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**GET  
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**GET  
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**GET  
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HAWAI'I TO ZERO  
HIV CURE AND PREVENTION EFFORTS  
JANUARY 16, 2018



# Presenter

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# Presentation Outline

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- History and Process to EAW
- Recommendations
- DOH changes to adapt
- Current focus of the work

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# Washington's Beginning of the END

- Epidemic was already slowing
- Community Inspiration
- Governor Inslee's Proclamation

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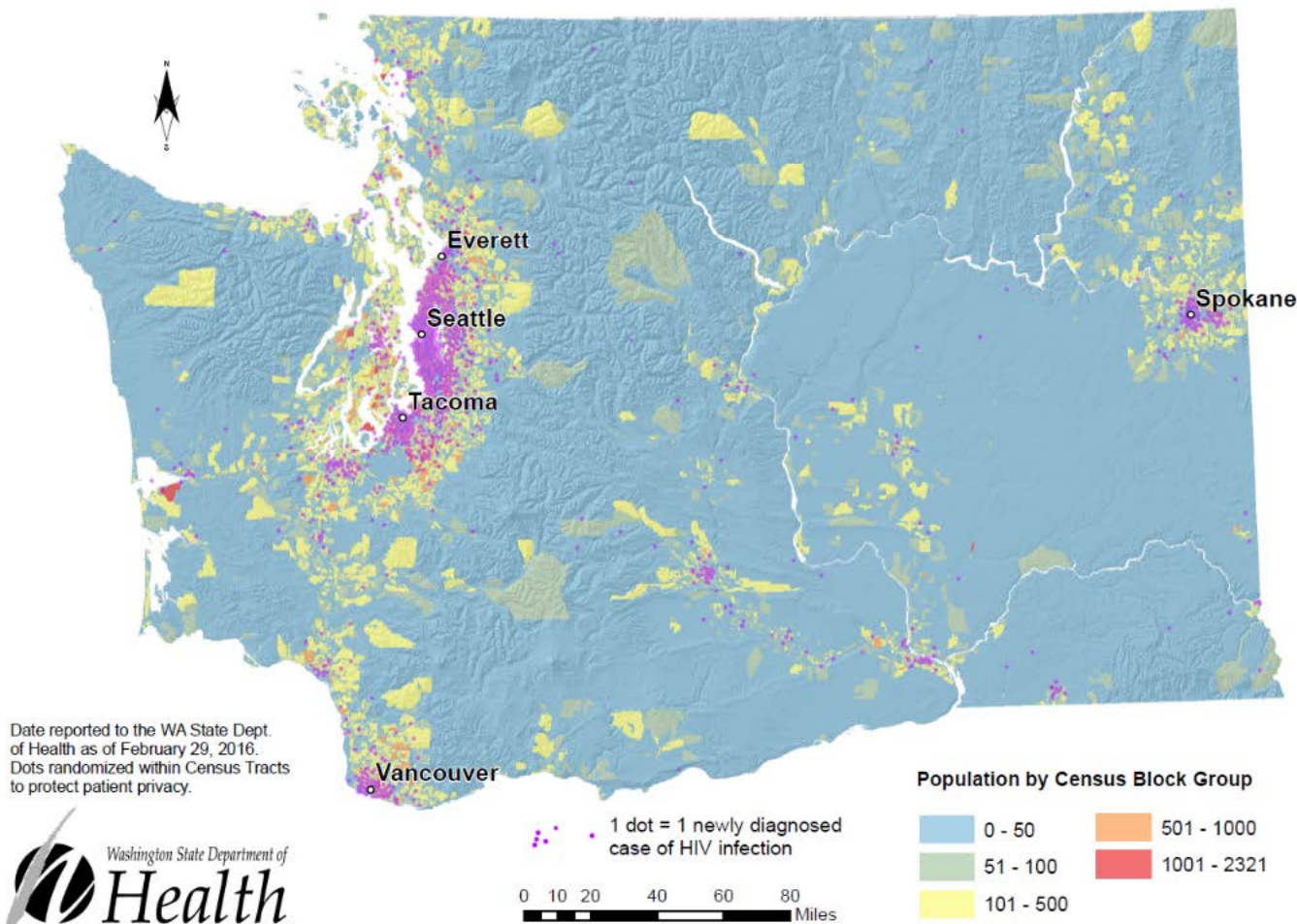
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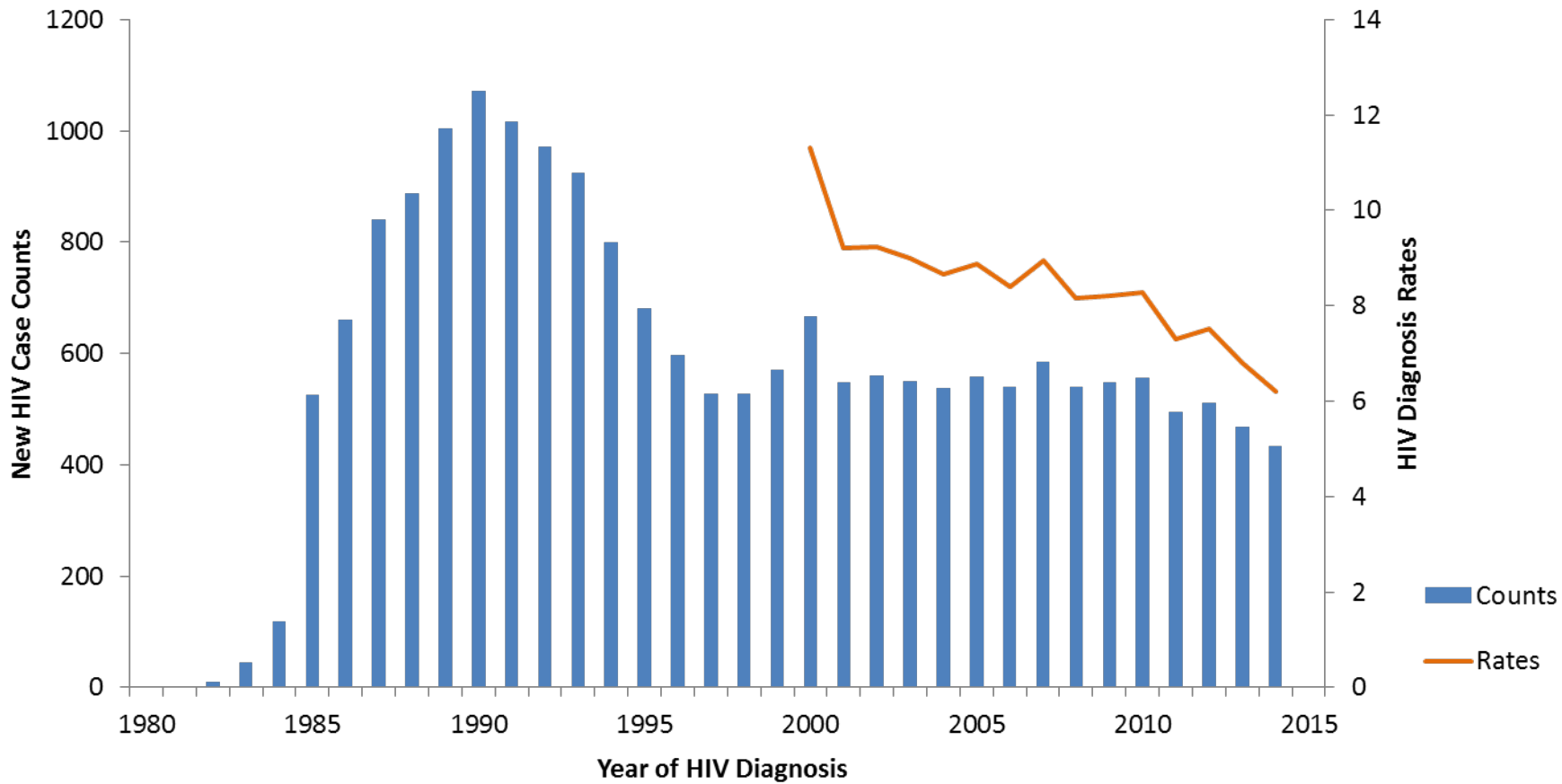
# Concentration of Cases

