We are working every day to make the promise of prevention mean more than just preventing the HIV virus from being transmitted.

By partnering with the community, we are putting programs in place that help prevent issues such as disparities and access from impeding care and encouraging everyone to know their status as a routine part of sexual health.

We are making prevention a priority for everyone.

THIS IS WHAT WE LIVE FOR
Welcome to the 2019 Biomedical HIV Prevention Summit.

Our movement is at a tipping point, next year 57 jurisdictions identified in the federal Ending the HIV Epidemic initiative will begin implementing their local plans to end the HIV epidemic by 2030. Yet nobody knows which prevention and care initiatives will be successful in the communities that are most impacted by HIV. We have seen programs that work in certain communities, but that does not mean those programs will work in all communities. In fact, the reality of most current PrEP programs is that they are missing large subpopulations who would most benefit from the science of biomedical HIV prevention.

Can we end the HIV epidemic among women, particularly Black women? When it comes to Black women, reality meets science and science loses. We cannot adapt existing programs created by and for certain communities and expect the same result. Now is the time for innovation, so where are the dreamers?

The plenary on innovation will look at new technologies that are soon going to be part of the HIV prevention tool kit. Injectables may be here as soon as 2020. While we hope they are a game changer, we still don’t know if injections or implants will be accepted in the communities we need to reach. Technology only works when it is adapted and integrated into people’s lives.

The criminalization of HIV transmission is bad public health practice. Clear and simple. The closing plenary will address what the HIV community needs to do to end HIV criminalization. Our efforts to end the epidemic are hindered by these laws because they drive people who need these services underground. We must also directly address racial injustice. HIV criminalization legislation has primarily been used to prosecute Black and Latinx individuals.

NMAC wants to thank Gilead for their support of the Summit. Additional funding was provided by Viiv, Janssen, Avita, Walgreen’s, Curant Health and In The Meantime Men. We thank all of our donors; however, it is important to note that they have no input-on scholarship decisions or the conference program. NMAC supports our movement’s efforts to be transparent about funding.

Yours in the struggle,

Paul Kawata

Our efforts to end the epidemic are hindered by these laws because they drive people who need these services underground.
Monday, December 2

12:00 pm – 7:00 pm  Registration/CEUs
Location: Level Two Registration Desk

3:00 pm – 7:00 pm  Exhibit Hall Open
Location: Houston Ballroom Foyer

Tuesday, December 3

7:00 am – 4:00 pm  Registration/CEUs
Location: Level Two Registration Desk

7:30 am – 8:15 am  Breakfast
Location: Houston Ballroom Salon III, Level 2

8:30 am – 10:00 am  Opening Plenary: Can We End the HIV Epidemic in Women Without Focusing on Black Women?
Location: Houston Ballroom Salon 4, Level 2

10:10 am -10:25 am  Community Corner
Location: Exhibit Hall

10:15 am – 5:00 pm  Exhibit Hall Open
Location: Houston Ballroom Foyer

10:30 am – 12:00 pm  Session 1

Workshops

Enhancing a State Run PrEP Drug Assistance Program
Location: Fort Bend B, Level 2

HIV Implementation Science in Sexual and Gender Minority Latinx Communities
Location: Memorial, Level 3

PrEP Navigation in Clinic-Based and Non-Clinic-Based Settings
Location: Montgomery A

How Can We PrEP? A Photovoice Project
Location: Tanglewood, Level 3

Recruitment and Engagement Among Black and Latino MSM
Location: Clear Lake, Level 3

1) PrEP and HIV in Southern Arizona: Is There A Disconnect?
2) Using Social Networks Recruitment in a Saturated Service Area

HIV Prevention for Historically Black Colleges and Universities
Location: Fort Bend, Level 2

Sippin’ & Spillin’: Engaging Women of Color in HIV Prevention Services
Location: Liberty, Level 2
AGENDA AT A GLANCE

**Immigration and HIV in Sexual and Gender Minority Latinx Communities**  
Location: Sugarland, Level 3

**Implementing Pre-Exposure Prophylaxis Clinic (PrEP) in a Local Health Department**  
Location: Harris, Level 2

**More Pills, Rings, Injections, Implants, Etc.: Preparing for Rollout with Lessons Learned from Oral PrEP**  
Location: Montgomery B, Level 2

12:00 pm – 1:00 pm  **Lunch**  
Location: Houston Ballroom Salon III, Level 2

12:15 pm - 12:30 pm &  **Community Corner**  
Location: Exhibit Hall

12:40 pm - 12:55 pm  **Plenary: The Federal Plan to End the HIV Epidemic and the Role of Implementation Research.**  
Location: Houston Ballroom Salon 4, Level 2

2:45 pm – 4:15 pm  **Session 2**

**Workshops**

**Last-Resort Medication Assistance for Youth, Uninsured Adults, and Transgender Patients**  
Location: Fort Bend B, Level 2

**Success of Same-Day PrEP Start For Priority Populations**  
Location: Fort Bend A, Level 2

**Collaborative Rapid Response to Status-Neutral HIV Prevention and Treatment Efforts**  
Location: Memorial, Level 3

**“Strike a Pose” House & Ballroom Community Mobilization Tools**  
Location: Sugarland, Level 3

**Methods to Engage Communities and Increase PrEP Uptake**  
Location: Montgomery A, Level 2  
1) PrEP Uptake, HIV Incidence and Access Barriers  
2) Intimidating, Expensive, and Awkward: Overcoming Access Barriers for Latino MSM

**Black Cisgender Women and the HIV PrEP Care Continuum**  
Location: Harris, Level 2

**Trust Your Jotería: Latinx HIV Prevention and Care Community Responses**  
Location: Tanglewood, Level 3

**The Power of Collaboration to Bring PrEP to Marginalized Communities**  
Location: Montgomery B, Level 2

**Possibilities and Progress in Biomedical HIV Prevention Research**  
Location: Liberty, Level 2  
1) Flirt, Insert, and Squirt: Community Desire in HIV Prevention  
2) Okay Ladies Let’s Get In-formation: Women & Biomedical HIV Prevention
Dangerous Intersection: Chemsex, Race, and HIV  
Location: Clear Lake, Level 3

4:30 pm – 6:00 pm  **Session 3**

**Workshops**

**Client Contact for the Improvement of PrEP Persistence**  
Location: Montgomery A, Level 2

**Sexual Networks and Social Determinants of Health to Increase PrEP Uptake**  
Location: Clear Lake, Level 3  
1) *The Burden of Transportation*  
2) *How Latino MSM’s Sexual Network Configurations Can Facilitate PrEP Uptake*

**PrEP915: Educating, Providing, and Building PrEP in El Paso, TX**  
Location: Tanglewood, Level 3

**Let It Flow...Exploring PrEP Adherence & Seasons of Pleasure**  
Location: Montgomery B, Level 2

**Empowerment as HIV prevention: Bringing the community to campus**  
Location: Fort Bend, Level 2

**Two Paths, One Goal: Integrating Undetectable and PrEP**  
Location: Liberty, Level 2

**Addressing Sexual Health Disparities In Women Living In Rural Communities**  
Location: Memorial, Level 3

**Fostering Transgender Awareness and Inclusion in HIV Research**  
Location: Fort Bend A, Level 2

**Increasing PrEP Access: Implementation of a Pharmacist-Driven Program**  
Location: Harris

**TelePrEP: Overcoming Road Blocks**  
Location: Sugarland A&B

**Wednesday, December 4**

7:30 am – 8:15 am  **Breakfast**  
Location: Houston Ballroom Salon III, Level 2

7:30 am – 12:00 pm  **Registration/CEUs**  
Location: Level Two Registration Desk

8:30 am – 10:00 am  **Plenary: Long Acting Injectable and the MOSAICO Vaccine Study: The New Paradigm on Biomedical HIV Prevention.**  
Location: Houston Ballroom Salon 4, Level 2
AGENDA AT A GLANCE

