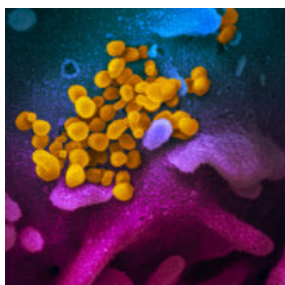


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COVID-19 AND HIV UPDATES

AUGUST 11, 2021

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The SARS-CoV-2 virus
(NIAID)

Below are East Bay COVID-19 and HIV community updates. This page is usually updated on third Wednesdays with data and resources gathered from many collaborators. [Please click here to share feedback.](#)

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EAST BAY COVID-19 UPDATES

Universal indoor masking is required in the Bay Area starting August 3, 2021: On August 2nd, Bay Area Health Officers urged immediate vaccination and issued orders requiring the use of face coverings indoors to prevent the spread of COVID-19, given the sharp increase in cases from the delta variant. [Click here for the Alameda County press release.](#) [Click here for the San Francisco press release,](#) which includes strong recommendations to also wear masks in crowded outdoor spaces and in indoor gatherings in private homes with people from multiple households.

COVID-19 cases and hospitalizations in the Bay Area have rapidly increased, with case rates 10-times higher in the month and a half following California's reopening on June 15. Bay Area coronavirus cases have surpassed last summer's peak when people were unvaccinated but strict precautions (masking, distancing, capacity limits) were still in place. The delta variant was [93%](#) of the COVID cases sequenced in the US by the end of July.

In the old California color-tier system, this would have put us in the purple “widespread” tier. This rapid rise in cases is likely due to reopening more activities, reductions in mask use, people not yet fully vaccinated, and the highly contagious delta variant, which has quickly dominated California and the rest of the world.

Since the spring, case rates among African American residents became higher than case rates among Latinx residents in Alameda County, following lower vaccination rates among African American residents. [Click here](#) for more disparity updates.

Get vaccinated now! It’s your best protection against severe illness. Vaccines remain highly effective against serious disease from the delta variant, though vaccinated people get mild infections and transmit the delta variant at a higher rate than previous variants. Surgeon General Murthy [said](#), “One fact that has been proven time and time again during this past year is that vaccines save lives. That’s why 99.5% of COVID-19 deaths and 97% of possible hospitalizations are among the unvaccinated. It’s also why nearly every death from COVID-19 is a preventable tragedy.” We must continue supporting everyone eligible to get vaccinated as soon as possible.

“We must act now to protect ourselves, our loved ones and our community. If you are eligible to get a COVID-19 vaccine and have not yet done so, please do not wait any longer,” [said](#) Dr. Chris Farnitano, health officer for Contra Costa County and EBGTZ steering committee member. “During July the number of hospitalized COVID-19 patients in our county increased 400%. Four out of five of the COVID patients we see are not vaccinated, even though only one out of five Contra Costa adults are not vaccinated.”

On August 5, Dr. Tomás Aragón, California state health officer, issued a [public health order requiring vaccinations for all health care workers in California](#) without allowance for people to choose to wear PPE instead of getting vaccinated. Recent outbreaks in health care settings have come from unvaccinated workers. On July 26, Dr. Aragón also [released a public health order mandating vaccinations for all state employees and all workers in homeless shelters, retirement homes, jails and prisons](#). Workers in these settings are required to show proof of vaccination or agree to mask and wear PPE and test at least weekly.

On August 11, CA Health Officer Dr. Tomás J. Aragón [issued a health order](#) requiring **all CA school workers to get fully vaccinated** and provide proof of vaccination or undergo at least weekly COVID-19 testing. On August 10, Oakland Unified School District [announced](#) a vaccination requirement for all school district staff, contractors and volunteers, with vaccination or weekly testing required by September 7.

Full FDA approval for the Pfizer vaccine is [expected](#) in September.

Substantial evidence shows that the delta variant is about twice as infectious as the original variant, which makes the reopening extra risky for unvaccinated people. A [study](#) of viral loads in delta infections found viral loads to be 1,000x higher than the original variant. [This study](#) from the CDC also demonstrates that the delta variant infects kids and unvaccinated people at higher rates in recreational settings, especially indoors, such as in this gymnastics facility where 20% at the gym were infected and 53% of household contacts became infected. A [CDC study](#) on a July 2021 outbreak in Massachusetts shows that viral loads of delta infection in vaccinated people were similar to viral loads among unvaccinated people, which suggests that transmission risk is similar from vaccinated people and unvaccinated people infected with the delta variant.

Get tested if you are exposed to COVID-19 or have symptoms! [Reports](#) from the UK and the [study](#) from the US show these top 5 symptoms in delta infection:

• **Top 5 symptoms in unvaccinated people:**

- Headache
- Sore throat
- Runny nose
- Fever
- *Persistent cough*

• **Top 5 symptoms in vaccinated people:**

- Headache, muscle aches
- Runny nose/congestion
- *Sneezing*
- Sore throat
- Loss of smell/taste

Vaccinated people are protected from hospitalization but appear to get more mild and asymptomatic infection from the delta variant compared to previous variants. Case rates (per 100,000) still remain much lower among vaccinated people compared to unvaccinated people. In highly vaccinated areas, more vaccinated people will be diagnosed. Marin County's health officer Dr. Matt Willis [reported](#) on July 16 that 25% of their new cases were among vaccinated people. While they are almost all asymptomatic or mild infections, they can still transmit to others.

Need proof of vaccination? Visit the [Digital COVID-19 Vaccine Record](#) site to request your digital vaccination card and download the Alameda County [Frequently Asked Questions](#) for more information. If you were vaccinated at an Alameda County supported site, you can visit any [currently open location](#) for assistance. If you were vaccinated elsewhere, contact that provider for a replacement.

Starting July 28, California recommended universal masking indoors statewide. This follows the CDC recommendation on July 27th for everyone, including vaccinated people, to mask indoors in [substantial and high transmission areas](#). The East Bay, including Alameda, Contra Costa and Solano Counties, are all in the high transmission rate category. This also follows the Bay Area health officer [recommendation](#) for universal indoor masking on July 16 and [requirement](#) starting August 3.

Vaccines and the delta variant

Delta variant [data](#) recently obtained by the CDC and reported in [The Washington Post](#) on July 29 show that the delta variant is more highly contagious, may cause more severe disease, and suggests that vaccinated people who get infected may spread it as easily as unvaccinated people. Vaccines remain highly effective at preventing severe disease (10x reduction), but less effective at preventing mild or asymptomatic infection with the delta variant (3x reduction).



Universal masking and distancing are crucial for reducing spread given current inadequate vaccine coverage. We need to continue to outreach to people to increase vaccination rates to reduce serious illness and death. We will also likely need to learn to live with the virus over the long run and aim to reduce serious illness and death through vaccinations.

[Read more about the new variant data and studies here.](#)

With high case rates in the Bay Area, vaccinated people are recommended to wear masks indoors and in crowded outdoor settings to protect children and other people who are unvaccinated and those who are immunosuppressed. People who are immunosuppressed and/or unvaccinated are recommended to wear masks whenever out in public.

Check out this [COVID risk calculator](#) for a detailed risk assessment for your situation.

COVID and HIV

A new WHO [study](#) of over 15,000 global cases of COVID-19 in people living with HIV (PLWH) presented at IAS in July 2021 found that PLWH were 13% more likely to be hospitalized and 30% more likely to die after being hospitalized. Among PLWH, having diabetes, high blood pressure, being male or over 75 years old was each associated with an increased risk of death. This study underscores the importance of prioritizing PLWH for vaccinations.

Fortunately, [data from the UK](#) shows that *full vaccination* COVID-19 vaccines are highly effective for people with underlying health conditions, including HIV. Getting one of two doses provided minimal protection, so completing all doses is extra important for people with underlying health conditions.

The Provincetown, Massachusetts [outbreak](#) in July 2021 included 30 PLWH who got COVID-19 infection, all fully vaccinated

and virally suppressed, and did not get illness severe enough to be hospitalized.

[Click here](#) to download recommendations for PLWH during the summer 2021 delta surge from Getting to Zero San Francisco.

COVID and Youth

New [evidence](#) from the CDC also demonstrates that the delta variant infects kids and unvaccinated people at higher rates in recreational settings, especially indoors, such as in this gymnastics facility where 20% at the gym were infected and 53% of household contacts became infected.

While most new infections are mild cases among young, unvaccinated people, there is still a risk of long-term health impacts that we don't understand yet. A new [study](#) from Norway shows that more than half (52%) of young people ages 16-30 had long COVID symptoms.

California is [requiring](#) "All adults and students in K-12 school settings must wear masks indoors." The American Academy of Pediatrics released [updated guidance](#) for schools on July 17 also recommending masks for all people ages 2 and over in school and childcare settings.

The delta surge and school reopenings:

Multiple [studies](#) from 2020 have shown that schools can safely reopen with fewer transmissions than in the surrounding community when mitigation strategies with masking, distancing, cohorts, capacity limits and ventilation in place. However, current school guidance is based on studies done before the delta variant was prominent. Stricter implementation of these strategies is even more crucial during times of high community case rates and a surge in more infectious variants, like now. In [a study from 2020 before Delta was widespread](#), British researchers found that for every five additional cases per 100,000 people in a community at large, the risk of a school outbreak increased 72%.

