

# HIV/AIDS in the United States

(updated January 2023)



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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 Basic Statistics (CDC)
- Diagnoses of HIV in the United States and Dependent Areas, 2020 – Key Findings (CDC)
- National HIV/AIDS Strategy: What You Need to Know (HIV.gov)
- Ending the HIV Epidemic (HHS)

You may wish to customize this packet to meet the needs or interests of particular groups, such as event participants, providers, patients, clients, or the general public. So please feel free to distribute all or part of this document as either a printout or PDF.



# BASIC STATISTICS

HIV remains a persistent public health problem in the United States. While great progress has been made in preventing and treating HIV, there is still much to do. This section provides a broad overview of HIV in the United States and its territories. Unless otherwise noted, the data below are for persons aged 13 and older.

Please note: CDC states that data for 2020 should be interpreted with caution due to the impact of the COVID-19 pandemic on access to HIV testing, care-related services, and case surveillance activities in state and local jurisdictions.

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

In 2020, 30,635 people received an HIV diagnosis in the United States and dependent areas. The annual number of new diagnoses decreased 8% from 2016 to 2019.

## **How many people have HIV in the United States?**

An estimated 1,189,700 people in the United States had HIV at the end of 2019, the most recent year for which this information is available. Of those people, about 87% knew they had HIV.

## **How does HIV affect different groups of people?**

There are different ways to answer this question.

In 2020, male-to-male sexual contact accounted for 68% of all new HIV diagnoses in the United States and dependent areas. In the same year, heterosexual contact accounted for 22% of all HIV diagnoses.

If we look at HIV diagnoses by race and ethnicity, we see that Black/African American people are most affected by HIV. In 2020, Black/African American people accounted for 42% (12,827) of all new HIV diagnoses. Additionally, Hispanic/Latino people are also strongly affected. They accounted for 27% (8,285) of all new HIV diagnoses.

## **How does HIV affect different groups of people? (continued)**

There are also variations by age. Young people aged 13 to 24 are especially affected by HIV. In 2020, young people accounted for 20% (6,135) of all new HIV diagnoses. All young people are not equally affected by HIV, however. Young gay and bisexual men accounted for 84% (5,161) of all new HIV diagnoses in people aged 13 to 24 in 2020. Young Black/African American gay and bisexual men are even more severely affected, as they represented 53% (2,740) of new HIV diagnoses among young gay and bisexual men.

## **How many deaths are there among people with HIV?**

In 2020, there were 18,489 deaths among people with diagnosed HIV in the US and dependent areas. These deaths could be from any cause.

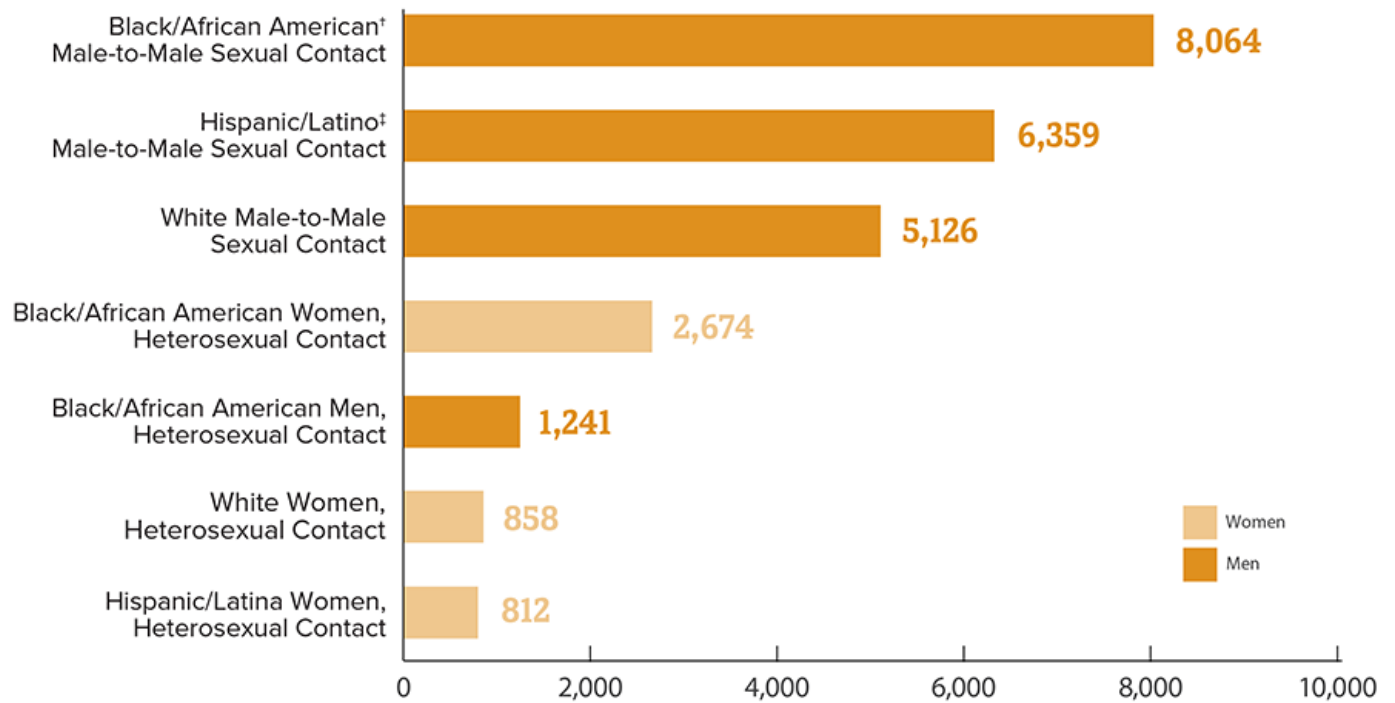
## **Are some regions of the United States more impacted by HIV than others?**

