

HIV/AIDS in the United States

(updated June 2021)



HIV/AIDS in the United States

This educational packet is a curated compilation of resources on HIV/AIDS in the United States.

The contents of this packet are listed below:

- HIV in the United States and Dependent Areas (CDC)
- El VIH en los Estados Unidos y Áreas Dependientes (CDC)
- Basic Statistics (CDC)
- Estadísticas Básicas (CDC)
- HIV in the United States by Region (CDC)
- Ending the HIV Epidemic – A Plan for America (CDC)
- CDC's Progress in Ending the HIV Epidemic Initiative (CDC)

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HIV in the United States and Dependent Areas

Of the **37,968 NEW HIV DIAGNOSES** in the US and dependent areas* in 2018:



were among gay and bisexual men^{†‡}

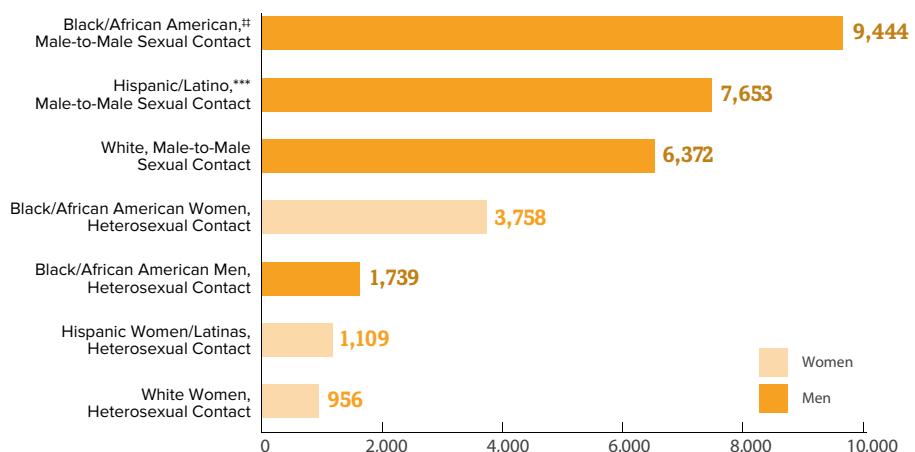


were among heterosexuals^{**}



were among people who inject drugs^{†‡}

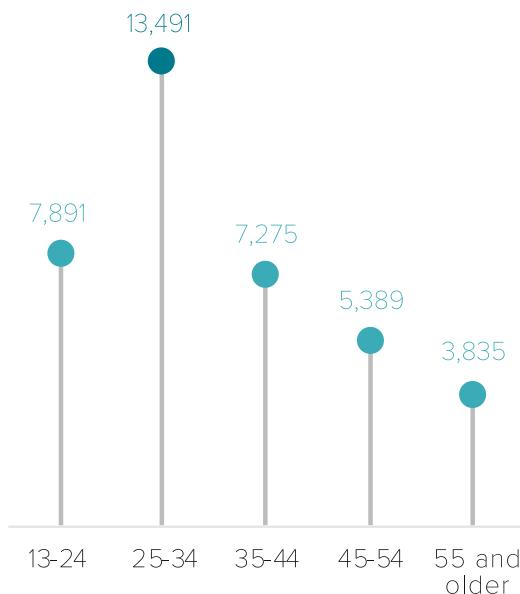
Gay and bisexual men are the population most affected by HIV.



Subpopulations representing 2% or less of all people who received an HIV diagnosis in 2018 are not represented in this chart.

There are also differences in HIV diagnoses by age. People aged 13 to 34 made up more than half of all new HIV diagnoses in 2018.

The number of new HIV diagnoses was highest among people aged 25 to 34.

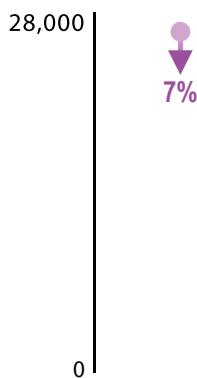


**From 2014 to 2018, HIV diagnoses decreased 7% among adults and adolescents overall.
However, annual HIV diagnoses have increased among some groups.**



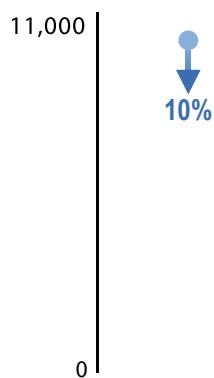
Gay and bisexual men

● 2014 ▲ 2018



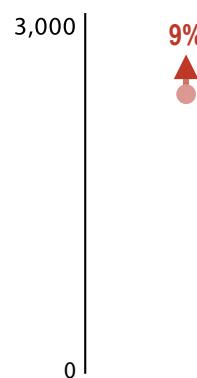
Heterosexuals

● 2014 ▲ 2018



People who inject drugs

● 2014 ▲ 2018



Not all people with HIV are getting the care and treatment they need.



