Update on HIV among women & related NYC Health initiatives

Oni J. Blackstock, MD, MHS
Assistant Commissioner, Bureau of HIV/AIDS Prevention and Control
New York City Department of Health and Mental Hygiene
Presentation Roadmap

- Epidemiology of HIV among women in NYC

- BHIV programming/initiatives
  - PrEP for women social marketing campaign
  - Playsure Network
  - PrEP/PEP Detailing campaign for women’s health providers
  - Trans women-focused initiatives

#PLAYSURE

LIVING SURE
Presentation Roadmap

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NEW HIV DIAGNOSES BY GENDER – NYC 2012-2016

Female includes transgender women and male includes transgender men.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV/AIDS IN WOMEN IN NYC, 2016

Basic Statistics

- 508 new HIV diagnoses
  - Includes 104 HIV concurrent with AIDS diagnoses (20%)
  - Women comprised 52% of the population of NYC and 22% of new HIV diagnoses
- 336 new AIDS diagnoses
- 425 deaths among women with HIV/AIDS
  - 8.1 deaths per 1,000 women living with HIV/AIDS\(^2\) (mid-year)

\(^1\)In this slide set, female includes transgender women and male includes transgender men. There were 46 new HIV diagnoses among transgender women in 2016.

\(^2\)Rates are age-adjusted to the Census 2010 NYC population. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES BY GENDER & RACE/ETHNICITY – NYC, 2016

Male (N = 1,771)
- Black: 39%
- Latino/Hispanic: 35%
- White: 18%
- Asian/Pacific Islander: 7%
- Native American: 0%
- Multiracial: 0%

Female (N = 508)
- Black: 59%
- Latino/Hispanic: 31%
- White: 6%
- Asian/Pacific Islander: 4%
- Native American: 0%
- Multiracial: 0%

Female includes transgender women and male includes transgender men.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES BY GENDER & TRANSMISSION RISK – NYC, 2016

Female includes transgender women and male includes transgender men.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES IN FEMALES BY RACE/ETHNICITY – NYC, 2012-2016

Native American and multiracial groups not displayed because of small numbers. There were a total N=0 Native Americans and N=1 multiracial females newly diagnosed with HIV in 2016.

Female includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES IN FEMALES BY AGE – NYC, 2012-2016

Female includes transgender women and male includes transgender men.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES IN WOMEN BY RACE/ETHNICITY & AGE – NYC, 2016

Native American and multiracial groups not displayed because of small numbers. There were a total N=0 Native Americans and N=1 multiracial females newly diagnosed with HIV in 2016.

Female includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV diagnosis rate per 100,000 population by UHF among females

- 0.0 - 3.8
- 3.9 - 6.8
- 6.9 - 13.9
- 14.0 - 30.5
- Non-residential Zones

2 Rates calculated using the intercensal 2015 NYC population. Female includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
NEW DIAGNOSES BY GENDER & BOROUGH – NYC, 2016

Female includes transgender women and male includes transgender men.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES AMONG FOREIGN-BORN WOMEN BY REGION OF BIRTH – NYC, 2016

35% of newly diagnosed females were foreign born

Caribbean: 46%
Africa: 26%
South America: 12%
Central America: 7%
Asia: 5%
Europe: 4%

1Excludes Puerto Rico and the US Virgin Islands. Female includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV CARE CONTINUUM AMONG WOMEN – NYC, 2016

- 100% HIV-infected
- 96% HIV-diagnosed
- 88% Retained in care
- 79% Prescribed ART
- 74% Virally suppressed

Female includes transgender women and male includes transgender men.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
AGE-ADJUSTED DEATH RATES BY GENDER – NYC, 2016

Overall death rate: 7.5

1 Death data for 2016 are incomplete. Rates are age-adjusted to the Census 2010 NYC population. Female includes transgender women and male includes transgender men. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
HIV DIAGNOSES AMONG PEOPLE IDENTIFIED AS TRANSGENDER IN NYC, 2016

- Transgender people comprised 2% of all new HIV diagnoses in NYC in 2016

- Approximately 1,100 transgender people known to be living with HIV in NYC at the end of 2016
  - 99% transgender women and 1% transgender men
  - 47% Black and 44% Latino Hispanic

- 46 new HIV diagnoses among transgender individuals in 2016
  - 46 transgender women (100%)
  - Includes 3 diagnoses of HIV concurrent with AIDS\(^1\) (7%)