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.)



# Selected Graphs and Maps

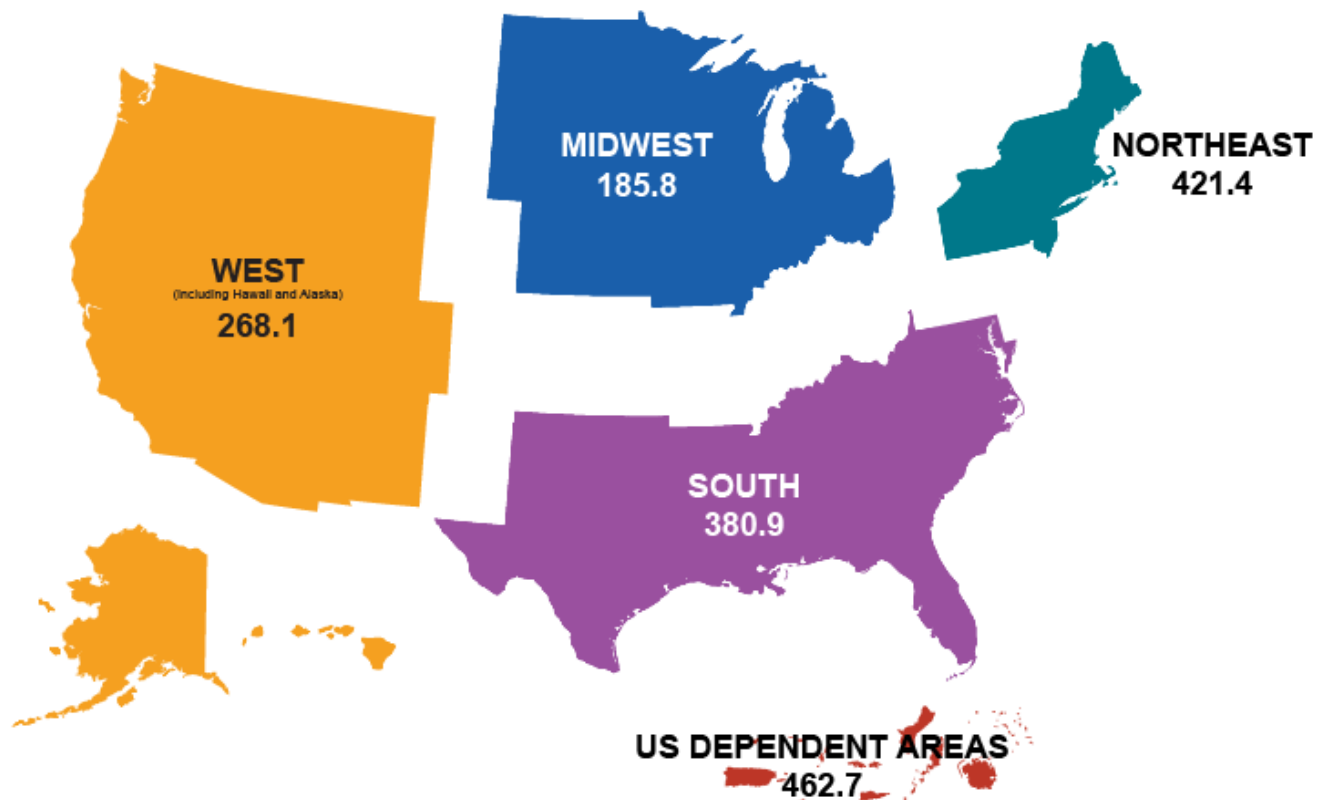
## New HIV Diagnoses in the US and Dependent Areas for the Most-Affected Populations, 2020



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

<sup>‡</sup> Hispanic/Latino people can be of any race.

