HIV/AIDS among Hispanics/Latinos in the United States



9,798 HIV DIAGNOSES

that's how many **Hispanics/Latinos** tested positive for HIV in the US and 6 dependant areas in 2015































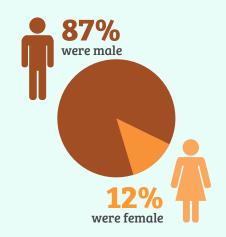


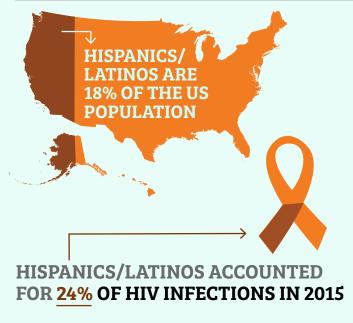


HIV TRANSMISSION CATEGORIES



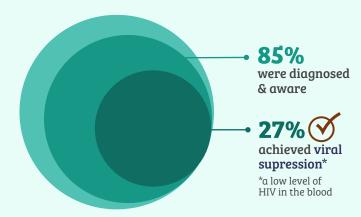
OF THE NUMBER OF HIV CASES FOR HISPANICS/ **LATINOS IN 2015**





MANY ARE NOT RECEIVING MEDICAL CARE

of roughly **215,721** Hispanic/Latinos living with HIV in the US at the end of 2014



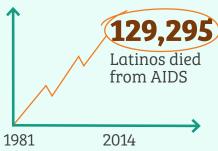
FACTORS THAT LIMIT HEALTH CARE ACCESS FOR HISPANICS/LATINOS

- lack of health insurance
- language barriers
- stigma
- poverty
- · lack of familiarity with the US health care system



waiting to seek care increases the risk of developing **AIDS**

SINCE THE BEGINNING OF THE EPIDEMIC





HIV/AIDS AMONG HISPANICS/LATINOS IN THE UNITED STATES



Hispanic/Latinos in the United States (US) are disproportionately impacted by HIV/AIDS. They represent 18% of the US population yet accounted for almost 1 in 4 (24%) infections among adults and adolescents in 2015.¹ Factors such as lack of health insurance, language barriers, lack of familiarity with the US healthcare system and stigma often limit the health care access of Hispanics/Latinos in the US, thereby limiting opportunities for HIV/AIDS screening and treatment.²-³ Given that Hispanics/Latinos are the largest and fastest growing minority group in the US, addressing HIV/AIDS in their community is important to the nation's health.⁴-⁵

THE FACTS

HIV

- At the end of 2014, about 215,721 Hispanic/Latinos of any race and background were living with diagnosed HIV infection in the US and 6 dependent territories including Puerto Rico.¹
- In 2015 there were 9,798 cases of HIV diagnosed among Hispanics/Latinos in the US and 6 dependent areas, including PR.¹
- Among adult and adolescent Hispanics/Latinos diagnosed with HIV in 2015 approximately 88% (n=8,563) were male, and 12% (n=1,223) were female.¹
- Diagnosed HIV cases among Hispanics/Latinos in the US by place of birth are predominantly from the US (37%; n=3,575), then Mexico (13%; n=1,265), Puerto Rico (8%; n=743), Central America (6%; n=618), South America (6%; n=614) and Cuba (5%; n=509).
- The leading transmission category for HIV diagnosis among adult and adolescent Hispanics/Latinos in 2015 in the US and 6 territories was male-to-male sexual contact, accounting for 74% (n=7,271) and an additional 3% (n=276) attributed to MSM and IDU exposure.¹

- The second highest transmission category was attributed to heterosexual contact among adult and adolescent Hispanic/Latino males and females (17.5%; 1,715).¹
- Many Hispanics/Latinos diagnosed with HIV are not receiving needed care. Of the estimated 263,900 Hispanic/Latino adults and adolescents living with HIV infection in the US and Puerto Rico, at the end of 2013
 - » 85% had been diagnosed
 - » Of the diagnosed ones 54% had achieved "viral suppression" a very low level of HIV in the blood that can help a person stay healthy, live longer and reduce the chance of passing HIV on to others.⁶

AIDS

- Since the beginning of the epidemic, approximately 129,295 Latinos died from AIDS. By the end of 2014 there were 123,897 Hispanic/Latinos living with diagnosed AIDS.¹
- In 2015 there were 4,095 cases of AIDS diagnosed among Hispanics/Latinos in the US and 6 dependent territories, contributing to an estimated 257,515 cumulative AIDS cases diagnosed since the beginning of the epidemic.¹
- Hispanics/Latinos are at significantly greater risk for delayed diagnosis of HIV and AIDS than non-Hispanic whites, with Hispanic/Latino males and foreign-born Hispanic/Latinos at the greatest risk.
- A study done in 2006 found that late or delayed diagnosis of HIV infection is epidemiologically significant and likely to be a major contributor to the ongoing domestic epidemic.⁷

- [1] Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/ hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf
- 2. [2] Latino Commission on AIDS (2008). Shaping the New Response. HIV/AIDS & Latinos in the Deep South. Retrieved from http://www.latinoaids.org/downloads/deepsouthreport.pdf
- [3] Chen, N.E., Gallant, J.E. & Page, R.R. (2012) A systematic review of HIV/AIDS survival and delayed diagnosis among Hispanics in the United States. Journal of Immigrant and Minority health, 14(1), 65-81.
- [4] Unites States Census Bureau (2015, June 8). USA Quick Facts. Retrieved from: http:// quickfacts.census.gov/qfd/states/00000.html
- [5] Center for Disease Control and Prevention (2015, may 5). Minority Health: Hispanic or Latino Populations. Retrieved from http://www.cdc.gov/minorfityhealth/populations/REMP/hispanic.

