



HEARTLAND ALLIANCE

HIV IN THE UNITED STATES

HIV-related mortality rates in the U.S. have declined by more than 80% since the peak of the crisis. The overall rate of new infections has also dropped. Progress on fighting HIV has been due in large part to advances in HIV medications, increased access to treatment, and focused prevention efforts. But despite that progress, some communities still face a higher risk of HIV.

THE BASICS

Human Immunodeficiency Virus (HIV) is a virus that destroys cells in the immune system making the body less able to fight infections or disease. HIV can be transmitted through semen, blood, vaginal and anal fluids, and breast milk.

Acquired Immunodeficiency Syndrome (AIDS) is not a virus but a set of symptoms caused by the HIV virus. A person is said to have AIDS when their immune system is so weak that it cannot fight off infection. This is the last stage of HIV, when the infection is considered to be very advanced.

THE NUMBERS

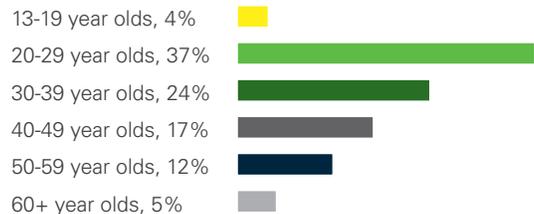
1.2 million people
are living with HIV in the U.S.

40,040 new HIV
diagnosis occurred in 2015

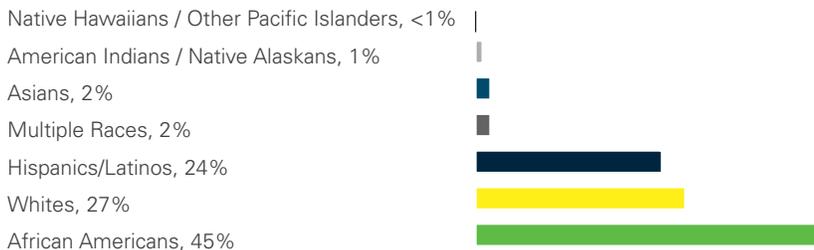
13% of people
with HIV don't know it

New Infections in 2015

BY AGE



BY RACE/ETHNICITY



“NOW WE’RE AT A POINT WHERE WE HAVE ALL THE TOOLS WE NEED TO END HIV, NOT CURE IT, BUT END IT. MEANING THAT WE CAN STOP HIV FROM BEING TRANSMITTED FROM ONE PERSON TO ANOTHER. IF WE CAN ENGAGE PEOPLE INTO CARE, TREAT PEOPLE WHO ARE POSITIVE, HELP THOSE WHO ARE AT RISK BUT NOT POSITIVE AVOID THE VIRUS THROUGH PROPHYLACTIC TREATMENTS, WE CAN END THE TRANSMISSION OF HIV.”

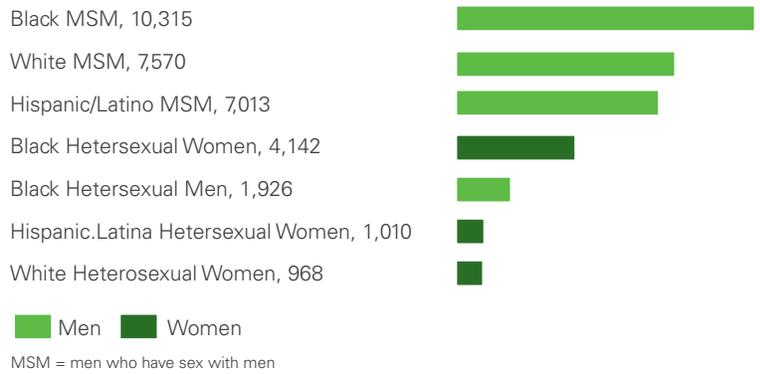
— Ed Stellon, Executive Director of Heartland Health Outreach

WHO IS BEING LEFT BEHIND

Black and Latino people account for a disproportionate share of new HIV diagnoses, relative to their size in the U.S. population. In 2015, the rate of new HIV diagnoses for Blacks was about 8 times that of whites. Latinos had a rate 3 times that of whites. Black gay and bisexual men also have a much higher risk of being diagnosed with HIV during their lifetimes compared with Latino and white gay and bisexual men. Among black gay and bisexual men, those between the ages of 20-29 accounted for 54% of new diagnoses.

Transgender individuals also face extremely high rates of HIV infection. 22% of all transgender women in the U.S. and 25% of Black transgender people are living with HIV. There is has not been significant study done on HIV infection rates among transgender men and gender non-conforming people but it is likely these communities may also face an increased risk.

BY SUBPOPULATION



PREVENTION & TREATMENT

The reduction in HIV transmission can be attributed to both prevention and treatment. Treatment includes **anti-retroviral therapy (ART)** - the use of medications to reduce the amount of HIV in the blood. The goal of ART is **viral suppression** – achieving a very low or undetectable amount of HIV in the blood. Preventative medications like PrEP and PEP have also been developed to prevent new HIV infections. **PrEP, or pre-exposure prophylaxis**, is daily pill that can be up to 90% effective in preventing HIV infection in people who do not have it. **Post-Exposure Prophylaxis (PEP)** can prevent HIV infection using antiretroviral medicines (ART) that are taken within three days after potential HIV exposure. Needle exchanges have also helped to prevent the transmission of HIV amongst intravenous drug users.



ENDING NEW HIV INFECTIONS THROUGH ACCESS TO CARE

The Affordable Care Act (ACA) and Medicaid, the public health insurance program for people with low income, are both important resources that help people with HIV access care. The ACA includes many provisions that specifically impact people with HIV. For people living with HIV, the ACA includes legal protections that make access to health coverage more equitable. This includes the expansion of Medicaid and the creation of subsidies that allow people with low and moderate incomes to afford insurance available for purchase through the marketplace. 40% of people with HIV receiving care are insured by Medicaid. The ACA also includes non-discrimination policies, including a prohibition on rate setting tied to health status, elimination of preexisting condition exclusions, and an end to lifetime and annual caps.

ABOUT HEARTLAND'S ROLE

We believe that everyone in society benefits when people who experience disparities in safety, health, housing, education, economic opportunity, and justice are able to exit poverty, heal from trauma, and achieve stability; secure their rights; and shape policies that respond to their needs.

Building on decades of experience, Heartland Alliance's goal is to ensure access to high-quality, inclusive healthcare for those experiencing homelessness and poverty, living with HIV, AIDS or mental illness, and immigrants or refugees. This includes providing health and wellness services that promote stability, improve outcomes, and enables the most vulnerable in our communities to reach their full potential.

SOURCES: AIDS Foundation of Chicago, AIDS.gov, avert.org, CDC, Kaiser Family Foundation