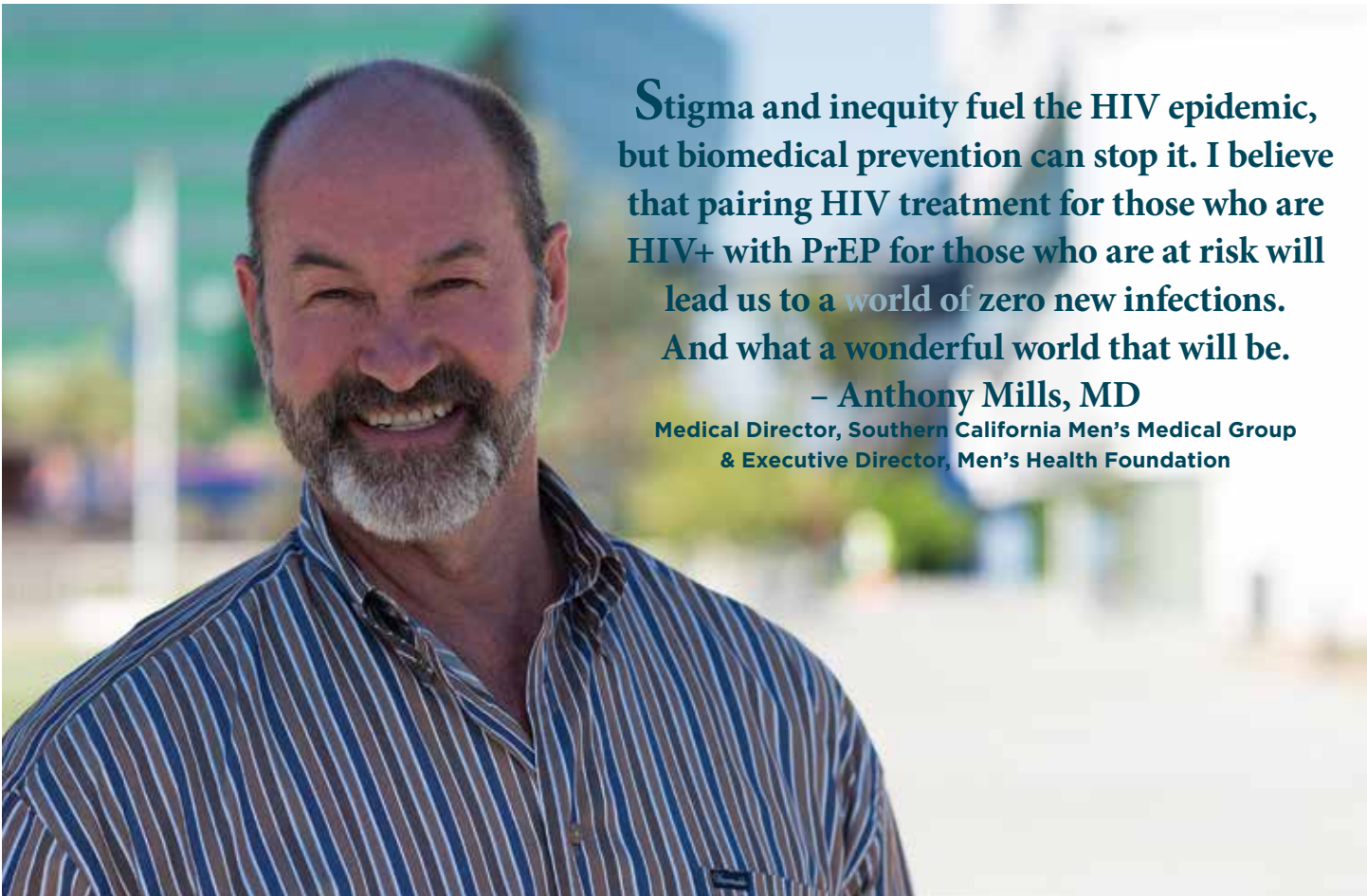
Figure 5: Number of people living with HIV, HIV but not AIDS, & Stage 3 (AIDS), 2005-2014



7. STIGMA: In 2016, stigma continues to be associated with HIV and people at a heightened risk for acquiring HIV— gay and bisexual men and transgender women. For people living with HIV, stigma is related to negative psychosocial, physical and mental health issues like social isolation, anxiety, and depression.^{8,9} Among HIV negative gay and bisexual men and transgender women, sexual orientation based stigma can negatively affect mental health, coping skills, and willingness to disclose sexual orientation, which impacts healthcare access to screenings and preventative medicine. Evidence of stigma is seen in the disproportionate number of HIV diagnoses among young men who have sex with men, especially men of color. In West Hollywood, the annual rate of HIV diagnoses for men is 0.4 per 100 men,² which is 13.3 times greater than the rate in Los Angeles County (0.03 diagnoses per 100 men).³

Figure 6: Number of diagnoses of HIV, Stage 3, and AIDS-related Deaths, 2002-2014





Stigma and inequity fuel the HIV epidemic, but biomedical prevention can stop it. I believe that pairing HIV treatment for those who are HIV+ with PrEP for those who are at risk will lead us to a world of zero new infections. And what a wonderful world that will be.

