HIV and Young Adults
Young adults and the HIV epidemic

- Young adults are disproportionately affected by HIV
- The number of young adults diagnosed with HIV each year is higher than that of any other age group
HIV’s impact on young adults

The rate of new HIV diagnoses has:
- **increased** in people aged **20 to 24**...
- but has **decreased** in people aged **35 to 44**

Young adults 20 to 24 years of age now account for:
- The largest percentage of all HIV diagnoses (17%)
- The second highest rate of HIV infection per 100,000 people (35.3)
HIV’s impact on young adults by gender

Many more young men than young women 20 to 24 years of age are infected with HIV.
HIV’s impact on young adults by race

Young black people are disproportionately affected by HIV compared with other young adults in the United States.

- 57% Black/African American
- 20% Hispanic/Latino
- 18% White
- 2% Asian
- 2% Multiple races
- <1% Native Hawaiian/Other Pacific Islander
- 1% American Indian/Alaska Native
How HIV is spread among young adult men

The main ways that HIV is transmitted among young adult men aged 20 to 24 years are:

- **91.7%** Male-to-male (MSM) sexual contact
- **1.6%** Injection drug use
- **3.0%** MSM sexual contact and injection drug use
- **3.5%** Heterosexual contact with a person known to have, or to be at high risk for, HIV infection
- **0.2%** Other (hemophilia, blood transfusion, perinatal exposure)
How HIV is spread among young adult women

The main ways that HIV is transmitted among young adult women aged 20 to 24 years are:

- **9.8%** Injection drug use
- **2.5%** Other (hemophilia, blood transfusion, perinatal exposure)
- **87.7%** Heterosexual contact with a person known to have, or to be at high risk for, HIV infection
Sexual risk factors for HIV among young adults

- Early age at sexual initiation
- Unprotected sex
- Older sex partners
- Male-to-male sex
  - Young gay, bisexual, and other MSM, especially young black and Latino MSM, have high rates of new HIV infections
More **sexual risk factors** for HIV among young adults

- Sexual abuse
  - Young adults, both male and female, who have been abused sexually are more likely to engage in risky sexual or drug-related behaviors

- Sexually transmitted infections (STIs)
  - Having an STI greatly increases the risk of getting or transmitting HIV
  - Young adults, especially minority young adults, have some of the highest STI rates in the United States
Other risk factors for HIV among young adults

- Substance use
  - Both casual and chronic substance users are more likely to engage in high-risk behaviors, such as unprotected sex, when using substances
  - Young adults use drugs and alcohol at high rates

- Lack of concern about HIV
  - A large proportion of young adults are not concerned about getting HIV
  - This lack of concern makes them less likely to protect themselves
Low awareness of HIV status among young adults

- Almost 3 out of 4 young black and Hispanic MSM with HIV are not aware that they have the virus.
- This lack of awareness may lead to treatment delays and poorer outcomes and may put their partners at risk.

<table>
<thead>
<tr>
<th>Young MSM Aged 20–24</th>
<th>Unaware of HIV Infection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black (non-Hispanic)</td>
<td>69%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>73%</td>
</tr>
<tr>
<td>White (non-Hispanic)</td>
<td>55%</td>
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</tbody>
</table>
Why are young adults slow to engage in care?

Many obstacles may prevent young adults from getting tested and engaging in care for HIV:

- **Lack of concern** about becoming infected with HIV
- **HIV stigma** and the fear that others will find out if they have HIV
- **Fear of discrimination** and harassment if they are found to be infected
- **Reluctance to visit a healthcare provider**, both before and after diagnosis
- **A belief** that it’s okay to delay starting HIV medicines
The importance of frequent HIV testing and early treatment

- Encourage young adults to be tested for HIV and visit a healthcare provider if they are HIV positive
  - The CDC recommends that everyone get tested for HIV routinely, such as at a checkup
  - The CDC also recommends HIV testing at least once a year for people engaging in risky behavior

- Young adults need to know that HIV testing, early engagement in care, and prompt initiation of treatment can help them live longer, healthier lives
Young adults and HIV treatment

- Young adults with HIV:
  - Are often late to get into care and start treatment
  - Are less likely to stick to their HIV treatment after starting
  - Skip medical appointments more often and see their healthcare providers less often than any other age group
  - Are likely to quit treatment completely
The toll of poor adherence and failure to keep appointments

- Young people aged 15 to 25 have the lowest utilization of medical office visits of any age group.
- In HIV care, this can have devastating impact on:
  - Treatment adherence
  - Treatment of opportunistic infections
  - Prevention of transmission
- Poor treatment adherence can lead to poor treatment results and virologic failure in young people with HIV.
  - Missing just 1 dose of HIV medicine in 28 days can lead to treatment failure.
Improving engagement in care and treatment adherence in young adults

- Guiding young adults with HIV to medical practices that provide a welcoming, youth-friendly healthcare environment can help make it more likely that they will stay in care.

- Engaging in and staying in care can help increase the chances of treatment success.
Reaching out to young adults with HIV

Keep in mind that...

- Young adults may identify their sexuality differently from the way they behave
- Sexual behavior and identity can change over time
- For many young adults, being in a committed relationship does not always equal monogamy
- Young adults may identify sex as vaginal intercourse only and may not consider anal or oral sex as sex
- Gender identity is distinct from sexual orientation; for example, it is wrong to assume that being transgender implies same-sex orientation
A quick review

• Young people are disproportionately affected by HIV
• Many young adults are not concerned about the dangers of HIV
• Many young adults with HIV are unaware that they are infected, are slow to be tested and engage in care, and have trouble keeping their medical appointments and adhering to treatment
• Guiding young adults with HIV to youth-friendly medical practices and support organizations can help make it more likely that they will engage in and stay in care
• Engaging and staying in care can help increase the chances of treatment success