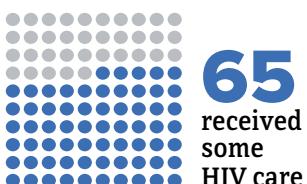
At the end of 2018, an estimated **1.2 MILLION AMERICANS** had HIV. ^{†††}

6 in 7
knew they had the virus.



It is important for people to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or stay virally suppressed) can live a long and healthy life. They also have effectively no risk of transmitting HIV to HIV-negative sex partners.

Although more than half of adults and adolescents with HIV are virally suppressed, more work is needed to increase these rates. For every **100 adults and adolescents with HIV in 2018**:



* American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

[†] Includes infections attributed to male-to-male sexual contact *and* injection drug use (men who reported both risk factors).

[‡] This fact sheet uses the term *gay and bisexual men* to represent gay, bisexual, and other men who reported male-to-male sexual contact.

^{**} Does not include heterosexuals who reported injection drug use.

^{††} Does not include infections attributed to male-to-male sexual contact *and* injection drug use (men who reported both risk factors).

^{‡‡} *Black* refers to people having origins in any of the black racial groups of Africa. *African American* is a term often used for Americans of African descent with ancestry in North America.

^{***} Hispanics/Latinos can be of any race.

^{†††} In 50 states and the District of Columbia.

For more information about HIV surveillance data, read the “Technical Notes” in the HIV surveillance reports at www.cdc.gov/hiv/library/reports/hiv-surveillance.html.

For more information visit www.cdc.gov/hiv

El VIH en los Estados Unidos y áreas dependientes

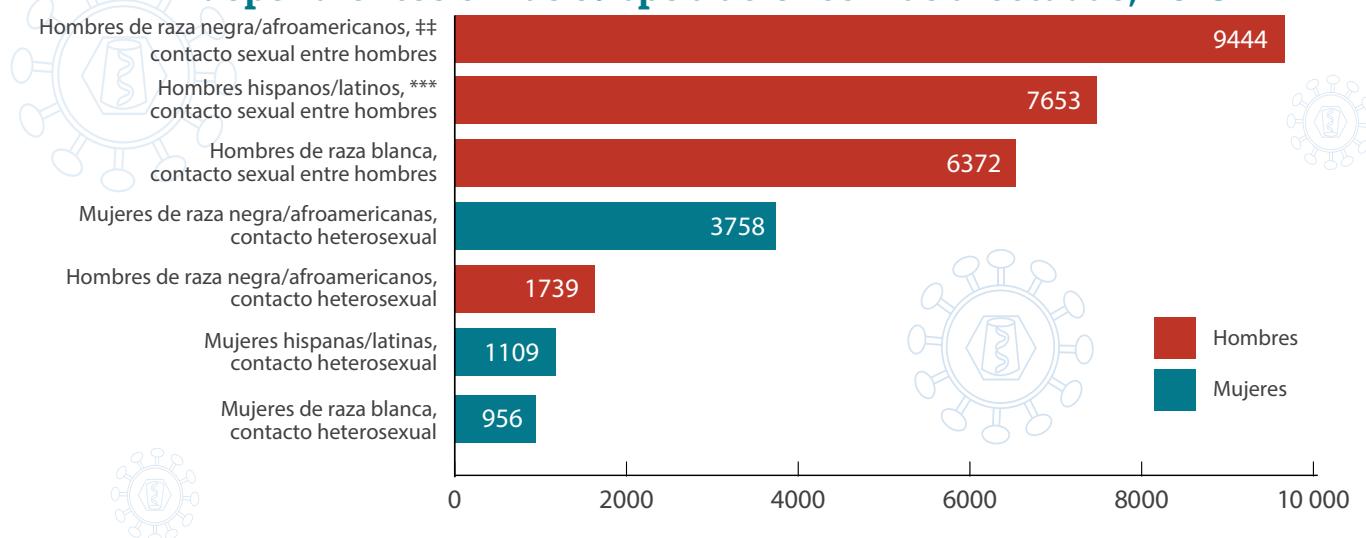
DE LOS 37 968 DIAGNÓSTICOS NUEVOS DE INFECCIÓN POR EL VIH EN LOS EE. UU. Y ÁREAS DEPENDIENTES* EN EL 2018:

69 % FUERON ENTRE HOMBRES GAIOS Y BISEXUALES†‡

24 % FUERON ENTRE PERSONAS HETEROSEXUALES**

7 % FUERON ENTRE PERSONAS QUE SE INYECTAN DROGAS (PWID)††

Diagnósticos nuevos de infección por el VIH en los EE. UU. y áreas dependientes en las subpoblaciones más afectadas, 2018



Entre el 2014 y el 2018, la cantidad de diagnósticos de infección por el VIH bajó un 7 % en general. Pero las tendencias variaron en distintos grupos de personas:

Hombres gais y bisexuales: † bajó un 7 %



Personas heterosexuales: ** bajó un 10 %



Personas que se inyectan drogas: †† subió un 9 %



* Samoa Estadounidense, Guam, Islas Marianas del Norte, Puerto Rico, la República de Palau y las Islas Vírgenes de los EE. UU.

