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FCAA  
Funders Concerned About AIDS

## Fact Sheet

### HIV/AIDS in the Domestic LGBT Community

"AIDS is no longer a disease. It is a human rights issue."

-Nelson Mandela, speaking at the 14<sup>th</sup> International AIDS Conference, Paris, 2003

#### A National Crisis

HIV/AIDS is still a health crisis in the United States.

**40,000 new HIV infections** are reported each year.

**1.2 million** people are living with HIV/AIDS and **400,000** of those have AIDS.

**Over 17,000** people died in 2005 alone.

**571** people across four states remain on ADAP waiting lists.

Sources: Henry J. Kaiser Family Foundation, *Fact Sheet: The HIV/AIDS Epidemic in the U.S.*, November 2006; *Fact Sheet: ADAPs*, April 2007.

#### Domestic Trends among MSM

MSM accounted for **72% of all HIV infections among male adults and adolescents** in 2005 (based on data from 33 states with long-term, confidential name-based HIV reporting) even though only about 5% to 7% of male adults and adolescents in the United States identify themselves as MSM.

A recent study in 5 major cities showed that 21% of white MSM were HIV positive. **Among black MSM this figure was 46 percent.**

The number of HIV/AIDS diagnoses among MSM (including MSM who inject drugs) increased 13% from 2001 through 2005.

Source: CDC, *HIV/AIDS among Men Who Have Sex with Men*, May 2007.

#### Impact on Youth

Risky behavior is more common among young MSM than among older MSM. **Not having seen firsthand the toll of AIDS in the early years of the epidemic**, young MSM may be less motivated to practice safer sex.

In a recent CDC study of young MSM, **77% of those who tested HIV-positive mistakenly believed that they were not infected.** Among young black MSM, this figure was 90%, compared to 60% among young white MSM.

Source: CDC, *HIV/AIDS among Men Who Have Sex with Men*, May 2007.

#### Reinvesting in Domestic HIV/AIDS Programs to Support the LGBT Community

- In general, funding for HIV/AIDS is shifting to international recipients. In 2004, "an increased share of grantmaking aimed at addressing the AIDS epidemic globally was given to agencies based outside the U.S. and Canada."<sup>1</sup>
- In addition, **the proportion of U.S.-based funders prioritizing domestic work declined** from 65% of the total in 2003 to 37% in 2004.<sup>2</sup> The internationalization of AIDS philanthropy has the potential to threaten domestic service organizations.
- Funders for Lesbian and Gay Issues reports that of all domestic grants to LGBT causes in 2005, **HIV/AIDS-specific grants represented only 3% of grant dollars** (a decrease from 5% in

2004), and health grants represented an additional 4 percent. By comparison, 25% of grant dollars went to civil rights and 12% to community building/empowerment.<sup>3</sup>

- Yet this comes at a time when HIV/AIDS health service providers traditionally focused on serving LGBT communities may be at risk due to shortfalls in funding from the Ryan White Program.<sup>4</sup>
- In addition, “The **health needs of LGBT people are often not known by research and health authorities** and, even when known, are ignored and under-funded. Obtaining medical prevention and treatment is made problematic by **discrimination-induced poverty, lack of insurance and lack of medical and mental health providers experienced in working with LGBT clients.**”<sup>5</sup>

### Including the LGBT Community in Prevention

- Recently, several clinical studies in Africa have reported the success of male circumcision in reducing men’s risk of HIV infection during vaginal sex, spurring interest in circumcision as a general prevention tactic.
- But none of the clinical trials performed thus far address whether circumcision provides any prevention benefit during anal sex,<sup>6</sup> **leaving MSM out of this critical national dialogue on prevention.**<sup>7</sup>

In an interview with Jim Pickett, Director of Public Policy for the AIDS Foundation of Chicago, Bill Stackhouse, Director of the Institute for Gay Men’s Health at Gay Men’s Health Crisis, asks:

“Have we done enough to support and encourage the use of condoms? Circumcision for adults is a serious, medically invasive procedure which does not eliminate the risk of HIV transmission. **We clearly do not know how the research out of Africa is relevant to gay men.**”

### HIV/AIDS in the LGBT Community

- Though MSM and gay men receive most of the attention regarding HIV/AIDS among LGBTs, the other members of this community are at risk for AIDS as well, and can experience discrimination which prevents them from effectively accessing HIV/AIDS services.
- In addition to several confirmed cases of woman-to-woman HIV transmission,<sup>8</sup> lesbians can contract HIV from sex with men or from IV drug use. However, they are not targeted by prevention and treatment services because their sexual orientation is often not considered a risk factor.
- The CDC still does not list woman-to-woman transmission as an HIV risk category. Thus, reporting on HIV prevalence among lesbians is nearly nonexistent, **with HIV cases among the lesbian population classified under drug use, sex with HIV-positive men, or simply “undetermined.”**
- According to a 2005 study, transgender persons less likely than men or women to have been tested for HIV, more likely than the men to have experienced depression and more likely than both groups to have considered or attempted suicide.<sup>9</sup> A 2001 study of 392 male-to-female transgender persons in San Francisco **reported HIV prevalence of 35 percent.**<sup>10</sup>

For more resources on the philanthropic response to HIV/AIDS, visit FCAA at [www.fcaaid.org](http://www.fcaaid.org)

<sup>1</sup> Funders Concerned About AIDS, *U.S. Philanthropic Commitments for HIV/AIDS 2004*, August 2006.

<sup>2</sup> Funders Concerned About AIDS, *U.S. Philanthropic Commitments for HIV/AIDS 2004*, August 2006.

<sup>3</sup> Funders for Lesbian and Gay Issues, *Lesbian, Gay, Bisexual, Transgender and Queer Grantmaking by U.S. Foundations*, 2007.

<sup>4</sup> The Body, “Decades of Unique [LGBT] Health Care May Face Challenges as Funding Evolves,” 2005.

<sup>5</sup> National Gay and Lesbian Task Force, “The Issues; Health & HIV/AIDS.” Available at: [http://thetaskforce.org/issues/health\\_and\\_hiv\\_aids](http://thetaskforce.org/issues/health_and_hiv_aids)

<sup>6</sup> AIDS Vaccine Advocacy Coalition, *A New Way to Protect Against HIV?: Understanding the Results of Male Circumcision Studies for HIV Prevention*, February 2007. Available at: [http://www.aidsvaccineclearinghouse.org/MC/index.html#trials\\_activity](http://www.aidsvaccineclearinghouse.org/MC/index.html#trials_activity)

<sup>7</sup> Bill Stackhouse, Interview with Jim Pickett, published at the HIV Prevention Leadership Summit in May 2007.

<sup>8</sup> David Salyer, “Lesbians and HIV,” AIDS Project Los Angeles, April 2000. <<http://www.thebody.com/content/whatis/art32925.html>>

<sup>9</sup> W Bockting, C Huang, H Ding, B Robinson, JRS Rosser, “Are Transgender Persons at Higher Risk for HIV Than Other Sexual Minorities? A Comparison of HIV Prevalence and Risks,” *International Journal of Transgenderism*, Vol. 8, No. 2/3 (2005): 123.

<sup>10</sup> K Clements-Nolle, R Marx, R Guzman, and M Katz, “HIV prevalence, risk behaviors, health care use, and mental health status of transgender persons: implications for public health intervention,” *American Journal of Public Health* 91.6 (2001): 951-21.