The HIV treatment cascade—also referred to as the HIV care continuum—is a system to monitor the number of individuals living with HIV who are actually receiving medical care and the treatment they need. It was developed to recognize the various steps necessary for everyone who needs HIV care to remain engaged in it—from an initial stage of getting tested for HIV to being able to suppress the virus through treatment.

The system recognizes the new science of viral suppression, which states that when people are engaged in care and taking antiretroviral therapy (ART) to reduce the amount of virus in their body, it makes them less likely to transmit HIV to others. GMT organizations can use the treatment cascade to keep track of the progress individuals make after receiving a positive diagnosis and throughout their lives.

**The stages of the HIV treatment cascade (see graphic to the right)**

- **Getting tested and diagnosed:** The HIV treatment cascade begins with an HIV diagnosis. The only way to know for sure that a person is infected with HIV is for them to take an HIV test.

- **Getting linked to care:** Once a person knows they are infected with HIV, it is important that they are immediately connected to an informed and competent HIV healthcare provider who can offer treatment and counseling to help them stay as healthy as possible and prevent passing HIV on to others.

- **Staying in care:** Because there is no cure for HIV at this time, treatment is a lifelong process. To stay healthy, a person needs to receive regular HIV medical care.

- **Taking antiretroviral therapy:** Antiretroviral drugs are used to prevent a retrovirus, such as HIV, from making more copies of itself. ART is the recommended treatment for HIV infection. It involves using a combination of three or more antiretroviral drugs from at least two different HIV drug classes every day to control the virus.

- **Achieving a low amount of HIV in the body:** By taking ART regularly, a person living with HIV can achieve viral suppression, meaning they have a very low level of HIV in their blood. They are not cured. There is still some HIV in their body; however, lowering the amount helps keep them healthy, helps them live longer, and strongly reduces the chance of passing HIV on to others.
Why is the HIV treatment cascade important?

The HIV treatment cascade provides a framework for service providers and policy makers to examine critical questions such as:

- How many individuals living with HIV are getting tested and diagnosed?
- Of those, how many are linked to medical care?
- Of those, how many are retained in care?
- Of those, how many receive ART?
- Of those, how many are able to adhere to their treatment plan and achieve viral suppression?

By closely examining these separate steps, policymakers and service providers can pinpoint where gaps may exist in connecting individuals living with HIV to sustained, quality care. If service providers keep track of when patients most commonly drop out, and what populations commonly do so, it can help national, state, and local policymakers and service providers improve systems and services to better support individuals as they move from one step in the care continuum to the next.

Key questions to ask yourself and your organization are:

- How can your organization better engage people living with HIV at every stage of the treatment cascade?
- What additional services can your organization provide to improve engagement in one or more steps of the cascade?
- Where can you refer people for quality care?
- Can you learn from what other agencies have done? Would it work in your region?
- What initiatives or partnerships can you develop to connect people living with HIV to your services?
- What initiatives or partnerships can you develop to connect your clients with other relevant services in your community?
- How can you evaluate whether your clients are entering the next step of the cascade?

As we work to improve engagement in the HIV treatment cascade, it is critical that human rights are respected and that GMT living with HIV or at risk of HIV infection are offered the services they need to make informed decisions about the testing and treatment options that are right for them.

References