10:10 am -10:25 am  Community Corner
Location: Exhibit Hall

10:15 am – 5:00 pm  Exhibit Hall Open
Location: Houston Ballroom Foyer

10:30 am - 12:00 pm  Session 4

Workshops
Challenges and Opportunities for PrEP Uptake Among GBMSM in Puerto Rico
Location: Fort Bend A, Level 2

How a Urine PrEP Adherence Test Optimizes Support for Vulnerable Patient Populations
Location: Sugarland, Level 3

A Blueprint for Implementing a PrEP Program - Making it Happen!
Location: Tanglewood, Level 3

Bird’s Eye View: Refining State-Wide PrEP Monitoring and Evaluation Plan
Location: Memorial, Level 2

Community and Researchers Working Together
Location: Montgomery B, Level 2
  1) Be the Generation: Mobilizing Communities to End the HIV/AIDS Epidemic
  2) The Latest in HIV Treatment Research from ACTG

Two Blue Pills: Game Changers or STD Makers? U=U and PrEP
Location: Liberty, Level 2

Models of PrEP Services
Location: Clear Lake, Level 3
  1) Individualized PrEP: Changing the Clinical Approach in NYS
  2) No PrEP Services Here...
    The PrEP Desert: Interdisciplinary Care Model in the Wild West

Crafting Messages to Diagnose and Prevent HIV - Developing a Social Marketing Strategy that Works
Location: Montgomery A, Level 2

We’re Not “Hard to Reach:” Black Women’s Biomedical Ambassador Program
Location: Harris, Level 2

PrEP, Latinos, and The South
Location: Fort Bend, Level 2

12:00 pm – 1:00 pm  Lunch

12:15 pm - 12:30 pm &  Community Corner
Location: Exhibit Hall

1:00 pm – 2:30 pm  Closing Plenary: HIV Criminalization and Biomedical HIV Prevention
Location: Houston Ballroom Salon 4, Level 2
<table>
<thead>
<tr>
<th>Track Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Finances and Access Models</strong></td>
</tr>
<tr>
<td>To successfully increase the uptake of PrEP we must develop and test a variety of finance and access models. Due to the diversity of the populations at risk of infection that will benefit with PrEP, it is important to understand that one model will not address the needs of all at risk groups. This looks at the implementation of finance and access models and how they would need to be tailored to the needs of communities.</td>
</tr>
<tr>
<td><strong>Navigation, Retention, and Re-engagement</strong></td>
</tr>
<tr>
<td>Health systems are difficult to navigate, more so for individuals with low health literacy or in need of social services that support access care. And, even if they enter a health care system, the struggle experienced when housing is more important than medicine, completely interferes with being retained and/or reengaged in care. This looks at health care systems, strategies for retention, re-engagement, and the importance of addressing social determinants of health.</td>
</tr>
<tr>
<td><strong>Training Programs</strong></td>
</tr>
<tr>
<td>Training programs are needed through the spectrum of stakeholders involved in making sure biomedical HIV prevention is understood and utilized by the populations that need it the most, from the person that is looking for PrEP or viral suppression, to the care and service providers in community based organizations, health clinics, and doctors’ offices. This will explore the importance of training and how it could be developed and accessible to all stakeholders involved in HIV biomedical prevention, treatment, and care.</td>
</tr>
<tr>
<td><strong>Clinical Provider Engagement</strong></td>
</tr>
<tr>
<td>A person cannot be successful in any treatment or biomedical prevention modality if their clinical provider is not engaged with the individual seeking help. A good care provider takes the time to get to know their patients’ circumstances and needs beyond clinical care. This will look at the importance of clinical provider engagement in order to build trust and a safe clinical environment.</td>
</tr>
<tr>
<td><strong>Community Mobilization</strong></td>
</tr>
<tr>
<td>If we are to successfully implement PrEP, PEP, and TasP it is important to mobilize the communities most impacted and at risk of HIV. We should not underestimate the power of community and how it affects health outcomes. Engaged communities add a layer of care and trust not always seen in mainstream health care. Health literacy and PrEP education in most cases is more effective when community support is available. Also, mobilizing communities empower and support the individual.</td>
</tr>
<tr>
<td><strong>Implementation Research</strong></td>
</tr>
<tr>
<td>Implementation research is necessary in order to understand how the translation of science works in the real world. This track looks to display the latest implementation research on Biomedical HIV Prevention that informs the use of clinical based prevention modalities among those infected and/or at high risk of infection.</td>
</tr>
<tr>
<td><strong>Evaluation</strong></td>
</tr>
<tr>
<td>This track looks for evaluation methods and tools that can help with understanding how prevention interventions impact the communities in which programs are implemented.</td>
</tr>
</tbody>
</table>
Second floor meeting rooms
Third floor meeting rooms
Table 1: Gilead
Table 2: AIDSVu
Table 3: CCN Pharmacy
Table 4: Curant Health
Table 5: CAPTC
Table 6: Until There’s A Cure Foundation
Table 7: ViiV
Table 8: Texas Action Health
Table 9: Say it with a Condom
Table 10: Avita
Table 11: Multicultural AIDS Coalition
Table 12: Capacity for Health
Table 13: Walgreens
Table 14: NMAC
Table 15: Healthvana
Table 16: Prevention Access Campaign
Table 17: Nurx
Table 18: Express Med
Table 19: Merck
Table 20: Help Center for LGBT Health and Wellness
Table 21: San Francisco Department of Public Health
Table 22: Health HIV
Table 23: RDE Systems
Table 24: Janssen
Table 25: Chembio Diagnostics Center
Table 26: In the Meantime Men’s Group
Table 27: Texas State Department of Health
Table 28: Pharm Blue
Table 29: FC2 Internal Condom
Table 30: B Holding Group
Table 31: R&S Northeast
Table 32: Bowtie Movement
Table 33: Biolytical Laboratories
Table 34: Host Committee
NMAC would like to extend a special thank you to the 2019 Summit program committee who worked many hours for many months to provide the fully curated program.

Megan Canon, Colorado Department of Public Health & Environment

Sabrina Cluesman

Daniel Driffin, Thrive SS

Latesha Elpore, University of Alabama School of Medicine

Montezuma Garcia, Houston Health Department

Kyle Gordon, Men’s Health Foundation

Maria Louise Roman

Obie McNair, My Brother’s Keeper

Tapekorn Prasertsith, Austin Center for Health Empowerment

Ventia Ray, Positive Women’s Network

Pedro Serrano, Hekoten Institute

Michael Stirratt, National Institutes of Health

Nala Toussaint, Callen-Lorde Community Health Center

Omar Valentin, Temple University
**Tuesday, December 3**
8:30 am - 10:00 am
Houston Ballroom Salon 4, Level 2

**Opening Plenary: Can We End the HIV Epidemic in Women Without Focusing on Black Women?**

This plenary session will address the recent FDA approval of a new medication for HIV biomedical prevention for specific populations at sexual risk for HIV. This sent shockwaves through the HIV workforce and its advocacy base due to a specific exclusion for “individuals at risk from receptive vaginal sex.” The panelists will discuss the implications of excluding cisgender women, specifically Black women, from the benefit of a biomedical prevention strategy in a time where black women comprise nearly 27% of diagnoses among Black/AIDS-Americans, an alarming 60% of all diagnoses among women, and 52% of diagnoses globally. How does this exclusion contribute to the conversation of inequity, social justice, and ending the HIV epidemic here and abroad given this decision and lack of action? We will also memorialize transwomen lost to violence in the last year.

