

Fast-Track Cities: Opportunities for Implementation Science

Our Data-Driven Approach to Ending the Epidemic in New York City

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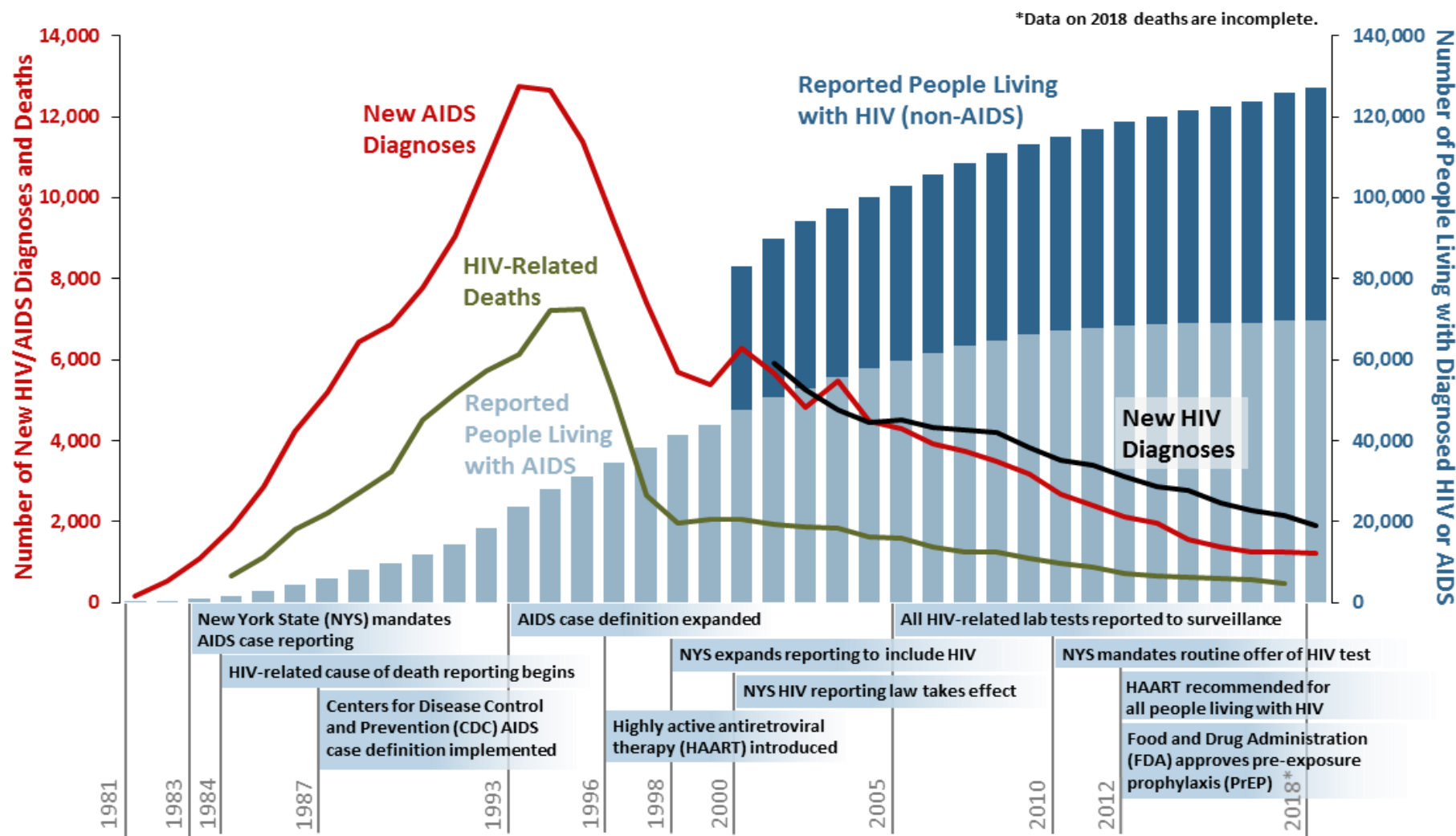
Outline

