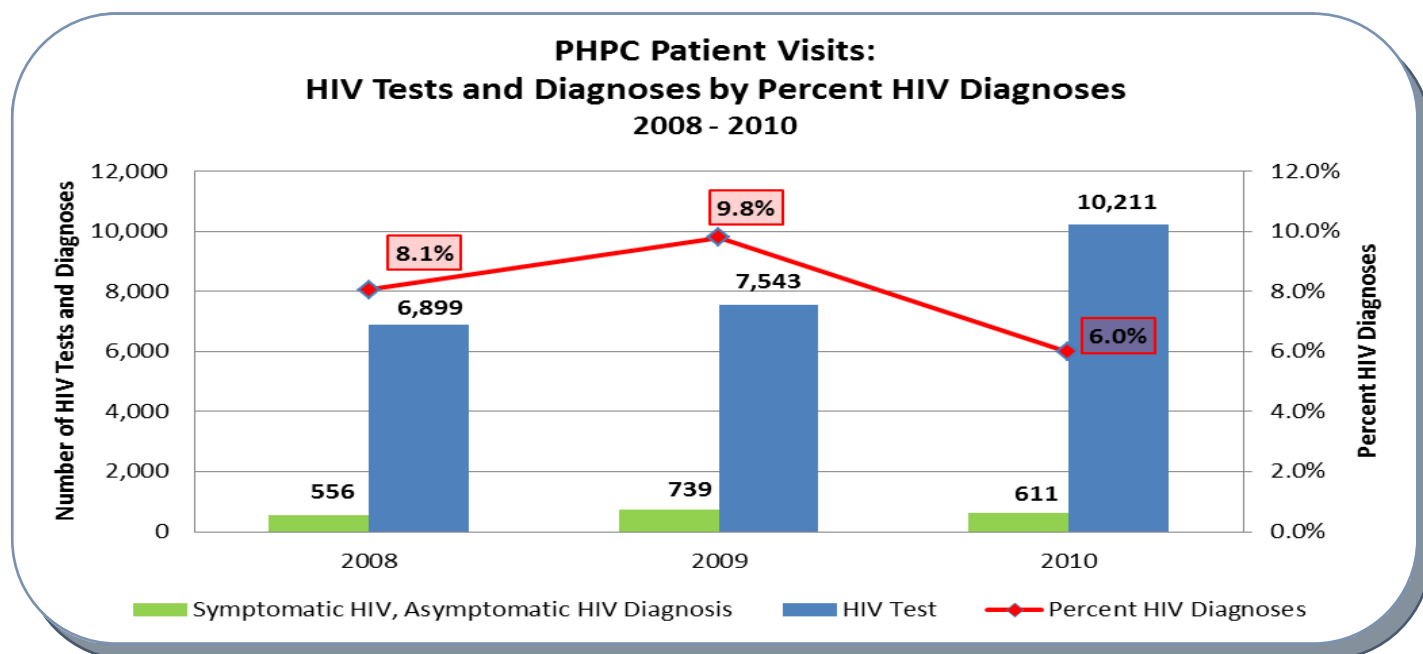


Hispanics/Latinos and Blacks/African Americans represent a small portion of the U.S. population, but are overly represented among those diagnosed with HIV infection.

Diagnoses of HIV Infection by Race/Ethnicity and Age Category—2010												
	American Indian/Alaska		Asian/Pacific Islander		Black/African American		Hispanic/Latino		White		Other/Multiracial	
Age	N	%	N	%	N	%	N	%	N	%	N	%
Under 20	2	.1%	19	.8%	1,676	68.4%	379	15.5%	341	13.9%	33	1.3%
Age 20-39	149	.6%	575	2.2%	12,009	46.4%	5,948	23.0%	6,825	26.4%	358	1.4%
Age 40-54	58	.4%	236	1.6%	6,246	42.5%	2,686	18.3%	5,265	35.8%	196	1.3%
Age 55+	14	.3%	49	1.2%	1,922	46.6%	640	15.5%	1,446	35.1%	54	1.3%
TOTAL	223	.5%	879	1.9%	21,853	46.4%	9,653	20.5%	13,877	29.4%	641	1.4%

FACTS:

- Blacks/African Americans represent 68% of those under the age of 20 diagnosed with HIV infection within the U.S. in 2010.
- Male-to male sexual contact represents the highest transmission category of HIV infection (61%) among all races/ethnicities in 2010. Heterosexual contact is the highest transmission category (86%) among women.
- Significant risk reduction barriers to HIV/AIDS among low-income minority women include daily life stressors and power-imbalanced relationships.
- In a study on abuse and HIV among low-income women, 42% of study participants reported intimate partner violence (IPV) within the past year—regardless of HIV status.
- Over 10,000 PHPC patients were tested for HIV infection, but only 611 (6%) received a diagnoses of HIV infection in 2010.