**Welcome**

- Houston Mayor Sylvester Turner
- Thamara Jean-Louis, Director, Sales, Gilead
- Omoro F. Omoighe, MPH, Director, Advocacy & Community Engagement, Public Affairs, Gilead
- Deborah Wafer, RN, PA – Senior Medical Scientist, Gilead

**Memorial for Trans Lives Lost**

- Carmarion Anderson, NMAC CAP Member
- Maria Roman, NMAC CAP Member

**Plenary Panel**

- Leisha McKinley-Beach - National PrEP Advocate and convener
- Danielle M. Campbell, MPH - AIDS Treatment Activist Coalition
- Charlene Flash, MD, MPH - PrEP Provider Expert and Researcher, Legacy Community Health
- Tosha Rogers, DO, Ob/Gyn - PrEP Provider Expert
- Brittany Williams, PhD - PrEP user
Session 1: December 3, 10:30 am - 12:00 pm

WORKSHOPS

*Enhancing a State-Run PrEP Drug Assistance Program*
Track: Finance and Access Models
Location: Fort Bend, Level 2
Presenters:
Michael Barnes, Washington State Department of Health
Teah Hoopes, Public Health—Seattle & King County

Uptake of biomedical HIV prevention tools Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP) has been limited by several structural barriers including provider locations and covering the cost of medications. This session will highlight innovative interventions to address some structural barriers to accessing PrEP by focusing on systemic, programmatic, and community-based enhancements made to support the growth of Washington State's PrEP Drug Assistance program. This workshop will review PrEP DAP enrollment data from 2014 to the present, discuss enhancements made to support the growth and functioning of PrEP DAP at the state, local, and community levels, discuss innovative PrEP Navigation practices to support client engagement and persistence in PrEP services, and discuss strategies to implement similar enhancements in your own jurisdiction.

*HIV Implementation Science in Sexual and Gender Minority Latinx Communities*
Track: Implementation Research
Location: Memorial, Level 3
Presenters:
Sean Bland, O'Neill Institute for National and Global Health Law
Omar Martínez, Temple University
Carlos Rodríguez Díaz, DC CFAR
Jeffrey Crowley, O'Neill Institute for National and Global Health Law

Sexual and gender minority Latinx (SGML) communities continue to be disproportionately impacted by HIV. While new HIV diagnoses stabilized for gay and bisexual men from 2012-2016, they increased by 12% during this period for Latinx gay and bisexual men. According to national epidemiological data, transgender Latinx individuals are also disproportionately impacted by HIV compared to their transgender counterparts. High HIV incidence and prevalence rates among these groups have been attributed to psychosocial and structural conditions, including lack of knowledge and awareness about HIV transmission and biomedical HIV prevention approaches; poverty; discrimination; stigma; language barriers; and anti-immigration rhetoric and barriers to HIV testing and care. To address these challenges and implementation gaps, we urge researchers, clinicians, health and social service providers, policy makers, and multi-sectoral community stakeholders to support the adoption of an implementation science framework to increase the uptake of effective HIV programs and interventions among SGML.

*PrEP Navigation in Clinic-Based and Non-Clinic-Based Settings*
Track: Implementation Research
Location: Montgomery A, Level 2
Presenters:
Ernie Hoskins, Positively Living
Katherine Buchman, MPH, Director of Community Engagement and Special Projects, HIV Prevention- HIV/STD/Viral Hepatitis, Tennessee Department of Health

The purpose of this workshop is to highlight PrEP navigation programs supported by the Tennessee Department of Health, focusing on two models: navigation of PrEP patients to services within co-located PrEP clinics and navigation to external PrEP providers. Participants will learn how to successfully navigate patients to PrEP using each model through interactive polls and exercises, including debate of the strengths of clinic-based versus non-clinic-based PrEP navigation models and discussion of patient case studies. Workshop facilitators include a PrEP navigator who has worked in both clinic-based and non-clinic-based settings.

*How Can We PrEP? A Photovoice Project*
Track: Training Programs
Location: Tanglewood, Level 3
Presenters:
Katherine LeMasters, UNC Gillings School of Global Public Health
Miguel Hunter, Triangle Empowerment Center
Earl Bradley, Triangle Empowerment Center
Will Grant, Triangle Empowerment Center
How Can We PrEP? A Photovoice Project is a community-based participatory research project undertaken in a partnership between UNC Chapel Hill’s Gillings School of Global Public Health and the Triangle Empowerment Center (TEC) in Durham, North Carolina. We explored Black LGBTQ+ experiences with pre-exposure prophylaxis (PrEP) for HIV prevention, a daily pill that reduces the risk of HIV infection in people at high risk via sexual transmission by over 90%. In this presentation, UNC students and men that participated in the project through TEC will co-present the photovoice process, photos taken during the project, key themes, and next steps that we can take together as a community.

Recruitment and Engagement Among Black and Latino MSM
Location: Clear Lake, Level 3
This workshop presents engagement and recruitment approaches among Latino and Black MSM in LA and Southern Arizona. It will include the following presentations:

Using Social Networks Recruitment in a Saturated Service Area
Track: Navigation, Retention and Re-engagement
Presenter: Miguel Bujanda, REACH LA
Cesar Egurrola, Arizona University Department of Medicine

With the overwhelming saturation of HIV Prevention and Navigation Services in a metropolitan area, recruitment for HIV Testing and Navigation is near to impossible when targeting the highest at risk for HIV. Identifying new positives can be challenging. Come learn how REACH LA, a small CBO, in a big city was able to increase their recruitment efforts and increase their positivity rate and increase engagement in HIV Navigation services, by effectively implementing Social Networks Recruitment with Black and Latino MSM through an interactive discussion and presentation of SNS Best Practices.

PrEP and HIV in Southern Arizona: Is There A Disconnect?
Track: Evaluation
Presenter: Cesar Egurrola, University of Arizona, Department of Medicine
Jai Smith, co-presenter

Despite expansion of antiretroviral therapy in recent years and growing evidence for PrEP (pre-exposure prophylaxis) efficacy, HIV incidence has continued to rise while PrEP uptake has remained low, particularly in populations at risk. Our goal is to compare these populations and further identify discrepancies in populations at risk in Southern Arizona.

HIV Prevention for Historically Black Colleges and Universities
Track: Community Mobilization
Location: Fort Bend A, Level 2
Presenters:
Russell Campbell, Office of HIV/AIDS Network Coordination
Kenric Ware, South University
Lance Okeke, Duke University School of Medicine
Louis Shabkelford, Legacy Project
Jorge Benitez, Columbia University

Opportunities exist to enhance sexual health literacy on college campuses. As students navigate early adulthood independence, being equipped with knowledge about risk factors for sexually transmitted infections (STI), particularly HIV, is pivotal. While no demographic of college student is immune from HIV, research has solidified that minority students, particularly those of African-American descent, contract HIV at higher rates than their primarily Caucasian counterparts. Historically Black Colleges and Universities (HBCUs) have provided the development and education of over five million alumni, which places them in a unique position regarding cultivating greater HIV awareness and to highlight venerated strategies available to counter acquisition and spread of HIV. This workshop will highlight an innovative partnership to help address some of these factors at HBCUs.

Sippin’ & Spillin’: Engaging Women of Color in HIV Prevention Services
Track: Navigation, Retention and Re-engagement
Location: Liberty, Level 2
Presenters:
Janelle Eradiri, Ryan Health Center
Charlene Kaloki, Ryan Health Center

Since the FDA’s approval of Truvada as PrEP, many HIV prevention campaigns have primarily focused on increasing PrEP awareness amongst men who have
sex with men (MSM). These targeted PrEP campaigns have created a false narrative that PrEP is only for MSM—leaving women out of the conversation. Sippin’ & Spillin’ was created in response to the HIV epidemic amongst cisgender and transgender black women—recognizing a huge disparity in the lifetime risk of HIV infection for these populations (one in 54 for cisgender black women and one in two for transgender black women) in comparison to their cisgender white women counterparts (one in 941). The Sippin’ & Spillin’ presentation will highlight the need for culturally sensitive PrEP interventions, that prioritize women of color—specifically black women. The audience should leave this presentation with the tools needed to implement best practice interventions tailored to women who have the greatest risk of HIV infection.

