



HIV and AIDS

What Everyone Should Know



AMERICAN
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What Are HIV and AIDS?

Human immunodeficiency virus (HIV) is a virus that attacks the body's immune system by destroying a certain type of white blood cells—specifically CD4+ cells. Without a healthy immune system, the body is not able to fight even the most common of infections. There is currently no cure for HIV, but people living with HIV can live a long and healthy life with ongoing treatment. If left untreated with daily medicine, HIV can cause acquired immune deficiency syndrome (AIDS).

AIDS is diagnosed when a person is living with HIV and at least one of the following is true:

1. The number of CD4+ cells in their body falls below 200 cells/mm³ of blood.
2. They are diagnosed with an opportunistic infection (OI). These are infections that have the *opportunity* to arise because the immune system is so weak. For this reason, OIs can be life-threatening.

How Is HIV Transmitted?

HIV is transmitted when any of the following fluids contain HIV and enter the bloodstream of someone who does not have HIV: blood, semen, pre-ejaculate (pre-cum), vaginal fluids, breast milk, and rectal mucus. This usually happens through sex without protective barriers—such as condoms—or by sharing needles.

HIV can be transmitted during pregnancy or childbirth, but that is less common now because of increased testing of people who are pregnant or planning to get pregnant. If HIV is detected and treated early enough, transmission to the baby can be prevented. It is also unlikely that a person will get HIV from a blood transfusion because the blood supply is now thoroughly tested for HIV.

Saliva, sweat, urine, and tears do **not** transmit HIV. A person **cannot** get HIV from activities such as holding hands, kissing, hugging, or sharing a drinking glass. Toilet seats don't transmit HIV, either.

How Is HIV Prevented?

There are many ways to prevent HIV:

- Not engaging in sexual activity
- Using barriers (condoms, dental dams, and/or capes) during sexual activity
- Not sharing needles
- Taking some medications (PrEP or PEP) as directed by a health care provider. Keep reading for more information on PrEP and PEP.
- Being “undetectable.” If someone living with HIV is “undetectable,” it means they have a very low amount of HIV in their body because they are on treatment. When someone gets and stays “undetectable,” according to the CDC, “there is effectively no risk” of them “transmitting HIV to their HIV-negative sexual partners.”



*This represents the risk level of sexual activity without protection such as condoms, PrEP, or Antiretroviral Therapy (ART).

While certain sexual activities have been found to result in more HIV infections than others, remember that it only takes one instance of sexual activity to transmit HIV. This risk continuum is simply a guide to help you make decisions about your own risks.

PrEP and PEP: Medications that Prevent HIV

Pre-exposure prophylaxis (PrEP) is a prescription medication that is over 90% effective at preventing HIV when taken daily as directed. PrEP is usually prescribed to people who are at a higher risk for HIV (i.e., multiple partners, inconsistent barrier use, in a sexual relationship with someone who is living with HIV, shares needles, etc.). Talk with your health care provider about whether or not PrEP is right for you.

To find a PrEP provider near you, visit <https://prelocator.org>.

Post-exposure prophylaxis (PEP) is a prescription medication that can be taken up to 72 hours after a possible HIV exposure to prevent HIV. The sooner it is taken, the more effective it will be, so get to your health care provider as soon as possible if you think you need it.

Getting Yourself Tested for HIV

HIV can have no symptoms for up to a decade, so the only way to know if you have HIV is to get yourself tested. The Centers for Disease Control and Prevention (CDC) recommends that everyone ages 13-64 get tested for HIV at least once in their lifetime, and that all sexually active people be tested at least annually.

If you have multiple sexual partners, share needles, or if barriers (condoms, dental dams, or capes) are not used each time you have sex, then you might benefit from more frequent testing. Everyone's risks for HIV are different, so talk to your health care provider about a testing frequency that works best for you.

Remember, HIV testing is not automatically included when your blood is drawn or during any routine health care visit, so always make sure to ask to be tested! Talk to your partner(s) about getting tested, too.

HIV testing is widely available from most health care providers, including your campus health center. Local health departments or community AIDS service organizations may offer HIV testing as well. You can also visit gettested.cdc.gov to find testing sites near you.

Living with HIV

If testing confirms that you have HIV, it is important that you speak with a health care provider about treatment options—and then follow your treatment plan accordingly. Not only will on-going treatment keep you healthy, but it will also greatly reduce the risk of transmitting HIV to your partner(s).

Reach out to your health care provider, sexual health clinic, or local AIDS service organization to get connected to resources and find support. You might also consider telling a trusted friend or family member or speaking to a mental health care provider. While you take time to process your diagnosis, be gentle with yourself and practice self-care. An HIV diagnosis can be scary, but it does not make you any less of a person.

Supporting a Friend Who Is Living with HIV

People with HIV hope for the same kind of support and friendship you always provided before. Although they may feel hopeful and optimistic much of the time, people with HIV may sometimes feel isolated, frightened, and uncertain about their relationships, their future, and their health.

You can help your friend by educating yourself about HIV, being available to talk with them, spending time together, and sharing experiences. A counselor, health educator, or another health care professional can help you if you have questions about HIV or need suggestions about what to say or do. You can learn more about how to support your friend at the CDC's website:

<https://www.hiv.gov/hiv-basics/overview/making-a-difference/supporting-someone-living-with-hiv>.

Myths, Facts, and HIV Stigma



One reason HIV continues to spread across the globe is because of HIV stigma—negative attitudes and beliefs about people living with HIV. This stigma is rooted in systems of oppression—such as racism, cissexism, and heterosexism—and can cause violence, discrimination, and poor health. Here are some common myths about HIV that contribute to HIV stigma.

MYTH: People living with HIV are promiscuous.

FACT: A person can get HIV from having sex only one time with only one person.

MYTH: Straight, cisgender people don't get HIV.

FACT: Viruses don't discriminate. People of any sexual orientation are at risk for HIV if they are sexually active or share needles. Yes, queer men and trans women—especially those of color—are severely impacted by HIV, but that is because they simply have a higher chance of being exposed to HIV. Cissexism and heterosexism can also prevent queer and trans folks from seeking health care or receiving appropriate sexual health services.

MYTH: If someone has HIV, they will look weak and sick.

FACT: You cannot tell someone has HIV by looking at them. People living with HIV can be healthy with treatment.

For more information on eliminating HIV stigma, check out the CDC's Let's Stop HIV Together campaign page:

<https://www.cdc.gov/actagainstaids/campaigns/lsht>

For More Information

CDC National HIV Testing Resources

In English en Español
gettested.cdc.gov

CDC Information

(800) CDC-INFO, (800) 232-4636

TTY: (888) 232-6348

In English en Español

www.cdc.gov/hiv

HIV.Gov Information

www.hiv.gov

American College Health Association

(410) 859-1500 | www.acha.org

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