

In the United States, it is estimated that prevention efforts have already averted more than 350,000 HIV infections. Since the height of the epidemic in the mid-1980s, the annual number of new HIV infections in the United States has been reduced by more than two-thirds, and recent scientific breakthroughs have equipped us with an unprecedented number of effective tools to prevent infection.

CDC believes that maximizing the impact of these tools within the framework of a new approach called High-Impact Prevention offers more hope than ever before for reversing the U.S. HIV epidemic. Through High-Impact Prevention, CDC is working to advance the goals of the first National HIV/AIDS Strategy (NHAS) and to help ensure that HIV prevention efforts have the greatest possible impact.

National HIV/AIDS Strategy

The National HIV/AIDS Strategy (NHAS), released by the White House in 2010 and updated in 2015, is a comprehensive roadmap for reducing the impact of HIV. The Strategy sets clear priorities and targets for HIV prevention and care, and calls on government agencies and their public and private partners to align efforts toward a common purpose. It has changed the way HIV prevention and care services are prioritized both locally and nationally by intensifying HIV prevention in the communities where HIV is most heavily concentrated and expanding targeted use of effective combinations of evidence-based HIV prevention approaches, including PrEP.

The updated NHAS includes ten quantitative indicators to monitor progress in HIV prevention, treatment and care. It also highlights four critical areas of focus from 2015 to 2020:

- Widespread testing and linkage to care, enabling people living with HIV to access treatment early;
- Broad support for people living with HIV to remain engaged in comprehensive care, including support for treatment adherence;
- Universal viral suppression among people living with HIV; and
- Full access to comprehensive PrEP services for those whom it is appropriate and desired, with support for medication adherence for those using PrEP.

NHAS Vision

The United States will become a place where new HIV infections are rare and when they do occur, every person, regardless of age, gender, race/ethnicity, sexual orientation, gender identity or socio-economic circumstance, will have unfettered access to high quality, life-extending care, free from stigma and discrimination.



High-Impact Prevention

To advance NHAS, CDC and its partners are pursuing a High-Impact Prevention approach. This approach will help achieve greater impact with every federal prevention dollar spent. It seeks to consider program effectiveness and overall impact on the course of the epidemic. While combining effective prevention tools is essential, it is not enough. To maximize reductions in new HIV infections, prevention strategies need to be combined in smart, efficient ways for the most affected populations and areas.

CDC is working nationally and with state and local partners to identify and implement the most cost-effective and scalable interventions in the geographic areas hardest hit by HIV and among the most severely affected populations within those areas.

CDC has already taken a number of steps to advance this approach, including an improved approach to funding distribution, expanding HIV testing, and initiating demonstration projects in many of the hardest-hit communities.

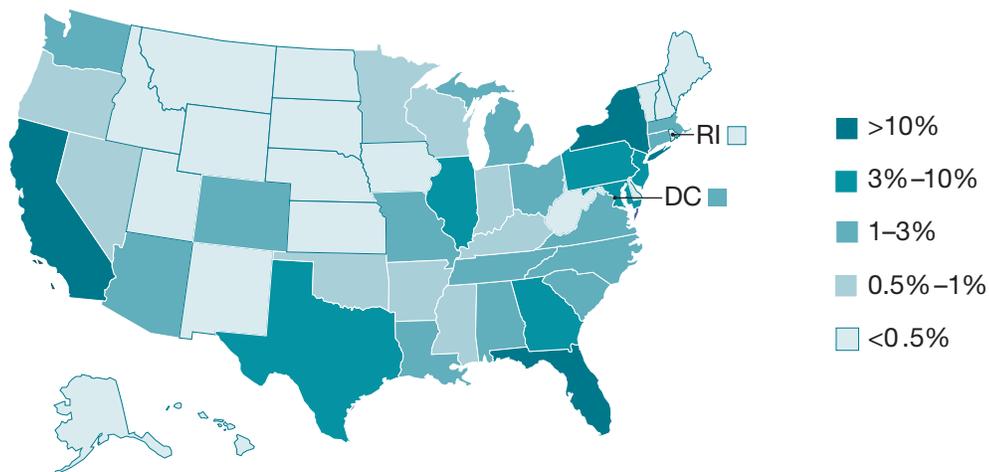
Better Geographic Targeting of Resources: Since June 2011, CDC’s core HIV prevention funding has aligned funds to the current geographic burden of the epidemic. Funding for health departments in states, territories and selected cities is allocated to each area based on the number of people living with an HIV diagnosis in the area.