Immigration and HIV in Sexual and Gender Minority Latinx Communities
Track: Community Mobilization
Location: Sugarland, Level 3
Presenters:
Jeffrey Crowley, O’Neill Institute for National and Global Health Law
Sean Bland, O’Neill Institute for National and Global Health Law
Ángel Fabian, MPact Global Action
Bamby Salcedo, TransLatin@ Coalition

Sexual and gender minority Latinx (SGML) communities continue to be disproportionately impacted by HIV. While new HIV diagnoses stabilized for gay and bisexual men from 2012-2016, they increased by 12% during this period for Latinx gay and bisexual men. According to national epidemiological data, Latinx transgender individuals are also disproportionately impacted by HIV compared to their transgender counterparts. These disparities are the product of and exacerbated by social and structural conditions, including poverty, lack of access to healthcare, and rhetoric and policies that reflect hostility toward sexual and gender minorities, people of color, and immigrants. Given the prominence of immigration in current US political dialogue and the barriers to healthcare access for immigrants, it is important to consider SGML minority immigrants and the challenges that affect their ability to benefit from HIV prevention and care. This workshop will explore immigration as a social determinant of HIV in SGML communities.

Implementing a Pre-Exposure Prophylaxis (PrEP) Clinic in a Local Health Department
Track: Implementation Research
Location: Harris, Level 2
Presenters:
Robert Dodge, Wake County Human Services
Karen Best, Wake County Human Services

Uninsured and/or underinsured individuals living in Wake County, NC do not have affordable access to PrEP services. Wake County had 138 new diagnoses of HIV from January to December 2017 among adult and adolescent (over 13 years old) population. The presentation will review how our local health department implemented a PrEP clinic offering a day one starter pack of Truvada, while patients awaited approval from the Gilead Advancing Access medication assistance program. The data presented in this presentation documents the demographics, adherence, and retention of patients in the program. It will also review the documents used in our Electronic Health Record (EHR) to collect data, assess adherence, document education, and STI/HIV rates.

More Pills, Rings, Injections, Implants, etc.: Preparing for Rollout with Lessons Learned from Oral PrEP
Track: Community Mobilization
Location: Montgomery B, Level 2
Presenter:
Cindra Feuer, AVAC

What can we learn from oral PrEP rollout about how to more efficiently and effectively implement next-generation HIV prevention methods? Many new HIV biomedical prevention products are in the pipeline—pending regulatory opinion/approval (e.g., dapivirine vaginal ring, F/TAF) and others awaiting trial results (e.g., CAB-LA and preventive vaccines). As more choices become available, it is critical to understand what is required to support access for those who may want and benefit from a new method. Service delivery systems and providers must be equipped to offer a mix of methods. Early and sustained engagement of communities is instrumental to effective introduction.
Lunch Plenary: The Federal Plan to End the HIV Epidemic and the Role of Implementation Research

Implementation science is defined as the study of methods to promote the adoption and integration of evidence-based practices, interventions, and policies into routine health care and public health settings. It has been identified as a crucial component of the Federal Plan to End AIDS in America by 2030. A robust and comprehensive implementation research agenda must be developed and executed in order to understand how the science of biomedical HIV treatment and prevention works in real life scenarios. It is also imperative that HIV intersectionality is factored in the research design as we adopt and integrate evidence-based practices, interventions and policies.

This plenary looks at the fundamentals of implementation science as it relates to the execution of engagement and retention strategies for people living with HIV and those at risk of infection that can benefit from biomedical HIV prevention modalities. NIAID’s Centers for AIDS Research (CFARs) are responsible for the creation and roll out of the implementation research agenda. How will this agenda be unfolded? What are the opportunities for community input and exchange of ideas? How does it intersect with HIV treatment, care, prevention, mental health, health disparities, and social determinants of health? How will NIAID’s CFARs work and collaborate with other federal agencies like HRSA, CDC, and the NIH?

Speakers:

Jhetari Carney, MPH, Health Resources and Services Administration

David Purcell, JD, PhD, Deputy Director for Behavioral and Social Science, DHAP, Centers for Disease Control and Prevention

Harold J. Phillips, Senior HIV Advisor and Chief Operating Officer of Ending the HIV Epidemic: A Plan for America

Neeraj Gandotra, MD, Chief Medical Officer, SAMHSA
Session 2: December 3, 2:45 - 4:15 pm

WORKSHOPS

**Last-Resort Medication Assistance for Youth, Uninsured Adults, and Transgender Patients**
Track: Finance and Access Models
Location: Fort Bend B, Level 2
Presenters:
Sarah Palmer, Texas Health Action-Kind Clinic
Evan Mahony, Texas Health Action-Kind Clinic

The workshop will describe the Kind Patient Assistance Program (KPAP), a Kind Clinic program that offers last-resort financial assistance for pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP), HIV treatment, and hormone therapy to patients who are ineligible for other assistance programs.

**Success of Same-Day PrEP Start For Priority Populations**
Track: Navigation, Retention and Re-Engagement
Location: Fort Bend A, Level 2
Presenters:
Daniel Mendez, Howard Brown Health
Laura Rusie, Howard Brown Health
Kristin Keglovitz-Baker, Howard Brown Health
María Pyra, Howard Brown Health

At an urban FQHC that specializes in sexual and gender minority health, a same-day PrEP protocol was rolled out in 2015. We describe the process used for same-day PrEP, as well as report on rates of PrEP persistence and care retention among priority populations.

**Collaborative Rapid Response to Status-Neutral HIV Prevention and Treatment Efforts**
Track: Navigation, Retention and Re-Engagement
Location: Memorial, Level 3
Presenters:
Kristin Kennedy, JASMYN
Sabrina Cluesman, NYU Silver School of Social Work

Engaging queer & trans youth of color (QTYOC) in HIV prevention & treatment services can be challenging & requires community collaboration efforts to address the unique needs of this population. Accessing affordable healthcare services is complicated, & this population often falls through the cracks due to systems of care lacking a youth-centric approach. This interactive workshop will outline barriers that QTYOC often face in accessing affordable sexual health services, as well as strategies for engaging this population in HIV prevention & treatment efforts. Workshop participants will learn how strategic community partnerships, similar to that of JASMYN and Florida Department of Health-Duval County (FDOH-D), provide an opportunity to expand services & decrease barriers to care for QTYOC. Finally, participants will better understand the benefit of utilizing a status neutral approach to rapid response of HIV prevention & treatment services, which de-stigmatizes access to services & supports continued engagement in care.

**“Strike a Pose” House & Ballroom Community Mobilization Tools**
Track: Community Mobilization
Location: Sugarland, Level 3
Presenters:
George Jackson, APEB
Mikiya Thomas, APEB

“House Lives Matters” is an International House and Ballroom Campaign aimed to address the gaps between grant dollars and community mistrust. The “Non-Profit Industrial” complex can be a temptation for improper or inadequate community mobilization. This workshop will direct and guide to ensure House and Ballroom Community Mobilization is equally both intentional and sustainable. Via engaging activities facilitated by true House and Ballroom Leaders, participants will be guided in the replication processes for appropriate House and Ballroom Community Mobilization from both agency and community levels. The showcasing of two testing and linkage initiatives designed by House Ballroom Leaders, Community Stakeholders and Biomedical HIV Prevention Agencies, APEB will highlight best practices for House and Ballroom Community Engagement Strategies.
Methods to Engage Communities and Increase PrEP Uptake

Montgomery A, Level 2

This workshop will start discussing the correlation between PrEP Uptake and Incidence. The second part of the session will look at access barriers for Latino MSM and how can they be overcome. It will include the following presentations:

**PrEP Uptake, HIV Incidence and Access Barriers**
Track: Implementation Research
Presenter:
Dennis Chau, Texas Health Action - Kind Clinic

Limited data exists on the spatial distribution of pre-exposure prophylaxis for HIV (PrEP) with regards to HIV incidence and prevalence. This workshop covers techniques for mapping patient distribution and identifying clusters of patients alongside how to compare patient clustering to the HIV incidence and prevalence within a specific geographic area. Methods used to calculate the clustering of patients will be discussed alongside calculations of correlation coefficients to quantify the measure of association between the number of patients and HIV incidence and prevalence. The second part of the workshop includes the potential for evaluation and location-specific methods to engage communities of interest and next steps for approaching populations of interest given the results of the spatial analysis.