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- HIV Data Collection in New York City
- Tracking Progress Towards Ending the Epidemic in New York City
- New York City Ending the Epidemic Plan
- New York City's Data-Driven Approach to Ending the Epidemic
- Focus Area 1: Using Data to Drive Prevention Programming
- Focus Area 2: Using Data to Drive Intervention
- Focus Area 3: Using Data to Improve Care and Supportive Services

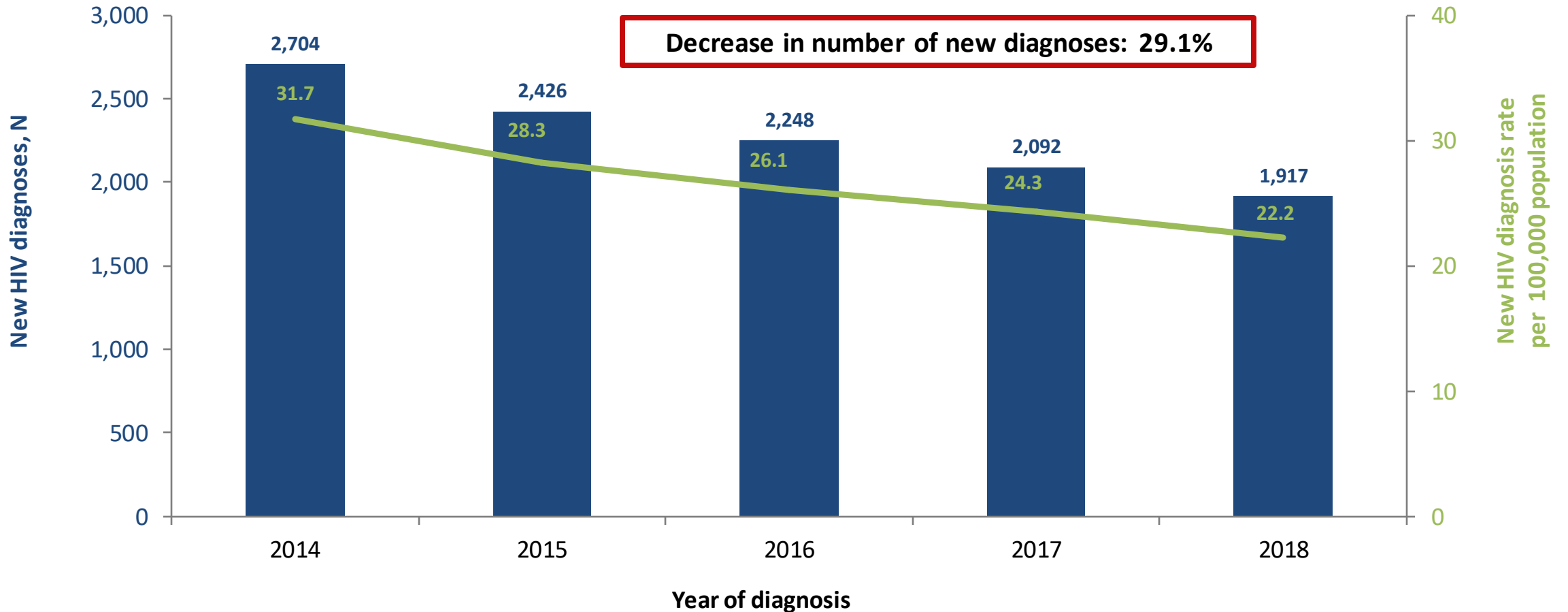
An aerial photograph of New York City, showing a dense urban landscape with numerous skyscrapers and buildings. The image is overlaid with a semi-transparent purple filter. In the background, the Hudson River and the New York City skyline are visible, including the Freedom Tower. The text "HIV in New York City" is centered over the image in a white, sans-serif font.

