



# Aligning Priorities: HIV Implementation Science in Action

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# Conflict disclosure statement

*I have no conflicts to report.*



# Overview

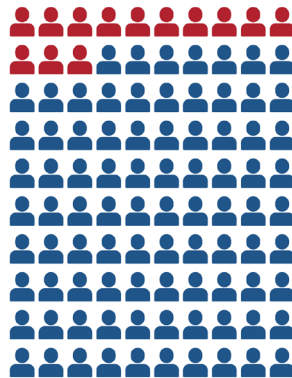
- Snapshot of the HIV pandemic
- Opportunities to promote the science of whole person health in HIV
- OAR's role in coordinating the NIH HIV research agenda
- Spotlight on OAR focus areas and activities



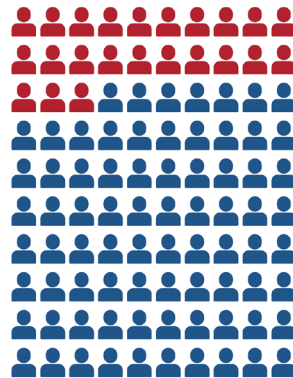
# The global pandemic continues

- 40.8M living with HIV
  - 53% women and girls
- 1.3M newly acquired HIV
- 630K died from AIDS-related illnesses
- 7 countries in sub-Saharan Africa and 2 in Europe reached the UN's "95-95-95" target

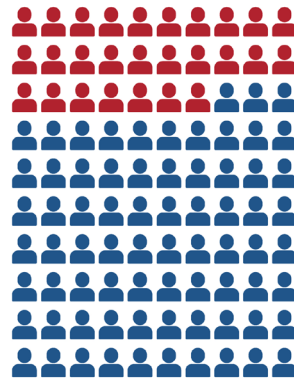
For every **100** people worldwide with HIV



