A REPORT OF HEALTH & HUMAN SERVICES IN PALM BEACH COUNTY-

BASED ON KEY COMMUNITY HIV/AIDS INDICATORS 2017



Palm Beach County Board of County Commissioners





KEY INDICATOR

The current Key Indicator of HIV/AIDS is the HIV case rate per 100,000 population; however, a more accurate indicator for measuring the risk of HIV infection is the community viral load, as measured by the percentage of Persons Living with HIV/AIDS (PLWHA) with a suppressed viral load. This update will incorporate community viral load suppression as a primary indicator, and continue utilizing the HIV case rate as a secondary indicator.

GOAL

Increase the community viral load suppression rate from 53% to 58% by January 1, 2018.

Decrease the HIV Case Rate from 23.2 to 21.5 cases/100,000 by December 31, 2018 (See Table 9, *HIV Case Rates*.)

CURRENT STATUS

The HIV case rates reported in the diagram in Table 9 represent the number of newly reported HIV infections for individuals residing in Palm Beach County who were newly identified as having HIV, regardless of when the individuals acquired their infections. This number may include cases that previously tested anonymously but were never reported. HIV case rates tend to reflect more recent transmission than AIDS cases, and thus represent a more current picture of the epidemic. After decreasing to historical low levels in 2009, the HIV case rate has been relatively stable (see **Florida Charts**).

Community viral load is a measure of risk that indicates the likelihood of transmission of the virus by those who are infected. As PLWHA are retained in care and adherent to treatment plans, the level of virus in their blood becomes suppressed, and further transmission can be prevented. Viral load suppression rates represent the relative effectiveness of HIV care, and thus viral load suppression is a protective factor limiting further spread of the disease. (For a more extensive discussion of viral load suppression and the HIV Continuum of Care, see <u>the Health Resources Services</u> <u>Administration, HIV/AIDS Bureau</u>; and the Florida Department of Health,

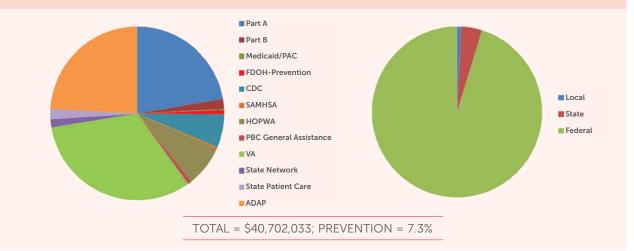


CHART 4 | HIV/AIDS PREVENTION & PATIENT CARE FUNDING, 2009, PALM BEACH COUNTY, FL

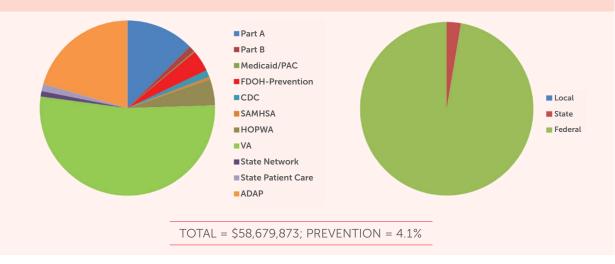


CHART 5 | HIV/AIDS PREVENTION & PATIENT CARE FUNDING, 2015, PALM BEACH COUNTY, FL



TABLE 9 | HIV CASE RATES, STATE OF FLORIDA AND PALM BEACH COUNTY



HIV/AIDS Section, Partnership 9). Baseline statistics for Palm Beach County (2014) indicate that among all PLWHA (N = 8020), 53% have achieved viral suppression. As higher levels of viral load suppression are achieved, the impact will be a reduction in the rate of new HIV cases.

CURRENT AND FUTURE PLANNING EFFORTS

In 2015, the Health Resources and Services Administration (HRSA) and the Centers for Disease Control and Prevention (CDC) issued guidance for local integrated planning between HIV patient care (Ryan White) and prevention Community Prevention Partnership (CPP) programs. As a result, the CARE Council and CPP have submitted a five-year plan that integrates prevention and patient care programs around the goals of the National HIV/AIDS Strategy (NHAS). The document supports the integration of patient care and prevention planning and service implementation across Palm Beach County and serves as a mechanism to align the HIV/AIDS Indicator with the goals of the National HIV/AIDS Strategy. The Integrated Plan will also be accompanied by an integrated needs assessment, addressing both patient care and prevention service needs in Palm Beach County. As gaps in services are identified, these needs will be addressed in the

planning and allocations processes of the CARE Council and CPP.

