

NATIONAL HIV/AIDS STRATEGY

WHAT YOU NEED TO KNOW

The National HIV/AIDS Strategy provides the framework and direction for the Administration's policies, research, programs, and planning for 2022–2025 to lead us toward ending the HIV epidemic in the United States by 2030.

The Strategy reflects President Biden's commitment to accelerate and strengthen our national response to ending the HIV epidemic. It details principles and priorities to guide our collective national work to address HIV in the United States over the next four years.

It is a national plan designed to re-energize a whole-of-society response to the HIV epidemic that accelerates efforts while supporting people with HIV and reducing HIV-associated morbidity and mortality.



The Updated NHAS



Recognizes racism as a serious public health threat that directly affects the well-being of millions of Americans, acknowledges ways in which it drives and affects HIV outcomes, and highlights numerous opportunities to intervene to eliminate the HIV-related disparities that result and pursue equity in our national HIV response.



Puts greater emphasis on the **important roles of harm reduction and Syringe Services Programs** in our national response to HIV, as well as to hepatitis C virus infection and substance use disorder.



Underscores the vital role that the Affordable Care Act (ACA) plays in our response to HIV and calls for maximizing use of services available through Marketplace and Medicaid coverage because of the ACA.



Expands discussion of populations with or experiencing risk for HIV, whose unique circumstances warrant specific attention and tailored services, such as immigrants, individuals with disabilities, justice-involved individuals, older adults, people experiencing housing instability or homelessness, and sex workers.



Adds a new focus on the needs of the growing population of **people with HIV who are aging**.



Enhances a focus on **quality of life for people with HIV**.



Strengthens emphasis on the importance of **better integrating responses to the intersection of HIV, viral hepatitis, STIs, and substance use and mental health disorders**.



Calls for expanding engagement opportunities for **people with lived experience** in the research, planning, delivery, assessment, and improvement of HIV prevention, testing, and care services.

THE UPDATED NHAS (CONTINUED)



Weaves HIV research activities more broadly across the objectives, with an emphasis on implementation research and moving research findings into practice more swiftly.



Calls for sustaining program/service innovations and administrative changes implemented in response to the COVID-19 public health emergency that can continue to support and improve access to and engagement in HIV testing, prevention, care and treatment, and other related services.



Expands the focus on addressing the social determinants of health that influence an individual's HIV risk or outcomes.



Encourages reform of state HIV criminalization laws.



Incorporates **the latest data** on HIV incidence, prevalence, and trends.



Adds a new focus on **opportunities to engage the private sector** in novel and important ways in the nation's work to end the HIV epidemic.



Goals

The Strategy focuses on four goals to guide the nation toward realizing this vision:



GOAL 1
Prevent New HIV Infections.



GOAL 2
Improve HIV-Related Health Outcomes of People with HIV.



GOAL 3
Reduce HIV-Related Disparities and Health Inequities.



GOAL 4
Achieve Integrated, Coordinated Efforts That Address the HIV Epidemic Among All Partners.

Strategy Vision

The United States will be a place where new HIV infections are prevented, every person knows their status, and every person with HIV has high-quality care and treatment, lives free from stigma and discrimination, and can achieve their full potential for health and well-being across the life span.

This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographic location, or socioeconomic circumstances.

Priority Populations

- Gay, bisexual, and other men who have sex with men, in particular Black, Latino, and American Indian/Alaska Native men
- Black women
- Transgender women
- Youth aged 13–24 years
- People who inject drugs