New HIV Diagnoses in Relation to Population Density  
Washington State, 2010-2014 (n=2,460)



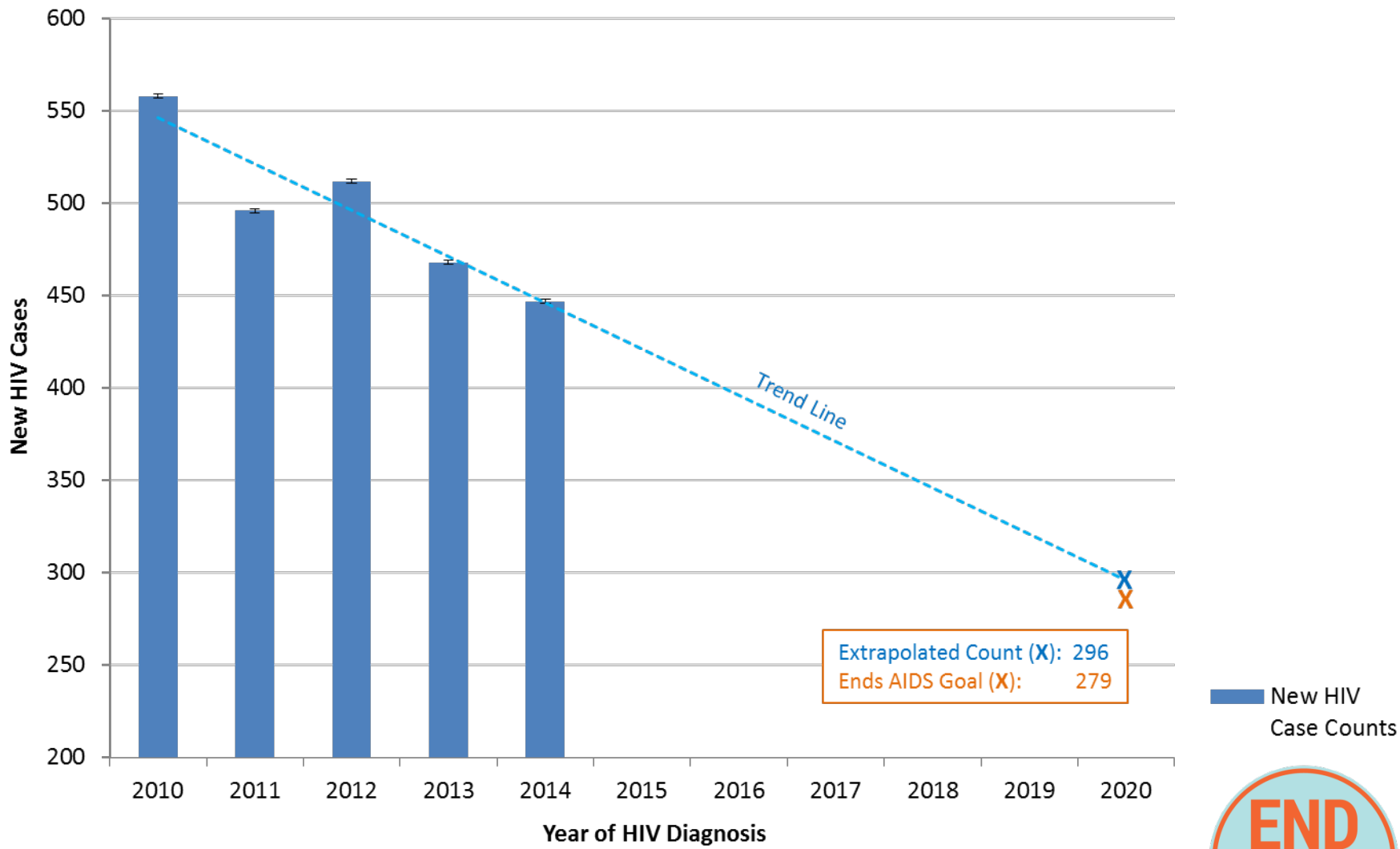
# Why End AIDS? HIV Epi Trends

## Counts and Rates of New HIV Diagnoses, Washington State, 1981-2014



Based on case information reported to the Washington State Department of Health as of March 31, 2015