– Anthony Mills, MD

**Medical Director, Southern California Men’s Medical Group
& Executive Director, Men’s Health Foundation**



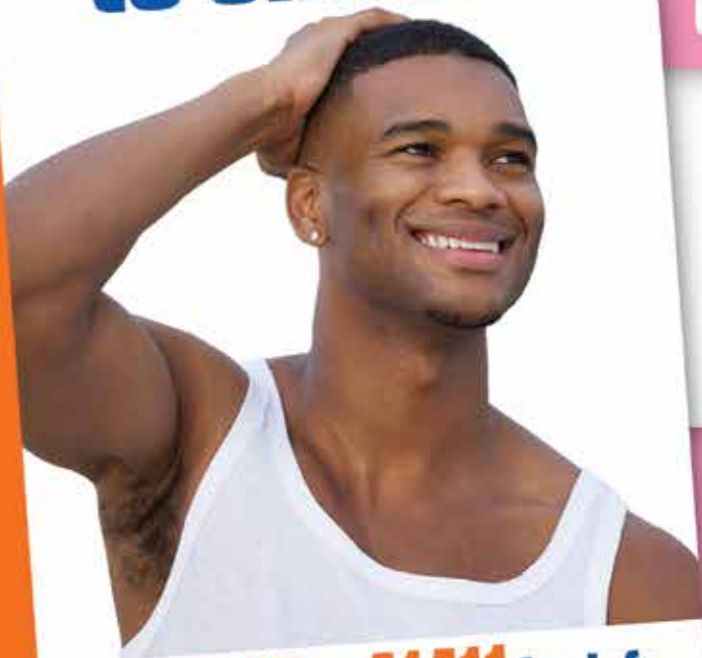
HIV activism can mean taking to the streets in protest or simply unashamedly declaring you’re HIV-positive.

We can all decide to take a risk and defy the stigma, homophobia and racism that fuel the epidemic.

– Alex Garner

Senior Health Innovation Strategist, Hornet App.

**Be PrEPared
to end HIV**



Text PrEP to 41411 for info

*Message or data rates may apply. Terms of use and privacy policy at: t.41411.com. Reply **HELP** for help.*

La comunidad trans*

está PrEParada

para acabar

con el VIH

Envíe PrEPare por texto al 41411 para información

*Pueden existir cobros adicionales de texto y datos.
Lea los términos de uso y la política de privacidad
en: t.41411.com. Envíe **HELP** para ayuda.*

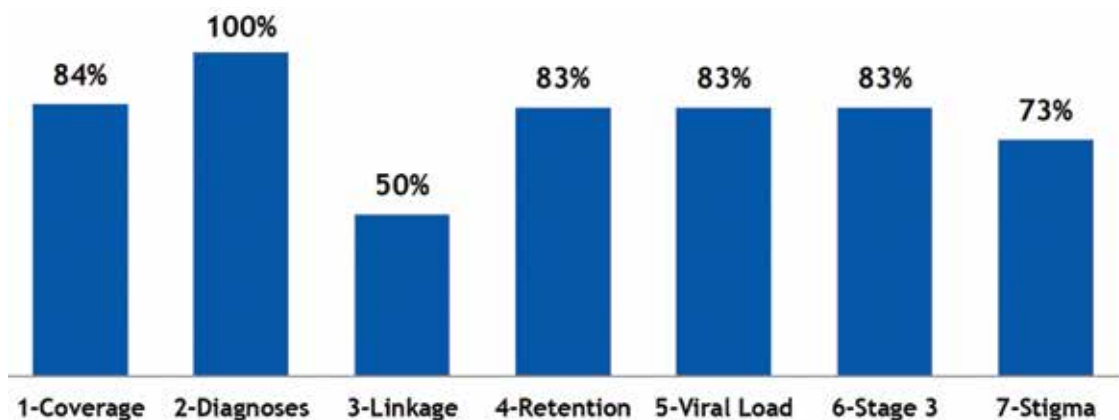
SOCIAL SERVICE PROVIDER INDICATORS OF PROGRESS

The HIV Zero Initiative goals will be achieved through eighteen service contracts. We are supplementing Indicators of Progress with data from service providers and through community engagement. By doing this, we can more quickly assess the extent to which programs in 2017 impacted the community in 2017. The current model of HIV surveillance data has a 2-year lag, so that treatment and prevention efforts made in 2017 that impacted HIV surveillance data in 2017 are not reported until 2019. Since we are at the baseline for our assessment, we have no numeric targets for the following supplemental data sources to be collected annually. We will set targets in the years to come.

- 1. HEALTHCARE COVERAGE:** Document the number of new healthcare coverage enrollments by age, race, gender, and serostatus (demographics).
- 2. HIV DIAGNOSES:** Document the number, and demographics of, people diagnosed with HIV, new PrEP users, and substance abuse treatment clients.
- 3. LINKAGE TO CARE:** Document the number of people living with HIV linked to care.
- 4. RETENTION IN CARE:** Document the number of people retained in care.
- 5. VIRAL SUPPRESSION:** Document the number of people who are virally suppressed.
- 6. STAGE 3 DIAGNOSES:** Document the number of people diagnosed with Stage 3 (AIDS).
- 7. STIGMA:** Document public opinion about HIV/AIDS among community members, services and health providers via annual surveys.