A study of a million students in North Carolina March-June 2021 (pre-delta) [showed](#) that **proper universal masking is the most effective mitigation strategy for prevention COVID transmissions in schools** when COVID-19 is circulating and students are ineligible for vaccination or uptake is inadequate. Fewer than 1% of the 40,000 in-school contacts of over 7,000 students and staff with diagnosed COVID-19 became infected while universal mask mandates were in place during a time when statewide case rates were around 15 cases/100k (5-23/100k range). ([Benjamin, Zimmerman](#))

Other studies of schools in [Utah](#), [Missouri](#) and [Wisconsin](#) showed that mask mandates were associated with lower transmissions in schools, and a study of a high school in [Israel](#) that didn't use masks led to a large outbreak. Overall, these studies suggest a pre-delta 13% secondary attack rate in schools without masking and <1% secondary attack rate in schools with universal mask mandates.

Economist Emily Oster from Brown University provides an overview of data related to delta and school-aged children in this post: ["How Should I Think about School & Child Care Now?"](#)

Wear a mask indoors and in crowded outdoor settings, regardless of vaccination status.

Click to download our COVID harm reduction infographics: [graphic in English](#) | [graphic in Spanish](#) | [PDF in English](#) | [PDF in Spanish](#).





The [Unity Council](#) and [La Clinica de la Raza](#) partnered to launch the **“Por mi, por ti, por Fruitvale / For me, for you, for Fruitvale” outreach campaign that includes a social media tool kit** with public service announcements and graphics catered to empower Fruitvale district communities to understand the risks of Covid-19 and dispel myths that deter residents from getting vaccinated.

As a reminder, everyone ages 12 and over in the US is eligible for a free COVID-19 vaccine, regardless of insurance and immigration status. Vaccine supply in the East Bay is plentiful for the three authorized vaccines: Pfizer, Moderna and Johnson & Johnson. Appointments and walk-ups are available the same day at [MyTurn.ca.gov](https://myturn.ca.gov), including the Pfizer vaccine for 12-17-year-olds.

[Click here for more on how to get a vaccine.](#)

Alameda County now has numerous **community-based vaccination pop-up sites**, which are listed on the [county vaccine webpage](#). Additional pop-up sites in July are pictured [here](#) (scroll down).

Alameda County is also launching a **door-to-door vaccine outreach program** called DOOR (Direct Outreach to Our Residents), in which vaccinated neighbors will go door-to-door to talk with unvaccinated neighbors in each of the 23 census tracts that have 900 or more unvaccinated residents, with <60% Latinx residents vaccinated or <50% African American residents vaccinated. The program as a goal of 90,000 face-to-face outreach attempts.



PANDEMIC TRENDS AND DATA

COVID-19 daily cases and hospitalizations in the Bay Area have rapidly increased since the June 15 reopening. We hope that this summer surge will level off soon if more people [get vaccinated](#) and [wear masks](#). [Nationwide](#), cases have increased in the past month, especially in areas with low vaccination rates. As of August 4, 70% of US adults have received at least one vaccine dose. [Worldwide](#), cases have also increased, especially in Africa, the Eastern Mediterranean region, Southeast Asia and Europe.

This month the US will start sending millions of mRNA vaccines to countries in need, [including](#) 25 million doses to nearly 50 African countries through the COVAX program, as well as Bangladesh, Pakistan, Peru and Honduras.

Estimated [transmission rates](#) in the Bay Area have increased since May and have been above 1 since the June 15 reopening, leading to exponential increases in cases. The transmission rate is [1.36 across California](#) as of August 1.

The delta variant summer surge is expected to peak in late August to mid-September and decline in September through October, based on [LEMMMA modeling forecasts](#) and delta surge curves in other countries such as India and the UK. The peak will be lower and decline will be more rapid if we can get 10% more people vaccinated.

The delta surge in the UK started to [decline](#) in late July after ~8-10 weeks of rapid increase, which is a similar trend seen with the delta surge in India. This graph shows how case rates among fully vaccinated people remained much lower than partially and unvaccinated people despite overall high vaccination rates. 59% of the entire population was fully vaccinated and 71% partially vaccinated as of August 8, 2021.



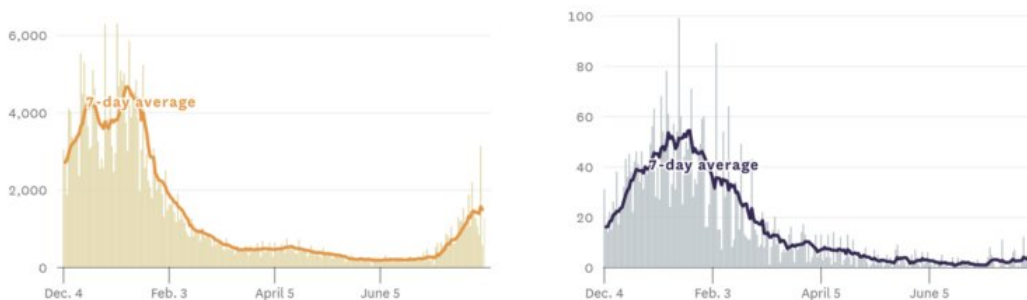
As of August 4:



Powered by ZOE*

- **Alameda County:**
 - 1.24 transmission rate
 - 22 cases per 100,000 people
 - 85% residents ages 12+ have received at least once vaccine dose (partially vaccinated), 72% are fully vaccinated
- **Contra Costa County:**
 - 1.48 transmission rate
 - 22 cases per 100,000 people
 - 81% of residents ages 12+ partially vaccinated, 75% fully vaccinated
- **Solano County:**
 - 1.4 transmission rate
 - 29 cases per 100,000 people
 - 70% of residents 12+ partially vaccinated, 59% fully vaccinated

New reported cases and deaths in the Bay Area, by day



SF Chronicle, 8/4/21: COVID-19 daily cases and deaths in the Bay Area.

VACCINE STUDIES, VARIANTS AND “BREAKTHROUGH” INFECTIONS

Vaccine efficacy and safety:

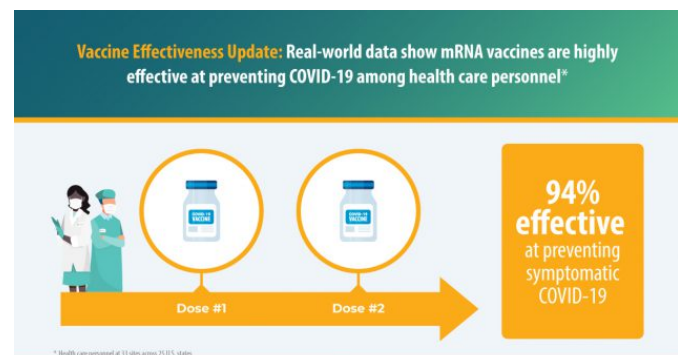
Real-world data shows that COVID vaccines are safe and highly effective in preventing both asymptomatic and symptomatic infection.

Pfizer and Moderna 6-month COVID-19 vaccine efficacy data, submitted for FDA’s full approval: Pfizer released a preprint study on July 28 that 2-doses of their vaccine was 91% effective overall but waned over time: from 96% in the 2 months after the 2nd dose to 84% after 6 months. Moderna reported on August 5 that 6-month vaccine efficacy data showed 93% efficacy through 6 months after the second dose, showing very little change from the 94% efficacy in its original clinical trial.

CDC data shows that a single dose of an mRNA vaccine (Pfizer or Moderna) was 82% effective against symptomatic COVID-19, and 2 doses were 94% effective.

Fully vaccinated high-risk frontline workers who were tested weekly were 90% less likely to get any infection, including asymptomatic infections.

The CDC has reported data showing that the **Pfizer-BioNTech** and **Moderna** vaccines were found to be 94% effective at preventing hospitalization in fully vaccinated



adults 65+ and 64% effective among partially vaccinated

CDC.GOV

bit.ly/MMWR5142b

MMWR

adults 65+ starting 2 weeks after the first dose. There was no significant protection within the first 14 days of the first dose, highlighting the importance of continuing masking, distancing and avoiding crowds at least during the 2 weeks following the first dose, and the importance of getting the second mRNA vaccine dose.

Durability of immunity:

Two studies, [one in Nature](#) and [one pre-print](#), show that both natural infection and vaccinations induce long-lived T-cell and B-cell responses, which help the body continue to identify the virus and produce antibodies whenever needed. The findings suggest that immunity to COVID-19 likely lasts at least a year, possibly much longer. The B and T-cell responses were stronger among those who were infected *and* vaccinated. Those immune just from vaccination alone may need boosters at some point, though when is still unknown. These findings strengthen the recommendation that all people with past infection also get vaccinated.

A CDC study on COVID-19 reinfections in Kentucky from May–June 2021 showed that people with previous SARS-CoV-2 infection 2020 were 2.3x more likely to get reinfected if they were unvaccinated compared to those who were fully vaccinated. This study demonstrates the importance of COVID-19 vaccinations in people with prior infection.

Vaccines for children:

[Moderna](#) and [Pfizer](#) have reported data showing that their **COVID-19 vaccine shows 100% efficacy in adolescents ages 12–15**. With 2,260 adolescents participating in their trial, 18 people in the placebo group developed COVID-19 while none in the vaccinated group did. [Blood antibody test data](#) also show high titers of antibody responses in those who were vaccinated. On May 10th the [FDA authorized use of the Pfizer vaccine for 12–15 year olds](#) and on May 12th, the US Advisory Committee on Immunization Practices (ACIP) [voted to recommend the Pfizer vaccine for 12–15 year olds](#).

[Moderna](#) [announced](#) on May 25 that their vaccine is 100% effective for 12–17 year olds in a clinical trial that enrolled 3,732 people ages 12 to 17, two-thirds of whom received two vaccine doses. There were no cases of symptomatic Covid-19 in fully vaccinated adolescents, the company reported. Moderna plans to submit data to the FDA for authorization in early June.

Trials for children ages 6 months to 11 years old have also begun for both [Pfizer](#) and [Moderna](#) vaccines. Based on data from an earlier study that assessed safety, Pfizer will give two doses of 10 micrograms each (a third of the dose given to adolescents and adults) to children ages 5–11 years, and two doses of 3 micrograms each to children ages 6 months to 5 years.

