

HealthHIV **MEDICAL EDUCATION**

# HealthHIV STATE OF HIV Care™

Sixth Annual National Survey

## Report on Findings



HealthHIV’s Sixth Annual State of HIV Care™ National Survey identifies barriers that HIV care providers face in delivering care, captures their perspectives on existing resources, and highlights their experiences with achieving patient outcomes in 2024. These survey insights create vital education and training for the HIV care workforce and inform advocacy and research priorities for the coming year. The survey questions were developed using the HIV Care Continuum, a status-neutral framework that outlines the stages of HIV care. By framing the survey around this continuum, the survey ensures a comprehensive understanding of the interconnected nature of prevention and care in addressing HIV.

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# Overview

The U.S. has set ambitious targets through the Ending the HIV Epidemic in the U.S. (EHE) initiative, aiming to reduce new HIV infections by 75% by 2025 and 90% by 2030, increase PrEP coverage to 50% by 2025, and ensure that 95% of newly diagnosed individuals are linked to medical care by 2025.<sup>1</sup> Despite these goals, progress has been slow, with significant barriers hindering achievement.<sup>2</sup> Although improvements in insurance coverage have been made over the past decade, largely due to Medicaid expansion under the Affordable Care Act (ACA), over 40% of working-age Americans remained underinsured in 2022.<sup>3</sup> Complex insurance practices continue to create significant gaps in care, disproportionately impacting younger, Latinx/Hispanic, economically disadvantaged individuals, and those residing in the South—populations that also face increased vulnerability to HIV.<sup>3,4</sup> These overlapping social and health challenges underscore the critical role of HIV care in addressing broader syndemics, where interconnected social and medical issues compound the burden of disease and make comprehensive, equitable care even more essential. In 2023, nearly one-third of Americans lived in primary care Health Professional Shortage Areas, further exacerbating the national workforce shortages and burnout crises, which strain healthcare systems and hinder engagement in HIV prevention and treatment services.<sup>5</sup>

Previous State of HIV Care National Surveys have consistently identified similar challenges, such as workforce burnout, behavioral health concerns, HIV criminalization, and the social and political determinants of health. The recurrence of these issues emphasizes their persistent nature, especially with regard to funding constraints and insurance barriers. However, new findings from 2024 highlight some important developments. There has been a marked shift toward treatment innovation, with widespread adoption of long-acting injectables reflecting the growing enthusiasm among providers for novel strategies in HIV care. Despite this, there is heightened concern among participants about policies that reinforce stigma and increase barriers to care, particularly for populations disproportionately impacted by HIV. These policies exacerbate the inequities within the healthcare system, making it even more difficult to achieve the EHE goals.

This report, based on insights from frontline healthcare providers, offers a critical look at the current state of HIV care in the context of EHE objectives. Understanding the systemic gaps and challenges faced by healthcare professionals is crucial for informing strategies that will improve HIV prevention and treatment, ensuring progress toward the 2025 and 2030 targets for ending the HIV epidemic in the U.S.

# The State of HIV Care

In asking respondents to capture the State of HIV Care in one word, “improving” emerged prominently at the center, symbolizing the significant advancements in treatment and support; encircling it are “evolving”, “progressing,” “lacking,” and “hopeful,” which together convey a nuanced picture of ongoing challenges, potential for growth, and a collective optimism for the future.

## What is the State of HIV Care in one word?



# Key Findings

## ▶ **Workforce Shortages, Inadequate Compensation, and Burnout Create a Challenge to Quality HIV Care**

Providers report that workforce shortages, inadequate compensation, and burnout are the primary barriers to quality care, underscoring an urgent need for increased funding and staffing support.

## ▶ **Providers Request Training on New Treatments and Health Equity**

Clinicians and service providers emphasize the need for training in innovative HIV treatments, such as long-acting injectables, as well as guidance on addressing health disparities and navigating funding challenges. These areas are vital for improving care delivery and addressing systemic inequities.

## ▶ **Lack of Essential Behavioral Health Services Driving Gaps and Undermining Care for People with HIV**

Many organizations are missing essential services, particularly in behavioral health and social services, resulting in the exclusion of social determinants of health from necessary care. Fewer than 30% of respondents offer services like childcare, inpatient detox, and crisis support, highlighting a national shortage of behavioral health care providers. This deficiency poses a barrier to meeting the broader health needs of people with HIV (PWH) and those at risk.

## ▶ **Ongoing Stigma Hindering Retention in HIV Care for Priority Populations**

Stigma significantly complicates retention in HIV care, as many organizations struggle to provide sufficient behavioral health support. Fear of judgment and distrust in healthcare systems hinder access to care, especially for priority populations, including those experiencing homelessness and individuals who use substances.

## ▶ **Insurance Barriers Slowing Access to PrEP and HIV Care, Highlighting Need for Reform**

Insurance barriers, such as formulary restrictions, high co-pays, and prior authorizations, delay access to ART and PrEP, disproportionately impacting priority groups. Providers face limitations in delivering care, and many lack familiarity with zero-cost-sharing guidelines for PrEP, emphasizing the need for policy reforms and targeted training to improve access and outcomes.

These findings reflect systemic challenges that the HIV care workforce faces, including the need for **more comprehensive service offerings, expanded workforce training, and policy reform to reduce stigma and legal barriers in care provision.**

# About the Report

This report is structured to present a clear overview of the main findings and inferences from the HealthHIV Sixth National State of HIV Care™ survey, supported by relevant graphics that illustrate key trends and insights. The addendum contains all survey questions and detailed data to provide transparency and allow for deeper analysis, ensuring that those interested can review the underlying information that supports the report's conclusions.

## Participant Background

### TOTAL RESPONDENTS

966 professionals who provide HIV-related services across the care continuum.

#### CLINICAL ROLES

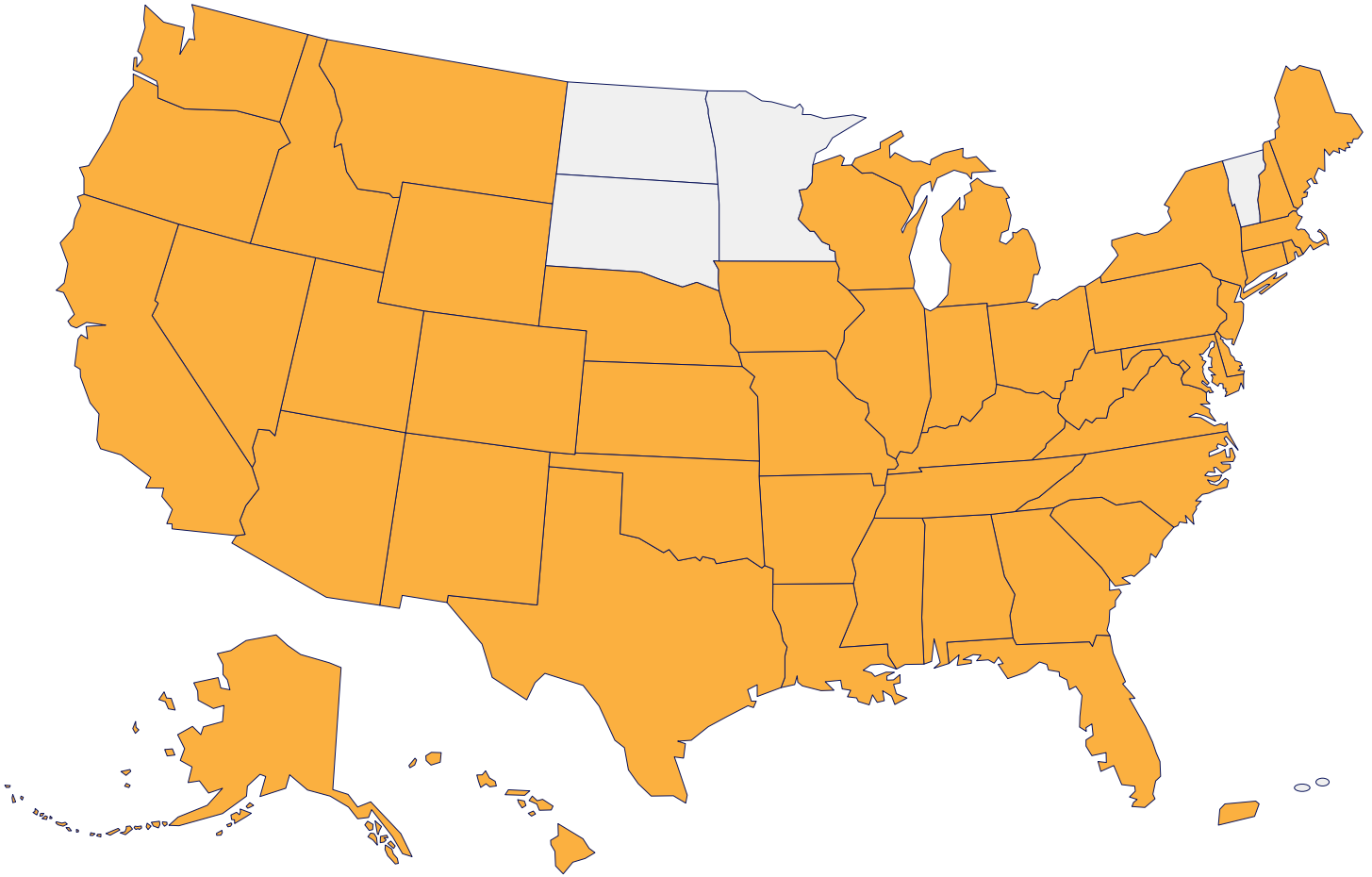
Registered Nurse	19%
Nurse Practitioner	18%
Physician (MD/DO)	18%
Other Provider/Clinical Professional	7%
Pharmacist	7%
Licensed Practical Nurse	6%
Mental Health Professional	5%
Nurse Manager	4%
Licensed Clinical Social Worker	4%
Physician Associate	4%
Medical Assistant	3%
Dentist	2%
Mental Health Case Manager	1%

#### NON-CLINICAL ROLES

Administrator	22%
Case Manager/Medical Case Manager	17%
Other Non-Clinical Professional	12%
Community Health Worker	12%
Health Education Specialist	6%
Outreach Worker	6%
Advocate	5%
Non-Clinical Social Worker	5%
Health Navigator	4%
Disease Intervention Specialist	3%
Researcher	3%
Harm Reductionist/Risk Reductionist	2%
Medical Billing	1%
Mental Health Professional	1%
Substance Use Counselor/Professional	1%

## GEOGRAPHIC REACH

Responses came from providers in 46 states, Puerto Rico, and the District of Columbia.



