



END THE SYNDEMIC TENNESSEE

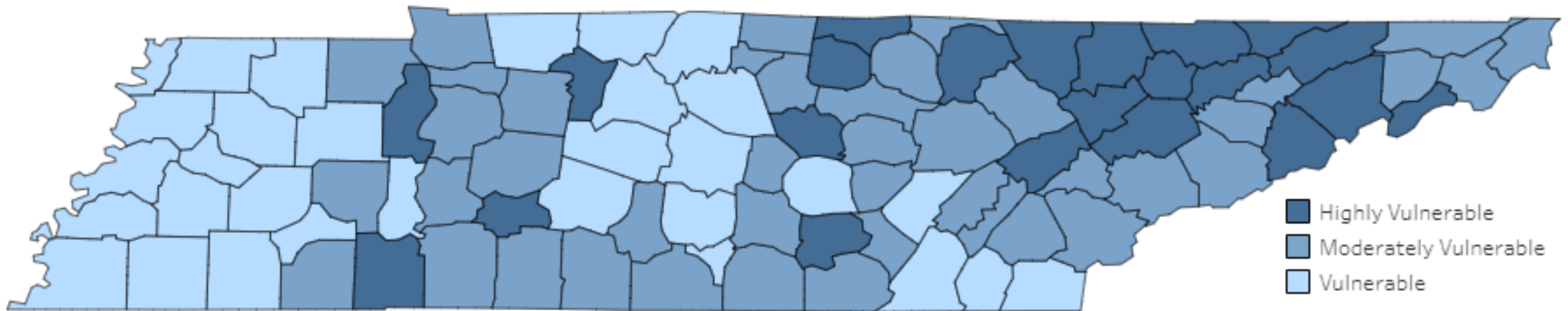
Addressing the HIV, STI, Substance Use Disorder, and Viral Hepatitis Syndemic

Arizona DIS HIV/HCV Cluster Outbreak
Detection and Response Peer Panel
Virtual 5/06/2024

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Tennessee Department of Health

Why a Syndemic Approach?

County-Level Vulnerability to Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV) Outbreaks Due to Injection Drug Use (2021)



10 measures were used to assess vulnerability

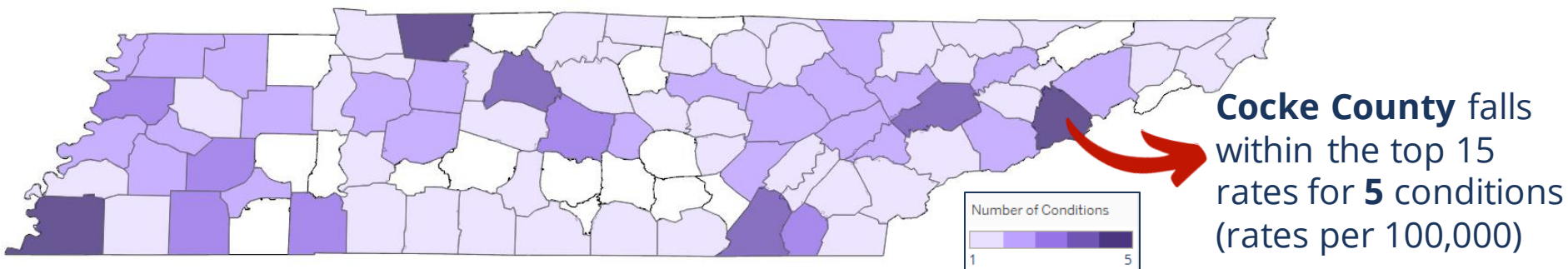
- Socioeconomic Measures (3)
- Access to Healthcare Measures (2)
- Opioid Use Measures (3)
- Health Outcome Measures (2)

Source: County-Level Vulnerability to HIV and Hepatitis C Outbreaks Due to Injection Drug Use – Tennessee, 2021 Update, <https://www.tn.gov/health/health-program-areas/std/std/vulnerability-assessment.html>



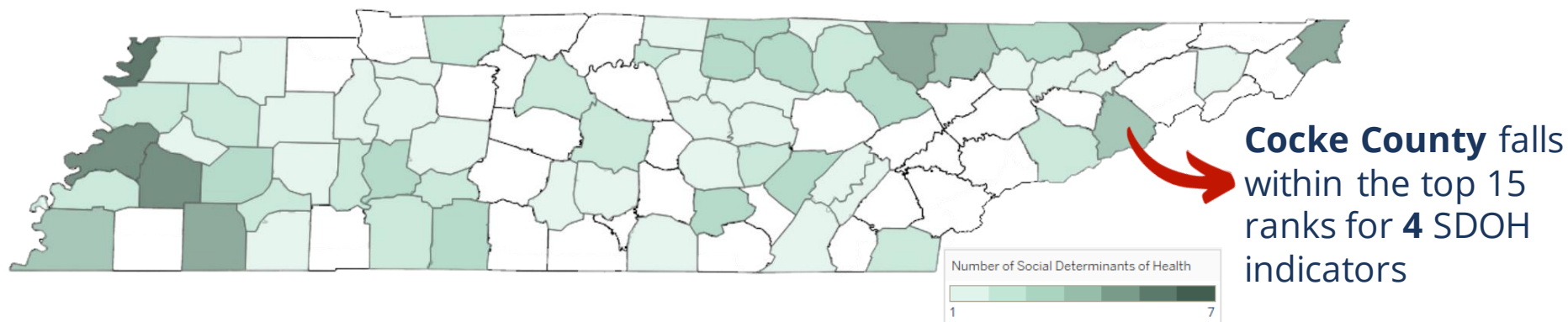
Tennessee Syndemic Impact

***TN Counties with the Highest Rates for Chlamydia, Gonorrhea, HIV, Overdose (Fatal and Non-fatal), Syphilis, and Viral Hepatitis (Hepatitis A Virus, Hepatitis B Virus, and Hepatitis C Virus) in 2021**