HIV in New York City

History of the HIV Epidemic in New York City

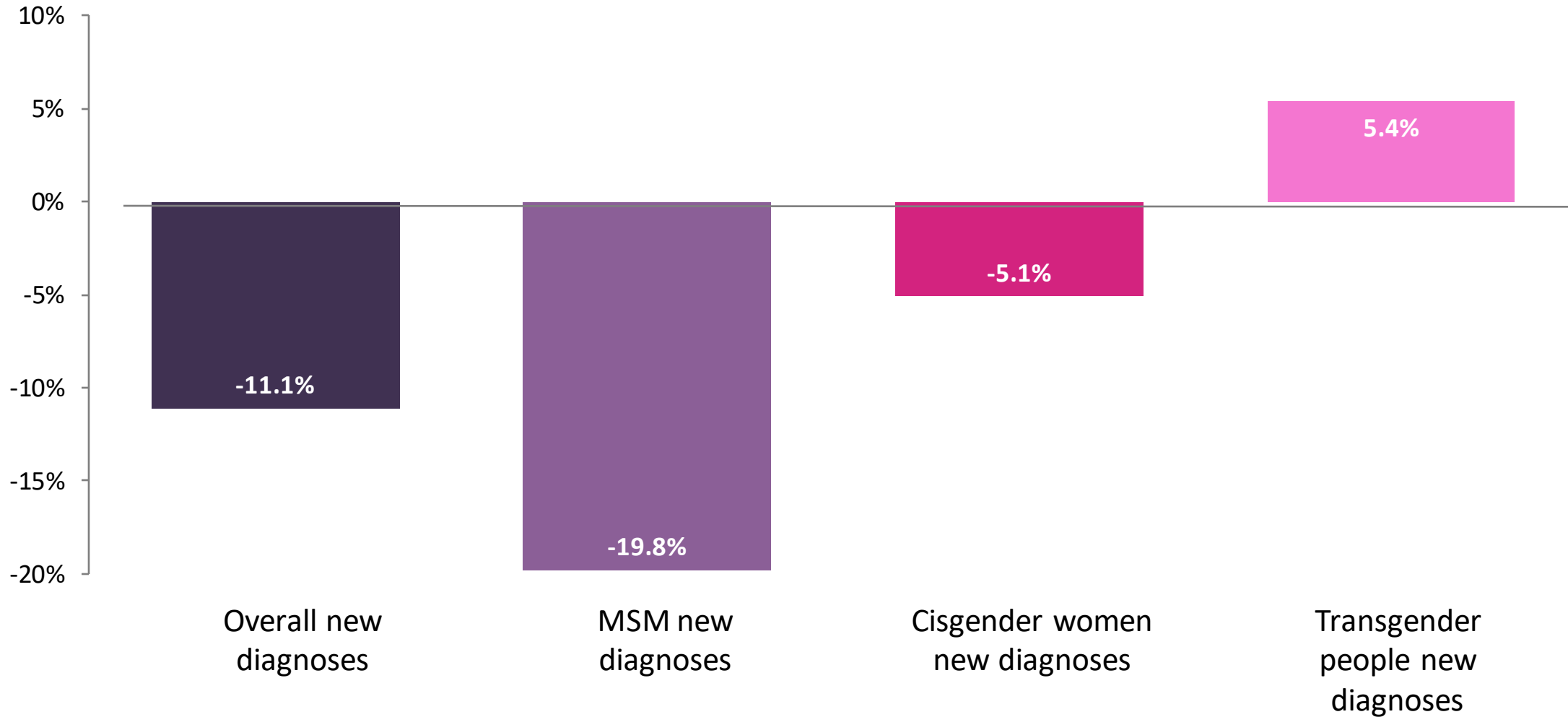


New HIV Diagnoses in New York City, 2014–2018



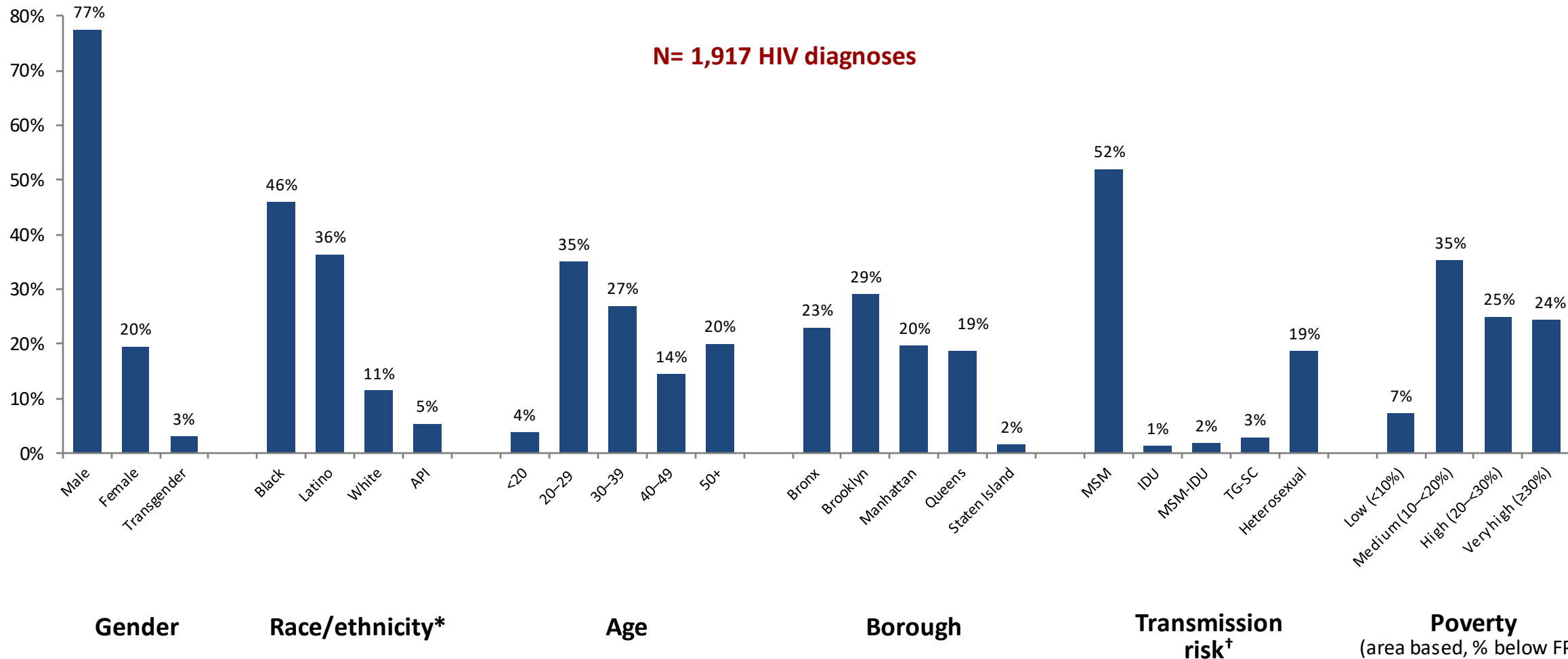
The number and rate of new HIV diagnoses decreased in New York City between 2014 and 2018

Percent Changes in New HIV Diagnoses in New York City, 2017–2018



New HIV Diagnoses in New York City, 2018

N= 1,917 HIV diagnoses



As reported to New York City Health Department by Mar 31, 2019

*Native American and multiracial groups not shown. There were N=1 new HIV diagnosis among Native American people, and N=17 new HIV diagnoses among multiracial people in New York City in 2018; †Other transmission risk not shown. There was N=1 other transmission risk among new HIV diagnoses in New York City in 2018

API, Asian/Pacific Islander; FPL, federal poverty level; IDU, injection drug use history; TG-SC, transgender people with sexual contact

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HIV Data Collection in New York City

HIV Surveillance and Other Data Collection

- NYC HIV surveillance and partner services
- NYC Sexual Health Survey
- NYC Community Health Survey
- Medical Monitoring Project
- National HIV Behavioral Surveillance study



An aerial photograph of New York City, showing a dense urban landscape with numerous skyscrapers and buildings. The image is overlaid with a semi-transparent purple filter. The text "Tracking Progress Towards Ending the Epidemic in New York City" is centered in the middle of the image in a white, sans-serif font.

