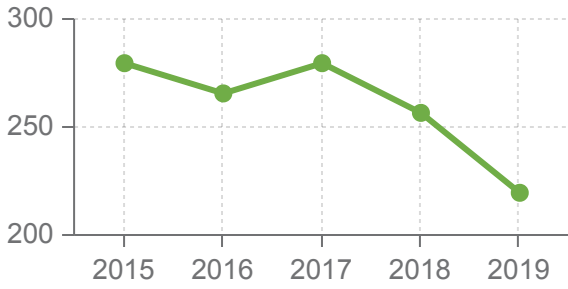


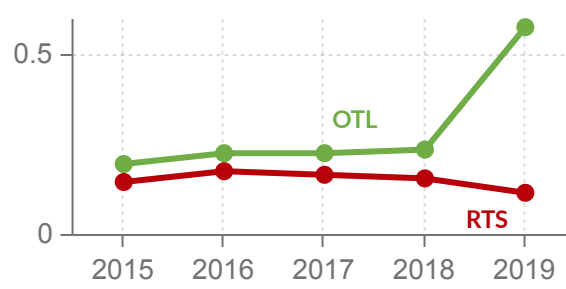
Connecticut Statewide Progress Indicators: How Are We Doing in Ending the HIV Epidemic?

Indicator	Description	2015	2021 Goal	As of 2019
1. New HIV Diagnoses	Number of people newly diagnosed with HIV	280	218	220
2. HIV Testing	Percent of positive HIV tests from: • state-funded routine testing programs	0.15%	0.20%	0.12%
	• state-funded targeted testing programs	0.20%	0.30%	0.58%
3. Viral Load Suppression	Percent of PLWH in care who are virally suppressed (<200 copies/mL)	87%	90%	92%
4. Linkage to Care	Percent of newly diagnosed who attended a routine HIV care visit within 1 month of diagnosis	87%	95%	87%
5. Retention in Care	Percent of PLWH in care who had at least one care visit every 6 months	68%	70%	60%
6. Late Testers	Percent of people presenting with or diagnosed with AIDS within 3 months of their initial HIV diagnosis	28%	25%	28%
7. Contact Tracing / Partner Services	Indicator to be determined (TBD)	TBD	TBD	TBD
8. Housing Stability	Percent of Ryan White clients who were stably housed.	82%	85%	81%
9. Syringe Services Programs	Number of clients served	3,643	4,000	4,428
	Number of syringes distributed	369,665	500,000	1.1 M
10. Health Disparities	Reduce the annual number of new HIV diagnoses among: MSM, Black men and women, and Latino men and women	--	15% decrease	-15% (overall)
11. PrEP	PrEP-to-Need Ratio: The number of people taking PrEP divided by the number of people newly diagnosed with HIV.	3.7	15.0	9.5 (2018)
12. Sexually Transmitted Infections: Syphilis	Total number of syphilis cases	N/A	For 2025 Plan	TBD
	Number of syphilis cases investigated			
	Number educated and referred to PrEP within 30 days after syphilis diagnosis			

