

**SEPT. 27**

**NATIONAL**

**GAY**

**MEN'S**

**HIV**

**AIDS**

**AWA**

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Greetings!

Since 2008, on September 27th, we have observed National Gay Men's HIV/AIDS Awareness Day (NGMHAAD). NGMHAAD exists to encourage open conversations about preventing HIV and to shine light on the virus' disproportionate impact on gay, bisexual, and same gender loving men. This year, we need more than recognition. We must go much further. What do I mean?

### **1. Debunk the Myth**

There's a dangerous myth that Black people have higher rates of HIV because we engage in riskier sexual behavior. That is false. Because this lie is perpetuated by the medical community, we have to be vigilant about debunking the myth wherever we find it.

Black people are not suffering health disparities because of hypersexual behavior. We contract HIV at higher rates because we can't count on our healthcare system. While only representing 12 percent of the U.S. population, Black men and women account for [43% of all HIV infections](#). Why?

We have a [healthcare system built on structural racism](#) and full of poorly trained, biased caregivers. Quality insurance is too expensive and when Black people seek care, we struggle to find people truly invested in our health and longevity. Right now, PrEP, the medication that prevents contracting HIV, can cost [\\$1,300 per month](#) for people without insurance.<sup>1</sup> For many, this is untenable. It must change.

### **2. Prioritize Prevention, Support Management**

Preventing the spread of HIV is multifaceted. It requires making sure people have the medically accurate information, communication tools, and access to care they need to make informed decisions, seek support without abuse, and act on urgent health concerns quickly. It's important to remember, too, that people [living with HIV](#) can be healthy and live long when they have access to resources, medication, and quality care. To achieve better health outcomes for Black people living with HIV or who might contract the virus, we need to be armed with accurate and destigmatized information about HIV prevention and management. Until we can count on our healthcare system, we need to count on each other.

### **3. Demand Better**

What we need is a system that will ensure Black people can show up as our whole selves in our interpersonal and intimate relationships. Black gay, bisexual, and same gender loving men make up the highest number of HIV infections annually, so we have work to do. As we continue designing a world where Black people are not disproportionately impacted by health challenges, including HIV/AIDS, it's important that everyone plays a role in finding solutions to this enduring epidemic—there are no lay people in the effort to build the reality we deserve.

We know better, let's do better. [Start Talking. Stop HIV.](#) Vote.

In Love and Continued Struggle,



David J. Johns,  
Executive Director, The National Black Justice Coalition

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<sup>1</sup> Even in places like Florida, where the state recently partnered with a drug manufacturer to provide the drug for free throughout the state, we're seeing additional barriers to preventing the spread, such as the added cost of required lab appointments to receive the medication, and the fact that the communities that need this medication the most are still hard to reach due to language barriers, lack of cultural understanding by those attempting outreach, geographic location, and more.

*Start Talking. Stop HIV.* focuses on gay, bisexual, and same gender loving men by encouraging open communication between sex partners and friends about HIV prevention and management strategies. The campaign provides practical tools and tips to help gay, bisexual, and same gender loving men share their HIV status and talk about condom use, medicines that prevent and treat HIV, and other prevention topics.

### **HIV in the Black Community**

In the 50 states and the District of Columbia:

- Black people in America account for a higher proportion of new HIV diagnoses and people living with HIV, compared to other races/ethnicities.
- In 2019, Black people account for 13% of the population and 42% (16,076) of the 37,832 new HIV diagnoses in the US and dependent areas<sup>2,3</sup>. **This is a 1% decrease from 2017<sup>4</sup>.**
- 1 in 7 Black Americans with HIV are unaware they are living with HIV. People who do not know they have HIV cannot take advantage of HIV care and treatment and may unknowingly pass HIV to others.

### **HIV in Black Gay and Bisexual Men**

- Black gay, bisexual, and same gender loving men<sup>5</sup> are more affected by HIV than any other group in the United States<sup>6</sup>.
- In 2018, Black gay, bisexual, and same gender loving men accounted for 26% (9,756) of the 37,832 new HIV diagnoses in the United States and dependent areas (updated stat)<sup>7</sup>.
- In 2018, Black gay, bisexual, and same gender loving men accounted for 37% (9,712) of the 20,306 new HIV diagnoses among all gay and bisexual men in the US and dependent areas (new stat)<sup>8</sup>.
- In 2018, 3 out of 4 Black gay, bisexual, and same gender loving men who received an HIV diagnosis were between 13 and 34 years of age (no change)<sup>9</sup>.
- At the end of 2016, an estimated 225,200 Black gay, bisexual, and same gender loving men in the US and the District of Columbia were living with HIV (new stats)<sup>10</sup>.

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2 [HIV and African Americans | Race/Ethnicity | HIV by Group | HIV/AIDS](#)

3 Dependent areas included: American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau and the US Virgin Islands.

4 In 2017, Black people accounted for 13% of the US population but 43% (16,694) of the 38,739 new HIV diagnoses in the United States and dependent areas.