Tracking Progress Towards Ending the Epidemic in New York City

HIV Surveillance Publications



New York City Health Department's **HIV Surveillance Annual Reports** feature graphic trends in HIV diagnoses over time for key populations, geographic distribution of HIV, and key outcomes, including linkage to care and viral suppression among people newly diagnosed with HIV, viral suppression among people with HIV, and survival and mortality among people with HIV

Other publications include **HIV Surveillance Mid-Year Reports, Annual Surveillance Statistics tables**, and **annual slide sets** describing HIV among certain groups (e.g., MSM, women, youth and older adults) and by borough of residence, and the care and clinical status of people with HIV

ETE Dashboard

Launched in 2015, the **ETE Dashboard** extends and enhances the use of data to measure, track, and disseminate actionable information on progress towards ending the epidemic in NYS. The ETE Dashboard tracks several sets of metrics, including:



- HIV prevention (e.g., PrEP and PEP use, PrEP awareness, condom use)
- New HIV infections
- HIV testing
- New HIV diagnoses and linkages
- HIV prevalence and care
- AIDS diagnoses
- Deaths among people with HIV and HIV-related deaths

Fast-Track Cities HIV Dashboard



New York City became a Fast-Track City in 2016. Our **Fast-Track Cities HIV Dashboard** tracks several metrics, including:

- HIV diagnosis rate
- HIV prevalence
- Age-adjusted death rate

The HIV Dashboard also features the New York City Care Continuum and our progress toward the UNAIDS 90-90-90 goals. In December 2019, New York City announced it had reached the 90-90-90 goals two years ahead of schedule, making it the first Fast-Track City in the US to reach the milestone. As of 2018 in New York City, 93% of people with HIV have been diagnosed, 90% of people diagnosed with HIV are on treatment, and 92% of people on treatment are virally suppressed

An aerial photograph of New York City, showing a dense urban landscape with numerous skyscrapers and buildings. The image has a blue tint. The title text is centered over the middle of the image.

New York City Ending the Epidemic Plan

New York City Ending the Epidemic Plan

- **Strategy 1:** Increase the number of people who know their HIV status by diagnosing HIV infection as early as possible, promoting routine testing within health care facilities, and scaling up testing options in non-clinical settings
- **Strategy 2:** Prevent new HIV acquisition by increasing access to effective prevention interventions, including PrEP, PEP, condoms, harm reduction, and supportive services
- **Strategy 3:** Improve viral suppression and other health outcomes for people with HIV by optimizing medication adherence and access to care, improving coordination of clinical and supportive services, and increasing access to immediate antiretroviral treatment
- **Strategy 4:** Enhance methods to identify and intervene on HIV transmission networks to better support individuals and communities at increased risk of exposure
- **Strategy 5:** In all strategies, utilize an intersectional, strengths-based, anti-stigma, and community-driven approach to mitigate racism, sexism, and other systems of oppression that create and exacerbate HIV-related health inequities

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New York City's Data-Driven Approach to Ending the Epidemic

Data-Driven Approaches to Ending the Epidemic

New York City Health Department uses data and research to shape the design, implementation, and evaluation of its efforts to end the HIV epidemic in New York City, including those related to:

- HIV testing
- PrEP and PEP awareness and uptake
- Sexual health marketing campaigns
- Partner services and data to care
- Provider support and technical assistance
- Care coordination and service delivery
- Community engagement

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Focus Area 1: Using Data to Drive Prevention Programming