Figure 8 illustrates the percentage of social services contracts that directly contribute to the fulfillment of each indicator. Every indicator is supported by at least 50% of the social services contracts through direct and indirect services. See social services contracts that Support Indicators of Progress (page 10-15) for a comprehensive look at the 18 social services contracts, including a description of services provided and how they contribute to each indicator.

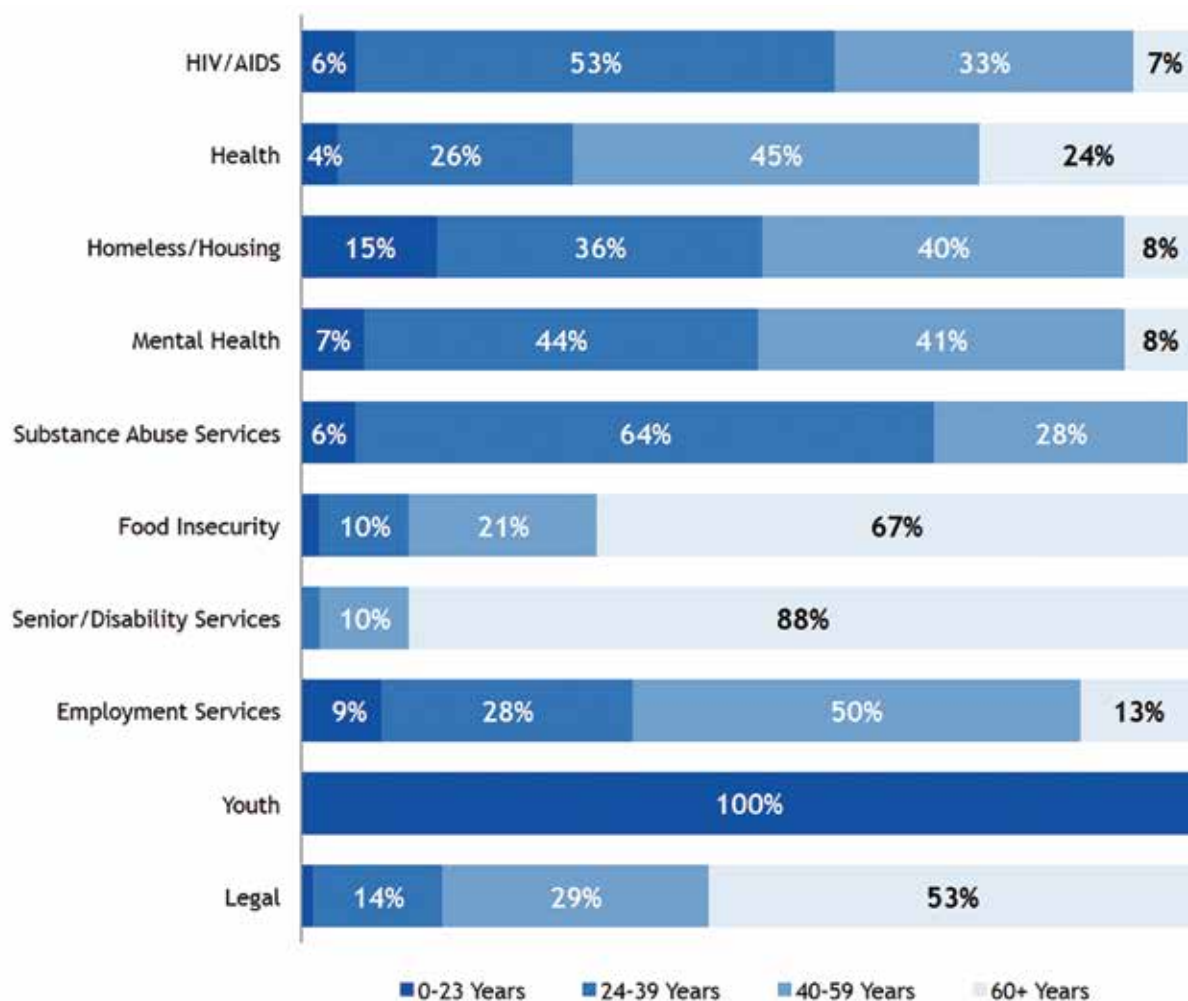
Figure 8: HIV Zero Indicators Fulfilled by Direct or Indirect Service Provider Contracts



HIV ZERO SOCIAL SERVICES

Although HIV primarily impacts men who have sex with men and transgender women, West Hollywood service providers offer health and social support services to all people regardless of gender identity. In fact, of the 6,053 clients served during the first half of 2016, 30% identify as female, 9% gender non-conforming, and 61% male.¹¹ Services are delivered to all race/ethnic groups, genders and age categories.ⁱⁱⁱ Figure 9 shows services delivered to each age group in key areas that contribute to the HIV Zero continuum of care, aimed to keep HIVnegative people negative and HIV positive people well supported and retained in care.

