Ryan White HIV/AIDS Program
AIDS Education and Training Center (AETC) Program

Annual Data Report

2024

Reporting Periods: July 2019–June 2024

HRSA
Ryan White HIV/AIDS Program

The *Ryan White HIV/AIDS Program (RWHAP) AIDS Education and Training Center (AETC) Program Annual Data Report 2024* is published by the HIV/AIDS Bureau, Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, Rockville, Maryland.

Data are presented for training events and event participants reported by RWHAP AETC Program grant recipients from July 2019 through June 2024.

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Information about the Ryan White HIV/AIDS Program: ryanwhite.hrsa.gov

Acknowledgments

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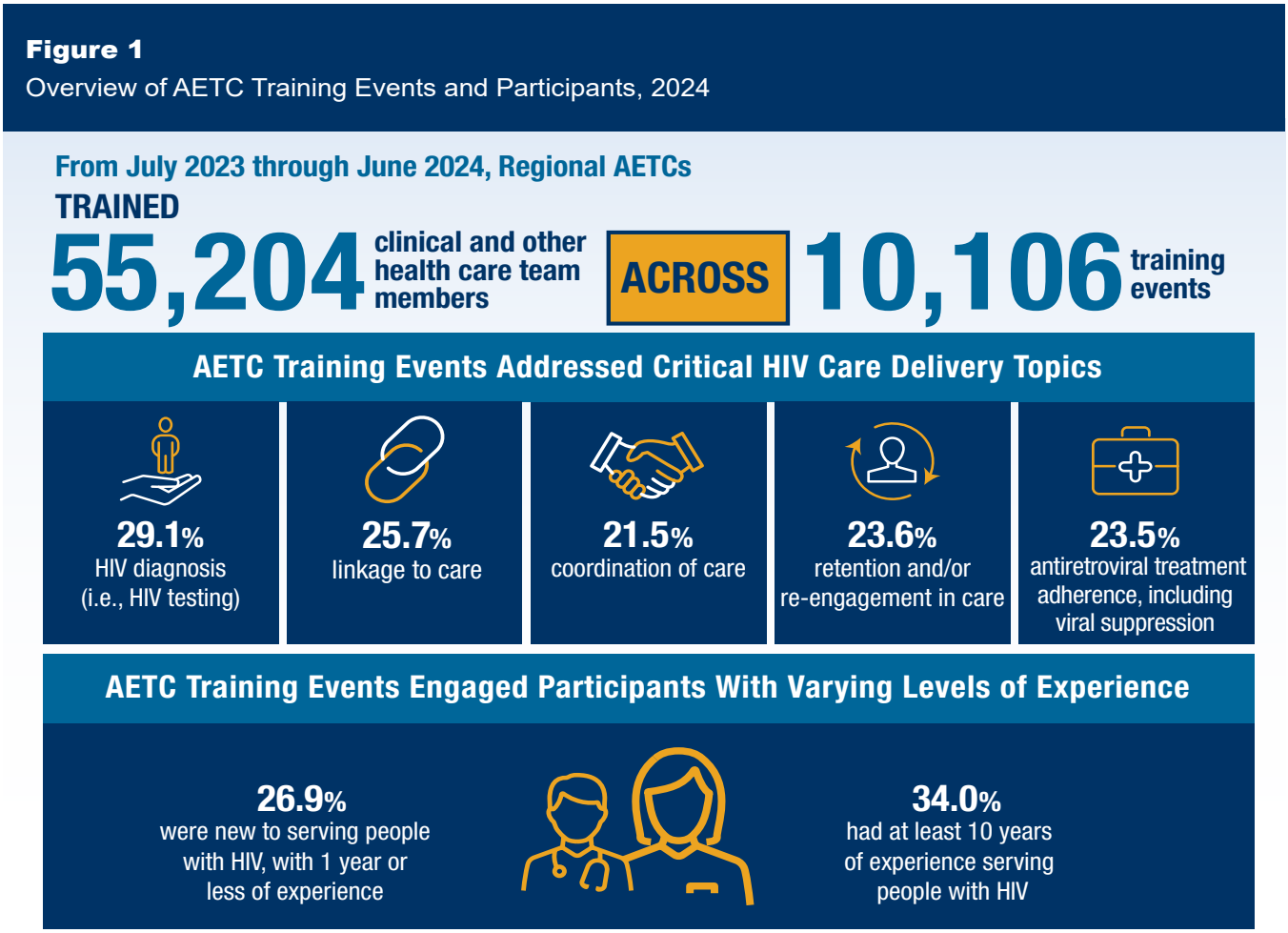
RWHAP AETC ANNUAL DATA REPORT INSIGHTS

The Ryan White HIV/AIDS Program (RWHAP) Part F AIDS Education and Training (AETC) Program is a national initiative designed to strengthen the HIV workforce by providing tailored education, clinical consultation, and technical assistance to health care providers. The purpose is to expand and strengthen the skills of the HIV health care provider workforce so that they can improve HIV care; reduce HIV transmissions; and better reach people with HIV who are undiagnosed, not in care, or not virally suppressed. This work is increasingly essential as the HIV workforce shrinks and HIV prevalence continues to increase as people with HIV live longer, healthier lives. From July 2023 through June 2024, regional AETCs collectively trained more than 55,000 HIV health care professionals through more than 10,000 training events **(Figure 1).** The regional AETCs reach providers with a range of HIV care experience. AETC training events focus on preventing HIV transmission, implementing team-based HIV care and treatment, managing co-occurring and chronic conditions, and providing whole-person care to communities disproportionately affected by HIV.

Figure 1
Overview of AETC Training Events and Participants, 2024



REPORT OVERVIEW

Refer to the full Technical Notes for additional information.

WHY does the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) produce the *AIDS Education and Training Center (AETC) Program Annual Data Report*?