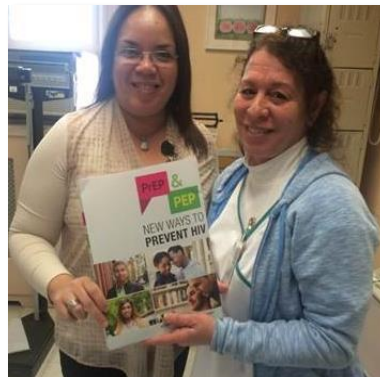
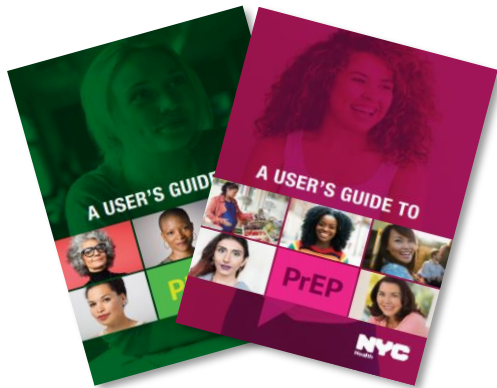
Focus Area 1: Using Data to Drive Prevention Programming

- PrEP and PEP public health detailing campaigns, with the latest wave focusing on women's health care providers
- Online and community-based HIV Home Test Giveaways
- Sexual health social marketing campaigns
- PrEP, PEP, and other prevention programming and services

Focus Area 1: Using Data to Drive Prevention Programming

Launched in May 2019, the New York City Health Department's PrEP and PEP detailing campaign focusing on women's health care involved highly-trained teams conducting one-on-one educational visits with providers

The campaign's PrEP and PEP Action Kits and visits supported core HIV prevention practices providers can adopt, including taking a thorough sexual history, screening and treating for STIs, discussing PrEP and PEP with HIV-negative patients, and prescribing PrEP and PEP



Focus Area 1: Using Data to Drive Prevention Programming

We conducted formative research to develop our PrEP and PEP detailing campaign focused on women's health care providers, including:

- **Key informant interviews and focus group discussions** assessed women's health care prescribing providers' experience assessing HIV/STI risk and taking a sexual history; PrEP and PEP knowledge, attitudes, and practices; and training and resource needs
- **Qualitative data collection** to inform the revision of our existing PrEP and PEP detailing campaign Public Health Action Kit, including:
 - Provider and patient-facing materials addressed knowledge gaps and priorities for cisgender and transgender women and their providers
 - Fact sheet on HIV epidemiology among women
 - Community consultations and focus groups of cisgender and transgender women to guide parallel social marketing campaign
- **HIV and STI surveillance data** to identify and prioritize providers in areas with high rates of new HIV diagnoses

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Focus Area 2: Using Data to Drive Interventions

Focus Area 2: Using Data to Drive Interventions

“Data to Care” refers to the use of HIV surveillance data by health departments to identify people for assistance with engagement or re-engagement in HIV care. Data to care activities are well-established in New York City:

- Established in 2006, New York City Health Department’s partner services program works to interview all people newly diagnosed with HIV, assist with linkage to HIV care, and provide partner services, including HIV testing, linkage to care, and referral to PrEP for exposed partners
- The partner services program uses HIV laboratory data reported to the surveillance system to identify people who may be out of HIV care or who never linked to care after HIV diagnosis for re-engagement services



Focus Area 2: Using Data to Drive Interventions

Molecular surveillance in New York City aims to identify transmission clusters and surrounding risk networks and prioritize outreach to provide critical services

- **2016–2018 demonstration project** to assess feasibility of early ascertainment of clusters involving people newly diagnosed with HIV and timely identification of and outreach to members of transmission networks
- **Project Sol (CDC PS17-1711) demonstration project** to identify HIV clusters involving Latino MSM newly diagnosed with HIV and deliver high-impact prevention to cluster members and the broader community
 - Outreach to members of those networks who are out of care or are in care but in need of assistance
 - Ongoing partner services to identify partners in need of HIV testing, referral for prevention services (e.g., PrEP), or linkage to care
- **Citywide molecular surveillance** to identify HIV clusters

An aerial photograph of the New York City skyline, featuring numerous skyscrapers and dense urban development. The image is overlaid with a semi-transparent purple filter. In the center, a dark horizontal band contains white text.