Figure 9: Social Services provided by age group, 2016



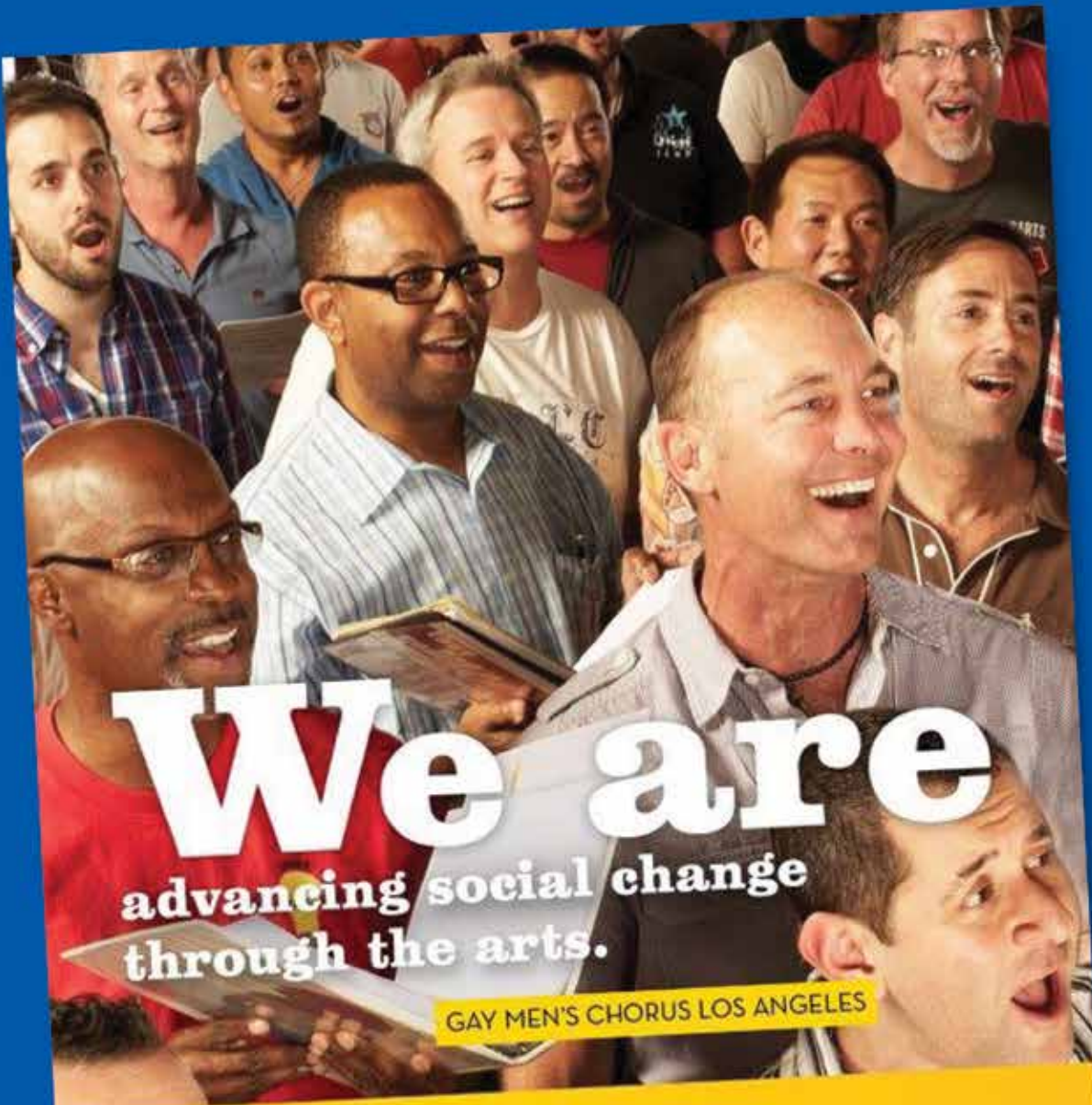
ⁱⁱⁱ Male and female includes cisgender and transgender male and female.



Every person should have the right to protect his or her health, no matter what their sexual practices. PrEP is an excellent tool to do just that and should be available to anyone who wants it.

– Faith Landsman

Administrative Director,
UCLA CFAR Research Facilitation Core



We are

advancing social change
through the arts.

GAY MEN'S CHORUS LOS ANGELES

That's why we take care of ourselves and
our community. Get involved and stay healthy.
Get tested for HIV and STD's.

Log on to

WEHOLIFE.ORG

HIV ZERO TARGET POPULATIONS

We will focus our efforts to reach people according to where they are in an HIV continuum of care that includes HIV negative people. This is a focus on HIV negative community members at a heightened risk of acquiring HIV and individuals living with HIV.

HIV NEGATIVE

1. **GAY AND BISEXUAL MEN:** especially younger men (15-34 years), men who are sexually active, and those with a history of sexually transmitted infections.
2. **WOMEN:** (including Transgender Women) especially those who are sexually active, low income, have a history of sexually transmitted infections and engage in sex work.
3. **USE METH:** (Methamphetamine) anyone who actively or occasionally uses.
4. **INJECTION DRUGS:** anyone who actively or occasionally uses.