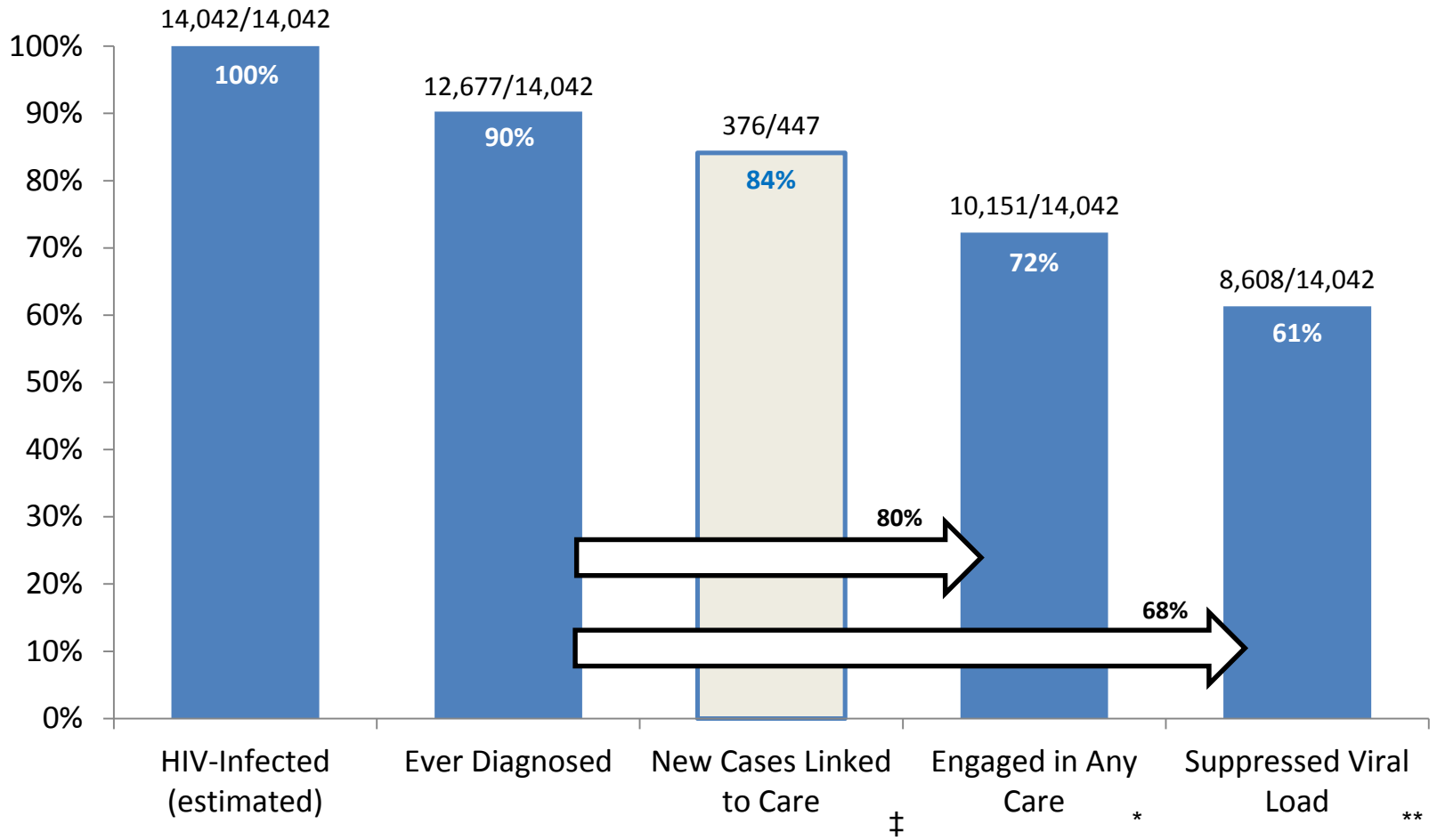
# Extrapolating Progress: New HIV Case Counts, WA State, 2010-2020



Data based on case information reported to the Washington State Department of Health as of May 31, 2015



# HIV Care Continuum, WA State, 2014



Based on HIV surveillance data reported to the Washington State Department of Health as of June 30, 2015

‡ Limited to newly diagnosed HIV cases linked to care within one month (30 days) of HIV diagnosis

\* Includes cases with laboratory evidence of at least one HIV care visit in 2014

\*\* Suppression based on whether the last reported viral load test result in 2014 was ≤ 200 copies/mL







# HIV Prevention

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2013: Strategic HIV prevention framework completed

## Impact

- Reduce new HIV infections in Washington State by 25 percent by the end of 2016
- Lay the groundwork in Washington State for ending the HIV epidemic in the United States in support of the National HIV/AIDS Strategy

## Outcomes:

- Increase viral suppression among PLWH
- Decrease syphilis and GC among gay/bisexual men
- Increase PrEP use among gay/bisexual men
- Increase nPEP use among gay/bisexual men
- Increase condom use among PLWH and gay/bisexual men
- Increase clean needle use among PWID





# Community Power

- Community Initiated the Vision of End AIDS Washington
- Community members met with Governor's Staff and made the case for End AIDS Washington
- Community was ready before we were

Be more like the community

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# Governor's Proclamation to End AIDS, 2014



