CDC awarded $10.10M to health departments and community-based organizations in Tennessee for HIV prevention and care activities, including $2.09M 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.

Tennesseans 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

- 14% of Tennesseans with HIV are unaware of their status, which means they aren’t getting the HIV care they need.
- 710 new HIV infections occurred in Tennessee.
- 111,836 HIV tests were provided in Tennessee 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)

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.

41 counties in Tennessee 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.

8 SSPs operate in Tennessee.*

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

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

86 Rapidly growing clusters nationally

Cutting-edge public health approaches turn HIV data into action by identifying areas with rapid transmission and expanding resources to maximize prevention and treatment efforts.

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

How CDC Dollars Can Build Workforce Capacity

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

Nationally, learners from 216 unique organizations completed 565 HIV prevention courses with the most requested content area being increasing awareness of, access to, and adherence to PrEP.

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*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.*