



HIV/AIDS Awareness and Prevention in the Hispanic and Latino/a/e/x communities

December, 2021.

THE CONTEXT: WHAT IS HIV?

According to the CDC¹, HIV stands for human immunodeficiency virus. It weakens a person's immune system by destroying important cells that fight disease and infection. If HIV is not treated, it can lead to AIDS (acquired immunodeficiency syndrome), which is the final stage of an HIV infection when the body is unable to fend off disease.

The National Institutes of Health (NIH) states, infection happens primarily when people inject drugs and share needles, or other drug equipment and/or when people have unprotected sex with a partner who is already infected.²

THE TREATMENT OF HIV/AIDS

As stated by the CDC¹, there is currently no effective cure for HIV. Once people get HIV, they have it for life. But with proper medical care, HIV can be controlled. People with HIV who get effective HIV treatment can live long, healthy lives and protect their partner(s).

The treatment for HIV involves taking medicine that reduces the amount of HIV in your body, this medicine is called antiretroviral therapy (ART). Some of the benefits of taking HIV medicine every day as prescribed, is that the treatment reduces the amount of HIV in the blood, helps to prevent transmission to others, and helps prevent drug resistance.³

SUBSTANCE USE DISORDER (SUD) AND HIV

Substance Use Disorder can increase the risk of getting HIV and negatively impact HIV care, treatment, and related health outcomes. The prevalence of substance use among people with HIV is also higher than among the general population according to SAMHSA.⁴

Research suggests that substance use, including alcohol, methamphetamine, cocaine, opioids, and inhalants, increases sexual behaviors associated with the increased likelihood of getting HIV (e.g., condomless sex).⁴

MENTAL HEALTH AND HIV

SAMHSA also reports mental illness can interfere with HIV prevention, and adherence to treatment. Mental illness is also linked to behaviors that increase the likelihood of contracting HIV.

People with HIV may experience high rates of depression, mood disorders, and generalized anxiety disorder. An estimated 10 to 28 percent of people with HIV have a co-occurring mental illness and/or SUD.⁴

References

1 [CDC: HIV Basics](#)

2 [NIH: What's the relationship between drug use and viral infections?](#)

3 [CDC: Living with HIV](#)

4 [SAMHSA: Prevention and Treatment of HIV Among People Living with SUD and/or Mental Disorders](#)

5 [OMH: HIV/AIDS and Hispanic Americans](#)

6 [CDC: HIV and Hispanic/Latino People](#)

In addition to depression and anxiety, trauma and post-traumatic stress disorder (PTSD) are strongly associated with HIV, as experiences of trauma among people with HIV can lead to behavior that increases likelihood of transmitting HIV, lower adherence to HIV care and ART, and higher likelihood of AIDS-related mortality.⁴

HIV/AIDS INFECTION AMONG HISPANIC AND LATINO/A/E/X COMMUNITIES

The Hispanic and Latino/a/e/x communities experience significant disparities in access to treatment in the areas of substance use disorder and mental health. Compounding, often co-occurring diagnoses, impact communities of color specifically Latino/a/e/x individuals as it relates to HIV.

According to the Office of Minority Health (OMH):⁵

- Hispanic Americans account for almost 30 percent of all HIV infection cases in 2019.
- Hispanic males are four times as likely to have either HIV infection or AIDS as compared to white males.
- Hispanic females are four times as likely to have AIDS in 2019 as compared to white females.
- Hispanic men are twice as likely as non-Hispanic white men to die of HIV infection.
- Hispanic women are three times as likely as non-Hispanic white women to die of HIV infection.

Risk factors and challenges in the Latino/a/x community

There are several challenges that place some Hispanic/Latino/a/e/x people at higher risk for HIV. Below you will find some of the issues identified by the CDC.⁶

Knowledge of HIV Status: People who don't know they have HIV can't get the care they need and may transmit HIV to others without knowing it.

Racism, HIV Stigma, and Homophobia: These social and structural issues can negatively impact risk-taking behaviors, knowledge of HIV status, HIV care, and other needed services for many Hispanic/Latino/a/e/x people.

Sexually Transmitted Diseases (STDs): Hispanic/Latino/a/e/x people have higher rates of other STDs. Having another STD can increase a person's chance of contracting or transmitting HIV.



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Access to HIV Prevention and Treatment Services: Immigration status, poverty, migration patterns, lower educational level, and language barriers may make it harder for some Hispanic/ Latino/a/e/x people to receive HIV services.