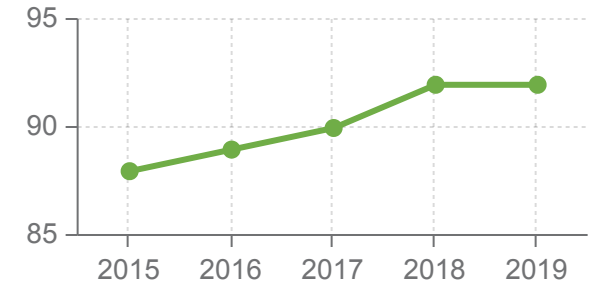
Number of newly diagnosed



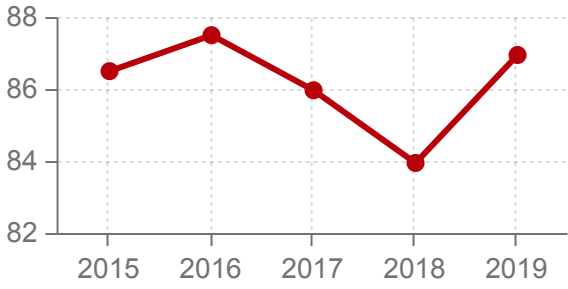
Seropositivity rate



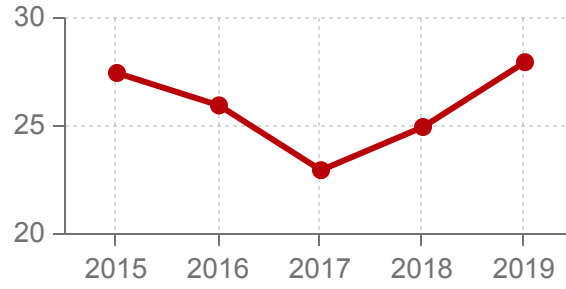
Suppression percentage



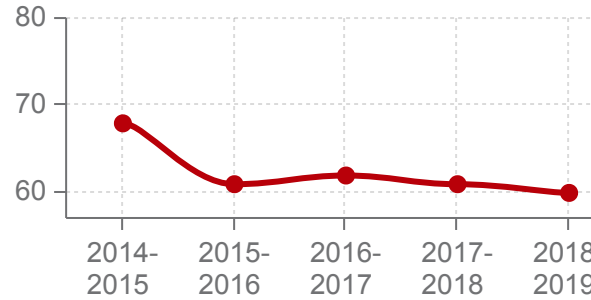
Percent linked to care



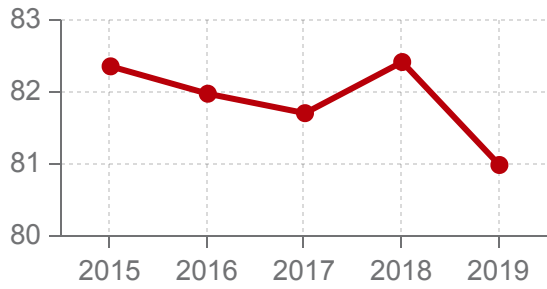
Percent late testers



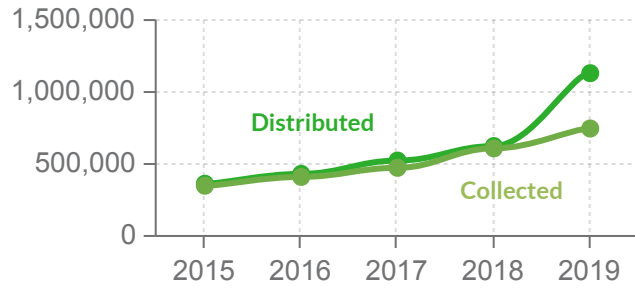
Percent retained in care



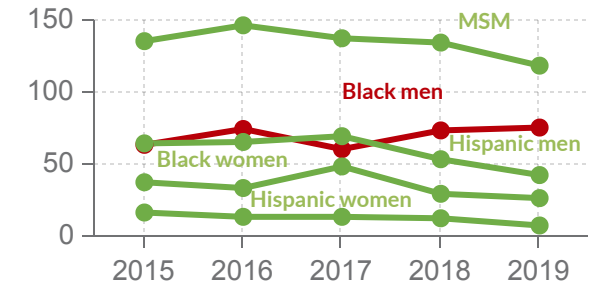
Percent stably housed



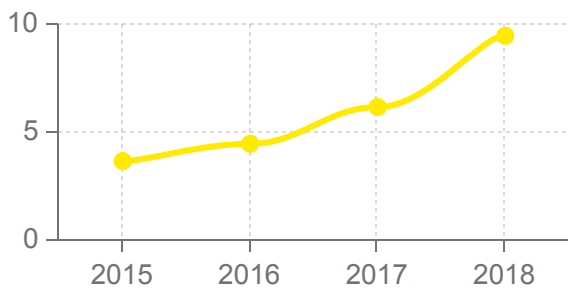
Syringe exchange



Health Disparities



PrEP -to-need ratio



Handout 2: Monitoring Connecticut's 5-Year Comprehensive HIV Prevention and Care Plan

DRAFT

Overall Approach:

- **Compiling the Information.** Start with the process to update the Plan used in 2017 – with requests to each funder with a template that follows the Plan structure (see Page 3 for the 2017 Plan Update Tool). Revise process as needed based on feedback from partners.
- **Timing.** Ideally, the CHPC would receive updates twice a year. This may be challenging given the number of partners who need to submit information. For example, it may make sense to update part of Plan in the spring (e.g., Goals 1 and 2) and the remainder of the Plan in the fall (e.g., Goals 3 and 4).
- **Assessing Progress.** The CHPC and HIV Funders Group can use the Plan Updates to assess progress and identify mid-course corrections and adjustments in activities. Page 2 shows an example of a Plan Update, drawing on the 2017-21 Plan structure. The last column – Overall Progress & Next Steps – would be completed after discussions with the CHPC and HIV Funders Group.

Handout 2: Monitoring Connecticut’s 5-Year Comprehensive HIV Prevention and Care Plan DRAFT

Plan Update Template with SAMPLE “Progress & Next Steps”

Goal 1. Reduce New Infections			
Objective 1.1 Decrease the number of new infections by 25%, from 291 in 2014 to 218 in 2021.			
Focus Area	Priority Activities	Outcomes as of XXX Date	Overall Progress & Next Steps
A. Strengthen statewide communication platform to deliver prevention and health promotion messaging	<p>Marketing & Communications</p> <ul style="list-style-type: none"> ○ Position www.positivepreventionct.org as a primary gateway for information to the HIV community & the general public ○ Use social media channels and marketing campaigns to reach priority populations & into geographic hotspots <p>Outreach, Engagement & Training</p> <ul style="list-style-type: none"> ○ Train and deploy PLWH and peers on social media and outreach to engage priority populations in focus groups, community listening sessions; message development; and social marketing campaigns ○ Provide tools and coordinate digital event calendars for prevention and risk reduction events ○ Increase involvement of prevention stakeholders with the CHPC committees and statewide plan 	<ul style="list-style-type: none"> ● XXX website views ● XXX likes ● XXX trained ● X social marketing campaigns in geographic hot spots ● XX peers trained ● XX listening sessions ● XX venues engaged (e.g., schools, churches, summer programs) 	<p>Substantial Progress</p> <ul style="list-style-type: none"> ● Engage MAC members to support Positive Prevention development and outreach ● Engage NASTAD to identify additional trainings and tools
B. Increase access to PrEP and n-PEP	<p>Marketing & Communications</p> <ul style="list-style-type: none"> ○ Use marketing and social media campaigns to increase awareness of PrEP, benefits of PrEP and how to access PrEP ○ Publish a digital resource inventory of PrEP providers & resources <p>Outreach, Engagement & Training</p> <ul style="list-style-type: none"> ○ Train HIV program staff, other peers and staff – including PLWH about PrEP, potential PrEP candidates, and PrEP services and supports <p>Service Delivery Improvements</p> <ul style="list-style-type: none"> ○ Review and refine clinical delivery systems to offer and deliver PrEP; start with priority populations (e.g., MSM, transgender) ○ Identify opportunities to apply non-clinical support services for individuals on PrEP to improve risk reduction, facilitate medication adherence and retain in care 	<ul style="list-style-type: none"> ● Digital resource inventory completed as of XX ● X social media campaigns ● XX peers and staff trained to conduct outreach; # trained to administer & support PrEP ● XX programs offering PrEP ● Implementation of PrEP Navigation program as of XXX ● Development of PrEP Navigation database to measure quality of navigation services 	<p>Some Progress</p> <ul style="list-style-type: none"> ● Implement demonstration projects to increase PrEP uptake among YMSM of color ● DPH develop on-demand webinars for program staff, agencies infuse PrEP into orientation for new staff

Handout 2: Monitoring Connecticut's 5-Year Comprehensive HIV Prevention and Care Plan

DRAFT

2017 Plan Update Tool:

Please review the following goals and objectives from our 2017-2021 Integrated HIV Prevention and Care Plan and share information on relevant projects (ongoing or accomplished this year) in the blank space. This tool provides you with the opportunity to share **new** and **innovative** updates. **You are not expected to respond to every section.**

Goal 1. Reduce new infections

Obj. 1.1 Decrease the number of new infections by 25%, from 291 in 2014 to 218 in 2021.