On June 23 and June 28, the [CDC updated its statement on rare cases of myocarditis and pericarditis](#) following mRNA vaccines, mostly mild cases among young men ages 30 and younger that occur a few days after the 2nd dose. Myocarditis and pericarditis can also be clinical features of COVID-19 infection, and the **risk remains higher for COVID-19 infection cardiac complications among unvaccinated people**. Clinicians are asked to evaluate cases of myocarditis and pericarditis with a SARS-CoV-2 test, ask about vaccination history and report cases of myocarditis or pericarditis after vaccination promptly to the U.S. [Vaccine Adverse Events Reporting System \(VAERS\)](#), and continue to encourage COVID-19 vaccination in your patients, as the benefits far outweigh the risks.

[A new study](#) suggests that MIS-C was a rare complication of SARS-CoV-2 infection but disproportionately impacts young people of color. “In this cohort study of 248 persons with MIS-C, MIS-C incidence was 5.1 persons per 1000 000 person-months and 316 persons per 1000 000 SARS-CoV-2 infections in persons younger than 21 years. Incidence was higher among Black, Hispanic or Latino, and Asian or Pacific Islander persons compared with White persons and in younger persons compared with older persons.” ([Payne](#))

[A new article](#) shares data from Brazil and Israel suggesting that mass adult vaccination protects children. Outbreaks in a small proportion of UK’s schools still show that children are still a reservoir of circulating virus.

COVID-19 vaccinations in pregnant and lactating people are safe, effective and recommended:

The CDC [officially](#) recommended COVID-19 vaccines on August 11 for “people who are pregnant, pregnant, breastfeeding,

trying to get pregnant now, or might become pregnant in the future. Pregnant and recently pregnant people are more likely to get severely ill with COVID-19 compared with non-pregnant people. Getting a COVID-19 vaccine can protect you from severe illness from COVID-19.”

[Findings from a study of pregnant participants](#) in the v-safe post-vaccine surveillance system revealed no clear safety issues from either the Pfizer/BioNTech or Moderna vaccines. 35,691 v-safe participants identified as pregnant, and 3958 participants enrolled in the v-safe pregnancy registry. Calculated proportions of pregnancy and neonatal outcomes appeared similar to incidences published in other peer reviewed literature. These findings add to [data from an ongoing cohort study](#) of pregnant and lactating people which found robust antibody titers in all groups, along with antibodies in umbilical cord blood and breast milk samples.

Vaccine and variant misinformation studies:

Researchers have [identified](#) the top delta variant misinformation messages seen online, which include manipulating data on breakthrough cases (post-vaccine COVID infections) to suggest that the vaccines are ineffective, when in fact US data shows they provide 3x protection against any infection and 10x protection against severe disease.

Long COVID or post-acute COVID conditions (PASC):

The CDC [released new guidance](#) on the clinical management of post-acute COVID conditions (PASC, or long COVID) on June 14.

The prevalence on long COVID cited in various studies ranges from 10-53%. A [study](#) on long COVID using large population data from the UK found that 13.7% of people diagnosed with COVID had symptoms after at least 12 weeks. Another large population [study](#) from Michigan that was more detailed showed higher prevalence, ranging from 25% among people with mild symptoms to 68% for people ages 45 and over.

[A large study](#) of 73,000 people on post-COVID conditions from the VA shows that the risk for multisystem complications after acute COVID were substantial, even among people with mild-moderate symptoms, including 60% increase in the risk of death.

While most new infections are mild cases among young, unvaccinated people, there is still a risk of long-term health impacts that we don't understand yet. A [study](#) from Norway shows that more than half (52%) of young people ages 16-30 had long COVID symptoms.

VARIANTS

The WHO uses a [naming system](#) for coronavirus variants using the Greek alphabet. [Variants of concern or interest](#) include:

- Alpha: formerly known as B117 (“UK”)
- Beta: B1351 (“South African”)
- Gamma: P1 (“Brazilian”)
- Delta: B1617 (“Indian”)
- Epsilon: B1427/9 (“West Coast”)

Delta variant:

Summary: The delta variant is more infectious, may cause more severe illness and death, and is the dominant variant in the US. People with delta infections have much higher viral loads than other variants. Being vaccinated is still highly protective against serious COVID-19 with delta infection, though less protective against infection and transmission compared to earlier variants. Universal masking is still necessary to reduce spread while our vaccination rates are inadequate.

The delta variant has very rapidly become the [dominant strain in the US](#), quickly



overtaking the alpha variant. The delta variant was 93% of the COVID cases sequenced in the US as of July 31, up from around 50% at the beginning of July. In California, the delta variant was 84% of variants sequenced as of July 21, up from 53% on June 21 and from 6% on May 21.

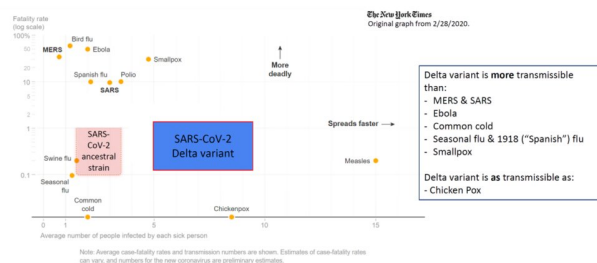
Delta variant data recently obtained by the CDC and reported in The Washington Post on July 29 show that:

- The delta variant is more transmissible than the original strain, the common cold, the seasonal and 1918 flu, Ebola and smallpox. It is as transmissible as chicken pox. ([CDC](#))
- Delta infections have higher viral loads and longer duration of shedding. ([Mlcochova](#), [Ong](#))
- CDC data from a large July 2021 outbreak in a highly vaccinated county in Massachusetts shows that viral loads of delta infections in vaccinated people were similar to viral loads among unvaccinated people, which suggests that transmission risk is similar from vaccinated people and unvaccinated people infected with the delta variant. ([Brown](#), [CDC](#))
- Delta infections have been found in Canada, Singapore and Scotland to have higher odds of hospitalizations, ICU admission and death, especially for unvaccinated people. ([Fisman](#), [Ong](#), [Sheikh](#))
- Vaccines still provide 10x reduction in hospitalization and death from delta infection (93-100% efficacy with 2-doses of the Pfizer vaccine) and 3x reduction in mild or asymptomatic delta infection (64-79% against any delta infection with 2-doses of Pfizer). ([Nasreen](#), [Israel's Ministry of Health](#), [Lopez Bernal](#), [Stowe](#), [Public Health England](#))

In summary, this data shows that the delta variant is more highly contagious, may cause more severe disease, and suggests that vaccinated people who get infected may spread it as easily as unvaccinated people. Vaccines remain highly effective at preventing severe disease, but a bit less effective at preventing mild or asymptomatic infection with the delta variant.

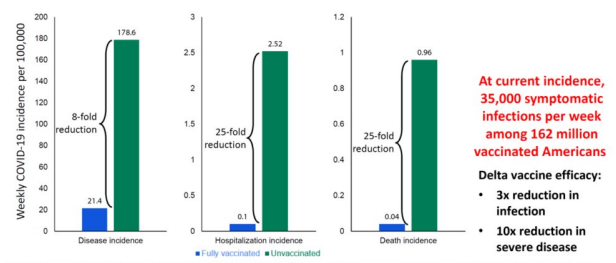
Universal masking and distancing are crucial for reducing spread given current inadequate vaccine coverage. We need to continue to outreach to people to increase vaccination rates to reduce serious illness and death. We will also likely need to learn to live with the virus over the long run and aim to reduce serious illness and death through vaccinations.

Transmission of Delta variant vs. ancestral strain and other infectious diseases



Slide presented at a CDC meeting on July 29, 2021. ([CDC](#))

Greater risk of disease, hospitalization and death among unvaccinated vs. vaccinated people: National estimates



Slide presented at a CDC meeting on July 29, 2021 with updated delta variant vaccine efficacy data added. ([CDC](#))

More details on delta variant transmission and vaccine efficacy studies:

UCSF posted a good summary of current studies and FAQs [here](#).

Data from the UK on the delta variant suggests that this variant is 64% more transmissible than the alpha variant and about twice as infectious as the original variant. Updated weekly variant risk assessments from the UK are [posted here](#) and technical briefings [here](#).

Delta infections viral loads were [found](#) to be 1,000x higher than the original variant in this [well-done study](#) from China. This demonstrates why the delta variant is so highly transmissible: the delta variant replicates much faster, and when a person

infected with delta talks, sneezes or coughs, they release *1,000 times more virus* than the original strain.

Israel's Ministry of Health [vaccine efficacy data](#) from mid-July [shows](#) that Pfizer vaccine efficacy against delta infection gets lower as time passes from time of the 2nd dose (especially 6+ months ago). 2 doses of the Pfizer vaccine still had high (91.4%) efficacy against severe COVID-19.

[Public Health England](#) has also reported that vaccines are still highly effective against hospitalization and against symptomatic disease from the delta variant, though less so, especially after a single dose. Protection after the first dose was seen to be only 31% for delta compared to 49% for alpha. Supporting people to mask up between doses and to get their 2nd doses is crucial.

[Data](#) from the UK in June show that the Pfizer-BioNTech vaccine was 88% effective against symptomatic disease with the delta variant, a drop from 94% against the alpha variant. Vaccine efficacy against hospitalization was high with 2 doses of the Pfizer mRNA vaccine: 96% effective against hospitalization with the delta variant compared to 95% effective against hospitalization with alpha variant.

Full vaccination with the Astra-Zeneca vaccine provided 67% protection against delta variant, versus 74% protection against the alpha variant. Vaccine efficacy against hospitalization was also better maintained for the Astra-Zeneca vaccine: 92% for the delta vs. 86% for the alpha after 2 doses.