HIV POSITIVE

5. **NEWLY DIAGNOSED**
6. **LIVING WITH HIV BUT NOT LINKED TO CARE**
7. **VIRAL LOAD IS DETECTABLE**



I AM, WE ARE was a campaign that ran from 2011-13 that featured individuals and organizations encouraging community involvement, self-care, healthcare and HIV prevention.

THE TRANSGENDER COMMUNITY

Transgender and gender nonconforming community members are a priority population for the City. West Hollywood demonstrates its commitment to the success of transgender people by funding culturally competent services – helping transgender people gain economic stability and empowerment – as well as providing access to fundamental health and prevention services.

The Social Services Division contracts with organizations such as the Los Angeles LGBT Center’s Youth and Mental Health Services programs, the Transgender Economic Empowerment Project, Bet Tzedek Legal Services, Men’s Health Foundation and Friends Research Institute, to provide services to transgender and gender nonconforming individuals.

The City’s Social Services Division formed a Transgender Services Providers’ collaborative that meets regularly to discuss issues affecting the transgender community including HIV/AIDS, employment, immigration, social services, and public safety.

West Hollywood’s commitment to support the transgender community is demonstrated in the fact that at least 2% of community members accessing services identify as transgender. In Los Angeles County, individuals who identify as transgender make up between 0.1% and 0.5% of the total population.

The number of transgender clients served by West Hollywood Social Services contract agencies increased as a direct result of programs targeting transgender and gender nonconforming individuals. In 2015, 181 community members accessing social services identified as transgender. This number increased to 234 in 2016.

The City of West Hollywood is not only a safe and welcoming home for the transgender community; it is also a place where trans people can thrive.

- Drian Juarez

Los Angeles LGBT Center and West Hollywood Transgender Advisory Board member



According to a meta-analysis of data conducted by researchers at Johns Hopkins University, the estimated HIV prevalence among transgender people in the United States is 22%. Significant social determinants of health factor into the transmission rate, such as high rates of unemployment and homelessness; in addition to violence, discrimination, and insensitivity in healthcare settings. Research shows transgender women living with HIV are less likely to be on antiretroviral therapy or achieve viral suppression. In any effort to curb this disparity within the transgender community, access to culturally competent and inclusive social services is crucial for preventing HIV transmission and progression.

¹ Baral, S., Poteat, T., Stromdahl, S., et. Al. Worldwide burden of HIV in transgender women: a systemic review and meta-analysis. *The Lancet Infectious Diseases*. 2013;(3)214-22.

² Centers for Disease Control (2017). Found at: <https://www.cdc.gov/hiv/group/gender/transgender/>

³ Division of HIV and STD Programs, Los Angeles County Department of Public Health, Los Angeles County Transgender Population Estimates 2012

ADDRESSING STIGMA AND DISCRIMINATION

HIV is now more treatable than ever before but overall public perception remains negative. Biomedical interventions and antiretroviral treatment have diminished the ability of the virus to spread as much harm as it has in the past three decades. Although science has proven that treatment is extremely effective in preventing HIV, an irrational fear of contagion and illness, still exists and often exacerbates the stigma associated with the virus.

HIV stigma can take on many forms of prejudice and discrimination, which can be overt, such as barriers to healthcare coverage or employment termination; at times it can be more subtle, such as social exclusion. No matter how an individual experiences stigma, it has negative health consequences and can be internalized – leading to increased feelings of shame and isolation – and subsequently, negative mental health impacts.

Furthermore, stigma affects persons at a heightened risk for acquiring HIV – including gay and bisexual men, transgender women, and low income, cisgender women. Previous stigma experienced with a medical and mental health provider or a fear of anticipated stigma, can lead to these groups avoiding much needed care.

Stigma and discrimination are potentially the most difficult aspects of HIV/AIDS to address, yet addressing them is vital to “getting to zero” and mitigating the impacts of the disease on the community.

A culminating goal of the HIV Zero plan is to build an inclusive community that supports underserved groups and honors the contributions made by people living with HIV.

To confront the stigma that persists, the HIV Zero Plan will focus on:

- Enrolling and retaining individuals who are living with HIV and at a heightened risk for acquiring HIV in healthcare and prevention programs that are appropriate and culturally competent
- Providing mental health care such as psychotherapy, psychiatry, and group support to minimize the harm associated with stigma
- Targeting groups at heightened risk for HIV with multiple peer-led, harm reduction-based interventions
- Creating public awareness campaigns about the tools available to community members at-risk, namely to reframe PrEP as a positive and responsible option to help people remain HIV-negative
- Advocating for an inclusive community, one in which, all community members regardless of status, gender identity, sexual orientation, disability, or income feel valued, supported, and cared for in West Hollywood



The City of West Hollywood unveiled this large, billboard-size memorial banner on the front of West Hollywood City Hall on June 5, 2006 to mark the 25th anniversary of the first diagnosis of AIDS

HIV ZERO STRATEGIES

The City of West Hollywood service providers will use a combination of ten strategies to contribute to the success of the seven indicators of progress. Figure 1 lists the strategies.

