



Getting to Zero: HIV Transformation in the Chicago Eligible Metropolitan Area

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October 2, 2018



HOPE



HIV in Chicago – Over Time

- **1995**

- 8,507 people living with HIV
- 1,419 new diagnoses
- 1,243 deaths

HEIGHT OF HIV DEATHS

- **2001**

- 13,414 people living with HIV
- 1,850 new diagnoses
- 552 deaths

**HEIGHT OF NEW HIV
DIAGNOSES**

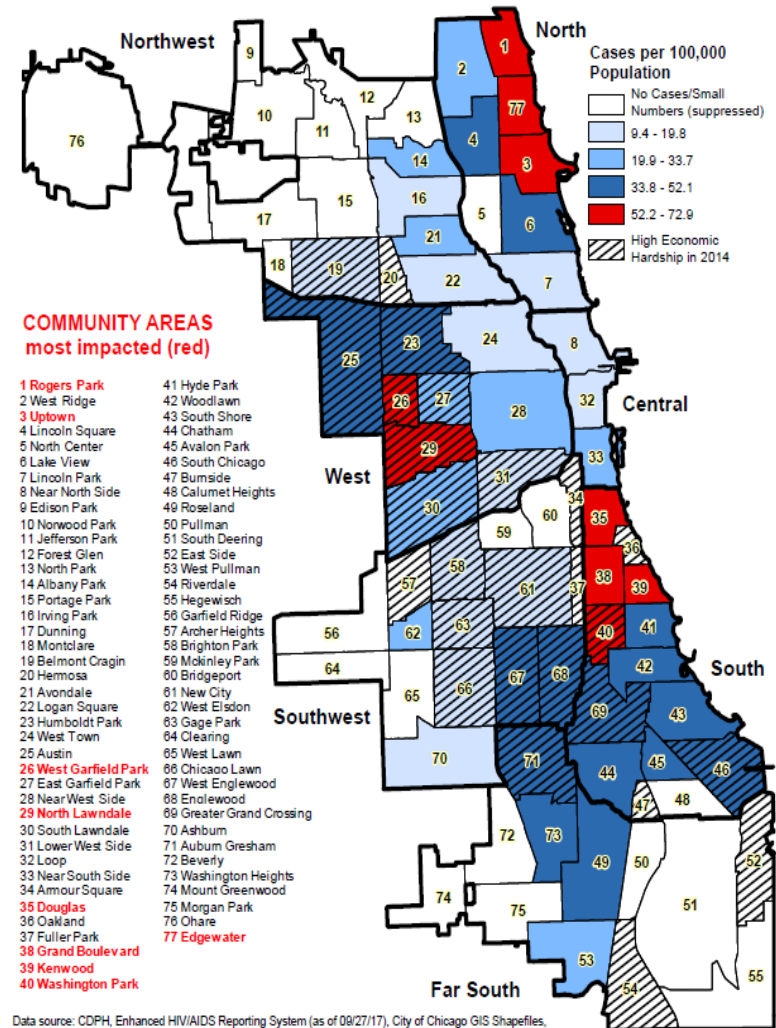
- **2016**

- 23,824 people living with HIV
- 839 new diagnoses
- 327 deaths (2015)

**HEIGHT OF HIV
PREVALENCE**

HIV in Chicago – Now (2016)

Figure 1.2 - 2016 Rate of HIV Infection Diagnoses in Chicago by Community Area



Data source: CDPH, Enhanced HIV/AIDS Reporting System (as of 09/27/17), City of Chicago GIS Shapefiles, and U.S. Census. This map represents 88% (738/839) of total new HIV infection diagnoses. The economic hardship index utilizes multiple indicators to measure economic conditions of Chicago Community Areas. High hardship index scores indicate worse economic conditions.

- **Progress, but disparities**
 - 83% of new infections are in men
 - 74% in men who have sex with men
 - 59% in Blacks
 - 22% in Hispanics
 - 48% in those ≤ 29 years of age
- **Despite our success, current efforts alone are not sufficient to Get to Zero by 2030.**

Chicago and Getting To Zero (HIV)

The Chicago Department of Public Health and the Chicago Area HIV Integrated Services Council have fully embraced Getting to Zero.

