"TRENDS IN HIV PREVENTION AND CARE"

Jim Sacco, M.S.W., L.C.S.W. June 4, 2020



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Submitting Questions and Comments

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Webinar Objectives

Grantees will be able to:

- Discuss Federal initiatives in HIV prevention and care;
- Describe current HIV prevention tools;
- Name evidence-informed practices in addressing the HIV care continuum; and
- Discuss strategies to establish and maintain relationships with state and local partners/collaborators



Federal Initiatives

National HIV/AIDS Strategy

Addressing the HIV Care Continuum

Ending the HIV Epidemic



National HIV/AIDS Strategy

- Reduce new HIV infections
- Increase access and improve health outcomes for PLWHA
- Reduce HIV-related disparities and health inequalities
- Archive a more coordinated national response

www.hiv.gov



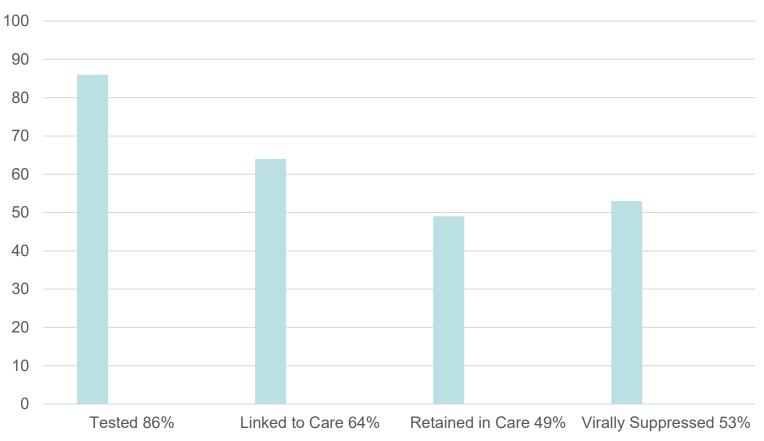
AIDS Strategy Guide: Right Interventions in the Right Places

- Widespread HIV testing and linkage to care enables people living with HIV to access treatment early
- Full access to Pre-Exposure Prophylaxis (PrEP) services for those whom it is appropriate and desired, with support for medication adherence.
- Broad support for people living with HIV to remain engaged in comprehensive care, including support for treatment adherence.
- Universal viral suppression among people living with HIV.
- Major metropolitan areas and southern United States highest concentration and rates of HIV.



HIV Care Continuum-2017







www.hab.hrsa.gov

'Global' Look at Services

Health Department Services

- All state/local HD's—except ND—receive CDC HIV and STD prevention funds; most focus on testing, counseling, partner services
- Most health departments administer HIV care/core services through Ryan White program
- HD SAMHSA funding [block grant 5% for HIV/early intervention services in higher prevalence jurisdictions]

AIDS Service Organizations

 Prevention including SSP, HIV Care, Support Services including Case Management, Behavioral Health, Housing, 340 (b) Pharmacy programs



'Global' Look at Services: Continuation

Ryan White Care Act providers

- Core medical services (provided or contract)
- Medical Case Managers as gatekeepers
- Payer of Last Resort

FQHCs/CHCs

- Care/Core Medical Services
- HIV testing (recent awards)
- PrEP (pending announcement)

HUD/HOPWA providers

- Often HIV CBOs
- Other homeless serving agencies



Ending the HIV Epidemic

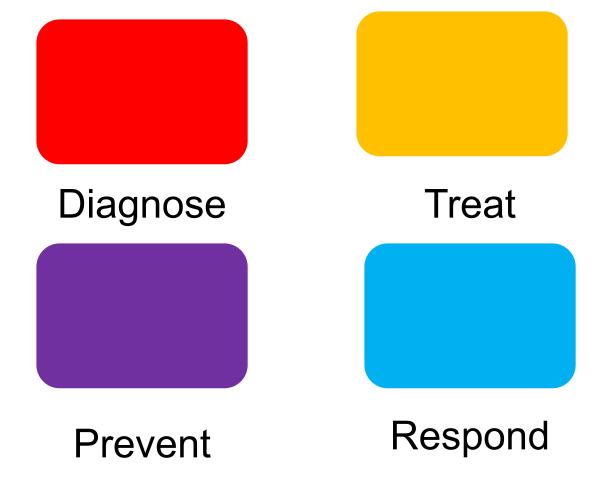
- February 2019, President Trump's State of the Union address
- EHE is the operational plan develop by all HHS agencies