Figure 1: HIV Zero Initiative Strategies

- A HEALTHCARE ENROLLMENT**
Enroll uninsured and underinsured community members in healthcare coverage
- B PREVENTION OUTREACH & EDUCATION**
Provide outreach and education regarding risk-reduction, HIV treatment, condom distribution, and biomedical interventions such as PEP and PrEP.
- C BIOMEDICAL INTERVENTIONS**
Ensure PrEP, PEP, and antiretroviral therapy is accessible and timely
- D SUBSTANCE ABUSE PREVENTION & TREATMENT**
Treat substance abuse with comprehensive and culturally competent addiction recovery services
- E MENTAL HEALTHCARE**
Support individuals at a heightened risk for acquiring HIV and persons living with HIV with trauma-informed mental health care
- F TESTING & LINKAGE**
Identify new positives through testing and linking those who test positive to a medical provider
- G HIV PRIMARY MEDICAL CARE**
Ensure that people living with HIV have access to a medical provider that specializes in HIV care and preventative medicine
- H RETENTION IN CARE**
Retain people living with HIV in care by eliminating barriers
- I BUILD INCLUSIVE COMMUNITY REGARDLESS OF HIV STATUS**
Programming, activities, and community engagement that reinforces inclusion, and honors the contributions made by HIV positive community members
- J HIV PUBLIC AWARENESS**
Use social marketing and community forums to raise awareness and shift public opinion by addressing HIV stigma, biomedical interventions, sexually transmitted diseases, HIV treatment innovations, and the critical importance of initiating and adhering to antiretroviral therapy. ⁱ

ⁱ This includes targeting difficult-to-reach transgender and undocumented community members.

SOCIAL SERVICE AGREEMENTS, INDICATORS AND STRATEGIES

Table 1: Social Services Agreements, Indicators and Strategies - A

INDICATORS OF PROGRESS		STRATEGIES	
1	Coverage	A	Healthcare Enrollment
2	Diagnoses	B	Prevention Outreach & Education
3	Linkage	C	Biomedical Interventions
4	Retention	D	Substance Abuse Treatment
5	Viral Load	E	Mental Healthcare
6	Stage 3	F	Testing & Linkage
7	Stigma	G	HIV Primary Medical Care
		H	Retention in Care
		I	Support for Persons Living with HIV
		J	HIV Public Awareness

PROVIDERS	SERVICE	INDICATORS	STRATEGY
Alliance for Housing and Healing	Direct Financial Assistance Vitamin/Pharmacy Program Housing and Health Case Management	4, 5, 6	H, I
APLA	Benefits Counseling Non-Medical Case Management	1, 2, 3, 4, 5, 6, 7	A, B, H, I, J
APLA Health and Wellness	Social Work Case Management Individual Counseling Psycho-educational Group Counseling Dental Services	1, 2, 3, 4, 5, 6, 7	A, B, E, F, G, H, I, J
Being Alive	Intake Wellness Center One-on-One Counseling Medical Updates Support Groups Social/Recreational Activities	1, 2, 3, 4, 5, 6, 7	B, D, E, F, G, H, I
Bet Tzedek	Intake Legal Services and Casework	1, 7	H
Friends Research Institute - Outreach	Outreach to MSM Outreach to Transgender	1, 2, 3, 4, 5, 6, 7	A, B, C, D, E, F, G, H

SOCIAL SERVICE AGREEMENTS, INDICATORS AND STRATEGIES

Table 2: Social Services Agreements, Indicators and Strategies - B

INDICATORS OF PROGRESS	STRATEGIES
1 Coverage	A Healthcare Enrollment
2 Diagnoses	B Prevention Outreach & Education
3 Linkage	C Biomedical Interventions
4 Retention	D Substance Abuse Treatment
5 Viral Load	E Mental Healthcare
6 Stage 3	F Testing & Linkage
7 Stigma	G HIV Primary Medical Care
	H Retention in Care
	I Support for Persons Living with HIV
	J HIV Public Awareness

PROVIDERS	SERVICE	INDICATORS	STRATEGY
Friends Research Institute - Substance Use	Outpatient Substance Abuse Treatment Gay specific Cognitive Behavioral Therapy Groups Contingency Management Intervention	1, 2, 3, 4, 5, 6, 7	D, E, F, H, I, J
LGBT Center - Mental Health	Intake Counseling - Addiction Counseling - Mental Health Support Groups - Addiction Support Groups - Mental Health Support Groups - HIV+ Psychiatric Services Mental Health Outreach Mental Health Referrals	1, 2, 4, 5, 6, 7	A, D, E, F, H, I, J
LGBT Center - Sexual Health	HIV/STD Screening HIV/STD Treatment	1, 2, 3, 4, 5, 6, 7	A, B, C, D, E, F, G, H, I, J
LGBT Center - Transgender	Intake Case Management Job Placement	7	B, I
LGBT Center - WeHo Life	Condom Distribution Online - Prevention Videos Online - Video Survey Awareness PrEP Text Messages	3, 7	I, J
LGBT Center - Youth	Outreach Outreach Intake/Assessment Shelter Youth Employment	1, 2, 3, 7	A, B, C, D, E, F, J

