### **COMMUNITY ENGAGEMENT GROUP (CEG)**



Wednesday, April 16, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market Street San Diego, CA 92114 (Tubman Chavez Room A)

NOTE: This meeting is audio and video recorded.

Language translation services are available upon request at least 96 hours prior to the meeting.

Please contact HPG Support Staff via e-mail at <a href="https://hpsa@sdcounty.ca.gov">hpg.hhsa@sdcounty.ca.gov</a>

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# Meeting Location & Directions:

Community Engagement Group Wednesday April 16, 2025 3:00 PM - 5:00 PM

Southeastern Live Well Center 5101 Market Street San Diego, CA 92114 Tubman Chavez Room A



Visitor/Employee parking available in parking structure. Main entrance can be accessed by exiting the parking structure on the 2nd floor and walking down the sidewalk to the left.

### FROM I-805 SOUTH:

- 1. Head northwest on I-805 North.
- 2. Take exit 12B for Market St.
- 3. Turn right onto Market St.
- **4**. The destination will be on your right.

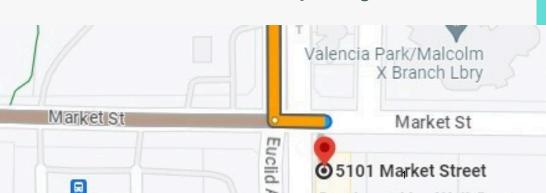
### FROM I-805 NORTH:

- 1. Head southeast on I-805 South.
- 2. Take exit 13A for CA-94-E/M L King Jr. Fwy.
- 3. Merge onto CA-94 E.
- 4. Take exit 4A for Euclid Ave.
- 5. Turn left onto Euclid Ave.
- 6.Use the left 2 lanes to turn left onto Market St.
- 7. The destination will be on your right.

PUBLIC TRANSPORTATION

MTS Trolley: Orange Line

MTS Bus Routes: 3, 4, 5, 13, 60, 916, 917 and 955



Southeast Live Well Center

Market St

### **COMMUNITY ENGAGEMENT GROUP (CEG)**



Wednesday, April 16, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center; 5101 Market St, San Diego, CA 92114; Tubman Chavez Room A

#### To participate remotely via Zoom:

https://us06web.zoom.us/j/89778142157?pwd=5G57jMW0b1b1V8l8KVbljbAgedPsWV.1

Call in: US Toll +1 669 444 9171

Meeting ID: 897 7814 2157 Passcode: 106514

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff via e-mail at <a href="https://hpg.hhsa@sdcounty.ca.gov">hpg.hhsa@sdcounty.ca.gov</a>.

#### A quorum for this meeting is three (3)

**Committee Members:** Michael Donovan (Chair) | Hector Garcia | Jen Lothridge (Co-Chair) | Skyler Miles | Veronica Nava

### MEETING AGENDA ORDER OF BUSINESS

- 1. Call to order, roll call, comments from the chair, and a moment of silence
- 2. Review Background, Mission Statement, Goals, and Agreement of Meeting Decorum
- 3. Introductions and Icebreaker
- 4. Public comment (for members of the public)
- 5. Sharing our concerns (for committee members)
- 6. **Action:** Approve the consent CEG agenda for April 16, 2025 (which includes the April 16, 2025 agenda and the February 19, 2025 minutes)
- 7. Updates
  - a. Committee Updates:
    - i. Membership Committee
    - ii. Strategies and Standards Committee
    - iii. Medical Standards and Evaluation Committee
    - iv. Priority Setting and Resource Allocation Committee
    - v. Steering Committee
    - vi. HIV Planning Group
  - b. Community Updates:
    - i. CARE Partnership
    - ii. HIV Housing Committee/Housing Opportunities for Persons with AIDS (HOPWA)
- 8. Old Business
  - a. Committee Attendance
  - b. **Discussion**:2025 Community Engagement Group Outreach Plan
- 9. New Business
  - a. Presentation: 2024 Needs Assessment Findings
- 10. Announcements