- To measure progress toward expanding and strengthening the HIV health care workforce.
- To assess the numbers and characteristics of the HIV health care professionals.
- To inform the AETC Program's reach, delivery, and impact of training.

WHO is included in this report?

- HIV health care providers, other health care providers who treat people with HIV, and health care support staff who participated in regional AETC Program training events.

WHAT information is presented?

- Number of AETC training events and training participants.
- Content and topics covered in AETC training events.
- Training participant characteristics, including their professional background and role in the HIV health care workforce.
- Training participant service delivery characteristics, including years providing services and employment setting.

WHEN were the data collected?

- Five data reporting years, July 2019–June 2020 through July 2023–June 2024.

HOW is information reported to HRSA HAB?

- Each reporting year, regional AETCs use standardized forms to collect training event and training participant data for every training event.
- The eight regional AETCs submit training event and training participant data to HRSA through the Electronic Handbooks (or EHBs) system.

REPORT SUMMARY

The Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB) administers the AIDS Education and Training Center (AETC) Program as a component of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) under Section 2692 of the Public Health Service Act 42 U.S.C. 300ff-111(a), known as the Ryan White HIV/AIDS Program (RWHAP). RWHAP Part F supports [1]:

- The eight *regional AETCs*, which train health care providers to counsel, diagnose, treat, and medically manage people with HIV and help prevent HIV transmission.
- The *National AETC Support Center (NASC)*, which serves as the coordinator and supports the dissemination of the work of the AETCs [2].
- The *National Clinician Consultation Center (NCCC)*, which provides timely and appropriate responses to clinical questions related to HIV infection and other infectious diseases and comorbidities [3].
- The *National HIV Curriculum (NHC)*, which offers free online HIV continuing education for novice to expert health professionals, students, and faculty [4].
- The *Projects on Integrating the National HIV Curriculum e-Learning Platform into Health Care Professions Programs*, which support the integration of the National HIV Curriculum e-Learning platform into the education and training curricula of health professions, especially medical, nursing, and pharmacy programs.
- The *HIV Clinical Training Tracks in Primary Care Residency Programs*, which develop and launch HIV clinical training tracks at existing primary care residency programs.

The regional AETCs work to (1) increase the size and strengthen the skills of the HIV clinical workforce in the United States; (2) improve outcomes along the HIV care continuum, including diagnosis, linkage to care, retention in care, and viral suppression; and (3) decrease HIV transmission and, ultimately, reduce HIV incidence by training the frontline workforce.

By statute, the AETC Program is required to use Minority AIDS Initiative funds for the regional AETCs to expand the number of health care professionals who have treatment expertise and knowledge about the most appropriate standards of HIV-related treatments and medical care for racial and ethnic minority adults, adolescents, and children with HIV.[1]

The primary participants for trainings conducted by the regional AETCs are novice and low-volume HIV treatment providers, allied health professionals, and health care support staff who provide services to people with HIV and those with risk behaviors for HIV acquisition. Trainings also focus on prescribers (e.g., physicians, physician assistants, nurse practitioners) and other health care professionals (e.g., dentists, psychiatrists, pharmacists).

The AETC Program's capacity-building support of the HIV clinical workforce aligns with national HIV goals; the Ending the HIV Epidemic in the U.S. (EHE) initiative to reduce new HIV infections [5]; and Ryan White Program Moving Forward, a framework that calls on the HIV community to continue to care for RWHAP clients while prioritizing efforts to reach people with HIV who are out of care and not virally suppressed.

[1] The Ryan White HIV/AIDS Program Part F includes the Minority AIDS Initiative, which provides funding to address the disproportionate impact of HIV on Blacks/African Americans and other minority populations. Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) under Section 2692 of the Public Health Service Act 42 U.S.C. 300ff-111(a).

Report Changes

This report updates the most recent *RWHAP AETC Program Annual Data Report* with one new year of data: July 2023 through June 2024. Overall, the data are presented for five reporting periods: July 2019 through June 2020, July 2020 through June 2021, July 2021 through June 2022, July 2022 through June 2023, and July 2023 through June 2024. The focus of the narrative is the most recent year, July 2023 through June 2024.

Highlights of Analyses

Training Events

From July 2023 through June 2024, the RWHAP regional AETCs conducted 10,106 training events (a five-year average of 10,606 events per year) and reached 55,204 unique training participants (a five-year average of 56,510 training participants per year) **(Table 1).**

Training Content

The general training content areas most frequently covered by RWHAP AETC training events from July 2023 through June 2024 were HIV prevention (44.2%), management of comorbid conditions (37.1%), antiretroviral treatment and adherence (36.8%), and engagement and retention in HIV care (34.4%) **(Table 2).**

Training Topics

HIV Prevention

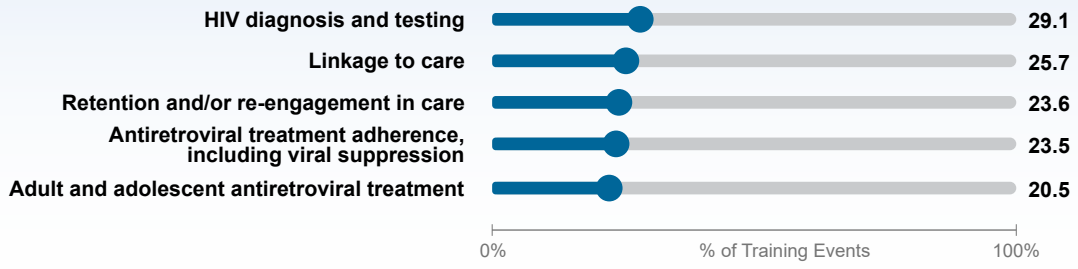
The HIV prevention topic most often presented in AETC trainings from July 2023 through June 2024 was pre-exposure prophylaxis (PrEP), which was featured in nearly one-third (30.8%) of all training events. Other HIV prevention topics included treatment as prevention (18.2%, an increase from 12.1% in the July 2019 through June 2020 reporting period and from 15.9% in the July 2023 through June 2024 reporting period), behavioral prevention (16.9%), and HIV transmission risk assessment (16.6%) **(Table 2).**