Reference to the HIV Strategic Framework and six outcomes

Reference to multi-agency, multi-sectoral approach and leveraging resources

Reference to **50% reduction in rate of new HIV diagnoses by 2020** and reduction of disparities in health outcomes

History of the epidemic in Washington

Reference to ACA and health systems transformation/Healthier Washington

Assignment of Leadership to HIV Planning Steering Group



# Plan Development – 2015 and 2016

NO NEW \$

## **WA State HIV Planning Group (HPSG)**

- Build upon present work
- Obtain and include community input
  - Town Hall meetings across the state
  - Online Survey distributed
- Compile input and assign responsible agency
- Develop Recommendations to achieve goals

## **Community Facing Promotion of End AIDS Washington Developed**

- Community mobilization partners developed name, logo, campaign focus
- Community Based Organization(s) promoted End AIDS Washington website for DOH
- End AIDS Washington ambassadors/champions came from the community



# Plan Development – 2015 and 2016

## Plan Components

- 4 “Gets”
- 11 Recommendations
- 5 Goals
- Multiple State Agency “assignments”

## “Calls to Action”

- Address Stigma
- Address Health Disparities
- Implement Meaningful Community Engagement
- Reduce Barriers to Routine Testing

Report Published December 2016

# End AIDS Framework: The 4 Gets

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A light blue circle with an orange border containing the text "GET INSURED" in orange, bold, uppercase letters.

## GET INSURED

### **Getting people insured.**

Health insurance coverage connects people to healthcare. People can be tested for HIV, get PrEP, treatment, and receive other services to stay healthy.

A light blue circle with an orange border containing the text "GET TESTED" in orange, bold, uppercase letters.

## GET TESTED

### **Getting people tested.**

People who know their HIV status can make informed decisions about their health. After getting an HIV test, people at-risk for HIV can get PrEP, and PLWH can get medical care and treatment.

A light blue circle with an orange border containing the text "GET PREP" in orange, bold, uppercase letters.

## GET PREP

### **Getting at-risk people on PrEP.**

PrEP helps at-risk people avoid infection. Taking PrEP allows an at-risk individual to take an active role in staying negative.

A light blue circle with an orange border containing the text "GET TREATMENT" in orange, bold, uppercase letters.


## GET TREATMENT

### **Getting HIV-positive people on treatment.**

Treatment helps PLWH stay healthy and reduce the chance they pass HIV to others.

# End AIDS 2020 Goals

1. Reduce by 50% the rate of new HIV diagnoses.
2. Increase to 80% the percentage of PLWH who have a suppressed viral load.
3. Reduce by 25% the age-adjusted mortality rates for PLWH.
4. Reduce HIV-related health disparities among PLWH.
5. Improved quality of life for PLWH.



↓ 50%  
NEW HIV  
DIAGNOSES



80%  
SUPPRESSED  
VIRAL LOAD



↓ 25%  
HIV  
MORTALITY



↓  
HIV HEALTH  
DISPARITIES



↑  
QUALITY LIFE  
WITH HIV





# End AIDS Recommendations

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1. **Identify and reduce HIV stigma**
2. **Reduce HIV-related disparities**
3. Implement routine HIV testing
4. Increase access to pre-exposure prophylaxis (PrEP)
5. Create health care that meets the needs of sexual minorities
6. Improve HIV prevention and care for substance users
7. Remove barriers to insurance and increase health care affordability
8. Increase access to safe, stable, and affordable housing
9. Deliver whole-person health care to PLWH
10. Launch Healthier Washington for Youth
11. **Include meaningful community engagement and empowerment**



# Actions Taken – Program

- ADAP Early Intervention Program: Treatment for PLWH
- PrEP Drug Assistance Program: Treatment for high risk
- New Staff / New Work
  - End AIDS Policy and Systems Coordinator
  - HIV Stigma
  - Health Disparities
  - Community Engagement
- Drug User Health (Harm Reduction / Needle Exchanges)



# Actions Taken – Policy & Systems

- Bree Collaborative
  - Guidelines to improve healthcare (physical and behavioral health) of LGBTQ
  
- Health Care Authority
  - HIV Drugs on Preferred Drug List
  - HIV Affinity Project (data sharing to identify care cascade)
  
- Office of the Insurance Commissioner
  - Consumer Protection Division
  - Plan “Enforcement”



# End AIDS Legislative Action Steps

- Update and Modernize Washington's Laws
- End HIV/AIDS Exceptionalism
- Reduce HIV Stigma
- Decriminalize HIV Exposure
- Remove Barriers to Routine HIV testing

