HIV at an Inflection Point

From March through May 2024, we convened a series of consultations with people living with HIV and community, government, corporate, and philanthropic stakeholders to examine progress toward global and domestic prevention and care goals. These dialogues yielded a recurring realization: **The HIV response is at an inflection point**. Will we keep innovating to develop better prevention and treatment tools and ultimately a cure? Will we keep expanding access to health care and social services? Will we keep removing the scourge of a global crisis? OR: Will we accept persistent disparities, increased polarization, and reduced commitment that results in more HIV and greater challenges? This moment demands that all stakeholders affirm their commitment to the long-term effort to support all people with HIV and the people and places for whom HIV remains a serious threat. **This summarizes a series of three briefs we are releasing to provide actionable policy solutions to sustain and continue our remarkable progress**.

As with World War I and the Great Influenza Pandemic of 1918-1920 at the beginning of the 20th century, HIV changed the world in dramatically reshaping science, culture, and the lives of millions of people and their communities around the world. It ushered in a new era of stronger partnerships with local communities in defining, planning and implementing services that expanded perceptions of what collective action is needed and what it can achieve, and that recognized how stigma, discrimination, and marginalization contributes to the manifestation of disease and death.

So, after more than 40 million deaths, we now have a broad range of effective treatments and prevention modalities that, with the right clinical, social, and legal supports can keep the virus

suppressed and can virtually stop HIV transmission. Foremost, the public needs a greater appreciation for the many ways that HIV research and care is improving health in other areas. For example, while all parts of the health system responded to COVID-19, it was the infectious disease specialists with the experience studying viruses, with infection control, and experience working with communities to serve marginalized populations that enabled us to quickly respond. Operation Warp Speed, the Trump Administration Initiative that successfully and quickly developed mRNA vaccines could not have happened, but for the prior investments in HIV vaccine research and its trials network that created the platform to use mRNA technology.

Many people with HIV can now experience a near normal lifespan,

but those not benefitting from these advances are often falling back into the shadows. Everyone is tired of HIV. Increasingly, there are signs of fatigue among philanthropic donors and declining participation in AIDSWalks and other fundraising efforts. HIV has virtually fallen off the political agenda of the LGBTQ community and broader society. Through a mix of homophobia, racism, and an incomplete understanding of the social and other factors that drive the pandemic, charges of HIV exceptionalism also have created resentment and often a perception that HIV has garnered too much attention or too many resources. We must counter these claims in order to maintain our successes and help others better understand how the HIV movement continues to benefit everyone.

GLOBALLY

39 M

Million People with HIV

1.3 M

New Transmissions

IN THE U.S.

1.23 M

Million People with HIV

31,800

New Transmissions

A RENEWED POLITICAL COMMITMENT IS NEEDED

BRIEF 1:

A New National Commitment is Needed to Sustain Progress Toward the Vision of Zero HIV Transmissions and HIV-related Deaths in the United States and Around the World

The response to HIV is unprecedented in human history. Steadfast U.S. leadership remains essential:

Maintain HIV as a Priority for the LGBTQ Community

The LGBTQ community needs to reprioritize HIV in all its federal, state, and local advocacy and through volunteerism, civic participation, and philanthropy

Engage and Support Congress to Provide Focus and Accountability

Congress needs to invest more attention on HIV by establishing a Select Committee to assess the impact of current programs and consider longterm resource needs

Congress needs to reauthorize the PEPFAR Program and consider updates to the Ryan White HIV/AIDS Program (RWHAP)

Elevate HIV Strategic Leadership Across the Administration

The White House Office of National AIDS Policy (ONAP) must have its mandate and role reinvigorated to provide greater presidential leadership on HIV

INVIGORATING COMMUNITY IMPACT

BRIEF 2:

Elevating Black Leadership and Enhancing HIV Program Accountability Will Sustain Our Critical Successes

To retain what makes HIV special—community leadership—focused actions are needed:

Center Black People in the U.S. and Across the African Diaspora in the HIV Response

New strategies are needed to bolster and retain Black political, civic, and civil rights leadership on HIV

The Minority AIDS Initiative (MAI) needs to be strengthened

Elevate Community in Planning, Decision-Making and Accountability

Diverse members of affected communities need to be meaningfully engaged in resource planning and monitoring

There is a need for a greater commitment to improving equity in outcomes across key populations

Broaden Responsibility for Responding to HIV

There is a need to share responsibility for responding to HIV and better support the workforce working on HIV

We need to cultivate cultural influencers to create vibrant entry points to engage in HIV prevention and care

LOOKING AHEAD AND LEAVING NO ONE BEHIND

BRIEF 3:

Recognizing Latino Leadership and Extending HIV Advocacy to Tackle Broader Issues Can Strengthen Nations and Communities

HIV treatment and prevention remain essential, but other issues demand attention:

Elevate Emerging and Overlooked Populations

HIV programs must remain dynamic and responsive to unaddressed needs and emerging challenges

There is a need to adopt a human rights framework and take steps to protect the rights and dignity of all people

Adopt a Forward Vision for Continued Progress

HIV advocates need to lead a reform agenda that expands our current efforts to address broader societal challenges that critically impact people with HIV

THE TIME IS NOW

The HIV movement has accomplished so much, but our work is not finished. A strong and vibrant HIV response through the activism and engagement of people with HIV and their communities, along with political, cultural, social, and philanthropic engagement remains vital. A throughline of the HIV response has been community and community activism. We make demands of government, of society, of the health care system, and of ourselves. Our challenge today is not to fix something that is irretrievably broken. Rather, it is to preserve something that is precious and strengthen it for now and the future. We can keep improving and sustaining a societal commitment to ending the HIV pandemic by taking steps to maintain the community vibrancy we have nurtured over the past forty plus years, by continuing to support improvements in prevention and treatment while broadening our focus to encompass other facets of a high-quality life, and by contributing more to broader societal challenges. We can and must keep changing the world.









Prepared by Jeffrey S. Crowley (O'Neill Institute) and A. Cornelius Baker (Rollins School of Public Health, Emory University).

This brief is a product of the **Center for HIV and Infectious Disease Policy** at the **O'Neill Institute** and and is supported by a grant from **Gilead Sciences**. It was developed in partnership with the **Emory Global Health Institute** with support from **The Elizabeth Taylor AIDS Foundation**. This project also benefited from a collaborative partnership with the National Black Gay Men's Advocacy Coalition through support by Broadway Cares/Equity Fights AIDS. The project operates independently of its funders, and they had no input into the development or content of this brief. The views expressed are solely those of the authors.