HIV Background and Management

HIV management topics—especially those related to testing, treatment, and care engagement—were popular, and several were featured in more than 20% of AETC training events from July 2023 through June 2024 **(Figure 2; Table 2).**

Figure 2

Top HIV background and management topics presented in AETC training events, July 2023 to June 2024 (N=10,057)



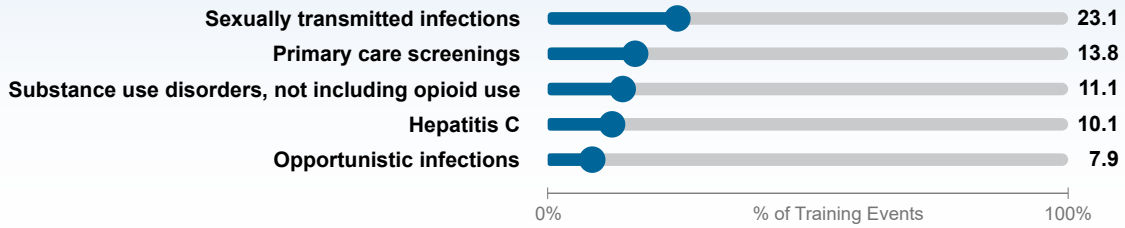
Of note, trainings about HIV diagnosis and testing, retention or re-engagement in care, and linkage to care increased from the July 2019 through June 2020 reporting period to the July 2023 through June 2024 reporting period by 7.4 percentage points, 4.9 percentage points, and 4.3 percentage points, respectively.

Primary Care, Chronic Conditions, and Comorbidities

Primary care, chronic conditions, and comorbidities featured as AETC training event topics included sexually transmitted infections (23.1%, an increase from 17.2% in the July 2019 through June 2020 reporting period); primary care screenings (13.8%); substance use disorders, not including opioid use (11.1%); hepatitis C (10.1%); and opportunistic infections (7.9%) **(Figure 3; Table 2).**

Figure 3

Top primary care, chronic conditions, and comorbidities topics presented in AETC training events, July 2023 to June 2024 (N=10,057)



Care of People With HIV

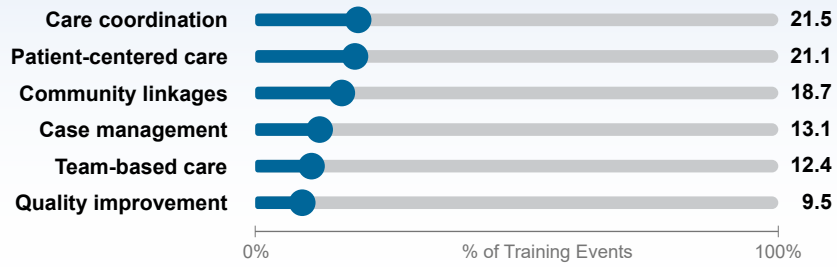
Stigma was the most frequently presented AETC training event topic related to caring for people with HIV (28.8%), an increase from 19.3% in the July 2019 through June 2020 reporting period and from 24.1% in the July 2023 through June 2024 reporting period. Health literacy was the second most frequently presented topic in this category (13.1%) **(Table 2).**

Health Care Organization or Systems Issues

The health care organizations or systems issues topics frequently presented in AETC trainings from July 2023 through June 2024 were related to improving the quality and delivery of HIV primary care and essential support services to people with HIV **(Figure 4; Table 2).**

Figure 4

Top health care organization or systems issues topics presented in AETC training events, July 2023 to June 2024 (N=10,057)



Of note, trainings about team-based care increased from the July 2019 through June 2020 reporting period to the July 2023 through June 2024 reporting period by 4.4 percentage points. Team-based care is crucial to HIV chronic care management for people with HIV as they grow older and if they experience co-occurring chronic conditions.

Population-Specific Trainings

The AETC Program supports health workforce training to ensure the delivery of quality HIV care and services to all people with HIV.

More than one-quarter of training events included the topic of adults aged 50 years and older (27.4%, an increase from 16.5% in the July 2019 through June 2020 reporting period), and over one-quarter of training events included the topic of young adults aged 18–24 years (25.7%, an increase from 20.0% in the July 2019 through June 2020 reporting period). Other populations addressed in training events included people who were unstably housed (14.3%), rural populations (12.7%), and people with legal system involvement (11.4%) **(Table 2).**

Training Participants

To improve the quality of health care provided by the HIV health care workforce and increase access to high-quality HIV care for people not in care, regional AETCs concentrate on reaching professionals who have direct patient care responsibilities for people with HIV, especially those working at RWHAP- and HRSA-supported health centers.

From July 2023 through June 2024, RWHAP AETC participants included nurses and nurse practitioners (20.8%), social workers (14.9%), physicians (12.1%), and community health workers (8.8%). In addition, 22.8% identified as a provider or clinician and 14.3% as a case manager **(Table 3).**

Participant's Service Delivery Characteristics

Regional AETCs train and support clinicians and health care professionals who provide direct care and services to patients. The AETCs reach providers with a range of HIV care experience and client volume. While more than one-third (34.0%) of participants in 2023 through 2024 had at least 10 years of experience caring for patients with HIV, from July 2023 through June 2024, 26.9% of participants were new to serving people with HIV, an increase from 21.8% of participants in the July 2019 through June 2020 reporting period **(Table 4).**

The AETCs reached providers with small and large HIV client volumes. Provider client volumes ranged from 21.1% who served fewer than 10 clients with HIV per year to 46.1% who served 50 or more clients with HIV per year **(Table 4).**

Participant's Employment Settings

RWHAP AETC participants worked in a variety of employment settings. The employment settings commonly reported by RWHAP AETC participants from July 2023 through June 2024 were HIV or infectious diseases clinic (14.5%) and other community-based organization (14.5%), followed by state or local health department (13.2%), Federally Qualified Health Center (12.6%), and academic health center (11.6%) **(Table 4).**

From July 2023 through June 2024, 10.9% of the RWHAP AETC participants were employed in a rural area (only or in combination with a suburban/urban area). During this period, 44.0% of participants worked in an RWHAP-funded employment setting, and 52.0% of participants worked within an EHE jurisdiction **(Table 4).**

TECHNICAL NOTES

Ryan White HIV/AIDS Program AETC Data

Each year, regional AETCs are required to report data to HRSA HAB about their training events and the participants who attended those events in the United States, Guam, Puerto Rico, and the U.S. Virgin Islands. The yearly AETC data reporting period is July 1 to June 30.

