

HIV/AIDS

AT **30**

A Public Opinion Perspective

A Report based on
the Kaiser Family Foundation's
2011 Survey of Americans
on HIV/AIDS

June 2011

THE HENRY J.
KAISER
FAMILY
FOUNDATION

HIV/AIDS AT 30: A PUBLIC OPINION PERSPECTIVE

TABLE OF CONTENTS

Executive Summary	1
The Dynamics of American Opinion on HIV/AIDS.....	3
A Special Focus on the Concerns, Experiences and Attitudes of the Black Community	12
Young Adults and the Domestic Epidemic.....	18
Americans Talk About Testing.....	24
Conclusions and a Look Ahead.....	31
Survey Methodology	32

HIV/AIDS AT 30: A PUBLIC OPINION PERSPECTIVE EXECUTIVE SUMMARY

As the HIV/AIDS epidemic marks its thirtieth year, the Kaiser Family Foundation is releasing a major, new national survey—our eighth on the topic since 1995—to better understand the evolution of public opinion toward the disease and the national efforts to prevent and treat it. Overall, the survey paints a picture of a nation that sees many signs of progress on HIV/AIDS, one which is far less likely to view the disease as an urgent national threat now than when AIDS first emerged in 1981. Masked by the overall numbers, however, are deep pockets of concern among some of the communities most affected by the disease. This report examines broad national trends in public opinion over the past several decades, and also takes an in-depth look at the views and experiences of two groups in particular: black Americans, whose communities have been severely and disproportionately affected by the disease, as well as young adults under age 30 who have never known a world without HIV.¹ Finally, it focuses in on trends in reported HIV testing rates and experiences.

Some of the key findings from the survey include:

Over the long term, a declining sense of national urgency, decrease in hearing about HIV/AIDS.

In 1987, two-thirds of Americans named HIV/AIDS as the most urgent health problem facing the country, a share that has declined steadily over the years, and sits at just 7 percent today. More recently, there has been a decline in the share who report having seen, heard, or read about the epidemic in the past year, from seven in ten in 2004 to four in ten today.

Personal concern about infection also down over long term, but ticks up this year for first time.

After nearly a decade of declining levels of personal concern about HIV, which may have reflected a growing complacency, the share who say they are “very concerned” about becoming infected ticked up for the first time in this year’s survey. The change was driven by young adults, among whom personal concern increased from 17 percent in 2009 to 24 percent in 2011.

Blacks overall, and young blacks in particular, express much higher levels of concern about HIV infection.

While the uptick in personal concern overall is important, these general population findings mask huge racial differences. Blacks are four times as likely as whites to say they are “very concerned” about becoming infected with HIV (40 percent vs. 11 percent). And young blacks are even more likely to be worried—half of black adults under age 30 say they are very concerned. Six in ten black parents express this level of concern about the possibility of their son or daughter contracting HIV, three times as many as among white parents.

In other ways, too, the impacts of HIV/AIDS are felt much more deeply in the black community.

Other survey findings also illuminate large racial disparities in reported experiences with HIV/AIDS. For example, black Americans are more than twice as likely as their white counterparts to say a close friend or family member is living with HIV or has died from AIDS (41 percent vs. 17 percent), and almost three times as likely to see HIV/AIDS as an increasingly urgent problem for their community (35 percent vs. 12 percent). Still, at a time when the HIV epidemic continues to place a disproportionate burden on the black community, many key measures of concern and visibility are not increasing for blacks, and are in fact flat or trending downward over time. For example, the share of blacks saying HIV/AIDS is a more urgent problem for their community than it was a few years ago fell from 49 percent in 2006 to 35 percent today.

Reported HIV testing rates flat since 1997, including among some key groups at higher risk, though reports of doctors suggesting HIV tests increased in last two years.

About one in five non-elderly adults say they have been tested for HIV in the past 12 months, a share that has remained about the same since 1997. Blacks, Latinos, and younger adults are more likely to say they’ve had a recent HIV test, but reported testing rates for these groups have also been flat over the past 14 years (currently 43 percent for non-elderly blacks, 24 percent for non-elderly Latinos, 26 percent for 18-29 year-olds overall, and 47 percent for 18-29 year-old blacks). While the share of non-elderly adults who say a health care provider has ever suggested they be tested for HIV

¹ Due to survey sample size limitations, we are not able to separately present data about the views and experiences of gay men, who have been at forefront of the epidemic. Their views are included in the national data in proportion to their share of the overall population.

ticked up from 19 percent in 2009 to 29 percent in 2011, so far this hasn't translated into an increase in reports of actually getting an HIV test.

Continued support for government spending to combat HIV, despite economic recession.

Despite the severe economic crisis of the past several years, more than half of Americans continue to support increased funding for HIV/AIDS, and fewer than one in ten say the federal government spends too much in this area. Young adults express even higher levels of support for government spending on HIV, and are more optimistic than older adults that spending on prevention and treatment will lead to meaningful progress.

Media is by far the public's top source of information about HIV, and many express desire for more information.

Six in ten Americans say most of what they know about HIV/AIDS comes from the media, putting it ahead of other sources like school, their doctors, friends and family, and the church. Media is the top information source on HIV across racial/ethnic groups and for younger and older adults alike. Substantial shares of the public—and much larger shares among blacks and Latinos—say they'd like to have more information on a variety of HIV-related topics, including how to prevent the spread of HIV, how to know whether to get tested and where to go to do so, and how to talk with children, partners, and doctors about the disease.

Many continue to hold potentially stigmatizing attitudes, but trend is toward a decline.

Thirty years into the HIV/AIDS epidemic, substantial shares of Americans continue to express discomfort at the idea of interacting with people living with HIV. For example, 45 percent say they'd be uncomfortable having their food prepared by someone who is HIV-positive, 36 percent with having an HIV-positive roommate, 29 percent having their child in a classroom with an HIV-positive teacher, and 18 percent working with someone with HIV. However, reported levels of discomfort have decreased over the past several years. For example, the share saying they'd be "very comfortable" working with someone who has HIV increased from about a third in 1997 to roughly half in 2011. There have also been striking declines since the early years of the epidemic in the share expressing the view that AIDS is a punishment (from 43 percent in 1987 to 16 percent today) or that it's people's own fault if they contract the disease (from 51 percent to 29 percent).

Looking for a leader?

The public is hard pressed to name an individual who stands out as a national leader in the fight against HIV/AIDS. Three-quarters of Americans couldn't name anyone in this capacity, and no person who was mentioned made it into double digits. And most Americans say there has not been enough action on HIV from a variety of groups and institutions including Congress; their state and local governments; the media; corporate, religious, and community leaders; pharmaceutical companies; and the Obama administration.

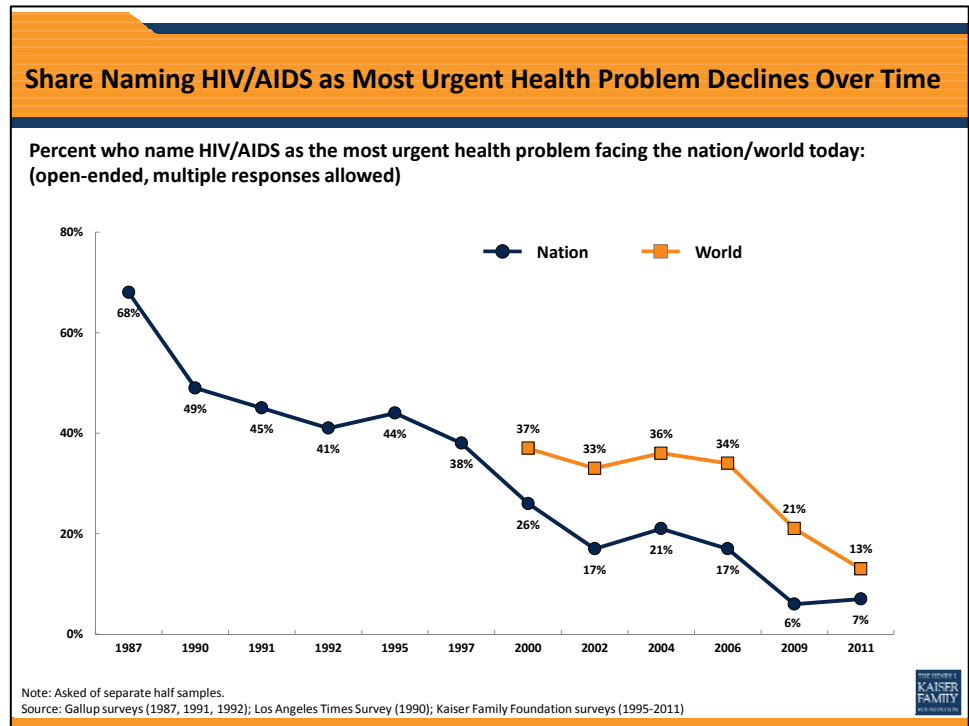
HIV/AIDS AT 30: THE DYNAMICS OF AMERICAN OPINION ON HIV/AIDS

Americans have lived with AIDS in their midst for thirty years, since it was first recognized as an unexplained pattern of illnesses in 1981.² They have experienced early waves of panic, witnessed the identification of HIV as the cause of AIDS, and celebrated the development of life-saving antiretroviral drugs. They have seen incidence peak in the 1980's, decline, and then level out since the turn of the new millennium.³ As time has passed, they have seen the illness morph from one that was initially associated almost exclusively with gay white men, into something that has had an increasing impact on blacks, Latinos, and women. They have waited, so far in vain, for a cure, but have seen amazing progress in prevention and treatment. American public opinion has reacted to these developments and trends in different ways, with people's views—and the intensity of interest—shifting as the disease became more familiar, as scientific advancements began to help people live longer and better lives after their diagnosis, and as HIV/AIDS began to affect different populations.

AS DISEASE BECOMES MORE WELL UNDERSTOOD AND THERAPIES DEVELOPED, PERCEIVED URGENCY OF AIDS DIMINISHED

In 1987, the Gallup Poll found that HIV/AIDS was seen by the large majority of Americans (68 percent) as the most urgent health problem facing the country. This was a year in which the World Health Organization first launched its Global Programme on AIDS, the AIDS Memorial Quilt was first displayed on the National Mall, and President Reagan made his first public speech about the disease.⁴ By the time the next survey was fielded in 1990, national AIDS policy had developed to the point that the U.S. Congress was passing the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, and the share of the public naming AIDS as a top problem had fallen to 49 percent. This measure further declined in the 1990's, a decade that saw major

advances in HIV treatment including the development of effective combination anti-retroviral therapy. By 2009, the proportion who named AIDS as the nation's top health problem had fallen to single digits, where it remains in 2011. As will be discussed in more detail in the next section, black Americans (19 percent) are more likely than others to name HIV as the nation's most urgent health problem. The share naming HIV/AIDS as the *world's* most urgent health problem—which has consistently been higher than the share saying so about the nation—has also dropped over the past five years, from 34 percent in 2006, to 21 percent in 2009, to 13 percent now.



² Centers for Disease Control and Prevention, "Thirty Years of HIV – 1981-2011," Morbidity and Mortality Weekly Report, 2011, 60(21): 689. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6021a1.htm>

³ Kaiser Family Foundation, Fact Sheet, "Black Americans and HIV/AIDS," March 2011. <http://www.kff.org/hiv/aids/upload/6089-09.pdf>

⁴ Kaiser Family Foundation, Timeline, "The Global HIV/AIDS Timeline, 2011." <http://www.kff.org/hiv/aids/timeline/hivtimeline.cfm>

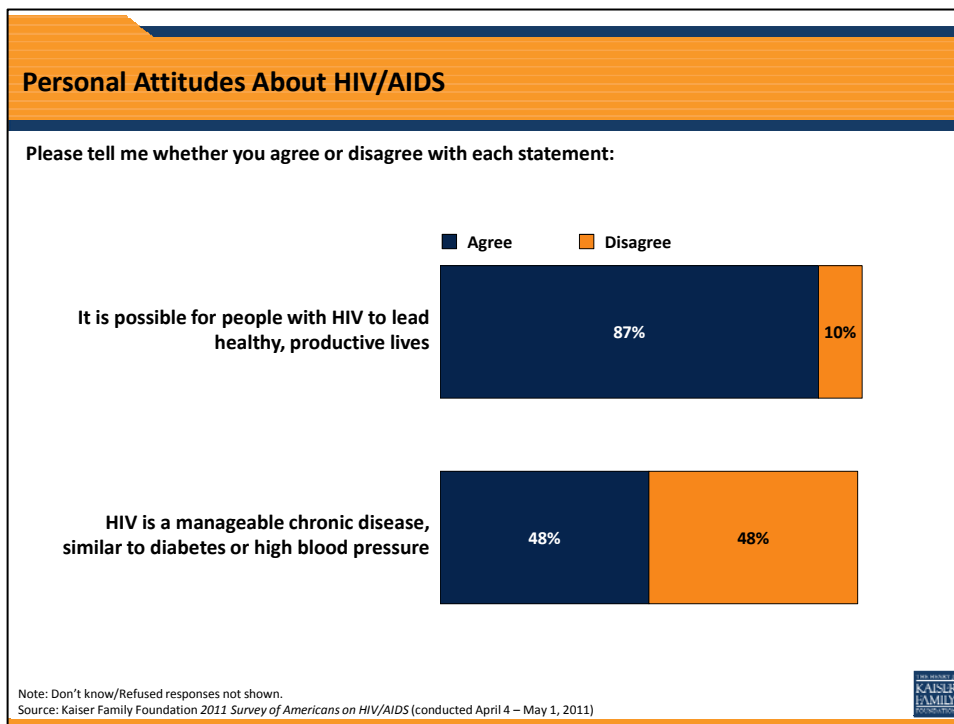
Topping the national list now are issues like cancer—a disease encompassing an enormous variety of illnesses, many terminal—obesity, and the problem of the uninsured.

In the era of anti-retroviral therapies, the public also seems unsure how to view the disease. While almost all Americans now believe it is possible for people with HIV to lead healthy, productive lives, the public is split on whether HIV should be perceived as a manageable chronic disease, similar to diabetes or high blood pressure—48 percent agree that it should and 48 percent disagree.

In recent years, Americans’ reports of hearing about the issue of HIV/AIDS—either through the media or in conversation—have also diminished. In 2004, 70 percent of Americans reported having seen, heard or read at least something about the domestic AIDS epidemic over the course of the past year. Five years later, in 2009, that proportion had dropped to less than half (45 percent), and it declined somewhat further to 40 percent in 2011. The survey suggests that the global HIV/AIDS epidemic has also lost some visibility over time, dropping from 71 percent who had seen at least something about the problem of AIDS in Africa in 2004, the year that President George W. Bush’s PEPFAR program (President’s Emergency Plan for AIDS Relief) was initially funded, to 55 percent in 2009 to 49 percent now. To some extent, as we will see in the next section, this may be due to the fact that the American public is more likely than not to see the epidemic as increasingly under control.