### HEALTHCARE SETTINGS REPRESENTED

- ▶ Community-Based Organizations (CBOs)
- ▶ Community Health Centers
- ▶ Ryan White HIV/AIDS Program Clinics
- ▶ Health Department Clinics

### PRIORITY POPULATIONS SERVED

The majority of providers offer services to all listed priority groups, with particular emphasis on:

- ▶ People experiencing homelessness or who are unhoused
- ▶ Individuals with substance use disorders
- ▶ Non-English-speaking individuals
- ▶ Organizations located in urban areas

# Survey Findings

## State of the HIV Care Workforce

### Workforce Crisis Deepens

Survey findings highlight a dire need for increased funding and staffing across the entire HIV care continuum. Providers from diverse professional backgrounds overwhelmingly report that staff shortages and inadequate compensation are the most pressing challenges facing the workforce. This marks the third consecutive State of HIV Care Survey where workforce shortages have been identified as one of the greatest barriers to effective HIV care, revealing a persistent crisis that threatens the future of care delivery.

#### Top three needs to improve HIV services:



Fiscal health/  
funding to  
support HIV  
services



More providers  
trained in HIV  
care



Support staff  
to provide  
wraparound  
services to HIV  
clients/patients

#### Top three needs to improve PrEP services:



Fiscal  
health/funding  
to support PrEP  
services



More providers  
trained in PrEP  
care



Increase  
insurance  
coverage for  
PrEP specific  
services

**Top three workforce issues currently facing providers:**



**Workforce shortage**



**Poor and/or stagnant compensation**



**Increased workload**

**Top three health care topics for training:**

Respondents identify health disparities and fiscal health as top healthcare topics for training, reflecting overall concerns about systemic inequities and program funding, present throughout the report.



**Monitoring health disparities/ensuring health equity**



**Fiscal health (Ryan White, 340B, PrEP)**



**Preventing stigma and discrimination**

**Critical Service Gaps Exposed**

There are clear gaps in essential services across HIV, HCV care, sexual and behavioral health, and social determinants of health. Providers are least able to offer critical resources like childcare, inpatient detox services, Intensive Outpatient Services, syringe exchange programs, and crisis support—underscoring a nationwide shortage of behavioral health professionals and social services that leaves vulnerable populations at risk.<sup>6</sup>

**Respondents were least likely to report offering the following services:**

Childcare	4%
Inpatient Detox Services	4%
Intensive Outpatient Services	8%
Syringe Exchange Services	12%
Crisis Support/Hotlines	13%
Minor In-Office Surgical Procedures	16%
Medication Assisted Treatment (MAT)	21%
Expedited Partner Therapy (EPT)	22%
Group Psychotherapy	22%
Gender-Affirming Services	25%
Outpatient Medicine Management	27%
Medicare Wellness Visits	29%
Housing Services	29%

# HIV Care and Treatment

## Evolving Priorities in HIV Care

Aging with HIV, Stigma and Discrimination, and Behavioral Health are the three most important HIV care topics. Notably, aging with HIV has surged from second to first place, while behavioral health has dropped from the top spot to third. These shifts reflect the changing landscape of HIV care, with providers increasingly focused on the unique needs of an aging HIV-positive population, while still grappling with the persistent challenges of stigma and mental health.

### Most timely and important HIV Care topics:

Aging with HIV	27%
Stigma and Discrimination	24%
Behavioral Health	24%
Whole Person Care	22%
HIV and Comorbidities	21%
Support Services	18%
Transgender Health	18%
Harm Reduction	18%
Systemic Racism	17%
Insurance Costs/Issues	17%
Trauma Informed Care	16%
Multipurpose Prevention Technologies	11%
Treatment Resistance	9%
Other	1%
None	0.1%



Retention in care is identified as the highest priority step in the HIV care continuum for the second year in a row. Increased retention and re-engagement in care will be necessary to meet EHE goals.

**Providers believe these components need the most attention in the HIV Care continuum:**

Retention in Care	43%
Testing and Diagnosis	19%
Linkage to Care	14%
Initial Receipt of Care/Starting ART	7%
Viral Suppression	6%
None	12%

Significant engagement with long-acting injectables for HIV treatment suggests provider interest in novel approaches to care that might help their patients remain adherent to medication.<sup>7</sup> However, it also suggests the need for training on and funding for other ways to support adherence, including virtual appointments, case management, and mobile services.



**70%** of HIV treatment providers offer long-acting injectables for HIV treatment

**Among participants who are familiar with their organization's health data...**

**SINCE THE PREVIOUS SURVEY...**

**47%** report HIV care referral rates have increased

**51%** report the number of patients receiving ART/HIV treatment services have increased

**38%** report their organization's viral suppression rates have increased

## Urgent Need for Provider Training

A growing demand among HIV care providers for training on treatment innovations and best practices is evident. This reflects the mounting pressures faced by the workforce to keep pace with rapid advancements in HIV care, as providers strive to meet the evolving needs of their patients in an increasingly complex healthcare landscape.

### Top three HIV Care and Treatment topics for training:



New HIV treatments including injectables



Integration of STIs, viral hepatitis, and HIV services



Current HIV treatment guidelines

HIV treatment in pregnancy, HIV/HCV co-infection, and opportunistic infections represent several types of care that the average HIV care professional refers to specialists. These treatment concerns represent key areas for training. Increased confidence in treating complicated cases among non-specialist providers will contribute to greater care integration and efficiency.

### Among respondents who personally provide HIV care...

**34%**

refer HIV treatment in pregnancy to a specialist all or most of the time

**23%**

refer HIV/HCV co-infection to a specialist all or most of the time

**23%**

refer opportunistic infections to a specialist all or most of the time

## Hurdles in HIV Treatment Access

Providers often face patient refusals when attempting to link individuals to HIV treatment following diagnosis. Even when patients are willing, the struggle to secure timely appointments persists. These barriers underscore the urgent need for an expanded workforce and the adoption of alternative care models, such as pharmacist-led or mobile device-based treatment, to better serve diverse populations and improve access to care.<sup>8,9</sup>

## Linkage to Care

### TOP BARRIERS FACING PROVIDERS



Patient refusal



Limited appointment times

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### TOP BARRIERS FACING CLIENTS/PATIENTS



Fear of stigma or discrimination



Lack of knowledge about available care

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## Starting ART

Once patients are linked to treatment, insurance barriers often disrupt smooth ART initiation, a process that may be further complicated by patient concern about medication side effects. Even more, social barriers like transportation instability and stigma prevent many from staying in care once treatment has been initiated.

### TOP BARRIERS FACING PROVIDERS



Insurance barriers/formulary restrictions



Concerns about ART side effects

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### TOP BARRIERS FACING CLIENTS/PATIENTS



Fear of stigma or discrimination



Concerns about ART side effects

## Retention in Care

### TOP BARRIERS FACING PROVIDERS



Lack of transportation to care



Fear of stigma or discrimination

### TOP BARRIERS FACING CLIENTS/PATIENTS



Mental health issues



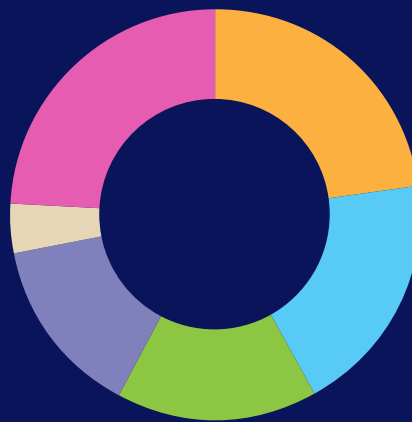
Fear of stigma or discrimination

## Insurance Barriers

Insurance issues can create significant barriers to timely care. Providers are often prevented from offering crucial services due to payer restrictions including prior authorization requirements, large co-pays, and limited formularies.

- ▶ Providers report private employer-sponsored insurance generally requires the most time to complete and receive a determination for ART.
- ▶ 29% of respondents report being unable to provide HIV services due to payer/insurance restrictions sometimes, often, or all the time.

## PROVIDERS REPORT THE MOST COMMON INSURANCE RESTRICTION THEY ENCOUNTER IS...



Limited medication formularies/prior authorizations **23%**

Large co-pays **19%**

Limited/no coverage for specialist care **16%**

Prior authorizations for tests/procedures **14%**

Other **4%**

None **24%**

# HIV Prevention

## Gaps in Prevention Efforts

PrEP providers stress that outreach and promotion require more attention than other steps along the continuum of preventive care. Many organizations are not effectively reaching high-risk groups such as individuals experiencing homelessness, youth, and people who use substances. This gap highlights the urgent need for targeted outreach to ensure PrEP access to those most vulnerable to HIV.



Providers believe these components need the most attention in the PrEP Care continuum:



**39%**  
Outreach/PrEP promotion



**22%**  
Retention in care

Providers report their organizations could be better at reaching these populations with HIV prevention services:



People experiencing homelessness



Youth



People who use substances

The majority of participants familiar with their organization's health data report testing and PrEP usage rates have increased over the last year. However, increased funding and workforce preparation are needed to maintain upward trends.

### Top needs to improve PrEP services:



Fiscal health/funding to support PrEP services



More providers trained in PrEP care

### Among participants who are familiar with their organization's health data...

SINCE THE PREVIOUS SURVEY...

**70%** report testing rates have increased

**82%** believe client/patient interest in PrEP has increased

**58%** report PrEP linkage rates have increased

**63%** report PrEP prescription rates have increased

### Training and Knowledge Gaps in PrEP Care

PrEP providers are seeking more training on emerging prevention innovations, such as on-demand PrEP and injectables, as well as on how to provide PrEP to priority populations. Additionally, less than half of respondents are familiar with the Department of Health and Human Services guidelines on zero-cost sharing and co-pays for PrEP, indicating a significant gap in provider knowledge that needs to be addressed.

### Top three PrEP topics for training:



Providing on-demand PrEP/PrEP 2-1-1



Providing PrEP for priority populations



Providing injectable PrEP

Just over half of providers are familiar with HHS guidelines on zero-cost sharing and co-pays for PrEP:



**53%**  
No



**47%**  
Yes

### Critical Barriers to Prevention Exposed

Patient refusal, fueled by stigma or a false sense of invulnerability to HIV, stands as a major barrier to both HIV testing and PrEP linkage. Providers also cite workforce shortages and discomfort discussing PrEP as significant obstacles. Even once patients are linked to care, insurance restrictions emerge as the greatest hurdle to prescribing PrEP, underscoring the complex challenges in delivering effective prevention.