Information collected on training events via Event Record (ER) data forms includes the topics covered, names of collaborating organizations, types of funds used from special initiatives, type and length of sessions, training modalities or technologies used, total number of participants in attendance, and total number of Participant Information Forms (PIFs) collected from participants.

Information collected on participants via PIFs includes characteristics information (e.g., profession, functional role, race/ethnicity). In addition, information about participants' employment setting(s) is collected (e.g., if the setting is in a rural or suburban/urban area, if the setting receives RWHAP funding). Patient care information is also collected from participants. For example, participants report whether they provide services directly to people with HIV, and if so, how many years of experience they have providing such services; the average number of people with HIV they serve; and percentage estimates of clients with HIV to whom they provide services that meet certain characteristics (e.g., those who are receiving treatment with antiretroviral therapy).

In March 2020, the EHE initiative [5] was launched and included funding for expanding workforce capacity through the regional AETCs. A new funding source was added to the ER data form to reflect the use of EHE funds for training events. Training content and topics related to EHE appear throughout the current training content/topic variables; there is not a separate variable for EHE training content/topics.

Report Tables

In all tables, dashes denote that a category did not apply to that reporting period.

Table 4: Program participants, by year and employment setting: Data categories are presented for the years in which they were included on the PIF. Participants reported up to five ZIP codes for their work setting(s). Data presented use the rural/urban classifications of ZIP codes reported by participants, according to the HRSA Federal Office of Rural Health Policy's rural-urban commuting area, or RUCA [6], designation, and identify participants who work only in rural settings, in both rural and suburban/urban settings, or only in suburban/urban settings. Any portion of a participant's ZIP code within an EHE jurisdiction is considered within an EHE jurisdiction.

REFERENCES

1. Health Resources and Services Administration. Part F: AIDS Education and Training Center (AETC) Program. Available at https://ryanwhite.hrsa.gov/about/parts-and-initiatives/part-f-aetc.
2. National AETC Support Center (NASC). Available at https://aidsetc.org.
3. University of California, San Francisco. National Clinician Consultation Center (NCCC). Available at https://nccc.ucsf.edu.
4. University of Washington. National HIV Curriculum (NHC). Available at https://www.hiv.uw.edu.
5. HIV.gov. About *Ending the HIV Epidemic in the U.S.*: Overview. Available at https://www.hiv.gov/federal-response/ending-the-hiv-epidemic/overview.
6. Health Resources and Services Administration. Federal Office of Rural Health Policy. Rural-Urban Commuting Area Codes. Available at https://www.hrsa.gov/rural-health/about-us/what-is-rural.

ADDITIONAL RESOURCES

Centers for Disease Control and Prevention, HIV prevention resources: cdc.gov/hiv

Health Resources and Services Administration, HIV/AIDS programs: ryanwhite.hrsa.gov

HIV.gov, the nation's source for timely and relevant federal HIV policies, programs, and resources: HIV.gov

Table 1. RWHAP AIDS Education and Training Center (AETC) Program training events and participants by year, July 2019–June 2024—United States and 3 territories

Year	Events (N)	Participants (N)
July 2019–June 2020	8,370	56,862
July 2020–June 2021	11,475	59,972
July 2021–June 2022	12,226	56,383
July 2022–June 2023	10,851	54,131
July 2023–June 2024	10,106	55,204

Table 2. RWHAP AIDS Education and Training Center (AETC) Program training events by year and training topic, July 2019–June 2024—United States and 3 territories