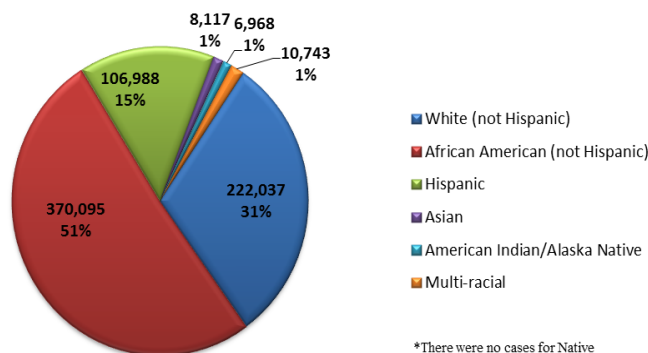
Behavioral Interventions:

- Examples of HIV Prevention programs include: Community PROMISE (Peers Reaching Out and Modeling Intervention Strategies for Community-level HIV/AIDS Risk Reduction), , Project AIM: Adult Identity Mentoring (A Youth Development Intervention for HIV Risk Reduction), SHIELD: Self-Help in Eliminating Life Threatening Diseases (A Small Group HIV Risk Reduction Intervention for Substance Using Men and Women), and Video Opportunities for Innovative Condom Education and Safer Sex (VOICES/VOCES). For more information on these interventions, please visit http://www.cdc.gov/hiv/topics/prev_prog/rep/packages/packages_by_topic.htm.

Things to consider when implementing interventions:

- Depression is a common comorbidity of HIV infection.
- Other life stressors and community norms/values must be considered when working with special populations. Messages conveyed should be tailored to participants and culturally appropriate to your audience.
- When designing HIV educational programming, it is important to address the perceptions of participants and not just relay facts.
- Sharing information with community institutions such as churches and other health care agencies may benefit outreach activities.

HIV Positive Ryan White Patients by Race/Ethnicity*
2009



*There were no cases for Native Hawaiian/Pacific Islander.

Bottom Line:

- Racism, poverty, and lack of access to health care are barriers to HIV prevention services, particularly for men who have sex with men (MSM) from racial or ethnic minority communities.
- Many MSM are unaware of their infection, which may be due to low perceived risk of HIV infection or fewer opportunities to get tested.
- It is imperative that medical personnel follow up with patients regarding their HIV infection status after HIV screening/testing is completed. The CDC has created a toolkit to assist health centers with understanding both patient and provider perspectives regarding HIV screening: http://www.cdc.gov/hiv/resources/reports/pdf/CDC_Evaluation_Toolkit_Routine_HIV_Screening.pdf.

Additional Resources:

- AIDS Education and Training Center National Resource Center: <http://www.aids-ed.org/aidsetc?page=home-00-00>
- AIDS.gov: <http://www.aids.gov/>
- AIDSinfo: <http://aidsinfo.nih.gov/hiv-aids-health-topics/88/minorities>
- Centers for Disease Prevention (CDC): <http://www.cdc.gov/hiv/>
- Gay Men's Health Crisis (GHMC): <http://www.gmhc.org/>
- National Library of Medicine (NLM): <http://www.sis.nlm.nih.gov/hiv/minorities.html>
- Substance Abuse and Mental Health Services Administration (SAMHSA): <http://www.samhsa.gov/hiv>
- The Office of Minority Health (OMH): <http://www.minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=22>

Sources: **HIV Surveillance Report** http://www.cdc.gov/hiv/surveillance/resources/reports/2010report/pdf/2010_HIV_Surveillance_Report_vol_22.pdf; **REP Packages by Topic** http://www.cdc.gov/hiv/topics/prev_prog/rep/packages/packages_by_topic.htm; **Ryan White HIV/AIDS Program** <http://hab.hrsa.gov/stateprofiles/2009/states/us/State-Population-Data.htm>; **National Public Housing Data** <http://bphc.hrsa.gov/uds/view.aspx?prog=PH&year=2010>; **HIV Prevention among Women in Low-Income Housing Developments: Issues and Intervention Outcomes in a Place-Based Randomized Controlled Trial** <http://www.jstor.org/stable/25046094>; **Abuse, HIV Status and Health-Related Quality of Life among a Sample of HIV Positive and HIV Negative Low-Income Women** <http://www.jstor.org/stable/4039358>; **HIV among Gay, Bisexual and Other Men Who Have Sex with Men** <http://www.cdc.gov/hiv/topics/msm/index.htm>