Presidential Advisory Council on HIV/AIDS: ONAP Update

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Developing the National HIV/AIDS Strategy

- Modifications to add **Builds on HIV National Strategic Plan (Jan. 2021)**
- Returning to NHAS title
- Will span years 2022–25
- Revisions will include:
  - Modifications to address Biden–Harris administration priorities;
  - Most recent data and research findings; and
  - Engagement of additional Federal Departments and programs.

- Process involves:
  - Revisions and additions from 6 Federal Departments and 12 agencies and offices that co-developed the HIV Plan
  - Input from additional Federal Departments and programs
  - Recommendations received from many community stakeholders
  - Review by federal departments

Moving quickly: December 1, 2021, release
Expanded Federal Agencies Engaged in NHAS

ONAP has increased engagement of the following Federal Departments that support work at the state and local levels which influences the quality of life for people with HIV:

- Department of Agriculture
- Department of Education
- Department of Labor
- Department of Housing and Urban Development (programs beyond the Housing Opportunities for Persons With AIDS [HOPWA] program)
- Department of Veterans Affairs (previously engaged and developing a plan to end HIV among U.S. veterans)
National HIV/AIDS Strategy—Elements

• Vision
• Four goals
  – Objectives for each goal
  – Strategies for each objective
• Priority populations
• 9 core Indicators of progress
Vision

• The United States will be a place where new HIV infections are prevented, every person knows their status, and every person with HIV has high-quality care and treatment, lives free from stigma and discrimination, and can achieve their full potential for health and well-being across the lifespan.

• This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographic location, or socioeconomic circumstance.
National HIV/AIDS Strategy—Elements

• Details 21 objectives and 78 strategies for federal and nonfederal stakeholders to implement to achieve the Strategy’s goals.

• Identifies 9 core indicators to monitor national progress, establishes a disparity indicator stratified by the priority populations to measure progress toward reducing significant HIV-related disparities, and identifies the topic of a new indicator to be developed.
The Strategy adopts bold targets for ending the HIV epidemic in the United States by 2030, calling for a 75% reduction in new HIV infections by 2025 and a 90% reduction by 2030.

To monitor our progress in addressing HIV disparities, the viral suppression indicator is monitored for the priority populations.

Stigma Indicator, HIV Homelessness Indicator and Increase LGBTQ-supportive school policies and practices

One key issue, quality of life for people with HIV, was designated as the subject for a developmental indicator, meaning that data sources, measures, and targets will be identified and progress monitored thereafter.
Developing the National HIV/AIDS Strategy (2022–25) – Modifications

• Incorporates the latest data on HIV incidence, prevalence, and trends.

• Is an equitable and people-centered approach to the nation’s HIV response that calls for a focus on populations and geographic areas of the country that are disproportionately impacted.

• Emphasizes engaging people with lived experience in the research, planning, delivery, assessment, and improvement of HIV prevention, testing, and care services.

• Adds a new focus on the needs of the growing population of people with HIV who are aging.

• Enhances a focus on quality of life for people with HIV

• Expands discussion of populations living with or experiencing risk for HIV whose unique circumstances warrant specific attention and tailored services such as immigrants, individuals with disabilities, justice-involved individuals, older adults, people experiencing housing instability or homelessness, and sex workers.
Developing the National HIV/AIDS Strategy (2022–25) – Modifications

• Puts greater emphasis on the important roles of harm reduction and SSPs in our national response to HIV as well as hepatitis C virus infection and substance use disorder

• Strengthens emphasis on the importance of better integrating responses to the intersection of HIV, viral hepatitis, STIs, and substance use and mental health disorders.

• Expands the focus on addressing the social determinants of health that influence an individual’s HIV risk or outcomes.

• Underscores the vital role that the Affordable Care Act plays in our response to HIV and calls for leveraging the preventive and care services available through the resulting coverage.

• Recognizes racism as a serious public health threat that directly affects the well-being of millions of Americans, acknowledges ways it drives and affects HIV outcomes, highlights numerous opportunities to intervene to eliminate the HIV-related disparities that result and pursue equity in our national HIV response.

• Implementation will begin in early 2022
  – ONAP to work with federal partners on a federal implementation plan
  – Will align with implementation plans for National Strategic Plans for Viral Hepatitis and STIs which are already being developed

• Success requires engagement of nonfederal partners across the nation
  – Federal partners to work to engage grantees, healthcare professionals (HCPs), and other stakeholders
  – ONAP to work with PACHA on new ways to engage private sector in key areas for impact
Open enrollment for 2022 coverage

- Monday, November 1, 2021, through Saturday, January 15, 2022
- Many resources available on healthcare.gov’s Get Ready to Apply page
  - Checklist to get ready to apply
  - Find local help for enrollment

- Organizations are encouraged to become a “Champion for Coverage” to provide outreach and education about marketplace enrollment to under- or uninsured communities.