5 A reminder that the CDC uses “men who have sex with men (MSM)” and not “same gender loving.” MSM is problematic because it includes trans men who may not fit this definition.

6 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

7 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

8 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

9 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

10 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

## Early linkage to HIV medical care is essential to achieving viral suppression

Limited access to quality health care, lower income and educational levels, and higher rates of unemployment and incarceration may place some Black gay, bisexual, and same gender loving men at higher risk for HIV.

- Black gay, bisexual, and same gender loving men have lower rates of viral suppression<sup>11</sup> compared to gay and bisexual men of other races/ethnicities. Because of the low rates of viral suppression and the greater likelihood of having sex partners of the same race, compared with other races/ethnicities, Black gay, bisexual, and same gender loving men have a greater chance of coming in contact with HIV.
- Stigma, homophobia, and discrimination put gay, bisexual, and same gender loving men of all races/ ethnicities at risk for many health issues and may affect whether they are able to get quality health care. This is especially true for Black men who face additional shame and stigma as a result of ignorance and religious trauma.
- For every 100 Black gay, bisexual, and same gender loving men living with HIV in 2016, 75 men received some form of care, 59 men were retained in care, and 57 men were virally suppressed (new stat)<sup>12</sup>.
- From 2010–2017 HIV diagnoses among Black gay, bisexual, and same gender loving men varied by age. Consider the following: diagnosis decreased by 11% in men ages 13–24, increased by 42% in men ages 25–34, decreased by 21% in men ages 35–44, decreased by 36% in men ages 45–54 and remained stable in men ages 55 and older (new stat)<sup>13</sup>.
- As of 2018, only 67% of Black gay, bisexual, and same gender loving men with newly diagnosed HIV and 58% with previously diagnosed HIV were linked to HIV medical care within 90 days of the diagnosis (new stat)<sup>14</sup>.
- In 2019, 5.9% of Black people were prescribed PrEP, compared to 42.1% of white people<sup>15</sup>.

**Black people are dying as a result of HIV**, more than any other racial/ethnic group and this does not have to be our reality. Conversations about prevention, treatment and support on **#NGMHAAD** (and every day for that matter) must be centered within diverse Black communities. Taking charge of our health is one of the ways that we get free—that is happy, healthy and whole.

11 Viral suppression is defined as suppressing or reducing the function and replication of a virus. When discussing antiretroviral therapy for HIV, a regimen is considered to be highly successful if it reduces a person's viral load to undetectable levels.

12 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

13 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

14 [HIV and African American Gay and Bisexual Men | HIV by Group | HIV/AIDS](#)

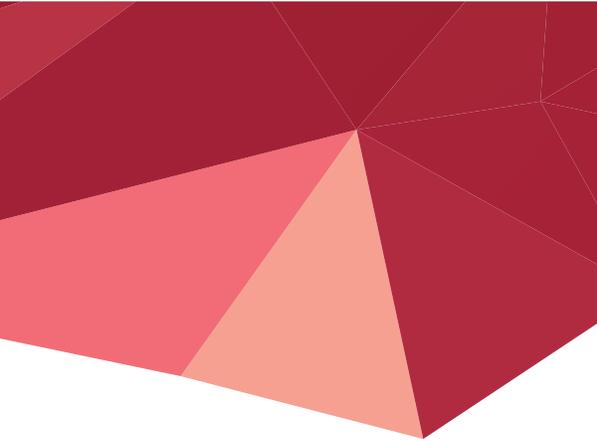
15 [Vital Signs: Status of Human Immunodeficiency Virus Testing, Viral Suppression, and HIV Preexposure Prophylaxis — United States, 2013–2018](#)



## Commit to Action

### Share Your Story

Knowing that you are not alone, that others have had similar experiences, and that other brothers are talking about HIV can be life affirming and life saving. Consider sharing your experiences along the aforementioned points along the continuum of care or how you talk to others about your health and wellness regimen using the hashtags #StartTalkingStopHIV, #NBJCAvocacy, and #NGMHAAD so that we may find and amplify.



### Consider the following as you Start Talking. Stop HIV.

- Don't wait until you're about to get it poppin' to start talking about HIV or sexual health.
- Know your status and ensure you are connected to sources of care and support. There are so many ways to get tested. Visit [www.nbjc.org](http://www.nbjc.org) to find what you need.
- Don't force it. Find the right time and place to have a conversation. You can schedule a time to talk or have spontaneous conversations in a setting where you are comfortable.
  - a. Visit NBJC's [YouTube page](#) and [IG](#) live talks on the topic to find a video that you can watch and use to jump start a conversation.
  - b. Schedule regular check-ins, or "talkiversaries," to update those you love. The key to a healthy relationship is having an open dialogue throughout the relationship. It can be hard to find the right time to bring these things up. If you agree to schedule them in advance, no one has to wonder about the timing of the conversations.
  - c. Remember, a conversation does not have to be face-to-face. Whether you talk, type, or text what is important is that you start the conversation.
- Use the [WordsMatter HIV toolkit](#) to support you in having stigma-free conversations about HIV.