- Vision: **Getting to zero new HIV infections**
- Impact: **A significant and rapid reduction in HIV transmission**
- Outcomes:
 - **Suppress viral load in the population of PLWH**
 - **Increase use of PrEP among persons at increased risk for HIV infection**

Getting to Zero – HIV Viral Suppression

- Medications are much simpler and more tolerable than they used to be.
- When taken correctly, HIV medications lead to suppression of HIV.
- People living with HIV who have sustained viral suppression cannot transmit HIV to their sexual partners.

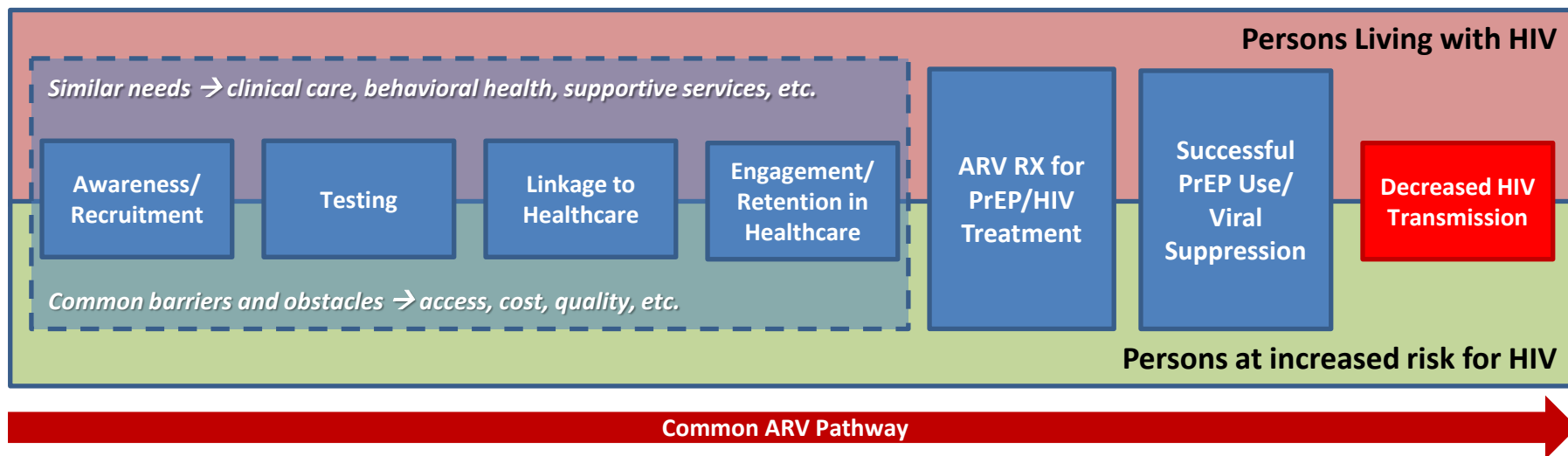


Getting to Zero – HIV PrEP

- PrEP is a prevention pill and program that is up to 99% effective at preventing HIV infection.
- PrEP users take a single pill daily. Medication side effects are minimal.
- People vulnerable to HIV who use PrEP consistently and correctly cannot acquire HIV from their sexual partners.



Chicago and Getting to Zero (HIV): Antiretroviral Pathway



STI in Chicago – Now (2017)

- Chlamydia
 - 30,292 new diagnoses
 - 60% female
 - 41% non-Hispanic Black
 - 59% 13-24 years of age
- Gonorrhea
 - 11,730 new diagnoses
 - 66% male
 - 49% non-Hispanic Black
 - 51% 20-29 years of age

STI in Chicago – Now (2017)