### **COMMUNITY ENGAGEMENT GROUP (CEG)**

11. **Next meeting date:** Wednesday, May 21, 2025, from 3:00 PM – 5:00 PM **Location:** County Operations Center, 5570 Overland Ave, San Diego, CA 92123, Room 1047 - Medical Examiner's Office

12. Adjournment

### **Community Engagement Group Charge:**

### 1) Educate Community Members

• Educate/train community members about the HIV Planning Group's local HIV services planning process and prepare them for and support them in increased involvement throughout the HIV Planning Group Process: committees, task forces, working groups, and other opportunities, as well as HIV Planning Group membership.

### 2) Increase Community Members' Participation

- Increase the level and diversity of community involvement, including from under-served and under-represented populations.
- Represent the needs of all community members, including those unable to participate in meetings.
- Provide linkages to regional and population-specific community groups and ensure communication between those groups and the Community Engagement Group.
- Identify and seek to overcome barriers to community participation.

### 3) Represent Community Member Needs Throughout the HIV Planning Group Process

- Provide community representation on HIV Planning Group committees, task forces, etc., and ensure the flow of information from those groups to the Community Engagement Group.
- Encourage maximum community involvement in the Priority Setting Committee and other
  established venues for the annual priority setting and budget allocations process; the
  Community Engagement Group will not develop separate budget recommendations.
- Serve as a venue for providing community feedback regarding HIV Planning Group issues (e.g., task forces).

### **COMMUNITY ENGAGEMENT GROUP**



Wednesday, February 19, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center; 5101 Market St, San Diego, CA 92114 (Tubman Chavez Room A)

A quorum for this meeting is three (3).

Committee Members Present: Michael Donovan (Chair) | Jen Lothridge (Co-Chair) | Veronica

Nava

Committee Members Absent: Skyler Miles | Hector Garcia

### **MEETING MINUTES**

Agenda Item	Discussion/Action	Follow- Up
Call to order, roll call, comments from the chair, and a moment of silence	The chair called the meeting to order at 3:01PM and noted the presence of an in-person quorum.	
<ol> <li>Review Background, Mission Statement, Goals, and Agreement of Meeting Decorum</li> </ol>	Committee members read the Mission Statement and the Community Engagement Group (CEG) Charge. Lothridge, Nava, and Donovan reviewed the meeting decorum.	
3. Introductions (Name, Role with HPG/Consumer, Pronouns), Icebreaker	Members and participants introduced themselves.	
Public comment (for members of the public)	A member from the community made the following suggestions:  - Case managers report that individuals are struggling with rising utility costs, suggesting that the Ryan White utility assistance program should be indexed to inflation.  - Using AI tools and a mathematical equation for PARS could reduce wait times and improve efficiency.	
5. Sharing our concerns (for committee members)	None.	
6. ACTION: Approve the consent CEG agenda for February 19, 2025 (which includes the February 19, 2025 agenda and the	Motion: Approve the consent agenda for February 19, 2025 as presented  Motion/Second/Count (M/S/C): Lothridge/Nava/2-0 Public comment:	