What Do You Think Is The Most Urgent Health Problem Facing This Nation Today? (open-ended, multiple responses accepted)	
Percent who say:	
Cancer	25%
Obesity	20
The uninsured	15
Heart disease	12
Health care costs	11
Diabetes	9
HIV/AIDS	7
Health care access	4

Percent Who Say They Have Seen, Heard, Or Read “A Lot” Or “Some” About HIV/AIDS In The U.S. In The Past Year			
	A lot	Some	A lot/Some (Net)
2011	13%	27%	40%
2009	14	31	45
2004	34	36	70



PLURALITY CONSISTENTLY SAY COUNTRY MAKING PROGRESS IN FIGHT AGAINST HIV/AIDS

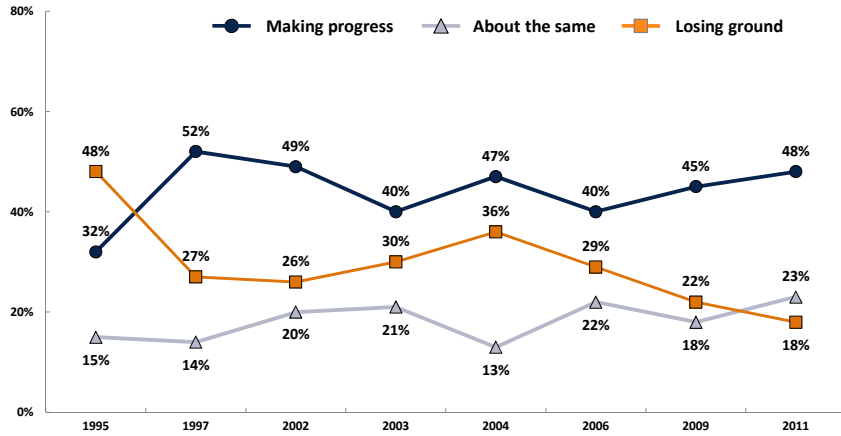
While there is no majority consensus as to whether the United States is making progress in the battle against HIV/AIDS at home, since the late 1990's somewhere between roughly 40 to 50 percent of Americans have consistently said they think the nation is gaining ground. At the same time, the proportion who see the nation as *losing ground* has declined steadily in recent years, from 36 percent in 2004, down to 18 percent in 2011. Another 23 percent now see the situation as in a steady state. This trend towards an increased sense of progress seems to parallel the decreased sense of urgency mentioned above. There has also been a similar downward trend in the share who think the *world* is losing ground in fighting the global HIV/AIDS epidemic (26 percent, down 23 percentage points since 2004); half (51 percent) now think the world is making progress on the disease.

Despite these perceptions of progress, many Americans recognize that challenges remain in certain areas, even when it comes to the domestic epidemic. While a majority (63 percent) believe that most U.S. residents have access to needed HIV prevention

services, about two-thirds (66 percent) say that most people in the U.S. who need treatment for HIV do not get the medication they need. Treatment access is in fact an issue. It is estimated that roughly 60 percent of people with HIV in the U.S. are not receiving regular care for the disease.⁵ Access to treatment is not only important for those with HIV/AIDS, but also has recently been found to be a crucial part of reducing the risk of transmission to others.⁶

Plurality See Progress Against Domestic Epidemic

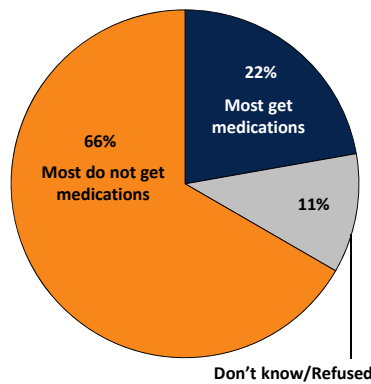
Thinking about the way the problem of HIV/AIDS affects the United States today, do you think the problem is about the same as it has been, that the U.S. is making progress in this area, or that the U.S. is losing ground?



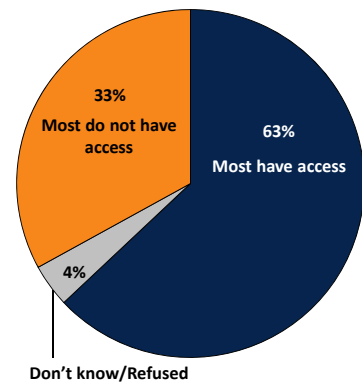
Note: Asked of separate half samples. Don't know/Refused responses not shown. Source: Kaiser Family Foundation surveys

Most Perceive Problems in Access to Medication

Do you think that most people in the U.S. who need treatment for HIV actually get medication, or do you think that most of them do not get the medication they need?



Do you think that most people in the U.S. have access to needed HIV prevention services, such as HIV education, testing, and counseling, or not?



Note: Asked of separate half samples. Source: Kaiser Family Foundation 2011 Survey of Americans on HIV/AIDS (conducted April 4 – May 1, 2011)

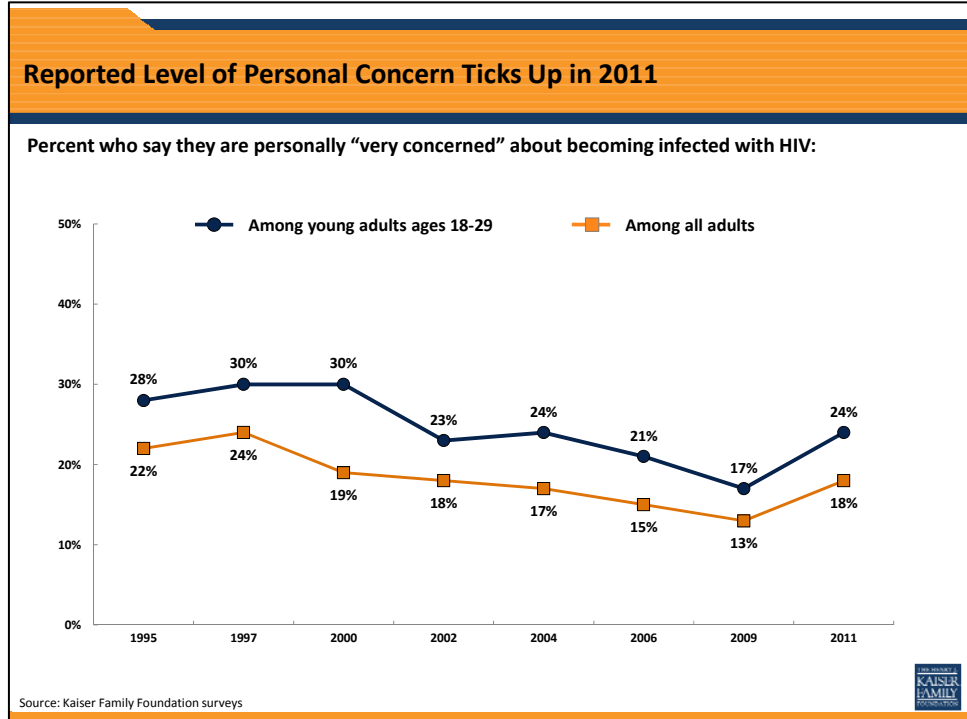
⁵ Gardner, E., McLees, M., Steiner, J., del Rio, C., and Burman, W, "The Spectrum of Engagement in HIV Care and Its Relevance to Test-and-Treat Strategies for Prevention of HIV Infection," *Clinical Infectious Diseases*, 2011, 52(6): 793-800.

⁶ National Institute of Allergy and Infectious Diseases, Press Release, "Treating HIV-infected People with Antiretrovirals Protects Partners from Infection: Findings Results from NIH-funded International Study," May 2011. <http://www.niaid.nih.gov/news/newsreleases/2011/Pages/HPTN052.aspx>

AFTER DECADE OF SLOW DECLINE, CONCERN ABOUT INFECTION TICKS BACK UP

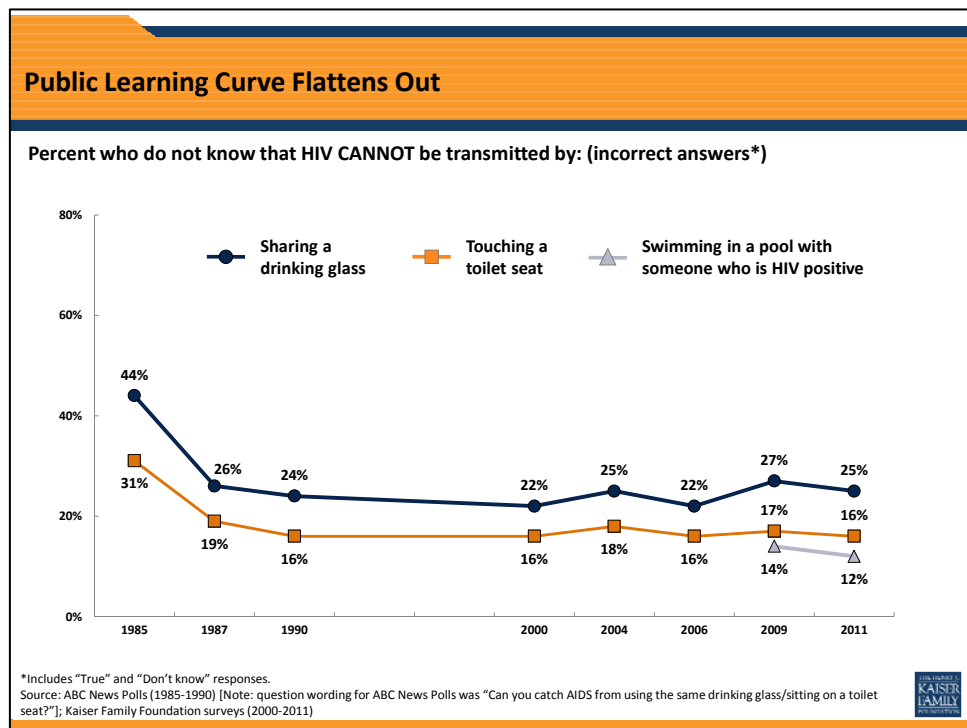
For the first time since 1997, and after more than a decade of slow but steady decline, the share who report being “very concerned” about becoming infected with HIV is up this year. That proportion rose from 13 percent in 2009 to 18 percent this year, an increase driven largely by young adults, among whom personal concern increased from 17 percent to 24 percent.

In 1995, just over half of parents reported being “very concerned” about a child becoming infected, but over the course of the next decade this concern lessened considerably to about a third of parents, a proportion which has stayed steady for the past seven years. Black Americans have consistently expressed higher levels of concern about HIV infection, both for themselves, and for their children (see next section for more details).



PUBLIC LEARNING CURVE ON TRANSMISSION HAS FLATTENED OUT; BUT SLIGHTLY INCREASED AWARENESS OF ABILITY TO PREVENT MOTHER-TO-CHILD TRANSMISSION

While surveys showed the public learning curve dropping steeply over the first decade of the epidemic, since the start of the 1990’s the remaining myths about modes of transmission remain stubbornly persistent. Over the past twenty years, roughly one in four Americans have continued to either believe that one can get HIV from sharing a drinking glass, or remain unsure whether this is the case. Similarly, roughly one in six believe the same about HIV transmission via shared toilet seats, and 12 percent either think you can get HIV by swimming in a pool with someone with HIV, or are not sure whether this is the case. Overall, in 2011, one in three gave an incorrect answer to at least one of these three questions about means of transmission.

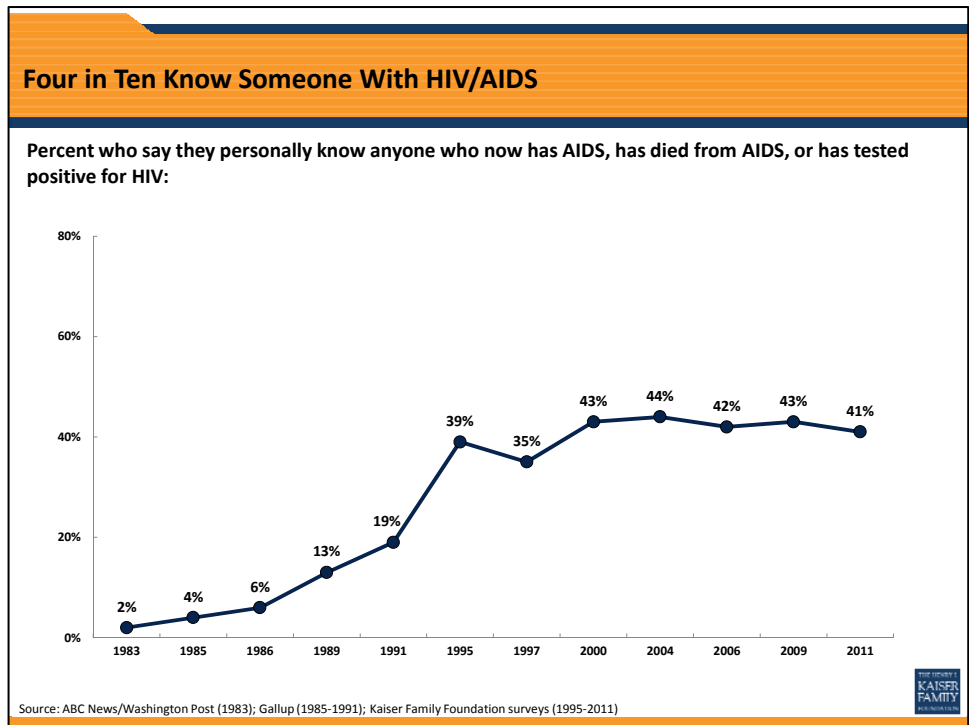


Other types of misinformation persist as well. For example, a quarter of Americans are unaware that there is no vaccine available to prevent HIV infection, and about two in ten do not know that there is no cure for AIDS. Still, 2011 did mark an improvement in the percentage of Americans who recognize that there are medications available to reduce the chances that an HIV-positive woman will pass the virus on to her baby. Currently, 53 percent recognize this is the case, a number that rises to 57 percent among women in general and 76 percent among black women under age 30.

Percent Saying The Following Statement Is True/False: "A Pregnant Woman Who Has HIV Can Take Certain Drugs To Reduce The Risk Of Her Baby Being Born Infected"			
	True	False	Don't know
2011	53%	26%	21%
2009	45	27	28
2006	44	26	29
2004	43	28	29
2000	43	28	29
1997	49	20	31
1995	30	36	34

POTENTIALLY STIGMATIZING ATTITUDES PERSIST, BUT TREND IS TOWARD A DECLINE; MOST STILL PERCEIVE DISCRIMINATION

HIV/AIDS cuts a wide swath in our population. Overall, since the start of the new millennium, roughly four in ten Americans have reported knowing someone with HIV/AIDS, and this proportion rises to nearly six in ten (57 percent) among blacks. Still, many Americans continue to report discomfort at the idea of interacting with those who are HIV-positive. Overall, 45 percent of Americans report being uncomfortable with the idea of having their food prepared by someone who is HIV-positive, 36 percent with the idea of having an HIV-positive roommate, 29 percent with having their child in a classroom with an HIV-positive teacher,⁷ and 18 percent working with

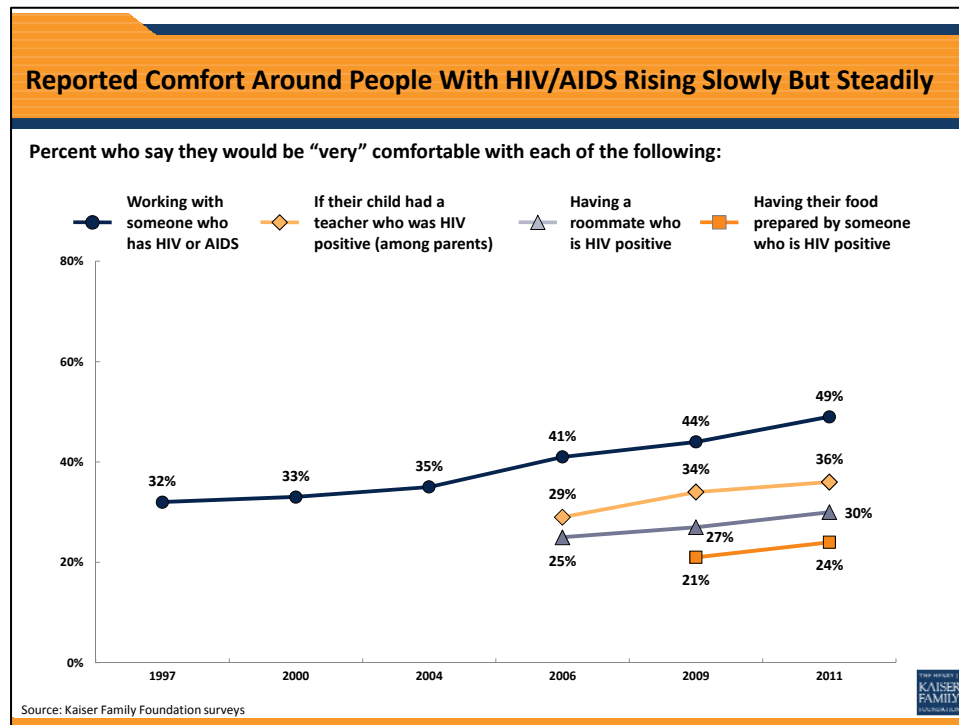


someone who has HIV/AIDS. The survey data suggest there is a generational gap in reported comfort levels, with those ages 65 and older considerably more likely to say they would be uncomfortable living as a roommate with (56 percent), working with (33 percent), or having their food prepared by (62 percent) someone who is HIV-positive.