- 6. [6] Center for Disease Control (2017, February). CDC Fact Sheet HIV among Latinos. Retrieved from: https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/cdc-hiv-latinos-508.pdf
- 7. [7] Marks, G., Crepaz, M. & Janssen, R.S. Estimating sexual transmission of HIV from persons aware and unaware that they are infected with the virus in the USA. Aids, 20(10), 1447-1450.

HIV/AIDS among Hispanic/Latino Men who have sex with Men (MSM)



AMONG HISPANIC/ **LATINO MEN** DIAGNOSED WITH HIV **IN 2014**



85% of cases in 2015 were MSM transmission

MSM REFERS TO ALL MEN WHO HAVE SEX WITH MEN



regardless of sexual identity



gay



bisexual



straight

YOUNG HISPANIC/LATINO MSM HESISTATE TO **TAKE PREP***

due to the lack of affordable access to health care

*PrEP is an HIV prevention pill taken once a day to reduce risk of infection



DIFFERENCES AMONG REGIONS IN THE US EXIST WITH REGARDS TO HIV INFECTION AMONG MSM



numbers are highest in the South & lowest in the Midwest

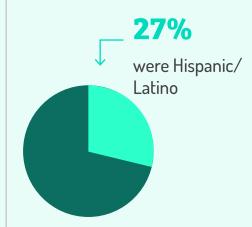
1- south 2– west

4- midwest 5- DA's

IN 2015 HISPANICS/ LATINOS ACCOUNTED **FOR** 1 IN 4

of the **7,159** HIV diagnoses among MSM ages 13-24

AMONG MSM IN THE US DIAGNOSED WITH **HIV IN 2015**



THE NUMBER OF **HISPANIC/LATINO** MSM LIVING WITH HIV

at the end of 2014 in the US

1/3 of Latino **IMMIGRANT MSM HAVE NEVER BEEN TESTED FOR HIV & ARE MORE LIKELY TO:**

- · have sex with men and women
- have less knowledge of HIV risks
- · perceive their sexual behavior as less risky





Hispanic/Latino MSM with HIV in the US in 2014



HIV/AIDS AMONG HISPANIC/LATINO MEN WHO HAVE SEX WITH MEN (MSM)



MSM, or men who have sex with men, refers to all men who have sex with other men, regardless of how they identify themselves (gay, bisexual or heterosexual). MSM have experienced high rates of HIV infection since the beginning of the epidemic. Rising rates for Hispanic/Latino MSM indicate that more support and culturally relevant prevention efforts are needed. Additionally, more research is needed to understand the causes for these higher rates, especially in young MSM (29 years or younger).

THE FACTS¹

- In 2015 an estimated 8,563 adult and adolescent Hispanic/Latino males were diagnosed with HIV infection in the US and 6 dependent territories, including Puerto Rico.
 - » This accounted for 88% of infections among Hispanic/Latino adults and adolescents diagnosed in 2015.1
- Among all Hispanic/Latino males diagnosed with HIV during 2015, male-to-male sexual contact was the most frequent transmission category, accounting for 74% (7,271) or approximately 7.4 out of 10 infections among Hispanic/Latino males.¹
 - » MSM and injecting Drug Use (IDU) transmission account for an additional 3 % (n=276), of diagnosed HIV infection among Hispanic/Latino males.¹
- Among all MSM in the US diagnosed with HIV in 2015, over one in four (27%, n=7271) are Hispanic/Latino.¹
- Differences among regions in the US exist with regards to HIV infection among MSM.
 - » The numbers of HIV diagnosed for Hispanic/Latino MSM (MSM and IDU included) are highest in the South (41%, n=3123), then the West (32%,n=2409), followed by the Northeast (17%,n=1265), Midwest (6%,n=481) and US Dependent Areas (4%,n=271).

than non-Hispanic white men (10.8), with MSM bearing the greatest burden.¹
Hispanics/Latinos account for 24% (n=1721) or about 1 in 4 of the 7159 diagnoses of HIV infections among MSM aged 13-24 in 2015.¹

• The rate (37.4) of diagnosed HIV infections in 2015

among Hispanic/Latino men in the United States (not

including the 6 DA's) is more than three times greater

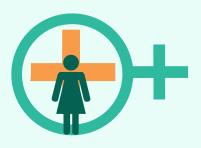
- At the end of 2014, 114,064 Hispanic/Latino MSM were living with diagnosed HIV infection in the US and 6 dependent areas, including Puerto Rico. [1]About 22% or 1 in 5 of the 497,957 MSM living with diagnosed HIV at the end of 2013 were Hispanic/Latino MSM.
- About 22% or 1 in 5 of the 513,045MSM living with diagnosed HIV at the end of 2014 was Hispanic/Latino MSM.¹
- There were 1080 deaths of Hispanic/Latino MSM diagnosed with HIV infection in 2014.¹
- Latino young MSM (YMSM) were more likely than white YMSM to state they would not use PrEP because of side effects concerns. Disparities are linked to educational attainment, income, homelessness and lack of affordable access to health care. These social vulnerabilities may affect YMSM's awareness of and/or willingness to use PrEP.²
- Over one-third of the men have never been tested for HIV. Non-testers are more likely to be men who have sex with men and women, have less knowledge about HIV risks, perceive their sexual behavior as less risky, and deflect HIV-related stigma.³

- Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV
 Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf
- Bauermeister, J.A., Meanly, S., Pingel, E., Soler, J. & Harper, G. (2013). PrEP awareness and perceived barriers among single young men who have sex with men in the United States. Current HIV Research. U.S. National Library of Medicine. Retrieved from: https://www.ncbi.nlm.nih.gov/ pmc/articles/PMC4152728
- Solorio, R., Forehand, M. & Simoni, J. (2013). Attitudes towards and beliefs about HIV testing among Latino immigrant MSM: a comparison of testers and nontesters. AIDS Research and Treatment, Vol 2013(2013), Article ID 563537. Retrieved from: http://dx.doi. org/10.1155/2013/5635371