## Rates of People with Diagnosed HIV in the US and Dependent Areas by Region of Residence, 2020\* †



\*Rates per 100,000 people.

† Includes adults, adolescents, and children under the age of 13.

Sources: [Diagnoses of HIV infection in the United States and Dependent Areas, 2020](#), *HIV Surveillance Report* 2022, and [HIV Basic Statistics](#) (CDC).

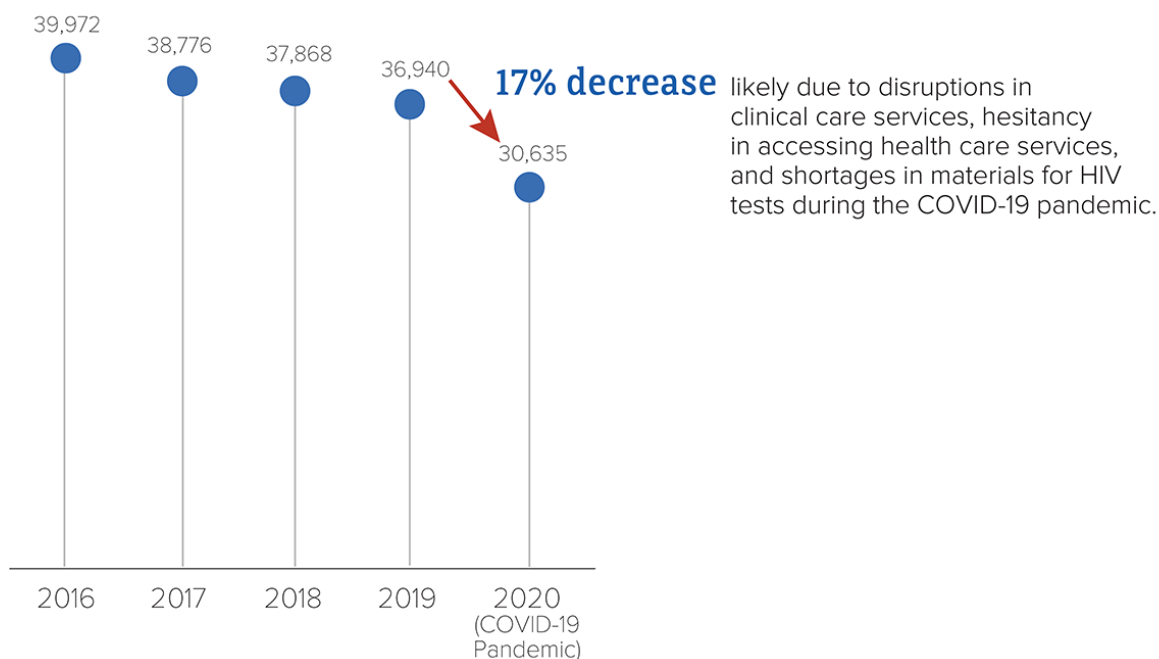
# Diagnoses of HIV Infection in the United States and Dependent Areas 2020

## Key Findings

Data in the *HIV Surveillance Report* may be used to monitor progress toward U.S. national goals outlined in *Healthy People 2030*, the *National HIV/AIDS Strategy*, and the *Ending the HIV Epidemic in the U.S.* (EHE) initiative. Data are presented for diagnoses of HIV infection reported to CDC through December 2021. Note: The data in the tables below are for people aged 13 and older.

