

**National HIV/AIDS Strategy, 2022-2025 and  
County of San Diego HIV Planning Group Getting to Zero Community Engagement Plan**

**Crosswalk of Key Strategies**

<b>National HIV/AIDS Strategy</b>	<b>Getting to Zero Community Engagement</b>
1.1.1 Develop and implement campaigns, interventions, and resources to provide education about comprehensive sexual health; HIV risks; options for prevention, testing, care, and treatment; and HIV-related stigma reduction.	2a. Use multiple communication platforms and outreach strategies to better provide HIV services information to HIV community members and historically underserved communities impacted in San Diego County, including: What services are available? Where are services located? Who is eligible for services? What is the cost of services to the community member? What is the contact information for scheduling or for more information?
1.3.4 Implement culturally competent and linguistically appropriate models and other innovative approaches for delivering HIV prevention services.	2b. Provide increased and readily available basic health information to low information, historically-underserved community members and communities, including: What is early detection and why is it important? Where is HIV, HCV, STD testing available? What is PrEP and who is eligible? Importance of early connection to HIV treatment and medication, What does an undetectable viral load mean for transmission of HIV? Contact information for mental health or substance misuse treatment (out-patient and residential) locations.
1.4.1 Provide resources, incentives, training, and technical assistance to expand workforce and systems capacity to provide or link clients to culturally competent, linguistically appropriate, and accessible HIV testing, prevention, and supportive services especially in areas with shortages that are geographic, population, or facility based.	1c. Provide enhanced, skill-based trainings to HIV service-delivery staff which improve the ability to consistently communicate cultural respect and the skills required by trauma-informed care.
1.4.2 Increase the diversity of the workforce of providers who deliver HIV prevention, testing, and supportive services	Recommendation 6: Continue to expand the opportunities to hire, support and utilize peer navigators, peer health educators, peer outreach specialists. Employ also benefits navigators, and housing specialists
1.4.3 Increase the inclusion of paraprofessionals on prevention teams by advancing training, certification, supervision, financing and team-based care service delivery	
2.3.1 Support the transition of health care systems, organizations, and patients/clients to	2b. Provide increased and readily available basic health information to low information,

National HIV/AIDS Strategy	Getting to Zero Community Engagement
become more health literate in the provision of HIV prevention, care, and treatment services	historically-underserved community members and communities
2.4.1 Provide resources, value-based and other incentives, training, and technical assistance to expand workforce and systems capacity to provide or link clients to culturally competent and linguistically appropriate care, treatment, and supportive services especially in areas with shortages that are geographic, population, or facility based	Recommendation 6: Continue to expand the opportunities to hire, support and utilize peer navigators, peer health educators, peer outreach specialists. Employ also benefits navigators, and housing specialists
2.4.2 Increase the diversity of the workforce of providers who deliver HIV care and supportive services	
2.4.3 Increase inclusion of paraprofessionals on teams by advancing training, certification, supervision, reimbursement, and team functioning to assist with screening/management of HIV, STIs, viral hepatitis, and mental and substance use disorders and other behavioral health conditions	
3.1.2 Ensure that health care professionals and front-line staff complete education and training on stigma, discrimination, and unrecognized bias toward populations with or who experience risk for HIV, including LGBTQI+ people, immigrants, people who use drugs, and people involved in sex work	1c. Provide enhanced, skill-based trainings to HIV service-delivery staff which improve the ability to consistently communicate cultural respect and the skills required by trauma-informed care.
3.1.3 Support communities in efforts to address misconceptions and reduce HIV-related stigma and other stigmas that negatively affect HIV outcomes	2a. Use multiple communication platforms and outreach strategies to better provide HIV services information to HIV community members and historically-underserved communities impacted in San Diego County, including: What services are available? Where are services located? Who is eligible for services? What is the cost of services to the community member? What is the contact information for scheduling or for more information?
3.1.4 Ensure resources are focused on the communities and populations where the need is greatest, especially Black, Latino, and American Indian/Alaska Native and other people of color, particularly those who are also gay and bisexual men, transgender people, people who use substances, sex workers, and immigrants	
3.1.5 Create funding opportunities that specifically address social and structural drivers of	Recommendation 6: Continue to expand the opportunities to hire, support and utilize peer

