

APA Official Actions

Position Statement on HIV Risk Reduction

Approved by the Board of Trustees,
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Approved by the Assembly, April 2020

“Policy documents are approved by the APA Assembly and Board of Trustees. . . These are . . . position statements that define APA official policy on specific subjects. . .” – *APA Operations Manual*

Issue:

HIV remains a major public health issue and multiple prevention strategies are essential. (1) HIV testing alone, even before or without treatment, has been shown to help people modify risk behavior and decrease transmission of the virus. (2) People with HIV infection should be started on antiretroviral treatment as soon as possible; those who have a consistently suppressed viral load have a negligible risk of transmitting HIV to their sexual partners (CDC fact sheet, 2019) (1). (3) Antiretroviral treatment, especially with consistent HIV viral suppression, greatly reduces the risk of pregnant women with HIV infection transmitting the infection to their babies. (4) People who are not HIV infected can drastically reduce their risk of acquiring HIV through the correct use of pre-exposure prophylaxis (PrEP). (5) People with a recent exposure to HIV can reduce the risk of HIV infection by rapidly seeking post-exposure prophylaxis (PEP). (6) Syringe exchange programs are an effective public health intervention that reduces the harms posed by unsafe drug use injection, including the transmission of HIV, without encouraging the use of illegal drugs. (7) Use of opioid substitution treatment and, more generally, treatment of alcohol, substance use and other mental disorders, contribute to the prevention of HIV infection. (8) Reducing intersectional stigmas (race, sexual orientation, gender identity, mental illness, substance use, etc.) and addressing the social determinants of health (homelessness, food insecurity, etc.) all play a role in HIV prevention.

Position:

1. **The APA concurs with the following CDC (Center for Disease Control) recommendations:**
 - a. **Clinicians should screen adolescents and adults ages 13 to 64 years yearly for HIV infection, understanding that some jurisdictions may have specific testing requirements to consider, e.g., age range, and opt-out vs opt-in testing. Younger adolescents and older adults who are at increased risk should also be screened. It is also recommended to screen all pregnant women for HIV, including those who present in labor whose HIV status is unknown. (2a, b)**
 - b. **People at high risk for HIV infection should be tested at least annually for HIV.**
 - c. **Pre-exposure prophylaxis (PrEP) should be considered in adolescents and adults at risk for HIV infection through sexual or injection drug use exposure. Ongoing HIV testing is needed for people on PrEP to assess whether they remain HIV negative.**
 - d. **Post exposure prophylaxis (PEP) should be offered as soon as possible within 72 hours for persons of unknown or negative HIV status who have had occupational, injection drug, or sexual exposure to HIV.**

2. Syringe exchange programs should provide on-site counseling and education about HIV and substance and alcohol use disorders, as well as referrals and improved access to comprehensive drug treatment (including 12-step and harm reduction programs), medical and reproductive care, counseling and testing for HIV and other sexually transmitted diseases and bloodborne pathogens, psychiatric and psychosocial services, and alternative methods for further reducing the harm associated with drug use.

3. Psychiatrists can help foster the success of syringe exchange programs by supporting efforts to remove government restrictions on the availability of sterile syringes specifically within the structure of organized needle exchange programs, encouraging government sponsored efforts to broaden the availability of these programs in targeted areas, providing public health education to promote safer hygiene practices among people who inject drugs, and endorsing the core strategy of increasing the availability of quality detoxification and treatment programs for all substance users.

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