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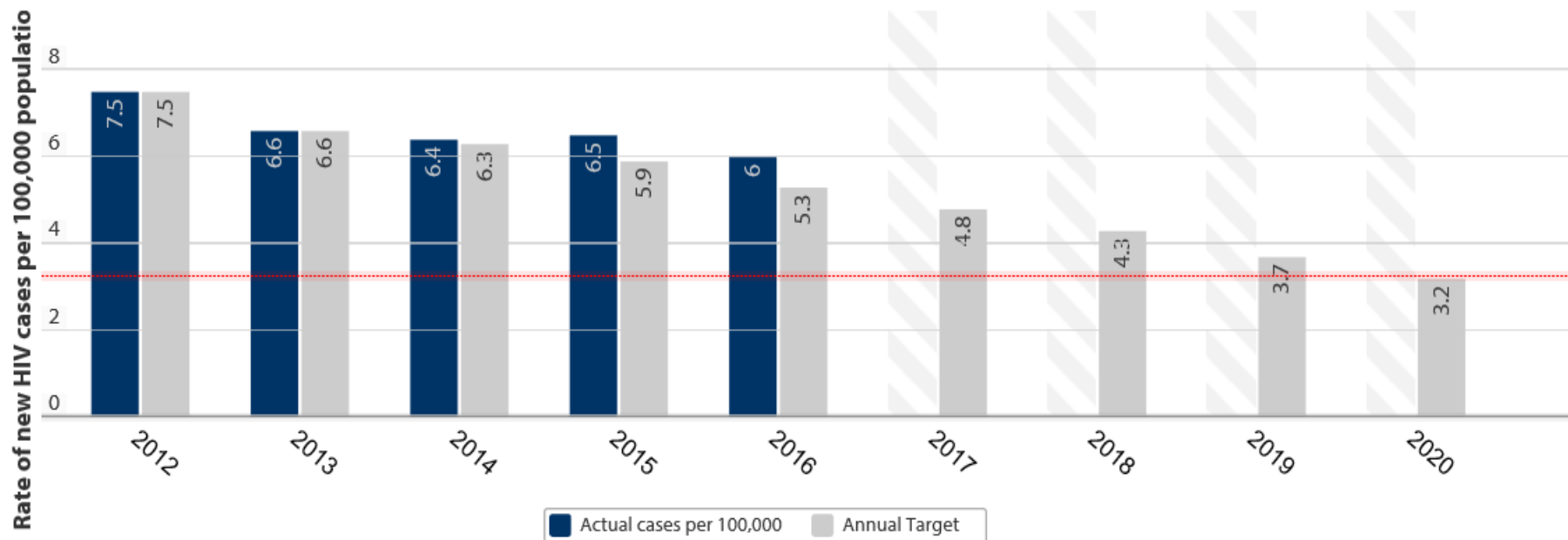
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# How are we doing?

**EAW Goal 1: Reduce by 50% the rate of new HIV diagnoses**  
 By 2020, reduce rate of new HIV cases from 6.3\* to 3.2/100,000.

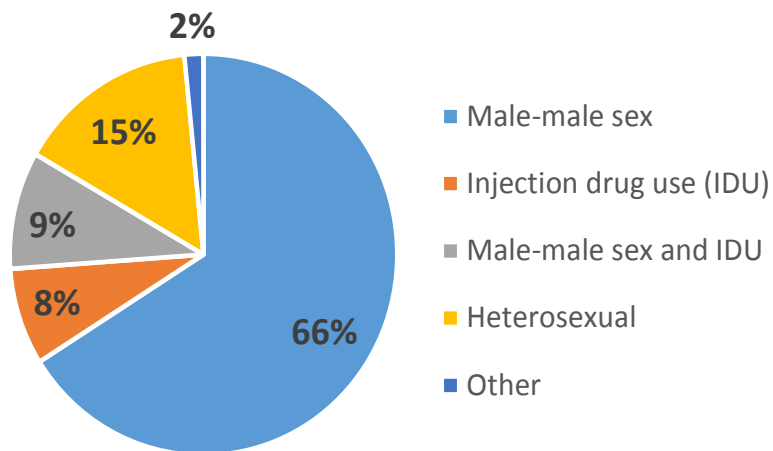


\* 2014 rate of new HIV cases was 6.3

# How are we doing?

- 6.0 new cases per 100,000 people
- Approximately 14,000 People Living With HIV; 10% unaware
- Three-quarters of epidemic are men who have sex with men
- Additional affected groups:
  - Persons of color
  - Transgender women
  - Injection drug users

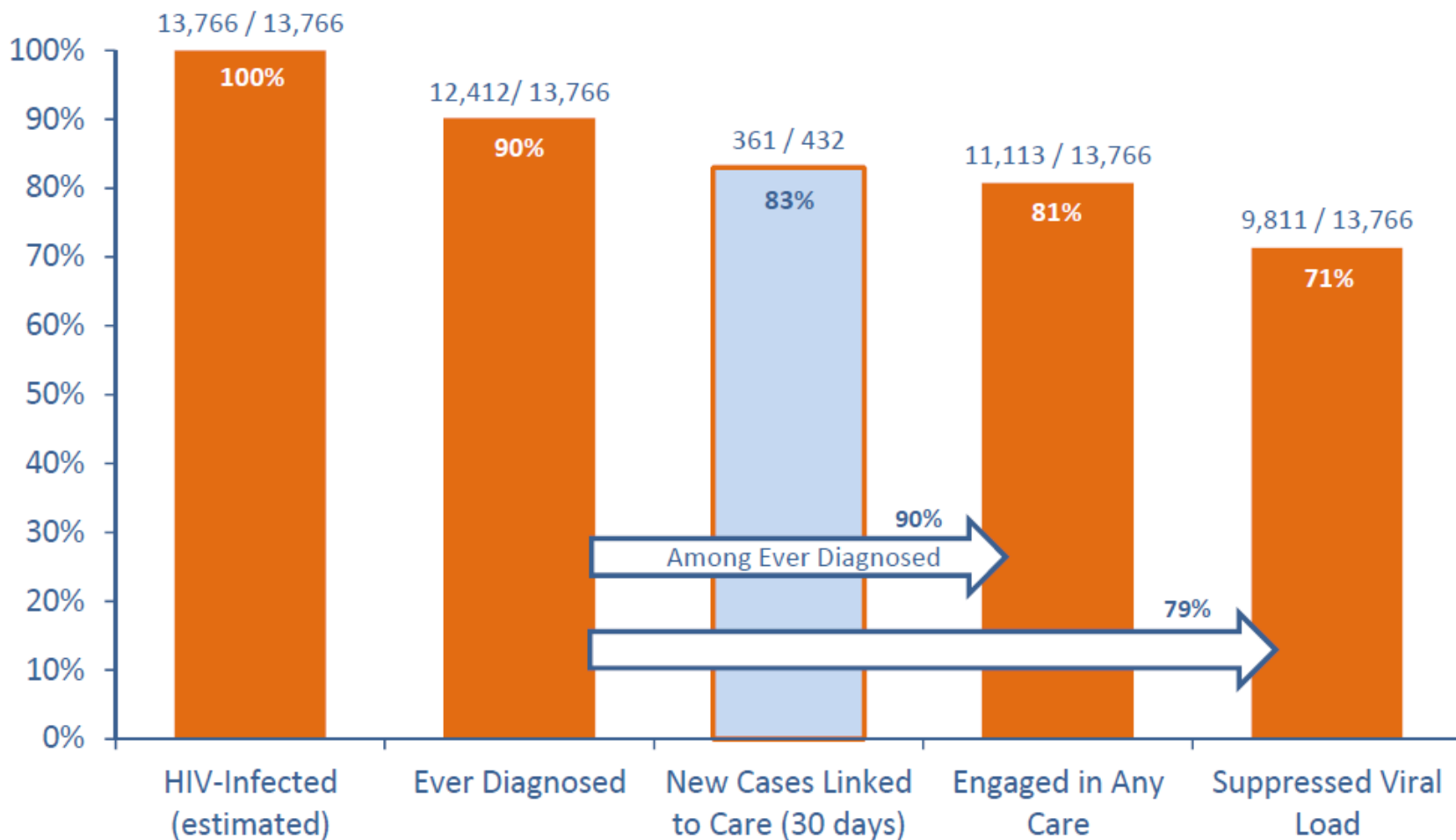
**Risk among People Living with HIV, 2016**