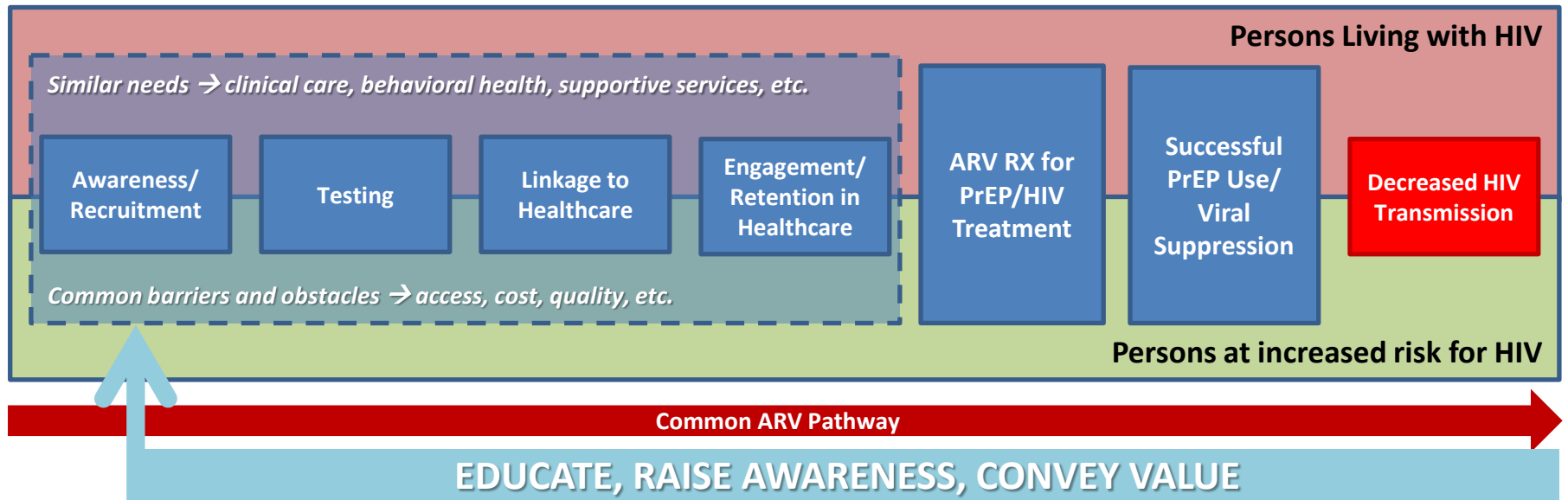
- PS Syphilis
 - 788 new diagnoses
 - 93% male
 - 37% non-Hispanic Black, 34% non-Hispanic White
 - 76% gay, bisexual, and other men who have sex with men
 - 38% 20-29 years of age, 31% 30-39 years of age
- Congenital Syphilis
 - 10 presumptive cases (fewest in that last 6 years)
 - 1 stillborn
 - 91% non-Hispanic Black (mother)
 - 73% 20-29 years of age (mother)

STI in Chicago – Now (2018)

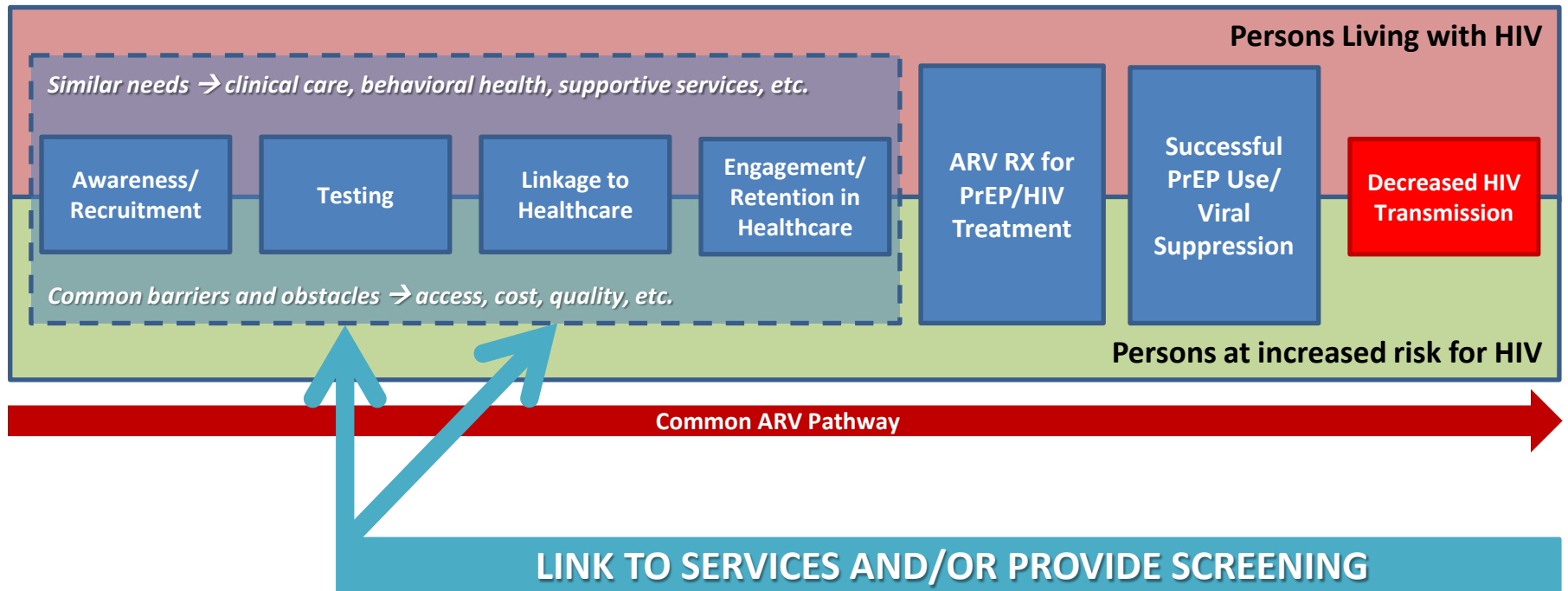
HIV	STI
\$52M	\$4.8M
<900 reported cases / year	>40,000 reported cases / year