† Incluye las infecciones atribuidas al contacto sexual entre hombres y consumo de drogas inyectables (hombres que indicaron tener ambos factores de riesgo).

‡ En esta hoja informativa se usa el término *hombres gais y bisexuales* para representar a los hombres gais y bisexuales y a otros hombres que tienen relaciones sexuales con hombres.

** No incluye a las personas heterosexuales que indicaron consumir drogas inyectables.

*** No incluye las infecciones atribuidas al contacto sexual entre hombres y consumo de drogas inyectables (hombres que indicaron tener ambos factores de riesgo).

†† De raza negra se refiere a las personas que tienen sus orígenes en alguno de los grupos raciales negros de África, incluidos los inmigrantes del Caribe, Sudamérica y América Latina. Afroamericano/a es un término que a menudo se usa para referirse a los estadounidenses de ascendencia africana que tienen ancestros en América del Norte. Las personas podrían identificarse con uno de los términos, con ambos o elegir una identidad totalmente diferente.

**** Los hispanos o latinos pueden ser de cualquier raza.

††† En los 50 estados y el Distrito de Columbia.

Aproximadamente 1.2 millones de personas en los EE. UU. tienen el VIH.^{††} Las personas que tienen el VIH necesitan saberlo para que puedan tomar los medicamentos y tratar esta infección. Tomar los medicamentos para el VIH según lo indicado puede reducir la cantidad de virus en el cuerpo a niveles muy bajos (lo cual se llama supresión viral) o incluso a niveles indetectables.

A FINES DEL 2018, UNA CANTIDAD ESTIMADA DE
1 173 900
PERSONAS TENÍA EL VIH.^{††}

6 DE CADA 7
SABÍAN QUE TENÍAN EL VIRUS.

De cada 100 personas con el VIH en el 2018:^{†††}

65

recibió algo de atención médica para el VIH

50

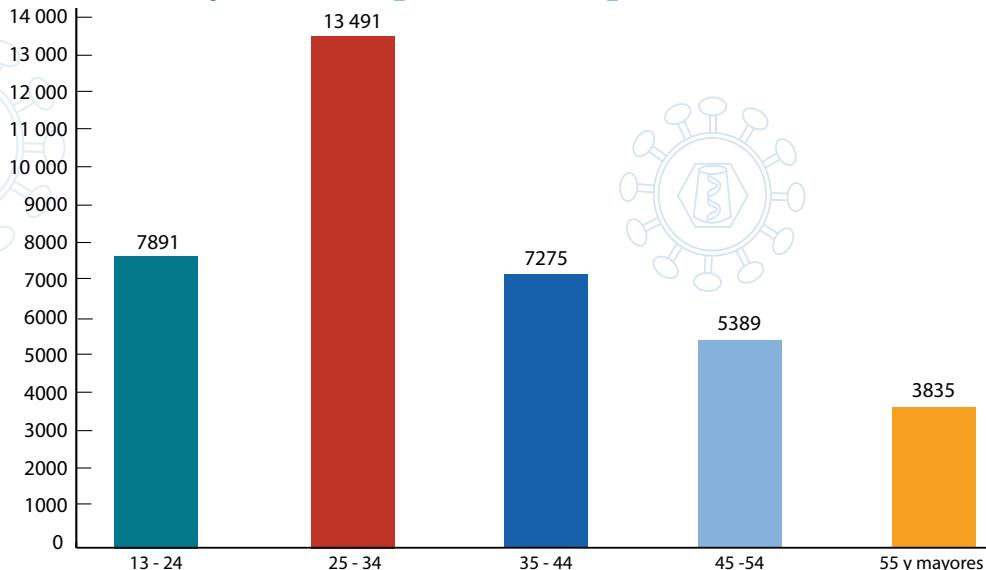
se mantuvieron bajo atención médica

56

habían logrado la supresión viral

Las personas con la infección por el VIH que toman los medicamentos según las indicaciones, y que logran y mantienen la supresión viral o niveles de carga viral indetectables, pueden mantenerse sanas, y no tienen efectivamente ningún riesgo de transmitir sexualmente el virus a sus parejas VIH negativas.

Diagnósticos nuevos de infección por el VIH en los EE. UU. y áreas dependientes por edad, 2018



Reduzca su riesgo al

- No tenga relaciones sexuales
- Use condones
- No comparta jeringas
- Tome medicamentos para prevenir o tratar el VIH



EL VIH ES UN VIRUS QUE ATACA AL SISTEMA INMUNITARIO DEL CUERPO.

Generalmente se transmite mediante las relaciones sexuales anales o vaginales, o al compartir jeringas con una persona que tiene el VIH. La única manera de saber que tiene el VIH es haciéndose la prueba. Todas las personas de 13 a 64 años deberían hacerse la prueba al menos una vez, y aquellas en alto riesgo deberían hacérsela al menos una vez al año. Pregúntele a su médico o visite gettested.cdc.gov/es para encontrar un lugar donde hagan las pruebas. Sin tratamiento, el VIH puede hacer que una persona esté muy enferma o puede incluso causarle la muerte. Si usted tiene el VIH, comience el tratamiento lo antes posible para mantenerse sano y ayudar a proteger a sus parejas.