### **COMMUNITY ENGAGEMENT GROUP**

A goods Item Discussion/Action F					
Agenda Item	Discussion/Action	Follow- Up			
January 29, 2025, minutes)	Abstention(s): Donovan Motion carries				
Follow-Up Items from minutes:	HPG SS will update the 2025 training plan; STATUS: <b>Completed</b> HPG SS will add the CEG expectation to one of the documents as a listed responsibility; STATUS: <b>Completed</b>				
7a. Committee Updates					
I. HIV Planning Group (HPG)	HPG was canceled for February due to PSRAC's meeting cancelation. The next meeting will be March for the retreat.				
II. Strategies and Standards Committee	Strategies and Standards approved Transportation Service Standards and the Anti- Racism Statement. They are continuing to review the Emergency Financial Assistance and Housing Service Standards, Trauma-Informed Care document, and Universal Service Standards.				
III. Steering Committee	Steering has changed their schedule to be the second Friday of every other month from 10am-12pm starting March.				
IV. Membership Committee	Membership reviewed the membership expectations document with CEG's input and discussed the outreach and recruitment plan. HPG has 11 general member seats vacant currently.				
V. Priority Settings and Resource Allocation Committee (PSRAC)	PSRAC's meeting was canceled due to lack of quorum. They will meet again on March 13th.				
VI. Medical Standards and Evaluation Committee (MSEC)	MSEC had some interruptions during their review of the Dental Practice Guidelines and Oral Health Care Service Standards in February. They will be rescheduling the meeting for April.				
7b. Community Updates					
I. CARE Partnership	CARE will meet again March 17 <sup>th,</sup> and presentations are still to be determined.				
II. HIV Housing Committee/Housing Opportunities for Persons with AIDS (HOPWA)  8. Old Business	Miles will be providing HOPWA updates in future meetings.				
o. Olu Dusiliess					

### **COMMUNITY ENGAGEMENT GROUP**

Agenda Item Discussion/Action		Follow-
		Up
a. Committee Attendance	None.	
9. New Business		
a. Presentation: Ryan White Program – Maritza Herrera	Maritza Herrera presented on the Ryan White Program and the following topics were discussed:  - Who is Ryan White - What is the Ryan White HIV/AIDS Treatment Extension Act - Ryan White HIV/AIDS programs (Part A, B, C, D, F) - San Diego County regions covered - Clients to be served - Limitations of funding - Ryan White HIV/AIDS Program Part A and Part B - Service Categories 6-10	
b. Presentation: County of San Diego Prevention Programs and Services – Carlie Catolico	Carlie Catolico presented on the County of San Diego (CoSD) Prevention Programs and Services and the following topics were discussed:  - Funding from the CDC  - Overarching approach to prevention  - Ending the HIV Epidemic (EHE)  - CoSD prevention contracts  - SD Getting to Zero App  - CoSD Prevention Dashboard  - America's HIV Epidemic Analysis Dashboard	
10. Announcements	<ul> <li>HIV Planning Group Retreat will occur on March 26<sup>th</sup> from 1-5pm with a facilitator led discussion on an analysis activity and SMART goals.</li> <li>Latino+ resistance event March 1<sup>s</sup> at the LGBT Center.</li> <li>Christie's Place Black History Month Celebration February 28th from 12:30-3PM. Theme is the 70s.</li> </ul>	
11.Next meeting date	Next Meeting: Wednesday, March 19, 2025, from 3:00 PM – 5:00 PM Location: Southeastern Live Well Center; 5101 Market St, San Diego, CA 92114 (Tubman Chavez Room A)	
12. Adjournment	Meeting was adjourned at 4:40PM.	

# HIV PLANNING GROUP 12-MONTH COMMITTEE TRACKING April 2024 - March 2025

Community Engagement Group	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	#
<b>Total Meetings</b>	1	1	1	1	0	1	1	0	1	1	1	0	9
(5) Members													
Donovan, Michael c				*	NM	*	*	NM	*	*	*	NM	0
Garcia, Hector										*	1	NM	1
Lothridge, Jen <sup>cc</sup>	*	*	*	*	NM	*	*	NM	*	*	*	NM	0
Miles, Skyler			*	*	NM	*	*	NM	*	1	1	NM	2
Nava, Veronica		*	*	*	NM	*	*	NM	*	*	*	NM	0

To remain in good standing and eligible to vote, the committee member may not miss 3 consecutive meetings or 6 meetings within 12 months.

**1** = Absent for the month

**1** = Absence when there are multiple meetings that month. Member needs to attend at least one (1) meeting for attendance to count for that month.

