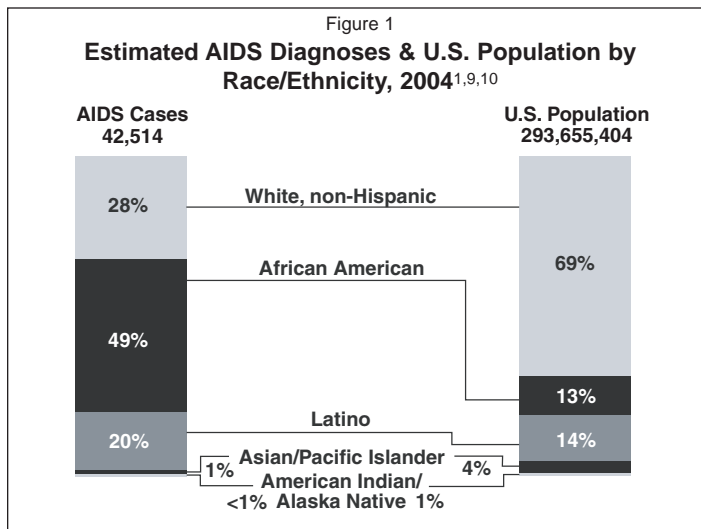


African Americans and HIV/AIDS

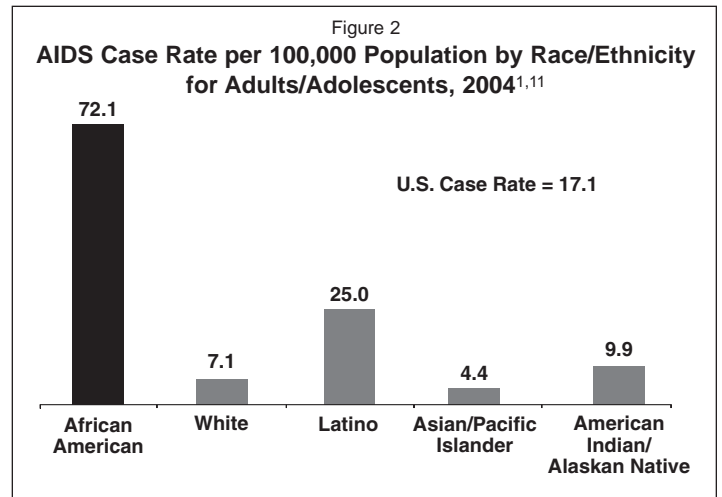
February 2006

African Americans have been disproportionately affected by HIV/AIDS since the epidemic's beginning, and that disparity has deepened over time.^{1,2,3} African Americans account for more AIDS diagnoses, people estimated to be living with AIDS, and HIV-related deaths than any other racial/ethnic group in the U.S.^{1,4} The epidemic has also had a disproportionate impact on subgroups of African Americans including women, youth, and men who have sex with men, and its impact varies across the country. Moreover, African Americans with HIV/AIDS may face greater barriers to accessing care than their white counterparts.^{5,6,7} The Centers for Disease Control and Prevention (CDC) estimates that between 488,000–557,000 African Americans were living with HIV or AIDS in the United States in 2003, a figure which has likely grown since that time.⁸



Snapshot of the Epidemic

- Although African Americans represent only 13% of the U.S. population,¹⁰ they account for 40% of the 944,306 AIDS cases diagnosed since the start of the epidemic and approximately half (49%) of the 42,514 cases diagnosed in 2004 alone (Figure 1).¹ They also account for half of new HIV/AIDS diagnoses in the 35 states/areas with confidential name-based reporting.¹
- The AIDS case rate per 100,000 population among African American adults/adolescents was nearly 10.2 times that of whites in 2004 (Figure 2).^{1,11}
- African-Americans accounted for 55% of deaths due to HIV in 2002⁴ and their survival time after an AIDS diagnosis is lower on average than it is for other racial/ethnic groups.¹
- HIV was the 3rd leading cause of death for African Americans, ages 25–34, in 2002 compared to the 6th leading cause of death for whites and Latinos in this age group. It ranks higher for some subpopulations—HIV was the #1 cause of death for African American women ages 25–34 in 2002.¹²



Key Trends and Current Cases

- African Americans account for a growing share of AIDS diagnoses over time, rising from 25% of cases diagnosed in 1985 to 49% in 2004.^{1,2}
- A recent analysis of 1999–2002 data from a national household survey found that 2.2% of African Americans in the U.S. were HIV positive, higher than other groups and the only group for which prevalence increased significantly over time.³
- Estimated AIDS prevalence among African Americans increased by 35% between 2000 and 2004, compared to a 22% increase among whites.¹
- Deaths among African Americans with AIDS declined by 7% between 2000 and 2004, compared to a 19% decline among whites over this period.¹