1. It's critical that we work with the public and private healthcare sector to increase screening, treatment, and vaccination for STIs. Public health investments are insufficient to make the difference we need.
2. Public health must look for every opportunity to integrate STI services into the delivery of other services, like HIV.

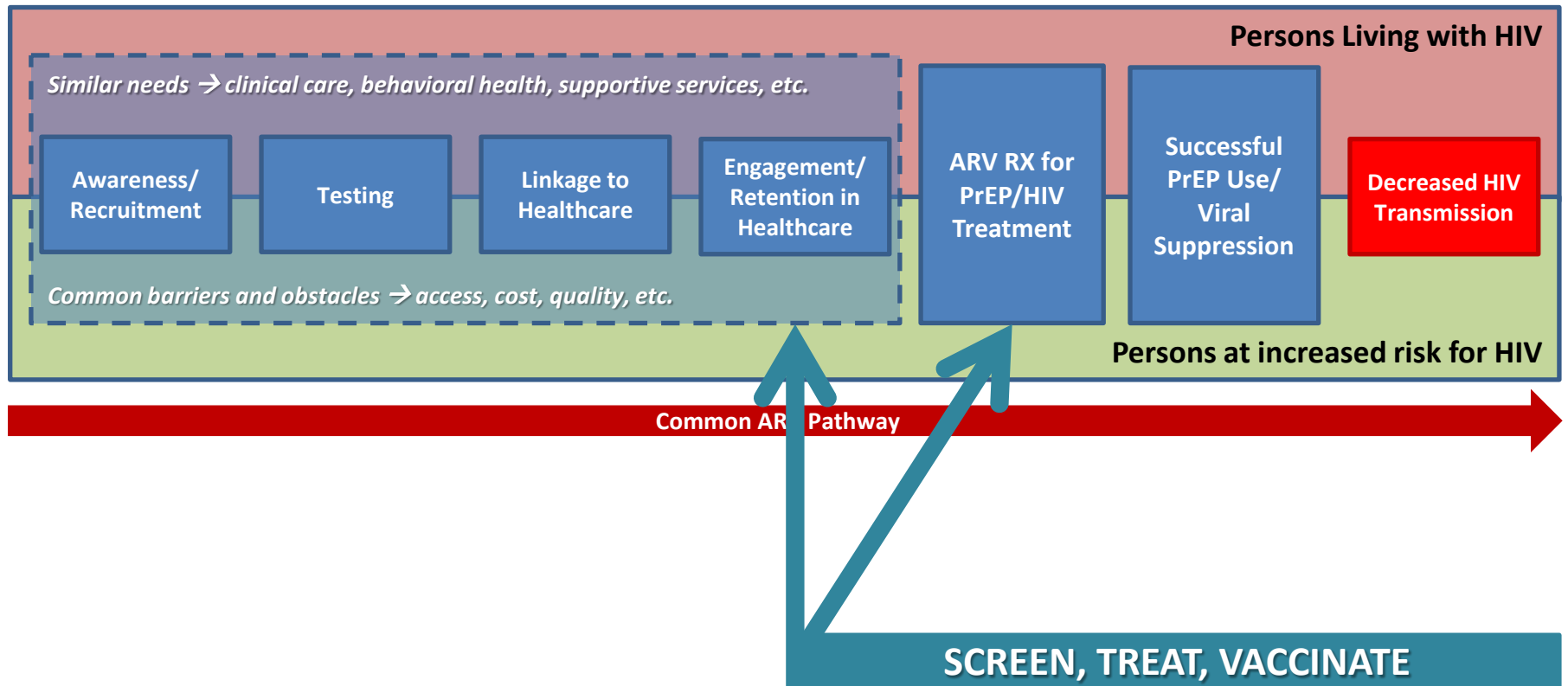
Chicago and Getting to Zero (HIV): Opportunities for STI Integration