\(^1\)AIDS diagnosed within 31 days of HIV diagnosis
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017
NEW HIV DIAGNOSES AMONG PEOPLE IDENTIFIED AS TRANSGENDER BY GENDER IDENTITY AND YEAR OF DIAGNOSIS IN NYC, 2012-2016

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017
NEW HIV DIAGNOSES AMONG PEOPLE IDENTIFIED AS TRANSGENDER BY GENDER IDENTITY AND AGE AT DIAGNOSIS IN NYC, 2012-2016

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017
ADDITIONAL CHARACTERISTICS OF TRANSGENDER WOMEN NEWLY DIAGNOSED WITH HIV IN NYC, 2012-2016

1 Characteristics documented in medical record. People may have reported more than one characteristic.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017
VIRAL SUPPRESSION AMONG DIAGNOSED PLWHA BY GENDER IN NYC, 2016

Viral suppression is defined as most recent viral load in 2016 was ≤200 copies/mL.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2017.
PrEP AWARENESS AMONG WOMEN OF COLOR IN NYC, 2016

Among 411 HIV-negative/status-unknown cisgender women in the NYC 2016 Sexual Health Survey,

- 24% had ever heard of PrEP
  - Awareness significantly lower among women with income <$20,000/year
- 13% had indications for PrEP based on national and state guidelines

Gandhi et al. IAPAC, 2017.
PrEP AWARENESS AMONG WOMEN OF COLOR IN NYC, 2016

- Among those who had heard of PrEP (n=97)
  - 13% had ever discussed it with a healthcare provider
  - Another 76% had not discussed with provider, but would be comfortable doing so
  - 39% did not believe or were not sure whether PrEP was effective
  - 19% were interested in PrEP
- Only 2 women (<1%) reported having used PrEP

Gandhi et al. IAPAC, 2017.
PrEP PRESCRIPTION TRENDS USING PCIP’S “HUB”
(PrEP Rx/100,000 PATIENTS AT 602 AMBULATORY CARE PRACTICES 2014-2016)

Facilitate Access to PrEP & PEP

• Promoting PrEP to potential users
  ❖ Media and Social Marketing
  ❖ Provider Directory

• Promoting PrEP to potential providers
  ❖ Public Health Detailing Program
  ❖ Technical assistance with PrEP Programming
  ❖ Implementation Workshop

• Supporting PrEP in diverse service models
  ❖ Municipal Sexual Health Clinics
  ❖ Collaborative of clinical and non-clinical providers
  ❖ Financing PrEP: NYS PrEP Assistance Program, Gilead Co-Pay Programs, increasing insurance coverage
Presentation Roadmap

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Formative Research for Social Marketing Campaign

- **Community Consultation**
  - Occurred on July 2017
  - 14 cisgender women, 4 transgender women
  - Two groups of 9
  - Age Range: 20-50+
  - Affiliation: Members of the Women’s Advisory Board and the Community Engagement Group well as New York Knows partners
## Findings/Contributions

- Marketing campaign should raise awareness of PrEP among women.
  - Most do not know what it is and if they do view it as exclusively for MSM.
- Campaign models should be diverse and **look like** the women we are trying to reach.
  - Diversity means **a variety of race/ethnicities**, body shapes, and range of ages.
- **Sex-positivity** is highly desirable.
- For transwomen in particular:
  - it is **meaningful and relevant** to be portrayed alongside cisgender women.
  - **interactions of PrEP with hormone therapy** is the greatest concern affecting uptake and adherence among transwomen.
Campaign Images

GUTSY GENUINE & LIVING SURE

ENJOY SEX WITH ONE LESS WORRY. PrEP CAN KEEP YOU HIV NEGATIVE.

If you are HIV negative, PrEP is a safe, daily pill that protects you from HIV. PrEP will not interfere with hormonal birth control. Conditions offer additional protection against other sexually transmitted infections and unintended pregnancy.

PLAY SURE: Talk to your doctor or visit nyc.gov/health and search for “PrEP”.

CANDID CONFIDENT & LIVING SURE

ENJOY SEX WITH ONE LESS WORRY. PrEP CAN KEEP YOU HIV NEGATIVE.

If you are HIV negative, PrEP is a safe, daily pill that protects you from HIV. PrEP will not interfere with hormonal birth control. Conditions offer additional protection against other sexually transmitted infections and unintended pregnancy.

PLAY SURE: Talk to your doctor or visit nyc.gov/health and search for “PrEP”.

LIVING SURE
FOCUSED FEARLESS & LIVING SURE

ENJOY SEX WITH ONE LESS WORRY.
PREP CAN KEEP YOU HIV NEGATIVE.

