

## **FOREWORD: HIV/AIDS PREVENTION IN THE HISPANIC/LATINO COMMUNITY**

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The HIV/AIDS crisis affects many communities, and Hispanics/Latinos experience a significant portion of the burden. In 2006, Hispanics/Latinos accounted for 17% of the estimated 56,300 new HIV infections (Hall et al, 2008). The rate of new HIV infections among Hispanic men (43.1 per 100,000) is more than double that of white men (19.6 per 100,000), and the rate among Hispanic women (14.4 per 100,000) is nearly four times that of white women (3.8 per 100,000). In 2007, the rate of new AIDS diagnoses among Hispanics/Latinos (15.2 per 100,000) was three times as high as that among whites (5.2 per 100,000) (CDC, 2008). Although Hispanics/Latinos comprise 14% of the US population, they account for 18% of persons living with HIV/AIDS (CDC, 2009).

For Hispanic males living with HIV/AIDS, the most common modes for becoming HIV-infected were sexual contact with other males, injection drug use, and high-risk heterosexual contact. For Hispanic females living with HIV/AIDS, the most common modes for becoming HIV-infected were high-risk heterosexual contact and injection drug use [CDC, 2009]. HIV testing rates were slightly higher for Hispanics/Latinos and blacks than for persons of other races or ethnicities. In a 2002 study, 50% of Hispanics aged 15–44 had ever been tested for HIV and 18% had been tested during the past year (Anderson et al, 2005).

These numbers underscore the need to understand complex risk factors and social determinants of health contributing to the rates of HIV/AIDS among Hispanics/Latinos and the need to raise awareness among Hispanics/Latinos about the effects of HIV/AIDS. Some key determinants may include structural and social factors which may prevent access to needed HIV care and prevention services; lack of knowledge about HIV and economic disparities which may lead to risky behaviors further fueling increased rates of HIV and other sexually transmitted diseases; and addressing issues related to denial, complacency and stigma which may delay HIV testing, treatment and care. It will be important to address these determinants, as well as others, in order to make inroads in reducing rates of HIV/AIDS among Hispanics.

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Prevention efforts, such as HIV testing, remains the key element for curtailing the spread of HIV among Hispanics/Latinos, and getting tested is the essential first step in turning the tide. Early testing allows people who are HIV-positive to take advantage of treatment, thereby staying healthier longer and taking steps to protect their partners from infection. To overcome barriers to HIV testing, care and treatment, stigma associated with HIV testing and homophobia must be addressed. The Obama Administration announced in April 2009 a new 5-year communications campaign, *Act Against AIDS* (or the Spanish language version *Actúa contra el SIDA*), to refocus attention on the HIV/AIDS crisis in the United States, and to address high rates of HIV/AIDS among certain communities and to help combat complacency about HIV. *Act Against AIDS* features public service announcements, online communications, and targeted messages and outreach to populations most severely affected by HIV/AIDS. It will include the Hispanic/Latino community (The White House, 2009).

HIV prevention programs must also address the needs of diverse Hispanic/Latino communities. Prevention efforts should focus on Hispanic/Latino groups at greatest risk – particularly, young people and men who have sex with men. Programs must be relevant to the lives of Latino populations – appropriate to age, culture, community standards, and language. They must be designed with input from the Latino community and delivered by organizations and people with credibility in that community. Through concerted efforts and commitments by all levels of society, a reduction in the rate of HIV/AIDS can be realized in the Hispanic/Latino community.

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