

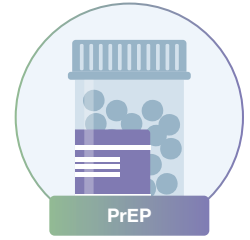
Enhancing HIV Prevention in the South: The Impact of ROOT and PrEP

As part of the “Ending the HIV Epidemic (EHE)” initiative to reduce HIV by 90% by 2030, Deven Hamilton (University of Washington) and CDC collaborators modeled the impact of Routine Opt-Out Testing (ROOT) and Pre-Exposure Prophylaxis (PrEP) on HIV rates in the South. Their analysis focused on community health centers (CHCs) and emergency departments (Eds), using current U.S. health data.



WHY FOCUS ON ROOT AND PrEP?

ROOT and PrEP are key strategies in the fight against HIV in the Southern U.S. These interventions work together to capture more individuals in need of HIV prevention and care.



WHAT THE DATA SHOWS: ROOT AND PrEP IN ACTION

ROOT and PrEP Synergy:

ROOT serves as a pathway to PrEP, ensuring that people at risk of HIV are identified and offered preventive care.



Result: ROOT in CHCs and EDs averted nearly 14% of new HIV infections and increased awareness of HIV status among persons with HIV (PWH) to 94%.

Broad Reach of ROOT:

ROOT captures patients who may not always be included in other HIV programs, reaching a broader population, including those less likely to seek out HIV testing. ROOT is an effective tool for identifying People With HIV (PWH) who have been previously diagnosed and were either never linked to care or have fallen out of care. These individuals can then be engaged or re-engaged in care.

Result: The combined approach of ROOT and PrEP increased the diagnosis rate from almost 85% at baseline to 95% and averted 23% of new infections, reducing annual HIV incidence by 42%.

Targeting High-Need Areas:

ROOT is readily available among recommended populations, making it a vital tool in identifying undiagnosed PWH in high-need areas like CHCs and EDs.



Result: This strategy alone won't achieve the 90% EHE goal, but it is a significant step in reducing HIV incidence.

WHAT THIS MEANS FOR HEALTHCARE PROVIDERS

Potential Impact: Over 8 years, ROOT combined with PrEP could prevent nearly a quarter of new infections. While this falls short of the 90% EHE goal, it represents significant progress for a low-cost and accessible intervention.

NEARLY 14%
of new HIV
infections averted

increased awareness
of HIV status among
persons with HIV
(PWH) to **94%**

Broad Reach of ROOT: ROOT identifies undiagnosed PWH, including those outside of priority populations and those reluctant to seek screening, making it a crucial tool for expanding care.

23% of new HIV
infections averted

Reduced annual
HIV incidence by **42%**

increased the diagnosis
rate from almost **85%**
AT BASELINE → **95%**



Adopt ROOT

Implementing ROOT in CHCs and EDs is a low-cost, effective strategy for identifying undiagnosed PWH and connecting them to care.



Expand PrEP Access

Use ROOT as a mechanism to increase PrEP uptake, particularly in populations not reached by traditional programs.