If you are HIV negative, PREP is a daily pill that protects you from HIV. PREP with antiretroviral therapy (ART) can reduce your risk of HIV transmission. It is important to have access to additional protection against other sexually transmitted infections.

PLAY SURE: Talk to your doctor or visit nyc.gov/health and search for “PREP”.

Proud Passionate & LIVING SURE

ENJOY SEX WITH ONE LESS WORRY.
PREP CAN KEEP YOU HIV NEGATIVE.

If you are HIV negative, PREP is a daily pill that protects you from HIV. PREP with antiretroviral therapy (ART) can reduce your risk of HIV transmission. It is important to have access to additional protection against other sexually transmitted infections.

PLAY SURE: Talk to your doctor or visit nyc.gov/health and search for “PREP”.

LIVING SURE
ENJOY SEX WITH ONE LESS WORRY.
PrEP CAN KEEP YOU HIV NEGATIVE.

If you are HIV negative, PrEP is a safe, daily pill that protects you from HIV. PrEP will not interfere with your hormone therapy. Condoms offer additional protection against other sexually transmitted infections.

PLAYSURE: Talk to your doctor or visit nyc.gov/health and search for “PrEP.”

UNUNITED
UNSTOPPABLE &
LIVING SURE

ENJOY SEX WITH ONE LESS WORRY.
PrEP CAN KEEP YOU HIV NEGATIVE.

If you are HIV negative, PrEP is a safe, daily pill that protects you from HIV. PrEP will not interfere with your hormone birth control or hormone therapy. Condoms offer additional protection against other sexually transmitted infections and unintended pregnancy.

PLAYSURE: Talk to your doctor or visit nyc.gov/health and search for “PrEP.”
## Placements

- Subway cars
- Subway stations
- Bus kings
- Bus shelters
- Non-traditional venues
- Social media
Sightings: E train
Sightings: 23rd Street, 1 train

LIVING SURE
Sightings: Rogers & Church Ave. in Flatbush, SBS 44
Sightings: Laundromat, Bronx
nychalthy: Today we announced Living Sure, the latest in our series of sex-positive campaigns related to sexual health. We want women in NYC to know that PrEP is an option for them. PrEP is a safe, daily pill that greatly reduces the risk of HIV infection. Speak with your health care provider to find out if PrEP is right for you.

@PlaySure #HIV #safesex #safesex #sexualhealth #healthyliving #endAIDS #endAIDS2020 #pubhealth #healthequity #women #transwomen #transhealth #womenhealth #feminism #feminist #healthcare #endtheepidemic

LIVING SURE
Enjoy sex with one less worry! PrEP is a safe, daily pill that protects you from HIV and will not interfere with birth control or hormone therapy.

Take PrEP to prevent HIV

Pre-Exposure Prophylaxis is a daily pill that greatly reduces your risk of HIV infection.

www1.nyc.gov
Women in NYC: Enjoy sex with one less worry

Pre-exposure prophylaxis (PrEP) is a safe, daily pill that prevents HIV. PrEP is a great option for women – not only is it an effective prevention option for all women, including cis and transwomen, but it also allows women more control of their sexual health. PrEP will not interfere with hormonal birth control or hormone therapy.

In 2016, only 21 percent of sexually active Black and/or Latina women in New York City were aware of PrEP, compared to 85 percent of gay and bisexual men and other men who have sex with men.

Over 20 percent of new HIV diagnoses in New York City were among women in 2016. Too few women know about PrEP, and far fewer are
What’s next for Living Sure: Disseminating Social Marketing Materials

❖ Developing palm card/post card

❖ Printing posters for distribution

❖ Developing an online repository of downloadable Living Sure images
Presentation Roadmap

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The PlaySure Network

NYC-Supported Testing Site

PlaySure Network

NYC-Supported CBO

Sexual Health Clinic PrEP Program
People started on PrEP in SH clinics will be referred into the PlaySure Network or to other NYC PrEP providers.

NYC-Supported PEP/PrEP Clinic

LIVING SURE
The PlaySure Network

PlaySure Network Sites

- PEP for Adolescents (ADL)
- HIV Prevention and Education for Adolescents (HPA)
- Evidence-Based Interventions for Biomedical Prevention: Clinical Settings (EBP)
- Sexual and Behavioral Health Services for Priority Populations (SBH)
- NYC DOHMH BSTDC Sexual Health Clinics

- Outreach and Status-Aware Prevention and Care Navigation in Brooklyn: Community-Based Organizations (BCO)
- HIV Testing and Status-Aware Prevention and Care Navigation in Brooklyn: Community-Based Organizations (BCP)
- Leveraging HIV Testing for Linkage to Prevention: HIV Testing Programs (LTP)
- HIV Prevention Navigation at NYC DOHMH BSTDC Clinics for MSM of Color and Transgender Persons (NMT)
- Outreach and Education for Combination Prevention: Community-Based Organizations (OCF)

- PEP Centers of Excellence - On Call: Clinical Services (POC)
- PEP Centers of Excellence (POC)

HIV diagnoses per 100,000 pop.

