

2017-2021

## HOUSTON AREA COMPREHENSIVE HIV PREVENTION AND CARE SERVICES PLAN

### STRATEGY 1: STRATEGY FOR PREVENTION AND EARLY IDENTIFICATION

#### GOALS

1. Reduce new HIV infections
2. Increase awareness of HIV
3. Increase awareness of HIV status
4. Ensure early entry into care
5. Increase access to antiretroviral therapy (ART) for both treatment and prevention
6. Address the HIV prevention needs of high incidence communities
7. Reduce community risk factors for HIV infection

#### SOLUTIONS

1. Adopt high-impact structural interventions such as governmental policy change and population-based efforts that destigmatize HIV risk reduction and help create unfettered access to HIV information and proven prevention tools
2. Expand opportunities for HIV testing for the general public and in high-incidence populations and communities
3. Increase the timeliness of the linkage to care system for newly-diagnosed HIV+ individuals
4. Expand prevention with positives including treatment adherence and Treatment as Prevention (TasP), HIV prophylaxis including Pre-Exposure Prophylaxis (PrEP), and behavior change interventions for HIV+ individuals and their partners\*
5. Expand opportunities for HIV and sexual health education for the general public high-incidence populations and communities

#### ACTIVITIES (RESPONSIBLE PARTY, TIMELINE)

1. Explore opportunities for cross-representation between the Houston HIV community and School Health Advisory Councils (SHAC) for all school districts within the Houston area (CPG and HHD; annually)

2. Educate Houston Area faith community leadership on HIV information, risk reduction, and prevention tools (CPG; annually)
3. Adopt PrEP uptake marketing models designed to remove stigma. (HHD; 2017)
4. Educate public officials on changing governmental policies that create barriers to HIV prevention information and tools (e.g. repeal the ban on syringe access, access to PrEP, adopt comprehensive sexuality education in schools, etc.) (HHD and CPG; annually)
5. Expand education activities into new MSM and transgender specific community events (HHD; 2020)
6. Disseminate routine testing implementation toolkit to targeted private and non-Ryan White funded providers and FQHCs to facilitate linkage to care. (RWPC/OS; annually)
7. Expand distribution of HIV testing and PrEP information and resources to healthcare providers (HHD and CPG; annually)
8. Education Task Forces, community groups, funded agencies, and non-HHD funded agencies on availability of the Mobile Testing Unit (HHD; as needed)
9. Create and distribute rural referral resource list to DIS (TRG; annually)
10. Explore opportunities to partner with community health workers to support timely linkage to care. (RWGA and HHD; 2021)
11. Pursue strategies to reduce time period between diagnosis and entry into HIV medical care to facilitate timely linkage to care. (HHD, RWGA, and RWPC; 2017)

**ACTIVITIES (RESPONSIBLE PARTY, TIMELINE)**  
**CON'T**

12. Coordinate a workgroup to develop and secure funding for a public service announcement detailing the benefits of treatment adherence, treatment as prevention, and retention in care (RWPC; 2019)
13. Expand materials education PLWH and partners about PrEP and treatment as prevention. (HHD; 2018)
14. Hold consumer PrEP and treatment as prevention education forums. (RWPC and HHD; annually)
15. Explore feasibility of same-day PrEP initiation for high-risk HIV negative individuals (HHD; 2019)
16. Identify methods for measuring local online HIV and sexual health information seeking (HHD; 2017)
17. Explore opportunities to expand community access to local academic research findings. (HHD; 2020)

**BENCHMARKS**

1. Reduce the number of new HIV infections diagnosed in the Houston Area by at least 25% (1,386 to 1,004)
2. Maintain the number of HIV/STD brochures distributed (88,700)
3. Maintain the number of publicly-funded *targeted* HIV tests (10,109); Maintain the number of publicly-funded *routine* HIV tests (117,610)
4. Maintain the positivity rate for publicly-funded targeted HIV testing (3.01%)
5. Maintain or, if possible, increase the percentage of individuals with a positive HIV test result identified through targeted HIV testing who are informed of their HIV+ status (from 93.8%)
6. Decrease the percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year by at least 25% (24.6% to 19.4%)

7. Increase the proportion of newly-diagnosed individuals linked to clinical care within one month of their HIV diagnosis to at least 85% (from 69.8%)
8. Maintain or, if possible, increase the proportion of Ryan White HIV/AIDS Program clients who are virally suppressed (from 80.4%)
9. Increase the percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed to at least 80% (from 60%)
10. Decrease the number of new HIV infections in high HIV/STD morbidity zip codes targeted for intervention by at least 25%, including:
  - a. Sharpstown (77036 and 77074) (56 to 42)
  - b. Sunnyside/South Park (77033 and 77051) (34 to 26)
  - c. Greater 5th Ward (77020 and 77026) (28 to 21)
  - d. Acres Home (77088 and 77091) (32 to 24)
  - e. Montrose (77006) (26 to 20)
11. Decrease the rate of STD infection per 100,000 population for:
  - a. Chlamydia (563.7 to 510.3)
  - b. Gonorrhea (162.5 to 157.0)
  - c. Primary and secondary syphilis (8.2 to 6.7)
12. Maintain the number of condoms distributed (450,000)
13. Maintain the number of high-risk individuals that complete an evidence-based behavioral intervention to reduce risk for HIV (4,944)
14. Increase the percentage of prevention and care staff receiving standardized PrEP training to 100% (Baseline to be developed)

**BENCHMARKS CON'T**

15. Increase the number of MSM and transgender persons of color receiving pre-exposure prophylaxis (PrEP) education to at least 2,000 annual (Baseline to be developed)
16. Increase the percentage of HIV-negative clients screened for PrEP eligibility by 10% (Baseline to be developed)