Breadth of Partners Engaged in Ending the HIV Epidemic – CDC Perspective

2nd National Meeting for Research and Community Collaboration towards “Ending the HIV Epidemic in the U.S.”

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Francisco Ruiz, MS
Paul J. Weidle, Pharm D, MPH, CAPT, USPHS
Division of HIV Prevention, NCHHSTP, CDC
Presentation Overview

• CDC’s Division of HIV Prevention (DHP) Priority Areas
• Community Engagement Efforts
• Partnering with Community – EHE Planning & Implementation
• DHP *Ending the HIV Epidemic in the U.S. (EHE)* Updates
CDC’S DIVISION OF HIV PREVENTION (DHP) 
PRIORITY AREAS
Our Priorities for 2022

- Prioritizing Health Equity
- Expanding HIV Testing Efforts
- Strengthening Syndemic Collaborations
- Status Neutral Approach
Prioritizing Health Equity

A transformational long-term strategy to help us achieve equity within our workplace and eliminate health disparities by addressing racism and other systems of oppression.

The Equity Initiative builds on decades of successful work—by staff, our partners, and advocates—giving us a strong foundation of proven strategies and bold ideas to advance equity and reduce health disparities.
Expanding HIV Testing Efforts

- CDC published an [MMWR](http://dx.doi.org/10.15585/mmwr.mm7125a2) in 2022, quantifying that during 2020, new HIV diagnoses reported to CDC decreased by 17% compared with 2019 and followed a substantial decline in HIV testing during the same period.
Strengthening Syndemic Collaborations

- Put people first
- Focus on equity
- Put your money where your epidemic is
- Leverage policy as a public health tool
- Prioritize Innovation
Employing Models of Status Neutral Care
Listening Sessions

Engagements focus on how to shape the Division’s strategic direction related to:

- Health equity
- Community engagement
- Syndemics
- Status neutral framework
- Program innovation
- Lessons learned from COVID-19

Sessions held with:
Funded health departments,
Funded and Unfunded CBOs, and
Partner Organizations

Ending the HIV Epidemic
The purpose of these ongoing community engagement sessions to:

- Ensure community partners are meaningfully engaged in the planning and implementation of EHE
- Build trust, support, and continued dialogue for the initiative with community partners
- Provide additional opportunity for CDC to provide technical assistance to partners
- Allow CDC to report directly to our partners on EHE activities
- Identify barriers or unmet needs that exist within communities as well as identify potential solutions and address gaps
Regional Community Engagement Meetings

- Share updates on what we are working on within the respective topic and share next steps
- Participants represent various perspectives from HHS regions including, but not limited to:
  - Public health leaders
  - Health care providers
  - People with HIV
  - Community health centers
  - Community-based organizations
  - Community advocates

These sessions will focus on the barriers and facilitators to achieving the goals of the EHE initiative in a smaller setting to allow for more comprehensive dialogue.
PARTNERING WITH COMMUNITY – EHE PLANNING & IMPLEMENTATION
Community Partners (EHE Planning)

PS19-1906: Strategic Partnerships and Planning to Support Ending the HIV Epidemic in the United States

- Organizations serving persons with HIV; providing training and TA; serving persons with substance use disorder and mental illness; incarcerated persons and parolees; serving high risk populations (gay/bisexual men, and others); at risk of acquiring HIV and, community advocates.

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<tr>
<th>Organizations</th>
<th>Populations</th>
<th>Providers</th>
<th>Institutions</th>
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<tbody>
<tr>
<td>Faith-Based Organizations &amp; Churches</td>
<td>Persons Experiencing Homelessness</td>
<td>Pharmacists</td>
<td>Historically Black Colleges &amp; Universities</td>
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<td>Professional Medical Associations</td>
<td>Persons with HIV</td>
<td>Social Workers</td>
<td>Correctional Facilities</td>
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<td>Health Insurance Organizations</td>
<td>Transgender Persons</td>
<td>Substance Abuse Providers</td>
<td>Hospital Systems</td>
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<td>Youth Based Advocacy Organizations</td>
<td>Sex Workers</td>
<td>Educators from School Sex Education Programs</td>
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<td>Black Professional &amp; Social Organizations</td>
<td>Formally Incarcerated Persons</td>
<td>Women’s Healthcare Providers</td>
<td>Public Housing Authorities</td>
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Community Partners (EHE Implementation)

PS20-2010: Integrated HIV Programs for Health Departments to Support Ending the HIV Epidemic in the United States

Community Engagement

- Collaboration between stakeholders and communities
- Key factor in the recipients’ ability to successfully implement their EHE programs
- End result should be a collective vision that assists the jurisdiction in achieving the goals of the EHE Initiative.