# Treatment as Prevention: Care Continuum

## HIV Care Continuum, Washington State, 2016

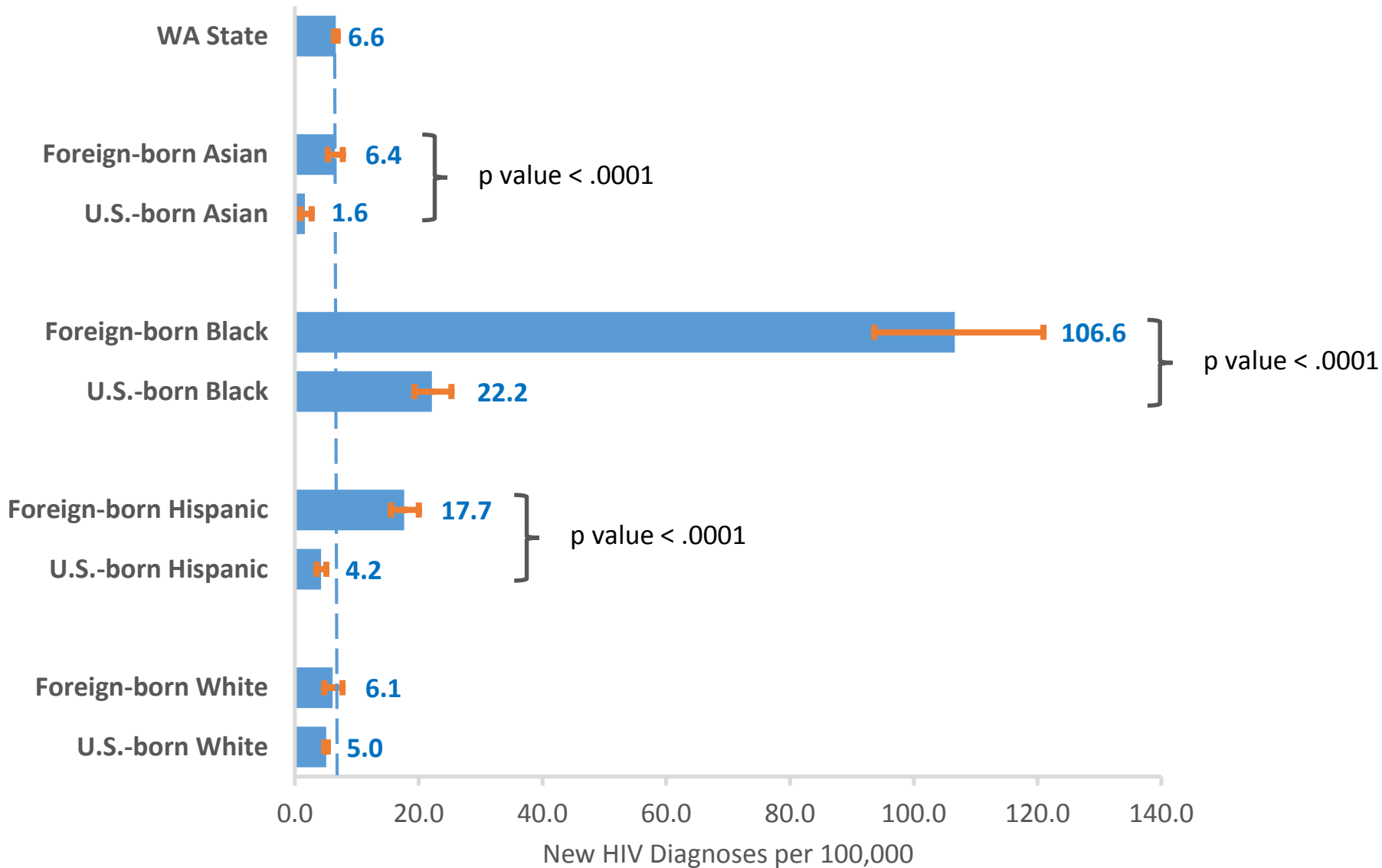
based on HIV surveillance data reported through October 2017