PREVENTION, TESTING AND OUTREACH

In 2013, the Florida Department of Health in Palm Beach County adopted the 2014-2016 Jurisdictional HIV Prevention Plan. This document has guided the expansion and improvement of HIV prevention efforts and aligned prevention goals with the NHAS. The core set of strategies in the plan are centered around <u>High Impact Prevention</u>, a set of scientifically-proven, cost-effective and scalable interventions to targeted populations most affected by the epidemic. The goals and objectives contained in the 2014–2016 prevention plan have been updated and incorporated into the 2017–2022 Palm Beach County Integrated Plan. The Integrated Plan for Palm Beach County will be contained in a statewide Integrated Plan, which is being prepared in partnership with the Florida Department of Health's HIV Patient Care Planning Group and Prevention Planning Group, and the other local Part A jurisdictions in Florida. In Palm Beach County, the integration of the local prevention and patient care plans will be accompanied by the integration of ongoing planning processes. This will assure a high degree of coordination across all publiclyfunded HIV services.

Palm Beach County continues to support extensive and robust HIV testing programs. In 2014, a total of 25,497 publicly-funded HIV tests were conducted. Of these, 134 HIV infections were identified (sero-positivity rate = .53%). HIV testing is targeted to high-risk groups and community settings. This includes seven

TABLE 9.1 | VIRAL LOAD SUPPRESSION RATES

	2014	2015	2016	2017	2018
Palm Beach County	53%				
State of Florida	58%				
VL Suppression Goal	(baseline)	54%	55%	56%	58%

high-risk target populations (African-American, Hispanic, and White MSM; Black heterosexual men and women; pregnant HIV+ women; and partners of HIV+ individuals) and two moderate- and low-risk target populations (STD+ individuals and incarcerated individuals). These target groups were selected by consensus due to their higher-than-average rates of positive HIV test results and their disproportionate representation among all PLWHA.

Outreach efforts under the Ryan White Part A program are focused through Early Intervention Services (EIS). The EMA has increase funding for EIS and currently supports four agencies for this service. The primary efforts of EIS workers are to contact PLWHA who may either be lost to medical care and/or who may not be aware of their HIV status. EIS services under Part A are coordinated with CDC-funded testing programs through an EIS work group. The goal is to coordinate prevention and patient care efforts to increase retention in care for PLWHA, and to identify HIV-positive persons who are unaware of their status.

COLLABORATION WITHIN THE HIV/AIDS COMMUNITY

Collaboration within the HIV/AIDS community occurs through joint planning between the

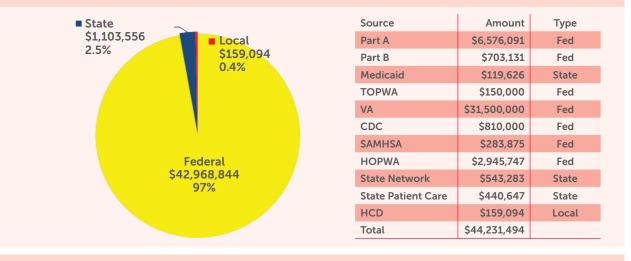
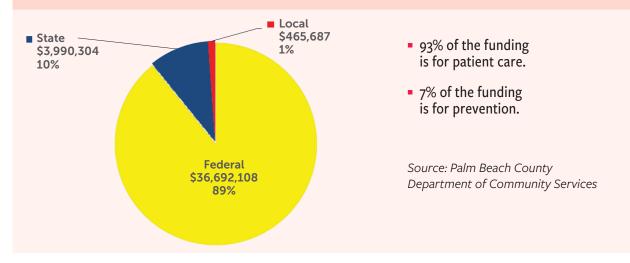


CHART 5.1 | FEDERAL, STATE & LOCAL PATIENT CARE & PREVENTION HIV/AIDS FUNDING, 2015

CHART 5.2 | FEDERAL, STATE & LOCAL PATIENT CARE & PREVENTION HIV/AIDS FUNDING, 2009



CARE Council and the CPP. This occurs through a number of committees and work groups, most notably in the EIS work group and regular meetings of the planning bodies. The integrated plan will also bring a high level of coordination between patient care and prevention programs. An evaluation and monitoring framework for the five-year integrated plan will assure mutual accountability for achieving stated outcomes. The Part A Grantee has also initiated a project with the City of West Palm Beach's Housing Opportunity for People with AIDS (HOPWA) program to integrate data systems and planning processes. This will streamline the availability of housing and patient care services for PLWHA that experience unstable housing situations and/or homelessness.