**13** didn't know they had HIV



**23** didn't receive HIV care

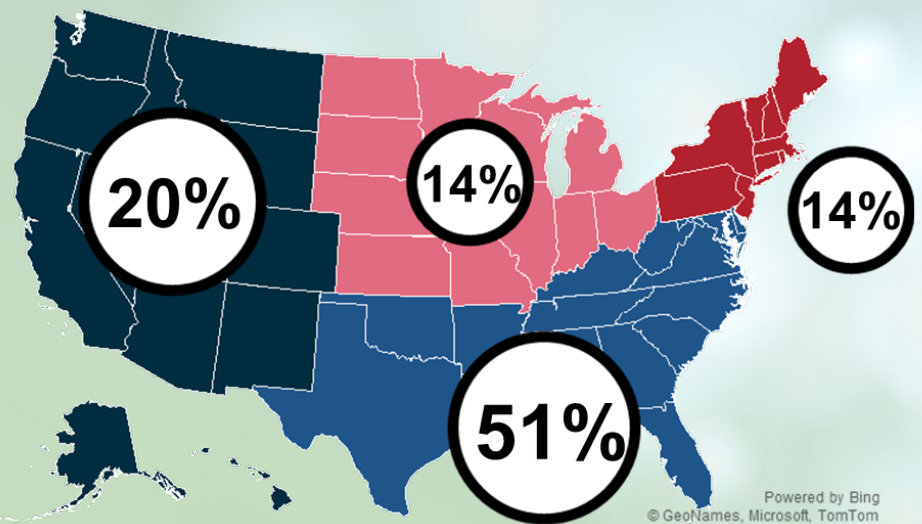


**27** weren't virally suppressed



# The HIV epidemic in the U.S.

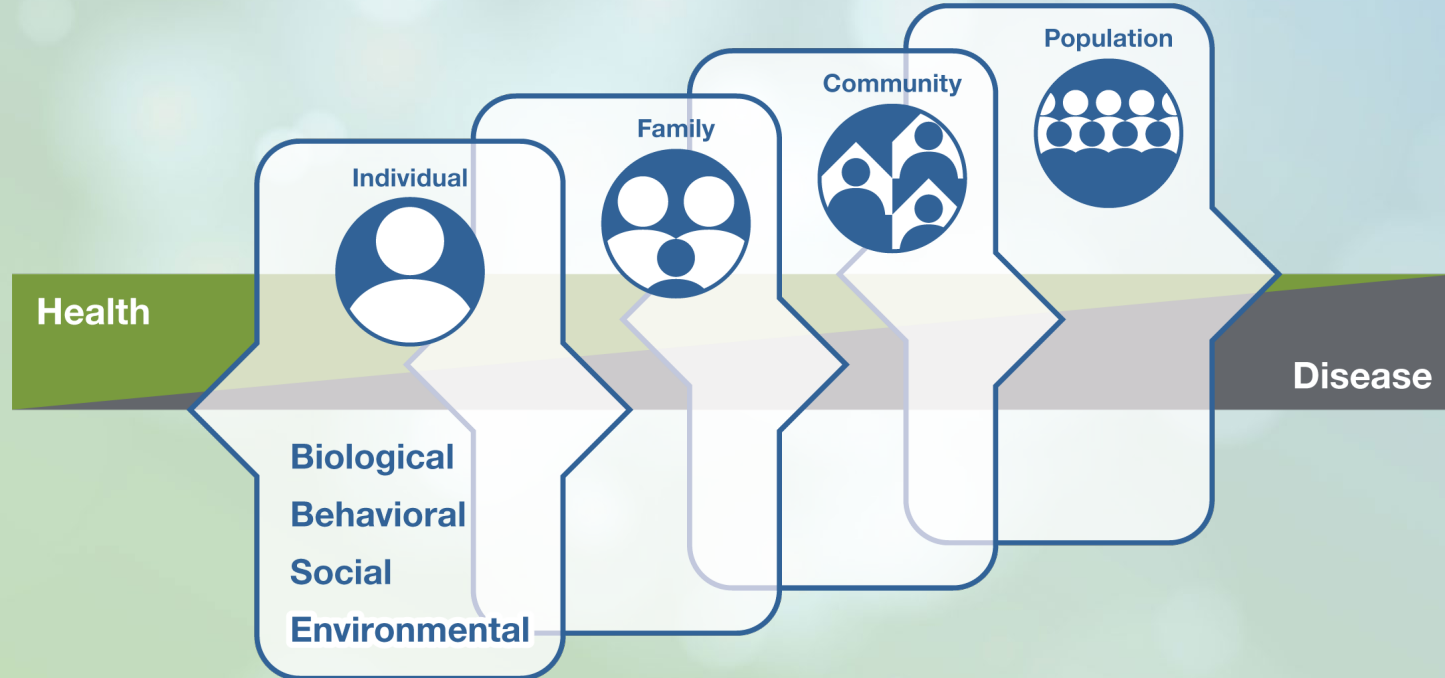
## New HIV diagnoses by region in 2024



- **New diagnoses: 39K**
  - Nearly 1 in 5 are ages 13-24
  - 1 in 5 are women
- **Breakdown by race and ethnicity**
  - Black or African American: 39%
  - Hispanic or Latino: 33%
  - White: 21%
- **Prevalence: 1.1M Americans**
  - Nearly 1 in 4 are women
  - Most are age 50 or older



# Adopting a whole person health perspective





# HIV research addresses sex and lifespan considerations



**Fundamental  
Research**

**Preclinical  
Research**

**Intervention  
Research**

**Implementation  
Research**

**Sex and Lifespan Considerations**

**Population Health**

Optimal health for all people with and impacted by HIV at every age and every stage.



# The gray tsunami: Aging with HIV represents a new phase of the epidemic



## Aging with HIV is associated with:

- Frailty and functional decline
- Neurocognitive changes
- Polypharmacy
- Social isolation and caregiver needs
- Multiple chronic conditions

[Eke UA et al. \*J Frailty Aging\*. 2023;12\(1\):49-58.](#)

[Bennett T et al. \*AIDS\*. 2025;39\(3\):215-228.](#)

[Ruiz EL et al. \*Curr Opin HIV AIDS\*. 2022;17\(2\):55-64.](#)

[Collini P et al. \*Curr Opin Infect Dis\*. 2023;36\(1\):9-14.](#)



# Women aging with HIV experience unique challenges



- Higher burden and earlier onset of co-occurring conditions
- Sex-specific differences in:
  - Immune response
  - ART pharmacokinetics and toxicity
- Unique reproductive health considerations
- Earlier onset and more severe symptoms of menopause

[Collins LF et al. JAMA Netw Open. 2023;6\(8\):e2327584.](#)

[Moran JA et al. Front Immunol. 2022;13:905773.](#)

[Chakalisa UA et al. Curr Opin Infect Dis. 2026;39\(1\):16-21.](#)



# Co-occurring conditions drive morbidity and quality of life

**People with HIV experience higher rates of:**

- Cardiovascular disease
- Kidney and liver disease
- Bone disease and fractures
- Diabetes and metabolic disorders
- Neurocognitive impairment
- Certain cancers