	July 2019–June 2020		July 2020–June 2021		July 2021–June 2022		July 2022–June 2023		July 2023–June 2024	
	N	%	N	%	N	%	N	%	N	%
Training content										
Antiretroviral treatment and adherence	2,661	31.8	3,587	31.7	4,180	35.0	3,881	35.8	3,704	36.8
Engagement and retention in HIV care	2,410	28.8	3,285	29.1	4,128	34.6	3,652	33.7	3,459	34.4
HIV prevention	3,224	38.6	4,887	43.2	5,517	46.2	4,656	43.0	4,450	44.2
HIV testing and diagnosis	2,013	24.1	3,000	26.5	3,672	30.8	3,460	31.9	3,378	33.6
Linkage/referral to HIV care	1,917	22.9	2,994	26.5	3,699	31.0	3,139	29.0	2,798	27.8
Management of comorbid conditions	2,573	30.8	3,445	30.5	3,732	31.3	3,902	36.0	3,730	37.1
Rapid ART	—	—	—	—	—	—	319	2.9	320	3.2
Other training content	1,996	23.9	3,904	34.5	2,917	24.5	3,243	29.9	3,134	31.2
Training topic										
HIV prevention										
Behavioral prevention	1,281	15.3	1,759	15.6	2,224	18.6	1,831	16.9	1,700	16.9
HIV transmission risk assessment	1,353	16.2	1,488	13.2	1,901	15.9	1,894	17.5	1,670	16.6
Post-exposure prophylaxis (PEP, occupational and nonoccupational)	1,093	13.1	1,034	9.1	1,383	11.6	1,206	11.1	1,377	13.7
Pre-exposure prophylaxis (PrEP)	2,525	30.2	2,703	23.9	3,712	31.1	3,489	32.2	3,098	30.8
Prevention of perinatal transmission	492	5.9	464	4.1	539	4.5	507	4.7	568	5.6
Sexual health history taking	—	—	—	—	—	—	651	6.0	996	9.9
Treatment as prevention	1,009	12.1	1,103	9.8	1,823	15.3	1,728	15.9	1,835	18.2
Other HIV prevention topics	1,032	12.3	1,231	10.9	1,617	13.6	1,637	15.1	1,646	16.4
HIV background and management										
Acute HIV	739	8.8	666	5.9	934	7.8	897	8.3	839	8.3
Adult and adolescent antiretroviral treatment	1,804	21.6	2,131	18.9	2,531	21.2	2,322	21.4	2,062	20.5
Aging and HIV	546	6.5	509	4.5	731	6.1	813	7.5	781	7.8
Antiretroviral treatment adherence, including viral suppression	1,895	22.7	2,245	19.9	2,571	21.6	2,573	23.7	2,361	23.5
Basic science	897	10.7	1,087	9.6	1,786	15.0	1,705	15.7	1,306	13.0
Clinical manifestations of HIV disease	1,112	13.3	1,094	9.7	1,288	10.8	1,335	12.3	1,300	12.9
HIV diagnosis (i.e., HIV testing)	1,812	21.7	2,299	20.3	3,091	25.9	3,031	28.0	2,923	29.1
HIV epidemiology	1,048	12.5	1,150	10.2	1,584	13.3	1,351	12.5	1,309	13.0
HIV monitoring and laboratory tests (i.e., CD4 and viral load)	1,535	18.4	1,972	17.4	2,497	20.9	2,200	20.3	1,999	19.9
HIV resistance testing and interpretation	882	10.5	946	8.4	1,061	8.9	903	8.3	829	8.2
Linkage to care	1,788	21.4	2,636	23.3	3,270	27.4	2,781	25.7	2,580	25.7
Pediatric HIV management	156	1.9	96	0.8	102	0.9	147	1.4	147	1.5
Retention and/or re-engagement in care	1,565	18.7	2,259	20.0	2,903	24.3	2,411	22.3	2,370	23.6
Other HIV background and management topics	196	2.3	560	5.0	646	5.4	745	6.9	615	6.1
Primary care, chronic conditions, and comorbidities										
Cervical cancer screening, including HPV	174	2.1	174	1.5	243	2.0	175	1.6	167	1.7
Health or wellness maintenance	—	—	—	—	—	—	600	5.5	718	7.1
Hepatitis B	537	6.4	587	5.2	739	6.2	619	5.7	541	5.4
Hepatitis C	1,091	13.0	1,373	12.1	1,572	13.2	1,264	11.7	1,015	10.1
Immunization	392	4.7	505	4.5	593	5.0	470	4.3	325	3.2

Table 2. RWHAP AIDS Education and Training Center (AETC) Program training events by year and training topic, July 2019–June 2024—United States and 3 territories *(cont.)*

	July 2019–June 2020		July 2020–June 2021		July 2021–June 2022		July 2022–June 2023		July 2023–June 2024	
	N	%	N	%	N	%	N	%	N	%
Primary care, chronic conditions, and comorbidities (*cont.*)										
Influenza	198	2.4	165	1.5	119	1.0	87	0.8	58	0.6
Malignancies	178	2.1	208	1.8	292	2.4	221	2.0	212	2.1
Medication-assisted therapy for substance use disorders	404	4.8	446	3.9	445	3.7	430	4.0	328	3.3
Mental health disorders	856	10.2	1,117	9.9	1,086	9.1	975	9.0	741	7.4
Non-infection comorbidities of HIV or viral hepatitis	636	7.6	577	5.1	752	6.3	757	7.0	682	6.8
Nutrition	181	2.2	197	1.7	235	2.0	180	1.7	152	1.5
Opioid use disorder	428	5.1	585	5.2	642	5.4	573	5.3	554	5.5
Opportunistic infections	714	8.5	789	7.0	945	7.9	946	8.7	792	7.9
Oral health	281	3.4	297	2.6	326	2.7	450	4.2	341	3.4
Osteoporosis	130	1.6	106	0.9	125	1.0	90	0.8	108	1.1
Pain management	187	2.2	166	1.5	207	1.7	160	1.5	102	1.0
Palliative care	90	1.1	68	0.6	113	0.9	56	0.5	58	0.6
Preconception planning	417	5.0	446	3.9	635	5.3	628	5.8	625	6.2
Primary care screenings	816	9.8	1,034	9.1	1,656	13.9	1,710	15.8	1,384	13.8
Sexually transmitted infections	1,439	17.2	1,682	14.9	2,555	21.4	2,661	24.6	2,326	23.1
Substance use disorders, not including opioid use	956	11.4	1,027	9.1	1,294	10.8	1,168	10.8	1,112	11.1
Tobacco cessation	170	2.0	178	1.6	218	1.8	96	0.9	122	1.2
Tuberculosis	183	2.2	190	1.7	211	1.8	157	1.4	209	2.1
Other primary care and morbidities topics	761	9.1	2,553	22.6	1,697	14.2	1,091	10.1	763	7.6
Care of people with HIV										
Health literacy	676	8.1	1,244	11.0	1,962	16.4	1,333	12.3	1,318	13.1
Stigma	1,615	19.3	2,349	20.8	3,460	29.0	2,614	24.1	2,892	28.8
Stress management	—	—	—	—	—	—	243	2.2	344	3.4
Other care of people with HIV topics	301	3.6	316	2.8	403	3.4	531	4.9	576	5.7
Health care organization or systems issues										
Billing for services and payment models	330	3.9	371	3.3	570	4.8	—	—	—	—
Care coordination	1,640	19.6	2,030	18.0	2,654	22.2	2,153	19.9	2,164	21.5
Case management	982	11.7	1,065	9.4	1,325	11.1	1,469	13.6	1,319	13.1
Community linkages	1,215	14.5	1,527	13.5	2,109	17.7	2,007	18.5	1,881	18.7
Confidentiality/HIPAA	415	5.0	392	3.5	417	3.5	335	3.1	237	2.4
Funding or resource allocation	345	4.1	455	4.0	465	3.9	472	4.4	334	3.3
Health care coverage	461	5.5	520	4.6	640	5.4	550	5.1	451	4.5
Legal issues	273	3.3	283	2.5	291	2.4	275	2.5	195	1.9
Motivational interviewing	684	8.2	845	7.5	1,228	10.3	502	4.6	393	3.9
Organizational infrastructure	866	10.4	1,024	9.1	1,104	9.3	803	7.4	527	5.2
Organizational needs assessment	504	6.0	720	6.4	734	6.2	399	3.7	328	3.3
Patient-centered care	1,526	18.2	2,099	18.6	2,913	24.4	1,930	17.8	2,117	21.1
Patient-centered medical home	202	2.4	249	2.2	427	3.6	415	3.8	513	5.1
Practice transformation	813	9.7	1,316	11.6	1,524	12.8	1,091	10.1	794	7.9
Quality improvement	1,098	13.1	1,717	15.2	2,348	19.7	1,371	12.7	955	9.5
Team-based care	671	8.0	958	8.5	1,323	11.1	1,577	14.6	1,243	12.4
Telehealth	271	3.2	669	5.9	483	4.0	269	2.5	298	3.0
Use of technology for patient care	435	5.2	499	4.4	422	3.5	424	3.9	431	4.3
Other health care organization or systems issues topics	—	—	—	—	—	—	547	5.0	601	6.0

