

Fast Facts

- African Americans are the racial/ethnic group most affected by HIV.
- The rate of new HIV infection in African Americans is 8 times that of whites based on population size.
- Gay and bisexual men account for most new infections among African Americans; young gay and bisexual men aged 13 to 24 are the most affected of this group.

Blacks/African Americans* have the most severe burden of HIV of all racial/ethnic groups in the United States. Compared with other races and ethnicities, African Americans account for a higher proportion of new HIV infections, those living with HIV, and those ever diagnosed with AIDS.

* Referred to as African Americans in this fact sheet.

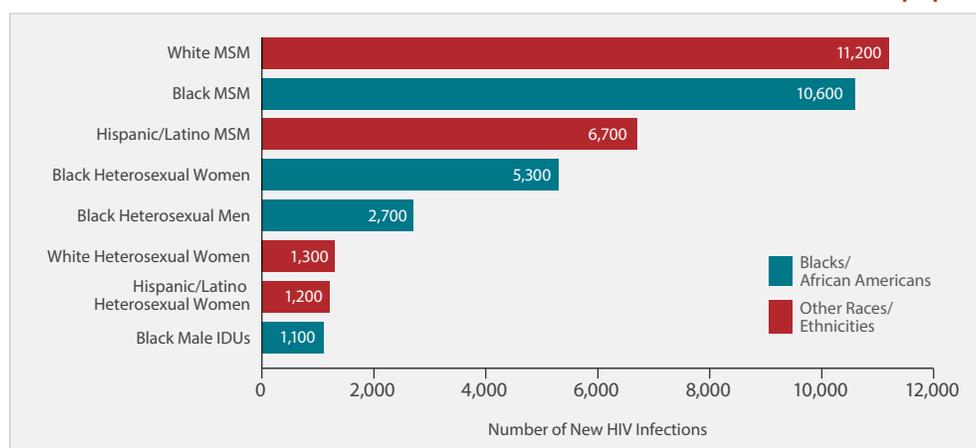
The Numbers

New HIV Infections^a

- African Americans accounted for an estimated 44% of all new HIV infections among adults and adolescents (aged 13 years or older) in 2010, despite representing only 12% of the US population; considering the smaller size of the African American population in the United States, this represents a population rate that is 8 times that of whites overall.
- In 2010, men accounted for 70% (14,700) of the estimated 20,900 new HIV infections among all adult and adolescent African Americans. The estimated rate of new HIV infections for African American men (103.6/100,000 population) was 7 times that of white men, twice that of Latino men, and nearly 3 times that of African American women.
- In 2010, African American gay, bisexual, and other men who have sex with men**^b represented an estimated 72% (10,600) of new infections among all African American men and 36% of an estimated 29,800 new HIV infections among all gay and bisexual men. More new HIV infections (4,800) occurred among young African American gay and bisexual men (aged 13-24) than any other subgroup of gay and bisexual men.
- In 2010, African American women accounted for 6,100 (29%) of the estimated new HIV infections among all adult and adolescent African Americans. This number represents a decrease of 21% since 2008. Most new HIV infections among African American women (87%; 5,300) are attributed to heterosexual contact.^c The estimated rate of new HIV infections for African American women (38.1/100,000 population) was 20 times that of white women and almost 5 times that of Hispanic/Latino women.^d

** Referred to as gay and bisexual men in this fact sheet.

Estimates of New HIV Infections in the United States for the Most-Affected Subpopulations, 2010



Source: CDC. Estimated HIV incidence among adults and adolescents in the United States, 2007–2010. HIV Surveillance Supplemental Report 2012;17(4). Subpopulations representing 2% or less are not reflected in this chart. Abbreviations: MSM, men who have sex with men; IDU, injection drug user.

^a New HIV infections refer to HIV incidence, or the number of people who are newly infected with HIV within a given period of time, whether they are aware of their infection or not.

^b The term men who have sex with men (MSM) is used in CDC surveillance systems. It indicates a behavior that transmits HIV infection, not how individuals self-identify in terms of their sexuality.

^c Heterosexual contact with a person known to have, or to be at high risk for, HIV infection.

^d Hispanics/Latinos can be of any race.

^e HIV and AIDS diagnoses indicate when a person is diagnosed with HIV infection or AIDS, but do not indicate when the person was infected.