**Intimidating, Expensive, and Awkward: Overcoming Access Barriers for Latino MSM**
Track: Navigation, Retention and Re-Engagement
Presenter:
Stephen Fallon, PhD, Latinos Salud

Miami-Dade County ranks first in the nation in new HIV cases. Latino MSM are the only population showing increasing rates of new infections. PrEP and U = U have the potential to curb new infections. However, Latino MSM have low rates of PrEP uptake, and lower engagement in HIV care. Latinos Salud, a gay, Latino-based CBO providing prevention services, uses a navigation model that succeeds through three key elements: 1) spending time with clients to build rapport before PrEP navigation or care engagement; 2) constantly updating directories for each clinic’s ever-changing fee structures, waivers, and appointment availability; and 3) confirming multiple means of contact to support each client’s adherence.

This presentation will describe specific cases of Latino MSM successfully enrolled in PrEP, engaged in care, or retained through the three strategies above. Participants will take live poll surveys to test their readiness to adopt similar strategies in their own settings.

**Black Cisgender Women and the HIV PrEP Care Continuum**
Track: Navigation, Retention and Re-Engagement
Location: Harris, Level 2
Presenters:
Leandra Stubbs, National Institutes of Health
Oni Blackstock, New York City Department of Health and Mental Hygiene
Leisha McKinley-Beach, Leisha.org
Charlene Flash, Legacy Community Health
Dr. Michael Stirratt, National Institutes of Health
Dr. Keoha Bond, New York Medical School
Dr. Tiara Willie, Yale School of Medicine

The purpose of this workshop is to discuss emerging, culturally-adapted strategies and methods to engage, link, and retain U.S.-based Black cisgender women in the PrEP care continuum. A diverse panel of presenters representing community-based agencies, public health departments, research institutions, and healthcare organizations will share research findings that highlight perceptions, barriers, and facilitators to PrEP uptake among Black cisgender women. They will further identify and describe tools and approaches which aim to advance and support PrEP use among Black cisgender women. Discussants will provide insight on existing gaps in research, policy, and clinical practice and suggest future directions specific to Black women.
Trust Your Jotería: Latinx HIV Prevention and Care Community Responses
Track: Community Mobilization
Location: Tanglewood, Level 3
Presenters:
Sean Bland, O’Neill Institute for National and Global Health Law
Alex Aldana, HIV Advocate
Elias Diaz, Eagle Pass SAFE
Carlos Gómez, Bienestar

Sexual and gender minority Latinx (SGML) communities continue to be disproportionately impacted by HIV. While new HIV diagnoses stabilized for gay and bisexual men from 2012-2016, they increased by 12% during this period for Latinx gay and bisexual men. According to national epidemiological data, Latinx transgender individuals are also disproportionately impacted by HIV compared to their transgender counterparts. Culturally relevant programming and organizing are crucial to the success of biomedical HIV prevention for SGML communities. This workshop will introduce and discuss multiple community-based organizations across the country engaged in supporting effective HIV prevention and care by and for Latinx gay and bisexual men and Latinx transgender individuals and will highlight the cultural programing and organizing efforts needed to reduce HIV rates in SGML communities.

Possibilities and Progress in Biomedical HIV Prevention Research
Location: Liberty, Level 2

This workshop will discuss ways to empower communities with “try on” methods and information. It will include the following presentations:

Flirt, Insert, and Squirt: Community Desire in HIV Prevention
Track: Implementation Research
Presenter:
Clare Collins, Microbicide Trials Network
Jonathan Paul Lucas, MPH Microbicide Trials Network & FHI 360

A well-made shirt can look great on a hanger, but it’s an entirely different experience when you’re in the fitting room trying it on. It could be the fit or even the fabric. The same is true of HIV prevention. A product may seem great sitting on your medicine cabinet shelf, but if it’s not the right fit for your lifestyle, you probably won’t use it at all.

This interactive workshop will introduce a new kind of study approach that seeks to empower communities by providing the opportunity to “try on” potential HIV prevention methods and share their experiences before specific products have been developed. The study, called DESIRE, is asking cisgender and transgender people to use and compare three different placebo approaches to biomedical HIV prevention from anal sex. By engaging with communities early on, products can be developed that better address their needs and offer choice in HIV prevention.
Okay Ladies Let’s Get In-formation: Women & Biomedical HIV Prevention
Track: Training Programs
Presenter:
Brian Minalga, MSW, The Legacy Project
Claire Collins, Microbicide Trials Network
Moreniké Giwa Onaiwu, Women’s HIV Research Collaborative
Chloe Jordan, Emory University of Medicine

Transgender and cisgender women urgently need options for biomedical HIV prevention—especially women of color. About 25% of trans women in the US are estimated to be living with HIV, and cis women account for nearly one-fifth of all HIV diagnoses in the US. The CDC estimates that nearly 500,000 women in the US could benefit from Truvada as PrEP, but less than 1% of those actually take it. Biomedical research routinely excludes women from studies, resulting in poor knowledge of biomedical efficacy in women and limited approval of products. What biomedical options do women really have for HIV prevention? This presentation will introduce you to a PowerPoint training on biomedical HIV prevention for trans and cis women developed by the Women’s HIV Research Collaborative. The training covers biomedical HIV prevention options currently available to women as well as products under research: microbicides, new forms of PrEP, and vaccines.

Dangerous Intersection: Chemsex, Race, and HIV
Track: Navigation, Retention and Re-Engagement
Location: Clear Lake, Level 3
Presenters:
David Fawcett, Seeking Integrity, LLC
Donald Powell, EXPONENTS

This workshop examines the escalating use of crystal meth among Black/Latinx MSM, the intersection with HIV in those communities, the underlying social factors that heighten risk, and promising research for both harm reduction and abstinence programs. The presenters will use a social justice approach in describing this epidemic and promising interventions.

Session 3: December 3, 4:30 - 6:00 pm
WORKSHOPS
Client Contact for the Improvement of PrEP Persistence
Track: Navigation, Retention and Re-engagement
Location: Montgomery A, Level 2
Presenters:
Nicholas Davis, Howard Brown
Chad Hendry, Howard Brown

Howard Brown Health has taken a stance to promote PrEP to our clients who feel they may be at risk of HIV exposure. Until recently, the number of clients who consistently remain on PrEP, however, is less than desirable. The goal of this program is to provide a monthly list of 500, cis-women of color, transgender, and young MSM individuals that will 1) run out of PrEP during the upcoming month and/or 2) have not had a primary care visit in the previous six months. Two PrEP navigators are responsible for attempting, by phone, each of the 500 individuals a minimum of three times as a chance to help the individuals navigate their upcoming refill and possible primary care visit. The goal is to help navigate any circumstances that may prevent a client from continuing to take PrEP, thus increasing our clients’ overall persistence on PrEP continuation.

Sexual Networks and Social Determinants of Health to Increase PrEP Uptake
Location: Clear Lake, Level 3

This workshop will discuss how social determinants of health and sexual networks can increase PrEP Uptake. It will include the following presentations:

The Burden of Transportation
Track: Engagement, Retention and Re-Engagement
Presenter:
Dennis Chau, Texas Health Action - Kind Clinic

Limited data exists on the burden of transportation for patients accessing pre-exposure prophylaxis for HIV (PrEP). This workshop covers techniques for mapping patient locations, identifying clusters of significant PrEP access and lack of
access, and quantify the burden of transportation on patients. Methods used to calculate distance will be discussed alongside usage of logistic regression to identify the probability difference associated with each increase in mile of distance away from clinic.

The second part of the workshop focuses on implemented solutions that help alleviate the burden of transportation for patients alongside challenges encountered when implementing different programs. Additionally, this part of the presentation will also include techniques on reaching patients in specific locations such as: physical media, geo-fencing for app-specific advertisements, and outreach events.

