



GETTING  
TO ZERO  
ILLINOIS

## 2019 Focus Areas

### **Strengthen peer workforce**

Address institutional barriers that prohibit hiring and advancement of peers and increase the number of peers who work for a living wage at all levels of organizations in the health care, public health and community-based HIV sectors. Efforts must focus on elevating Black and Latino/Latinx gay, bisexual, and other MSM; cisgender Black heterosexual women; people of transgender experience; and older adults to leadership positions. (Workforce Strategy 6)

### **Expand HIV testing**

Expand health care-based, routine HIV screening tests by 25%. (Health Care Access Strategy 10)

### **Increase PrEP linkages**

Increase the percentage of people vulnerable to HIV who are linked to a PrEP prescriber from approximately 21% (~6,500 people) to 50% (~15,000 people). Increase the percentage of people vulnerable to HIV who access PrEP related medical care from 21% (~6,500 people) to 50% (~15,000 people). Ensure that 80% (~12,000) of people vulnerable to HIV who are accessing PrEP-related medical care are prescribed PrEP. (Health Care Access Strategies 13, 15, 17)

### **Deepen cultural humility**

Ensure priority communities have access to culturally, linguistically and medically appropriate care and supportive services by creating and integrating standards of equity into existing organizational policies and practices. (Health Equity Strategy 45)

### **Root interventions in evidence-based research**

Ensure that the development and implementation of behavioral and clinical interventions for communities experiencing disparities are aligned with root cause analysis findings and are evidence-based. (Health Equity Strategy 47)

### **Build social communities**

Decrease loneliness and isolation among priority communities, especially among people living with HIV who are aging and long-term survivors (Health Equity Strategy 59)

## Integrate health care programs

Integrate GTZ-IL goals, strategies and action steps into the priorities of state programs outside IDPH (such as Illinois Medicaid) that specifically support people living with or vulnerable to HIV as well as state programs that are not HIV-specific (such as Department of Aging). (Efficiency Among Government Agencies Strategy 63)

## Improve STI screening

Ensure people vulnerable to HIV, with an emphasis on gay, bisexual and other MSM and transgender women of color, are screened for HIV, syphilis, chlamydia and gonorrhea. Ensure all people vulnerable to HIV who are diagnosed with syphilis and/or rectal gonorrhea are linked to PrEP services and counseled about the availability of PEP STI screening for HIV vulnerable pops and STI+ refer for PrEP and PEP. (Linked Conditions Strategies 67 and 70)

## Assess and monitor our goals

Assess progress of GTZ-IL's goals by developing a system to allow for monitoring and dissemination of indicators. (Surveillance Strategy 76)

## Boost ARV usage

Ensure that 80% (~26,000) of people living with HIV who are accessing HIV-related medical care are prescribed ARV medications. (Health Care Access Strategy 16)

