

Promoting Health Equity for the Prevention of HIV, Viral Hepatitis, STDs, and TB in the United States



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Moving Beyond Health Disparity and Achieving Health Equity
New York State Department of Health



Outline

1. Update on the HIV/AIDS, Viral Hepatitis, STDS and TB in the United States
2. What do we know about social and structural determinants of STD/HIV/Hepatitis/TB transmission and barriers to prevention?
3. CDC's strategic approach to addressing social and structural barriers to STD/HIV /Hepatitis/TB prevention in the United States

A Public Health Crisis?

- **High population burden of STDs, HIV, viral hepatitis and other sexual health problems, TB and their associated costs**
 - 19 million STI each year—almost half among young people 15 to 24 years old
 - One in four teen women infected with at least one STD
 - Estimated 1.2 million Americans are living with HIV
 - One-half of all pregnancies in the U.S. are unintended
- **Cost of STDs, including HIV, estimated at \$15.9 billion per year**
- **Health Equity/ Disparities Major Concern**
 - African-Americans: HIV rates 6 ½ to 15x Whites
 - MSM: 44x higher rates than other males
 - Geographic and socio-economic concentration

Common or overarching themes

- **Dynamic challenge:** Changing demography, epidemiology, cultural norms and values, and political contexts
- Among the **worst health inequities** observed for sexual and reproductive health outcomes in the U.S.
- **Increasing concentration** of issues among the socio-economically disadvantaged, minorities, those with poor healthcare access
- Interconnected epidemics or "**syndemics**" require a systemic change in our health care delivery system
- Challenging **fiscal environments** require increased efficiency, harmonization and minimize duplication

Social and Structural influences on the U.S. STD/HIV epidemics and health outcomes

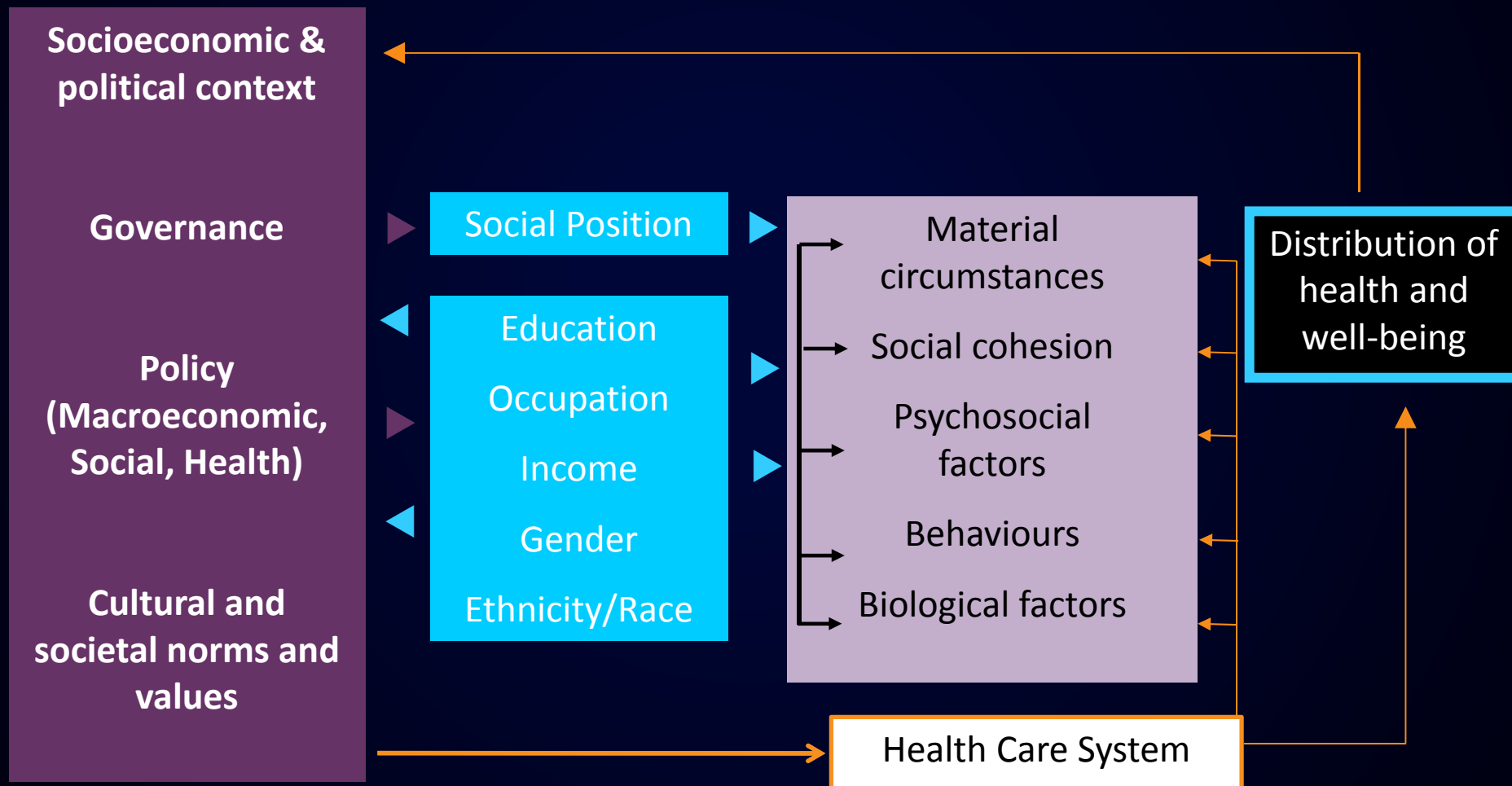
- **Structural factors**, defined as physical, social, cultural, organizational, community, economic, legal, or policy aspects of the environment that impede or facilitate efforts to avoid HIV infection.
- **Social determinants** are the economic and social conditions that influence the health of people and communities as a whole. SDH include
 - conditions for early childhood development
 - education, employment, income & job security
 - food security
 - health services and access to services
 - Housing, social exclusion, stigma