Focus Area 3: Using Data to Improve Care and Supportive Services

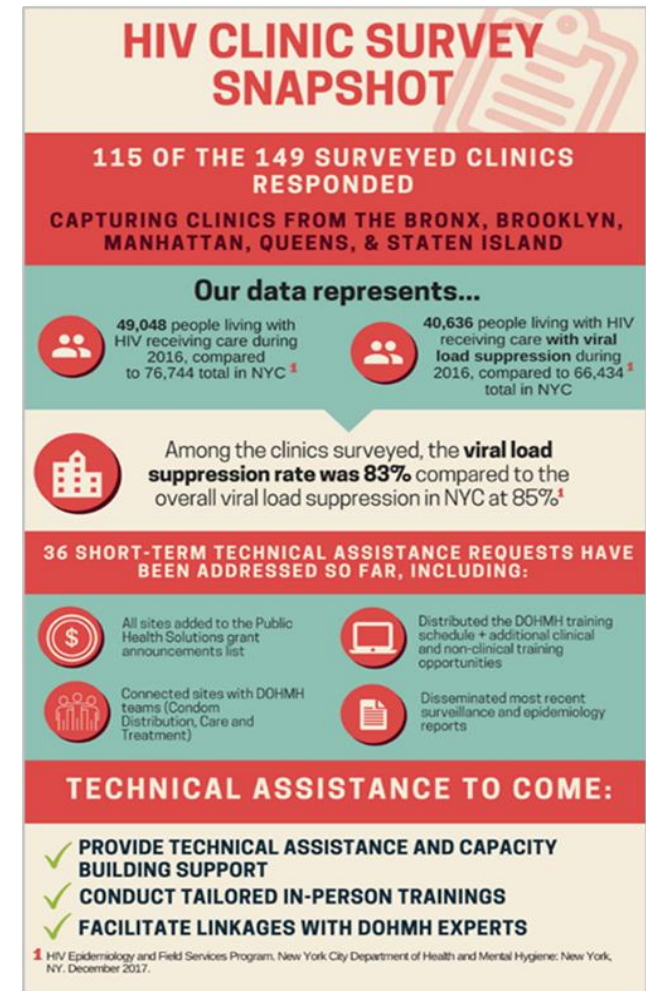
Focus Area 3: Using Data to Improve Care and Supportive Services

- NYC/NYS HIV Clinic Survey
- *STEPS to Care*
- HIV Care Continuum Dashboards
- Ending the Epidemic Technical Assistance visits
- Care Coordination Program
- Funding support for community-based organizations and clinics providing care and treatment programming and services
- Provider tool to help identify and address unmet needs among older people with HIV
- Provider-facing guidance and trainings

Focus Area 3: Using Data to Improve Care and Supportive Services

NYS/NYC HIV Clinic Survey

- In 2017, the Clinical Operations and Technical Assistance (COTA) Program conducted a survey of 115 New York City HIV clinics
- Objectives: identify clinic attributes associated with higher VLS; identify areas for technical assistance and support to improve VLS rates
- Survey questions covered:
 - Clinic information
 - Staffing and duties
 - Patient caseload and characteristics
 - Client access, retention, and adherence
 - Data management and capacity
 - Challenges and priorities
- Informed the design and approach of technical assistance visits to participating clinics




Focus Area 3: Using Data to Improve Care and Supportive Services

STEPS to Care Toolkit

- Online toolkit to support engagement in HIV care
- Promotes three linkage, retention, and reengagement strategies:
 - Patient Navigation
 - Care Team Coordination
 - HIV Self-Management
- Paired with support for providers through the DOHMH Capacity Building Assistance (CBA) program





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