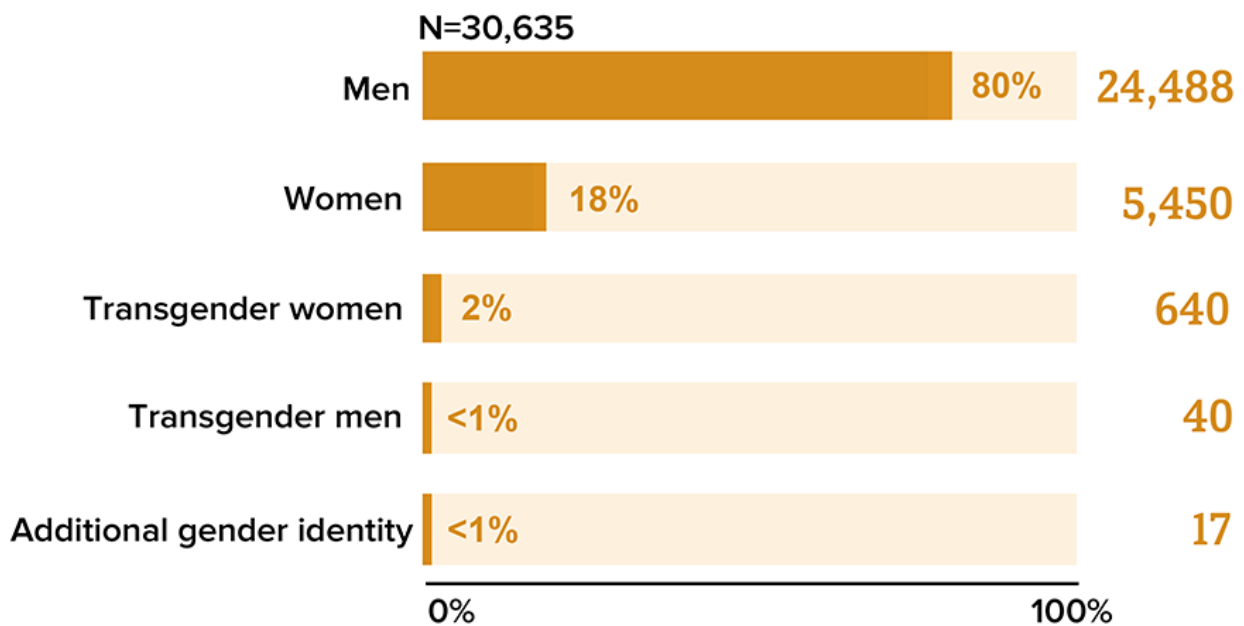
**COVID-19 Pandemic Impact:** Data for the year 2020 should be interpreted with caution due to the impact of the COVID-19 pandemic on access to HIV testing, care-related services, and case surveillance activities in state and local jurisdictions.

## HIV Diagnoses in the United States and Dependent Areas Over Time



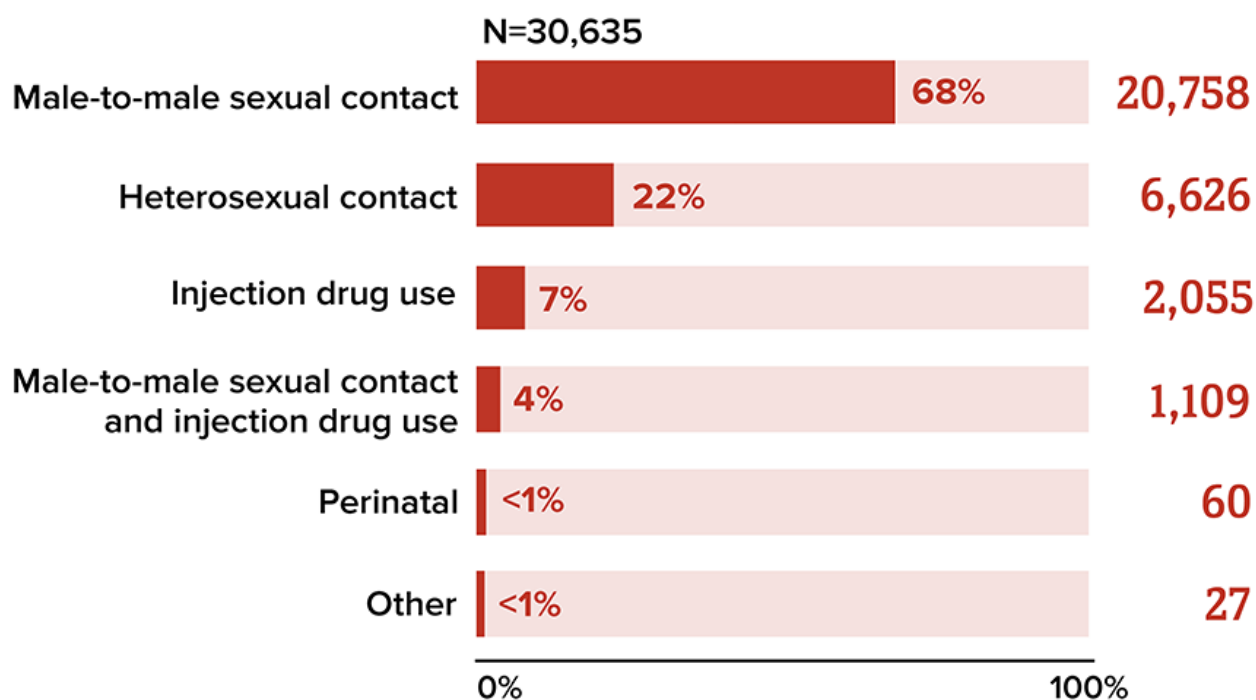
## Differences in New HIV Diagnoses by Gender

