



The South Suffers a Lack of HIV Care Providers

The number of HIV docs in the South dropped 5% between 2010 and 2015, while the number of Southerners with HIV increased 14%.

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The Southern United States does not have enough health care providers trained to treat HIV/AIDS, [reveals](#) Stateline, a publication of the Pew Charitable Trust. This situation calls into question the realism of the Trump administration's "Ending the HIV Epidemic: A Plan for America," which proposes to reduce rates of new HIV infections by 90% nationwide in the next 10 years.

Doctors interviewed pin the shortage primarily on the lack of interest in infectious-disease specialties—which often pay less, demand longer hours and receive fewer resources than other specialties—among medical students, who graduate with an average of \$196,520 in debt. According to the National Resident Matching Program, one third of infectious-disease fellowship positions at Southern teaching hospitals went unfilled this year.

As a result, local HIV-care clinics have been forced to get creative. Many, like the Montgomery, Alabama-based nonprofit Medical Advocacy and Outreach, have resorted to offering telemedicine such as video conference-style checkups, in which providers use Skype to talk with patients remotely.

Even so, the volume of people requiring care is so great that high-tech measures such as this are insufficient, said Laurie Dill, MD, who works at the nonprofit (and was [named](#) one of the POZ 100 of 2016).

"To end the epidemic, we need to double our capacity to treat HIV patients," she said.

That may prove difficult. The Stateline article points to a study conducted through the policy research organization Mathematica. Its data found that the number of medical practitioners qualified to provide care to people living with HIV decreased by 5% and the number of people living with HIV increased by 14% between 2010 and 2015. Reflecting these statistics, the Mississippi State Health Department identified a need to "reduce the incidence of HIV disease in Mississippi and assist in the provision of care and services to people living with HIV disease" in its strategic plan for fiscal years 2017–2021.

The fact that this shortage is occurring in the South is worrisome.

Data from the Centers for Disease Control and Prevention (CDC) show that the 16 states (plus Washington, DC) that made up the South accounted for 52% of new HIV cases in the entire United States in 2017. This translates to 19,968 new cases in the South. Gay Black men, trans women and people who inject drugs accounted for the majority of the new cases. And unlike most regions, the Southern HIV epidemic is centered in rural and suburban areas, not in cities.

For the record, the CDC defines the South as including Alabama, Arkansas, Delaware, Washington, DC, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia and West Virginia.

The key to successfully combating the epidemic, health providers tell Stateline, is policy reform at the city, county and state levels. Local officials must make HIV testing and preventive measures like Truvada as PrEP, or pre-exposure prophylaxis, readily accessible, as well as create more educational and employment opportunities for prospective infectious-disease specialists and actively encourage practicing primary care physicians to take on people with HIV.

In related POZ news, the results of a public poll found that few Southerners are aware of the existence of PrEP or the concept of U=U (undetectable equals untransmittable), which refers to the fact that people who maintain an undetectable viral load thanks to antiretroviral medications cannot transmit HIV sexually. This is despite the fact that most support HIV prevention and treatment policies. A more in-depth analysis is available [here](#).

For other news pertaining to the fight against HIV in the South, read about Florida's brand-new needle-exchange program [here](#), the Cherokee Nation's "Ending the Epidemic" pilot program [here](#) and Houston's "I am Life" campaign [here](#).