JC = Just Cause

**EC** = Emergency Circumstance

**NM** = No Meeting

**NQ** = No Quorum

<sup>\* =</sup> Present

# 2024 HPG Needs Assessment







Virginia Suarez, Community Health Program Specialist



### **Outline**

- Needs Assessment Overview
- Demographics
- Common Themes
  - Housing
  - Substance use
  - Social support
  - English vs Spanish responses
- Key Questions + Trends
  - Trouble accessing services
  - Top unmet needs
  - Top 5 most important services
  - Recommended changes to HIV services
  - What matters most











- 310 responses collected between March and September 2024
- 87 total questions across 10 sections:



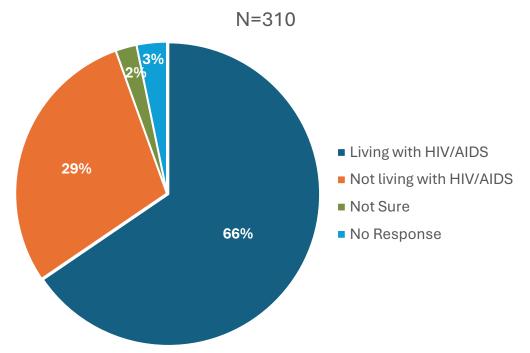
- Surveys were administered in English and Spanish; results were combined unless stated otherwise
- N refers to the total number of responses used in analysis

# **HIV & Ryan White Status**

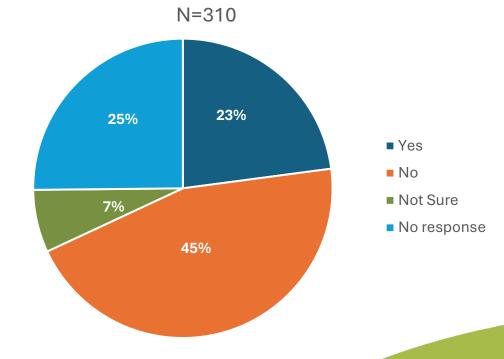




Q1. What is your current HIV Status?



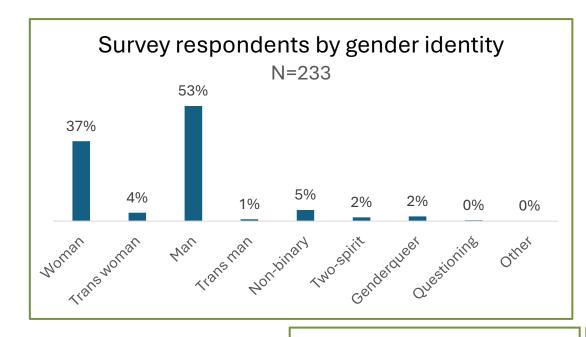
Q69. Do you receive medical care through the Ryan White HIV/AIDS Program?

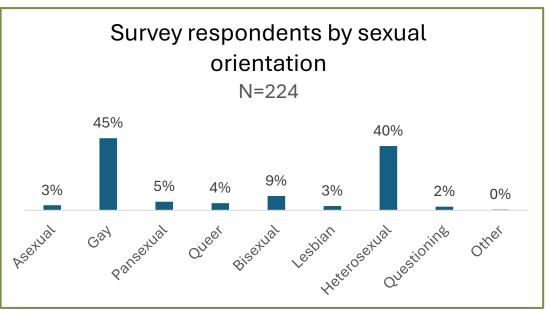


## **Demographics**









### Age

N=232

Average: 48 Median: 48 Range: 21-92

### Race/Ethnicity

N = 231

41% Latino/Hispanic

29% Mexican

28% White (non-Hispanic)

