Birmingham UNITE;
2009
“Ending AIDS in Alabama”
Community Dialogue
January 31, 2013
Goals:
1. Improve health outcomes;
2. Enhance prevention, treatment and research opportunities;
3. Improve social and economic justice;
4. Foster community collaboration to achieve parity, inclusion and representation; and
5. Identify, evaluate, and apply for alternative sources of funding to maximize long-term sustainability.

Data to Care Meeting; JCDH, August 2014
The Division of HIV/AIDS Prevention strongly encourages state and local health departments to use HIV case surveillance data to improve the continuum of care in their communities, including the use of individual-level data to offer linkage and re-engagement to care services when appropriate. The Data to Care toolkit is one resource to assist programs in moving forward with these activities. The Division of HIV/AIDS Prevention will continue to provide resources and technical assistance to assist you in these efforts.

Sincerely,

Janet C. Cleveland
Deputy Director for Prevention Programs
Division of HIV/AIDS Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Centers for Disease Control and Prevention

Amy Lansky, Ph.D., MPH
Deputy Director for Surveillance, Epidemiology and Laboratory Sciences
Division of HIV/AIDS Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Centers for Disease Control and Prevention

Geographic Variability in Time from HIV Diagnosis to Viral Suppression in Alabama

Richard P Rogers,1 Tian Tang,2 D Scott Batey,3 Anthony Merriweather,1 H Irene Hall,4 Michael J Mugavero3

1Alabama Department of Public Health, 2ICF, 3University of Alabama at Birmingham Center for AIDS Research, 4Centers for Disease Control and Prevention, Division of HIV/AIDS Prevention
Alabama Regional Quality Group

“The Alabama Regional Quality Group exists to ensure that those living with HIV/AIDS in Alabama receive quality healthcare through the collaboration of healthcare partners throughout the state. This collaboration aims to continuously improve the quality of HIV care consistent with recognized national standards & current HIV research.”

Slide courtesy of Ashley Tarrant, MAO
Overall
New or Re-engaging
Detectable viral load
CD4<350

10% 8% 6% 4% 2% 0%
3.0% 7.6% 5.5% 5.1%

Overall Black/AA Female Medicare Medicaid

67% 66% 65% 65%
67% 66% 65% 66%
72% 70% 70% 74%
72% 70% 70% 71%

SOC Intervention

Gardner LI et al. Clin Infect Dis 2014;59; Shrestha RK et al. JAIDS 2015; 68
No Show Percentage Q1-2017

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<th>30.0%</th>
<th>18.0%</th>
<th>32.0%</th>
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Slide courtesy of Ashley Tarrant, MAO
HIV front line providers meeting, BAO, Dec 2015 and Nov 2016, Birmingham, AL