SOCIAL SERVICE AGREEMENTS, INDICATORS AND STRATEGIES

Table 3: Social Services Agreements, Indicators and Strategies - C

INDICATORS OF PROGRESS	STRATEGIES
1 Coverage	A Healthcare Enrollment
2 Diagnoses	B Prevention Outreach & Education
3 Linkage	C Biomedical Interventions
4 Retention	D Substance Abuse Treatment
5 Viral Load	E Mental Healthcare
6 Stage 3	F Testing & Linkage
7 Stigma	G HIV Primary Medical Care
	H Retention in Care
	I Support for Persons Living with HIV
	J HIV Public Awareness

PROVIDERS	SERVICE	INDICATORS	STRATEGY
McIntyre House	Substance Abuse Residential Recovery Sober Living Transitional Housing	1, 2, 3, 4, 5, 6, 7	A, D, E, F, H, I
Men's Health Foundation	Health Prevention Outreach Intake Referred to PEP/PrEP Navigation Linkage to PEP Clinical Services Linkage to PrEP Benefits Counseling/Navigation Linkage to Healthcare Transportation	1, 2, 3, 4, 5, 6, 7	A, B, C, E, F, G, H, I, J
Planned Parenthood	Reproductive & Sexual Health Services & Education HIV and STI Tests PrEP and PEP	1, 2, 3, 4, 5, 6, 7	A, B, C, F, H, I, J
Saban Community Clinic	General Health and Medical HIV Testing Dental Health Behavioral Health Services, Case Management and Crisis Intervention Health Care Coverage Enrollment	1, 2, 3, 4, 5, 6, 7	A, B, C, E, F, G, H, I
Safe Refuge	Residential Treatment Transitional Housing	1, 2, 3, 4, 5, 6, 7	D, E, F, H, I
Tarzana Treatment Centers	Inpatient Detoxification Days Residential Treatment Days Transition Housing Program	1, 2, 3, 4, 5, 6, 7	A, B, C, D, E, F, H

HIV ZERO PARTNERS & SERVICE PROVIDERS

AID FOR AIDS/ALLIANCE FOR HOUSING AND HEALING provides financial support to persons living with HIV/AIDS to pay for rent, utilities and pharmaceuticals; as well as benefits counseling, and housing case management for homeless individuals and those at risk of homelessness.

www.alliancehh.org

AIDS HEALTHCARE FOUNDATION provides medical services for people living with HIV/AIDS, mobile testing and counseling for HIV and STDs, and testing and counseling for HIV.

www.aidshealth.org

APLA HEALTH provides case management, nutrition, tax assistance, insurance and benefits advocacy, behavioral health services (psychotherapy, group support) and dental services for people living with HIV/AIDS.

www.apla.org

APAIT provides culturally appropriate services in the areas of behavioral health; substance abuse; HIV testing, education and counseling; social support groups; and research, education and development.

www.apaitonline.org

BEING ALIVE provides educational peer support, peer counseling, mental health services, wellness center programming and social events for persons living with HIV/AIDS.

www.beingalivela.org

BIENESTAR is a non-profit social service organization that primarily targets the Latino LGBT community and is dedicated to positively impacting their health and well-being. Key to its success is health education and awareness regarding HIV/AIDS, substance abuse and drug prevention.

www.bienestar.org

C.I.T.Y. x1 YOUTH GROUP gives LGBTQ Youth & allies (ages 14-24) in L.A. County an alternative to the club scene by providing free social events that create community, promote diversity, and empower the lives of young people.

www.cityx1.com

FRIENDS RESEARCH INSTITUTE, INC. provides HIV/AIDS educational outreach to gay, bisexual, and transgender persons and substance use treatment for gay and bisexual men.

www.friendsresearch.org

KLEAN TREATMENT CENTER is a residential rehabilitation center that aims to address the underlying factors behind addiction.

www.kleantreatmentcenter.com

LIFE GROUP L.A. is a coalition of people dedicated to the education, empowerment and emotional support of persons both infected and affected by HIV/AIDS so that they may make informed choices and decisions regarding their healthcare and personal well being.

www.lifegroupla.org

LOS ANGELES HIV LAW & POLICY PROJECT works collaboratively to address the evolving law and policy needs of the most vulnerable people living with HIV in LA County. The collaborative partnership is between four primary organizations—Los Angeles County Bar Association's AIDS Legal Services Program, UCLA School of Law and its Williams Institute, Inner City Law Center and Bet Tzedek Legal Services.

www.lahlpp.org

HIV ZERO PARTNERS & SERVICE PROVIDERS

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH – DIVISION OF HIV AND STD PROGRAMS

seeks to prevent and control the spread of HIV and STDs through epidemiological surveillance, implementation of evidence-based programs, coordination of prevention, care and treatment services, and the creation of policies that promote health.