# Quality of life is a critical outcome in HIV care



**Reflects how individuals perceive their:**

- Physical health
- Mental and emotional well-being
- Social relationships
- Independence
- Living conditions
- Overall life satisfaction

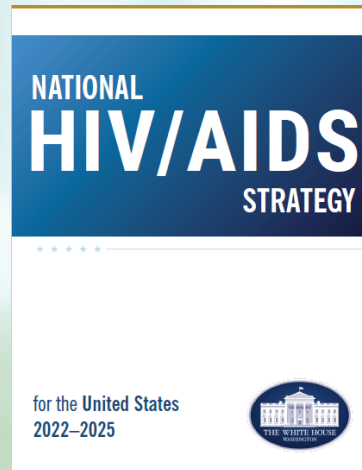


# Different frameworks measure different dimensions of QoL

World Health Organization  
(WHOQOL-HIV BREF)



National HIV/AIDS Strategy  
(NHAS) QoL Framework



CDC Medical Monitoring Project (MMP)





# QoL: Where We Stand

QoL Measure	Recent Changes (2018-2022)
Self-rated physical health (good, very good, or excellent health)	Stable at ~70%
Unstable housing or homelessness	Improved from 21.0% to 17.9%
Unemployment	Improved from 16.8% to 11.3%
Food insecurity	Improved from 21.5% to 18.6%
HIV stigma	Improved from 31.2% to 29.3%
Unmet mental health service needs	Worsened from 19.8% to 26.8%



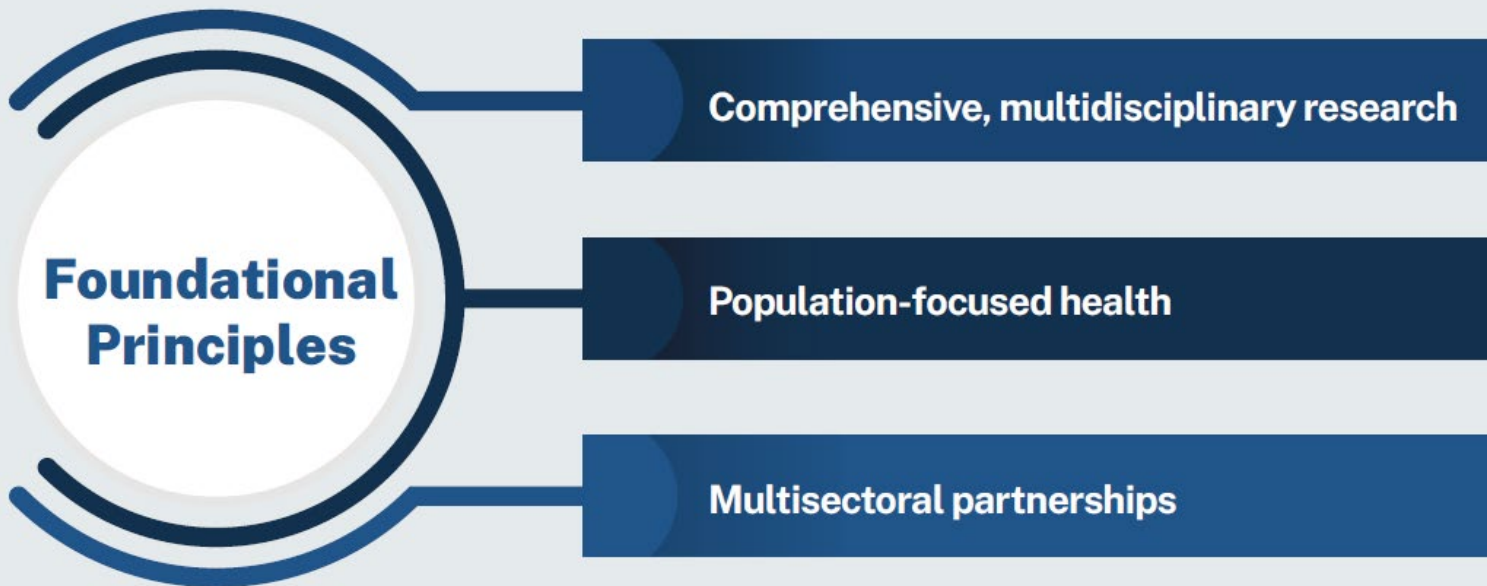
# OAR coordinates the complex NIH HIV research program



- More than 20 NIH Institutes and Centers award grants with HIV/AIDS funding.
- In FY25, \$3.29B in HIV/AIDS funding supported more than 3,800 awards across NIH.



