

# New HIV Incidence Estimates: CDC Responds

CDC HIV/AIDS FACTS

SEPTEMBER 2008

The release of the first estimates from our nation's new HIV incidence surveillance system reveal that the HIV epidemic in the United States is—and has been—worse than previously estimated. CDC estimates that 56,300 new HIV infections occurred in the United States in 2006.

Even though the 2006 estimate does not represent an actual increase in the annual number of new infections, but rather, a better way of estimating this number, it is a sobering reminder that the HIV/AIDS epidemic is far from over in this country. A separate CDC historical trend analysis suggests that the number of new HIV infections was never as low as the previous estimate of 40,000 new infections annually and has been roughly stable since the early 2000s.

The new estimates provide a profile of HIV/AIDS in the United States that is primarily young, male, and African American. The epidemic also disproportionately affects Hispanic and Latinos; particularly Hispanic and Latino men who have sex with men (MSM). Indeed, gay and bisexual men of all races and ethnicities are the most affected of any group of Americans.

We, as a nation, must all agree that it is not acceptable for HIV and AIDS to become a rite of passage for gay and bisexual young men; that it is not acceptable for HIV and AIDS to continue to over-burden African American and Hispanic/Latino communities; and that it is not acceptable for any young American to grow up without the knowledge, skills, confidence and motivation necessary to protect themselves against HIV for their entire lifetimes. To guard against these unacceptable outcomes, the HIV/AIDS epidemic in the United States must be met with an even greater sense of commitment, purpose, and urgency by all Americans.

## What CDC is Doing Now

CDC, working in partnership with state and local health departments, national and regional organizations, and community-based organizations, is already engaged on many fronts in fighting the HIV/AIDS epidemic. CDC supports a wide range of science-based activities to monitor the course

of HIV/AIDS in the United States, expand the reach of HIV testing, increase the number and reach of effective HIV prevention programs for persons living with HIV and at risk for HIV infection, and assess the impact of these efforts. For example CDC is working to:

- ensure that the allocation of resources at state and local health departments matches the local epidemics and to provide health departments with resources that can fill in chronic gaps in their prevention programs. For example, additional funds were provided to health departments in 2008 to build capacity of prevention efforts for gay and bisexual men.
- reduce the number of infected Americans who do not know their HIV status, including increasing HIV testing in the areas with the highest rates of HIV/AIDS among African Americans.
- strengthen our prevention focus regarding the HIV epidemic in Latino communities, including the establishment of a Hispanic/Latino Executive Committee (HLEC) in May 2007.
- increase the number of behavioral interventions with proven effectiveness by conducting research to develop new behavioral interventions for communities hardest hit by the epidemic. *D-Up!*, which was developed by black MSM for black MSM to reduce HIV risk by promoting healthy social norms, is an example. CDC is also expanding training and technical assistance for interventions already proven effective.
- develop and widely implement social marketing campaigns designed to increase knowledge of HIV status and to promote HIV risk reduction. One such campaign - *Take Charge, Take the Test* - has been shown to increase HIV testing among African American women. Another campaign for gay and bisexual men is underway.
- develop effective biomedical interventions that can reduce HIV transmission, by studying the feasibility and effectiveness of pre-exposure prophylaxis in various populations and evaluating microbicides and circumcision to determine the role they can play in HIV prevention.



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In English, en Español  
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<http://www.cdc.gov/hiv>



- build and sustain effective partnerships, such as the partnerships formed as a part of the *Heightened National Response to the Crisis of HIV/AIDS among African Americans (HNR)*, in order to mobilize communities against HIV/AIDS, change community perceptions about HIV/AIDS, challenge the stigma associated with HIV/AIDS, motivate people to seek early HIV diagnosis and treatment, and encourage healthy behaviors that prevent the spread of HIV.
- improve the implementation of a comprehensive program monitoring system that will increase our nation's ability to monitor HIV prevention programs and their impact, and to increase accountability for ensuring that scarce prevention resources are being directed to those areas most in need of prevention interventions and services.
- continue working with health economists to develop a resource allocation model that uses information from the new HIV incidence surveillance system to evaluate ways we can achieve a greater impact with the prevention strategies and resources currently available.

### What CDC Will Do

In addition to these efforts that are already underway, CDC is taking additional steps to respond to the more urgent picture of the U.S. HIV/AIDS epidemic provided by the new HIV incidence estimates.

- CDC has already begun work on appointing an independent panel of national experts who will review our HIV surveillance, research, and program efforts and make recommendations for the future. This review will be initiated in 2008 and will be completed by mid-2009. A report from this review will be made available to the public.
- These recommendations will form the foundation for the development of a clear and strategic road map for HIV prevention, with measurable objectives, that will guide CDC's efforts through the year 2020.
- In addition, recognizing the need for a more comprehensive national plan to address HIV/AIDS in the United States, CDC supports the call for development of a comprehensive national HIV plan for the United States and looks forward to actively participating in its development.
- CDC is committed to continue to expand, reassess, and improve its efforts to address HIV/AIDS among African Americans, Hispanics and Latinos, and gay and bisexual men of all races and ethnicities by intensifying efforts to reach out to and mobilize members of these disproportionately affected communities.
- CDC will work to further expand HIV testing and implement HIV testing programs in ways that most efficiently and cost-effectively reach persons with undiagnosed HIV infection and successfully link them to partner services and medical care.

And yet, even with all of these activities, more needs to be done. We know how to end the US HIV epidemic in our lifetimes – hundreds of studies have shown that current prevention strategies work. The problem is one of scale. Only by scaling up prevention efforts to match the magnitude of the epidemic will we be able to ensure that HIV isn't a fact of life for so many Americans. We all must agree that it is possible, firmly commit to making it happen, and work together to transform our collective commitment into reality.

For more information on HIV incidence estimates, visit <http://www.cdc.gov/hiv/topics/surveillance/incidence.htm>



#### HIV/AIDS RESOURCES

##### CDC HIV/AIDS

<http://www.cdc.gov/hiv>  
CDC HIV/AIDS resources

##### CDC-INFO

1-800-232-4636  
Information about personal risk and where to get an HIV test

##### CDC National HIV Testing Resources

<http://www.hivtest.org>  
Location of HIV testing sites

##### CDC National Prevention Information Network (NPIN)

1-800-458-5231  
<http://www.cdcpin.org>  
CDC resources, technical assistance, and publications

##### AIDSinfo

1-800-448-0440  
<http://www.aidsinfo.nih.gov>  
Resources on HIV/AIDS treatment and clinical trials