**How Latino MSM’s Sexual Network Configurations Can Facilitate PrEP Uptake**
Track: Implementation Research
Presenters:
Stephen Fallon, Latinos Salud
Yoel Moreno, Latinos Salud
Noe Inestroza, Latinos Salud

Latino men who have sex with men (LMSM) account for 92% of new HIV diagnoses among Latino men living in Miami Dade County. Miami has the highest HIV incidence and third highest HIV prevalence of all metropolitan U.S. cities. PrEP uptake and continuation are both lower amongst Latino MSM than amongst non-minority MSM in South Florida. Known barriers inhibit PrEP awareness and acceptance: limited Spanish language campaigns, cost of PrEP medications and required clinic visits, discomfort with healthcare systems. How can prevention providers reach all of the target community to share information that can overcome these barriers. University researchers wished to understand how information about PrEP travels through networks of Latino MSM in Miami-Dade. By partnering with a community-based organization, this study identified networks that can be utilized to reach more at-risk community members and ultimately disseminate information about PrEP availability and effectiveness to those who remain unaware, or who have inaccurate information.

The following were authors of the study being discussed: Mariano Kanamori, PhD, Department of Public Health Sciences, University of Miami Miller School of Medicine; Stephen Fallon, PhD, Latinos Salud; Victor Gonzalez, Latinos Salud; Cho Hee Shrader, MPH, Department of Public Health Sciences, University of Miami Miller School of Medicine; Susanne Doblecki-Lewis, MD, Division of Infectious Disease, University of Miami Miller School of Medicine; Steven Safren, PhD, Department of Psychology, University of Miami; Guillermo Prado, PhD, Department of Public Health Sciences, University of Miami Miller School of Medicine.

**PrEP915: Educating, Providing, and Building PrEP in El Paso, TX**
Track: Training Programs
Location: Tanglewood, Level 3
Presenters:
Elias Gonzalez, City of El Paso, HIV Prevention Program
Ogechika Alozie, Sunset ID Care
Richard Omelas, ASP Cares
Christopher Ornelas, Ventura County Health Care Agency

Despite PrEP being approved in 2012 and rapidly expanding in major urban centers, PrEP uptake has been slow to permeate communities most in need. In the context of El Paso, TX that means Latinx MSM and transgender communities on the U.S.-Mexico Border. Panelists will describe their varied efforts through community mobilization and collaboration to introduce and expand PrEP access in El Paso, a city that has unique challenges in the education, training, and provision of PrEP. Speakers will discuss early efforts to provide PrEP starting with a single provider and education provided through community mobilization work groups. Discussion will then detail community development of educational materials, outreach campaigns, and the expansion of PrEP to two local FQHCs and the opening of a PrEP clinic. Community Mobilization and collaboration have been the cornerstone tools that have facilitated the expansion of PrEP in El Paso.
Let It Flow…Exploring PrEP Adherence & Seasons of Pleasure

Track: Engagement, Retention and Re-Engagement  
Location: Montgomery B, Level 2  
Presenters:  
Chantil Thomas, DC Department of Health  
Kate Drezner, DC Department of Health  
Kenneth Pettigrew, DC Department of Health  
Jason Beverly, DC Department of Health  

This workshop will feature a community level panel discussion exploring the idea of what it means to be adherent on PrEP and how providers are defining those parameters. Trends show that many providers do not engage patients in conversation regarding pleasure, but more so around prevention, protection, and risk. Using a sex-positive model, our findings show that patients tend to be more receptive to PrEP uptake and are more adherent when their sexual behaviors are not scrutinized. Patients yielded better outcomes when they were able to identify and define their season of PrEP use (also known as the season of pleasure not risk), and were not reprimanded when deciding to discontinue. This also resulted in patients being likely to restart PrEP when new seasons of pleasure presented.

Empowerment as HIV Prevention: Bringing the Community to Campus

Track: Community Mobilization  
Location: Montgomery B, Level 2  
Presenters:  
Kaye Sly, Jackson State University  
Kevin Patterson, Jackson State University  

Young African-American men who have sex with men accounted for approximately 97% of new HIV cases identified through our on-campus testing center. HIV prevention strategies have been largely ineffective in reducing the rate of infection among this group. Thus, new innovative strategies are needed. Given that the CDC once identified college students as the epicenter for HIV infection, and young African-American college age men in Mississippi (program site) make up the largest number of new cases of HIV cases, it is important that prevention focuses on young men attending historically black colleges and universities (HBCUs). This presentation will describe an empowerment program for African-American gay and bisexual men that was implemented on the campus of a HBCU located in Mississippi. The primary goals for the program were to: increase awareness about new HIV strategies (e.g., PrEP) and services, promote advocacy and facilitate linkages to care.

Two Paths, One Goal: Integrating Undetectable and PrEP

Track: Implementation Research  
Location: Liberty, Level 2  
Presenters:  
Matthew Crehan Higgins, Evergreen Health  
Ashley Zuppelli, Evergreen Health  
Michael Canty, Evergreen Health  
Jonathan Jordan, Evergreen Health  

As the evolution of Undetectable and Pre-Exposure Prophylaxis has changed the treatment and prevention paradigms, the conversations have remained largely separate - reinforcing the existing HIV status hierarchy rather than seizing opportunity to work toward a single paradigm that makes both paths of biomedical prevention equal. With fear of knowing one’s status and dealing with social implications of the results remaining the largest barrier to testing and action, it is imperative to synergize this conversation. Evergreen Health and Trillium Health are two large community-based providers in upstate New York who will discuss their experience developing robust Pre-Exposure Prophylaxis programs and integrating same day access to treatment for those testing preliminary HIV-positive to their service delivery models. Their experience in quickly fostering newly diagnosed people to Undetectable, many of whom were diagnosed during PrEP consultation, and recognizing that they have achieved virtually the same goal will be shared.

Addressing Sexual Health Disparities In Women Living In Rural Communities

Track: Engagement, Retention and Re-Engagement  
Location: Memorial, Level 3  
Presenters:  
Carleisha Murry, Arkansas AIDS Foundation  
Cornelius Mabin, Arkansas HIV Prevention Group  

Rural women of color experience poorer health outcomes and have less access to health care then women living in other areas. Many rural areas have
limited numbers of health care providers, especially women health providers. An accumulative number of women in the United States are diagnosed with HIV, particularly women of color; the changing epidemic is challenging established mechanisms for the delivery of primary medical care services. Advances in HIV treatments, and the resultant longer life expectancy for those living with the disease, means primary care providers must manage the chronic medical conditions of patients living with HIV.

Fostering Transgender Awareness and Inclusion in HIV Research

Track: Implementation Research  
Location: Fort Bend A, Level 2  
Presenters:  
Rona Siskind, Division of AIDS, NIAID, NIH  
Brian Minalga, The Legacy Project  
Tori Cooper, Positive Impact Health Centers

Transgender people face stigma and discrimination in all aspects of society, including in medical and research settings. These cumulative traumatic experiences often result in an unwillingness to seek care and participate in research. Given the disproportionate impact of HIV in transgender communities, especially among transgender women of color, a critical need exists to increase transgender inclusion in HIV prevention and treatment research. With this goal in mind, a group of transgender, gender non-conforming, and cisgender researchers and subject matter experts developed a transgender training curriculum to help cultivate responsiveness and cultural humility among HIV research staff.

Increasing PrEP Access: Implementation of a Pharmacist-Driven Program

Track: Implementation Research  
Location: Harris, Level 2  
Presenters:  
Ruston Taylor, Legacy Community Health  
Karen Gurwitch, Legacy Community Health

Pre-exposure prophylaxis (PrEP) has quickly become an important part of providing optimal care for any patient at risk for potentially contracting HIV. Therefore, providing all patients with ready access to PrEP is a necessary part of any public health clinic. However, there are real-world limitations to the availability of provider appointments to prescribe PrEP to patients. Legacy Community Health (LCH), in an effort to improve PrEP availability to their patients, implemented a novel, pharmacist-driven program using an approved protocol for select patients to have visits completed by trained clinical pharmacists.