The survey suggests that such discomfort is in part linked to mistaken concerns about how HIV is transmitted. For example, those who correctly answered the three items about transmission laid out above are twice as likely as others to say they would be comfortable having a meal prepared by someone with the virus (62 percent say they would be comfortable, compared to 31 percent of those who did not get all three items correct.) The data also show that those Americans who personally know someone with HIV/AIDS express more comfort about interacting with people in all the above circumstances.

⁷ Among parents of children ages 21 and younger.

Despite these pockets of discomfort, the trend over the past decade and a half has been towards increasing comfort levels around people with HIV/AIDS. Currently, about half of Americans say they would be “very comfortable” working with someone who has HIV or AIDS. Currently, about half of Americans say they would be “very comfortable” working with someone who has HIV or AIDS, up from a third in 1997. While survey trends do not go back as far, there have been similar increases over the past five years in the proportion saying they would be very comfortable with having an HIV-positive roommate or an HIV-positive teacher in their child’s classroom.



While survey trends do not go back as far, there have been similar increases over the past five years in the proportion saying they would be very comfortable with having an HIV-positive roommate or an HIV-positive teacher in their child’s classroom.

A more dramatic example of both the remaining negative beliefs and the extent to which these are slowly (many would say too slowly) eroding, is the change in the share of Americans who agree with two strongly negative statements about AIDS. Currently, three in ten Americans (29 percent) say they agree that “it’s people’s own fault if they get AIDS,” a share that stood at 40 percent in 2002 and 51 percent when Gallup asked the question in 1987. Similarly, 16 percent of Americans say they “sometimes think that AIDS is a punishment for the decline in moral standards”, also down 10 percentage points since 2002 and dramatically lower than the 43 percent who said so in 1987.

Percent Who Agree/Disagree With The Following Statements:

“In general, it’s people’s own fault if they get AIDS”			
	Agree	Disagree	Don’t know
2011	29%	67%	4%
2002	40	55	4
1997 ⁸	40	57	3
1991	33	63	4
1987	51	44	5

“I sometimes think that AIDS is a punishment for the decline in moral standards”			
	Agree	Disagree	Don’t know
2011	16%	81%	2%
2002	26	70	4
1997	31	66	3
1991	34	62	4
1987	43	50	7

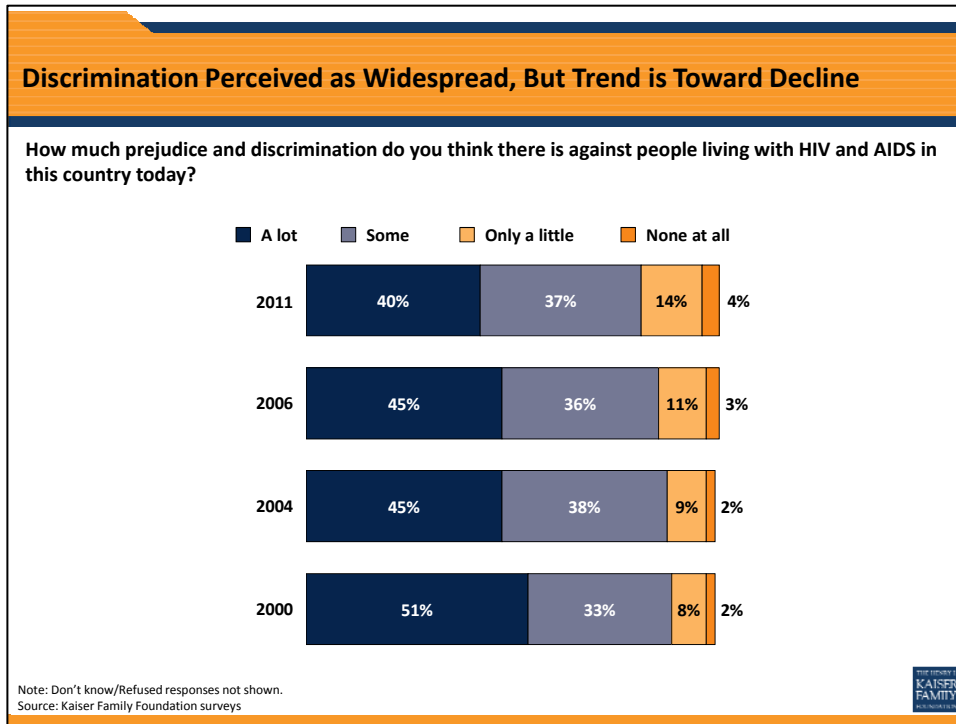
they agree that “it’s people’s own fault if they get AIDS,” a share that stood at 40 percent in 2002 and 51 percent when Gallup asked the question in 1987. Similarly, 16 percent of Americans say they “sometimes think that AIDS is a punishment for the decline in moral standards”, also down 10 percentage points since 2002 and dramatically lower than the 43 percent who said so in 1987.

In terms of ideas about personal culpability, men are somewhat more likely than women to buy into the concept that “it’s people’s own fault if they get AIDS.” Overall, 34 percent of men say they agree with this statement, compared with 24 percent of women.

⁸ Trends for 1997 and previous: Gallup and Gallup/CNN surveys.

In general, Americans perceive a good deal of discrimination against those living with HIV—40 percent say there is “a lot” of discrimination and another 37 percent say there is “some.” Over time, though, there has also been a slight decline in this measure, with the share perceiving “a lot” of discrimination down 11 percentage points since 2000.

Given the extent to which the HIV/AIDS epidemic has been associated with the gay community, the survey also sought to measure general attitudes towards and experiences with people who identify as gay or lesbian. Overall, about half (52 percent) of Americans say they have a family member or close friend who is gay or lesbian. While a plurality (47 percent) of Americans express the view that homosexuality is not a moral issue, a third say they personally believe homosexual behavior is morally wrong, compared with 12 percent who view it as morally acceptable.



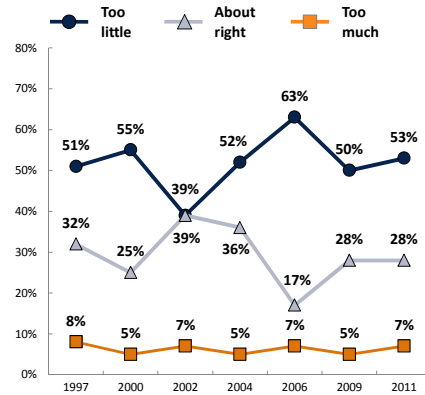
MOST SAY U.S. SPENDING TOO LITTLE OR RIGHT AMOUNT ON DOMESTIC HIV/AIDS EPIDEMIC, FEW WANT TO DECREASE FUNDING

Over the past ten years—as federal funding for HIV/AIDS has been on the rise⁹—Kaiser surveys have asked the public to weigh in on these funding levels both in isolation and in the context of spending on other pressing health problems such as cancer. The commonality across the two sets of results over time is that few Americans—never more than about one in ten—think the government should *decrease* spending on the domestic HIV/AIDS epidemic. This year, despite the continuing economic crisis, 53 percent say we are spending too little in fighting the epidemic at home, while 28 percent say we are spending the right amount. When asked in context of other illnesses, Americans are more divided: 39 percent say spending is too low, and 38 percent say it is about right.

About half of Americans also continue to believe that increased spending on both HIV/AIDS prevention and treatment will lead to meaningful progress in slowing the epidemic (51 percent say so for prevention, 48 percent for treatment). However, at least four in ten think such spending will not make much difference. And when it comes to spending on HIV prevention, skepticism appears to be on the rise—currently, 40 percent say such spending won’t make much difference, up from 31 percent in 2009.

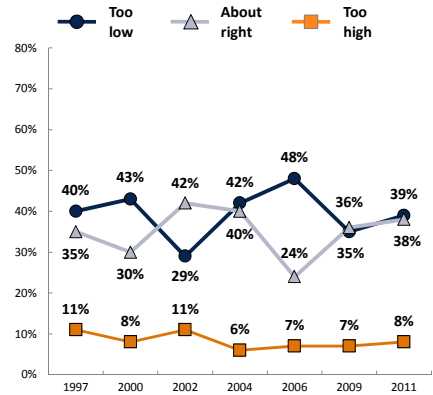
Most Say Federal Government Spending on HIV Too Little Or About Right

Thinking about the HIV/AIDS epidemic in the U.S. specifically, in general do you think the federal government spends too much money on HIV/AIDS, too little, or about the right amount?



Note: Asked of separate half samples. Don't know/Refused responses not shown. Source: Kaiser Family Foundation surveys

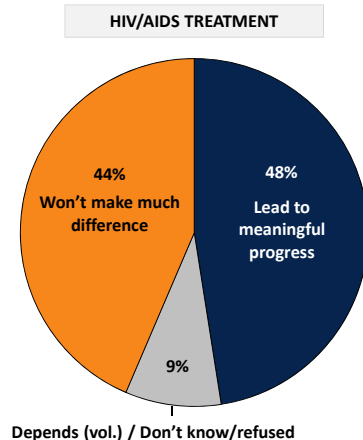
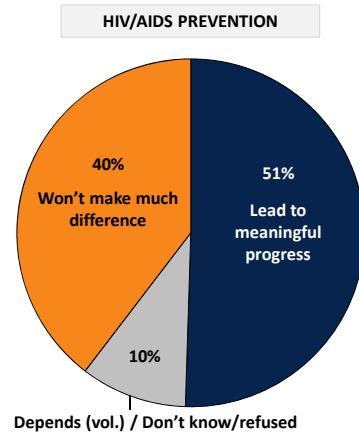
Compared with what the federal government spends on other health problems, such as heart disease and cancer, do you think federal spending on HIV/AIDS is too high, too low, or about right?



THE KAISSER FAMILY FOUNDATION

Americans Split on Whether More Spending Will Lead to Progress

In general, do you think that spending more money on (INSERT ITEM) in the U.S. will lead to meaningful progress in slowing the epidemic, or that spending more money won't make much difference?



Note: Asked of separate half samples. Source: Kaiser Family Foundation 2011 Survey of Americans on HIV/AIDS (conducted April 4 – May 1, 2011)

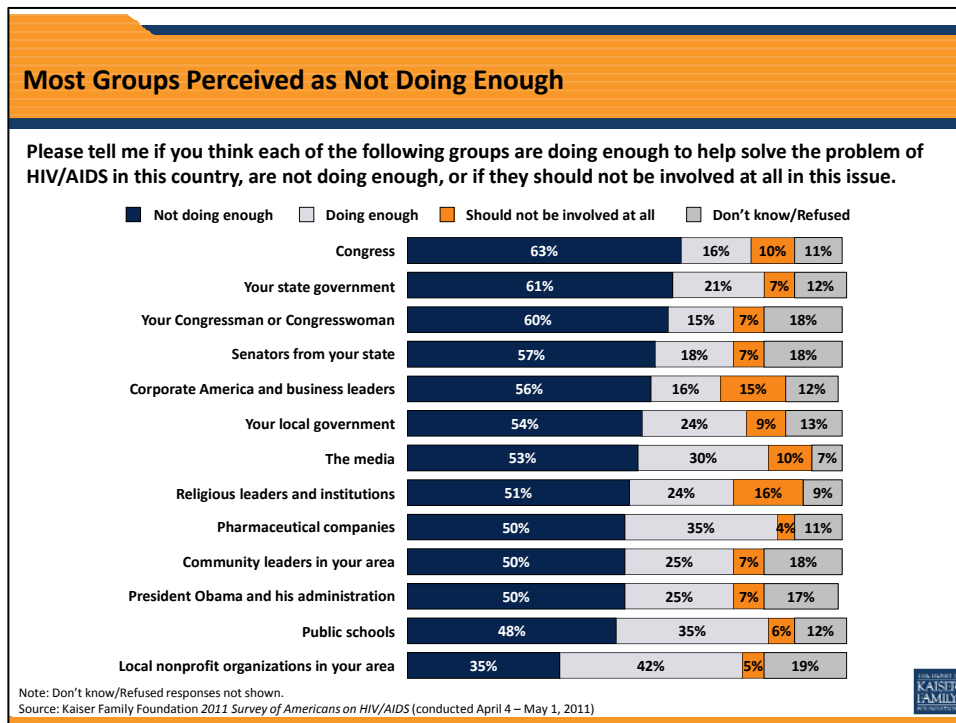
THE KAISSER FAMILY FOUNDATION

⁹ Kaiser Family Foundation, Fact Sheet, “U.S. Federal Funding for HIV/AIDS: The President’s FY 2012 Budget Request,” March 2011. <http://www.kff.org/hiv/aids/upload/7029-07.pdf>

LOOKING FOR A LEADER

The public is hard pressed to name an individual who stands out as a national leader in the fight against HIV/AIDS. Three-quarters of Americans couldn't name anyone as a national leader. No person who was mentioned made it into double digits. Overall, 8 percent named Magic Johnson, 5 percent named the recently deceased Elizabeth Taylor (whose death was heavily covered by the media just before the survey was in the field¹⁰), 2 percent named President Barack Obama, and 1 percent each named Elton John, Bill Clinton, George W. Bush and rock singer/activist Bono.

When asked about the efforts of a variety of individuals and institutions, the public says most of them are not doing enough to help solve the problem of HIV/AIDS in this country. Specifically, majorities would like to see more action on HIV from Congress (63 percent), their state governments (61 percent), their own Congressional representatives (60 percent) and Senators (57 percent), corporate America and business leaders (56 percent), their local governments (54 percent), and the media (53 percent). About half say the same about religious leaders (51 percent) and community leaders (50 percent), President Obama and his administration (50 percent), pharmaceutical companies (50 percent), and public schools (48 percent). The only group that a plurality (42 percent) believes is doing enough on HIV is local non-profits; still, a third (35 percent) think these organizations could be doing more.



¹⁰ Ms. Taylor died March 23, 2011, and the survey was in the field April 4-May 1.