(CSDH, 2008; Braveman & Gruskin, 2003; Raphael, 2004)

These factors help shape a **context of vulnerability** that either contributes to increased individual risk of exposure to HIV or compromises the ability to protect oneself from infection.

A more holistic framework for health

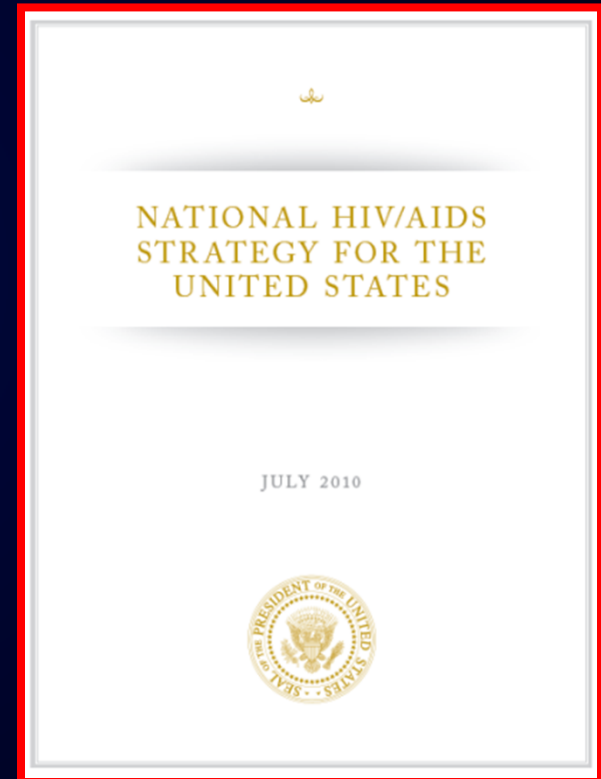
The WHO Commission on Social Determinants of Health



Social Determinants of Health and Health Inequities

National HIV/AIDS Strategy: Suggested Steps for Reducing Health Inequities

- “A concerted national effort to increase the capacity of whole communities to prevent HIV and support community members living with HIV is needed. “
- The following steps are critical to achieving success:
 1. Reduce HIV-related mortality in communities at high risk for HIV infection.
 2. Adopt community-level approaches to reduce HIV infection in high-risk communities.
 3. Reduce stigma and discrimination against people living with HIV.



