Exploring the Potential of Pharmacies to Increase Access to HIV Testing

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In 2022, an estimated 31,800 people were diagnosed with HIV in the United States. Although HIV incidence has declined by 12% from 2018 to 2022, many people are still undiagnosed due to limited access to HIV testing resources. This has resulted in people with HIV who are unaware of their status going without treatment and wider health inequities among racial, sexual, and gender minority communities.

Today, NIAID joins our community and federal partners to observe the 29th National HIV Testing Day themed “Level up your self-love: check your status.” This day is intended to empower people to access testing, learn their status, and get linked to HIV prevention or treatment services from which they could benefit, depending on their results.

HIV testing is a pillar of Ending the HIV Epidemic (EHE), an initiative led by the U.S. Department of Health and Human Services which launched in 2019 to reduce new HIV diagnoses and develop research methods to aid the HIV response in prioritized geographic areas. Effective implementation of testing resources can improve the health outcomes of people with HIV and people in high HIV incidence communities, while reducing further HIV transmission.

To improve testing access for people in urban and rural areas, research highlights the critical role pharmacists can play in HIV testing and related services, but more research is needed to define effective implementation models. The proximity of pharmacy locations and the flexibility of service hours demonstrate that pharmacists should be engaged as partners in EHE efforts who provide accessible and non-stigmatizing HIV care.

Specifically, pharmacists can screen and diagnose people in a timely manner through their partnership with health departments and community organizations, effectively support people using antiretroviral therapy (ART) through medication counseling and prevent new HIV transmissions with connections to pre-exposure prophylaxis (PrEP) and syringe service programs through collaborative efforts with health providers.

Building on successful models of pharmacy-based testing, prevention and care for influenza and

COVID-19 in the United States, 12 of the 47 current short-term NIH-funded EHE projects are identifying innovative models to leverage pharmacies for HIV testing, prevention—including HIV PrEP—and care through partnerships between academic institutions and state and local leaders. These projects are implemented through the Centers for AIDS Research (CFAR) and AIDS Research Centers (ARC), which conduct research in geographic areas that are disproportionately affected by HIV, and are often based in these communities.

Building on this momentum, NIAID has partnered with other NIH Institutes and offices to offer a new research funding opportunity on pharmacy and pharmacist-delivered HIV services which will support grants to test promising concepts emerging from these short projects and other efforts. The goal of this research is to generate evidence to guide nationwide implementation of acceptable and effective pharmacy-based models that can expand access to HIV testing and other services to communities who stand to benefit most. The outcomes from current and future NIH-funded EHE pharmacy projects are being released through scientific channels to inform policy and practice.

In addition to NIH, HHS agencies and offices participating in EHE include the Centers for Disease Control and Prevention; the Health Resources and Services Administration; the Indian Health Service; the Office of the Assistant Secretary for Health; and the Substance Abuse and Mental Health Services Administration.

To view a complete list of NIH research projects supported with EHE initiative funding, please visit the awards page.

To learn more about EHE, please visit HIV.gov.

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