- 0.0 - 13.7
- 13.8 - 24.3
- 24.4 - 34.5
- 34.6 - 50.5
- 39.6 - 50.5

Lower Manhattan
Harlem/South Bronx

LIVING SURE
Of ~5400 new enrollments (Apr-Dec 2017), over 600 (12%) were among cis-women who have sex with men (WSM).

Among enrolled cis-WSM:

- 38% non-Latina Black and 33% Latina
- 27% were < 25 years old, 38% 25-34, 20% 35-44, and 15% 45+

58% and 42% of enrollments cis-WSM were at clinical and non-clinical sites, respectively.

Among cis-WSM enrolled at clinical sites, 55 (34%) were prescribed PrEP

Among cis-WSM enrolled at non-clinical sites, 40 (12%) were linked to PrEP
Strategies for engaging women with PrEP

- Non-clinical sites
  - Utilizing women staff members to help make personal connections with clients
  - Incorporating PrEP into all programming
  - Using the opportunity when women come for wraparound services aside from HIV to educate/share resources/offer HIV services
  - Schedule PrEP clinical appointment with the client present
  - Sharing the epidemiology about newly diagnosed women
Strategies for engaging women with PrEP

- **Clinical Sites**
  - Utilize walk-in, routine STI screening programs as an opportunity to engage women in conversations about pleasurable sex and PrEP
  - Allow for several conversations to change women’s perceptions and attitudes towards PrEP
  - Utilize women staff members to make personal connections with patients and leverage shared experiences
  - Leveraging strong relationships with other clinical providers
    - HIV primary care clinics
    - Family Planning and gynecology departments
PrEP and Transgender Women in the PlaySure Network

- Of the approximately 5400 enrollments from Apr-Dec 2017, over 150 (2.9%) were transgender women
  - 53% were at clinical sites and 47% were at non-clinical sites
  - 68% received PrEP/PEP education (combines clinical and non-clinical sites)
  - Among clinical site enrollments, 29% were prescribed PrEP
  - Among non-clinical site enrollments, 21% were linked to a PrEP clinical provider
The PlaySure Network

NYC-Supported Testing Site

NYC-Supported CBO

PlaySure Network

Sexual Health Clinic PrEP Program
People started on PrEP in SH clinics will be referred into the PlaySure Network or to other NYC PrEP providers.

NYC-Supported PEP/PrEP Clinic

LIVING SURE
Why the STD Clinics Matter for HIV

HIV POSITIVE

10% of new HIV in NYC diagnosed there

20% of NYC Acute HIV diagnosed there

Safety net for some PLWHA not connected to care

Existing models of immediate ARV starts for newly diagnosed ideal for this setting

Data support treatment is prevention

STD clinics with proven track record for connection to care
Expanded Services and Hours Have Made Sexual Health Clinics Destination Clinics

- Expand hours and triage to improve access
  - M-F schedule for all clinics; Saturdays, select clinics
  - Triage Nurses at ALL clinics
- Restore screening services for asymptomatic clients
- Modernize STD diagnostics
  - HSV testing, Hepatitis C, Trichomonas testing
- Enhance HPV-related services
  - Anal/cervical screening (PAPs)
  - Colposcopy
  - High Resolution Anoscopy
  - HPV vaccines
- Quick Start contraceptives for women
State of the Art HIV Interventions in Sexual Health Clinics

BIOMEDICAL EVALUATION AND INTERVENTION:
INSTANT STARTS OF ARV TREATMENT AND PREVENTION

SOCIAL WORK ASSESSMENT FOR SOCIAL DETERMINANTS OF RISK OR DISEASE PROGRESSION + INSURANCE CONNECTION

NAVIGATION TO LONGITUDINAL CARE FOR BOTH HIV NEGATIVE AND POSITIVE CLIENTS

LIVING SURE
NYC Sexual Health Centers are HIV Hubs!!

