



In It To End It: Our Plan to End the HIV Epidemic

Presentation to the New Haven Mayor's Task Force on HIV/AIDS October 13, 2020

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Today's Presentation

We will provide an overview of:

- Ending the HIV Epidemic: A Plan for America
- The development of In It To End It: Our Plan to End the HIV Epidemic
- The preparation and planning work that has been completed to date
- 2019 demographics for newly-diagnosed clients entering Ryan White care in New Haven

Ending the HIV Epidemic: A Plan for America

75% reduction in new HIV infections by 2025

90% reduction by 2030

- Announced by President Trump on February 5, 2019
- Collaboration of Health and Human Services agencies
 - Office of the Assistant Secretary for Health (lead agency)
 - Centers for Disease Control and Prevention
 - Health Resources and Services Administration
 - Indian Health Service
 - National Institutes of Health
 - Substance Abuse and Mental Health Services Administration
- Key Strategies:
 - **Diagnose** people with HIV
 - **Treat** HIV rapidly and effectively (goal: viral suppression)
 - **Prevent** new HIV transmissions (PrEP, syringe service programs, etc.)
 - **Respond** quickly to potential HIV outbreaks



Our Strategy

UNITE AND CONQUER



- New Haven Part A Program was one of ten jurisdictions nationally to be awarded funding
- Grant provided by the Health Resources and Services Administration (HRSA), HIV/AIDS Bureau
- Ryan White Part A Program Regions: New Haven, Waterbury, Bridgeport, Stamford/Norwalk and Danbury
- Hartford Part A Program accepted an invitation to collaborate
- "Ground up" inclusive planning approach
- Plan will establish Region-specific objectives and activities
- Collaborative Research contracted to coordinate planning activities and complete the final plan
- Plan due to HRSA by June 30, 2021

Guiding Principles for Local Planning

- **Aspirational:** We can end the local HIV epidemic!
- Collaborative: Region-specific input from persons living with HIV (PLWH), stakeholders, planning body members, CBO staff, etc. – all participants are equals
- **Data-Driven:** Guided by national data, local data, personal knowledge and expertise, and PLWH experience **each have merit**
- Needs-Based: "This is what needs to be done," not "This is what's funded to be done"
- **Goal-Oriented:** High-impact, defined performance expectations
- Challenges the Status Quo: Innovative, thoughtful strategies with public, private, programmatic and governmental responsibilities

Leadership Team

- **Region 1 New Haven** Chris Cole, APNH
- Region 2 Waterbury

Sam Bowen, Waterbury Department of Health

- Region 3 Bridgeport Nancy Kingwood, GBAPP
- Region 4 Stamford/Norwalk Krystle Moore, Liberation Programs, Inc.
- Region 5 Danbury

Taylor Edelmann, APEX Community Care

• Region 6 Hartford

DeLita Rose-Daniels, City of Hartford

Planning Timeline

May to August 2020

- Stakeholder
 Engagement
- Assessment of Current Continuum of Care



September 2020 to February 2021

- Engagement of Priority Populations
- Regional Plan Development



March to June 2021

- Jurisdictional Plan Development
- Final Plan Completed by June 30, 2021



Completed Activities

- **Priority populations:** Young Black and Hispanic Men who have Sex with Men, Black and Transgender women
- Analysis of the priorities and strategies of 25 other state and jurisdictional Ending the HIV Epidemic plans
- Partnerships with LGBTQ+ organizations to conduct listening sessions with priority populations
- **Collaboration** with the Connecticut HIV Planning Consortium (CHPC) Getting to Zero (G2Z) Sub-Committee

Completed Activities

• Interviewed more than 30 regional stakeholders, identifying common themes and priorities:

Service Delivery

- Improve service delivery to priority populations
- Expand the of HIV system of care/new HIV providers
- Coordinate planning among regions
- Train care providers on LGBTQ+ health needs (a gateway to HIV prevention)
- Improvements to the quality of HIV care services
- Improve relationships among stakeholders, providers and health departments