TelePrEP: Overcoming Road Blocks

Track: Finance and Access Models  
Location: Sugarland, Level 3  
Presenters:  
Erika Sugimori, Louisiana Office of Public Health, STD/HIV Program  
Sarah Marno, Mozaic Program at Equitas Health

Using telemedicine for PrEP delivery is increasing due to many benefits perceived by consumers such as convenience, ease, and immediate access to specialty providers. As telecommunication technology has improved and comfort has increased using “online video chat systems like Skype or Face-time, adopting these tools for health care delivery seems inevitable. So why are we not all doing it all the time? Concerns regarding the quality of the provider-patient interaction and reimbursement for services are just some of the concerns hampering the adoption of telemedicine. TelePrEP is an effective and efficient means to increase PrEP access, but barriers including public policy, state regulation, reimbursement, provider’s skill, and consumer knowledge must be addressed to increase the availability of TelePrEP across the United States.
Breakfast Plenary: Long Acting Injectables and the MOSAICO Vaccine Study: The New Paradigm on Biomedical HIV Prevention

The Innovation Plenary will discuss new HIV prevention modalities under study. Long acting injectables, a new modality for HIV Treatment and PrEP, is making its way into the box of tools to treat and prevent HIV infection. How can injectables be effective in our communities? Will injectables help to increase PrEP uptake among Black and Latino MSM? Yet a new delivery mechanism brings its own set of challenges. However, the question remains, “Are we ready to give injectable medicine a shot?"

The MOSAICO VACCINE STUDY is the largest HIV study ever. Results from this study might be available in the next five years. How will testing of a vaccine intervention help to highlight the role that biomedical prevention tools such as PrEP, PEP, Treatment as Prevention (TasP), and U=U have in ending the epidemic? The second part of this plenary is designed to increase your understanding of HIV vaccines, and how they fit into the context of HIV prevention broadly. It will help us know about the current vaccine stories, how vaccines are developed, the making of a HIV vaccine and how might it work.

Speakers:

Sheldon D. Fields, PhD, The SDF Group, LLC Innovation Consultants

Stephaun E. Wallace, PhD, MS, MOL, HIV Vaccine Trials Network
Challenges and Opportunities for PrEP Uptake Among GBMSM in Puerto Rico

Track: Community Mobilization
Location: Fort Bend A, Level 2
Presenters:
Damian Cabrera Candelaria, MA, Puerto Rico’s LGBTQ Resources Directory
Carlos Rodríguez Díaz, PhD, MPHE, MCHES, DC CFAR
Maribel Acevedo

HIV continues to disproportionately affect otherwise socially vulnerable populations. Globally, epidemics of HIV in men who have sex with men (MSM) continue to expand in most countries. In Puerto Rico (PR), an unincorporated territory of the USA, MSM represent 39% of all the new cases and is the only group in which HIV incidence has increased over the last decade. PrEP is changing the HIV prevention landscape; however, PR’s current political and economic crisis has limited the access to PrEP among those at increased risk for infection. Currently, PR is structurally unable to provide new resources to the HIV prevention response (e.g. PrEP) due to multiple factors including a $100 billion debt that represents nearly 70% of the GDP and a cap on funding for healthcare established by the USA Congress. Under these circumstances it is difficult to adequately respond to the HIV prevention needs in the island. Considering this scenario, community-based initiatives have been responding by assessing the needs of populations at increased risk of infection and incorporating best practices in the implementation of biomedical HIV prevention services.

This workshop will discuss the overall knowledge, awareness, and willingness to use PrEP among GBMSM in Puerto Rico. The panelists will also elaborate on the potential barriers for PrEP uptake, including stigma, misconceptions about its use and efficacy, missed opportunities during interactions with providers, costs, and other structural limitations.

The discussion will be framed around the importance of using community-based participatory research and mixed-methods research approaches as promising tools for the design of evidence-based interventions to reduce social inequities and increase the effectiveness of current and future HIV response strategies.

How a Urine PrEP Adherence Test Optimizes Support for Vulnerable Patient Populations

Track: Navigation, Retention and Re-engagement
Location: Sugarland, Level 3
Presenters:
Giffin Daughtridge, UrSure, Inc.
Karem Mounzer, Jonathan Lax Treatment Center
Adam Cohen

Over one million people are at high-risk of HIV infection in the US (CDC). Daily pre-exposure prophylaxis (PrEP) is 99% effective at preventing new HIV infections if taken consistently, however current adherence rates can be as low as 37% in certain populations (Serota et al, 2019). Self-reported adherence is a poor indicator of actual adherence (Hosek et al, 2017), and existing lab tests to measure adherence (e.g. hair follicle and dried blood spot) are expensive and difficult to implement.

We developed a urine test that measures the presence of TFV - one of the drug components of PrEP - using a liquid chromatography mass spectrometry (LC-MS/MS) method. This test is used to assess PrEP adherence at Philadelphia FIGHT Community Health Centers. Data was disaggregated by demographic to identify trends in adherence by sub-population. LC-MS/MS adherence rates were compared to self-reported adherence to assess concordance of objective adherence monitoring versus self-report.

A Blueprint for Implementing a PrEP Program - Making it Happen!

Track: Implementation Research
Location: Tanglewood, Level 3
Presenters:
Patricia Gallegos, Centro San Vicente
Gerardo Anaya
Rodolfo Castañeda, Centro San Vicente
Travis Cosban, Centro San Vicente
In an effort to have a more active role in the fight against the HIV epidemic, Centro San Vicente (CSV), a faith-based Federally Qualified Health Center, began providing Pre-Exposure Prophylaxis (PrEP) services at its Be PrEPared! Clinic in June of 2018. This new PrEP clinic serves residents living in a Tri-State area, which includes El Paso County, Southern New Mexico, and Ciudad Juárez, Mexico. Multi-phase strategies used by CSV to initiate PrEP services will be presented, highlighting the following four key phases: 1. Pre-condition; 2. Pre-Implementation; 3. Implementation; and, 4. Maintenance and Evaluation. Participants will also learn about evidence-based implementation strategies that can be used to target people at very high risk for HIV as well as methods that can bolster stakeholder engagement. During the presentation, participants will hear perspectives from an administrator, a patient navigator, a physician, and a subject expert.

**Bird’s Eye View: Refining State-Wide PrEP Monitoring and Evaluation Plan**
Track: Evaluation  
Location: Memorial, Level 3  
Presenters:  
Simon Andrade, Texas Department of State Health Services  
Sarah Norkin, Texas Department of State Health Services  

This workshop examines the evolution of a pre-exposure prophylaxis (PrEP) monitoring and evaluation (M&E) plan. The initial plan addressed data collection and process measures at PrEP organizations funded by the Texas Department of State Health Services (DSHS). The development of a broader M&E plan offered the opportunity to address systemic goals and concerns that emerged during early environmental scans; and the development and implementation of integrated prevention/care plans and community-driven End the Epidemic (EtE) plans. The M&E plan uses the domains of supply, demand, and maintenance to delineate various activities and goals for increasing access, driving up demand, and removing barriers to continuing PrEP use. The work on the M&E plan has highlighted our understanding of strengths and limitations, such as access to relevant data and preliminary identification of the factors that drive demand for PrEP.

**Community and Researchers Working Together**
Location: Montgomery B, Level 2  

This workshop will discuss the role of community in ending the epidemic. It will also provide an overview of the ACTG research network. It will include the following presentations:

**Be the Generation: Mobilizing Communities to End the HIV/AIDS Epidemic**
Track: Community Mobilization  
Presenter:  
Brian Minalga, The Legacy Project  
Louis Shabkelford, Legacy Project  
Jorge Benitez, Columbia University  

HIV prevention research is urgently needed and remains our best hope to finding safe and effective methods to prevent the spread of HIV. However, the benefits of HIV prevention research do not reach everyone equitably. Seventy percent of Americans on PrEP are white. A lower proportion of African Americans and Latinx people have reached viral suppression compared to white people with HIV (CDC). The future of HIV prevention depends on the ability of all communities to benefit from PrEP, TasP, and ongoing research in HIV prevention modalities such as microbicides and vaccines. Communities of color, transgender people, and men who have sex with men bear the greatest burden of HIV, but they are also the most valuable resource to ending the epidemic. This presentation will provide an overview of the Be the Generation project and how we’re mobilizing communities to end the HIV/AIDS epidemic through biomedical HIV prevention research engagement.