### Testing

#### TOP BARRIERS TO TESTING FACING PROVIDERS



Refusal to get tested



Limited staff/  
workforce shortage

#### TOP BARRIERS TO TESTING FACING CLIENTS/PATIENTS



Fear of stigma or  
discrimination



Assumption of low  
vulnerability to HIV

## Linking to PrEP

### TOP CHALLENGES TO TIMELY PrEP LINKAGE



Provider discomfort discussing PrEP



Refusal to be linked to PrEP

### MOST EFFECTIVE METHODS FOR INCREASING PrEP UPTAKE



Provider-initiated patient discussions



Targeted community promotions



Peer-to-peer discussions

Health insurance plans that require the most time to complete and receive a determination for PrEP, as reported by providers:

Private Insurance (Employer)	44%
There is no difference	22%
Private Insurance (ACA plan)	10%
Medicaid	9%
Other	5%
Medicare	5%
Other Public Insurance	4%
Ryan White/ADAP	2%

## Prescribing PrEP

### TOP BARRIERS TO PRESCRIBING PrEP FACING PROVIDERS



Time required to complete prior authorizations



Preferred PrEP modality not covered by insurance

### TOP BARRIERS TO INITIATING PrEP FACING CLIENTS/PATIENTS



Low perceived HIV risk



Fear of stigma or discrimination

Most common reasons clients/patients discontinue PrEP:



Difficulty adhering to medication



No longer perceive HIV risk

## Behavioral Health

### Behavioral Health Gaps in HIV Care

There is a dire shortage of behavioral health providers in the HIV field, with the majority of respondents stating that their organizations cannot meet the growing demand for services. This aligns with the broader mental health challenge—over 50% of adults with mental illness received no treatment in 2023.<sup>10</sup> The problem is particularly acute in Southern states, such as Alabama, Arkansas, and Mississippi, which are also critical areas for the CDC’s Ending the HIV Epidemic initiative, highlighting a pressing need for expanded mental health care in these regions.<sup>11</sup>

Most respondents believe there are not enough behavioral health providers to meet the demand for services:



52%  
No



32%  
Yes



16%  
Unsure

### Barriers to Behavioral Health Care for People with HIV

Fear of stigma or discrimination, along with a lack of trust in health systems and professionals, are major challenges to accessing mental health services for people with HIV (PWH). Providers report that retaining patients in mental and behavioral healthcare is particularly difficult for populations such as those experiencing homelessness, people who use substances, and individuals who are underinsured or uninsured. These barriers highlight critical gaps in care for priority populations.

Top challenges to accessing mental health services from the patient/client perspective:



Fear of stigma or discrimination



Distrust in health systems/health professionals

Populations that are most difficult to keep in mental/behavioral healthcare:



People experiencing homelessness/unhoused



People who use substances



People who are underinsured/not insured

# Sexual and Reproductive Health

## Critical Gaps in Sexual and Reproductive Health Care

A troubling disconnect in sexual healthcare remains: while most providers offer site-specific STI testing, only 61% provide Doxy-PEP and just 55% offer Expedited Partner Therapy.<sup>12, 13, 14</sup> Even though routine STI testing is common, less than half of providers conduct testing at every visit. While nearly all providers are comfortable taking sexual histories, far fewer complete a comprehensive history that includes all recommended components, highlighting significant gaps in care and engagement with vital prevention and treatment innovations.

### Best Practices for Sexual Healthcare

Among those respondents who personally provide sexual healthcare services...

**93%** offer routine STI testing  
**49%** at every visit    **29%** every three months

**81%** offer site-specific STI testing

**61%** offer Doxy-PEP

**55%** offer Expedited Partner Therapy

**97%** are very or somewhat comfortable taking a sexual history...

*but only 68% report completing all recommended components of a comprehensive sexual history (asking about STI protection, sexual partners and practices, past history of STIs, pregnancy intentions/ birth control, and sexual pleasure/problems/pride)*

# Anti-LGBTQ Policies

## Anti-LGBTQ Policies Are Undermining HIV Care and Widening Health Disparities

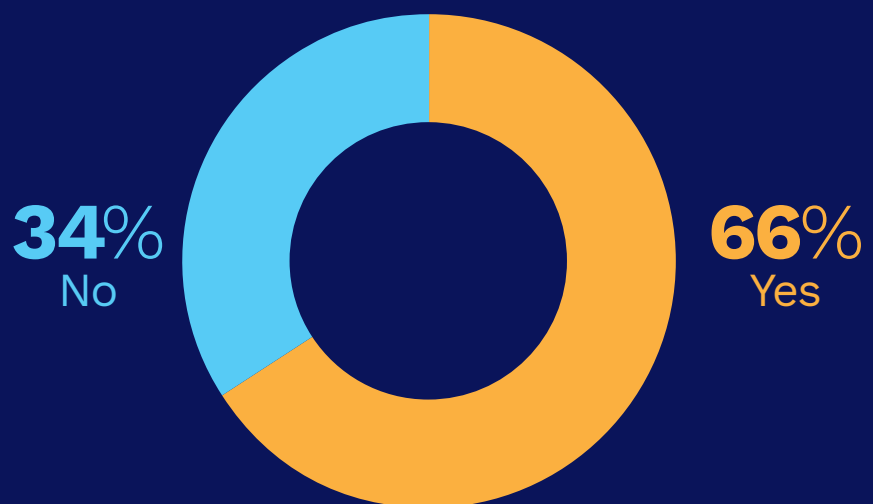
Anti-LGBTQ healthcare policies present significant obstacles for HIV providers working to deliver equitable and effective care. These policies foster stigma and mistrust, discouraging LGBTQ individuals from engaging with prevention, testing, and treatment services.<sup>15</sup>

Marginalized groups, such as Black and Hispanic LGBTQ individuals, often experience compounded discrimination, further deepening health disparities and inequities.<sup>16, 17</sup>

Providers widely recognize the harmful impact of anti-LGBTQ policies on public health outcomes. In addition to creating hostile healthcare environments, some state-level interventions intended to address public health challenges inadvertently reinforce harm. For example, statutes empowering public health officials with broad authority can alienate LGBTQ communities and hinder progress in fostering culturally affirming care.

To effectively advance health equity, HIV providers must navigate these systemic barriers while working to dismantle anti-LGBTQ policies that perpetuate discrimination and undermine trust. Prioritizing an intersectional approach that addresses these policies' far-reaching consequences is essential for improving outcomes and ensuring all individuals have access to affirming, high-quality HIV care.

**The majority of providers believe HIV criminalization policies impact the health of their clients:**



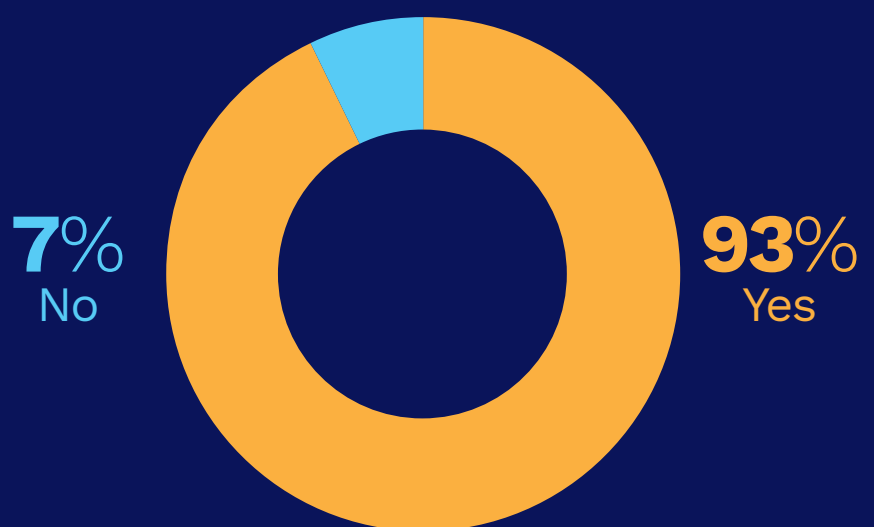
The majority of providers believe that HIV criminalization policies have a negative impact on public health efforts to prevent HIV transmission:



Most providers have never counseled a patient on legal risks related to HIV criminalization:



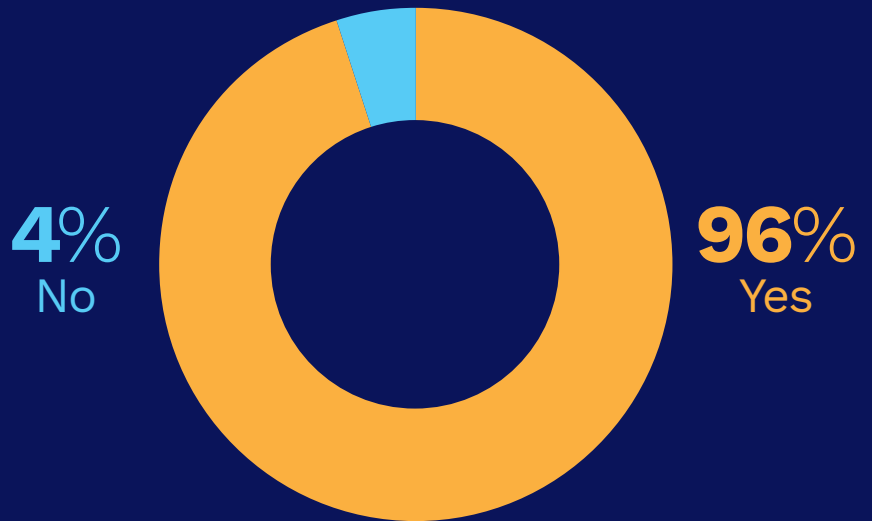
Almost all providers believe anti-LGBTQ healthcare policies impact the health of their clients/patients:



Half of providers believe the recent escalation of anti-trans healthcare legislation across the country has negatively impacted the mental health of their transgender and/or gender non-conforming clients/patients:



Almost all providers think harm reduction criminalization policies or laws impact the health of their clients/patients:



# Implications and Opportunities

The survey findings highlight the complex disconnect between barriers and opportunities to optimize HIV care and end the epidemic.

## Barrier

**The current HIV workforce is facing significant challenges, with experienced providers reporting burnout, poor compensation, and an approaching wave of retirements.**<sup>18</sup> While the gap between available, trained HIV providers and PWH grows, we have entered the next phase in HIV treatment development that has the opportunity to end the epidemic. In order to capitalize on new therapy development and true HIV care innovation, an expanded and experienced workforce is needed.



## Opportunity

**Expanding training opportunities for the next generation of HIV care providers, including primary care and general medicine professionals, can help alleviate workforce shortages and burnout.** The survey demonstrated providers' interest in training on treatment innovations and health disparities. Over two-thirds of providers already offer long-acting injectable treatments for HIV, indicating a willingness to adopt innovative approaches. There is an opportunity to provide more medical education that is responsive to current workforce needs, fostering expansion and innovation in HIV care.