Education and Awareness

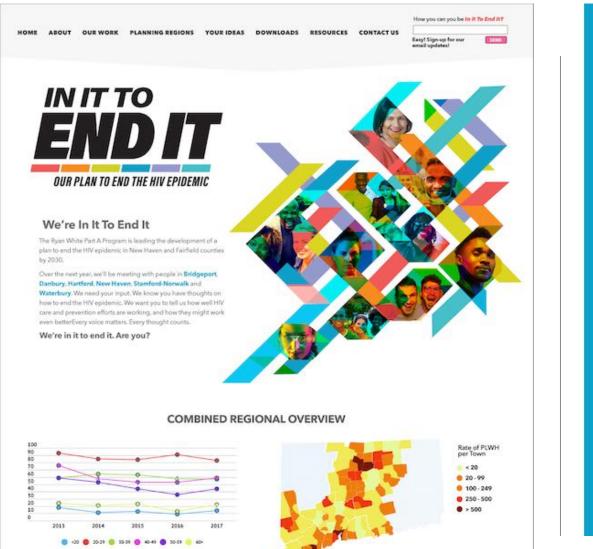
- Increase the knowledge of HIV prevention among priority populations
- Education the general public and medical providers on HIV prevention and care
- Increase community engagement in HIV issues
- Educate LGBTQ+ people about their unique health care needs

Disruptive Innovation

- Implement proven innovations (Rapid Start, Self-Test Kits)
- Expand PrEP/PEP use among priority populations
- Increase social media/marketing
- Promote better HIV data collection, sharing and use

Infrastructure Changes

- Diversify and increase funding
- Evaluate policy revision at the local and national level



NEWLY DIAGNOSED HIV INFECTION BY YEAR OF DIAGNOSES AND AGE GROUP

PEOPLE LIVING WITH HIV IN CONNECTICUT, 2018

Region 1: New Haven PLANNING REGIONS < 2018 > Female 21.00% Male **REGION 3: BRIDGEPORT** HIV TRANSMISSIONS BY YEAR OF DIAGNOSES AND SEX REGION 4: STAMFORD-NORWALK

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HOME

Rate of PLWH per Town < 20 0 20-99 0 100 - 249 **e** 250 - 500 ● > 500 PEOPLE LIVING WITH HIV IN REGION 1, 2014 - 2018

ale 79.009

2014 2015 2016 2017 2018 60+ 50-59 40-49 30-39 20-29 <20 0 5 10 15 20 25 30 35 40 45 50 55 60 HIV TRANSMISSIONS BY YEAR OF DIAGNOSES AND AGE GROUP