[Data from the UK](#) also suggest that the risk of long COVID is substantially reduced by 2 doses of the vaccine compared to one dose. Outreach to people who've only gotten one dose of a two-dose vaccine remains important so they can get this protection.

There is mixed data on the efficacy of the Johnson & Johnson (J&J) single-dose vaccine against the delta variant. However, the data we have so far are from serological lab studies rather than real-world studies. A preprint serological study from NYU shows lower antibody response with the J&J compared to the Moderna and Pfizer mRNA vaccines. Another serologic [study](#) in *Nature* showed reductions in vaccine-induced antibody response to the delta variant compared to the alpha variant. Earlier preprint serological [studies](#) from J&J reported that the vaccine generated long-lasting immune response against the delta variant. It is unknown whether a booster for those who received one dose of the J&J (for example, a dose of an mRNA vaccine) will be beneficial or recommended yet. Stay tuned.

Remember that viruses mutate when they replicate, and we can slow the rise of COVID-19 variants through masking, distancing and vaccinations.

"Breakthrough" infections: [About 0.002% of the 150+ million fully vaccinated people](#) in the US have had reported hospitalizations with symptomatic COVID-19, or "vaccine breakthrough" infections through July 12, which translates to a real-world vaccination efficacy rate of 99.998% protection against hospitalization.

In Alameda County, Dr. Donata Nilsen reported that there have been 796 COVID-19 cases reported of "breakthrough" infections as of July 17. 170 "breakthrough" infections were reported the week ending July 17, an increase from 139 the week prior. Dr. Nick Moss reported on August 4 that there have been about 100 documented deaths statewide in California due to COVID-19 among people who've been vaccinated, with a mean age of 72 and most with multiple underlying health conditions. The [CDPH webpage on post-vaccination cases](#) through August 1 reports 119 people have died post-vaccination, but it's unclear if COVID-19 was the cause of death in these individuals. A large majority of people hospitalized with COVID-19 are still people who are unvaccinated.

[Nationwide "breakthrough" case data is available on the CDC website here.](#)

Health care providers are asked to report symptomatic "breakthrough" infections for people who are vaccinated or who previously had COVID-19 to the county public health departments (without a positive RNA PCR or antigen test within the previous 90 days) and send lab specimens for variant sequencing. In Alameda County, send a secure email to COVIDreport@acgov.org with subject line "suspect variant" or fax to (510) 273-3944. To submit respiratory specimens to the county lab for sequencing, call 510-382-4300, email at acphl@acgov.org, or download the submittal form from the [ACPHL](#)

[website](#).

NEW HIV/STD STUDIES

Current lists of open HIV and hepatitis studies at UCSF are posted [here](#).

A resurgence in STD cases: New [CDC data](#) show that during March–April 2020, reported STD cases dramatically decreased compared to the same time in 2019. However, a resurgence in gonorrhea and syphilis cases later in the year suggest overall STDs may have increased during 2020.

The CDC just released their updated **2021 Sexually Transmitted Infections Treatment Guidelines**. Click on this [link](#) to access the full guidelines and visit their [provider resource page](#) for copies of a summary wall chart and pocket guide.

An [international study](#) looking at **global adoption of WHO PrEP recommendations** found that we had about 626,000 people on PrEP across 77 countries by the end of 2019. While we missed the UN's goal to get at least 3 million people on PrEP by 2020, even with pandemic disruptions in PrEP uptake, we still have a chance to have 2–3 million PrEP users by 2023.

The **San Francisco 2017–2018 HIV Medical Monitoring Project (MMP) Report** was released in July. Interview and medical record data from 361 participants were collected between June 2017 and May 2019 and features new data on long-term survivors and resiliency.

The CDC [published data](#) on August 5, 2021 from the 2019–2020 cycle of the **HIV National Medical Monitoring Project (MMP)**. The MMP is an annual, cross-sectional survey that reports nationally representative estimates of behavioral and clinical characteristics of adults with diagnosed HIV infection (PLWH) in the United States.

Findings in this latest national MMP report include:

- 79% of PLWH surveyed were retained in care
- 61% were virally suppressed
- 16% had symptoms of depression
- 21% had recent symptoms of anxiety
- 9% experienced homelessness
- The median HIV-related stigma score was 30.7 (0= lowest stigma and 100= highest stigma)

A [systematic review](#) of **Motherhood and decision-making among women living with HIV** in developed countries found that women living with HIV (WLH) “encounter reproductive decision-making with knowledge deficits and limited social support... Evidence-based clinical practice guidelines need to be tailored for the family planning and sexual health needs of WLH.”

A [randomized trial](#) with 464 patients in Sub-Saharan Africa who were failing first-line NNRTI-based therapy showed that **dolutegravir was highly effective and non-inferior to darunavir and that TDF+3TC was non-inferior to ZDV+3TC as second-line therapy**, even in patients with extensive NRTI resistance and for whom NRTIs were predicted to have no activity.

People needing medical care for any condition are encouraged to seek care as our clinics and hospitals remain open with strict safety protocols to take care of all people.



WHAT'S UP WITH COVID VACCINES?

Updated August 11, 2021

Everyone ages 12 and over is eligible for a free COVID-19 vaccine, regardless of insurance and immigration status.

The best way to protect yourself against serious illness from the highly contagious delta variant is to get vaccinated.

Vaccines are plentiful and widely available in the East Bay. Appointments and walk-ups are available the same day at many sites, including for the Pfizer vaccine for 12-17 year olds. Pfizer, Moderna and Johnson & Johnson vaccines are all available. Get a vaccine today at [MyTurn.ca.gov](https://myturn.ca.gov) or with your [medical provider](#)!

Check out California's [Vax for the Win](#) \$116.5 million vaccine incentive program.



HOW DO WE GET A COVID VACCINE?

1. Check for an available appointment or walk-up site hours:

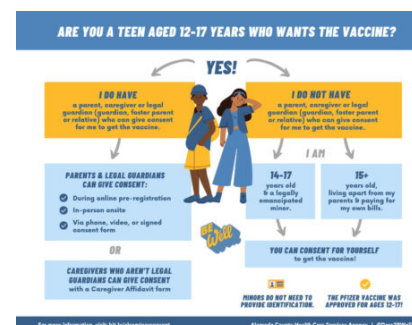
- Go to [MyTurn.ca.gov](https://myturn.ca.gov) or call 833-422-4255 to make appointments at public sites and pharmacies across California.
- Or go to your [medical provider](#)'s website or call them. (click for: [Kaiser](#), [Sutter](#), [Stanford](#), [Children's Oakland](#), [community health centers](#))
- Additional options: see phone numbers below.
 - Check [county vaccine sites](#), [community pop-ups](#), [Oakland school sites](#), [vaccines at shelters](#).
 - Check [VaccinateCA](#) (search map) or the [Vaccines.gov](#) national vaccine finder.
 - Text your Zip code to 438829 to get numbers and links for vaccines

2. When you go to your vaccine appointment, bring:

- A photo ID (does not have to be government-issued)
- Appointment confirmation, if not walking up (printed or on phone)
- A mask.

For people under 18, there are several ways to provide consent (click on the infographic for more details):

- Online registration: parent/guardian checks consent box
- Drop-in/walk-up:
 - Parent/guardian comes and gives consent in-person
 - Parent/guardian gives consent on phone or video
 - Youth brings in paper form signed by parent/guardian. [Click here](#) to download the parent/guardian consent form for Alameda County.



VACCINE PHONE LINES:

- [Alameda County](#): 510-208-4VAX or 510-208-4829 (English, Español, 中文)
- [Contra Costa County](#): 833-829-2626
- [Solano County](#): 707-784-8988
- [California state's MyTurn vaccine line](#): 833-422-4255

MORE VACCINE INFO – JUMP TO:

- [Transportation resources and vaccines for home-bound people](#)
 - [Links to medical providers, community pop-ups, county sites](#)
 - [Proof of vaccination](#)
 - [J&J vaccine updates and additional information on vaccines](#)
 - [Vaccines for people living with HIV](#)
 - [What you can do when you're fully vaccinated](#)
 - [Resources in multiple languages and Frequently Asked Questions](#)
 - [Community spotlights: East Bay vaccine testimonials](#)
-

IF YOU NEED HELP WITH TRANSPORTATION OR ARE HOME-BOUND:

- **East Oakland Collective** is offering free ride shares for Oakland residents.
 - Go to [MyTurn.ca.gov](#) and click on "yes" under "I need help with transportation" when you register.
 - [Click here for an overview of paratransit options in Alameda County.](#)
 - [East Bay Paratransit](#) is now offering transportation to and from vaccination sites and a briefer, streamlined eligibility process to apply for services. [Click here](#) or call 510-287-5000 for more information.
 - **Home-bound people in Alameda County:** to sign up for in-home vaccination, please complete the vaccine registration form [on this webpage](#). If you are not able to use the internet form, please call 510-208-4829.
 - **Home-bound people in Contra Costa County:** [request a home vaccination](#) from the mobile team.
-

VACCINES THROUGH MEDICAL PROVIDERS:

- [Kaiser members](#)
 - [Sutter members](#)
 - [Stanford Health members](#)
 - [UCSF Benioff Children's Hospital Oakland](#): for all community members ages 12-24
 - Open to everyone ages 12-24, even if they are not members
 - 744 52nd St., Oakland, CA 94609
 - Call (415) 514-1196, Monday to Saturday, 7 a.m. to 7 p.m., and Sunday from 8 a.m. to 5 p.m.
 - All callers should choose option 2 and stay on the line to speak with an operator, who will schedule an appointment
 - No proof of eligibility will be required.
 - Many **community health centers** are providing vaccine appointments for all community members:
 - [Alameda Health Systems](#)
 - [Asian Health Services](#)
 - [Axis Community Health](#)
 - [Bay Area Community Health](#)
 - [La Clínica](#)
 - [LifeLong Medical Care](#)
 - [Native American Health](#)
 - [Roots Community Health Center](#)
 - [Tiburcio Vasquez Health Center](#)
 - [West Oakland Health](#)
-

VACCINES THROUGH PHARMACIES:

- [CVS pharmacies](#)
- [Rite Aid pharmacies](#)
- [Walgreens pharmacies](#)
- [Lucky and Save Mart pharmacies](#)

VACCINES THROUGH COMMUNITY POP-UPS:

- [Oakland school site pop-ups](#) and other sites for 12+
- **Umoja Vaccine: United in Health Oakland:** see flyer
 - Hotline: call 1-888-763-0007 and leave a phone number.
- [Unity Council in the Fruitvale, East Oakland](#)
- [Oakland LGBTQ Center](#)
 - September 11, 12-7 pm, Lake Merritt bandstand, near Fairyland in Oakland
 - 510-882-2286
 - FREE Pfizer and Moderna vaccinations.