Para obtener más información

Llame al 1-800-CDC-INFO (232-4636)
Visite www.cdc.gov/hiv/spanish

Basic Statistics

CDC [cdc.gov/hiv/basics/statistics.html](https://www.cdc.gov/hiv/basics/statistics.html)



How many people receive an HIV diagnosis each year in the United States and 6 dependent areas?

In 2018, 37,968 people received an HIV diagnosis in the United States and dependent areas.^a The annual number of new diagnoses decreased 7% from 2014 to 2018.

^a American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

How many people have HIV in the United States?

An estimated 1.2 million people in the United States^a had HIV at the end of 2018, the most recent year for which this information is available. Of those people, about 14%, or 1 in 7, did not know they had HIV.

^a In the 50 states and the District of Columbia.

How does HIV affect different groups of people?

There are different ways to answer this question.

In 2018, gay, bisexual, and other men who have sex with men^a accounted for 69% of all new HIV diagnoses in the United States and 6 dependent areas.^{b,c} In the same year, heterosexuals made up 24% of all HIV diagnoses.

New HIV Diagnoses in the US and Dependent Areas by Transmission Category, 2018

Source: CDC. [Diagnoses of HIV infection in the United States and dependent areas, 2018 \(updated\)](#). *HIV Surveillance Report* 2020;31.

If we look at HIV diagnoses by race and ethnicity, we see that Blacks/African Americans are most affected by HIV. In 2018, adult and adolescent Blacks/African Americans accounted for 42% of all new HIV diagnoses. Additionally, Hispanics/Latinos are also strongly affected. They accounted for 27% of all new HIV diagnoses.

New HIV Diagnoses in the US and Dependent Areas by Race/Ethnicity, 2018

*Black refers to people having origins in any of the black racial groups of Africa. African American is a term often used for Americans of African descent with ancestry in North America.

†Hispanics/Latinos can be of any race.

Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2018 (updated). HIV Surveillance Report 2020;31.

The most affected subpopulation is Black/African American gay and bisexual men.

New HIV Diagnoses in the US and Dependent Areas for the Most-Affected Subpopulations, 2018

Subpopulations representing 2% or less of all people who received an HIV diagnosis in 2018 are not represented in this chart.

*Black refers to people having origins in any of the black racial groups of Africa. African American is a term often used for Americans of African descent with ancestry in North America.

†Hispanics/Latinos can be of any race.

Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2018 (updated). HIV Surveillance Report 2020;31.

There are also variations by age. Young people aged 13 to 24 are especially affected by HIV. In 2018, young people accounted for 21% of all new HIV diagnoses. All young people are not equally at risk, however. Young gay and bisexual men accounted for 83% of all new HIV diagnoses in people aged 13 to 24 in 2018 (includes young gay and bisexual men who inject drugs). Young Black/African American gay and bisexual men are even more severely affected, as they represented 42% of new HIV diagnoses among young gay and bisexual men.

CDC's fact sheets explain the impact of HIV on various populations in the United States.

^a The term *male-to-male sexual contact* is used in CDC surveillance systems. It indicates a behavior that transmits HIV infection, not how individuals self-identify in terms of their sexuality. This web content uses the term *gay and bisexual men*.

^b American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

^c Includes infections attributed to male-to-male sexual contact *and* injection drug use (men who reported both risk factors).

How many deaths are there among people with HIV?

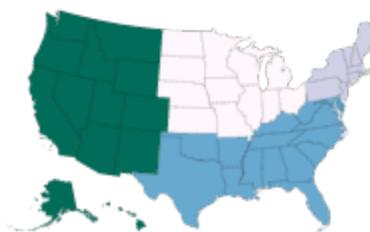
In 2018, there were 15,820 deaths among adults and adolescents with diagnosed HIV in the United States and 6 dependent areas.^a These deaths may be due to any cause.

^a American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

Do some parts of the country have more HIV than other parts?

Yes. HIV is largely an urban disease, with most cases occurring in metropolitan areas with 500,000 or more people. The South has the highest *number* of people living with HIV, but if population size is taken into account, the Northeast has the highest rate of people living with HIV. (Rates are the number of cases of disease per 100,000 people. Rates allow number comparisons between groups of different sizes.)

People with Diagnosed HIV in the US and Dependent Areas by Region of Residence, 2018



Regions

- Midwest
- Northeast
- South
- U.S. Dependent Areas
- West

Data Table: People with Diagnosed HIV by Region of Residence

Location	Number	Rate per 100,000 people
Midwest	122,844	179.8
Northeast	235,944	420.5
South	463,643	371.6
U.S. Dependent Areas	16,526	459.8
West	203,313	260.7

What about HIV around the world?

HIV disease continues to be a serious health issue for parts of the world. Worldwide, there were about 1.7 million new cases of HIV in 2018. About 37.9 million people were living with HIV around the world in 2018, and 24.5 million of them were receiving medicines to treat HIV, called antiretroviral therapy (ART). An estimated 770,000 people have died from AIDS-related illnesses since the start of the epidemic. Sub-Saharan Africa is the region most affected by HIV and AIDS worldwide, and accounts for about 61% of all new HIV infections. Other regions significantly affected by HIV and AIDS include Asia and the Pacific, Latin America and the Caribbean, Eastern Europe, and Central Asia.