HIV/AIDS among Hispanic/Latina Women



45,542 HISPANIC/ WERE LIVING WITH **HIV IN THE US AT THE END OF 2014**



1,223 HIV **DÍAGNOSES AMONG** HISPANIC/LATINA **WOMEN IN 2015**















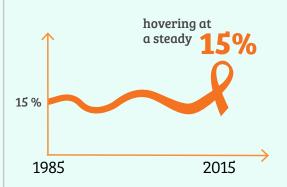








THE PERCENTAGE OF **HISPANIC/LATINA WOMEN** OF ALL WOMEN WITH AIDS IS



PUERTO RICO HAD MORE THAN 2X THE RATE OF HIV DIAGNOSES FOR HISPANIC/LATINA **WOMEN IN 2014**



AND ALMOST 2X THE RATE OF AIDS **DIAGNOSES IN 2015**

LEADING MODES OF HIV TRANSMISSION **AMONG** HISPANIC/LATINA **WOMEN IN 2015**

heterosexual contact **IDU** (injection drug use) 90% 10%

HIV CASES VIA HETEROSEXUAL CONTACT AMONG HISPANIC/LATINA **WOMEN BY PLACE OF BIRTH**



DELAYED HEALTH CARE FOR ADULT HISPANIC **WOMEN/LATINAS DUE TO**







financial struggle



routine testing not followed by providers



unable to access SRH services

Cuba

34:3%

HIV/AIDS AMONG HISPANIC/LATINA WOMEN



In 2015 an estimated 1,223 diagnoses of HIV infection were among Hispanic/Latina females in the United States (US) and 6 dependent areas (DA's) including Puerto Rico. By the end of the year 2014, an estimated 45,542 Hispanic/Latina women were living with a diagnosed HIV infection in the US and 6 DA's. In the US alone (not counting the 6 DA's) the diagnosis rate (per 100,000 population) of HIV infection among adult and adolescent Hispanic/Latina women was 5.3, almost 4 times the rate of non-Hispanic white adult and adolescent women (1.6).¹

THE FACTS

- In 2015 Hispanic/Latina adult and adolescent women comprised 20% of the female population in the US² and 16% of diagnosed HIV infections in women.¹
- Heterosexual contact accounted for 90% (n=1,096) of diagnosed HIV infections among Hispanic/Latina adult and adolescent women, compared to 68% (n=968) in non-Hispanic white women and 92% (n=4,146) in non-Hispanic African-American women in 2015 in the US and 6 DA's.¹
- In 2015, injection drug use (IDU) was the second most common mode of HIV transmission among adult and adolescent women in the US and 6 DA's¹
 - » 10% (121) of HIV infections diagnosed among adult and adolescent Hispanic/Latina women in 2015 were attributed to IDU, compared to 8% (363) in non-Hispanic African-American women and 32% (458) in non-Hispanic white women.¹
- 15% (684) of women with Stage 3 (AIDS) in 2015 were Hispanic/Latina.¹

Differences across location:

• The percentages of HIV diagnosed in 2015 among Hispanic/Latina women were highest in the South (41%, n=505) followed by the Northeast (26%, n=322), the West (20%, n=248), U.S. dependent areas (8%, n=92), and the Midwest (4.6%, n=56).¹

- The percentages of Stage 3/AIDS diagnoses in 2015 among Hispanic/Latina women were highest in the South (39%, n=268) followed by the Northeast (32%, n=221), the West (17%, n=113), U.S. dependent areas (8%, n=52), and the Midwest (4%, n=30).¹
- Differences in the diagnoses of HIV infection among adult and adolescent Hispanic/Latina women were noted by place of birth in 2015. Latinas born in the U.S. were the largest group representing 34% (n=413), followed by the ones born in Puerto Rico 12% (n=143), Mexico 10% (n=123), Central America 9% (n=105), South America 4% (n=48) and Cuba 3% (n=34).
- Adult and adolescent women in Puerto Rico are disproportionately impacted by the HIV/AIDS epidemic. For example:
 - » The rate of adult and adolescent women living with diagnosed HIV infection year-end 2014 was 326.6/100,000 in Puerto Rico, compared to 171.0/100,000 across all US and 6 DA's.
 - » The rate of stage 3/AIDS classification among adult and adolescent women with HIV infection in 2014 was 179.2/100,000 in Puerto Rico, compared to 91.6/100,000 in the US and 6 DA's.³

RISK FACTORS

- Uninsured and underinsured Hispanic/Latina women face several barriers in accessing quality healthcare, including HIV testing and/or treatment.⁴
- For many adult women, including Hispanic/Latina women, the health of their family is a high priority that can often take precedence over personal health due to time, financial resources, and competing responsibilities (i.e. work, school, childcare, etc.). This may result in some Hispanic/Latina women delaying primary care and or/women's sexual and reproductive health care (including HIV/STI testing) until there is a pressing need or an emergency.⁵

Clinical Infectious Diseases, Vol 45; Issue Supplement 4: S255-S260. Retrieved from: http://cid.oxfordjournals.org/content/45/Supplement 4/S255.long

 National Hispanic Caucus of State Legislators (2006). A growing concern: HIV/AIDS and other STD's. Retrieved from: http://www.nhcsl.org/healthcare/2006-2.html

Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV
 Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf

Gandara, P. & The White House Initiative on Educational Excellence for Hispanics (2015).
 Fulfilling America's future: Latinas in the U.S., 2015. Retrieved from: https://sites.ed.gov/hispanic-initiative/files/2015/09/Fulfilling-Americas-Future-Latinas-in-the-U.S.-2015-Final-Beneat pdf

Center for Disease Control (2014). HIV Surveillance in Women. Retrieved from: https://www.cdc. gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-women.pdf

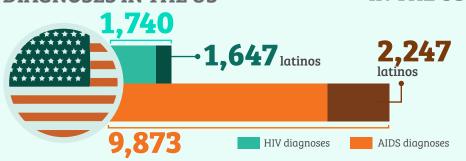
^{4.} Kates, J. & Levi, J. (2007). Insurance coverage and access to HIV testing and treatment: considerations for individuals at risk for infection and for those with undiagnosed infection.

