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HIV prevention presents unique challenges for African-Americans

Overview

Among diseases that disproportionately affect African-Americans, HIV/AIDS has had a particularly devastating effect. At every stage — from HIV diagnosis through the death of persons with AIDS — the hardest-hit racial or ethnic group is African-Americans. Overall, even though African-Americans make up only approximately 13 percent of the U.S. population, one-half of the estimated new numbers of HIV/AIDS diagnoses in the United States in 2004 were for African-Americans [1].

How are HIV and AIDS affecting African-Americans?

Of all racial and ethnic groups in the United States, HIV and AIDS have hit African-Americans the hardest. The reasons are not directly related to race or ethnicity, but rather to some of the barriers faced by many African-Americans [2].



Heterosexual Transmission

African-American women are most likely to be infected with HIV as a result of sex with men. They may not know of their male partners' possible risks for HIV infection, such as unprotected sex with multiple partners, bisexuality, or injection drug use. In a study of HIV-infected persons, 34 percent of African-American MSM reported having had sex with women, even though only 6 percent of African-American women reported having had sex with a bisexual man.

Because of the stigma of homosexuality, a significant number of African-American MSM identify themselves as heterosexual. As a result, they may not relate to prevention messages crafted for men who identify themselves as homosexual [3].

Substance Use

Injection drug use is the second leading cause of HIV infection for African-American women and the third leading cause of HIV infection for African-American men. In addition to being at risk from sharing needles, casual and chronic substance users are more likely to engage in high-risk behaviors, such as unprotected sex, when they are under the influence of drugs or alcohol. Drug use can also affect treatment success. A recent study of HIV-infected women found that women who used drugs, compared with women who did not, were less likely to take their antiretroviral medicines exactly as prescribed [3].

Sexually Transmitted Diseases

The highest rates of sexually transmitted diseases (STDs) are those for African-Americans. In 2004, African-Americans were about 19 times as likely as whites to have gonorrhea and about six times as likely to have syphilis. The presence of certain STDs can increase the chances of contracting HIV three- to five-fold. Similarly, a person who has both HIV and certain STDs has a greater chance of spreading HIV to others [3].

Socioeconomic Issues

In 1999, nearly one in four African-Americans was living in poverty. Studies have found an association between higher AIDS incidence and lower income. The socioeconomic problems associated with poverty, including limited access to high-quality health care and HIV prevention education, directly or indirectly increase HIV risk [3].

- Sources: 1. <http://www.cdc.gov/hiv/topics/aa/print/index.htm>.
2. <http://www.cdc.gov/hiv/topics/aa/print/affecting.htm>.
3. <http://www.cdc.gov/hiv/topics/aa/print/numbers.htm>.

