



HIV Patient Education



What is the Impact of HIV on Racial/Ethnic Minorities in the United States?

HIV can affect anyone regardless of race, ethnicity, sexual orientation, age, gender, or where they live. In the United States though, some racial/ethnic groups continue to be more affected relative to other groups. This is because some population groups have higher rates of HIV in their communities, thus raising the risk of new infections with each sexual encounter (wanted or unwanted) or injection drug-use encounter. Additionally, a range of social, economic, and demographic factors such as stigma, discrimination, education, geographic region, and income can affect people’s risk for HIV as well as their HIV-related outcomes.

Black/African American and Hispanic/Latino communities are disproportionately affected by HIV compared to other racial/ethnic groups. As an example, in 2019, Blacks/African Americans represented 13% and Hispanic/Latinos 18.5% of the U.S. population, yet comprised 40% and 25% of people with HIV respectively.

Proportion of People with HIV by Race/Ethnicity Compared to Proportion of U.S. Population, 2019

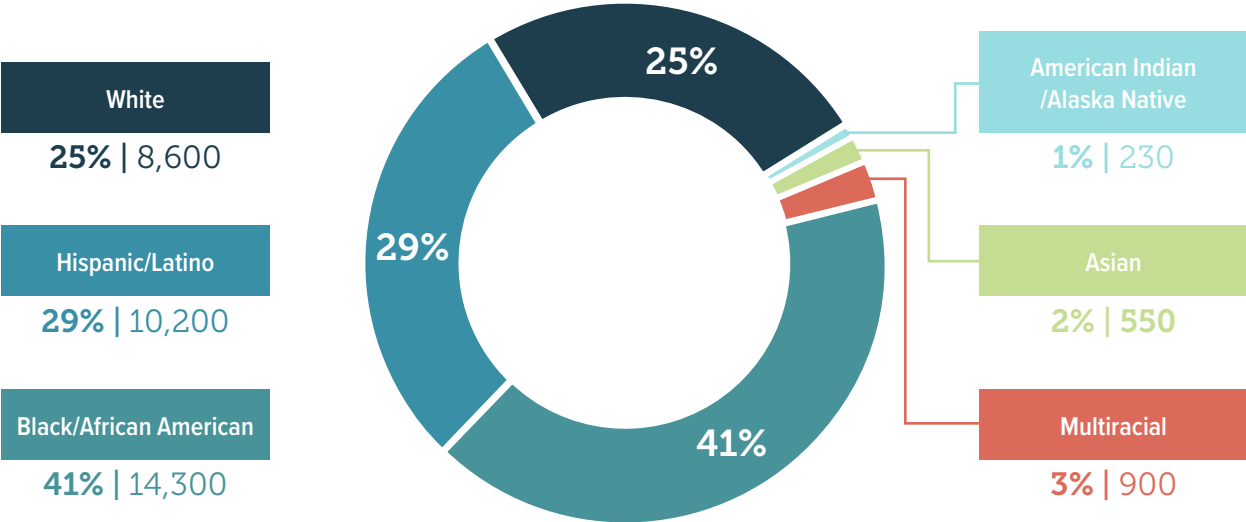
Race/Ethnicity	% of People with HIV, 2019	% of U.S. Population, 2019
Black/African American	40.3%	13.4%
White	28.5%	60.1%
Hispanic/Latino	24.7%	18.5%
Asian	1.5%	5.9%




Race/Ethnicity	% of People with HIV, 2019	% of U.S. Population, 2019
American Indian/Alaska Native	0.3%	1.3%
Native Hawaiian and Other Pacific Islander	0.09%	0.2%

Prevention and treatment are not adequately reaching people who could benefit the most, as evidenced by the incidence of new HIV infections that are disproportionately impacting Black/African American and Hispanic/Latino communities.

HIV Incidence by Race/Ethnicity, 2019



Certain subpopulations within racial/ethnic minority groups are more affected. **The most affected groups in the United States by far are gay men, bisexual men, or men who have sex with men (MSM).** They account for about 66% of new infections each year despite only making up 2% of the population, with the **highest burden being noted among Black and Latino gay and bisexual men.** According to the Centers for Disease Control and Prevention (CDC), in 2019, 26% and 23% of the new HIV infections were among Black and Latino gay and bisexual men respectively. Of the new HIV infections, 45% were among gay and bisexual men under the age of 35.



Among women there are also noted disparities. **Black women are more disproportionately affected by HIV compared to women in other races/ethnicities.** Although the annual HIV infections remained stable overall among Black women from 2015 to 2019, the rate of new HIV infections in Black women is 11 times and in Latina women 4 times that of White women.

Further, **over 1 million people identify as transgender in the United States.** In 2019, 2% (669) of new HIV diagnoses were from the adult and adolescent transgender community with most of those being among Black/African American transgender women.

The CDC has multiple **fact sheets** available by certain racial and ethnic populations:

Risk by race/ethnicity

- [HIV and African American People](#)
- [HIV and Hispanic/Latino People](#)
- [HIV in the United States by Race/Ethnicity](#)

Risk by sexual orientation

- [HIV and African American Gay and Bisexual Men](#)
- [HIV and Hispanic/Latino Gay and Bisexual Men](#)

The Ryan White HIV/Aids Program and Racial and Ethnic Minority

The Ryan White HIV/AIDS Program (RWHAP) of the Health Resources and Services Administration (HRSA) currently serves more than half a million people each year (50% of people with HIV in the United States) and provides a comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV who are uninsured and underserved.

Nearly three-quarters of RWHAP clients are from racial/ethnic minority populations. This percentage of distribution of client populations by race/ethnicity has remained consistent since 2016 with clients self-identifying as the following: 65% Black/African American, 27% as White, 24% as Hispanic/Latino, and less than 2% each as American Indian/Alaska Native, Asian, Native Hawaiian/Pacific Islander, and people of multiple races. **Notably, 89.7% of RWHAP clients receiving HIV medical care were virally suppressed, exceeding the national viral suppression average of 65.5% among all the people diagnosed with HIV.** It is critical that people with HIV who take HIV medicine (called antiretroviral therapy or ART) continue to take the medication as prescribed to get and keep an undetectable viral load. **Properly managing ART** will help end the HIV epidemic and continue to allow individuals with HIV to **live long and healthy lives** in addition to ensuring that **HIV will not be transmitted to HIV-negative partners through sex.**

Minority HIV/AIDS Fund

The U.S. Department of Health and Human Services' **Minority HIV/AIDS Fund** works to transform HIV prevention, care and treatment for communities of color. They seek to bring federal, state, and community organizations together to design and test innovative solutions to address critical emerging needs while also working to improve the efficiency, effectiveness, and impact of federal investments in the HIV programs that are delivering services to racial/ethnic minority groups. The Fund seeks to reduce the number of new HIV infections in the United States by 75% over 5 years and 90% by 2030.

References

Reproduced from U.S Department of Health and Human Services [HHS]. Impact on racial and ethnic minorities. HIV.gov Website. <https://www.hiv.gov/hiv-basics/overview/data-and-trends/impact-on-racial-and-ethnic-minorities/>. Updated January 20, 2023. Accessed December 14, 2023.