# Foundational principles guiding the next NIH HIV research strategic plan





# OAR focus areas



HIV and Co-occurring  
Conditions



HIV and Aging

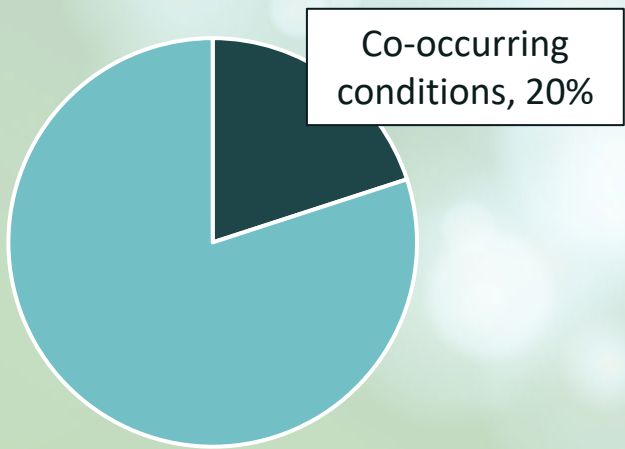


HIV and Women

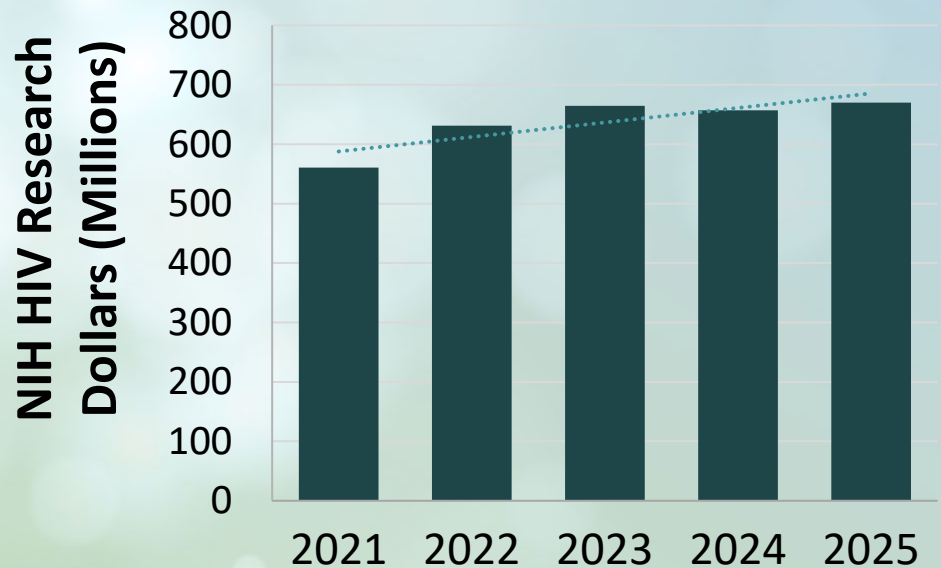


# 20% of HIV funding supports research on co-occurring conditions

HIV research funding, FY21-25