Fatal Overdose:	86
Syphilis:	30.2
Viral Hepatitis A:	2.7
Viral Hepatitis B:	8.28
Viral Hepatitis C:	13.8

****TN Counties with the Highest Social Drivers of Health (SDOH) Burden in 2021**



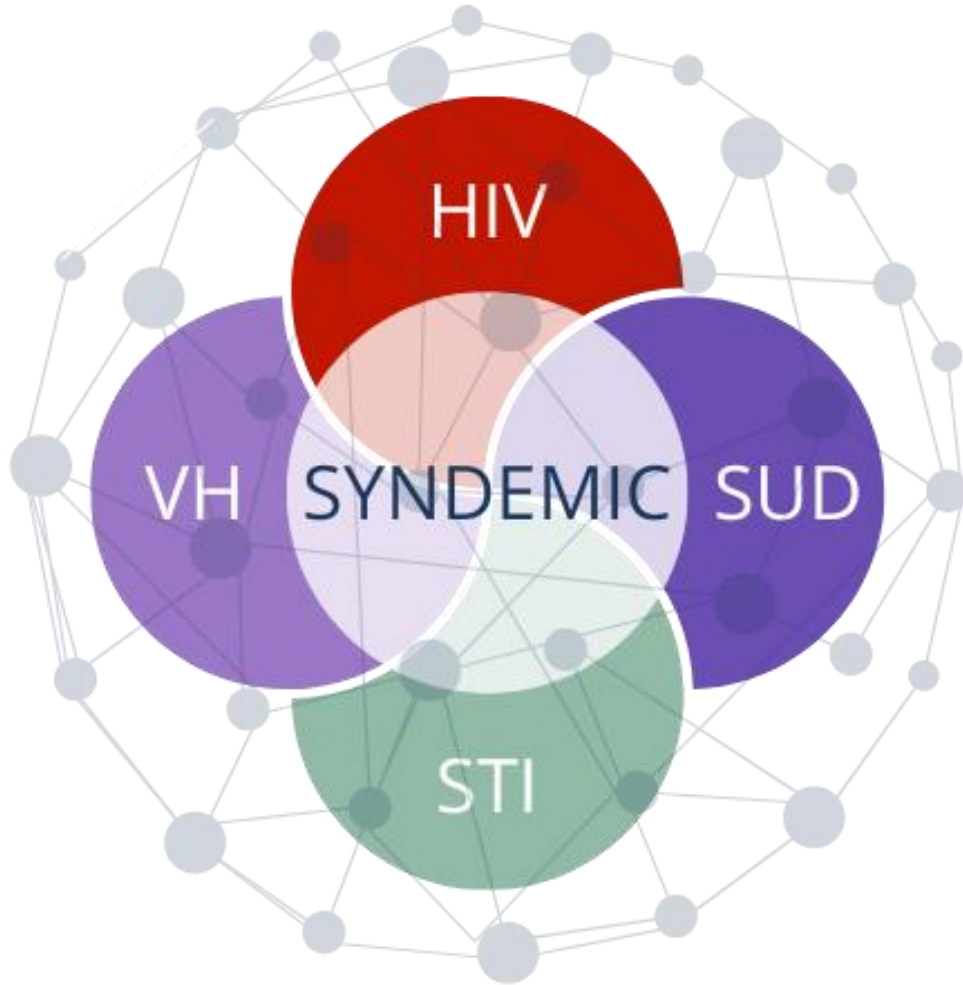
% Single Parent Household:	7.4
% Unemployed:	8.6
Below 150% FPL:	34.1
Median Household Income:	\$38,530

*inspired by a map CDC presented at the inaugural Syndemic Summit in Kansas City, 2023

** SDOH indicators: Housing Burden, Incarceration, No High School Diploma, No Motor Vehicle, Single Parent Household, Unemployed, Uninsured, Below 150% Federal Poverty Line (FPL), Median Household Income

Source: Preliminary data from Tennessee Department of Health, Syndemic Coordination Program

Defining the Syndemic for Tennessee



Included Health Conditions

- HIV
- Chlamydia
- Gonorrhea
- Syphilis
- Hepatitis A
- Hepatitis B
- Hepatitis C
- Substance use Disorder
- Substance misuse



Defining the Syndemic for Tennessee



Vision

End the HIV, sexually transmitted infection (STI), substance use disorder (SUD), and viral hepatitis syndemic so all individuals and all communities can achieve their full potential for health and well-being



Priority Populations

Priority Populations:

We recognize that people live multifaceted lives and have intersecting identities. Prioritization should be given to those at these intersections. Priority populations are listed alphabetically.