Estadísticas Básicas

 [cdc.gov/hiv/spanish/basics/statistics.html](https://www.cdc.gov/hiv/spanish/basics/statistics.html)



ESTADÍSTICAS BÁSICAS

*Personas de raza negra se refiere a personas que tienen orígenes en cualquiera de los grupos raciales negros de África. Afroamericano es un término utilizado a menudo para los estadounidenses de ascendencia africana con ascendencia en América del Norte.

†Las personas hispanas o latinas pueden ser de cualquier raza.

Las subpoblaciones que representan el 2 % o menos de todas las personas que recibieron un diagnóstico de infección por el VIH en el 2018 no se presentan en este gráfico.

Fuente: CDC. [Diagnósticos de infección por el VIH en los Estados Unidos y áreas dependientes, 2018 \(Actualizado\)](#). *Informe de vigilancia del VIH* 2020;31.

También hay variaciones por edad. Las personas jóvenes de entre 13 y 24 años se vieron particularmente afectadas por el VIH. En el 2018, las personas jóvenes representaron el 21 % de todos los diagnósticos nuevos. Sin embargo, no todas las personas jóvenes tienen el mismo nivel de riesgo. Los hombres gais y bisexuales jóvenes representaron el 83 % de todos los diagnósticos nuevos entre personas de 13 a 24 años de edad en el 2018 (esto incluye a aquellos que se inyectan drogas) y los hombres gais y bisexuales afroamericanos se vieron incluso más gravemente afectados, ya que representaban el 42 % de los nuevos diagnósticos del VIH entre hombres jóvenes homosexuales y bisexuales.

[Las hojas informativas de los CDC](#) explican el impacto que tiene el VIH en varias poblaciones de los Estados Unidos.

^a En los sistemas de vigilancia de los CDC se usa la frase *hombres que tienen contacto sexual con hombres*. Indica una conducta que transmite la infección por el VIH y no la manera en que las personas se autodefinen en términos de su sexualidad. En este sitio web se usa el término *hombres gais y bisexuales*.

^b Samoa Estadounidense, Guam, Islas Marianas del Norte, Puerto Rico, la República de Palau y las Islas Vírgenes de los EE. UU.

^c Incluye las infecciones atribuidas al contacto sexual entre hombres y el consumo de drogas inyectables (hombres que indicaron tener ambos factores de riesgo).

¿Cuántas muertes hay entre las personas con el VIH?

En el 2018, hubo 15 820 muertes entre los adultos y adolescentes con diagnóstico de infección por el VIH en los Estados Unidos y 6 áreas dependientes.^a Estas muertes pudieron deberse a cualquier causa.

^a Samoa Estadounidense, Guam, Islas Marianas del Norte, Puerto Rico, la República de Palau y las Islas Vírgenes de los EE. UU.

¿Hay más casos de infección por el VIH en algunas partes del país que en otras?

Sí. El VIH es en gran parte una enfermedad urbana; la mayoría de los casos ocurren en áreas metropolitanas con poblaciones de 500 000 personas o más. El Sur es la región que tiene la mayor *cantidad* de personas con infección por el VIH, pero si se tiene en cuenta el tamaño de la población, el Noreste tiene la tasa más alta de personas infectadas. (Las tasas son la cantidad de casos de enfermedad por cada 100 000 personas. Permiten hacer comparaciones entre grupos de diferentes tamaños).

El VIH en los Estados Unidos por región es una hoja informativa que explica la geografía del VIH en los Estados Unidos.

¿Cuáles son las cifras de infección por el VIH en el mundo?

