Protecting Today's and Building Tomorrow's Domestic HIV Prevention System

Preventing HIV is a long game and there will always be a need to ensure access to durable and effective HIV prevention. Policies and programs must continuously evolve if we are to reduce the impact of these issues on the health of our communities. There is a need to take action in three areas:

1. PROTECT CDC'S DOMESTIC HIV PROGRAM

Each part of the prevention system must operate efficiently at the national, state, local, and community levels. Federal agencies including the Centers for Disease Control and Prevention (CDC), the Health Resources and Services Administration (HRSA), the National Institutes of Health (NIH), the Substance Abuse and Mental Health Services Administration (SAMHSA), the Indian Health Service (IHS) and the Centers for Medicare and Medicaid Services (CMS) must be seen as a network that is greater than the sum of its parts. CDC's domestic HIV program, housed within the Division of HIV Prevention (DHP), however, has primary responsibility for guiding and managing our domestic HIV prevention response.

There has been a 12% decline in HIV incidence (i.e., new annual HIV infections) from 2018 to 2022.

2. RE-IMAGINE THE ROLE OF COMMUNITY

The history of the HIV response always has been driven by people with HIV and the communities most heavily impacted. When resources tighten, however, it seems that investments in CBOs and funding for community-led activities are the first to be cut.

3. CHART A VISION FOR HIV PREVENTION THAT LEVERAGES CONTINUING INNOVATION

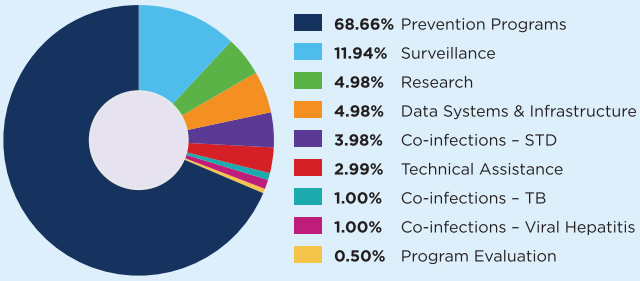
There is a need to articulate and work toward a new vision for what HIV prevention, delivered at scale, will look like. This will require giving people more options for which types of prevention services they receive, making it easier for sustained prevention engagement to fit into people's lives, and continuing to invest in a broad HIV prevention research agenda.

Today, we are experiencing a burst of innovation and expanded options for accessing effective PrEP. The FDA has approved a bimonthly injectable form of PrEP a twice-yearly injectable PrEP, and there is an investigational drug that holds the promise of a monthly oral PrEP option. This expansion of options, combined with new tools should foster an expansion in uptake of PrEP if policies are enacted to ensure stable and affordable access to whichever PrEP option works for each individual.

THE TIME IS NOW

The future of HIV prevention and care can be bright. This will require that we expand our investments in CDC's domestic HIV program, in HIV prevention and research programs across the Department of Health and Human Services, and in honoring the essential role of communities in leading the way.

CDC's DOMESTIC HIV PROGRAM FY 2026 BUDGET



Note: Includes $755 Million for Domestic HIV Prevention and $220 Million for the Ending the HIV Epidemic Initiative (EHE) at CDC

Source: Division of HIV Prevention Update, presented to the Federal AIDS Policy Partnership, June 24, 2026.

ENSURING THE SUSTAINABILITY OF OUR HIV PREVENTION SYSTEM

Ending HIV transmission is a never-ending challenge:

PROTECT CDC's DOMESTIC HIV PROGRAM

Increase funding for the domestic HIV prevention portfolio and ensure adequate staffing levels

Modernize HIV surveillance systems and protect case surveillance, the Medical Monitoring Project (MMP), and the National HIV Behavioral Surveillance program (NHBS)

Safeguard local data and provide actionable data for local stakeholders

RE-IMAGINE THE ROLE OF COMMUNITY

Update mechanisms to give affected communities a real voice in setting services priorities

Restore and expand funding for community-led community-based organizations (CBOs)

Fund CBOs to take innovative and scientifically-proven prevention methods to scale

CHART A VISION FOR HIV PREVENTION THAT LEVERAGES CONTINUING INNOVATION

Maximize options for PrEP users that require fewer clinical visits

Support integrated syndemic approaches to HIV and other health threats

Continue supporting prevention research including basic science, vaccine development, microbicides, behavioral and social research, and implementation science

O'NEILL INSTITUTE
CENTER FOR HIV & INFECTIOUS DISEASE POLICY

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MAKING AIDS HISTORY

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