



Cautious Optimism in San Francisco as New Cases of HIV in Latinos Decrease

Outreach workers and health care providers say that work still needs to be done to prevent, and to test, for HIV, especially among new immigrants.

August 23, 2024 By Vanessa G. Sánchez and KFF Health News

For years, Latinos represented the biggest share of new HIV cases in this city, but testing data suggests the tide may be turning.

The number of Latinos newly testing positive for HIV dropped 46% from 2022 to 2023, according to a [preliminary report](#) released in July by the San Francisco Department of Public Health.

The decrease could mark the first time in five years that Latinos haven't accounted for the largest number of new cases, leading to cautious optimism that the millions of dollars the city has spent to remedy the troubling disparity is working. But outreach workers and health care providers say that work still needs to be done to prevent, and to test, for HIV, especially among new immigrants.

"I am very hopeful, but that doesn't mean that we're going to let up in any way on our efforts," said [Stephanie Cohen](#), who is the medical director of the city's HIV and STI prevention division.

Public health experts said the city's latest report could be encouraging, but that more data is needed to know whether San Francisco has addressed inequities in its HIV services. For instance, it's still unclear how many Latinos were tested or if the number of Latinos exposed to the virus had also fallen — key health metrics the public health department declined to provide to KFF Health News. Testing rates are also below pre-pandemic levels, according to the city.

"If there are fewer Latinos being reached by testing efforts despite a need, that points to a serious challenge to addressing HIV," said Lindsey Dawson, the associate director of HIV Policy and director of LGBTQ Health Policy at KFF, a health information nonprofit that includes KFF Health News.

San Francisco, like the [rest of the country](#), suffers major disparities in diagnosis rates for Latinos and people of color. Outreach workers say that recent immigrants are more vulnerable to infectious diseases because they don't know where to get tested or have a hard time navigating the health care system.

In 2022, Latinos represented 44% of new HIV cases in San Francisco, even though they accounted

for only 15% of the population. Latinos' share of new cases fell to 30% last year, while whites accounted for the largest share of new cases at 36%, according to the new report.

Cohen acknowledged a one-year decline is not enough to draw a trend, but she said targeted funding to community-based organizations may have helped lower HIV cases among Latinos. A final report is expected in the fall.

Most cities primarily depend on federal dollars to pay for HIV services, but San Francisco has an ambitious target to be the first U.S. city to eliminate HIV, and roughly half of its \$44 million HIV/AIDS budget last year came from city coffers. By comparison, New Orleans, which has similar HIV rates, kicked in only \$22,000 of its \$13 million overall HIV/AIDS budget, according to that city's health department.

As part of an effort to address HIV disparities among LGBTQ+ communities and people of color, San Francisco last year gave \$2.1 million to three nonprofits — Instituto Familiar de la Raza, Mission Neighborhood Health Center, and San Francisco AIDS Foundation — to bolster outreach, testing, and treatment among Latinos, according to the city's 2023 budget.

At Instituto Familiar de la Raza, which administers the contract, the funding has helped pay for HIV testing, prevention, treatment, outreach events, counseling, and immigration legal services, said Claudia Cabrera-Lara, director of the HIV program at Sí a la Vida. But ongoing funding isn't guaranteed.

"We live with the anxiety of not knowing what is going to happen," she said.

The public health department has commissioned a \$150,000 project with Instituto Familiar de la Raza to determine how Latinos are contracting HIV, who is most at risk, and what health gaps remain. The results are expected in September.

"It could help us shape, pivot, and grow our programs in a way that makes them as effective as possible," Cohen said.

The center of the HIV epidemic in the mid-1980s, San Francisco set a [national model](#) for response to the disease after building a network of HIV services for residents to get free or low-cost HIV testing, as well as treatment, regardless of health insurance or immigration status.

Although city testing data showed that new cases among Latinos declined last year, outreach workers are seeing the opposite. They say they are encountering more Latinos diagnosed with HIV while they struggle to get out information about testing and prevention — such as taking preventive medications like PrEP — especially among the young and gay immigrant communities.

San Francisco's [2022 epidemiological data](#) shows that 95 of the 213 people diagnosed at an advanced stage of the virus were foreign-born. And the diagnosis rate among Latino men was four times as high as the rate for white men, and 1.2 times that of Black men.

“It’s a tragedy,” said Carina Marquez, associate professor of medicine in the Division of HIV, Infectious Diseases, and Global Medicine at Zuckerberg San Francisco General Hospital, the city’s largest provider of HIV care. “We have such great tools to prevent HIV and to treat HIV, but we are seeing this big disparity.”

Because Latinos are the ethnicity least likely to receive care in San Francisco, outreach workers want the city to increase funding to continue to reduce HIV disparities.

The San Francisco AIDS Foundation, for instance, would like more bilingual sexual health outreach workers; it currently has four, to cover areas where Latinos have recently settled, said Jorge Zepeda, its director of Latine Health Services.

At Mission Neighborhood Health Center, which runs Clinica Esperanza, one of the largest providers of HIV care to Latinos and immigrants, the number of patients seeking treatment has jumped from about two a month to around 16 a month.

Among the challenges is getting patients connected to mental health and substance abuse bilingual services crucial to retaining them in HIV care, said Luis Carlos Ruiz Perez, the clinic’s HIV medical case manager. The clinic wants to advertise its testing and treatment services more but lacks the money.

“A lot of people don’t know what resources are available. Period,” said Liz Oates, a health systems navigator from Glide Foundation, who works on HIV prevention and testing. “So where do you start when nobody’s engaging you?”

This article was produced by [KFF Health News](#), which publishes [California Healthline](#), an editorially independent service of the [California Health Care Foundation](#).

[This story](#) was published by KFF Health News on August 21, 2024. It is republished with permission.