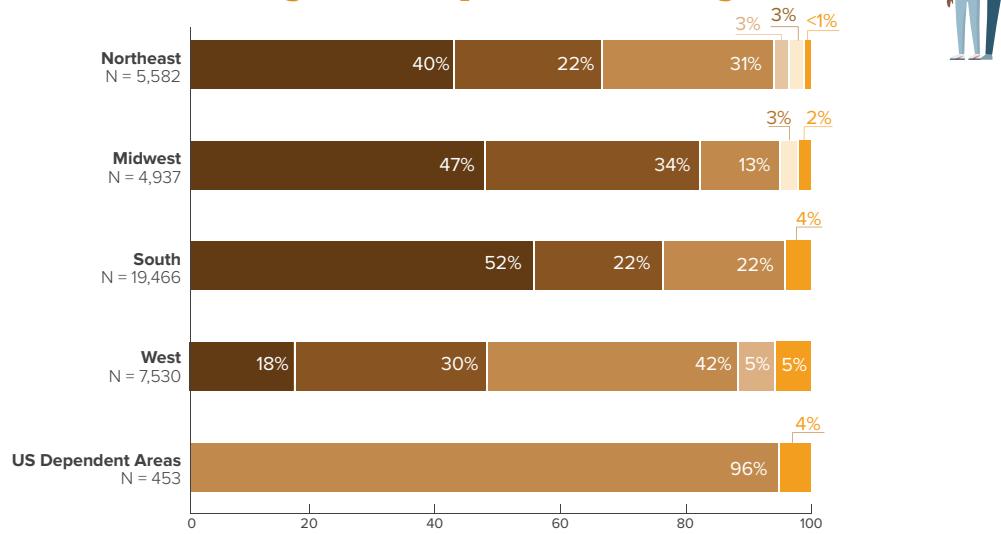
La enfermedad por el VIH sigue siendo un problema grave de salud en algunas partes del mundo. La cifra de casos nuevos de infección por el VIH en todo el mundo fue aproximadamente 1.7 millones en el 2018. Alrededor de 37.9 millones de personas en todo el mundo tenían el VIH en el 2018, y 24.5 millones de ellas estaban recibiendo medicamentos, llamados terapia antirretroviral (TAR), para tratar el virus. También en el 2018, murió una cantidad estimada de 770 000 personas por enfermedades relacionadas con el SIDA. La región del África subsahariana, que tiene la mayor carga de VIH/SIDA en todo el mundo, representa el 61% de todas las infecciones nuevas por el VIH. Otras regiones que están significativamente afectadas por el VIH/SIDA son las de Asia y el Pacífico, América Latina y el Caribe, y Europa Oriental y Asia Central.

HIV in the United States by Region

51%

Of the **37,968 NEW HIV DIAGNOSES** in the US and dependent areas* in 2018, 51% were in the South.

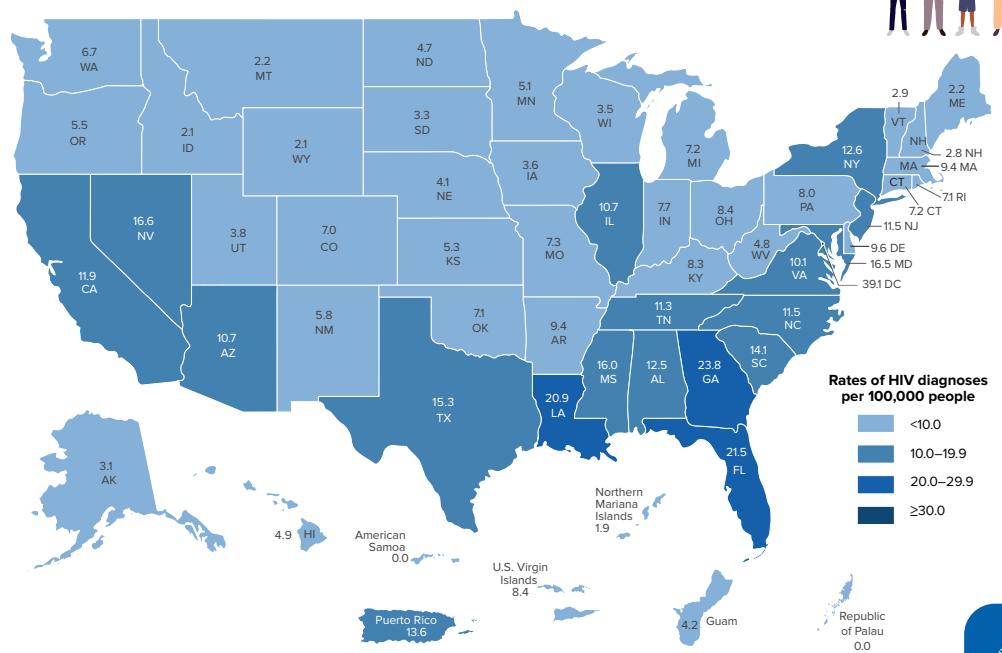
Blacks/African Americans[†] in the South had the highest number of HIV diagnoses compared to other regions.



- Black/African American
- White
- Hispanic/Latino[‡]
- Asian
- Multiple Races
- Subpopulations Representing 2% or Less

Subpopulations representing 2% or less of all people who received an HIV diagnosis in 2018 are combined in this chart.

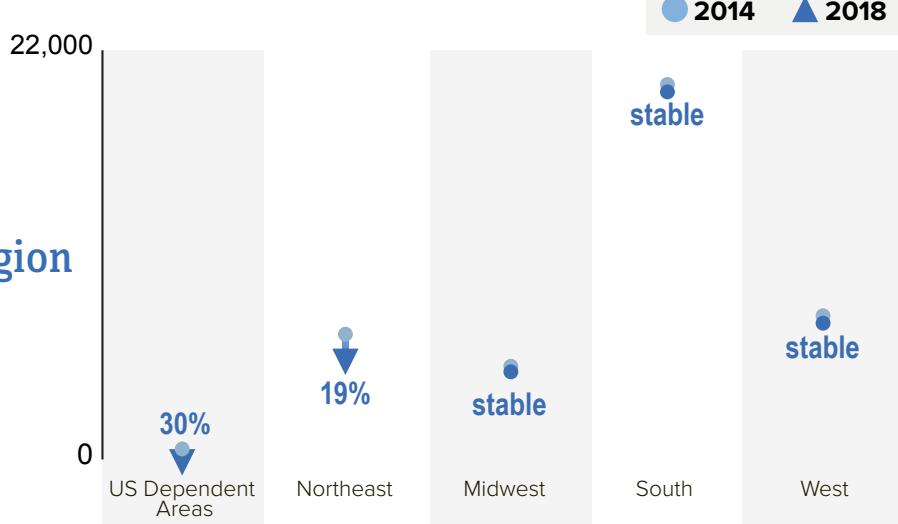
The highest rates of new HIV diagnoses were mainly in the South.**