Men continue to be heavily affected by HIV, accounting for 80% of new HIV diagnoses in 2020.



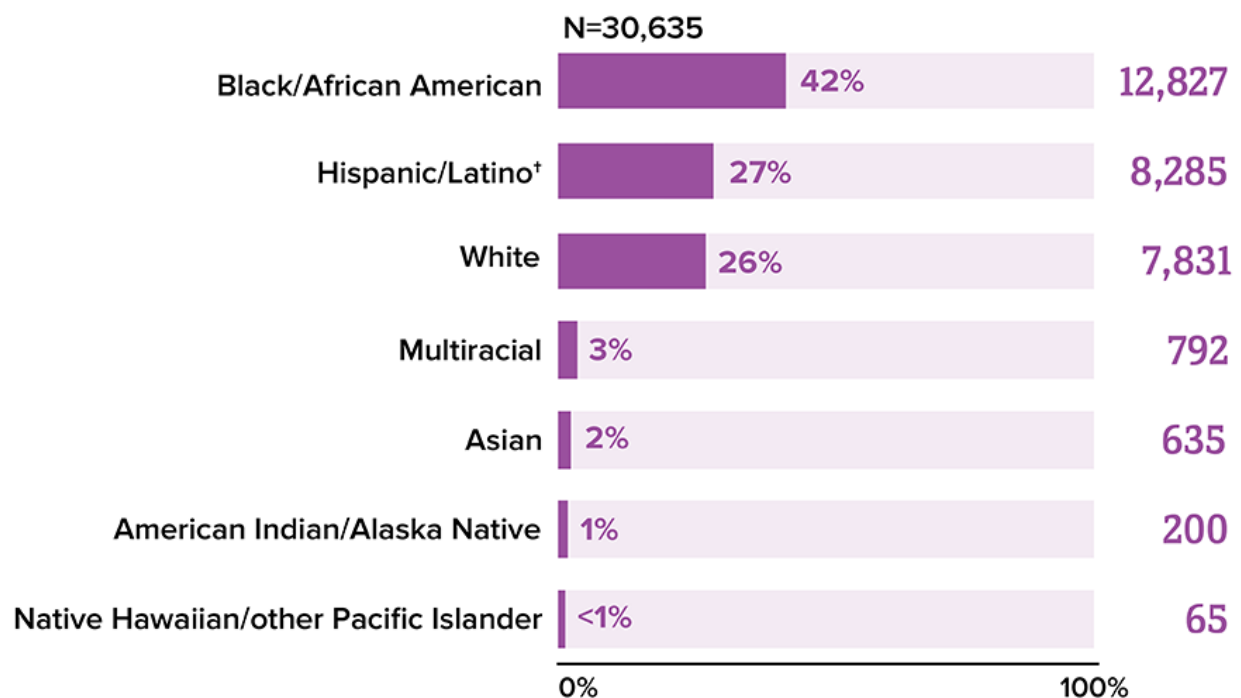
## Differences in New HIV Diagnoses by Transmission Category

Gay, bisexual, and other men who reported male-to-male sexual contact are the population most affected by HIV.