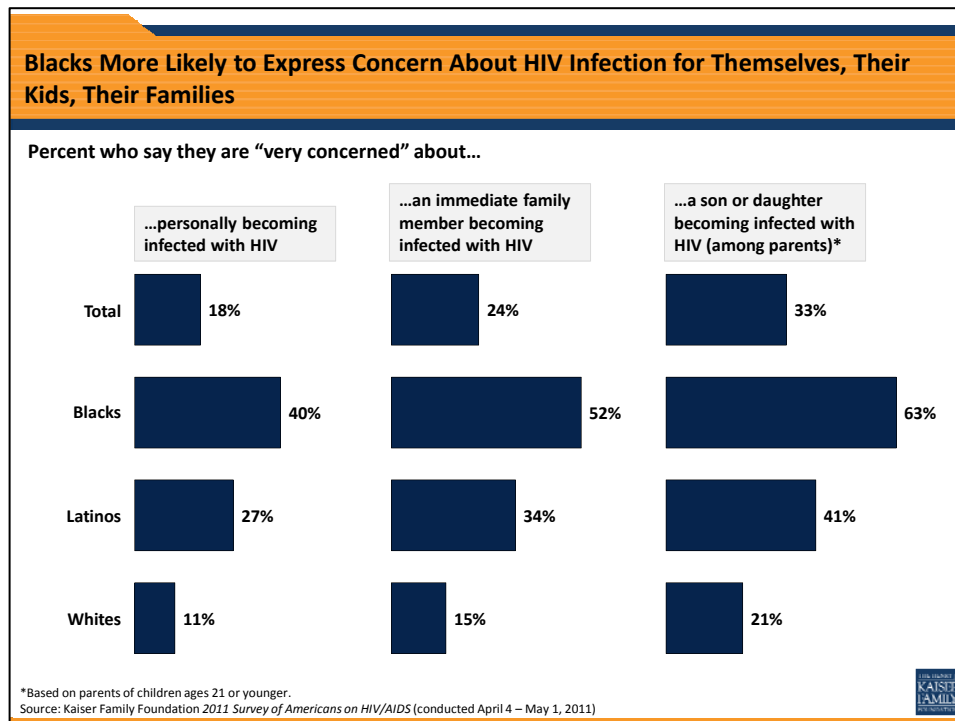
**HIV/AIDS AT 30:
A SPECIAL FOCUS ON THE CONCERNS, EXPERIENCES AND ATTITUDES OF THE BLACK COMMUNITY**

From the inception of the epidemic, HIV/AIDS has placed a disproportionate burden on black Americans, a community already struggling with a raft of other health disparities. Though blacks make up 12 percent of the U.S. population, they currently account for 45 percent of new HIV infections, 48 percent of new AIDS diagnosis, and 57 percent of deaths due to HIV.¹¹ In this section, we focus in on the concerns, experiences and attitudes of black Americans toward HIV/AIDS as the epidemic marks its thirtieth year.

THE THREAT OF HIV/AIDS IS MORE IMMEDIATE, MORE PERSONAL AND MORE WIDESPREAD IN THE BLACK COMMUNITY

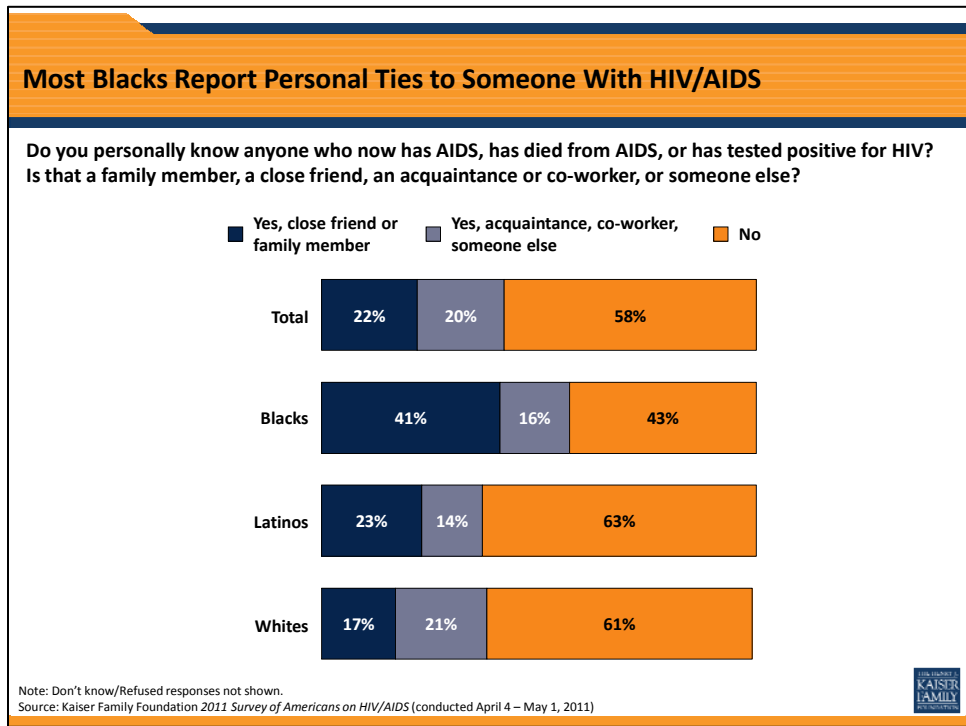
Black Americans are more than twice as likely as whites to worry about becoming infected with HIV. A majority—56 percent—express at least some concern about contracting HIV, compared to 23 percent of whites. More pointedly, they are roughly four times as likely as whites to say they are “very concerned” about becoming infected (40 percent versus 11 percent). Worry is particularly high among younger blacks and those with fewer years of education and lower incomes. For example, a striking 51 percent of black adults under the age of 30 say they are “very concerned” about becoming infected.

And black parents echo the worries of their children. Among those with a child under age 22, fully 83 percent say they are concerned about the possibility of their son or daughter becoming infected with HIV, with 63 percent saying they are “very concerned.” In comparison, only 21 percent of white parents are very concerned about their child becoming infected with HIV. Overall, the large majority of blacks (74 percent) worry about an immediate family member becoming infected with HIV, while for most whites (63 percent) this is a minor concern if anything.



¹¹ Kaiser Family Foundation, Fact Sheet, “Black Americans and HIV/AIDS,” March 2011. <http://www.kff.org/hiv/aids/upload/6089-09.pdf>

Widespread worries about infection are likely a reflection of the black community's direct experiences with the disease: a majority of black adults (57 percent) report knowing someone who is either HIV-positive, has AIDS or has died from AIDS. Four in ten say this person is a close friend or family member, twice as many as among whites (17 percent). And perhaps as a result of these heightened concerns, blacks are much more likely than whites to talk to their partners about HIV/AIDS: 67 percent say they have, compared to 42 percent of whites.



MISPERCEPTIONS OF DISEASE LINGER

While most black Americans are aware that there is currently no cure for AIDS and no vaccine that can prevent HIV infection, roughly three in ten continue to be unaware of these stark realities. Overall, 35 percent either think there *is* a vaccine that can prevent HIV infection or aren't sure whether this is true, and 32 percent either think former basketball star and AIDS activist Magic Johnson has been cured of AIDS or don't know enough to say either way.

Two-thirds know that an HIV-positive woman can take medications while pregnant to reduce the risk of her child being born with the virus—with black women substantially more knowledgeable on the topic than black men (72 percent correct compared to 59 percent)—but a third of blacks overall either do not know or do not believe this is a viable option.

Among Blacks: Knowledge of Some Key Facts About HIV/AIDS				
Statement about HIV/AIDS	True or False?	Percent giving correct answer	Percent giving incorrect answer	
			Wrong Answer	Don't Know
A pregnant woman who has HIV can take certain drugs to reduce the risk of her baby being born infected	True	66%	24%	9%
There is no cure for AIDS at present	True	73	23	4
There is a vaccine available to prevent people from becoming infected with HIV	False	66	24	11
Magic Johnson has been cured of AIDS	False	68	19	13

Overall, blacks are somewhat less likely than whites to know there is no vaccine or cure for HIV, and somewhat more likely to know about the medicines available to limit mother-to-child transmission of HIV. In terms of knowledge about how one might contract HIV, 75 percent of blacks are aware that you cannot get HIV from sharing a drinking glass, 82 percent know you cannot get it from a toilet seat and 84 percent understand it cannot be transmitted by swimming in a pool with someone who has the virus. Still, overall a third of blacks (34 percent), as is true for whites, hold at least one of these misperceptions.

BLACKS SEE MORE DISCRIMINATION, EXPRESS SOME DISCOMFORT IN INTERACTING WITH THOSE WITH HIV, HOLD MORE NEGATIVE VIEWS OF HOMOSEXUALITY

Blacks are much more likely than whites or Latinos to perceive discrimination against those with HIV/AIDS. Fifty-five percent say there is “a lot” of prejudice against those living with the disease, compared to 37 percent of whites and 41 percent of Latinos.

Percent Saying They Would Be Comfortable/Uncomfortable In The Following Situations			
	Blacks	Whites	Latinos
Working with someone who has HIV or AIDS			
Comfortable	80%	80%	71%
Uncomfortable	20	18	23
If your children had a teacher who was HIV-positive (among parents)			
Comfortable	67	71	54
Uncomfortable	32	25	37
Having a roommate who is HIV-positive			
Comfortable	60	62	53
Uncomfortable	39	34	41
Having your food prepared by someone who is HIV-positive			
Comfortable	42	54	50
Uncomfortable	57	44	43

A significant proportion of blacks, however, continue to express discomfort with close interactions with those who have HIV, perhaps due to some of the misunderstandings mentioned above. A large majority of blacks—eight in ten—would have little problem working with someone who was HIV-positive, a figure that has risen significantly since the late 1990’s. Still, about four in ten say they would be uncomfortable having a roommate with HIV, and most (57 percent) would feel uncomfortable with an HIV-positive individual preparing their food.

Even though they are just as likely as other groups to report having a close friend or family member who is gay, blacks are much more likely than whites or Latinos to believe that homosexual behavior is morally wrong: 47 percent say so, compared to 32 percent of whites and 27 percent of Latinos. Even

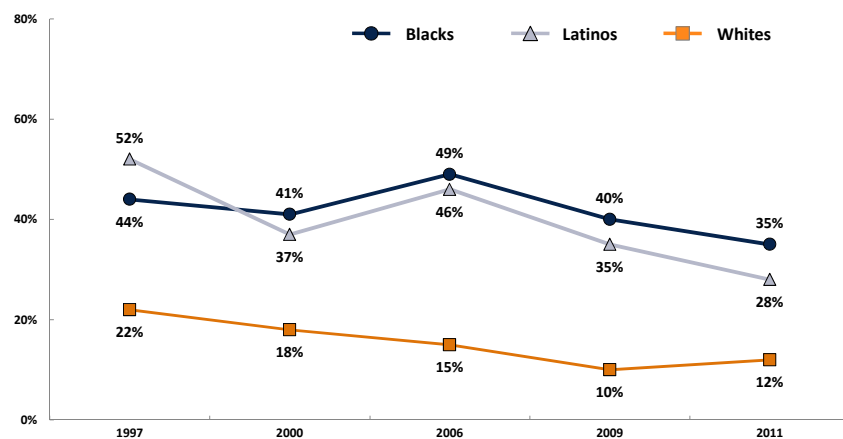
among the younger generation, with their generally more accepting views, blacks are more likely to say they view homosexuality as a moral wrong (37 percent of blacks under age 30 see it as such, compared to 24 percent of whites and 18 percent of Latinos).

WHILE BLACKS MOST LIKELY TO PERCEIVE AIDS AS PRESSING PROBLEM FOR THEIR COMMUNITY, SOME SENSE OF LESSENING URGENCY

Blacks are nearly three times as likely as whites to report that AIDS is an increasingly urgent problem in their community (35 percent compared to 12 percent). However, despite the number of new infections remaining stable in recent years and at higher levels than previously thought, Kaiser surveys have found the level of urgency dropping slowly among blacks from 49 percent in 2006 to 40 percent in 2009 and 35 percent now.

Blacks Most Likely to Perceive AIDS as Pressing Community Problem; Fewer See Problem Worsening Than in Past

Percent who say AIDS is a MORE URGENT problem for their community now than it was a few years ago.



Source: Kaiser Family Foundation surveys



Still, HIV/AIDS ranks second on the list of the nation’s most urgent health problems among blacks, named by 19 percent compared to 39 percent who mentioned cancer. In comparison, among Americans as a whole, AIDS ranks seventh as an urgent health problem. As is true among whites and Latinos, the proportion of blacks naming HIV/AIDS as the top issue has lessened over time as treatment advances have led to longer life spans and improved quality of life for those living with the disease.

FEWER BLACKS REPORT HEARING NEWS OF DOMESTIC AIDS EPIDEMIC; INFORMATION FROM THE PULPIT; GREAT DESIRE FOR MORE INFORMATION

Following a trend that emerged in our 2009 survey, as is true for Americans overall, the proportion of blacks who say they have “seen, heard or read” about the U.S. AIDS epidemic continues to fall. Currently, 54 percent report having heard at least something about HIV in the past year, down from 65 percent in 2009 and 83 percent in 2004.

The primary source of information about HIV/AIDS in the black community is the media, as is true for whites and Latinos. Overall, 53 percent of blacks say that most of the information they have about AIDS comes from the media, somewhat lower than the 66 percent of whites who say so. The second most common source are doctors or nurses (15 percent, twice as many as among whites), followed by friends and family (12 percent).

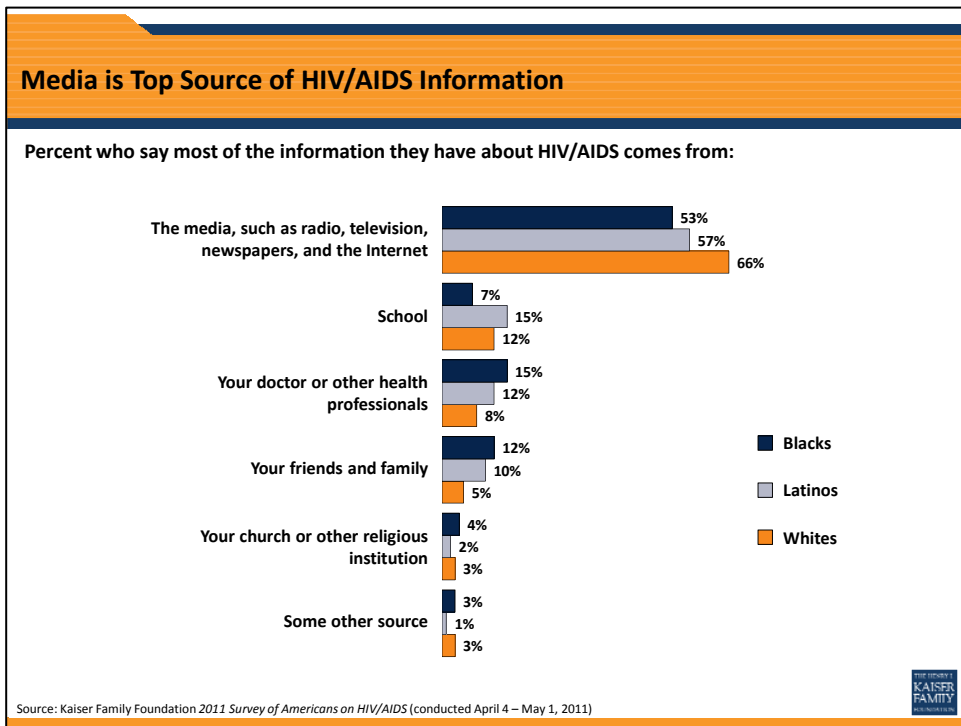
Interestingly, while only 4 percent of blacks say that the church is their primary source of AIDS information, a full 55 percent of churchgoing blacks say they have heard about HIV/AIDS from the pulpit, much higher than the 36 percent of religiously active whites who report hearing about AIDS from their clergy. Still, most blacks—67 percent—say that religious leaders and institutions are not doing enough to help solve the problem of HIV/AIDS, a charge that a majority of blacks also level against a number of other local and national institutions, from Congress (78 percent not doing enough) to public schools (60 percent) to pharmaceutical companies (64 percent).