Women and Young People

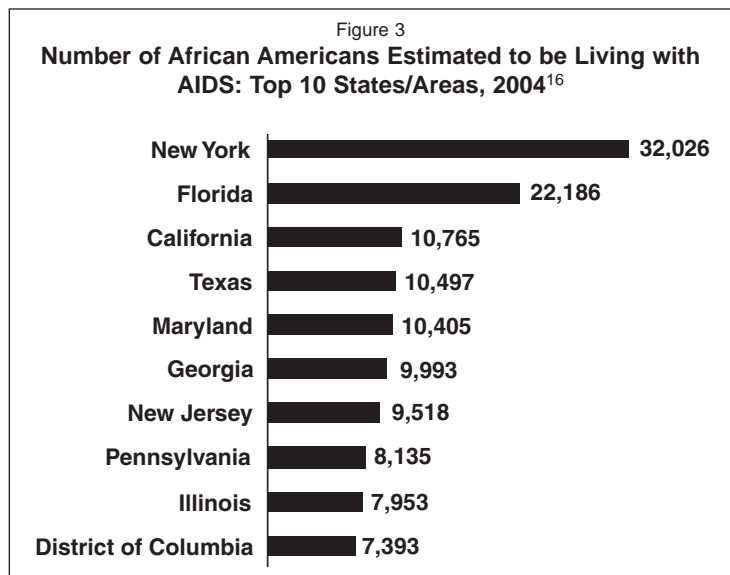
- African American women account for the far majority of new AIDS cases among women (67% in 2004); white women account for 17% and Latinas 15%.^{1,11}
- Among African Americans, African American women represent more than a third (36%) of AIDS cases diagnosed in 2004; by comparison, white women represented 16% of AIDS cases diagnosed among whites in 2004.^{1,11}
- Although African American teens (ages 13–19) represent only 15% of U.S. teenagers, they accounted for 66% of new AIDS cases reported among teens in 2003.¹³ A similar impact can be seen among African American children.¹

Transmission

- HIV transmission patterns among African American men vary from those of white men. Although both groups are most likely to have been infected through sex with other men, white men are almost twice as likely to have been infected this way. Heterosexual transmission and injection drug use account for a greater share of infections among African American men than white men.¹

- Similar proportions of African American and white women are likely to have been infected through heterosexual transmission, the most common transmission route for both groups and for women overall. White women are somewhat more likely to have been infected through injection drug use than African American women.¹
- Among men who have sex with men (MSM), African Americans have been particularly hard hit. A recent study in 5 major U.S. cities found that 46% of African American MSM in the study were infected with HIV, compared to 21% of white MSM and 17% of Latino MSM. Knowledge of HIV status among those already infected was also very low.^{14,15}

- A recent analysis of data from 2000–2002 in 11 HIV primary and specialty care sites in the U.S. found higher rates of hospitalization among African Americans with HIV/AIDS, but differences in outpatient utilization were not significant.⁷
- CDC data indicate that over a third of African Americans with HIV diagnoses (39%) were tested for HIV late in their illness—that is, diagnosed with AIDS within one year of testing positive—in the 35 areas with HIV reporting; a similar proportion of whites (38%) were tested late.¹
- Among the U.S. population overall, African Americans are more likely than whites to report ever having been tested for HIV (67% compared to 44%). However, these self-reported testing rates may be overestimates, since 21% of African Americans assumed that the test was a routine part of an exam.¹⁹
- African Americans are more likely to report that they have talked to both their doctor and their partners about HIV than whites and Latinos. They are also more likely to say they need more information about HIV testing.¹⁹



Geography

Although AIDS cases among African Americans have been reported throughout the country, the impact of the epidemic on African Americans is not uniformly distributed:

- AIDS case rates per 100,000 population for African Americans are highest in the eastern part of the U.S., particularly in the Northeast.^{11,16}
- Over half (51%) of African Americans estimated to be living with AIDS and 55% of newly reported AIDS cases among African Americans in 2004 occurred in the South.^{16,17}
- Estimated AIDS prevalence among African Americans is clustered in a handful of states, with 10 states accounting for 72% of African Americans estimated to be living with AIDS in 2004. New York, Florida, and California top the list (Figure 3).^{16,17} Ten states also account for a majority of newly reported AIDS cases among African Americans (71% in 2004).^{16,17}

