

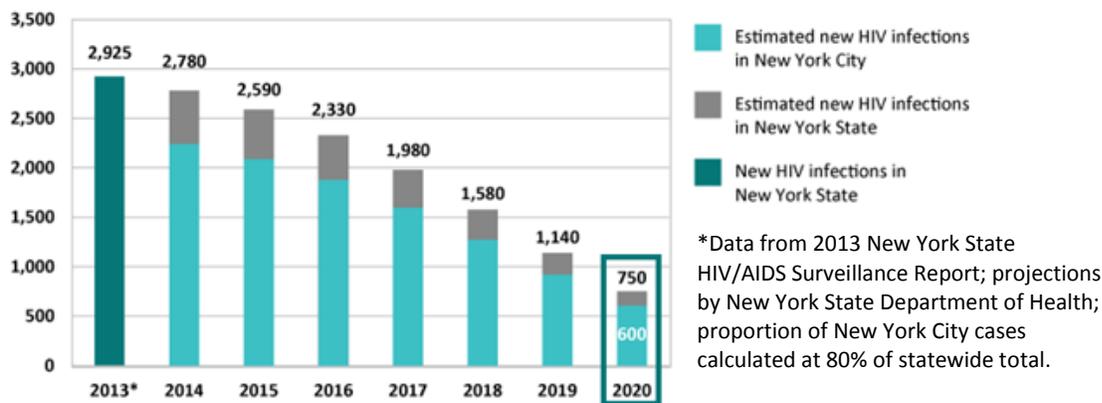
New York City Department of Health and Mental Hygiene

Ending the Epidemic (EtE) Is Our Strategy to End HIV/AIDS in New York City

The New York City Department of Health is working to reduce the number of new infections in the City to fewer than 600 in 2020. This target aligns with New York State’s goal of reducing new statewide infections to fewer than 750 in 2020. Our EtE strategy is a key component of the New York State Blueprint for ending the AIDS epidemic.

Actual New HIV Infections in New York State, 2013

Estimated New HIV Infections in New York State and City, 2014-2020



Using the New York State Blueprint, we consulted with local stakeholders and community advocates and collaborated with the HIV/AIDS Services Administration, City Hall and City Council to develop our four-part strategy to end New York City’s epidemic of HIV. The Department of Health has a history of robust and innovative programming to prevent and treat HIV/AIDS, and the EtE strategy builds upon our core activities to address perceived gaps and leverage exciting new biomedical prevention technologies. **The strategy’s four primary objectives are to:**

1. Increase Access to HIV Prevention Services

Raise New Yorkers’ awareness about post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) as treatments that can prevent HIV transmission. Ensure that anyone at risk for HIV can easily access a prescription for these biomedical preventative interventions.

- ◆ Create a citywide “PrEP Network” by coordinating among clinics, testing sites, and community based-settings to promote comprehensive access to prevention services
- ◆ Open PEP ‘Centers of Excellence’ throughout New York City and a 24-hour PEP call center
- ◆ Support clinics to launch combination prevention programs focused on young patients
- ◆ Expand our popular #PlaySure marketing campaign using classic and new media
- ◆ Scale up our detailing campaign to educate more providers about PrEP and PEP

2. Promote Innovative, Optimal Treatment for HIV

Link New Yorkers who are HIV-positive to high-quality care, including both new diagnoses and those who have fallen out of care. Facilitate best practices for improving viral suppression among those who are receiving antiretroviral treatment (ART).

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- ◆ Contract with non-profit organizations that provide HIV care and support services to implement the “Undetectables” model and incentivize viral load suppression
- ◆ Establish a best practices learning collaborative for New York City clinics

3. Enhance Methods for Tracing HIV Transmission

Employ state-of-the-art scientific methods to “fingerprint” HIV strains in real time, allowing Health Department staff to map possible transmission networks, identify New Yorkers who may be at risk or infected with HIV, and provide them with timely partner notification and linkage to care.

- ◆ Equip the New York City Public Health Laboratory to conduct HIV phylogenetic testing
- ◆ Integrate laboratory processes and findings into protocols for field work and outreach
- ◆ Pilot the system at our sexual health clinics then roll out citywide

4. Improve Sexual Health Equity for All New Yorkers

Educate local providers about holistic, culturally-informed sexual health care for all, including LGBTQ New Yorkers. Expand and develop community programs that target populations disproportionately affected by HIV/AIDS.

- ◆ Host symposia to increase provider capacity in highly impacted neighborhoods
- ◆ Circulate a “LGBTQ Patient Bill of Rights” to empower LGBTQ patients to seek optimal care
- ◆ Support the #BeHIVSure LGBTQ Coalition to identify targeted strategies for ending HIV
- ◆ Bolster transgender health education organizations and programming
- ◆ Contract with community-based organizations to help manage use and reduce harms associated with intravenous drug and crystal methamphetamine use

The Entire EtE Strategy Is Being Put into Practice at Our Sexual Health Clinics

We are enhancing our sexual health clinics to provide welcoming, high-quality care to even more New Yorkers in need, regardless of their immigration status or ability to pay. This includes:

- ◆ Improving clinic facilities and extending hours of operation
- ◆ Expanding menu of available services by restoring or implementing the following:
 - ◇ Screenings for asymptomatic patients, called “Express Visits”
 - ◇ Testing for herpes, trichomoniasis, anal and cervical dysplasia, and gonorrhea and chlamydia at new anatomical sites (throat and anus)
 - ◇ Vaccination for human papilloma virus (HPV)
 - ◇ Prescriptions for “Quick Start” contraceptives
- ◆ Offering the full 28-day course of PEP or initiation of PrEP and navigation to a vetted provider for continuation of therapy
- ◆ Providing immediate initiation of ART for new HIV diagnoses
- ◆ Educating clinic patients about the new services and their importance to their health with updated materials and a new “waiting room” video
- ◆ Launching promotional campaigns to increase awareness of clinic services citywide

Learn more about our Sexual Health Clinics at nyc.gov/health/clinics.

Learn more about the EtE strategy at nyc.gov/health/ete or by emailing ete@health.nyc.gov.