



# ADAP Is Not Keeping Pace With Increasing HIV in Black and Latino Communities

Data suggest that white Americans are using the AIDS Drug Assistance Program more than their Black or Latino counterparts.

February 25, 2022 By [Heather Boerner](#)

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[Black](#) and [Latino](#) people make up the majority of new HIV diagnoses in the United States. But between 2008 and 2018, white people living with HIV accounted for the greatest growth in people served by the [AIDS Drug Assistance Program \(ADAP\)](#), according to data presented at the [Conference on Retroviruses and Opportunistic Infections 2022 \(CROI 2022\)](#).

HIV incidence among Black Americans surpassed that of white Americans [in 1988](#). ADAP, a partnership between the federal government and the states, was established one year earlier to give free access to antiretrovirals to people with HIV who either don't have insurance or are underinsured to the point of not being able to afford their medications. It's a safety net program that often works in conjunction with other parts of the Ryan White HIV/AIDS Program, which provides services regardless of ability to pay.

Kathleen McManus, MD, of the University of Virginia at Charlottesville, and colleagues went through ADAP client data compiled by the National Association of State and Territorial AIDS Directors between 2008 and 2018, cross-referencing program demographics with data on HIV prevalence across the country. They then looked at how ADAP enrollment changed over time.

Between 2008 and 2018, the number of people living with HIV rose from 768,038 to 1.02 million, and ADAP enrollment rose from 14% of the HIV-positive people to 23%. By age, the proportion of program participants ages 13 to 24 rose by nearly 11% over that decade, to 20%; by 11% among those ages 25 to 44, to 27%; and by 7% among people older than 45, to 20%.

By gender, the proportion of men living with HIV using ADAP grew by 9% over the decade, to 23%. Meanwhile, the proportion of women grew by 8%, to 20%. These data do not capture the number of people using ADAP who are transgender or gender-non-conforming.

But when McManus and colleagues looked at race and ethnicity, greater disparity emerged. While

the proportion of white people living with HIV who used ADAP rose from 16% to 39%—a jump of 23%— the proportion of Black people using ADAP grew by just 11%, from 12% to 22%. Among Latino people, the proportion benefiting from ADAP rose by only 9%, from 16% to 25%.

These findings are “concerning,” McManus told POZ, especially because they were true nationwide. The trend was visible in every part of the United States.

“We have no reason to think that a specific race/ethnicity group would have less need for ADAP support, because the eligibility requirements are related to having a low income and being uninsured or underinsured,” she said. “We are working to see if we can understand what factors are driving the disparity.”

Meanwhile, McManus suggested that the findings should mobilize the staff of Ryan White clinics to look more closely at who is using ADAP.

“All Ryan White HIV/AIDS Program clinic teams should evaluate whether their eligible patients know about ADAP, have enrolled in the program and are receiving support,” she said.

Click here to [read the study abstract](#).

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