UMOJA HEALTH
COVID-19 FREE TESTING & VACCINATION DATES
Umoja Health efforts are focused on engaging and uplifting the Black/African American community. We are also dedicated to serving those in the zip codes hit hardest by COVID-19. Find us in your neighborhood at one of our pop-up events.

WEEKLY LOCATIONS:
Thursdays at **Center of Hope**
8411 MacArthur Blvd
10:30-2:30pm
Fridays at **CHORI**
750 Aileen Street
9:30-130p

CATCH US AT OUR NEXT POP-UP!
YOUTH UPRISING YU June 19th, 2021
9:30am-4:00pm
8711 MacArthur Blvd

Find out about our next Pop Up testing AND Vaccine dates at www.unitedinhealtheoakland.org

Pride in the park
Oakland LGBTQ+ Health & Wellness Fair
© LAKE MERRITT BANDSTAND NEAR CHILDREN'S FAIRYLAND

LIVE ENTERTAINMENT TBA

Free event PLEASE WEAR MASK

FEATURING: VENDORS, HEALTH AND FITNESS DEMONSTRATIONS, COVID-19 VACCINATIONS, HIV TESTING, ENTERTAINMENT, DEEJAYS, GAMES, GUEST SPEAKERS & MORE!

FOOD & BEVERAGE VENDORS **HIV TESTING COVID VACCINATIONS** **HEALTH & WELLNESS VENDORS** **DEEJAYS GAMES AND COMPETITIONS**

"SOBER" EVENT, NO ALCOHOL BEVERAGES WILL BE SOLD.

4TH ANNIVERSARY CELEBRATION **Pre-pride event**
SATURDAY, SEPTEMBER 11TH
12PM TO 7PM Join us

Oakland LGBTQ COMMUNITY CENTER

VACCINES THROUGH COUNTY VACCINATION SITES:

- [Alameda County](#) COVID-19 vaccine access
 - Get an appointment: bit.ly/AICoSignUp
 - Getting a Vaccine in Alameda County flyer (5/20/2021): [English](#) | [Spanish](#) | [Arabic](#) | [Chinese \(Simplified\)](#) | [Vietnamese](#)
 - [Vaccinations for people experiencing homelessness](#)
 - [Vaccinations for youth](#)
 - [Kaiser](#), [Sutter](#), and [Stanford](#) get their own supply, so check with them separately.
- [Contra Costa County](#) COVID-19 vaccine access
 - [Walk-in sites \(no appointment required\)](#)
 - [Click here to make an appointment](#) or call 1-833-829-2626.
 - To bring equity-related concerns to Contra Costa County's attention, [click here](#).

- [Solano County vaccine access](#)
 - Please [click here](#) and scroll down for vaccine sites.

Vaccines are now readily available with plentiful supply with choices for the Pfizer, Moderna and J&J vaccines.

NEED PROOF OF VACCINATION?

- Visit the [CA Digital COVID-19 Vaccine Record](#) site to request your digital vaccination card. You'll need the phone number or email address that you used to get your vaccine.
- Download the Alameda County [Frequently Asked Questions](#) for more information.
- If you were vaccinated at an Alameda County supported site, you can visit any [currently open location](#) for assistance.
- If you were vaccinated elsewhere, contact that provider for a replacement.

WHAT VACCINES ARE CURRENTLY AVAILABLE?

We have three authorized vaccines available: the [Pfizer](#) and [Moderna](#) two-dose vaccines and the [Johnson & Johnson's \(J&J\) one-dose vaccine](#). All three authorized vaccines are highly protective, especially against severe disease, and nearly 100% effective against hospitalization and death.

- **See how the authorized vaccines work:** download PDF infographics from the CDC –
 - How the Pfizer and Moderna mRNA vaccines work: in [English](#) and [Spanish](#).
 - How the J&J viral vector vaccines work: in [English](#) and [Spanish](#).

Johnson & Johnson vaccines, rare blood clots and Guillain-Barré syndrome (GBS):

The [CDC has recommended to continue vaccinations with the Johnson & Johnson \(J&J\) vaccine](#) for people ages 18+ because the benefits far outweigh the risks of rare blood clots and Guillain-Barré syndrome (GBS). Meeting slides and data updates discussed at the April 23rd CDC Advisory Committee on Immunization Practices (ACIP) meeting [can be downloaded here](#).

On July 13, the [FDA announced an update](#) to the Johnson & Johnson (J&J) COVID-19 vaccine fact sheet to include a warning about rare cases of Guillain-Barré syndrome (GBS), about 1 in 125,000 so far.

Read [CDC updated questions and answers on the J&J vaccine here](#) and the [detailed CDC process, analysis and recommendations on the J&J vaccine here](#).

[Click here for J&J updates from California state](#) and fact sheets in multiple languages.

[CLICK HERE FOR MORE INFO ON THE J&J VACCINE AND CLINICAL GUIDANCE](#)

Vaccines for ages 12-17: Currently only the [Pfizer](#) vaccine is approved for use in people ages 12-17. The Moderna and Johnson & Johnson vaccines are approved in people ages 18 and over. Moderna [announced](#) on May 25 that their vaccine is 100% effective for 12-17 year olds in a clinical trial that enrolled 3,732 people ages 12 to 17. Moderna plans to submit data to the FDA for authorization in June. Pfizer plans to submit data and an authorization request for children ages 2-11 in September.

PEOPLE LIVING WITH HIV AND COVID-19 VACCINES

All people living with HIV (PLWH) are recommended to get the COVID-19 vaccine. The approved vaccines are not live vaccines and are considered safe for people living with HIV regardless of CD4 count. There is [data](#) showing that people living with HIV and CD4 counts less than 200 may have greater risk for hospitalizations and death, so consider prioritizing outreach, education and vaccinations for this potentially more-at-risk group.

A new WHO [study](#) of over 15,000 global cases of COVID-19 in people living with HIV (PLWH) presented at IAS in July 2021 found that PLWH were 13% more likely to be hospitalized and 30% more likely to die after being hospitalized. Among PLWH, having diabetes, high blood pressure, being male or over 75 years old was each associated with an increased risk of death. This study underscores the importance of prioritizing PLWH for vaccinations. Fortunately, [data from the UK](#) shows that COVID-19 vaccines are highly effective for people with underlying health conditions who complete all doses, including HIV.

Should we check for immunity after vaccination? [The FDA](#) does not currently recommend checking for SARS-CoV2 antibodies after COVID-19 vaccination since current antibody tests have not been evaluated to assess level of protection from vaccination. If antibodies are checked anyway, be sure the proper type is ordered:

- The [anti-spike IgG antibody](#) checks for circulating antibodies generated by vaccination *or* past infection.
- The [anti-nucleocapsid IgG antibody](#) checks for past infection only.

[Click here](#) to download recommendations for PLWH during the summer 2021 delta surge from Getting to Zero San Francisco.

Resources for PLWH and COVID-19 vaccines: [UNAIDS infosheet on COVID-19 vaccines and HIV](#), [Clinical FAQs with Dr. Paul Sax at Harvard](#) and [The New England Journal of Medicine](#), [Clinical FAQs for people living with HIV from HIVMA \(PDF\)](#), [Guidance for talking with patients and FAQs for PLWH from Alameda Health Systems \(PDF\)](#).

MORE VACCINE RESOURCES

DISPARITIES DATA AND STUDIES

US life expectancy had a steep drop in 2020, fueled by COVID-19, with significant disproportionate impact on Black/African American and Latinx Americans. The CDC's National Center for Health Statistics released a [study](#) on July 20 showing that Latinx people experienced the greatest drop in life expectancy at 3 years, and Black/African Americans saw a decrease of 2.9 years. White Americans experienced the smallest decline at 1.2 years. The study author, Dr. Elizabeth Arias, reported that these trends in excess deaths from COVID have continued into 2021.

In addition to excess deaths from COVID, there were also excess deaths from cardiovascular disease (see below), diabetes, chronic liver disease, homicides and drug overdoses. [More than 93,000 people died from drug overdoses in 2020](#), the highest number reported in a single year.

A study published in the [British Medical Journal](#) compared US life expectancy data to data from 16 other high-income countries and found that the US decrease in life expectancy from 2018 to 2020 was 8.5 times greater than the average decrease in peer countries, with declines greatest for people of color.

A [study](#) describes disparities in heart disease and cerebrovascular disease deaths in the US during the COVID-19 pandemic: Black, Asian, and Hispanic populations experienced a larger relative increase in deaths than the non-Hispanic White population.