10% Black or African American

3% Pacific Islander/Hawaiian

3% Indigenous

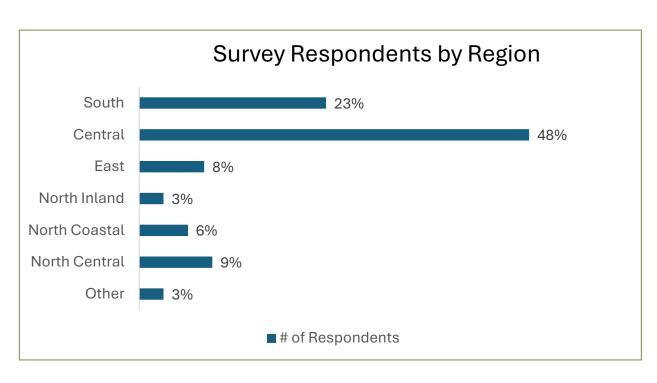
3% Multiracial

### Residence





### Q62. What is the ZIP code where you live or stay most nights? N=222 (151 English, 74 Spanish)



- 52 different ZIP codes listed
- Top 5 ZIP codes:
  - 92104 (Central) 28 respondents
  - 92105 (Central) 17 respondents
  - 92103 (Central) 17 respondents
  - 92101 (Central) 14 respondents
  - 91910 (South) 13 respondents









# Housing





- Help paying rent was the #1 unmet need across health, basic needs, and support services (N=239-252)
- When asked "what matters most to you right now?", the most common response was housing (N=96)
- Homelessness/unstable housing was named as the most common reason for respondents being off HIV medication for more than 6 months (N=35)
- When asked what changes they would recommend to HIV services, several respondents mentioned housing, including "more and better low housing opportunities" (N=51)

"Getting off the street and being able to take care of myself [matters most]" "Affordabilty of housing is a huge concern. Hoping to be accepted into HOPWA."

"Housing is the most important issue right now."

"Housing is a big problem due to it's cost."

"I feel very depressed with lack of housing..." [Translated from Spanish]

# **Substance Use & Sobriety**





- Substance use was listed as the second most common reason for respondents being off HIV medication for more than 6 months (N=35)
- Substance use was listed by several respondents as a reason that would impact their decision to stop taking HIV medication in the future (N=84)
- When asked "what matters most to you right now" many respondents stated sobriety (N=96)

"was using drugs so didn't think [supportive services] was important enough to try to get"

"completing
SUD program
[matters most]"

"When I was using drugs I didn't bother with to take my meds."

"I should meet more sober people and develop friendships."

"I was a heavy drug user so I was never adhering to my medication"

free permanently [matters most]"

"Becoming drug

# **Social Support**





- When asked "what matters most to you right now", many respondents listed personal relationships (romantic love, friendship, family, support groups, etc.) (N=96)
- When asked what recommendations they had for HIV services, respondents shared ideas like social gatherings, support groups, online support, and town meetings (N=51)
- When asked what social support needs are not being met, respondents shared wanting better support groups and social connections, including those that encourage sobriety (N=10)

"NO family to provide support"

"I am the support for several, including my elderly mother, but do not feel I have any support myself." "My family and my friends that [are] like family [matter most]"

"Stigma against trans and intersex people (especially the pervasive view of trans men as not really men, even in the gay and trans communities) has impaired forming new support networks."

## **English vs Spanish Differences**





- Spanish survey respondents ranked food and medical specialty services in their top 5 most important services
- Spanish speaking respondents were more likely to mention mental/emotional health and mental health services, including:
  - When recommending changes to HIV services
  - When describing what matters most right now
- 10% of Spanish respondents say that they had trouble accessing services because they needed someone who spoke their language

Q51. Ranking of Most Important Services					
Category	Spanish	English			
Dental	#1 – 47%	#1 – 54%			
HIV/AIDS Medications	#2 – 44%	#2 – 47%			
Food (home delivered meals, food bank, food pantry)	#3 – 38%	#10 – 18%			
Medical specialist other than HIV specialist	#4 – 33%	#8 – 25%			
HIV Primary Care	#5 – 30%	#3 – 47%			
Help to pay rent	#5 – 30%	#5 – 30%			

Note: Percentages reflect the total share of question respondents who selected each need as <u>one of</u> the top five most important