GOAL= 75% reduction in new cases by 2025 90% reduction by 2030

www.hiv.gov

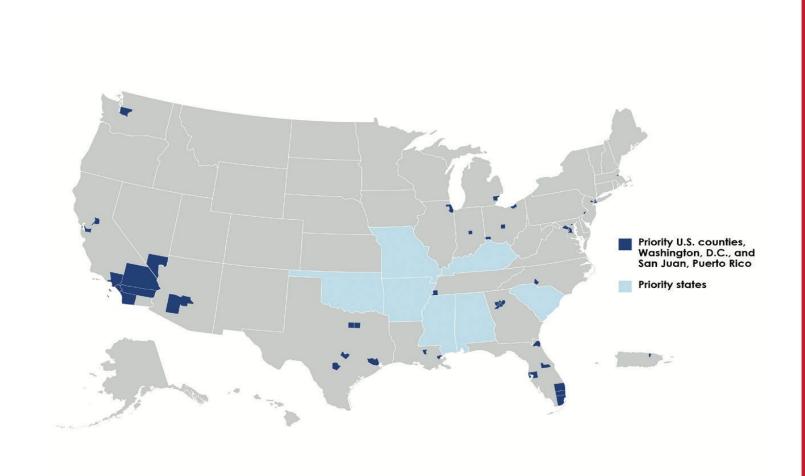


Ending the HIV Epidemic





Ending the HIV Epidemic- 48 Counties/7 Rural States





Highlighted Tools

- Antiretroviral therapy
- Effective HIV care and prevention/ models of integration
- Pre-exposure prophylaxis (PrEP)
- New laboratory and epidemiological techniques

www.cdc.gov



EHE Goal #1: DIAGNOSE

- HIV Testing (including couples testing)
- Social Network Strategy
- Personalized Cognitive Counseling (PCC)
- Partner Services



Routine 'Opt-Out' Testing

- Consistent with CDC guidance
- Routine annual testing of all persons 13-64 receiving medical care
- Offered with 'opt-out' language (e.g. 'we plan to test for HIV with this sample unless your object...')
- No specific consent, no counseling prerequisite
- Screening once unless other risk factors are present

www.cdc.gov/hiv/guideline/testing



Repeat Testing Recommendations

- Are you a man who has had sex with another man?
- Have you:
 - had sex—anal or vaginal—with an HIV-positive partner?
 - had more than one sex partner since your last HIV test?
 - injected drugs and shared needles or works (for example, water or cotton) with others?
 - exchanged sex for drugs or money?
 - been diagnosed with or sought treatment for hepatitis,
 TB or an STD?
 - had sex with someone who could answer yes to any of the above questions or someone whose sexual history you don't know?



Moving to 4th Generation Testing

- June 2014 CDC Recommendation
- 4th Gen testing finds antibodies <u>and</u> P-24 antigen
- Recent infections [about 3 weeks] can be detected
- Identifying Acute Infection is a key PH strategy and facilitates HIV Cluster Response



EHE Goal #2:TREAT

- ARVs/core medical services
- Intensive CM services
- Cognitive/Behavioral interventions (linkage, retention, medication adherence)
- Patient navigation/Peer support



Patient Navigation

- ...timely, appropriate, patient-centered HIV medical and social services
 - Linking persons to health care systems
 - Assisting with health insurance and transportation
 - Identifying and reducing barriers to care
 - Tailored health education
- Delivered by peers or paraprofessionals



Medication Adherence Tools

- CDC highlights 'Every Dose/Every Day'
- Toolkit includes four adherence interventions
 - HEART
 - SMART
 - Peer Support
 - Partnership for Health (P4H)
- Phone app/Training tools through

www.effectiveinterventions.org



HRSA HIV Innovative Practices

- Buprenorphine integration in HIV care
- Correctional health linkage
- Integrating Hepatitis C treatment
- Integrating HIV care in MAT programs

https://targethiv.org/ihip



QUESTIONS??