THE PREVENTION SOLUTION

As reported by the CDC's Division of HIV Prevention⁷, from 2015 to 2019, new HIV diagnoses declined 7% among Hispanic/Latina women, and 11% among young Hispanic/Latino gay and bisexual men. While this progress indicates the success of focused efforts, there is still great deal more work to do.

The *Ending the HIV Epidemic in the U.S.* (EHE) is an operational plan developed by agencies across the U.S. Department of Health and Human Services (HHS). Their aim as of 2019 was to end the HIV epidemic in the United States by 2030. It is everyone's job to promote education and prevention on HIV/AIDS.⁸

Here are some ways you can contribute to be part of the solution.

Get tested for HIV⁹: Knowing your HIV status gives you the opportunity to start your treatment right away. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or remain virally suppressed) can stay healthy for many years and have effectively no risk of transmitting HIV to their sex partners.

Advocate against HIV stigma: Engage in conversations to raise awareness around HIV testing and treatment, talk openly about the issue with your friends and family, to start eliminating the stigma that is present sometimes in our own households.

There are some steps you can take encompassed in the harm reduction spectrum to protect yourself from HIV.

Choose less risky sexual behaviors⁹: HIV is mainly spread by having anal or vaginal sex without a condom or without taking medicines to prevent or treat HIV. Make sure you will use condoms every time you have sex and that you are using it correctly.

Limit your number of sexual partners⁹: The more partners you have, the more likely you are to have a partner with poorly controlled HIV or to have a partner with a sexually transmitted disease (STD). Both of these factors can increase the risk of HIV.

Get tested and treated for STDs⁹: Insist that your partners get tested and treated, too. Having an STD can increase your risk of getting HIV or spreading it to others.

Learn about pre-exposure prophylaxis (PrEP)¹⁰: PrEP is an HIV prevention option for people who do not have HIV but who are at risk of getting HIV because their sexual partner has HIV (especially if is an unknown or detectable viral load), or have not consistently used a condom, or have been diagnosed with a STD in the past 6 months.

PrEP is also recommended for people without HIV who use drugs and have an injection partner with HIV, or share needles, syringes, or other equipment to inject drugs.

PrEP should also be considered for people without HIV who have been prescribed non-occupational post-exposure prophylaxis (nPEP) and report continued risk behavior, or have used multiple courses of PEP.

Do not inject drugs⁹: But if you do, use only sterile drug injection equipment and water, and never share your equipment with others.

You can visit the following websites for additional support and information.

SAMHSA's National Helpline
Toll-Free: 1-800-662-HELP (24/7/365)
Treatment Referral Information Service in English and Español)
Website: <http://www.samhsa.gov/find-help/national-helpline>

SAMHSA's Disaster Distress Helpline
Toll Free: 1-800-985-5990 (español e inglés)
Text in Spanish: Envíe "Háblanos" al 66746
Text in English: "TalkWithUs" al 66746
(TTY): 1-800-846-8517
English: <https://www.samhsa.gov/find-help/disaster-distress-helpline>
Spanish: <https://www.samhsa.gov/disaster-distress-helpline/espanol>

National Suicide Prevention Lifeline
Toll Free: 1-888-628-9454
English: 1-800-273-TALK (8255)
(TTY): 1-800-799-4TTY (4889)
Spanish: <https://suicidepreventionlifeline.org/help-yourself/en-espanol/>
English: <http://www.suicidepreventionlifeline.org>

SAMHSA Behavioral Health Treatment Services Locator Sitio
Web: <https://findtreatment.gov>

HIVinfo.nih.gov
<https://hivinfo.nih.gov/home-page>

Find HIV Self-Testing Services Near You
<https://www.cdc.gov/hiv/basics/hiv-testing/hiv-self-tests.html>

Please check the resources highlighted on the right side of this page. Together we can educate, prevent and advance on Ending the HIV Epidemic in the U.S (EHE).

References

- ⁷ [CDC: Division of HIV Prevention](#)
- ⁸ [HIV.gov: Ending the HIV Epidemic in the U.S](#)
- ⁹ [NIH: The Basics of HIV Prevention](#)
- ¹⁰ [Pre-Exposure Prophylaxis \(PrEP\)](#)

Click here to learn about more about the [National Hispanic and Latino Prevention Technology Transfer Center](#)