HIV and AIDS Diagnoses^e and Deaths

- The percentage of African Americans who had ever been tested for HIV increased from 57% during 2003–2006 to 64% during 2007–2010, and was highest among African Americans during both time periods compared to other racial/ethnic groups.
- In 2013, 21,836 African Americans were diagnosed with HIV, comprising the largest percentage (46%) of the estimated 47,352 diagnoses of HIV infection in the United States when viewed by race/ethnicity. The rate of HIV diagnoses among African Americans (55.9/100,000 people) was similarly disproportionate.
- In 2013, an estimated 13,172 African Americans were diagnosed with AIDS in the United States. By the end of 2012, an estimated 270,726 African Americans diagnosed with AIDS had died in the United States.
- From 2008 to 2012, the death rate per 1,000 black/African Americans living with HIV declined 28%—more than the overall decline of 22% seen among all people living with HIV.

Prevention Challenges

African Americans face a number of challenges that contribute to the higher rates of HIV infection. The **greater number of people living with HIV (prevalence)** in African American communities and the fact that African Americans tend to **have sex with partners of the same race/ethnicity** means that they face a greater risk of HIV infection with each new sexual encounter.

African American communities continue to experience higher rates of **other sexually transmitted infections (STIs)** compared with other racial/ethnic communities in the United States. Having an STI can significantly increase the chance of getting or transmitting HIV.

Lack of awareness of HIV status can affect HIV rates in communities. Almost 73,600 HIV-infected people in the African American community in 2011 were unaware of their HIV status. Diagnosis late in the course of HIV infection is common, which results in missed opportunities to get early medical care and prevent transmission to others.

The poverty rate is higher among African Americans than other racial/ethnic groups. The **socioeconomic issues** associated with poverty—including limited access to high-quality health care, housing, and HIV prevention education—directly and indirectly increase the risk for HIV infection, and affect the health of people living with and at risk for HIV. These factors may explain why African Americans have worse outcomes on the **HIV continuum of care**, including lower rates of linkage to care, retention in care, being prescribed HIV treatment, and viral suppression. **Stigma, fear, discrimination, homophobia, and negative perceptions about HIV testing** can also place too many African Americans at higher risk. Many at risk for HIV fear discrimination and rejection more than infection and may choose not to seek testing.

What CDC Is Doing

CDC and its partners are pursuing a High-Impact Prevention approach to advance the goals of the National HIV/AIDS Strategy and maximize the effectiveness of current HIV prevention methods. Activities include:

- Awards to health departments to support the goals of High-Impact Prevention. These awards direct resources to the geographic areas of greatest need and prioritize the HIV prevention strategies that will have the greatest impact on the US epidemic. New funding for National Capacity Building Assistance for High Impact Prevention addresses gaps in each step of the HIV care continuum by providing training and technical assistance for staff of health departments, community-based organizations, and health care organizations. Estimated annual funding will be \$22 million.
- Phases of the **Act Against AIDS** campaign including *Take Charge. Take the Test.* to encourage African American women to get tested for HIV; *Testing Makes Us Stronger*, to increase HIV testing among black gay, bisexual, and other men who have sex with men; and *Let's Stop HIV Together*, to address stigma and raises awareness.
- The **Act Against AIDS Leadership Initiative**, a partnership between CDC and 19 national African American and Hispanic/Latino civil rights and social justice organizations, strengthens HIV prevention efforts in the populations hardest hit by HIV and AIDS.
- The **Care and Prevention in the United States (CAPUS) Demonstration Project** that supports increased testing and optimizes linkage to, retention in, and re-engagement with care and prevention services for newly diagnosed and previously diagnosed racial and ethnic minorities with HIV.
- HIV prevention projects for community-based organizations to provide effective HIV prevention services over 5 years to gay, bisexual, and transgender youth of color and their partners.
- The **MSM Testing Initiative** to establish and evaluate an HIV testing and linkage-to-care program that will identify MSM with HIV who were previously unaware of their infection and link them to HIV medical care.
- Support and technical assistance to health departments and community-based organizations to deliver effective prevention interventions for African Americans, such as **WILLOW, d-up: Defend Yourself!**, and **Mpowerment**.

View the bibliography and other resources.

Additional Resources

CDC-INFO
1-800-CDC-INFO (232-4636)
www.cdc.gov/info

CDC HIV Website
www.cdc.gov/hiv

CDC Act Against AIDS Campaign
www.cdc.gov/actagainstaids