From 2014 to 2018, HIV diagnoses decreased 7% overall. But trends varied by region.^{††}



Trends by Region



Not all people with HIV are getting the care they need. ^{‡‡}



At the end of 2018, an estimated **1,173,900 people** had HIV.

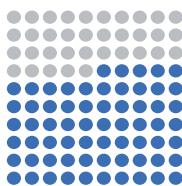
86%

of all people with HIV knew they had the virus. ***

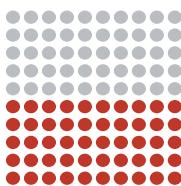


It is important for people to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or stay virally suppressed) have effectively no risk of transmitting HIV to HIV-negative sex partners.

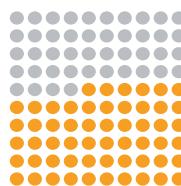
Although more than half of adults and adolescents with HIV are virally suppressed, more work is needed to increase these rates. For every **100 adults and adolescents with HIV in 2018:** [#]



65
received
some
HIV care



50
were
retained
in care



56
were virally
suppressed

* American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

† Black refers to people having origins in any of the black racial groups of Africa. African American is a term often used for Americans of African descent with ancestry in North America.

‡ Hispanics/Latinos can be of any race.

** A rate is the measure of the frequency of an event compared with the number of persons at risk for the event.

†† There were declines in regions with fewer diagnoses.

In the 50 states and District of Columbia.

*** 11 out of 17 states in the South fell below this estimate.

Northeast: CT, ME, MA, NH, NJ, NY, PA, RI, VT. **Midwest:** IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, SD, WI. **South:** AL, AR, DE, DC, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV. **West:** AK, AZ, CA, CO, HI, ID, MT, NV, NM, OR, UT, WA, WY.

For more information about HIV surveillance data and how it is used, read the "Technical Notes" in the HIV surveillance reports at www.cdc.gov/hiv/library/reports/hiv-surveillance.html.

For more information visit www.cdc.gov/hiv

Ending the HIV Epidemic: A Plan for America

The U.S. Department of Health and Human Services (HHS) has launched Ending the HIV Epidemic: A Plan for America. The cross-agency initiative leverages critical scientific advances in HIV prevention, diagnosis, treatment, and outbreak response by coordinating the highly successful programs, resources, and infrastructure of many HHS agencies and offices.

GOAL:

reaching
75%
reduction
in new HIV
infections
by 2025
and at least
90%
reduction
by 2030.



HHS will work with each community to establish local teams on the ground to tailor and implement strategies to:



Diagnose all people with HIV as early as possible after infection.



Treat the infection rapidly and effectively to achieve sustained viral suppression.

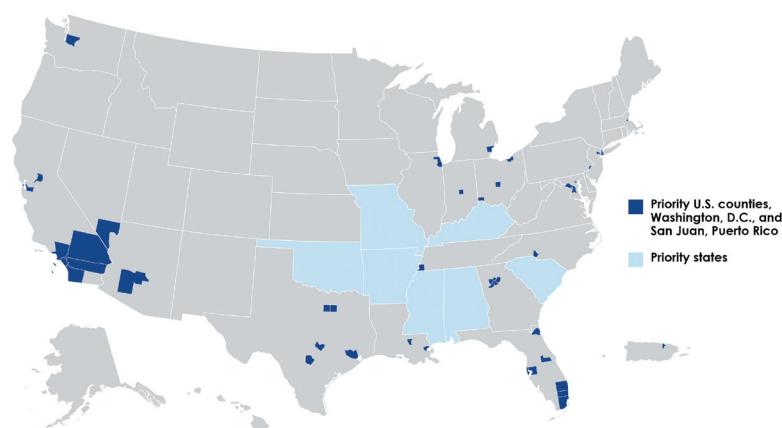


Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs).



Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

The Initiative is focusing resources on areas where HIV transmission occurs most frequently.



Geographical Selection:

Data on burden of HIV in the US shows areas where HIV transmission occurs more frequently. More than 50% of new HIV diagnoses* occurred in only 48 counties, Washington, D.C., and San Juan, Puerto Rico. In addition, 7 states have a substantial rural burden – with over 75 cases and 10% or more of their diagnoses in rural areas.