U.S. National HIV/AIDS Strategy, 2010

CDC Efforts to Promote Health Equity Through Social and Structural Approaches to HIV Prevention

1. Community Mobilization
2. Integration of HIV Services
3. Policy Interventions
4. Contingency funding
5. Economic and Educational Interventions
6. Promoting science on disparities

Promoting Health Equity:

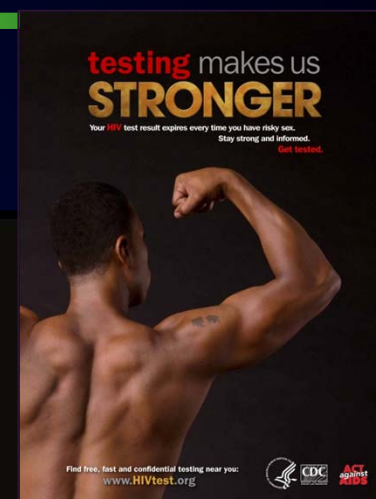
Community Mobilization

- ACT AGAINST AIDS Initiative
 - Launched April 7, 2009
- 5-year, \$45M national communication and mobilization campaign
 - English and Spanish
- Goal is to reduce HIV incidence
 - **Refocusing attention** on domestic HIV and AIDS and combating complacency
 - **Promoting awareness**, targeted behavior change, and HIV testing
 - Strengthening and establishing **networks, community leadership** and engagement, and other partnerships to extend the reach and credibility of HIV prevention messages



Promoting Health Equity: Community Mobilization

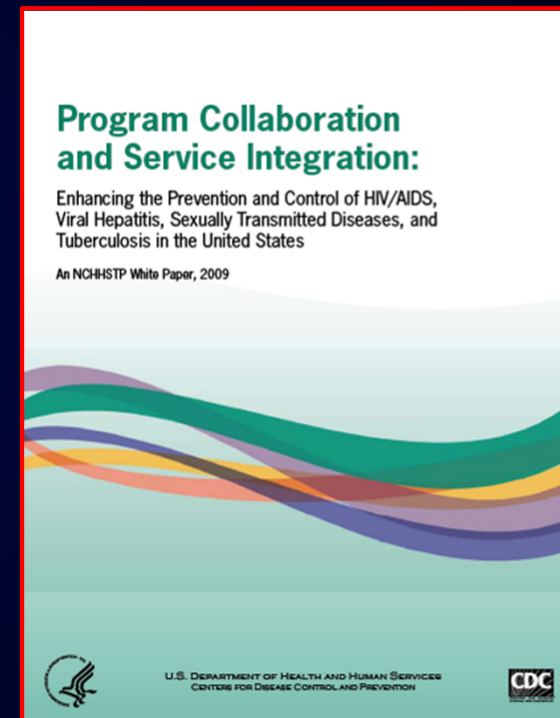
- Act Against AIDS Campaign
 - Multiple phases targeting different populations with tailored messages
 - 2.1 billion media impressions across campaign phases since launch in April 2009
 - Example: Launched local **Testing Makes Us Stronger** campaign in New York City Feb. 6, 2012
- Act Against AIDS Leadership Initiative
 - Expanded to include leading national
 - African American, Latino, LGBT organizations
 - Integrating HIV prevention into programs



Promoting Health Equity:

Program Collaboration and Service Integration (PCSI)

- Integrating HIV care and reproductive health services potentially can increase the **availability and use** of both types of services.
- PCSI is a **structural intervention** aimed at improving synergies between prevention programs and providing more holistic services to clients
- Priority areas for development include **integrated** programming, surveillance and training. New funding will be available to support local implementation in FY10.



Promoting Health Equity:

Influencing policy change

- **National HIV/AIDS Strategy**
- **National Prevention Strategy**
- **Healthy People 2020**
- **U.S. HIV travel ban**
- **Promote strategic investments**
 - Behavioral research
 - HIV prevention in corrections
 - STD prevention interventions
 - Biomedical interventions
 - Quality sexual health education
 - Programs that address the social determinants of HIV transmission e.g. housing, employment, stigma, poverty

Promoting Health Equity:

Contingency funding

- CDC increasingly using **incentive or contingent funding** policies, which make receipt of federal or state funds contingent on implementing laws or policies seen to promote public health.
- Examples include:
 - HIV Testing Initiative
 - PCSI Initiative
 - Enhanced Comprehensive HIV Prevention Plans (ECHPP)

Promoting Health Equity:

Economic and Educational Interventions

- CDC has a number of ongoing **research studies** to examine the impact of economic, housing and educational interventions on HIV risk and vulnerability
- Examples include:
 - Housing and Health Study (with HUD)
 - Microfinance and African American Women
 - Developing STD Prevention Curricula with HBCUs