NATIONAL HIV/AIDS STRATEGY AND LOCAL EFFORTS

Since 2010, the National HIV/AIDS Strategy (NHAS, Office of National AIDS Policy) has provided a unified framework for organizing efforts to eliminate HIV and AIDS. The Ryan White program has adopted the three goals of the NHAS:

- 1. Reducing HIV incidence
- 2. Increasing access to care and maximizing health outcomes

3. Reducing HIV-related health disparities

HIV-related health disparities in Palm Beach County mirror national trends, and HIV has a significant disproportionate impact by race/ ethnicity and gender, as indicated by the following findings reported by the Florida Department of Health, Bureau of HIV/AIDS in 2014:

- In 2014, Blacks were over-represented among the HIV cases, accounting for 57% of adult cases but only 18% of the adult population.
- In 2014, 62% of the reported HIV cases were male. However, the adult population of PBC is 48% male and 52% female. Therefore, male cases are disproportionately impacted.
- **Males:** Among Black males, the HIV case rate is 4.2 times higher than among White males. Hispanic male rates are 1.8 times higher than the rates among their White counterparts.
- **Females:** Among Black females, the AIDS rate is 15.9 times greater than among White females. Hispanic female rates are 2.6 times higher than the rates among their White counterparts.
- The relative increases in male HIV cases might be attributed to proportional increase in HIV transmission among men who have sex with men (MSM) which may influence future AIDS trends.

Efforts to address these disparities through the Ryan White program include the Minority AIDS Initiative (MAI) and the plan for Early Identification for Individuals with HIV/AIDS (EIIHA). The MAI program provides intensive medical case management for vulnerable, minority PLWHA. In 2014, this represented \$678,108 for services for 864 African-American and Hispanic PLWHA. By providing intensive medical case management, MAI funds assure that clients are retained in medical care and are successful in improving their health outcomes. The Ryan White EIIHA plan targets part A resources to vulnerable populations who are unaware of their HIV status or who are known to be infected but not in care. The EIIHA plan coordinates Part A-funded Early Intervention Services with CDC-funded testing and outreach programs, and reaches African-American and Hispanic MSM, as well as the recentlyincarcerated. By linking more PLWHA into medical care, the overall community viral load for these populations will decrease.



Electronic copies of this document can be accessed at: http://www.pbcgov.com/communityservices/humanservices/PDF/CSD_Indicator_ Report_2017.pdf

Palm Beach County Comprehensive Plan – Health and Human Services Element http://www.pbcgov.com/pzb/planning/PDF/ComprehensivePlan/ HealthHumanServices.pdf

Resolution No. R-2013-1563 http://www.pbcgov.com/communityservices/PDF/CAC/publications/resolution.pdf

Resolution No. R-2011-1560 – PBC HIV Comprehensive AIDS Resources Emergency Council (CARE Council)

http://www.pbcgov.com/communityservices/Pages/Ryan-White-CARE.aspx

Community Characteristics Information

Additional information about Palm Beach County will be posted on the following website: http://www.pbcgov.com/communityservices/Pages/Citizens-Advisory-Committee. aspx. This information will include Palm Beach County characteristics pertaining to topics such as demographics, economic features, poverty, housing and income.

For further information, contact: Palm Beach County Department of Community Services David Rafaidus, Project Manager 810 Datura Street West Palm Beach, FL 33401 Office (561) 355-4705 Email drafaidu@pbcgov.org



Electronic copies of this HIV/AIDS brochure can be accessed at: http://www.pbcgov.com/communityservices/Pages/ Ryan-White-CARE.aspx

Palm Beach County Integrated Prevention and Patient Care Plan http://www.pbcgov.com/communityservices/Pages/ Ryan-White-CARE.aspx

Palm Beach County HIV Care Council http://www.pbcgov.com/carecouncil/Pages/default.aspx

Resolution No. R-2011-1560 – PBC HIV Comprehensive AIDS Resources Emergency Council (CARE Council) http://www.pbcgov.com/communityservices/Pages/ Ryan-White-CARE.aspx

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