HIV/AIDS among Hispanic/Latino Youth



HISPANIC/LATINO YOUTH WERE 23% OF THE HIV **DIAGNOSES IN THE US**

AND 20% OF THE **AIDS DIAGNOSES** IN THE US



HISPANIC/LATINO YOUTH ARE MORE LIKELY TO HAVE SEX **AT A YOUNGER AGE** THAN NON-HISPANIC WHITE YOUTH



AND LESS LIKELY TO USE CONDOMS WITH HIGHER RATES OF UNEXPECTED PREGNANCY DUE **TO EARLY SEXUAL** ACTIVITY



*sexually transmitted infections

THE HIV DIAGNOSIS RATE FOR HISPANIC/LATINO YOUTH INCREASED FROM 2010 TO 2015



COMMUNICATION BETWEEN HISPANIC/ LATINO TEENS AND PARENTS IS VITAL AND IS **ASSOCIATED WITH**

- later age of sexual debut
- lower rates of sexual activity
- less risky sexual behavior
- lower rates of pregnancy



HISPANIC/ **LATINO YOUTH FACE LANGUAGE BARRIERS AND** DISCRIMINATION



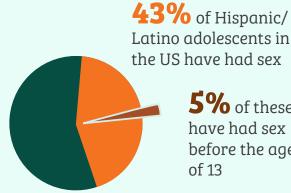
of HIV infection

THERE IS A LACK OF MEDICALLY **ACCURATE SEX EDUCATION IN** PUBLIC SCHOOLS



medical providers are hesistant to discuss sex and sexuality in many states

ADOLESCENTS ARE AT RISK OF CATCHING HIV THROUGH STI'S BY HAVING SEX EARLIER & WITH OLDER PARTNERS



5% of these have had sex before the age of 13



HIV/AIDS AMONG HISPANIC/LATINO YOUTH



Hispanic/Latino Youth are at considerable risk for HIV.¹ On average, Hispanic/Latino adolescents engage in sexual debut at an earlier age compared to their non-Hispanic white counterparts and are less likely to use condoms consistently. These factors result in higher rates of unintended pregnancy and risk of sexually transmitted infection (STI) including HIV.²

THE FACTS

- In 2015 an estimated 9,000 youth aged 24 years and younger were diagnosed with HIV in the United States and 6 dependent territories: Hispanic/Latino youth represented 23% (2,041) of the diagnosis compared to 17% (1,524) non-Hispanic white youth.³
- In 2015, an estimated 1,529 youth ages 24 and younger were classified with stage 3/AIDS in the US and 6 dependent territories. Hispanic/Latino youth represented 21% (316) of the classification compared to 11.4% (175) non-Hispanic white youth.³
- Among male adolescents and youth between the ages of 13 and 24 years living with a diagnosis of HIV infection year-end 2014 in the United States and 6 dependent areas, 21% (7,998) were Hispanic/Latino compared to 13.7% (5,248) non Hispanic white.³
- CDC defines adolescents as being between the ages of 13 and 19 and young adults as being between the ages of 20 and 24.3

RISK FACTORS

 Age: Adolescence is on itself a risk factor. Youth with an early age of sexual debut are at higher risk for STIs, including HIV. Other risk factors include having older

- sexual partners, and more lifetime partners.⁴ Furthermore, STIs place an individual at higher risk for acquiring HIV.^{4,5} According to data from the recently released Youth Risk Behavioral Survey (YRBS) 2015, 43% of Latino adolescents in the United States have had sexual intercourse compared to 40% of their non-Hispanic white counterparts; of these 5% had engaged in sexual intercourse prior to the age of 13 twice the percentage of non-Hispanic white youth (2.5%).⁶
- Cultural stressors: Latino youth living in the United States are exposed to social and structural stressors, including discrimination and language barriers that make them more vulnerable to engaging in risky behaviors that increase the risk of HIV acquisition.⁷
- Lack of comprehensive, medically accurate sex education: State-by-state variation in mandated comprehensive and medically accurate sexual health education within the public school system exists in the US.8 Furthermore, medical providers may be hesitant to discuss sex and sexuality with youth.9
- Lack of communication with parents/adult caregivers:
 Parents in the US often feel uncomfortable discussing sex with their children. Studies indicate that communication between teens and their parents is associated with delayed age of sexual debut, lower rates of sexual activity, less risky behavior, and lower rates of teen pregnancy.

