



GETTING TO ZERO: SCALING-UP HEALTH DEPARTMENT HIV STRATEGIES FOR GAY MEN/MSM

In 2010, the National Alliance of State and Territorial AIDS Directors (NASTAD) and the National Coalition of STD Directors (NCSD) released [Statement of Urgency: Crisis Among Gay Men](#), calling on members to examine existing programs and the allocation of resources reaching gay men and other men who have sex with men (MSM). Both organizations pledged to advocate for targeted resources and the development of new and innovative partnerships to ensure holistic policies that impact the lives of gay men/MSM.

Since 2010, much has changed on the HIV/AIDS and STD policy/program front (e.g., the release of the National HIV/AIDS Strategy specifically calling for a concerted response to the epidemic among gay and bisexual men; the Centers for Disease Control and Prevention's focus on High Impact Prevention activities; emerging and efficacious biomedical prevention tools, the Gardner Treatment Cascade, etc.), as well as expanding access to health care and prevention services in the U.S. health system via the Patient Protection and Affordable Care Act.

NASTAD and NCSD members believe that it is more important than ever to mount a focused and strategic response to reduce the high rates of HIV and STDs among gay men in the U.S. They believe that achieving an AIDS-free generation rests on our collective ability to adopt meaningful programmatic strategies and policies that reduce rates of HIV and STDs among gay men of all races and ethnicities as well as address the structural and systems-level factors that contribute to elevated risk and vulnerability. These strategies must align with science, be grounded in human rights and acknowledge the diversity that exists among gay men/MSM across race/ethnicity, age and geographic boundaries.

NASTAD and NCSD members also recognize the daunting, yet achievable, task of calling out and remedying the pervasive stigma that exists in public health practice and within communities. In fact, an ideal service platform would allow gay men the ability to access risk-responsive and comprehensive sexual health services (including the use of proper screening devices/methods) in any setting they elect to receive services.

NASTAD and NCSD reaffirm that the health and wellness of gay men/MSM of all races and ethnicities is an urgent concern requiring innovative responses and coordination beyond funding streams and across systems of prevention and health care access. Prevention resources for gay men/MSM should mirror the HIV epidemiologic profile in each state, and engagement between gay community stakeholders and the health department must remain paramount.

In reaffirming the Statement of Urgency, NASTAD and NCSD members support the full recommendations of its Gay Men's Health Equity Work Group and commit to:

1. **Promote health strategies that support gay men's health equity.** Health departments will work to promote testing, timely linkage to care, retention in medical care, initial and ongoing partner services, and achieve and sustain undetectable HIV viral loads. This will be achieved through increased linkage to and retention in care, and increased coordination of HIV testing efforts aimed at gay men/MSM.
2. **Build and further strengthen the capacity of state and local health departments to address the HIV and STD crisis among gay men/MSM.** Health departments will work to identify and allocate dedicated resources to address the priority health needs of gay men/MSM, cultural competency training, and workforce development. Health departments will work to recruit and retain staff with expertise in working with gay men/MSM of all races and ethnicities. In addition, our members will work with state and local planning bodies, coalitions, and key stakeholders under the auspices of the health department to actively engage gay men/MSM.
3. **Create an integrated and coordinated response across communicable disease areas that disproportionately impact gay men/MSM.** Health departments will continue efforts to promote primary prevention methods including correct and consistent condom use. Health departments will ensure coordinated prevention and screening services for HIV, syphilis, Chlamydia, Gonorrhea and hepatitis B and C.
4. **Enhance mental health and substance abuse service capacities to respond to the unique needs of gay men/MSM.** Health departments will define and promote holistic approaches across the prevention and health care continuum. Health departments will work to identify strategic partnerships with state and community stakeholders and facilitate relationships with clinicians, federally qualified health centers/community health centers and other health care providers.
5. **Improve data collection systems that provide an enhanced understanding of the health, social, and structural realities of gay men/MSM.** A greater emphasis will be placed on collecting data on gender identity, immigrant/refugee status, income level, insurance coverage status, and health issues such as history of mental illness, trauma, and substance abuse.
6. **Implement comprehensive strategies and initiate advocacy efforts to better address the epidemic among gay men/MSM.** Health departments will work to assess and adopt policies that support the lives of gay men/MSM (e.g., marriage equality, domestic partner benefits, and employment discrimination laws), as well as construct funding announcements that require training of community-based organizations to address issues that impact the community. Health departments will work to effectively utilize the Internet to reach gay men and address the barriers to reaching these men on other virtual platforms that they frequent.

This statement demonstrates the renewed and unyielding commitment of NASTAD and NCSD to significantly reduce HIV infections among gay men/MSM, and to engage all stakeholders in that effort.

Approved by NASTAD's Executive Committee on September 20, 2012. Approved by NCSD on September 20, 2012.