What Do You Think Is The Most Urgent Health Problem Facing This Nation Today? (Open-Ended, Multiple Responses Accepted)

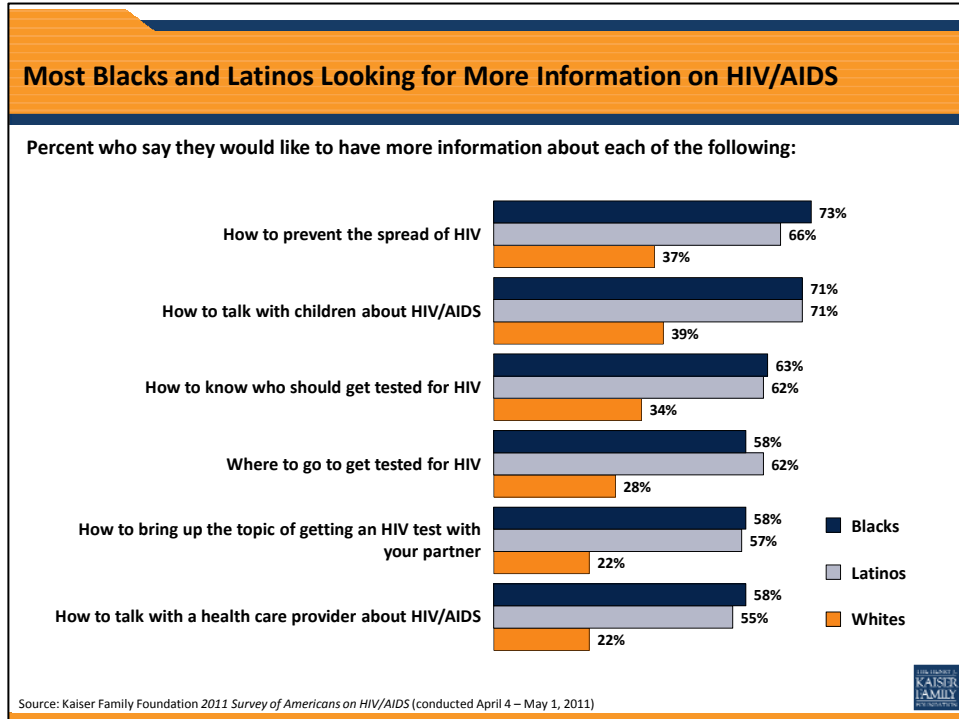
Percent of blacks who say:	
Cancer	39%
HIV/AIDS	19
Obesity	14
Diabetes	12
Heart disease	12
The uninsured	11

Among Blacks, Percent Who Say They Have Seen, Heard, Or Read “A Lot” Or “Some” About HIV/AIDS In The U.S. In The Past Year

	A lot	Some	A lot/Some (Net)
2011	26%	28%	54%
2009	33	32	65
2004	62	21	83



Asked about six possible HIV-related topics on which they might get more information, a majority of blacks express interest in hearing more about each one. This is a stark contrast to whites, where no more than four in ten express interest in additional information on any one topic. Overall, seven in ten blacks say they want more information about how to stop HIV from spreading and just as many want more information on how to talk to children about HIV. Six in ten want to know more about who should get an HIV test and where they might go to get one. Latinos express just as much interest as blacks on all these topics.



LATINOS AND HIV¹²

While the impact of HIV/AIDS in the U.S. Latino community has not been quite as disproportionate as it has among blacks, Latinos continue to be heavily affected by the epidemic, experiencing higher rates of new infections, AIDS diagnoses, and people living with HIV than their white counterparts.¹³ Latinos' reported opinions and experiences often reflect this disproportionate impact, some of which are included throughout this report, and a few of which are summarized below.

Latinos appear to feel the disproportionate impact of HIV on their community, with six in ten (61 percent) saying HIV/AIDS is a serious problem for people they know, similar to blacks and roughly twice as many as among whites (32 percent). Still, Latinos (37 percent) are just about as likely as whites (39 percent) to say they know someone who currently has HIV or has died from AIDS, a share that is far lower than among blacks (57 percent).

Latinos express a level of concern about contracting HIV that is somewhat higher than whites (27 percent vs. 11 percent say they are "very concerned"), but lower than that expressed by blacks (40 percent). Like black Americans, Latinos are substantially more likely than whites to say they want more information about various HIV-related topics, including how to prevent the spread of HIV, how to know whether to get tested and where to go to do so, and how to talk with their partners, doctors, and children about the disease.

Like their black counterparts, reported visibility of HIV/AIDS in the U.S. has declined for Latinos in recent years. In 2004, 74 percent of Latinos reported seeing, hearing, or reading at least something about the U.S. epidemic in the previous year, a figure that declined to 54 percent in 2009 and 43 percent today.

Latinos are somewhat more likely than whites and blacks to express attitudes that may stigmatize people living with HIV. For example, Latinos are 9 percentage points less likely than their white peers to say they would be comfortable working with someone with HIV (71 percent vs. 80 percent) or having an HIV-positive roommate (53 percent vs. 62 percent). Just over half (54 percent) of Latino parents say they'd be comfortable if their children had an HIV-positive teacher, compared with seven in ten white parents (71 percent). And four in ten Latinos (41 percent) agree that "in general, it's people's own fault if they get AIDS," a share that is higher than among blacks or whites (31 percent and 26 percent respectively).

Selected Survey Findings for Latinos Compared with Blacks, Whites			
	Latinos	Blacks	Whites
Percent who...			
Say AIDS is a serious problem for people they know	61%	59%	32%
Know someone who has HIV or has died from AIDS	37	57	39
Are very concerned about becoming infected	27	40	11
Want more information about...			
How to prevent the spread of HIV	66	73	37
How to know who should get tested for HIV	62	63	34
Where to go to get tested for HIV	62	58	28
How to talk with a partner about HIV testing	57	58	22
How to talk to a health care provider about HIV/AIDS	55	58	22
How to talk to children about HIV/AIDS	71	71	39
Say they would be comfortable...			
Working with someone with HIV	71	80	80
Having an HIV-positive roommate	53	60	62
If their children had an HIV-positive teacher (among parents)	54	67	71
Agree with the statement "it's people's own fault if they get AIDS"	41	31	26

¹² Residents of Puerto Rico, a U.S. Latino community that has been heavily impacted by HIV/AIDS, are not included in this national survey.

¹³ Kaiser Family Foundation, Fact Sheet, "Latinos and HIV/AIDS," March 2011. <http://www.kff.org/hiv/aids/6007.cfm>

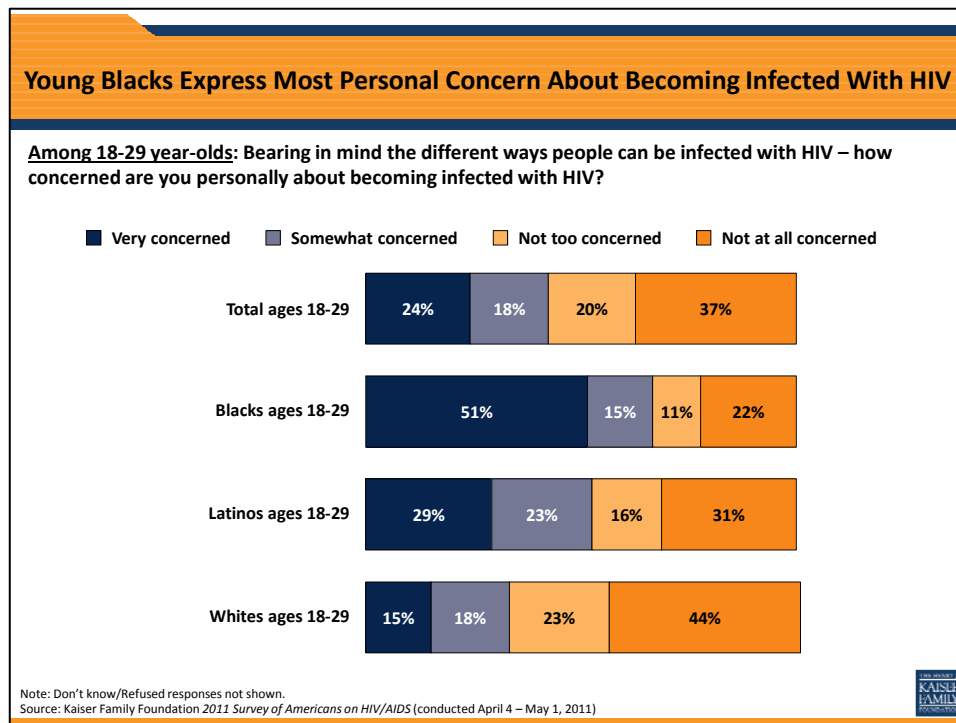
HIV/AIDS AT 30: YOUNG ADULTS AND THE DOMESTIC EPIDEMIC

Americans under age 30 have never known a world without HIV. Many of them likely take for granted the concept that there are treatments to prolong the lives of those with HIV, treatments that did not exist when their parents and grandparents first learned about the illness. They are part of a generation whose attitudes on some social issues, particularly those concerning gays and lesbians, are also considerably more liberal than their elders. And as they begin their adult years, their attitudes, knowledge and behaviors around the topic of HIV will impact efforts to reduce the spread of the virus going forward. In this section, we take a closer look at 18 to 29 year olds, with a special emphasis, as in earlier sections, on those in the black community.

YOUNG ADULTS MOST CONCERNED ABOUT INFECTION, DRIVEN BY INTENSE CONCERN AMONG YOUNG BLACKS

Young adults—less likely to be in monogamous relationships, more likely to report having multiple sexual partners¹⁴—are the age group most likely to express personal concern about contracting HIV. Overall, 42 percent are at least somewhat concerned about this possibility, and the proportion that reports being “very concerned” ticked up this year for the first time in nearly fifteen years, from 17 percent two years ago to 24 percent now.

But that statistic glosses over a vast racial gap in concern among those under age 30. Young black adults, who have been disproportionately impacted by the domestic epidemic and account for 55 percent of all reported HIV infections among those aged 13 to 24,¹⁵ are much more likely than young whites to report worrying about HIV. Overall, fully half (51 percent) of blacks under 30 say they are *very concerned* about contracting HIV, and 66 percent are at least somewhat concerned. Most young whites express little concern about personal infection (67 percent say they have little or no worries on this front), and only 15 percent are very concerned. Young Latinos express concerns that put them somewhere between the other two groups.



¹⁴ Women and men in their 20s have higher rates of sexual activity and are more likely than older adults to report having 2 or more sexual partners during the past year. Centers for Disease Control and Prevention National Center for Health Statistics, “Sexual Behavior, Sexual Attraction, and Sexual Identity in the United States: Data From the 2006-2008 National Survey of Family Growth,” National Health Statistics Reports, March 2011. <http://www.cdc.gov/nchs/data/nhsr/nhsr036.pdf>

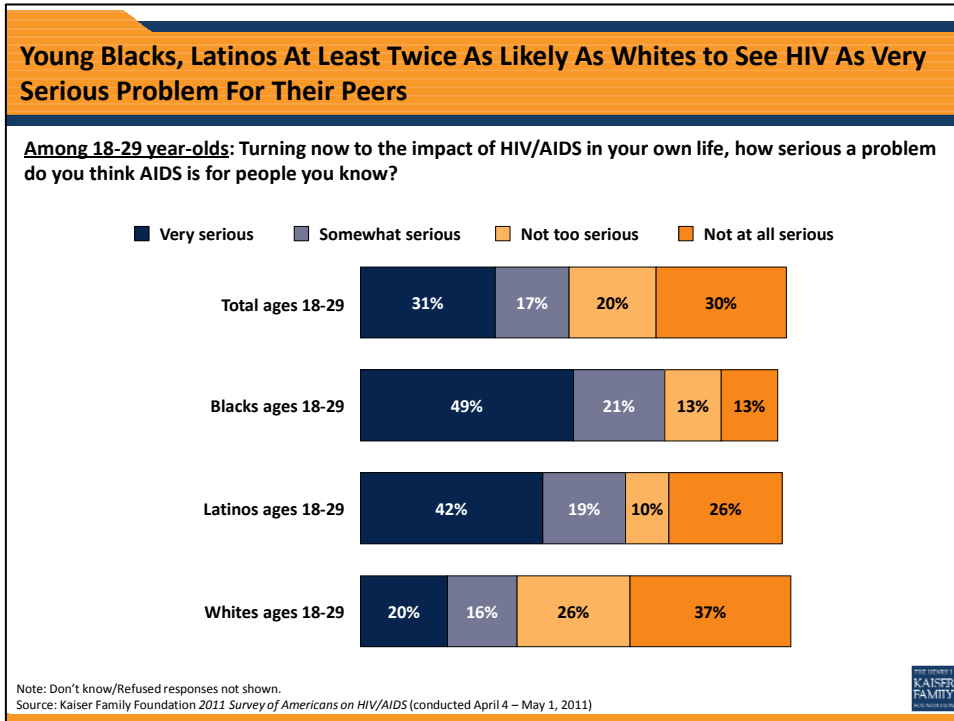
¹⁵ Centers for Disease Control and Prevention, Fact Sheet, “HIV/AIDS Among Youth,” August 2008. <http://www.cdc.gov/hiv/resources/factsheets/youth.htm>

Concerns about infection are likely driven in part by the extent to which even the youngest generation of American adults has seen the epidemic up close. Three in ten young adults report knowing someone living with HIV/AIDS or someone who died from the disease, fewer than among middle-aged Americans, but still a significant proportion given their relative youth. Again, however, younger blacks have been the most widely impacted. Three in ten have had HIV/AIDS impact their family or close friend group, compared to one in ten whites and two in ten Latinos in this age range.