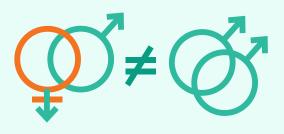
- Lescano, C.M., Brown, L.K., Rafaelli, M. & Lima, L. (2009). Cultural factors and family-based HIV prevention intervention for Latino youth. Journal of Pediatric Psychology, 34(10): 1041-1052.
 Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2773531/
- United States Census Bureau. (n.d.). Table 10 projections on the population by sex, Hispanic origin, and race for the United States: 2015 to 2060. 2014 National Population Projections:
 Summary Tables. Retrieved from: https://www.census.gov/population/projections/data/national/2014/summarytables.html
- Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV
 Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf
- Center for Disease Control and Prevention. (2014, December 16). 2013 sexually transmitted diseases surveillance – STDs in adolescents and young adults. Retrieved from: http://www.cdc. gov/std/stats13/adol.htm
- Center for Disease Control and Prevention. (2013l). CDC Fact Sheet: Information for Teens and Young Adults: Staying Healthy and Preventing STDs. Retrieved from: https://www.cdc.gov/std/ life-stages-populations/stdfact-teens.htm

- 6. Centers for Disease Control and Prevention. (2016). Youth Risk Behavior Surveillance, United States 2015. Retrieved from: https://www.cdc.gov/healthyyouth/data/yrbs/pdf/2015/ss6506_updated.pdf
- 7. Vo, D. & Park, M. (2008). Racial/Ethnic disparities and culturally competent health care among youth and young men. American Journal of Men's Health, 2(2), 192-205
- 8. Guttmacher Institute (2012). Facts on American Teens' Sources of Information about sex. February 2012. Retrieved from: http://www.guttmacher.org/pubs/FB-Teen-Sex-Ed.html
- Martinez, G., Abma, J. & Casey, C. (2010). Educating teenagers about sex in the United States, NCHS Data Brief. 2010. no 44.

HIV/AIDS among Latina Transgender Women who have sex with Men



MALE TO FEMALE (MTF) TRANS WOMEN WHO **HAVE SEX WITH MEN ARE HISTORICALLY** CATEGORIZED AS MSM IN **HIV DATA**



TRAN WOMEN ARE DENIED HEALTH **CARE DUE TO** DISCRIMINATION



TRANS WOMEN MAY **ENGAGE IN SEX WORK** DUE TO THE STIGMA THEY FACE FROM LEGAL **EMPLOYMENT**



risking exposure to HIV

IT IS IMPOSSIBLE TO CALCULATE THE RATE OF HIV TRANSMISSION AMONG TRANS WOMEN



by the US Census Bureau

HISPANIC/LATINO TRANS WOMEN ARE MORE AT RISK FOR HIV TRANSMISSION THAN NON-HISPANIC WHITE TRANS WOMEN



TRANSPHOBIC STIGMA & DISCRIMINATION **LEADS TO RISKY**



DRUG USE INCREASES RISK OF HIV TRANSMISSION AMONG TRANS WOMEN



ANOTHER RISK FACTOR IS HORMONE INJECTION* FOR GENDER TRANSITIONING





HIV/AIDS AMONG LATINA TRANSGENDER WOMEN WHO HAVE SEX WITH MEN



Male to female (MTF) transgender women who have sex with men are historically categorized as MSM within HIV surveillance data. Demonstrating the disproportionate impact of HIV among MTF transgender women is not possible as calculating the rate of transmission requires a population estimate of gender identity, which is not accounted for by the US Census Bureau. A recent study estimated that about .3% of the population or 700,000 individuals in the US identified as transgender and noted that urban metropolitan cities are more likely to experience larger population sizes. ¹ Trans-women of color (Black and Hispanic/Latino) are at an increased risk of HIV compared to Caucasian trans-women. ²

THE FACTS

- A lack of research exists that fully explains the multiple HIV risk factors among MTF trans-women of any race or ethnicity. For example, studies found that stigma and discrimination due to transphobia contribute to the risk taking behaviors of trans-women, including their ability to negotiate safer sex.³⁻⁵
- Drug use is correlated to an HIV diagnosis among trans-women. ⁶ Studies found drug use associated with lowering their inhibitions, increasing risky sexual practices, and a mal-adaptive coping mechanism associated with the stress of gender transition. ⁷⁻⁸
- Another potential risk factor is the injection of hormones. Many trans-women lack proper health insurance to assist them with their gender transition

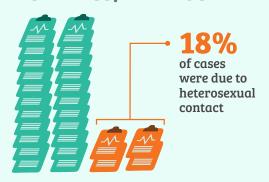
- and gender reassignment services. The injection of hormones, silicone, collagen or other substances thought to assist in their gender transition without medical supervision is predictive of testing HIV positive. 9-10
- Survival sex is another concern that increases the risk of HIV among trans-women. Many trans-women rely on the need to engage in paid sex work because they are unable to gain sustainable legal employment due to stigma and discrimination.¹¹
- A lack of engagement in health care due to being stigmatized also compounds the HIV risks of transwomen.¹² More alarming is a study that found many trans-women were denied health care access due to discrimination.¹³
- Likewise, for trans-women who are living with HIV/AIDS, it is essential that they be engaged in health care to achieve virologic suppression by remaining engaged in care and adherent to HIV antiretroviral treatment. Unfortunately, trans-women are more likely to experience discrimination accessing health services, and less likely than non-transgender people to be on treatment.¹⁴ This further compounds early diagnosis of HIV infection and access to treatment, which area linked to better health outcomes and reduced transmission of HIV to sexual partners.¹⁵
- Gates, G. J. (2011). The Williams Institute: How Many People are Lesbian, Gay, Bisexual and Transgender?
- Nemoto, T., Operario, D., Keatley, J., Han, L., & Soma, T. (2004). HIV risk behaviors among male-to-female transgender persons of color in San Francisco. American Journal of Public Health. 94(7), 1193-1199.
- Green, J., & Brinkin, L. (1994). Investigation into discrimination against transgendered people.
 Available from the Human Rights Commission, City and County of San Francisco, 25, 94102-6033.
- Nemoto, T., Luke, D., Mamo, L., Ching, A., & Patria, J. (1999). HIV risk behaviours among maleto-female transgenders in comparison with homosexual or bisexual males and heterosexual females. AIDS care. 11(3), 297-312
- Sugano, E., Nemoto, T., & Operario, D. (2006). The impact of exposure to transphobia on HIV risk behavior in a sample of transgendered women of color in San Francisco. AIDS and Behavior, 10(2), 217-225
- Clements-Nolle, K., Marx, R., Guzman, R., & Katz, M. (2001). HIV prevalence, risk behaviors, health care use, and mental health status of transgender persons: Implications for public health intervention. American journal of public health, 91(6), 915.
- Bockting, W. O., Robinson, B. E., & Rosser, B. R. S. (1998). Transgender HIV prevention: A qualitative needs assessment. AIDS Care, 10(4), 505-525.
- Nemoto, T., Operario, D., Keatley, J., Han, L., & Soma, T. (2004). HIV risk behaviors among male-to-female transgender persons of color in San Francisco. American Journal of Public Health. 94(7). 1193-1199.