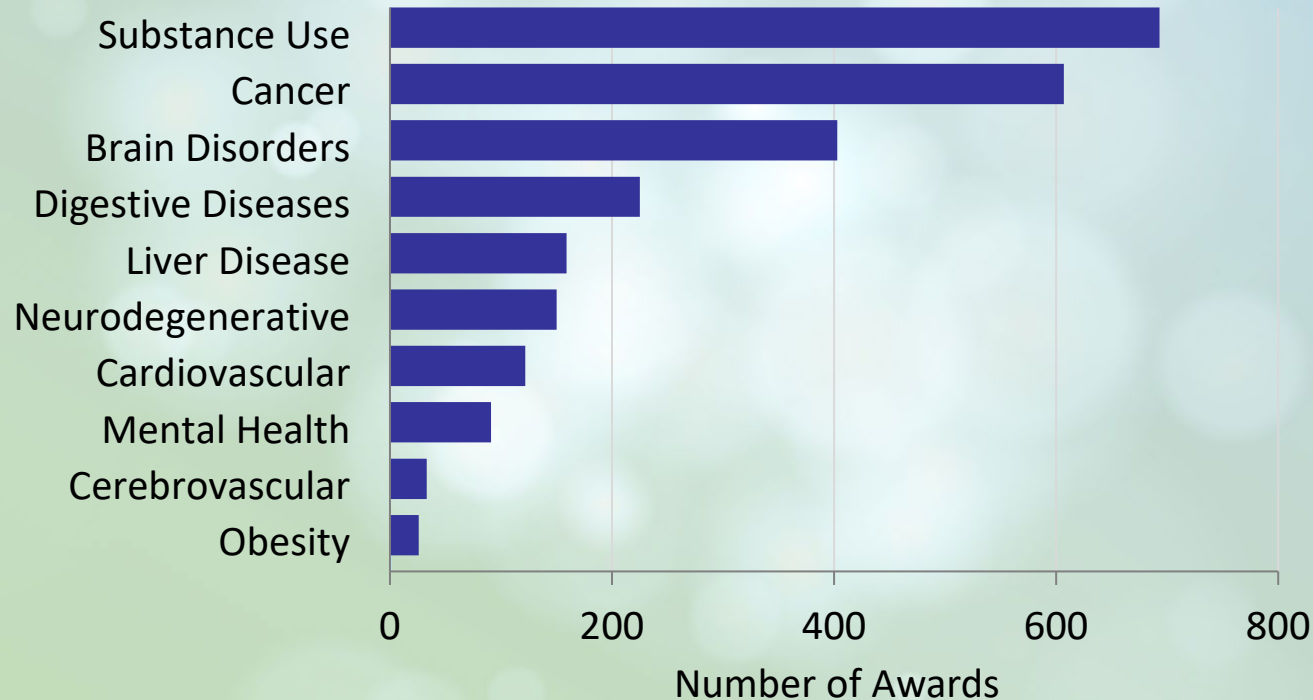


Steady funding for co-occurring conditions





# Most-studied co-occurring conditions in the HIV research portfolio

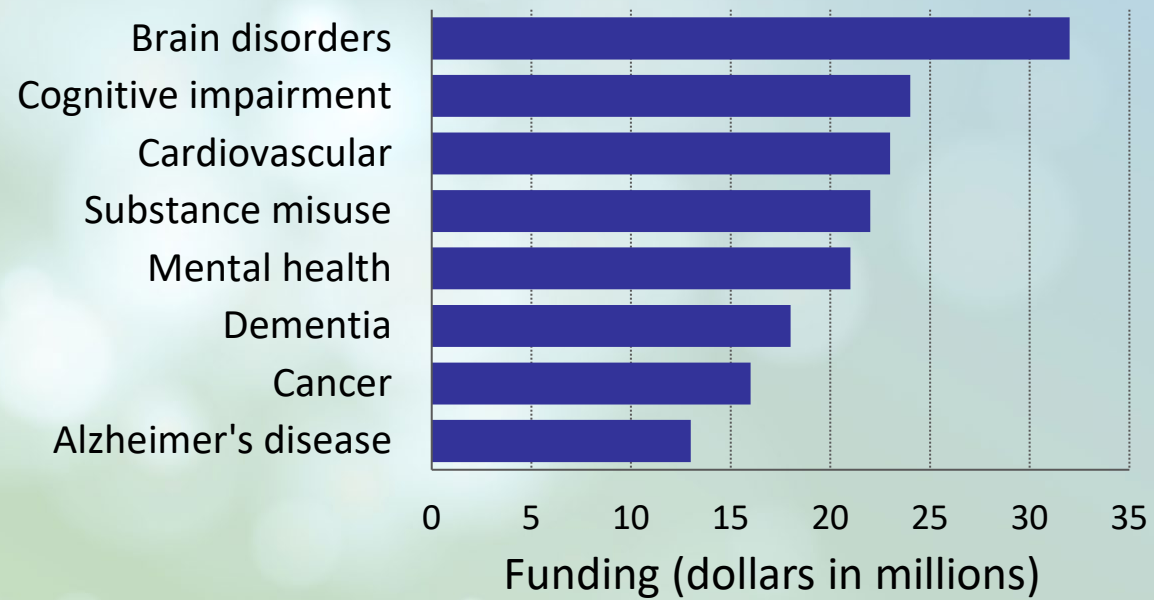




# HIV and aging portfolio

In FY25, around \$117M in HIV funding supported aging research (~3.6% of the portfolio)

