PROJECT SUMMARY (See instructions):

Reducing HIV among women living in Atlanta remains a public health priority, and women-tailored strategies will be necessary in order to achieve an end to HIV in Atlanta and the US. The Federal Title X National Family Planning Program supports a nationwide network of approximately 4,000 service sites with over four million clients. Unlike many states whose Title X grant is held by their Department of Public Health and implemented in health departments, Georgia’s (GA) Title X grant is operated by Georgia Family Planning System (GFPS) through their network of nearly 130 federally qualified health centers (FQHCs). Anchoring HIV testing and HIV prevention inclusive of pre- and post-exposure prophylaxis (PrEP/PEP) to Title X family planning (FP) services in Atlanta that women already trust, access routinely, and deem useful for their sexual health is of great appeal, as it offers an ideal opportunity to reach women at risk for HIV. However, our preliminary research in GA Title X clinics, and specifically in Atlanta, indicates that these clinics underutilize evidence-based practices for HIV testing (e.g., universal testing, opt-out testing) and PrEP/PEP provision. Coupled with lack of access to PrEP/PEP, our research also demonstrates that Atlanta women have low awareness about PrEP/PEP. The Health and Human Services’, Ending the HIV Epidemic: A Plan for America, has identified 4 key strategies to achieve an end to the HIV epidemic in the US. Aligned with 2 of these (Diagnose HIV as early as possible, and Protect people at risk using proven HIV prevention interventions, including PrEP/PEP), we propose an implementation science-based approach, guided by the Interactive Systems Framework, for improving HIV services, inclusive of PrEP/PEP, in Atlanta Title X clinics, supplemented with a novel, evidence-based community organizing approach to address low awareness among women. Our ultimate goal is to address both supply and demand barriers for reducing HIV among women by: (1) strengthening the use of evidence-based practices for HIV testing and adoption of PrEP/PEP services among the 30 Title X-funded clinics in Cobb, DeKalb, Fulton and Gwinnett counties, and (2) raising awareness, interest and connection to HIV testing and PrEP/PEP among women with an evidenced-based community organizing approach. Outlined in our 3 study aims, in this one-year project period, we intend to conduct the formative work necessary to mount a coordinated, collaborative multi-sectoral approach to overcome the aforementioned supply and demand constraints for scaling robust HIV testing practices and PrEP/PEP use among women in Metro Atlanta.

RELEVANCE (See instructions):

Initiatives for ending the HIV epidemic in the US must include women, particularly in Georgia, which has the highest rate of new HIV diagnoses among US states, where 22% were among females. Aligned with two of HHS’s Ending the HIV Epidemic key strategies (Diagnose and Protect), we propose an implementation science approach, guided by the Interactive Systems Framework, for strengthening HIV testing and PrEP/PEP services in Metro Atlanta Title X family planning clinics, supplemented with a novel, evidence-based community organizing approach to address low PrEP/PEP awareness among women.