- Black, Indigenous, and People of Color
- Men who are Gay, Bisexual or have sex with men
- People aging with HIV and long-term survivors
- People experiencing homelessness
- People in sex work
- People with carceral involvement
- People who use drugs
- Transgender people
- Women and persons with the capacity for pregnancy (aged 15-49)
- Youth and young adults (aged 13-24)



The Dream of Building Bridges

Federal Priorities



- Federal Strategic Plans
- Federal Planning Guidance
- Federal Policy

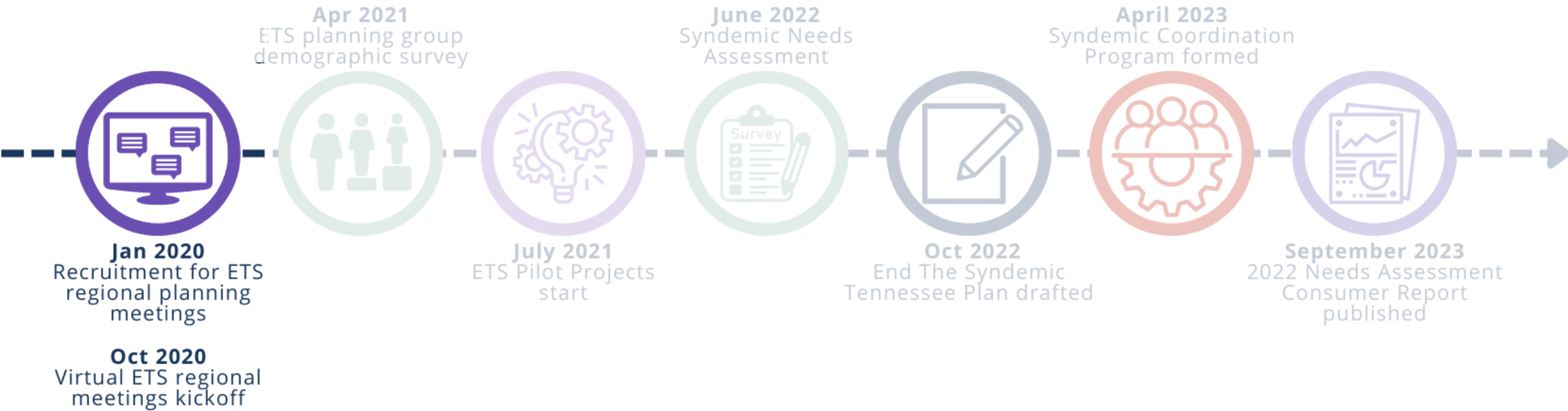
Local Priorities



- Local Strategic Plans
- Regional Planning Meetings
- Statewide Needs Assessment



Community Engagement Process



ETS Regional Planning Meetings

”

It has been great to be able to hear from professionals and people with lived experience and take what they have shared to make sure we are meeting needs of our community the best that we can



80 regional planning meetings were held across Tennessee

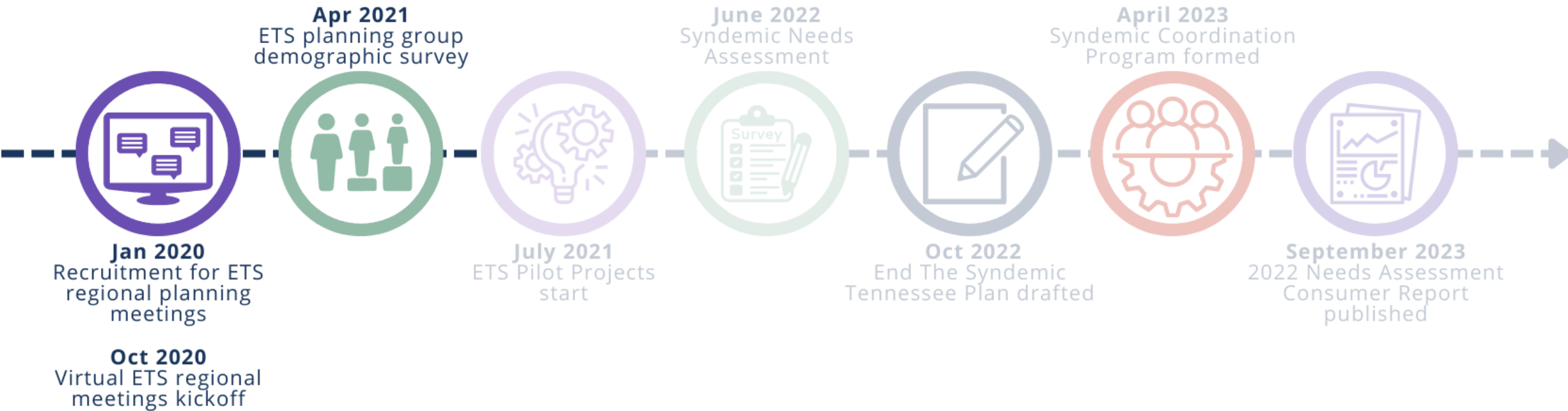
ETS Registration:

- 407 unique individuals
- 200 programs/organizations

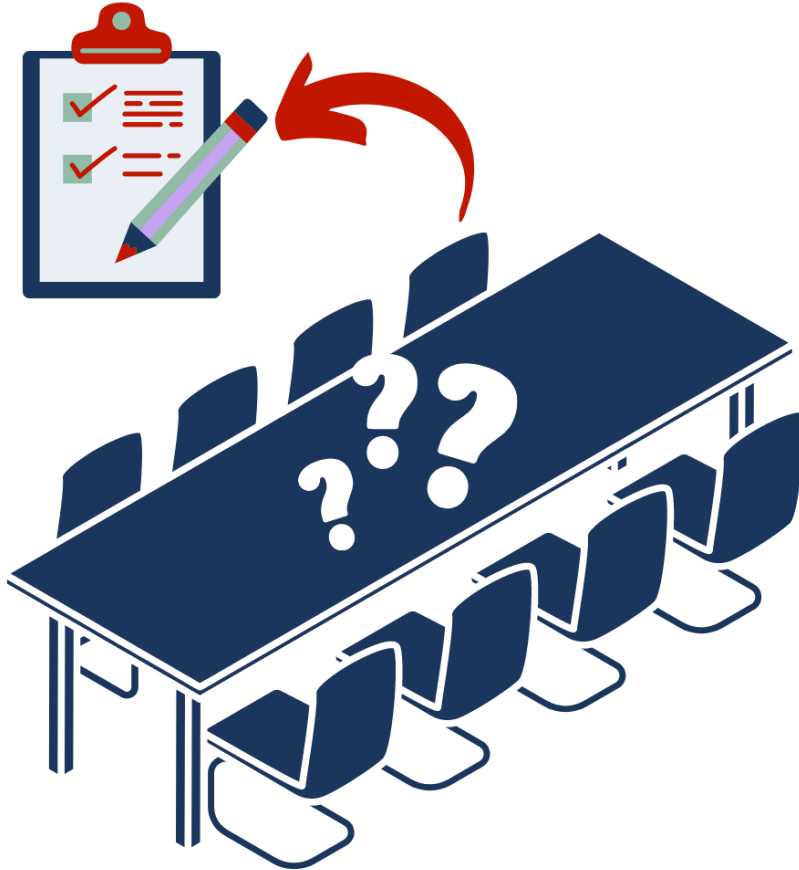
This included: service providers, educators, researchers, funders, advocates, local health department staff, and people with lived and living experience across the syndemic



Community Engagement Process



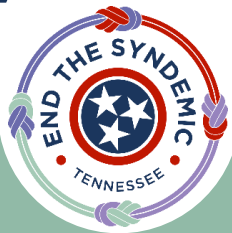
Demographic Survey



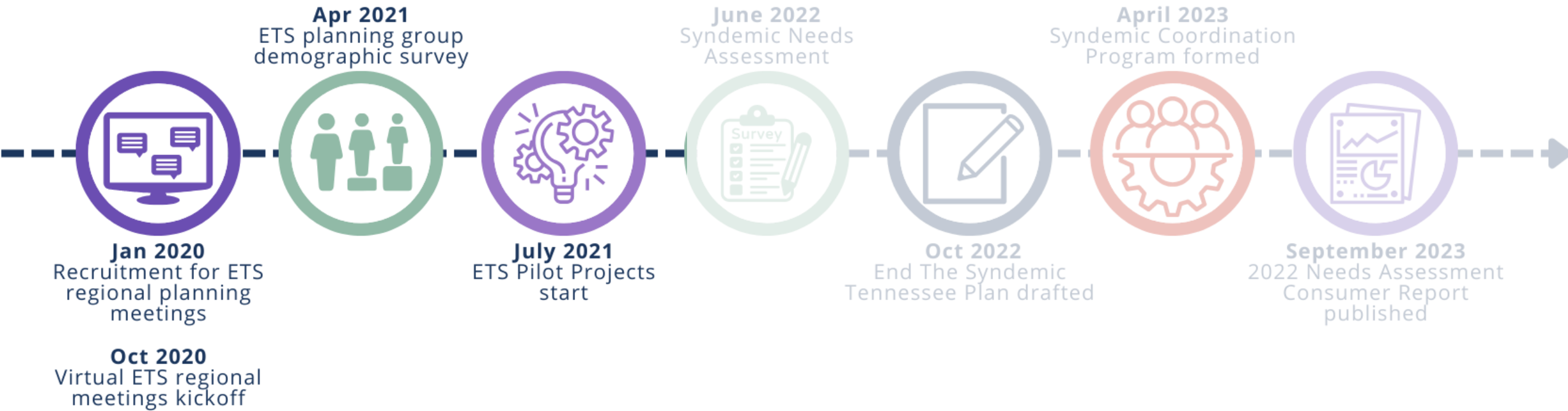
Demographic Survey Included:

- Gender Identity
- Sexual Orientation
- Race
- Ethnicity
- Age
- Lived Experience with Syndemic Conditions
- Lived Experience with Intersectional Social Determinants of Health

Data used to inform recruitment efforts, key informant interviews, focus groups, and survey development