Examples: conducting outreach; community engagement; social marketing; promoting treatment as prevention

Obj. 1.2 Increase # of tests through CT-funded initiatives (routine testing, OTL) from 13,579 in 2014 to 15,000 in 2021.

Examples: implementing advanced testing technology; targeting high risk populations; expanding OTL services

Goal 2. Increase access to care and improve health outcomes for PLWH.

Obj. 2.1 Increase linkage to HIV care in newly diagnosed persons (13+) from 91% in 2014 to 95% in 2021.

Examples: training staff on linkage to care; addressing care barriers; infusing peer-driven model components

Obj. 2.2 Increase viral load suppression among persons in HIV medical care from 86% (2014) to 90% (2021).

Examples: strengthening MCM program; sharing program data to inform funding discussions; promoting PrEP

Goal 3. Reduce HIV-related health disparities and health inequities.

Obj. 3.1 Reduce new HIV diagnoses by 15% by 2021 in the following groups: men who have sex with men (MSM), and Black/ African-American/ Latino men and women.

Examples: sponsor conversations on health equity; implement peer-driven models; target vulnerable populations

Obj. 3.2 Increase involvement in social justice initiatives and partnerships that reduce viral loads to the point of suppression (objective 2.2) and reduce health disparities in new diagnoses (objective 3.1).

Examples: Partner in supportive service initiatives (e.g., mental health, aging); participate in state campaign to end HIV

Handout 2: Monitoring Connecticut's 5-Year Comprehensive HIV Prevention and Care Plan *DRAFT*

Goal 4. Reduce HIV-related health disparities and health inequities.

Obj. 4.1 Build capacity of CHPC to develop, advance planning efforts and diffuse, sustain effective models.

Examples: Utilize communication platform; adjust structure to support Plan; update indicators; engage community

Obj. 4.2 Increase capacity of HIV stakeholders and partners to implement the Statewide HIV Plan.

Examples: engage local health department leaders; develop annual work plan; refresh epi data; share information

Please share any new, relevant, and/or compelling quantitative data or program outcomes.

Please share any new and/or noteworthy discussions or plans for the future not addressed above.

Handout 3

HIV Stigma Scale (HSS)

Rate each of the statements below using the following scale.

Evalué cada una de las declaraciones aquí debajo usando la siguiente escala.

1= Strongly disagree / Muy En Desacuerdo

2= Disagree / En Desacuerdo

3= Agree De acuerdo

4= Strongly agree / Muy de acuerdo

Statement / Declaracion:

	Strongly disagree Muy en Desacuerdo	Disagree En Desacuerdo	Agree De Acuerdo	Strongly agree Muy de Acuerdo
1. In many areas of my life, no one knows I have HIV. En muchas áreas de mi vida, nadie sabe que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I feel guilty because I have HIV. Me siento culpable porque tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. People's attitudes make me feel worse about myself. Las actitudes de las personas me hacen sentir aún peor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Telling someone I have HIV is risky. El decirle a alguien que tengo HIV es riesgoso.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. People with HIV lose jobs when employers learn about their HIV status. Las personas con HIV pierden sus empleos si sus jefes se enteran de su estado de HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I work hard to keep my HIV status a secret. Yo trabajo fuertemente para mantener mi estado de HIV un secreto.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I feel I'm not as good as others because I have HIV. Siento que no soy tan bueno (a) como los demás por que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I never feel ashamed of having HIV. Nunca me siento avergonzado de tener HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. People with HIV are treated like outcasts. A la gente con HIV se les trata como personas descartadas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Most people believe a person who has HIV is dirty. La mayoría de las personas creen que una persona que tiene HIV es sucia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. It is easier to avoid friendships than to worry about telling people about my HIV status. Es más fácil evitar amistades que preocuparse de decirle a la gente sobre mi estado de HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Handout 3