# How are we doing?

## HIV Diagnosis Rates by Race, Nativity, WA State, 2011-2015

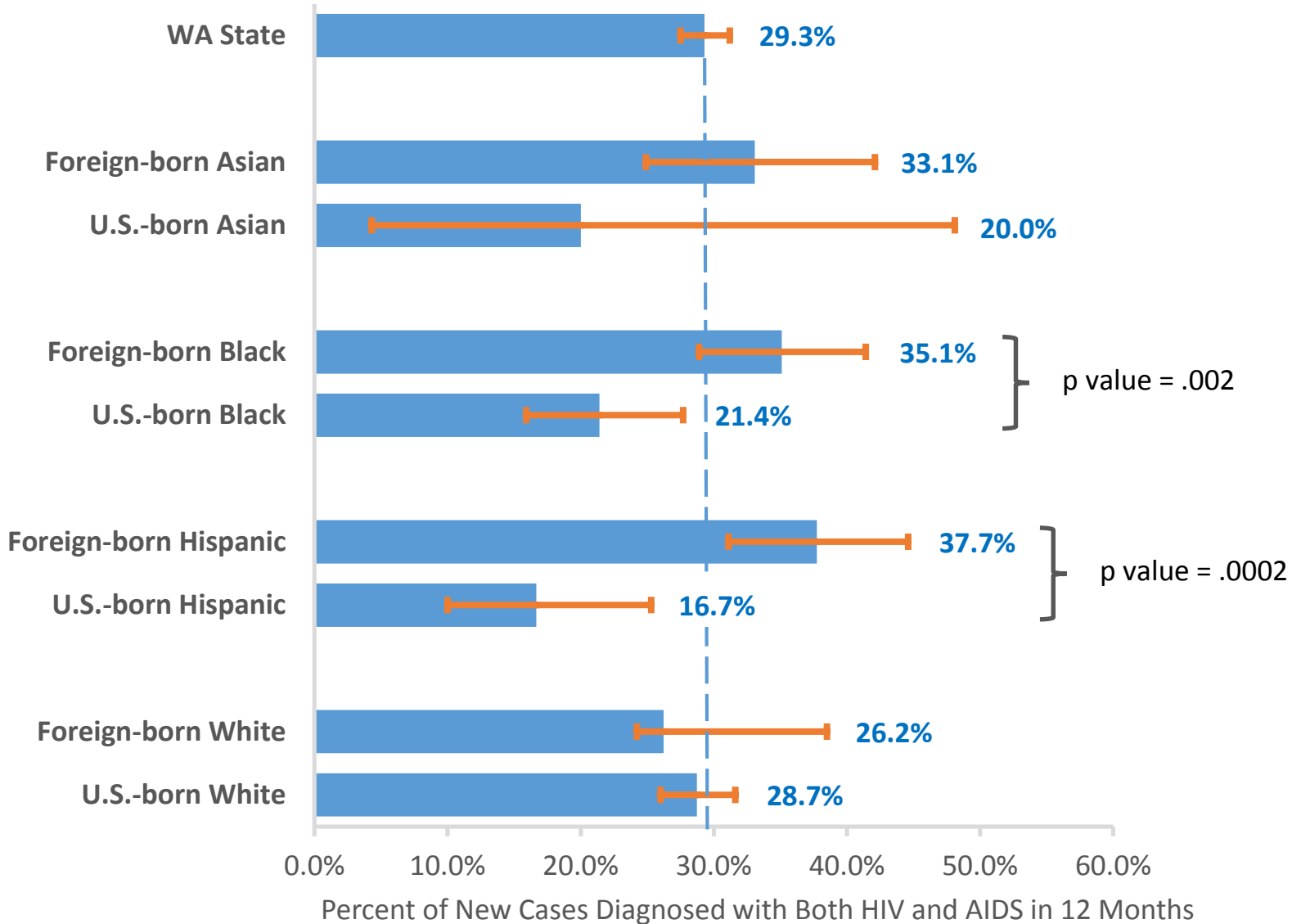




# How are we doing?



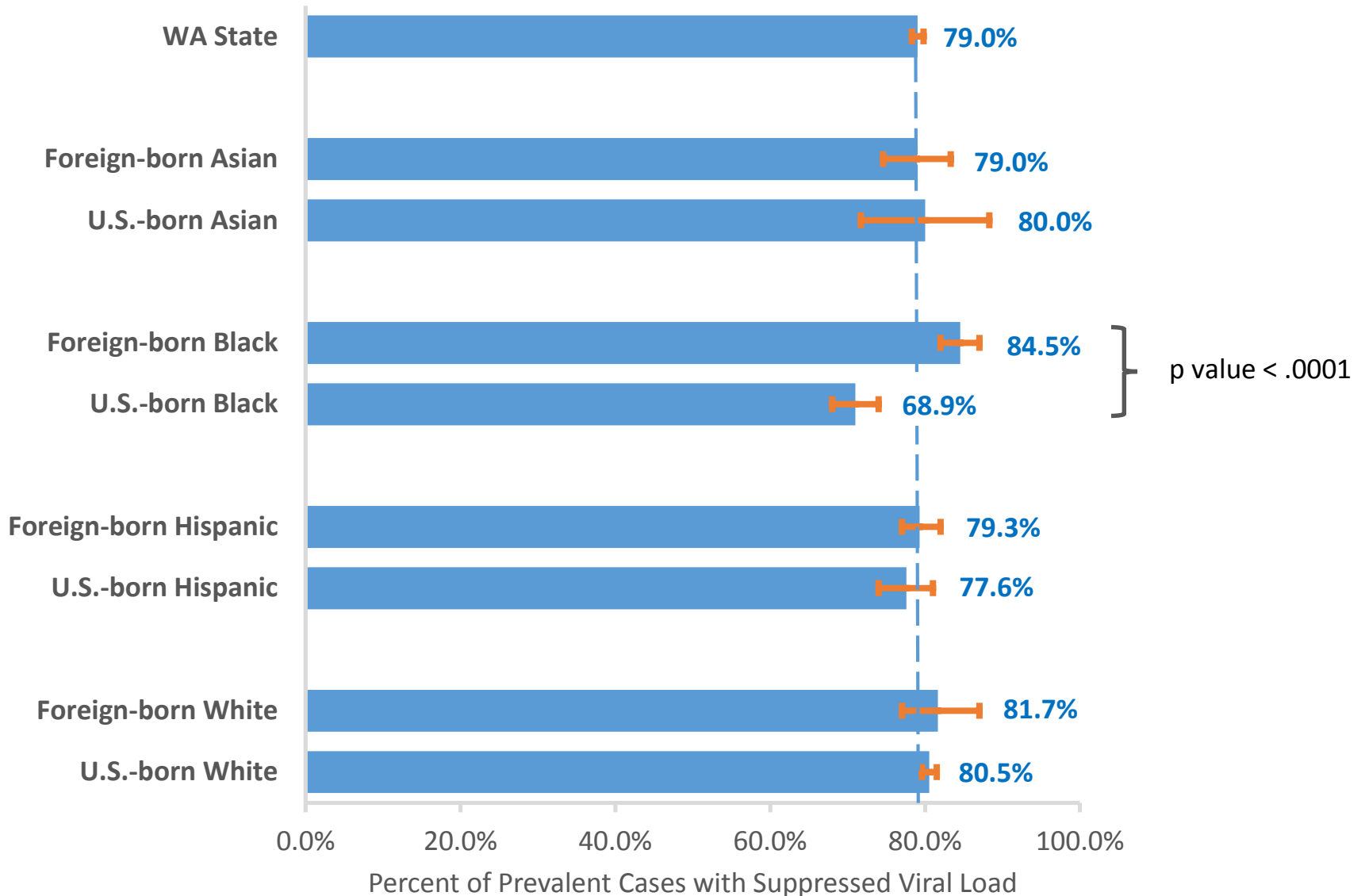
## Late HIV Dx by Race, Nativity, WA State, 2011-2015