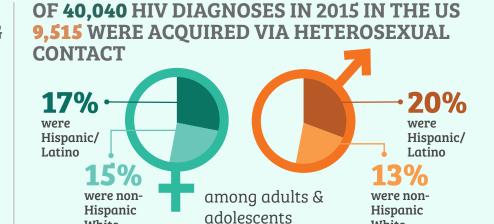
- 9. Reback, C. J., & Lombardi, E. L. (1999). HIV risk behaviors of male-to-female transgenders in a community-based harm reduction program. International Journal of Transgenderism, 3(1), 2.
- Clements-Nolle, K., Marx, R., Guzman, R., & Katz, M. (2001). HIV prevalence, risk behaviors, health care use, and mental health status of transgender persons: Implications for public health intervention. American journal of public health, 91(6), 915
- 11. Ibid
- 12. Feinberg, L. (2001). Trans health crisis: for us it's life or death. American Journal of Public Health, 91(6), 897.
- Kenagy, G. P. (2005). Transgender health: Findings from two needs assessment studies in Philadelphia. Health & Social Work, 30(1), 19-26
- 14. Melendez, R. M., Exner, T. A., Ehrhardt, A. A., Dodge, B., Remien, R. H., Rotheram-Borus, M. J., ... & Hong, D. (2006). Health and health care among male-to-female transgender persons who are HIV positive. American Journal of Public Health. 96(6). 1034-1037
- Cohen, M. S., Chen, Y. Q., McCauley, M., Gamble, T., Hosseinipour, M. C., Kumarasamy, N., ... & Godbole, S. V. (2011). Prevention of HIV-1 infection with early antiretroviral therapy. New England journal of medicine, 365(6), 493-505.

HIV/AIDS among Heterosexual **Hispanic/Latinos**



THERE WERE 9,798 HIV **DIAGNOSES IN 2015 AMONG HISPANICS/LATINOS**





HETEROSEXUAL HISPANIC/LATINA WOMEN ARE AT HIGHER RISK THAN MEN



of the **1,223** hiv cases FOR HISPANIC/LATINA **WOMEN IN 2015**



9 IN 10 were due to heterosexual contact

of the 8,563 hiv cases FOR HISPANIC/LATINO **MEN IN 2015**



1 IN 14were due to heterosexual contact

MANY HISPANIC/LATINA **WOMEN ARE UNAWARE OF** THEIR MALE PARTNER'S SEXUAL HISTORY

White

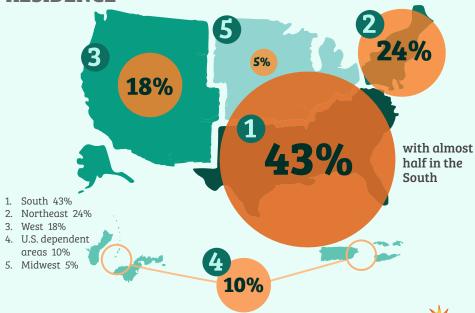


STI'S INCREASE THE RISK OF HIV INFECTION

White



FOR HETEROSEXUAL HISPANICS/LATINOS, **HIV INFECTION IN 2015 VARIES BY REGION OF** RESIDENCE



HIV/AIDS AMONG HETEROSEXUAL HISPANIC/LATINOS



The information provided below is in regards to adult and adolescent cisgender Latinos/Hispanics who report being sexually active with the opposite sex. Unless otherwise specified, all facts are inclusive of the United States and six dependent areas. Women have a higher risk of HIV exposure from a male partner via receptive sexual intercourse (vaginal, anal) compared to males engaging in insertive sexual intercourse with female partners.

THE FACTS1

- There were a total of 9,798 diagnoses of HIV infection in 2015 among Hispanic/Latinos: 18% of the infections were attributed to heterosexual contact.¹
- Twenty percent (619) of all diagnosed HIV infections in 2015 acquired via heterosexual contact among adult and adolescent males were in Latino /Hispanic males compared to 13% (381) non-Hispanic white males.
- Seventeen percent (1,096) of all diagnosed HIV infections in 2015 acquired via heterosexual contact among adult and adolescent females were Latina/ Hispanic females compared to 15% (968) non-Hispanic white females.¹
- Of the 8,563 diagnosed HIV infections in 2015 among adult and adolescent Hispanic/Latino males, 7% were attributed to heterosexual contact. Of the 1,223 diagnosed HIV infections in 2015 among adult and adolescent Latina/Hispanic females 90% were attributed to heterosexual contact.¹
- Among Hispanic/Latinos in the U.S. and 6 DA's, contracting HIV through heterosexual contact varies by region of residence. Of the 1,715 cases of diagnosed HIV in 2015 attributed to heterosexual contact in Hispanic/Latina women, an estimated 280 (16%) reside in the Northeast, 52 (3%) in the Midwest, 460 (27%) in the South, 260 (15%) in the West and 86 (5%) in the U.S. dependent areas.¹
- [1] Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/ hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf
- 2. [2] Center for Disease Control and Prevention (2015). HIV among Hispanics/Latinos. Retrieved from: https://www.cdc.gov/hiv/group/racialethnic/hispaniclatinos/index.html
- [3] Marin, B.V. & Marin, G. (1990) Acculturation differences in Hispanic condom use. Int. Conf AIDS 1990 Jun 20-23; 6:105 (abstract no. S.C. 37). UCSF Center for AIDS Prevention Studies, San Francisco, California, USA.
- [4] Smith, S.J. (2017). Condoms, culture and conviction: the effect of acculturation and religiosity on Latina condom use during first sex with new partners. Social Work in Public Health, 32(3), 176-191