Reported Personal Connections With People With HIV/AIDS By Age And Race/Ethnicity							
	All adults by age				Young adults by race/ethnicity		
	Age 18-29	Age 30-49	Age 50-64	Age 65+	Blacks age 18-29	Latinos age 18-29	Whites age 18-29
Personally know someone who has HIV/AIDS or has died from AIDS	31%	46%	51%	30%	44%	37%	27%
Yes, family member or close friend	15	26	26	14	30	20	10
Yes, acquaintance, coworker or someone else	17	19	24	15	14	16	18
No, don't know anyone with HIV/AIDS or who has died of AIDS	69	54	48	69	56	63	72

YOUNG BLACKS AND LATINOS SEE IMPACT ON COMMUNITY THAT MOST YOUNG WHITES DON'T FEEL

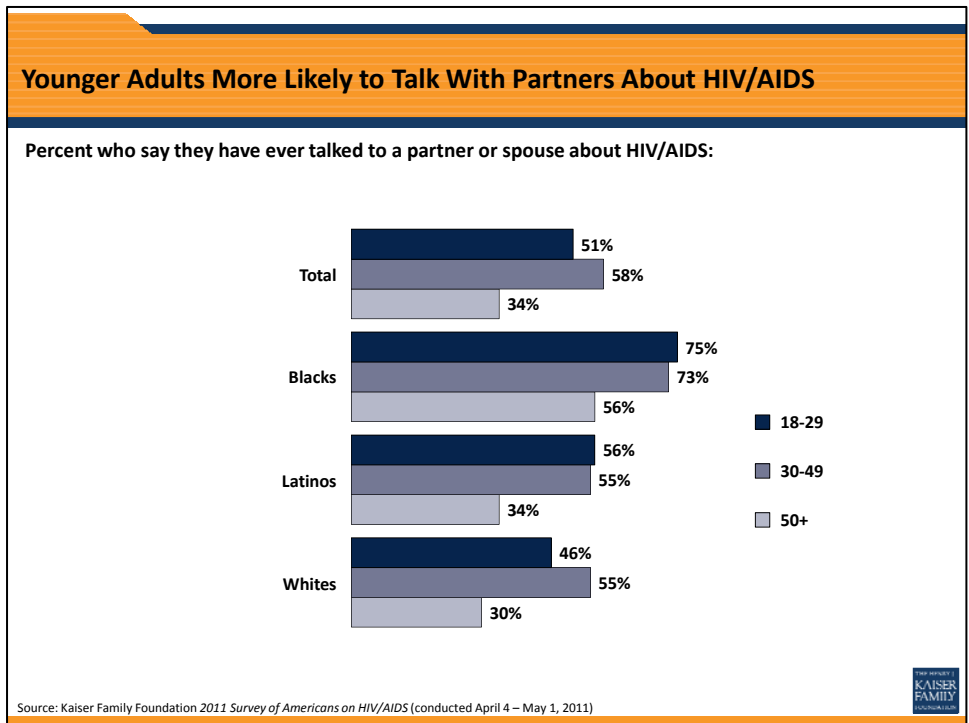
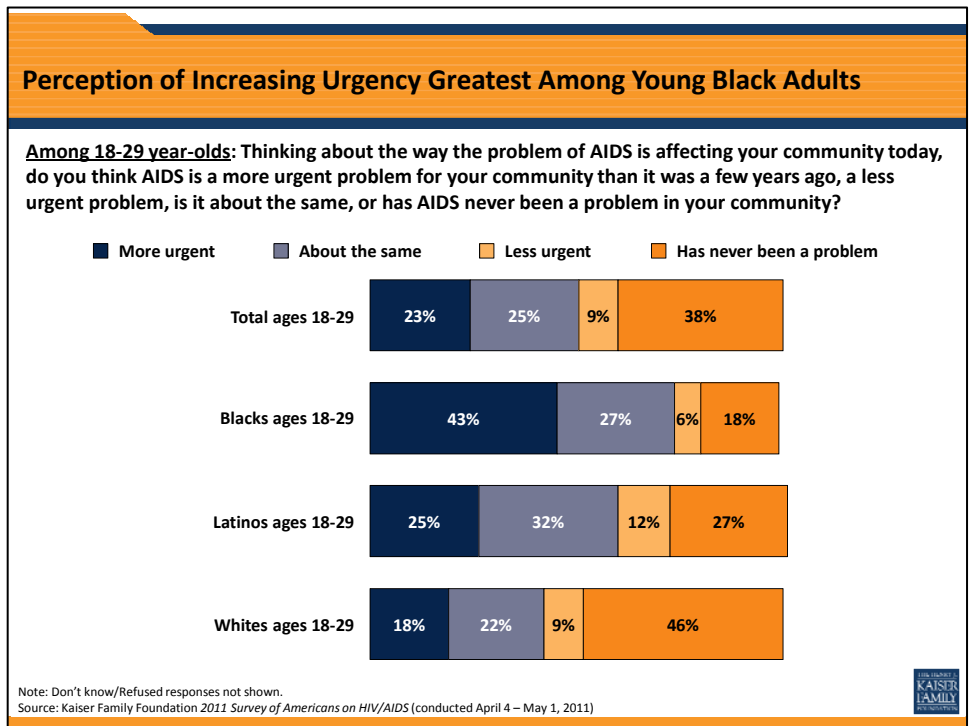
Overall, just under half (48 percent) of young adults say that HIV/AIDS is at least a somewhat serious problem for people they know, including three in ten (31 percent) who say it is a “very” serious problem. The large majority of young black adults (70 percent), and nearly as many young Latinos (61 percent), see HIV/AIDS as a serious problem for their friends and acquaintances, compared with just 36 percent of young white adults. Most young whites report that HIV/AIDS is not a problem for their peer group, or at least not a serious one.



Similarly, asked about the urgency of the issue in their own community, young black adults are most likely to say the issue has become more urgent over the past few years (43 percent), while young white adults are most likely to say HIV/AIDS has never been a problem for their community (46 percent). Latinos' responses are somewhat in the middle on this question.

TALKING ABOUT HIV/AIDS

Half of Americans aged 18 to 29 report having talked to a partner about HIV/AIDS, roughly the same as in 2009. Not surprisingly, those aged 50 and older are significantly less likely to report having had this experience. Reported conversations are highest among young black adults, with 75 percent reporting having talked to a partner about the disease, higher than the 56 percent of Latinos and 46 percent of whites in the same age group who report having done so.



Despite their level of personal concern and the extent to which they are talking to their partners about HIV/AIDS, it's worth noting that relatively few young people report talking about AIDS in general conversation. Overall, only 5 percent say the subject of HIV/AIDS comes up often when talking to family and friends, and another 15 percent say it sometimes comes up. In this regard, younger adults look much like their elders.

Percent Who Say The Subject Of HIV/AIDS Comes Up In Discussions With Their Family And Friends...

	Total	Age 18-29	Age 30-49	Age 50-64	Age 65+
Often	6%	5%	8%	6%	3%
Sometimes	17	15	19	19	13
Rarely	41	40	44	40	34
Never	36	39	30	35	50

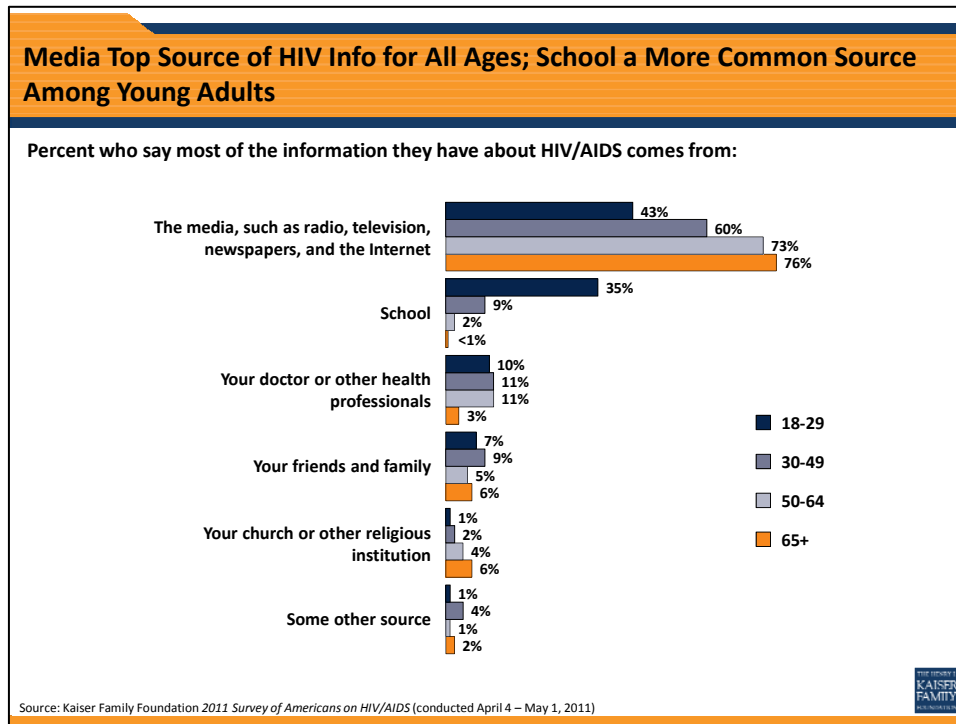
WHAT YOUNG ADULTS KNOW, AND WHERE THEY LEARN IT

Although young adults have grown up in the age of the AIDS epidemic, and most know the facts regarding transmission, the share of their age group harboring misconceptions is just as large as that among older generations. For example, 20 percent of young adults think a person can become infected with HIV by sharing a drinking glass or aren't sure whether this is the case. Eighteen percent of young adults respond incorrectly or don't know whether HIV can be transmitted by touching a toilet seat. Two in ten are confused as to whether there is a vaccine available to prevent HIV.

Percent Saying The Following Statement Is True/False: "A Pregnant Woman Who Has HIV Can Take Certain Drugs To Reduce The Risk Of Her Baby Being Born Infected"

	Total age 18-29	Whites age 18-29	Blacks age 18-29	Latinos age 18-29
True	53%	51%	70%	49%
False	30	33	22	31
Don't know	17	16	8	20

There are also cases where pertinent information has not spread widely throughout the population. For example, as they enter their childbearing years, almost half of all young adults (47 percent) don't know that a pregnant woman with HIV can take certain drugs to reduce the risk of transmitting the disease to her baby, a similar level of knowledge as the rest of the population. Young black adults are more likely than their white and Latino peers to be aware of this fact: seven in ten are, compared to about five in ten among white and Latino young adults.



For adults of all ages, the media stands out as the primary source of information about HIV/AIDS. Among those ages 18-29, 43 percent say most of what they know about the disease comes from the media, and it is the top source for young whites (44 percent), blacks (47 percent) and Latinos (38 percent). But in an era where HIV/AIDS may increasingly come up in classroom situations, young adults, a group that is most likely to be currently in school or recently graduated, are much more likely than others to say school is their main source of information on HIV/AIDS: 35 percent say so, more than three times higher than any other age group.

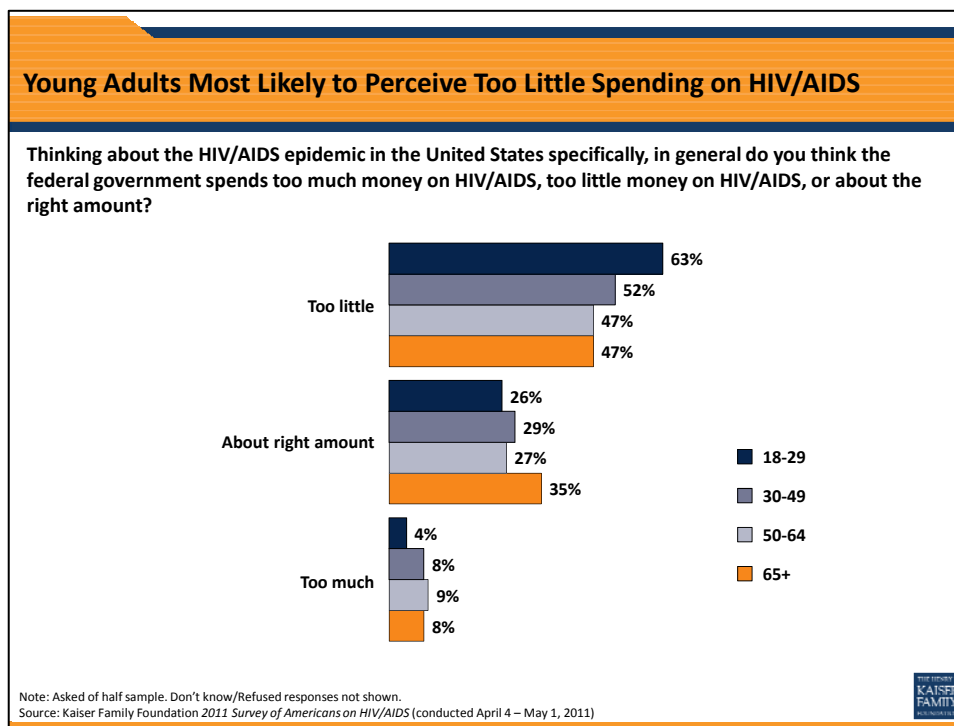
It’s worth noting that young black adults are significantly less likely than whites or Latinos to name school as their main source of information: 20 percent of blacks do, compared to 39 percent and 33 percent of whites and Latinos, respectively. Perhaps not coincidentally, young black adults are more likely than their peers to say that public schools need to do more “to help solve the problem of HIV/AIDS in this country”—62 percent of young black adults say so, compared to 46 percent of whites and 48 percent of Latinos.

Young blacks and Latinos also express a desire to have more information on a number of topics related to HIV/AIDS, a desire less common among whites. The majority of blacks and Latinos say they would like to know more about how to: talk with children about HIV/AIDS, prevent the spread of the disease, find out who should get tested and where to go, and talk to a partner or doctor about the virus. While substantial groups of young white adults expressed interest in these topics, in no case did a majority report wanting or needing to learn more.

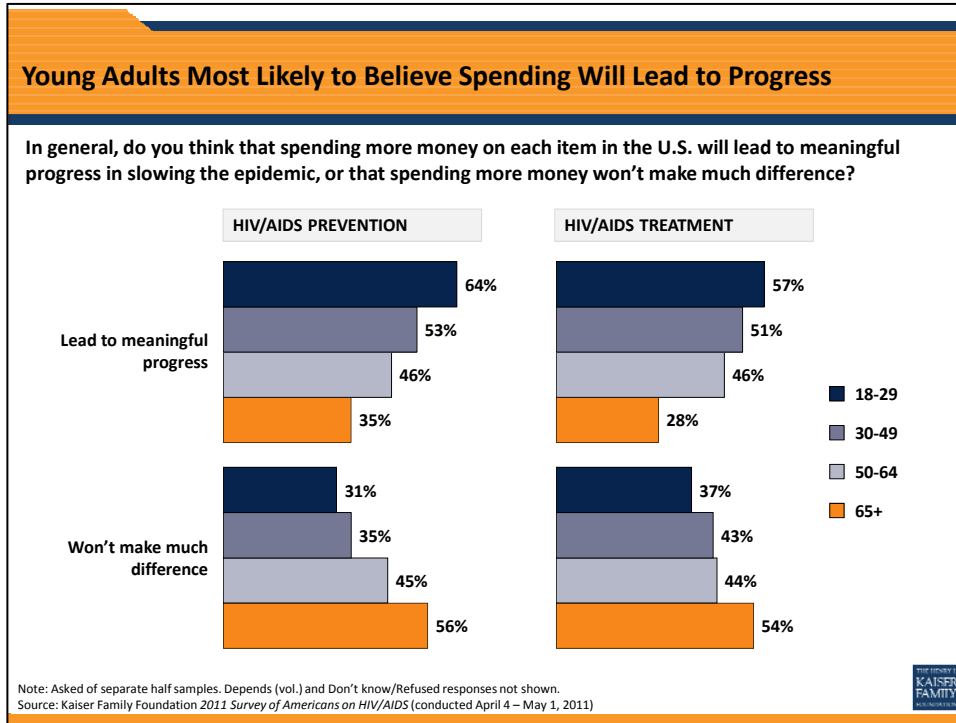
Percent Of Young Adults Who Say They Would Like To Have More Information About Each Of The Following				
	Total age 18-29	Whites age 18-29	Blacks age 18-29	Latinos age 18-29
How to talk with children about HIV/AIDS	52%	42%	68%	66%
How to prevent the spread of HIV	50	41	66	61
How to know who should get tested for HIV	47	39	60	59
Where to go to get tested for HIV	47	38	59	64
How to bring up the topic of getting an HIV test with your partner	44	36	56	60
How to talk with a health care provider about HIV/AIDS	38	29	56	51

LIBERALISM OF YOUTH: MORE SUPPORT FOR, AND MORE CONFIDENCE IN THE MERITS OF, SPENDING

As surveys on political topics often find, the current generation of youth—a generation which was a key part of President Barack Obama’s electoral victory in 2008—has more liberal opinions on certain issues. When it comes to HIV/AIDS policy, adults under age 30 are the most likely to say the federal government is not spending enough to combat the disease.



This support for increased spending is likely linked to the fact that young adults are markedly more likely to think that spending on HIV prevention will lead to meaningful progress: a full 64 percent do, compared to 35 percent of seniors. These age differences are apparent across racial and ethnic groups, with young white, black, and Latino adults expressing more liberal and optimistic attitudes about spending than their older counterparts.