National HIV/AIDS Strategy	Getting to Zero Community Engagement
health as they relate to Black, Latino, and American Indian/Alaska Native and other people of color	navigators, peer health educators, peer outreach specialists. Employ also benefits navigators, and housing specialists.
3.3.1 Create and promote public leadership opportunities for people with or who experience risk for HIV	
3.3.2 Work with communities to reframe HIV services and HIV-related messaging so that they do not stigmatize people or behaviors	Recommendation 7: Design, integrate and deploy strategies to address the stigmas faced by HIV community members
3.4.1 Develop whole-person systems of care and wellness that address co-occurring conditions for people with or who experience risk for HIV	Recommendation 8: Increase the number of HIV service sites that have the capacity for whole person-whole health services
3.4.3 Improve screening and linkage to services for people with or who experience risk for HIV who are diagnosed with and/or are receiving services for co-occurring conditions	Recommendation 4: Provide increased mental health and alcohol/substance misuse treatment opportunities for those living with or at higher risk for HIV
3.4.4 Develop and implement effective, evidence-based and evidence-informed interventions that address social and structural determinants of health among people with or who experience risk for HIV including lack of continuous health care coverage, HIV-related stigma and discrimination in public health and health care systems, medical mistrust, inadequate housing and transportation, food insecurity, unemployment, low health literacy, and involvement with the justice system	Coincides with the entirety of the recommendations.
3.4.6 Develop new and scale up effective, evidence-based or evidence-informed interventions that address intersecting factors of HIV, homelessness or housing instability, mental health and violence, substance use, and gender especially among cis- and transgender women and gay and bisexual men	<p>Recommendation 4: Provide increased mental health and alcohol/substance misuse treatment opportunities for those living with or at higher risk for HIV. Additionally, more widely communicate information about these opportunities to HIV community members.</p> <p>Recommendation 5: Provide easier and more rapid access to Basic Support Services: Housing, Food, Transportation, Emergency Financial Assistance including shut-off &amp; eviction prevention. Additionally, more widely</p>

National HIV/AIDS Strategy	Getting to Zero Community Engagement
	<p>communicate information about these opportunities and the processes to obtain them</p> <p>Recommendation 5: Provide easier and more rapid access to Basic Support Services</p>
<p>3.5.1 Promote the expansion of existing programs and initiatives designed to increase the numbers of non-White research and health professionals</p>	<p>Recommendation 6: Continue to expand the opportunities to hire, support and utilize peer navigators, peer health educators, peer outreach specialists</p>
<p>3.5.2 Increase support for the implementation of mentoring programs for individuals from diverse cultural backgrounds to expand the pool of HIV research and health professionals</p>	<p>Recommendation 6: Continue to expand the opportunities to hire, support and utilize peer navigators, peer health educators, peer outreach specialists</p>
<p>3.6.1 Develop and test strategies to promote accurate creation, dissemination, and uptake of information and to counter associated misinformation and disinformation</p>	<p>Recommendation 2: Improve communications and outreach strategies for those living with and at higher risk for HIV</p>
<p>3.6.5 Expand effective communication strategies between providers and consumers to build trust, optimize collaborative decision-making, and promote success of evidence-based prevention and treatment strategies</p>	<p>Recommendation 2: Improve communications and outreach strategies for those living with and at higher risk for HIV</p> <p>Recommendation 9: Design, create and execute improved community engagement and outreach strategies that utilize community organizing and personal relationship building</p>
<p>4.1.1 Integrate HIV awareness and services into outreach and services for issues that intersect with HIV such as intimate partner violence, homelessness or housing instability, STIs, viral hepatitis, and substance use and mental health disorders</p>	<p>Recommendation 8: Increase the number of HIV service sites that have the capacity for whole person-whole health services</p>
<p>4.1.2 Implement a no-wrong-door approach to screening and linkage to services for HIV, STIs, viral hepatitis, and substance use and mental health disorders across programs</p>	<p>Recommendation 4: Provide increased mental health and alcohol/substance misuse treatment opportunities for those living with or at higher risk for HIV</p>
<p>4.5.1 Streamline and harmonize reporting and data systems to reduce burden and improve the timeliness, availability, and usefulness of data</p>	<p>Recommendation 10: Revise and refine the documentation processes that create a barrier to access services for persons living with or at increased risk for HIV</p>