Table 2. RWHAP AIDS Education and Training Center (AETC) Program training events by year and training topic, July 2019–June 2024—United States and 3 territories *(cont.)*

	July 2019–June 2020		July 2020–June 2021		July 2021–June 2022		July 2022–June 2023		July 2023–June 2024	
	N	%	N	%	N	%	N	%	N	%
Population-specific trainings										
Children (Ages 0–12)	272	3.3	489	4.3	383	3.2	388	3.6	371	3.7
Adolescents (Ages 13–17)	741	8.9	1,210	10.7	1,312	11.0	1,519	14.0	1,237	12.3
Young adults (Ages 18–24)	1,670	20.0	2,692	23.8	3,150	26.4	2,904	26.8	2,587	25.7
Older adults (Ages 50 and over)	1,381	16.5	2,390	21.1	2,819	23.6	2,892	26.7	2,754	27.4
American Indian or Alaska Native	322	3.9	638	5.6	769	6.4	932	8.6	711	7.1
Asian	323	3.9	674	6.0	677	5.7	662	6.1	779	7.7
Black or African American	1,676	20.0	3,028	26.8	2,741	23.0	2,639	24.4	2,207	21.9
Hispanic or Latino	1,245	14.9	2,305	20.4	2,424	20.3	2,255	20.8	1,997	19.9
Native Hawaiian or Pacific Islander	221	2.6	445	3.9	530	4.4	478	4.4	562	5.6
Other race/ethnicity	106	1.3	132	1.2	247	2.1	142	1.3	178	1.8
Women	1,586	19.0	2,577	22.8	2,627	22.0	2,510	23.2	2,231	22.2
People experiencing unstable housing	1,242	14.9	1,772	15.7	1,718	14.4	1,364	12.6	1,440	14.3
People who inject drugs	—	—	—	—	—	—	735	6.8	1,118	11.1
People with legal system involvement	736	8.8	1,298	11.5	1,128	9.5	995	9.2	1,144	11.4
Rural populations	1,076	12.9	1,608	14.2	1,655	13.9	1,259	11.6	1,279	12.7
Veterans	—	—	—	—	—	—	93	0.9	270	2.7
Other populations	3,050	36.5	4,828	42.7	5,535	46.4	6,152	56.8	6,551	65.1
Number of training events held during the year	**8,362**	**—**	**11,305**	**—**	**11,929**	**—**	**10,835**	**—**	**10,057**	**—**

Abbreviations: ART, antiretroviral therapy; HIPAA, Health Insurance Portability and Accountability Act; HPV, human papillomavirus.
Notes: Participants selected all that apply for the training content and each training topic. The number of training events held during the year is based on training events with information reported for participants and training topics, and it serves as the denominator for percentage calculations.

Table 3. RWHAP AIDS Education and Training Center (AETC) Program participants by year and selected characteristics, July 2019–June 2024—United States and 3 territories

