HIV in the United States: The Stages of Care

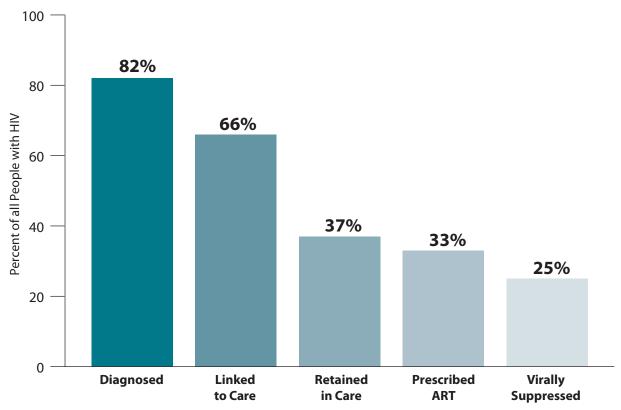
In July 2012, the Centers for Disease Control and Prevention released a comprehensive analysis showing that only one-quarter of the 1.1 million Americans living with HIV have their virus under control — and that African Americans and young people are least likely to receive ongoing care and effective treatment.

The study, based on HIV prevalence data from 2009 and other data sources, includes information on the proportion of people engaged in each of the five main stages of HIV care:

- HIV testing and diagnosis
- Linkage to care for those who test positive
- Retention in care over time
- Provision of antiretroviral therapy
- Achieving "viral suppression," by using treatment to keep HIV at a level that helps individuals stay healthy and reduces the risk of transmitting the virus to others

The analysis also provides the first-ever look at HIV care by race/ethnicity, age, risk group, and gender. These findings are summarized in the charts below.

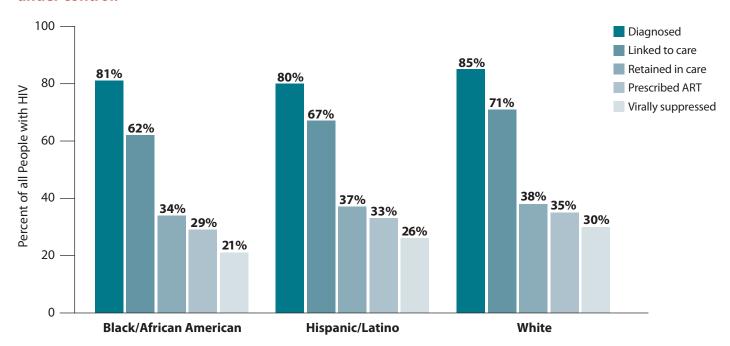
OVERALL: Of the 1.1 million Americans living with HIV, only 25 percent are virally suppressed.



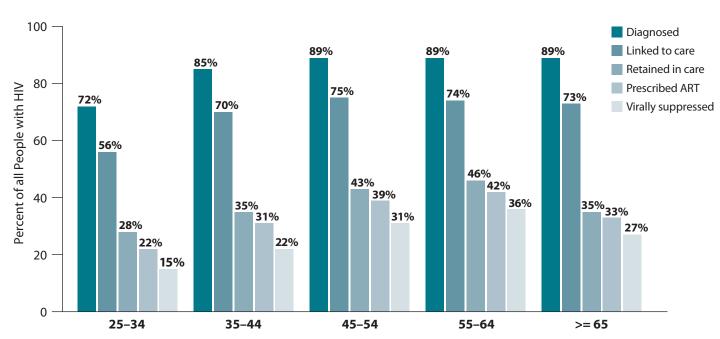


U.S. Department of Health and Human Services

BY RACE/ETHNICITY: African Americans are least likely to be in ongoing care or to have their virus under control.



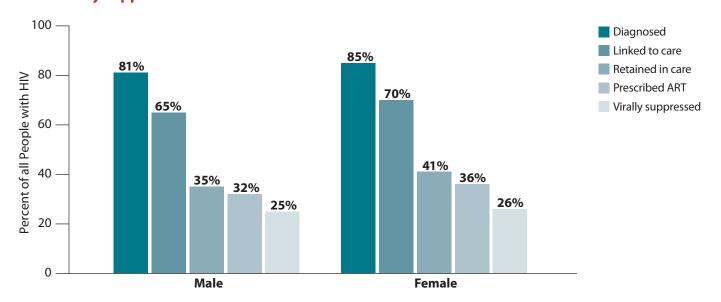
BY AGE: Younger Americans are least likely to be retained in care or have their virus in check; HIV care and viral suppression improve with age, except among those aged 65 and older.



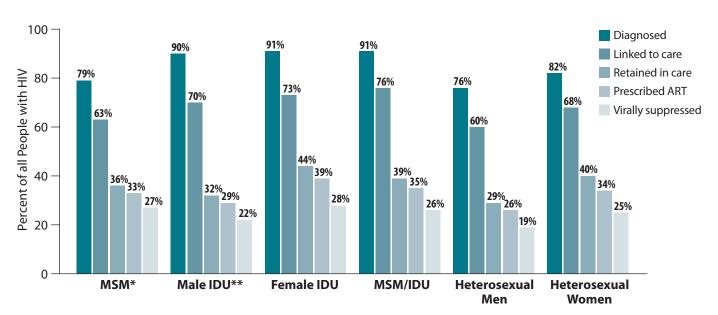
Note: Although national data were not available to provide estimates of viral suppression for those under the age of 25, the data show that 13-24 year-olds are substantially less likely to have been diagnosed with HIV than other age groups (only 41 percent versus more than 70% for all other age groups).

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BY GENDER: Although men are less likely to be retained in care, men and women are equally likely to be virally suppressed.



BY RISK GROUP: Across all risk groups, fewer than half are in ongoing care and roughly a quarter have their virus in check.



^{*} The term men who have sex with men (MSM) is used in CDC surveillance systems because it indicates the behaviors that transmit HIV infection, rather than how individuals self-identify in terms of their sexuality

Closing the Gaps

To reduce the impact of HIV in the United States, improvements are needed at each stage of the process with particular efforts to reduce disparities by race and age. HIV testing is a first critical step in HIV prevention, and the only way to identify the nearly one in five — more than 200,000 — Americans with HIV who do not know they are infected. In addition, ensuring that people have access to care, stay in care and remain on treatment will increase the proportion of HIV-infected individuals who achieve and maintain viral suppression, which is critical to improve health and realize the full potential prevention benefits of treatment.

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^{**} IDU = Injection drug user