*2016-2017 data

COUNTIES, TERRITORIES, AND STATES

COUNTIES

Arizona

Maricopa County

California

Alameda County
Los Angeles County
Orange County
Riverside County
Sacramento County
San Bernardino County
San Diego County
San Francisco County

Florida

Broward County
Duval County
Hillsborough County
Miami-Dade County
Orange County
Palm Beach County
Pinellas County

Georgia

Cobb County
DeKalb County
Fulton County
Gwinnett County

Illinois

Cook County

Indiana

Marion County

Louisiana

East Baton Rouge Parish
Orleans Parish

Maryland

Baltimore City
Montgomery County
Prince George's County

Massachusetts

Suffolk County

Michigan

Wayne County

Nevada

Clark County

New Jersey

Essex County
Hudson County

New York

Bronx County
Kings County
New York County
Queens County

North Carolina

Mecklenburg County

Ohio

Cuyahoga County
Franklin County
Hamilton County

Pennsylvania

Philadelphia County

Tennessee

Shelby County

Texas

Bexar County
Dallas County
Harris County
Tarrant County
Travis County

Washington

King County

Washington, DC

TERRITORIES

Puerto Rico

San Juan Municipio

STATES

Alabama**Arkansas****Kentucky****Mississippi****Missouri****Oklahoma****South Carolina**

Health and Human Services



Centers for Disease Control and Prevention

Health Resources and Services Administration



National Institutes of Health (NIH)



Substance Abuse and Mental Health Services Administration



Substance Abuse and Mental Health Services Administration

Indian Health Service



CDC's Progress in Ending the HIV Epidemic Initiative

Ending the HIV Epidemic (EHE) is a **once in a lifetime opportunity** to reduce the number of new HIV infections in the United States by 90% by 2030. During the COVID-19 pandemic, EHE continues to be a national priority. CDC started scaling up HIV prevention activities in innovative ways to minimize disruptions. Success of this initiative will depend on sustained and expanded investments, community-driven action, improved health equity, and local innovation to meet each community's needs.

February 2019 | *Ending the HIV Epidemic* announced.



Summer 2019 | CDC awards \$16.5 million from the HHS Minority HIV/AIDS Fund to three jumpstart sites and to all sites to develop community focused, multi-year EHE plans, with an emphasis on bringing new voices to the table.

December 2019 | CDC releases an EHE Vital Signs report that highlights the critical need for federal funding to focus on testing, treatment, prevention, and health disparities.



Summer 2020 | CDC awards \$109 million to 32 state and local health departments that represent the 57 EHE jurisdictions.*

HHS launches America's HIV Epidemic Analysis Dashboard (AHEAD), a tool that provides national and jurisdictional data from CDC on the six EHE indicators.

CDC awards \$2 million EHE supplemental capacity-building assistance funds to four regional technical assistance providers to assist local areas with community engagement.

September 2020 | CDC awards \$2 million from HHS Minority HIV/AIDS Funds for mass mailing HIV self-tests to transgender women and to racial/ethnic minority communities.



October 2020 | CDC hires and sends seven additional Public Health Field Assignees (total 17) to EHE jurisdictions across the country to increase the HIV workforce capacity of health departments in these areas.

December 2020 | EHE jurisdictions submit updated plans by Dec 31st.



* EHE Jurisdictions include the 48 counties, Washington, D.C., San Juan, Puerto Rico, and seven states with substantial HIV diagnoses in rural areas that account for more than 50% of all new HIV diagnoses in the country.



Community Engagement & Planning

CDC is committed to meaningful, ongoing community engagement in *Ending the HIV Epidemic*. While the COVID-19 pandemic presents unique challenges, CDC is working with jurisdictions to encourage creative solutions to continue bringing old and new partners into the planning and implementation process. Community engagement is paramount to EHE success. To facilitate effective engagement, CDC:



EHE Funding in Action

To jumpstart the initiative, CDC used HHS Minority HIV/AIDS funds to invest a total of \$4.5 million in three “Jumpstart Sites” in East Baton Rouge Parish, Louisiana; DeKalb County, Georgia; and Baltimore City, Maryland.* The successes and lessons learned from these sites will be shared to support nationwide EHE efforts.

DeKalb County, Georgia: Connecting more people to HIV prevention

DeKalb County’s innovative programs are empowering people to lead longer, healthier lives by:

- Using nursing protocols to overcome challenges to access pre-exposure prophylaxis (PrEP)
- Creating a safe, trusted, and respectful space to talk about PrEP, sexual health, and HIV and STI prevention
- Delivering critical education, support, and follow-up care after a PrEP prescription
- Spreading the word about PrEP in the community, through marketing and social media campaigns and partnerships with community-based organizations



“Every conversation is unique. But whether I’m counseling a young gay man on his father’s health insurance or a couple exploring their prevention options, I still measure success the same way – by the number of clients who walk out of my office feeling confident and empowered to protect themselves against HIV.”

– Darlene McDougle, Public Health Educator, T.O. Vinson Health Center

* For more information on the Jumpstart sites, visit www.cdc.gov/endhiv/action/jumpstart.html.

For more information on the Ending the HIV Epidemic initiative at CDC, visit www.cdc.gov/endhiv