	Strongly disagree Muy en Desacuerdo	Disagree En Desacuerdo	Agree De Acuerdo	Strongly agree Muy de Acuerdo
12. Having HIV makes me feel unclean. El tener HIV me hace sentir sucio(a).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I feel set apart, isolated from the rest of the world. Me siento tan apartado(a), aislado(a) del resto del mundo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Most people think a person with HIV is disgusting. La mayoría de la gente piensa que una persona con HIV es repugnante.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Having HIV makes me feel I'm a bad person. El tener HIV me hace sentir como una mala persona.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Most people with HIV are rejected when others learn about their status. La mayoría de las personas con HIV son rechazadas cuando otros se enteran sobre su estado de HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. I am very careful with whom I tell that I have HIV. Yo tengo mucho cuidado a quien le cuento que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Some people who know about my HIV status have grown more distant. Algunas personas que conocen sobre mi estado de HIV se han alejado.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I worry about people discriminating against me. Yo me preocupo sobre la gente que me discrimine.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Most people are uncomfortable around someone with HIV. La mayoría de las personas se sienten incómodas alrededor de alguien con HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I never feel I have to hide the fact that I have HIV. Yo nunca siento que tengo que esconder el hecho de que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I worry that people may judge me when they learn about my HIV status. Me preocupa que la gente me juzgue cuando se enteren de mi estado de HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Having HIV in my body is disgusting to me. El tener HIV dentro de mi cuerpo me repugna.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I am hurt by how people react when they learn I have HIV. Me lastima como reacciona la gente cuando se enteran que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I worry people who know I have HIV will tell others. Me preocupa que la gente que sabe que tengo HIV le pueda contar a otros.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I regret having told some people that I have HIV. Me arrepiento de haberle contando a algunas personas que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Handout 3

	Strongly disagree Muy en Desacuerdo	Disagree En Desacuerdo	Agree De Acuerdo	Strongly agree Muy de Acuerdo
27. As a rule, telling others has been a mistake. Como regla, el contarle a otros ha sido un error.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. People avoid touching me if they know I have HIV. La gente evita tocarme si saben que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. People I care about stopped calling me after learning that I have HIV. La gente que me importa dejaron de llamarme al enterarse que yo tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Some people told me that HIV is what I deserved for how I have lived. Algunas personas me han dicho que el tener HIV es lo que me merezco por la manera como he vivido.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. Some people fear that they'll be rejected because of my HIV. Algunas personas temen ser rechazadas porque tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. People don't want me around their children once they know I have HIV. La gente no me quiere alrededor de sus hijos una vez que se enteran que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. People have physically backed away from me when they know I have HIV. Hay personas que físicamente se han retirado de mi cuando saben que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Some people act as though it's my fault I have HIV. Algunas personas actúan como si fuera mi culpa que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Some people with HIV stopped socializing with some other people due to their reactions to them. Algunas personas con HIV pararon de socializar con otra gente debido a sus reacciones.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. I have lost friends by telling them I have HIV. Yo he perdido amistades al decirles que tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. I have told people close to me to keep my HIV secret. Yo le he dicho a las personas cercanas a mi que mantengan mi estado de HIV un secreto.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. People who know tend to ignore my good points. La gente que sabe tiende a ignorar mis buenas cualidades.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. People seem afraid of me because I have HIV. La gente parece tenerme miedo porque tengo HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. Knowing, they look for flaws in your character. Al saber, ellos buscan fallas en el carácter de uno.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12-item version of HIV Stigma Scale

Sub-Scales and Questions

Personalized stigma
28. Some people avoid touching me once they know I have HIV
29. People I care about stopped calling after learning I have HIV
36. I have lost friends by telling them I have HIV
Disclosure concerns
4. Telling someone I have HIV is risky
6. I work hard to keep my HIV a secret
17. I am very careful who I tell that I have HIV
Concerns about public attitudes
9. People with HIV are treated like outcasts
10. Most people believe a person who has HIV is dirty
20. Most people are uncomfortable around someone with HIV
Negative self-image
2. I feel guilty because I have HIV
3. People's attitudes about HIV make me feel worse about myself
7. I feel I'm not as good a person as others because I have HIV

For background on analyses, see:

- <https://hqlo.biomedcentral.com/articles/10.1186/s12955-017-0691-z/tables/4>
- <https://hqlo.biomedcentral.com/articles/10.1186/s12955-017-0691-z>