## Barrier

**Despite treatment innovations, viral suppression among PWH remains at 65% due to ongoing gaps in social and behavioral health services, such as housing insecurity, mental illness, and the opioid epidemic.** Despite treatment innovations, viral suppression among PWH remains at 65% due to ongoing gaps in social and behavioral health services, such as housing insecurity, mental illness, and the opioid epidemic.



## Opportunity

**Expanding behavioral health and social services is essential to addressing these gaps and helping priority populations maintain HIV care while managing co-occurring conditions like mental health issues and substance use.** By tackling these intertwined challenges, we can improve long-term health outcomes and support viral suppression.

## Barrier

**Patients continue to face barriers to treatment access.** Providers report that insurance and payor barriers keep patients from accessing regular HIV care and new therapies and directly affects the health outcomes of their clients.



## Opportunity

**Healthcare organizations and systems need sustained funding to provide support services, as well as expanded insurance coverage and reforms to ensure clients have continuous access to HIV care.**

# Breaking Barriers and Building Opportunities to End the HIV Epidemic

Addressing the ongoing disconnect between opportunities and barriers in HIV care requires a multi-faceted, forward-thinking approach. While the development of innovative HIV treatments opens doors to ending the epidemic, significant gaps in workforce capacity, social services, and policy support continue to hinder progress. Expanding the HIV care workforce, enhancing training for both seasoned and new providers, and improving access to behavioral and social services are all critical steps in achieving long-term health outcomes for people with HIV. Advocacy efforts must prioritize sustainable funding, equitable insurance reforms, and the dismantling of discriminatory policies, particularly those targeting LGBTQ individuals and people with HIV. By championing these priorities, healthcare providers and policymakers can drive a more inclusive and impactful response to the HIV epidemic, moving us closer to the goal of ending it by 2030.

## Implications for HIV-Related Advocacy

The survey findings highlight the urgent need for advocacy against HIV criminalization laws and anti-LGBTQ policies to protect patient well-being and public health. Survey respondents identified the role of providers in advocating for policy reform as essential—not only to safeguard patient rights but also to create a care environment where patients feel safe and supported. By working toward policy changes, providers can help reduce barriers to HIV prevention, treatment, and support, ultimately improving health outcomes for patients facing discrimination and legal stigmatization.

### **Advocating Against HIV Criminalization and Anti-LGBTQ Policies to Safeguard Patient Well-Being**

HIV criminalization laws and anti-LGBTQ policies pose profound risks to patient well-being and public health. Providers are positioned to play a key role in advocating against these policies, both to protect patient rights and to foster an environment where patients feel safe accessing care. By supporting policy reform efforts, providers help reduce barriers to HIV prevention, treatment, and support, improving overall health outcomes for patients facing discrimination and legal stigmatization.

To effectively address the pressing concerns surrounding HIV, advocacy priorities must be **flexible and cross-disciplinary**, incorporating adaptable strategies that integrate diverse fields and perspectives.

## Key Advocacy Priorities from Survey Findings

By focusing on these areas, advocates can work towards a more equitable and effective approach to HIV care.

### LONG-TERM FUNDING

- ▶ Prioritize workforce growth at local, state, and federal levels.
- ▶ Significant expansion of the HIV care workforce is essential to meet the U.S. goal of Ending the HIV Epidemic by 2030.

### SUSTAINABLE CHANGE

- ▶ Even with increased funding and new staff, lasting improvements depend on addressing entrenched inequities in policy.

### POLICY ADVOCACY

- ▶ Fight for Medicaid expansion in the remaining ten states.
- ▶ Advocate for greater oversight of private insurance practices.
- ▶ Confront harmful policies, such as gender-affirming care bans that have been enacted in 26 states.<sup>19</sup> Nearly all respondents believe that these harmful policies directly affect the health of their clients and patients.



# Appendix: State of HIV Care Survey Data

## Organization Background

What is your organization type?

Response	Percentage
Academic Hospital/Clinic	7.67%
Addiction Center	.57%
Advocacy Organization	1.28%
AIDS Service Organization (ASO)	6.39%
Community Based Organization (CBO)	18.4%
Community Center	1.85%
Community Pharmacy	.85%
Emergency Room/Urgent Care	.28%
Federally Qualified Health Center (FQHC)	16.05%
Government Entity (Local, State, Federal)	6.96%
Health Department (Non-Clinic)	2.70%
Health Department (Clinic/Public Health Clinic)	11.22%
LGBTQ Health Center	2.13%
Other	4.97%
Private Hospital/Clinic	2.13%
Private Practice	2.13%
Ryan White HIV/AIDS Program Clinic	11.65%
Specialty Pharmacy	.71%
Substance Use Treatment Facility	.71%
University/College	1.28%
Veterans Affairs Medical Center	.43%

In which state do you live/work?

Response	Percentage	Count
Alabama	1.29%	9
Alaska	.86%	6
Arizona	2.00%	14
Arkansas	.86%	6
California	6.71%	47
Colorado	.86%	6
Connecticut	1.86%	13
Delaware	.86%	6
District of Columbia	2.71%	19
Florida	10.00%	70
Georgia	2.86%	20
Hawaii	.14%	1

I do not live/work in the U.S.	1.71%	12
Idaho	.29%	2
Illinois	3.71%	26
Indiana	1.57%	11
Iowa	.14%	1
Kansas	.57%	4
Kentucky	1.29%	9
Louisiana	2.29%	16
Maine	.14%	1
Massachusetts	2.57%	18
Michigan	4.43%	31
Mississippi	1.00%	7
Missouri	1.71%	12
Montana	.43%	3
Nebraska	.14%	1
Nevada	.71%	5
New Hampshire	.29%	2
New Jersey	2.57%	18
New Mexico	.29%	2
New York	8.57%	60
North Carolina	2.71%	19
Ohio	2.14%	15
Oklahoma	.43%	3
Oregon	.57%	4
Pennsylvania	3.57%	25
Puerto Rico	.86%	6
Rhode Island	.29%	2
South Carolina	3.00%	21
Tennessee	.57%	4
Texas	4.00%	28
Utah	.29%	2
Virginia	2.86%	20
Washington	2.14%	15
West Virginia	1.29%	9
Wisconsin	.86%	6
Wyoming	.71%	5

In what setting is your practice?

Response	Count
Urban	488
Rural	203
Suburban	175
Tribal	13

Does your organization have an on-site pharmacy?

Response	Percentage
No	53.12%
Yes	46.88%

What insurance types does your organization accept?

Response	Percentage	Count
Medicaid	56.11%	542
Medicare	52.07%	503
Other Public Insurance	43.69%	422
Employer-Sponsored Insurance	43.17%	417
Other Private Insurance	45.86%	443
Income Dependent/Sliding Scale	39.75%	384
Other	15.32%	148

## Services Offered

What primary care services does your organization offer?

Response	Percentage	Count
Preventative Health Screening	48.76%	471
Immunizations and Vaccinations	46.69%	451
Medication Management/ Prescriptions	43.06%	416
Management of Chronic Conditions	41.72%	403
Annual Exams or Physical Exams	40.58%	392
Medicare Wellness Visits	28.88%	279
Minor In-Office Surgical Procedures	15.84%	153
None of the Above	11.39%	110
Other	8.59%	83

Does your organization provide HIV treatment or care?

Response	Percentage
No	29.39%
Yes	70.61%

Does your organization provide HIV wrap around services?

Response	Percentage
No	31.92%
Yes	68.08%

Does your organization provide HCV treatment/care?

Response	Percentage
No	40.35%
Yes	59.65%

Does your organization provide HCV testing?

Response	Percentage
No	21.82%
Yes	78.18%

What HIV prevention services does your organization provide?

Response	Percentage	Count
HIV Prevention Education	58.70%	567
HIV Testing	57.87%	559
Linkage to Care/Treatment	57.04%	551
Condom Distribution	56.31%	544
Provision of PrEP	50.52%	488
Behavioral Risk Reduction Interventions	48.14%	465
Partner Services	40.68%	393
Provision of nPEP	38.61%	373
Other	4.14%	1

What sexual health services does your organization provide? (Select all that apply)

Response	Percentage	Count
STI Screening and Testing	57.56%	556
HPV Screening or Vaccinations	43.06%	416
Viral Hepatitis (A, B) Services (including vaccination)	42.34%	409
Family Planning Services	30.54%	
Gender Affirming Services	25.26%	244
Expedited Partner Therapy (EPT)	22.36%	216
None of the Above	10.04%	97
Other	3.52%	34

What social support services does your organization provide? (Select all that apply)

Response	Percentage	Count
Case Management	52.07%	503
Transportation Services (bus passes, ride share, etc.)	47.31%	457
Health Care Insurance Navigation (ACA plans, SSDI/SSI, etc.)	38.61%	373
Food/Nutrition Services (food pantry, food stamps, etc.)	36.85%	356
Housing Services	28.67%	277
None of the Above	7.45%	72
Child Care	3.52%	34
Other	3.52%	34

What behavioral health services does your organization provide? (Select all that apply)

Response	Percentage	Count
Individual Psychotherapy/Counseling	39.65%	383
Peer-Led Support Groups	26.81%	259
Outpatient Medicine Management	26.60%	257
Group Psychotherapy/Counseling	21.84%	211
Medication Assisted Treatment (MAT)	21.12%	204
None of the Above	13.56%	131
Crisis Support/Hotlines	12.84%	124
Syringe Exchange Services	11.80%	114
Inpatient Treatment	9.73%	94
Intensive Outpatient Services (IOP)	7.76%	75
Inpatient Detox Services	3.93%	38
Other	2.90%	28

## Populations Served

What age groups does your organization serve? (Select all that apply)

Response	Percentage	Count
Adults (25-49)	65.94%	637
Older Adults (50+)	62.84%	607
Youth (18-24)	60.35%	583
Children and Adolescents (Under 17)	33.13%	320

What LGBTQ+ groups does your organization serve? (Select all that apply)

Response	Percentage	Count
Gay Men/Men Who Have Sex With Men (MSM)	66.46%	642
People Who Identify as Bisexual	65.32%	631
People Who Identify as Transgender	63.77%	616
Lesbians/Women Who Have Sex With Women (WSW)	62.84%	607
People Who Identify as Queer	62.84%	607
People Who Identify as Non-Binary	61.59%	595
None	2.17%	21

What priority populations does your organization serve? (Select all that apply)

Response	Percentage	Count
People Experiencing Homelessness/Unhoused	62.53%	604
People with Substance Use Disorders	62.01%	599
Non-English-Speaking Individuals	60.04%	580
Women of Childbearing Age	58.07%	561
People Who Are Incarcerated or Formerly Incarcerated	56.83%	549
Immigrants/Refugees	54.87%	530
Undocumented Persons	54.35%	525
Pregnant Women	50.72%	490
None of the Above	1.55%	15

## Participant Professional Background

Does your organization provide HIV treatment or care?