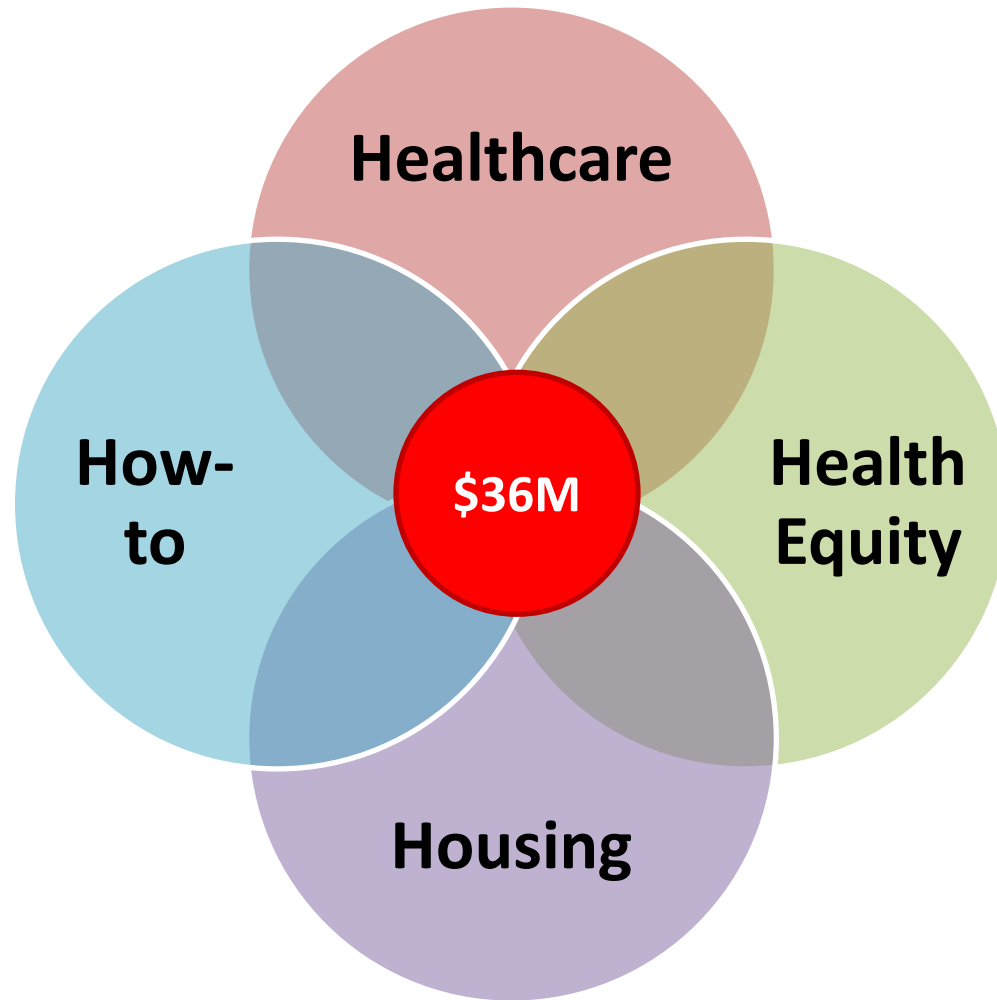
Chicago and Getting to Zero: Antiretroviral Pathway



Chicago and Getting to Zero: Antiretroviral Pathway



Getting to Zero Chicago – Future



Getting to Zero Chicago – Future

- **Healthcare**

- Increase access to HIV treatment, HIV PrEP, and STI services, along with supportive services, for people living with and vulnerable to HIV.
- Enhance coordination among service providers to increase the likelihood people have every opportunity to benefit from services.
- 9 funding opportunities @ ~\$25M will be released this year for funding to begin in March 2019.