	July 2019–June 2020		July 2020–June 2021		July 2021–June 2022		July 2022–June 2023		July 2023–June 2024	
	N	%	N	%	N	%	N	%	N	%
Race/ethnicity										
American Indian/Alaska Native	348	0.7	389	0.8	419	0.9	431	0.9	434	0.9
Asian	3,516	7.2	3,638	7.1	3,335	6.9	3,420	7.2	3,240	6.9
Black/African American	10,717	22.0	11,526	22.4	10,721	22.2	10,218	21.5	10,246	21.7
Hispanic/Latino[a]	8,726	17.9	9,591	18.6	9,273	19.2	10,958	23.0	11,565	24.5
Native Hawaiian/Pacific Islander	261	0.5	207	0.4	119	0.2	149	0.3	133	0.3
White	23,505	48.2	24,207	47.0	22,670	46.9	20,962	44.0	19,975	42.3
Multiple races	1,679	3.4	1,907	3.7	1,798	3.7	1,172	2.5	1,270	2.7
Other	—	—	—	—	—	—	312	0.7	314	0.7
Total	**48,752**	**100.0**	**51,465**	**100.0**	**48,335**	**100.0**	**47,622**	**100.0**	**47,177**	**100.0**
Professional discipline										
Clergy/faith-based professional	100	0.2	85	0.2	87	0.2	84	0.2	74	0.1
Community health worker	3,287	6.4	4,024	7.2	4,155	7.8	4,113	7.9	4,545	8.8
Dentist	1,843	3.6	2,078	3.7	1,720	3.2	1,777	3.4	1,749	3.4
Dietitian/nutritionist	184	0.4	217	0.4	184	0.3	167	0.3	172	0.3
Mental/behavioral health professional	1,869	3.7	2,029	3.6	1,712	3.2	1,434	2.8	1,438	2.8
Midwife	104	0.2	82	0.1	116	0.2	78	0.2	88	0.2
Nurse practitioner/nurse professional (prescriber)	3,190	6.3	3,166	5.6	3,033	5.7	3,171	6.1	3,327	6.4
Nurse professional (non-prescriber)	7,743	15.2	7,309	13.0	7,996	15.1	7,440	14.3	7,394	14.3
Pharmacist	3,112	6.1	3,274	5.8	2,705	5.1	2,897	5.6	2,549	4.9
Physician	6,779	13.3	5,986	10.7	6,075	11.4	6,348	12.2	6,259	12.1
Physician assistant	1,311	2.6	1,370	2.4	1,352	2.5	1,345	2.6	1,198	2.3
Practice administrator or leader	756	1.5	889	1.6	906	1.7	987	1.9	977	1.9
Social worker	7,011	13.7	8,865	15.8	7,754	14.6	7,228	13.9	7,699	14.9
Substance abuse professional	918	1.8	1,137	2.0	1,055	2.0	759	1.5	763	1.5
Other allied health professional	1,971	3.9	1,578	2.8	1,752	3.3	1,503	2.9	1,598	3.1
Other clinical professional	—	—	—	—	—	—	1,996	3.8	475	0.9
Other dental professional	1,180	2.3	1,022	1.8	652	1.2	743	1.4	686	1.3
Other non-clinical professional	4,327	8.5	5,846	10.4	5,304	10.0	4,432	8.5	4,342	8.4
Other public health professional	5,858	11.5	7,193	12.8	7,185	13.5	6,219	12.0	6,878	13.3
Number of participants	**50,996**	**—**	**56,150**	**—**	**53,087**	**—**	**51,994**	**—**	**51,586**	**—**
Role in their organization										
Administrator	4,599	9.9	5,786	10.6	5,175	9.9	4,810	9.3	4,730	9.3
Agency board member	76	0.2	105	0.2	97	0.2	88	0.2	69	0.1
Care provider/clinician—can or does prescribe HIV treatment	4,977	10.7	5,306	9.7	5,274	10.1	4,855	9.4	4,771	9.3
Care provider/clinician—cannot or does not prescribe HIV treatment	7,650	16.4	7,842	14.3	7,454	14.3	7,387	14.3	6,857	13.4
Case manager	6,038	12.9	7,919	14.4	7,151	13.7	6,846	13.2	7,280	14.3
City, local, state government employee	—	—	—	—	—	—	222	0.4	3,738	7.3
Client/patient educator (includes navigator)	2,248	4.8	2,851	5.2	2,928	5.6	2,719	5.3	2,726	5.3
Clinical/medical assistant	1,510	3.2	1,556	2.8	1,628	3.1	1,756	3.4	1,717	3.4
Health care organization non-clinical staff	1,303	2.8	1,875	3.4	1,803	3.5	1,882	3.6	1,870	3.7
HIV tester	1,491	3.2	1,892	3.5	1,852	3.5	1,822	3.5	1,966	3.9
Intern/resident	1,746	3.7	1,469	2.7	1,326	2.5	1,354	2.6	1,535	3.0
Researcher/evaluator	1,530	3.3	1,575	2.9	1,417	2.7	1,233	2.4	1,253	2.5
Student/graduate student	5,617	12.0	5,727	10.4	5,714	10.9	5,412	10.5	4,704	9.2
Teacher/faculty	1,474	3.2	1,506	2.7	1,462	2.8	1,188	2.3	1,199	2.3
Other	6,986	15.0	9,395	17.1	9,869	18.9	11,147	21.6	7,589	14.9
Number of participants	**46,627**	**—**	**54,804**	**—**	**52,245**	**—**	**51,672**	**—**	**51,038**	**—**

Notes: Participants reporting for July 2019–June 2020 selected all professional disciplines and roles that apply. Participants reporting for July 2020–June 2021, July 2021–June 2022, July 2022–June 2023, and July 2023–June 2024 could report more than one professional discipline and/or role if they participated in more than one training during the year and their discipline and/or role changed. Professional discipline and role data for all years are not mutually exclusive; numbers may not sum to the number of participants, and percentages may not sum to 100.0%.

[a] Hispanics/Latinos can be of any race.

Table 4. RWHAP AIDS Education and Training Center (AETC) Program participants by year, selected service delivery characteristics, and employment setting, July 2019–June 2024—United States and 3 territories