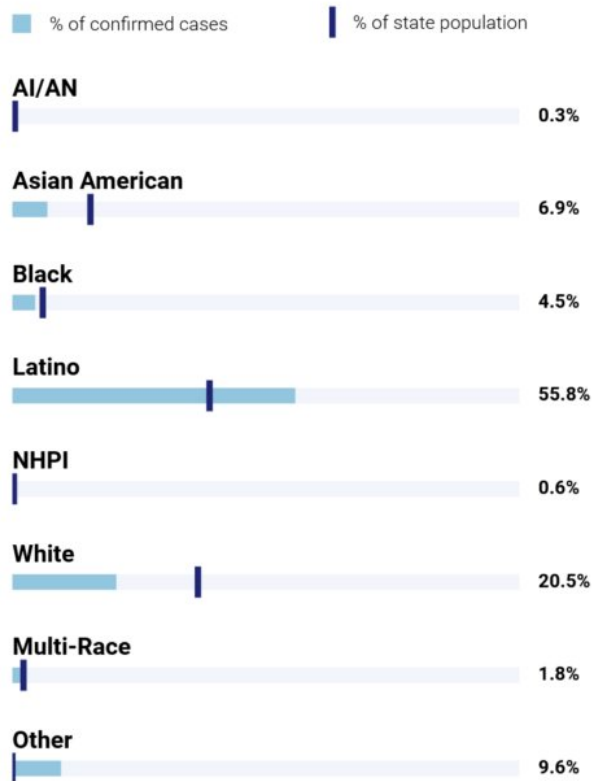
Disparities in vaccination rates persist for Black and Latinx communities, especially among younger people of color, who've already been disproportionately impacted by the pandemic. [An analysis](#) of CDC data published on June 16 shows

that in every age category, Black people are dying from COVID at about the same rate as white people more than 10 years older. COVID death rates for Black and Latinx people ages 45-54 are at least 6 times higher than the death rate of white people. [Another study](#) of California deaths found that Latinx Californians ages 20-54 [were 8.5 times more likely than white Californians](#) in that age range to die of COVID.

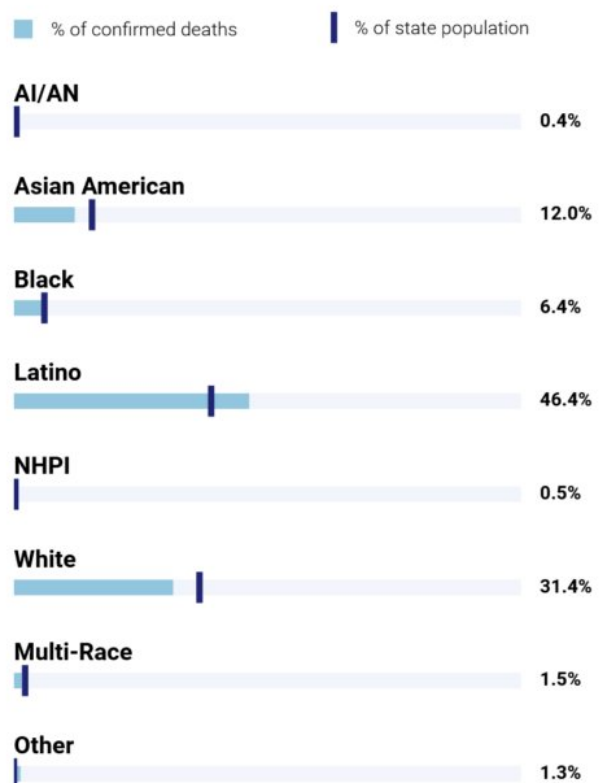
[Dayna Bowen Matthew](#), author of [Just Medicine: A Cure for Racial Inequality in American Health Care](#), says: “What we politely call a ‘health disparity’ is killing people of color daily. It is causing people of color to live sicker and die quicker, because of the color of their skin.”

The Umoja COVID-19 testing and vaccination initiative was featured in New England Journal of Medicine! [Check out the article here](#), which features many of local advocates and organizations in our network collaborating across the Bay to address health inequities.

Confirmed cases by race and ethnicity in California



Confirmed deaths by race and ethnicity in California

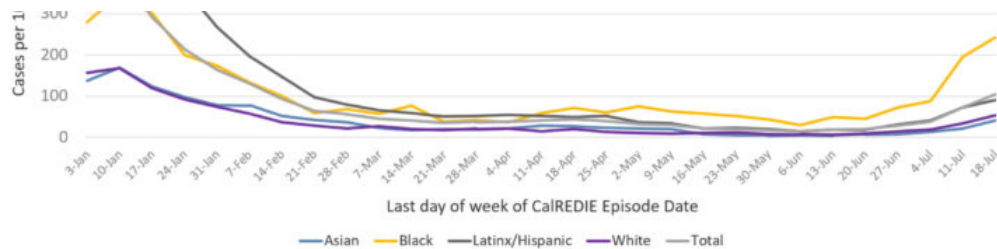


Updated July 21, 2021 with data from July 20, 2021. Note: Percentages may not add up to 100% due to rounding. “Other” race and ethnicity means those who do not fall under any listed race or ethnicity.

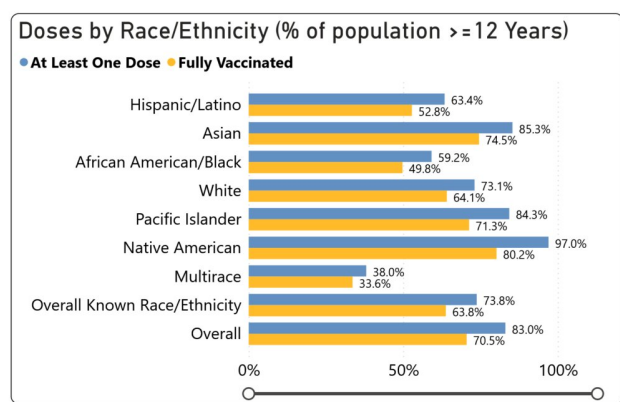
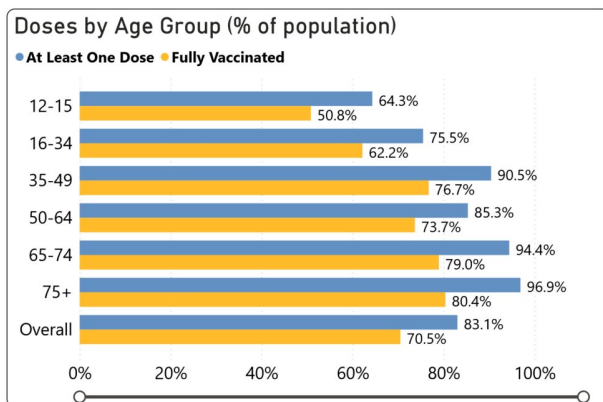
[CDPH CA State COVID-19 dashboard](#) July 12, 2021: Latinx and Black/African American Californians continue to be disproportionately impacted by COVID-19.

Alameda County COVID-19 weekly case rate





For the first time in Alameda County, case rates among African American residents have become higher than case rates among Latinx residents, mirroring lower vaccination rates among African American residents.



Alameda County vaccination rates by age and race/ethnicity as of July 21 show that Alameda County resident under age 35 are less likely to be vaccinated compared to older residents.

Black/African American and Latinx residents are less likely to have been vaccinated compared to White, API or Native American residents.

Vaccination Rates by Age Group & Race

Vaccination Rate (% 12+ Pop with at least one dose)							
Age Group	Total	Native American	Asian	Pacific Islander	White	Latino	Black
12-15	61%	78%	73%	40%	59%	42%	25%
16-34	74%	90%	79%	61%	68%	52%	45%
35-49	89%	100%	94%	99%	76%	70%	55%
50-64	84%	89%	85%	100%	66%	88%	69%
65-74	93%	100%	89%	100%	87%	67%	83%
75+	96%	100%	87%	100%	91%	62%	84%
12+	82%	95%	84%	83%	72%	62%	58%

Source: ACPHD, with data from Vaccination Dashboard & CAIR, thru 7.10.21

This table shows vaccination data from Alameda County, with the highest vaccination rates among Native American residents of all ages and Pacific Islanders over the age of 34. The lowest vaccination rates are among Black, Latinx, Pacific Islander and White residents under age 35 and Latinx residents ages 65 and over.

The [latest KFF COVID vaccine survey](#) with data from June reports that “found the vast majority (92%) of those who planned to get vaccinated “as soon as possible” in early 2021 have received at least one dose of a COVID-19 vaccine, as have slightly more than half (54%) of individuals who had previously said they wanted to “wait and see” before getting vaccinated. On the other hand, a majority (76%) of people who had previously said they would “only get vaccinated if required” or said they would “definitely not” get a COVID-19 vaccine remain unvaccinated.” Approximately 25% of the unvaccinated people said they would only get the vaccine if required.

“Unvaccinated adults vary from vaccinated adults in that they tend to be younger, people of color, Republican-leaning, and less-educated. But unvaccinated isn’t an entirely uniform group, with significant differences by intention. Adults who want to “wait and see” before getting vaccinated are more likely to be young and people of color, while those in the “definitely not” group are more significantly Republican-leaning and in rural areas.”

New vaccine equity guidance shared by the CDC HIV prevention division: [Click to download](#)

- [COVID-19 Vaccine Equity: Best Practices for Community and Faith-based Organizations](#)
- [A Guide for Community Partners](#) includes strategies, interventions, and ready-made messages and materials.
- [Toolkit for Correctional and Detention Facilities](#)

HARM REDUCTION TIPS AND RESOURCES

[CLICK HERE FOR DETAILS ON WHAT FULLY VACCINATED PEOPLE CAN DO](#)

[CLICK HERE FOR INFO ON DOUBLE-MASKING](#)

Our [COVID harm reduction infographics](#) include updated guidance!

