

HIV Risk Reduction

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HIV/AIDS in the South *Epidemic Reaches Crisis Proportions*

In 1988, Susan Reif was studying for a Masters in Social Work when she read a book that would set the trajectory of her career.

Entitled *And the Band Played On*, the book explored the causes of the HIV/AIDS epidemic, citing in particular the indifference toward those initially infected by the “gay disease” coupled with a degree of political apathy and infighting that the author concluded allowed AIDS to happen.

Already engaged in a course of study designed to teach students to think critically about the social and economic challenges confronting at-risk populations, Reif became very interested in HIV.

Today, she is a Research Associate at Duke University’s Center for Health Policy & Inequalities Research where she has helped to amass and interpret a tremendous body of research on the epidemic. “I wanted to do work that could improve services for people who are HIV-positive and raise awareness about the barriers and issues that they face,” says Dr. Reif.



Susan Reif, PhD, LCSW

- **Prevalence** – people currently living with HIV disease.
- **Incidence** – actual occurrence of new infections (whether diagnosed and reported or not).
- **New Cases** – new diagnoses.
- **HIV Case Fatality Rate** – people who die from HIV.
- **Conventional HIV Death Rate** - HIV-positive people who, with the help of life-saving therapies, die after a relatively normal life span.

Recently, Dr. Reif was lead author on a report about the South. As a native of Alabama, she is familiar with the unique subculture of a region known for its hospitality.

According to the report, the South is also the region with the worst health in the nation based on indicators like rates of heart disease and diabetes. And HIV.

Elsewhere in the country, new HIV/AIDS cases have remained fairly stable, but the rate of new infections in the South is the highest of any region in the US. While it accounts for just 37 percent of the US population, 43 percent of people living with HIV and fully half of all new HIV infections are reported in the South, says Dr. Reif.

The report, entitled *HIV/AIDS Epidemic in the South Reaches Crisis Proportions in Last Decade*, surveys the entire region and then targets 9 Southern states for particular attention. Known variously as the cotton states and the Deep South, the targeted states,* which include Georgia, have the highest rates of new HIV diagnoses in the country. Home to just 22 percent of the US population, they account for 35 percent of new HIV infections.

“Prevalence, or the number of people living with HIV,

remains highest in the northeast where the epidemic began,” says Dr. Reif. “But when you look at new cases, the difference is striking; 8 of the 10 states

with the highest rate of new cases are targeted states. And 9 of the 10 metropolitan areas with the highest rate of new cases, including Atlanta, can be found in those same 9 states.”

As a group, the targeted states also have the highest rate of HIV-related deaths in the country.

Despite the fact that in the wake of new therapies death from HIV infection has declined dramatically, many southern states have a case fatality rate twice that of other states.

A low case fatality rate is a reflection of the relatively normal lifespan that new drug therapies offer. A high case fatality rate indicates that a greater proportion people with HIV are dying from a disease that is essentially treatable. “That’s something we shouldn’t be seeing in this day and age with the treatments we have. Are people getting diagnosed too late? Are they not getting the care that they need? Something is affecting those case fatality rates and that is really concerning,” says Dr. Reif.



The Southern United States is known for its hospitality and rich Southern culture.

The South is also known for the worst health in the nation.

* Targeted States: Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, East Texas.

In search of answers, researchers looked for factors shared by the 9 states. “What the targeted states have in common is poverty, poor health rankings, a disproportionate burden of the epidemic being borne by minorities, large rural populations, and a conservative cultural climate,” says Dr. Reif.

Poverty - - “Statistically, poverty is directly related to the HIV case fatality rate,” says Dr. Reif. And the targeted states have some

of the highest levels of poverty in the US. Poverty can be a barrier to care for individuals but it is also a factor for cash-strapped state governments. “The poverty in the South is striking; it’s difficult for legislators to focus on HIV because there are so many areas of need. It’s a huge challenge,” says Dr. Reif.

Health - - Nine out of the 10 states with the worst health ratings are in the South and the region is also disproportionately impacted by sexually transmitted diseases, which correlates to a higher risk for HIV.

Race - - African Americans throughout the US are disproportionately affected by HIV and that is particularly true in the South where it is estimated that 1 in 5 African American men who have sex with



Disproportionate Impact - - *In the South, roughly 1 in 5 African American men who have sex with men are living with HIV and 71% of newly diagnosed women are African American.*

men are living with HIV and 71 percent of newly diagnosed women are African American.

Women - - The proportion of new HIV infections occurring among women in the South (25%) is second only to the Northeast (27%).

Cultural Conservatism

- - One aspect of the rich culture of the South is conservatism, which is particularly evident among the targeted states. As a social scientist born and raised in Alabama and educated in the South, Dr. Reif speaks from personal experience when she says, “Part of the Southern cul-

ture is that we focus on the positive. We’re non-confrontational. We tend to sweep unpleasantness under the rug. Unfortunately, issues like HIV that are exacerbated by stigma need to see the light of day.”

Large Rural Population - - It is more common for people in the South to live in the country or in small towns than elsewhere in the US; a majority (64%) of people living in rural areas reside in the South.

There are more people with HIV living in rural areas in the South than in any other region. And the rate of people living with AIDS in the rural South is more than double that of all other geographic regions combined.

Large Rural Population *continued...*



The South consists of the 16 states, depicted above: the South Atlantic states of Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, West Virginia, and Delaware; the East South Central states of Alabama, Kentucky, Mississippi, and Tennessee; and the West South Central states of Arkansas, Louisiana, Oklahoma, and Texas.

Targeted States: Within the South are 9 states that are the most severely affected by the HIV/AIDS epidemic:

- Alabama
- Florida
- Georgia
- Louisiana
- Mississippi
- North Carolina
- South Carolina
- Tennessee
- East Texas



In the South, there are more people with HIV living in rural areas than in anywhere else in the nation.

People with HIV or AIDS who live in rural areas are confronted by a confluence of challenges including barriers around transportation, scarce financial resources, a dearth of HIV care providers, and greater HIV-related stigma which has been shown to have a negative impact on risk behavior and health outcomes.

HIV/EIS - - Speaking directly to Georgia's DBHDD HIV/EIS workers who tested over 10,000 people last year, Dr. Reif said: *You are making a huge impact.*

Certainly when you diagnose someone HIV-positive, but in many ways the impact is greater when you test someone and they learn their negative status.

Thanks to you, they have the opportunity to protect themselves.

And because you offer HIV prevention counseling, they know how.

HIV Early Intervention Services (EIS)

is a program of

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