HIV/AIDS Issues Facing America

Master of Public Health Program
Capstone Project

By Michael Rosenberg
HIV/AIDS remains a major public health problem in America

Racial and ethnic minorities have been disproportionately affected by HIV/AIDS

African American women are particularly affected

Many socioeconomic and behavioral factors may be responsible
Objective

Create recommendations for public health policies and interventions to use as guidelines for reducing number of new HIV/AIDS infections among African American women.
Methods

- Literature review of HIV/AIDS epidemic in the African American population
- Presentation of the epidemiologic findings of HIV/AIDS studies
- Review of interventions targeting African American women and their theoretical basis
- Identification of public health strategies most useful in targeting African American women
- Drafting of public health intervention recommendations to best accomplish objective
The Current Problem

- More than 56,000 new HIV infections every year
- Total of 1.1 million people living with HIV/AIDS
- African American women only 12% of the female population in U.S. but account for 66% of new HIV infections
- HIV infection rates for African American women 15 times higher than for white women
- HIV/AIDS is leading cause of death for black women aged 25-34 years
Causes

- Socioeconomic factors: poverty, racism, discrimination, and gender inequality
- Sexual behavior
- Drug use
  - Estimated one in five new HIV diagnoses for black women related to injection drug use
- Barriers to HIV/AIDS care
Historical Perspective

- Urban renewal of 1960s destabilized black communities
- Early on, HIV/AIDS thought of only as gay white male disease
- Slow response by black leaders and organizations
- Strong homophobia and stigma in black communities
- Refusal of the black church to acknowledge and address the problem
- Poor response and monitoring by the CDC and other government agencies
Sexual Behavior

- Exchange of sex for drugs or money or to meet other needs
- High risk sexual activity among incarcerated African American women
- Lack of HIV knowledge, lower perception of risk, and personal drug or alcohol use contribute to high-risk heterosexual behavior
- Power differentials within heterosexual relationships – forced sex and survival sex
- Inability to negotiate for condom use
Scarcity of Men

- Due to high rates of incarceration and death, only 6 black men for every ten black women.
- Ratio of men to women much lower among African Americans than among any other ethnic group in the U.S.
- High rates of HIV infection among African American men.
- Stigma leads many gay black men to be on the “down low”, having partnerships with as many women as possible to conceal their homosexuality.
- Many black women may be unaware of their male partner’s risk factors for HIV infection, such as unprotected sex with multiple partners, sex with men, or injection drug use.
Established Interventions and Prevention Strategies

- Prevention is the best strategy for reducing the human and economic toll of HIV/AIDS
- CDC Female and Culturally Specific Negotiation Intervention
- SISTA: Sisters Informing Sisters on Topics about AIDS
- Peer-delivered interventions
- Culturally competent prevention programs
Theoretical Models for Prevention Programs

- African-Centered Behavioral Change Model
- Health Belief Model
- AIDS Risk-Reduction Model
- Social Cognitive Theory
- Theory of Gender and Power
- Theory of Planned Behavior
- Theory of Reasoned Action
Goals for Intervention
Recommendations

• Decrease the number of African American women at high risk for acquiring or transmitting HIV infection
• Increase the proportion of HIV-infected African American women who know they are infected
• Increase the proportion of HIV-infected African American women who receive prevention services and are linked to appropriate care and treatment
• Strengthen the capacity to monitor the epidemic, develop and implement effective HIV prevention interventions and evaluate prevention programs
Barriers to Care to Address

- Low cultural competency and/or limited cultural sensitivity of healthcare and social workers toward African American women
- Lack of culturally appropriate services
- Clinician lack of knowledge and skills to deal with underlying issues affecting African American women with HIV
Prevention Strategy Objectives

- Reduce the number of African American women at behavioral risk of HIV infection through focused prevention services
- Increase percentage of African American women who are aware of their HIV positive status, with a special emphasis on providing counseling, testing, and other prevention services
- Attempt to shift the broader cultural norms that promote greater risk of HIV transmission by fostering basic HIV-related knowledge and reducing HIV-related stigma
Community-Level Interventions

- Combine the use of mass media messages with outreach by program staff or peer volunteers
- Recognize that local values, norms, and behavior patterns have a significant effect on shaping an individual’s attitudes and behaviors
- Integrate HIV prevention into all women’s service organizations
- Peer volunteer networks
- Involvement of Community Based Organizations (CBOs), particularly churches, should be stressed
Group-Level Interventions

- Help men and women discuss sexuality in a way that responds to the social isolation of black communities.
- Education of African American men on rights of their partners and proper relationship dynamics.
- Negotiation and resistance skills training for condom use.
Knowledge of Status

- The number of African American women who are aware of their HIV-positive status must be increased.
- Ways to reduce barriers to early HIV detection:
  - Making HIV testing a routine part of medical care.
  - Implementing new models for diagnosing HIV infections outside medical settings.
  - Preventing new infections by working with persons diagnosed with HIV and their partners as well as others at high risk for HIV infection.
Further Recommendations

- Increase access to healthcare for HIV-infected African American women
- Reduce drug abuse in black communities
- Reduce stigma towards HIV/AIDS
Conclusions

- Strategy should focus on prevention
- Socioeconomic factors must be addressed to reduce vulnerability
- Funding, designing, and implementing interventions specifically targeting African American women should be an immediate priority for policy makers and researchers
- Prevention programs should attempt to be culturally and socially relevant in order to be most effective
- Need for creation of national HIV-AIDS policy making body


Valdiserri RO, West GR, Moore M, Darrow WW, Hinman AR. Structuring HIV prevention service delivery systems on the basis of social science theory. Journal of Community Health. 1992;17:259-269