Click to download: [graphic in English](#) | [graphic in Spanish](#) | [PDF in English](#) | [PDF in Spanish](#).



Check out this [COVID risk calculator](#) to figure out the risk level for your specific situation.

The SF Community Clinic Consortium developed [this HIV clinic reopening guidance document](#) which clinic teams might find helpful around specific considerations for PLWH.

Free COVID testing sites: [Click here for Alameda County](#), [Contra Costa County](#) and [Solano County testing sites](#).

OTHER UPDATES AND OPPORTUNITIES:

COVID-19 harm reduction strategies: Use as many of these as you can!

Strategy	% reduction
1. Vaccination	95% mRNA EUA vaccines
2. Masking	60-95%
3. Staying outdoors	~95% in one case series
4. Distancing	53-88%
5. Eye protection	78%

Updated August 4th, 2021



6. Hand hygiene 28-45%

7. Testing/isolation 33%

Updated 12.23.20 * Data compiled by Sophia S. Wong, MD
Icons by Good Ware, Freepik and Srip on Flaticon.com
Please see [EBGTZ.org/resources](https://ebgtz.org/resources) for the complete list of sources for this table.

EBGTZ Updates

Our **summary of COVID prevention research** is constantly updated with new studies.

- Join us on [Thursday, August 5, 2-3:30pm](#) for a **Linkage & Prevention Network meeting** focused on strengthening linkages from the Emergency Department (ED) to PrEP and HIV care, including people who actively use substances. **Please click here to register!** This East Bay linkage and prevention network meeting will focus on determining how we can improve linkages for people diagnosed with HIV, re-engaging in care or starting PrEP or PEP in the ED, including people with active substance use.

Job opportunities:

La Clinica is looking to fill positions for a [PrEP Navigator](#) as well as an [HIV Linkage Coordinator](#). Check out these and other positions [here](#).

Lifelong Medical Care is looking for an [HIV Case Manager](#) at their Ashby Health Center as well as a [Mobile RN](#) to provide low barrier limited HIV care and prevention to patients.

Building Opportunities for Self Sufficiency (BOSS) has numerous job openings. Learn more about them [here](#).

The **International Rescue Committee** in Oakland is currently hiring for the following positions: [Resettlement Caseworker](#), [Anti-Trafficking Caseworker](#), [Housing & Logistics Specialist](#).

The **Center for Environmental Health** based in Oakland has the following openings: [Director of Built Environment Program](#), [Community Engagement Manager](#), [Executive Assistant](#) to the CEO.

UC Berkeley School of Public Health is looking for a [Diversity, Equity, Inclusion, Belonging Specialist](#) (#20661) and [Director of the DREAM Office](#) (#20008)

Internships, Scholarships, funding and more

The **Alameda County Arts Commission** invites visual artists to submit an application to the new Alameda County Artist Registry, a prequalified list of artists that will be used for upcoming public art opportunities managed by the Alameda County Arts Commission. Application Deadline: Wednesday, September 15. Learn more about the opportunity [here](#).

The **Department of Health and Human Services (HHS)** has launched The HIV Challenge, a national competition to engage communities to reduce HIV-related stigma and increase prevention and treatment among racial and ethnic minority people. The HIV Challenge is part of a new partnership between the Office of the Assistant Secretary for Health (OASH) Office of Infectious Disease and HIV/AIDS Policy (OIDP) and the HHS Office of Minority Health (OMH). Phase 1 submissions are open from July 16, 2021, through September 23, 2021. Learn more about the challenge [here](#).

Vu (formerly AIDS Vu) is focusing on empowering new voices by offering three fellowship opportunities for researchers in viral hepatitis and HIV spaces. Each fellow will be awarded a \$10,000 personal stipend (awarded to the individual) to conduct a research project related to HIV, Hepatitis C, or both, using data on AIDS Vu and/or Hep Vu, along with other data sources. Application deadline: Tuesday, August 31st. Learn more about this opportunity [here](#).

The **Science and Treatment College (STC)** is an **African American HIV University (AAHU)** training and leadership development program that focuses on HIV and its relationship to human biology, virology, and epidemiology.

Program modules are completed quarterly during one academic year from September 2021 to May 2022 and culminate in graduation proceedings, including awarding an AAHU certification with an STC concentration. Applications are open and are due on Wednesday, August 11th. Learn more and apply [here](#).

Gilead Sciences has announced two new funding opportunities to empower people living with and affected by HIV. Gilead [HIV Age Positively®](#) supports programs focused on improving the quality of life for those who are aging while living with or affected by HIV. [Gilead TRANScend®](#) provides direct grants and capacity-building assistance to trans and non-binary-led organizations. For information on applying to be an HIV Age Positively Organizing center, click [here](#).

The **Kenneth Rainin Foundation's** Open Spaces Program supports nonprofits to partner with artists to create temporary, place-based public art projects that are responsive to issues relevant to communities in San Francisco and Oakland. This grantmaking program supports projects that:

1) Are visionary, timely projects relevant to the communities they seek to serve; 2) Include an artist-initiated process of community engagement; 3) Expand the boundaries of public art and support artists in advancing their practices; 4) Leverage civic and neighborhood resources and cultural assets.

Learn more about this opportunity [here](#).

Youth Opportunities:

GETTING TO ZERO (GTZ) YOUTH ADVISORY BOARD!

SUBMIT AN APPLICATION TODAY!

STDs and HIV continue to have a disproportionate impact on certain populations.

This school year, get involved in STD/HIV health planning and make a difference in your community.

All Santa Clara County students grades 9-12 welcome to apply.

EARN INCENTIVES:

- Earn Getting to Zero swag (sweatshirt, t-shirt, water bottle, and more) for your active involvement in the Youth Advisory Board!
- Receive invaluable professional experience in the public health field!

ACTIVITIES INCLUDE:

- Program & materials development
- Community health promotion
- Career development
- Networking opportunities

Email GettingtoZeroSCC@phd.sccgov.org for an application and more information. Submit your application by **September 15, 2021**.

Applications will be reviewed **August** through mid-**September** for the term that begins in October 2021, and **your application must be submitted by September 15, 2021** to be considered. Students **grades 9-12** who live, work, or attend school in Santa Clara County may qualify.

Santa Clara County Getting to Zero Initiative is recruiting for the first cohort of their Youth Advisory Board. The purpose of this board is for the SC County youth population to be involved in Getting to Zero program planning efforts and to gain invaluable professional experience and knowledge in topics related to STD and HIV prevention and education. Please share with any Santa Clara County youth who may be interested. If you have any questions about this process or about the Youth Advisory Board, please email GettingtoZeroSCC@phd.sccgov.org.

Events:

Save the date: **Oakland Pride** is coming up on September 12th, 2021. More details to be released [here](#).

Join AIDS Foundation Chicago and AVAC for the latest on rectal microbicides to find out about research and development for HIV prevention options that focus on the butt/rectum where HIV infection often occurs. Community advocate Craig Washington will be reading from his piece, "Giving And Getting Some: Reflecting On The Penetration Of My Manhood And My Ass" and DJ Taylor Waits will spin the sounds of booty shaking liberation. **Butt Stuff – All Gender HIV Prevention for Backdoor Action** will take place on Wednesday, August 11 7-9am pacific. Learn more and register [here](#).

Emergency Departments are a key point of entry or re-entry into the healthcare system and the only source of healthcare for many marginalized populations. Join the Technical Assistance Provider Innovation Network (TAP-IN) to hear how emergency rooms are implementing routine HIV, HCV, and syphilis screening to increase identification and reduce time to treatment for all three infections. **Innovations in the ER: Collaborations Among Emergency Departments, TA Providers, & Health Jurisdictions to Identify and Treat HIV, HCV, and Syphilis** will take place on: Monday, August 10th 9-10am. Learn more and register [here](#).

Resources for your clients:

Budget bill AB 832, provides \$5.2 billion to help struggling California renters by covering rent that a tenant may owe for as far back as April 2020 – along with future rent payments, if needed. AB 832 also extends California's eviction moratorium to Sept. 30. This new program will cover up to 100% of back and future rent and can help low-income renters pay some or all of their unpaid utility bills. Renters who meet the income eligibility requirement and owe back rent, or have future rent payments they can't make, or are facing difficulty paying utility bills, can apply for this program [here](#).

The **Oakland Outreach Council** is a collective of grassroots organizations serving the Oakland community during the COVID-19 pandemic. They are composed of Adamika Village, Beloved, Black Cultural Zone, an Insistence/Regina's Door, BOSS, CAL-PEP, Global Communication Education & Arts, HEPPAC, Homies Empowerment, Oakland Frontline Healers, and Street Level Health Project. Together they release a bi-weekly newsletter called The People's Health Mobile to serve as a mobile "one-stop shop" for our community members' needs and to disrupt the spread of COVID-19. Sign up for the newsletter [here](#).

The East Oakland Collective has partnered with Lyft to help you get around Oakland and overcome transportation barriers! Mobility 4 All offers free ride share and AC transit passes for no-income to low income, transportation insecure residents of East Oakland. Apply [here](#) for your free Lyft ride or transit pass. For questions, contact us at 510-990-0775 or info@eastoaklandcollective.com.

Roots Health Centers' Dr. Noha provides a COVID-19 update every Tuesday at 10am via Facebook Live. Follow these excellent updates [here](#).

EBGTZ Learning Corner:

Article: [The Health System Appears To Be Selling LGBT+ People Short](#). "Over a third of LGBT+ people – those who are lesbian, gay, bisexual, transgender, or something else other than straight – say they have had a negative experience with a provider over the last two years. Those bad experiences range from their provider not believing they were telling them the truth, to suggesting they were to blame for their health problems, to making assumptions about them without asking, to outright dismissing their concerns."

