

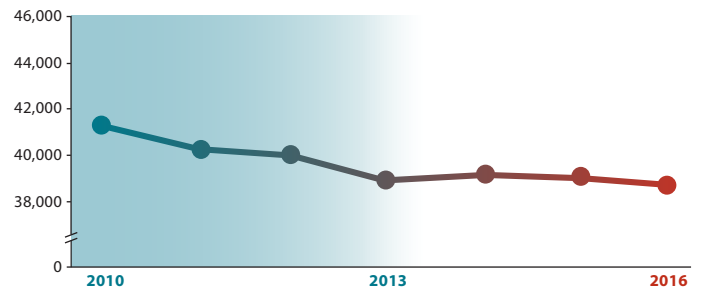
# HIV Incidence: Estimated Annual Infections in the U.S., 2010-2016

## Progress in HIV prevention has stalled

Annual HIV infections (“HIV incidence”) in the United States have been reduced by more than two-thirds since the height of the epidemic in the mid-1980s, but CDC data indicate that progress has stalled in recent years.

Following about five years of declines, the estimated number of new HIV infections began to level off in 2013 at about 39,000 (38,900 in 2013 to 38,700 in 2016) — reinforcing the need for more action to end America’s HIV epidemic.

HIV Infections Started to Stabilize in 2013



## HIV increases in some groups, decreases in others

The concerning stabilization in new HIV infections has occurred because effective prevention and treatment are not adequately reaching those who could most benefit from them, which has led to population-specific trends. Gay and bisexual men, African Americans, Latinos and people ages 25-34 bear the greatest burden of new HIV infections in the United States.

