



For Immediate Release: December 1, 2021

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Black Leaders Welcome Updated National HIV/AIDS Strategy The United States Will Not End HIV by 2030 Without More Focus and Resources in Black Communities

Washington, DC: The National Black Women's HIV/AIDS Network and the National Black Gay Men's Advocacy Coalition (NBGMAC) are encouraged by the leadership of President Biden in updating the National HIV/AIDS Strategy. We call on the President to use the White House Office of National AIDS Policy to coordinate and mobilize all departmental agencies of his cabinet that affect the health and wellbeing of Black Americans to establish benchmarks for reversing the continuing loss of life brought on by HIV/AIDS.

The ongoing COVID-19 pandemic highlights, as HIV continues to do, the poorer access to health care services that Black Americans continue to experience due to insufficient investment in the very community-based institutions responsible for promoting and sustaining health and wellness in our communities.

Forty years since the first cases of the disease that would become known as AIDS were reported in June 1981, Black Americans continue to be disproportionately impacted, accounting for the majority of new HIV diagnoses, the greatest prevalence, and highest rates of HIV-related deaths among other women and men living with HIV in the United States.

As organizations dedicated to improving the health and well-being of Black women and girls, Black gay men, and the elimination of HIV transmission, illness, and premature deaths among Black people, the National Black Women's HIV/AIDS Network and the National Black Gay Men's Advocacy Coalition, support the Biden Administration efforts to end the HIV epidemic in the United States and globally. However, ending the HIV epidemic among Black people has not responded to a one-strategy-fits-all approach. The disproportionate concentration of HIV/AIDS among Black women and Black gay men is an especially striking and troubling long-term trend. Efforts to stem the burden of HIV among these groups, like the Minority HIV/AIDS Initiative, will increasingly depend on the extent to which the racial, socioeconomic condition, and the unequal treatment of Black people is addressed and respected in this country.

According to the latest CDC data, Black men who have sex with men accounted for more than 36 percent of HIV diagnoses from 2015 through 2019 and Black women accounted for the largest

numbers of diagnoses of HIV among all women each year for the same period. The CDC *Vital Signs* published yesterday noted that achieving the "Ending the HIV Epidemic" goals will require our nation "to reduce the number of HIV infections by 90% by 2030" and will require "that at least 95% of infections are diagnosed and 95% of persons with diagnosed HIV infection are virally suppressed." The CDC reports that the rates of new diagnoses among Black women and Black gay men have decreased over time. However, given the HIV prevalence among these groups and the lack of measurable impact from increased access to pre-exposure prophylaxis (PrEP) in the US on Black people, a continued focus on biomedical and behavioral HIV prevention will remain critical to addressing HIV among these groups. Additionally, HIV aging research must be expanded as American society continues to age and the population living with HIV continues to benefit from life-prolonging therapies.

HIV remains a significant public health threat and economic burden for the nation. Black communities and families across the US are still being destabilized by HIV/AIDS, especially those cities and rural areas of the deep South with the highest percentage of Black Americans. Structural racism, not race—is the true driver of health inequities and poor health outcomes among these populations. Reducing the racial disparity in HIV will require interventions that address structural and social factors, including lack of access to quality health care. The shared commitment to end the epidemic by 2030 can only be obtained by addressing these inequalities with bold actions that guide transformative change.

We are committed to working with the Administration to realize the end of the HIV epidemic and call upon our nation's leaders at all levels of government, in partnership with religious institutions, philanthropy, pharmaceutical industry, public health, healthcare systems, housing development, the criminal justice system, and educational institutions to apply their expertise to this ambitious goal. Ending HIV is a challenge that can be achieved if we commit ourselves to full racial justice and equity for Black women and Black gay men living with HIV/AIDS.

About the National Black Women's HIV/AIDS Network (Network):

The National Black Women's HIV/AIDS Network is established to provide leadership in the prevention and spread of HIV/AIDS and other health disparities and to reduce the burden of morbidity, mortality and stigma of HIV/AIDS and other health disparities associated with gender, social, and economic inequities among Black women and girls.

About the National Black Gay Men's Advocacy Coalition (NBGMAC):

The National Black Gay Men's Advocacy Coalition (NBGMAC) is committed to improving the health and well-being of Black gay men through advocacy that is focused on research, policy, education and training-with a special emphasis on the impact of HIV on the lives of Black gay men.

References:

Centers for Disease Control and Prevention. *HIV Surveillance Report, 2019*; vol.32. http://www.cdc.gov/hiv/library/reports/hiv-surveillance.html. Published May 2021. Accessed November 2021.