COMMENT??



EHE Goal #3: PREVENT

- Pre-Exposure Prophylaxis (PrEP)
- Condom access
- Cognitive/Behavioral interventions



PrEP Basics

- Once-daily Descovy or Truvada (Oral medications)
- Nearly 99% efficacy at preventing infections (adherence is key)
- Manufacturer offers discounted access to medication/need support for labs
- Enroll consumers in health plans
- Other compounds in development



PrEP Guidelines

- Adult man/woman without acute or established HIV infection
- Any sex partners in past 6 months
- Not in a monogamous partnership with a recently tested, HIV-negative partner
- And at least one of the following:
 - Any sex without condoms (receptive or insertive) in past 6 moths
 - Any STI diagnosed or reported in past 6 months
 - Is in an ongoing sexual relationship with an HIVpositive partner

U.S. PHTF Clinical Guidelines 2015



Implementing Behavioral Interventions

- Behavioral Interventions
 - Target consumers (age, gender, risk behavior)
 - Integrate interventions/adaptions
 - Assess capacity/fit
 - Focused training/intervention fidelity

www.effectiveinterventions.org
http://www.cdc.gov/hiv/dhap/prb/prs/index.html



SUD Provider Access to HIV Prevention Support

- SAMHSA block grants support Early Intervention Services (EIS) in select jurisdictions
 - HIV/Hepatitis testing
 - Linkage and referral to care of PrEP
 - Hepatitis vaccination (e.g., Twinrix) or HepC treatment
- CDC funds 65 states/jurisdictions to do HIV prevention; most have SUD collaboration
 - High Impact Prevention (HIP)
 - Selected Testing (e.g. Social Network Strategy)
 - Test and Treat Strategy
 - De-Emphasis of Behavioral Interventions
 - Increased Emphasis on Pre-exposure Prophylaxis (PrEP)



Social Determinants of Health and HIV Prevention

- Disproportionate impact of HIV on People of Color, transgender persons, youth, persons who inject drugs
- Poorer access to care, poorer health outcomes
- Strategies include:
 - Structural approaches (housing, education, employment)
 - Addressing health system issues including traumainformed care and integrated behavioral health approaches
 - Stigma reduction and addressing community norms





EHE Goal #4: RESPOND

- Data to Care
- HIV Cluster Response
- Social Marketing
- Syringe Services Programs (SSPs)



Data to Care (D2C) Strategy

- ...a new public health strategy that aims to use HIV surveillance data to identify HIVdiagnosed individuals not in care, link them to care, and support the HIV Care Continuum
 - Health Department model
 - Health Care Provider model
- SUD providers as potential partners
 - Understand HIV care/surveillance resources
 - Conduct routine screening and adherence coaching
 - Knowledge of jurisdiction's policies/preferences



Focus on Priority Populations

- NHAS Indicator: Increase the percentage of youth and persons who inject drugs with diagnosed HIV infection who are virally suppressed to at least **80 percent**.
- **NHAS Indicator:** Reduce the percentage of persons in HIV medical care who are homeless to no more than **5 percent**.



Coordinating with Your Local Response: Assessment

- What are the key AIDS Community-based Organizations (CBOs) in your community? What services do they provide?
- What is the role of the local/county health department in HIV testing? HIV prevention?
- Current FQHC/CHCs engaged?
- Where can PLWHA receive low-cost services in your community? What services are provided?
- How can clients obtain PrEP in your community? Where are SSPs located?
- Where can you direct clients to enroll in health insurance policies?



Your Successes/Your Next Steps

Successes	Next Steps
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QUESTIONS??

COMMENT??



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Thanks...

for making time today and for all you do to save lives!

-Jim

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