

Defining the End of the AIDS Epidemic in New York State

December 9, 2013

Key Points

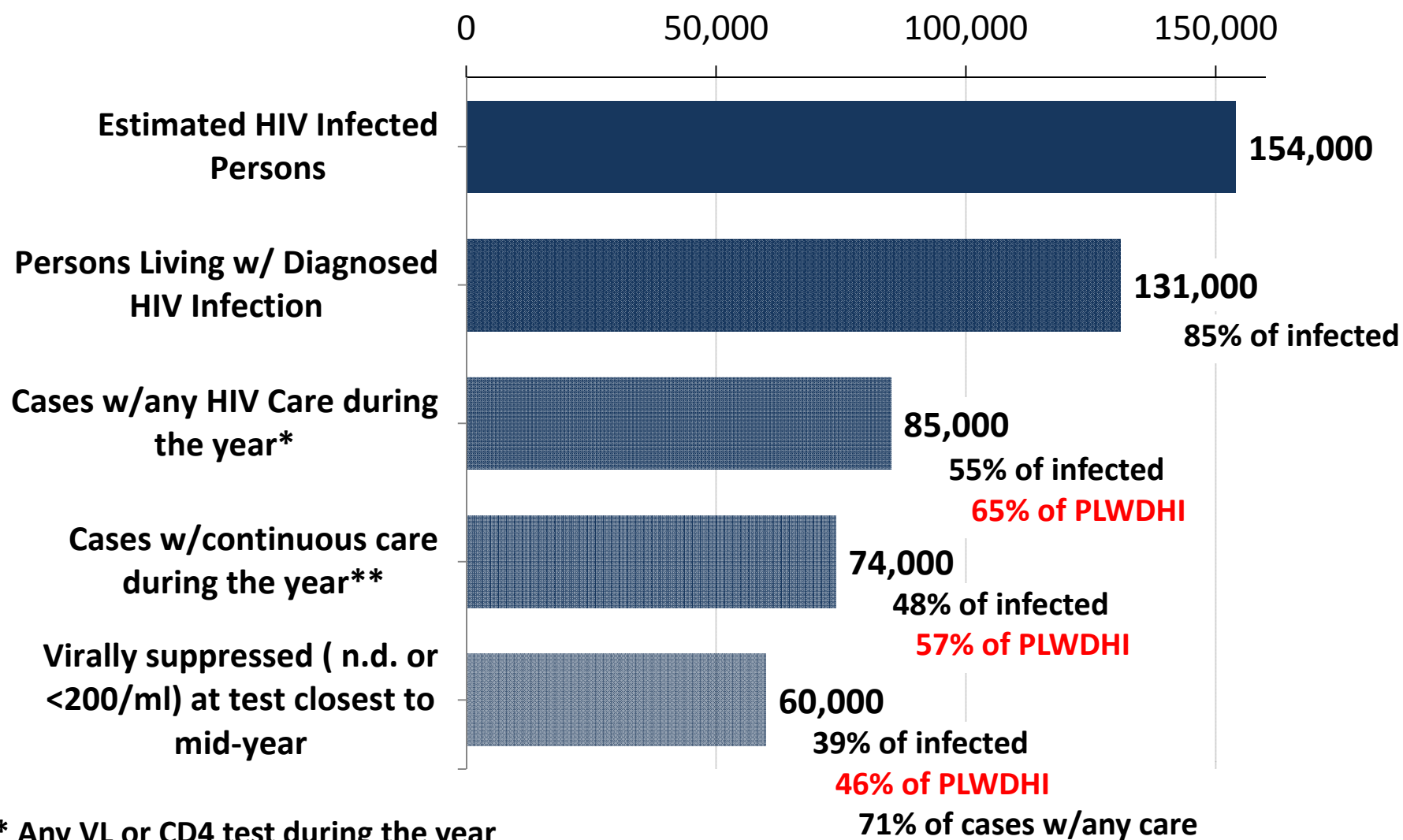
Statewide Response

- 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



* 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

Prevention

- 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.

Key Framing Questions

What is effective community messaging and media?

- Community messaging must be sensitive and targeted to each community/population.
- Think of community messaging as layers for each target population.
- Develop messaging for both high risk HIV negative and positive persons.
- Promote the use of phone applications and social networking to deliver community messaging.
- Utilize empowering community messages.
- Engage print and social media venues.