www.publichealth.lacounty.gov/dhsp

LOS ANGELES LGBT CENTER *provides services including mental health, sexual health, the Transgender Economic Empower Program, and the WeHo Life program which provides HIV prevention information, education and outreach for West Hollywood residents and businesses through a website, materials, and condom distribution.*

www.lagaycenter.org and www.weholife.org

McINTYRE HOUSE *provides a residential substance abuse recovery program for men.*

www.mcintyrehouse.org

MEN'S HEALTH FOUNDATION *provides same day PrEP and PEP services, benefits counseling, and healthcare services for gay and bisexual men and transgender women.*

www.mhfoundation.org

PLANNED PARENTHOOD *provides family planning and reproductive health care services, and HIV and STI testing and treatment, including PrEP and PEP.*

www.plannedparenthood.org/planned-parenthood-los-angeles

SABAN COMMUNITY CLINIC *provides general health and medical services, HIV testing, dental services, and mental health services to uninsured and underinsured persons.*

www.sabancommunityclinic.org

SAFE REFUGE *provides residential substance abuse treatment, mental health and transitional housing (sober living opportunities).*

www.asaferefuge.org

TARZANA TREATMENT CENTERS, INC. *provides inpatient medical detoxification services and inpatient substance abuse treatment services.*

www.tarzanatc.org

THE THRIVE TRIBE *seeks to end HIV transmission and stigma through peer-to-peer empowerment, building community, and connecting members to care.*

www.thethrivetribe.org

UCLA HIV RESEARCH STUDY VOLUNTEER PROJECT *matches interested individuals in Los Angeles County with HIV-related research at UCLA.*

www.hivrsvp.ucla.edu

VAN NESS RECOVERY HOUSE *provides residential and outpatient alcohol and drug treatment programs and education/outreach targeting at-risk populations.*

www.vannessrecovery.org

WEST HOLLYWOOD COMMUNITY HOUSING CORPORATION *develops safe, decent and affordable housing within the greater Los Angeles area for people with limited income, including those with special needs, which enhances the community and supports economic diversity.*

www.whchc.org

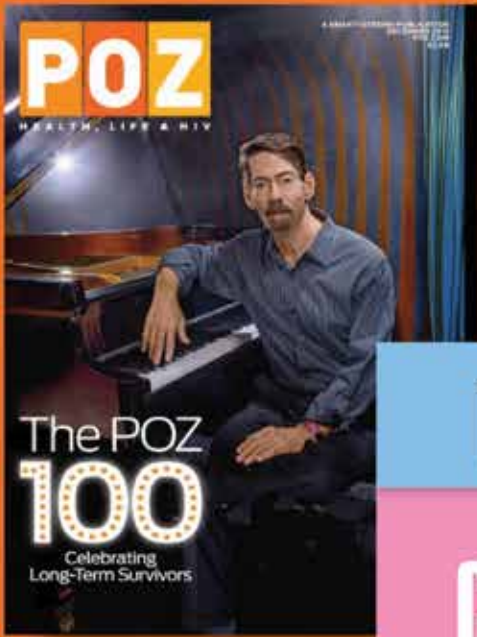
WEST HOLLYWOOD RECOVERY CENTER *provides a variety of 12-step meetings throughout the week.*

www.thewhrc.org

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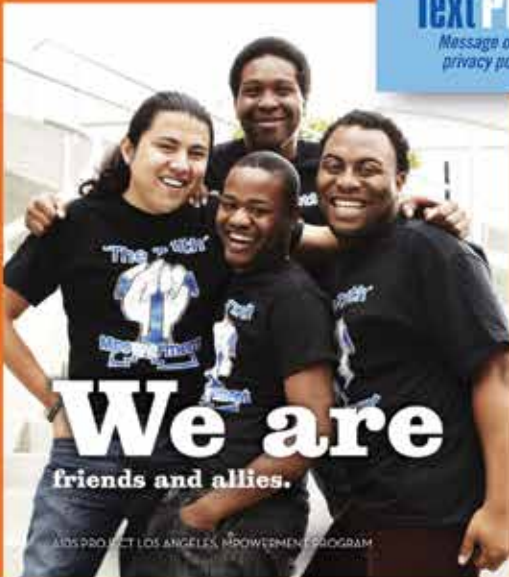
The Trans*
Community



Is PrEPared



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Message or data rates may apply. Terms of use and privacy policy at: 41411.com. Reply HELP for help.



We take care of ourselves and our community. Get involved and stay healthy. **Talk. Test. Know.**
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West Hollywood City Council

John D'Amico, *Mayor*

Lindsey Horvath, *Mayor Pro Tempore*

John J. Duran, *Councilmember*

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Lauren Meister, *Councilmember*

City Manager

Paul Arevalo

City of West Hollywood Staff

Lisa Belsanti, *Director of Communications*

Joshua Schare, *Communications Manager*

David Giugni, *Social Services Manager*

Derek Murray, *Social Services Program Administrator*

Corey Roskin, *Social Services Specialist*

Human Services Commission

Sam Borelli, *Chair*

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Steven L. Davis

Barbara Meltzer

Jimmy Palmieri

Andrew Reback

Patrick Shandrick

Research & Analysis

Aaron Celious, *Ph.D.* - The Maroon Society

Daniel Getzoff

Design

Ruben Esparza, RED Studios

Photography

Jon Viscott

City of West Hollywood

8300 Santa Monica Boulevard

West Hollywood, CA 90069

(323) 848-6400

TTY for hearing impaired (323) 848-6496

www.weho.org



To read the study summary or the full report, visit
www.weho.org/hivzero
or call (323) 848-6510 for a copy of the summary.



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