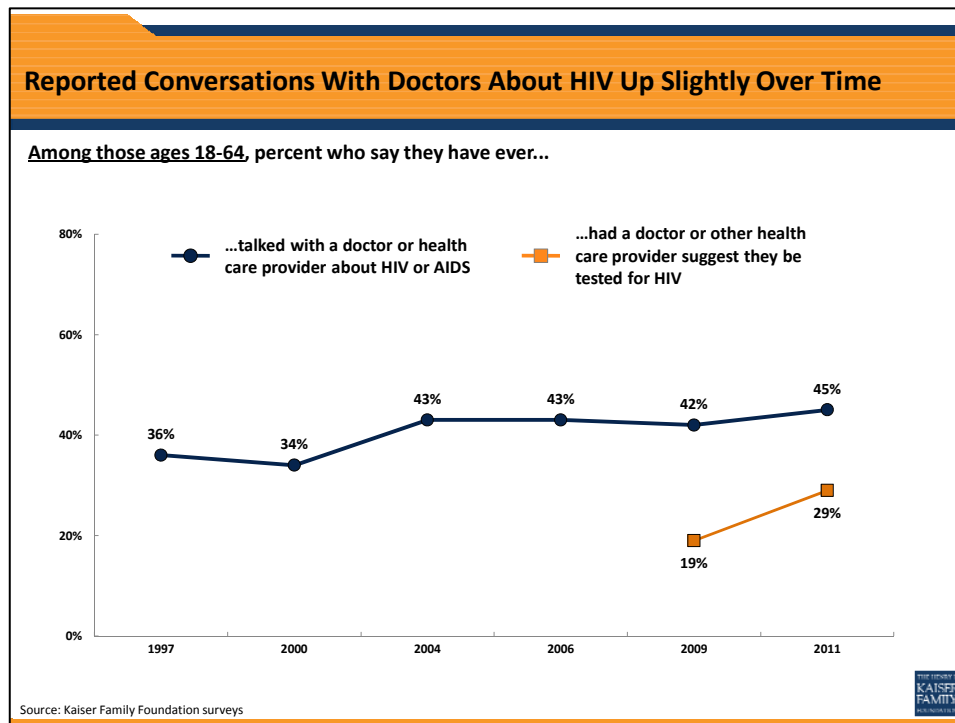


HIV/AIDS AT 30: AMERICANS TALK ABOUT TESTING

According to the U.S. Centers for Disease Control and Prevention (CDC), an estimated 21 percent of the more than 1.1 million Americans living with HIV/AIDS today do not know their status,¹⁶ despite evidence that early diagnosis not only improves lives of those who are infected but also has been shown to significantly reduce transmission. In 2006, the CDC began recommending routine HIV testing in health care settings for everyone between the ages of 13 and 64.¹⁷ And indeed, over time, survey data show a small increase in the share of non-elderly adults who report discussing HIV with their doctors, and a recent increase in the share saying their doctor suggested they get tested. But so far this hasn't translated into an increase in reported rates of actually getting an HIV test. Self-reported rates of HIV testing among the non-elderly population in the U.S. have remained stagnant for nearly a decade and a half. While certain groups at higher risk for HIV infection, including blacks, Latinos, and younger adults, are more likely than others to report having been tested for HIV, testing rates for these groups are also roughly the same today as they were in 1997.

MORE SAYING DOCTOR HAS SUGGESTED HIV TEST, BUT PROPORTION WHO REPORT *BEING* TESTED IS UNCHANGED

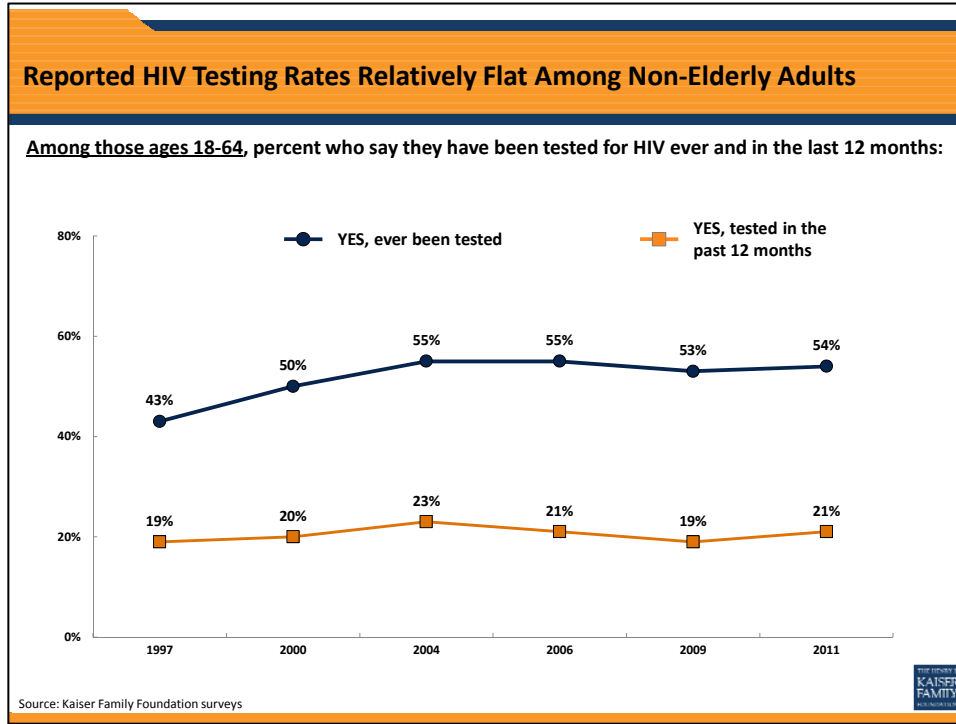
The new survey finds that the proportion of non-elderly adults (those ages 18-64) saying their doctor has ever recommended an HIV screening is up from 2009 (from 19 percent to 29 percent). This comes a few years after the CDC recommended routine screening in 2006. More broadly, 45 percent of non-elderly adults in 2011 say they have ever talked with a doctor or other health care provider about HIV, a share that has been steady for the past seven years, but is up roughly ten percentage points from the late 1990's and early 2000's.



¹⁶ Centers for Disease Control and Prevention, Fact Sheet, "HIV in the United States," July 2010. <http://www.cdc.gov/hiv/resources/factsheets/us.htm>

¹⁷ Centers for Disease Control and Prevention, "Revised Recommendations for HIV Testing for Adults, Adolescents, and Pregnant Women in Health-Care Settings," Morbidity and Mortality Weekly Report. 2006, 55(RR14): 1-17. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

The survey data does *not* find, however, a concurrent increase in self-reported rates of actually getting an HIV test. In 2011, roughly one in five (21 percent) non-elderly adults say they have been tested for HIV during the past 12 months, a share that has remained statistically unchanged since 1997 (when it sat at 19 percent). The proportion of non-elderly who say they have *ever* had an HIV test increased somewhat from about four in ten in 1997 to just over half in 2004, where it remains today (54 percent).



BLACKS, YOUNGER ADULTS MORE LIKELY TO REPORT BEING TESTED, BUT RATES FOR THESE GROUPS ARE ALSO FLAT Perhaps reflecting their greater proximity to and experience with HIV described above, blacks are much more likely than whites to say they have ever had an HIV test (77 percent versus 49 percent among the non-elderly), and nearly three times as likely as whites to report having been tested in the previous year (43 percent versus 15 percent). Non-elderly Latinos are somewhat more likely than whites, but not nearly as likely as blacks, to report having been tested (58 percent ever, 24 percent in the past year).

Adults under age 50 also report higher rates of testing than their older counterparts. Those ages 30-49 are the cohort most likely to report having *ever* been tested (67 percent). While one might expect higher rates of *recent* testing among the youngest age cohort, those ages 18-29 and 30-49

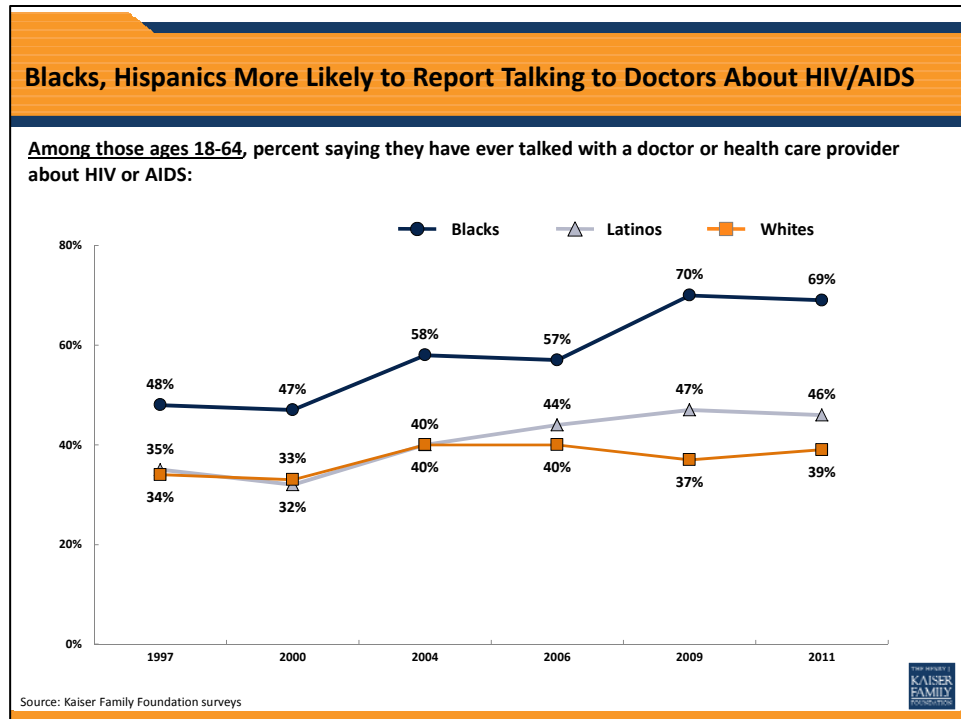
Percent Who Report Being Tested For HIV By Age And Race/Ethnicity								
	Percent saying they have ever been tested				Percent saying they were tested in the past 12 months			
	Total	Blacks	Latinos	Whites	Total	Blacks	Latinos	Whites
Adults (18 and older)	48%	72%	55%	42%	18%	39%	23%	13%
Non-elderly (18-64)	54	77	58	49	21	43	24	15
Age 18-29	48	71	51	41	26	47	29	20
Age 30-49	67	83	68	64	22	45	28	17
Age 50-64	43	73	46	37	14	36	10	10
Age 65 and older	13	*	*	11	4	*	*	4

* Survey contained too few interviews with blacks and Latinos age 65 and older for reporting.

are about equally likely to say they have been tested in the past year (26 percent and 22 percent, respectively). Both of these age cohorts are significantly more likely to report recent testing than those ages 50-64 (14 percent). Considering race, ethnicity and age, the highest reported rates of testing in the previous year are among blacks under the age of 50.

Nearly half of blacks ages 18-29 (47 percent) and ages 30-49 (45 percent) say they have been tested in the past 12 months.

In addition to these differences in reported testing rates, non-elderly blacks are far more likely than whites or Latinos to report having talked to a doctor or health care provider about HIV or AIDS. Overall, roughly seven in ten say they have done so at some point, compared to roughly four in ten of non-elderly whites, and the gap between the two groups has grown over time as blacks have begun reporting doctor consultations at a higher rate. Between 1997 and 2011, the proportion of non-elderly whites who have talked to a health care provider about HIV/AIDS is up 5 percentage points, while the proportion of non-elderly blacks reporting the same is up 21 percentage points.



Percent Saying A Doctor Or Other Health Care Provider Has Ever Suggested They Be Tested For HIV		
	2009	2011
Total age 18-64	19%	29%
Blacks age 18-64	31	41
Latinos age 18-64	29	40
Whites age 18-64	16	24

Similarly, both blacks and Latinos are more likely than whites to report ever having had a doctor suggest getting an HIV test. Roughly four in ten non-elderly blacks and Latinos say they've ever received such a recommendation, compared with about a quarter of non-elderly whites, shares that have increased across all racial groups since 2009.

But again, despite these apparent increases in communications with health care providers and in reports of doctors suggesting testing, these groups have seen no meaningful change over time in reported rates of actually being tested. Among non-elderly blacks and Latinos, as well as among all adults ages 18-29 and among blacks ages 18-29, the shares who report getting testing in the previous twelve months have changed little—or not at all—since 1997.

Percent Saying They Have Been Tested For HIV In The Past 12 Months						
	1997	2000	2004	2006	2009	2011
Blacks age 18-64	39%	33%	38%	41%	40%	43%
Latinos age 18-64	24	23	30	28	28	24
Whites age 18-64	16	17	18	16	14	15
All adults age 18-29	26	30	35	26	30	26
Blacks age 18-29	45	50	48	*	47	47

* 2006 survey contained too few interviews with blacks age 18-29 for reporting.

AMONG YOUNG ADULTS, WOMEN ARE MORE LIKELY THAN MEN TO REPORT GETTING TESTED

Overall, non-elderly men and women report similar rates of HIV testing. However, among adults under age 30, women are significantly more likely than men to report having had an HIV test, both ever and in the past 12 months. This may be due to the fact that women are more likely than men to go to the doctor for regular check-ups, and that this is an age when many women are having children, and most health care providers routinely screen for HIV among pregnant women, as recommended by national guidelines.

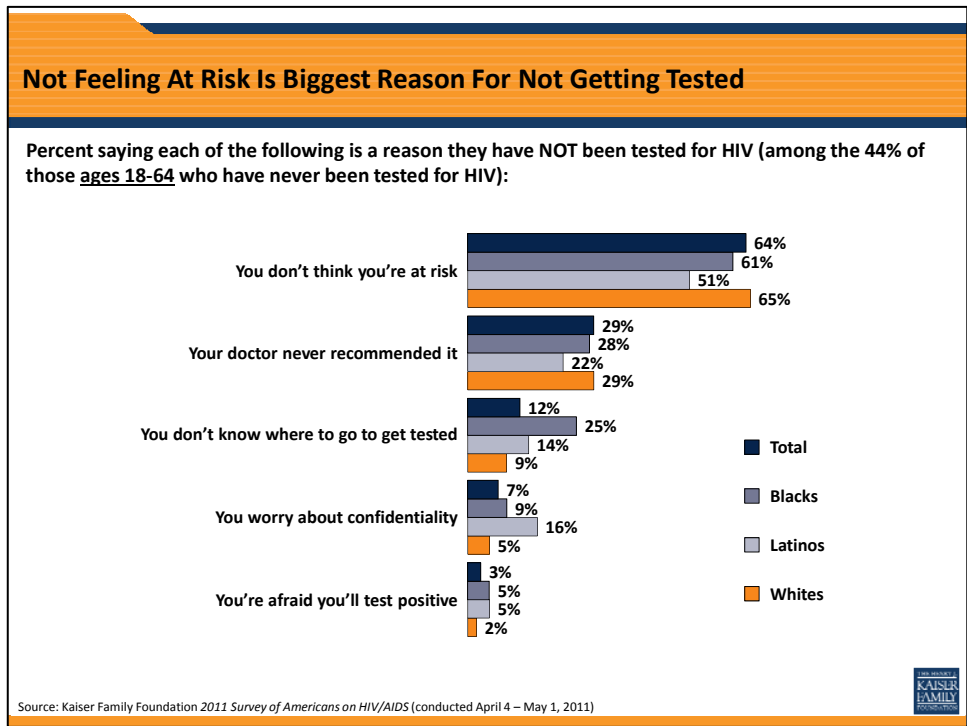
Reported HIV Testing And Communication With Providers By Age And Gender								
	Percent saying they have ever been tested for HIV		Percent saying they were tested for HIV in the past 12 months		Percent saying a doctor/provider ever suggested they be tested for HIV		Percent saying they've ever talked with a doctor/provider about HIV	
	Men	Women	Men	Women	Men	Women	Men	Women
Age 18-64	52%	57%	22%	20%	25%	34%	41%	49%
Age 18-29	44	53	22	33	22	36	42	56

BIGGEST REASON FOR TESTING: “SEEMED LIKE A GOOD IDEA”; BIGGEST REASON FOR NOT: “I’M NOT AT RISK”

The most commonly reported reason for getting an HIV test is that it “just seemed like a good idea” (77 percent). Of those who report having ever been tested, survey findings suggest that testing may be more routine among young people and among blacks of all ages. Almost half (47 percent) of 18-29 year-olds who have been tested say it’s something they do every year, compared with about a quarter of those over age 30. Similarly, 48 percent of blacks who’ve been tested say they do it yearly, compared with a third of Latinos and 22 percent of whites.