Response	Percentage
Clinical	39.09%
Non-Clinical	60.91%

What is your clinical role?

Response	Percentage
Dentist	1.87%
Dietician/Nutritionist	.37%
Endocrinologist	.37%
Licensed Clinical Social Worker	3.75%
Licensed Practical Nurse	5.62%
Medical Assistant	3.37%
Mental Health Case Manager	1.12%
Mental Health Professional	5.24%
Nurse Manager	4.12%
Nurse Practitioner	18.35%
Occupational Therapist	.37%
Other Provider/Clinical Professional	7.12%
Pharmacist	7.12%
Physician (MD/DO)	18.35%
Physician Associate	3.75%
Registered Nurse	19.10%

What is your clinical specialty? (Select all that apply)

Response	Percentage	Count
Addiction Medicine/Substance Use	3.00%	29
Cardiology	.21%	2
Correctional Medicine	.31%	3
Diabetology	.21%	2
Emergency Medicine	.41%	4
Endocrinology	.21%	2
Family Medicine	5.69%	55
Gastroenterology	.10%	1
Hematology	.21%	2
Hepatology	.72%	7
HIV Medicine	10.56%	102
Infectious Disease	8.70%	84
Internal Medicine	3.31%	32
Managed Care	.52%	5
OBGYN/Women's Health	1.66%	16
Oncology	.41%	4
Pediatrics	1.97%	19
Pharmacy	1.14%	11
Primary Care	3.93%	38
Psychiatry/Behavioral Health	2.69%	26
Pulmonology	.21%	2
Rheumatology	.10%	1
Other	2.38%	23
None of the Above	1.76%	17

Can you prescribe medication?

Response	Percentage
No	55.81%
Yes	44.19%

What is your non-clinical role?

Response	Percentage
Administrator	22.36%
Advocate	4.81%
Case Manager/Medical Case Manager	17.07%
Clergy/Faith-Based Professional	.24%
Community Health Worker	12.02%
Disease Intervention Specialist	3.13%
Harm Reductionist/Risk Reductionist	2.40%
Health Education Specialist	5.77%
Health Navigator	4.09%
Medical Billing	.72%
Mental Health Professional	.72%
Non-Clinical Professional	12.26%
Outreach Worker	5.77%

Researcher	3.13%
Student	.24%
Substance Use Counselor/Professional	.72%

How many years have you been in this role?

Response	Percentage
Less Than 2 Years	19.50%
11-20 Years	20.53%
2-4 Years	21.99%
21+ Years	17.89%
5-10 Years	20.09%

## Participant Demographics

What is your gender identity?

Response	Percentage
Female/Woman	65.38%
Genderqueer/Gender Non-Conforming/Non-Binary	3.57%
Male/Man	27.19%
Prefer Not to Respond	1.93%
Prefer to Self-Describe	.59%
Transgender Man	.89%
Transgender Woman	.45%

What is your race?

Response	Percentage
Asian and/or Asian American	1.79%
Black or African American	31.49%
Multiracial	7.16%
Native American or Alaska Native	.60%
Native Hawaiian or Pacific Islander	.15%
Prefer Not to Respond	5.97%
Prefer to Self-Describe	2.69%
White or Caucasian	50.15%

Do you identify as Hispanic or Latino?

Response	Percentage
No	79.20%
Prefer Not to Respond	3.86%
Yes	16.94%

What is your age range?

Response	Percentage
18–24	1.49%
25–34	11.89%
35–44	21.84%
45–54	24.67%
55–64	25.71%
65+	11.29%
Prefer Not to Respond	3.12%

## Workforce Burnout

How often do you feel emotionally drained from work?

Response	Percentage
A Few Times a Month	23.86%
A Few Times a Week	15.32%
A Few Times a Year or Less	24.45%
Every Day	6.92%
Never	7.51%
Once a Month or Less	13.11%
Once a Week	8.84%

Have you considered quitting/leaving your job at any point during the last six months?

Response	Percentage
No	55.60%
Yes	44.40%

How often do you feel you have accomplished worthwhile things in your job?

Response	Percentage
A Few Times a Month	21.18%
A Few Times a Week	26.18%
A Few Times a Year or Less	6.03%
Every Day	30.44%
Never	.74%
Once a Month or Less	7.79%
Once a Week	7.65%

My clients/patients value my work:

Response	Percentage
Agree	41.79%
Disagree	.90%
Neutral	8.51%
Strongly Agree	46.42%
Strongly Disagree	2.39%

My colleagues value my work:

Response	Percentage
Agree	44.25%
Disagree	3.14%
Neutral	13.75%
Strongly Agree	36.32%
Strongly Disagree	2.54%

My supervisors and/or organization leadership value my work:

Response	Percentage
Agree	41.77%
Disagree	5.39%
Neutral	17.07%
Strongly Agree	30.99%
Strongly Disagree	4.79%

What of the following are the most challenging workforce issues you are currently facing?

Response	Percentage
Workforce Shortage	155
Poor and/or Stagnant Compensation	149
Burnout	70
Inflexible Work Shifts/Scheduling	17
Lack of Training	23
Inadequate Benefits Package	21
Inadequate Paid Time Off/Vacation	18
Increased Workload	93

What is your organization doing to address workforce challenges? (Select all that apply)

Response	Percentage
Workforce Shortage	155
Poor and/or Stagnant Compensation	149
Burnout	70
Inflexible Work Shifts/Scheduling	17
Lack of Training	23
Inadequate Benefits Package	21
Inadequate Paid Time Off/Vacation	18
Increased Workload	93

## Education and Training

Where do you currently receive continuing education/training?

Response	Percentage
Online Conferences/Meetings	5.07%
Webinars	51.35%
In-Person Conferences/Meetings	48.03%
Self-Paced Courses (online)	46.48%
Internal Organizational Training (in-person)	34.47%
Self-Paced Educational Videos	31.88%
Self-Paced Microlearning	11.18%
Social Media	10.35%
Self-Paced Simulations	6.31%
Other	2.80%
None of the Above	.10%

Where do you prefer to receive continuing education/training?

Response	Percentage
In-Person Conferences/Meetings	48.96%
Online Conferences/Meetings	37.16%
Webinars	36.96%
Self-Paced Courses (online)	36.96%
Internal Organizational Training (in-person)	25.05%
Self-Paced Educational Videos	20.60%
Self-Paced Microlearning	9.73%
Self-Paced Simulations	9.94%
Social Media	5.69%
Other	1.35%
None of the Above	0%

What health care topics are you most interested in receiving education/training on?

Response	Count
Monitoring Health Disparities/Addressing Health Equity	122
Fiscal Health (Ryan White, 340B, PrEP)	56
Preventing Stigma and Discrimination	55
Addressing Mental/Behavioral Health	48
Providing Trauma Informed Care	40
Discussing Sexual Health with Clients/Patients	34
Addressing Structural Racism	33
Providing Culturally Competent Care	29
Preventing Provider Burnout/Health Care Workforce Shortages	27
Building Coalitions/Patient Access Advocacy	21
Providing Affirmative Care for Transgender/Non-Binary Clients	17
Discussing Substance Use with Clients/Patients	15
Conducting Motivational Interviewing	13
Caring for Undocumented Individuals	11
Expanding/Implementing Telehealth	11
Conducting Risk Assessments	10
Immunizations/Vaccinations	10
Other	10
Increasing Workforce Diversity	7

What specific HIV care and treatment topics are you most interested in receiving education/training on?

Response	Count
New HIV Treatments Including Injectable Treatment	113
Integration of STIs, Viral Hepatitis, and HIV Services	41
Current HIV Treatment Guidelines	40
Reducing Administrative Burdens Related to Treatment Prior Authorizations	37
Integrating HIV Treatment into Primary Care	35
Monitoring Clients/Patients with HIV Not on Treatment	32
Addressing Treatment Resistance Among Clients/Patients with HIV	31
Discussing Management of HIV Treatment Side Effects	23
Ordering and Interpreting Baseline HIV Labs	14
Managing HCV Coinfection with HIV	11
Managing HBV Coinfection with HIV	6
Other	2

What specific PrEP topics are you most interested in receiving education/training on?

Response	Count
Providing On-Demand PrEP/PrEP 211	75
Providing PrEP for Hard to Reach Populations	56
Providing Injectable PrEP	35
Applying a “Whole Person” Approach to PrEP Programs	30
Promoting PrEP Programs in the Community	29
Funding PrEP Programs	27
Helping Clients/Patients Cover the Costs of PrEP	18
Providing TelePrEP Services	14
Providing Event-Based PrEP	13
Linking Clients from PEP to PrEP	12
Providing PrEP in the Pharmacy Setting	11
Providing PrEP Navigation Services	11
Linking Clients from PrEP to Doxy PEP	9
Assessing Behavioral Risk/Taking a Sexual History	6
Navigating Reimbursement for PrEP Services	6
Other	2

## Primary Care

You indicated that your organization offers primary care services. Do you personally provide any primary care services?

Response	Percentage
No	78.03%
Yes	21.97%

Which of the following physical health screenings do you perform? (Check all that apply)

Response	Percentage
Cardiovascular Disease (e.g., Hypertension, Cholesterol)	83.18%
Diabetes Screening (e.g., Fasting Glucose, A1C)	83.18%
Frailty Screening (e.g. Bone Density Scan)	60.75%
None of the Above	14.02%

Do you perform breast cancer screenings (mammograms)?

Response	Percentage
I Perform This Screening	36.79%
I Refer My Clients/Patients to Another Provider for This Screening	46.23%
This Screening is Not Part of My Standard of Care	16.98%

Do you perform colon cancer screenings (colonoscopies)?

Response	Percentage
I Perform This Screening	29.52%
I Refer My Clients/Patients to Another Provider for This Screening	53.33%
This Screening is Not Part of My Standard of Care	17.14%

Do you perform cervical cancer screenings (pelvic exams, cervical Paps)?

Response	Percentage
I Perform This Screening	63.21%
I Refer My Clients/Patients to Another Provider for This Screening	27.36%
This Screening is Not Part of My Standard of Care	9.43%

Do you perform anal cancer screenings (anal Paps)?

Response	Percentage
I Perform This Screening	49.06%
I Refer My Clients/Patients to Another Provider for This Screening	30.19%
This Screening is Not Part of My Standard of Care	20.75%

Do you perform prostate cancer screenings (PSA or digital rectal exams)?

