CDC awarded $7.98M to health departments and community-based organizations in Indiana for HIV prevention and care activities, including $2.57M in Ending the HIV Epidemic (EHE) funding.

CDC collects and disseminates data on 6 key EHE indicators. Current data are available online at AtlasPlus and on HHS AHEAD for each jurisdiction.

**Hoosiers with HIV will face an average lifetime cost of $510,000 to treat their infection (2020 dollars).**

**DIAGNOSE:** Diagnose all people with HIV as early as possible

17% of Hoosiers with HIV are unaware of their status, which means they aren’t getting the HIV care they need.

540 new HIV infections occurred in Indiana.

25,196 HIV tests were provided in Indiana with CDC funding. HIV testing enables people to know their HIV status.

**How CDC Dollars Can Improve DIAGNOSES:**

- **Expand** routine screening of people in health care settings
- **Increase** testing in non-traditional settings (e.g., jails, emergency departments, street-based services)
- **Increase** access to and use of HIV self-tests
- **Integrate** STI and viral hepatitis screening into HIV testing services
### PREVENT:

**Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs)**

<table>
<thead>
<tr>
<th>Syringe Services Programs (SSPs) are community-based public health programs that provide access to services to prevent HIV and viral hepatitis infections and address other syndemic issues.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10 counties in Indiana</strong> were determined by CDC to be experiencing or at risk of an HIV outbreak or significant increase in hepatitis infections due to injection drug use.</td>
</tr>
<tr>
<td><strong>9 SSPs operate in Indiana</strong></td>
</tr>
</tbody>
</table>

### How CDC Dollars Can Improve PREVENTION:

- **Increase** access to and awareness of PrEP through innovations such as TelePrEP, a critical prevention tool in the context of COVID-19
- **Expand** access to SSPs and their capacity to provide integrated prevention services including PrEP
- **Implement** a status neutral approach to HIV prevention

### TREAT:

**Treat people with HIV rapidly and effectively to reach sustained viral suppression**

<table>
<thead>
<tr>
<th>There are <strong>13,900</strong> people with HIV in Indiana. <strong>Linking people with HIV to care within one month</strong> is a critical step to providing rapid access to HIV medicines.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>60%</strong> of Hoosiers with diagnosed HIV are <strong>virally suppressed</strong>. When a person with HIV takes their medicine regularly, they become virally suppressed, allowing them to live a long and healthy life and have effectively no risk of sexually transmitting HIV.</td>
</tr>
</tbody>
</table>

### How CDC Dollars Can Improve TREATMENT:

- **Expand** access to telemedicine
- **Develop** networks to rapidly link persons with recently diagnosed HIV to care services
- **Integrate** HIV, STI, and hepatitis treatment to holistically address the syndemic

### RESPOND:

**Respond early to potential HIV clusters or outbreaks to get prevention and treatment services to people who need them**

<table>
<thead>
<tr>
<th>86 Rapidly growing clusters nationally</th>
</tr>
</thead>
</table>

### How CDC Dollars Can Improve RESPONSE:

- **Direct** prevention and treatment resources to priority populations
- **Promote** equity in health services
- **Build** a competent workforce to address response activities

### CDC is providing funds to build a competent HIV prevention workforce that is representative of the communities they serve.

* These data were pulled on 1/13/2022 from NASEN (https://nasen.org/) and only represents SSPs who have authorized NASEN to publish their information.