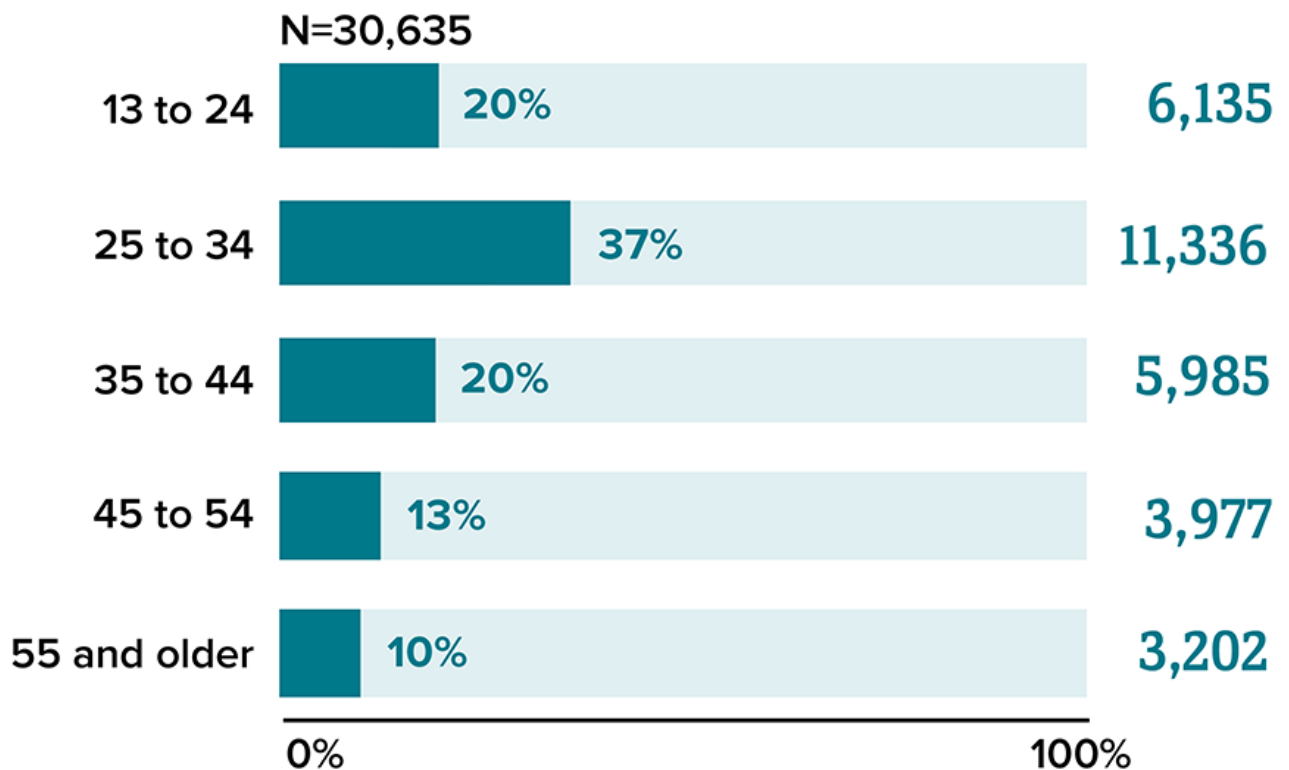
## Differences in New HIV Diagnoses by Race/Ethnicity

Racial and ethnic differences in new HIV diagnoses persist. Racism, HIV stigma, discrimination, homophobia, poverty, and barriers to health care continue to drive these disparities.



## Differences in New HIV Diagnoses by Age

People aged 13 to 34 accounted for more than half (57%) of new HIV diagnoses in 2020.



### Suggested Citation

Centers for Disease Control and Prevention. *HIV Surveillance Report, 2020*; vol. 33. <https://www.cdc.gov/hiv/library/reports/hiv-surveillance.html>. Published May 2022.

# NATIONAL HIV/AIDS STRATEGY

## WHAT YOU NEED TO KNOW

The National HIV/AIDS Strategy provides the framework and direction for the Administration's policies, research, programs, and planning for 2022–2025 to lead us toward ending the HIV epidemic in the United States by 2030.

The Strategy reflects President Biden's commitment to accelerate and strengthen our national response to ending the HIV epidemic. It details principles and priorities to guide our collective national work to address HIV in the United States over the next four years.

It is a national plan designed to re-energize a whole-of-society response to the HIV epidemic that accelerates efforts while supporting people with HIV and reducing HIV-associated morbidity and mortality.



## The Updated NHAS



**Recognizes racism as a serious public health threat** that directly affects the well-being of millions of Americans, acknowledges ways in which it drives and affects HIV outcomes, and highlights numerous opportunities to intervene to eliminate the HIV-related disparities that result and pursue equity in our national HIV response.



Puts greater emphasis on the **important roles of harm reduction and Syringe Services Programs** in our national response to HIV, as well as to hepatitis C virus infection and substance use disorder.