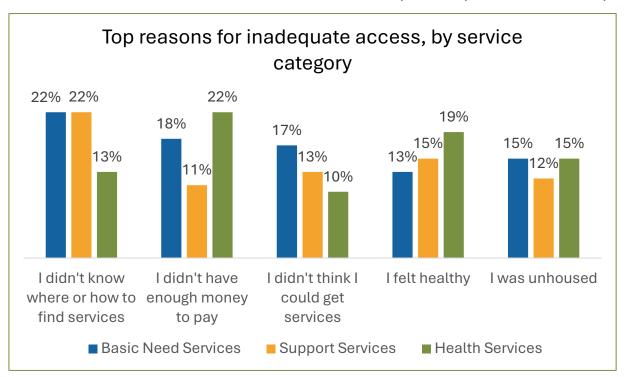
# **Trouble Accessing Services**





Qs 46, 48, and 50. If you responded "I received this service, but it was hard to access" or "I needed this service, but couldn't get it" for any of the [HEALTH, BASIC NEEDS, SUPPORT] SERVICES listed above, why did you have trouble accessing this/these service(s)?

Health (N=174), Basic Needs (N=150), Support (N=142)



"Keep in mind a lot of people refuse help when transgender is involved --passive discrimination of never replying to [texts], [calls], emails and not following through when I go in person"

"I tried but no one called me back"

**Basic Needs Services** 

**Support Services** 

"...It has been VERY DIFFICULT to find a psychologist that understands my language and that understands the situation of HIV."

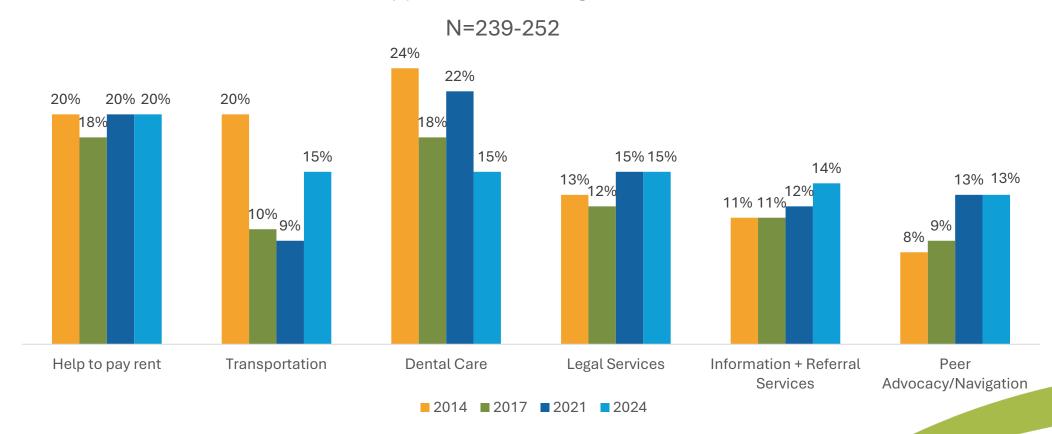
Health Services [Translated from Spanish]







Top services that respondents indicated they "need but can't get", across health, basic needs, and support service categories









Q51. From the list below, which of the services are most important to you today? Only select TOP 5 and rank them from 1 (most important) to 5 by checking the corresponding box.

N=223 (159 English, 64 Spanish)

2024	2021	2017	2014	
#1. Dental Care	#1. HIV/AIDS medication	#1. HIV/AIDS medication	#1. HIV/AIDS medication	
#2. HIV/AIDS medication	#2. HIV primary care	#2. HIV primary care	#2. HIV primary care	
#3. HIV primary care	#3. Dental care	#3. Dental care	#3. Dental care	
#4. Counseling/therapy	#4. Medical specialist other than HIV	#4. Case management	#4. Case management	
#5. Help to pay rent	#5. Case management	#5. Medical specialist other than HIV	#5. Transportation	

Note: Rankings are based on the total share of respondents who selected the need as <u>one of</u> the top five most important

# Recommended Changes to HIV Services Services for Adults 50+





Q86. What changes, if any, would you recommend related to HIV services? What would help make it easier for you to use the different services that are available?