PrEP Navigation
Launched 10/31/16
ALL CLINICS
Over 6,700 Encounters

PEP 28
Started 10/31/16
ALL CLINICS
1,571 PEP Starts
60% Black/Latinx

“JumpstART”
Launched 11/23/16
STARTED IN ONE CLINIC
ALL CLINICS NOW ON BOARD
272 JumpstARTs
72% Black/Latinx

PrEP Initiation
Started 12/22/16
STARTED IN ONE CLINIC
NOW AT 7th CLINIC
1,213 PrEP Starts
57% Black/Latinx

#PLAYSURE
NEW YORK CITY’S
HIV STATUS NEUTRAL
PREVENTION & TREATMENT CYCLE

All New Yorkers

At risk of HIV exposure

Aware of PrEP

Risk assessed by provider

Discussed PrEP with prescriber

On PrEP

People at risk of HIV exposure taking daily PrEP and people with HIV with sustained viral load suppression do not acquire or transmit HIV.

HIV Test

Use condoms to prevent STDs and further reduce HIV risk.

Diagnosed with HIV

Retained in HIV care

On ART

Viral load suppression achieved

On ART with sustained VLS

Negligible risk of acquiring HIV

Negligible risk of transmitting HIV

Quality Care

Treatment Engagement

Prevention Engagement

HIV/STI Testing

 NYC Health
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Provider Education: Dear Colleague Letter

• In addition to other HIV risk factors (CDC, NYS)
  – E.g., IPV, HIV+ partner with detectable viral load, exchange sex for money

• Offer PrEP to women with
  – Gonorrhea diagnosis
  – Early syphilis

• Understand local epidemiology:
  • Black and Latina women in NYC are disproportionately affected by HIV
Provider Education: Public Health Detailing

- Effective model for “selling” or promoting public health interventions through the targeted delivery of short, standardized, evidence-based key messages.

- Public health representatives conduct visits to clinical practices and engage in one-on-one or small-group interactions with prescribing providers and office staff.

- Based on a successful history of public health detailing at NYC DOHMH, BHIV launched a detailing campaign focused on increasing capacity to provide PrEP and PEP.
Key Messages

- Take a thorough sexual history
- Screen and treat STIs
- Talk about PrEP and PEP with patients
- Prescribe PrEP and PEP according to clinical guidelines, or refer patients to sites that provide PrEP and PEP
During four 10-12 week campaigns (2014-2017), representatives have:
• Visited approximately 1,300 facilities
• Interacted with over 5,000 clinical staff
• Detailed almost 2,500 prescribing providers
Findings from Formative Research with Women’s Health Providers

• Most of the providers did not routinely ask about partner HIV status as part of sexual history-taking with their patients.

• A minority of providers were familiar with PrEP and PEP and comfortable offering it to patients.

• Providers wanted scientific evidence and resources to better understand side effects and safety concerns, especially as they related to conception, pregnancy, and breastfeeding.

• There were frequent concerns about payment/insurance coverage, how to prescribe and follow patients on PrEP.
Detailing on PrEP for Women – what’s next

• Updated and expanded Action Kit content will:
  • Better meet provider needs around screening for and providing PrEP to women (including safety, IPV screening, and partner/contextual factors)
  • Help women self-screen and make decisions around PrEP and PEP
  • Include more images of women across the materials!
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Promoting the Well-Being of Trans Women: Education Materials
LGBTQ-knowledgeable provider directory

- Gender Affirming Care
- Hormone Therapy
- Puberty Blockers
- Surgical Referral Letters
- Primary Care
- Sexual Health Care
- HIV-related Services
  - Testing
  - PEP
  - PrEP
  - Treatment
Support for Transgender-Led Organizations
From Foundation to Frame

Funding model focused on building organizational capacity in transgender-led organizations

- Four (4) Transgender-led organizations funded for organizational development
- One (1) Organization to provide capacity building assistance and support for organizational development

[Logos for Destination Tomorrow, NYTAG, and PJP]
Support for Transgender-Led Organizations Looking Forward

Increased Organizational Capacity

- Expansion of service delivery to promote the well-being of transgender persons
- Organizational Accomplishments
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<table>
<thead>
<tr>
<th>Breakout session time</th>
<th>Topic</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:45pm</td>
<td><strong>Project SUCCEED: HIV Undetectable, Hep C Cured!</strong></td>
<td>Kizzi Belfone, MPH, MaNtsetse Kaama, MPH, Natalie Octave, MPH, CHES</td>
</tr>
<tr>
<td>3:00 pm</td>
<td><strong>Sexual Risk Behaviors and Partnership Characteristics Among Women who Exchange Sex in NYC</strong></td>
<td>Sarah Braunstein, PhD, MPH</td>
</tr>
</tbody>
</table>
Thank you!

oblackstock@health.nyc.gov
Feel free to email me at:
oblackstock@health.nyc.gov