**Underscores the vital role that the Affordable Care Act (ACA) plays in our response to HIV** and calls for maximizing use of services available through Marketplace and Medicaid coverage because of the ACA.



**Expands discussion of populations with or experiencing risk for HIV, whose unique circumstances warrant specific attention and tailored services**, such as immigrants, individuals with disabilities, justice-involved individuals, older adults, people experiencing housing instability or homelessness, and sex workers.



Adds a new focus on the needs of the growing population of **people with HIV who are aging**.



Enhances a focus on **quality of life for people with HIV**.



Strengthens emphasis on the importance of **better integrating responses to the intersection of HIV, viral hepatitis, STIs, and substance use and mental health disorders**.



Calls for expanding engagement opportunities for **people with lived experience** in the research, planning, delivery, assessment, and improvement of HIV prevention, testing, and care services.



## THE UPDATED NHAS (CONTINUED)



**Weaves HIV research activities more broadly across the objectives**, with an emphasis on implementation research and moving research findings into practice more swiftly.



**Calls for sustaining program/service innovations and administrative changes implemented in response to the COVID-19 public health emergency** that can continue to support and improve access to and engagement in HIV testing, prevention, care and treatment, and other related services.



**Expands the focus on addressing the social determinants of health** that influence an individual's HIV risk or outcomes.



**Encourages reform of state HIV criminalization laws.**



Incorporates **the latest data** on HIV incidence, prevalence, and trends.



Adds a new focus on **opportunities to engage the private sector** in novel and important ways in the nation's work to end the HIV epidemic.



## Goals

The Strategy focuses on four goals to guide the nation toward realizing this vision:



**GOAL 1**  
**Prevent New HIV Infections.**



**GOAL 2**  
**Improve HIV-Related Health Outcomes of People with HIV.**



**GOAL 3**  
**Reduce HIV-Related Disparities and Health Inequities.**



**GOAL 4**  
**Achieve Integrated, Coordinated Efforts That Address the HIV Epidemic Among All Partners.**

## Strategy Vision

The United States will be a place where new HIV infections are prevented, every person knows their status, and every person with HIV has high-quality care and treatment, lives free from stigma and discrimination, and can achieve their full potential for health and well-being across the life span.

This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographic location, or socioeconomic circumstances.

## Priority Populations

- Gay, bisexual, and other men who have sex with men, in particular Black, Latino, and American Indian/Alaska Native men
- Black women
- Transgender women
- Youth aged 13–24 years
- People who inject drugs



# Ending the HIV Epidemic

A U.S. Department of Health and Human Services (HHS) initiative that works with communities to leverage the 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.



The initiative's goal is to reduce the number of new HIV infections in the U.S. by:



**75%**  
BY 2025

&



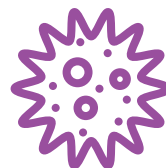
**90%**  
BY 2030

**HHS funds communities to design and implement local programs to:**



## Diagnose

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



## Treat

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



## Prevent

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



## Respond

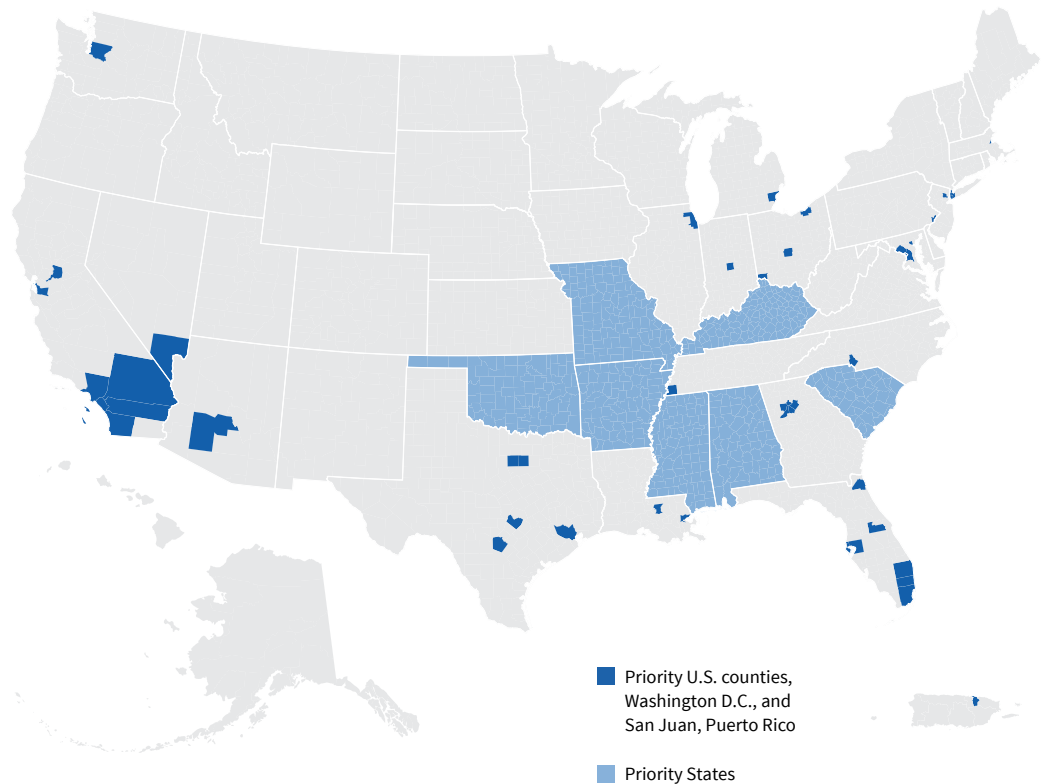
Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.