N=51 (42 English, 9 Spanish)

- Most respondents were satisfied with services or did not have suggestions
- Recommendations included:
  - Better access/provider responsiveness (more appointments, reduced wait times, better scheduling, more responsive in answering phone calls, punctuality)
  - More information or knowledge about existing services, with specific reference to a centralized website for HIV services
  - Housing
  - Transportation support, including gas cards
  - Inclusivity for older adults, but open to all people, including trans/intersex individuals

"More access, someone answering the phone"

"There are services that I didn't know there was. Maybe a webpage with everything is available"

"More social gatherings, more info and services available"

# What Matters Most Services for Adults 50+





Q87. What matters most to you right now? N=96 (72 English, 24 Spanish)

"Getting off the street and being able to take care of myself."

"Housing currently in unstable housing and there is no affordable housing available."

"My mental health as well as my physical health."

### Top themes:

- Housing (32% of respondents)
- Staying healthy
- Finances/employment
- Mental health
- Medical care
- Community and close relationships
- Sobriety
- Fulfillment (happiness, purpose, living life)

"Making lifestyle changes that will promote long-term health as I age"

"My health, my emotional state, having access to my medications, housing, transportation and gas cards" [Translated from Spanish]

"Becoming drug free permanently."

"Better support group meetings, more advocacy programs for those living with HIV and need support, resources, better access."

"Learn more about this issue and be able to have more knowledge to be safe" [Translated from Spanish]

### ASSEMBLY BILL (AB) 2302: THE USE OF JUST CAUSE AND EMERGENCY CIRCUMSTANCES (2025)

(An Amendment to AB 2449)

If the physical attendance quorum requirement is met, AB 2302 permits a member who is not physically present to request virtual attendance at the local legislative body's meeting under two circumstances: (1) for "just cause" and (2) due to "emergency circumstances".

Qualifying Reason	Provisions to Attend Remotely	Requirements/Limitations
"Just Cause"	<ul> <li>There is a childcare or caregiving need (for a child, parent, grandparent, grandchild, sibling, spouse, or domestic partner) that requires the member to participate remotely.</li> <li>A contagious illness prevents the member from attending the meeting in person.</li> <li>There is a need related to a defined physical or mental disability that is not otherwise accommodated for.</li> <li>Traveling while on official business of the legislative body or another state or local agency.</li> </ul>	A member is limited to <b>two (2)</b> virtual attendances due to "just cause" per calendar year.
"Emergency Circumstances"	"A physical or family medical emergency that prevents a member from attending the meeting in person."  A member is <u>not</u> required to disclose any medical diagnosis or disability, or any personal medical information that is already exempt from existing law.	A member of the legislative body must:  1. Make a request to the body to allow the member to meet remotely due to an emergency circumstance; and  2. Provide a general description of no more than 20 words of the circumstance justifying such attendance.  A request from a member to attend remotely requires that the legislative body take action and approve the remote attendance at the start of the meeting for the member to be allowed to participate remotely for that meeting¹.

<sup>&</sup>lt;sup>1</sup>If the request does not allow sufficient time to be placed on the agenda as a proposed action item, then the legislative body may take action at the beginning of the meeting.

### **Additional Requirements for a Member Participating Remotely**

In addition to making a request either for "just cause" or due to an "emergency circumstance" for remote appearance, AB 2302 imposes the following three (3) additional requirements on legislative body members seeking to appear remotely at public meetings:

- 1. The member:
  - Notifies the legislative body at the earliest opportunity possible, including at the start of a regular meeting, of their need to participate remotely for just cause, including a general description of the circumstances relating to their need to appear remotely at the given meeting. OR
  - Requests the legislative body to allow them to participate in the meeting remotely due to emergency circumstances and the legislative body takes action to approve the request. (See "requirements/limitations" for the use of emergency circumstances.)
- 2. The member shall publicly disclose at the meeting before any action is taken, whether any other individuals 18 years of age or older are present in the room at the remote location with the member, and the general nature of the member's relationship with any such individuals.
- 3. The member shall participate through both audio and visual technology.