**Gay and Bisexual Men**

Stable, about 26,000 new infections per year

**Heterosexuals**

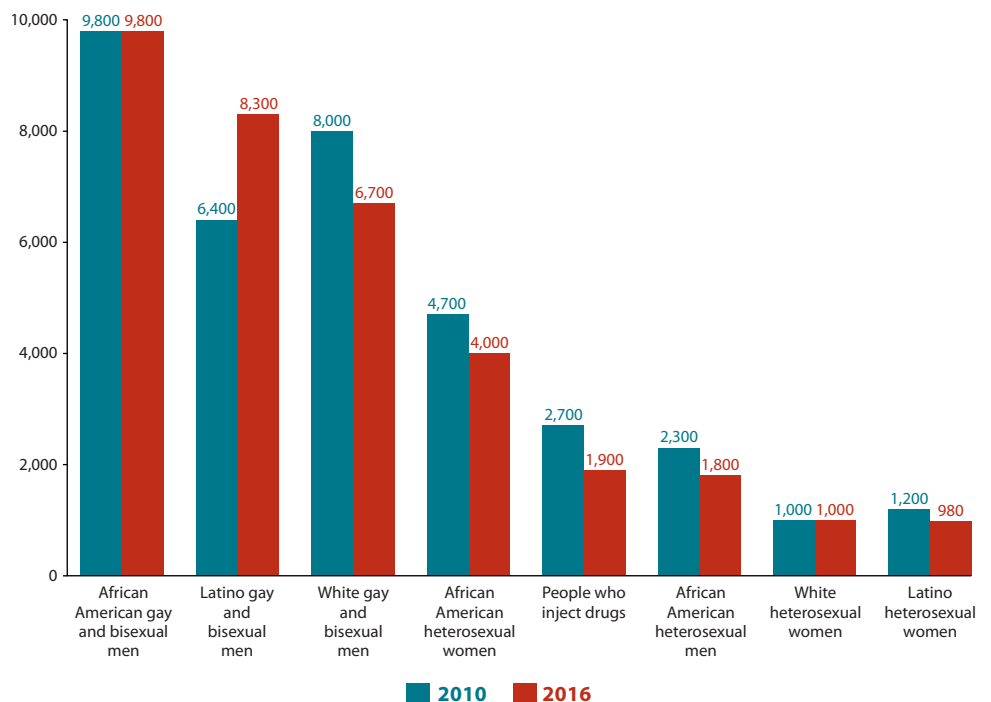
Decreased 17%

**People Who Inject Drugs**

Decreased 30%\*

\*But appear to have stabilized in more recent years

New HIV Infections by Race and Transmission Group, U.S. 2010 vs. 2016

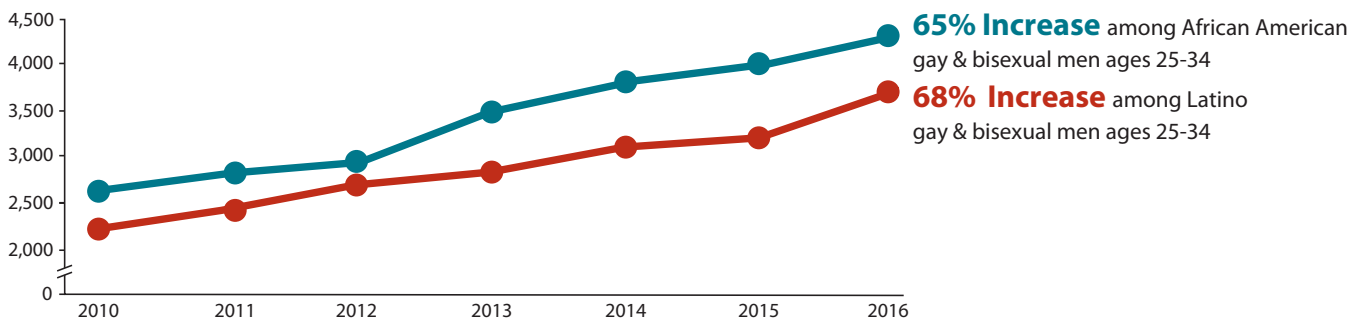


# New Infections among Gay and Bisexual Men

New HIV infections remained stable at about 26,000 per year among gay and bisexual men, who account for most (about 70 percent) of new infections each year. However, there were differences by race/ethnicity and age.

African American	Latino	White
<ul style="list-style-type: none"> <li>Stable, about 10,000 per year</li> <li>Decreased about one-third among those ages 13 to 24 (5,000 to 3,400)</li> <li>Increased about two-thirds among ages 25 to 34 (2,600 to 4,300)</li> </ul>	<ul style="list-style-type: none"> <li>Increased 30 percent (6,400 to 8,300)</li> <li>Stable among those ages 13 to 24 (about 2,000 per year)</li> <li>Increased about two-thirds among ages 25 to 34 (2,200 to 3,700)</li> </ul>	<ul style="list-style-type: none"> <li>Decreased less than one-fifth overall (8,000 to 6,700)</li> <li>Decreased about one-third among ages 13 to 24 (1,500 to 1,000) and 35 to 44 (1,900 to 1,200), and about one-fourth among ages 45 to 54 (1,600 to 1,200)</li> </ul>

## From 2010-2016 Annual HIV Infections Increased Among Latino and African American Gay and Bisexual Men Ages 25-34



# New Infections among Heterosexuals

New HIV infections decreased about 17 percent among heterosexuals (from 10,900 to 9,100 per year), and there were differences by sex and race/ethnicity.

Women	Men*
<ul style="list-style-type: none"> <li>Decreased about 15 percent overall (7,300 to 6,200)</li> <li>Decreased 15 percent among African American women (4,700 to 4,000)</li> <li>Stable among Latino women (about 1,000 per year) and white women (about 1,000 per year).</li> </ul>	<ul style="list-style-type: none"> <li>Stable overall (about 3,000 per year)</li> <li>Stable among African American men (about 2,000 per year)</li> </ul>

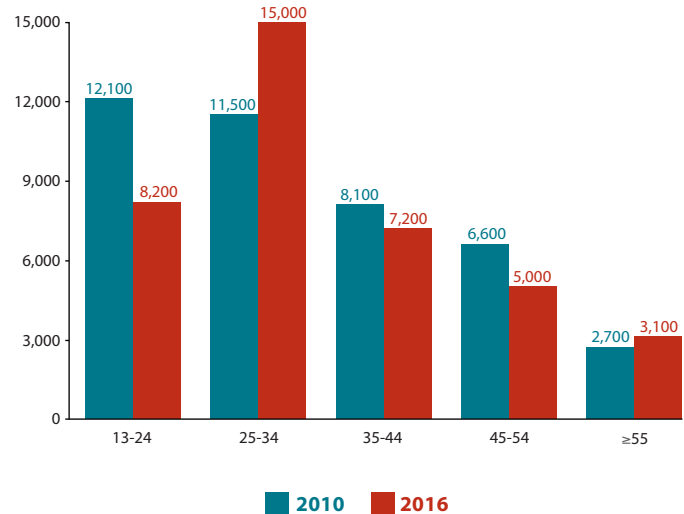
\*Trends cannot be reliably estimated for heterosexual men who are white and who are Latino