Access to and Use of the Health Care System

- The HIV Cost and Services Utilization Study (HCSUS), the only nationally representative study of people with HIV/AIDS receiving regular or ongoing medical care for HIV infection, found that African Americans fared more poorly on several important measures of access and quality than whites; these differences diminished over time but were not completely eliminated.⁵ HCSUS also found that African Americans were more likely to report postponing medical care because they lacked transportation, were too sick to go to the doctor, or had other competing needs.⁶
- According to HCSUS, African Americans with HIV/AIDS were more likely to be publicly insured or uninsured than their white counterparts, with over half (59%) relying on Medicaid compared to 32% of whites. About one fifth of African Americans with HIV/AIDS (22%) were uninsured compared to 17% of whites. African Americans were also much less likely to be privately insured than whites (14% compared to 44%).¹⁸

Concern About HIV/AIDS²⁰

African Americans are concerned about HIV/AIDS, and are the only racial/ethnic group to name it as the number one health problem in the U.S. Most (56%) African Americans say the U.S. is “losing ground” on the domestic AIDS epidemic. Personal concern about becoming infected with HIV is also highest among African Americans, as is concern among African American parents about their children becoming infected. However, the proportion of African Americans saying they are personally concerned about becoming infected has declined since the mid 1990’s.

Conclusion

African Americans have been hard hit by HIV/AIDS and face the brunt of the epidemic’s impact today in the U.S., as reflected in incidence, prevalence, and mortality trends over time. These trends present tremendous challenges to all of those involved in addressing the epidemic in the U.S., including policymakers, community leaders, and public health practitioners.

References

- 1 CDC, *HIV/AIDS Surveillance Report*, Vol. 16, 2005.
- 2 CDC, Data Request, January 2006.
- 3 McQuillan G et al., “The Prevalence of HIV in the United States Household Population: The National Health and Nutrition Examination Surveys, 1988 to 2002,” Abstract #166, *12th Conference on Retroviruses and Opportunistic Infections*, February 2005. Note, among those ages 18–49.
- 4 NCHS, “Deaths: Final Data for 2002,” *NVSR*, Vol. 53, No. 5, October 2004.
- 5 Shapiro MF et al., “Variations in the Care of HIV-Infected Adults in the United States,” *JAMA*, Vol. 281, No.24, 1999.
- 6 Cunningham WE et al., “The Impact of Competing Subsistence Needs and Barriers to Access to Medical Care for Persons with Human Immunodeficiency Virus Receiving Care in the United States,” *Medical Care*, Vol.37, No.12, 1999.
- 7 Fleishman JA et al., “Hospital and Outpatient Health Services Utilization Among HIV-Infected Adults in Care 2000–2002,” *Medical Care*, Vol. 43, No. 9 suppl, 2005.
- 8 Glynn MK, Rhodes P., “Estimated HIV Prevalence in the United States at the End of 2003,” *2005 National HIV Prevention Conference*, June 2005.
- 9 Percentages may not total 100% due to rounding. Total AIDS diagnoses in 2004 include persons of unknown race or multiple races.
- 10 U.S. Census Bureau, Population Estimates Program, 2004 Population Estimates. Population estimates do not include U.S. dependencies, possessions, and associated nations. May not total 100% due to rounding; persons who reported more than one race were included in multiple categories.
- 11 Includes estimated cases among those 13 years of age and older. Estimates do not include U.S. dependencies, possessions, and associated nations, and cases of unknown residence.
- 12 NCHS, “Deaths: Leading Causes for 2002,” *NVSR*, Vol. 53, No. 17, March 2005.
- 13 CDC, *HIV/AIDS Surveillance in Adolescents*, L265 Slide Series (Through 2003).
- 14 CDC, *Fact Sheet: HIV/AIDS Among Men Who Have Sex with Men*, July 2005.
- 15 CDC, “HIV Prevalence, Unrecognized Infection, and HIV Testing Among Men Who Have Sex with Men – Five U.S. Cities, June 2004–April 2005,” *MMWR Weekly*, 54(24), June 24, 2005.
- 16 The Kaiser Family Foundation, www.statehealthfacts.org. Data Source: Centers for Disease Control and Prevention, Division of HIV/AIDS Prevention-Surveillance and Epidemiology, Special Data Request, November 2005.
- 17 Estimates include U.S. dependencies, possessions, and associated nations, and cases of unknown residence.
- 18 Fleishman JA. Personal Communication, Analysis of HCSUS Data, January 2002.
- 19 KFF, “Survey of Americans on HIV/AIDS: Part Two – HIV Testing,” June 2004.
- 20 KFF, “Survey of Americans on HIV/AIDS: Part Three – Experiences and Opinions by Race/Ethnicity and Age,” August 2004.

Prepared by Jennifer Kates and Alicia Carbaugh of the Kaiser Family Foundation. The Kaiser Family Foundation is a non-profit, private operating foundation dedicated to providing information and analysis on health care issues to policymakers, the media, the health care community, and the general public. The Foundation is not associated with Kaiser Permanente or Kaiser Industries.

Additional copies of this publication (#6089-03) are available on the Kaiser Family Foundation’s website at www.kff.org.