Community Engagement Process



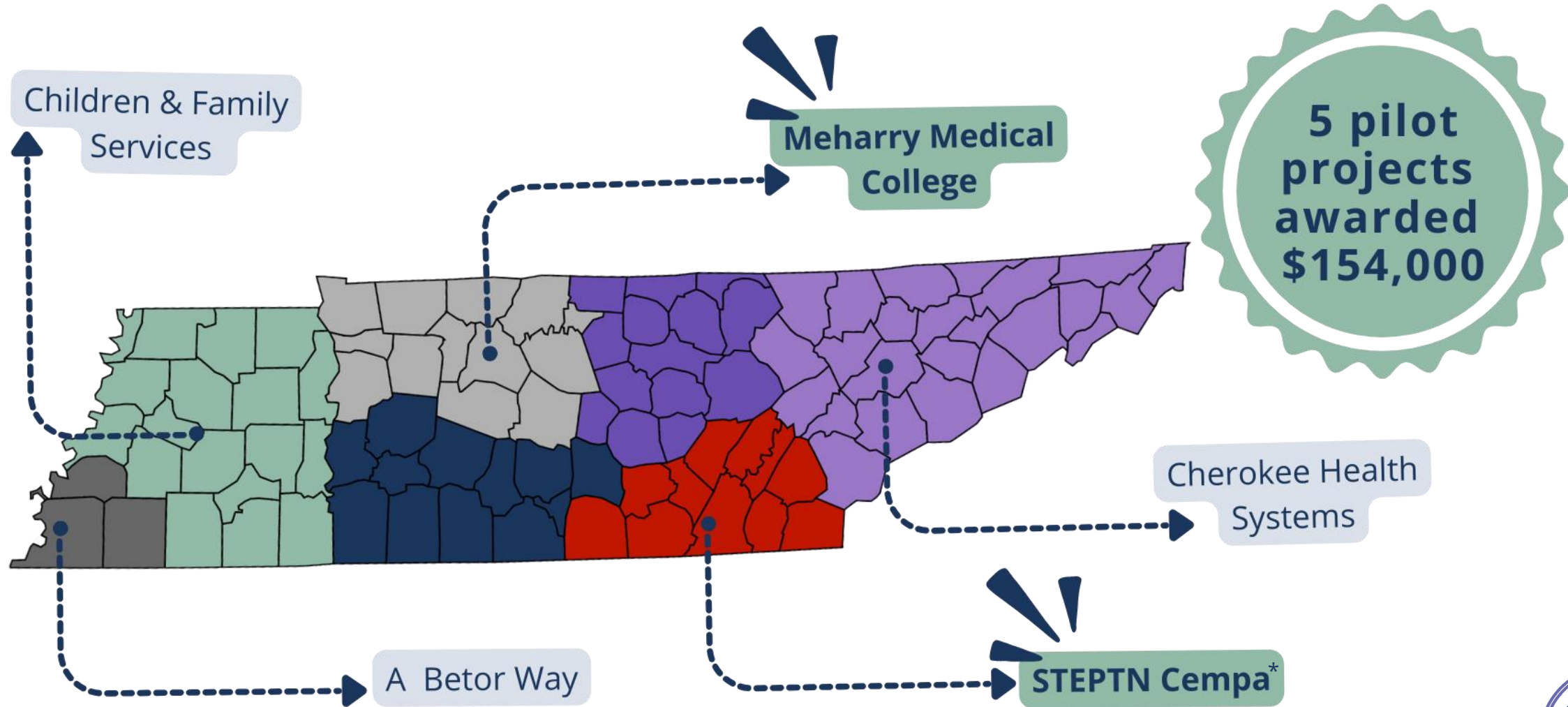
Syndemic Pilot Projects

Purpose: To pilot innovative prevention and linkage to care services to populations most impacted by HIV, STI, substance use, and viral hepatitis syndemic

- **Eligibility:** Non-governmental agencies
- **Project Period:** July 1, 2021—December 31, 2023
- **Anticipated Average Award:** \$110,000
- **Anticipated Number of Awards:** 7 (one per region)
- **In-Kind Supplies:** Rapid HIV test kits, Rapid HCV test kits, naloxone, capacity building, and technical assistance