Must allocate at least 25% of the total funds to support planning and implementation of EHE activities by community organizations.

- Nonprofit public or private organizations, American Indian/Alaska native tribally designated organizations, community-based organizations, faith-based organizations, hospitals, health centers.
Community Partners (EHE Implementation)

PS22-2203: Comprehensive High-Impact HIV Prevention Programs for Young Men of Color Who have Sex with Men and Young Transgender Persons of Color

Implementing high-impact HIV prevention programs in CBOs to address health disparities among young MSM of color, young transgender persons of color, and their partners.

- Increase HIV testing
- Increase linkage/re-engagement in HIV medical care for PWH
- Increase linkage to PrEP services for people at increased risk for acquiring HIV
- Increase Partner Services referrals
- Provide/Refer clients to prevention and essential support services regardless of HIV status
CDC ENDING THE HIV EPIDEMIC IN THE U.S. (EHE) UPDATES
Investing in key strategies to advance EHE goals and overall health equity.
Self-Testing

CDC research shows that HIV self-testing is an effective, convenient, and accurate way to diagnose HIV infection.

In FY22, CDC is increasing HIV self-testing efforts:

- Significantly increase the number of free HIV self-test kits available online to 175,000 per year for 5 years.
- Build capacity in 53 community-based organizations to implement HIV self-testing programs through the CDC Foundation

- In 2021, CDC distributed 100,000 free HIV self-test kits to the populations most disproportionately impacted by HIV.
- 26% of participants reported having never tested for HIV and 33% reported it being more than a year since their last HIV test.

(PS22-2210)
STD Clinic Investments

CDC investments support status neutral services in STD clinics - which serve people from racial, ethnic, sexual and gender minority groups.

- Sexually active individuals often seek critical sexual health services at STD clinics.
- In FY22, CDC expanded to 26 STD recipients increasing the reach of:
  - HIV testing,
  - Uptake of PrEP/PEP, and
  - Same-day initiation of HIV treatment

*Increasing CDC’s HIV investments in STD clinics strengthens syndemic partnerships.*
Pharmacy Data to Care is a near real-time method to identify persons with HIV who are at risk of falling out of care.

CDC is leveraging pharmacy data to improve retention in care, treatment adherence, viral suppression, and HIV prevention. Innovative ongoing pharmacy projects will continue in FY22.

Ensuring Continuity of Prevention & Treatment:
Using real-time pharmacy claims data from insurance or Medicaid to identify persons who fail to pick up antiretroviral or PrEP medications.

Reengaging Patients in Care:
Tailoring interventions to address adherence barriers and reengage patients in care.
In FY22, CDC continues significant investments at the federal and jurisdiction level to increase PrEP access, uptake and persistence.

**Updated PrEP Clinical Practice Guidelines:**
CDC recommends providers inform all sexually active adults and adolescents about PrEP; and for providers to offer PrEP to anyone who requests it.

**PrEP Ancillary Services:**
CDC revised flagship Health Department program guidance to allow for funding flexibility for PrEP ancillary services after hearing from grantees and partners.
Cluster detection is not just describing transmission, it is an opportunity to identify gaps in services and curate tailored interventions and specialized care where general population interventions have failed.

CDC’s Community Engagement Approach

- Essential building block of CDR
- Proactively engaging with our community to discuss benefits of CDR and work together to minimize risk:
  - Medical associations
  - Community organizations
  - State and local health departments
  - HIV advocates
- Jurisdiction level requirements for local community engagement

These community spotlights offer a glimpse at cluster and outbreak detection and response efforts across the nation, highlighting a range of cluster detection tools, cultural contexts, and community benefits.

Thank you.