Additionally, most funding is directed to the prevention activities that are most likely to have significant and lasting results on the HIV epidemic, including HIV testing and comprehensive prevention and care services for HIV-infected individuals and their partners.

Aligning Prevention Funds to the Epidemic

High-Impact Prevention prioritizes funding for geographic areas with the greatest burden of HIV

Targeted Distribution of CDC Core HIV Prevention Funding—FY2016, Based on Proportion of All Americans Diagnosed with HIV Who Live in Each State



* Targets are based on 2008 data and will be adjusted over time. New funding allocation methodology will be fully implemented by FY2016; this breakdown assumes level overall funding.

Expanding HIV Testing: Testing is critical to the nation’s prevention strategy. It is the only way to identify the nearly one in eight Americans living with HIV who do not know they are infected, and it is the first step in connecting them to prevention, care and treatment services. Expanding HIV testing, especially among the populations with the highest rates of HIV infection, is an integral and cost-effective component of prevention efforts.

CDC's three-year Expanded Testing Initiative (ETI) supported state and local health department efforts to provide routine HIV testing in health care and select community settings, with a primary focus on reaching African Americans. Between October 2007 and September 2010, ETI provided nearly 2.8 million HIV tests in 25 U.S. areas most affected by HIV, and diagnosed 18,432 individuals who were previously unaware that they were HIV-positive. Estimates indicate that ETI has saved almost \$2 in medical costs for every dollar invested. ETI has now been expanded to include testing efforts targeting gay and bisexual men, Latinos, and people who inject drugs, and the provision of HIV testing in non-clinical settings, such as pharmacies.

CDC's Expanded Testing Initiative

2.8 million
HIV tests in 3 years

18,432
people learned they
were HIV-positive

Identifying the Combination of Approaches with the Greatest Impact: Most of CDC's HIV prevention budget is directed to health departments and community organizations, which deliver high-impact responses to their communities. Each year, CDC provides more than half a billion dollars to these partners to support HIV testing, prevention, care and surveillance efforts.

In 2014, for example, CDC announced a new five-year, \$215 million funding opportunity for community-based organizations (CBOs) around the country to support a comprehensive approach to reducing HIV risk, including education, condoms, proven behavioral strategies, diagnosis and treatment of sexually transmitted infections, and increased awareness of PrEP among HIV-negative individuals at highest risk. The program also included, for the first time, a major focus on improving outcomes across the care continuum – linking people diagnosed with HIV to medical care; helping them receive and stay on treatment; and providing them with prevention counseling and links to other services such as housing and substance abuse treatment.