# How are we doing?

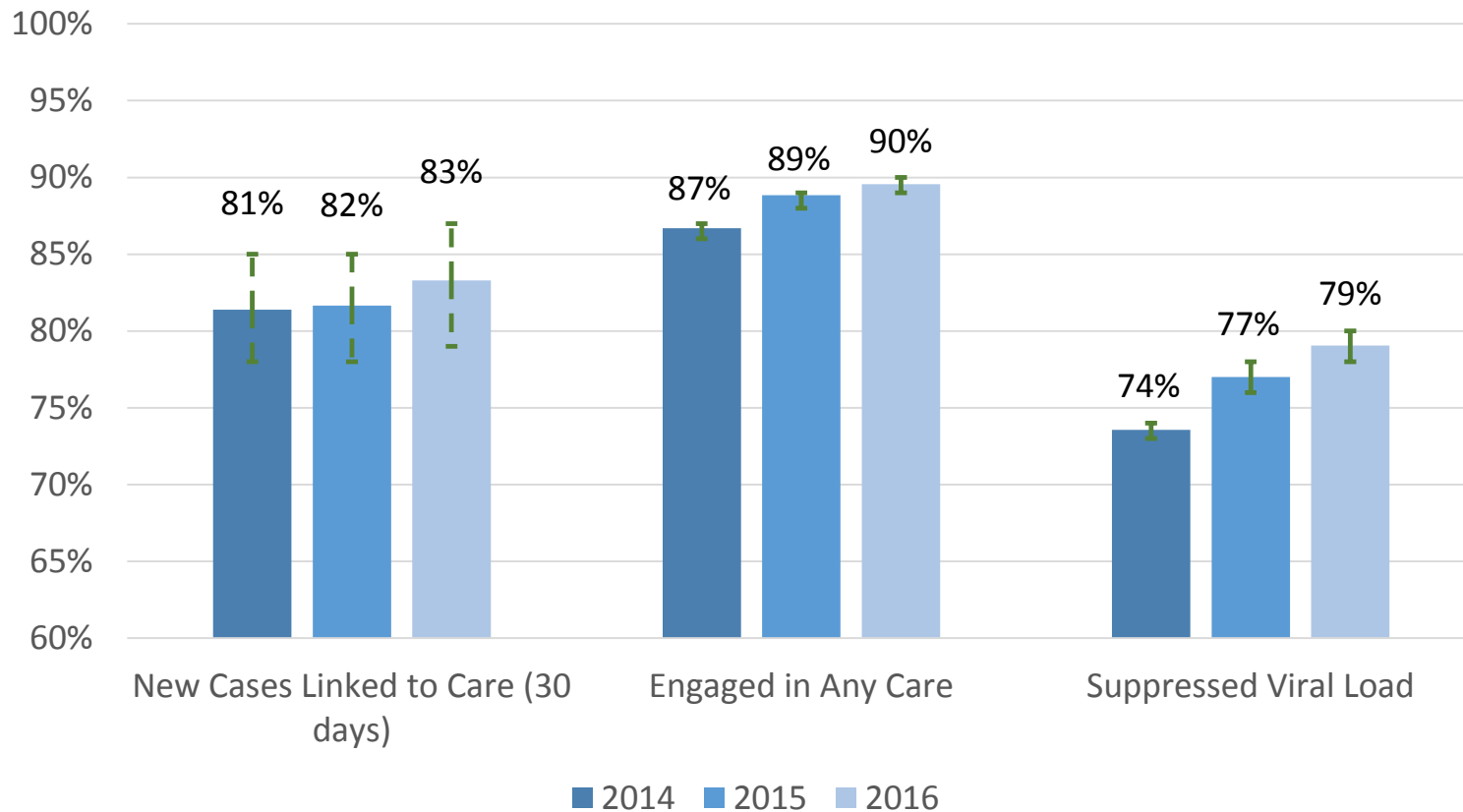


## Viral Load Suppression by Race, Nativity, WA State, 2016



# End AIDS Achievements: Care Continua

Changes in HIV Care Continuum Metrics among PLWDH, WA State  
2014-2016





# You Are Building A Movement

- Ending the HIV epidemic will require active involvement of all stakeholders
- The End AIDS initiative is not owned by DOH or by any single AIDS service organization – it is owned by all stakeholders
- Learn from others but avoid comparison
- Build on what you are already doing while finding the gaps
- Try not to get overwhelmed – set incremental goals

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# Questions?



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