## Ways to Engage

- 1. KNOW YOUR STATUS.** To end the HIV epidemic you must know your status. Get tested regularly (every three to six months).
- 2. TALK ABOUT HIV.** Bring awareness to the importance of testing, transmission and treatment for HIV by having conversations with friends and family.
- 3. HOST AWARENESS EVENTS.** While COVID-19 has changed the ways we're accustomed to engaging each other, we can leverage digital platforms to keep the conversations going. Think of what you and your community most need and host a digital event or COVID-19 safe, in-person event to raise awareness, celebrate, and support members of our community. Initial goals can include reducing stigma and shame as well as facilitating opportunities for people to get tested and connected to care.
- 4. SUPPORT A CAUSE.** Select an organization, like NBJC, and find ways to support their efforts to end the HIV epidemic in diverse Black communities.
- 5. USE SOCIAL MEDIA.** Social media can be a powerful tool in highlighting resources, increasing awareness and supporting advocacy. #StartTalkingStopHIV.

## Sample Social Media Content

Feel free to customize the content below.

Use the following campaign hashtags so we can find and amplify your messages.

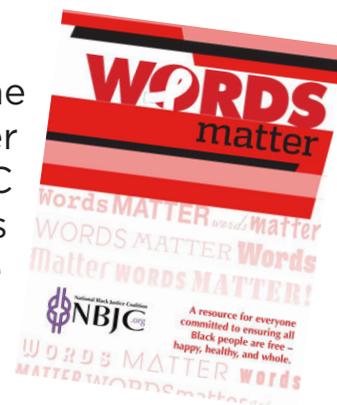
#StartTalkingStopHIV | #NBjCAdvocacy | #NGMHAAD

- Brothers, did you know that 3 out of 4 Black gay, bisexual, and same gender loving men who received an HIV diagnosis were aged 13 - 34. Let's talk about it. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- September 27 is #NGMHAAD. Conversations about condoms, PrEP, testing and treatment can help the Black gay, bisexual, and same gender loving men live longer and more full lives. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- Too many Black men are dying as a result of HIV and this does not have to be our reality. Know your status (visit [www.nbjc.org](http://www.nbjc.org) to find free testing services near you). Get connected to care. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- Ending HIV starts with awareness. From 2010 to 2016, HIV diagnoses decreased 12% among Black people overall in the 50 states and the District of Columbia. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- 1 in 7 Black people with HIV are unaware they have it. People who do not know they have HIV cannot take advantage of HIV care and treatment and may unknowingly pass HIV to others. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- Stigma, fear, discrimination and homophobia may place many Black people at higher risk for HIV. We must combat this stigma to save the people of the Black community from the HIV epidemic. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- Too many Black people are living with HIV unknowingly. What are you doing to protect your ASSETS? #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD
- Talking with competent healthcare providers is one of many first steps to reduce the negative impact of the HIV epidemic in the Black community. Connect with culturally competent health care providers on your campus or in the community to discuss HIV prevention, treatment, and support #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD.
- Discussing HIV can be difficult, which is why NBJC created the [Words Matter HIV Toolkit](#), which includes resources to support Black people in having healthier conversations about our health & wellness. Consider it a resource. #StartTalkingStopHIV #NBjCAdvocacy #NGMHAAD

## Things to know and share

### START TALKING TO STOP HIV:

Together, we can educate ourselves and support one another in ways that enable Black people to live healthier lives. Discussing HIV can be difficult, which is why NBJC created the [Words Matter HIV Toolkit](#). This toolkit provides the proper words and resources to support Black people in having healthier conversations about holistic health and wellness.



### TAKE ADVANTAGE OF MEDICAL & SCIENTIFIC ADVANCEMENTS:

Medications such as Pre-exposure prophylaxis (or PrEP) and Post-exposure prophylaxis (or PEP) exist to aid in reducing the risk of becoming HIV positive.

#### PrEP:

Pre-Exposure Prophylaxis is a daily pill one takes to lower their chances of getting infected. PrEP can stop HIV from taking hold and spreading throughout your body. It is most effective if used as prescribed and is much less effective when not taken consistently.

#### PEP:

Post-Exposure Prophylaxis is utilized after being potentially exposed to HIV to prevent becoming infected and is an antiretroviral medicine (ART). PEP should be used only in emergency situations and must be started within 72 hours after a recent possible exposure to HIV.

To obtain PrEP or PEP, contact your healthcare provider, an emergency room, or visit your local or state Health Department. If eligible, the Gilead Advancing Access® co-pay coupon card may help you save on your co-pays for PrEP and PEP. For more information visit: <https://www.gileadadvancingaccess.com/copay-coupon-card>.

Whatever you do, in observation of National Gay Mens HIV/AIDS Awareness Day do something to reduce stigma, facilitate testing, or otherwise ensure we address the impact that HIV continues to have in Black communities. We hope that this toolkit serves as a source of both inspiration and support. Thank you in advance for all that you will do.

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