

2027-2031 Integrated Plan Development

Section IV: Situational Analysis

IV.a. Situational Analysis

Requirement: Based on the Community Engagement and Planning Process in Section II and the Contributing Data Sets and Assessments detailed in Section III.

Provide a short overview across the HIV prevention and care continuum to include:

- Strengths
- Challenges
- Identified needs

Includes 2022-2026 Plan analysis. Further updates pending.

STRENGTHS

- More than 35 years of service delivery experience by service providers funded through the Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program – the Ryan White Program Part A/Minority AIDS Initiative Recipient (the Recipient); and the Florida Department of Health in Miami-Dade County – the prevention funding grantee (FDOH-MDC).
- Active involvement and dedication of various stakeholders engaged in needs assessment; client satisfaction surveys; prevention, care, and treatment planning; and priority setting and resource allocation activities.
- Recipients and subrecipients are in ongoing daily communication to help ensure quality services are provided to people with HIV.
- An array of available ART medications - oral medications and a long-acting injectables are available.
- The Recipients, FDOH-MDC, and the Partnership maintain comprehensive websites and/or social media accounts which provide resources for people with HIV, service providers and the general public.

CHALLENGES

- Pending funding cuts and program changes to ADAP and ACA premium coverage.
- Not enough messaging about PrEP and nPEP that effectively reaches the intended audiences.
- Not enough “People First” messaging and service delivery.
- Not enough relevant or engaging prevention, care and treatment messaging that looks like the community that we are trying to serve.
- Inability to adequately measure or address stigma.
- Need to provide more education regarding health insurance, navigating the health care system, mitigating feelings of mistrust with the medical system, and how to effectively use insurance benefits.

- Aging workforce – succession planning must be prioritized.
- Treatment fatigue for clients.
- Service delivery and administrative fatigue for service providers, subrecipients, and recipients.
- Maintaining a focus on healthcare amid stigma issues, socio-economic factors, and social determinants of health, especially in underserved populations.
- Legislation disenfranchising vulnerable populations.
- Legislation and funding not keeping pace with changes in client needs and the changing healthcare landscape.
- Funding cuts to HIV research.
- Major cuts to prevention funding impacting service availability, condom distribution, payments for PrEP, lost testing sites, and lost workforce; relevant to HIV and STD prevention.
- Cuts to Ryan White Program funding based on the new HRSA Formula Award calculation – based on most recent client address not the address at time of diagnosis.
- Lack of sex education, lack of ability to provide sexual health materials in schools, and lack of ability for HIV and STI testing in schools.
- Stigma, isolation, and chronic conditions specific to people aging with HIV.
- Cost of insurance, with or without ADAP premium assistance, and increases in sliding scale payments.

IDENTIFIED NEEDS

- Transitional housing, short-term housing, or emergency housing assistance to prevent homelessness.
- Help to pay private insurance (employer-sponsored, ACA, etc.) costs (premiums, copays, deductibles).
- Oral health care (dental care, dentures, oral surgery, implants for edentulous clients, etc.)
- Limited, one-time or short-term assistance with any of the following: medications not covered by AIDS Drug Assistance Program (ADAP), utilities, housing, food, or transportation.
- Food (food bank services, grocery certificates, home-delivered meals, or nutritional supplements).
- Access to resources in multiple languages.
- Address the specific needs of groups that may face barriers to care, including younger individuals and people aging into Medicare, particularly regarding issues such as stigma and access to services.
- Need to leverage the knowledge of subject matter experts across the HIV Care Continuum.
- In home services such as labs and medication delivery, particularly for the aging population and those with limited mobility.
- Funding may not be sufficient to address all the needs identified in this Plan.