Response	Percentage
I Perform This Screening	61.68%
I Refer My Clients/Patients to Another Provider for This Screening	20.56%
This Screening is Not Part of My Standard of Care	17.76%

Do you perform hepatocellular cancer screenings (abdominal ultrasounds)?

Response	Percentage
I Perform This Screening	33.02%
I Refer My Clients/Patients to Another Provider for This Screening	43.40%
This Screening is Not Part of My Standard of Care	23.58%

Which of the following behavioral health screenings do you perform? (Select all that apply)

Response	Percentage
Depression	82.24%
Substance Use	75.70%
Anxiety	74.77%
Self Harm/Suicide Risk	70.09%
Gender Dysphoria	36.45%
Body Dysmorphia	19.63%
None of the Above	12.15%

## Mpox

Does your organization offer the mpox vaccine?

Response	Percentage
No	55.61%
Yes	44.39%

Are you concerned that your clients/patients could contract mpox?

Response	Percentage
No	15.47%
Unsure	19.62%
Yes	64.91%

From your perspective, what is the primary reason for mpox vaccine hesitancy or refusal? (Select one)

Response	Percentage
Concerns About Vaccine Pain/Scarring	1.51%
Concerns About Vaccine Safety	10.94%
Cultural/Religious Reasons	.75%
Lack of Knowledge About mpox Transmission and/or Vaccine	37.74%
Low Assumption of Infection Risk	29.43%
Medical Mistrust	10.57%
None of the Above	4.91%
Other	4.15%

Are you implementing strategies in your practice to improve mpox vaccination acceptance?

Response	Percentage
No	16.73%
Unsure	26.24%
Yes	57.03%

Are you aware of the updated Advisory Committee on Immunization Practices (ACIP) guidelines for mpox vaccination?

Response	Percentage
No	49.43%
Yes	50.57%

## Behavioral Health Care

You indicated that your organization offers behavioral health services. Do you personally provide behavioral health services?

Response	Percentage
No	80.84%
Yes	19.16%

Which of the following behavioral health issues do you personally provide services for? (Select all that apply)

Response	Percentage
Depression, Anxiety, Suicidal Ideation	7.25%
Alcohol Use	6.21%
Substance Misuse (Non-Opioid)	5.28%
Post Traumatic Stress Disorder/Trauma	4.45%
Opioid Misuse	4.35%
Smoking/Vaping/Tobacco Use/Cessation	4.35%
Gender Dysphoria	3.52%
Interpersonal Violence	3.52%
Eating Disorders	2.38%
Body Dysmorphia	1.97%
Other	1.04%
None of the Above	.31%

## Sexual and Reproductive Health Care

You indicated that your organization offers sexual and/or reproductive health services. Do you personally provide sexual or reproductive health services?

Response	Percentage
No	62.90%
Yes	37.10%

Do you offer routine STI testing?

Response	Percentage
No	7.49%
Yes	92.51%

How often do you offer routine STI testing?

Response	Percentage
Annually	8.09%
At Each Visit	48.55%
Every Three Months	28.90%
Every Six Months	2.89%
Other	11.56%

Do you offer site-specific STI testing?

Response	Percentage
No	10.16%
Unsure	9.09%
Yes	80.75%

Which of the following family planning services does your organization provide?

Response	Percentage
Pregnancy Testing	79.68%
Birth Control Management	61.50%
Pregnancy Counseling	54.01%
None of the Above	13.90%
Genetic Counseling and Testing	11.23%
Infertility Services	10.70%
Male and Female Sterilization	9.09%
Other	5.35%

Do you offer Doxy PeP (preventative treatment for bacterial STIs)?

Response	Percentage
No	28.88%
Unsure	10.16%
Yes	60.69%

Do you offer expedited partner therapy?

Response	Percentage
No	25.13%
Unsure	19.79%
Yes	55.08%

How comfortable are you with taking a comprehensive sexual history?

Response	Percentage
Not Very Comfortable	1.07%
Somewhat Comfortable	19.25%
Very Comfortable	77.54%
Very Uncomfortable	2.14%

When taking a comprehensive sexual history with your patients/clients, what do you ask/talk about?

Response	Percentage
All of the Above	68.45%
STI Protection	28.89%
Sexual Partners	27.81%
Sexual Practices	25.67%
Past History of STIs	25.67%
Pregnancy Intentions/Birth Control	17.11%
Screen for Sexual Violence/Interpersonal Violence	13.90%
Other	1.07%
None of the Above	0%

## HIV Continuum

Do you personally provide HIV testing and diagnosis services?

Response	Percentage
No	44.37%
Yes	55.63%

If you provide HIV testing, in which of the following settings do you provide this service?

Response	Percentage
Onsite at My Organization's Location	21.74%
Community Health Fairs/Events	15.84%
Community Based Organizations (CBOs)	9.94%
At Home Testing	6.42%
Health Department Clinics	5.28%
Substance Use Treatment Centers	5.18%
Correctional Facilities	4.66%
Primary Care Office	4.55%
AIDS Service Organizations (ASOs)	3.11%
Family Planning Clinics	2.80%
Emergency Room/Urgent Care	1.45%
Other	1.97%

What is the greatest challenge to providing HIV testing services?

Response	Percentage
Refusal to Get Tested	74
Limited Staff/Workforce Shortage	47
Limited Testing Resources	41
Limited Time During Appointments	25
Limited Testing Guidelines or Organizational Policies (e.g., patient does not meet criteria for testing)	12
Inadequate Preparation of Testing Providers	9
Other	8

What is the greatest challenge to getting tested for HIV from the client/patient perspective?

Response	Percentage
Fear of Stigma or Discrimination	107
Assumption of Low HIV Risk	44
Lack of Knowledge About Available Care	19
Distrust in Health Care System	16
Fear of Confidentiality Breach	13
Mental Health Issues	8
Substance Use	8
Insufficient Counseling	7
Cost or Insurance Issues	5
Interpersonal Violence Concerns	2
Other	2
Lack of Transportation to Testing	1

Do you know how many people your organization tested for HIV last year?

Response	Percentage
No	51.87%
Yes	48.13%

Please indicate how many people your organization tested for HIV last year:

Response	Percentage
Less than 50	9.48%
1,000–1,999	14.66%
2,000+	21.55%
501–999	20.69%
51–500	33.62%

How has this changed since last year?

Response	Percentage
Decreased	9.57%
Increased	69.57%
No Change	11.30%
Unsure	9.57%

Do you know how many people your organization diagnosed with HIV last year?

Response	Percentage
No	52.89%
Yes	47.11%

Please indicate how many people your organization diagnosed with HIV last year:

Response	Percentage
Less than 50	80.70%
1,000–1,999	1.75%
2,000+	3.51%
51–500	14.04%

How has this changed since last year?

Response	Percentage
Decreased	12.39%
Increased	32.74%
No Change	37.17%
Unsure	17.70%

Do you personally link people with confirmed HIV antibody tests to HIV care?

Response	Percentage
No	45.52%
Yes	54.48%

What is the greatest challenge to timely (within one month of diagnosis) linking people with HIV to care?

Response	Percentage
Patient Refusal	64
Limited Appointment Times	44
Insurance Coverage Concerns	30
Indirect Costs of Getting an Appointment	25
Limited Options for HIV Care in Region	19
Limited Staff/Workforce Shortage	17
Patient Refusal	12
Other	7

What is the greatest challenge to timely access to HIV care from the client/patient perspective?

Response	Percentage
Fear of Stigma or Discrimination	107
Lack of Knowledge About Available Care	21
Cost or Insurance Issues	14
Distrust in Health Care System	12
Substance Use	11
Fear of Confidentiality Breach	9
Mental Health Issues	9
Lack of Transportation to Care	8
Housing Instability	7
Long Waiting Times for an Appointment	6
Employment Issues (e.g., shift scheduling)	5
Lack of Available Care	5
Insufficient Counseling	4
Inconvenient Appointment Times	3
Childcare Issues	2
Other	1

Do you know how many people referrals for HIV care were made either to your organization or by your organization last year?

Response	Percentage
No	62.50%
Yes	37.50%

Please indicate how many people your organization referred to HIV care last year:

Response	Percentage
Fewer than 50	66.67%
1,000–1,999	1.15%
2,000+	1.15%
501–999	3.45%
51–500	27.59%

How has this changed since last year?

Response	Percentage
Decreased	2.30%
Increased	47.13%
No Change	43.68%
Unsure	6.90%

Are you personally involved in the initial appointment with a new client/patient starting HIV care?

Response	Percentage
No	56.22%
Yes	43.78%

What is the greatest challenge to starting patients on ART?

Response	Count
Insurance Barriers (formulary restrictions)	54
Concerns About ART Side Effects	48
Administrative Time Involved in Processing Prior Authorizations or Patient Assistance Applications	24
Concerns About Adherence to ART	23
Other	8
Concerns About ART Interactions with Current Medications/Comorbidities	7

What is the greatest challenge to starting ART from the client/patient perspective?

Response	Count
Fear of Stigma or Discrimination	47
Concerns About ART Side Effects	41
Insurance Barriers/Co-Pays	39
Mental Health Issues	12
Fear of Confidentiality Breach	9
Distrust in Health Care System	6
Concerns About ART Interactions with Current Medications	4
Other	4
Insufficient Counseling	1

Do you offer long-acting injectables for HIV treatment?

Response	Percentage
No	22.87%
Unsure	7.45%
Yes	69.68%

Do you know how many people your organization provided HIV services to last year (had at least one appointment — medical visit or lab work — in the past 12 months)?

Response	Percentage
No	40.74%
Yes	59.26%

Please indicate how many people your organization provided HIV services to last year:

Response	Percentage
Fewer than 50	13.39%
1,000–1,999	13.39%
2,000+	7.14%
501–999	12.50%
51–500	53.57%

How has this changed since last year?

Response	Percentage
Decreased	7.21%
Increased	50.45%
No Change	29.73%
Unsure	12.61%

Approximately what percentage of your patients rely on Ryan White/ADAP to cover the cost of HIV medication?

Response	Percentage
Fewer than 49%	22.87%
50–59%	12.23%
60–69%	4.79%
70–79%	10.64%
80–89%	14.36%
90–99%	14.36%
None/Not Applicable	6.91%
Unsure	13.83%

Which health insurance type generally requires the most time to complete and receive a determination for ART?

Response	Percentage
Medicaid	16.04%
Medicare	2.14%
Other	.53%
Other Public Insurance	4.81%
Private Insurance (ACA Plan)	6.95%
Private Insurance (Employer)	21.93%
Ryan White/ADAP	10.16%
There Is No Difference	12.83%
Unsure	24.60%

Are you personally involved in routine/follow-up appointments with clients/patients receiving HIV care?