**The Latest in HIV Treatment Research from ACTG**
Track: Community Mobilization  
Presenters:  
Michael Stirratt, PhD  
National Institute of Mental Health, Division of AIDS  
David Hughes, CCRP  
AIDS Clinical Trials Group (ACTG)  
Russell Campbell, MA  
Office of HIV/AIDS Network Coordination  
The Legacy Project
Despite the great advances in the treatment of HIV infection, people living with HIV still take medications daily which represents a challenge for adherence and a constant reminder of their HIV status. The AIDS Clinical Trials Group (ACTG) has developed an agenda to evaluate new long acting treatment options. The study, ACTG 5359, will compare the efficacy, safety, and durability of two different strategies to treat participants with a history adherence challenges and control of their HIV infection: long-acting (LA) antiretroviral therapy (ART) with rilpivirine (RPV-LA) and cabotegravir (CAB-LA. ACTG researchers will provide detailed information regarding LA antiretroviral therapy, broadly neutralizing antibodies, and a review of ACTG 5359.

Models of PrEP Services
Location: Clear Lake, Level 3

This workshop will include the following presentations:

Individualized PrEP: Changing the Clinical Approach in NYS
Track: Clinical Provider Engagement
Presenter:
Lyn Stevens, New York State Department of Health AIDS Institute


No PrEP Services Here...
Track: Service Provider Engagement
Presenter:
Teresa Springer, Wellness Services Inc.

PrEP has been marketed to at-risk populations as a miracle drug that helps to prevent HIV. There are commercials and ads placed in communities and HIV service organizations have been charged with screening and linkage to PrEP. What happens in the smaller cities where there are no providers prescribing PrEP? What happens when someone screens eligible and there is no one to link them to? Provider shortage and
ignorance can be a major barrier to accessing PrEP in smaller towns and cities. This workshop will explore this challenge and look at solutions to this ongoing issue.

**The PrEP Desert: Interdisciplinary Care Model In the Wild West**

Track: Implementation Research

Presenters:
Cesar Egurrola, University of Arizona, Department of Medicine
Jai Smith, University of Arizona, Department of Medicine

Despite expansion and improvement of antiretroviral therapy and established efficacy of biomedical HIV prevention interventions such as PrEP and PEP, HIV incidence continues to rise. Access to PrEP care in southern Arizona was very limited up until 2013. To address this need, a comprehensive PrEP Clinical Care Model was designed and implemented at the Petersen HIV Clinics in Tucson, AZ. This program expanded beyond clinical care to include PrEP Navigation and Education, and option of linkage to specialized local pharmacies to maximize adherence and access to medication. The primary goal of this effort was facilitation of PrEP care by an interdisciplinary team including physicians, clinical pharmacists, and limited medical case management support. Workshop overview consists of program background, program design and implementation, PrEP patient panel snapshot, and recommendations for increased PrEP access based on lessons learned.

**Crafting Messages to Diagnose and Prevent HIV - Developing a Social Marketing Strategy that Works**

Track: Navigation, Retention and Re-engagement

Location: Montgomery A, Level 2

Presenter:
Gary Naja-Riese, San Francisco Department of Public Health

Community-based HIV testing and PrEP are key components of the Diagnose and Prevent pillars of the plan to end the U.S. HIV epidemic. Ensuring that we are creating culturally relevant messages for populations that are not aware of or reluctant to test and/or use PrEP is critical if we are to advance the plan’s ambitious goals of preventing new HIV infections and achieving health equity. Krystle Sims-Cameron, a national social marketing leader, will guide participants through a structured approach to develop meaningful campaigns including: 1) how to solicit insights from communities to craft a strong message; 2) how to engage community through powerful collateral and targeted placement strategies; and 3) how to measure success. Following the workshop, attendees who will be creating or refining their local campaigns are invited to participate in an interactive 3-month learning collaborative hosted by Krystle and the HIV Prevention Capacity Building Assistance Program of the San Francisco Department of Public Health, getSFcba.

**We’re Not “Hard to Reach:” Black Women’s Biomedical Ambassador Program**

Track: Community Mobilization

Location: Harris, Level 2

Presenters:
Maya Merriweather, Black AIDS Institute

As the scientific community continues to make advances in biomedical interventions, disparities on who uses those interventions have become apparent. Many conversations around these disparities have put the impetus on communities that have been historically marginalized, calling young people, women, Black people, and other people of color “hard to reach.” In 2019, the Black Women’s Biomedical Ambassador Program was launched by the Black AIDS Institute, with an inaugural cohort of Black women who reflect the diversity of Black America: women from the South, women of trans experience, women for whom English is a second language, and women who are living with HIV. This cohort was trained on HIV education and tasked with bringing that education to their peers through social media.
**PrEP, Latinos, and The South**  
Track: Community Mobilization  
Location: Fort Bend B  
Presenters:  
Judy Montenegro, Latino Commission on AIDS  
Joaquín Carcano, Latino Commission on AIDS  

The South represents the most diverse region in the US. The South accounts for 35% of LGBT population and has become a new destination for Latinx populations contributing to exponential growth, but it is also a region that continues to lack proper investment in health care and sexual health education. In 2016, the South accounted for more than half of all new HIV diagnoses in the US but only 30% of PrEP users lived in the South. Current data also shows that communities of color continue to have a low uptake of PrEP, especially amongst gay/bi/same gender loving men and trans individuals. These combined notions continue to make the South the epicenter of the HIV epidemic and will continue, unless there is an institutional investment by local counties, cities, and states. This workshop will share the results of a statewide poll of multiple southern states that gauge the knowledge of PrEP and support of individuals for local health departments to increase access to PrEP.
1:00 pm - 2:30 pm
Houston Ballroom Salon 4, Level 2

**Closing Plenary: HIV Criminalization and Biomedical HIV Prevention**

The eradication of laws that criminalize the bodies of People Living with HIV is a public health priority. In the age of PrEP, PEP, and U=U (TasP), we have all the tools to prevent transmission and reduce stigma. Our laws have not caught up with the science nor public health best practices.

Through this plenary you will learn how currently available biomedical HIV prevention techniques are being utilized to support the modernization of HIV Criminalization statutes. These statutes have had a disproportionate impact on women and Black/Latinx men further pushing those communities away from routinized HIV testing, prevention, and treatment.

*Speakers:*

- Nikko Briteramos, Los Angeles, CA
- Kamaria Laffrey, HIV Consultant, Winter Haven, FL
- Scott A. Schoettes, Lambda Legal, Chicago, IL
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Diane Ferguson, Development Associate

NMAC Training Center to End the Epidemic
Linda H. Scruggs, Director
Ace Robinson, Director of Strategic Partnerships
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Brenda Hunt
Borderbelt AIDS Resource Team (BART)
Lumberton, NC

Monica Johnson
HEROES - Helping Everyone Receive Ongoing Effective Support
Columbia, LA

Kelsey Louie, MSW, MBA
Gay Men’s Health Crisis (GMHC)
New York, NY

Norm Nickens
San Francisco Employees’ Retirement System
San Francisco, CA

Leonardo Ramon Ortega, MD, MPH
Shalom Health Care Center, Inc.
Indianapolis, IN

Mario Perez
County of Los Angeles Department of Public Health
Office of AIDS Programs & Policy
Los Angeles, CA

Rev. Ed Sanders
Metropolitan Interdenominational Church
Nashville, TN

Evelyn Ullah
Broward County, FL

Rodolfo R. Vega
JSI Research & Training Institute, Inc.
Boston, MA

Carlos E. Rodriguez-Diaz, PhD, MPHE, MCHES
DC CFAR
Milken Institute School of Public Health, George Washington University
Washington, DC
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