	July 2019–June 2020		July 2020–June 2021		July 2021–June 2022		July 2022–June 2023		July 2023–June 2024	
	N	%	N	%	N	%	N	%	N	%
Number of years providing direct services to people with HIV										
≤1	4,631	21.8	5,774	24.0	6,059	27.6	5,613	27.6	5,624	26.9
2–4	5,050	23.7	5,237	21.7	4,538	20.6	4,291	21.1	4,291	20.6
5–9	3,825	18.0	4,373	18.2	3,994	18.2	3,794	18.7	3,864	18.5
10–19	4,324	20.3	4,774	19.8	4,076	18.5	3,681	18.1	3,909	18.7
≥20	3,442	16.2	3,935	16.3	3,315	15.1	2,927	14.4	3,189	15.3
Total	**21,272**	**100.0**	**24,093**	**100.0**	**21,982**	**100.0**	**20,306**	**100.0**	**20,877**	**100.0**
Estimated number of clients with HIV per year										
None per year	1,617	8.0	2,603	11.1	2,883	13.3	1,258	6.5	1,277	6.4
1–9 per year	4,400	21.7	4,650	19.8	4,484	20.7	4,720	24.3	4,200	21.1
10–19 per year	2,363	11.7	2,289	9.8	2,040	9.4	1,859	9.6	2,045	10.3
20–49 per year	3,142	15.5	3,603	15.4	3,307	15.2	3,027	15.6	3,199	16.1
≥50 per year	8,724	43.1	10,323	44.0	8,983	41.4	8,533	44.0	9,155	46.1
Total	**20,246**	**100.0**	**23,468**	**100.0**	**21,697**	**100.0**	**19,397**	**100.0**	**19,876**	**100.0**
Employment setting										
Academic health center	6,813	14.1	6,375	11.3	6,600	12.6	6,816	13.5	5,833	11.6
Correctional facility	1,307	2.7	1,063	1.9	934	1.8	1,887	3.7	764	1.5
Dental health facility	—	—	—	—	—	—	2,168	4.3	870	1.7
Emergency department	538	1.1	338	0.6	444	0.8	446	0.9	340	0.7
Federally Qualified Health Center	5,137	10.6	6,078	10.8	6,090	11.6	6,196	12.3	6,340	12.6
HIV or infectious diseases clinic	5,385	11.1	6,977	12.4	6,719	12.8	6,718	13.3	7,278	14.5
HMO/managed care organization	663	1.4	587	1.0	658	1.3	671	1.3	728	1.4
Hospital-based clinic	2,758	5.7	2,823	5.0	2,897	5.5	2,726	5.4	2,566	5.1
Indian Health Service/Tribal clinic	291	0.6	268	0.5	359	0.7	434	0.9	497	1.0
Long-term nursing facility	246	0.5	261	0.5	203	0.4	166	0.3	141	0.3
Maternal/child health clinic	166	0.3	198	0.4	230	0.4	226	0.4	258	0.5
Mental health clinic	835	1.7	922	1.6	837	1.6	651	1.3	637	1.3
Military or veteran's health facility	333	0.7	262	0.5	212	0.4	152	0.3	192	0.4
Pharmacy	1,679	3.5	1,636	2.9	1,216	2.3	1,186	2.4	945	1.9
Private practice	1,383	2.9	1,660	2.9	929	1.8	805	1.6	876	1.7
State or local health department	5,029	10.4	6,146	10.9	6,460	12.3	6,226	12.3	6,621	13.2
STD clinic	848	1.8	1,138	2.0	1,101	2.1	1,113	2.2	1,340	2.7
Student health clinic	683	1.4	756	1.3	706	1.3	602	1.2	502	1.0
Substance abuse treatment center	876	1.8	1,085	1.9	1,117	2.1	743	1.5	812	1.6
Other community-based organization	6,126	12.6	7,536	13.4	6,970	13.3	6,428	12.7	7,283	14.5
Other federal health facility	355	0.7	428	0.8	478	0.9	322	0.6	383	0.8
Other primary care setting	1,972	4.1	1,864	3.3	1,705	3.2	770	1.5	2,096	4.2
Employment setting does not involve the provision of care or services to patients/clients	2,150	4.4	4,390	7.8	3,073	5.8	1,976	3.9	1,883	3.7
Not working	3,556	7.3	3,638	6.4	3,438	6.5	1,889	3.7	1,940	3.9
Number of participants	**48,442**	**—**	**56,429**	**—**	**52,557**	**—**	**50,421**	**—**	**50,324**	**—**
Rural and suburban/urban employment settings										
Rural settings only	3,041	7.2	4,471	9.0	4,577	9.5	4,007	9.0	4,567	9.6
Both rural and suburban/urban settings[a]	604	1.4	636	1.3	625	1.3	537	1.2	576	1.2
Suburban/urban settings only	38,470	91.3	44,358	89.7	43,020	89.2	40,037	89.8	42,241	89.1
Total	**42,115**	**100.0**	**49,465**	**100.0**	**48,222**	**100.0**	**44,581**	**100.0**	**47,384**	**100.0**
RWHAP-funded employment setting										
Yes	18,914	43.7	22,106	41.4	20,101	39.1	20,104	42.2	22,635	44.0
No	12,412	28.7	18,800	35.2	17,091	33.3	15,516	32.5	16,050	31.2
Don't know/not sure	11,990	27.7	12,445	23.3	14,156	27.6	12,054	25.3	12,754	24.8
Total	**43,316**	**100.0**	**53,351**	**100.0**	**51,348**	**100.0**	**47,674**	**100.0**	**51,439**	**100.0**
EHE jurisdiction employment setting[b]										
Yes	22,014	51.3	26,676	52.8	25,014	50.7	24,558	52.9	25,652	52.0
No	20,928	48.7	23,876	47.2	24,343	49.3	21,906	47.1	23,671	48.0
Total	**42,942**	**100.0**	**50,552**	**100.0**	**49,357**	**100.0**	**46,464**	**100.0**	**49,323**	**100.0**

Abbreviations: HMO, health maintenance organization; STD, sexually transmitted disease.

Notes: Participants reporting for July 2019–June 2020 selected all employment settings that apply. Participants reporting for July 2020–June 2021, July 2021–June 2022, July 2022–June 2023, and July 2023–June 2024 could report more than one employment setting if they participated in more than one training during the year and their employment setting changed. Employment setting data for all years are not mutually exclusive; numbers may not sum to the number of participants and percentages may not sum to 100.0%.

[a] Participants who reported more than one employment setting and reported both rural and suburban/urban settings.

[b] The Ending the HIV Epidemic in the U.S. (EHE) initiative aims to reduce new HIV infections to less than 3,000 per year by 2030. Any portion of a participant's employment ZIP code within an EHE jurisdiction is considered within an EHE jurisdiction.