Among Those Who Have Been Tested, Percent Saying Each Of The Following Was A Reason							
	Total	Age 18-29	Age 30-49	Age 50-64	Black	Latino	White
It just seemed like a good idea	77%	83%	78%	72%	86%	84%	72%
Your doctor or other health care provider suggested you get tested	32	30	31	32	29	40	30
It’s something you do every year	29	47	26	22	48	33	22
You were concerned that you might be infected	24	22	24	27	20	26	24
A partner suggested or asked that you get tested	11	12	12	9	11	10	12

The most commonly reported reason for never having been tested is not feeling at risk. This is true for young adults as well as overall (63 percent each). While not feeling at risk is the most often-cited reason for all racial and ethnic groups, a quarter of non-elderly blacks who have never been tested say they don't know where to go to get tested, compared to just 9 percent of non-elderly whites and 14 percent of non-elderly Latinos, suggesting a missed opportunity for public health.



MOST DON'T EXPRESS FEAR OF TESTING-RELATED STIGMA, BUT STILL A CONCERN FOR SOME

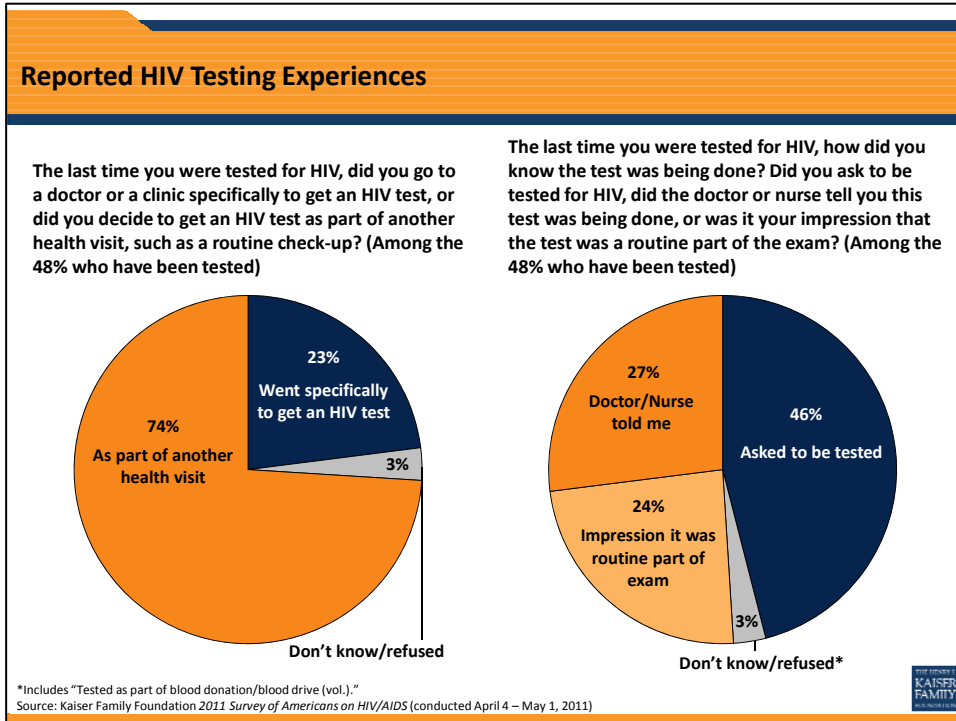
For the past five years, Kaiser surveys have also measured the perceived stigma attached to getting an HIV test. While the proportion who believe people would think less of them if they heard they had been tested dropped from 21 percent to 16 percent between 2006 and 2009, it remained at 16 percent this year. Overall, the large majority (69 percent) say they don't think their friends would care either way, while 9 percent say people would think more of them for being tested.

While a majority across age and racial/ethnic groups say getting tested for HIV would have no impact on how their friends perceive them, blacks (22 percent) are much more likely than whites (5 percent) or Latinos (11 percent) to say people would think *more* of them if they were tested. It's also notable that among young adults ages 18-29, a key target group for testing, roughly one in six (17 percent) believe getting tested would cause people they know to think less of them (compared to 12 percent of 30-49 year olds).

Percent Who Say People They Know Would Think Less/More Of Them If They Were To Be Tested								
	Total	Age 18-29	Age 30-49	Age 50-64	Age 65+	Blacks	Latinos	Whites
Less of you	16%	17%	12%	19%	19%	7%	17%	17%
More of you	9	11	10	6	4	22	11	5
No difference	69	69	71	68	65	68	64	71

MOST WHO WERE TESTED DID SO AS PART OF ANOTHER HEALTH VISIT

Among the 48 percent of all adults who say they have ever been tested for HIV, most report getting the test as part of another health visit (74 percent) whereas about a quarter (23 percent) report going to the doctor *specifically* for the test. Nearly half (46 percent) of those who have been tested say they asked to be tested, while about a quarter (27 percent) say the doctor or nurse informed them they were being tested, and another quarter (24 percent) say they had the impression the test was a routine part of the exam.



REPORTED TESTING FOR STDs OTHER THAN HIV

The CDC reports there is strong evidence that the presence of other sexually transmitted diseases (STDs) increases the likelihood of both transmitting and acquiring HIV, and recommends that early detection and treatment of curable STDs be a major component of HIV prevention programs at national, state, and local levels.¹⁸

Among non-elderly adults, four in ten (40 percent) say they have ever been tested for a sexually transmitted disease (STD) other than HIV, and 14 percent say they had such a test in the previous year. A somewhat larger share say they have talked with a doctor or health care provider at some point about any STD besides HIV (49 percent), though just 23 percent say a provider ever suggested they receive such a test. Of those who say they were tested, about half (51 percent) say they specifically asked to be tested, while two in ten say the doctor or nurse told them they were being tested, and 28 percent were under the impression it was a routine part of the exam.

Reported STD testing is more common among the young—almost half (46 percent) of those under age 50 say they’ve ever been tested for an STD, while testing in the previous year is most commonly reported by those ages 18-29 (28 percent). Among adults under age 30, about six in ten across all racial and ethnic groups say they’ve ever talked with a doctor about STDs. Young blacks stand out as more likely than their young white and Latino counterparts to report being tested for an STD, both ever and in the past year, and to say testing was recommended to them by a doctor.

As with HIV, women overall, and young women in particular, are more likely than their male counterparts to report talking to their providers and getting tested for STDs. Six in ten women under 30 (61 percent) say they’ve ever been tested for an STD other than HIV, compared with 36 percent of men in this age range. And the disparity is even bigger for *recent* STD testing—44 percent of young women compared with 17 percent of young men say they were tested in the past 12 months. While these gender gaps exist across racial and ethnic groups, the differences are smaller for blacks, with white and Latino men standing out as having the lowest reported rates of STD testing among young adults.

Part of the gender differences may be due to the fact that young women are more likely than young men to be engaged in ongoing, routine health care, including yearly gynecological exams, during which providers may recommend STD testing. For most women of reproductive age, their yearly exam will include a pap smear, which some women may have interpreted as an STD test when responding to these questions. And in fact, among young women who say they were tested for an STD, 38 percent say they thought such testing was a routine part of the exam (compared with 19 percent of young men who were tested). It’s possible that at least some of these young women were under the false impression that their yearly pap smear was testing for STDs that are not actually detected by such a test. Conversely, young men who report being tested for STDs were more likely to say they specifically asked to be tested (65 percent, compared with 40 percent of young women).

Perhaps not surprisingly, the survey data indicate that testing for HIV and other sexually transmitted diseases may often go hand-in-hand. Eight in ten of those who report having ever had an STD test say they’ve also been tested for HIV, compared with just three in ten of those who’ve never been tested for another STD. The same is true for recent testing—about seven in ten (69 percent) of those who were tested for an STD in the past year also report receiving a recent test for HIV, compared with just 11 percent of those who haven’t had an STD test in the past 12 months.

Reported STD Testing And Communication With Providers By Age, Race, And Gender

	Percent saying they have ever been tested for an STD other than HIV		Percent saying they were tested for an STD in the past 12 months		Percent saying a doctor/provider ever suggested they be tested for an STD		Percent saying they’ve ever talked with a doctor/provider about STDs	
	Men	Women	Men	Women	Men	Women	Men	Women
Total age 18-64	40%		14%		23%		49%	
Age 18-29	46		28		29		61	
Age 30-49	46		13		27		51	
Age 50-64	25		3		11		36	
Blacks age 18-29	65		43		41		66	
Latinos age 18-29	44		29		28		57	
Whites age 18-29	43		24		28		62	
Total age 18-64	35%	45%	10%	19%	17%	30%	46%	53%
Total age 18-29	36	61	17	44	18	45	55	69
Blacks age 18-29	61	69	33	54	37	45	65	67
Whites age 18-29	31	60	13	40	11	51	53	73
Latinos age 18-29	32	67	16	55	23	38	50	70

¹⁸ Centers for Disease Control and Prevention, Fact Sheet, “The Role of STD Prevention and Treatment in HIV Prevention,” December 2007. <http://www.cdc.gov/std/hiv/STDFact-STD-HIV.htm>; Centers for Disease Control and Prevention, “Revised Recommendations for HIV Testing for Adults, Adolescents, and Pregnant Women in Health-Care Settings,” *Morbidity and Mortality Weekly Report*. 2006, 55(RR14): 1-17. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

HIV/AIDS AT 30: CONCLUSIONS AND A LOOK AHEAD

What do trends in public opinion on HIV/AIDS tell us about future progress and roadblocks in the fight against AIDS going forward? The survey data point to several hopeful signs, as well as some areas for concern.

In one troubling sign, visibility of the domestic epidemic and the public's sense of urgency about it continue to decline. Fewer and fewer people say they are hearing about HIV/AIDS, in the media or otherwise. And in an environment in which HIV is increasingly regarded by the public as a chronic, manageable problem rather than an urgent threat—and in which other health problems like cancer, obesity, and access to health care often take center stage—public health officials and advocates may need to work even harder to keep the problem of HIV on the public's radar screen. Still, after years of slow but steady decline, personal concern about becoming infected ticked up among young adults for the first time in this year's survey. And many adults—including substantial majorities of blacks and Latinos—express a desire for more information about HIV, suggesting that there is a receptive audience for those looking to educate the public and increase awareness about the disease.

It is impossible to look at survey data on HIV/AIDS and not be struck by the extent to which the disease's impacts are disproportionately felt in the black community. For example, compared with white Americans, blacks are much more likely to know someone living with HIV or who has died from AIDS, to express worry about becoming infected themselves, and to view HIV as the nation's most urgent health problem. Blacks are also more likely to report taking certain actions that can help reduce the spread of HIV, including talking with their doctors and partners about the disease, and getting tested. And blacks, with their closer ties to the epidemic, are more likely than whites to perceive discrimination against those with HIV/AIDS, and to see AIDS as a more urgent problem for their community now than it was a few years ago. Still, many key measures of visibility and concern are either flat or trending down over time among blacks, when we might hope they'd be going up, given the disproportionate burden that HIV continues to place on the black community.

One of the survey trends that may be most disappointing is the lack of change in self-reported testing rates, which have remained stubbornly flat for more than a decade. And while it's a positive sign that blacks, Latinos, and younger adults are more likely to report having had an HIV test, overall testing rates for these groups have also been flat since 1997. Though the CDC now recommends routine HIV testing for patients ages 13-64 in *all* health care settings, just about half of non-elderly adults say they've ever been tested, with one in five saying they were tested in the past year. Still, those looking to increase testing may take hope in the fact that the share of adults under 65 saying a doctor has ever suggested they be screened for HIV ticked up from 19 percent in 2009 to 29 percent in 2011. Although this has not yet translated into an increase in reported rates of actually getting an HIV test, it's an important finding nonetheless, given that it comes just a few years after the CDC's recommendation for routine screening.

Finally, it's worth noting that thirty years into the epidemic, substantial shares of the public continue to express discomfort at the idea of interacting in various situations with people with HIV. With expressed discomfort linked to knowledge about transmission, it's also a disconcerting sign that a third of Americans continue to be misinformed on some basic facts about how HIV is transmitted. Still, over several decades, the trend has been towards a decline in reports of attitudes that may stigmatize people with HIV, such as the view that AIDS is a punishment—which has dropped 27 percentage points since 1987—and that it's people's own fault if they contract the disease—down 22 percentage points over the same time frame.

In 2011, then, there continues to be incremental movement in public opinion on HIV/AIDS. And of course, the public itself changes, as new generations come to an age where they must learn about and grapple with the realities of the disease. But looked at in the context of three decades of opinion change, it seems we are in a period of relative stability in terms of Americans' views of HIV/AIDS. Whether and when we will see big shifts in attitudes depends on the reach and effectiveness of ongoing educational efforts, the timing of scientific and medical discoveries that are no doubt in our future, the extent to which the media focuses on HIV/AIDS, and the daily individual actions that add up to the spread of an epidemic.

**HIV/AIDS AT 30:
SURVEY METHODOLOGY**

The *2011 Survey of Americans on HIV/AIDS* is the eighth comprehensive national survey of the public on HIV/AIDS conducted by the Kaiser Family Foundation since 1995. The current survey was designed and analyzed by public opinion researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Liz Hamel, Claudia Deane, Bianca DiJulio, Sarah Cho and Theresa Boston, with input from Jennifer Kates and Tina Hoff. The survey was conducted April 4 through May 1, 2011, among a nationally representative random sample of 2,583 adults ages 18 and older. Telephone interviews conducted by landline (846), and cell phone (1,737, including 924 who had no landline telephone) were carried out in English and Spanish by Princeton Survey Research Associates International. The full sample includes oversamples of black and Latino respondents as well as respondents ages 18-29, which were completed to ensure there were enough respondents in these groups for separate analysis. Because of the greater propensity of these groups to live in households with no landline phone, a greater share of interviews were conducted by cell phone than is often the case with national surveys. Results for all groups have been weighted to reflect their actual distribution in the nation.

The number of respondents and the margin of sampling error for key subgroups are presented in the table below. For results based on other subgroups, the margin of sampling error may be higher. Note that sampling error is only one of many potential sources of error in this or any other public opinion poll. Also note that due to sample size limitations of this national random sample survey, we are not able to separately present data for gay men, or for other smaller subgroups of the population who are at higher risk for HIV. The views of these groups are included in the national data in proportion to their share of the overall population.

	Number of respondents	Margin of sampling error
Total	2,583	+/- 3 percentage points
Whites	1,351	+/- 4 percentage points
Blacks	519	+/- 6 percentage points
Latinos	527	+/- 6 percentage points
Age 18-29	873	+/- 5 percentage points

“VOL” indicates that a response was volunteered by respondent, not an explicitly offered choice.

Due to rounding, percentages may not add to 100.

Full question wording and results of this survey can be viewed online at <http://www.kff.org/kaiserpolls/8186.cfm>.



The Henry J. Kaiser Family Foundation

Headquarters

2400 Sand Hill Road, Menlo Park, CA 94025 650.854.9400 Fax: 650.854.4800

Washington Offices and Barbara Jordan Conference Center

1330 G Street, NW, Washington, DC 20005 202.347.5270 Fax: 202.347.5274

The Kaiser Family Foundation is a non-profit private operating foundation, based in Menlo Park, California, dedicated to producing and communicating the best possible analysis and information on health issues.

This publication (#8186) is available on the Kaiser Family Foundation's website at www.kff.org.