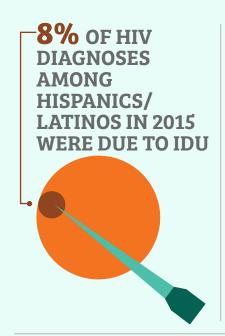
RISK FACTORS

Heterosexual Hispanics/Latinos confront several obstacles when it comes to preventing HIV infection and seeking treatment once infected.

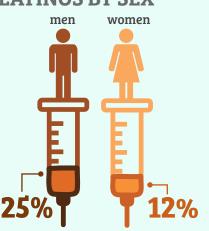
- » Hispanics/Latinos have relatively high rates for STIs compared to some other races/ethnicities, including chlamydia, gonorrhea, and syphilis. Research shows that the presence of another STI makes it easier to become infected with HIV.²
- » Country of origin and number of years living in the United States, and religiosity are important factors in acquiring HIV/AIDS knowledge and condom use.^{3,4}
- » Region of residence in the United States is an important factor in acquiring HIV infection through Heterosexual contact.¹

HIV/AIDS among Hispanic/Latino **Injection Drug Users (IDU)**

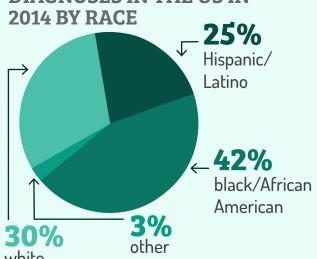




THE PERCENTAGE OF IDU-RELATED HIV **POSITIVE HISPANICS/** LATINOS BY SEX



IDU-RELATED HIV DIAGNOSES IN THE US IN **2014 BY RACE**



HISPANICS/LATINOS IN THE **35-44** AGE **GROUP WERE MOST** AFFECTED BY IDU-**RELATED HIV**



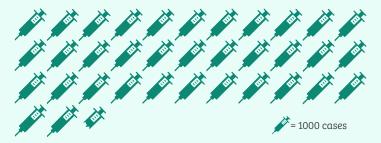
IDU-RELATED HIV DIAGNOSES AMONG HISPANICS/LATINOS BY REGIONS IN THE US



numbers are highest in the South & lowest in the Midwest

- 1-South
- 2– Northeast
- 3– West
- 4– Dependant Areas
- 5– Midwest

THERE WERE **36,565** IDU-RELATED HIV CASES AMONG HISPANICS/ LATINOS IN THE US AT 2014 END



THERE WERE **964** DEATHS AMONG HISPANICS/LATINOS WITH IDU-RELATED HIV LIVING IN THE US AT **2014 END**



representing **25%** of all deaths among those with IDU-related HIV



HIV/AIDS AMONG HISPANIC/LATINO INJECTION DRUG USERS (IDU)



From 2010 through 2014, the annual number of HIV diagnoses among adults and adolescents attributed to IDU in the United States (US) and 6 dependent areas decreased, and slightly increased in 2015. From the 40,040 estimated HIV diagnoses among adults and adolescents in 2015, injecting drug use (IDU) accounted for about 5% of cases among males (or 8% if we include male-to-male sexual contact and IDU) and 13% among females, regardless of race/ethnicity. IDU remains an HIV transmission category that continues to impact Hispanics/Latinos in the United States and dependent territories.¹

THE FACTS

- Approximately 8% (785) of HIV diagnoses among Hispanics/Latino adult and adolescents in 2015 were attributed to injection drug use, including 276 of cases among MSM and IDU.¹
- Of the HIV diagnoses attributed to IDU in the US and 6 dependent territories in 2015, 21% (785) were among Hispanics/Latinos, 32% (1,164) were among Blacks/ African Americans, and 42% (1,557) were among Whites.¹
- In 2015, about 25% (388) of 1,474 males and 12% (121) of 986 females diagnosed with HIV infection among IDU persons were Hispanic/Latino.¹
- Differences among regions in the US exist in regard to HIV infection among persons with IDU
 - » Number of HIV diagnoses attributed to IDU for Hispanics/Latinos are the highest in the South, then the Northeast, West, US Dependent Territories, and Midwest.¹
- Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/ hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf
- Center for Disease Control and Prevention (2015). HIV Surveillance Persons who Inject Drugs. Retrieved from: https://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-persons-who-inject-drugs-2015.pdf

- With regard to HIV infections related to IDU, Hispanics/ Latinos accounted for 20% among the 13-19 age group, 24% among the 20-24 age group, 26% among the 25-34 age group, 29% among the 35-44 age group, and 20% among the over 45 years of age group.¹
- At the end of 2014, approximately 964 deaths occurred among Hispanic/Latino persons diagnosed with HIV infection exposed via IDU. This represented 25% of all deaths among those with HIV due to IDU at the end of 2014.^{1,2}
- An estimated 36,565 Hispanic/Latino persons were living with diagnosed HIV exposed via IDU in the US and 6 dependent areas by the end of 2014. This number is greater if we include Hispanic MSM and IDU (11,311), for a total of 47,876.^{1,2}
- Among Hispanics/Latinos in the US and 6 DA's, diagnoses of contracting HIV through IDU (not including male to male sex and IDU combined) varies by place of birth. Hispanics/Latinos born in the US bear the greatest burden among IDU (52%; 193 cases) compared to those born in Puerto Rico (27%; 98 cases), Mexico (12%; 46 cases), Central America (5%; 17 cases), South America (3%; 12 cases) and Cuba (1%; 3 cases).¹

HIV/AIDS among Hispanic/Latinos

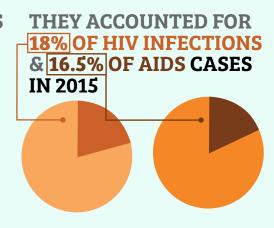
Ages 50+

YOU'RE A SUPERHERO.-USE YOUR SUPERPOWERS.