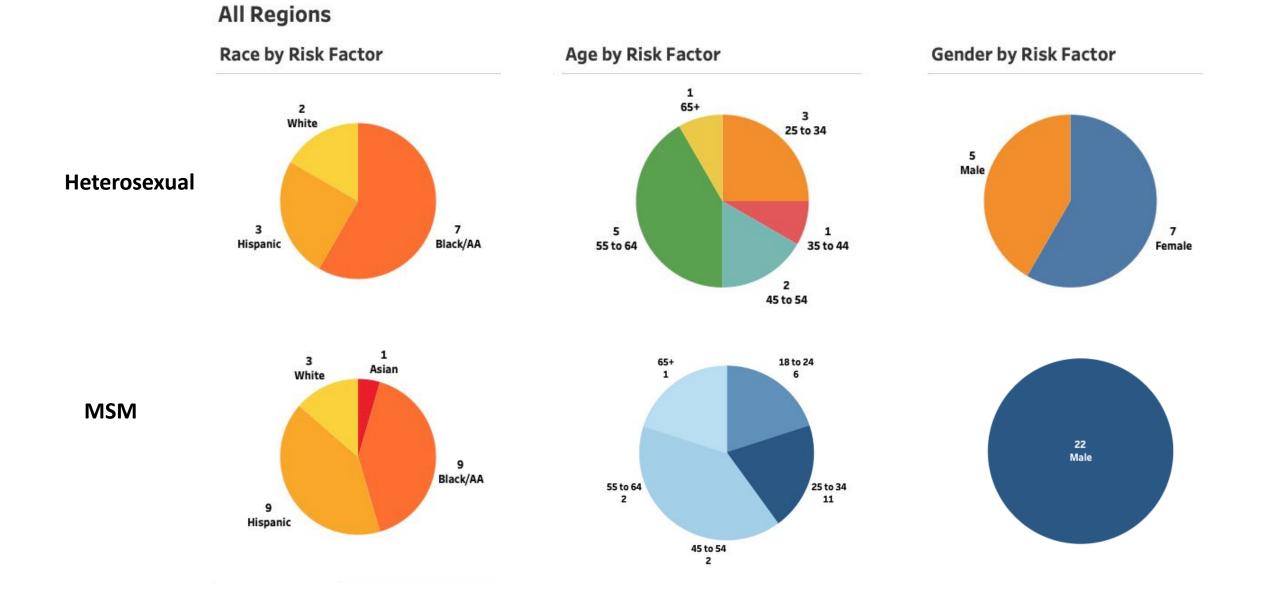
IN IT TO

NEW HAVEN

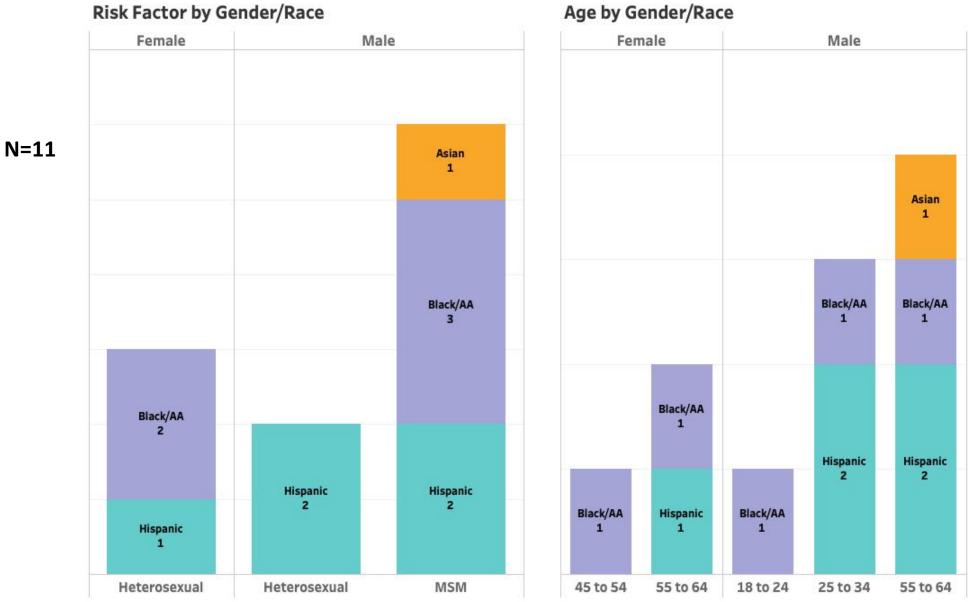
Were in Care O Were Retained in Care Were Suppressed NEW HAVEN CARE CONTINUUM, 2014-2018

2019 Demographics Newly Diagnosed Clients

New Haven Part A Program



Region 1: New Haven



Age by Gender/Race

In Summary

- There's a national strategy to end the HIV epidemic by 2030 (Ending the HIV Epidemic: A Plan for America)
- The Ryan White Part A Program is leading a comprehensive local planning initiative (In It To End It)
- Six metro regions are collaborating to develop "disruptively innovative" initiatives to end the HIV epidemic in New Haven, Fairfield and Hartford Counties
- Priority populations in New Haven and Fairfield Counties are Black and Hispanic MSM, Women and Transgender Women

"Today we have the right data,

the right tools and the right leadership

to end the HIV epidemic."

Robert R. Redfield, MD, CDC Director

Questions?





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