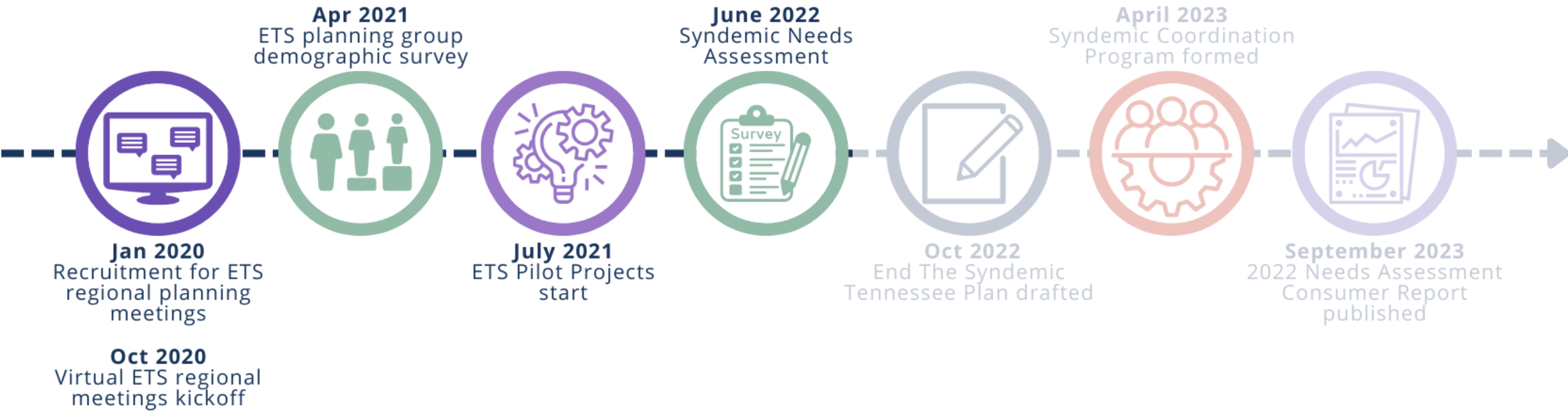
Syndemic Pilot Projects



* Syringe Trade & Education Program (STEPTN)



Community Engagement Process



Statewide Syndemic Needs Assessment

The overall objective of the Syndemic Needs Assessment was to identify gaps and barriers in prevention and treatment access across the syndemic



Survey
(online & in-person)



Focus Groups



**In-depth
Interviews**



Statewide Syndemic Needs Assessment

27. Thinking about the past 5 years (2017-present), please tell us whether you needed and received each of the services listed.

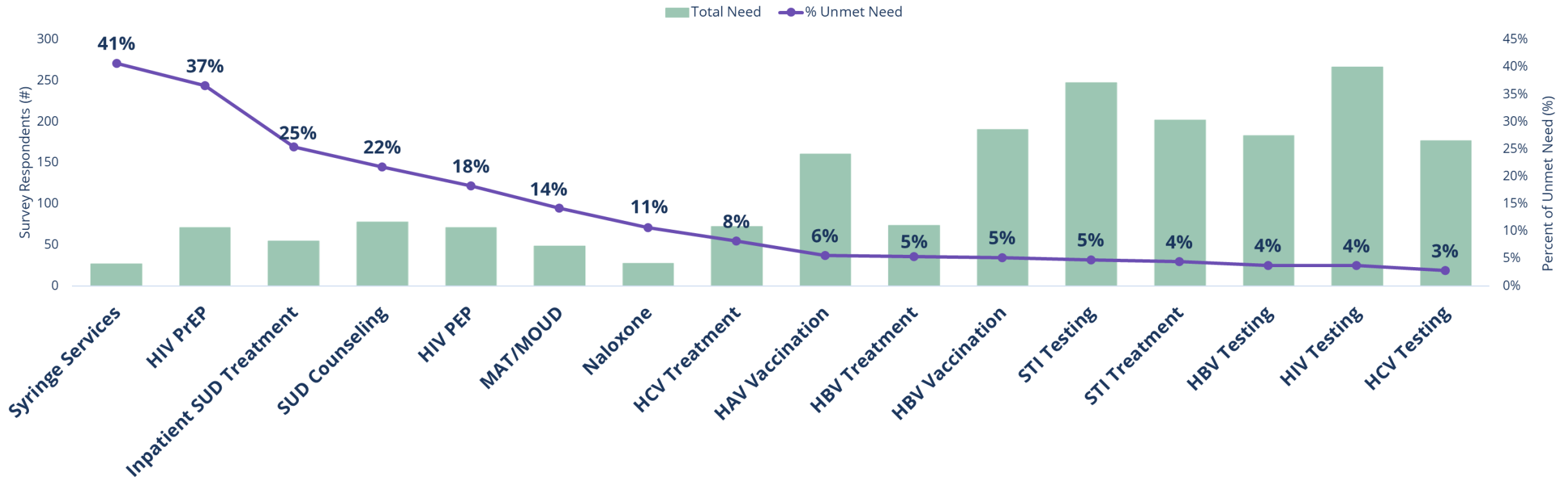
	Needed Service & Received	Needed Service & Not Received	Did Not Need Service
HIV testing services	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIV PrEP (Pre-exposure prophylaxis)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
HIV PEP (Post-exposure prophylaxis)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Sexually transmitted infection testing	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Anytime a client selects “**Needed Service & Not Received**” there was a follow-up question about their barriers to receiving that service



Statewide Syndemic Needs Assessment

Syndemic Service Need & Unmet Need
Among Nashville TGA Consumer Respondents (n=499)



Statewide Syndemic Needs Assessment

37% indicated a gap in service access for HIV PrEP

Among those who indicated HIV PrEP as an unmet need, top barriers included:

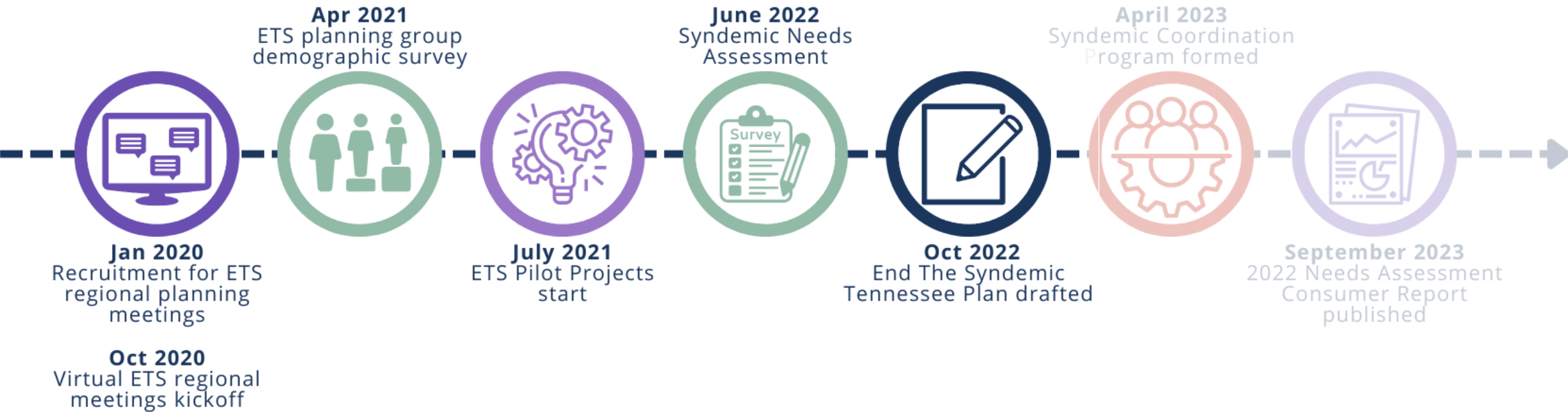
- Not knowing where to get PrEP
- Unreliable transportation
- Concerns about the cost
- No health insurance
- Privacy concerns

Additional barriers cited:

- Didn't know what PrEP was
- Unsure about PrEP use
- Providers not comfortable prescribing PrEP