## New Infections by Age Group

New HIV infections increased by nearly one-third (11,500 to 15,000) among people ages 25 to 34. Infections decreased or remained stable among all other age groups:

- Decreased about one-third among 13- to 24-year-olds (12,100 to 8,200).
- Remained stable among 35- to 44-year-olds (about 7,000 per year).
- Decreased about one-fourth among 45- to 54-year-olds (6,600 to 5,000).
- Remained stable among ages 55 and older (about 3,000 per year).

## New HIV Infections by Age Group, U.S. 2010 vs. 2016



## Urgent Action Needed to End America’s HIV Epidemic

A proposed federal initiative was announced in February 2019 to eliminate the HIV epidemic in America by scaling up four key strategies:

- **Diagnosing** HIV as early as possible after infection.
- **Treating** HIV rapidly and effectively to achieve sustained viral suppression.
- **Protecting** people at risk for HIV using proven prevention approaches like [pre-exposure prophylaxis \(PrEP\)](#), a daily pill to prevent HIV.
- And **responding** rapidly to growing HIV clusters to stop new infections.

The initiative — “Ending the Epidemic: A Plan for America” — will leverage critical scientific advances in HIV prevention, diagnosis, treatment and care by coordinating the highly successful programs, resources and infrastructure of the U.S. Department of Health and Human Services (HHS) and its agencies: CDC, the National Institutes of Health (NIH), the Health Resources and Services Administration (HRSA), the Substance Abuse and Mental Health Services Administration (SAMSHA), and the Indian Health Services (IHS). The goal is to reduce new HIV infections by 90 percent over 10 years.

CDC will play a critical role in the proposed initiative. CDC will:

- Work closely with other HHS agencies; local and state governments; communities; and people with HIV to expand new HIV prevention and treatment efforts in 48 counties with the highest HIV burden; Washington, D.C.; San Juan, Puerto Rico; and seven states with disproportionate rural burdens.
- Establish HIV elimination teams in the high-burden areas. Teams will be comprised of experts in epidemiology, health care systems, and disease investigation who will bring together stakeholders and manage day-to-day operations.
- Partner with HRSA and state and local health agencies to increase capacity to diagnose all HIV infections in the high-burden areas. New systems will help make HIV testing routine in clinical settings and more accessible in non-clinical settings. CDC and HRSA will also support HIV treatment that begins quickly — ideally at the time an infection is diagnosed — and scale up systems that help ensure people with HIV stay in care or effectively re-start care if it stops.

- Along with partners, increase access to and use of PrEP. Education campaigns for health care providers and communities will also work to combat stigma associated with PrEP use, as well as stigma that is associated with HIV infection.
- Deploy new statistical methods to identify and respond to new clusters of HIV infection in their earliest stages, effectively stopping infections from spreading.

More details about the proposed initiative are available at [HIV.gov](https://www.hiv.gov).

## CD4 Methodology

CD4 cells are a type of white blood cell that help protect the body from infections. Without treatment, HIV reduces the number of CD4 cells in a person's body. CDC used CD4 cell counts from the time of HIV diagnosis to determine the person's stage of disease and estimate when an infection occurred. The CD4 model was based on data reported to the National HIV Surveillance System.

**If you are a member of the news media and need more information, please visit [www.cdc.gov/nchhstp/newsroom](https://www.cdc.gov/nchhstp/newsroom) or contact the News Media Line at CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 404-639-8895 or [NCHHSTPMediaTeam@cdc.gov](mailto:NCHHSTPMediaTeam@cdc.gov).**