HIV Incidence in the U.S. Continues to Decline

HIV testing and care indicators in 2022 were about the same as last year, reflecting ongoing racial and gender disparities.

May 22, 2024 By Liz Highleyman

New HIV infections in the United States continue to fall, with the greatest declines seen among gay and bisexual men, young people and people living in the South, according to a new HIV Surveillance Supplemental Report from the Centers for Disease Control and Prevention (CDC). An estimated 87% of people living with HIV knew their status, and 65% of those diagnosed were on treatment and achieved viral suppression in 2022, but not all groups benefitted equally.

“The new HIV incidence estimates show that national prevention efforts are continuing to move in the right direction overall, although substantial disparities exist,” Robyn Neblett Fanfair, MD, MPH, director of the CDC’s Division of HIV Prevention, and Jonathan Mermin, MD, MPH, director of the National Center for HIV, Viral Hepatitis, STD, and TB Prevention, said in a letter to colleagues. “Increases in pre-exposure prophylaxis prescriptions [PrEP], viral suppression and HIV testing likely contributed to the decline.”

Source: CDC HIV Surveillance Report, May 2024CDC

The CDC estimates that HIV incidence fell from 32,700 new infections in 2021 to 31,800 in 2022. This number remains far above the Ending the HIV Epidemic initiative's goal of reducing new infections to 9,300 by 2025 and to 3,000 by 2030.

Since 2018, overall HIV incidence has declined by 12%. The five-year figure is useful for seeing trends over time, especially considering that the COVID-19 pandemic disrupted HIV testing and other services in 2020. New infection numbers are estimates based on extrapolation from available data. Diagnosis numbers, in contrast, are more dependent on changes in testing. There were 38,043 reported HIV diagnoses in 2022, according to the HIV Surveillance Report. This number can be higher than estimated incidence because some people who acquired HIV in past years were newly diagnosed.

Source: CDC HIV Surveillance Report, May 2024CDC

The five-year decline in HIV incidence was largely driven by a 30% drop among people ages 13 to 24. Incidence in all other age groups remained stable. People ages 25 to 34 account for the largest number of new infections, according to the CDC figures.

Source: CDC HIV Surveillance Report, May 2024CDC

While gay and bisexual men still make up a majority (67%) of people who acquire HIV, this group also saw the largest decline in new infections. Between 2018 and 2022, new cases decreased by 10% among men who have sex with men and by 27% among gay men who inject drugs. Meanwhile, new cases among women, heterosexual men and non-gay people who inject drugs stayed about the same.

“Although data demonstrate continued progress in HIV prevention, longstanding social and economic factors continue to contribute to health inequities,” particularly among Black and Latino people, Neblett Fanfair and Mermin wrote.

Source: CDC HIV Surveillance Report, May 2024CDC

HIV incidence fell by 20% among white gay and bisexual men and by 16% among Black gay and bi men but remained stable among Latino men. Black women accounted for nearly half of all new infections among women. Combining both sexes and all transmission routes, Black people had by far the highest HIV incidence, but they were the only group to see a decrease—18%—while numbers remained stable for other racial and ethnic groups.

Source: CDC HIV Surveillance Report, May 2024CDC

Looking at geography, HIV incidence was higher in the South than in the West, Midwest and Northeast combined, but it was the only region to see a decline, falling by 16%, while the other regions remained stable. Looking at HIV diagnoses rather than estimated new infections, just over half were in the South.

HIV Care Indicators and PrEP

Of the estimated 1.2 million people living with HIV in the U.S., 87% had been tested and knew their status in 2022. The Ending the HIV Epidemic target is at least 95% by 2025. As more people know their status, HIV diagnosis numbers get closer to estimated HIV incidence figures.

Source: CDC HIV Surveillance Report, May 2024CDC

Among people diagnosed with HIV in 2022, 82% were linked to care within one month, according to the accompanying HIV Monitoring Report. However, just 54% were retained in care and 65% achieved an undetectable viral load that year—about the same as last year. But continuing disparities were evident. Viral suppression rates ranged from 61% for Black people to 71% for white people. The Ending the HIV Epidemic target is 95% by 2025.

The HIV Surveillance Report noted that HIV-related deaths declined by 25% in 2022, showing the impact of early diagnosis and linkage to care and treatment.

“While we would have liked to see improved outcomes, federal funding for CDC HIV prevention and the Ryan White HIV/AIDS care and treatment program, along with other critical programs, has remained flat for years,” Carl Schmid, executive director of the HIV+Hepatitis Policy Institute, said in a statement. “Without significant increases for care and treatment and prevention programs, including those for PrEP, sadly we will continue to experience only small drops in the number of new diagnoses, and racial and ethnic disparities will persist. As a nation, we can and must do better.”

The decline HIV incidence and the rising proportion of people on treatment in the U.S. pale in comparison with some other high-income countries such as the United Kingdom and Australia. Efforts to curb HIV among gay and bi men in the U.K. have been so successful that they now account for fewer new cases than heterosexuals.

The CDC noted that it has paused its PrEP reporting “to determine the best methodology for

calculating PrEP coverage, and to update PrEP coverage estimates using updated methods and sources," after an error was discovered in the calculation used to determine the number of people with indications for PrEP by race/ethnicity. The agency expects to resume PrEP coverage reporting in June 2025.

"Overall, data from these reports demonstrate that expanding the reach of HIV testing, PrEP, and treatment have been effective—but our reach must extend even further, and progress must be faster, to achieve our national goal of ending new HIV infections in the United States," Neblett Fanfair and Mermin wrote. "This requires sharpening our collective focus on efforts that address inequities and their drivers, including racism and other social and structural determinants of health, and ensuring that whole person approaches to HIV prevention, care, and treatment are brought to scale and equitably reach all people who need them to stay healthy."

Click here to read the full HIV Surveillance Report, HIV Surveillance Supplemental Report on HIV incidence and prevalence and HIV Monitoring Report.