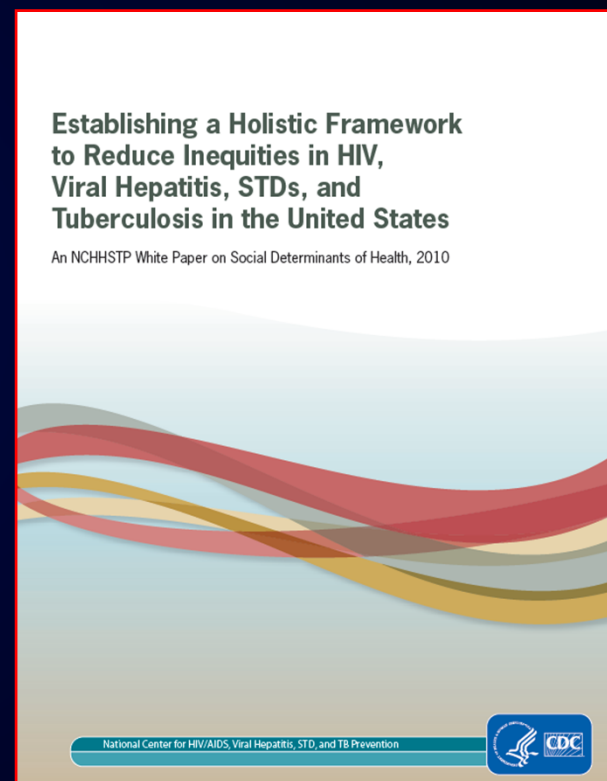
Promoting Health Equity: Providing Scientific Leadership

- CDC has launched its first Health Disparities Report
- NCHHSTP has launched
 - SDH Website
 - Health Disparities Report
 - Public Health Reports Series
 - White paper on SDH
- All resources available at:
<http://www.cdc.gov/social-determinants/>



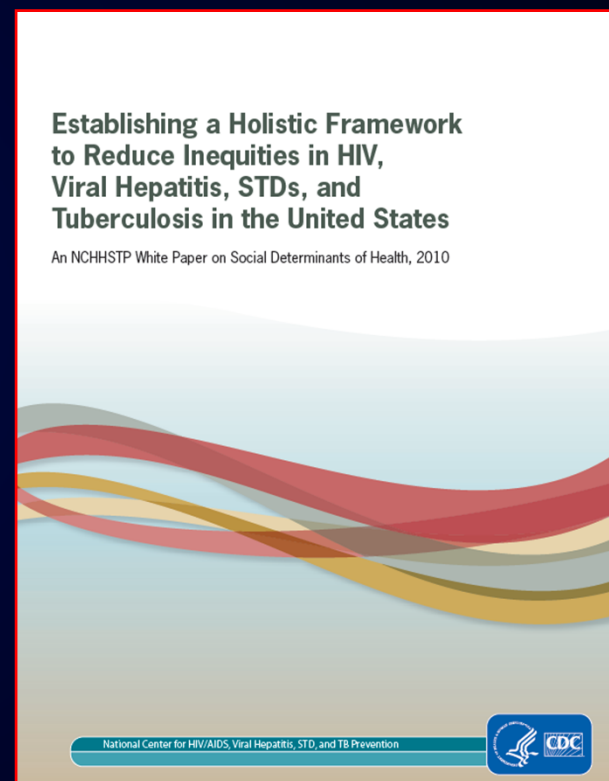
CDC Recommendations for enhancing health equity in prevention programming

- Leadership
 - Serve as champions in addressing SDH and identify senior leaders in the organization
 - Adopt policies that address SDH in the organization, including identifying priorities, assessing progress, and reporting the progress on a regular basis.
- Research and Surveillance
 - Support and request funding for SDH research to advance the science of the field and to provide evidence for effective interventions and communication strategies.
 - Incorporate SDH measures in surveillance systems.



CDC Recommendations for enhancing health equity in prevention programming

- **Communication /Policy**
 - Include social determinants and health equity messages in external and internal presentations and communications.
- **Capacity Building**
 - Educate local organizations, policy makers, health care professionals, and partners about SDH and what they can do to address them
- **Partners**
 - Review, assess, and diversify partners and stakeholders engaged in HIV prevention to ensure appropriate expansion and impact of our policies and practices.



CDC. Establishing a Holistic Framework to Reduce Inequities in HIV, Viral Hepatitis, STDs, and Tuberculosis in the United States. Atlanta (GA): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; October 2010.

Summary

- HIV, STD, viral hepatitis, and TB prevention efforts must increasingly address the underlying drivers of risk and vulnerability
- One approach involves incorporating structural interventions that seek to change social, economic, political, or environmental factors determining risk and vulnerability
- Structural approaches to HIV should form part of comprehensive STD/HIV prevention programs, and should be implemented in a contextually sensitive way

Thank you

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