Response	Percentage
No	55.32%
Yes	44.68%

What is the greatest challenge for people with HIV to regularly attend medical appointments?

Response	Count
Lack of Transportation to Care	44
Fear of Stigma or Discrimination	33
Mental Health Issues	27
Housing Instability	19
Cost or Insurance Issues	13
Substance Use	11
Employment Issues (e.g., shift scheduling)	11
Fear of Confidentiality Breach	9
Inconvenient Appointment Times	6
Long Waiting Times For an Appointment	4
Reluctance to Follow Provider’s Advice	4
Other	4
Childcare Issues	3
Incarceration or Legal Detention	1
Too Sick to Travel to Clinic	1

Does your organization provide any of the following retention in care strategies? (Select all that apply)

Response	Percentage
Routinely Contacts Patients Prior to Their Appointment as a Reminder (e.g. phone, email, text)	18.22%
Routinely Follows Up With Patients Who Miss Their Appointments (e.g. phone, email, text)	17.70%
Routinely Reinforces the Value of Follow Up Visits	16.46%
Provides Patient Navigation or Case Management Services (e.g. accompanying to appointments as needed)	15.42%
Systematically Monitors Retention in Care of All HIV Patients (e.g. monitoring visit adherence, gaps in care, visits per interval or time)	13.98%
Provides Telehealth Services	13.87%
Provides Bridge Counseling and/or Re-Engagement Services	9.83%
Offers Flexible Scheduling (walk-in hours) or Extended Clinic Hours (e.g. evenings, weekends)	9.42%
Other	.31%
None	.21%

What is the greatest challenge for people with HIV to regularly attend medical appointments?

Response	Count
Lack of Transportation to Care	44
Fear of Stigma or Discrimination	33
Mental Health Issues	27
Housing Instability	19
Cost or Insurance Issues	13
Substance Use	11
Employment Issues (e.g., shift scheduling)	11
Fear of Confidentiality Breach	9
Inconvenient Appointment Times	6
Long Waiting Times For an Appointment	4
Reluctance to Follow Provider's Advice	4
Other	4
Childcare Issues	3
Incarceration or Legal Detention	1
Too Sick to Travel to Clinic	1

How satisfied are you with your current retention in care strategies?

Response	Percentage
Dissatisfied	8.47%
Neutral	21.69%
Satisfied	44.97%
Very Dissatisfied	1.06%
Very Satisfied	23.81%

Are you aware of your organization's lost to care rate (percent without a medical or lab visit in the past 12 months)?

Response	Percentage
No	78.53%
Yes	21.47%

How has this changed from last year?

Response	Percentage
Decreased	26.83%
Increased	12.20%
No Change	53.66%
Unsure	7.32%

Are you personally involved with supporting clients/patients with ART adherence?

Response	Percentage
No	55.24%
Yes	4.76%

What is the greatest challenge for people with HIV to adhere to ART and attain viral load suppression?

Response	Count
Mental Health Issues	50
Fear of Stigma or Discrimination	39
Housing Instability	27
Substance Use	18
Pharmacy Issues (e.g. late refills)	27
Incorrect Medication Administration (e.g. missing doses)	14
Other	7
Reluctance to Follow Provider's Advice	6
Fear of Confidentiality Breach	4
Employment Issues (e.g. shift scheduling)	4
Incarceration or Legal Detention	1

Do you communicate the Undetectable = Untransmittable (U=U) message to your patients with HIV?

Response	Percentage
No	1.57%
Unsure	1.57%
Yes	96.86%

Are you aware of your organization's viral suppression rates (percent of clients/patients with a viral load less than 200 copies/ml on last labs)?

Response	Percentage
No	53.65%
Yes	46.35%

How has this changed from last year?

Response	Percentage
Decreased	7.95%
Increased	37.50%
No Change	43.18%
Unsure	11.36%

Which component of the HIV care continuum, if any, do you believe needs the most attention in your organization?

Response	Percentage
Initial Receipt of Care/Starting ART	6.54%
Linkage to Care	13.55%
None of the Above	11.92%
Retention in Care	42.99%
Testing and Diagnosis	19.16%
Viral Suppression	5.84%

What do you most need to improve HIV services at your organization? (select one)

Response	Percentage
Access to HIV Related Data	1.17%
Dedicated Insurance or Health Navigation Specialists	4.91%
Fiscal Health/Funding to Support HIV Services	30.14%
Increased Insurance Coverage for HIV Specific Services	4.67%
Increased Reimbursement Rates or Considerations	3.97%
Marketing Resources to Educate the Public About HIV Care	9.11%
More HIV-Focused Training for Providers	6.07%
More Providers Trained in HIV Care	17.52%
None of the Above	5.61%
Other	3.50%
Support Staff to Provide Wraparound Services to HIV Clients/Patients	13.32%

How often do you refer the following complex cases to another provider or specialist?

Response	Percentage
<b>Resistance Testing</b>	
All of the Time	12.72%
Most of the Time	5.26%
None of the Time	53.07%
Some of the Time	10.53%
Unsure	18.42%
<b>Choosing an Atypical ART Regimen in the Setting of Medication Class Resistance</b>	
All of the Time	14.98%
Most of the Time	3.52%
None of the Time	50.66%
Some of the Time	14.54%
Unsure	16.30%
<b>Treating Opportunistic Infections (e.g. toxoplasmosis, tuberculosis, Kaposi's Sarcoma)</b>	
All of the Time	16.81%
Most of the Time	6.19%
None of the Time	39.82%
Some of the Time	21.68%
Unsure	15.49%

<b>Treating HIV/HCV Co-Infection</b>	
All of the Time	18.61%
Most of the Time	4.33%
None of the Time	44.16%
Some of the Time	18.18%
Unsure	14.72%
<b>HIV Treatment in Pregnancy</b>	
All of the Time	26.11%
Most of the Time	7.52%
None of the Time	38.94%
Some of the Time	12.83%
Unsure	14.60%

What do you think are the most timely and important HIV care topics right now? (Select all that apply)

Response	Percentage
Aging with HIV	26.50%
Stigma and Discrimination	24.12%
Behavioral Health	24.02%
Whole Person Care	22.05%
HIV and Comorbidities	21.12%
Support Services	18.43%
Transgender Health	18.32%
Harm Reduction	17.60%
Systemic Racism	17.29%
Insurance Costs/Issues	16.87%
Trauma Informed Care	15.84%
Multipurpose Prevention Technologies	10.56%
Treatment Resistance	9.42%
Other	1.35%
None	.10%

To what extent have you/your organization implemented a whole person model of care?

Response	Percentage
I am Aware of Whole Person Care But Have Not Implemented it Into My Practice	12.18%
I am Not Aware of Whole Person Care	21.78%
I Have Fully Integrated Whole Person Care Into My Practice	37.94%
I Have Partially Integrated Whole Person Care Into My Practice	28.10%

What is the most common insurance restriction related to HIV care that you encounter in your practice? (Select one)

Response	Percentage
Large Co-Pays	19.44%
Limited Medication Formularies/Prior Authorizations for Medications	22.95%
Limited or No Coverage for Specialist Care	15.46%
None of the Above	23.89%
Other	4.68%
Prior Authorizations for Tests/Procedures	13.58%

## PrEP Continuum

Are you personally involved in PrEP outreach and/or promotion?

Response	Percentage
No	50.41%
Yes	49.59%

What do you think is the top challenge to raising PrEP awareness/reaching priority populations with PrEP messaging?

Response	Count
Promoting Interest in PrEP	52
Developing Community Trust	46
Promoting Awareness of HIV Risk	38
Preventing Stigma and/or Discrimination	27
Providing Sufficient Counseling	8
Other	3

To which of the following populations do you provide PrEP?

Response	Percentage
Men Who Have Sex With Men (MSM)	16.98%
Youth (18–24)	15.94%
People Who Use Substances	15.32%
Older Adults (50+)	14.91%
Transgender People	14.80%
Heterosexual Women	13.66%
People Who Are Experiencing Homelessness/ Are Unhoused	13.46%
Non-English-Speaking Individuals	13.04%
Undocumented Persons	12.42%
People Who Are Incarcerated or Formerly Incarcerated (jail or person)	11.49%
Other	.83%

Which of the following populations do you think you/your organization could be better at reaching?

Response	Count
People Who Are Experiencing Homelessness/ Are Unhoused	41
Youth (18–24)	33
People Who Use Substances	25
Heterosexual Women	18
People Who Are Incarcerated or Formerly Incarcerated (jail or person)	11
Non-English-Speaking Individuals	11
Older Adults (50+)	7
Undocumented Persons	7
Men Who Have Sex With Men (MSM)	7
Transgender People	7
Other	5

Do you think client/patient interest in PrEP has changed in the past year?

Response	Percentage
No	38.67%
Yes	61.33%

How has this changed from last year?

Response	Percentage
Decreased	7.21%
Increased	81.98%
Unsure	10.81%

Do you personally link clients/patients to PrEP?

Response	Percentage
No	54.37%
Yes	45.63%

Do you know how many people your organization linked to PrEP last year?

Response	Percentage
No	63.86%
Yes	36.14%

How many people did your organization link to PrEP last year?

Response	Percentage
Fewer Than 50	45.00%
1,000 – 1,999	5.00%
2,000+	1.67%
501 – 999	3.33%
51 – 500	45.00%

How has this changed since last year?

Response	Percentage
Decreased	13.56%
Increased	57.63%
No Change	23.73%
Unsure	5.08%

What do you think are the top three challenges to timely linking people at risk for HIV to PrEP?

Response	Count
Provider Discomfort Discussion PrEP	53
Refusal to be Linked to PrEP	33
Limited Staff/Workforce Shortage at PrEP Clinics	23
Limited PrEP Clinics/Services	21
Limited Appointment Times	13
Other	8
Limited Guidelines or Organizational Policies (e.g. patient does not meet criteria for PrEP services)	5

Which of the following do you believe are the most effective methods for increasing PrEP uptake?

Response	Count
Provider Initiated Patient Discussions	74
Targeted Community Promotions (e.g. transit signage, billboards, public benches, etc.)	20
Peer to Peer Discussions	20
Dating Apps	16
Influencers/Community Representatives	8
Provider Presentations/Tabling at Community Social Gathering Events (e.g. Pride events, community center events, faith-based events, etc.)	7
TV Advertisements	6
Social Media Marketing	5
Other	2
Promotional Materials in Clinic Waiting Rooms	1

Are you personally involved in initiating or prescribing PrEP?