Key Framing Questions

Who else needs to be at the table?

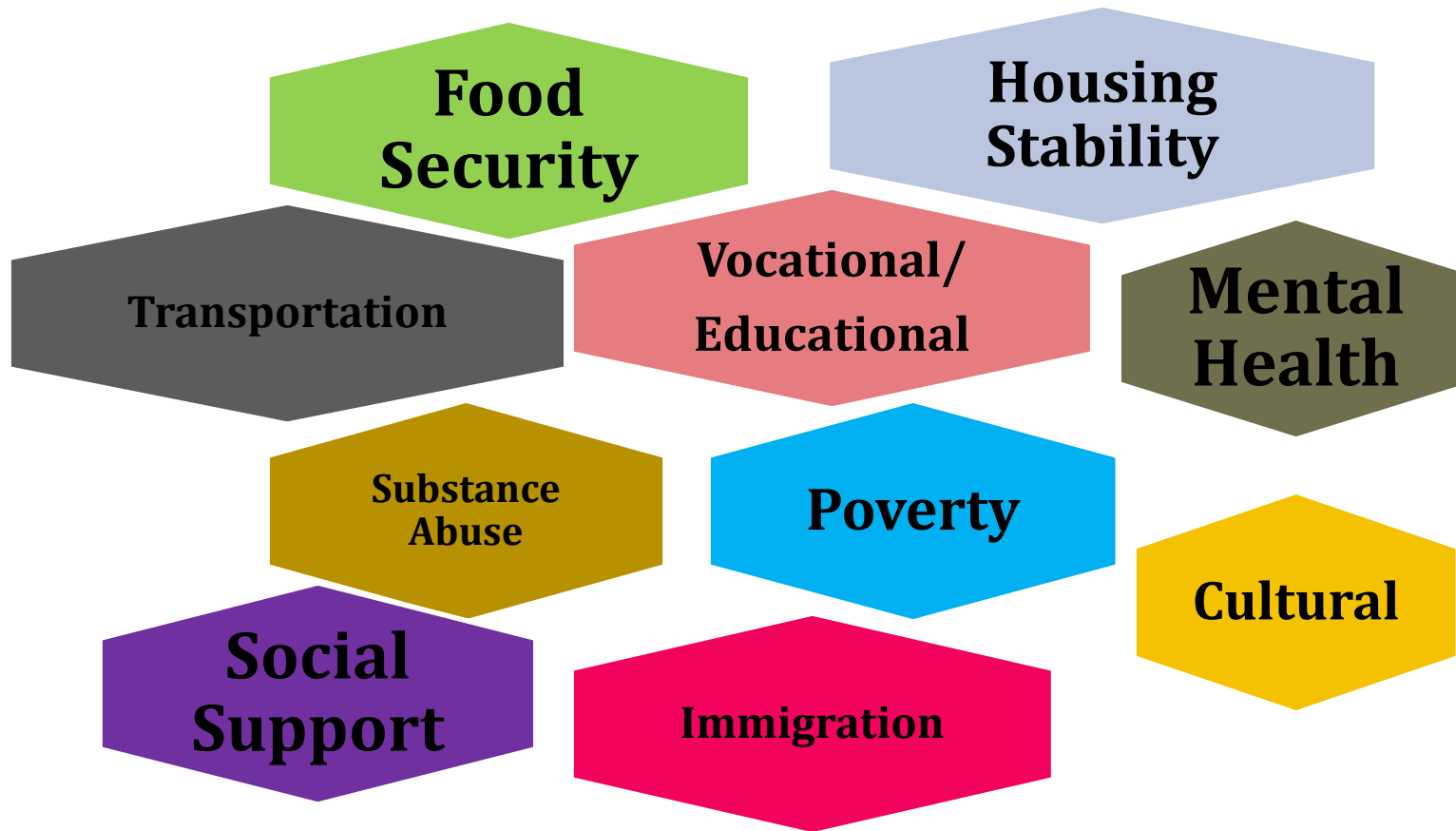
- Diverse consumer representation including members of the Latino community
- Behavioral health providers
- Union representatives
- Youth and Senior representatives
- Medical providers
- DOCCS representatives
- LGBT representation; Trans women of color
- Sex workers
- Members of the faith community
-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



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