



**Our mission is to advance health equity and promote healing for all people impacted by HIV.
Our vision is an East Bay with zero HIV stigma, health disparities, or new HIV transmissions.**

Who we are: a diverse group of people from community organizations, clinics, hospitals, schools, faith-based organizations, public and private agencies working together to advance health equity and healing for all people impacted by HIV through advocacy, policy reform and innovation.

What we do: come together to figure out ways to help people get equitable access to HIV testing, prevention and treatment services.

How to get involved: Learn about HIV testing, prevention with a pill called PrEP, and how treatment makes HIV undetectable and untransmittable. Come to one of our free events or join a working group.

Our overall goal is to get to zero new HIV transmissions and disparities by 2030 with these strategies:

CHANGING HOW WE TALK ABOUT HIV. We use a collective impact model to address stigma and disparities. We aim to have health policies and structures that are equitable. We have advocacy, intentional messaging and social media campaigns so everyone talks about HIV in a healthy way.



GETTING EVERYONE TESTED.

We aim to provide universal HIV screening for everyone, and at least annual screening for everyone with ongoing exposures through community organizations, clinics, hospitals, pharmacies, schools, outreach teams, and really anywhere.

Goal: We aim to reduce the annual number of new HIV diagnoses by at least 25% by 2023. In 2017 there were 313 people newly diagnosed with HIV in Alameda and Contra Costa Counties.



GETTING PREP FOR EVERYONE WHO WANTS OR NEEDS IT.

We aim to provide access to HIV PrEP (Pre-Exposure Prophylaxis), a highly effective pill that prevents an HIV-negative person from getting HIV, to everyone who wants or needs it. We are working on better screening & creative ways to access PrEP.

Goal: We aim to increase the total number of people using PrEP by at least 100% by 2023. In 2017 there were at least 1,909 people in Alameda County who have been prescribed PrEP.



GETTING TREATMENT FOR EVERYONE WITH HIV.

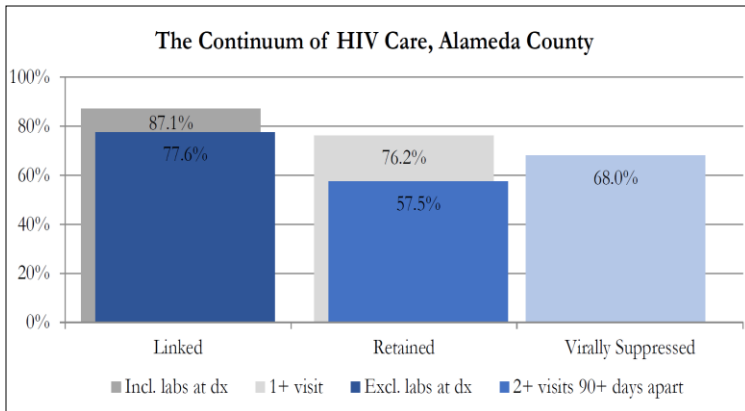
We aim to provide friendly, streamlined access to care and treatment for everyone living with HIV. When a person with HIV has an undetectable viral load on treatment, they don't transmit HIV & are healthier.

Goal: We aim to increase the % of people linked to care within 30 days to 90% and the % of people virally suppressed to 80% 2023. In 2016, 70% of the people with HIV in Alameda and Contra Costa Counties were virally suppressed.

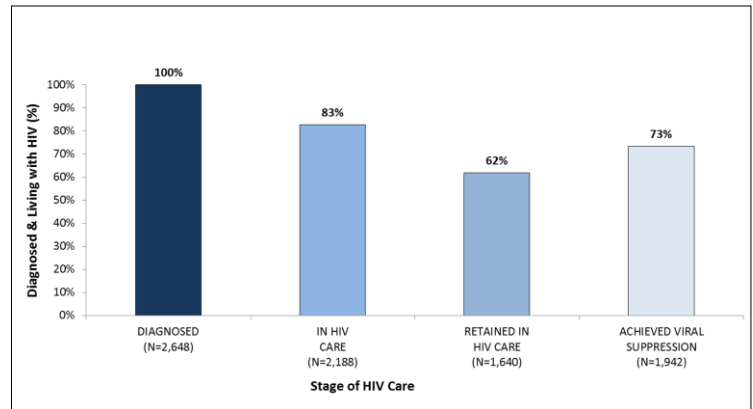


What are our known HIV disparities?

Continuum of HIV Care in Alameda County



Continuum of HIV Care in Contra Costa County



Gaps in care we need to address: ~40% people living with HIV are out of care and ~30% are not virally suppressed.

Alameda County data are from 2014 to 2016 from "HIV in Alameda County, 2015-2017," published December 2018.

Contra Costa County data are as of Dec 2017 from "HIV Surveillance Data, Contra Costa County," presented May 2019.

County-level disparities among new diagnoses and HIV prevalence

Alameda County:

There are 200-300 new HIV diagnoses per year since 2006. In 2017, there were about 6,427 people living with HIV.

African Americans bear a disproportionate burden of new HIV diagnoses and prevalence.

- African Americans have ~3x the new HIV diagnoses compared to Latinos, who had the next highest diagnosis rate.
- African Americans had >3.6x the HIV prevalence compared to whites, who had the next highest prevalence rate.

Young people ages 20-29 have the highest rates of new diagnoses.

- People ages 20-29 had 2.4x the new diagnosis rate compared to the average rate for all ages.

Contra Costa County: There were 108 new diagnoses in 2018. In 2017, there were about 2,648 people living with HIV.

- **African Americans** had 3.6x the rate of new diagnoses in 2010-2014 compared to Latinos and 5.7x compared to whites.
- African American men were 3x and African American women were 11.5x as likely to have HIV compared to whites in 2017.
- **Young people ages 20-29** had 2.7x the rate of new diagnoses in 2015-2017 compared to the county average rate.

HIV ACCESS (Alameda County) care disparities key findings (analysis done 2017 with data through 2016)

The following disparities have been found among people living with HIV who are in care at one of the 5 HIV ACCESS clinics:

Age: Clients ages 13-24 were 3x less likely to be retained in care and 2x less likely to be virally suppressed than others.

Race/ethnicity: African American clients were 1.5x more likely to be retained in care but 1.6x less likely to be virally suppressed than other clients.

Gender: Cisgender women were 1.9x more likely to be retained in care while cisgender men were 1.8x less likely.

Risk: MSM who inject drugs were 6.6x less likely to be retained.

Learn more about how we are using this data to get to zero new HIV transmissions: www.EBGTZ.org