## The Initiative focuses resources on areas where HIV transmission occurs most frequently.

### Geographical Selection:

To achieve maximum impact, the Ending the HIV Epidemic initiative focuses its Phase I efforts in 48 counties, Washington, DC, and San Juan, Puerto Rico, where >50% of HIV diagnoses occurred in 2016 and 2017, and an additional seven states with a substantial number of HIV diagnoses in rural areas.



## 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

### TERRITORY

#### Puerto Rico

San Juan Municipio

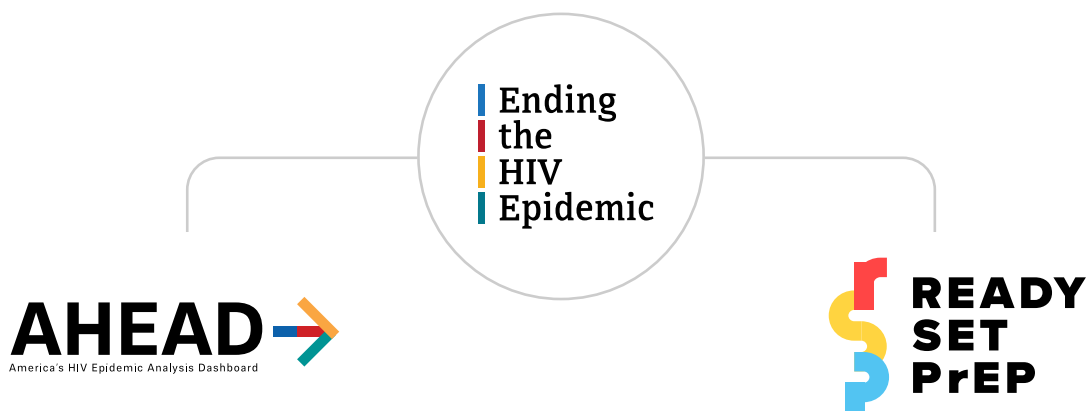
### STATES

Alabama  
Arkansas  
Kentucky  
Mississippi  
Missouri  
Oklahoma  
South Carolina





Two key components of EHE are America's HIV Epidemic Analysis Dashboard (AHEAD) and the Ready, Set, PrEP program.



### About AHEAD

AHEAD is an online data visualization tool that reports data on six different measures (known as “indicators”) that track progress toward meeting EHE goals. It makes it possible for EHE priority areas, communities, and stakeholders to monitor movement and make decisions toward reducing new HIV transmissions by at least 90% by 2030. AHEAD is the only tool that allows EHE priority areas to view their individualized indicator goals and track their progress toward reaching those goals. The data are standardized in order to allow EHE priority areas to easily compare them.

Visit AHEAD at [ahead.hiv.gov](https://ahead.hiv.gov).

### About Ready, Set, PrEP

Ready, Set, PrEP is a nationwide program led by the U.S. Department of Health and Human Services. The program provides free PrEP medications to people who do not have insurance that covers prescription drugs. It expands access to PrEP medications, will reduce the number of new HIV transmissions, and brings us one step closer to ending the HIV epidemic in the United States.

Find out more about Ready, Set, PrEP on [HIV.gov](https://hiv.gov) and visit [GetYourPrEP.com](https://getyourprep.com) or call toll-free (855) 447-8410 to qualify and enroll.

