Ending the HIV Epidemic: CDC’s Role

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Diagnose all people with HIV as early as possible.

- Increase capacity to test for HIV according to CDC guidelines
- Diagnose all Americans with HIV in the high-burden areas

**Key approaches**
- Using the latest systems and technology to make testing simple, accessible, and truly routine in health care facilities
- Increasing more frequent testing in people at substantial risk
- Innovating technologies and programs, such as self-testing
Diagnose all people with HIV as early as possible.

1 in 7

Americans with HIV are unaware they have it.

1 in 6

Hispanics/Latinos with HIV are unaware they have it.

People who do not know they have HIV cannot take advantage of HIV care and treatment and may unknowingly pass HIV to others.
Treat people with HIV rapidly and effectively to reach sustained viral suppression.

- **Linkage**: Ensure immediate linkage to HIV clinical care and support services
- **Retention**: Expand innovative activities to retain people in care and encourage adherence
- **Re-Engagement**: Strengthen efforts to re-engage people who have fallen out of care
Promote rapid comprehensive care and start treatment at time of diagnosis

Linkage to HIV Medical Care within 1 Month after HIV Diagnosis during 2017, among Persons Aged > 13 Years, by Race/Ethnicity – 41 States and the District of Columbia

Note. Receipt of medical care was defined as ≥1 test (CD4 or VL) in 2016. Retained in continuous medical care was defined as ≥2 tests (CD4 or VL) ≥3 months apart in 2016. Viral suppression was defined as <200 copies/mL on the most recent VL test in 2016. Hispanics/Latinos can be of any race.
Promote rapid comprehensive care and start treatment at time of diagnosis

**Persons Living with Diagnosed HIV**

**HIV Care Continuum Outcomes, by Race/Ethnicity, 2016—United States**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Hispanic/Latino</th>
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</thead>
<tbody>
<tr>
<td><strong>Receipt of care</strong></td>
<td>74</td>
<td>72</td>
</tr>
<tr>
<td><strong>Retained in care</strong></td>
<td>58</td>
<td>59</td>
</tr>
<tr>
<td><strong>Viral suppression</strong></td>
<td>62</td>
<td>61</td>
</tr>
</tbody>
</table>

Note. Receipt of medical care was defined as ≥1 test (CD4 or VL) in 2016. Retained in continuous medical care was defined as ≥2 tests (CD4 or VL) ≥3 months apart in 2016. Viral suppression was defined as <200 copies/mL on the most recent VL test in 2016. Hispanics/Latinos can be of any race.
Prevent new HIV transmissions by using proven interventions including pre-exposure prophylaxis (PrEP)

- Train providers
- Increase availability of PrEP services in community health centers
- Outreach to people at highest risk
- Continue to update clinical guidelines
- Continue adding providers to the PrEP Locator
- Education campaigns
- HHS PrEP program

* CDC + HRSA
** HRSA
*** CDC + SAMHSA
Prevent new HIV transmissions by using proven interventions including pre-exposure prophylaxis (PrEP).

8 in 10 (78%) Hispanic/Latino MSM self-reported being aware of PrEP.

21% of Hispanic/Latino MSM took PrEP.

1 in 5 (21%) report taking PrEP in the last 12 months.
Prevent new HIV transmissions by using proven interventions including Syringe Services Programs (SSPs)

CDC will work with SAMHSA to increase access to and use of comprehensive SSPs, and with local communities to implement SSPs where they are needed and permitted by state law.

CDC identified areas across the U.S. that are potentially at risk for outbreaks of HIV and hepatitis C among people who inject drugs. Yet many communities threatened by the opioid epidemic and increasing injection drug use have not had the resources to establish effective SSPs.
Respond early to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

**HIV Data for Action**

- **Community Involvement**: Involve members of local communities in planning, implementation and evaluation.
- **Flexibility**: Develop flexibility in prevention and care programs, to allow for quick response when potential outbreaks are detected.
- **Real-time Information**: Develop approaches to provide real-time information on potential outbreak detection and response.
- **Community Resources**: Leverage community resources and expertise.
HIV Work Force

- If funded, CDC will work with each community to establish on-the-ground teams that will include experts from multiple disciplines, including:
  - Epidemiology
  - Health care systems
  - Disease investigation
  - Medical, scientific, and public health
  - Social services

- CDC is planning to increase workforce capacity through current mechanisms and creative solutions.
  - Example – Leveraging CDC’s Public Health Associate Program (PHAP) to place highly motivated, early-career public health professionals in interested jurisdictions
To End the HIV Epidemic,

HHS is providing funding in 2019 for -
Jumpstart activities in key locations &
Planning in all phase 1 jurisdictions

HHS agencies are also planning for implementation in FY 2020
FY 2020 Implementation Planning at CDC

- Examining innovative prevention programs, best practices and interventions for scale-up, by pillar
- Preparing to announce and award FY20 funding to grantees, pending funding approval
- Soliciting input from grantees and partners
- Assessing the most efficient and appropriate means to implement certain programs
- Exploring workforce needs and solutions
Partnering and Communicating Together (PACT) Hispanic/Latino Partners

- AIDS United
- ASPIRA Association
- Black Men's Xchange-National
- I Choose Life Health and Wellness
- LULAC Institute
- National African American Tobacco Prevention Network
- National Black Justice Coalition, Inc.
- National Hispanic Medical Association
- National Lesbian and Gay Journalist Association
- National Medical Association
- National Organization of Black County Officials
- National Urban League
- Pinyon Foundation
- Southern Christian Leadership Foundation, Inc.
- University of Southern California
Ending the HIV Epidemic in America

Let’s Stop HIV Together (formerly Act Against AIDS) Campaigns

Stigma

Diagnose

Prevent

Treat

Respond

*Health care provider campaigns
HIV Nexus: CDC resources for clinicians

- Serves as a one-stop hub for resources designed to support clinicians
- Includes latest research & information on HIV prevention, screening, & treatment
- Access to free continuing medical education programs
- CDC Guidelines & Recommendations
- Patient education materials
Thank you!

For more information, contact CDC
1-800-CDC-INFO (232-4636)

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.