## HIV and aging portfolio includes co-occurring conditions

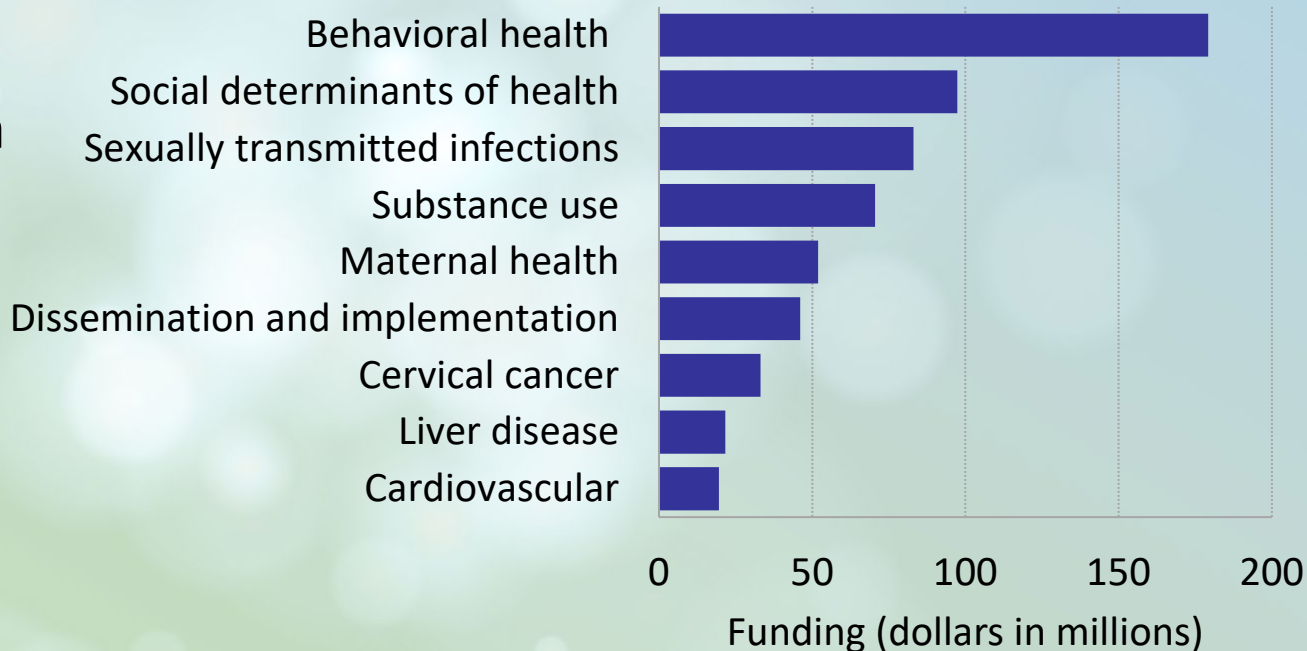




# HIV and women portfolio

In FY25, spending on HIV and women research was around \$304M (~9% of the HIV portfolio)

## Selected topics in HIV and women research





# Implementation science informs delivery of whole-person care

The study of the methods to promote the **adoption and integration of evidence-based practices and interventions** into routine health and public health settings to improve the impact on population health.





# Expanding implementation science in the HIV portfolio

- 7.5% of HIV/AIDS funding in FY25
- Supported by 14 NIH institutes, centers, and offices

**ARISE-HIV**  
Advancing Research in Implementation Science to End HIV



# Relevant highlighted topics

## NIH Highlighted Topics



[go.nih.gov/nihht](https://go.nih.gov/nihht)

**Implementation Science to  
Optimize HIV Prevention and  
Treatment**

**Multidisciplinary Studies of  
HIV/AIDS and Aging**



# Announcing the LAUNCH Challenge

## ARISE-HIV

Advancing Research in Implementation Science to End HIV

- Prizes up to \$10K for implementation science ideas to advance long-acting HIV prevention and treatment
  - Open to U.S. applicants

**Submissions due August 6, 5:00 PM EDT**

Learn more



[bit.ly/4owe2t6](https://bit.ly/4owe2t6)



# Interagency coordination to address unmet needs in HIV

## Key opportunities for coordinated action:

- Expand research on aging with HIV
- Make aging-related screening a routine part of HIV care
- Integrate geriatric expertise and specialty services into HIV primary care
- Promote cross-training and co-location of providers
- Support care models that allow more time with providers
- Strengthen coordination across agencies and programs





# Join us later this week: 72<sup>th</sup> OAR Advisory Council Meeting

**June 25, 2026**

*12:00-4:30 pm ET*



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