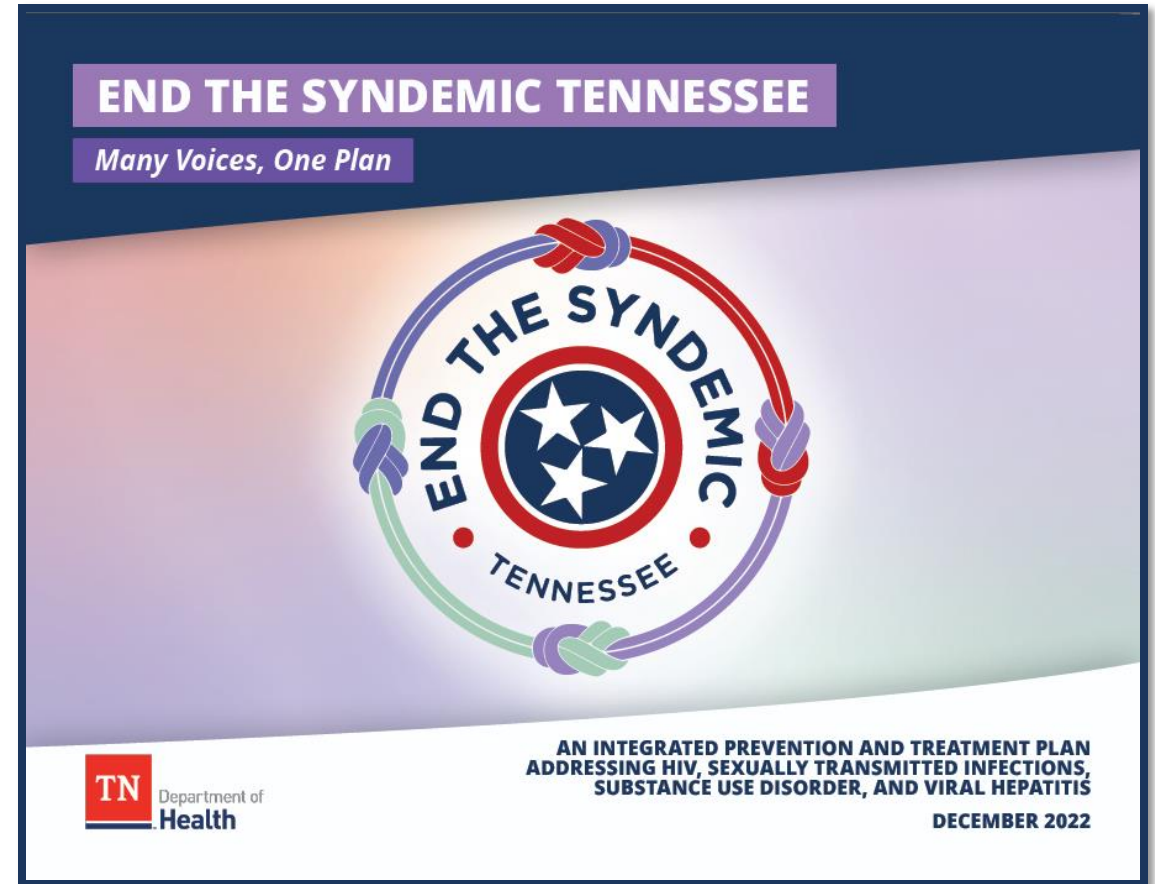


Community Engagement Process

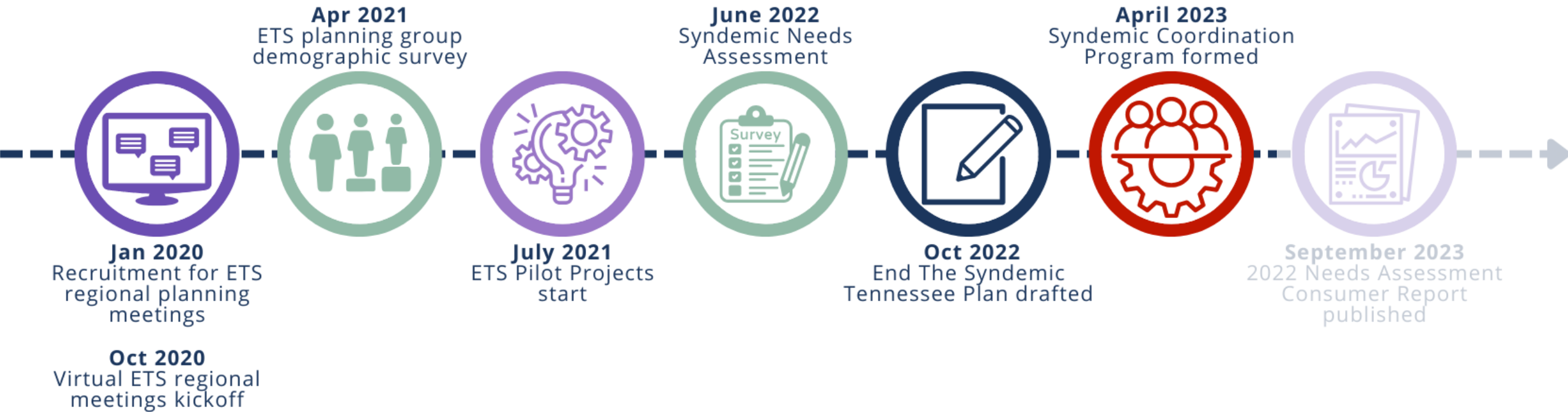


Drafting the ETS Strategic Plan

1. Internal Workgroup Meetings
2. Regional Planning Meetings
3. Syndemic Needs Assessment
4. Federal Strategic Plans
5. Local Strategic Plans
6. Federal Planning Guidance
7. Secondary Research
8. Syndemic Pilot Projects



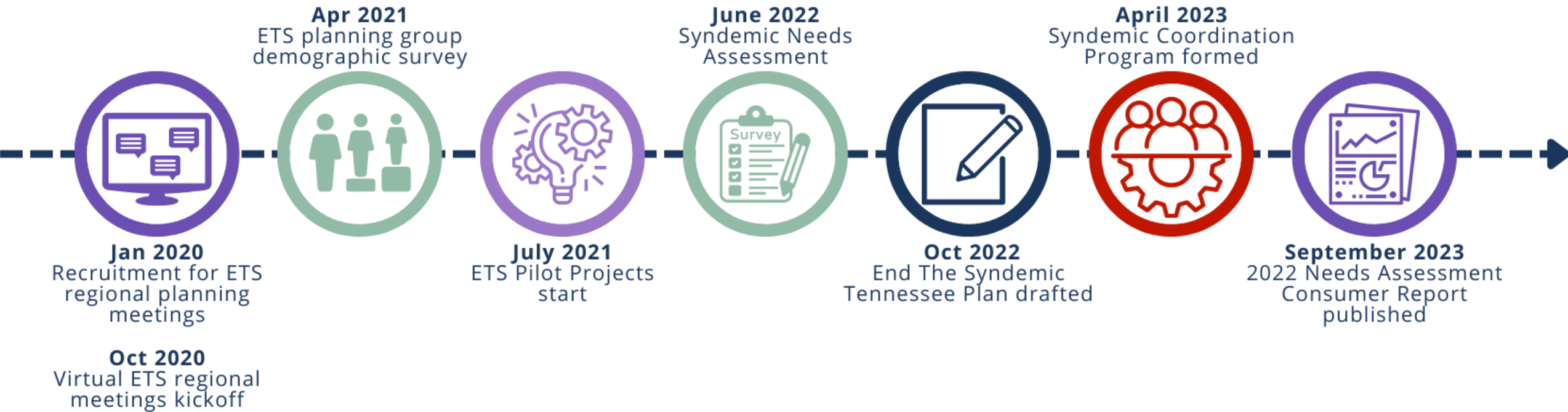
Community Engagement Process



The Syndemic Coordination Program



Community Engagement Process



Statewide Syndemic Needs Assessment

Key Findings

TN Syndemic Needs Assessment



Acknowledgements

Thank you to the 5 ETS pilot projects and their staff who worked diligently on a new endeavor to better serve Tennesseans!

- Cempa STEP TN
- Meharry Medical College
- A Betor Way
- Cherokee Health Systems
- Children & Family Services

A special thank you to our partners who helped make Syndemic efforts a reality in TN.

- TDH HIV Prevention Program who funded the ETS projects
- Viral Hepatitis Program and our partners at TDMHSAS who provided in-kind supplies to the ETS Pilot Projects.