84,874 HISPANICS/ LATINOS AGES 50+ WERE LIVING WITH HIV AT THE END OF 2014







HISPANICS/ **LATINOS AGES 50+** UNDERESTIMATE THEIR HIV RISK DUE TO THEIR AGE



OF THE ESTIMATED **437,671** PERSONS **AGES 50+ DIAGNOSED** WITH AIDS BY THE END OF 2014 **37%** were **19%** nonwere / Hispanic Hispanics/ white Latinos 39% were

non-Hispanic black/African American

MANY HISPANICS/ **LATINOS AGES 50+** PRIORITIZE URGENT HEALTH CONCERNS OVER SEXUAL HEALTH



due to their lack of access to quality affordable healthcare

STIGMA AMONG HIV POSITIVE **HISPANICS/LATINOS AGES 50+** PREVENTS THEM FROM DISCUSSING SEXUALITY WITH OTHERS



THERE IS A LACK OF QUALITY SERVICES FOCUSED ON THE NEEDS OF BILINGUAL **OLDER LGBT PEOPLE, & OLDER MEN & WOMEN WHO HAVE SEX WITH MEN**





HIV/AIDS AMONG HISPANIC/LATINOS AGES 50+



THE FACTS

- Approximately 45% of all people living with HIV by the end of 2014 are over the age of 50.¹ As the US population ages and mortality from HIV decreases, it is estimated that 65% of all people living with HIV will be over 50 in the next few years.²
- In the United States and 6 dependent territories there were an estimated 6,891 diagnoses of HIV infection in 2015 among all adults older than 50 and an estimated of 5,320 diagnoses of new cases of Stage 3 AIDS.
- Hispanics/Latinos older than 50 years old are overrepresented in the group of new diagnoses of HIV compared to their size in the general population. Although accounting roughly 11% of the total US and PR population aged 50 and older,² Hispanics/Latinos in this age range comprise an estimated 19% (1,281) of diagnoses of HIV, and an estimated 16% (878) of the new diagnoses of Stage 3 AIDS during 2015.¹
- An estimated 84,874 Hispanic/Latino adult ages 50 and over were living with HIV by the end of 2014 in the US and 6 dependent areas, representing 19% of the total number of cases (437, 671), compared to 37% non-Hispanic White and 39% non-Hispanic Black/African American individuals.¹
- Of the estimated 283,687 persons aged 50 and older with diagnosed HIV infection ever classified as Stage 3 AIDS in the year 2014, 21% (59,465) were Hispanic/Latinos, 39% (109,729) were non-Hispanic Black/African American and 35% (100,659) were non-Hispanic white.¹

THE TAKEAWAY

- » 1 in every 10 older adults living in the US is Hispanic/Latino²
- » 1 in every 5 new HIV infections is Hispanic/Latino¹
- » 1 in every 5 older adults living with HIV is Hispanic/Latino¹

RISK FACTORS

 Risk factors for HIV are complex, and are heightened by the process of aging and magnified by social determinants of health. The following risk factors related to aging may complicate HIV prevention, transmission and treatment.

- 1. Biological changes: Thinning of the vaginal walls and decreased lubrication leave older women at increased risk for HIV infection during sexual intercourse.
- 2. Mental health: higher levels of depression and depressive symptoms are found in older adults compared to those under the age of 50, and in older adults living with HIV.
- 3. Decreased socialization/increased isolation often occurs as one ages, and friends, family members and other support network become less accessible, infirm, or pass away.³
- Social determinants of health such as poverty, geographic location and educational attainment may act as barriers to accessing quality, comprehensive healthcare, remaining in treatment, and/or adhering to a healthcare regimen, including medications. Knowledge and awareness may vary – older adults may not have had access to or given knowledge related to sexuality, sexual health and/or reproduction that may strengthen prevention efforts.³
- Individual-level factors, such as assessment of one's risk, also play a role. Older adults may underestimate their risk for HIV because of their age (i.e. "I am too old to become infected"). Competing morbidities also influence behaviors and outcomes: older Latinos, like all older adults, experience the effects of the aging process and resulting morbidities. However, Latinos without health insurance or access to affordable quality healthcare may forgo sexual and reproductive health (SRH) in order to give priority to more urgent and immediate health concerns.³
- Community-level factors such as stigma and discrimination: Older adults experience barriers related to discussing sexuality with providers, partners, family members and other members of their communities including shame and fear. Ageism is a source of discrimination, where younger individuals and groups may judge the older individuals and groups with disdain. A lack of culturally-responsive and quality services that focus on the needs of non-English speaking or bi-lingual seniors, older LGBT, older men who have sex with men (MSM) and older women who have sex with men (WSM) leave these individuals at risk.³

Center for Disease Control (2015). HIV Surveillance Report, Volume 27. Diagnoses of HIV
 Infection in the United States and Dependent Areas, 2015. Retrieved from https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2015-vol-27.pdf

in the United States: April 1, 2010 to July 1, 2015. (2015). Retrieved from: http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk

^{3.} Center for Disease Control: HIV among people aged 50 and over (2016). Retrieved from: https://www.cdc.gov/hiv/group/age/olderamericans/index.html