Comprehensive Prevention in Action

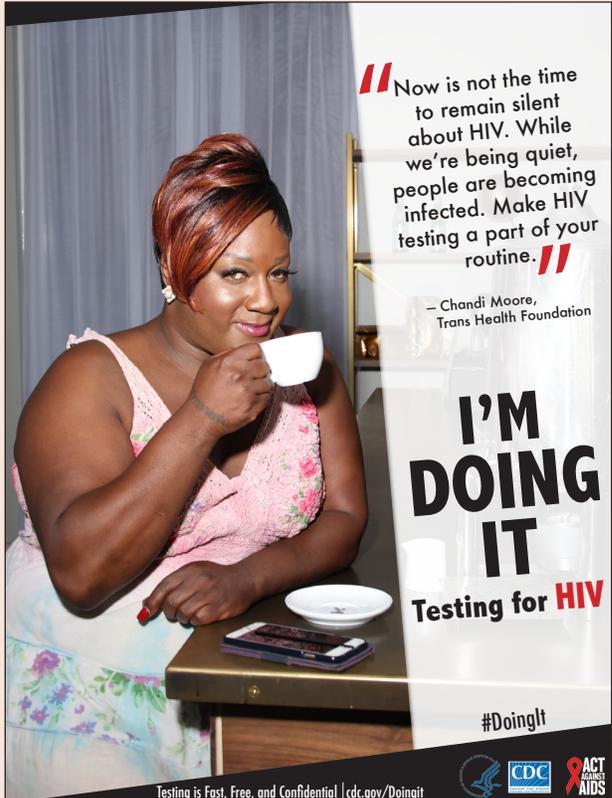
- In **Washington, D.C.**, Us Helping Us, People Into Living (UHU) has provided vital HIV prevention services and other support to African American men and women living with or at risk of HIV for more than three decades. With CDC's support, UHU added a groundbreaking PrEP education and referral initiative to its portfolio of services for HIV-negative clients. UHU's prevention staff now routinely deliver PrEP information to clients at highest risk, along with HIV testing, condoms, evidence-based behavioral strategies and other support. Clients are advised on how to request PrEP from local medical providers, and on which local pharmacies can best fill their prescriptions. They also receive support in obtaining coverage through their health insurers or, if they are uninsured, gaining access through other avenues. UHU's work is conducted in collaboration with the Washington, D.C. Department of Health, another of CDC's essential partners in HIV prevention.
- In **Atlanta**, with the support of CDC funding dedicated to young gay and bisexual men and transgender people, AID Atlanta provides support to young gay and bisexual men of color through counseling, testing and other initiatives. One such initiative is the Evolution Project, an education program featuring a drop-in community center for young black gay men between 18 and 28 years of age. The program creates a safe space that helps young black gay men to connect, develop strengths and skills, support each other, and achieve positive goals. The Evolution Project provides access to HIV testing and STD screening at on- and off-site locations. Members are provided risk counseling and linkage to free medical screenings, case management, HIV/STD treatment and other health care services. It also offers mental health services such as individual, relationship, and group counseling.

The Potential Impact of Prevention

CDC believes that High-Impact Prevention can have a major impact on the U.S. HIV epidemic and will help advance the ambitious goals of the National HIV/AIDS Strategy. The heavy burden of HIV in the United States is neither inevitable nor acceptable. While significant challenges remain, it is possible to end the U.S. epidemic. Such an achievement will require a collective resolve across all sectors of society to intensify our response and alter the current course of HIV. Modeling studies suggest that a substantial impact is possible, but that the degree of impact, both in terms of lives and dollars saved, will depend on how quickly we act and expand access to the most effective prevention approaches.

CDC's HIV Prevention Activities: Four Focus Areas

- **Supporting prevention programs:** CDC provides approximately \$415 million to fund prevention programs in health departments and CBOs working to prevent new HIV infections across the United States, as well as ongoing technical assistance and guidance to implement the most effective prevention programs. CDC also provides \$11.4 million to fund HIV and STD education coordinators in state, local and territorial agencies and tribal governments to help schools implement effective policies and practices.
- **Tracking the epidemic:** CDC coordinates comprehensive national surveillance systems to track the HIV epidemic, risk behaviors and use of health care and prevention services. This information helps ensure that funding is directed to the populations and communities most in need.
- **Supporting prevention research:** CDC supports biomedical, behavioral and operational research to develop new HIV prevention strategies and improve existing programs.
- **Raising awareness:** Through efforts like the *Act Against AIDS* communications campaign and other key partnership activities, CDC works to ensure that all Americans know the facts about HIV, are aware of their status, and understand how to protect themselves.



Now is not the time to remain silent about HIV. While we're being quiet, people are becoming infected. Make HIV testing a part of your routine. //

— Chandi Moore, Trans Health Foundation

I'M DOING IT
Testing for HIV

#DoingIt

Testing is Fast, Free, and Confidential | cdc.gov/DoingIt

ACT AGAINST AIDS

The image shows a woman with short reddish hair, wearing a pink floral top, sitting at a table and drinking from a white coffee cup. To her right is a white sign with black and red text. The sign features a quote from Chandi Moore of the Trans Health Foundation, the slogan 'I'M DOING IT Testing for HIV', the hashtag #DoingIt, and logos for the CDC and the Act Against AIDS campaign. At the bottom of the sign, it says 'Testing is Fast, Free, and Confidential | cdc.gov/DoingIt'.

Doing It is a new national HIV testing and prevention campaign designed to motivate all adults to get tested for HIV and know their status with targeted materials for populations most affected by HIV, such as African American and Latino gay and bisexual men.

If you are a member of the news media and need more information, please visit www.cdc.gov/nchhstp/newsroom or contact the News Media Line at CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 404-639-8895 or NCHHSTPMediaTeam@cdc.gov.