Defining the End of the AIDS Epidemic in New York State

December 9, 2013

Key Points
Statewide Response

- Six ‘Defining the End of the AIDS Epidemic in New York State’ meetings held across New York State
- Over 300 participants
  - New York City
  - Capital District
  - Syracuse Region [including Binghamton]
- Updates provided at State advisory and planning meetings
  - AIDS Advisory Council
  - Statewide AIDS Service Delivery Consortium
  - Interagency Task Force on HIV/AIDS
- Updates provided at community based meetings
  - University at Albany
Multiple Sectors

• Key stakeholders
  • Community members and consumers
  • State, city and local governments
  • Academia
  • Health professionals
  • Community based providers
  • Public and private sectors
Cascade of HIV Care
New York State, 2011

- Estimated HIV Infected Persons: 154,000
- Persons Living w/ Diagnosed HIV Infection: 131,000 (85% of infected)
- Cases w/any HIV Care during the year*: 85,000 (55% of infected)
- Cases w/continuous care during the year**: 74,000 (48% of infected)
- Virally suppressed (n.d. or <200/ml) at test closest to mid-year: 60,000 (39% of infected)

* Any VL or CD4 test during the year
** At least 2 tests, at least 3 months apart
Priorities Defining the End of AIDS

Policy

- Simplified consent for HIV Testing
- Enhanced data sharing between the State Health Department and healthcare providers
- Removal of ‘condoms as evidence’ in statute
- Decriminalization of syringes
- Affordable, safe and stable housing for low income individuals; 30% rent cap on total income spent towards rent for low-income PLWHA; expand NYC HASA eligibility requirements
- Enhanced DOH oversight of DOCCS (Department of Corrections and Community Supervision) for Hepatitis C and HIV treatment and care
Priorities Defining the End of AIDS

- Syringe Access programs
- Proposed Medicaid Redesign programs
- Health Homes
- Prevention and Outreach Services
- Treatment Adherence programs to target high risk populations [sub populations]
- Increased access to culturally and linguistically appropriate prevention and health care services for undocumented immigrants living with HIV/AIDS, women and women (of color)
- Develop a prevention continuum that prioritizes innovative behavioral interventions
- Additional HIV testing sites and enhanced integration of 4th generation testing
- Increase targeted testing
Priorities Defining the End of AIDS

Bio medical interventions

- Promote and ensure access to nPEP and PrEP in the community and within DOCCS facilities
- ARV access
Priorities Defining the End of AIDS

Surveillance

- Enhance Data Sharing
- Enhance data collection practices [LGBT]
- Subpopulations
Priorities Defining the End of AIDS

Access to Care

- Special Needs Plans (Model)
- ADAP
- Medicaid Managed Care
- NY State of Health and insurance exchanges
- Health and Recovery Plans (HARPS)
- Medicare
Priorities Defining the End of AIDS

Messaging

- Provider and consumer education
- Targeted messaging to HIV high risk negative and positive individuals
- Address stigma and discrimination
- Ensure messages are aligned
- Support prevention and clinical practices that are person centered
Priorities Defining the End of AIDS

Resources

- Ensure ARV access for all
- Fund targeted prevention and health care practices
- Specialty services such as *transition coverage* for transgendered individuals
- Review of existing funding and funding allocations
Key Framing Questions

What is the community perception of “End of AIDS?”

- The phrasing “End of AIDS” promotes stigma.
- In some communities there is a perception that the state has achieved the “End of AIDS” – making it no longer a priority.
- In some communities the “End of AIDS” is being confused with having an available vaccine or having an undetectable viral load.
- To achieve the “End of AIDS”, HIV can not be regarded as “just another chronic disease”.
- Community members are concerned that the End of AIDS will not protect or address the needs of individuals living with HIV/AIDS.
- To achieve the “End of AIDS” policy makers must identify and remove NYS laws that promote the criminalization of HIV/AIDS.
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<th>Key Framing Questions</th>
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<td>What is effective community messaging and media?</td>
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<td>• Community messaging must be sensitive and targeted to each community/population.</td>
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<td>• Think of community messaging as layers for each target population.</td>
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<td>• Develop messaging for both high risk HIV negative and positive persons.</td>
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<td>• Promote the use of phone applications and social networking to deliver community messaging.</td>
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<td>• Utilize empowering community messages.</td>
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<td>• Engage print and social media venues.</td>
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### Key Framing Questions

#### Who else needs to be at the table?

- Diverse consumer representation including members of the Latino community
- Behavioral health providers
- Union representatives
- Youth and Senior representatives
- Medical providers
- DOCCS representatives
- LGBT representation; Trans women of color
- Sex workers
- Members of the faith community
- Public and private sector representatives
### Key Framing Questions

**What is the role of Prevention in the “End of AIDS“ movement?**

- Develop targeted prevention strategies to ensure access to safe, stable and affordable housing/homelessness as primary and secondary prevention
- Develop targeted prevention strategies to address homophobia
- Develop effective and innovative behavioral interventions; utilize a peer model
- Target prevention interventions to youth and seniors
- Promote sexual health education in NYS education systems
- Prioritize prevention interventions within DOCCS facilities
- Ensure prevention messages align ‘across the board’
- Prioritize human rights at the forefront of the conversation
Structural Barriers

- Food Security
- Housing Stability
- Vocational/Educational
- Mental Health
- Poverty
- Cultural
- Transportation
- Substance Abuse
- Social Support
- Immigration
METRIX

Clinical Prevention Pharmacology Community Engagement Costs and cost savings

Transmission rate of .5% [730 infections]

Progression of HIV to AIDS

Stigma and Discrimination
Developing the Plan/Statewide Input and next steps

- Priority points of all community meetings across New York State.
- Inform the State on community needs and priorities to achieve the End of AIDS in New York State by 2020.
- Potentially inform a Governor appointed Task Force to work in cooperation with state, city, local governments and the community to implement a statewide plan to achieve the End of AIDS in New York State by 2020.
- Continued collaboration and partnership.
- Bi monthly community calls to provide updates and seek input.
Thank you