Response	Percentage
No	71.58%
Yes	28.42%

Which of the following pose the greatest challenges to your organization's ability to provide CAB? (Select all that apply)

Response	Percentage
Insurance Issues	5.49%
Workflows for Integrating CAB Administration Into Your Practice	2.69%
Funding to Support a CAB Program	2.17%
Access to Adequate Support Staff (PrEP navigators, case managers, etc.)	1.66%
Physical Capacity (e.g. refrigeration units, syringes, etc.)	1.24%
Staff Training	.93%
Other	.21%
We Have Not Encountered Any Barriers Providing CAB	0%

Which of the following PrEP modalities do you offer? (Select all that apply)

Response	Percentage
TDF/FTC (Truvada)	10.46%
TAF/FTC (Descovy)	9.63%
CAB (Apretude)	6.73%

Which health insurance plan generally requires the most time to complete and receive a determination for PrEP?

Response	Percentage
Private Insurance (employer)	44.23%
There Is No Difference	22.12%
Medicaid	8.65%
Other	4.81%
Medicare	4.81%
Other Public Insurance	3.85%
Ryan White/ADAP	1.92%

How confident are you in prescribing PrEP to transgender individuals and/or people receiving hormone therapy?

Response	Percentage
Very Confident	62.14%
Fairly Confident	22.33%
Somewhat Confident	11.65%
Slightly Confident	1.94%
Not Confident At All	1.94%

How often do you provide STI testing services during PrEP appointments?

Response	Percentage
Routinely/At Every PrEP Visit	90.91%
Only When Symptoms Arise	9.09%

Approximately what percentage of your patients rely on patient assistance programs to access PrEP?

Response	Percentage
Unsure	24.04%
Less Than 49%	20.19%
50–59%	15.38%
60–69%	12.50%
80–89%	9.62%
70–79%	8.65%
90–99%	7.69%
None/Not Applicable	1.92%

How has this changed since last year?

Response	Percentage
Unsure	24.04%
Less Than 49%	20.19%
50–59%	15.38%
60–69%	12.50%

What is the greatest challenge to prescribing PrEP?

Response	Count
Time Required to Complete Prior Authorizations	34
Preferred PrEP Modality Not Covered by Insurance	24
No Insurance	20
Concerns About Adherence to PrEP	10
Low or No Reimbursement for PrEP Office Visits	2
Concerns About Medication Interactions	2

What do you think is the greatest challenge to initiating PrEP from the client/patient perspective?

Response	Count
Low Perceived HIV Risk	36
Fear of Stigma or Discrimination	19
Cost or Insurance Issues (e.g co-pays)	17
Insufficient Counseling	7
Concern About Medication Side Effects	6
Distrust in Health Care System	5
Lack of Transportation to Care	2
Long Waiting Times for an Appointment	2
Lack of Available Care	1
Housing Instability	1
Mental Health Issues	1
Substance Use	1

Are you personally involved in helping clients/patients remain adherent to PrEP?

Response	Percentage
No	65.30%
Yes	34.70%

How satisfied are you with your current retention in care practices?

Response	Percentage
Satisfied	36.36%
Neutral	33.88%
Very Satisfied	18.18%
Dissatisfied	9.92%
Very Satisfied	1.65%

What is the greatest reason clients/patients discontinue PrEP?

Response	Count
Difficulty Adhering to Medication	31
No Longer Perceive HIV Risk	21
Medication Cost/Lack of Insurance	19
Frequency of Required Appointments	18
Appointment Cost	11
Medication Side Effects	6
Fear of Stigma or Discrimination	5
Distance From Nearest Pharmacy	3
Difficulty Obtaining Refills From the Pharmacy	2
Other	2

Does your organization provide any of the following retention in care strategies for PrEP? (select all that apply)

Response	Percentage
Routinely Contacts Patients Prior to Appointment as a Reminder (e.g. phone, email, text)	11.18%
Routinely Follows Up With Patients Who Miss Appointments (e.g. phone, email, text)	10.04%
Provides PrEP Navigation or Case Management Services	9.73%
Routinely Reinforces Value of Followup Visits	9.63%
Systematically Monitors Retention in Care of All PrEP Patients (e.g. monitoring visit adherence, gaps in care, or visits per interval or time)	7.76%

Which stage along the PrEP care continuum, if any, do you believe needs the most attention in your organization?

Response	Percentage
Outreach/PrEP Promotion	39.34%
Retention in Care	21.58%
Linkage to PrEP	13.39%
Adherence to PrEP	9.56%
Prescribing PrEP	8.47%
PrEP Uptake	7.65%

Are you familiar with PleasePrEPMe.org?

Response	Percentage
No	74.79%
Yes	25.21%

Are you familiar with HealthHIV's HIV Prevention Certified Provider certification program?

Response	Percentage
No	47.40%
Yes	52.60%

## Anti-LGBTQ Policies

Are you aware of any HIV criminalization laws in your state or region?

Response	Percentage
No	54.27%
Yes	45.73%

Do you think these policies impact the health of your clients/patients?

Response	Percentage
No	33.64%
Yes	66.36%

Have you observed any differences in how HIV criminalization affects your patients who belong to marginalized communities, such as people of color, LGBTQ+ individuals, or people who use drugs?

Response	Percentage
No	47.20%
Yes	52.80%

How often do your patients express concerns about HIV criminalization?

Response	Percentage
Always	3.00%
Never	28.69%
Often	6.00%
Rarely	35.97%
Sometimes	26.34%

Have you ever had to counsel a patient on legal risks related to HIV criminalization?

Response	Percentage
No	71.95%
Yes	28.05%

How often have you had to counsel patients on legal risks related to HIV criminalization?

Response	Percentage
Always	13.74%
Often	15.27%
Rarely	38.39%
Sometimes	32.06%

Do you think that HIV criminalization policies have a negative impact on public health efforts to prevent HIV transmission?

Response	Percentage
No	29.34%
Yes	70.66%

In your opinion, what steps could be taken to mitigate the negative effects of HIV criminalization on the lives of people living with HIV (PLWH)?

Response	Percentage
Increasing public awareness and understanding of HIV and its impacts, and challenging myths and misconceptions about HIV transmission and criminalization.	35.09%
Educating lawmakers and law enforcement officials on HIV and its transmission.	33.95%
Replacing laws that criminalize HIV exposure, transmission, or non disclosure with public health approaches that prioritize prevention, testing, treatment, and support.	33.64%
Building coalitions and partnerships across sectors and communities to advance policies and practices that reduce HIV related stigma, discrimination, and criminalization.	31.68%
Increasing HIV testing rates by reducing stigma and discrimination against PLWH.	30.64%
Strengthening community based organizations and networks that advocate for the rights PLWH and provide legal and social support services.	30.43%

What is your opinion on the use of molecular health surveillance (MHS) for HIV?

Response	Percentage
NEUTRAL: I do not have a strong opinion on the use of MHS for HIV. I would like to learn more about the technology, its benefits, and its limitations before making a decision.	37.26%
STRONGLY SUPPORT: I believe that MHS is an important tool for tracking the spread of HIV and monitoring the effectiveness of treatments.	25.05%
SOMEWHAT SUPPORT: I think that MHS for HIV has some potential benefits, but it also raises concerns about privacy, data security, and confidentiality.	23.77%
SOMEWHAT OPPOSE: I have some concerns about the potential impact of MHS on individual privacy and confidentiality for PLWH. I believe that any surveillance program should be designed with safeguards to protect the privacy and rights of individuals.	7.92%
STRONGLY OPPOSE: I believe that MHS for HIV is an invasion of privacy and a violation of human rights. Genetic testing should not be used to track the spread of HIV or monitor the effectiveness of treatments, as it can stigmatize and marginalize PLWH and undermine their autonomy and dignity.	6.00%
Strengthening community based organizations and networks that advocate for the rights PLWH and provide legal and social support services.	30.43%

Have you changed any of your prescribing practices in light of the recent ruling on PrEP in Texas? (The ruling overturns a 2020 mandate requiring health care plans to cover PrEP free of charge as preventive care)

Response	Percentage
I Am Not Aware of This Ruling	54.93%
No	43.10%
Yes	1.97%

Are you familiar with HHS guidelines on zero-cost sharing and co-pays for PrEP?

Response	Percentage
No	52.96%
Yes	47.04%

More than half of U.S. states have introduced, advanced, or passed healthcare bills targeting LGBTQ rights. Are you aware of any anti-LGBTQ healthcare bills in your state or region?

Response	Percentage
No	63.35%
Yes	36.65%

Do you think these policies impact the health of your clients/patients?

Response	Percentage
No	6.52%
Yes	93.48%

In your experience, has the recent escalation of anti-trans healthcare legislation across the county (e.g. banning gender-affirming medical care) negatively impacted the mental health of your transgender and/or gender non-conforming clients/patients?

Response	Percentage
No	10.12%
Unsure	40.08%
Yes	49.80%

Have you ever been prevented from providing healthcare to LGBTQ+ clients/patients due to local legislation?

Response	Percentage
No	94.05%
Yes	5.95%

Over half of U.S. states include syringes in drug paraphernalia laws with no exemptions for Syringe Service Providers (SSPs) or offer no protection against prosecution for drug residue on returned syringes. Are you aware of any harm reduction criminalization policies or laws in your region or state?

Response	Percentage
No	72.97%
Yes	27.03%

Do you think these policies impact the health of your clients/patients?

Response	Percentage
No	4.55%
Yes	95.45%

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**Aging with HIV™**  
National Survey

HealthHIV  
STATE OF  
**ASOs/CBOs™**  
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HealthHIV  
STATE OF  
**Harm Reduction™**  
National Survey

HealthHCV  
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**HCV Care™**  
National Survey

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**HIV Care™**  
National Survey

National Coalition for  
**LGBTQ Health**  
STATE OF  
**LGBTQ Health™**  
National Survey

HealthHIV Research and Evaluation conducts regular national surveys to better inform ongoing advocacy, education, research, and training activities. These “State Of” surveys provide unique insight into patient and provider issues in order to optimize primary and support services for diverse communities. The regular reports offer the ability to study multi-year trend analyses illustrating changes, challenges, and opportunities to address the needs of providers and patients. HealthHIV, HealthHCV and the National Coalition for LGBTQ Health conduct State of surveys addressing HIV care, HCV care, LGBTQ healthcare, and aging with HIV.

[HealthHIV.org/stateof](https://HealthHIV.org/stateof)

## HealthHIV

**HealthHIV is a national non-profit working with healthcare organizations, communities, and providers to advance effective HIV and HCV prevention, care, and support through education and training, technical assistance and capacity building, advocacy, communications, and health services research and evaluation.**

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1630 Connecticut Avenue NW, Suite 500 • Washington, DC 20009 • 202-232-6749