Getting to Zero Chicago – Future

- **Healthcare**
 - STI Integration
 - Most CDPH-funded healthcare programs will be required to provide HIV treatment, PrEP, and STI services for their patient populations: people living with and vulnerable to HIV.

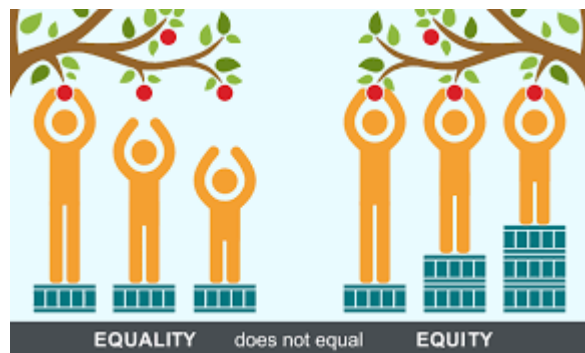
Healthcare Program	# Funded	Annual # Clients
Population Centered Health Homes	10-15	35,000
HIV Primary Care	3-5	2,000
Essential Support Services	3-5	8,500
HIV Screening and Linkage to Care	3-5	8,500
HIV Screening in Healthcare Settings	1	84,000



Getting to Zero Chicago – Future

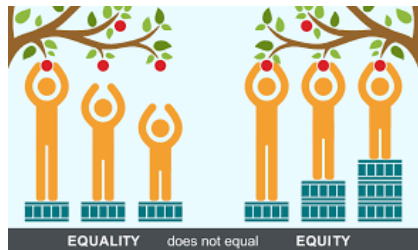
- **Health Equity**

- Invest resources to address root causes of health disparity, including systemic racism.
- Invest in communities most impacted by HIV to create opportunities and reduce marginalization.
- 5 funding opportunities @ ~\$2M will be released this year for funding to begin in March 2019.



Getting to Zero Chicago – Future

- **Health Equity**
 - STI Integration
 - Community Development initiatives will assess root causes of health disparities caused by structural racism and other social determinants. These initiatives will develop structural level interventions to reduce barriers to healthcare, including HIV/STI services. Focus populations include Black and Latino gay, bisexual, and other MSM; cisgender Black heterosexual women; and Black and Latina trans persons.
 - Services for Persons who Use Drugs will provide education on HIV/HCV/STI risk reduction strategies and referral to HIV/HCV/STI screening and treatment services.



Getting to Zero Chicago – Future

- **Housing**
 - Increase access to housing for people living HIV.
 - For the first time, invest in housing options for HIV-vulnerable PrEP users.
 - 3 funding opportunities @ ~\$7M will be released this year for funding to begin in March 2019.
 - Housing programs will provide housing opportunities for people which will reduce barriers to seeking and using healthcare, including HIV/STI services.





Getting to Zero Chicago – Future

- **How-to**
 - Develop and deploy a cohesive and consistent HIV/STI health marketing campaign to educate people.
 - Provide information and real-time advice to people living with and vulnerable to HIV through a jurisdiction-wide resource hub.
 - 2 funding opportunities @ ~\$2.5M will be released this year for funding to begin in March 2019.





Getting to Zero Chicago – Future

- **How-to**
 - STI Integration
 - Marketing initiative will develop a consistent brand/identity for HIV/STI health marketing campaigns, with 1-2 campaigns released annually targeting people living with and vulnerable to HIV.
 - Resource Coordination will create a resource hub that provides information, referrals, and appointments to HIV/STI services for people living with and vulnerable to HIV.



Getting to Zero Chicago – Future

- **Principles and Strategies**

- Undetectable = Untransmittable – Following current science which tells us that people living with HIV who are virally suppressed cannot transmit HIV to sexual partners.
- Deconstructing Racist Systems – Actively working to reframe and dismantle systems that perpetuate privilege, such as policies and practices that remove barriers to employment, retention, promotion, and staff development.
- Trauma Prevention and Trauma-Informed Services – Ensuring services are free from trauma.
- Cultural Responsiveness – Ensuring services are culturally and linguistically appropriate.
- Health Equity – Allocating resources and services to people and areas with the greatest need.



URGENCY





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