Getting to Zero San Francisco Consortium: Early Results

The San Francisco Getting to Zero Consortium

Background

In 2013, San Francisco formed a new, independent, multi-sector “Getting to Zero” (GTZ) consortium built on the principles of collective impact:

The commitment of groups from different sectors of society to a common agenda to solve a specific and challenging problem

The group examined San Francisco’s HIV surveillance data and proposed 3 initiatives:
1. Expansion of PrEP knowledge and services
2. Rapid linkage to care upon diagnosis
3. Retention and re-engagement in care

In year 2, we launched an ending stigma initiative.

Description

Our strategic priorities are:
1. To improve the health of all persons at risk for or living with HIV in San Francisco, with an emphasis on under-served populations
2. To create innovative programs and demonstrate impact with measurable objectives
3. To secure multi-sector funding and support for existing and new programs
4. To exchange lessons learned with other cities

Figure 1. New HIV diagnoses and deaths in people living with HIV, San Francisco, 2006-2014

Lessons Learned

PrEP Committee

The PrEP committee coordinated:
1. “Getting the word out” through media, social network, and PrEP ambassadors

Over the last year, PrEP delivery sites increased to >30 clinics, >120 providers were trained to deliver PrEP, and community surveys of MSM report PrEP use increased from 15% to 22%.

RAPID Committee

The GTZ RAPID committee expanded to 3 additional sites a “rapid” program to provide same-day care, including antiretroviral treatment. To date, they have enrolled more than 100 newly diagnosed persons, and city-wide, the mean time from HIV diagnosis to viral suppression has fallen from 211 days to 87 days.

Retention Committee

The Retention and Re-engagement committee Expanded a LINCS (linkage, integrated care services)
1. Placed care navigators in 3 city clinics with the most vulnerable patients and expanded an existing linkage program
2. Formed a frontline worker group for training and capacity-building
3. Identified patients recently out of care without viral suppression for prioritized re-linkage

After one year, 73% of patients enrolled in navigation have re-linked to care; three public health clinics are implementing an evidence based reengagement and retention package.

Ending Stigma Committee

The stigma committee is
1. Developing a city-wide needs assessment to address HIV stigma
2. Expanding a digital storytelling social media program
3. Including harmonized stigma measures in community surveys

Conclusions

Getting to Zero has achieved strong participation and coordination of > 200 community advocates, providers, researchers, city employees, and members of the private sector. Together, we are implementing a strategic set of activities to reduce the number of HIV-related deaths and new infections by 90 percent within this decade. We are working in particular to reach people of color and under-served communities.

Visit www.gettingtozerosf.org

Racial/ethnic disparities remain:

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<tr>
<th></th>
<th>White</th>
<th>Black</th>
<th>Latino</th>
<th>Other</th>
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<tbody>
<tr>
<td>New HIV diagnosis</td>
<td>69</td>
<td>127</td>
<td>107</td>
<td>33</td>
</tr>
<tr>
<td>Death in PLWH</td>
<td>84</td>
<td>178</td>
<td>55</td>
<td>9</td>
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</table>

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