Podcast: The latest episode of **Speaking Frankly**, a podcast by the California Prevention Training Center, is with

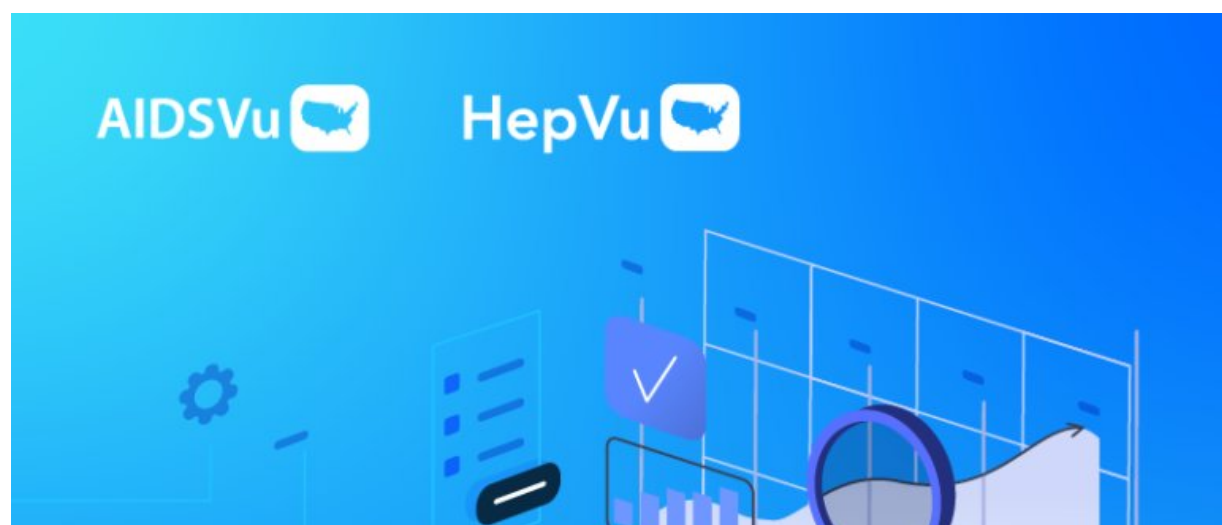
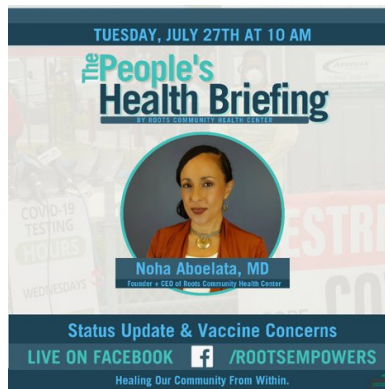
[Dante King](#), anti-racism advocate and lecturer. “I don’t believe most racism is implicit at all, I believe that it’s unspoken, I think people are very aware of their biases and they work with them, they do everything with them. And what I invite people to do is evaluate their decisions and look at what they’re doing, not what they’re saying, because our choices shine a light on our preferences”

Updates: Read [AVAC’s take on IAS 2021](#). “The intersection of the responses to COVID-19 and HIV and the glaring disparities in health made ever more undeniable by COVID-19, are giving new meaning and momentum to changes advocates have been pressing for years, even decades.”

Tool: East Bay Agency for Children’s groundbreaking [Trauma Transformed](#) program offers a wealth of tools for family-serving professionals and their organizations.

Learning Modules: The National LGBTQIA+ Health Education Center of the Fenway Institute specializes in providing national training and technical assistance (T/TA) to health centers in order to optimize access to quality health care for LGBTQIA+ populations. The Education Center is offering the [following e-learning modules](#):

- Foundations of LGBTQIA+ health, Part 1
- Foundations of LGBTQIA+ health, Part 2: For clinicians
- Foundations of LGBTQIA+ health, Part 2: For non-clinical staff
- Foundations of LGBTQIA+ health, Part 2: For administrative staff
- Health Care for Transgender and Gender Diverse People
- LGBTQIA+ Youth
- LGBTQIA+ Older Adults
- Behavioral Health Care for LGBTQIA+ People
- HIV Testing, Prevention, and Treatment for Sexual and Gender Minority People.



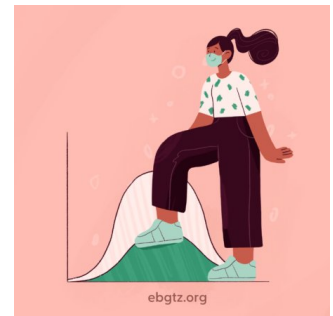


HIV services during COVID-19: [Click here for Contra Costa HIV services](#) and [see our online directory for Alameda County HIV services](#).

If your organization is in Alameda County and needs COVID-related supplies or staffing, please go to the [Emergency Medical Services website](#) to [request PPE and testing supplies](#) and [request staffing](#).

Please follow and share our [Instagram](#), [Facebook](#) and [Twitter](#) accounts.

A note about this webpage: COVID and HIV practice-changing updates will be posted on this page, with comprehensive updates posted monthly, usually on third Wednesdays. New studies will be continuously added to our summary of [COVID-19 harm reduction strategies](#). The emailed [HIV+COVID-19 update newsletters](#) are sent monthly on third Wednesdays.



Official Alameda County COVID-19 updates are accessible on the [county website](#). You can sign up to receive the Alameda County weekly COVID-19 newsletter by emailing Jamie.Yee@acgov.org.

[CLICK HERE FOR ALAMEDA COUNTY WEEKLY NEWSLETTERS](#)

TOP LINKS:

- **COVID Vaccines:** [Alameda County](#), [Contra Costa County](#), [Solano County](#), [California State](#), [CA vaccine progress tracker](#)
- **COVID Vaccine Myths and Facts and FAQs** in English, Español, 中文, and Arabic and **Questions & Answers**
- **COVID vaccine safety updates** (CDC)
- **COVID testing:** locations in the [Bay Area](#); [Alameda County](#), [Contra Costa County](#), [Solano County](#); [CDC guidance on home testing](#).
- **Phone numbers/Centro de llamadas:** Contra Costa County- [\(844\) 729-8410](tel:8447298410), Solano County- 707-784-8988, Alameda County vaccine line in English, Spanish, Mandarin for those who cannot navigate the internet: 510-208-4VAX or 510-208-4829

- **COVID supports** (food, housing, stipends, etc.): [Alameda County resources and ARCH isolation stipends](#), [Contra Costa County](#), [Solano County](#)
- **Public Health Department updates:** [Alameda County](#), [Contra Costa County](#), [Solano County](#), [California State](#)
- **COVID data:** [Alameda County](#), [Contra Costa County](#), [Solano County](#), [California State](#), [California \(SF Chronicle\)](#), [US \(CDC\)](#), [US by race \(CDC\)](#), [National/Global \(JHU\)](#). **Variants:** [in the US \(CDC\)](#) and [in California](#).
- **COVID risk calculator**
- **Maximizing mask protection:** [CDC guidance](#), [EBGTZ mask videos](#), [guidance and resources](#)
- **COVID PPE, staffing or testing supplies:** [Alameda County EMS- request PPE](#), [request staffing](#) or [request testing supplies](#).
- **HIV:** [FAQs for people living with HIV \(PLWH\)](#) and [Preguntas Frecuentes in Spanish](#), [Guidance for PLWH \(CDC\)](#), [Guidance for HIV providers \(HIVMA\)](#), [Vaccines for PLWH \(HIVMA\)](#), [UNAIDS infosheet on COVID-19 vaccines and HIV](#)
- **HIV services during COVID-19:** [Click here for Contra Costa HIV services](#), [Alameda County HIV services](#), [SF Community Clinic HIV clinic reopening guidance](#)
- **Key Communities:** [Harm Reduction Coalition](#), [Immigrants Rising](#), [Protecting Immigrant Families: Public Charge](#), [Healthcare for the Homeless](#), [COVID info in Asian languages](#)

LOOKING FOR COVID-19 TESTING?

- **Rapid COVID-19 antigen home tests are now available:**
 - The antigen tests provide rapid results in 15-30 minutes for when people are at their most infectious stage. They are effective at picking up high viral loads and are less sensitive than the PCR tests but provide timely results and are cheaper and easier to use.
 - The [Abbott BinaxNow](#), [Ellume](#) and [Quidel QuickVue](#) COVID-19 antigen home tests were the first ones authorized; more are listed on the [FDA website](#).
 - For example pricing, the BinaxNow antigen home self-test retail price \$23.99 for 2 tests and is sold at pharmacies and online retailers. The 15-minute test is done with a nasal swab, with results showing on a card, like a home pregnancy test.
 - The CDC [has guidance](#) on self-testing and what people should do with test results.
- **SF Chronicle's map of Bay Area testing sites** that don't require a doctor's referral.
- **Alameda County** COVID testing sites: This [webpage](#) includes community-based sites offering free testing for anyone with symptoms, including people without health insurance.
- **Contra Costa County** free drive-through or walk-in COVID testing
- **Solano County** free testing sites
- Please check the listing for updates and call the testing site before you leave to make sure they are open for testing, you are eligible, and register if needed.
- If you don't have a provider and have COVID symptoms: In Alameda County, call Alameda Health System 510-437-8500 for a phone screen and guidance. In Contra Costa County, call 844-729-8410. In Solano County, the county COVID warmline is 707-784-8988.
- If you're having difficulty breathing and unstable, please go to your nearest emergency room.



COVID-19 testing at the *Unidos en Salud* site in the Mission,



Community pop-up testing and vaccination at Serenity House in Oakland, July 2021.

SF. (photo used with Creative Commons license,
Konstantin 'KVentz' Ventslavovich, 2020)

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